Med-X Pty Ltd

Arndell Park Clinical Waste Management Facility

Operational Environmental Management Plan

Issue 3 | 29 March 2023

Job number 274648-00

Arup Pty Ltd ABN 18 000 966 165

Arup
Level 4, 108 Wickham Street
Fortitude Valley
QLD 4006
GPO Box 685 Brisbane QLD 4001
Australia
www.arup.com

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		Name	Madison Downey	Charlotte Flynn	Charlotte Flynn
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Glossary

Term	Definition
Clinical waste	Has the same meaning as the definition of the term in the Waste Classification Guidelines – Part 1: Classification of waste (NSW EPA, 2014)
CRM	Client Relationship Management system
CWMF	Med-X Clinical Waste Management Facility
DPIE	NSW Department of Planning, Industry and Environment
EIS	Environmental Impact Statement
EMP	Environmental Management Plan
EPA	NSW Environment Protection Authority
EP&A Act	*Environmental Planning and Assessment Act 1979* (NSW)
EP&A Regulation	Environmental Planning and Assessment Regulation 2000
EPL	Environment Protection Licence under the POEO Act
the facility	The Arndell Park Clinical Waste Management Facility
IMS	Integrated Management System
Incident	An occurrence or set of circumstances that causes or threatens to cause material harm and which may or may not be or cause a non-compliance Note: "material harm" is defined in this consent
kg	Kilograms
LEP	Local Environmental Plan
Med-X	Med-X Pty Ltd
Mitigation	Activities associated with reducing the impacts of the development prior to or during those impacts occurring
Monitoring	Any monitoring required under this consent must be undertaken in accordance with section 9.40 of the EP&A Act
MRV	Medium Rigid Vehicle
Non-compliance	An occurrence, set of circumstances or development that is a breach of this consent
OEMP	Operational Environmental Management Plan (this document)
Planning Secretary	Planning Secretary under the EP&A Act, or nominee
POEO Act	*Protection of the Environment Operations Act 1997* (NSW)
QEHS Policy	Quality Health Safety & Environment Policy
Related waste	Including cytotoxic, pharmaceutical and sharps waste. Has the same meaning as the definition of the term in the Waste Classification Guidelines – Part 1: Classification of waste (NSW EPA, 2014)
Response to Submissions report (RtS)	*Clinical Waste Management Facility, Arndell Park Response to Submissions and Amended Project Report for State Significant Development 6761* (Arup, 2020)
Sensitive receivers	A location where people are likely to work, occupy or reside, including a dwelling, school, hospital, office or public recreational area.
Site	The Arndell Park Clinical Waste Management Facility
SSD	State Significant Development
tpa	Tonnes per annum
Waste	As per the definition in the POEO Act: waste includes—

Term	Definition
	(a) any substance (whether solid, liquid or gaseous) that is discharged, emitted or deposited in the environment in such volume, constituency or manner as to cause an alteration in the environment, or (b) any discarded, rejected, unwanted, surplus or abandoned substance, or (c) any otherwise discarded, rejected, unwanted, surplus or abandoned substance intended for sale or for recycling, processing, recovery or purification by a separate operation from that which produced the substance, or (d) any processed, recycled, re-used or recovered substance produced wholly or partly from waste that is applied to land, or used as fuel, but only in the circumstances prescribed by the regulations, or (e) any substance prescribed by the regulations to be waste. A substance is not precluded from being waste for the purposes of this Act merely because it is or may be processed, recycled, re-used or recovered.

1 Introduction

1.1 Overview

Med-X Pty Ltd (Med-X) operate the Med-X Clinical Waste Management Facility (the facility) located within the Arndell Park Industrial Precinct at 9 Kenoma Place, Arndell Park (being Lot 14, DP 786328).

The facility has been approved to receive and process up to 2,300 tonnes per annum (tpa) of clinical and related wastes (including 2,000 tpa of clinical waste and 300 tpa of related wastes) between the hours of 7.00am and 7.00pm, Monday-Saturday (including any public holiday that falls on a Saturday). The waste will be collected and delivered to the facility by the collection fleet (8 MRVs and 8 vans) between the hours of 5am and 5pm.

All clinical waste undergoes non-thermal treatment before being collected and transported off-site to the Kemps Creek landfill site at 1725 Elizabeth Drive, Kemps Creek.

Related waste will be separated and stored on-site before being transferred by a waste contractor to a licenced incineration facility for thermal treatment. Currently related wastes are transferred to either Weston Thermal Solutions at 129 Mitchell Avenue, Kurri Kurri or Cleanaway Medical Waste Services, 2 Wiblin Street, Silverwater.

An associated site at 7 Vangeli Street, Arndell Park (being Lot 1005, DP 78815) (from this point on referred to as the parking depot) is used as a vehicle delivery depot and for the storage of clean sharp waste containers.

Development Consent for State Significant Development (SSD) 6761, comprising expansion of the facility, was granted by the NSW Department of Planning, Infrastructure and Environment (DPIE) on 28th September 2020 in accordance with Section 4.38 of the *Environmental Planning and Assessment Act 1979* (EP&A Act).

The site is subject to operation in accordance with Environmental Protection Licence (EPL) 20233, issued by the NSW Environment Protection Authority (EPA) under the *Protection of the Environment Operations Act 1997* (POEO Act).

Med-X also hold Environmental Protection Licence (EPL) 12609 which provides a licence for the transport of category 1 and category 2 trackable waste.

This Operational Environmental Management Plan (OEMP) has been prepared to address the regulatory requirements for operation of the facility, and in the particular Conditions of the SSD 6761 Development Consent and the EPL.

1.2 Purpose, scope & objectives

The purpose of the OEMP is to ensure that there is appropriate and effective environmental management associated with operation of the facility and the parking depot. It is a practical, user-friendly document that provides clear direction for the Med-X staff responsible for its implementation.

The objectives of the OEMP are to:

- Provide an overview of the site operations
- Outline the Med-X environmental management framework
- Outline the relevant Conditions of Consent, the commitments made for the approved project, any other related legislative and compliance requirements, and how they will be met
- Provide an overview of the potential environmental impacts of the facility and the management and mitigation measures required
- Include the environmental risk assessment process that will be used to identify ongoing risks
- Identify the roles and responsibilities of personnel involved in environmental management
- Outline environmental training and awareness needs
- Provide a clear schedule of actions and processes that will be implemented to manage potential environmental impacts
- Document any environmental and compliance monitoring and reporting programs
- Include any strategies developed to drive continual environmental improvement
- Provide a guide for the interaction with relevant government authorities and other relevant stakeholders, including the community during the operational phase of the facility.

This OEMP is a live document. The management strategies and control measures detailed within it will be reviewed and updated, where necessary, to reflect changes introduced by the operational team, site specific outcomes, non-conformances and recommendations arising out of inspections, meetings and audits.

The OEMP audience is broad, and includes the participants identified in Figure 1.

Figure 1: The OEMP audience

1.3 Supporting environmental management plans

A series of supporting management plans have been developed in support of this OEMP. These plans are provided as Appendices to this OEMP as follows:

- Air Quality Management Plan (Appendix A)
- Waste Management Plan (Appendix B)
- Operational Traffic Management Plan (Appendix C)
- Environmental Pollution Incident Emergency Plan (Appendix D)
- Site Stormwater Plan (Appendix E).

1.4 OEMP reference guide

A quick find guide to key information contained in the OEMP is provided in Table 1.

Table 1: OEMP quick reference guide

Component	Section of the OEMP	Comments
Operational requirements	Sections 3.2.2 and 3.2.6	Outlines operational limits and hours of operation
Environmental mitigation measures and specific environmental conditions	Sections 3.5 and 3.6 (specifically Table 8)	Includes key actions required prior to commencement of operation, and a number of on-going actions for implementation during operation
Roles and responsibilities	Section 4.1	Outlines the roles and responsibilities of staff in relation to the OEMP
Environmental incident and emergency procedures	Section 4.3	Outlines actions to be implemented in the event of an environmental incident, emergency and/or event of non-compliance
Environmental management, reporting and auditing requirements	Section 4.6 (specifically Table 13 and Figure 8)	Outlines the environmental auditing and reporting schedule
Environmental monitoring programme	Sections 5.1	Outlines daily and other progressive monitoring required, that will provide a base for the environmental audits
Community and stakeholder engagement	Section 6	Overview of the external communication procedure

1.5 Supporting documentation

The following documents have been used to inform and support the OEMP and are outlined in Table 2 below.

Table 2 Supporting documentation

Document Title	Prepared by
Supporting Environmental Management Plans	
Air Quality Management Plan (AQMP)	Todoroski Air Sciences – Refer to Appendix A
Operational Traffic Management Plan (OTMP)	Arup – Refer to Appendix B
Waste Management Plan (WMP)	Arup – Refer to Appendix C
MXNSWEPL001 Environment Pollution Incident Emergency Plan	Med-X – Refer to Appendix D
MXNATQBCP001 Med-X Business Continuity Plan National	Med-X
Med-X Policies	
SXMXNATQPO2022017 Med-X National QEHS Policy	Med-X
SXMXNATPO2022044 Energy Conservation Policy	Med-X
SXMXNATPO2022051 Greenhouse Emissions Policy	Med-X
SXMXNATPO2022086 Waste Management Policy	Med-X
SXMXNATPO2022042 Emergency Management Policy	Med-X
SXMXNATPO2022053 Hazardous Chemicals Policy	Med-X
Med-X Integrated Management System (IMS) Procedures	
MXNATQMA110 Med-X IMS Manual	Med-X
MXNATQMA110 1 IMS Procedure Organisational Context	Med-X
MXNATQMA110 4 IMS Procedure Hazard Identification & Assessment	Med-X
MXNATQMA110 2 IMS Risks & Opportunities	Med-X
MXNATQMA110 9 IMS Procedure Competence & Awareness	Med-X
MXNATQMA110 19 IMS Procedure Emergency Situations	Med-X
MXNATQMA110 25 IMS Procedure Incident Investigation	Med-X
MXNATQMA110 26 IMS Procedure Continual Improvement	Med-X
MXNATQMA110 24 IMS Procedure Non-conformity & Corrective Action	Med-X
MXNATQMA110 20 IMS Procedure Customer Satisfaction	Med-X
MXNATQMA110.10 IMS Procedure Communication & Participation	Med-X
MXNATQMA110 21 IMS Procedure Data Analysis & Evaluation	Med-X
MXNATQMA110 22 IMS Procedure Internal Audits	Med-X
MXNATQMA110 6 IMS Procedure Objectives, Targets & Indicators	Med-X
Operational Procedures	
MXNATQPR314 Med-X Monitoring Treatment Facility Procedures	Med-X
Other	
Med-X Aspects National Register	Med-X

2 Regulatory requirements and policy context

This section of the OEMP identifies the regulatory and policy requirements that relate to the OEMP, including:

- Legislative, regulatory, and other requirements such as permits and licences
- Conditions of consent
- Med-X corporate environmental policy.

