No Locatio Proces Category Action ADV n s step	VG No. ADWG Element Source Haz ID / Da Source	te added P			Due date Due date (revised) notes	Status	Comments	Comments 29/08/18 Comments 1/3/19	Comments 27/6/19 & 30/7/2019 & 27/8/2019; 27/09/2019; 13/12/19; 28/2/20; 24/04/2020; 24/7/20; 24/11/20	Short term actions Resource requirements
5 All Training Develop and implement a staff awareness program for relevant water quality obligations relating to their areas of responsibility.	1.2 Regulatory and Formal	M	ledium Manager			In progress			Quarterly review meeting to cover water quality obligations, alternate staff attendance at meetings. 28/2/20: To consider schedule of to re-implement water quality meetings	Re-implement quarterly meetings (after finalisation
	Requirements	Sep-2015	Warrumbun gle Water; Technical Officer	30-Jul-21	31-Jul-23 implement WQ meetings	i i			30/7/21: monthly all WW staff meetings held with relevant items brought up on agenda; fortnightly wate quality summary circualted to relevant staff; DWMS being updated; WQ still to be re-implemented	r of improvement plan). Process to be formalised in updated DWMS (Action 334)
8 All Document Update stakeholder/relevant agencies list to comprehensively identify all stakeholders who could affect, or be ation / Frotocol from the accountabilities and responsibilities of relevant agencies in support of the water supplier. This list will be included in this DWMS (in the main body) and maintained as a separate document referenced in Appendix D. It is also recommended that the contact register be inserted on a separate page so that it may be easily printed and posted on workplace walls.	1.3 Engaging Stakeholders	H Mar-2015	igh Supervisor Treatment	30-Jul-21	31-Jul-23 complete key suppliers	In progress	A draft ERP was developed by Bligh Tanner in collaboration with Council. Contact registers were developed for each scheme that now need to be completed (need input from operational staff).	r	Registers have been updated, further review still needed. Finalisation of ERP to be included as part of NSW Health project. ERP responsibility to be allocated, including setting review times 13/12/19: Confirmed that development of ERP is to be undertaken as part of Hunter H20 NSW Health project. 20/220 - Lists to be included in DWMS when updated 24/7/20: IRPs workshop held on 217; Bligh Tanner work to be provided to HH2O 24/3/21: CW to ask CN to add to her task list including finalisation (info from supervisor) + annual or sis monthly reviewlupdate	
10 All Document The water supply system analysis, including the flow charts and catchment characteristics, will be reviewed ation / internally in 12 months, and upon any significant changes to any of the water supply systems. The review process and records of the outcomes of these reviews should be documented.	2.1 Water Supply System Analysis	Sep-2015	Manager Warrumbun gle Water	30-Jul-19		Implemented			30/7/21: Supervisor Treatment to complete key supplier lists Flow chart reviewed as part of quarterly meeting. Flow charts updates in progress	
11 All Operations Enter all water quality monitoring data into electronic spreadsheets on a weekly basis. Allows for ease of data processing.	2.1 Water Supply System Analysis	Mar-2015	igh Technical Officer	30-Jul-19		Implemented	This being done by Council's Technical Officer.		All information is being entered electronically	
	2.1 Water Supply Mendooran MBWA2017 System Analysis Boil Water Alert 2017	2017	Supervisor South	22-Jan-19		Implemented	Cincol.	Included in S&S funding (R1)		
14 All Perfor Document The assessment of the water quality performance data should be reviewed every 12 months, and upon any mance ation / significant changes to any of the water supply systems. Review will assess any seasonal trends, consistent exceedances or other potential water quality issues. The formal review process and records of the outcomes of these reviews should be documented.	2.2 Assessment of Water Quality Data	Sep-2015	Manager Warrumbun gle Water	30-Jul-19		Implemented			Quarterly DWMS reviews undertaken Fortnightly review of CCP data (exceedance summaries), sent to Supervisors and Manager and reviewed in operations meeting. Monthly report to General Manager of CCP exceedances	
16 All Perfor Monitoring Council to include new operational data prior to review of the DWMS. mance monitor ing	2.2 Assessment of Water Quality Data	Sep-2015	Manager Warrumbun gle Water	27-Aug-19		Implemented			Water quality data reviewed as part of quarterly meeting and annual DWMS review report	
Particular Services (and services and services s	2.3 Hazard ID and Risk Hunter H2O BWY012, Assessment Audit 2014 BWY013, BWY014	2014	Supervisor Treatment	30-Jul-21	31-Dec-22 check bunding compliance	In progress	Any spilled chemical in the soda ash dosing and storage area can potentially drain to the stormwater drainage system The alum bulk storage bunded area may potentially not comply with Australian Standard AS with regard to appropriate anglifrom the top of the storage tank to the top of the bund wall There is limited ventilation in the chlorine dosing room which is a potential safety hazard	e e e e e e e e e e e e e e e e e e e	Investigation still needed To be included in treatment plant upgrades Choiner room items covered under action 329 13/12/19. Have received quotes, sizing to be confirmed. HunterH20 audit to be undertaken next week, HunterH20 to confirm requirements 28/220-2e see update action 23 28/47/20: chloriner room items addressed (see also action 23); soda ash'allum bunidng outstanding 24/41/20: soda ash'allum bunidng still required 24/3/21: need to put a sump in dosing room, put sump in and redirect to bunding or to future fluoride room when the chemical tank for it gets installed; complane with AS3780 for bunding still to be confirmed 30/7/21: compliance with AS3780 still to be confirmed (assing to TL. Treatment Nth); in case of non- compliance a self-bunded tank would need to purchased, which could be covered under future funded upgrade works	Investigation to be finalised under the Binnaway Water Suplly Scheme Business Case
26 CLH Disinfe Minor ction works - Organise for chains to be installed to secure the cylinders in place and reduce the risk of the cylinders falling over - Investigate ventilation requirements as outlined in Australian Standard AS2927. Implement ventilation modification if required to comply with the Australian Standard. This may be achieved through improved forced ventilation or modification to the vents for cross ventilation - Choinine gas is an oxidizing agent and sources of fuel should not be stored in the same room. - Items stored on the ground in the room poses a trip hazard and should be removed or store in a more tidy manner.	2.3 Hazard ID and Risk Hunter H2O CLH006, Assessment Audit 2014 CLH007, CLH008	H 2014	gh Project Engineer	30-Jul-21	31-Dec-21	Complete	The chlorine gas cylinders are currently not stored in a secure marner. Gas cylinders should be stored securely on the site to reduce the risk of damage to the cylinder option cylinder topple over. There is currently no forced ventilation in the chlorine dosing room. Redundant equipment and boxes are contained in the chlorine dosing room.		Chains have been installed All other items to be addressed FY19/20 (replace chlorine room). Tender to be developed. 27/3/19 & 13/12/19: need info of equipment to be reused (alarming system + scales) + drone pictures (Coolah) 24/4/20: Cylinders have chains so can be secured 24/1/20: outstanding only is chlorine room upgrade 24/1/20: as above 24/3/21: All reviewing previously prepared Tech Specs to be able to call RFQs 30/7/21: Project Engineer sent out and receive back RFQs, however insufficient budget - BP report to August 2021 meeting	
28 BAR, Safety Operations Organise routine tagging of portable electrical equipment to reduce safety risks CBN	2.3 Hazard ID and Risk Hunter H2O BAR014, Assessment Audit 2014 COO015	H 2014	Supervisor Treatment; Director Environment Services		31/03/2020	Implemented	No schedule for electrical equipment tagging is currently in place	9	Manger sent email WHS representative - waiting for reply, 13/12/19: Baradine tagging has been complete. CBN still to be done 28/2/20: CBN still to be done. All depots have been done. Electrician to be engaged for CBN. 24/4/20: Electrician has been engaged	WHS representative to table at next committee meeting. Organise tagging for CBN Director to raise at senior level for issue across Council.
