

NOTICE OF MEETING

Dear Committee Members

You are requested to attend the following meeting of Council.

WATER AND WASTE STANDING COMMITTEE MEETING OF ISAAC REGIONAL COUNCIL

TO BE HELD ON

WEDNESDAY, 9 JULY 2025

COMMENCING AT 1.00PM

COUNCIL CHAMBERS - MORANBAH

CALE DENDLE

Chief Executive Officer

SCOTT CASEY

Committee Officer

Director Water and Waste

Committee Members:

Cr Simon West (Chair)

Mayor Kelly Veale

Cr Vern Russell

Cr Rachel Anderson

Cr Viv Coleman

LOCAL GOVERNMENT ACT 2009

Local Government Regulation 2012

Chapter 8, Part 2 Local Government Meetings and Committees

Division 1A, Requirements for Local Government Meetings Generally

254J Closed meetings

- (1) A local government may resolve that all or part of a meeting of the local government be closed to the public.
- (2) A committee of a local government may resolve that all or part of a meeting of the committee be closed to the public
- (3) However, a local government or a committee of a local government may make a resolution about a local government meeting under subsection (1) or (2) only if its councillors or members consider it necessary to close the meeting to discuss one or more of the following matters—
 - (a) the appointment, discipline or dismissal of the chief executive officer;
 - (b) industrial matters affecting employees;
 - (c) the local government's budget;
 - (d) rating concessions;
 - (e) legal advice obtained by the local government or legal proceedings involving the local government including, for example, legal proceedings that may be taken by or against the local government;
 - (f) matters that may directly affect the health and safety of an individual or a group of individuals;
 - (g) negotiations relating to a commercial matter involving the local government for which a public discussion would be likely to prejudice the interests of the local government;
 - (h) negotiations relating to the taking of land by the local government under the [*Acquisition of Land Act 1967*](#);

- (i) a matter the local government is required to keep confidential under a law of, or formal arrangement with, the Commonwealth or a State;
 - (j) an investigation report given to the local government under chapter 5A, part 3, division 5 of the Act.
- (4) However, a local government or a committee of a local government must not resolve that a part of a local government meeting at which a decision mentioned in section [150ER](#)(2), [150ES](#)(3) or [150EU](#)(2) of the [Act](#) will be considered, discussed, voted on or made be closed.
- (5) A resolution that a local government meeting be closed must—
 - (a) state the matter mentioned in subsection (3) that is to be discussed; and
 - (b) include an overview of what is to be discussed while the meeting is closed.
- (6) A local government or a committee of a local government must not make a resolution (other than a procedural resolution) in a local government meeting, or a part of a local government meeting, that is closed.

254K Participating in meetings by audio link or audio visual link

- (1) A local government may allow a person to take part in a meeting of the local government by audio link or audio visual link.
- (2) A committee of a local government may allow a person to take part in a meeting of the committee by audio link or audio visual link.
- (3) A councillor or committee member who takes part in a local government meeting under subsection (1) or (2) is taken to be present at the meeting if the councillor or member was simultaneously in audio contact with each other person at the meeting.
- (4) In this section—

audio link see the [Evidence Act 1977](#), [section 39C](#).

audio visual link see the [Evidence Act 1977](#), [schedule 3](#).

**WATER AND WASTE
STANDING COMMITTEE MEETING
OF ISAAC REGIONAL COUNCIL
TO BE HELD ON
WEDNESDAY 9 JULY 2025
COUNCIL CHAMBERS, MORANBAH**

1. OPENING OF THE MEETING
 - 1.1 WELCOME
 - 1.2 ACKNOWLEDGMENT OF TRADITIONAL OWNERS
2. APOLOGIES AND LEAVE OF ABSENCES
3. DECLARATION OF CONFLICTS OF INTEREST
4. CONFIRMATION OF MINUTES
5. OFFICER REPORTS
6. GENERAL BUSINESS
7. CONCLUSION

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1. OPENING OF MEETING

2. APOLOGIES

- Cr Simon West – Leave of Absence

3. DECLARATION OF CONFLICTS OF INTEREST

4. CONFIRMATION OF MINUTES

Water and Waste Standing Committee Meeting of Isaac Regional Council held in the Council Chambers, Moranbah, commencing at 1:00pm on Wednesday 11 June 2025.

5. OFFICER REPORTS

5.1 WATER AND WASTE 2024-2025 CAPITAL PROJECTS PROGRESS REPORT

EXECUTIVE SUMMARY

This report aims to update the Water and Waste Standing Committee and Council on the delivery of the Water and Waste 2024/2025 Capital Works Program.

5.2 WATER QUALITY INVESTIGATION ACTION PLAN UPDATE - JULY 2025

EXECUTIVE SUMMARY

The purpose of this report is to update Council on the Water Quality Reliability Investigation Action Plan Deliverables following the 2021/22 Christmas Period water quality incidents and provide a summary of the current state of water quality security.

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5.3 BUSINESS SERVICES DEPARTMENTAL REPORT - INTEGRATED MANAGEMENT SYSTEM

EXECUTIVE SUMMARY

The purpose of this report is to provide an overview and status update on the Water and Waste (W&W) Directorate Integrated Management System (IMS).

5.4 WATER AND WASTE DEPARTMENTAL REPORT- WASTE SERVICES

EXECUTIVE SUMMARY

The purpose of this report is to provide an update to Council on the Waste Services Department within the Water and Waste Directorate.

CONFIDENTIAL REPORT

Closed under 254J(3) (b) industrial matters affecting employees;

5.5 ADDITIONAL FULL TIME EMPLOYEE – PROCESS ENGINEER

EXECUTIVE SUMMARY

The purpose of this report is to seek approval for the conversion of an external contract resource to an additional full-time employee in the position of Process Engineer.

This position will be responsible for improvement and optimisation of the water and wastewater treatment processes (ensuring they remain compliant with regulations), training staff, trouble-shooting process issues and developing work procedures to capture critical corporate knowledge.

There is a net cost saving from the conversion of this position from contract to a permanent position.

7. GENERAL BUSINESS

8. CONCLUSION

UNCONFIRMED MINUTES

WATER AND WASTE STANDING COMMITTEE MEETING OF
ISAAC REGIONAL COUNCIL

HELD ON
WEDNESDAY, 11 JUNE 2025
COMMENCING AT 1.00PM

ISAAC REGIONAL COUNCIL
UNCONFIRMED MINUTES OF THE
WATER AND WASTE
STANDING COMMITTEE MEETING
HELD IN COUNCIL CHAMBERS, MORANBAH
ON WEDNESDAY 11 JUNE 2025

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ISAAC REGIONAL COUNCIL
UNCONFIRMED MINUTES OF THE
WATER AND WASTE
STANDING COMMITTEE MEETING

HELD IN COUNCIL CHAMBERS, MORANBAH

ON WEDNESDAY 11 JUNE 2025 COMMENCING AT 1.00PM

ATTENDANCE

Cr Simon West, Division Four (Chair)
Cr Viv Coleman, Division Eight
Cr Vern Russell, Division Two
Cr Rachel Anderson, Division Seven (*Via Videoconference*)
Mayor Kelly Veale

**COMMITTEE
APOLOGIES**

Nil

OBSERVERS

Cr Alaina Earl, Division Five

OFFICERS PRESENT

Mr Scott Casey, Director Water and Waste
Mr Stephen Wagner, Manager Operations and Maintenance
Mr Jason Grandcourt, Manager Waste Services
Ms Lisa Tonkin, Manager Business Services (*via videoconference*)
Mr Amal Meegahawattage, Manager Planning and Projects
Ms Teika Kirkman, Executive Assistant, Office of the Mayor and Chief Executive Officer
Ms Carissa Rogers, Executive Assistant, Water and Waste Directorate

1. OPENING

The Chair welcomed all in attendance and declared the meeting open at 1.00pm and acknowledged the traditional custodians of the land on which we meet today and paid his respects to their Elders past, present and emerging.

2. APOLOGIES AND LEAVE OF ABSENCES

No apologies or leave of absence at this meeting.

3. DECLARATION OF CONFLICTS OF INTEREST

No conflicts of interests declared this meeting.

NOTE:

Council acknowledges that Chapter 5B Councillors' Conflicts of Interest of the Local Government Act 2009 does not apply to a Councillor if the matter to be resolved relates to a corporation or association that arises solely because of a nomination or appointment of the councillor by the local government to be a member of the board of the corporation or association.

4. CONFIRMATION OF MINUTES

Confirmation of minutes from Water and Waste Standing Committee Meeting of Isaac Regional Council held at Council Chambers, Moranbah, commencing at 1.00pm on Wednesday 14 May 2025.

Resolution No.: W&W0562

Moved: Cr Vern Russell

Seconded: Cr Kelly Vea vea

That the minutes from the Water and Waste Standing Committee meeting held in Council Chambers, Moranbah, commencing at 1.00pm on Wednesday 14 May 2025 are confirmed.

Carried

NOTE:

An amendment is to be made to Item 6.4 Middlemount Reuse Centre in general business, Middlemount is to be changed to Dysart.

ATTENDANCE

Mr Cale Dendle, Chief Executive Officer entered the meeting room at 1.06pm.

Cr Viv Coleman entered the meeting room at 1.06pm.

5. OFFICERS REPORTS

5.1 Water and Waste Directorate 2024/2025 Capital Projects Progress Report

EXECUTIVE SUMMARY

This report is to provide an update to the Water and Waste Standing Committee and Council on the progress of the delivery of the Water and Waste Directorate 2024/2025 Capital Works Program.

OFFICER'S RECOMMENDATION

That the Committee recommends that Council:

- 1. Receives and notes the monthly Water and Waste 2024/2025 Capital Projects Progress Summary Report.*

Resolution No.: W&W0563

Moved: Cr Vern Russell

Seconded: Cr Rachel Anderson

That the Committee recommends that Council:

1. Receives and notes the monthly Water and Waste 2024/2025 Capital Projects Progress Summary Report.

Carried

5.2 Materials Recycling Facility Processing Exceptions and Deviations

EXECUTIVE SUMMARY

The purpose of this report is to obtain ongoing approval to procure services for Processing of Recyclables as an exception to the competitive bidding requirements under s235 (a) and (b) of the Local Government Regulations 2012 for medium or large sized contractual arrangements.

OFFICER'S RECOMMENDATION

That the Committee recommends that Council:

- 1. Resolve it is satisfied that there is only one (1) supplier who is reasonably available that requires payment to supply services for processing and recycling of co-mingled recyclable waste due to the absence of other potential providers within reasonable travel distance of the Isaac Region**
- 2. Resolves that, because of the unique specialised nature of work involved in operating a Materials Recovery Facility (MRF), it would be impractical or disadvantageous for the local government to invite quote or tenders for an alternative replacement.**
- 3. Endorse the following exception to enter into medium or large contractual arrangements as per s235 of the Local Government Regulations 2012 until 28 February 2026:**

<u>Company</u>	<u>Service provided/engaged for delivery of</u>
Re.Cycle Operations (Mackay) Pty Ltd	Supplier of Services for processing of co-mingled recyclable waste in North Queensland

Resolution No.: W&W0564

Moved: Cr Viv Coleman

Seconded: Cr Rachel Anderson

That the Committee recommends that Council:

- 1. Resolve it is satisfied that there is only one (1) supplier who is reasonably available that requires payment to supply services for processing and recycling of co-mingled recyclable waste due to the absence of other potential providers within reasonable travel distance of the Isaac Region**
- 2. Resolves that, because of the unique specialised nature of work involved in operating a Materials Recovery Facility (MRF), it would be impractical or disadvantageous for the local government to invite quote or tenders for an alternative replacement.**
- 3. Endorse the following exception to enter into medium or large contractual arrangements as per s235 of the Local Government Regulations 2012 until 28 February 2026:**

<u>Company</u>	<u>Service provided/engaged for delivery of</u>
Re.Cycle Operations (Mackay) Pty Ltd	Supplier of Services for processing of co-mingled recyclable waste in North Queensland

Carried

5.3 Materials Recycling Facility Recovery Share Arrangement 2025-26

EXECUTIVE SUMMARY

This report seeks endorsement of the renewed 2025-26 Recovery Share Arrangement with the operators of the Materials Recycling Facility (MRF) currently used by Isaac Regional Council for the disposal of recyclable household waste, in order to receive a share of the Container Deposit Scheme (CDS) deposits from eligible containers which are collected via Isaac Regional Council's kerbside recycling collection service.

OFFICER'S RECOMMENDATION

That the Committee recommends that Council:

- 1. Approves entering into an agreement with Re.Cycle Operations (Mackay) Pty Ltd to enable Council to receive 50 per cent of the 10-cent refund on each qualifying container under the Container Refund Scheme for a further twelve-month period.*
- 2. Authorises the Chief Executive Officer to negotiate, execute and vary the agreement as required.*

Resolution No.: W&W0565

Moved: Cr Viv Coleman

Seconded: Cr Vern Russell

That the Committee recommends that Council:

- 1. Approves entering into an agreement with Re.Cycle Operations (Mackay) Pty Ltd to enable Council to receive 50 per cent of the 10-cent refund on each qualifying container under the Container Refund Scheme for a further twelve-month period.**
- 2. Authorises the Chief Executive Officer to negotiate, execute and vary the agreement as required.**

Carried

ATTENDANCE

Mr Chris Anderson, Capital Works Project Manager entered the meeting room at 1.37pm.

5.4 Waste Services Community Services Obligations

EXECUTIVE SUMMARY

The purpose of this report is to consider the treatment of Community Service Obligations for the Waste Services Department.

OFFICER'S RECOMMENDATION

That the Committee recommends that Council:

- 1. That the Amnesty Day be expanded with two Amnesty Days to be held each year, with one to be held on Saturday and the second day to be held on a Sunday 5 to 6 months later in the calendar year.*
- 2. That waste disposal fee waiving be introduced for Opportunity Shops.*
- 3. That Community Organisations be included as eligible for participation in the Amnesty Days.*
- 4. That support be expanded to Community Organisations by issuing four vouchers per annum per group, entitling the Community Organisation waste disposal fee waiving per transaction.*
- 5. That a report be provided to Council on Clean Up Australia Day for the August 2025 Ordinary Meeting.*

Resolution No.: W&W0566

Moved: Cr Vern Russell

Seconded: Cr Viv Coleman

That the Committee recommends that Council:

- 1. That the Amnesty Day be expanded with two Amnesty Days to be held each year, with one to be held on Saturday and the second day to be held on a Sunday 5 to 6 months later in the calendar year.*
- 2. That waste disposal fee waiving be introduced for Opportunity Shops.*
- 3. That Community Organisations be included as eligible for participation in the Amnesty Days.*
- 4. That support be expanded to Community Organisations by issuing four vouchers per annum per group, entitling the Community Organisation waste disposal fee waiving per transaction.*
- 5. That a report be provided to Council on Clean Up Australia Day for the August 2025 Ordinary Meeting.*

Carried

NOTE: *That a report be presented to Council outlining feedback, lessons learnt and amnesty dates for 2026 after the final amnesty day is held in December 2025.*

ATTENDANCE

Mr Anthony Earl, Consultant - Capital Works Project Manage entered the meeting room at 1.43pm.
Cr Alaina Earl left the meeting room at 1.50pm.

5.5 WATER AND WASTE DEPARTMENTAL REPORT – OPERATIONS AND MAINTENANCE

EXECUTIVE SUMMARY

This report provides an overview of the Operations and Maintenance Department's objectives, key functions, and a quarterly update of the activities of the Operations and Maintenance department.

OFFICER'S RECOMMENDATION

That the Committee recommends that Council:

- 1. Receives and notes the report outlining the Operations and Maintenance Department's activities within the Water and Waste Directorate.***

Resolution No.: W&W0567

Moved: Cr Kelly Ve a Ve a

Seconded: Cr Vern Russell

That the Committee recommends that Council:

- 1. Receives and notes the report outlining the Operations and Maintenance Department's activities within the Water and Waste Directorate.***

Carried

PROCEDURAL MOTION:

Resolution No.: W&W

Moved: Cr Viv Coleman

That the Committee closes the meeting to the public at 1.56pm under *Local Government Regulations 2012* Closed under 254J(3) (g) negotiations relating to a commercial matter involving the local government for which a public discussion would be likely to prejudice the interests of the local government and under 254J(3) (c) the local government's budget to receive a confidential

MEETING MINUTES

updates on Report 5.6 - Clermont Water treatment Plant Modernisation – Chemical Dosing, Report 5.7 - Water and Waste Review and Report 5.8 - Moranbah Waste management facility rehabilitation project - Cell #0.

Carried

PROCEDURAL MOTION:

Resolution No.: W&W0568

Moved: Cr Rachel Anderson

That the Committee resume the meeting at 2.39pm.

Carried

CONFIDENTIAL REPORT

Closed under 254J(3) (g) negotiations relating to a commercial matter involving the local government for which a public discussion would be likely to prejudice the interests of the local government.

5.6 CLERMONT WATER TREATMENT PLANT MODERNISATION – CHEMICAL DOSING

EXECUTIVE SUMMARY

The purpose of the report is to approve the transfer of additional funds from the Water and Waste Unallocated Depreciation 'Sewer' to CW233155 CLM WTP Plant Modernisation project, to provide sufficient budget funding and approve the award of the Contract to the preferred tenderer for the IRC-W&W-0924-T395 Clermont WTP Chemical Dosing Upgrade Design and Construct project.

OFFICER'S RECOMMENDATION

That the Committee recommends that Council:

- 1. Approves the transfer of \$450,000.00 from the Water and Waste Unallocated Depreciation 'Sewer' reserve funds to CW233155 CLM WTP Plant Modernisation project.***

2. **Approves the award of Contract IRC-W&W-0924-T395 Clermont WTP Chemical Dosing Upgrade Design and Construct to DOWDENS GROUP PTY LTD ABN – 87 154 375 685 for the value of \$1,448,936.00 excluding GST.**
3. **Delegates the authority to the Chief Executive Officer to negotiate, execute, and vary the contract.**

Resolution No.: W&W0569

Moved: Cr Kelly Vea Vea

Seconded: Cr Vern Russell

That the Committee recommends that Council:

1. **Approves the transfer of \$450,000.00 from the Water and Waste Unallocated Depreciation ‘Sewer’ reserve funds to CW233155 CLM WTP Plant Modernisation project.**
2. **Approves the award of Contract IRC-W&W-0924-T395 Clermont WTP Chemical Dosing Upgrade Design and Construct to DOWDENS GROUP PTY LTD ABN – 87 154 375 685 for the value of \$1,448,936.00 excluding GST.**
3. **Delegates the authority to the Chief Executive Officer to negotiate, execute, and vary the contract.**
4. **The Director provides a report regarding the replenishment of the reserve funds at the earliest opportunity.**

Carried

CONFIDENTIAL REPORT

Closed under 254J(3) (c) the local government's budget

5.7

WATER RATES REVIEW

EXECUTIVE SUMMARY

The purpose of this report is to present implementation activities and seek endorsement for the proposed changes associated to the review of the Isaac Regional Council (Council) fixed and consumption water charges including the associated rates for the 2026/27 financial year.

OFFICER'S RECOMMENDATION

That the Committee recommends that Council:

1. ***Endorses the proposed rates, charging methodology changes and implementation activities for the review of Isaac Regional Council's Water Access and Consumption Charges.***

Resolution No.: W&W0570

Moved: Cr Viv Coleman

Seconded: Cr Vern Russell

That the Committee recommends that Council:

- 1. Endorses the proposed rates, charging methodology changes and implementation activities for the review of Isaac Regional Council's Water Access and Consumption Charges.**

Carried

CONFIDENTIAL REPORT

Closed under 254J(3) (g) negotiations relating to a commercial matter involving the local government for which a public discussion would be likely to prejudice the interests of the local government.

5.8 MORANBAH WASTE MANAGEMENT FACILITY REHABILITATION PROJECT - CELL #0

EXECUTIVE SUMMARY

The purpose of this report is to provide Council with an early update on the procurement status of Contract IRC-W&W-0225-Q1394, relating to the Moranbah Landfill Cap Rehabilitation Project (Cell 0) at the Moranbah Waste Management Facility.

The tender for this design and construct (D&C) contract is currently open and scheduled to close on 17 June 2025. This report is presented for Council's information only and aims to provide context on the background, procurement process, and expected next steps. A full tender evaluation and contract award recommendation will be brought to Council once the assessment process is completed.

OFFICER'S RECOMMENDATION

That the Committee recommends that Council:

- 1. Notes the information provided in this report regarding the Moranbah Landfill Cap Rehabilitation Project (Contract IRC-W&W-0225-Q1394)**
- 2. Notes that a further report, including a contract award recommendation, will be presented to Council following the tender evaluation process.**

MEETING MINUTES

Resolution No.: W&W0571

Moved: Cr Rachel Anderson

Seconded: Cr Vern Russell

That the Committee recommends that Council:

- 1. Notes the information provided in this report regarding the Moranbah Landfill Cap Rehabilitation Project (Contract IRC-W&W-0225-Q1394)**
- 2. Notes that a further report, including a contract award recommendation, will be presented to Council following the tender evaluation process.**

Carried

6. GENERAL BUSINESS

There is no general business at this meeting.

7. CONCLUSION

There being no further business, the Chair declared the meeting closed at 2.42pm.

These minutes will be confirmed by the Committee at the Water and Waste Standing Committee Meeting to be held on Wednesday 9 July 2025 in Moranbah.

.....
CHAIR

..... / /
DATE

MEETING DETAILS

Water and Waste Standing Committee Meeting

Wednesday 9 July 2025

AUTHOR

Amal Meegahawattage

AUTHOR POSITION

Manager Planning and Projects

5.1 WATER AND WASTE 2024-25 CAPITAL PROJECTS PROGRESS REPORT

EXECUTIVE SUMMARY

This report aims to update the Water and Waste Standing Committee and Council on the delivery of the Water and Waste 2024/25 Capital Works Program.

OFFICER'S RECOMMENDATION

That the Committee recommends that Council:

1. *Receives and notes the monthly Water and Waste 2024/25 Capital Projects Progress Summary Report.*

BACKGROUND

Regular updates on the financial and physical status of projects within the 2024/25 Water and Waste Capital Works program are crucial to keep Council informed about the program's progress and associated risks.

IMPLICATIONS

The attached Water and Waste 2024/25 Capital Projects Progress Summary provides an overview of the financial and physical status of all projects, with red indicating a projected cost overrun of over 10% or completion after June 2025, yellow indicating a cost overrun of 0-10%, and green indicating no issues. Brief commentary is provided to explain the status of each project. Larger and more complex projects are sometimes delivered over multiple financial years and the exact expenditure in each year may deviate from the annual budget due to variations in the delivery schedule. This can affect expenditure in each year without exceeding the total budgeted amount for the project.

COMPLIANCE

Compliance with the Water and Waste 2024/25 Capital Works Program is essential to meet the identified timeframes of the 2024/25 financial year.

KEY CAPITAL PROJECTS

1. CW222983 – Moranbah Water Treatment Plant Roof Replacement

This project involves replacing the roof of the 5.7ML water reservoir to protect the structure and extend its service life. The installation of the expansion seal gasket was completed in early May. During partial filling of

the remediated reservoir, a couple of minor leaks and several other defects were identified. The contractor has rectified outstanding items, however the leaks continue. They will return to site once Boby WTP is operating as water needs to drain through reservoir until it meets drinking water standards. The project is nearing completion; however, practical completion will not be issued until all defects have been resolved to Council's satisfaction.

2. CW233155 – Clermont Water Treatment Plant Modernisation

This upgrade is essential to ensure the water supply continues to meet safe drinking water standards. In September 2024, the turbidity monitoring equipment was replaced with new analysers that meet current national testing requirements. The associated control panel upgrade has also been completed.

The next stage involves upgrading the chemical dosing system through a Design and Construct contract. Tender evaluation has been completed, and while the preferred contractor has revised their offer to reduce costs by approximately \$200,000, the total project cost still exceeds the available budget.

To proceed, an additional \$1 million in funding is required. Of this amount, \$500,000 has already been included in the ongoing PAG process across the next two financial years and the remaining \$500,000 has been approved by Council under a separate Council resolution.

A meeting with the funding agency was held on 14 May to discuss delivery options. The agency confirmed that the completion deadline cannot be extended, but has suggested dividing the project to allow a portion of the works to be completed under the funding agreement to achieve the \$700,000 forecast project spend. The remaining works will need to be funded by Council, with full project completion now expected by mid-2026.

3. CW243181 – Moranbah Sewer Pump Station Upgrades

This project aimed to improve the capacity and operational efficiency of the Moranbah Sewer Pump Station. The construction contract was awarded in July 2024, and a new non-return valve (NRV) was successfully installed in early April 2025. The project has now reached completion.

Separately, the condition of another existing NRV at the site is currently being assessed to determine whether remediation is feasible. Any associated costs will be covered under the CORP emergent works program.

4. CW243205 – Moranbah Rectification of Landfill Cell

This project aims to stabilise and rectify the Moranbah landfill cell to ensure ongoing compliance with environmental regulations. Geotechnical options were delivered by a specialist consultant in January 2025. Following consultation with the Director of Water and Waste, the Waste Management Department, and Governance, the Planning and Projects team proceeded to close out the geotechnical engagement.

The Project Management Consultant has since been engaged to assist with the tendering process for a Design and Construct contract. The tender was released in late May and is scheduled to close on 8 July 2025, with evaluation to commence shortly thereafter.

5. CW243185 – Moranbah Recycled Water Network

This multi-stage, multi-year project aims to improve recycled water management through the construction of new mains, staged irrigation infrastructure, and the installation of portable evaporators. Design works along Sarchedon Drive and Tallon Street are progressing.

Community consultation was undertaken in late April with local businesses, residents, and Councillors with good engagement with representatives from the local sporting clubs.

Design work by the appointed consultant commenced in February 2025. Site surveys were delayed due to wet weather but were completed in March. These delays affected resource planning, contributing to setbacks in finalising the design. The final design is now expected by July 2025, with Stage 1 construction scheduled for completion by January 2026.

Procurement planning for portable evaporators is ongoing, with unit costs ranging between \$300,000 and \$1.1 million. Initial site inspections in Mt Morgan raised concerns about noise levels associated with some models. Further evaluations, including a planned visit to Biloela, are being undertaken to assess alternative options.

6. CW243239/CW243240 – Carmila and Greenhill Landfill Capping

These two projects aim to ensure compliance through capping works at the Carmila and Greenhill landfill sites. Additional funding was allocated in the Quarter 2 budget review to support the completion of geotechnical testing and remaining design activities, ensuring all documentation was finalised within the current financial year. The subsequent design review resulted in a reduced project scope and an anticipated cost saving of approximately \$200,000 compared to earlier estimates. The design consultant has now finalised the aftercare plan, and all design documentation is complete.

7. CW253266 – Dysart Waste Management Facility Repurpose to Transfer Station

This project involves repurposing the Dysart landfill into a transfer station. An initial Design and Construct tender received a compliant but over-budget submission, with a subsequent bid also exceeding available funding. Following consultation with Waste Services, the project scope was revised to complete only the design component in the 2024/25 financial year, with construction deferred to 2025/26. The design contract was awarded in March 2025, with the design now completed by the consultant and approved by IRC. An amount of \$525,000 was carried forward as part of the Quarter 2 budget adjustment.

8. CW253273 / CW253274 – Carmila and St Lawrence Water Treatment Plant Upgrades

These multi-year projects will upgrade the chemical dosing, monitoring infrastructure and SCADA systems at the Carmila and St Lawrence Water Treatment Plants. Planning commenced in July 2024, with initial site investigations now completed. The Operations Team is finalising the Project Requirements document.

Both upgrades will be bundled into a single Design and Construct contract with separable portions. Procurement documentation is being updated to offer greater flexibility for respondents, with the aim of achieving value-for-money outcomes that meet project requirements. This approach follows learnings from the Clermont WTP project in 2024, where responses significantly exceeded forecast cost and time expectations.

Most project funding was rescheduled as part of the Quarter 2 budget adjustment to align with construction activities scheduled for Q1–Q3 of the 2025/26 financial year.

9. CW253275 – CORP Sewer Relining 2025

This project involves CCTV inspection and relining of targeted segments of the sewer network. The contract was awarded in January 2025. CCTV surveying commenced in late March and is currently underway, with 27km completed out of the targeted 35km. The footage is now with the Operations Team for review to confirm the final scope for relining works.

An amount of \$600,000 was carried forward into the 2025/26 financial year to undertake the relining component. The contract spans three years, allowing for staged delivery of the works.

To ensure that the relining work is targeted to provide best value for money a three-month review period was included into the tender documents to allow the Operations Team to undertake a comprehensive review of the CCTV footage provided.

10. CW253282 – CORP Water Network Water Meters

This project involves replacing outdated water meters to improve billing accuracy and water consumption tracking. All 450 meters have now been replaced, completing the scope of works. Project has been finalised.

11. CW253287 – Glenden Water Treatment Plant Turbidity Analyser on Filters

This project involves installing turbidity analysers on the filters at the Glenden Water Treatment Plant to enhance water quality monitoring and ensure regulatory compliance. The contract was awarded in February 2025. Installation of the Turbidity Analysers is complete and practical completion was achieved in late June.

12. CW253290 – Middlemount Water Network Augmentation

This project involves installing a new water main in Middlemount, with a drainage component along Nolan Drive included as a separable portion. The contractor has completed water main location activities and has cleared the alignment. All drainage construction works has been completed. Water Main installation is underway, adjacent to MMT WTP. Works are scheduled to conclude in the 2025/26 financial year.

13. CW253283 – CORP Switchboards

This project targets the replacement of ageing switchboards to improve operational reliability and ensure compliance. All works have been completed and practical completion has been achieved.

14. CW253277 – Moranbah Water Treatment Plant West & East High Lift Pumps

This project addresses the poor condition of existing pumps at the Moranbah Water Treatment Plant by remediating the pump station and associated infrastructure. The works aim to improve the resilience of the water supply system and reduce the risk of service interruptions.

Overnight works were successfully carried out on 21 May 2025 as part of the West High Lift Pump Station remediation. Key components, including a split case pump, gate valves, and a non-return valve, were removed and replaced using a crane through the pump station roof. The diesel pump motor was also relocated to enable on site remediation. Comprehensive planning and coordination ensured all operators, plumbers, and contractors were properly briefed, risk controls were in place, and contingency materials were available. Water supply was restored from the West Tower Pump Station by 11:00 pm with no public complaints, and the works were completed well within the scheduled timeframe. The skill of the crane operator and effective collaboration between Council staff and contractors were critical to the successful outcome.

Following completion of these works, preparation will commence for the remediation of the East Tower diesel pump.

15. CW253278 – Moranbah WTP Drinking Water Compliance

This project involves installing Turbidity Analysers to the filters on the Bobby Plant and Main Plant at Moranbah Water Treatment Plant to enable automatic backwashing as part of the filter upgrade project. This aims to improve performance at the Moranbah Water Treatment Plant.

All Turbidity Analysers have been installed at both the Bobby Plant & the Main Plant now, and commissioning is complete on both plants. Operator training has also been completed on Main Plant. Awaiting operations to run Bobby Plant which is pre-commissioned so training can be conducted. As-constructed drawings & manuals to be provided by supplier prior to practical completion of project.

PROGRESS PHOTOS







Image 1: Moranbah WTP Drinking Water Compliance – Installed Turbidity Analysers on Main Plant



Image 2: Moranbah WTP Drinking Water Compliance –Installed Turbidity Analysers on Bobby Plant



Image 3: Middlemount WN Augmentation – Plinths for above-ground water mains DICL



Image 4: Moranbah Pump Station 01 – Pump 1 replacement & transfer to Mackay to repair; tape jammed in impeller



Image 5: Moranbah Water Treatment Plant East Tower Pump Station – diesel motor & pump removal



Image 6: St Lawrence Water Storage & Raw Water Main – remediation on Raw Water Main pipe at pump station

BENEFITS

Council can see a monthly progress report detailing the progress of projects in the Water and Waste 2024/25 Capital Program. This report communicates risks, failures and delays that have been identified within the Water and Waste 2024/25 Capital Works program.

CONSULTATION

- Director Water and Waste
- Manager Operations and Maintenance
- Manager Waste Services
- Planning and Projects Capital Works Project Managers

BASIS FOR RECOMMENDATION

To provide Council with a clear monitoring tool to track capital works delivery for the Water and Waste Directorate by providing transparent and relevant reporting. This report will help identify and communicate any project delays, overspends and project risks.

ACTION ACCOUNTABILITY

The Managers and the Director of Water and Waste oversee the scoping, procurement, and completion of the projects identified within the 2024/25 Capital Projects Progress Summary spreadsheet. Furthermore, the appropriate Managers and the Director Water and Waste are held accountable for the delivery of the project stages which are completed within the identified timeframes.

KEY MESSAGES

That Council has open communication, oversight, and transparency of the Water and Waste 2024/25 Capital Works Program, to ensure Isaac will have effective and sustainable water and waste infrastructure that supports the needs of the region's communities and economic sectors.

Report prepared by:

AMAL MEEGAHAWATTAGE
Manager Planning and Projects

Date: 25 June 2025

Report authorised by:

SCOTT CASEY
Director Water and Waste

Date: 1 July 2025

ATTACHMENTS

- CONFIDENTIAL Attachment 1 – W&W Capital Projects Progress Summary Spreadsheet June 2025

REFERENCE DOCUMENT

- Nil

PAGES 31 TO 32 HAVE INTENTIONALLY BEEN REMOVED DUE TO CONFIDENTIAL REASONS

MEETING DETAILS

Water and Waste Standing Committee Meeting

Wednesday 9 July 2025

AUTHOR

Scott Casey

AUTHOR POSITION

Director Water and Waste

5.2

WATER QUALITY INVESTIGATION ACTION PLAN UPDATE - JULY 2025

EXECUTIVE SUMMARY

The purpose of this report is to update Council on the Water Quality Reliability Investigation Action Plan Deliverables following the 2021/22 Christmas Period water quality incidents and provide a summary of the current state of water quality security.

OFFICER'S RECOMMENDATION

That the Committee recommends that Council:

- 1. Receives and notes the update report for the Water Quality Investigation Action Plan Deliverables.***
- 2. Receives future updates through exception reporting.***

BACKGROUND

Over the Christmas/New Year period 2021/2022 there were water quality incidents in four (4) townships across the Isaac Region: Clermont, St Lawrence, Middlesbrough and Moranbah. Each of these caused disruption, and impacted the water supply service levels experienced by those communities. Each incident had a separate timeline, and each was found to have multiple interconnected contributing factors, with some being systemic and having the potential to impact the delivery of services across the region.

