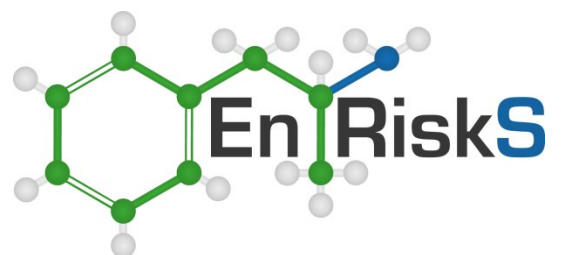
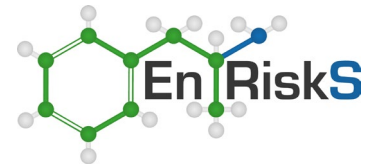


Temora Hospital redevelopment: Human health and ecological risk assessment

Prepared for: Capital Insight and NSW Health Infrastructure

17 October 2024





Document History and Status

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It is prepared in accordance with the scope of work and for the purpose outlined in **Section 1** of this report.

The methodology adopted, and sources of information used are outlined in this report. Environmental Risk Sciences Pty Ltd has made no independent verification of this information beyond the agreed scope of works and assumes no responsibility for any inaccuracies or omissions. No indications were found that information contained in the reports provided for use in this assessment was false.

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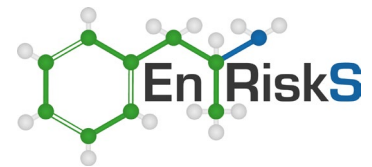
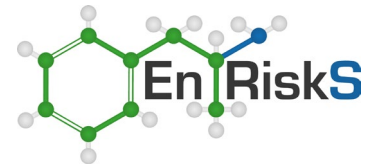


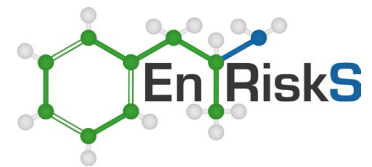
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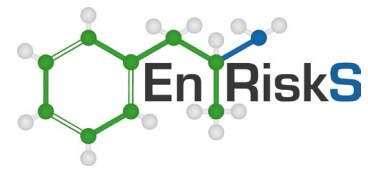
Appendices:

- Appendix A Site soil monitoring data
- Appendix B Site-specific ecological investigation levels
- Appendix C Toxicity summary for benzo(a)pyrene
- Appendix D Site-specific health investigation level calculations



List of abbreviations

ASC NEPM	National Environmental Protection Measure – Assessment of Site Contamination
BaP	benzo(a)pyrene
bgl	below ground level
BTEX	benzene, toluene, ethylbenzene and xylenes
CCME	Canadian Council of Ministers of the Environment
CEC	cation exchange capacity
CLM Act	Contaminated Land Management Act
CRC CARE	Cooperative Research Centre for Contamination Assessment and Remediation of the Environment
CSM	conceptual site model
DSI	detailed site investigation
EIL	ecological investigation level
enRiskS	Environmental Risk Sciences Pty Ltd
ESL	ecological screening level
FCF	fibre cement fragments
HHERA	human health and ecological risk assessment
HI	Health Infrastructure
HIL	health investigation level
HSL	health screening level
LOR	limit of Reporting
MLHD	Murrumbidgee Local Health District
NEPC	National Environment Protection Council
NL	not limiting
NSW	New South Wales
OCP	organochlorine pesticides
OPP	organophosphate pesticides
PAH	polycyclic aromatic hydrocarbons
PCB	polychlorinated biphenyl
PSI	preliminary site investigation
RAP	remedial action plan
SEPP	State Environmental Planning Policy
SQG	soil quality guideline
TCLP	toxicity characteristic leaching procedure
TEF	toxicity equivalence factor
TEQ	toxic equivalence
TRH	total recoverable hydrocarbons
TRV	toxicity reference value
USEPA	United States Environmental Protection Agency
WHO	World Health Organisation



Executive Summary

Environmental Risk Sciences Pty Ltd (enRiskS) has been engaged by Capital Insight and New South Wales (NSW) Health Infrastructure (HI) to conduct a human health and ecological risk assessment (HHERA) in relation to the presence of contamination in soil at Temora Hospital, 169-189 Loftus Street, Temora, NSW (the 'site'). The site is currently proposed for redevelopment, which is in the detailed design phase. This HHERA was undertaken to support town planning activities for the Temora Hospital and to determine if a remedial action plan (RAP) is needed for the site to address potential risk issues related to contaminants in the soil.

A range of potential sources of contamination were identified at the site as part of a preliminary site investigation (PSI) and a detailed site investigation (DSI). These investigations were conducted to inform the redevelopment work. The potential sources identified relate to current and historical activities at the site, and the use of imported fill material.