50 BUG, Catch Investigatio Private water bore inspections, bore register BDN, ment & ns KBI Abstrac tion	3.1 Preventive Measures Risk 1.03 and Multiple Barriers assessment	Н Маг-2015	Manager Warrumbun gle Water; Technical Officer	30-Jul-21	31-Jul-23 Media Release	In progress	Can we obtain a list of private bores from DPI? Bruce Lamont to advise if DOI can give us a list (Dough Moorby did similar exercise)		13/12/19: Discussion at Oriana meeting and with NSW Health advised against providing any such communication due to perceived risk. Sill considered to be a risk. Comms notice to also consider water security. 24/7/20: no progress; media release recommended 24/3/21: Media release to be prepared; Tech Officer to liaise WaterNSW re bore register & Doug Moorby 30/7/21: private bore inspections not intended; some bore information can be obtained from Water NSW. Media release to be prepared 28/11/22: bore information to be obtained from Water NSW and bore register to be finalised. 3/05/23: Meeting with NASA who will provide updated bore register. Tech Officer to generate private bore register from MinView website	Consider Media / comms for residents on importance of water security and contamination of bores, sustainability, Investigate information available on the subject (Tech Officer)
53 All Distribu Investigatio Identify high risk areas for backflow prevention (i.e. STP) tion ns	Preventive Measures Risk 10.01 and Multiple Barriers assessment	H Mar-2015	Manager Warrumbun gle Water; Supervisor Retic; Technical Officer	30-Jul-21	31-Jul-23 ELT report	In progress	Need backflow prevention policy Regulatory services police (that they do it properly); need RPZ register (including raspection intervals) STPs, SPSs, dump points, parks/gardens (chemicals) - standards? Hospitals, dentists,	consultant to develop? Get proposals (e.g. Key environmental) Supervisor North to get proposals/flunding (SS follow up with Mark Nave)? Check with regulatory services if this is done	Policy and register and inspection program still to be developed 13/12/19 Engaged consultant, to review documents produced 28/2/20: Policy and procedure produced and reviewed. Council to adopt. Consultant also developing register, which should identify high risk areas. 24/17/20: backflow policy and register drafted, however finalisation cannot occur until fees/charges are clarified and Council internal register set-up + admin resources allocated (Tech Officer position currently vacant) 24/11/20: as above 25/3/21: Tech Officer to finalise register in collaboration with Supervisor Retic (currently vacant); Manager to draft ELT report re implentation recommendations 30/17/21: Sackflow policy to be finalised into backflow register; then communication to owners need to occur re implementation; requires admin support	Tech Officer lisise with consultant and investigate setup register in council systems (Authority)
72 All Critical The identification of CCPs and Critical Limits should be reviewed every year, and upon any significant control changes to any of the water supply systems. The formal review process and records of the outcomes of these reviews should be documented. The DWMS documentation should also be updated accordingly.	3.2 CCPs	M Sep-2015	Manager Warrumbun gle Water	29-Aug-18		Implemented	Complete 2016, due Jan-17	CCP review was performed by Bligh Tanner in January 2016 and documented in the DWMS Implementation Report		
74 BWY, Sedime Document Establish an Operational Control Point (OCP) for the settling lagoon CBN, ntation ation / MDN Protocol	3.2 CCPs Bligh Tanner report Feb-16	M Feb-2016	Supervisor Treatment	30-Jul-21	30-Sep-21 13/3 (long term trends)	Implemented		2016-10: Undertake jar tests and confirm the appropriate coagulant dose, base change over between lagoons on outlet turbidity CBN: Introduce action limits on water quality requiring actions such as jar testing, optimising alum/polymer dose rates, switch between lagoons. MDN: enhanced management, e.g. when to undertake jar tests and switch between lagoons	27/9/19: turbidity, pH (e.g. should be 6-7 if alum is used) 28/2/20: Supervisor to propose OCP (>3 NTU, pH dependent on coagulant) 25/3/21: values determined for each lagoon system; need to be added to CCP reference guide 30/7/21: paper form list (with NTU and pH setpoints) to be forwarded to consultant to include in updates CCP reference guide 7/7/22 - CCP reference guide has been completed and updated by consultant.	1
80 All Training Relevant staff members must be trained to ensure they understand what the CCPs are and why they are important. This training should include use of the HACCP Summary Tables, associated target, Alert and Critical Limits, as well as the monitoring requirements to ensure the CCPs remain in control.	3.2 CCPs	Mar-2015	igh Manager Warrumbun gle Water	30-Jul-19		Implemented	Managers WW - Operations & Special Projects, HR, Supervisors	· · · · · · · · · · · · · · · · · · ·	Staff are trained as part of inductions. When CCPs are changed, updated CCP tables are provided an discussed at quarterly meetings (Supervisor/Team Leaders). Changes are passed on to operators via tool box talks.	
81 Mendoo Critical That WSC finalise draft CCPs provided the DWMS Implementation Report (Bligh Tanner, 2016) and include an additional WTP Final pH CCP	3.2 Critical Control Mendooran MBWA2017 Points Boll Water Alert 2017	H 2017	igh Manager	22-Jan-19		Implemented		pH COP introduced for Mendooran WTP. CCP cannot be implemented as pH cannot be controlled, only monitored. CCP reference guide and introduction of final pH CCPs/COPs for Shire outstanding		
89 MDN Distribu Document Implement a pro-active mains flushing program. tion ation / Protocol	i.1 Operational CWT report Procedures May-15	May-2015	Supervisor Reticulation; Technical Officer	30-Jul-21	Interim (order 31-Jul-23 and print books)			(Section 4.3, p.17)	Schedules for Dunedoo still be developed. 27/9/19: waiting on Graham (flushing points DDO+MDN) 24/4/20: Flushing has been undertaken (exc Coolah and Dunedoo), but not formalised. Marty has picked points for a flushing program for all sites. Schedule to be put into a carbon copy book for each set for implementation 30/7/21: Carbon copy books still to be finalised 30/5/2023 - Mains flushing to be discussed as part of the Mendooran Water Supply Scheme business case	Order and print books

Locatio Proces Category Action n sstep	ADWG No. ADWG Element		Haz ID / Date added Source number	l Priorit			e date Due date vised) notes		Comments	Comments 29/08/18 Comments 1/3/19	Comments 27/6/19 & 30/7/2019 & 27/8/2019; 27/09/2019; 13/12/19; 28/2/20; 24/04/2020; 24/7/20; 24/11/20	requiremen
Coonab Fittratio Operations Consider periodic inspection on filter media arabran n	4.1 Operational Procedures	Risk 5. assessment	6.01 Ma	Mediur ar-2015	Manager Warrumbun gle Water	27-Aug-19		Implemented			Filter inspection carried out in June 2019	
Coonab Distribu Operations Consider tanker filling from dead ends (if backflow prevention available) arabran tion	4.1 Operational Procedures	Risk 10 assessment	0.03 Ma	Mediur ar-2015	Manager Warrumbun gle Water	27-Aug-19		Implemented		Note: Especially relevant during times of water restrictions	Weekly flushing program in Coonabarabran (while high level restrictions are in place)	
Mendoo Document That WSC review its current organisational structure with a view to ensure that the management of WTP ation / Operators and reporting lines of communication actively support the ongoing implementation of its DWMS and CCPs. WSC should then formally document the adopted organisational structure, clearly communicating roles and responsibilities of all staff relating to the management of drinking water quality.	4.1 Operational Procedures	Mendooran M Boil Water Alert 2017	ИВWA2017	High 2017	Manager Warrumbun gle Water	22-Jan-19		Implemented		Draft structure water and wastewater has been developed, discussed and partially implemented		
Coonab Catch Monitoring Consider turbidity monitoring of infiltration well water and river water on event basis to determine arabran ment & effectiveness of filtration Abstrac tion	4.2 Operational Monitoring	Risk 1. assessment	.02 Ma	Mediur ar-2015	n Manager Warrumbun gle Water	27-Aug-19		Implemented		·	Combined raw water testing daily undertaken of current water source (NTU, pH, colour). Raw water quality assurance program in place (micro, chemicals) for all bores as part of NSW Health funding.	