The Chief Executive Officer (CEO) of Isaac Regional Council (IRC) at the time committed to a thorough investigation into the incidents. The terms of reference (TOR) for the investigation were approved by Council and an internal investigation was conducted which was peer reviewed by an independent third-party consultant.

The report used a robust methodology which included mind maps and the PEEPO (People, Environment, Equipment, Procedure, Organisation) data collection tool. An independent consultant was then engaged to conduct a peer review to validate the methodology and review and expand upon the investigation's findings.

Arising from the investigation, an action plan was prepared and presented to Council with the Water Quality Investigation Report received and acknowledged, and the Water Quality Investigation Report Action Plan endorsed at the November 2022 Ordinary Meeting (refer resolution number 8126). As part of the resolution a regular report was requested to be presented to Council on the progress against the action plan deliverables.

Since that resolution (8126) officers have provided quarterly reports to Council on the progress against the action plan. Many of the interventions included in the action plan have either been completed or have now been incorporated into the normal operations of water service provision.

This current report evaluates the impact of the water quality action plan over the past 30 months and the current risk to water quality across the region.

IMPLICATIONS

After the water quality incidents in 2021/22 had been resolved there remained a residual risk of a reoccurrence, and it was clear from the subsequent investigation that there was no single solution which would entirely remove the risk of such water supply interruptions. The investigation report gave rise to a plan which set out a suite of actions to address the root causes of the water quality events (see Attachment 1).

The action plan contained both short term interventions and actions that formed part of a longer-term strategy. Some of the short-term interventions such as the replacement of failed equipment have already had an impact on the likelihood of a reoccurrence but will not eliminate it entirely. Expected delivery dates were identified in the action plan so that progress could be tracked and effectively managed. It should be noted that implementation of the recommended actions has taken a significant commitment from the Water and Waste management team and Isaac Regional Council. Some of the identified actions have concluded and some have become business as usual (BAU) activities and as such are also considered complete.

Current Status of the Action Plan Implementation:

To May 2025 the progress in delivery of the Water Quality Action Plan can be summarised as follows:

STATUS	APRIL 2024	JULY 2024	OCTOBER 2024	JANUARY 2025	MAY 2025
Actions Complete	20*	22*	23*	26*	30*
Previously Completed Actions removed from PLAN	-	-	21	23	23
Action On - Track	17**	15**	14**	10**	7**
Action Needs Improvement	0	0	0	0	0
Action Yet to Commence	0	0	0	0	0
Ongoing	0	0	0	1	0

* Where actions have become embedded as business-as-usual activities they have been considered as complete.

** Some of the identified actions are scheduled to be delivered over several years.

A more detailed breakdown of the progress of the action plan is shown in detail in Attachment 1 - Water Quality Investigations Action Plan - Update – May 2025.

Overview of Contributing Factors:

In total there were 37 identified factors that contributed to the water quality events that occurred in 2021/2022 but these individual factors were also grouped into 10 broad categories requiring attention:

- System Documentation / Knowledge Management
- SCADA
- Escalation Processes
- Ineffective alarms
- Loss of long-term knowledge – staff turnover
- Process robustness
- Review plant bench monitoring equipment
- Asset management
- Workplace Culture
- Drinking Water Quality Management Plan

Since the action plan was adopted by Council in November 2022 significant progress has been made in all of these categories, to the point where the root causes of the 2021/22 water quality events have been resolved, or have been integrated into normal operating practice.

To demonstrate this position, each category will be evaluated in turn and the completed actions and improvements shown.

SYSTEM DOCUMENTATION / KNOWLEDGE MANAGEMENT

In this category there were seven (7) action items:

- Review existing operational documentation to identify gaps.
- Develop specific SOPs for lab testing procedures (specific to the instrumentation that is at the sites).
- Document procedure for how to respond to changing raw water quality etc.
- Review processes, identify gaps or processes that would provide more robust response to variability in raw water quality. Consider what additional monitoring (including on-line) to provide early warning or automated process changes.
- Ensure one updated operation and maintenance manual exists for each plant with the manuals all being consistent in format to enable operators from other plants to easily find information.
- Ensure manuals are electronic enabling search mechanisms to quickly find relevant information.
- Review processes, identify gaps or processes that would provide more robust response to variability in raw water quality.

Status:

The documentation of operational process at our WTPs has been significantly improved through the update of site-specific operations manuals.

Coupled with process audits at all sites and a review of the Drinking Water Quality Management Plan (DWQMP), the system documentation and knowledge capture is much more robust. These improvements have then been incorporated as part of the Water and Waste (W&W) Integrated Management System (IMS) which was recertified in May 2025 against the current ISO standards for health and safety, quality and environmental international standards.

Risk level - LOW

- The introduction of enhanced documentation has improved consistency and allows for formal review and continuous improvement to work procedures.
- Improvements and standardisation of the laboratory equipment has improved the ability of the operators to monitor water quality.
- Process audits have identified gaps which have been included in the budgeting process.
- DWQMP has been reviewed.
- Improvements have been captured as part of the IMS.

Specific Improvements:

- Operational checklists have been developed for use at all WTPs.
- Documentation requirements integrated into individual Capital Project specification. Ongoing integration into IMS procedures and capital project framework.
- Operators are using new Hach Laboratory testing equipment and new Work instructions have been written to assist operators in achieving accurate and repeatable laboratory testing.
- IMS standard operating procedure (SOP) for “Response to Changing Raw Water Quality” has been approved and available through Iris. SOP was presented at Operators monthly meeting. Going forward the SOP shall be reviewed periodically as per IMS processes.
- A review of the DWQMP including process audits was completed in 2023 and refreshed the Risk Management Improvement Program (RMIP) identifying gaps and improvements prioritised on a risk minimisation basis which have been progressed through the budgetary process.
- Site specific process audits have been conducted for all sites.
- Process audit template developed and included in BAU.
- Operations team included in development of user requirements specification (URS) as part of BAU.
- Chemical dosing requirements developed for Clermont WTP which form the basis of a general technical specification for Isaac chemical dosing requirements.
- Updated operations manuals water treatment plants (WTP) at MMT, DYS, MBH and NBO have been developed. CAR and STL manuals will be prepared as part of the WTP upgrade projects in FY2526.
- Capture of operations manuals has been incorporated into BAU processes as part of the Integrated Management System (IMS).

Further Recommendations:

- Recommend a Technical Standard for documentation is produced, that is released with all capital project tenders.

SCADA

In this category there were eight (8) action items:

- Complete SCADA strategy.
- Consider having a “Head Office” SCADA that receives alarms for all important operation sites.
- Ensure the SCADA system can be remotely accessed by authorised personnel.
- Review who our authorised personnel will be.
- For sites that do not have SCADA – how do we get those sites accessible.
- Ensure the SCADA system has the capability to put logic to alert discrepancies when variance between actual and recorded information is detected.
- As part of the SCADA strategy development review systems and processes to identify gaps in monitoring and control. Ensure there is sufficient on-line instrumentation for monitoring key water quality parameters including Critical Control Points (CCPs). Related to this, there is a need to ensure there is sufficient control of the plant, such as plant shutdowns on breaches of CCP limits.
- The strategy should consider installing instrumentation to monitor raw and treated water quality.

Status:

The roll out of the SCADA project across all WTPs is now well underway. The SCADA standard has been developed in conjunction with Mackay and Whitsunday Regional Councils as part of the WIM Regional Water and Waste Alliance. This will provide not just a standardised “look and feel” across all Isaac sites but across the complete Greater Whitsunday area.

The upgrade of hardware and software including transition to the ClearSCADA system has been completed at CLM WTP and is underway at GLN and NBO with CAR and STL to follow in FY2526 as part of the WTP upgrades in those towns.

Risk level – MED / LOW

The progressive upgrade to SCADA infrastructure across the Isaac region will improve the visibility of our treatment plants and enhance the ability to remotely control our assets. The improved alarming capability and greater data availability will also reduce our risk of both future water quality incidents or water service interruptions.

Specific Improvements:

- Council endorsed the SCADA strategy for W&W.
- A centralised SCADA viewing station has been included as part of the overall SCADA capital project.
- Remote access to the SCADA system has been reviewed and access levels refreshed.
- Annual reviews of authorised personnel are embedded as BAU with reminders through Lucidity.
- A multi-year capital program is underway to upgrade Council’s SCADA capability. CLM WTP has received an upgrade and contracts have been awarded for NBO WTP and GLN WTP. CAR and STL will be upgraded in FY25/26 with projects already budgeted for and upgrades at the remaining sites are included in the 10-year capital program.
- Monitoring and control gaps have been identified as part of the treatment process reviews, resulting in equipment lists being compiled.
- External process audits have been completed and Critical Control Points (CCPs) have been reviewed. Subsequent site-specific risk assessments have been completed and findings included in the DWQMP Risk Management Improvement Program (RIMP).

- A general technical specification for chemical dosing requirements has been developed which have then been used to inform WTP upgrade projects such as CAR WTP and STL WTP. Specification for CAR, STL, CLM, GLN, NBO, MBH are complete with only MMT and DYS outstanding. The remaining two sites will be completed as part of the WTP upgrade projects in those townships.
- Process audits have now been included as a source of “need” in the identification of capital investment requirements. This approach is now part of BAU.

ESCALATION PROCESSES

In this category there were five (5) action items:

- Ensure staff receive CCP response refresher training.
- Consider undertaking the Water Industry Training Package Unit of Competency NWPGEN017.
- Display the CCP limits and response plans in each plant in poster form so levels are clearly understood by any operator working in the plant. Council should review these CCP responses and limits to ensure they are in line with ADWG guidelines.
- Review emergency response/escalation procedures. Review existing procedures and identify gaps (e.g. Business Continuity Plans, Raw Water Quality Changes due to rain/drought/fires/etc).
- Conduct mock incident response to these incidents, including significant incidents that require escalation and potentially need the formation of an incident response team such as boil water alert or involvement of emergency services, etc as a means of training staff.

Status:

A significant amount of work has gone into the overhaul of the CCPs for the treatment plants. This has been aligned with the process audits to confirm what CCPs are required and has been supported by regular training sessions with the operators. The revised CCP information has also been record in the DWQMP for each site which was reviewed and approved by DLGWV in 2023.

Risk level – LOW

Specific Improvements:

- Critical Control Point (CCP) review completed.
- CCP A3 signage on each site laboratory wall and training carried out at Dec 2022 Treatment Plant Operators Meeting.
- CCPs set up on traffic light charts with actions and reporting clearly defined.
- Operator training completed on CCPs on an annual basis including the need to escalate issues to supervisory staff.
- Department of Resource Development Manufacturing and Water (DRDMW) presented to Operations and Maintenance team meeting on events and incident reporting.
- Transition to SWIMS (Statewide Information Management System) has been completed and triggers SMS alerts for out of spec inputs.
- Automation changes are ongoing to minimise nuisance alarms to ensure shutdown interlocks are reinstated for CCPs.
- A flow chart has been produced to guide operators in requirements related to a breach in target or critical limits.
- A work instruction has been drafted that outlines responsibility and response during drinking water quality incidents.

- Mock trial schedule is in place as part of BAU. Mock trials were carried out at Monthly Operator meetings in November and December 2022 to prepare for incidents relating to water quality. Annual process reviews are conducted with operators on how to manage and respond to water quality identified issues.
- IMS surveillance audits are scheduled at multiple sites each year.

INEFFECTIVE ALARMS

In this category there were three (3) action items:

- Implement Critical Operating Point (COP) limits in the water supply network, covering low and high limits for free chlorine.
- Consolidate results from on-line instruments, on-site tests and external NATA lab into one database with results alarmed if discrepancies are identified.
- Automatically calculate trends and alert before critical levels are reached.
- Consider the inclusion of regular reservoir inspections to check integrity. Develop a program of inspection/cleaning.

Status:

The completion of the duplicate water main in MMT will address the main cause of the low chlorine event in 2021/22. More broadly the implementation of the SWIMS system across all treatment plants will allow better data analysis by the operators and provide alarms as measured parameters go outside of their normal operating range.

Risk level – MED / LOW *

**On completion of the capital works project in MMT the risk level should be reduced to LOW.*

Specific improvements

- Construction of the duplicate water trunk main in MMT to address the low free chlorine issues experienced in 2021/22 is underway.
- A specific work instruction is in use for managing network chlorine levels in Middelmount until the water truck main is completed.
- Review of CCP's within the DWQMP review and training of staff of these CCP's has uplifted the knowledge of the team to identify a non-compliance CCP.
- The development of online SWMS reporting through Qld Water Directorate dashboard has the capability to alarm to supervisors if a CCP has been entered that is out of scope. This is currently being rolled out and training provided to the operators.
- Reservoir cleaning and inspection program has been included in the preventive maintenance program and is considered part of BAU.

LOSS OF LONG-TERM KNOWLEDGE – STAFF TURNOVER

In this category there were five (5) action items:

- Review existing operator worksheets to ensure all relevant tasks are included. Also review the frequencies of those tasks to ensure that changes are identified to ensure responses to changes are actioned before they become a problem.

- Ensure there is sufficient information available for staff who are not fully conversant with the plant to be able to effectively complete the tasks on the worksheets.
- Competency review/audit – to ensure the employee understands the process.
- Ensure one updated operation and maintenance manual exists for each plant with the manuals all being consistent in format to enable operators from other plants to easily find information.
- Ensure manuals are electronic enabling search mechanisms to quickly find relevant information.

Status

The ongoing improvements to documentation and knowledge capture coupled with recording and training through the IMS have gone a long way to address the loss of knowledge. Through the recent IMS recertification audit it was noted that all staff were engaged. This engagement and the IMS framework act to retain corporate and operational knowledge.

Risk level – MED / LOW

Specific improvements

- Daily log sheets have been improved for CLM WTP and STL WTP.
- Operational monitoring revised within the DWQMP Review.
- WTP checklists improved by Integrated Management System (IMS).
- Transition to the Statewide Water Information Management System (SWIMS).
- Blue Green Algae (BGA) Management Plan updated.
- WTP log sheets updated to align with 2023 DWQMP.
- Resource allocated in organisational structure to facilitate move to Statewide Information Management System (SWIMS).
- Training of staff in the capture and recording of water data is ongoing.
- Operations and Maintenance team have developed an onboarding checklist for new staff. This has been shared across the directorate.
- Recruitment and retention strategy has been developed in concert with P&C.
- Recruitment and retention strategy is progressing with IRC setting up as a sponsorship organisation for operators and exploration of alternative recruitment avenues.
- Regular IMS audits are being delivered and validated with quarterly management reviews and annual external audits.
- Operator training continues in operator team meetings along with quarterly IMS audits and process reviews checking competency.
- Regular training as part of operational meeting, site support for operators and routine IMS audits all support operators understanding of the treatment processes.
- Operating procedures are integrated into the IMS.
- After discussion with Governance, document control for operational documents has been taken on by W&W.

PROCESS ROBUSTNESS

In this category there were two (2) action items:

- Review plant bench monitoring equipment
- Need better bench-scale lab equipment for operators to overcome the issue of operators using Palin test kits with the incorrect range

Status

An audit of laboratory equipment was undertaken after the events of 2021/22 and identified gaps have been addressed. Staff training is ongoing and further evaluation of the best analytical techniques will continue as BAU.

Risk level –LOW

Specific improvements

- Purchase of improved and standardisation of lab equipment has occurred.

ASSET MANAGEMENT

In this category there were three (3) action items:

- An asset management system needs to be implemented to identify asset condition and replacement schedules.
- Amend the draft AMPs with focus on the improvement plan
- To ensure preventative maintenance is carried out on a scheduled basis. Develop a system to enable breakdowns to be recorded and actioned appropriately to ensure critical equipment and instrumentation is working correctly with minimal downtime.

Status

With the recruitment of an asset management resource into W&W, the draft asset management plans will be finalised and presented to Council. Asset condition still needs to be assessed for many assets and it is proposed to include this as part of the scope of the revaluation project to be commissioned by Finance in 2026. In the meantime, asset condition data is acquired through the preventative maintenance reports.

Risk level – MED / LOW**

***The risk level will reduce once the asset condition survey has been completed and the asset management plans have been reviewed and endorsed by Council.*

Specific improvements

- Draft asset management plan is complete.
- Preparation of the 10-year capital programs has been done.
- All sources of recommended investment have been collated into a comprehensive list of identified need.
- Work continues with the asset management team to consolidate and rationalise the asset registers.
- An Asset Management and Investment Program Leader has been recruited and commenced with W&W in June 2025.

- The Asset Management role will work with the Maintenance Planner and Strategic Asset Management team to obtain asset condition data.
- Positive progress is being made and the Asset Class Asset Management Plan (ACAMP) review will run parallel to the Enterprise Asset Management module rollout in Tech 1.
- Preventative maintenance program is being delivered.
- Asset failure and repair data capture and work request management will likely be included as a module in the Tech1 rollout.

Workplace Culture

In this category there were two (2) action items:

- Continue the workplace cultural reforms that have currently been initiated.
- Emphasise the approach/philosophy of continuous improvement.

Status

Culture and behavioural change has been a focus with the W&W Directorate for the past 3-4 years. The manifestation of these efforts takes many forms from team building and development activities, reward and recognition and regular training and information sharing. The Directorate strives to provide a safe and enjoyable working environment for staff and encourages continuous improvement from all staff. These efforts were recently recognised by Local Government Managers Australia (LGMA) with the W&W Influencers and Leadership Team (WWILT) winning the LGMA Excellence Award for Teamwork.

Risk level – LOW

Specific improvements

- This is a continuous long-term initiative to improve the working environment and team effectiveness. It involves engagement of the OLT in culture regeneration and business improvement initiatives. Culture leadership is also translated into operational team meetings.
- IRC Cultural Guidelines circulated to staff and discussed with OLT members.
- Reward and recognition initiative has been implemented and reinforces IRC values and outstanding performance within the Directorate.
- Cultural development is discussed monthly at the W&W Influencers and Leadership Team (WWILT) meetings and future initiatives are proposed.
- Departmental meetings include value shares and highlights which promotes a more positive and engaged approach and culture.
- Team development activities are delivered through WWILT in collaboration with P&C.
- Cultural development and improvement is embedded in BAU across the Directorate.
- Continuous improvement is prosecuted through Leadership team and WWILT meetings as well as regular team meetings.
- The WWILT group continues to meet and thrive and has identified multiple projects to provide business improvements to the W&W directorate.
- The initiatives identified are complimented by the structured approach of the IMS, the external audits and certification.
- The WWILT initiative won LGMA Excellence Award for Teamwork.

Drinking Water Quality Management Plan

In this category there were two (2) action items:

- Review and audit of existing DWQMP.
- Risk assessment of water supply schemes.

Status

The comprehensive review of the DWQMP and associated Risk Improvement Management Program have led to a more realistic understanding of water quality risk and a targeted program of investment to reduce that risk. The combination of this primary management document (DWQMP) with the structured quality management framework presented by the IMS and the continuous improvement focus of the WWILT means that the residual risk to water services and quality continues to reduce, that improvements are always sought, documented and proceduralised. This integrated approach not only reduces risk but also retains institutional knowledge and allows for improvements despite ongoing staff turnover.

Risk level – LOW

Specific improvements

- DWQMP audit completed October 2022, next due in 2026.
- Risk assessment of plant through the DWQMP review completed in 2023.
- We are undergoing another review of the DWQMP and RMIP as this is required by the Regulator on a 2 yearly basis.
- We have develop a positive working relationship with the regulator to improve our DWQMP and reporting quality.
- This will be a long-term cyclical process where we review process at one plant each year and integrate this with reviews of the DWQMP and the continued expansion of the IMS.
- IMS processes will also reinforce the management of risk in the water treatment processes.

CONSULTATION

- Director Water and Waste
- Manager Operations and Maintenance
- Program Leader Compliance and IMS
- Water and Waste Process Engineer

BASIS FOR RECOMMENDATION

Following the water service incidents of 2021/22 a significant body of work was undertaken in the investigation and identification of the root causes (Attachment 1). This resulted in an action plan listing 37 measures that were recommended to eliminate or reduce the likelihood of similar water quality events occurring in the future. Over the subsequent 30 months, the majority of these actions (30) have been either completed or incorporated into every day operating practice. The remaining incomplete actions are all on track for delivery in line with their implementation timelines.

After considering the current status of the action plan and the residual risk to water service provision (above) the assessment is that risk of an event reoccurrence has been reduced to an acceptable level and that reporting could be made to Council by exception.

It should also be noted that the items that were contained in the action plan do not represent the only improvements made to water security and water quality over the past three (3) years. The action plan contained specific interventions targeted at resolving the root causes of the water quality events of 2021/22.

When looking at the specific improvements listed in this report, four common themes re-occur through multiple intervention categories:

1. Use of the IMS to embed improvements made into normal operating procedures.
2. Effective review and update of documentation.
3. A focus on continuous improvement and audits of existing processes.
4. Using training to support changes.

These four items are foundational behaviours which underpin an evolving culture of continuous improvement and systemisation of operational activities. The implementation of these practices preserves institutional knowledge and allows for regular management and external reviews securing incremental improvements, independently from the challenges of staff turnover.

It is impossible to say that any single intervention has “fixed” the issues that led to the water quality events of 2021/22 but in combination and coupled with the foundational behaviours listed above they have reduced the risk of a re-occurrence.

ACTION ACCOUNTABILITY

The Director of Water and Waste will continue to lead all aspects of the improvement in reliability of the water supply schemes across the Region.

KEY MESSAGES

The Water and Waste team remain committed to improving performance and implementing change to minimise the risk of water supply incidents. This will be achieved both in a focused response to specifically identified risks and more systematically through continuous process improvement mechanisms.

Since the water quality events in December 2021/22, the improvements made have enhanced the resilience of the water treatment processes. Subsequent events have been identified and resolved before they have compromised water quality or the continuity of water supply to the community. These practical examples demonstrate that the initiatives captured in the action plan along with increased asset maintenance, process audits and additional staff training and documentation have led to more reliable services.

There are several inter-related initiatives encompassed by the action plan and in complimentary business improvement frameworks. The ultimate success in preventing future water quality events will be dependent upon delivering them all, so that they complement each other. The experience and responses arising from the events of 2021/22 have not only resulted in an improvements to the resilience of the water service in those community but all across the Isaac region.

Report prepared by:

SCOTT CASEY
Director Water and Waste

Date: 20 June 2025

Report authorised by:

CALE DENDLE
Chief Executive Officer

Date: 3 July 2025

ATTACHMENTS

- Attachment 1 – Root Cause and Contributing Factors to Water Quality Events 2021-2022
- Attachment 2 - Water Quality Investigations Action Plan – Update – April 2025

REFERENCE DOCUMENT

- Drinking Water Quality Management Plan [Drinking Water Quality Management Plan](#)
- WWILT Terms of Reference [water-and-waste-influencers-and-leadership-team-wwilt-terms-of-reference-ww-tor-033](#)
- What is IMS? Knowledge Share [issue-1-ims](#)

Attachment 1 – Root Cause and Contributing Factors to Water Quality Events 2021 / 2022

Clermont

Root Cause – Responses to changes in raw water quality (increase manganese and iron) were not effective.

Contributing Factors:

- Over topping event at Theresa Creek Dam 26 November 2021
- Raw water quality - higher levels of manganese and iron along with increased variability
- Operator knowledge of manganese testing and the accuracy of results
- Lack of process understanding – e.g., increasing chlorine dosing drops out the manganese in the network – (this is a complex water quality issue)
- The need to change the type of chemicals employed to achieve improved treatment performance
- Asset failure – communications between the raw water pumps and balance tank failed causing raw the water pipe and raw water reservoirs to be emptied. This led to heightened levels of sludge being fed through the water treatment plant, impacting on the treatment process
- Lack of communication between staff – i.e., escalation of issues on the plant
- Cultural attitudes and behaviours on the plant not aligned with organisational values
- Lack of equipment maintenance – e.g., analysers not working on the treated water going to supply
- Chemical dosing systems not working effectively which further delaying detection and rectification
- Dosing systems not maintained or updated / modernised to ensure accurate measurement and knowledge of performance

St. Lawrence

Root Cause – exceedance in manganese with ineffective response at plant.

Contributing factors:

- Low level of raw water in the weir pond
- Lack of rainfall events which would otherwise result in flushing of the weir pond over recent years
- Raw water quality experienced was difficult to treat – process engineer commented “it was the worst raw water quality he had seen across Australia”
- A lack of inhouse expertise to run the plant with the raw water quality parameters experienced
- The treatment process was inadequate for the raw water quality envelope being experienced
- After the event analysis and inspection of weir pond by Council’s Environmental team identified the potential impact of weeds on the surface
- Lack of SCADA – very manual operations of plant and limited external visibility

Middlemount

Root Cause - Decision to increase operating level of the water reservoir.

Contributing Factors:

- The process for making changes to plant and operational control points
- Historical knowledge of the constraints of assets was not effectively passed on or documented in Operations and Maintenance manuals, work instructions etc.
- The physical configuration of the plant, reservoir and network was not well designed and if augmented could reduce the detention time in the reservoir
- Higher than normal ambient temperatures

Moranbah

Root Cause – increased algae in raw water leading to taste and odour complaints

Contributing Factors:

- Plant filters not working appropriately, requiring manual interventions, discovered an airlock in the system.
- Poor water quality coming into the plant, which was not identified at the intake due to a lack of sampling at the intake.
- Laboratory sampling of water quality at the plant is insufficiently detailed.
- Assets renewal – filter valves leaking air
- Lack of knowledge of operational changes needed and their subsequent implications
- Data available in SCADA (trends for flow meter) not fully utilized to identify a problem
- No alarm for low flow from filter banks – could have identified the problem earlier
- Lack of ground truthing what was going on with the filters – visual inspection quickly identified things were not operating as intended

WATER QUALITY INVESTIGATIONS – ACTION PLAN

Q4 UPDATE – APRIL 2025

Key

Lead – Is the resource identified to lead and co-ordinate the implementation of an action.

Support – Is a resource that will be required to contribute to the delivery of an action but will support the Lead.

Input - Is a resource that will be required to contribute to achieve the successful delivery of an action but will only contribute as required.

BAU – Business as Usual

CAPEX – Capital Expenditure

DWQMP – Drinking Water Quality Management Plan

IMS – Integrated Management System

OPEX – Operational Expenditure

RMIP - Risk Management Improvement Program

SWIMS – Statewide Information Management System

WWILT – Water and Waste Influencers and Leadership Team

WTP – Water Treatment Plant

WWTP – Wastewater Treatment Plant

NO	FACTORS	ACTION	TIMELINE	PROGRESS APRIL 2024	PROGRESS JULY 2024	PROGRESS OCTOBER 2024	PROGRESS JANUARY 2025	PROGRESS APRIL 2025
1.	System Documentation / Knowledge Management	Review existing operational documentation to identify gaps.	4 months per site (across all 8 water treatment plants) Start Jan 2023 End Dec 2024 Time extension to June 2025 to finalise documentation.	Technical Standard for documentation partially completed. This shall be presented to the Capital Projects team to obtain feedback and improve. Investigate utilising the IMS document Management protocols to ensure Engineering documentation is relevant and remains current. Integration of operational documentation into the IMS is ongoing and will eventually form a complete operating system. ON TRACK	This is an ongoing issue. Ideally suitable documentation for all plants will encompass historical assets and the project delivery process will require contractors to update engineer documentation when providing improvements or replacements on treatment facilities. Project delivery guidelines are currently being drafted. ON TRACK	Will be consideration in the project delivery workflow document that is being compiled. ON TRACK	Integrate engineering document requirements into Capital Projects IMS procedures and framework. ONGOING	Documentation requirements integrated into individual Capital Project specification. Ongoing integration into IMS procedures and capital project framework. This is now considered to be BAU. COMPLETE
1A.	System Documentation / Knowledge Management	Develop specific SOPs for lab testing procedures (specific to the instrumentation)	2 months per site (across all 8 water treatment plants following on from action 1A)	Waiting for draft work instructions to be finalised in IMS. ON TRACK	Operators using new Hach equipment, using the Hach test methods until the	All activities commenced in the previous quarters are ongoing and yet to reach a conclusion.	Work instructions awaiting IMS approvals. COMPLETE	COMPLETE Remove from future reports

NO	FACTORS	ACTION	TIMELINE	PROGRESS APRIL 2024	PROGRESS JULY 2024	PROGRESS OCTOBER 2024	PROGRESS JANUARY 2025	PROGRESS APRIL 2025
		that is at the sites).	Start Jan 2023 End April 2024		new IRC WIs are approved. ON TRACK	ON TRACK	Remove from future reports	
1C.	Process Robustness (previously action 19)	Review processes, identify gaps or processes that would provide more robust response to variability in raw water quality (e.g. the use of a coated media processes rather than potassium permanganate). Consider what additional monitoring (including on-line) to provide early warning or automated process changes. For example, pH and DO monitoring to provide early warning that coated media manganese	5 months (across all 8 water treatment plants following on from action 1B) May need to prioritise in high-risk sites. Start Jan 2023 End December 2026	DWQMP and RMIP COMPLETE Next step to produce a WTP Process Standard against which each treatment plant is audited to identify improvements. ON TRACK	Draft for WTP Process Audit template nearing completion. General technical specification for Isaac Chemical Dosing Requirements is underway with an expected delivery date of August 2024. ON TRACK	Ongoing work in aligning process audits with RMIP for implementation by Capital Projects. Current focus on CLM, STL and CAR. ON TRACK	Priorities managed through the RMIP and through Operations involvement in User requirement spec for upgrades. Process audits template to be circulated for comments. ON TRACK	Process audits will be included as BAU COMPLETE

NO	FACTORS	ACTION	TIMELINE	PROGRESS APRIL 2024	PROGRESS JULY 2024	PROGRESS OCTOBER 2024	PROGRESS JANUARY 2025	PROGRESS APRIL 2025
		removal might be compromised. Also, raw water turbidity monitoring with automated step change to the coagulant dose rate. Consider using on-line manages analyser results with alarms and also feed forward change to the potassium permanganate dose rate. The changes to dose rates would be based on information gathered from previous events and jar testing.						
2.	System Documentation / Knowledge Management	Ensure one updated operation and maintenance manual exists for each plant with the manuals all being consistent in format to enable	3-year project (average 4 months per site) Start 1 July 2023 End June 2026	Contractor has been engaged to complete the manuals. ON TRACK	Middlemount and Dysart Water Treatment Plant Manuals have been drafted and awaiting checking with operational team. Once this has been completed these documents will be	Order placed for MBH WTP manual. Review of MMT and DYS in progress. ON TRACK	Staged delivery of the operations and maintenance manuals continues. ON TRACK	O&M manuals continue to be written in line with budgetary constraints. ON TRACK

NO	FACTORS	ACTION	TIMELINE	PROGRESS APRIL 2024	PROGRESS JULY 2024	PROGRESS OCTOBER 2024	PROGRESS JANUARY 2025	PROGRESS APRIL 2025
		operators from other plants to easily find information.			registered. Moranbah and Nebo Water Treatment Plants are the next sites to have these documents developed. ON TRACK			
6C.	SCADA	For sites that do not have SCADA – how do we get those sites accessible	2.5 years Start Jan 2023 End July 25 Revised schedule June 27	SCADA Technical Advisor contract has been awarded and initial meetings have been held at Glenden and Nebo. ON TRACK	The initial contractor has not fulfilled their obligations and developed the documentation as required. A second contractor is being engaged to start this process with Clermont WTP. ON TRACK	Clermont WTP SCADA will be implemented in November 2024. Glenden, Carmila and St Lawrence WTP SCADA Scopes are being developed presently and will be including into Capital Upgrade Projects over the next 18 months. ON TRACK	SCADA project implementation is proceeding in line with the implementation schedule and has been integrated into the upgrades of treatment plants where appropriate. ON TRACK	SCADA project implementation is proceeding in line with the implementation schedule and has been integrated into the upgrades of treatment plants where appropriate. ON TRACK
7.	SCADA	Ensure the SCADA system has the capability to put logic to alert discrepancies when variance between actual and recorded information is detected. (eg if	3.5 years Start July 2022 End Dec 25	SCADA Technical Advisor contract has been awarded and initial meetings have been held at Glenden and Nebo. ON TRACK	The initial contractor has not fulfilled their obligations and developed the documentation as required. A second contractor is being engaged to start	This action has been included in the SCADA development that will be implemented at Clermont WTP. This will be a standard feature on all SCADA project moving forward.	This aspect of the SCADA system design has been incorporated into the scope and will be replicated across all sites as part of the SCADA project roll out.	COMPLETED Remove from future reports

NO	FACTORS	ACTION	TIMELINE	PROGRESS APRIL 2024	PROGRESS JULY 2024	PROGRESS OCTOBER 2024	PROGRESS JANUARY 2025	PROGRESS APRIL 2025
		X filters on-line then expected flow is Y ML, have a discrepancy alarm)			this process with Clermont WTP. ON TRACK	ON TRACK	COMPLETE	
8.	SCADA	As part of the strategy development review systems and processes to identify gaps in monitoring and control. Ensure there is sufficient on-line instrumentation for monitoring key water quality parameters including Critical Control Points (CCPs). Related to this, there is a need to ensure there is sufficient control of the plant, such as plant shutdowns on breaches of CCP limits.	3.5 years Start July 2022 End Dec 25	DWQMP Review and RMIP complete. Next step to produce a WTP Process Standard against which each treatment plant is audited to identify improvements. ON TRACK	Draft for WTP Process Audit template nearing completion. General technical spec for Chemical dosing requirements is underway. ON TRACK	General technical spec for Chemical dosing requirements completed and provided to the Capital Team. Work has started on specific requirements for STL and CAR. Delivery of online monitoring according to RMIP. ON TRACK	Specific requirements for Clermont WTP completed. Specific requirements for STL WTP close to completion. Specific requirements for CAR WTP are in progress. General chemical dosing requirement developed for Clermont will form the basis of monitoring and control specification for future plant upgrades. COMPLETE	CLM WTP Completed STL WTP Completed CAR WTP Completed NBO WTP Completed GLN WTP Completed MBH WTP Completed DYS WTP Incomplete MMT WTP Incomplete ON TRACK