2.1 Legal compliance requirements

Table 3 below identifies the relevant legal and compliance requirements that relate to the OEMP.

Table 3: Relevant legal and compliance requirements

Relevant legislation and regulating authority	Licence / approval	Date of issue	Licence / approval details
Environmental Planning and Assessment Act 1979 **– Blacktown City Council**	Development Consent, SSD 6761	28 September 2020	Operation of a clinical waste management facility to process up to 2,000 tonnes per annum of clinical waste and store up to 300 tonnes per annum of related waste at 9 Kenoma Place, Arndell Park and use of 7 Vangeli Street, Arndell Park for a delivery vehicle depot and clean sharp waste container storage.
Protection of the Environment Operations Act 1997 **(POEO Act) - EPA**	Environmental Protection Licence (EPL) 20233	13 November 2020 (variation to original licence issued 3 September 2013 and licence transferred to Med-X on 11 October 2017)	Licence for the following activities: • Storage of clinical and related wastes as defined in Schedule 1 of the POEO Act • Waste processing (non-thermal treatment) of clinical and related wastes as defined in Schedule 1 of the POEO Act, excluding cytotoxic waste, Pharmaceutical waste, Radiological waste and Volatile and Semi-volatile organic compounds (including formaldehyde, phenol and mercury).
Protection of the Environment Operations Act 1997 **(POEO Act) - EPA**	Environmental Protection Licence (EPL) 12609	27 November 2006 (licence transferred to Med-X on 30 October 2017)	Licence for the following activities: • Transport of category 1 trackable waste • Transport of category 2 trackable waste.
Protection of the Environment Operations Act 1997 **(POEO Act) - NSW Ministry of Health**	Certificate of Approval – Clinical Waste Treatment Method	11 March 2019	Approval for the treatment of clinical waste by autoclave at 140ºC for a minimum of 50 minutes at a pressure of 310 Kpa, followed by shredding and disposal at landfill, subject to the condition in Schedule 1 of the POEO Act.

The OEMP has also been developed in the context of the following legislation relevant to the operation of this facility:

- *Environmental Planning and Assessment Act 1979*
- *Protection of the Environment Operations Act 1997*
- *Dangerous Goods (Road and Rail Transport) Act 2008*
- The Protection of the Environment Operations (Waste) Regulation 2022
- The NSW Health Clinical and Related Waste Management for Health Services 2017
- NSW EPA Waste Classification Guidelines Part 1: Classifying Waste 2014

2.2 Conditions of consent

The OEMP relates to the Conditions of Consent for SSD 6761 provided by DPIE on 28th September 2020 (Refer to Appendix G).

Part B of the Conditions of Consent contains Specific Environmental Conditions, which have been included in Section 3.6 of the OEMP.

Part C of the Conditions of Consent relates to Environmental Management, Reporting and Auditing. These conditions have been included in Section 5 of the OEMP.

Specifically, Condition C2 outlines the requirement for an OEMP, and Condition C1 provides details on how the OEMP is to be prepared. These are presented in Table 4 along with the sections of the OEMP which address each item.

Table 4: Conditions of Consent related to preparation of the OEMP

Reference ID	Contents	Document reference
C1 (condition of C2)	Management plans required under this consent must be prepared in accordance with relevant guidelines, and include:	Appendix A - D
	(a) detailed baseline data;	
	(b) details of:	
	(i) the relevant statutory requirements (including any relevant approval, licence or lease conditions);	Section 2.1, 2.2
	(ii) any relevant limits or performance measures and criteria; and	Appendix A - D
	(iii) the specific performance indicators that are proposed to be used to judge the performance of, or guide the implementation of, the development or any management measures;	Section 5.1, Appendix A - D
	(c) a description of the measures to be implemented to comply with the relevant statutory requirements, limits, or performance measures and criteria;	Section 3.5
	(d) a program to monitor and report on the:	
	(i) impacts and environmental performance of the development; and	Section 5.1
	(ii) effectiveness of the management measures set out pursuant to paragraph (c) above;	Section 5.2

Reference ID	Contents	Document reference
	(e) a contingency plan to manage any unpredicted impacts and their consequences and to ensure that ongoing impacts reduce to levels below relevant impact assessment criteria as quickly as possible;	Section 3.8
	(f) a program to investigate and implement ways to improve the environmental performance of the development over time;	Section 4.4, 5.2
	(g) a protocol for managing and reporting any:	
	(ii) complaint;	Section 4.4, 4.3.3
	(iii) failure to comply with statutory requirements; and	Section 4,4, 4.3.1, 4.3.2
	(h) a protocol for periodic review of the plan	Section 4.4, 5.2
C2	The Applicant must prepare an Operational Environmental Management Plan (OEMP) in accordance with the requirements of condition C1 and to the satisfaction of the Planning Secretary.	See C1 above.
C3	As part of the OEMP required under Condition C2 of this consent, the Applicant must include the following:	
	(a) describe the role, responsibility, authority and accountability of all key personnel involved in the environmental management of the development;	Section 3.5, 4.1
	(b) describe the procedures that would be implemented to:	
	(i) keep the local community and relevant agencies informed about the operation and environmental performance of the development;	Section 4.6
	(ii) receive, handle, respond to, and record complaints;	Section 4.3.3
	(iii) resolve any disputes that may arise;	Section 4.3.4
	(iv) respond to any non-compliance;	Section 4.3.2
	(v) respond to emergencies; and	Section 4.3.1
	(c) include the following environmental management plans:	
	(i) Air Quality Management Plan (see Condition B3);	Appendix A
	(ii) Waste Management Plan (see Condition B11); and	Appendix B
	(iii) Operational Traffic Management Plan (see Condition B20).	Appendix C

2.3 Med-X management system

Med-X utilises a series of equipment and systems to manage, monitor and organise their internal systems, procedures and processes. The interactions between these systems is shown in Figure 2.

Central to Med-X's management system is the Integrated Management System (IMS). The IMS integrates all of the organisations systems and processes into a complete framework enabling Med-X to work as a single unit.

The IMS exists as part of a larger strategy to establish, document and implement processes and integrate policies and objectives. This includes the Quality, Environment, Health and Safety (QEHS) policy, as shown in Figure 2. Similarly shown in Figure 2 is the relationship between the IMS and the Logistics Management and CRM systems. The IMS collects and utilises data from the Logistics Management and CRM systems to

monitor and improve Med-X's procedures and processes as required. For more detail on the relationship between the IMS, the CRM and the Logistics Management systems refer to Section 4.1 in the WMP.

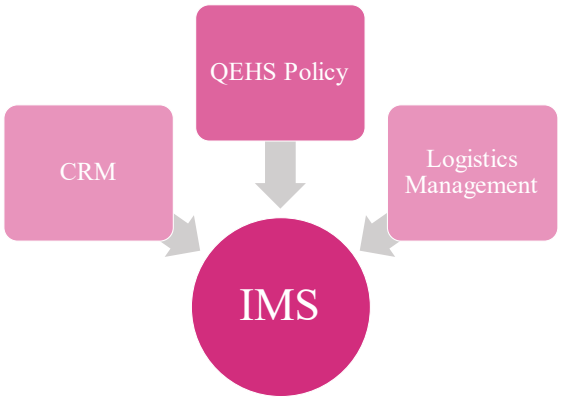

Figure 2: Relationship of Policies, IMS, and CRM.

2.4 Med-X environmental policy

The Med-X Quality, Health, Safety and Environment Policy sets to achieve the highest standards of quality, health and safety and environment and incorporate the principles of sustainable development throughout its nationwide business.

Med-X strives to conduct business in an environmentally responsible and sustainable way to ensure pollution is prevented and that Med-X operations protect the environment by minimising environmental impact.

To achieve this, Med-X are committed to:

- Implementing, maintaining, reviewing and continually improving the Med-X environmental management system to improve environmental performance and meet the needs and requirements of legislation, stakeholders and certifications
- Proactively identifying, eliminating, controlling and reducing the risk of environmental impact
- Complying with relevant environmental laws and other compliance requirements
- Setting objectives and targets to evaluate and continuously improve environmental performance
- Promoting an environmentally aware workplace culture including taking pride in environmental care, performance and responsibility through effective communication, training, competency and supervision
- Implementing ongoing monitoring and inspection programs to prevent environmental damage
- Reducing our environmental footprint by reducing greenhouse gas emissions
- Using environmentally sensitive products, practices and technologies where possible

- Being receptive to community concerns by engaging and listening to communities, customers, neighbours, industry groups and regulatory authorities to limit harm to the environment and people from our activities.

To achieve this, Med-X maintains a program for independent certification/ accreditation to the following standards:

- ISO 9001 Quality Management System
- ISO 45001 Occupational Health and Safety Management System
- ISO14001 Environmental Management System.

3 Facility overview

3.1 Site description

The Med-X Clinical Waste Management Facility consists of two sites in Arndell Park:

- 9 Kenoma Place (the facility / site), the location of the clinical waste management facility
- 7 Vangeli Street (the parking depot), used as a delivery vehicle parking depot and for storage of clean sharps waste containers.

Figure 3 shows the location of the two sites in relation to the surrounding area.

Both sites are zoned 'IN1 General Industrial' under the Blacktown Local Environmental Plan 2015 (Blacktown LEP) and are located within the established industrial precinct of Arndell Park. Surrounding land uses include other industrial and commercial businesses.

The site includes the following infrastructure:

- An enclosed and bunded building housing the warehouse (for the unloading, processing, handling, storage and treatment of waste and cleaning and storage of bins) and office facilities
- A 6m wide driveway entry providing heavy and light vehicle access from Kenoma Place
- Two distinct car parking areas providing 11 staff parking spaces in total, including one disabled space
- A hardstand area for operational vehicle servicing and manoeuvring
- A defined outdoor bin storage area adjacent to a stand-alone water tank and industrial radiator
- An LPG gas tank, with a guard rail and 6m exclusion zone marked in yellow paint and
- A bollard located adjacent to parking bay 11 to stop vehicles parking within the LPG gas tank exclusion zone
- A 75mm high and 455mm wide speed hump across the parking area (to provide a continuous bund).

The parking depot contains a warehouse building, a hardstand area accommodating parking for up to 19 vehicles and an enclosed storage shed for the storage of unused clinical sharps containers. Access between Vangeli Street and the parking depot is currently provided via an 8m wide access.