Coonab Catch Monitoring Consider testing for E. coli in raw water arabran ment & Abstrac tion	4.2 Operational Monitoring	Risk 1. assessment	.04 Ma	Mediur ar-2015	Manager Warrumbun gle Water	27-Aug-19		Implemented			Raw water quality assurance program in place (micro, chemicals) for all bores as part of NSW Health funding.	
CBN Coagul Monitoring atton & Toch to be purchased) Action 248: Operators to re-familiarise themselves with BGA Management Protocols and related response actions> part complete (charts on CBN WTP wall) Action 292: Consider additional testing for taste and odour issues (MIB and Geosmin, chlorophyll-a (algae), pH, organic loadings and nutrient levels)	4.2 Operational Monitoring	CWT report May-15	Ma	Mediur	Supervisor Treatment	30-Jul-21	31-Jul-23	In progress			BGA testing during summer period in raw water. 27/9/19: will test morithly in lagoons over summer 13/12/19: Have been using PAC. Testing not yet undertaken 13/12/19: Have been using PAC. Testing not yet undertaken 24/4/20: Only raw water testing undertaken. Testing of lagoon not yet tested. No taste and odour complaints. PAC being dosed at Coonabarabran Further investigation into taste issues needed. 30/7/21: algae torch purchased in FY20/21, operation to be implemented and recording to be added to spreadsheet prior to spring; BGA charts still to displayed at BWY/MDN WTPs; A292 still outstanding, however carbon implemented for taste & odour in CBN	
CBN, Reserv Monitoring Consider implementing sampling regime for CBN, BDN for chlorine residual in the reservoirs	40 Crastian	Dist. 0		M. E.								Further investigation needed for taste and odour issues
CBN, Neserv Monitoring Consider implementing sampling regime for CBN, BUN for chlorine residual in the reservors BDN oirs	4.2 Operational Monitoring	Risk 9. assessment	Ma	Mediur ar-2015	Technical Officer	30-Jul-21	30-Jun-21	Implemented			Coonabarabran now (August 2019) recording chlorine residual testing of reservoirs (recorded weekly). 27/8/19: BDN flushing sheet not yet printed (walking on sheets from Dunedoo) 24/4/20: BDN flushing sheets still to be printed 25/3/21: chlorine recorded as part of weekly reservoir inspections; slot to be added on Ops carbon copy books to record chlorine residual 30/7/21: updated carbon book still outstanding for BDN (meanwhile weekly recordings on comments section of ops log sheet)	flushing sheet to be amended to include chlorine
Mendoo Disinfe Minor That online turbidity and chlorine residual monitoring is installed at Mendooran WTP. ran clion works	4.2 Operational Monitoring	Mendooran M Boil Water Alert 2017	//BWA2017	High 2017	Supervisor South	22-Jan-19		Implemented		Safe & Secure - draft funding deed is in preparation		
Mendoo Operations Maintain vegetation control throughout the water plant grounds and particularly around the sedimentation ran Vegeta lagoons. tion Control	4.3 Corrective Action	DPI D Inspections	DPI MEN008 Jai	Mediur n-2019	Supervisor South	27-Aug-19		Implemented		Cumbungi particularly should be kept out of the lagoons by physical re	Vegetation is mowed, weeds pulled. Lagoon weeds removed with excavator when desludge r	
Mendoo Document That WSC review the LMWUA Water Treatment Plant Audit Report for the Mendooran WTP (September ran ation / 2014), develop an Action Plan and urgently implement any outstanding recommendations. This Action Plan information should also be regularly reported back to DPI-Water.	4.3 Corrective Action	Mendooran M Boil Water Alert 2017	MBWA2017	2017	Manager Warrumbun gle Water	22-Jan-19		Implemented		6 of 15 completed, 8 in progress, 1 outstanding. All to be included in DWMS Improvement Plan		
BUG, Environ Minor DDO, mental works Install an appropriate containment bund around the dosing tank to capture any chemical leaks or spills during pump operation or transfer of hypo	4.3 Corrective Action	Audit 2014 D	BUG006, DD0009, (BI006	Mediur 2014	Supervisor Treatment	30-Jul-21	KBI 31-Jul-23 DDO dendin on CLH chlroine roon upgrade		Kenebri, Dunedoo and Bugaldie are all bein converted to chlorine gas disinfection systems, once implemented no bunding system will be required.	There is no chemical bund in the chlorine dosing/bore room. Chemical leaks and spills will not be contained and increases the risk of release to the	Dunedoo - 19/20 FY chlorine upgrade to gas 27/9/19 SUG/MSI: 200L mix tanks (diluted 20:1, 10:1 in summer with 20L 13% drums) 24/4/20: DD0 moving to chlorine gas. 30/7/21: not enough room in BUG to fit bund tank (shed could be replaced with a bigger one or extended); DD0 will be upgraded with ucurrently existing equipment from Coolah once the chlorine room has been replaced (A/Y); KBI to purchase bund tank to install under dosing tank 3/05/2023 - All sites to be upgraded to chlorine gas	Purchase bunding for tanks (BUG, KEN)
CBN Document Continue developing the existing asset registers to develop an electronic database that includes details such ation / as; age of infrastructure; expected life; last service date; maintenance frequency; manufacturer; recorded Protocol failures; responsibility for maintenance; operational procedures; and records for maintenance of equipment (including calibration). This should include any monitoring instrumentation.	4.4 Equipment Capa & Maintenance	bility	Sej	Low p-2016	Manager Warrumbun gle Water	30-Jul-21 TBI)	In progress			5 yearly evaluation of asset evaluations (last FY16/17) 24/4/20. Asset register is updated annually following completed capital projects. 24/11/20. Warmunbungle Water has no AMPs and currently no steps are taken for those to be developed, this however has been a recommendation fo the S430 OLG investigation report 30/7/21: as above; it has 3/5/2023 - Asset Management Plans to be developed by the asset steering committee. Council has a complete list of APV spreadsheets for both water and sewer assets	Asset management plan & registers to be developed.