The PSI and DSI included analysis of soil samples from the site for a range of chemicals. The concentrations of most chemicals were below the limit of reporting (LOR). However, some heavy metals, polycyclic aromatic hydrocarbons (PAHs) and petroleum hydrocarbons were reported in the soils. It is likely that some of these chemicals (e.g. heavy metals) are naturally occurring in the soil. Others may be associated with the potential sources of contamination identified for the site. The purpose of the HHERA was to determine if the concentrations of chemicals reported in the soil pose an unacceptable risk to human health or ecosystems at the site.

Based on the review of available information for the site, the following groups of people were identified as potentially being present at the site:

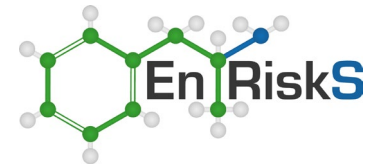
- construction workers during the redevelopment
- intrusive maintenance workers following the redevelopment
- site gardeners and landscapers
- hospital staff during and after the redevelopment
- patients at the hospital and visitors (including volunteer workers) who may walk in the hospital grounds during and after the redevelopment
- the local community (including residents at the adjacent residential care facility) who may take walks through the hospital grounds during and after the redevelopment.

The HHERA assessed potential risks to all of the groups listed above. This focused on potential direct exposure to chemicals in the soil, as well as exposure to vapours for volatile chemicals (where relevant). The HHERA also assessed potential ecological risks for terrestrial organisms (e.g. vegetation, soil invertebrates and microorganisms).

Based on the available data for the site, and considering the uncertainties identified, the following was concluded from the HHERA:

- human health risks are low and acceptable for all groups listed above
- ecological risks are low and acceptable.

Based on the data provided and the outcomes of the HHERA, risk management actions and a RAP are not warranted for the site.



Section 1. Background

1.1 Introduction

Environmental Risk Sciences Pty Ltd (enRiskS) has been engaged by Capital Insight and New South Wales (NSW) Health Infrastructure (HI) to conduct a human health and ecological risk assessment (HHERA) in relation to the presence of contamination in soil at Temora Hospital, 169-189 Loftus Street, Temora NSW (the 'site'). Temora Hospital is part of the Murrumbidgee Local Health District (MLHD) providing a range of services, including, emergency department, maternity, palliative care, an operating theatre and staff accommodation.

The site is currently proposed for redevelopment, which is in the detailed design phase. No specific detailed plans are available for the proposed redevelopment at this stage. However, it is understood that the redevelopment will include an extension to the current buildings and additional outdoor/uncovered car parking areas. The redeveloped hospital will provide a range of new clinical and non-clinical facilities to support the capacity issues and existing infrastructure deficiencies at the site. This HHERA was undertaken to support town planning activities for the Temora Hospital and to determine if a remedial action plan (RAP) is needed for the site to address potential risk issues related to contaminants in the soil.

1.2 Objectives

The objectives of the HHERA presented in this report were to:

- review the available soil data for the site
- use the available data to undertake a site-specific HHERA based on the use of the site as a hospital, including a tier 1 (screening level assessment) and tier 2 (detailed assessment)
- where relevant, confirm if remediation is needed at the site and/or provide risk management recommendations (if required based on the outcomes of the HHERA).

The HHERA addresses potential risks from contact with soil on the site based on the available data. The potential off-site risks and risks from exposure to other environmental media were not considered. The HHERA considers the current and proposed future land use of the site as a hospital and does not consider any potential changes to land use.

1.3 Methodology

The approach taken for the HHERA was in accordance with relevant National protocols/guidelines, including:

- enHealth Environmental Health Risk Assessment, Guidelines for Assessing Human Health Risks from Environmental Hazards (enHealth 2012a)
- enHealth Australian Exposure Factor Guide (enHealth 2012b)
- National Environmental Protection Measure – Assessment of Site Contamination (ASC NEPM) including:
 - Schedule B1 Investigation Levels for Soil and Groundwater (NEPC 1999 amended 2013a)
 - Schedule B4 Guideline on Health Risk Assessment Methodology (NEPC 1999 amended 2013b)



- Schedule B5 Guideline on Ecological Risk Assessment (NEPC 1999 amended 2013c)
- Schedule B7 Guideline on Health-Based Investigation Levels (NEPC 1999 amended 2013d)
- Toolbox Note – Key principles for the remediation and management of contaminated sites
- Australian and New Zealand Guidelines for Fresh and Marine Water Quality (ANZG 2018).

Where required, additional guidance was obtained from relevant Australian and International sources, such as that available from the United States Environmental Protection Agency (USEPA) and the World Health Organisation (WHO) consistent with current industry best practice.

The overall approach adopted for this HHERA is outlined in **Figure 1** (adapted from enHealth 2012a), and is addressed in the following sections:

- summary of the available site information and data relevant to the development of a conceptual site model (CSM) (**Section 2**)
- screening assessment (human health and ecological) for chemicals reported in soil at the site to identify if any chemicals require more detailed assessment (**Section 3**)
- detailed assessment for key chemicals identified in the screening assessment (**Section 4**)
- conclusions in relation to risks associated with exposure to chemicals in soil, with consideration of the uncertainties (**Section 5**).