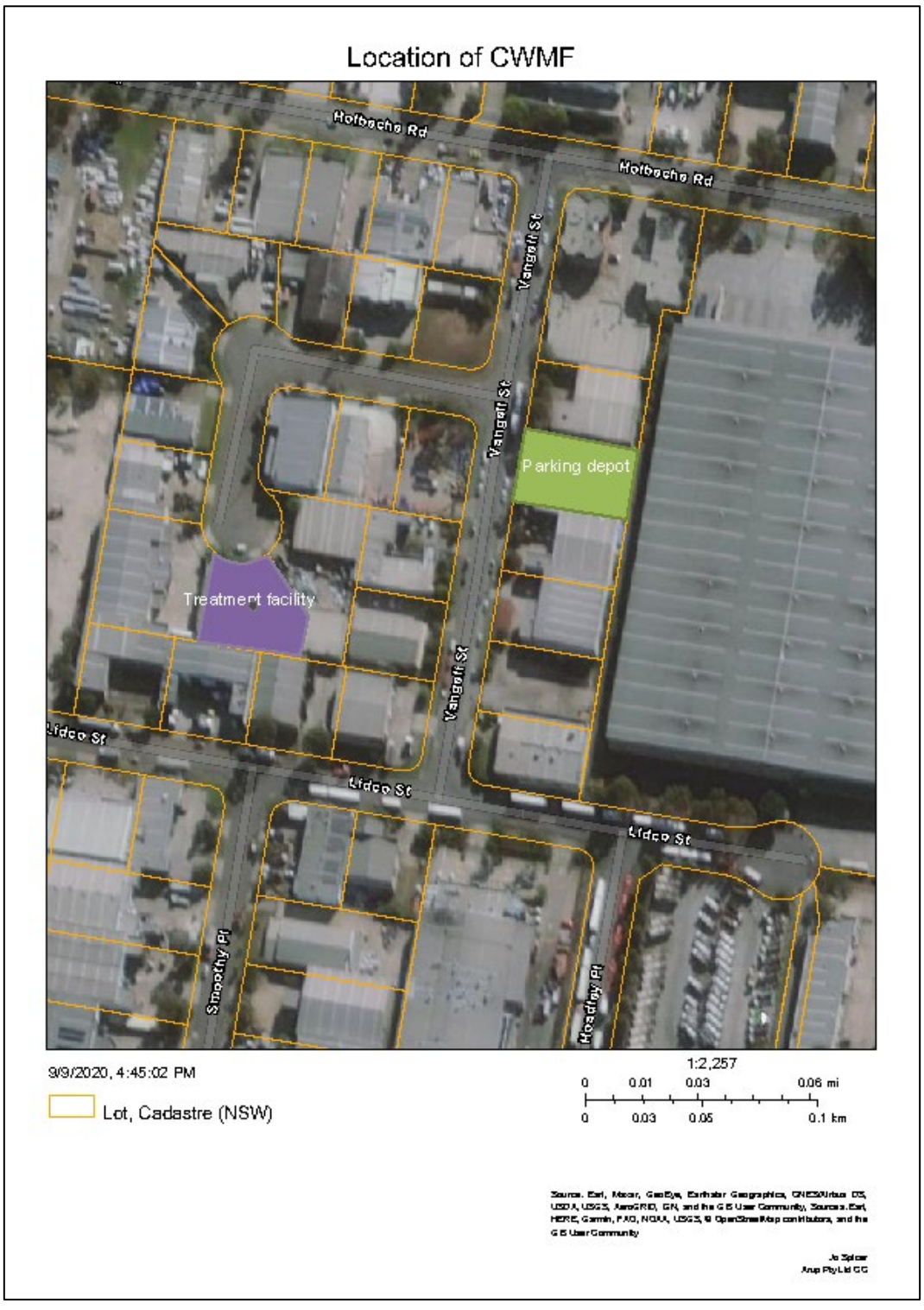

Figure 3: Location of facility and parking depot

3.1.1 Sensitive receivers

The key aspect for sensitive receivers is odour. Nine sensitive receivers were identified in the vicinity of the site, including six industrial receivers and three residential receivers (as shown on Figure 4). The closest waterway is Bungarribbe Creek, located 335 m to the north-east of the site.

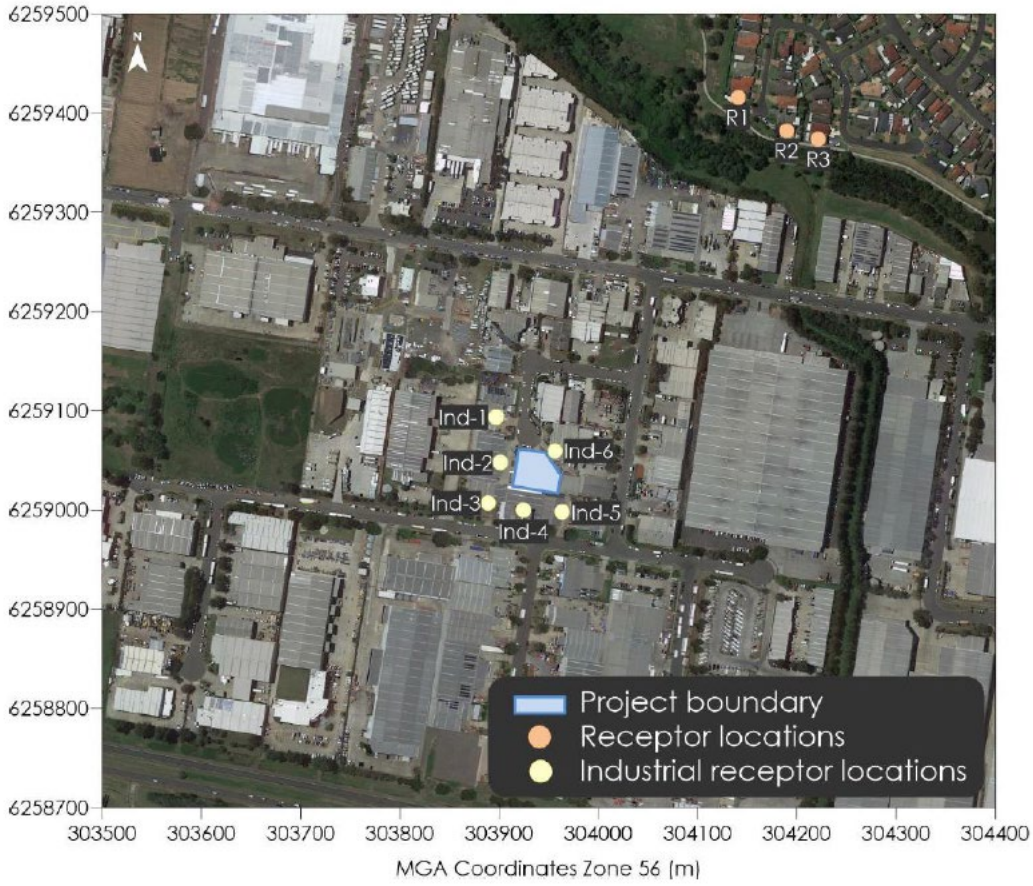

Figure 4: Nearest sensitive receivers

3.2 Operations overview

3.2.1 Waste types received

The type of wastes received at the facility includes:

- Clinical waste;
- Clinical sharps;
- Anatomical waste;
- Cytotoxic waste and; and,
- Pharmaceutical waste.

The site is currently permitted to store clinical and related wastes and undertake non-thermal treatment of clinical waste. Related waste[1] is not permitted to be treated on site and must be identified, separated and stored in a defined location, and then transported to an appropriate facility for further processing or disposal.

3.2.2 Hours of operation

The approved hours of operation are provided in Table 5.

Table 5: Hours of operation

Activity	Day	Time
Operation of Clinical Waste Management Facility at 9 Kenoma Place, Arndell Park	Monday – Saturday (including public holidays that fall on Saturday)	7 am – 7 pm
Operation of depot and storage facility at 7 Vangeli Street, Arndell Park	Monday – Saturday (including public holidays that fall on Saturday)	5 am – 7 pm

3.2.3 Vehicle movements

Med-X currently has its own collection vehicle fleet that collects clinical and related wastes. All Med-X vehicles and Med-X drivers hold current EPA transport licenses for clinical and related wastes as per the *Protection of the Environment Operations Act 1997 and Dangerous Goods (Road and Rail Transport) Act 2008.* All Med-X vehicles are driven by Med-X Drivers who are trained in the collection and transportation of clinical and related wastes. Personnel Digital Assistance (PDA) devices are used by all Med-X drivers to capture all relevant information for the generation of a transport certificate which is presented upon arrival to the Med-X treatment facility. This information is then captured by the Med-X Customer Relations Management System (CRM).

Table 6 below outlines the total number of delivery vehicles and vehicle movements for the facility. The maximum number of vehicles expected to arrive at the facility at once is two. Refer to the OTMP in Appendix C for details regarding the traffic management of the facility and refer to the WMP in Appendix B for details of the Med-X logistics system.

Table 6: Total staff and delivery numbers

Component	Total
Number of MRVs	8
Number of Vans	8
MRV waste deliveries per day	16
Van waste deliveries per day	16
Vehicle movements per day	32
Bulk bin collection per day	1

[1] In the context of this report related waste includes anatomical, cytotoxic, parametrical and clinical sharps waste

3.2.4 Waste Tracking

CRM and the associated tracking equipment[2] record's all relevant information from the point of collection to the final point of disposal. All clinical and related waste is tracked as per the EPA requirements and the *Protection of the Environment Operations (Waste) Regulation 2014.* Med-X uploads all relevant information from the Med-X CRM system to the EPA's online waste tracking system. For additional details regarding the Med-X waste tracking system and processes refer to Appendix B Waste Management Plan.

3.2.5 Waste receival and treatment process

Once the clinical and related waste is delivered to the site, operations consist of the following activities:

- Receipt of clinical and related wastes;
- Identification and separation of related waste;
- Cytotoxic, pharmaceutical and clinical sharps waste bins are transferred to their allocated storage areas;
- Anatomical waste is transferred to the allocated freezer for storage
- Non-thermal treatment within an autoclave followed by the shredding, compaction and storage of treated clinical waste;
- Contractor collection and transportation of treated clinical waste to an appropriate disposal facility;
- Contractor collection and transportation of related waste to an appropriate disposal facility;
- Washing and storage of waste bins; and
- Storage of clean, unused bins.

Clinical waste is treated in the autoclave, followed by shredding, this process is an approved treatment method by NSW Department of Health. The waste receival and waste treatment process is summarised in Figure 5 below. For more information regarding the waste receival and treatment process refer to the WMP in Appendix B.

[2] Including Personnel Digital Assistance (PDA) devices used by all Med-X drivers to scan bins collected and record all relevant information and weighing scales used at the treatment facility.