All Distribu Major Replace old water meters with new water meters including backflow prevention devices ton works	4.4 Equipment Capa & Maintenance		0.01 Ma	Mediur ar-2015	Manager Warrumbun gle Water	27-Aug-19		Implemented			Program of replacement of water meters in place (1/3 to be completed FY19/20)	
Mendoo Reserv Minor ran oirs works reservoir to provide sufficient water pressure for a regular watermain flushing program to be implemented, to improve the water supply system's frefighting capacity and reduce overall water age by only storing water volumes sufficient to meet peak day demands.	4.4 Equipment Capa and Maintenance		/IBWA2017	High 2017	Supervisor South	22-Jan-19		Implemented		Included in S&S funding (R1)		
BWY Filtratio Operations Ensure Differential Pressure cells are functional and reading correctly. Modify PLC code to allow filter n backwashes to be initiated by either filter run time, filter headloss or filtered water turbidity	4.4 Equipment Capa and Maintenance		3WY006	Mediur 2014	Supervisor Treatment	30-Jul-21	31-Jul-23	In progress	To be completed under WTP upgrade funding deeds	Filter backwashes are only initiated by the filter run time setpoint regardless of the filter performance	24/4/20: PLC upgrades in budget for next financial year. Can add headloss, this will require metering. 307/21: PLC upgraded, however additional programming/harware purchase (DP cells) not yet undertaken undertaken 3/5/2023 - this is to be addressed under the proposed upgrades to the Binnaway water supply scheme funded by the SSWP.	treatment plant upgrade
BAR, Laborat Operations Perform appropriate scheduled maintenance and calibration of lab equipment according to the equipment BWY, ory manufacturer/supplier's recommendations CLH equipm ent	4.4 Equipment Cape and Maintenance	Audit 2014 C	3AR013, 200014, 3IN011	High 2014	Supervisor Treatment; Technical officer	24-Jul-20 ;	30/04/2020 ^{To} undertak calibrations	Implemented	Minimal or no maintenance is carried out by the operators		Annual maintenance and calibration is being carried of instruments and lab equipment, undertaken by contractors (last done in May - due to be completed) 27/9/19: AM als ent new borse equipment to SS but still need model numbers; SS to liaise with supervisors to that list for quotes can be compiled (excluding equipment that we calibrate ourselves) 13/12/19: Quote has been received. Partial list has been compiled. SS to add remaining locations and check with Supervisors 28/2/20: Internal board set up at CBN of frequency of maintenance and calibrations for operators to undertake and sign off on. To be set up at all sites. Photos to be taken regularly of board to ensure records of compliance. List has been compiled and quotes received. Contractor to be engaged and date scheduled for works 24/7/20: IPAC calibrations completed in March	calibration and maintenance boards and setup folder for photos in InfoXpert, e.g. "instrument and equipment maintenance' under DWMS (Tech Officer) —> will go
MDN Disinfe Operations Commence regular chlorine batch concentration monitoring. ction	4.5 Materials & Chemicals	CWT report May-15	Ма	Very H	Supervisor Treatment	30-Jul-21	30-Sep-21	Implemented	System to be converted to chlorine gas with Mendooran WTP upgrade (Section 4.2.5, p. 16 of CWT report) 2018- 05: Operator requires on-site training; Supervisor South; SS do drop tests with Stephen Drew (do each time when dose rat is changed, e.g. when swap river/bore water min weekly)	drop test on pump + check PLC; need updated operational sheet; check PLC code for correct dose rate e	Operators are testing when chemicals received. 27/8/19: GR to notify SD + verify that there is room in log book (SS) 31/2/19: Investigating equipment to test batch chlorine 28/2/20: Sill to be investigated, procedure to be developed and staff to be trained. Long term to be replaced by gas. 24/7/20: HHZO sent through an easy procedure, however implemenation/operator training outstanding [result will be put in comments section on spreadsheet]; to be done weekly 24/11/20: no progress 23/3/21: further operator training required + to be scheduled 30/7/21: TL Treatment Nth to follow up on/continue operator training	Procedure to be formalised (including space for test to be recorded and frequency); Supervisor to review action plan on a regular basis, at least monthly
Mendoo Operations Operators should be filling out the plant record sheets. Distribu Where equipment is not working or requires replacement/repair, this should be done as a matter of priority. This includes the following: 1. pH meter, 2. pH buffers, 3. Chlorine test reagents, 4. On line raw water turbidity meter.	5.1 Drinking Water Quality Monitorin		DPI MEN010 Jai	High n-2019	Supervisor South	27-Aug-19		Implemented		The current level of plant performance recording at the plant is unsatisfactory.	Plant records are now being filled out. Supervisor and Technical Officer review that sheets are completed.	
All Document That WSC develop and implement a 'Drinking Water Quality Monitoring Plan' which formalise staffrole ation / responsibilities, authorflies reporting and communication protocols and review existing procedures for Protocol sampling and testing. The monitoring plan should be built based on the NSW Health Drinking Monitoring Plan (available on the NSW Health website).			/IBWA2017	High 2017	Manager Warrumbun gle Water	30-Jul-21 TBE)	In progress			13/12/19: Consultant has provided a proposal to develop verification proposal 24/7/20: dependant on 206 25/3/21: as above (can get consultant to do DWQ Monitoring Plan once we have Verification Plan)	To follow on from action 206 Engage consultant to develop verification monitoring plan Consulta
All Document Formally document all drinking water quality monitoring protocols and combine into a formal Water Quality verification Plan. Protocol Including (A294): There was discussion around who collects the reticulation samples and analyses them before they are sent to FASS. The Councils Environmental Health Office collects and tests the samples. There have been some issues with samples being collected at the wrong location. It was recommended that Council develop a procedure that includes photos and GPS locations to ensure that samples are always collected at the correct location.	5.1 Drinking Water Quality Monitorin	3	Ma	High ar-2015	Environment al Compliance Officer	30-Jul-21 TB(Interim (new sampling sites)	In progress			Information for plan is in process of being collected. 27/8/19: find needs to go on T-drive; some photos still need to be taken; sample sites require updating (+photos added) + incident flowcharts added 13/12/19: Proposal from consultant to develop verification proposal 28/2/20: No progress 24/17/20: Jacinta Green (consultant) to address - CW needs to engage, meanwhile WQ monitoring protocal to be updated by JG (Tech Officer interim) with AM and Jesse R 25/3/21: Supervisor Treatment/Retic (currently vacant) to liaise with EHO (currently vacant) and NSW Health on new sampling sites (sampling at tensis); from it the WO Verification Plan can be developed/finalised by Tech Officer/EHO; refresher on DW sampling for rangers and other Ops staff being arranged.	Develop draft Water Quality Verification Plan with site locations (and photos). Investigate changing site numbers in NSW Health database. Engage consultant to develop verification monitoring plan (A205)

n s step	p	Source number	Date added Prior		Date Due date Due date reviewed (revised) notes	Status	Comments Comments 29/08/18 Comments 1/3/19	Comments 27/6/19 & 30/7/2019 & 27/8/2019; 27/09/2019; 13/12/19; 28/2/20; 24/04/2020; 24/7/20; Short term actions requirement 24/11/20
Mendoo WTP ran	Operations Perform jar tests to determine optimum coagulant dose rates and mixing configurations. Investigate (by performing jar tests) using separated dosing diffusers for improved efficiency of both coagulation and metal removal	5.1 Drinking Water Hunter H2O MEN006 Quality Monitoring Audit 2014	2014	Supervisor South	27-Aug-19	Implemented	Poly aluminium chloride and polassium permanganate are both dosed through the same diffuser into the top of the	Currently undertaking jar tests. Draft jar testing SOP has been developed. Jar testing training to be undertaken at Coonabarabran (September 2019)