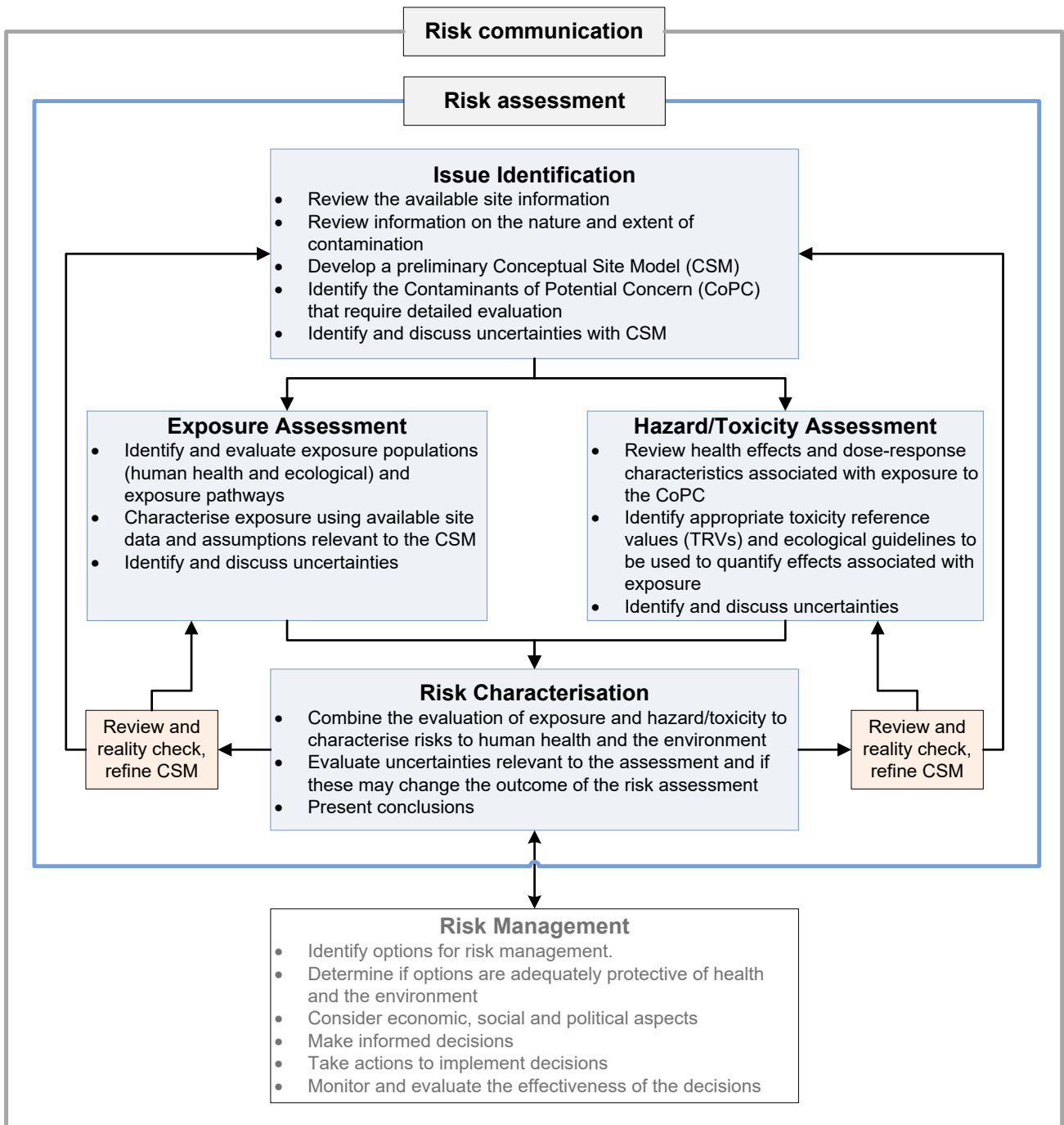


Figure 1: Risk assessment process as adapted from enHealth (2012a)

1.4 Regulatory framework

It is a requirement in NSW that, where land is to be redeveloped, an assessment be undertaken to determine if the land is contaminated due to historical activities. This assessment is used to determine if the site is suitable for the proposed use.

This process is outlined in a number of regulatory instruments including:

- Contaminated Land Management Act (1997) (the 'CLM Act') (NSW Government 1997)
- State Environmental Planning Policy (the 'SEPP') (Resilience and Hazards) (2021) (NSW Government 2021)
- Managing Land Contamination – Planning Guidelines (1998) (NSW Planning 1998).

The CLM Act covers situations where contamination is likely to be significant. Whereas the SEPP and the Planning Guidelines are relevant in other situations where redevelopment is proposed but the site history does not indicate contamination is likely to be significant.