NO	FACTORS	ACTION	TIMELINE	PROGRESS APRIL 2024	PROGRESS JULY 2024	PROGRESS OCTOBER 2024	PROGRESS JANUARY 2025	PROGRESS APRIL 2025
9.	SCADA	The strategy should consider installing instrumentation to monitor raw and treated water quality, production and delivery with trends being monitored to alert operators in advance of the need to start adjusting their plant operation.	3.5 years Start July 2022 End Dec 25	DWQMP Review and RMIP complete. Next step to produce a WTP Process Standard against which each treatment plant is audited to identify improvements. ON TRACK	Draft for WTP Process Audit template nearing completion. ON TRACK	These improvements are being included with the improvements being rolled out. ON TRACK	Process audits template to be circulated for comments. ON TRACK	Process audits have been included in the identification of capital investment. This approach is now part of BAU. COMPLETE
11B.	Ineffective Alarms to Identify Problems and then Escalation (H2O action item 15)	Implement Critical Operating Point (COP) limits in the water supply network, covering low and high limits for free chlorine.	3.5 years – phased implementation based on risk Start July 2022 End Dec 25	PAG submission has been included for the MMT reservoir main for FY2425 budget consideration. ON TRACK	Middlemount Reservoir Main duplication SOW has been completed, and tender being released to market in August 2024. \$1.4M committed in the FY24/25 budget. ON TRACK	Review of CCP's within the DWQMP review and training of staff of these CCP's has uplifted the knowledge of the team to identify a non-compliance CCP. This action has been included in the SCADA development that will be implemented at Clermont WTP. This will be a standard feature on all SCADA project moving forward. The development of online SWMS	Online SWMS reporting is being rolled out and the MMT reservoir main contract has been awarded. ON TRACK	Construction of the duplicate water trunk main is underway. ON TRACK

NO	FACTORS	ACTION	TIMELINE	PROGRESS APRIL 2024	PROGRESS JULY 2024	PROGRESS OCTOBER 2024	PROGRESS JANUARY 2025	PROGRESS APRIL 2025
						reporting through Qld Water dashboard has the capability to alarm to supervisors if a CCP has been entered that is out of scope. ON TRACK		
14.	Ineffective Alarms to Identify Problems and then Escalation	Trends should also be automatically calculated to alert before critical levels are reached.	3.5 years - SWIMS Project NOTE - SWIMS will become the daily data log NOTE – links to SCADA implementation. Start July 2022 End Dec 25	SCADA Technical Advisor contract has been awarded and initial meetings have been held at Glenden and Nebo. ON TRACK	The initial contractor has not fulfilled their obligations and developed the documentation as required. A second contractor is being engaged to start this process with Clermont WTP. ON TRACK	Review of CCP's within the DWQMP review and training of staff of these CCP's has uplifted the knowledge of the team to identify a non-compliance CCP. This action has been included in the SCADA development that will be implemented at Clermont WTP. This will be a standard feature on all SCADA project moving forward. The development of online SWMS reporting through Qld Water dashboard has the capability to alarm to supervisors if a	Continued roll out of the SCADA project and implementation of the online SWMS reporting are proceeding. ON TRACK	Continued roll out of the SCADA project and implementation of the online SWMS reporting are both proceeding nicely. ON TRACK

NO	FACTORS	ACTION	TIMELINE	PROGRESS APRIL 2024	PROGRESS JULY 2024	PROGRESS OCTOBER 2024	PROGRESS JANUARY 2025	PROGRESS APRIL 2025
						CCP has been entered that is out of scope. ON TRACK		
16b.		Ensure there is sufficient information available for staff who are not fully conversant with the plant to be able to effectively complete the tasks on the worksheets.	Ongoing action Start Jan 2023 End BAU	Workshop between W&W and P&C occurred to investigate options for recruitment and retention. Operations and Maintenance team have developed an onboarding pack for new staff. This has been shared across the directorate. ON TRACK	Recruitment and retention strategy is being developed. ON TRACK	All activities commenced in the previous quarter are ongoing and yet to reach a conclusion. Development of plant manuals will assist with this action. Dysart and Middlemount manuals have been completed in draft form and Moranbah WTP will be developed this FY. ON TRACK	Recruitment and retention strategy is progressing with IRC setting up as a sponsorship organisation for operators and exploration of alternative recruitment avenues. Improvements to staff onboarding are a complete for the O&M team. O&M manuals continue to be written in line with budgetary constraints. ON TRACK	Recruitment and retention strategy is progressing with IRC setting up as a sponsorship organisation for operators and exploration of alternative recruitment avenues. Improvements to staff onboarding are a complete for the O&M team. O&M manuals continue to be written in line with budgetary constraints. This activity is now part of BAU. COMPLETE
17.	Loss of Long-Term Historical Knowledge –	Ensure one updated operation and maintenance manual exists	3-year project (average 4 months per site)	An operational project to prepare operation and maintenance	An operational project to prepare operation and maintenance	Development of plant manuals will assist with this action. Dysart and	O&M manuals continue to be written in line with	O&M manuals continue to be written in line with

NO	FACTORS	ACTION	TIMELINE	PROGRESS APRIL 2024	PROGRESS JULY 2024	PROGRESS OCTOBER 2024	PROGRESS JANUARY 2025	PROGRESS APRIL 2025
	Staff Turnover	for each plant with the manuals all being consistent in format to enable operators from other plants to easily find information.	Start Jan 2023 End June 26	manuals is underway. ON TRACK	manuals is underway. ON TRACK	Middlemount manuals have been completed in draft form and Moranbah WTP will be developed this FY. ON TRACK	budgetary constraints. ON TRACK	budgetary constraints. ON TRACK
21a	Asset Management	An asset management system needs to be implemented to identify asset condition and replacement schedules.	2 years Start July 2023? End Jully 25?	A position description has been prepared for a new asset management position within W&W. Recruitment for this position will be progressed. Work continues with the asset management team to consolidate and rationalise the asset registers. ON TRACK	Work continues with the development of this asset management position. Condition assessments are being collated at the end of each preventative maintenance program. These condition assessments are being uploaded into the Asset Management System. Draft asset management plans have been reviewed and updated.	All activities commenced in the previous quarters are ongoing and yet to reach a conclusion. ON TRACK	An Asset Management and Investment Program Leader was recruited and then withdrew, the position is being readvertised. ON TRACK	Position has now been filled. The resources are being shared with finance until approx. June- July 2025 The Asset Management role will work with Maintenance Planner and SAM team to obtain asset condition data. This activity is now part of BAU. COMPLETE

NO	FACTORS	ACTION	TIMELINE	PROGRESS APRIL 2024	PROGRESS JULY 2024	PROGRESS OCTOBER 2024	PROGRESS JANUARY 2025	PROGRESS APRIL 2025
					ON TRACK			
21b.	Asset Management	Amend the draft AMPs with focus on the improvement plan	12 months from engagement of resource Start June 23 End June 24	10-year investment programs are now complete in draft for water wastewater and waste functions ON TRACK	Finalisation of the AMP's and the update of the 10-year investment program is near completion. Once completed this will be submitted for approval. ON TRACK	All activities commenced in the previous quarters are ongoing and yet to reach a conclusion. Dedicated Assets resources is presently being finalised with recruitment to start on this position in November 2024. ON TRACK	An Asset Management and Investment Program Leader was recruited and then withdrew, the position is being readvertised. ON TRACK	Position has now been filled. The resources are being shared with finance until approx. June- July 2025. Good progress is now being made and ACAMP review will run parallel to the EAM rollout. Extend the timeline for completion of the ACAMP to June 26. ON TRACK

MEETING DETAILS

Water and Waste Standing Committee Meeting

Wednesday 9 July 2025

AUTHOR

Angela Elliott

AUTHOR POSITION

Compliance and IMS Officer

5.3

BUSINESS SERVICES DEPARTMENTAL REPORT – INTEGRATED MANAGEMENT SYSTEM

SUMMARY

The purpose of this report is to provide an overview and status update on the Water and Waste (W&W) Directorate Integrated Management System (IMS).

OFFICER'S RECOMMENDATION

That the Committee recommends that Council:

1. ***Receives and notes this report outlining the Integrated Management System related activities in the Water and Waste Directorate.***

BACKGROUND

In 2019, W&W achieved IMS certification to the global standards for safety, quality, and environment. In 2022, re-certification was maintained successfully, and in June 2025, re-certification was again achieved through external auditor, Compliance Australia Certification Services (CACS).



The Integrated Management System (IMS) was established to enhance the delivery of essential services to the community, to minimise environmental impact, and to promote continual business improvement in quality, all while maintaining a safe working environment. This was achieved through:

- Increased consultation and communication at all levels
- Reduced duplication of documentation
- Systematic processes and ongoing monitoring of targets
- A significant change in culture
- Reduced incidents and non-conformances

- Eliminating “fix when broken” philosophies
- Improved planning and risk management

The Compliance and IMS Team within the Business Services Department of Water and Waste plays a vital role in enhancing the efficiency of our operational water, wastewater, and waste departments. The IMS is not just a tool; it is an essential cornerstone of everyone’s operational and strategic responsibilities, empowering each team member to make a meaningful impact. The Water and Waste IMS Roles and Responsibilities Guideline (WW-GDS-108) provides a comprehensive list of responsibilities for each role within W&W.

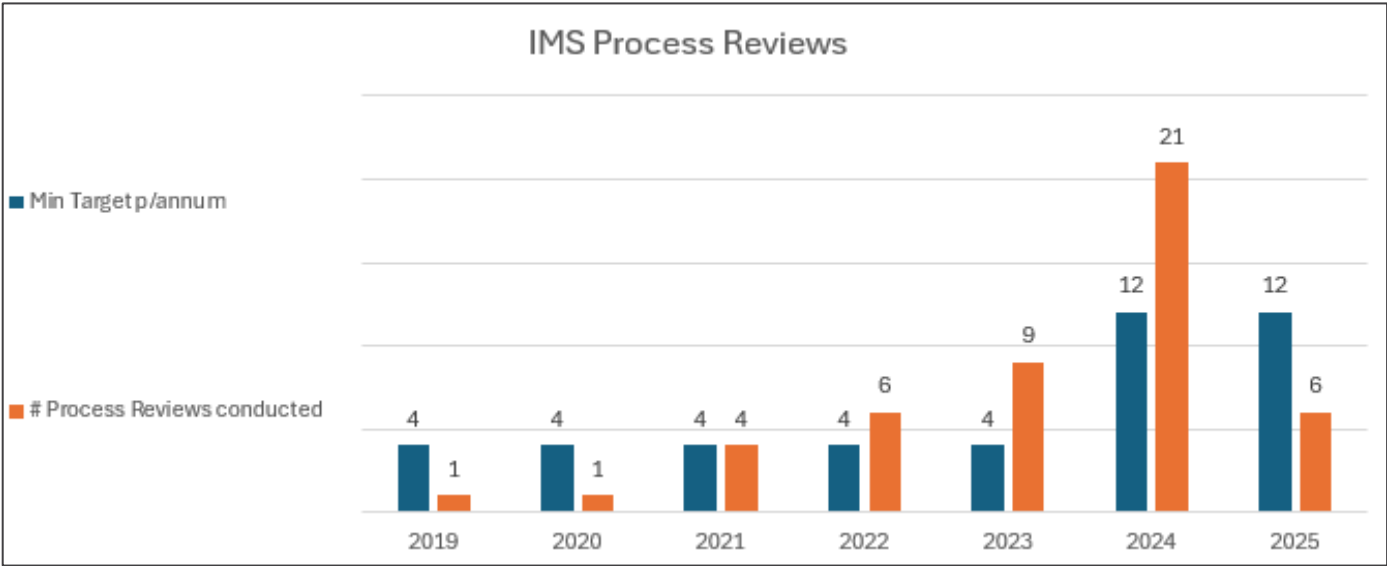
For example, responsibilities may mean:

- Participation in audits and reviews to support continuous improvement
- Following IMS policies and procedures
- Contributing to achieving IMS objectives
- Ensuring compliance and adherence with regulatory requirements
- Helping to identify, report, and address incidents, hazards, non-conformances and near misses
- Implementing corrective action plans
- Establish IMS objectives and key performance indicators for the directorate.
- Ensure that necessary resources and training are in place to foster ongoing commitment and performance.

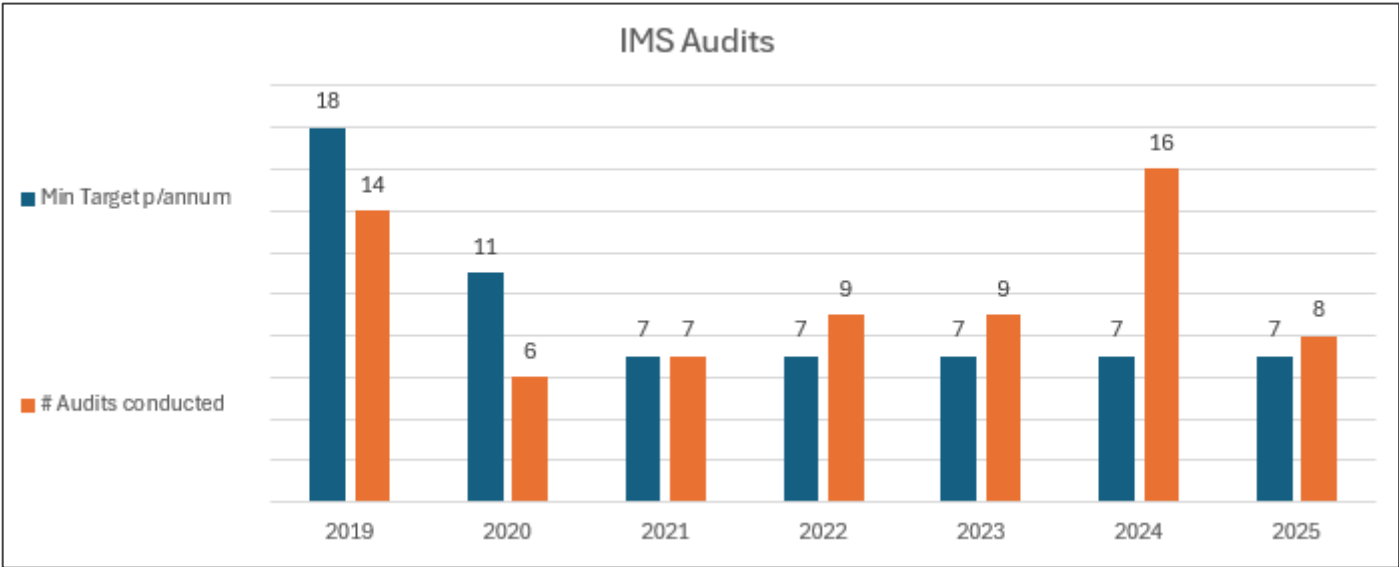
The W&W Consultation & Performance Evaluation Plan (WW-PLN-002) is reviewed annually to ensure the IMS remains effective and to nurture a proactive organisational culture. The plan outlines a structured approach which includes various forums including meetings, management and process reviews, internal and external audits, and gap analyses. It also highlights the importance of risk management practices including site hazard inspections and emergency evacuation drills, as well as the distribution of educational materials. All these elements work together to promote a culture of continuous improvement and learning.

Reports, associated findings and publications are captured through Council systems Lucidity and IRIS for awareness, planning and oversight and ensure accountability, accessibility, workflow management and timeframes are met.

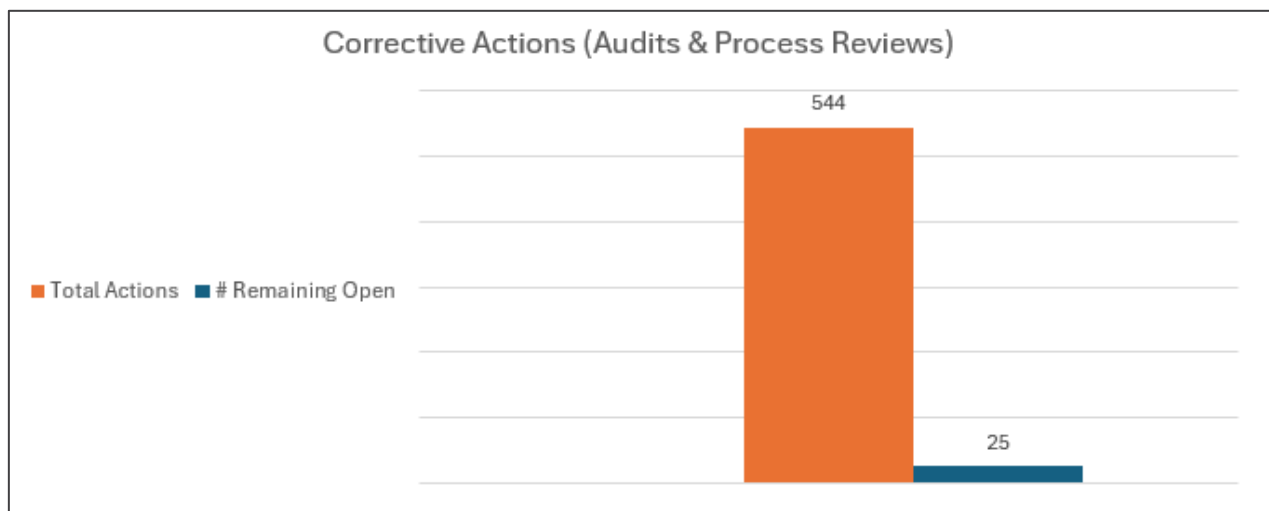
The data below demonstrates the significant growth and development of the IMS since first achieving certification in 2019. Key elements such as IMS Audits, Corrective Actions, Gap Analysis, and Process and Management Reviews, play a crucial role in identifying areas for improvement as well as adoption of new initiatives. These efforts enable the IMS to continuously enhance the services and delivery performance of W&W for both internal and external interested parties.



Note – records are for the calendar year so 2025 is only up to June (6 months).



Note – records are for the calendar year so 2025 is only up to June (6 months).



2024-2025 HIGHLIGHTS

- W&W developed its own internal SDS Library (available on IRIS) to support operational teams with accessing up to date Safety Data Sheets. This initiative was introduced to assist staff accessing safety, quality and environmental information for site chemicals, and to maintain chemical register compliance.
- IMS Audit findings uncovered a knowledge gap. In response, a bi-monthly internal knowledge-sharing initiative was designed to empower our workforce with valuable insights. This resource is intended to support all W&W staff and Business Partners.
- A Site Hazard Inspection Program has been established and is conducted annually by members of the Water and Waste Influencers and Leadership Team (WWILT). The program encompasses all W&W sites as well as W&W Administration areas and W&W Capital Projects. Each member is assigned a site which may be unfamiliar to them, allowing for a 'fresh eyes' approach during the inspection.
- A noticeable increase in worker participation to reduce or create documentation to support their operational needs.
- During the 2024/2025 period, a total of forty-four (44) W&W documents have been repealed. This decision can stem from several factors, such as the consolidation of information from similar documents, including checklists, work instructions, and registers. Effective document review processes positively influence operational readiness and performance by improving the quality of information, thereby enhancing safe work practices, and clarifying environmental obligations.
- An opportunity was identified to enhance the W&W Site Specific Induction category within the training matrix for each W&W role. After several months of collaboration with the Learning and Development team, a more risk-based approach to the site-specific induction requirements for each worker was developed.
- All findings from the 2024 External Surveillance Audit were reviewed during the 2025 Re-Certification Audit and closed by the auditor.
- Only seven (7) new observations were identified during the 2025 Re-Certification Audit. No major or minor non-conformances identified.
- All 2025 schedules are on target to meet 100% completion.

=====

KEY MESSAGES

The Compliance and IMS Team serves as a vital link between operational units, providing an additional layer of focus on both internal and external obligations. This team is dedicated to ensuring that W&W upholds its commitment to excellence, delivers high-quality services to the community, and adheres to, develops, and maintains certification for the three International Standards: Safety, Quality, and Environment.

By implementing this robust support structure, the directorate enhances its focus and reliability in IMS activities, paving the way for sustained improvements in the Council's performance. This proactive approach not only strengthens our commitment to excellence but also inspires confidence in our ability to serve the community effectively.

Report prepared by: ANGELA ELLIOTT Compliance and IMS Officer Date: 20 June 2025	Report authorised by: SCOTT CASEY Director Water and Waste Date: 1 July 2025
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ATTACHMENTS

- Attachment 1 – 2025 Re-certification Audit Report

REFERENCE DOCUMENT

- Nil



Compliance Australia
certification services

Management System AUDIT REPORT

Company Name: Isaac Regional Council
Date of Assessment: 22-Apr-25 and 24-Apr-25 to 27-Apr-25 and 28-Apr-25 to 2-May-25
Type of Assessment: Recertification
Standard/s:
☒ ISO 9001:2015
☒ ISO 14001:2015
☒ ISO 45001:2018

Audit Method:

- ☒ On Site
☐ Remote Audit – IAF MD (during extenuating circumstances)

Stage 2 audit report Rev E - Effective 15/02/2022

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Introduction

Execution of this assessment/Scope

The purpose of this audit report is to summarise the degree of compliance with relevant criteria, as defined in this report, based on the evidence obtained during the audit of your organisation. We may also comment regarding the measurable progress you have made in reaching these targets for improvement. Compliance Australia certification Services (CACS) audits are carried out within the requirements of CACS procedures that also reflect the requirements and guidance provided in the international standards relating to audit practice such as ISO/IEC 17021, ISO 19011 and other normative criteria.

Auditing is based on a sampling process of the available information. CACS Auditors are assigned to audits according to industry, standard or technical competencies appropriate to the organisation being audited. Details of such experience and competency are maintained in our records. In addition to the information contained in this audit report, CACS maintains files for each client. These files contain details of organisation size and personnel as well as evidence collected during preliminary and subsequent audit activities (Documentation Review and Scope) relevant to the application for initial and continuing certification of your organisation. Please take care to advise us of any change that may affect the application/certification or may assist us to keep your contact information up to date, as required by CACS Terms and Conditions.

The Organisation was Assessed for

- Information / evidence about conformity to all requirements of the applicable management sys std or another normative document.
- Performance monitoring, measuring, reporting and reviewing against key performance objectives and targets.
- The company's management system and performance as regards legal compliance.
- Operational control of the company's processes.
- Internal auditing and management review.
- Management responsibility for the company's policies.
- Links between the normative requirements, policy, performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative document), any applicable legal requirements, responsibilities, competence of personnel, operations, procedures, performance data and internal audit findings and conclusions.

Process Based Audit

Compliance Australia Certification Services conducted a process-based audit focusing on significant aspects/objectives required by the stds.

This assessment was carried out against the criteria contained within the relevant & consisted of 4 elements:

- Discussions with management,
- Discussions with staff,
- Documentation Review, and
- Physical site Assessment.

Confidentiality

Information seen or recorded during the audit, including actual results of the audit, will not be disclosed to other parties without the agreement of the company undergoing the audit. The audit report, including any associated non-compliances, may be seen by JAS-ANZ during their periodic audits of CACS. However, they are covered by the same pledge of confidentiality.

Disclaimer

This report has been prepared by Compliance Australia Certification Services Pty Ltd for the purpose of determining the std of implementation of the organisations management systems within the scope of approval to the relevant standard at the nominated sites. Due to the sampling nature of auditing, some deficiencies may exist that were not detected at the time of the audit and does not necessarily mean that none exist.

The contents of this report are intended only for use in determining whether the organisation meets the above standards. Whilst every effort has been made to ensure the accuracy of this report, Compliance Australia Certification Services Pty Ltd will not be held responsible and extends no warranties as to the suitability of such information or for the consequences of its use. Likewise, Compliance Australia Certification Services Pty Ltd nor the auditor will be held responsible for actions taken by third parties as a result of information contained in this report.

Record of Audit

This report contains a summary of all audit findings. Details of documentation reviewed, people interviewed and other observations which may have been noted on the day of the assessment will be contained within the auditor's notes. These notes if retained will be on file at Compliance Australia Certification Services.

Compliance Statement

The assessment was conducted by sampling the activities related to the audit standard(s) and scope of approval. Absence of a finding against a particular requirement of the assessment standard(s) or area of the company assessed does not necessarily mean that none exist. The Assessment Details contain a brief description of how the audit was conducted for review of various elements of the quality system. Additionally, please be advised that any changes to CACS regulations and or processes will be notified on our web site.

You will be notified either by post or e-mail when these changes occur.

Complaints and Disputes

The contents of this report were discussed with the company at the time of assessment. Any disagreement with findings from the assessment, complaints or feedback in regard to the assessment process can be referred to by the CACS Certification Manager.

We look forward to meeting with you again and seeing the changes that will have been implemented. If you require any additional information, please do not hesitate to contact our office.

Notification of the occurrence of a serious incident or breach of regulation to Compliance Australia Certification Services without delay:

The certified client is required to inform Compliance Australia Certification Services, without delay, of the occurrence of a serious incident or breach of regulation necessitating the involvement of the competent regulatory authority.

Information on incidents such as a serious accident, or a serious breach of regulation necessitating the involvement of the competent regulatory authority, provided by the certified client or directly gathered by the audit team during the audit, shall provide grounds for Compliance Australia Certification Services to decide on the actions to be taken, including a suspension or withdrawal of certification, in cases where it can be demonstrated that the system seriously failed to meet the OH&S certification requirements.

Client Specific Audit Details

Scope of Certification:

Address	Visited During Assessment	Yes	No
	Grosvenor Complex, 1 Batchelor Parade, Moranbah QLD 4744, Australia	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Scope of Activities	Provision, construction, operation, management and maintenance of systems and services for water, wastewater and recycled water, and provision of waste management, in the Isaac Region in the capacity of a local government authority.		
ANZSIC Code/s	3701, 3702, 8113, 9364		
Non-Applicable Clauses	None		
Number of Employees	83		
Audit Frequency	12 monthly		
Virtual Sites	if yes, list below		
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Additional Location/s	Visited During Assessment		
	153 Carmila West Road, Carmila QLD 4739	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	38 Turrarna Road, Clermont QLD 4721	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	7145 Dysart Clermont Road, Dysart QLD 4745	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	412 Ewan Drive, Glenden QLD 4743	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	1026 Greenhill Road, Green Hill QLD 4865	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	60 Nolan Drive, Middlemount QLD 4746	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	1 Thorpe Street, Moranbah QLD 4744	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	17914 Peak Downs Highway, Nebo QLD 4742	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	402 St Lawrence Connection Road, St Lawrence QLD 4707	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Scope of Activities	Waste Management Facility.		
	10 Carmila West Road, Carmila QLD 4739	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	30 Jeffrey Street, Clermont QLD 4721	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	10 Bradford Street, Dysart QLD 4745	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	99 Usher Terrace, Glenden QLD 4743	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	29 Nolan Drive, Middlemount QLD 4746	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	141 Goonyella Road, Moranbah QLD 4744	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	531 Airstrip Road, Nebo QLD 4742	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	60 St Lawrence Road, North, St Lawrence QLD 4707	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Scope of Activities	Water Treatment Plant		
	106 Cheeseborough Road, Clermont QLD 4721	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	50 Garnham Drive, Dysart QLD 4745	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	106 Kurrajong Street Glenden QLD 4743	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	50 Fairway Drive, Middlemount QLD 4746	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	100 Forrest Drive, Moranbah QLD 4744	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	17917 Peak Downs Highway, Nebo QLD 4742	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Scope of Activities	Wastewater Treatment Plant		
Review of any changes since the last assessment, has there been any changes to the following:			
The Scope of Certification	None		
Management Representative	None		
Address(es)	None		
Employee Numbers	None		

Entry and Exit Meeting Attendance:

Name	Position	Entry	Exit	Name	Position	Entry	Exit
Clayton Lawrence	Lead Auditor	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Angela Elliott 2,3,4,5,6	Compliance and IMS Officer Business Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
William 'Bill' Chance	Team Auditor	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Tait Suridge 2,6	Program Leader - Compliance and IMS Business Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Kirstie Matthews	Program Leader Customer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Scott Casey 1	Director Water and Waste	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Lisa Tonkin	Manager Business Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Amal Meegahawattage	Manager Planning and Projects	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Jason Grandcourt	Manager Waste Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Konny Okumura	Project Coordination Officer	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Anthony Waller	Treatment Plant Operator, Nebo	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Faisal Shah	Treatment Plant Operator, Nebo	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Eva Syminton	Governance Administration Officer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	James Kingston	Treatment Plant Supervisor South	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Stephen Wagner	Manager Operations and Maintenance, Water and Wastewater	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Trudi Liefekett 3,4	Manager, People and Capability	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Nicole Sharrock	Environmental & Sustainability Officer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Kielly Glanville 3,4	Senior People and Capability Business Partner - Learning and Development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Norman Caldwell	Supervisor Waste Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Peta Eyschen	Manager Governance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Shelley-Ann Cottam	Treatment Plant Supervisor North	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Melissa Thompson	Team Leader Clermont and Moranbah, Waste Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Kylie Kavanagh	Strategic Sourcing Officer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Seungchan Bang	W&W Maintenance Planner	<input type="checkbox"/>	<input checked="" type="checkbox"/>

OHSMS 45001 - Audits Only - The audit team interviewed the following personnel:
Delete if not applicable
Legend:
Number

- The management with legal responsibility for Occupational Health and Safety - **1**
- Employees' representative(s) with responsibility for Occupational Health and Safety - **2**
- Personnel responsible for monitoring employees' health, for example, doctors and nurses - **3**
- Managers and permanent and temporary employees - **4**
- Managers and employees performing activities related to the prevention of OHS risks - **5**
- Contractors' management and employees - **6**
- **MD4 Audits only** - Justifications in case of interviews conducted remotely shall be recorded –
 - Refer MD4 list of Risk and opportunities associated with this ICT audit.

Logo Use

A review of the use and application of the CACS and JAS-ANZ Accreditation Symbol and Logos respectively was undertaken and reemphasized with management during this audit. The terms of use are supplied during your initial application and can be subsequently downloaded at: www.cacs.net.au/downloads/Logo_Usage.pdf. This review confirmed the correct and proper use of Logos and Accreditation symbol for both marketing, administrative and product delivery purposes is **fully compliant with the terms of use**.

Audit Specific Information:	Yes	No
Is the management system integrated	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does the operation of the management system contribute to the achievement of the organisation's policy & objectives?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Planning ensures that the client management system is effective during and after the changes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Appeals, complaints & disputes process was reviewed as part of the audit	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The management system ensures its continued suitability	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The management system determines if any changes are needed and if opportunities for improvement exist	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The requirements of audit STDs were met	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is senior management committed	<input checked="" type="checkbox"/>	<input type="checkbox"/>
All processes have been considered	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is there an auditor conflict with the client?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Significant issues impacting on the audit program.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
The current audit plan was followed with variances only due to the order in which planned areas were audited	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Legal Compliance ISO 45001 - Clause 6.1.3 - Determination of legal and other requirements. *ISO 45001 only Delete if not applicable***The organization has established, implemented and maintained processes to:**

	Yes	No
Determine and have access to up-to-date legal requirements & other requirements that are applicable to its hazards, OHS risks & MS;	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Determine how these legal requirements and other requirements apply to the organization and what needs to be communicated	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Take these legal & other requirements into account when establishing, implementing, maintaining & continually improving its OHS MS	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Maintain & retain documented information on its legal requirements & other requirements & shall ensure that it is updated to reflect any changes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Conformity with the requirements of an OH&SMS standard as they relate to legal compliance has been achieved and maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Audit Findings Summary

This report has been prepared by Compliance Australia certification Services (CACS) in respect of a Client's application for assessment by CACS. The purpose of the report is to comment upon evidence of the Client's compliance with the standards or other criteria specified. The content of this report applies only to matters which were evident to CACS at the time of the audit within the audit scope. CACS does not warrant or otherwise comment upon the suitability of the contents of the report or the certificate for any particular purpose or use. Please note that this report is subject to independent review and approval. Should changes to the outcomes of this report be necessary as a result of the review, a revised report will be issued and will supersede this report.

Management and staff were extremely open and friendly throughout the audit, which in turn made the assessment extremely effective.

The obvious commitment demonstrated by staff and management was well evident on the day of the audit.

The audit team believe that the Management System will only grow in maturity and value from here.

It is important to note that this report and its findings have been independently reviewed & assessed.

This audit was the recertification and transition of Isaac Regional Council Water and Waste Directorate (In this report referenced as IRC). This is made up of the Council's Water and Waste Directorate 24 sites (1x Head Office, 8 Water Treatment Plants ((WTP)), 6 Wastewater Treatment Plants ((WWTP)) and 9 Landfill/Transfer Stations).

The scope of certification was reviewed and remains as:

Provision, construction, operation, management and maintenance of systems and services for water, wastewater and recycled water, and provision of waste management, in the Isaac Region in the capacity of a local government authority.

The method of review for this audit, one auditor worked remotely whilst the other worked at the IRC premises and visited the sites. (Refer to the photographic section of this report for the sites visited)

Certification expires on 11 June 2025.

As noted above in the report and for further clarity the following locations are included as listed premises of operation:

Head office –

Moranbah - Grosvenor Complex. Batchelor Parade, Moranbah QLD 4744

Carmila:

1. Waste Management Facility. 153 Carmila West Road, Carmila QLD 4739
2. Water Treatment Plant. 10 Carmila West Road, Carmila QLD 4739

Clermont:

1. Waste Management Facility. 38 Turruma Road, Clermont QLD 4721
2. Water Treatment Plant. 30 Jeffrey Street, Clermont QLD 4721
3. Wastewater Treatment Plant. 106 Cheeseborough Road, Clermont QLD 4721

Dysart:

1. Waste Management Facility. 7145 Dysart Clermont Road, Dysart QLD 4745
2. Water Treatment Plant. 10 Bradford Street, Dysart QLD 4745
3. Wastewater Treatment Plant. 50 Garnham Drive, Dysart QLD 4745

Glenden:

1. Waste Management Facility. 412 Ewan Drive, Glenden QLD 4743
2. Waste Management Facility. 1026 Greenhill Road, Green Hill QLD 4865
3. Water Treatment Plant. 99 Usher Terrace, Glenden QLD 4743
4. Wastewater Treatment Plant. 106 Kurrajong Street, Glenden QLD 4743

Middlemount:

1. Waste Management Facility. 60 Nolan Drive, Middlemount QLD 4746
2. Water Treatment Plant. 29 Nolan Drive, Middlemount QLD 4746
3. Wastewater Treatment Plant. 50 Fairway Drive, Middlemount QLD 4746

Moranbah:

1. Waste Management Facility. 1 Thorpe Street, Moranbah QLD 4744
2. Water Treatment Plant. 141 Goonyella Road, Moranbah QLD 4744
3. Wastewater Treatment Plant. 100 Forrest Drive, Moranbah QLD 4744

Nebo:

- | | |
|--------------------------------|---|
| 1. Waste Management Facility. | 17914 Peak Downs Highway, Nebo QLD 4742 |
| 2. Water Treatment Plant. | 531 Airstrip Road, Nebo QLD 4742 |
| 3. Wastewater Treatment Plant. | 17917 Peak Downs Highway, Nebo QLD 4742 |

St Lawrence:

- | | |
|-------------------------------|---|
| 1. Waste Management Facility. | 402 St Lawrence Connection Road, St Lawrence QLD 4707 |
| 2. Water Treatment Plant. | 60 St Lawrence Road, North, St Lawrence QLD 4707 |

At this audit there were zero (0) NCR raised with seven (7) Observations.