CLH Inform tion Syste s	na Operations Implement routine monitoring of daily and instantaneous chlorine gas usage and plant flow rates. Perform calculations to determine instantaneous and daily chlorine dose rate. Installing scales for the chlorine cylinders to stand on will allow for daily chlorine usage to be measured> complete	5.1 Drinking Water Hunter H2O CLH004 Quality Monitoring Audit 2014	High 2014	Supervisor Treatment, Technical officer	30-Jul-21 31-Oct-21	Complete	aeration stainway Chlorine gas and treated water instantaneous flow rate measurements are not being recorded when operators are onsite. Measuring and monitoring of instantaneous chlorine dose rate and plant flow can provide confirmation of chlorine dose rate	Scales have been installed. Daily monitoring in reticulation. 28/2/20: Flow is being recorded when operators are onsite (has been for some time). Coolah flow is not variable unless change bore source (diff pump). 24/7/20: to be included in nest update of carbon copy books, can be recorded in comments section meanwhile - for this new calculation in spread sheet required 24/11/20: chlorine gas bottle weights meanwhile recorded on daily ops sheets; Ops sheet to be update (+ down the track: carbon copy books) 25/3/21: with currently recorded data, daily usage can be recorded; operators to record instaneous chlorine dose rate on site —> Supervisor to liase with Tech Officer for spreasheet calculations; future carbon copy books have been agreed on; will be easier with telemetry in place 30/7/21: formula for daily usage to be added to Tech Officer ops record sheet; rotameter on site for instantaneous rate - need to set up another colum on carbon copy book
Mendoo Iron ran and mang nese issues	ja	5.1 Drinking Water Hunter H2O MEN009 Quality Monitoring Audit 2014	High 2014	Supervisor South	27-Jun-19	Implemented	The plant experiences high manganese levels	Implemented from December 2017
BUG, Routin	ne Monitoring Initiate daily sampling and testing of the town distribution system. Tests should include free chlorine residual, pH and furbidity. This will improve response times to water qualify issues. Data collected can also be used for future planning and adjustments to the daily operating set points.	5.1 Drinking Water Hunter H2O BUG005, Quality Monitoring Audit 2014 KBI005	High 2014	Supervisor Treatment, Technical Officer	30-Jul-21 31-Jul-23	In progress	To ensure treated water quality complies with the Australian Drinking Water Guidelines (ADWG), water quality monitoring of the town distribution system must occur. Currently chlorine residual levels are measured weekly	Currently being undertaken 2-3/week. Chlorine analysers are installed, to be bought online. 13 December 2013: Analysers have been installed, not yet linked to shut pump down 28/2/20: Analysers to be linked to telemetry at the end of next week and text message alarm sent. 24/7/20: BNO operator going out 3 x week to test water a tore + 1 x week in retic (pHchlorine; NTU to be added - instrument to be provided & to be recorded on spreadsheet); chlorine analysers set-up to send bt message alarms (interlock with bore pump hence not required) 24/11/20: NTU meter available now (as well as pH meters), Tech Officer to create carbon copy books for BUG/RBI (currently only one space on CBN sheet for chlorine read weekly); bore flow reading will be recorded as well 25/3/21: AM to liase with FS (new Tech Officer) on the proposed new books 30/7/21: once telemetry is up and running, chlorine, pH and temperatru will be online; turbity will be mearbe measured on site oncelweek (templates done for new carbon copy books) as the small scheme does not justify operator involvement more than that.
All Inform tion Syste s	na Operations Implement regime of regular (daily) review of raw and treated water quality results, and input operational data into an electronic spread sheet to facilitate analysis and reporting.	5.3 Short-term evaluation of results	High Mar-2015	Manager Warrumbun gle Water	30-Jul-19	Implemented		Data entered electronically. Daily review of data by operator (manual highlighting of data outside trends) Fortnightly review of CCP data (exceedance summaries), sent to Supervisors and Manager and reviewed in operations meeting. Quarterly DWMS reviews undertaken Monthly report to General Manager of CCP exceedances. Action to formalise schedule covered under action 285.
All	Document Develop a comprehensive public and media communications strategy and include draft public and media ation / notifications. Protocol	6.1 Communication	Jun-2015	Manager Warrumbun gle Water; Admin	03-Aug-21 TBD	In progress		24/4/20: Carol (Admin support) to arrange the development of a communications strategy (to include restriction advice) 3/8/21: with resignation of Coolah admin officer no admin support available any longer to WW> will need to outsource to consultant in liaison with Manager Corporate
All	Training All water management stakeholders must read and agree to abide by the principles of this DVMS. This includes adding this requirement to the role descriptions for Council employees moving forward.	7.1 Employee Awareness and Involvement	Jun-2015	Support ium OD	03-Aug-21 TBD	In progress		13/12/19: Previous quarterly water quality meeting have discussed importance DWMS. More recently facilitated improvement meetings have been undertaken for Supervisors/Managers. 24/4/20: Some position descriptions include reference to ADWG. Water quality awareness training to be carried out. Proposal received by consultant. 25/3/21: DWMS reference has been added to all PDs as part of re-structure 3/8/21: Final PDs did not appear to have relevant requirement in them - OD to adjust
All	Document Consider developing operators communication strategy ation / Protocol	7.1 Employee Awareness and Involvement	Jun-2015	Manager Warrumbun gle Water	03-Aug-21 TBD	Complete		24/4/20: Proposal received by consultant. Roadmap to be developed about how information is handed over to operators. E.g. what information requires formal handover and documentation. 3/8/21: formalisation of strategy outstanind
MDN	Training That WSC investigate and implements a process of its WTP operators to be certified under the National Certification Framework.	7.2 Employee Training Mendooran MBWA2017 Boil Water Alert 2017	Medi 2017	OD	03-Aug-21 TBD	In progress	This is being organised and actioned through OWUA	Ongoing with HR 13/12/19: Currently reviewing competencies and aligning with national certification framework, processes to identify any shortfalls in training 24/4/20; Review has been undertaken and training plans have been developed. Sign off still to occur. 24/11/20. CK?? occered under other action 3/8/21: update from 04-2021 was 'Sourcing certification training was impacted by Covid in 2020 however Council believes it has not sourced a suitable provided and expects to have the training delivered to staff and have met or be close to meeting its certification target by the end of the 2020-2021 FY
ran ction	ation / water supply operational staff, WTP operators and relief staff to upskill and to be appropriately trained in Protocol WTP processes (i.e. DPI-Water Part 1 and 2 as a minimum). It is also recommended that all staff involved with water quality sampling, testing and monitoring, undergo training and are involved in developing procedures for their work tasks.	7.2 Employee Training Mendooran MBWA2017 Boil Water Alert 2017	2017	Manager Warrumbun gle Water; HR	22-Jan-19	Implemented	Referred to HR	
BIN, Whole BAR, of MDN Syste	e Document Review staff structure of water services team, PHU and NOW to provide support ation / rm Protocol	7.2 Employee Training Risk 11.06 assessment	Mar-2015	Manager Warrumbun gle Water	24-Apr-20 20-Jun-20	Implemented		Review on staff structure has been undertaken and revised structure is being implemented. 24/4/20: Restructure in Dec 2020. Issue from 2014 risk assessment on reporting have been rectified, action considered to be implemented.