All of these instruments require site investigation to assess the potential for contamination. National guidance is available for the process of site investigation – the National Environment Protection (Assessment of Site Contamination) Measure (the 'ASC NEPM')¹. This guidance outlines how to undertake a site investigation and provides national conservative screening guidelines. These guidelines represent soil concentrations for common contaminants that do not require any further action or investigation (i.e. site is suitable).

There are a number of situations where further work is required including:

- not all chemicals that could be present at a site have national guidelines
- chemicals may be present in groundwater or soil vapour
- chemicals may be present in soil at concentrations above the national guidelines in the ASC NEPM.

In the situations listed above, the ASC NEPM provides guidance on how to undertake a more detailed evaluation of the site, i.e. a site-specific human health risk assessment. Such assessments look at the specifics of a site including the proposed purpose of the site, what sort of buildings will be constructed and how likely it is that people or organism may come into contact with soil, groundwater or soil vapour. This HHERA uses data from the preliminary and detailed site investigations at the Temora Hospital to undertake a site-specific risk assessment consistent with guidance in the ASC NEPM.

¹ <https://www.nepc.gov.au/nepms/assessment-site-contamination>

Section 2. Review of available site information

2.1 General

This section provides a summary of the available site information relevant to the characterisation of contamination at the site. This information was used to develop a conceptual site model (CSM) relevant to the HHERA.

The information in this section is based on a review of the following site investigation reports provided by Capital Insight:

- JK Environments (2023a) Preliminary (Stage 1) Site Investigation for Proposed Alterations and Additions at Temora Hospital, 169-189 Loftus Street, Temora, NSW. Report dated 8 June 2023 (the 'PSI')
- JK Environments (2023b) Sampling, Analysis and Quality Plan for Detailed (Stage 2) Site Investigations (DSI) at Temora Hospital, 169-189 Loftus Street, Temora, NSW. Report dated 17 August 2023 (the 'SAQP')
- JK Environments (2023c) Detailed Site Investigation for the Proposed Redevelopment at Temora Hospital, 169-189 Loftus Street, Temora, NSW. Report dated 30 October 2023 (the 'DSI').

2.2 Site description

2.2.1 Site details

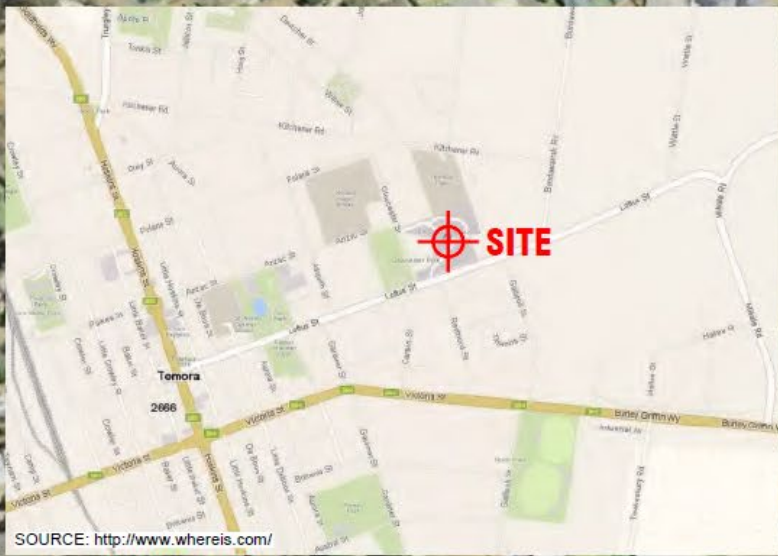
The site is located approximately 4 km southeast of Lake Centenary (a man-made lake across Trigalong Creek) and is bound by Loftus Street to the south and Gloucester Street to the west (**Figure 2**). The site currently operates as a hospital and is in a predominately residential and rural area of Temora. The Temora Hospital currently provides the following services:

- 28 beds
- emergency department
- maternity
- palliative care
- operating theatre (1)
- staff accommodation.

The site identification details are provided in **Table 1**.

Table 1: Site identification details (adapted from JK Environments 2023c)

Attribute	Description
Current site owner	Health Administration Corporation
Site address	16-189 Loftus Street, Temora, NSW
Lot and Deposited Plan (DP)	Lot 2, DP 582392
Current land use	Hospital
Proposed land use	Hospital
Local government area	Temora Shire Council
Current zoning	SP2: Infrastructure
Site area	Approximately 31,770 m ²



AERIAL IMAGE SOURCE: MAPS.AU.NEARMAP.COM

Figure 2: Site location (sourced from JK Environments 2023c)

This plan should be read in conjunction with the Environmental report.

JKEnvironments



The site currently comprises buildings which are mainly located in the northern and central portion of the site, including (JK Environments 2023c):

- the main hospital building, which is a three-storey building of brick and fibre-cement construction
- the nurse's accommodation building, which is a two-storey building of brick and metal construction
- several single storey buildings (ancillary services, maintenance, workshop) typically of brick and metal construction.