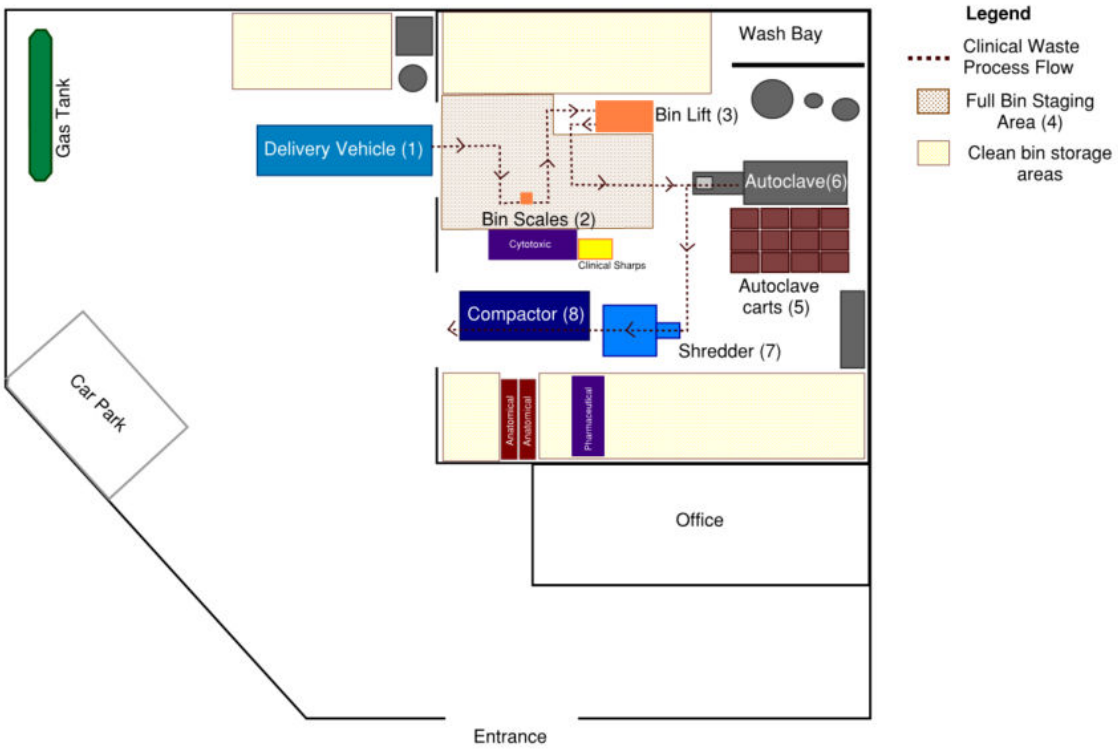

Figure 5: Waste receival and treatment process

3.2.6 Facility storage and processing limits

Table 7 outlines the maximum limits for processing and storing waste at the facility as per the conditions of consent and the revised EPL.

Table 7: Maximum operating limits[3]

Storage and/or Processing	Maximum limit
Receive and process clinical waste	2,000tpa
Receive and store related waste	300tpa
Clinical waste processing	648kg per operating cycle of autoclave
Storage of clinical waste outside of the approved hours of operation	450kg per day
Storage of DG class 6.2 PG III	1,200kg at any time
Storage of clinical and related waste, treated and/or untreated, at the premises`	8,000kg at any one time

The storage locations on site are monitored daily via monitoring checklists. The Branch Manager uploads these records to the Med-X CRM system. There is also CCTV surveillance on site and video footage is stored for up to 90 days. Waste tracking in general is carried out as described in Section 3.2.4 above and in Appendix B – Waste Management Plan.

[33] Note: the mass is based on an average waste density of 120kg/m^3

3.3 Operational environmental impacts

An assessment of the operational activities was undertaken during preparation of the Environmental Impact Statement (EIS) and Response to Submissions (RtS) report for SSD 6761. This was supported by specialist environmental studies, along with consultation with key stakeholders, regulators and the community. The assessment considered potential impacts to the following environmental aspects during operation of the facility:

- Waste management
- Traffic and access
- Air quality and odour
- Noise
- Stormwater and drainage
- Hazards and risks
- Socio-economic.

3.4 Key environmental risks

Based on the assessment for the EIS and RTS and the supporting specialist environmental studies, key environmental risks for the facility were identified and are summarised in the following sections. Noise, stormwater and drainage and socio-economic impacts are not considered key environmental risks for the facility given the location and context of the site operations and the management measures already applied at the site. Similarly, use of the parking depot is considered to have minimal environmental impacts. For additional information please refer to the EIS and the RTS.

3.4.1 Waste management

The key risks for waste management include the receipt of non-conforming wastes or receptacles, loss of containment of waste, exceedance of processing and storage allowances and inappropriate disposal of oil / solvent soaked materials.

3.4.2 Air quality and odour

The key risk for air quality and odour is the generation of odour from wastes received and generation of other emissions from waste processing are not contained and may impact nearby sensitive receivers.

3.4.3 Traffic and access

The key traffic and access risks include a lack of parking for staff, vehicle idling and parking outside of the facility and congestion within the site.

3.4.4 Hazards and risks

The key hazards and risks for the facility include a loss of containment of LPG storage tank, partial or total failure of sterilisation process and potential fires.

3.5 Environmental management measures

In response to the key risks, management and mitigation measures were identified in the EIS and RtS in order to minimise adverse environmental impacts and mitigate the environmental risks which could potentially arise during operation of the facility. These measures, as listed in Table 8 overleaf and Appendix 2 of the Conditions of Consent, from the environmental commitments made by Med-X for operation of the facility.

The implementation of the environmental management measures prior to and during operation is ultimately the responsibility of the Branch Manager with support from the Med-X leadership team as required.

Table 8: Management and mitigation measures

Aspect	Potential impact	Management and mitigation measure	Timing	Site
Air quality	Generation of odour and other emissions	An odour management plan is to be developed to include the following measures: • Keep building doors closed when not in use; • Avoid opening the doors after 5pm as much as practical, especially in the cooler times of the year; • Maintain an odour complaint logbook and in the event of a complaint conduct an immediate investigation of any odour sources, together with appropriate actions to eliminate any identified excessive odour; • Engines of on-site vehicles and plant switched off when not in use; • Vehicles and plant fitted with pollution control devices in accordance with manufacturer specifications; • Any waste requiring overnight storage is stored within a closed container inside the facility; • Additional controls to be implemented, if and as required. In addition, the odour management plan must include: • Key performance indicator(s) for emissions controls; • Monitoring method(s); • Location, frequency and duration of monitoring; • Record keeping; • Response mechanisms; and • Compliance reporting.	Prior to Operation / Operation	Facility (Kemona Place)
Air quality	Generation of odour and other emissions	• New vent pipe on the stand-alone tank to be installed extending at least 1 m above the roofline of the building to improve air dispersion and reduce impacts to receptors. The pipe must have a sampling plane that has been constructed with consideration of AS4323.1 1995.	Prior to Operation	Facility (Kemona Place)
Air quality	Generation of odour and other emissions	• The air quality (odour) model is to be validated within 12-months of project approval or as soon as practicable after receipt of a valid odour complaint that cannot be addressed by applying the controls identified in the odour management plan.	Operation	Facility (Kemona Place)

Aspect	Potential impact	Management and mitigation measure	Timing	Site
Noise	Noise emissions to nearby residential receivers	• Vehicles departing the Vangeli Street Parking Depot between 5am and 7am are to follow the designated route to the Great Western Highway, avoiding driving through residential areas	Operation	Parking Depot (Vangeli Street)
Surface water	Stormwater contamination	• The proposed stormwater management measures are to be installed prior to increase of the processing capacity at the site	Prior to operation	Facility (Kemona Place)
Hazards and risks	Fire	• An automatic fire detection system is the be installed inside the facility, with the alarm being signalled to a third-party central monitoring station	Prior to operation	Facility (Kemona Place)
Hazards and risks	Fire	• A 6m exclusion zone around the LPG tank is to be marked out in yellow paint prior to increase of the processing capacity at the site	Prior to operation	Facility (Kemona Place)
Hazards and risks	Fire	• The yellow lines defining the 6m exclusion zone around the LPG tank are to be regularly cleaned and repainted, as necessary	Operation	Facility (Kemona Place)
Hazards and risks	Fire and land and water contamination	• All bins stored outside the facility are to be kept within the defined outdoor storage area, as shown on the site plan	Operation	Facility (Kemona Place)
Traffic	General traffic management	• A traffic management plan is to be developed and implemented and is to include measures relevant to the management of traffic, as described in this report and supporting information.	Prior to Operation / Operation	Facility (Kemona Place) and Parking Depot (Vangeli Street)
Traffic	Traffic congestion at Kenoma Place	• Vehicle arrivals at the facility are to be closely monitored, to limit congestion and ensure waste delivery is evenly spaced across the daily operating hours. This includes use of the existing real-time vehicle tracking system, combined with additional monitoring of daily trends in arrivals.	Operation	Facility (Kemona Place)
Traffic	Traffic congestion at Kenoma Place	• Waste delivery and collection vehicles are to avoid idling in Kenoma Place and utilise the area on-site adjacent to the staff carpark where possible when waiting to unload.	Operation	Facility (Kemona Place)
Waste management	General waste management	• A waste management plan is to be developed and implemented and is to include measures relevant to the management of waste derived at the site.	Prior to Operation / Operation	Facility (Kemona Place)

Aspect	Potential impact	Management and mitigation measure	Timing	Site
Surface water	Stormwater management	• A stormwater management plan is to be developed and implemented and is to include measures relevant to the management of water and stormwater at the site.[4]	Prior to Operation / Operation	Facility (Kemona Place)
General	Community concerns	• The Med-X Communication, Consultation & Participation procedure is to be implemented to ensure any concerns raised by the community are appropriately recorded, reviewed and responded to.	Operation	Facility (Kemona Place) and Parking Depot (Vangeli Street)

[4] Refer to Site stormwater plan (Appendix E) and Environmental Pollution Incident Emergency Plan (Appendix D).

3.6 Specific environmental conditions

Additionally, Part B of the Conditions of Consent identifies Specific Environmental Conditions to manage any adverse environmental impacts. These conditions are presented in Table 9.