All Opera or trainin	at Training Arrange for operators to undertake appropriate training	7.2 Employee Training Hunter H2O COH001, Audit 2014 DUN001	High 2014	Supervisors/ Manager /HR	24-Nov-20 31/03/2021	Implemented	Operators have not yet completed their fluoridation certification and/or require further training in WTP operations	Confined space and working at heights undertaken 2019. Other training gaps to be reviewed. Manager has requiseted training schedule from HR. 13/12/2019 Currently reviewing competencies and aligning with national certification framework, processes to identify any shortfalls in training 28/02/20. Are progressing the review with NCF. Have determined competency requirement for each plant determined by plant complexity/treatment. Gap analysis and training plan still to be completed. action 242 closed as considered as converted by this action. 24/7/20: requirements as per NCF included in PDs; fluoridation going to be covered as part of funded NSW Health/HLO2 project; HR developed training plan 24/11/20: implemented
All	Document Develop a consumer information program providing details on the DWMS, Emergency Response Plan, ation / consumer responsibilities, how drinking water quality may be affected in household distribution and drinking	8.2 Communication	Sep-2015	Warrumbun	24-Apr-20	Implemented		24/4/20: Four monthly improvement plan update reports are made available on Councits website. General information included on water treatment, including micro, chemical data; water complaint
All Performance manuments monite ing		9.1 Investigative Studies & Research Monitoring	Sep-2016	gle Water Manager Warrumbun gle Water	27-Aug-19	Implemented		procedure. Quarterly DWMS reviews undertaken Fortnightly review of CCP data (exceedance summaries), sent to Supervisors and Manager and reviewed in operations meeting. Monthly report to General Manager of CCP exceedances. Annual review report
	Investigatio Consider undertaking chemical testing on groundwater supplies to establish baseline water quality & ns ac	9.1 Investigative Studies Risk 1.07 & Research assessment Monitoring	Medi Mar-2015	Manager Warrumbun gle Water; EHO; Technical Officer	30-Jul-19	Implemented		Raw water testing regime program has been developed and implemented.
ran tion	bu Document That WSC review and regularly revise these water supply reticulation plans (Figures 4 & 5) as required to maintain an up to date records. Protocol Protocol Designed Continue to designed information particles to all respects of distriction under quality management.	10.1 Management of Documentation and Records Alert 2017	2017 Medi	Supervisor South; GIS Officer	22-Jan-19	Implemented	In collaboration with Council's GIS Officer	
All	Document Continue to document information pertinent to all aspects of drinking water quality management. ation / Protocol Document Develop a records management process to ensure appropriate storage and accessibility of DWMS related	10.1 Management of Documentation & Records 10.1 Management of Documentation &	Sep-2015 Medi	Manager Warrumbun gle Water	30-Jul-19	Implemented In progress		24/4/20: Procedure (Drinking water management system document register procedure) has been Procedure to be reviewed
	ation / records. Protocol Including (A264): Review existing documentation on the water supply systems and ensure all are captured on Council's document management system. Verify documents are UpToDate.	Records	Sep-2015	Manager Warrumbun gle Water	03-Aug-21 TBD			developed. Still to be reviewed and implemented 3/8/21: additional admin support required to implement and abide by formalised DWMS records requirements
Mendoo ran All	Document That WSC undertake an annual internal review of its DWMS, using the HHZO revised NSW Health's annual ation / Protocol Document Develop inhouse evaluation of long-term water quality performance procedures (outside external monitoring ation / requirements) and implement these procedures. These procedures could be incorporated into the	10.2 Reporting Mendooran MBWA2017	2017 High	Manager Warrumbun gle Water	22-Jan-19	Implemented Implemented	Quarterly internal reviews undertaken	Annual review 6 monthly level of service report (non compliances, boil water alerts etc.)
	Protocol preparation process for the annual management review or as part of the internal audit process.		Sep-2015	Manager Warrumbun gle Water	30-Jul-19			is monthly level of service report (non compliances, boil water alerts etc.) Quarterly DVMIS reviews undertaken Fortnightly review of CCP data (exceedance summaries), sent to Supervisors and Manager and reviewed in operations meeting. Monthly report to General Manager of CCP exceedances
ΔII	Document Ensure all handwritten water quality data is captured in electronic spreadsheets. ation / Protocol Investinatio, Identify appropriate personal to undertake the internal audit and provide training in auditing	11.1 Long-Term Evaluation of Results 11.2 Audit of Drinking	Mar-2015	Manager Warrumbun gle Water	30-Jul-19	Implemented In progress		3/5/23 a Consultation started with NSW Health
All	Investigatio Identify appropriate personal to undertake the internal audit and provide training in auditing. ns Document Develop external audit procedures in consultation with NSW Public Health Unit.	11.2 Audit of Drinking Water Quality Management 11.2 Audit of Drinking	Sep-2015	Manager Warrumbun gle Water Manager	24-Apr-20 TBD	In progress In progress		3/5/23 - Consultation started with NSW Health 3/5/23 - Consultation started with NSW Health
Mendoo	ation / Protocol Document That WSC develop and implement a DWMS review and continual improvement program which is regularly	Water Quality Management 12.1 Review by Senior Mendooran MBWA2017	Sep-2015	Warrumbun gle Water Manager	24-Apr-20 TBD	Implemented	Improvement Plan is under	
ran	ation / reviewed by the Senior Executive Team and reported to Council. Protocol	Executive Boil Water Alert 2017	2017	Manager Warrumbun gle Water	22-Jan-19 Page 3	of 5	Improvement Plan s under review, to be discussed in details at next DWQ review meeting	

n s step	y Action	ADWG No. ADWG Element	Source	Haz ID / Source	Date added F			ue date Due date revised) notes	Status	Comments	Comments 29/08/18 Comments 1/3/19	Comments 27/6/19 & 30/7/2019 & 27/8/2019; 27/09/2019; 13/12/19; 28/2/20; 24/04/2020; 24/7/20; 24/11/20	actions Resource requirements
ran ation /	nt That notices received from DPI-Water should be regularly reported to senior management together with an Action Plan, Works Budget and Timeline for the rectification of issues raised during DPI-Water Inspections. This Action Plan information should also be regularly reported back to DPI-Water and NSW Health.	12.1 Review by Senior Executive	Mendooran Boil Water Alert 2017	MBWA2017	2017	Manager Warrumbun gle Water	22-Jan-19		Implemented		List of outstanding recommendations has been created		
ran ation /	nt That WSC review and update the DWMS and the "DWMS Improvement Plan" is then kept up-to-date, recommended improvements are implemented in the order of identified urgency and progress of the "DWMS Improvement Plan" is reported regularly to the Senior Executive Team and Council. This information should also be passed onto NSW Health and DPI-Water for advice, review and comment. (Noting that actions from many of the other Recommendations in this report would need to be included in this DWMS Improvement Plan)	12.1 Review by Senior Executive	Mendooran Boil Water Alert 2017	MBWA2017	2017	High Manager Warrumbun gle Water	13-Dec-19	31-Oct-19	Implemented	Improvement plan is being consolidated	Refer to R11 and R12	Improvement plan has been consolidated. Plan to be provided to NSW Health as part of annual review. Quarterly updates to be provided to Council. 13/12/19: Improvement plan and annual review report have been provided to NSW Health	
286 All Docume ation / Protocol	nt Update and review Implementation Plan when necessary. Follow up actions to ensure deadlines are met and responsible parties are capable to undertake these actions.	12.2 Drinking Water Quality Manageme Improvement Plan			Sep-2015	Manager Warrumbun gle Water	30-Jul-19		Implemented			Plan has been compiled and in process of reviewing.	