Other current site features include paved driveways for vehicle access, on-grade car parks, footpaths, gardens and grassed areas with medium to large trees and shrubs. The DSI reported that sensitive environments such as wetlands, ponds, creeks or extensive areas of native vegetation are not located on the site or in the immediate surrounds (JK Environments 2023c).

Detailed design plans for the redevelopment of the site have not been provided. However, it is understood that redevelopment will include an extension to the current main building and new car parking areas as shown in **Figure 3**. It is also understood that there will be no on-site staff accommodation during or at the completion of the redevelopment.

The land uses in the areas surrounding the site include (JK Environments 2023c):

- north – low density residential, the Temora campus of TAFE NSW and a residential care facility (Whiddon Group)
- south – Loftus Street and low density residential
- east – utilities infrastructure (transmission tower, substation, pumping station and reservoirs) with vacant agricultural land (possibly grazing) beyond
- west – residential care facility (Whiddon Group) with Gloucester Street beyond.

The PSI included details of the site history, which indicated that the site was used for residential purposes and possibly agriculture (e.g. grazing) until the 1930s when the Temora Hospital was constructed. The site has been operating as a hospital since 1940 (JK Environments 2023a).

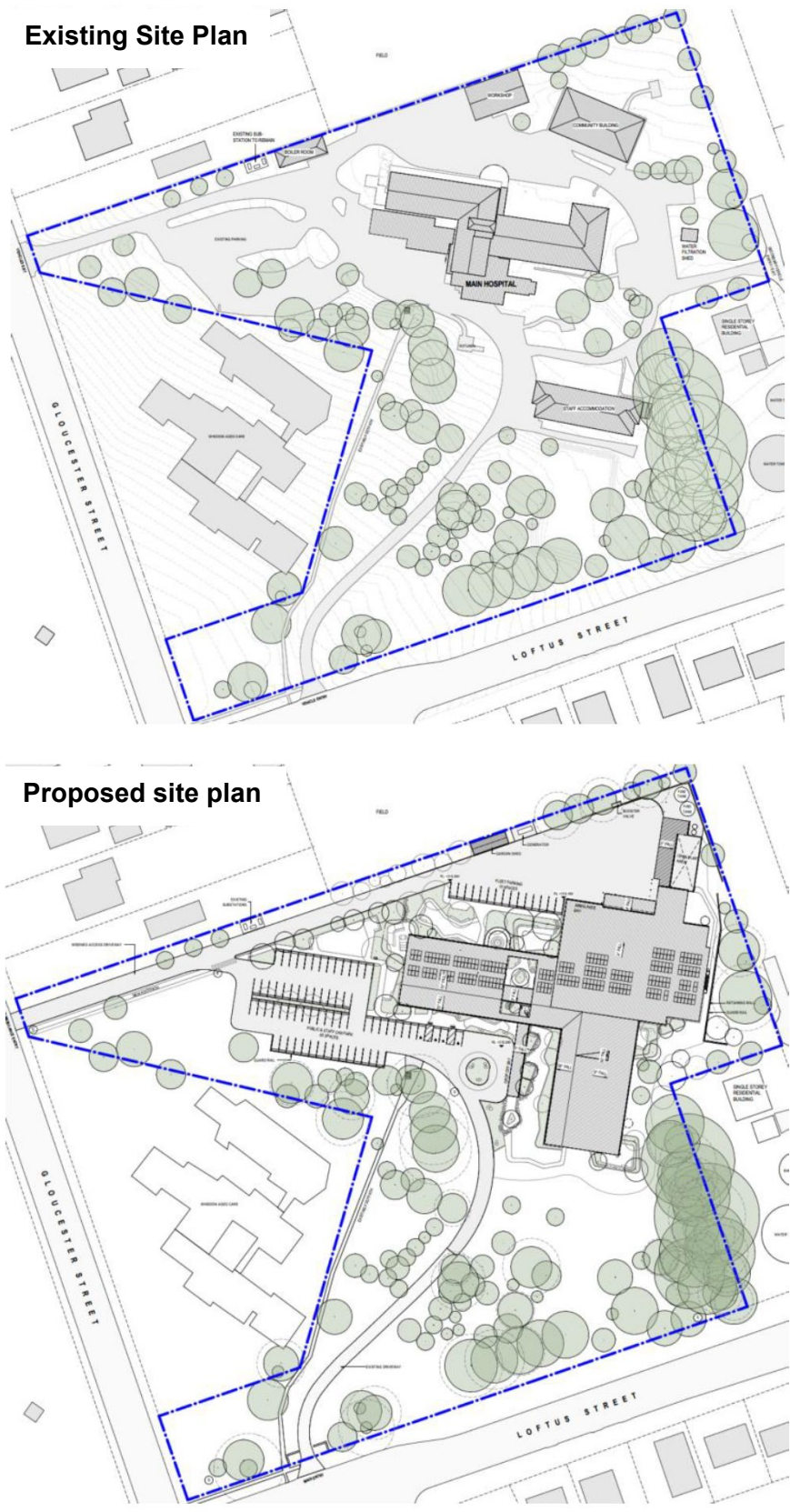


Figure 3: Existing site plan and proposed site plan (provided by Capital Insight)

2.3 Environmental setting

This section summarises the environmental setting at and around the site. The information is sourced from the DSI (JK Environments 2023c) unless otherwise stated.