Table 9: Specific environmental conditions

Condition Ref	Condition	Timing	Comment/ notes
AIR QUALITY			
Air Quality Discharges			
B1	The Applicant must install and operate equipment in line with best practice to ensure that the development complies with all load limits, air quality criteria/air emission limits and air quality monitoring requirements as specified in the EPL applicable to the site.	Prior to operation / on-going	Refer to Appendix A
B2	Air from the standalone water tank must be discharged at least 1 metre above the roofline of the building. The ventilation stack must have a sampling plane that has been constructed with consideration of AS 4323.1-1995 Stationery Source Emissions – Selection of Sampling Positions.	On-going	
Air Quality Management Plan			
B3	Prior to the commencement of operation, the Applicant must prepare an Air Quality Management Plan (AQMP) to the satisfaction of the Planning Secretary. The AQMP must form part of the OEMP required by condition C2 and: a) be prepared by a suitably qualified and experienced person(s); b) be prepared in consultation with the EPA; c) detail and rank all emissions from all sources of the development, including odour; d) describe a program that is capable of evaluating the performance of the operation and determining compliance with key performance indicators; e) identify the control measures that that will be implemented for each emission source; and f) nominate the following for each of the proposed controls: (i) key performance indicator; (ii) monitoring method; (iii) location, frequency and duration of monitoring; (iv) record keeping; (v) complaints register; (vi) response procedures; and (vii) compliance monitoring.	Prior to operation	Refer to Appendix A
B4	The Applicant must: a) not commence operation until the AQMP required by condition B3 is approved by the Planning Secretary; and	Prior to operation / on-going	Noted.

Condition Ref	Condition	Timing	Comment/ notes
	b) implement the most recent version of the AQMP approved by the Planning Secretary for the duration of the development.		
Odour Management			
B5	The Applicant must ensure the development does not cause or permit the emission of any offensive odour (as defined in the POEO Act).	On-going	Refer to Section 5 of this OEMP and Appendix A for further details
B6	The Applicant must carry out an Odour Audit of the development no later than six months after the commencement of operation of the development. Division 9.4 of Part 9 of the EP&A Act applies to this audit which is for the purpose of auditing the development against the odour impact predictions of the development. The audit must: a) be carried out by a suitably qualified, experienced and independent person(s), whose appointment has been endorsed by the Planning Secretary; b) audit the development in full operation; c) include a summary of odour complaints and any actions that were carried out to address the complaints; d) assess the operation against odour impact predictions in the EIS and RtS; e) review design and management practices in the development against industry best practice for odour management; and f) include an action plan that identifies and priorities any odour mitigation measures that may be necessary to reduce odour emissions. *Note: The Odour Audit may be prepared so that it addresses the requirements of the conditions consent and the EPL for the development.*	6-months following commencement of operation	
B7	Within six months of commissioning of the Odour Audit required by condition B6, or otherwise agreed by the Planning Secretary, the Applicant must submit a copy of the Odour Audit report to the satisfaction of the Planning Secretary, together with the Applicant's response to any recommendations contained in the Odour Audit report.	Within six months of commissioning of the Odour Audit	
HAZARDS AND RISKS			
Emergency Plan			
B8	Prior to commencement of operation of the development, the Applicant must prepare and implement a comprehensive Emergency Plan. The Emergency Plan must include: a) consider the safety of all people outside of the development who may be at risk from the development and must be prepared in accordance with the *Department's Hazardous Industry Planning Advisory Paper No. 1, 'Emergency Planning'*; and b) detail emergency procedures for the development.	Prior to operation / on-going	Refer to Section 5 of this OEMP and Appendix D for further details

Condition Ref	Condition	Timing	Comment/ notes
Dangerous Goods			
B9	The Applicant must ensure that the quantities of dangerous goods stored and handled at the site or transported to and from the site are below the screening threshold quantities listed in the Department's *Applying SEPP 33* at all times, except for dangerous goods Class 6.2 Packing Group III infectious substances (DG Class 6.2 PG III).	On-going	Noted
Bunding			
B10	The Applicant must store all chemicals, fuels and oils used on-site in appropriately bunded areas in accordance with the requirements of all relevant Australian Standards, and/or EPA's *Storing and Handling of Liquids: Environmental Protection – Participants Manual* (Department of Environment and Climate Change, 2007).	On-going	Refer to Appendix E for further details
WASTE MANAGEMENT			
Waste Monitoring Program			
B11	Prior to the commencement of operation, the Applicant must prepare a Waste Monitoring Plan (WMP) for the development to the satisfaction of the Planning Secretary. The WMP must: a) be prepared by a suitably qualified and experienced person(s) prior to the commencement of operation; b) include suitable provision to monitor the: (i) quantity, type and source of waste received on site; (ii) quantity, type and quality of the outputs produced on site; (iii) freezer capacity on site for the storage of received anatomical waste; and c) ensure that: (i) all waste that is controlled under a tracking system has the appropriate documentation prior to acceptance at the site; (ii) sufficient capacity is available for the storage of all clinical and related wastes; and (iii) staff receive adequate training in order to be able to recognise and handle any hazardous or other prohibited waste including asbestos.	Prior to operation	Refer to Section 5 of this OEMP and Appendix B for further details
B12	The Applicant must: a) not commence operation until the WMP required by condition B11 is approved by the Planning Secretary; and b) implement the implement the most recent version of the WMP approved by the Planning Secretary for the duration of the development.	Prior to operation / on-going	Noted

Condition Ref	Condition	Timing	Comment/ notes
Waste Processing and Storage			
B13	The Applicant must unload the waste received at the site inside the processing building and at the designated loading dock to avoid spillage.	On-going	Refer to Section 3.2 of this OEMP and Appendix B for further details
B14	The Applicant must ensure the development does not store clean waste bins in the vehicle manoeuvring area except as shown in Figure 1 in Appendix 1 (of the Conditions of Consent).	On-going	
B15	All waste processing, and material handling activities must be undertaken in an enclosed processing building and within designated areas.	On-going	
B16	Clinical waste and related waste received on site must always be secured and maintained within designated waste storage areas shown on Figure 3 and Figure 4 in Appendix 1 (of the Conditions of Consent) and must not leave the site onto neighbouring public or private properties.	On-going	
Statutory Requirements			
B17	All waste materials removed from the site must only be directed to a waste management facility or premises lawfully permitted to accept the materials.	On-going	Refer to Section 3.2 and 5 of this OEMP and Appendix B for further details
B18	The Applicant must assess and classify all liquid and non-liquid wastes to be taken off site in accordance with the latest version of EPA's *Waste Classification Guidelines Part 1: Classifying Waste* (EPA, 2014) and dispose of all wastes to a facility that may lawfully accept the waste.	On-going	
B19	The Applicant must retain all sampling and waste classification data for the life of the development in accordance with the requirements of EPA.	On-going	
TRAFFIC AND ACCESS			
Operational Traffic Management Plan			
B20	Prior to the commencement of operation, the Applicant must prepare an Operational Traffic Management Plan (OTMP) for the development to the satisfaction of the Planning Secretary. The OTMP must form part of the OEMP required by condition C2 and must: a) be prepared by a suitably qualified and experienced person(s), b) detail the measures that are to be implemented to ensure road safety and network efficiency during operation; c) detail the measures that are to be implemented to ensure delivery vehicle arrival times are appropriately staggered including the use of an electronic tracking system; d) detail heavy vehicle routes, access and parking arrangements; and e) include a program to monitor the effectiveness of these measures.	Prior to operation	Refer to Appendix C
B21	The Applicant must:	Prior to operation / on-going	Noted

Condition Ref	Condition	Timing	Comment/ notes
	a) not commence operation until the OTMP required by condition B20 is approved by the Planning Secretary; and b) implement the most recent version of the OTMP approved by the Planning Secretary for the duration of the development.		
Parking			
B22	The Applicant must provide sufficient parking facilities on-site, including for heavy vehicles and for site personnel, to ensure that parking associated with the development does not utilise public and residential streets or public parking facilities.	Prior to operation / on-going	Refer to Section 3.2 of this OEMP and Appendix C for further details
Operating Conditions			
B23	The Applicant must ensure: a) internal roads, driveways and parking (including grades, turn paths, sight distance requirements, aisle widths, aisle lengths and parking bay dimensions) associated with the development are constructed and maintained in accordance with the latest version of *AS 2890.1:2004 Parking facilities Off-street car parking* (Standards Australia, 2004), *AS 2890.2:2018 Parking facilities Off-Street commercial vehicle facilities* (Standards Australia, 2018) and *AS 2890.2:2009 Parking facilities Off-street commercial vehicle facilities* (Standards Australia, 2009); b) the swept path of the longest vehicle entering and exiting the site, as well as manoeuvrability through the site, is in accordance with the relevant AUSTROADS guidelines; c) the development does not result in any vehicles queuing on the public road network; d) heavy vehicles and bins associated with the development are not parked on local roads or footpaths in the vicinity of the site; e) all vehicles are wholly contained on site before being required to stop; f) all loading and unloading of materials are carried out on-site; g) all trucks entering or leaving the site with loads have their loads covered and do not track dirt onto the public road network; and h) the proposed turning areas in the car park are kept clear of any obstacles, including parked cars, at all times.	Prior to operation / on-going	Refer to Section 3.2 of this OEMP and Appendix C for further details
SOILS, WATER QAULITY AND HYDROLOGY			
Discharge Limits			
B24	The development must comply with section 120 of the POEO Act, which prohibits the pollution of waters, except as expressly provided for in an EPL.	On-going	Noted

Condition Ref	Condition	Timing	Comment/ notes
NOISE			
Hours of Work			
B25	The Applicant must comply with the hours detailed in Table 1 (of the Conditions of Consent), unless otherwise agreed in writing by the Planning Secretary.	On-going	Refer to Section 3.2.2 of this OEMP for further details
B26	Operations outside of the hours identified in condition B25 may be undertaken in the following circumstances: a) works that are inaudible at the nearest sensitive receivers; b) for the delivery of materials required outside these hours by the NSW Police Force or other authorities for safety reasons; or c) where it is required in an emergency to avoid the loss of lives, property or to prevent environmental harm.	On-going	Noted

3.7 Environmental risk assessment framework

Additional environmental management measures may be identified to meet the facility's compliance obligations and through Med-X's ongoing environmental risk assessment and environmental monitoring. The assessment of any additional risk/s will be undertaken using a qualitative risk assessment methodology based on the guidance document AS/NZS ISO 31000:2018 Risk management—Guidelines[5]. The assessment is based on the qualitative measure of likelihood of the events occurrence after control strategies have been put in place and of the consequences of the event occurring. Refer to Appendix F for additional details regarding the risk assessment framework.

3.8 Contingency plans

3.8.1 Air quality

In the event that an air quality performance indicator (refer to Section 6.2 of AQMP) has not been met or the air quality management criterion has been exceeded, Med-X will implement the following contingency plan:

- Report the non-compliance or incident if required per Section 4.3.2;
- Investigate and identify the cause of the non-compliance or incident;
- Consider options to manage the identified impacts; and
- Implement the appropriate course of action to ensure that the exceedance/incident ceases and does not reoccur to the satisfaction of the Planning Secretary

For further information see the Air Quality Management Plan in Appendix A.

[5] Standards Australia 2009

3.8.2 Waste management

Operations at the facility have the potential to be disrupted by various external and internal factors. Potential sources of disruption to the operation of the facility and the corresponding remedial measures are:

- To prevent backlog accumulating on site beyond safe storage limits and to ensure compliance with the Conditions of Consent and the conditions of the EPL, a risk- based decision is undertaken by the Branch Manager to divert the waste flow where required. If backlog of storage has occurred, all waste will be transported to an alternative licensed treatment facility for processing.