Site specific interactions:

Relevant to the standards applied, were sighted as specified under the scope of certification.

Quality Interactions observed:

- Interaction between clients. - Phone
- Reviewed client program.
- Reviewed client specification checklists.
- Reviewed various client contracts.
- Drawing control
- ITPs Various
- Meeting Various
- Subcontractor Management

Safety Interaction observed:

- Public interaction.
- Vehicle (travelling to and from jobs)
- Ergonomic setup in office.
- Good Housekeeping
- SWMS
- Toolbox meeting
- Site inspections being conducted
- Working at Height's

Environmental Interactions observed:

- Storage of various chemicals.
- Waste management.
- Sedimentation control.
- Inspections.
- Vehicles clean down area
- Rumble traps
- Refilling station
- Green office Guide implemented.

The audit team concludes that the organisation has established and maintains its management system in line with the requirements of the standards and demonstrated the ability of the system to systematically achieve agreed requirements for products or services within the scope and the organisation's policy and objectives. The organisation's management system clearly shows the capability to meet all applicable requirements and expected outcomes as demonstrated throughout this audit report.

Audit Result Classifications

Surveillance / Scope Expansion Assessments

Major Non-Conformity - Major NCR

The absence of, or the failure to implement & maintain, one or more management system elements, or a situation which, on the basis of available evidence:

- would raise significant doubt as to the capability of the system to achieve the policy and objectives of the organisation and satisfy legal and regulatory requirements,
- Additionally, for:
 - o QMS, would raise significant doubt as to the quality of what the organisation is supplying
 - o OHS, would raise concerns as to the ability for the system to maintain a safe working environment
 - o EMS, would raise concerns for the maintenance of an environmental system sufficient to prevent environmental harm.

Note: A Major Non-Conformity requires the certified entity to address and have closeout the identified Major NCR within a maximum timeframe of 3 months. As the follow-up report can take 2 weeks to process. The certified entity must submit all evidence to support compliance within a 2 ½ months' timeframe from the date raised.

Minor Non-Conformity – Minor NCR

A finding, indicative of a weakness in the system, a process, records or in the management of a particular activity. Or a situation which, if left without corrective action or attention by the organisation, would raise significant doubt as to the future capability of the Management System to:

- o QMS, could inhibit the quality of what the organisation is supplying
- o OHS, could inhibit the ability of the system to maintain a safe working environment
- o EMS, could inhibit the ability of the system to maintain an environmental system sufficient to prevent environmental harm.

Note: A number of Minor Non-Conformities raised against the same provision of the assessment standard or the organisation's Management System can effectively demonstrate a breakdown of the system and can therefore result in a Major Non-Conformity.

Observation - OBS

Finding warranting attention by the organisation although not necessarily requiring remedial action. CACS reserves the right to follow-up these findings at subsequent visits. **Important:** It would be expected that all the above improvements would be processed via the company's own internal improvement system (internal NCR), these internal NCRs will form part of the review process.

Stage 1 Assessment including Management System Certification Upgrades e.g. ISO 45001:2018 Audits only

Area of Concern – AOC

The potential absence of, or the potential failure to implement & maintain, one or more management system elements, or a situation which, on the basis of available evidence, may become an identifiable issue at a

- stage 2 Audit or
- upgrade assessment, for example a new standard such as ISO 45001:2018.

Note: These Areas of concern must be rectified prior to a positive certification recommendation can be made, additionally areas of concern are reviewed either at a stage 2 audit or follow-up report.

Stage 2 Certification Assessment / Initial and Recertification Assessment

Non-Conformance - NC

The absence of, or the failure to implement & maintain, one or more management system elements, or a situation which, on the basis of available evidence:

- would raise significant doubt as to the capability of the system to achieve the policy and objectives of the organisation and satisfy legal and regulatory requirements,
- Additionally, for:
 - o QMS, would raise significant doubt as to the quality of what the organisation is supplying
 - o OHS, would raise concerns as to the ability for the system to maintain a safe working environment
 - o EMS, would raise concerns for the maintenance of an environmental system sufficient to prevent environmental harm.

Note: Non-Conformity necessitates the need for the client to address and close out the issue raised prior to a certification / recertification recommendation being made.




Observation - OBS



Finding warranting attention by the organisation although not necessarily requiring remedial action. CACS reserves the right to follow-up these findings at subsequent visits. **Important:** It would be expected that all the above improvements would be processed via the company's own internal improvement system (internal NCR), these internal NCRs will form part of the review process.



Previous Audit Findings


Deficiencies Detected During the Previous Audit Have:	Yes	No	N/A
been raised internally within the client's own improvement system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multisite certification only – been satisfactory applied across all sites	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
been satisfactorily closed out	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If no is recorded above for any of the responses, the outstanding item/s "dependent upon severity" may be brought forward into the current findings matrix and may be either escalated and or reworded.

Standard Reference	Details	Finding Type - Number	Corrective Action by Client	Issue Closed YES NO	
9001 8.1 Operational planning and control	Projects – Risk Rating 2 Sighted the draft Project Process Guideline that is currently used by the project managers; however, this document is still in draft. Noted the plan of Amal Megawattage to complete the revision and implementation of this document in the next few months. This will be examined during the recertification audit.	Observation 01	Audit Finding 014 – Completed Capital Project Delivery Guideline attached.  Capital Project Delivery Guideline_WV	Yes <input type="checkbox"/>	<input type="checkbox"/>
9001 8.3 Design and development of products and services	Projects – Risk Rating 2 There is still a need for work to be undertaken here. Staff and management acknowledged the need to develop design and project management guidance material. A commitment has been made to have this issue resolved by the next surveillance audit.	Observation 02	Audit Finding 025 – Complete - This action was combined with the above audit finding with a Capital Project Delivery Guideline being preferred over 2 separate documents. The Guideline is attached, as above.	Yes <input type="checkbox"/>	<input type="checkbox"/>
45001 6.1 Actions to address risks and opportunities	Moranbah Water Treatment Plant Facility – Risk Rating 2 To ensure the wrong lifting device is not unintentionally used to lift chlorine gas cylinders, WWD could consider attaching an 'Out of Service' tag on the forklift lifting attachment in Chlorine Gas storage C1.	Observation 03	Audit Finding 033 – Lifting Register attached. Service reports can be provided if required. All lifting equipment not appropriate for use was tagged out and where possible removed from site.  Lifting Register 2024.xlsx	Yes <input type="checkbox"/>	<input type="checkbox"/>
9001 5.1 Leadership and commitment 14001 5.1 Leadership and commitment 45001 5.1 Leadership and commitment	Head Office - Risk Rating 2 There is an opportunity for improvement in implementing a process for ensuring continuity of IMS tasks and functions when staff leave. Link to HR backfilling arrangements - and prompts to ensure minimum IMS coaching and mentoring is provided to staff performing backfilling roles.	Observation 04	Audit Finding 035 – The roles and responsibilities guideline has been updated and includes responsibility to managers and supervisors to "Factor the needs and resources required during staffing transitions" and "Ensure sufficient handover and knowledge transfers are established prior to and during staffing transitions". A new starter checklist has been developed and is in use with the Water and Wastewater Treatment Plants. This checklist is attached.  IMS_Roles_and_Responsibilities_Guideline_	Yes <input type="checkbox"/>	<input type="checkbox"/>
14001 8.1 Operational planning and control	Head Office – Risk Rating 2 IRC could consider transferring the significant amount of waste metal from its waste facilities for recycling.	Observation 05	Audit Finding 036 – Following the assessment, this was not financially viable for the Manager of Operations and Maintenance (MOM) to complete this. Scrap metal is stored neatly on plants and does	Yes <input type="checkbox"/>	<input type="checkbox"/>

Standard Reference	Details	Finding Type - Number	Corrective Action by Client	Issue Closed YES NO	
			not pose any risk. The Manager of Waste (MWS) is working with MOM to have the scrap metal contractor attend any of the WTP/WWTP sites with larger amounts of scrap metal to collect when they are in the town attending the Waste Management Facility. This is the more cost-effective option.		
45001 6.1 Actions to address risks and opportunities	Glenden Water Treatment Plant Facility – Risk rating 2 IRC could consider installing suitable latches on each of the swing gate points above the filter tanks.	Observation 06	Audit Finding 037 – Photo attached. 	Yes <input type="checkbox"/>	Completed
45001 6.1 Actions to address risks and opportunities	Moranbah Water Treatment Plant Facility – risk Rating 3. IRC could consider locking switchboard doors in the control room at the Moranbah Water Treatment Facility to prevent inadvertent access by staff.	Observation 07	Audit Finding 038 – Switch board upgrades and operational modifications will permanently remove the requirement for the operators to enter the rear panel of the switchboard. An interim measure is implemented until the switchboard is upgraded to remove access by operators with only electrical personnel having access.	Yes <input type="checkbox"/>	Completed
45001 6.1 Actions to address risks and opportunities	Moranbah Water Treatment Plant Facility – Risk rating 2. IRC could consider including the chlorine gas lifting devices - Moranbah Water and Wastewater Facilities - in the preventative maintenance register.	Observation 08	Audit Finding 039 – Same as audit finding 33 - Complete – Lifting Register attached. Service reports can be provided if required. All lifting equipment not appropriate for use was tagged out and where possible removed from site.	Yes <input type="checkbox"/>	Completed
45001 8.1 Operational planning and control	Glenden Waste Management Facility – Risk Rating 2. IRC could consider including the oil drum lifters at Glenden and Moranbah Waste Management Facilities in the preventative maintenance register.	Observation 09	Audit Finding 041 – All Oil drum lifters have been tagged out as do not use. Customers only bring in small amounts of oil and do not warrant the use of these lifters. As budget is available, these will be removed from sites.	Yes <input type="checkbox"/>	Completed
45001 7.2 Competence	Head Office – Risk Rating 2. IRC could consider ensuring training for dealing with difficult customers is included in the TNA for frontline roles such as Waste Management Officers.	Observation 10	Audit Finding 042 – This video has been added to the training matrix for all WW Customer Service facing roles. Waste Officers, Customer Administration Officers and Plumbers. Matrix attached.  Difficult People Training.xlsx	Yes <input type="checkbox"/>	Completed
45001 6.1 Actions to address risks and opportunities	Moranbah Waste Management Facility – Risk Rating 2. IRC could consider disposing of the dilapidated spill kit at the Moranbah Waste Management Facility and replacing it.	Observation 11	Audit Finding 043 – Completed. The checking contents are on a Weekly checklist. Checklist example attached.	Yes <input type="checkbox"/>	Completed

Standard Reference	Details	Finding Type - Number	Corrective Action by Client	Issue Closed YES NO	
			 Water_and_Wastewater_New_Starter_Check		
45001 6.1 Actions to address risks and opportunities	Moranbah Waste Management Facility – Risk rating 3. IRC could consider repairing the defective chain edge protection provided above the waste transfer bins at Moranbah Waste Management Facility.	Observation 12	Audit Finding 044 – Photo attached. 	Yes <input type="checkbox"/>	Completed
45001 6.1 Actions to address risks and opportunities	Head Office – Risk rating 2. IRC could consider reviewing its 'optional' first aid policy and ensuring that the basis for determining how many first aiders is trained and where they are deployed is grounded firmly in the results of a first aid risk assessment for all facilities.	Observation 13	Audit Finding 046 – S&R are working through conducting risk assessments of all IRC sites. Action progress is being captured in HSW Committee Meeting minutes. Discussion included with People and Capability through Learning and Development Department as first aider policy remains 'optional'.	Yes <input type="checkbox"/>	Completed
9001 8.1 Operational planning and control 14001 8.1 Operational planning and control 45001 8.1 Operational planning and control	Head Office – Risk Rating 2. IRC could consider ensuring all light vehicles used by WWD staff are stocked with appropriate first aid kits - which are to be checked during vehicle pre-start inspections.	Observation 14	Audit Finding 047 – Process has been implemented with kits being ordered and delivered through Safety and Resilience. W&W has a tracking spreadsheet to determine which sites and vehicles are still outstanding. (spreadsheet attached).  ECM_5326389_v14_W&W Light Vehicles & S	Yes <input type="checkbox"/>	Completed
14001 8.1 Operational planning and control	E-waste storage – Risk Rating 2 At the time of the 2024 surveillance audit there was no evidence of the E-waste considerations being included in the waste facility specific management plans. Noted the plans to include E-waste hazards and required controls in the facility specific management plans.	Observation 15	Audit Finding 028 – Due to the amount of E-Waste and no specific collectors for this waste in the region, E-Waste is stockpiled in the scrap metal pile at each of the Waste facilities and is banned and recycled as part of the scrap metal contract. SBMP's are under review with the Manager of Waste Services to reflect the storage of E-Waste.	Yes <input type="checkbox"/>	Completed
9001 8.1 Operational planning and control 14001 8.1 Operational planning and control 45001 8.1 Operational planning and control	Moranbah Water Treatment Plant Facility - Risk Rating 2 WWD could consider delivering IMS roles, responsibilities and obligations training to leadership staff.	Observation 16	Audit Finding 034 – An IMS induction video is currently in its final review before going to the Director for Approval. A voice over will then be added and become part of the Training Matrix for all W&W staff. Additionally, the roles and responsibilities guidelines have been updated and an internal knowledge share to the directorate was released and is available on IRIS to use as a training tool for all new starters. Induction Slideshow, Knowledge share and Roles and Responsibilities	Yes <input type="checkbox"/>	Completed

Standard Reference	Details	Finding Type - Number	Corrective Action by Client	Issue Closed YES NO	
			Guideline attached.  Water and Waste IMS Induction Video a		
45001 6.1 Actions to address risks and opportunities	Moranbah Wastewater Treatment Plant Facility – Risk Rating 3. IRC could consider installing a pit safety access covering over the overflow return well at the Moranbah Wastewater Treatment Facility that includes fall prevention. Please consider safety access covers or equivalent as provided by a company called McBerns.	Observation 17	Audit Finding 040 – Various options are being investigated. The personnel in charge of this action have been unwell and as such have extended the date for this to be completed. W&W will engage the safety team to assess this recommendation. The WWTP operators are currently creating a WI on operating the OSD which includes the use of this pit, and the safety requirements involved for this. There is a chain on the step access and signage on this pit.	Yes <input type="checkbox"/>	Completed
9001 8.1 Operational planning and control 14001 8.1 Operational planning and control 45001 8.1 Operational planning and control	Head Office – Risk Rating 2. IRC could consider including landfill site rehabilitation and after care management strategies in the Environmental Management Plans governing these sites.	Observation 18	Audit Finding 045 – The Manager of Waste Services had addressed is in the management plan having noting aftercare strategies I hi documentation .	Yes <input type="checkbox"/>	Completed

Current Audit Findings

Identified finding - All findings MUST be documented via the organisations own internal Improvement / NCR process.

If multisite certification - Clarification of compliance against identified deficiencies as listed below across all certified locations must be covered within client response as applicable.

Standard Reference	Details	Finding Type - Number	Finding Classification
ISO 9001:2015 Clause 8.5.1 ISO 14001:2015 Clause 6.1.2 ISO 45001:2018 Clause 7.4	<p>Uncontrolled Flammable Liquids: The Nebo Waste Management Facility has failed to implement adequate containment and control measures in the shed marked Flammable Liquid, leading to an uncontained spillage of an unidentified substance. Additionally, poor housekeeping within the shed presents an increased risk of slips, trips, and falls, compromising workplace safety and potentially contributing to secondary hazards related to improper material storage.</p> <p>References:</p> <ul style="list-style-type: none"> ISO 9001:2015 Clause 8.5.1, as controlled conditions for operations have not been maintained. ISO 14001:2015 Clause 6.1.2, as environmental hazards have not been identified or managed effectively. ISO 45001:2018 Clause 7.4, as safety hazards have not been properly communicated or addressed. 	Observation 01	Observation: This issue, while not "non conformant", requires review prior to the next audit and is to be recorded via the company's internal NCR process to prevent becoming a Minor NCR.
ISO 9001:2015 Clause 8.5.1 ISO 14001:2015 Clause 6.1.2 ISO 45001:2018 Clause 7.2 & 7.4	<p>Uncontrolled First Aid Boxes: The Nebo and Clermont sites (WMF, WWTP, WTP) have failed to maintain effective control over first aid provisions, leading to the presence of expired medical supplies and unmarked first aid kits across locations. The council has initiated a systematic rollout of replacement kits, demonstrating corrective actions toward resolving the issue. At the next surveillance audit, the completion status of the rollout will be evaluated to determine whether full compliance has been achieved.</p> <p>References:</p> <ul style="list-style-type: none"> ISO 9001:2015 Clause 8.5.1, as service provision lacks proper oversight. ISO 14001:2015 Clause 6.1.2, as expired supplies require responsible disposal practices. ISO 45001:2018 Clause 7.2 & 7.4, due to deficiencies in safety communication and emergency readiness. 	Observation 02	Observation: This issue, while not "non conformant", requires review prior to the next audit and is to be recorded via the company's internal NCR process to prevent becoming a Minor NCR.
ISO 9001:2015 Clause 7.1.5 ISO 14001:2015 Clause 6.1.2 ISO 45001:2018 Clause 8.1.2	<p>Tag and testing: The Nebo and Clermont facilities have not ensured that all electrical leads are systematically tested and tagged, resulting in potential electrical hazards and lack of control with requirements. While main switchboards have been tested and tagged, it is necessary to conduct a formal review of its testing and tagging process to ensure consistency across all locations. At the next surveillance audit, the effectiveness of the updated process and compliance status will be assessed.</p> <p>References:</p> <ul style="list-style-type: none"> ISO 9001:2015 Clause 7.1.5, as monitoring and measuring controls for operational quality are incomplete. ISO 14001:2015 Clause 6.1.2, due to the risk of environmental hazards linked to improper electrical equipment safety. ISO 45001:2018 Clause 8.1.2, as hazard identification and reduction measures require further review. 	Observation 03	Observation: This issue, while not "non conformant", requires review prior to the next audit and is to be recorded via the company's internal NCR process to prevent becoming a Minor NCR.
ISO 9001:2015 Clause 7.5.3 ISO 14001:2015 Clause 6.1.3 ISO 45001:2018 Clause 9.3	<p>Documentation Control: The directorate of Water and Waste is to maintain and review documentation in accordance with the review cycle (two years) is required. A comprehensive review of process and documentation is required to establish a realistic and achievable document review system, ensuring compliance with mandated timelines. The effectiveness of this corrective action will be assessed at the next surveillance audit.</p> <p>References:</p> <ul style="list-style-type: none"> ISO 9001:2015 Clause 7.5.3, as document control measures have not been systematically enforced. ISO 14001:2015 Clause 6.1.3, due to compliance obligations not being reassessed. ISO 45001:2018 Clause 9.3, as scheduled management reviews have not been conducted appropriately. 	Observation 04	Observation: This issue, while not "non conformant", requires review prior to the next audit and is to be recorded via the company's internal NCR process to prevent becoming a Minor NCR.

Standard Reference	Details	Finding Type - Number	Finding Classification
ISO 9001:2015 Clause 7.5.3 ISO 14001:2015 Clause 6.1.3 ISO 45001:2018 Clause 7.4 ISO 9001:2015 Clause 5.2 ISO 14001:2015 Clause 5.2 ISO 45001:2018 Clause 5.2	<p>Policies Displayed: The Nebo WMF was found to have displayed outdated OH&S policy on its safety notice board, which was corrected during the audit. However, a comprehensive review of document control processes must be undertaken to prevent recurrence and to ensure similar inconsistencies are identified across all locations.</p> <p>Additionally, the communication of the quality and environmental policies made apparent within the directorate and interested parties at these various locations. At the next surveillance audit, the status of document verification processes across all locations will be reviewed to confirm compliance and to validate the effectiveness of implemented corrective actions.</p> <p>References:</p> <ul style="list-style-type: none"> • ISO 9001:2015 Clause 7.5.3, as document control measures need strengthening. • ISO 14001:2015 Clause 6.1.3, due to potential misalignment with compliance obligations. • ISO 45001:2018 Clause 7.4, as effective communication of safety information must be maintained. • Each standard clause 5.2 where policies are to be communicated and understood and applied throughout the council. Then be available to interested parties, as appropriate. 	Observation 05	Observation: This issue, while not "non conformant", requires review prior to the next audit and is to be recorded via the company's internal NCR process to prevent becoming a Minor NCR.
ISO 9001:2015 Clause 7.5.3 ISO 14001:2015 Clause 6.1.3 ISO 45001:2018 Clause 7.4	<p>Signage: The entry signage at various locations has not undergone an appropriate review to ensure that legislation references, and entry conditions remain updated in alignment with compliance obligation reviews.</p> <p>A formalized signage review process is required to verify legislation references, regulatory obligations, and the clarity of displayed entry conditions. The effectiveness of corrective actions will be evaluated in the next surveillance audit to confirm compliance.</p> <p>References:</p> <ul style="list-style-type: none"> • ISO 9001:2015 Clause 7.5.3, due to outdated documented information being publicly displayed. • ISO 14001:2015 Clause 6.1.3, as environmental and operational compliance details must be accurately communicated. • ISO 45001:2018 Clause 7.4, given that proper communication of health, safety, and operational conditions must be maintained. 	Observation 06	Observation: This issue, while not "non conformant", requires review prior to the next audit and is to be recorded via the company's internal NCR process to prevent becoming a Minor NCR.
9001 9.3 Management review 14001 9.3 Management review 45001 9.3 Management review	<p>Management Review: While management reviews are conducted and documented, they do not explicitly clarify where each mandatory agenda input and output are discussed across all meetings.</p> <p>A formal review of the management review process is required to implement agenda tracking mechanisms and structured documentation practices that ensure clear identification of where each topic is discussed. The effectiveness of corrective actions will be assessed at the next surveillance audit.</p> <p>References:</p> <ul style="list-style-type: none"> • ISO 9001:2015 Clause 9.3, due to incomplete identification of required discussion topics. • ISO 14001:2015 Clause 9.3, as environmental compliance topics may not be systematically tracked. • ISO 45001:2018 Clause 9.3, as occupational health and safety discussions need clear agenda mapping. 	Observation 07	Observation: This issue, while not "non conformant", requires review prior to the next audit and is to be recorded via the company's internal NCR process to prevent becoming a Minor NCR.

Element Guide

All elements to be assessed at least once every 3year cycle.		Environment ISO 14001:2015	Quality ISO 9001:2015	Safety ISO 45001:2018
1, 2, 3	Mandatory Every Audit	1 - Scope Changes 2 - Use Logo / JAS-ANZ Mark 3 - Previous NCRs / Observations	1 - Scope Changes 2 - Use Logo / JAS-ANZ Mark 3 - Previous NCRs / Observations	1 - Scope Changes 2 - Use Logo / JAS-ANZ Mark 3 - Previous NCRs / Observations
4.0	Context of the Organisation	4.1 Understanding organization 4.2 Understanding needs expectations 4.3 Determining the scope of the EMS 4.4 Environmental management system	4.1 Understanding organization context. 4.2 Understanding needs expectations 4.3 Determining the scope of quality sys 4.4 QA management system its processes	4.1 Understanding organization context 4.2 Understanding needs expectations 4.3 Determining scope of safety sys 4.4 Safety management systems
5.0	Leadership	5.1 Leadership and commitment 5.2 Environmental policy 5.3 Organizational roles, responsibilities	5.1 Leadership and commitment 5.2 Quality Policy 5.3 Organisational Roles, Response	5.1 Leadership and commitment 5.2 Safety Policy 5.3 Organisational Roles, response 5.4 Participation & Consultation
6.0	Planning and Risk	6.1 Actions address risks opportunities 6.2 Environmental objectives	6.1 Actions address risks opportunities 6.2 Quality objectives planning achieve 6.3 Planning changes	6.1 Actions address risks opportunity 6.2 Safety objectives planning
7.0 (part 1)	Support	7.1 Resources 7.2 Competence 7.3 Awareness	7.1 Resources / Monitoring measuring 7.2 Competence 7.3 Awareness	7.1 Resources 7.2 Competence 7.3 Awareness
7.0 (part 2)	Support	7.4 Communication 7.5 Documented information	7.4 Communication 7.5 Documented information	7.4 Communication 7.5 Documented information
8.0 (part 1)	Operations	8.1 Operational planning and control 8.2 Emergency preparedness response	8.1 Operational planning and control 8.2 Requirements for products services	8.1 Operational planning and control 8.2 Emergency preparedness response
8.0 (part 2)	Operations	Not Applicable Environmental	8.3 Design development products 8.4 Control External proc, prod, serv	Not Applicable Safety
8.0 (part 3)	Operations	Not Applicable Environmental	8.5 Production and service provision 8.6 Release of products and services 8.7 Control of nonconforming outputs	Not Applicable Safety
9.0	Performance Mandatory	9.1 Monitoring, measurement, analysis 9.2 Internal audit 9.3 Management review	9.1 Monitor. Measure, Analysis Evaluation 9.2 Internal audit 9.3 Management review	9.1 Monitor, Measure, Analysis Evaluation 9.2 Internal audit 9.3 Management review
10.0	Improvement Mandatory	10.1 General 10.2 Nonconformity & corrective action 10.3 Continual Improvement	10.1 Improvement General 10.2 Nonconformity & corrective action 10.3 Continual improvement	10.1 General 10.2 Incident, nonconformity corrective action 10.3 Continual improvement

Management System Status against the Core Elements of the Standards

4.0 Context of the Organisation:

- Understanding the Context of the Organisation
- As the flagstone of a management system, clause 4 determines why the organization is here.
- The org is required to identify internal & external issues that can impact on its intended outcomes, as well as all interested parties & their requirements.
- It is also a requirement to document its scope & set the boundaries of the management sys – all in line with the business objectives.

Annexure SL Clause:	4.1 Understanding the organization and its context
	4.2 Understanding the needs and expectations of interested parties
	4.3 Determining the scope of the quality management system
	4.4 Quality management system and its processes

Comments:

IRC understands and has determined the external and internal issues that are relevant to the purpose and strategic direction and that can affect, either positively or negatively:

- Its ability to achieve the intended results of its management system.
- To identify all relevant internal and external issues including conditions, characteristics or changing circumstances that can affect its Quality, Safety and Environmental management system and then address those that require further attention.

IRC are also aware that external and internal issues can change, and therefore, are monitored and reviewed.

Information about external and internal issues was demonstrated from many sources through internal documented information and meetings, with meetings, customers and relevant interested parties, and professional associations.

IRC was able to demonstrate their maintenance of the internal and external issues via the risk assessments presented as well as the minutes to various meetings. It is further noted when detailing the Context of the Organization – Clause 4.1 and 4.2 (ISO 45001:2018 / ISO 9001:2015 / ISO 14001:2015 as applicable) IRC has acknowledged the need to consider evidence to demonstrate that climate change, a critical external factor, has been appropriately integrated into the context of the organization.

IRC management system is reviewed at planned intervals and through activities such as management review and at multiple meetings. The evidence provided details this review process which will further enhance external and internal issues relevant to IRC context. This included, but not limited to:

1. External issues related to:

- Economic factors, economic situation.
- The size and complexity of the organization and the nature of the activities carried out therein.
- Organizational governance and structure, roles and accountabilities.
- Social factors such as unemployment rates, safety perception, education levels, public holidays and working days.
- Political factors such as political stability, public investments, local infrastructure, international trade agreements.
- Key drivers and trends of relevance to the industry or sector in which the organization operates.
- The form and extent of contractual relationships, including, for example, outsourced activities.
- The capability and capacity of the organization in terms of resources, knowledge and competence (e.g. capital, employee competencies, processes, systems and technologies).
- Technological factors such as new technology, materials and equipment, professional code of ethics.
- Market factors such as competition, including market share, similar products or services, market leader trends.
- Relationship with contractors, suppliers, partners and other externally interested parties.
- Statutory and regulatory factors which affect the work environment such as regulations related to an industry.

2. Internal issues related to:

- Overall performance of the organisation.
- Resource factors, such as infrastructure, environment for the operation of the processes, organizational knowledge.
- Human aspects such as competence of people, organizational behavior and culture.
- Operational factors such as process or production and service provision capabilities, performance of the management system, monitoring customer satisfaction.
- Factors in the governance of the organization, such as rules and procedures for decision making or organizational structure.

IRC considers the relevant requirements of interested parties, beyond just those of its direct customers. IRC focuses on those relevant interested parties which can have an impact on its ability to provide products and services that meet requirements. While not directly stated in the standard, IRC also considers external and internal issues before, and to assist in, determining their relevant interested parties. The list of relevant interested parties and are unique to the organisation.

Annexure SL Clause:	4.1 Understanding the organization and its context 4.2 Understanding the needs and expectations of interested parties 4.3 Determining the scope of the quality management system 4.4 Quality management system and its processes
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IRC has developed criteria for determining relevant interested parties by considering for example, yet not limited to their:

- Possible influence or impact on IRC performance.
- Decisions.
- Ability to create risks and opportunities.
- Possible influences or impact on the market.
- Ability to affect the organisation through their decisions or activities.
- Legal and regulatory authorities such as the Health and Safety Authority HSA/Health and Safety Executive HSE.
- Owners, shareholders, parent company.
- Suppliers, contractors and subcontractors.
- Workers' representatives such as safety representatives/safety councils/health and safety committee.
- Clients.
- Visitors.
- Environmental Objectives.
- The general public.
- Medical and emergency services; and/or
- Occupational safety and health-care professionals

The scope of the IRC management system includes the organisation's control or influence that could impact its performance.

The scope is a factual statement of IRC operations and business processes included within its management system boundaries. IRC maintain the scope of the management system as documented information and make it available to interested parties when appropriate.

IRC determines the boundaries of the management system so that it is defined in a manner that helps the organisation meet requirements and the intended results of the system. The scope of the management system has been established based on:

- The external and internal issues as determined by the requirements of.
- The relevant requirements of relevant interested parties.
- The products and services provided by the organisation.

In determining scope, IRC has also established the boundaries of the management system by considering such issues as:

- The infrastructure of the organisation.
- IRC activities.
- Commercial policies and strategies.
- Centralized or externally provided functions, activities, processes, products and services.

All requirements of the standards have been considered. The scope is maintained as documented information. The scope includes details of the products and services covered. This documented information is maintained within manuals and websites and so forth.

IRC has determined the processes needed for the management system in accordance with the applicable standards. This includes not only the processes for production and service provision, but also the processes that are needed for the effective implementation of the quality, safety and environment management detailed within IRC documentation. IRC has further detailed processes for monitoring and measuring resources.

IRC documented quality, safety and environmental management system is aligned with business processes to ensure performance is not compromised in order that other business objectives can be achieved at the expense of achieving productivity objectives, not sacrificing:

- Quality of product and or service.
- Health and safety; and
- Environmental Compliance

IRC quality, safety and environmental requirements are aligned and integrated with IRC management practices and business processes. Issues can be evaluated in light of IRC strategy, and management system initiatives with other business imperatives.

IRC have considered and implemented the application of a PDCA approach towards its management system as follows:

- **Plan** – decide what the organization wants to achieve (considering internal and external issues, the needs of interested parties, and risks and opportunities), and put in place the necessary processes and resources.
- **Do** – put the plans into action.
- **Check** – monitor and measure processes and performance against requirements and what you want to achieve.
- **Act** – take actions to deal with nonconformities and to improve performance.

The management representative reviews what information is used for the process to perform consistently to deliver the intended output. For information (e.g. procedures, work instructions, visual aids, information and communication systems, drawings, specifications, metrics, reports, key performance indicators [KPIs], meeting minutes, representative samples, verbal conversations) that is used, an analysis/review of the value to support the process is carried out.

Annexure SL Clause:	4.1 Understanding the organization and its context 4.2 Understanding the needs and expectations of interested parties 4.3 Determining the scope of the quality management system 4.4 Quality management system and its processes
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IRC have developed objectives, risk and opportunities, strategies, among other relevant elements as documented information. IRC specify the different types of documented information needed to support the operation of its processes and its management system. In determining the type and extent of documented information needed, IRC evaluate its own needs and apply risk-based thinking. IRC also gives consideration to its size, activities, types of products or services, complexity of its processes, resources, etc., as well as the potential consequences of nonconformities.

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Surridge - Program Leader - Compliance and IMS | Business Services
- Refer to the photographic section of this report.

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference to the context of the IRC water and waste directorate.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
- Site Based Management Plan - Clermont.pdf refers
- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers
- In relation to the determination of climate changes with its various external and internal influences and, where necessary the impact of interested parties that affect the operations of IRC water and Waste.
- Various meetings that review context occur:
 - Minutes - Quarterly IMS Management Review - Jan 2025. This documented information presents the necessary review of content that includes the internal and external issues also including the review of needs and expectations of interested parties that affect the management system.
 - Minutes - Annual IMS Management Review - June 2024.pdf further includes the reference to context with its ongoing maintenance and review.
 - Audit & Risk Committee Meeting Agenda – 17.03.2025.docx
 - Compliance & IMS Team Meeting - 31.01.2025.pdf
 - Monthly Managers Meeting Agenda April 2025 Confirmed.pdf
 - Planning & Projects Team Meeting - 15.04.2025.pdf
 - Planning and Projects Team Meeting Minutes - 11.03.2025.pdf
 - Projects & Planning Team Meeting - 11.03.2025.pdf
 - Standing Committee Meeting - 5.2 Water and Wastewater Preventative Maintenance Program Update.pdf
 - Water & Wastewater Operations Meeting - 20.02.2025.pdf
 - Whole Waste Services Team Meeting - 26.02.2025.pdf

5.0 Leadership:

- Leadership is established and defined
- The high-level structure places particular emphasis on leadership, not just management.
- Management has a high level of accountability and involvement in the organization's management system.
- Integration of requirements of the management system into the organisations core business process, ensure the management system achieves its outcomes
- Top management is responsible for communicating the importance of the management system and heightening employee awareness & involvement.