2.3.1 Climate

Key meteorology data for the weather station at the Temora Airport sourced for the DSI indicated the following (JK Environments 2023c):

- the highest mean rainfall occurred in November, with a total of 58.4 mm
- the lowest mean rainfall occurred in May, with a total of 32.5 mm
- in the week leading up to the fieldwork undertaken for the DSI, less than 2 mm of rainfall was recorded.

2.3.2 Topography

The regional topography is characterised by gently undulating terrain. The site is located towards the crest of a gently undulating slope which grades down towards the southwest at approximately 5°. Parts of the site appear to have been levelled to account for the slope and accommodate the existing site features (JK Environments 2023a).

2.3.3 Regional geology

Regional geology information presented in the PSI and summarised in the DSI indicated that the site is underlain by Temora Volcanics comprising andesite, trachyandesite, latite and basaltic andesite, though may be obscured by quaternary aged alluvial soils. The alluvial soils are likely present on the lower slopes and toe of the hillside and not within the site boundaries. The PSI encountered shallow fill soils and residual silty clay overlying andesite bedrock at the site.

2.3.4 Acid sulfate soils

The PSI indicated that the site is not located in an acid sulfate soil risk area according to the risk maps prepared by the Department of Land and Water Conservation (JK Environments (2023a).

2.3.5 Hydrogeology

The DSI summarised the hydrogeology information presented in the PSI as follows:

- the subsurface conditions at the site consist of relatively low permeability (residual) soils overlying shallow bedrock. The potential for viable groundwater abstraction and use of groundwater under these conditions is considered to be low. There is also a reticulated water supply in the area and consumption of groundwater is not expected to occur
- the nearest registered bore is located 330 m west of the site and is registered for recreational purposes
- considering the local topography and surrounding land features, groundwater is anticipated to flow towards the northwest.

The depth to groundwater at the site was not reported in either the PSI or DSI. However, both investigations noted that groundwater was not encountered in the soil boreholes and test pits during the investigations (up to approximately 1.5 m below ground level (bgl) at some locations). There are

no groundwater wells on the site, and it is understood that groundwater will not be used as part of the construction/redevelopment.

2.3.6 Surface water bodies

The PSI reports that there are no surface water bodies in the immediate vicinity of the site. The closest surface water body is an unnamed dam located upgradient from the site approximately 320 m to the northeast. The nearest downgradient surface water body is Trigalong Creek located approximately 3.8 km west of the site. This creek turns into Lake Centenary approximately 4 km northwest of the site. Based on the distance from the site, these water bodies are not expected to be impacted by water migrating from the site (JK Environments 2023a).

2.4 Potential sources of contamination

The DSI provided a list of potential contaminating sources and areas of environmental concern (AEC) for the site (summarised in **Table 2**).

Table 2: Potential (or known) contamination sources and areas of environmental concern (AEC) for the site (adapted from JK Environments 2023c)

Source/AEC	Potential contaminants
<u>Fill material</u> The site has been historically filled to achieve the existing levels and this fill material may have been imported from a range of sources. The PSI identified filling to depths of approximately 0.2 m below bgl to 1.1 m bgl. The fill contained inclusions of demolition rubble, including metal fragments, fibre cement fragments (FCF) and asbestos containing material (ACM).	Heavy metals Petroleum hydrocarbons Polycyclic aromatic hydrocarbons (PAHs) Organochlorine pesticides (OCPs) Organophosphate pesticides (OPPs) Polychlorinated biphenyl (PCBs) Asbestos
<u>Maintenance workshop</u> The site includes a maintenance workshop. It is possible that leaks/spills and/or releases of oil, solvents and fluids may have occurred.	Heavy metals Petroleum hydrocarbons PAHs
<u>On-site generator</u> A back-up generator is located to the west of the main hospital building. Minor leaks and/or spills of fuels/oils may have occurred during maintenance or use.	Petroleum hydrocarbons PAHs
<u>Historical agricultural use</u> Prior to 1938, the site was likely used for agricultural purposes (e.g. grazing). This may have resulted in contamination across the site via use of machinery, application of pesticides and building/demolition of various structures. Irrigation pipes made from asbestos may also be associated with this source.	Heavy metals Petroleum hydrocarbons PAHs OCPs OPPs Asbestos
<u>Use of pesticides</u> Pesticides have been used beneath the buildings and/or around the site.	Heavy metals OCPs
<u>Hazardous building materials</u> Hazardous building materials may be present as a result of former building and demolition activities. These materials have also been identified by various HAZMAT surveys within the existing buildings/structures on the site.	Asbestos Lead PCBs
<u>On-site incinerator of hospital waste</u> The site has been used as a hospital since at least 1940. An incinerator is located within the boiler room. Waste generated from the incinerator could have been disposed of on-site during the earlier years of operations, although there is no evidence identified to confirm this.	Heavy metals PAHs