For further information see the Waste Management Plan (WMP) in Appendix B and MXNATQPR320 Med-X Backlog Contingency Procedure.

3.8.3 Traffic and access

To ensure all measures for the Operational Traffic Management Plan (OTMP) are implemented and to confirm they are having the desired impact, monitoring and management of this plan will be required. The monitoring program will collect the following information with regards to contingency:

- A log of all instances when contingency measures were required to manage queuing at the waste management facility. The cause of the congestion would need to be identified.

For further information see the Operational Traffic Management Plan OTMP in Appendix C.

4 Implementation of the OEMP

4.1 Roles and responsibilities

All operational staff are responsible for ensuring that their work complies with this OEMP. Figure 6 below provides an overview of the organisational structure for the facility. Table 10 outlines the roles, responsibilities, authority and accountability.

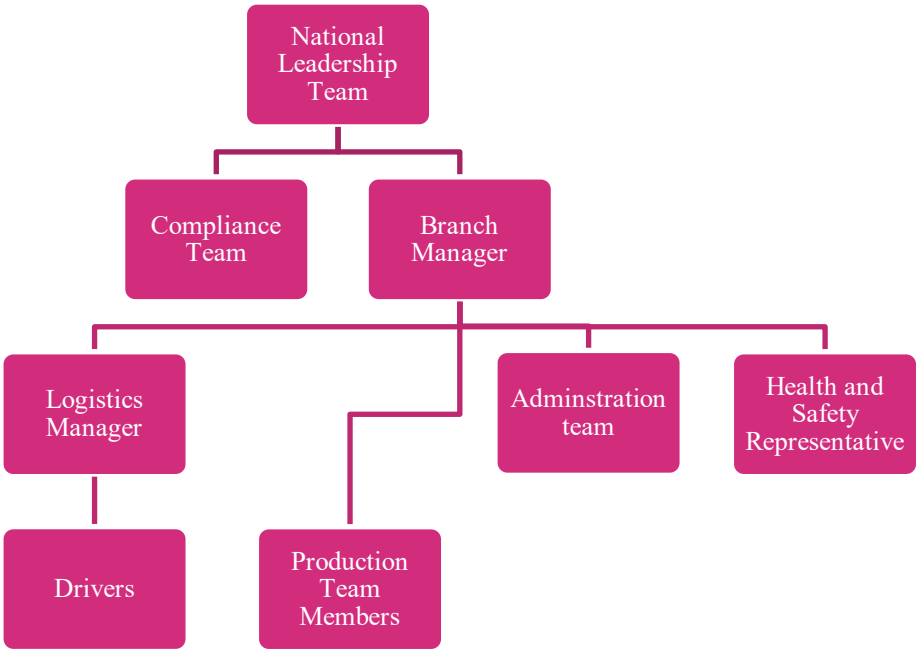

Figure 6: NSW Branch organisation chart

Table 10: Key personnel involved in the environmental management

Role	Responsibilities	Authority	Accountability
National Leadership Team	Responsible for: • Reporting on the operation of the management system; • Ensuring that environmental management improvement is taking place; • Ensuring that whenever there are changes to the IMS in regards to environmental managed changes are appropriately planned and implemented; • Ensuring the integrity of the IMS is maintained during changes; • Ensuring that responsibilities and authorities within the IMS in relation to environmental management are communicated and delegated.	Health and Safety Representative Compliance team Branch Manager	NSW State Manager and General Manager
Health and Safety Representative	Responsible for: • Complying with relevant environmental requirements and this OEMP • Providing advice and information on health and safety matters to staff and others as applicable	All staff outside of National Leadership Team	National Leadership Team

Role	Responsibilities	Authority	Accountability
	• Identifying and assessing OH&S hazards and their risks • Increasing the OH&S competence and awareness of staff at all levels through the development of training and awareness and sharing of best practice.		
National Regulatory Manager	Responsible for: • Approve and implement the OEMP • Providing advice and information on compliance matters to staff and others as applicable • Coordinating compliance issues with employees • Identifying and assessing compliance, legislated and environmental aspects and their impacts • Ensuring operational controls are implemented and monitored • Engaging specialist services to support licensing • Liaise with the regulator or authority • Representation at Improvement or Industry Groups • Coordination of all audits and improvements • keep key staff apprised of any changes to a situation • assessment of regulatory & legislation impacts	All staff outside of National Leadership Team	National Leadership Team
Branch Manager	Responsible for: • Approve and implement the OEMP • Involvement in audit processes • Continual improvement activities • Implementation of policies, processes and systems • Planning and controlling the management system processes • Establishment and deployment of operational level objectives and provision of resources needed to implement and improve processes	All Operational Staff at the Facility[6]	National Leadership Team
Office Manager	Responsible for: • Ensures all CRM data is uploaded to the system and up to date	Administration team	Branch Manger
Logistics Manager	Responsible for: • Update of logistics management system (Verizon) • Final approval of collection routes • Management and coordination of all Med-X drivers • Responsible for communicating any changes to collection routes to drivers	Drivers	Branch Manager

[6] Including office manager, logistics manager, drivers, waster operators, accounts and administration support and contractors

Role	Responsibilities	Authority	Accountability
Driver	Responsible for: • Complying with relevant environmental requirements and this OEMP • Quality of their work • Implementation of Med-X policies and procedures • Identify and report any known or potential problems and recommend solutions • Participate and engage in occupational health and safety management processes • Cooperate and coordinate actions in a shared workspace to ensure safe practices • Workers responsible for product quality have the authority to stop production to correct quality problems	N/A	Branch Manager Logistics Manager
Waste Operator	See above	N/A	Branch Manager
Administration	See above	N/A	Branch Manager Office Manager
Contractors	See above	N/A	Branch Manager

4.2 Training and awareness

Med-X operates a formal system to ensure that all employees within the organisation are adequately trained and aware, to enable them to perform their assigned duties. Each Manager and Supervisor is responsible for monitoring the abilities of all their workers and their responsibilities.

All employees receive training as identified by an initial training needs assessment. The training requirements of employees are assessed against wider organisational policies and objectives. Gaps in training, knowledge or competence are identified and filled. Appropriate training requirements are further identified through this process using the Competency Review Form. Table 11 below summarises the key staff training areas. For more details please refer to the Med-X MXNATQMA110 9 IMS Procedure Competence & Awareness document.

Table 11: Staff training

Employee	Training Type	Descriptions	Frequency
All Staff	Induction	Includes health, safety and environmental briefing.	Within the first month of employment
All Staff	Awareness Training	Appropriate to respective responsibilities. Is provided to ensure employees are aware of any significant impacts, actual or potential, of their work activities: • Responsibilities in achieving conformance with policies and procedures; • Relevant incidents and the outcomes of investigations;	On-going

Employee	Training Type	Descriptions	Frequency
		• Relevant hazards, Occupational Health and Safety (OH&S) risks and actions; • Ability to remove themselves from work situations they consider dangerous; • Contribution to the effectiveness of the management system; and, • Potential consequences of departure from specified operation procedures.	
All staff	Toolbox sessions	Changes to management plans and their implementation will be communicated to all staff in toolbox sessions as required.	Ongoing with any changes to management plans
Drivers	On-the-Job Training	Additional training to understand logistics management system, waste tracking procedures, identification of non-conforming receptables and loading & unloading procedures.	On-going during first six months of employment
Production Team Member	On-the-Job Training	Additional training to understand waste tracking procedures, identification of non-conforming receptacles, identification of non-conforming waste, unloading procedures and equipment operation.	On-going during first six months of employment

4.3 Environmental incident and emergency response

4.3.1 Emergency procedures

The Med-X Pollution Incident Response Plan and Emergency Management Plan (see Appendix D) considers the safety of all people within and outside the facility who may be at risk from certain activities and includes the following:

- Contact details for emergency services[7]
- The location of on-site information on hazardous materials, including safety data sheets and spill containment materials[8]
- Procedures to minimise damage and to control an environmental incident or emergency[9]
- A process for notifying the Department, relevant government agencies, local councils and, if necessary, nearby residents[10].

The NSW Branch Manager is responsible to ensuring that procedures and practices for preventing and responding to emergency situations are implemented. The Chief Warden

[7] Refer to Section 4.2 of the Pollution Incident Response Plan and Emergency Management Plan
[8] Refer to Spill Control and Contamination Plan in the Pollution Incident Response Plan and Emergency Management Plan
[9] Refer to Emergency Situations Procedure in the Pollution Incident Response Plan and Emergency Management Plan
[10] Refer to Section 4.6.2 and 4.6.3 of the Pollution Incident Response Plan and Emergency Management Plan

is in charge of overseeing and controlling all emergency response actions on site. Control can also be delegated to the Warden in the event that the Chief Warden is unavailable.

The Pollution Incident Response Plan and Emergency Management Plan is reviewed by the NSW State Manager and the National Regulatory Manager once per year. Environmental incidents, near-misses and non-conformities with IMS procedures are documented and reported by staff that witness the issue to the Manager responsible to investigating the root cause of the problem.

4.3.2 Incident procedures

In the event of an incident, emergency and/or non-compliance occurring at the facility, the Planning Secretary must be notified in writing via the Major Projects website within seven days of an incident being identified. This notification is to include:

- The name and number of the development application
- Details of the incident:
    - Date
    - Time
    - Location
    - Brief description of what occurred
    - Why it is classified as an incident.
- How the incident was detected
- When Med-X became aware of the incident
- Actual or potential non-compliance with Conditions of Consent
- What immediate steps were taken
- Further action that will be taken
- Contact details for further communication regarding the incident.

Following the initial notification, an Incident Report is to be prepared and submitted to the Planning Secretary and other relevant public authorities within 30 days of an incident occurring (or as otherwise agreed by the Planning Secretary). This report will include:

- A summary of the incident
- Outcomes of the investigation into the incident, including identifying the cause
- A review of the emergency response performance
- Details of the corrective and preventive actions that have been or will be implemented to address the incident and prevent it occurring in the future
- Recommendations on methods or ways to improve the emergency response performance
- Details of any communications with other stakeholders regarding the incident.

4.3.3 Complaints

Customer and public complaints are received via corporate email inboxes. Complaints are continually monitored and measured to identify opportunities for improvement.

Customer complaints are collected using a customer feedback form and are processed by Management. All complaints are:

- Recorded and categorized to aid data analysis[11];
- Data is compiled by the Branch Manager; and
- Data is analysed and reviewed by the Management.

All documentation and records of complaints are retained and managed in accordance with the Control of Documented Information procedure and are recorded in a Complaint Log.