289 All Disinfe Training ction	Training needs to be undertaken on the chlorine test kits to ensure operators are aware of the different testing ranges.		July 2018 ORANA meeting	WarrumSCJu 8.3	ul1 Jul-2018	High Technical Officer	27-Aug-19		Implemented			Technical officer provided SOPs, training and necessary reagents to operators.	
297 ALL Reticul Major ation works	There are a number of old cast iron mains that cause issues (corrosion, low chlorine residuals). Some of these mains are being replaced, consider developing a program/funding for replacing more of these sections of these mains.		March 2018 ORANA meeting	18.4	lar Mar-2018	Medium	27-Aug-19		Implemented			Program of replacement of mains is in place	
327 BWY Filtratio	Investigate filter outlet valve replacement (spare valve sitting on site)		27 June 2019 Improvement Plan review meeting	A3	27-Jun-19	Supervisor Treatment	03-Aug-21	31-Jul-23	In progress	To be implmented as part of the WTP upgrades.		Not yet installed. 24/4/20: In progress (wiring done) 3/8/21: electrical control cabinet installed near filter, requires interal filter level sensors to actuate valve; local electrician consulted 3/5/2023 - To be replaced as part of the funded upgrades to the Binnaway Water Supply Scheme	
328 All Instrum entation	Process monitoring, automation and instrumentation project. *Council should strongly consider investing in online monitoring at all CCPs (A13 - BWY NTU, A124& A258) — 241/11/20: only looking at fittration (NTU) and disinfection CCP, for CLH/DDO currently only considering retic CCP - all expected to be complete by 31/12/21 *Consider implementing online monitoring of critical water quality parameters including (A212): *Raw water pH *Raw water turbidity —> 24/11/20: RW not a priority at this stage *Filtered water turbidity [included in dot point above] *Treated chiorine residual [included in dot point above] *Online interiocks for pH and turbidity (NTU) on outlet for filters (A54) -> 24/11/20: in place in MDN for NTU; BDN/CBNMDN/BWY require pH probes; BDN requires newPLC; CBN/BWY can have interiocks in place for NTU by 31/12/21 *Censider-online furbidity meter with interiocke at BWY, BDN -> removed 24/11/20 as double up from dot point above *CBN-Install a second turbidity meter on the outlet of filter 2 and reconfigure the existing turbidity meter to monitor filter 1.(A130) -> 24/11/10: complete *CBN-Connect scales for chiorine gas cylinders to SCADA. (part A165) -> 24/11/20: previously completed *CBN-Connect scales for chiorine gas cylinders to SCADA. (part A165) -> 24/11/20: no DP measurement device currently installed		27 June 2019 Improvement Plan review meeting (Compilation o actions)		27-Jun-19	Manager Warrumbun gle Water	23-Mar-21	31-Jul-23 Interim (gas chlorine DDC	In progress			Funding granted from Safe and Secure for scoping study of automation. Covers action 21 13/12/19: Consultart engaged and is coming on site next week 13/12/19: Consultart engaged and is coming on site next week 13/12/19: PLC are needed to install orinie analysers 28/12/20: Teleconference workshop in December 2019. A number of actions have been included under this action (A 54, 124, 126, 258, 258, 165) Coonabarabran - Dual turbidity meters to be installed and replacement of PLC: PLC has been ordered. H20 to install individual filter analyser (only currently on one filter 24/4/20 Quote received from Hunter H20 for filter media replacement. Consultant has submitted. Have had meeting with Consultant on progress site week. Consultant to submit further information needed to progress. 27/4/20: received automation audit report, need to review (CW, AM) to finalise; future funding for next steps of concept design and installation/construction uncertain; PLC in CBN being installed, BWY ordered; BDNBWY online chiorine analysers ordered; old online CBN NTU meter being moved to BDN; CBN filter control upgrade being done this week ind dual NTU meters; SCADA upgrade progressing; BDN PLC being looked at (included in clarificrifilter replacement) 24/11/20: Aufmation upgrade - draft report peer reviewed, awaiting DPIE comments, BP report to Council scheduled for Feb 201; online monitoring implemented for NTU and rotionie at CBN (no external alarms until SCADA upgrade complete), for BDN & BWN NTU by 31/12/21 (no external alarms in SCADA upgrade complete), for retic chlorine at CLH and DDO (external alarms until SCADA upgrade complete), for retic chlorine at CLH and DDO (external alarms until SCADA upgrade complete), for retic chlorine at CLH and DDO (external alarms one reservoir level low), can be put in place in Put	t report from
330 BWY Sedime Major ntation works Lagoon s	Investigate restoring bank integrity of sedimentation lagoons (e.g. relining lagoons)		30 July 2019 Improvement Plan review meeting	A6	27-Jun-19	Supervisor Treatment	03-Aug-21	31-Jul-23	Complete				ious advice and ions
334 All DWMS	Review and update DWMS *Develop, document and implement a process for reviewing formal requirements every 12 months or where there are any changes to Council's activities or formal requirements (A4) *Formally document and communicate roles and responsibilities of staff relating to management of drinking water quality, (A6) *Develop a regular review process to update the list of stakeholders. Ensure contact details are current and all relevant parties are involved in engagement processes, (A7) *Develop appropriate mechanisms for stakeholder comminent and involvement. Document the planned approach including partnership agreements or Memorandum of Understanding (MoU), (A6) *Ensure all operational procedures are documented and referenced in the DWMS document register (A117) *As part of Council's review of the DWMS risk assessment, review and discuss the effectiveness of existing processes and procedures in managing water quality. The review should draw on external research and information, the risk assessment, water quality analysis and organisational experience. With any changes in conditions, processes and procedures also be revalidated. (A260) *Describe process for document control for all DWMS documentation (i.e. ensure the currency, accessibility and appropriate review DWMS documents). (A267) *Develop internal audit procedures and schedules appropriate to functionality of council and the water supply systems. (A277) *Develop and implement a process (including a schedule) for senior executive review of the effectiveness of the management system. The review process should include aspects such as, reports from audits, water quality performance, previous reviews, concerns from consumers and regulators and impacts of changes to internal or external conditions (e.g. regulatory, technology, organisational activities). (A285) *Review and update contact details listed in Table 10.(A334)		27 June 2019 Improvement Plan review meeting (Compilation o actions)		27-Jun-19	Manager Warrumbun gle Water	03-Aug-21	31-Jul-23	In progress			External project 13/12/19: Consultant has provided proposal to review and update DWMS 28/20: To update follow the risk assessment review (A20) No longer reporting monthly to General Manager. Annual update to Council (DWMS annual review report and improvement plan tabled). Review schedule to be formalised in DWMS update. 24/17/20: as per comment 28/2/20 24/17/20: honthly reporting to GM resumed; still waiting on HH2O to commence Health funded risk assessment review 25/3/21: engaged ATOM to undertake DWMS update, had inception meeting, site visits scheduled for 19+ 20/04/21 3/8/21: received DWMS Update draft 28/11/22 - DWMS update recieved from ATOM Consulting	