Annexure SL Clause: 5.1 Leadership and commitment

Comments:

The IRC executive leadership team are focused on ensuring that they maintain quality, safety and environment embedded in council operations and business to benefit from rather than a form just adhering to compliance. The current management system demonstrated that they include regular monitoring, and ongoing management of all activities needed to ensure the management system's effectiveness and continual improvement by:

- Setting expectations relative to the organisation context.
- Understanding the specific requirements of each ISO Standards,
- Understanding the ongoing work activities needs to be risk-based and focused.
- Providing genuine ongoing leadership and commitment specific to HSEQ ongoing activities to comply with its obligations.
- Taking accountability of the effectiveness of the Management System.
- Identifying the required policies, objectives and implementing procedures to align the management system with the strategic direction and the organisation context.
- Developing and maintaining a suitable change management process.
- Identifying the required resources to ensure that the MS is maintained effectively.
- Ensuring that the resources needed for the MS system are competent to carry out the work and are available.
- Promoting awareness of ISOC activities.
- Communicating the importance of team members conducting their work activities in line with what is documented.
- Monitoring the MS to ensure it achieves its intended results.
- Engaging, directing and supporting people to contribute to the effectiveness of the management system.
- Fostering a business culture that maintained a continual improvement focus; and
- Supporting other relevant management roles to demonstrate their leadership as it applies to their areas of responsibility.

IRC relies on past experience and overall capabilities. They have been able to grow their directorate to what it is today, based on a delivery of a consistent professional service in a safe and environmentally conscious manner with a focus on the risk-based approach and direct consideration for customer feedback and delivering a service to customer satisfaction.

IRC value customer feedback, given their size, complexity and service to the community and ensuring they conduct customer satisfaction activities in a consistent approach. Currently this is carried out in an informal manner by monitoring and managing customer feedback via:

- Framework of Client Feedback management framework
- Client Emails, Phone calls
- Customers information sharing meetings
- Project Discussions, general discussions
- Management of customer complaints

Customer complaints are handled by management with relevant details recorded, issues investigated and communicated as needed. No customer complaints have been identified at the point of the audit

Evidence:

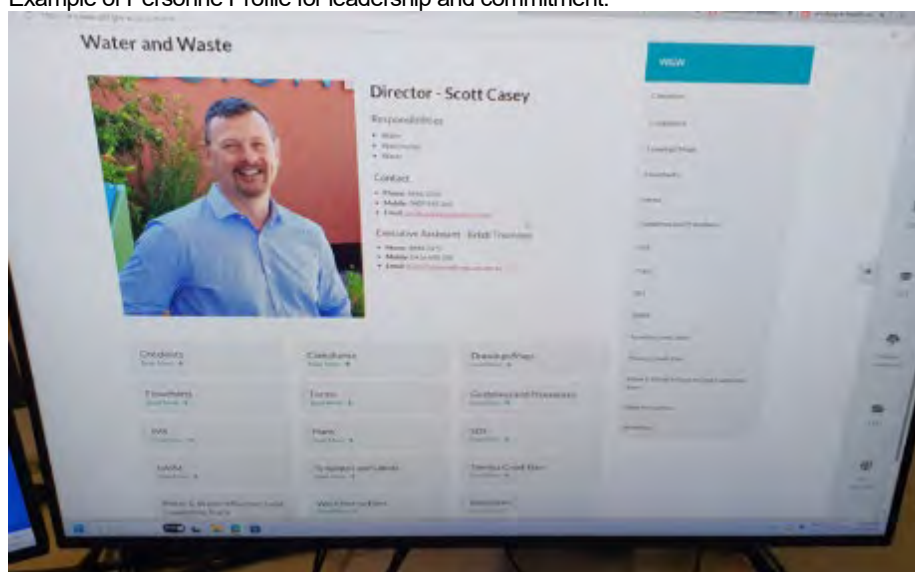
Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference for the IRC water and waste directorate.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
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- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers
- In relation to the determination of climate changes with its various external and internal influences and, where necessary the impact of interested parties that affect the operations of IRC water and Waste.
- Various meetings displaying the engaging, directing and supporting workers occur:
 - Minutes - Quarterly IMS Management Review - Jan 2025. This documented information presents the necessary review of content that includes the internal and external issues also including the review of needs and expectations of interested parties that affect the management system.

- Minutes - Annual IMS Management Review - June 2024.pdf further includes the reference to context with its ongoing maintenance and review.
- Audit & Risk Committee Meeting Agenda – 17.03.2025.docx
- Compliance & IMS Team Meeting - 31.01.2025.pdf
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- Projects & Planning Team Meeting - 11.03.2025.pdf
- Standing Committee Meeting - 5.2 Water and Wastewater Preventative Maintenance Program Update.pdf
- Water & Wastewater Operations Meeting - 20.02.2025.pdf
- Whole Waste Services Team Meeting - 26.02.2025.pdf
- Leadership further in the following positions and people representatives.
 - Angela Elliott - Compliance and IMS Officer | Business Services
 - Tait Suridge - Program Leader - Compliance and IMS | Business Services
 - Kirstie Matthews - Program Leader - Customer Administration & Business
 - Scott Casey - Director of Water and Waste
 - Lisa Tonkin - Manager Business Services
 - Amal Meegahawattage - Manager Planning and Projects
 - Jason Grandcourt - Manager Waste Services
 - Konny Okumura - Project Coordination Officer
 - Anthony Waller - Treatment Plant Operator, Nebo
 - Faisal Shah - Treatment Plant Operator, Nebo
 - Eva Syminton - Governance Administration Officer
 - James Kingston - Treatment Plant Supervisor South
 - Stephen Wagner - Manager – Operations & Maintenance
 - Trudi Liekefett - Manager, People and Capability
 - Nicole Sharrock - Environmental & Sustainability Officer
 - Kielly Glanville - Senior People and Capability Business Partner - Learning and Development
 - Norman Caldwell - Supervisor Waste Services
 - Peta Eyschen - Manager Governance
 - Shelley-Ann Cottam - Treatment Plant Supervisor North
 - Melissa Thompson - Team Leader Clermont and Moranbah, Waste Services
 - Kylie Kavanagh - Strategic Sourcing Officer
 - Seungchan Bang - W&W Maintenance Planner
- Example of Personne Profile for leadership and commitment:



Comments:

IRC has documented suitable Health and Safety, Environmental and Quality (HSEQ) Policy statement that complies with the requirements of each standard.

The policy statements are displayed in the open office area of the administration office and are made available to interested parties (in PDF form) upon request, in particular the OH&S Policy.

IRC is committed to reviewing (on a regular basis) and maintaining a suitable set of policy statements specific to that:

- Are appropriate (fit for purpose) as identified within the current organisational context.
- They support its strategic direction, safety and environmental regulations, the nature, sale and environmental impacts of its activities, product and services.
- Provides a framework for setting suitable objectives.
- Includes a commitment to satisfy applicable requirements.
- Includes a commitment to health and safety, the protection of the environment.
- Includes a commitment to fulfill its general, regulatory and legal compliance obligations.
- Includes a commitment to continual improvement of the quality and environmental management system to enhance performance.
- It is appropriate to the nature and scale of the organisation's risks.
- Includes the commitment to establish measurable objectives and targets to ensure continued improvement aimed at elimination of work-related injury and illness.
- Includes a commitment to comply with relevant OHS legislation and with other requirements identified.
- They are documented, implemented, maintained and communicated to all interested parties.
- It is reviewed periodically to ensure it remains relevant and appropriate to the organisation.

It was determined during the audit that a number of additional policies were identified that management feel is essential to maintain a level of professionalism.

IRC have also demonstrated that they have reviewed and will continue to review (on a regular basis) the OHS, Environment and Quality policy, which are:

- Available and maintained as Documented Information (DI).
- Communicated, understood and applied within the organisation; and
- Available to relevant interested parties, as appropriate.

IRC has demonstrated that they communicate the Policies in a suitable manner which include but are not limited to:

- Policies available in staff induction manuals
- Policies available in tender responses
- Within Project work (if and when needed as part of the project file submission)
- Policies available upon request by interested parties
- SharePoint
- Can not locate it on the website, it will be completed once it is completed

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services
- Refer to the photographic section of this report

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference for the IRC water and waste directorate.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
- Site Based Management Plan - Clermont.pdf refers
- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers
- Policies include the following files presented:

POLICIES & POLICY STATEMENTS

IDI	NAME
PECS-POL-034	Complaints Management Process Policy
CORP-POL-113	Disposal Policy
STAT-POL-045	Enterprise Risk Management Policy
ADM-POL-002	Environmental Policy
CORP-POL-122	Procurement Policy
ADM-POL-003	Quality Policy
CORP-POL-026	Record Keeping Policy
ADM-POL-001	WHS Policy
	Environmental Policy Statement
Statements	Quality Policy Statement
	WHS Policy Statement

- Files presented of these listed policies were:
 - ECM_3567345_v5_Environmental Policy CORP-POL-002
 - ECM_3567346_v8_Quality Policy CORP-POL-003
 - ECM_3579291_v11_Workplace Health and Safety Policy CORP-POL-001
- Communication of the policies via:
 - Notice boards
 - Induction training
 - Toolbox Talks
- Review as part of the following meetings:
 - Minutes - Quarterly IMS Management Review - Jan 2025. This documented information presents the necessary review of content that includes the internal and external issues also including the review of needs and expectations of interested parties that affect the management system.
 - Minutes - Annual IMS Management Review - June 2024.pdf further includes the reference to context with its ongoing maintenance and review.
 - Audit & Risk Committee Meeting Agenda – 17.03.2025.docx
 - Compliance & IMS Team Meeting - 31.01.2025.pdf

Comments:

IRC maintains a suitable (and visually unique) organisation chart and a list of detailed position descriptions for each of the identified types of roles. The IRC organisational chart documents the structure and open discussion model of lines of communications encompassing all teams' members. The organisation chart was discussed and the relevant reference to the organisation chart was documented.

It was evident that IRC working culture encourages that all team members have the understanding of and competence to identify and record any issues relating to:

- The delivery of the product or service as per job specifications.
- issues with variations to delivery of the given service for a specified job.
- To the team members overall health and safety.
- Working activities leave a minimalistic environmental footprint.
- To the overall monitoring and maintenance of the Management System; and
- Embedding a genuine focus on continual improvement.

IRC management are responsible for ensuring that policies, procedures, and relevant work instructions are monitored and adhered to ensuring that suitable systems are in place to manage both of their business process, also identify and resolve issues relevant to their Management Systems. It was evident that IRC has assigned responsibility and authority to:

- Ensuring the MS content and practical activities conform to the requirements of the relevant standard(s).
- Ensuring that the policies are communicated, made available and monitored to ensure that they are adhered to.
- Ensuring that the processes are delivering their intended outputs.
- Reporting on the performance of the MS and on opportunities for improvement, in particular to top management.
- Ensuring the promotion of customer focus throughout; and
- Ensuring that the integrity of the management system is maintained when changes to the management system are identified, planned for and implemented.

It was also evident that IRC management ensure that the responsibilities and authorities for relevant roles are assigned and communicated to interested parties, as appropriate and as needed by the various interested parties.

Evidence:

Discussion with:

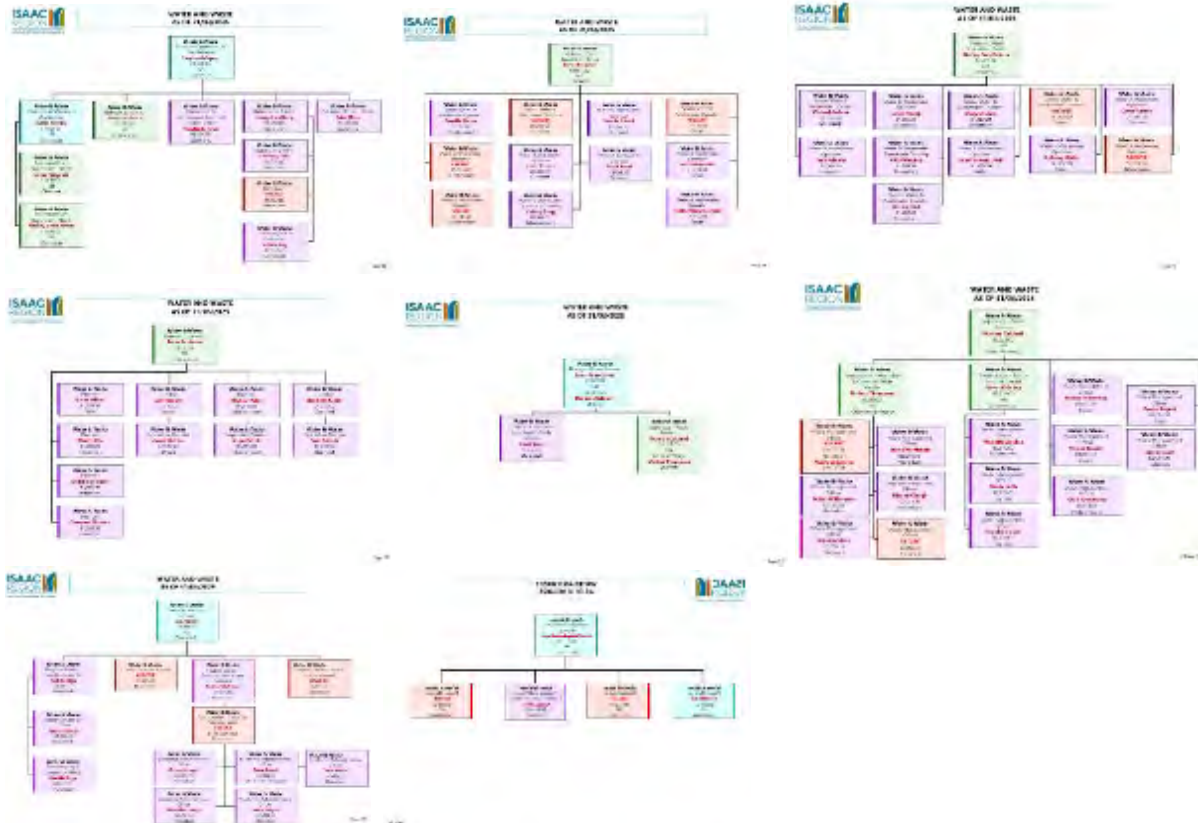
- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services
- Refer to section 5.1 of this report as to the representatives both at the opening and closing meeting along with those interviewed during this audit.

Documents presented include:

- ECM_4525413_v4 IMS Framework for Water and Waste (3) makes reference for the IRC water and waste directorate.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
- Site Based Management Plan - Clermont.pdf refers
- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers
- IMS roles, responsibilities and authorities are defined within the W&W IMS Roles and Responsibilities Guideline (WW-GDS-108), position descriptions, procedures, and other documentation. For the purposes of this section, IRC Organisational leadership roles have been defined as they apply to the scope as follows:

- **Executive Leadership Team (ELT):** The ELT is comprised of the CEO, Directors, and Executive Management. They hold the responsibility and authority for overseeing IRC operations and are tasked with establishing and ensuring the fulfillment of policies and objectives. The ELT plays a central role in the Integrated Management System (IMS), including managing resources and financing to ensure the successful achievement of organisational goals.
- Additionally, the ELT ensures that IMS objectives and key performance indicators are achieved, support management in compliance, regulatory and non-conformance reporting, and provide adequate resources and training to foster ongoing commitment and performance of the IMS.
- **Managers:** have responsibility and authority for the conduct and control of IRC operations relevant to their area, and to ensure resources are available and directed as appropriate to meet the objectives of the IMS.
- **Workers:** Everyone working for and on behalf of IRC is responsible for ensuring adherence to Workplace Health and Safety, Environment, and Quality standards.
- Examples of the following samples of IRC Organisational Charts such as:





-
- IMS_Roles_and_Responsibilities_Guideline__WW_GDS_108
- IRC_Organisational_Chart_31_March_2025
- Review of the following Position Descriptions include:
 - 47001 Senior Wellbeing and Resilience Partner - Position Description.docx
 - 86600 Manager Planning Projects - Position Description.docx

Comments:

The safety requirements and or level of risk associated to IRC are predominately office and site based. However, sites visit occur. These site visits have rules and expectations are based on the principle and or client site related induction and safety requirements. Under this model all IRC staff activities are managed and dictated by the rules and expectations of the site.

IRC leadership is committed to gaining the relevant understanding specific to ISO 45001 and involving all interested parties to ensure that it is correctly embedded within the general working environment.

IRC leadership have demonstrated that an effective flow of communication of information between all levels of management and employees is one of the most important elements in effective identification, implementation and the management of Health and Safety.

IRC has identified first aid staff, and fire wardens (over and above others identified within the building floor and the building itself). To assist in achieving this goal, IRC make use of meetings on one or more of the following in both formal and informal manner, including but not limited to:

- Safety moment listed at a weekly team meeting.
- Safety is an agenda item at the Operations meetings, plus any client meetings.
- Health and Safety discussions at the Operations.
- Regular meetings agenda within ops meetings.
- General discussions are as and when needed.
- Toolbox talks, and Safety alerts when visiting on site.
- Site introduction for visitors.
- Being considered and being developed as part of a digital dashboard for internal interested parted.

The effective flow of clear, concise, Up-To-Date information via consistent communication (relating to working environments) between all levels of management, employees and or contractors located in the field across multiple working sites is one of the most important elements in effective identification and management of all Health and Safety aspects.

While consultation is about seeking workers' views, and considering them, before making a decision, participation is about joint decision-making, e.g. jointly undertaking a risk assessment and agreeing actions or being involved in deciding the organisation's OH&S policy and objectives.

At the time of the audit, it was evident that management was very open with the field workers to ensure that the team are involved in participation, consultation and work as a united force.

It was evident via the operations meeting and the ongoing commitment to maintaining a clear transparent framework for communications and participation, where IRC involves workers in ensuring their activities are in line with the expectation of the OH&S management system and the processes that it supports.

IRC considers the need for worker consultation and participation in the following scenarios or activities, to ensure that the staff are aware of the relevant safety issues that are potentially issues on site:

- New processes, policies and procedures.
- New or unfamiliar hazards.
- Construction, modification or change of use of buildings and facilities.
- Introduction of new or modified equipment and new or amended controls.
- Changes in legal and/or other requirements.
- Investigating incidents and nonconformities and determining corrective actions.
- Determining applicable controls for outsourcing, procurement and contractors.
- Ensuring continual improvement.
- Changes in emergency arrangements; and
- Developing new or improved OH&S arrangements and procedures.

Any Incident/Accident are reported to senior management and investigated as required. Other issues are reported appropriately and escalated to Management for suitable investigation are undertaken.

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Surridge - Program Leader - Compliance and IMS | Business Services
- Refer to section 5.1 of this report as to the representatives both at the opening and closing meeting along with those interviewed during this audit.

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference for the IRC water and waste directorate.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
- Site Based Management Plan - Clermont.pdf refers
- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers
- WW IMS Consultation and Performance Evaluation Plan.pdf refers
- WWILT_Terms_of_Reference_WW_TOR_033.pdf refers
- Various meetings displaying communication, consultation and participation in the following:
 - Minutes - Quarterly IMS Management Review - Jan 2025. This documented information presents the necessary review of content that includes the internal and external issues also including the review of needs and expectations of interested parties that affect the management system.
 - Minutes - Annual IMS Management Review - June 2024.pdf further includes the reference to context with its ongoing maintenance and review.
 - Audit & Risk Committee Meeting Agenda – 17.03.2025.docx
 - Compliance & IMS Team Meeting - 31.01.2025.pdf
 - Monthly Managers Meeting Agenda April 2025 Confirmed.pdf
 - Planning & Projects Team Meeting - 15.04.2025.pdf
 - Planning and Projects Team Meeting Minutes - 11.03.2025.pdf
 - Projects & Planning Team Meeting - 11.03.2025.pdf
 - Standing Committee Meeting - 5.2 Water and Wastewater Preventative Maintenance Program Update.pdf
 - Water & Wastewater Operations Meeting - 20.02.2025.pdf
 - Whole Waste Services Team Meeting - 26.02.2025.pdf
 - HSW Operational Committee Meeting - 18.02.2025.pdf

6.0 Planning and Risk:

- Actions to address risks opportunities Including Legal requirements
- Clause 6 brings risk-based thinking to the front.
- The organization has highlighted risks and opportunities in clause 4, it needs to stipulate how these will be addressed through planning.
- The planning phase looks at what, who, how and when these risks must be addressed.
- This proactive approach replaces preventative action and reduces the need for corrective actions later on.
- Particular focus is also placed on the objectives of the management system.
- These should be measurable, monitored, communicated, aligned to the policy of the management system and updated when needed

Annexure SL Clause: 6.1 Actions to address risks / opportunities / Identification and Legal Requirements

Comments:

IRC demonstrated that they were aware of, they understand and accept that compliance with the three standards (Health and Safety, Environment and Quality - HSEQ) are based on a risk management approach. After detailed discussions it was evident that at that time that effort had been invested to review the concepts of a risk approach. The defined risk management framework, assessment tool is mature, which demonstrates that IRC are aware of and understand the needed purpose of risk management methodology.

A number of documents were reviewed specifically regarding risk management framework and assessment process. The auditing team has confidence that the level of risk management is suitable for the content of the organisation which demonstrate compliance against the requirements of each given standard(s) and also forms the base to support potential growth as outlined within the corporate strategy.

IRC have integrated a risk management approach which has taken into account their business context relevant to the scope, corporate strategy, understanding the needs and expectations of interested parties and determining the risks and opportunities that need to be addressed :

- Set the framework to optimise the management system ability to achieve its intended result(s).
- Record and manage activities through the project lifecycle and improve on their efficiency.
- Prevent, or reduce, undesired effects; and
- Identify and implement suitable improvements.

IRC also have plans to address these risks and opportunities, specifically on how to:

- Integrate and implement the actions into its management system processes.
- Update risk identified risks for optimal output; and
- Evaluate the effectiveness of these actions.

IRC have demonstrated that they have a clear and repeatable manner on how they identify and manage risk within their working environment and project-based activities. It is also recognised that the base risk management framework is used, to also identify and manage project-based risk

An internal risk assessment has been completed regarding the nature of the work conducted at IRC. As a result, it was decided that IRC maintain a list of SWMSS and ITP's and are aware of the importance of SWMS and ITP's and as such, at times relevant site-specific safety documentation needs to be completed and adhered to.

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference for the IRC water and waste directorate.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
- Site Based Management Plan - Clermont.pdf refers
- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers
- Further files presented include:
 - Site_Based_Risk_Register__Water_and_Wastewater__01_April_2025.pdf
 - WW IRC Risk Register - as of 31 March 2025.xlsx
 - Emergency and Business Continuity Management Plan.pdf
 - WW IMS Consultation and Performance Evaluation Plan.pdf
 - SPS Risk and Management Plan.pdf
- Various meetings, for example the following that review, discuss, determine and monitor risk and opportunity in the following:
 - Minutes - Quarterly IMS Management Review - Jan 2025. This documented information presents the necessary review of content that includes the internal and external issues also including the review of needs and expectations of interested parties that affect the management system.
 - Minutes - Annual IMS Management Review - June 2024.pdf further includes the reference to context with its ongoing maintenance and review.
 - Audit & Risk Committee Meeting Agenda – 17.03.2025.docx
 - Compliance & IMS Team Meeting - 31.01.2025.pdf

Comments:

IRC have demonstrated that in planning for the activities in identifying, creating, and monitoring how to achieve the objectives, the following were undertaken:

- What will be done.
- What resources will be required.
- Who will be responsible.
- When it will be completed; and
- How the results will be evaluated.

IRC developed a framework to identify and list suitable objectives based on the policies and corporate strategy. At the time of the audit the identified objectives were still under final review to ensure that the identified objectives are:

- Consistent with the policy.
- Are measurable.
- Take into account applicable requirements.
- Are relevant to the conformity of products and services and to enhancement of customer satisfaction.
- Are monitored.
- Are communicated and
- Are updated as appropriate.

IRC has demonstrated commitment to review, monitor, update and manage documented information specific to the identified objectives. The monitoring, measuring, analysis and evaluation program (as outlined in clause 9.1) lists the items that need to be assessed for how the objectives are being implemented, measured as part of the measurement of the management system's effectiveness.

It is also noted that the Internal Audit process creates a snapshot of the status at the given time (specific to the management system and project-based activities), which will also take into account the identified objectives. The output of the effectiveness of the objectives being implemented is reported within the management review, and relevant resources identified to ensure the objectives are being achieved effectively. IRC has demonstrated that they are aware of the importance of identifying realistic and relevant objectives, as a result the list of objectives will be finalised in a timely manner.

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services

Documents presented include:

- ECM_4525413_v4_IRC Framework for Water and Waste (3) makes reference for the IRC water and waste directorate.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
- Site Based Management Plan - Clermont.pdf refers
- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers
- Files presented included:
 - isaac_revised-2023-2028-corporateplan_res-no-8957_27nov2024_low-res.pdf
 - isaac-annual-operational-plan-2024-2025.pdf
 - Capital Project Delivery Guideline.pdf
 - 24_25_Business_Plan__Operations_and_Maintenance.pdf
- Each Business Unit within the Water and Waste Directorates have a business plan development by team leaders where this is reported 'upstream' to inform the executive team of Waste and Water for both monthly and quarterly reporting that is then summarized internally for the annual reporting.
- Objectives are discussed in the following meetings:
 - Minutes - Quarterly IMS Management Review - Jan 2025. This documented information presents the necessary review of content that includes the internal and external issues also including the review of needs and expectations of interested parties that affect the management system.
 - Minutes - Annual IMS Management Review - June 2024.pdf further includes the reference to context with its ongoing maintenance and review.
 - Audit & Risk Committee Meeting Agenda – 17.03.2025.docx
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 - HSW Operational Committee Meeting - 18.02.2025.pdf

Comments:

IRC, via discussions and demonstration of their documented information, have documented the need for a change within the management system can be initiated by many different ways, as listed below:

- Regulatory and or Legislative change
- Management review.
- Audit results.
- Reviews of nonconformities.
- Complaints analysis.
- Analysis of process performance.
- Changes in context or from the changing needs of customers and other relevant interested parties.
- Change in Technology.
- Change in product or service delivery.
- Changes within industry.
- Request from a client.
- Changes in supply lines.
- Staff changes.
- Etc.

Before a change is planned for implementation within the management system, IRC is aware of and considers:

- The purpose of the changes and their potential consequences.
- The integrity of the management system.
- The availability of resources.
- The allocation or reallocation of responsibilities and authorities.

IRC demonstrated a high level of ethos on how they conduct and manage their business activities inclusively on how they consider and work with their team. On multiple occasions it was demonstrated that management considers upstream and downstream effects of the potential of implementing a system change within the current management system and or the business itself.

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Surridge - Program Leader - Compliance and IMS | Business Services

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference for the IRC water and waste directorate.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Emergency and Business Continuity Management Plan.pdf
- Planning for change occurs at both the strategic level and tactical level within the council via the following files presented:
 - Isaac-annual-operational-plan-2024-2025.pdf
 - isaac_revised-2023-2028-corporateplan_res-no-8957_27nov2024_low-res.pdf
- Planning for change further involved in the following meetings:
 - Minutes - Quarterly IMS Management Review - Jan 2025. This documented information presents the necessary review of content that includes the internal and external issues also including the review of needs and expectations of interested parties that affect the management system.
 - Minutes - Annual IMS Management Review - June 2024.pdf further includes the reference to context with its ongoing maintenance and review.
 - Audit & Risk Committee Meeting Agenda – 17.03.2025.docx
 - Compliance & IMS Team Meeting - 31.01.2025.pdf
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 - HSW Operational Committee Meeting - 18.02.2025.pdf

7.0(Part 1 of 2) Support:

- After addressing the context, commitment, planning, organizations have to look at the support needed to meet their goals / objectives.
- Includes allocation of resources, Identification and delivery of Competency and awareness

Annexure SL Clause: 7.1 Resources

Comments:

Resources:

IRC has identified the allocation of resources to maintain the management system, and all relevant activities required within, which includes consideration of but not limited to the following:

- Identify the requirements (within each of the standards).
- Establishment of a base project plan for implementation,
- The Implementation (roll out and embedding the management system within the business culture).
- Developing a management system with the maintenance schedule.
- Develop a Monitoring, Measuring, Analysis, and Evaluation program.
- Maintain the:
 - Policies and Procedures.
 - Risk Management Framework, Risk Assessment and Risk Register.
 - Management System Objectives.
 - Selection of suitable and capable team members.
 - Asset and Asset Maintenance Register.
 - Team Competence, Awareness and Training Register.
 - Regular consultation and reviews to ensure customer satisfaction, review of compliance with safety and environmental expectations.
 - Issues and Incidents Register.
 - NC, Continual Improvement register; and
 - Internal Audit and Management Review schedule.

IRC has demonstrated that they have and will continue to consider:

- The capabilities of, and constraints on, existing internal resources.
- What needs to be obtained from external providers to be able to maintain their level of service.

People:

At the time of the audit, IRC demonstrated consistent commitment to the management of people. They further demonstrated that they manage their team activities in a consistent and respectful manner. It was evident that IRC have identified the skills needed for the type of work needed to service their client base, and such required skills have been identified within the current list of position descriptions. Efforts have been made to ensure that the relevant skills needed to perform a task/role are clearly identified and fit for purpose, and that staff allocated to a role review their position descriptions and sign them as acceptance.

Infrastructure:

IRC has identified suitable infrastructure that is used and maintained to assist their team members in being able to plan for and deliver their list of products and services. To demonstrate compliance with the standard the following three categories have been identified with high level items identified within:

- Key Facilities:
- Key Plant and Equipment (general vehicles) etc.:
- Key ICT Equipment (Hardware / Software):

Environment for the operation of processes –

IRC understand that a suitable working environment (physical, social and psychological) is the foundation of physical and mental comfort for their team while undertaking work activities. IRC have a suitable office environment to conduct their administrative activities.

The work conducted in the field is based on the requirement set out by the principal contractor or the client directly.

All relevant work items, attributes, and considerations needed for the given job are identified and included as part of the project plan and are implemented as part of the project.

When attending a site, the PPE needed for a given project (on site) are identified, and staff adhere to the relevant site needs to comply with the requirements.

It was evident that the IRC team are provided with a suitable working environment, and the individuals are aware of the importance of maintaining safe working activities when attending project work (field).

Monitoring and measuring resources:

IRC determines and provides the resources needed to ensure valid and reliable results when monitoring or measuring is used to verify the conformity of products and services to requirements. IRC identified resources (devices, equipment, hardware, tools etc. used to monitor and measure):

- Are suitable for the specific type of monitoring and measurement activities being undertaken.
- Are maintained to ensure they are able to correctly measure what is needed.

It is expected that the identified individuals undertaking the monitoring will be trained accordingly to ensure that they will be able to use the resources to accurately take relevant monitoring and measurement records

IRC demonstrated had monitoring and measuring resources, where IRC have the measurement traceability ability to clearly document the process of how such identified resources (devices, equipment, hardware, tools etc. used to monitor and measure) are calibrated and tested to be true and accurate. When measurement traceability is a requirement, it becomes an essential part of providing confidence in the validity of measurement results, and therefore measuring equipment is:

- Calibrated or verified, or both, at specified intervals, or prior to use, against measurement standards traceable to international or national measurement standards; when no such standard exists, the basis used for calibration or verification shall be retained as documented information.
- Identified in order to determine their status.

- Safeguarded from adjustments, damage or deterioration that would invalidate the calibration status / subsequent measurement

Organisational knowledge:

It was evident that the IRC management team has a solid understanding of the organisational knowledge and skills that they currently hold. IRC has demonstrated that they are open and flexible in their management style to address changing needs and trends, in how they consider their current knowledge and determine how to acquire or access any necessary additional knowledge to ensure they are able to deliver services in an efficient manner.

IRC organisation knowledge is gained by experience and exposure to good practices within the industry, and given the IRC management style, the information is used and shared to achieve the organisation objectives.

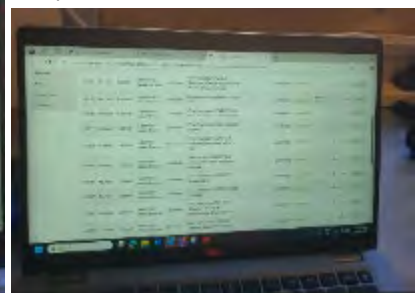
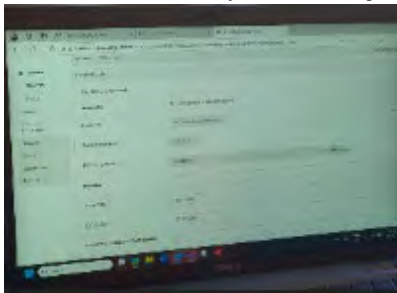
Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services
- Refer to the photographic section of this report.

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference for the IRC water and waste directorate.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Files presented that assist with the management people include:
 - ECM_4546502_v13_2021-2022 Management Performance Agreement Plan CORP-FRM-288 (7).docx
 - First Probation Review.pdf
 - Individual Development Plan.docx
 - Initial Probation Performance Discussion.pdf
 - Performance Improvement Plan.docx
 - Project Brief Template - Recruitment Retention Plan - Final (In draft).pdf
 - Second Probation Review.pdf
 - Third & Final Probation.pdf
- Process Review - example of knowledge sharing and consultation to obtain an improved outcome.msg
- Water and Waste Internal Knowledge Share TEMPLATE.docx. Knowledge Share performed weekly
- Example of training module such as Procurement_Training_Information; Difficult People Training
- The utilisation of Lucidity software as to the various assets and the management thereon for example tools, equipment, light and heavy equipment.
- ECM_5326389_v14_W&W Light Vehicles & Sites - First Aid Kit Tracking – 2025
- Lifting Register 2024
- Chemical Registers at the various locations visited
- Calibration of equipment registers as noted from the laboratory reviews of measuring devices
- IRCQ-ALL3-1222-1200 Sewage Treatment Plant Inlet Screen Maintenance
- The utilisation of Lucidity for the management of workers capacity to undertake tasks for example:



- Further examples of the following personnel competencies as kept via Lucidity include:
 - Norman Cadwell
 - Faisal Shah
 - Anthony Waller
 - Rosie Scharf
 - James Kingston
 - Melissa Thompson
 - Tait Suridge

Comments:

IRC uses software to record the required skills and the relevant identified skills assessment. The list of identified required awareness is reviewed to ensure that the required content specific to team members, their identified qualifications and memberships to governing bodies are up to date.

As a result, detailed discussions within the audit process, it was evident that IRC has:

- Determined the necessary competence of individual(s) doing work under its control that affects the performance and Effectiveness of the management system.
- Ensured that these individuals are competent on the basis of appropriate education, training, experience and or the actual ability to be able to do their work.
- Where applicable, take actions to acquire the necessary competence, and evaluate the effectiveness of the actions taken.
- Retained appropriate documented information as evidence of competence.

IRC does maintain a well-structured process to manage the staff competence, appropriate documented information retained as evidence of compliance includes:

- Employment (confidential) records
- Copies of qualifications, certifications and registrations
- Reference checks and verified currency of certificates.