All public complaints received (either written or verbal) will be documented to record:

- Nature and extent of the complaint;
- Method by which the complaint was made;
- Name and address of the person lodging the complaint;
- Details of all related factors including location, dates, frequency, duration, site conditions and effects of the complaint; and
- Action taken to address the complaint including follow up contact with the complainant.

All complaints will be acknowledged as soon as practicable following receipt, and wherever possible within 24 hours. The Branch Manager, or their nominee, shall investigate and determine appropriate corrective/preventive actions to be taken to address complaints. The complainant will be informed in writing of the results of the investigation and action to be taken to rectify or address the matter(s). Where no action is taken the reasons why are to be recorded.

The Branch Manager will establish and maintain procedures for the collection, indexing, filing, storage and maintenance of site records. Archived complaints records will be kept in accordance with Med-X document control procedures.

4.3.4 Dispute resolution

In the event of a dispute with external parties[12], the following process will be undertaken:

- All communication is recorded and stored as per MXNATQMA110.10 IMS Procedure Communication & Participation;
- Consultation with subject specialists, insurance and/or legal representatives when determining position and legal standing if required;

[11] Information collected includes date of communication, name of person, address (if relevant), contact details, type of enquiry (e.g complaint), how communication was received and brief details of response.
[12] External parties can include Clients, HSE, EA, local authorities, or the general public.

- Communicate relevant information to the external party; and
- Log and maintain records of information released and subsequent action.

4.4 Corrective and preventative actions

In the event of an incident, emergency and/or non-compliance occurring at the facility, corrective and preventative actions will be taken to address those issues and minimise the risk of them occurring again in the future. Identifying opportunities for continual improvement outside of these incidents is also encouraged. The process used for continual improvement as mentioned in MXNATQMA110 26 IMS Procedure Continual Improvement includes:

- An analysis of what actions require improvement
- Implementation of changes to achieve improvement
- A review of the control and measurement changes and confirm alignment with Med-X policies, goals and requirements
- Adoption of or reaction to the changes made.

Consultation from customers (internal and external) and stakeholders, market research and analysis, staff feedback, audits and records of non-compliance will be used to identify areas requiring correction and improvement.

When an incident/emergency/non-compliance is identified, the National Legislation & Administration Manager is to contain the issue, determine the root cause and decide on the appropriate corrective action to be undertaken. The Branch Manager is responsible for controlling the corrective action procedure in liaison with the process owners and the actions taken are to be recorded in the Med-X Compliance systems.

The process for implementing and reviewing corrective actions are summarised in Figure 7.

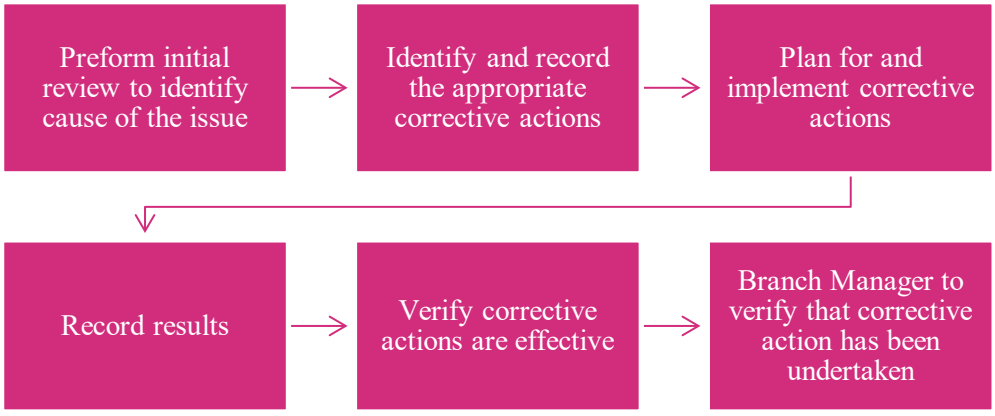

Figure 7: Implementation and review of corrective actions

4.5 Emergency contacts

Table 12 lists the Med-X emergency contacts for the facility.

Table 12: Med-X emergency contacts

Position	Name	Contact
Customer Service & Health & Safety	Patrick Liney	p. 1300 116 339 m. 0400 807 540 e. patrick.liney@med-xsolutions.com.au
Administration Manager	Belinda Craig	p. 1300 116 339 ext. 548 e. belinda.craig@med-xsolutions.com.au

4.6 Environmental management, reporting and auditing

Part C of the Conditions of Consent identifies the Environmental Management, Reporting and Auditing requirements for SSD 6761. These conditions are presented in Table 13. The timeline for all reporting and auditing requirements is summarised in Figure 8.

Relevant agencies will be informed about the operation and environmental performance of the facility as per the reporting requirements. Med-X will also provide updates regarding the environmental performance of the facility via their publicly available website with updates as required and reviews completed every six months.

Table 13: Environmental Management, Reporting and Auditing requirements

Condition REF	Condition	Timing / frequency	Comments / notes
ENVIRONMENTAL MANAGEMENT			
OPERATIONAL ENVIRONMENTAL MANAGEMENT PLAN			
C2	The Applicant must prepare an Operational Environmental Management Plan (OEMP) in accordance with the requirements of condition C1 and to the satisfaction of the Planning Secretary.	Prior to operation	Refer to Section 2.2 of this OEMP for further details
C3	As part of the OEMP required under Condition C2 of this consent, the Applicant must include the following: a) describe the role, responsibility, authority and accountability of all key personnel involved in the environmental management of the development; b) describe the procedures that would be implemented to: (i) keep the local community and relevant agencies informed about the operation and environmental performance of the development; (ii) receive, handle, respond to, and record complaints; (iii) resolve any disputes that may arise; (iv) respond to any non-compliance; (v) respond to emergencies; and c) include the following environmental management plans: (i) Air Quality Management Plan (see Condition B3); (ii) Waste Management Plan (see Condition B11); and (iii) Operational Traffic Management Plan (see Condition B20).	-	Refer to Section 3.5, 4.1, 4.3, 4.4 of this OEMP for further details Refer to Appendix A for AQMP Refer to Appendix B for WMP Refer to Appendix C for OTMP
C4	The Applicant must: a) not commence operation until the OEMP is approved by the Planning Secretary; and b) operate the development in accordance with the OEMP approved by the Planning Secretary (and as revised and approved by the Planning Secretary from time to time).	Prior to operation / on-going	Noted
REVISION OF STRATEGIES, PLANS AND PROGRAMS			
C5	Within **three months** of: a) the submission of a Compliance Report under condition C10; b) the submission of an incident report under condition C6; c) the submission of an Independent Audit under condition C12; d) the approval of any modification of the conditions of this consent; or	On-going / as specified	Noted

Condition REF	Condition	Timing / frequency	Comments / notes
	e) the issue of a direction of the Planning Secretary under condition A2(b) which requires a review, the strategies, plans and programs required under this consent must be reviewed, and the Planning Secretary must be notified in writing that a review is being carried out. 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 Planning Secretary. Where revisions are required, the revised document must be submitted to the Planning Secretary for approval **within six weeks** of the review.		
REPORTING AND AUDITING			
Incident Notification, Reporting and Response			
C6	The Planning Secretary must be notified in writing via the Major Projects website immediately after the Applicant becomes aware of an incident. The notification must identify the development (including the development application number and the name of the development if it has one) and set out the location and nature of the incident. Subsequent notification requirements must be given, and reports submitted in accordance with the requirements set out in Appendix 3 (of the Conditions of Consent).	On-going, as required	Refer to Section 4.3 of this OEMP for further details
Non-Compliance Notification			
C7	The Planning Secretary must be notified in writing to the Major Projects website within **seven days** after the Applicant becomes aware of any non-compliance.	On-going, as required	Refer to Section 4.3 of this OEMP for further details
C8	A non-compliance notification must identify the development and the application number for it, set out the condition of consent that the development is non-compliant with, the way in which it does not comply and the reasons for the non-compliance (if known) and what actions have been, or will be, undertaken to address the non-compliance.	-	
C9	A non-compliance which has been notified as an incident does not need to also be notified as a non-compliance.	-	
Compliance Reporting			
C10	Within **three months** after the first year of commencement of the development, and in the same month **each subsequent year** (or such other timing as agreed by the Planning Secretary), the Applicant must submit a Compliance Report to the Planning Secretary reviewing the environmental performance of the development to the satisfaction of the Planning Secretary. Compliance Reports must be prepared in accordance with the Compliance Reporting Post Approval Requirements (Department 2020) and must also: a) identify any trends in the monitoring data over the life of the development;	On-going, within three months after the first year of operation and in the same month every year after	

Condition REF	Condition	Timing / frequency	Comments / notes
	b) identify any discrepancies between the predicted and actual impacts of the development, and analyse the potential cause of any significant discrepancies; and c) describe what measures will be implemented over the next year to improve the environmental performance of the development.		
C11	The Applicant must make each Compliance Report publicly available no later than **60 days** after submitting it to the Planning Secretary and notify the Planning Secretary in writing at least **7 days** before this is done.	60 days after submission of each Compliance Report	Noted
Independent Audit			
C12	Within **one year** of the commencement of the development, and every **three years** after, unless the Planning Secretary directs otherwise, the Applicant must commission and pay the full cost of an Independent Environmental Audit (Audit) of the development. Audits must: a) be prepared in accordance with the Independent Audit Post Approval Requirements (Department 2020) b) be led and conducted by a suitably qualified, experienced and independent team of experts whose appointment has been endorsed by the Planning Secretary; and c) be submitted to the satisfaction of the Planning Secretary within three months of commissioning the Audit (or within another timeframe agreed by the Planning Secretary).	On-going, within one year after operation and every three years after	See AQMP (Appendix A), TMP (Appendix B) and WMP (Appendix C) for further Independent Auditing requirements
C13	In accordance with the specific requirements in the Independent Audit Post Approval Requirements (Department, 2020), the Applicant must: a) review and respond to each Independent Audit Report prepared under condition C12 of this consent; b) submit the response to the Planning Secretary and any other NSW agency that requests it, together with a timetable for the implementation of the recommendations; c) implement the recommendations to the satisfaction of the Planning Secretary; and d) make each Independent Audit Report and response to it publicly available no later **than 60 days** after submission to the Planning Secretary and notify the Planning Secretary in writing at least **7 days** before this is done.	60 days after submission of each Compliance Report	Noted
Monitoring and Environmental Audits			
C14	Any condition of this consent that requires the carrying out of monitoring or an environmental audit, whether directly or by way of a plan, strategy or program, is taken to be a condition requiring monitoring or an environmental audit under Division 9.4 of Part 9 of the EP&A Act. This includes conditions in respect of	-	Noted

Condition REF	Condition	Timing / frequency	Comments / notes
	incident notification, reporting and response, non-compliance notification, compliance reporting and independent auditing.		
ACCESS TO INFORMATION			
C15	At least **48 hours** before the commencement of operation, the Applicant must: a) make the following information and documents (as they are obtained or approved) publicly available on its website: (i) the documents referred to in condition A2 of this consent; (ii) all current statutory approvals for the development; (iii) all approved strategies, plans and programs required under the conditions of this consent; (iv) regular reporting on the environmental performance of the development in accordance with the reporting requirements 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; (vi) a summary of the current stage and progress of the development; (vii) contact details to enquire about the development or to make a complaint; (viii) a complaints register, updated monthly; (ix) the Compliance Report of the development; (x) audit reports prepared as part of any Independent Audit of the development and the Applicant's response to the recommendations in any audit report; (xi) any other matter required by the Planning Secretary; and b) keep such information up to date, to the satisfaction of the Planning Secretary.	48 hours prior to commencement of operation	Noted

Figure 8: Reporting and auditing requirements timeline

5 Monitoring programmes and review of the OEMP

5.1 Environmental monitoring

Environmental monitoring of the facility will be undertaken to achieve the following:

- Verification the environmental impacts predicted for the operation of the facility
- Verification of the effectiveness of environmental controls
- Implementation of the OEMP.