2.5 Nature and extent of contamination

The investigations undertaken at the site to date have focused on soil. As part of the PSI (JK Environments 2023a), soil samples were collected from 12 locations at the site (BH1 to BH12 and TP13 to TP16) (**Figure 4**) between 2 and 5 May 2023. This sampling program was designed as a preliminary intrusive investigation. Soil samples were collected from the fill and natural profiles based on field observations at a range of depths up to 1.5 m bgl. Soil samples were analysed for heavy metals, total recoverable hydrocarbons (TRHs), benzene, toluene, ethylbenzene and xylenes (BTEX), PAHs and asbestos (noting that not all samples were analysed for all chemicals).

For the DSI (JK Environments 2023c), soil samples were collected from 63 locations at the site (BH/TP101 to BH/TP163) (**Figure 4**) between 6 and 13 September 2023. The sampling locations were based on a grid pattern with sampling locations judgementally selected from within each grid. Surface soil samples were collected from each sampling location, with depth samples collected from a sub-set of locations (up to 1.4 m bgl dependant on the depth of the borehole or test pit). Soil samples were analysed for heavy metals, PAHs, OCPs, OPPs, PCBs, TRHs, BTEX and asbestos (noting that not all samples were analysed for all chemicals).

The chemicals reported in soil samples above the limit of reporting (LOR) in at least one sample from the PSI or DSI are shown in **Table 3** (all data in **Appendix A**). This included heavy metals, PAHs and petroleum hydrocarbons (measured as total recoverable hydrocarbons, TRHs²). The depth of the maximum concentrations ranged across the site. However, in many cases, the maximum concentrations were reported at or near the soil surface. This has implications for potential exposure as people are most likely to be exposed to surface soil rather than soil at depth.

The concentrations of OCPs, OPPs, PCBs and BTEX were below the LOR in all samples that were analysed for these chemicals.

Asbestos was identified in fibre cement fragments (FCF) during the PSI and DSI. The asbestos results are not considered in this HHERA as it is understood that this aspect is being managed separately through a site Asbestos Management Plan.

The toxicity characteristic leaching procedure (TCLP) was undertaken on a sub-set of soil samples during the PSI and DSI. This was done to assist with the soil waste classification and involved analysis of lead and PAHs. TCLP was only undertaken on a sub-set of soils based on concentration, consistent with the Waste Classification Guidelines (NSW EPA 2014). TCLP uses acidic pH to mimic landfill leachate which will overpredict metal leaching in the natural soil environment (i.e. more metals will leach at acidic pH compared to neutral pH). Even under these leaching conditions, the maximum concentrations of lead and PAHs in the TCLP leachates were relatively low at 0.3 mg/L and 0.0086 mg/L, respectively. This indicates a low potential for these chemicals to leach from the soil.

² TRHs are reported for four different fractions grouped by the number of carbons. The fractions are referred to as F1, F2, F3 and F4, which refer to C6-C19 (excluding BTEX), >C10-C16 (excluding naphthalene), >C16-C34 and >C34-C40, respectively. TRH F1 and TRH F2 are considered volatile. Whereas TRH F3 and TRH F4 are not volatile.



LEGEND

- - - APPROXIMATE SITE BOUNDARY
 - BH(Fill Depth)
 - TP(Fill Depth)
 - BH154
 - TP101
 - INACCESSIBLE AREA
- BOREHOLE LOCATION, NUMBER AND DEPTH OF FILL (m) (PSI, 2023)
 - TEST PIT LOCATION, NUMBER AND DEPTH OF FILL (m) (PSI, 2023)
 - BOREHOLE LOCATION, NUMBER AND DEPTH OF FILL (m) (JKE, DSI)
 - TEST PIT LOCATION, NUMBER AND DEPTH OF FILL (m) (JKE, DSI)

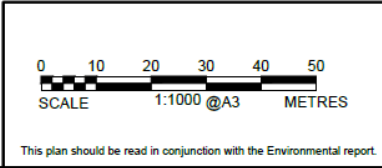


Figure 4: Soil sampling locations from the PSI and DSI (sourced from JK Environments 2023c)



Table 3: Summary of chemical concentrations in soil from previous site investigations (only chemicals with at least one sample above the limit of reporting are listed)