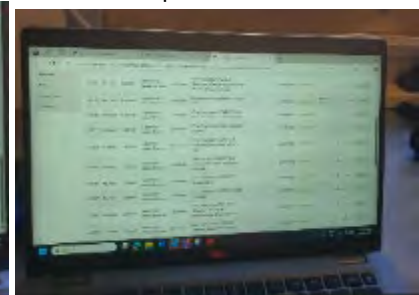
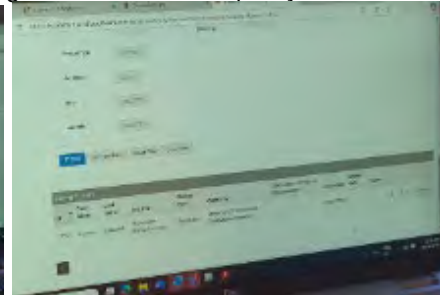
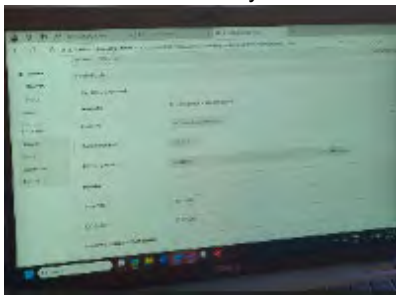
Evidence:

Discussion with:

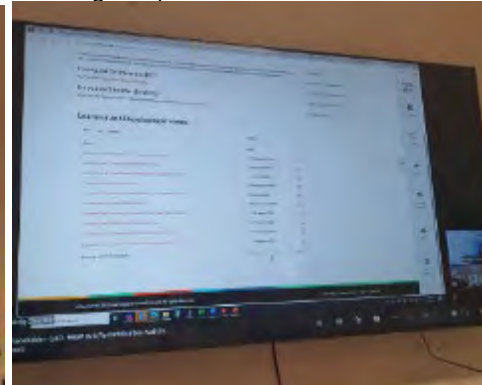
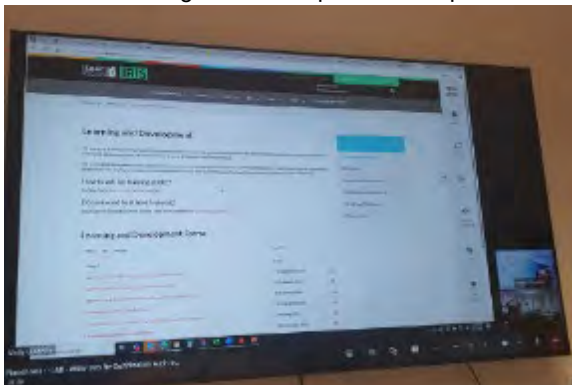
- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services
- Refer to the photographic section of this report.

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference competency.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- The utilisation of Lucidity for the management of workers capacity to undertake tasks for example:



- Further examples of the following personnel competencies as kept via Lucidity include:
 - Norman Cadwell
 - Faisal Shah
 - Anthony Waller
 - Rosie Scharf
 - James Kingston
 - Melissa Thompson
 - Tait Suridge
- Access to learning and development example from the following sample dashboard:



Comments:

It was evident that IRC were aware of the two different perspectives of awareness as outlined within this clause (7.3 Awareness) of all three of the standards as listed below:

1. Work specific awareness and training

The work-related training is focused on ensuring that the identified team members are:

- suitably trained and assessed to perform their work.
- assess to training is available on a regular basis.
- awareness and training ensure that they maintain relevant qualifications and operating tickets; and
- training is recorded, listed as part of their competency.

2. ISO certification related awareness and training.

The ISO specific awareness is focused on ensuring that all interested parties have been provided with the necessary awareness and training to ensure awareness of:

- Relevant certification specific policies.
- Relevant certification specific objectives.
- Their contribution to the effectiveness of the certification MS, including the benefits of improved performance.
- The implications of not conforming with the management system requirements.

IRC provides or makes available awareness and training in many alternative ways, to their team members.

Communication of all kinds is important to ensure awareness and can include regular review meetings, customer and external provider meetings, gathering feedback and ensuring this feedback is made known to relevant persons.

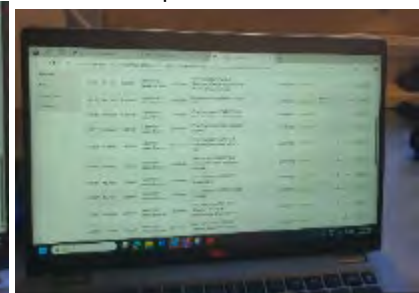
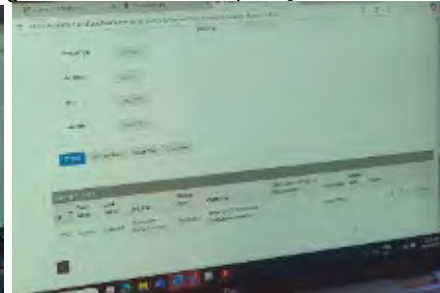
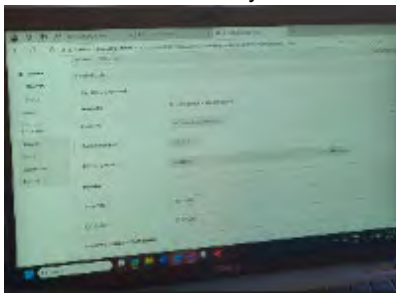
Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services
- Refer to the photographic section of this report.

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference awareness.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- The utilisation of Lucidity for the management of workers capacity to undertake tasks for example:



- Further examples of the following personnel competencies as kept via Lucidity include:
 - Norman Cadwell
 - Faisal Shah
 - Anthony Waller
 - Rosie Scharf
 - James Kingston
 - Melissa Thompson
 - Tait Suridge
- Various meetings provide system awareness occurring at:
 - Minutes - Quarterly IMS Management Review - Jan 2025. This documented information presents the necessary review of content that includes the internal and external issues also including the review of needs and expectations of interested parties that affect the management system.
 - Minutes - Annual IMS Management Review - June 2024.pdf further includes the reference to context with its ongoing maintenance and review.
 - Audit & Risk Committee Meeting Agenda – 17.03.2025.docx
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 - Projects & Planning Team Meeting - 11.03.2025.pdf
 - Standing Committee Meeting - 5.2 Water and Wastewater Preventative Maintenance Program Update.pdf
 - Water & Wastewater Operations Meeting - 20.02.2025.pdf
 - Whole Waste Services Team Meeting - 26.02.2025.pdf
- Mechanisms built within the system via Lucidity Software provide updates and accessibility for all to understand and gain further awareness for workers.
- Internal Learning and Management System (LMS) with the following dashboard demonstrating the building awareness amongst IRC workers:



7.0(Part 2 of 2) Support:

- After addressing the context, commitment, planning, organizations have to look at the support needed to meet their goals / objectives.
- Includes internal & external communications, as well as documented information that replaces previously used terms such as documents & records

Annexure SL Clause: 7.4 Communication

Comments:

It was evident during this audit that IRC determines the internal and external communication relevant to the management system including:

- On what it will communicate
- When to communicate.
- With whom to communicate.
- Internally among the various levels and functions of the organization.
- Among contractors and visitors to the workplace.
- Among other interesting parties
- How to communicate; and
- Who communicates

IRC demonstrated that it retains documented information as evidence of its communications, as appropriate. IRC consider diversity aspects (e.g. gender, language, culture, literacy, disability) when considering its communication needs. IRC ensure that the views of external interested parties are considered in establishing its communication process(es). When establishing its communication process(es), the organization shall:

- Take into account its legal requirements and other requirements.
- Ensure that OH&S information to be communicated is consistent with information generated within the OH&S management system and is reliable.

IRC has a policy and practices relevant communications on its OH&S management system. IRC ensure:

- Internally communicate information relevant to the management system among the various levels and functions of the organization, including changes to the management system, as appropriate.
- Ensure its communication process(es) enables workers to contribute to continual improvement.

IRC externally communicates information relevant to the management system, as established by the organization's communication process(es) and taking into account its legal requirements and other requirements

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services
- Refer to the photographic section of this report

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference to documented information control.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
- Site Based Management Plan - Clermont.pdf refers
- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers

- Example of noticeboard use:



- Various meetings occur to demonstrate communication occur:
 - Minutes - Quarterly IMS Management Review - Jan 2025. This documented information presents the necessary review of content that includes the internal and external issues also including the review of needs and expectations of interested parties that affect the management system.
 - Minutes - Annual IMS Management Review - June 2024.pdf further includes the reference to context with its ongoing maintenance and review.

Annexure SL Clause: 7.4 Communication

- Audit & Risk Committee Meeting Agenda – 17.03.2025.docx
- Compliance & IMS Team Meeting - 31.01.2025.pdf
- Monthly Managers Meeting Agenda April 2025 Confirmed.pdf
- Planning & Projects Team Meeting - 15.04.2025.pdf
- Planning and Projects Team Meeting Minutes - 11.03.2025.pdf
- Projects & Planning Team Meeting - 11.03.2025.pdf
- Standing Committee Meeting - 5.2 Water and Wastewater Preventative Maintenance Program Update.pdf
- Water & Wastewater Operations Meeting - 20.02.2025.pdf
- Whole Waste Services Team Meeting - 26.02.2025.pdf
- Utilisation of MST Teams, MS Office and other software interfaces provide the mechanisms for communication
- Phones, txt messaging and email for both internal and external communication to various workers and stakeholders occur.

Annexure SL Clause: 7.5 Documented information

Comments:

When considering the documented information IRC management system address:

- Documented information required by these international Standards.
- Documented information determined by the organisation as being necessary for the effectiveness of the management system.

IRC ensure appropriate:

- Identification and description (e.g. a title, date, author, or reference number).
- Format (e.g. language, software version, graphics) and media (e.g. paper, electronic); and
- Review and approval of suitability and adequacy.

In the control of this documented information that Projex Partners generates documented information to ensure:

- It is available and suitable for use, where and when it is needed; and
- It is adequately protected (e.g. from loss of confidentiality, improper use, or loss of integrity).

For the control of this documented information Projex Partners is to ensure the following activities, as applicable:

- Distribution, access, retrieval and use.
- Storage and preservation, including preservation of legibility.
- Control of changes (e.g. version control); and
- Retention and disposition.

IRC has demonstrated that it ensures that documented information of external origin determined by the organisation to be necessary for the planning and operation of the management system is identified as appropriate and is controlled. Documented information of IRC retained evidence of conformity and is protected from unintended alternations.

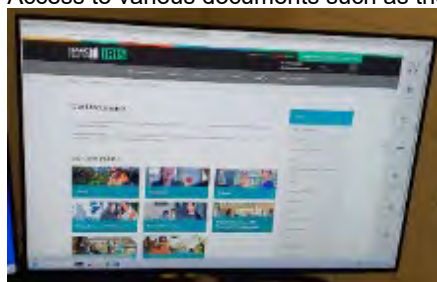
Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services
- Refer to the photographic section of this report
- Refer to other sections of this report that demonstrate the documented information generated.

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference documented information control.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
- Site Based Management Plan - Clermont.pdf refers
- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers
- Access to various documents such as the following example:



- Example to which documents are retained via the Lucidity software, SharePoint, TechOne, MS Project, IRIS and ECM.
- Printed documents exist where these become uncontrolled documents at various locations (refer to photographic section)

8.0(Part 1 of 3) Operations:

- The bulk of the management system requirements lies within this single clause 8 Operations.
- Clause 8 addresses both in-house and outsourced processes.
- While the overall process management includes adequate criteria to control these processes, as well as ways to manage planned and unintended change.

Annexure SL Clause: 8.1 Operational planning and control

Comments:

IRC confirmed how the company plans and controls the processes needed to meet the requirements for the provision of products and services. The results from this planning actions for operational control are based on factors as:

- Determining the requirements for the products and services.
- Establishing criteria for processes; and the acceptance of products and services.
- Determining the resources needed to achieve conformity to the product and service requirements.
- Implementing controls of the processes in accordance with the project requirements.
- Determining, maintaining and retaining documented information to the extent necessary:

IRC controls planned changes and reviews the consequences of unintended changes, taking action to mitigate any adverse effects, as necessary. IRC ensure that outsourced processes are controlled. Other key factors considered with operational planning are personnel expertise and workload availability. Based on the nature and complexity of the project's workload IRC determine effectively what resources are needed and if the current resources and workload are sufficient. IRC has implemented procedures and related processes, registers, procedures, forms and reports to manage the elimination of hazards and reduction of safety risks by using the hierarchy of control. Refer to Section 6.1 above for details on how IRC manage the elimination of Hazards and Risks.

Evidence:

Discussion with:

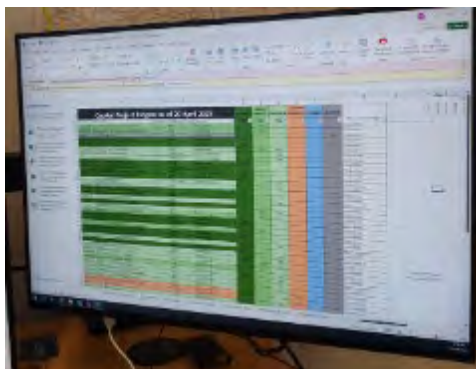
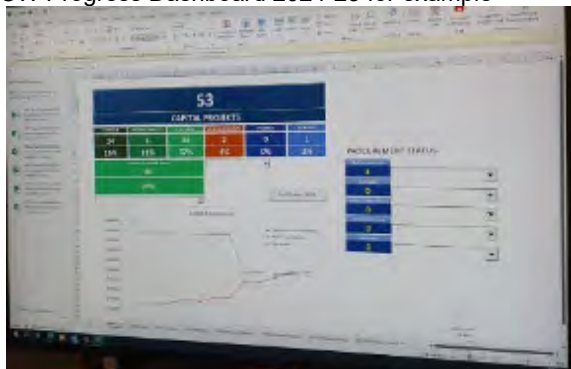
- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services
- Refer to other sections of this report that demonstrate operational planning occur

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference planning and control.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
- Site Based Management Plan - Clermont.pdf refers
- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers
- Locations visited as noted in the photographic section of this report, planning occurs across the various meetings where the Work In Progress (WIP) is covered for various work groups for that asset maintained whether the waste and water treatment plant.
- Each laboratory there is a planned schedule for example:

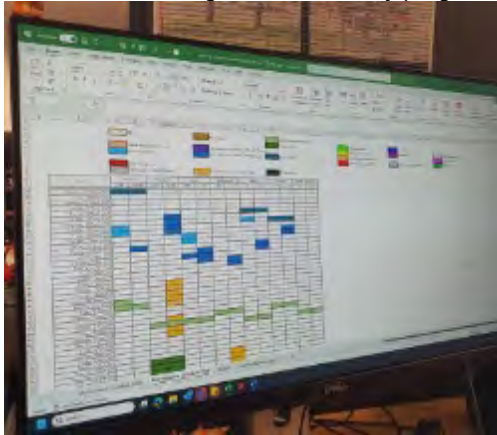
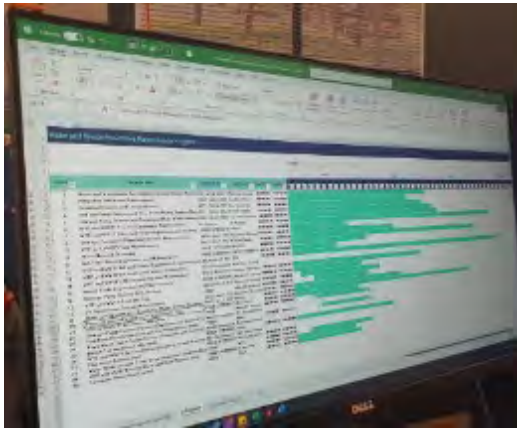


- Capital Project Delivery Guideline.pdf
- CW Progress Dashboard 2024-25 for example

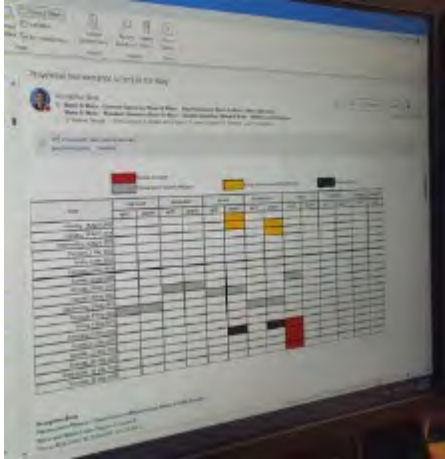


- Project reviewed:
 - Clermont WTP Chemical Upgrade

- Approx Cost: \$700K
- Team of 4
- Project Manager: Chris Andersen
- The use of MS Project is used for the planning of design and construction.
- Planning can further occur from the software in use, for example, yet not included: MS Teams, MS Project, TechOne, MS Excell and the like.
- Demonstration of the Water and Waste Preventive Maintenance Program and monthly program:



-
- Example of the Preventative Maintenance Schedule for May:

**Comments:**

The auditing team sought evidence of processes for communicating with customers to provide information relating to products and services inquiries and/or order handling, including changes and obtaining customer feedback relating to product and services including customer complaints; handling or controlling customer property, and establishing specific requirements for contingency actions, when relevant.

When considering the requirements for products and services at IRC, they consider and ensure that when there is customer communication that:

- Providing information relating to products and services of the business.
- Handling inquiries, contacts including changes.
- Obtaining customer feedback relating to their products and services, including customer complaints.
- Handling or controlling customer property; and
- Establishing specific requirements for contingency actions when relevant.

In determining the requirements for the products and services to be offered to customers, IRC ensures that:

- The requirements for the products and services are defined, including:
 - Any applicable statutory and regulatory requirements.
 - Those considered necessary by the Organisation; and
- The Organisation can meet the demands for the products and services it offers.

When reviewing the requirements related to the products and services IRC ensure that it has the ability to meet the requirements for products and services to be offered to its customers, Further, to conduct a review before committing to supply products and services to their customer to include in the following:

- Requirements specified by the customer, including the requirements for delivery and post-delivery activities.
- Requirements not stated by the customer, but necessary for the specified or intended use when known.
- Requirements specified by IRC.
- Statutory and regulatory requirements applicable to the products and services; and

- Contract or order requirements differ from those previously expressed.

IRC ensure that contract or order requirements differing from those previously defined are resolved. IRC ensure that customer's requirements are confirmed by the organisation before acceptance, when the customer does not provide a documented statement of their requirements.

It is important for IRC to retain documented information, as applicable on the results of the review and on any requirements for the products and services they provide.

IRC ensure that relevant documented information is amended, and that relevant people are made aware of the changes, when the requirements for products and services are changed.

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Surridge - Program Leader - Compliance and IMS | Business Services
- Refer to other sections of this report that demonstrate operational planning occur

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference requirements for products and services.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
- Site Based Management Plan - Clermont.pdf refers
- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers
- Locations visited as noted in the photographic section of this report, planning occurs across the various meetings where the Work In Progress (WIP) is covered for various work groups for that asset maintained whether the waste and water treatment plant.
- Monitoring and performance of various checklists and samples taken from various locations for testing to ensure that biological reporting falls within certain tolerances and tests verify water and waste management achieves the necessary outcomes for the consumption. And waste management processes for the end-of-life monitoring of waste generated.
- Capital Project Delivery Guideline.pdf
- Project reviewed:
 - Clermont WTP Chemical Upgrade
 - Approx Cost: \$700K
 - Team of 4
 - Project Manager: Chris Andersen

Comments:

IRC documented information details the implementation and maintains the processes needed for how it will prepare for and respond to potential emergency situations as identified with actions to address risk and opportunities. IRC ensure that it:

- Prepare to respond by planning actions to prevent or mitigate adverse environmental impacts and safety incidents, injury and ill health circumstances with emergency situations.
- Respond to actual emergency situations.
- Take action to prevent or mitigate the consequences of emergency situations, appropriate to the magnitude of the emergency.
- Periodically the planned response actions where practicable.
- Periodically review and revise the processes and planned response, in particular after the occurrence of an emergency situation or tests.
- Provide relevant information and training related to emergency preparedness and response, as appropriately, to relevant interested parties, including people working under their control.

It was apparent during this review that IRC maintain documented information to the extent necessary to have confidence that the process(es) is (are) carried out as planned. IRC, in collaboration with workers at the respective of their geographic location, review, then revise, where necessary, its emergency preparedness and response procedures after the occurrence of incidents or emergency situations. IRC periodically tests such procedures. It may not be practicable to test some procedures, in which training and efficacy are tested by other means such as training.

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services
- Refer to the photographic section of this report for the emergency readiness and response of equipment, for example yet not limited to:
 - Firefighting equipment
 - First Aid Kits – First Aid checklist
 - Defibrillators
 - Signage
 - Personal Protective Equipment (PPE) issued and worn
 - Emergency Contacts with those competent
 - Emergency evacuation diagrams
 - Emergency Horns and Signage
 - Emergency indicator for substances and chemicals such as the direction of wind from the wind vane.
 - Storage of substances with necessary signage
 - Signage for the conditions of entry
 - HAZCHEM Manifest Site Plan

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference requirements for products and services.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
- Site Based Management Plan - Clermont.pdf refers
- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Emergency Response Guide – for example includes processes in the event of:
 - Bushfire
 - Cyclone / Storm
 - Discovery of a deceased person
 - Exposure to live electricity
 - Flood
 - Chemical Management – Hazardous Chemical Spill
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers
- Vaccination_Process_Flowchart__CORP_FLW_032
- Review of conditions and ensuring emergency readiness and response via the following checklists:
 - NEBO Waste Management Facility - Monthly Dams Inspection.pdf
 - NEBO Wastewater Treatment Plant - Monthly Dams Inspection.pdf
 - NEBO Waste Management Facility - Monthly Dams Inspection.pdf
 - CLERMONT Waste Management Facility - Monthly Dams Inspection.pdf
 - CLERMONT Wastewater Treatment - Monthly Dams Inspection.pdf
 - CLERMONT Waste Management Facility - Monthly Dams Inspection.pdf
- Safety Alerts presented for knowledge and readiness of workers in the case of emergencies readiness and response
- Evacuation and Debrief Reports carried out for example:
 - 2/10/24 at NEBO Waste Center
 - 23/07/24 at NEBO Waste Management Facility
 - 16/10/24 at NEBO Water Treatment Plant
 - 2/10/24 at CLERMONT Waste Management Facility
 - 26/08/24 at CLERMONT Waste Management Facility

8.0(Part 2 of 3) Operations:

- The bulk of the management system requirements lies within this single clause 8 Operations.
- Clause 8 addresses both in-house and outsourced processes.
- While the overall process management includes adequate criteria to control these processes, as well as ways to manage planned and unintended change.

Annexure SL Clause: 8.3 Design and Development

QMS Only Delete if not relevant

Comments:

The standard requires an organisation to establish, implement and maintain a design and development process that basically ensures delivery and integrity (as well as integrity of provision) of a product or service. The key elements of planning, inputs, controls, outputs and changes are required to be stated, controlled, managed, maintained and adhered to.

The auditing team sought evidence that documented information was in place to demonstrate integrity of design and development planning, testing, verification, review, corrective action and client reporting to meet compliance requirements. IRC could demonstrate they retain documented information, as applicable on the results of the review and on any requirements for the products and services they provide. IRC ensure that they establish, implement and maintain design and development process that is appropriate to ensure the subsequent provision of products and services. In determining the stages and controls for design and development IRC ensure that it considers:

- The nature, duration and complexity of the design and development activities.
- The required process stages, including applicable design and development reviews.
- The required design and development verification and validation activities.
- The responsibilities and authorities involved in the design and development process.
- The internal and external resource needs for the design and development of products and services.
- The need to control interfaces between persons involved in the design and development process.
- The need for involvement of customers and users in the design and development process.
- The requirements for subsequent provision of products and services.
- The level of control expected for the design and development process by customers and other relevant interested parties.
- The documented information needed to demonstrate that design and development requirements have been met.

IRC ensures the requirements essential for the specific types of products and services to be design and developed, in that IRC considers:

- Functional and performance requirements.
- Information derived from previous similar design and development activities.
- Statutory and regulatory requirements.
- Standards or codes of practice that the organisation has commitment to implement.
- Potential consequences of failure of the nature of the products and services.

IRC, demonstrate they ensure that adequate for design and development processes inputs are complete and unambiguous. That conflicting design and development shall be resolved, and that IRC retains documented information on these design and development inputs and outputs relevant to the scope and size of work they perform.

IRC apply controls to the design and development processes to ensure that there is:

- The results to be achieved are defined.
- Reviews are conducted to evaluation the ability of the results of designs and development to meet requirements
- Verification activities are conducted to ensure that the design and development outputs meet the input requirements.
- Validation activities are conducted to ensure that the resulting products and services meet the requirements for the specified application or intended use
- Any necessary actions are taken on problems determined during the reviews, or verification and validation activities.
- Documented information of these activities is retained.

It is noted that design and development reviews, verification and validation have distinct purposes. They can be conducted separately or in any combination, as is suitable for the product and services that IRC provides.

For that of design and development outputs IRC ensure that:

- Meet the input requirements.
- Are adequate for the subsequent processes for the provision of products and services.
- Include or reference monitoring and measuring requirements, as appropriate, and acceptance criteria.
- Specify the characteristics of the products and services that are essential for their intended purpose and their safe and proper provision.

IRC ensure that they retain documented information on the design and development outputs. When considering design and development changes, IRC identifies, review and control changes made during, or subsequent to, the design and development of products and services, to the extent necessary to ensure there is no adverse impact on conformity to requirements.

IRC ensure that they retain documented information on:

- Design and development changes.
- The results of reviews.
- The authorisation of the changes.

- The actions taken to prevent adverse impacts.

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference requirements for products and services.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Capital Project Delivery Guideline.pdf
- Project reviewed:
 - Clermont WTP Chemical Upgrade
 - Approx Cost: \$700K
 - Team of 4
 - Project Manager: Chris Andersen
 - Documents presented include
 - Request for Tenders (Design and Construct (Long Form)) document
 - Project Ghant Chart for the design and construction phases
 - Design and for construction drawings presented with drawing transmittals
 - Pre-project Commencement Planning meeting occurring on the 20/03/24
 - WTP and WWTP & Safety Equipment Inspection and Maintenance document
 - Single Response Recommendation Report dated 21/03/24

Comments:

Under the requirements of this element, IRC identify and control all operational processes showing the interaction of these processes with other processes especially with that of external providers with the conforming to requirements of their products and services. IRC is to ensure that they communicate to external providers its requirements for:

- Products and services from external providers are intended for incorporation into the organization's own products and services.
- Products and services are provided directly to the customer(s) by external providers on behalf of the organization.
- A process, or part of a process, is provided by an external provider as a result of a decision by the organization.

IRC is to ensure they have determined and applied criteria for the evaluation, selection, monitoring of performance, and re-evaluation of external providers, based on their ability to provide processes or products and services in accordance with requirements. The organization shall retain documented information about these activities and any necessary actions arising from the evaluations.

When IRC considers the control of production and services provision for its business it is to implement production and services procession under controlled conditions. These controlled conditions include, as applicable, the following:

- Ensure that externally provided processes remain within the control of its quality management system.
- Define both the controls that it intends to apply to an external provider and those it intends to apply to the resulting output.
- Take into consideration:1) the potential impact of the externally provided processes, products and services on the Organization's ability to consistently meet customer and applicable statutory and regulatory Requirements;2) the effectiveness of the controls applied by the external provider.
- Determine the verification, or other activities, necessary to ensure that the externally provided processes, products and services meet requirements.

IRC ensure the adequacy of requirements prior to their communication to the external provider. It is then and after IRC communicate to external providers its requirements for:

- The processes, products and services to be provided
- The approval of:
 - Products and services.
 - Methods, processes and equipment.
 - The release of products and services.
- Competence, including any required qualification of people.
- The external providers' interactions with the organization.
- Control and monitoring of the external providers' performance to be applied by the organization.
- Verification or validation activities that the organization, or its customer, intends to perform at the external providers' premises.

Evidence:

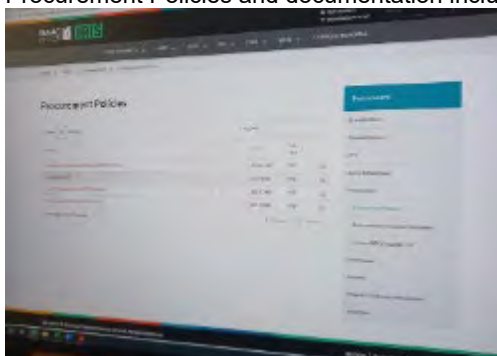
Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference requirements for products and services.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.

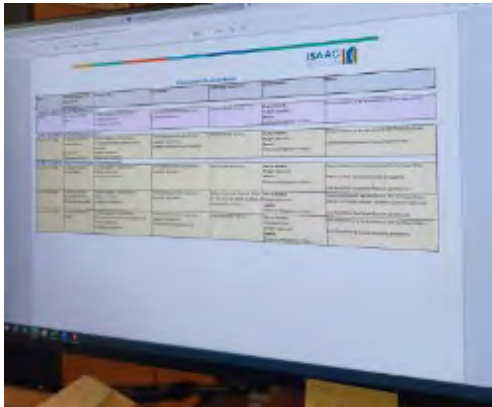
- Procurement Policies and documentation include:



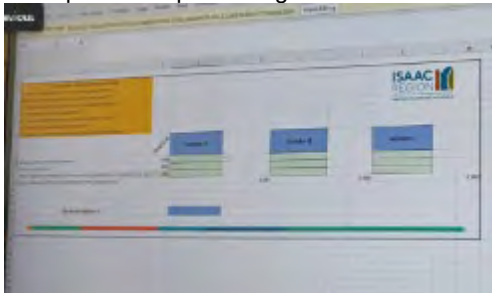
- Procurement Policy CORP-POL-12 Approved 28/05/24
- Vendor Panel dashboard:



-
- Procurement Decision Matrix



-
- Example of comparison against a select criterion:



-

8.0(Part 3 of 3) Operations:

- The bulk of the management system requirements lies within this single clause 8 Operations.
- Clause 8 addresses both in-house and outsourced processes.
- While the overall process management includes adequate criteria to control these processes, as well as ways to manage planned and unintended change.

Annexure SL Clause: 8.5 Production and service provision

QMS Only Delete if not relevant

Comments:

Under the requirements of this element, IRC identify and control all operational processes; Show the interaction of these processes with other processes; Use product, project or contract quality plan to control operational activities; Schedule operations taking into consideration customer requirements, production capacity and capability, material availability and usage, personnel availability and usage; storage etc.

Verification of a product / service requires that a form of record is kept that delivery was a level of quality that was specified and expected. The auditing team sought evidence that IRC had solid processes in place to ensure high quality delivery of products / services. IRC had in place a comprehensive set of processes, procedures, forms, registers and communications in place to demonstrate commitment to quality delivery of services and of product.

IRC ensure that the adequacy of requirements prior to the external provider. IRC ensure that they communicate to external providers its requirements for:

- The processes, products and services to be provided.
- The approval of:
 - Products and services
 - Methods, processes and equipment
 - The release of products and services.
- Competence, including any required qualification of persons.
- The external providers' interactions with IRC.
- Control and monitoring of the external providers' performance to be applied by the organisation; and verification or validation activities that IRC, or its customer, intends to perform at the external providers' premises.

When IRC considers the control of production and services provision for its business it is to implement production and services procession under controlled conditions. These controlled conditions include, as applicable, the following:

- The availability for documented information that defines.
 - The characterises of the products to be produced, the services to be provided, or the activities to be performed.
 - The results to be achieved.
- The availability and use of the suitable monitoring and measuring resources.
- The implementation of monitoring and measurement activities at appropriate stags to verify that criteria for control of processes or outputs, and acceptance criteria for products and services have been met.
- The use of suitable infrastructures and environment for the operations of process.
- The appointment of competent persons; including any required qualification.
- The validation and periodic revalidation of the ability to achieve planned results of the process for production and services provision, where the resulting output cannot be verified by subsequent monitoring and measurement.
- The implementation of actions to prevent human error; and
- The implementation of release, delivery and post-delivery activities.

IRC ensure suitable means to identify outputs when it is necessary to ensure the conformity of products and services.

IRC, ensure they identify the status of outputs with respect to monitoring and measurement requirements throughout production and service provision.

IRC control the unique identification of the outputs when traceability is required and retains the documented information necessary to enable this traceability.

When considering the property belonging to customers or external providers, IRC exercise care with proprietary belonging to customers or external providers while it is under the care of IRC control or being used by IRC. IRC identify, verify, protect and safeguard customers' or external providers' property provided for use or incorporation into the products and services. When the property of the customer or external provider is lost, damaged or otherwise found to be unsuitable for use, IRC report this to the customer or the external provider and retain documented information on what has occurred. This includes any property that can include material, components, tools and equipment, premises, intellectual property and personal data.

IRC ensure that it preserves the outputs and during the production and services provisions to the extent necessary to ensure conformity to requirements. This perseveration includes the identification, handling, contamination control, packaging, storage, transmission or transportation and protection. IRC ensure that it meets requirements for the post-delivery activities associated with the business products and services it provides in accordance it the Scope of Certification. That is, in determining the extent of post-delivery activities that are required by IRC to consider:

- Statutory and regulatory requirements.
- The potential undesired consequences associated with its products and services.
- The nature, use and intended lifetime of its products and services.
- Customer requirements; and
- Customer feedback.

IRC review and control changes for production and service provision, to the extent necessary to ensure continuing conformity with requirements. IRC demonstrated that its retinas documented information describing the results of the review of changes, the person(s) authorising the change, and any necessary actions arising from the review

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services
- Refer to the photographic section of this report for the demonstration of sample photos for production and service provision of:
 - Waste Management Facility
 - Wastewater Treatment Plant
 - Water Treatment Plant

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference requirements for products and services.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Various checklists and testing are carried out in accordance with compliance obligations, for example, yet not limited to:
 - Collection records ate the Waste Management Facilities
 - Worker Instructions completed
 - Setpoint Change Log whether for Water Treatment Plant and Wastewater Treatment Planty
 - Weekly Tasks Checklists
 - Monthly Tasks Checklists
 - Entry of logging instrumentation and operational data readings into SWIMLOCAL Operations
 - Monitoring of the various Pump Station readings
 - Plant Log Sheets
 - Plant Walk around log sheets
 - Permit to work records
 - Entries into diary of events at various locations
 - drumMUSTER Collection of Forms
- Monthly Meetings and reporting are taking place as to the status of delivery with the quality through testing mechanisms

Comments:

IRC undertake a number of crucial tasks in order to comply with this standard element; A solid consideration of what characteristics are required for a product or service to be deemed 'verified to be conforming'. The entire process and all resources involved as part of that process are planned, implemented and then verified as having been carried out to plan. The auditor team sought evidence that there were documented processes and records in place to demonstrate compliance with this element, this included – but was not limited to – customer satisfaction (client approvals documents, completion and associated records of product / service delivery being successfully undertaken.