336 All	Develop a process to regularly monitor and test safety showers and eye washes, include developing a register		27 June 2019 Improvement Plan review meeting		27-Jun-19	Supervisor Treatment, Technical Officer	03-Aug-21	31-Jul-23	In progress			27/09/19: SS prepared draft checklist (16/08/19); locations need to be added; created carbon copy book/record documentation for each site (1xDDO sewer, 1xDDO water, 1xCLH water, 1xCLH sewer, 1xMDN water, 1x8DN water, 1x8DN sewer?) - check with supervisors what is practical 13/12/19: SS to add remaining locations and check with Supervisors S28/2020. Register still being finalised, Supervisors to review once finalised. 24/11/20: Technical Officer position vacant since July 2020, hence no progress, however item is listed on site maintenance whiteboards 3/8/21: Tech officer to develop carbon copy books for weekly checks in liaison with Supervisor	cations and
339 All	Develop system wide SOPs *Formally document any procedure related to existing control measures identified in the risk assessment that are not currently documented. Involve relevant staff in the development of these procedures.(A85 & 103) *Compile all SOPs into an operations manual (A86) Develop SOPs for: *Laboratory water quality sampling and testing (A131) *Scheduled maintenance tasks (A131) *Daily rounds (A131) *Daily rounds (A131) *Plant operations (A131)batching and dosing (A104) *Iffler maintenance (A108) *Idistribution failures such as main breaks, sufficient flushing, cleaning of tools (A108) *notification procedure for mains breaks (A109), closing household property meters prior to recommissioning mains (A110) *Monitor the sedimentation ponds daily for contamination sources such as dead animals(A216) *Consider sampling and testing program following mains repairs -SOP to be developed for pipe break repairs (and include monitoring) (A99) DWMS documentation: *Ensure all operational procedures are documented and referenced in the DWMS document register (A117)		30 July 2019 Improvement Plan review meeting	A15	30-Jul-19	Supervisors	03-Aug-21	31-Jul-23	In progress			24/11/20: AM to request quote from CWT for development of (selected/prioritised) outstanding procedures 15/3/21: this item has now also become part of WW Acition Plan (employee engagement survey) 18/8/21: Supervisor/s to follow up with consultant (Peter Mosse) 48/8/21: Supervisor/s to follow up with consultant (Peter Mosse)	sting SOPs of required firequired fing those to be y Hunter H20). ities and to be g to be used to iired
340 All Docume	nt That WSC investigate and implement a formalised preventative maintenance program for all the WTP, reticulation and reservoir assets. Including maintenance schedules (Action 168 and 172) identify critical equipment and develop procedures to maintain, repair and replace equipment as necessary	4.4 Equipment Capabil and Maintenance		A16	A	Medium			In progress			Operation and maintenance schedules to be prepared by HunterH20 as part of NSW Health DWMS project. 13/12/19: Confirmed that maintenance schedules for WTP are to be undertaken as part of Hunter H20 NSW Health project. Will follow fluoridation project.	Consultant

n s step	ADWG No. ADWG Element	Source	Haz ID / Source number	Date added	Priority	Action Owner	Date reviewed	Due date (revised)		Status	Comments	Comments 29/08/18	Comments 1/3/19	Comments 27/6/19 & 30/7/2019 & 27/8/2019; 27/09/2019; 13/12/19; 28/2/20; 24/04/2020; 24/7/20; Short term actions require
All All Document tation / Review and finalise ERP in DWMS Implementation Report (2016)(A232) * Testablish a rapid communication system to deal with unexpected events (A138 & 223) * Train relevant staff in these procedures (rapid communication incident response) and maintain a record of training. (A139) * Define communication protocols with the involvement of relevant agencies and include in the protocols a contact list of relevant agencies and businesses and their relevant key people. (A225) * Identify an appropriate person to handle all incident and emergency communications and ensure they are appropriately trained (A229) * Develop a process for documenting and reporting of an incident or emergency. (A235) *Employees should be trained and protocols regularly tested in the emergency response plans. The requirement for this should be included in the ERP. (A236) *Develop a process for investigation following incidents and emergencies and document this process. Include in this process a mechanism for revision of any emergency protocols, where an investigation demonstrates it is required. (A234) *Identify possible water quality related incidents and emergency scenarios (the risk assessment should be used as a basis) and document these potential scenarios in an incident and Emergency Response Plan. Document procedures and response plans to address these incidents (can refer to guideline protocols from NSW Health as provided in the DWMS). Add to the ERP particular processes that are required to address severe hazard / emergency scenarios, such as algal blooms, fuel spills, bushfire etc. The development of these protocols should involve relevant agencies. (A233) *Reference dialysis process in ERP (A228)224) **Undertake an exercise of the incident response plan with PHU following finalisation of ERP (A232)		Febray and July 2020 review meetin (compiled action)	ng	Feb-202	High	Manager Warrumbu gle Water	in 03-Aug	⊦21 31-Jul	23	In progress				28/2/20: Confirmed that development of ERP is to be undertaken as part of Hunter H20 NSW Health project. Actions 8, 138, 139. 223, 225, 228, 232, 233, 234, 235 closed and are now covered under this action. Progress delayed (prioritised filter inspection) 24/17/20: added actions 139, 236 and 342 to this item; Also refer to Action 224/229 (dialysis list/notification procedure; low priority) 3/8/21: IRPs developed in draft by HH2O in Oct-2020; mock events scheduled for 24/25 August 2021
343 All Development of document to undertake regular reservoir inspections: * Consider a routine reservoir inspection (checking locks etc.), A106 *develop reservoir SOP (specific to individual reservoir requirements (A334 & 107) *develop reservoir inspection checklists for the operators (A310) *Train operators in reservoir inspections (A310) *Develop regular (weekly/monthy/annual) reservoir integrity inspection and reporting program (A273) * Assess compliance regarding reservoir access with Australian Standards and common sense (A84)		Febray 2020 review meetin (compiled action)		28-Feb-2	High	Supervisor Treatment	03-Aug	-21 31-Jul	23	In progress				28/2/20: New action created to compile a number of related actions (A334, 107, 310, 273, 84) Visuals inspections are currently recorded in diaries. Engaging contractor (WEAKS) to develop reservoir integrity checklist to undertake inspections. Including assessing WHS issues that are limiting inspections currently. 24/720: WEARS to redevelop (got lost) 24/11/20: reminded WEARS 3/8/21: checklists still outstanding from WEARS