All data, processes, procedures and checklists for monitoring and reporting are stored on the Med-X IMS, including the legal and compliance requirements procedure. All sampling and waste classification data for the life of the development is retained in accordance with the requirements of EPA.

The Branch Manager is responsible for monitoring the effectiveness of all waste management measures and equipment on site and ensuring the implementation of the monitoring programmes. The National Compliance Manager is responsible for ensuring all monitoring programmes are compliant with relevant regulations and requirements.

Where relevant, the supporting management plans have included a monitoring program. These have been summarised in Table 14 below. For additional details refer to the Plan referenced.

Table 14: Monitoring program

Frequency	Aspect	Plan reference	Item	Type of inspection / Testing	Responsibility
Per treatment cycle	Waste	WMP	Autoclave Cart Limit	Waste Volumes – obtain records	Waste Operator Branch Manager
Weekly	Waste	WMP	Autoclave	Processing Efficacy	Branch Manager
Daily	Traffic	OTMP	Delivery log	Obtain records	Driver Logistics Manager
Daily	Traffic	OTMP	Vehicle Shift Log	Obtain records	Driver
Daily	Traffic	OTMP	Contingency Log	Obtain records	Driver Logistics Manager
Daily	Waste	WMP	Shredder	Validation	Branch Manager
Daily	Waste	WMP	Daily Storage on Site	Waste Volumes – obtain records	Waste Operator Branch Manager
Daily	Waste	WMP	Daily Receival / Processing Limit	Waste Volumes – obtain records	Waste Operator Branch Manager
Daily	Waste	WMP	Weigh Bridge	Calibration	Branch Manager
Weekly	Waste	WMP	Weigh Bridge	Validation	Branch Manager
Weekly	Waste	WMP	Annual Receival/ Processing Limit	Waste Volumes – obtain records	Waste Operator Branch Manager
Each quarter for the first year of operation under this approval	Air quality	AQMP	Field Odour Surveys	Testing	Branch Manager
Minimum every six months	Waste	WMP	Autoclave	Calibration	Branch Manager
Annually	Air quality	AQMP	Stack Testing	Testing	Branch Manager
Annually – biological indicator tests by NATA	Waste	WMP	Autoclave	Processing Efficacy and testing to determine waste classification	Branch Manager
In the event of an incident	Traffic	OTMP	Incident register	Obtain records	Logistics Manager

5.2 OEMP review

Annual reviews of the OEMP and the environmental performance of the facility will ensure the suitability and effectiveness of the environmental management measures implemented.

The OEMP will also be reviewed within three months of:

- The submission of an Independent Audit
- The approval of any modification of the Conditions of Consent
- The issue of a direction of the Planning Secretary which requires a review.

The inputs to the OEMP review process will include (but not be limited to):

- Internal and external audits findings
- Incidents management and investigation of non-conformance events, incidents, near misses and management of all complaints received
- Implementation of all compliance and legislative changes as identified at a corporate level
- Trend analysis on operational data.

If revisions are made to the OEMP, or other environmental strategies, plans and programs, a copy of the revised document must be provided to the Planning Secretary within six weeks, that identifies the key inputs and outputs of the review as well as the subsequent steps to be undertaken in the event that changes are made to the OEMP.

The review process is shown in Figure 9.

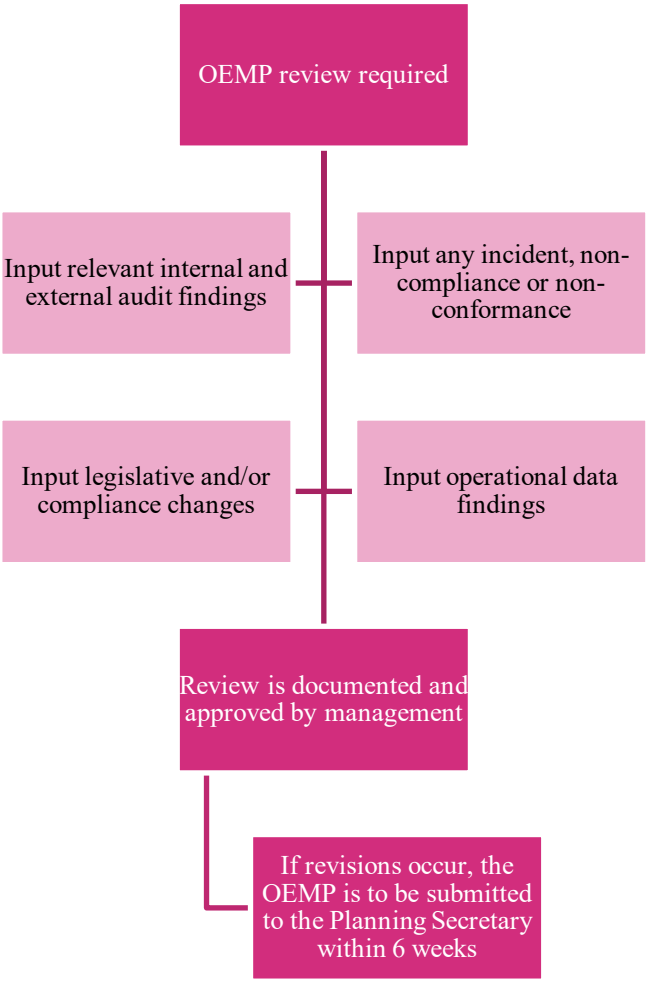

Figure 9: OEMP review process

6 Community and stakeholder engagement

Med-X is committed to meaningful stakeholder engagement and consulted with the following key stakeholders in relation to operation of the facility:

- DPIE (and the former DP&E)
- NSW Environment Protection Authority (EPA)
- NSW Roads & Maritime Services (RMS)
- NSW Health
- Blacktown City Council.

Consultation was also carried out with nearby commercial and industrial facilities as well as potentially sensitive residential receivers during preparation of the EIS for SSD 6761.

The Med-X Communication & Participation procedure aims to facilitate communication between Med-X and critical stakeholders, including the local community and relevant agencies.

Information about the environmental performance of the facility will be made available on the Med-X website. All communication with interested parties will be documented and recorded. Figure 10 below provides a systematic overview of this process.

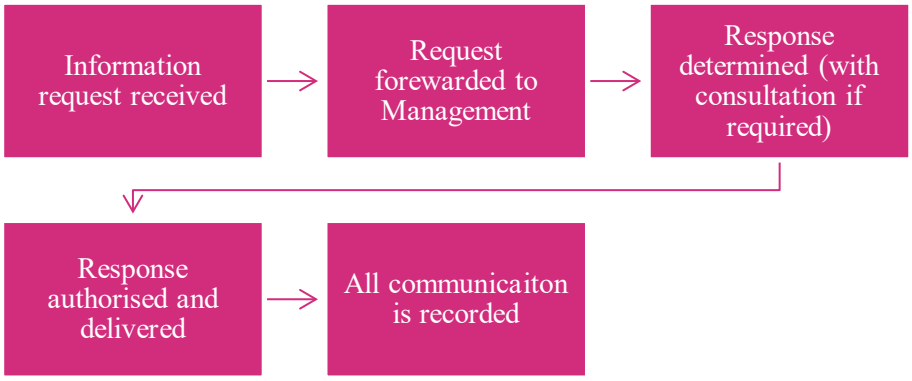

Figure 10: External communication procedure

Appendix A

Air Quality Management Plan

Appendix B

Waste Management Plan

Appendix C

Operational Traffic Management Plan

Appendix D

Environment Pollution Incident Emergency Plan

Appendix E

Site stormwater plan

Appendix F

Environmental risk assessment framework

Environmental risk assessment framework

The information below sets out a qualitative risk assessment methodology that can be applied to the identification of environmental risks associated with a wide range of projects. It is provided as an example of one approach to risk assessment. Further guidance on evaluating and managing risk can be found in AS/NZS ISO 31000:2018 Risk management—Guidelines (Standards Australia 2018).

Assessment of any risks at the facility would consider:

- Relevant planning and legislation requirements
- The environmental context of the site
- Existing operational and management plans and procedures at the site
- The findings of the specialist environmental studies undertaken during the EIS and RTS.

Likelihood and consequence

The list of activities to be carried out, including any activities undertaken by subcontractors or other suppliers, together with the actual and potential environmental impacts associated with each activity, must form the basis of a risk assessment process. Each environmental risk should be assessed in terms of the likelihood and consequence criteria in the tables below.

Likelihood	**Qualitative measure of likelihood (how likely is it that this event/issue will occur after control strategies have been put in place)**
Highly likely	Is expected to occur in most circumstances
Likely	Will probably occur during the life of the project
Possible	Might occur during the life of the project
Unlikely	Could occur but considered unlikely or doubtful
Rare	May occur in exceptional circumstances

Consequent	Qualitative measure of consequences (what will be the consequence/result if this issue does occur rating)
Minor	Minor incident of environmental damage that can be reversed
Moderate	Isolated but substantial instances of environmental damage that could be reversed with intensive efforts
High	Substantial instances of environmental damage that could be reversed with intensive efforts
Major	Major loss of environmental amenity and real danger of continuing
Critical	Severe widespread loss of environmental amenity and irrecoverable environmental damage

Risk Rating

The risk rating is determined using the likelihood and consequence rating and the below risk matrix.

	Consequence				
Likelihood	**Minor**	**Moderate**	**High**	**Major**	**Critical**
Highly likely	Medium	High	High	Severe	Severe
Likely	Low	Medium	High	High	Severe
Possible	Low	Medium	Medium	High	Severe
Unlikely	Low	Low	Medium	High	High
Rare	Low	Low	Low	Medium	High

Appendix G

Conditions of Consent