IRC ensures implementation of planned arrangements, at appropriate stages, to verify that their product and service requirements have been met. This release of products and services to the customer shall not proceed until the planned arrangements have been satisfactorily completed, unless otherwise approved by a relevant authority and, as applicable, by the customer. As such, IRC demonstrated they retain documented information on the release of their products and services. The documented information includes:

- Evidence of conformity with the acceptance criteria; and
- Traceability to the person(s) authorising the release.

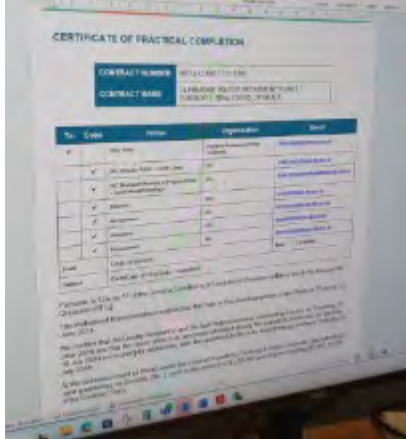
Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services
- Referring to the above sections where in certain circumstances there is the release of work completed.

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference requirements for products and services.
- Integrated Environmental Management System IRC Water and Waste.pdf refers
- In the example of Capital Project Delivery Guideline when Projects are finalised the following are examples:
- Certification of Practical Completion:

**Comments:**

IRC ensures that outputs that do not conform to their requirements are identified and controlled to prevent their unintended use or delivery. And it is IRC appropriate action based on the nature of the nonconformity products and services detected after delivery of the outputs, during or after the provision of services.

If substandard products or services are detected, then controls are in place that consist of the following - correction; segregation, containment, return, or suspension of provision of products and services; and informing the customer.

IRC retains documented information that describes the nonconformity, action taken, concessions obtained and identifies the person or authority that made decision regarding dealing with nonconformity. The auditing team sought evidence that demonstrated a commitment to consideration and control of non-conforming product or service via systems documentation and records.

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Surridge - Program Leader - Compliance and IMS | Business Services
- Refer to the photographic section of this report

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference requirements for products and services.
- Integrated Environmental Management System IRC Water and Waste.pdf refers
- ECM_5211513_v100_W&W - Non-Compliance Register - All Years - Working Document.xlsx

9.0 Performance - Monitoring, Measuring, Analysis Evaluation Operations: *Mandatory Every Audit*

- Here organizations need to determine what, how and when things are to be monitored, measured, analysed and evaluated.
- An internal audit is also part of this process to ensure the management system conforms to the requirements of the organization.
- As well as the standard and is successfully implemented and maintained.
- The final step, management review, looks at whether the management system is suitable, adequate and effective

Annexure SL Clause: 9.1 Monitoring and measuring, Analysis Evaluation and Reporting

Comments:

Monitoring, Measurement, Analysis and Evaluation

IRC has established an initial program that determines:

- What needs to be monitored and measured.
- The methods for monitoring, measurement, analysis and evaluation are needed to ensure valid results.
- When the monitoring and measuring shall be performed.
- When the results from monitoring and measurement shall be analysed and evaluated.

IRC demonstrated that they will further develop a list of items to be included within their program which will further mature the way that IRC will measure the effectiveness of their Management System.

Customer satisfaction

IRC has completed a number of customer reviews and satisfaction activities to ensure that they are performing as claimed and that the customers receive what was agreed to. At this point no customer complaint has been identified

IRC does do repeat business, and have their invoices paid on time without being withheld, which supports the fact that they are delivering and that the clients are happy.

Analysis and evaluation

IRC demonstrated commitment to analyse and evaluate appropriate data and information arising from their program.

The results of analysis, IRC evaluate:

- Conformity of products and services.
- The degree of customer satisfaction.
- The performance and effectiveness of the management system.
- If planning has been implemented effectively.
- The effectiveness of actions taken to address risks and opportunities.
- The performance of external providers.
- The need for improvements to the management system.

Evidence:

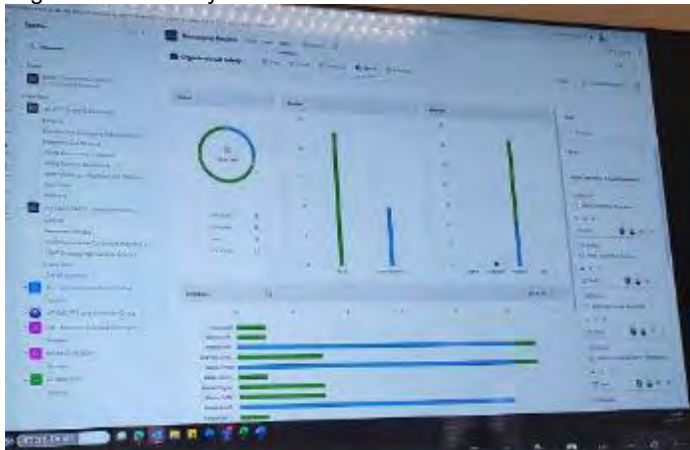
Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services

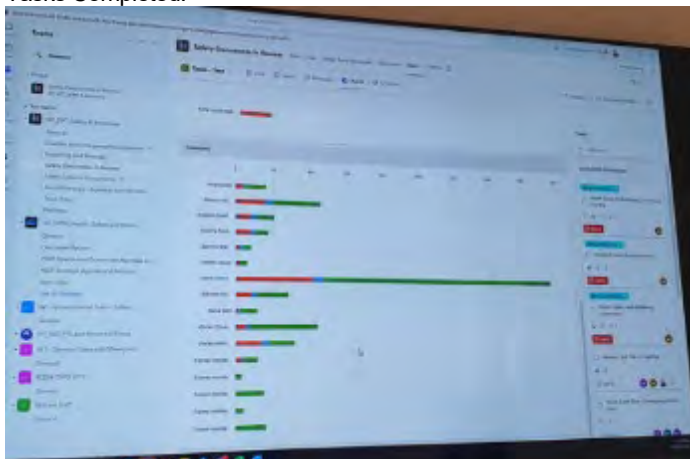
Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference performance and measurement.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Nebo WWTP Irrigation Management Plan.pdf refers
- Site Based Management Plan - Clermont.pdf refers
- Site Based Management Plan - Nebo.pdf refers
- Clermont WWTP Irrigation Management Plan.pdf refers
- Clermont WWTP Receiving Environmental Monitoring Program.pdf refers
- In relation to the determination of climate changes with its various external and internal influences and, where necessary the impact of interested parties that affect the operations of IRC water and Waste.
- Various meetings where performances are:
 - Minutes - Quarterly IMS Management Review - Jan 2025. This documented information presents the necessary review of content that includes the internal and external issues also including the review of needs and expectations of interested parties that affect the management system.
 - Minutes - Annual IMS Management Review - June 2024.pdf further includes the reference to context with its ongoing maintenance and review.
 - Audit & Risk Committee Meeting Agenda – 17.03.2025.docx
 - Compliance & IMS Team Meeting - 31.01.2025.pdf
 - Monthly Managers Meeting Agenda April 2025 Confirmed.pdf
 - Planning & Projects Team Meeting - 15.04.2025.pdf
 - Planning and Projects Team Meeting Minutes - 11.03.2025.pdf
 - Projects & Planning Team Meeting - 11.03.2025.pdf
 - Standing Committee Meeting - 5.2 Water and Wastewater Preventative Maintenance Program Update.pdf
 - Water & Wastewater Operations Meeting - 20.02.2025.pdf
 - Whole Waste Services Team Meeting - 26.02.2025.pdf
- Inspections for monitoring and reporting:
 - CLERMONT Waste Management Facility - Monthly Dams Inspection.pdf
 - CLERMONT Wastewater Treatment - Monthly Dams Inspection.pdf
 - NEBO Wastewater Treatment Plant - Monthly Dams Inspection.pdf

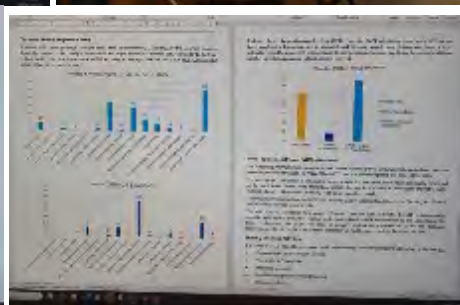
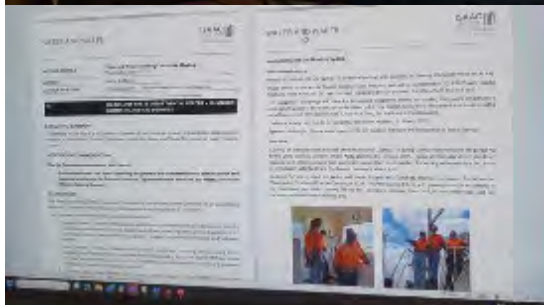
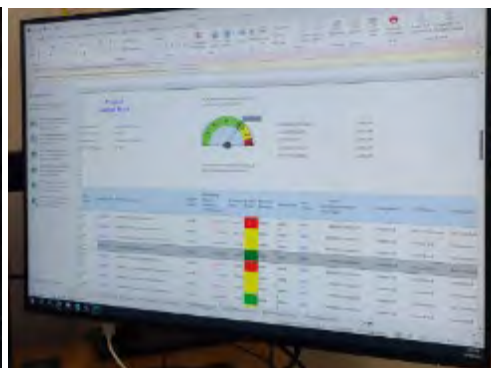
- The use of Statistical techniques includes for example:
- Organisational Safety



- Tasks Completed:



- Capital Projects



- Further performance records are generated for example, yet not limited to:
 - ECM_5363310_v1_Clermont - Waste Management Facility - Weekly Count Form - Week Commencing 31 March 2025.pdf
 - ECM_5363324_v1_Clermont - Waste Management Facility - Weekly Report - Commencing 31 March 2025.pdf
 - ECM_5363336_v1_Clermont - Waste Facility Weekly Task Checklist - Commencing 31 March 2025.pdf
 - ECM_5363339_v1_Clermont - Waste Management Facility Monthly Task Checklist - Week beginning 24 March 2025.pdf
 - ECM_5363379_v1_Clermont - Waste Pest Sighting Register Form - March 2025.pdf

Comments:

The internal audit process is both documented, structured and planned for quality, OH&S and environmental requirements. Further, work has been completed, and items actioned from the internal audit process. However, IRC demonstrated that they are aware that the expected output of the Internal audit provides information on whether the management system:

- Conforms to:
 - The organisation has met the requirements for its management system.
 - The requirements of this International Standard.
- It is effectively implemented and maintained.

During the audit, it was made evident that IRC understood the importance of and committed to:

- Plan, establish, implement and maintain an audit program(s) including the frequency, methods, responsibilities, planning requirements and reporting, which shall take into consideration the importance of the processes concerned, changes affecting the organisation and the results of previous audits.
- Define the audit criteria and scope for each audit.
- Select auditors and conduct audits to ensure objectivity and the impartiality of the audit process.
- Ensure that the results of the audits are reported to relevant management.
- Take appropriate correction and corrective actions without undue delay.
- Retain documented information as evidence of the implementation of the audit program and the audit results.
- IRC acknowledge planning for audits includes, but is not limited to:
 - Importance of the processes.
 - Managerial priorities.
 - Performance of the processes.
 - Changes affecting the organisation.
 - Results from previous audits (e.g. history of problems).
 - Trends in customer complaints.
 - Statutory and regulatory issues.

IRC accepts that the internal systems audit performed generated a number of findings that are in the process of being closed out. They are aware that the output information about the performance and effectiveness of the management system is from an impartial point of view, to ensure that planned arrangements have been completed and that the management system is effectively implemented and maintained.

IRC acknowledges that the output of the Internal audits is used to determine if the management system conforms to the requirements of the quality, OH&S and environmental standards.

IRC is aware that the Internal Audit methods include direct observation of the process, interviews with relevant people, and the examination of documented information (such as internal procedures, drawings, specifications, standards; customer requirements; statutory and regulatory requirements; and in enterprise management systems). While the organisation always tries to ensure that the management system complies with all the applicable requirements of the standard/s, there is no requirement for every clause of standard/s, or process in the management system, to be evaluated during every audit.

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Surridge - Program Leader - Compliance and IMS | Business Services

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference performance and measurement.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Minutes - Quarterly IMS Management Review - Jan 2025 & Minutes - Annual IMS Management Review - June 2024. where the results of internal audits are presented and reviewed.
- Inspections for monitoring and reporting:
 - CLERMONT Waste Management Facility - Monthly Dams Inspection.pdf
 - CLERMONT Wastewater Treatment - Monthly Dams Inspection.pdf
 - NEBO Wastewater Treatment Plant - Monthly Dams Inspection.pdf
- IMS Internal Audit Schedule that includes the following audits completed with their reports:
 - Gap Analysis - ISO9001 - 18.04.2024.pdf
 - IMS Internal Audit - CLM WMF - 02.12.2024.pdf
 - IMS Internal Audit - Nebo WTP - 29.10.2024.pdf
 - Process Review - Nebo WTP - 22.07.2024.pdf
 - Process Review - Water Mains Break - 18.04.2024.pdf

Comments:

IRC has identified and performed several meetings on a regular basis; these meetings have several agenda items that cover all the requirements as outlined within the three standards. Further work is to ensure that the various meetings along with the quarterly and annual management review address the listed inputs and outputs of all three standards.

IRC are aware that a Management Review is an activity that is conducted in alignment with the IRC strategic direction, and that the focus is to review information on the performance of the business activities specific to the management in order to determine if it is:

- Suitable – is it still fit for purpose.
- Adequate – is it still sufficient, and does it cover the items needed.
- Effectively does it still achieve the intended outcome as outlined by the MS objectives.

The identified number of internal meetings (as listed) is scheduled and conducted, and the relevant output is monitored on a regular basis.

Management review inputs are directly related to the requirements of other clauses within the standards; this includes the analysis and evaluation of data. The inputs are used to determine trends in order to make decisions and take actions related to the organisations management system. The necessary outputs are to ensure that the management system is achieved and are identified to ensure that the management system is effective.

Evidence:

Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Surridge - Program Leader - Compliance and IMS | Business Services

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference performance and measurement.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- Minutes - Quarterly IMS Management Review - Jan 2025.
- Minutes - Annual IMS Management Review - June 2024.pdf
- Various meetings where performance is reviewed include the following:
 - .Audit & Risk Committee Meeting Agenda – 17.03.2025.docx
 - Compliance & IMS Team Meeting - 31.01.2025.pdf
 - Monthly Managers Meeting Agenda April 2025 Confirmed.pdf
 - Planning & Projects Team Meeting - 15.04.2025.pdf
 - Planning and Projects Team Meeting Minutes - 11.03.2025.pdf
 - Projects & Planning Team Meeting - 11.03.2025.pdf
 - Standing Committee Meeting - 5.2 Water and Wastewater Preventative Maintenance Program Update.pdf
 - Water & Wastewater Operations Meeting - 20.02.2025.pdf
 - Whole of Waste Services Team Meeting - 26.02.2025.pdf

10.0 Improvement: *Mandatory Every Audit*

- In an ever-changing business world, not everything always goes according to plan.
- Clause 10 looks at ways to address non-conformities & corrective action, as well as strategies for improvement on a continual basis.

Annexure SL Clause:	10.1 Improvement General
	10.2 Nonconformity and Corrective Actions
	10.3 Continual improvement

Comments:

Comments –

IRC have demonstrated they have implemented an operational 'improvement'. IRC demonstrated that they ensure that documented information describes the improvement process by detailing specifically the channeling the information through a centralised point. Both corrective and continuous demonstrated as necessary considerations in an improvement system. IRC has demonstrated this process. This review of the information supplied, and the subsequent discussions (evidence) suggests IRC has demonstrated they have established, implemented and maintained procedures within the following:

- Investigating, responding to, and acting to minimize any harm caused from, incidents.
- Investigating and responding to system failures; and
- Initiating and completing appropriate corrective and preventive action.

IRC has demonstrated that they have implemented and recorded any changes in the OHSMS procedures resulting from incident investigations and corrective and preventive action. This review of the information supplied, and the subsequent discussions (evidence) suggests IRC ensure that they establish, implement and maintain procedures for dealing with actual and potential nonconformity and for taking corrective action and preventive action for environmental controls. The review of the procedure suggests IRC met the requirements adequately defined for:

- Identifying and correcting nonconformity and acting to mitigate their environmental impacts,
- Investigating nonconformity, determining their cause and taking actions to avoid their recurrence,
- Evaluating the need for action to prevent nonconformity and implementing appropriate actions designed to avoid their occurrence,
- Recording the results of corrective action(s) and preventive action(s) taken, and
- Reviewing the effectiveness of corrective action(s) and preventive action(s) taken.

This review of the information supplied, and the subsequent discussions (evidence) suggests IRC are able to demonstrate that it has continually improved the effectiveness of the management system using the policy, objectives, audit results, analysis of data, corrective and preventive actions and management review.

IRC ensures that it acts to eliminate the causes of nonconformities in order to prevent recurrence.

IRC Pty Ltd was reminded during this Audit to ensure the integration of those NCR's raised by 3rd party audits, such as the CACS audits, are included within the corrective and consequently the preventive action process, to show the continued improvement of their quality, safety and environment management system.

During this audit, the review suggests IRC demonstrated corrective actions are appropriate to the effects of the nonconformities encountered. Further, IRC ensures that a documented procedure is maintained to follow requirements for:

- Reviewing nonconformities (including customer complaints),
- Determining the causes of nonconformities,
- Evaluating the need for action to ensure that nonconformities do not recur,
- Determining and implementing action needed,
- Records of the results of action taken and
- Reviewing the effectiveness of the corrective action taken.

Evidence:

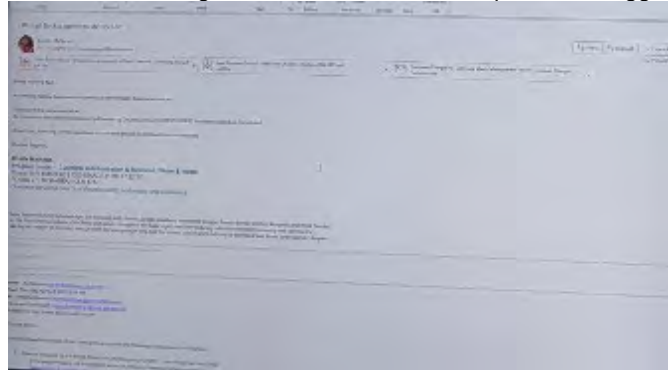
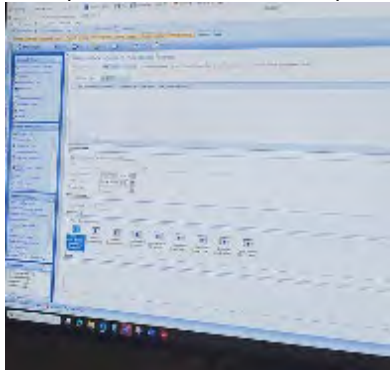
Discussion with:

- Angela Elliott - Compliance and IMS Officer | Business Services
- Tait Suridge - Program Leader - Compliance and IMS | Business Services

Documents presented include:

- ECM_4525413_v4_IMS Framework for Water and Waste (3) makes reference performance and measurement.
- Integrated Environmental Management System IRC Water and Waste.pdf refers.
- isaac-annual-operational-plan-2024-2025.pdf
- WW IMS Consultation and Performance Evaluation Plan.pdf
- Incident_Incident_Management_Procedure___CORP_PRO_038 (1)
- ECM_4525710_v103_IMS Master Register Water & Waste IMS Master Register Includes Improvement Register, Legislative R.xlsx
- Minutes - Quarterly IMS Management Review - Jan 2025.
- Minutes - Annual IMS Management Review - June 2024.pdf
- Various meetings where performance is reviewed include the following:
 - .Audit & Risk Committee Meeting Agenda – 17.03.2025.docx
 - Compliance & IMS Team Meeting - 31.01.2025.pdf
 - Monthly Managers Meeting Agenda April 2025 Confirmed.pdf
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 - Planning and Projects Team Meeting Minutes - 11.03.2025.pdf

- Projects & Planning Team Meeting - 11.03.2025.pdf
- Standing Committee Meeting - 5.2 Water and Wastewater Preventative Maintenance Program Update.pdf
- Water & Wastewater Operations Meeting - 20.02.2025.pdf
- Whole Waste Services Team Meeting - 26.02.2025.pdf
- Customer satisfaction example:
 - Water and Waste Service Complaints Policy Approved 28/05/24
 - Request Enquiry Data collected via the Isaac Property Portal – TechnologyOne
 - Example RQC25/0621 date requested 31/03/25 with target date 2/04/25 with correspondence logged:



- Regular Meetings in the Customer Administration Office Meeting for example 30/04/25

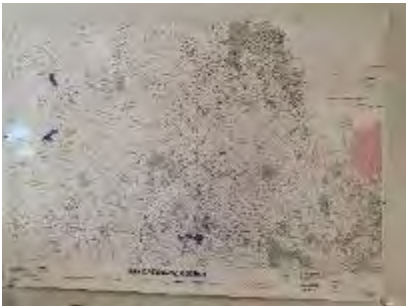
Photographical Supplemental

Address	Moranbah Grosvenor Complex, 1 Batchelor Parade, Moranbah QLD
Description	Head office

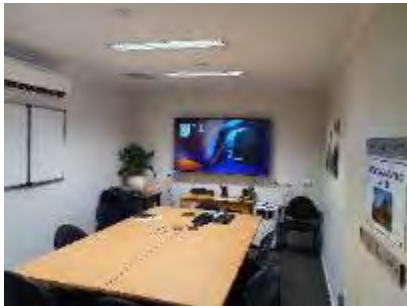
<input type="checkbox"/>	A site visit was not able to be undertaken at this time: However photographic evidence was able to be supplied by the client as evidence of compliance.
<input checked="" type="checkbox"/>	A site visit was able to be undertaken



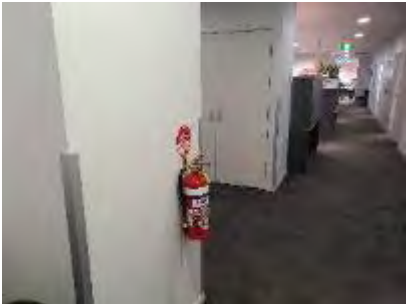
Example of the entrance to Council



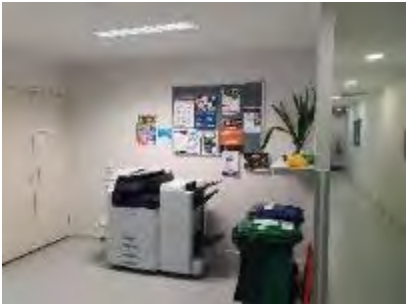
Map indicating the scope geographically



Example of meeting room



Example of emergency readiness and response



Example of communication board and office equipment



First Aid Kit access and waste segregation bins



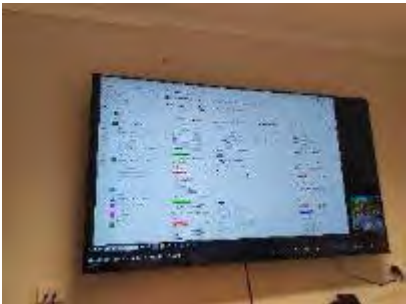
Communication board with OH&S Policy on display only.



Board with emergency readiness and response



Emergency plan



Demonstration of communication



Noticeboards



Visitor Sign in Sheet

Address	17914 Peak Downs Highway, Nebo QLD 4742
Description	Waste Management Facility

<input type="checkbox"/>	A site visit was not able to be undertaken at this time: However photographic evidence was able to be supplied by the client as evidence of compliance.
<input checked="" type="checkbox"/>	A site visit was able to be undertaken



Entrance signage



Conditions of entry



Segregation of waste



Eyewash station



Testing and tagging of firefighting equipment



Segregation of waste practiced



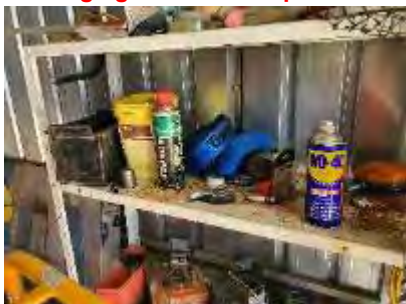
Segregation of waste practiced



On site office with signage



Storage container



Storage container with unknown spill



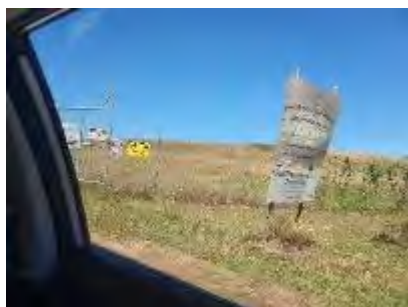
Communication board



Available first aid kit on site

Address	17917 Peak Downs Highway, Nebo QLD 4742
Description	Wastewater Treatment Plant

<input type="checkbox"/>	A site visit was not able to be undertaken at this time: However photographic evidence was able to be supplied by the client as evidence of compliance.
<input checked="" type="checkbox"/>	A site visit was able to be undertaken



Entrance with signage



Waste water treatment



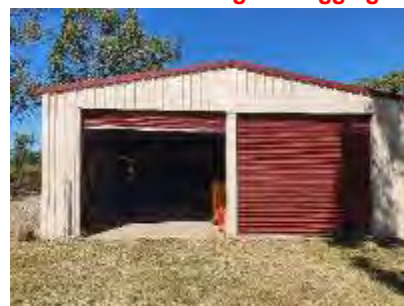
Leads for testing and tagging



Waste water treatment



Substance to be used with wastewater treatment



Plumbers shed



Plumber's shed



Available first aid kit



Diagram of location



Noticeboard for the communication



Noticeboard for communication, especially the OH&S Policy



Available first aid kit and snake bit kit



Calibration of equipment



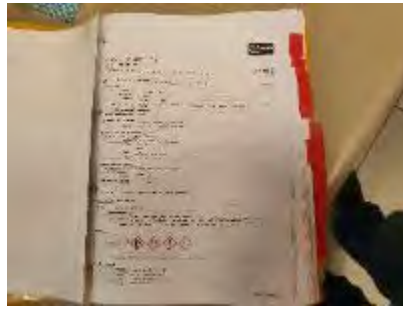
Calibration of equipment



Demonstration of document control



Waste Management plan documentation



Further documentation for the management of the waste treatment plant



Demonstration of access to online documentation



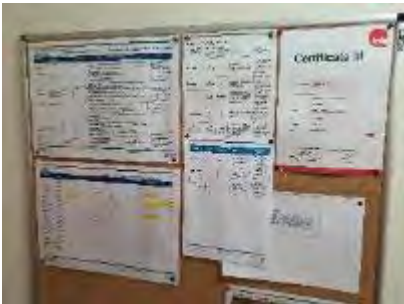
Stored documentation



Workspace and workstation



Fuse box tested and tagged



Communication board



Emergency readiness and response plan / diagram



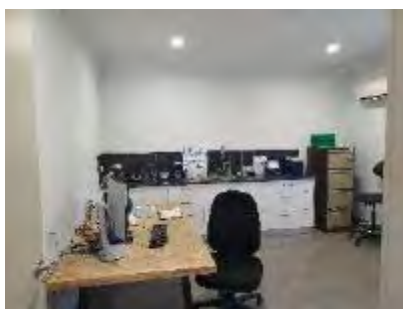
Workstation

Address	531 Airstrip Road, Nebo QLD 4742
Description	Water Treatment Plant

<input type="checkbox"/>	A site visit was not able to be undertaken at this time: However photographic evidence was able to be supplied by the client as evidence of compliance.
<input checked="" type="checkbox"/>	A site visit was able to be undertaken



Entrance



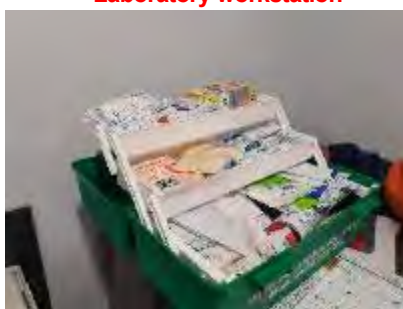
Laboratory workstation



Example Calibration of equipment



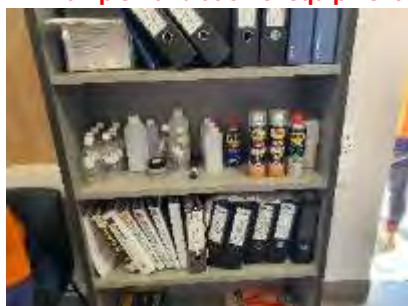
Example Calibration of equipment



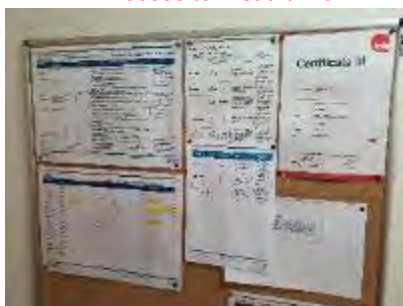
Access to first aid kit



Example of documentation available



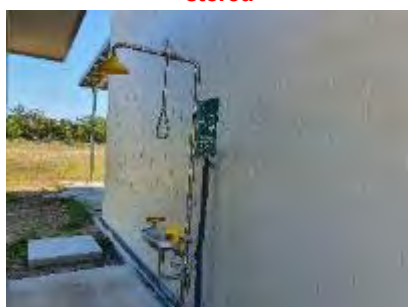
Documentation and sample containers stored



Example of communication board



Example of testing and tagging of fire equipment



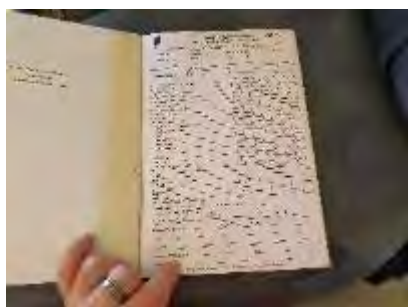
Available eyewash station



General accessibility in mechanical water treatment area



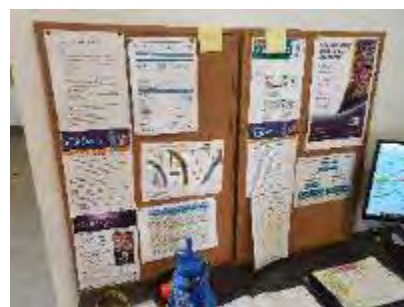
Available forklift on site



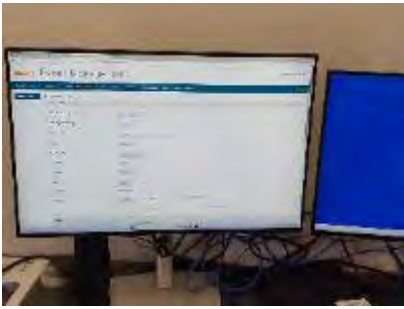
Forklift prestart booklet



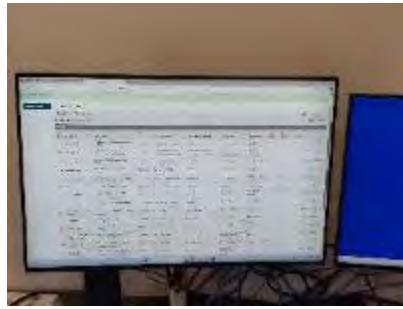
Instrumentation



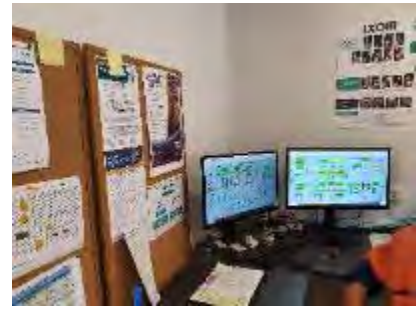
Noticeboard with OH&S Policy display



Demonstration of worker access to position details



Example of worker competence



Example of workstation

Address	38 Turrama Road, Clermont QLD 4721
Description	Wastewater Treatment Plant

<input type="checkbox"/>	A site visit was not able to be undertaken at this time: However photographic evidence was able to be supplied by the client as evidence of compliance.
<input checked="" type="checkbox"/>	A site visit was able to be undertaken



Entry with signage



Waste Treatment area



Waste Treatment area



Waste Treatment area



Substation and equipment storage and signage



Access to eye wash station



Demonstration of test and tag for firefighting equipment with signage



Example of workstation with access to documentation and first aid kit



Storage and hazard substance storage



Stored fuel



Stored and locked substance with signage



Lab area with calibrated equipment



Calibrated equipment



Noticeboard with OH&S Policy on display



Instrumentation for the treatment plant



Example of documentation available



Example of competence



Documentation storage and workstation

Address	106 Cheeseborough Road, Clermont QLD 4721
Description	Water Treatment Plant

<input type="checkbox"/>	A site visit was not able to be undertaken at this time: However photographic evidence was able to be supplied by the client as evidence of compliance.
<input checked="" type="checkbox"/>	A site visit was able to be undertaken



Entrance with signage



Access to HAZCEM and building fencing



Signage



First Aid kit replacement



First Aid kit replacement



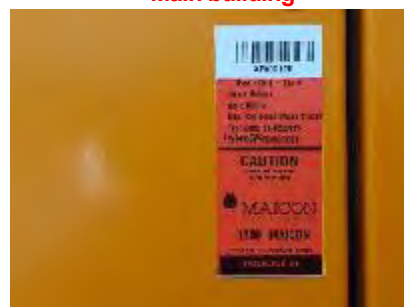
Main building



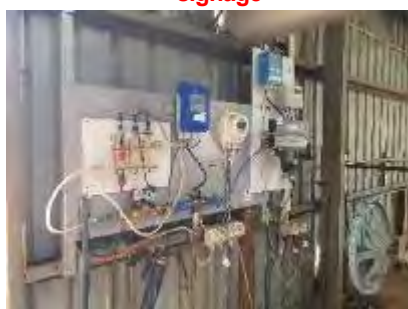
Treatment area with storage and signage



Treatment area with storage and signage



Testig and tagging of main switchboard



Treatment area instrumentation



Treatment area instrumentation



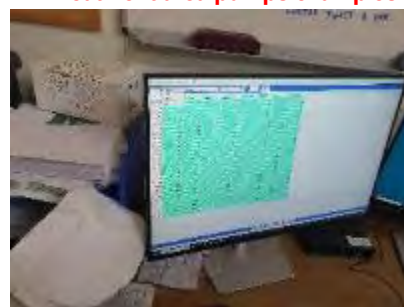
Treatment area pumps examples



Communication signage



Instrumentation monitoring



Instrument database for analysis and reporting



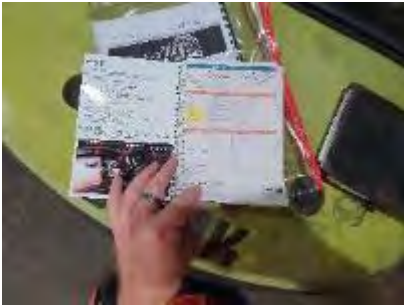
Chemical Storage area with signage



Substances storage and processes area



Forklift use



Forklift prestart booklet



Storage area with signage and access to firefighting equipment



Storage and access to substances



Substance storage



Access to spill kit



Laboratory area with calibration of equipment

Address	30 Jeffrey Street, Clermont QLD 4721
Description	Waste Management Facility

<input type="checkbox"/>	A site visit was not able to be undertaken at this time: However photographic evidence was able to be supplied by the client as evidence of compliance.
<input checked="" type="checkbox"/>	A site visit was able to be undertaken



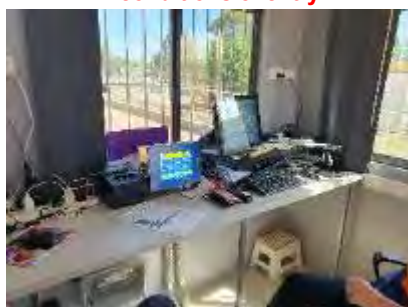
Access point with signage and conditions of entry



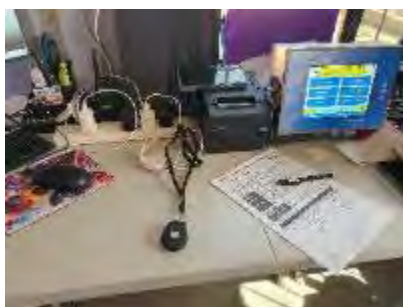
Emergency evacuation points and bin



Weigh bridge with office



Weigh bridge workstation



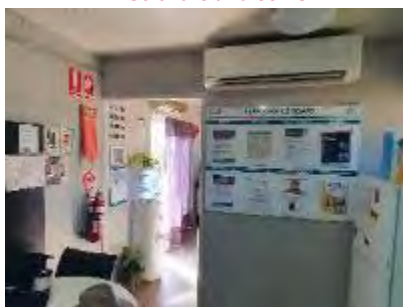
Processing of vehicles with entry via the software and coms



Workstation



Signage, communication and access to firefighting equipment



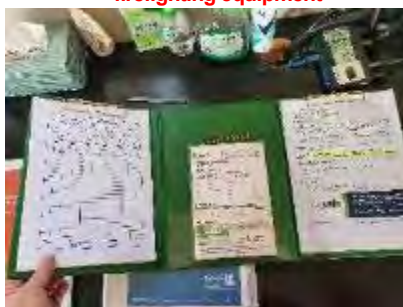
Signage, communication and access to firefighting equipment



Testing and tagging of main switchboard



Workstation with documentation



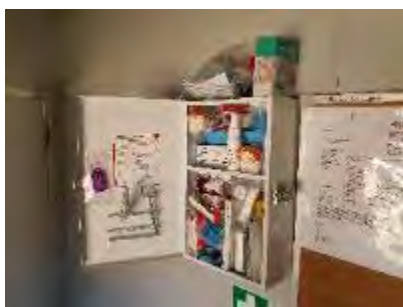
Example of documentation



Access to tagging and eyewash



Access to first aid kit



First Aid kit contents



Signage



**Demonstration of documentation
accessed online**



**Demonstration of documentation
accessed online**



General storage area

Three Year Audit Plan

Visit Number	Date	Man Days	Review Company Changes 1.0	Use of Logos 2.0	Previous NCRs Observations 3.0	Context of the Organisation 4.0	Leadership 5.0	Planning and Risk 6.0	Support (Part 1 of 2) 7.0	Support (Part 2 of 2) 7.0	Operations (Part 1 of 3) 8.0	Operations (Part 2 of 3) <i>QMS Only</i> 8.0	Operations (Part 3 of 3) <i>QMS Only</i> 8.0	Performance 9.0	Improvement 10.0
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12 monthly Audit Program															
Recertification	April 2025	12	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
1 st	April 2026	6	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2 nd	April 2027	6	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recertification	2 months prior to expiry date	TBC	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>



Approvals / Signoff

CERTIFICATION DETAILS CONFIRMED:

Company Name:	Confirmed Via ASIC register
Scope of Certification:	<ul style="list-style-type: none"> Agreed to in consultation with Client. Web site reviewed for anomalies and or Contradictions. Goods or services supplied under the control of the management system constitute the applicant's scope of certification.
Non-Applicable Clauses:	Non-applicable elements have been justified fully.
ANZSIC Codes Allocated:	Are correct and reflect the scope accurately.
Applicable Clauses satisfactorily documented:	<p>During the audit, information relevant to the audit objectives, scope and criteria (including information relating to interfaces between functions, activities and processes) have been obtained by appropriate sampling and verified to become audit evidence. Methods to obtain information included, but are not limited to:</p> <ul style="list-style-type: none"> interviews. observation of processes and activities review of documentation and records.


AUDITOR STATEMENT: TO BE COMPLETED BY THE AUDITOR

I confirm that the organisation has been assessed in accordance with Compliance Australia Certification Services policies and procedures for compliance with the nominated standard(s). The report covers satisfactorily all elements of the applicable standard and provides sufficient detail to enable a certification recommendation to be made. I therefore recommend that registration **recommended**.

Auditor Name	Signature	Date
Clayton Lawrene		2/05/2025
William Chance		2/05/2025

NON-TECHNICAL REVIEW: TO BE COMPLETED BY THE GENERAL MANAGER

I confirm that all processes have been followed, and records retained.

Reviewers Name	Signature	Date
James Alister		8/05/2025

RECOMMENDATION AND DECLARATION: TO BE COMPLETED BY RELEVANT COMPETENT CACS EMPLOYEE

I confirm that the organisation has been assessed in accordance with Compliance Australia Certification Services policies and procedures for compliance with the nominated standard(s). The report has been reviewed and covers satisfactorily all elements of the applicable standard and provides sufficient detail to enable a certification recommendation to be made. I declare that I, and so far, as I am aware, the audit team, have no conflict of interest nor have I or they acted as a consultant for this client in the last two years. I therefore recommend that registration **recommended**

Reviewers Name	Signature	Date
Hermann Taufale		8/05/2025

Next Audit Plan

Assessment Type	Surveillance			
Date of Next Assessment	May 2026			
Auditor/s Name/s	Clayton Lawrence			
Reference Documents	ISO 9001:2015	ISO 14001:2015	ISO 45001:2018	
	Client Manuals, Work Instructions, Legal Register, Risk Registers			

Audit Planning.	Start Time is 0900hrs - Lunch will be approximately between 1200Hrs & 1300Hrs - Closeout Meeting Last Day is set for 1600Hrs. Summary closeout at the conclusion of each day around 1700.	Audit Objectives.	The objective of this assessment is to determine whether the above organisation has satisfied the requirements laid down in the applicable STD/s pertaining to the below criteria within the scope defined.
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Process and Documentation to Review	Management sys policies, responsibility, authority, planning, customer requirements/contract, documentation requirements, resource infrastructure/work environment, competence, awareness & training, internal/customer communications, process/product realization, analysis of data, documentation control, design & development, purchasing, control of records, control of measure devices, monitor measure production service.		
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Confidentiality	The auditor, as is CACS, is bound by strict confidentiality with all that is discussed, and any information taken from site shall be treated with utmost confidentiality.	Follow – Up Actions	Any critical findings from both the previous audit.
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Acceptance by the Client	This plan must be reviewed and accepted by the client, and presented to the auditee, before the on-site audit activities begin	Objections	Any objections by the auditee should be resolved between the audit team leader, the auditee & the audit client. Any revised audit plan should be agreed among the parties concerned.
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Verification of outsourced Processes or Functions (OHS only Delete if not applicable)		
	YES	NO
Are any of the OH&SMS Management System processes or Functions outsourced to external providers	<input type="checkbox"/>	<input checked="" type="checkbox"/>
if yes, the above makes a comment - None		

Entry and Exit Meeting Agenda

ENTRY MEETING –	EXIT MEETING –
Approx. timing. 15-20 mins and will cover the following	Approx. timing. 15-20 mins and covers the following
<ul style="list-style-type: none"> • Introduction • Purpose & type of Assessment • Business Structure • Scope of business / certificate and changes • Audit Plan – Are there any changes • Findings Categories Major, Minor & observations • Talking to workers – Are there any special situations? • Confirm availability of special Interviewees. (if applicable) • Viewing work activities –Is there anything confidential? • Confirm confidentiality requirements • Escort arrangements / Use of Quiet Area. (if applicable) • Confirm the time for the exit interview. (approx. time only) 	<ul style="list-style-type: none"> • Introduction • Review of Findings - overview & Issue Summary Report • Discuss findings close out arrangements • Discuss timeframe for delivery of formal final report. • Use of Logos and Accreditation Symbols • Discuss areas to be addressed at the next assessment. • Any other issues or questions.

METHODOLOGIES to determine Sampling requirements: As applicable - Delete if not applicable

Selection does not have to be made at the start of the audit process. It can also be done once the audit of the central function has been completed. In any case, central function should be informed of the sites to be included in the sample. This can be at relatively short notice but shall allow adequate time for preparation.

The sample shall be partly selective based on the factors set out below and partly random and shall result in a representative range of different sites being selected, ensuring all processes covered by the scope of certification will be audited.

- At least 25% of the samples shall be selected at random.
- Taking into account the provisions mentioned below, the remainder shall be selected so that the differences among the sites selected over the period of validity of the certificate is as large as possible.
- Results of internal site audits and management reviews or previous certification audits.
- Records of complaints and other relevant aspects of corrective and preventive action
- Significant variations in the size of the sites
- Variations in shift patterns and work procedures
- Complexity of the management system and processes conducted at the sites.
- Modifications since the last certification audit.
- Maturity of the management system and knowledge of the organization.
- Environmental issues and extent of aspects and associated impacts for environmental management systems.
- Differences in culture, language and regulatory requirements.
- Geographical dispersion; and
- Whether the sites are permanent, temporary or virtual.

Comments: None

Functional area to be audited Guide	A – Administration	AP – Applicable Person	SM – Snr Management
	S – Supervisor	HR – Human Resources	MR – Management Representative

Next Audit Plan	Day 1 Clayton Lawrence Moranbah	Day 2 Clayton Lawrence Moranbah	Day 3 Clayton Lawrence TBA	Day 4 Clayton Lawrence TBA	Day 5 Clayton Lawrence Moranbah	Day 6 Clayton Lawrence Moranbah
Entry Meeting	0900 – SM+AP+MR	0900 – AP+MR	0900 – AP+MR	0900 – AP+MR	0900 – AP+MR	0900 – AP+MR
1, 2, 3 Mandatory Every Audit	1000 – SM+AP+MR		Site Visits - TBA	Site Visits - TBA		
4.0 Context of the Organisation						
5.0 Leadership						0930 – AP+MR+HR
6.0 Planning and Risk						
7.0 (Part 1) Support		0930 – AP+MR+HR				
7.0 (Part 2) Support						
8.0 (Part 1) Operations		1300 – AP+MR+SM				
8.0 (Part 2) Operations <i>Quality ONLY</i>						
8.0 (Part 3) Operations <i>Quality ONLY</i>					0930 – AP+MR+SM	
9.0 Performance <i>Mandatory Every Audit</i>	1130 – AP+MR					
10.0 Improvement <i>Mandatory Every Audit</i>	1330 – AP+MR					
Exit Meeting	1700 – AP+MR	1700 – AP+MR	1700 – AP+MR	1700 – AP+MR	1700 – SM+AP+MR	1700 – SM+AP+MR

MEETING DETAILS

Water and Waste Standing Committee Meeting

Wednesday 9 July 2025

AUTHOR

Jason Grandcourt

AUTHOR POSITION

Manager Waste Services

5.4

WATER AND WASTE MONTHLY DEPARTMENTAL REPORT – WASTE SERVICES

EXECUTIVE SUMMARY

The purpose of this report is to provide an update to Council on the Waste Services Department within the Water and Waste Directorate.

OFFICER'S RECOMMENDATION

That the Committee recommends that Council:

1. ***Receives and notes this report outlining Waste Services Department's activities within the Water and Waste Directorate.***

BACKGROUND

This report will provide visibility of risks and highlights experienced by the Waste Services Department and will outline relevant operational performance in the period between 1 April 2025 and the end of June 2025.

Highlights

The following highlights occurred since the previous Waste Services Departmental Report was received by Council in April 2025.

Amnesty Day

Amnesty Day was held across the region on Saturday, 14 June 2025, offering residents the opportunity to dispose of problematic waste free of charge, subject to specific terms and conditions.

All sites experienced high activity, with Moranbah, Clermont, and Dysart being particularly busy. Clermont had a queue lasting over an hour, and Moranbah's line extended back toward Goonyella Road. Despite the volume, residents were generally very well-behaved. While three individuals were disruptive and challenged the conditions of the day, they represented a very small minority. Overall, the majority of attendees were patient and courteous to our team.

Key outcomes were:

- 554 Amnesty Day tickets processed.
- \$18,228.37 in fees waived (up from \$12,000 in 2024).
- Waste types received:
 - 456 tyres
 - 161 gassed whitegoods
 - 90 mattresses
 - 20 gas bottles/fire extinguishers
 - 2 solar panels
 - 8 tonnes of construction & demolition waste
 - 1.5 tonnes of scrap metal
 - 10 tonnes of greenwaste
 - 21 tonnes of general household waste

Following Council's recent review of community support through Waste Services, Amnesty Day was expanded to include access for community groups. Four groups took advantage of this opportunity. However, some groups were unable to participate due to scheduling conflicts or insufficient time to coordinate resources.

In addition to the waived revenue of \$18,228.37, the event incurred \$2,915.06 in additional resourcing costs.

Learnings from this Amnesty Day are:

- Increase staffing at Clermont and Moranbah Waste Management Facilities to improve traffic flow and reduce wait times.
- Involve Waste Management Operators in the development of communications to ensure clarity and operational practicality.
- Simplify the language used in flyers outlining conditions of use, while maintaining the original terms.
- Promote the newly adopted Council initiative offering four waste vouchers per year to community groups, which may better suit their needs.

Planning for the next Amnesty Day, scheduled for Sunday, 7 December 2025, will commence in the near future. Insights and learnings from the June event will inform improvements to ensure an even more efficient and accessible experience for the community.

Mining Waste Disposal Project

With ongoing challenges related to high volumes of mining-generated waste being landfilled, there is growing concern about the disposal of unsafe, hard to handle and potentially recoverable materials at Council facilities. Examples include gas bottles, flares, metal rods, long lengths of pipe, and hydraulic hoses.

Waste Services has been actively engaging with its commercial customers to address individual issues, with those customers liaising with their clients to resolve concerns. However, due to the increasing frequency of these incidents, a more proactive approach is now being implemented.

Where possible, onsite meetings will be held at the Moranbah Landfill involving both the waste transporter and the mining waste generator.

The first of these meetings took place on Wednesday, 25 June 2025, with seven representatives from Veolia and Anglo American, alongside Waste Services officers and landfill contract representatives from Wanless. The meeting was productive, with Council representatives outlining the challenges and historical issues associated with managing mine-generated waste. They also provided an overview of landfill operations to give mine representatives context on the constraints and risks involved.

The discussion focused on identifying opportunities for improvement and sharing information that could help mining companies educate their personnel to reduce both risk and cost.

Key Outcomes from the Meeting

- Improved communication regarding safety incidents
- A review to clarify the definition of "hard-to-handle" wastes
- Provision of photographic examples of problematic waste types to assist mine site education

All parties agreed that reducing these issues would benefit all stakeholders and committed to working collaboratively to mitigate risks. Similar meetings are planned with other waste transporters and mining companies in the near future.

Waste Services Performance

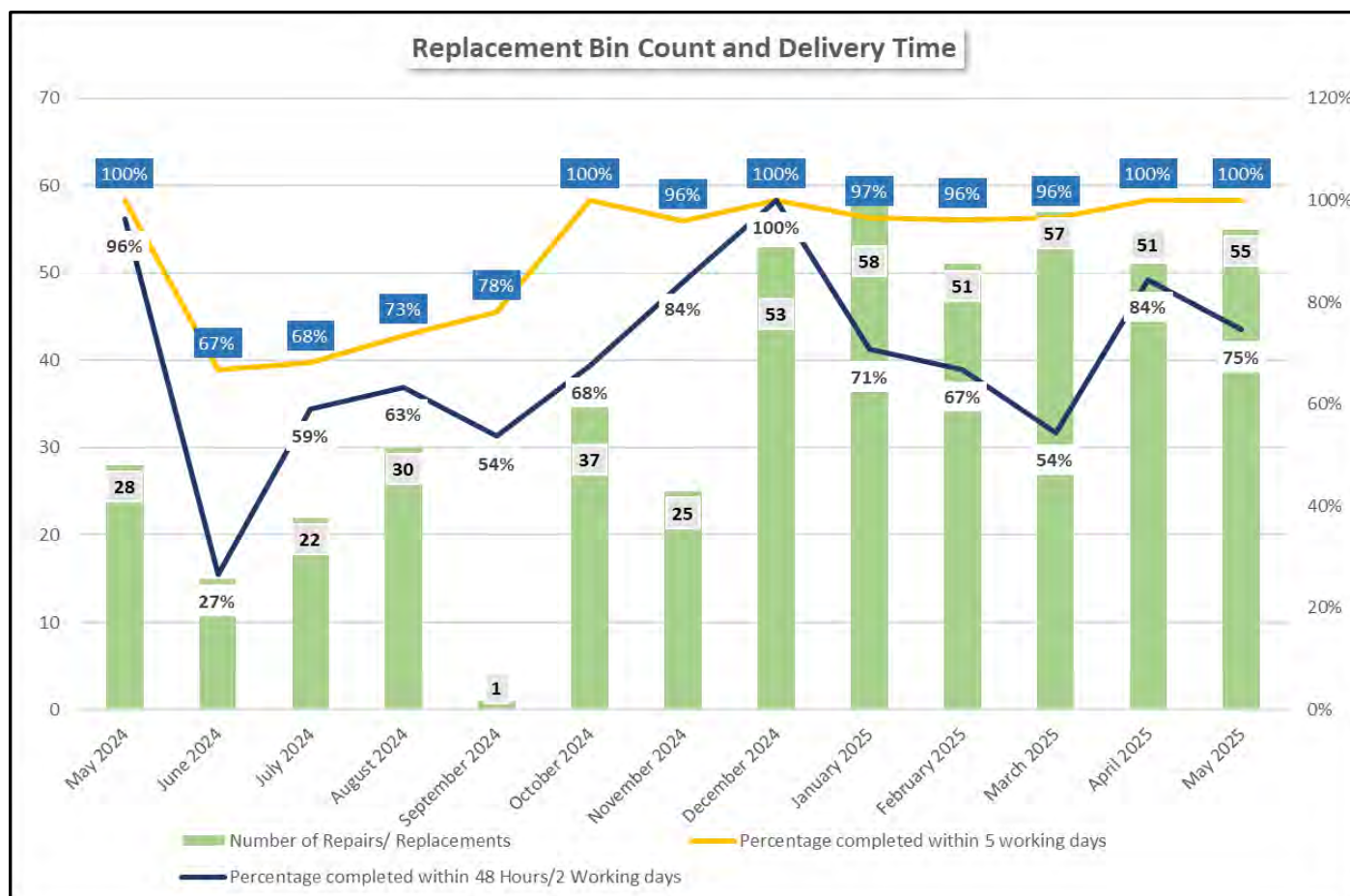


Figure 1 - Kerbside waste and recycling collection services performance – Customer Requests

Commentary – The higher number of bins requiring repairs or replacement continues, but there has been an improvement over the past two months in meeting performance timeframes for repairing and replacing wheelie bins. The higher number of replacements / repairs required has impacted the contractor's ability to undertake repairs and replacements. Discussions with the contractor have occurred and the improvement is a reflection of those discussions.

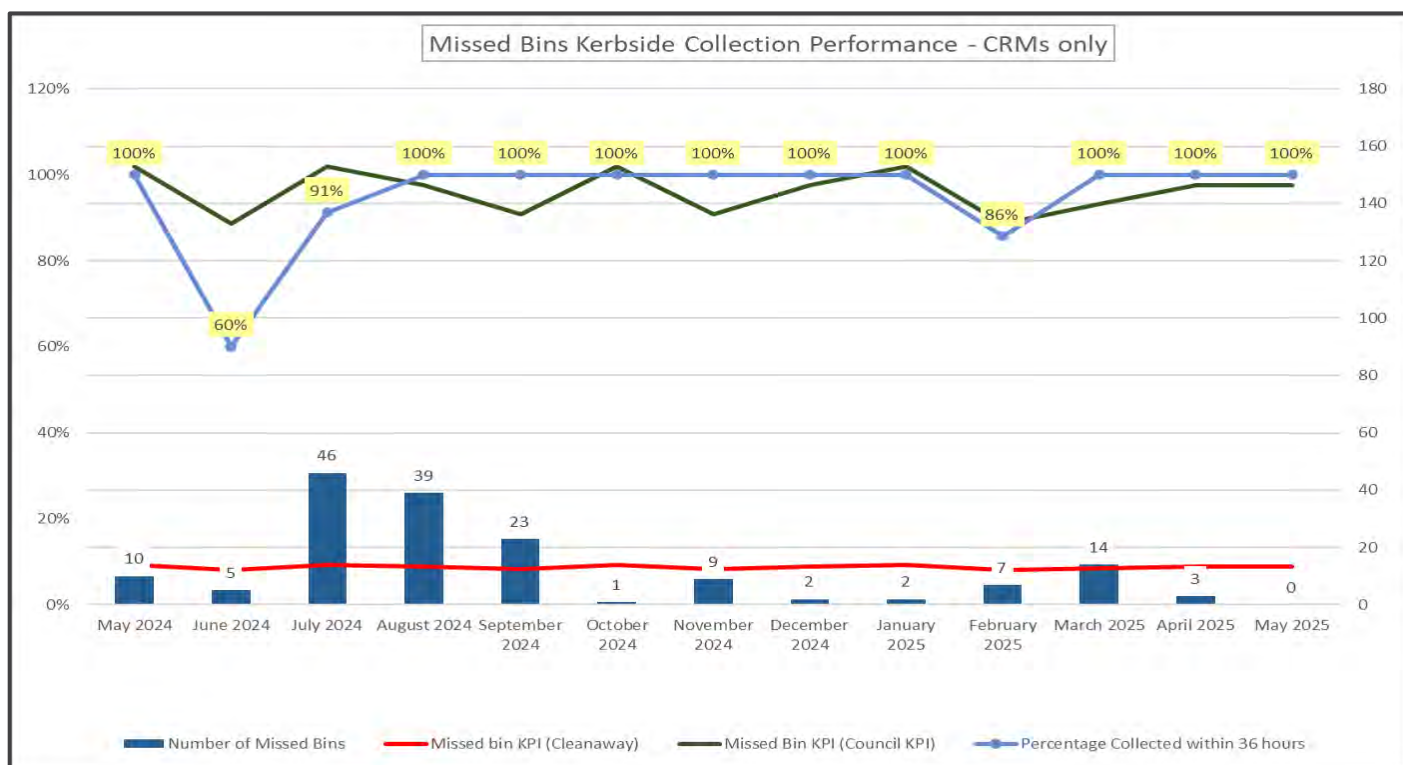


Figure 2 - Kerbside waste and recycling collection services performance – Missed Bins

Commentary – This graph represents customer generated requests regarding contractor missing bins. February 2025 kerbside services were impacted by the substantial wet weather. This graph does not capture changes to scheduled collection days due to contractor issues with staff or truck availability. Future Waste Services Departmental reports will present information regarding this aspect to the service. In addition to kerbside collection services, future reports will also present information on kerbside recycling information.

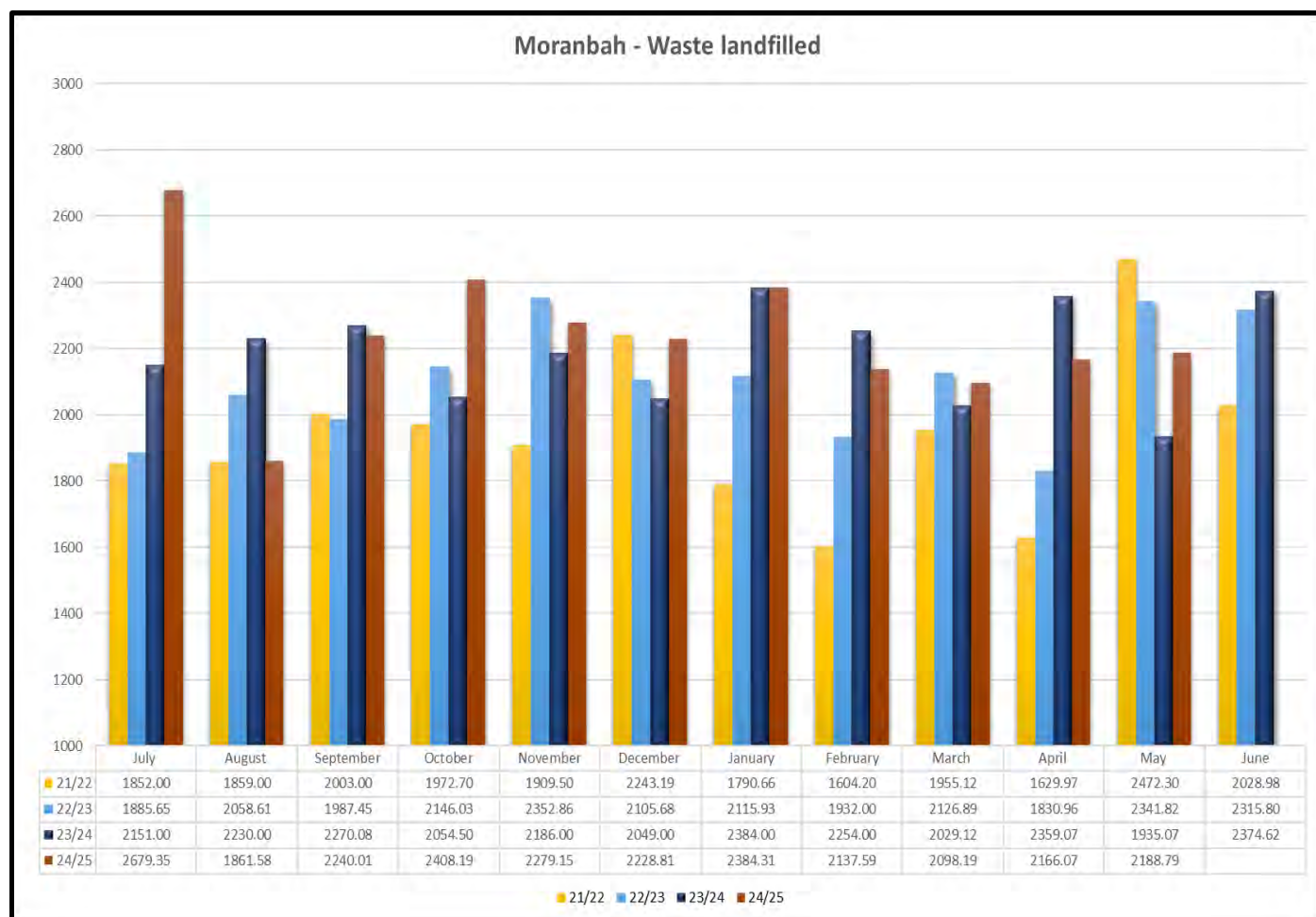


Figure 3 - Moranbah landfill – Tonnes of waste landfilled

Commentary – This graph shows the tonnes of waste landfilled at Moranbah Landfill. The tonnes of waste landfill have been relatively stable in the past three months. Future Waste Services Departmental reports will present information on the performance of Clermont and Dysart landfills.

Operational Projects

Project Name / Description	Scheduled End Date	Comments / Exceptions
Marine flare bins	June 2025	<p>Completed.</p> <p>The new service to accept the receipt of expired and problematic marine flares at the Moranbah waste management facility, commenced in early June 2024. Working in partnership with Marine Safety Queensland, planning and training was completed for relevant team members.</p> <p>Initially bins will be placed at the Moranbah Waste Management Facility. Other locations will be assessed for suitability, once the initial service has commenced.</p> <p>Public notices were issued to highlight to the community this free service.</p>
Waste Audit	August 2025	<p>This project has been delayed due to other competing priorities. The procurement proposal to be finalised in June 2025 for August 2025 delivery.</p>
Internal boundary realignment for Dysart Landfill	June 2025	<p>The internal boundary between the landfill and the Resource Recovery Area (RRA) is to be realigned for operational purposes. The survey was completed in May 2025.</p> <p>Currently completing the supporting application to the Department of Environment, Science, Tourism and Innovation (DETSI).</p>
Procurement for Annual Volumetric Surveys	July 2025	<p>Following the procurement process the contract was awarded. In June, the surveyors have surveyed the landfill sites at Clermont, Dysart, Glenden and Moranbah, and it is expected the required information provided to Waste Services by mid-July.</p>
Expressions of Interest – Landfill Gas Management	December 2025	<p>This project has been delayed due to competing operational priorities. Procurement documentation review to occur in July 2025.</p>
Waste Collection Tender	December 2025	<p>Work commenced on tender for collection services has commenced. Initial discussions with Central Highlands Regional Council have occurred relating to potential joint procurement.</p> <p>Current discussions with potential consultants have commenced, with the aim to engage in July 2025.</p>

Landfill Operations Tender	December 2025	Review of current agreement is to be undertaken, so that the next tender considers improvements to the service.
Waste Management Strategy Review	December 2025	<p>A presentation was provided at the Council Water and Waste Day, held in May 2025 on the planned review.</p> <p>An initial review of the current strategy by officers, was undertaken in early June.</p> <p>An initial workshop will be provided to Council on the current Strategy actions and outcomes, along with suggestions on what should be included into the review.</p>
Site Based Management Plan review	June 2026	All Site Based Management Plans for all sites are requiring a review. Initial review to be completed by August 2025.



Figure 4 – Flare Bins at Moranbah Waste Management Facility – June 2025

Operations Update

- The leachate tank pump at Dysart Landfill has been successfully repaired and is now fully operational. During the downtime, leachate levels remained within acceptable limits, and there was no risk of spillage.
- Following the temporary closure of public access to the green waste, metal, and mattress stockpiles at Moranbah Landfill (Cell 0), a temporary storage area was established near the Resource Recovery Area. This closure was necessary to facilitate environmental monitoring activities. Normal operations resumed after one week, and arrangements are now in place to relocate the temporary stockpiles to their designated permanent areas.
- A member of the Moranbah Waste Team was awarded the Hazard Hunter Award for April, and Wanless contractor at Moranbah WMF received the Hazard Hunter Award for June, recognising their commitment to safety and hazard identification.

Developing Initiatives

- An industry Register Training Organisation (RTO) has been identified as a potential provider of waste related courses for Waste Services Staff. There has been an absence in Queensland for many years of an RTO that can provide further education for waste industry workers. Staff are currently in contact with the provider.
- A workshop with the waste team on improving chronic issues that impact operations will be held in the near future. An example is to improve the Waste Acceptance Criteria and extend it to non – residential waste. This will now be planned to be delivered by August 2025.
- On the 21 May 2025, a Water and Waste Council Briefing Day was held. Items discussed with Council included Not-for-profit Concessions, clean-up days, amnesty days, Waste Strategy review and Greater Whitsunday Council of Mayors (GWCoM) Regional Waste Plan.

Following the briefing day separate reports will be provided to Council to seek formal resolution for formalise any new initiatives.

Strategic Waste Matters

- During the reporting period the Queensland Government announced public consultation on the Queensland Waste Strategy 2025 – 2030. The Queensland Government is seeking submissions up until 26 June 2025.

Council Manager Waste Services has participated in workshops hosted by DETSI and contributed to submissions by the LGAQ Inc (Circular Economy and Waste Advisory Working group), LAWMAC Inc and the Waste Management Resource Recovery Association (WMRR) Inc.

A submission has been drafted for Council's consideration to represent council's views.

- Greater Whitsunday Council of Mayors (GWCoM) have been informed that their submission for a Regional Waste Management Coordinator has been successful.

IMPLICATIONS

Provision of the Waste Services Departmental report ensures Council has visibility over the operational performance and challenges faced by the Waste Services team.

During the reporting period, maintaining regular site operational hours and days proved challenging due to staff illness and urgent family leave. Despite these disruptions, team members demonstrated strong commitment by stepping up and taking on additional shifts to minimise community impact wherever possible.

There is currently a staffing risk associated with the kerbside bin collection contractor, following the recent departure of a team member based in Moranbah. This has affected the contractor's ability to complete scheduled services. The contractor is actively recruiting and has advised that improvements are expected in the very near future.

CONSULTATION

- Director Water and Waste
- Waste Services Department

BASIS FOR RECOMMENDATION

The recommendation is to receive and note the content of this report regarding an overview of the Waste Services Department within the Water and Waste Directorate of Isaac Regional Council.

ACTION ACCOUNTABILITY

The Manager Waste Services is responsible for strategic-level delivery of Waste Management services across the region, comprising waste and recycling collection services and operation of Waste Management Facilities, and related environmental compliance within the Isaac Region Action.

KEY MESSAGES

The Manager Waste Services will provide information on a regular basis to keep Council informed of the performance and developing initiatives within the Waste Services area of operations.

Report prepared by:
JASON GRANDCOURT
Manager Waste Services
Date: 24 June 2025

Report authorised by:
SCOTT CASEY
Director Water and Waste
Date: 1 July 2025

ATTACHMENTS

- Nil

REFERENCE DOCUMENT

- Nil

PAGES 143 TO 156 HAVE INTENTIONALLY BEEN REMOVED DUE TO CONFIDENTIAL REASONS