Chemical	Preliminary site investigation ¹				Detailed site investigation ²			
	No. of samples	Minimum conc. (mg/kg)	Maximum conc. (mg/kg)	Location (depth m) of maximum	No. of samples	Minimum conc. (mg/kg)	Maximum conc. (mg/kg)	Location (depth m) of maximum
Heavy metals								
Arsenic	30	<4	15	TP14 (0-0.1)	89	<4	23	TP115 (0-0.1)
Cadmium	30	<0.4	<0.4	na	89	<0.4	0.4	TP133 (0-0.1)
Chromium ³	30	10	91	BH3 (0.2-0.3)	89	11	140	TP123 (0-0.1)
Copper	30	12	490	TP13 (0.5-0.6)	89	4	500	TP146 (0.3-0.4)
Lead	30	1	170	TP14 dup (0-0.1)	90	3	470	TP131 (0-0.1)
Mercury	30	<0.1	0.7	TP15 (1.3-1.5)	89	<0.1	0.5	TP115 (0-0.1)
Nickel	30	2	18	BH2 (0.3-0.5)	89	1	30	TP123 (0-0.1)
Zinc	30	7	140	TP14 dup (0-0.1)	89	3	400	TP139 (0.2-0.3)
Polycyclic aromatic hydrocarbons (PAHs)								
Total PAHs ⁴	30	<0.05	85	BH3 (0.3-0.5)	89	<0.05	200	TP155 (0.2-0.5)
Carcinogenic PAHs ⁵	30	<0.5	7.7	BH3 (0.3-0.5)	89	<0.5	24	TP153 (0-0.1)
Benzo(a)pyrene	30	<0.05	5.4	BH3 (0.3-0.5)	89	<0.05	15	TP153 (0-0.1)
Naphthalene	30	<1	2	BH3 (0.3-0.5)	89	<1	<1	na
Total recoverable hydrocarbons (TRHs)								
TRH F1 (C6-C10)	30	<25	<25	na	89	<25	71	TP116 dup (0-0.05)
TRH F2 (>C10-C16)	30	<50	<50	na	89	<50	210	TP144 (0-0.1)
TRH F3 (>C16-C34)	30	<100	320	BH3 (0.3-0.5)	89	<100	1,100	TP144 (0-0.1)
TRH F4 (>C34-C40)	30	<100	230	BH3 (0-0.1)	89	<100	440	TP144 (0-0.1)

Notes:

1 = JK Environments (2023a)

2 = JK Environments (2023c)

3 = total chromium concentration (CrIII+CrVI)

4 = total PAH concentration is the sum of the 16 PAHs most commonly reported for contaminated sites (WHO 1998)

5 = concentration of the eight carcinogen PAHs as the benzo(a)pyrene toxic equivalence (BaP TEQ). The BaP TEQ is calculated by multiplying the concentration of each carcinogen PAH in the sample by its toxic equivalency factor (TEF)

na = not available as all concentrations were <LOR

2.6 Conceptual site model

A key aspect of a risk assessment is the development of a suitable CSM specific to the site. The CSM describes the source(s) of contamination, the pathway(s) those contaminants may migrate through different environmental media and the populations (human or ecological) that may be exposed to the contamination.

The site is currently used as a hospital and will continue to be used as a hospital following the redevelopment. This HHERA considers potential exposure to chemicals during the redevelopment and following redevelopment. The CSM described in this section is relevant to this land use and does not consider any potential changes to land use at the site.

A range of potential sources of contamination were identified at the site as part of the PSI and DSI, which are summarised in **Section 2.4**. Soil sampling investigations undertaken as part of the PSI and DSI identified a range of chemicals in soil at the site, including, heavy metals, PAHs and petroleum hydrocarbons. Some of these chemicals, particularly heavy metals, are naturally occurring in soils and all soils will contain some level of naturally occurring heavy metals. Other chemicals may be present at the site from current or historical activities at the site, or the importation and use of fill material.

Based on the proposed site plan (**Figure 3**), the redevelopment will include extensions to the current main building at the site and car parking areas. This will reduce the potential exposure that people or ecological organisms will have to the soil. However, there will still be large areas of the site that are grassed and have other vegetation (trees and shrubs). Therefore, there is still the potential for exposure. There are walking paths at the site, which will be retained, and it is likely that most people moving through the site will remain on the walking paths. It is possible that at times, some people may sit on the grassed areas, for example, hospital staff during lunch breaks.

The following groups of people may be present on the site and could be exposed to chemicals in the soil:

- construction workers during the redevelopment
- intrusive maintenance workers following the redevelopment
- site gardeners and landscapers
- hospital staff during and after the redevelopment
- patients at the hospital and visitors (including volunteer workers) who may walk in the hospital grounds during and after the redevelopment
- the local community (including residents at the residential care facility) who may take walks through the hospital grounds during and after the redevelopment.

It is understood that while the site currently provides some staff accommodation, no staff accommodation will occur on the site during or after the redevelopment.

In the outdoor areas of the site, people may have direct contact with the soil, which could lead to dermal exposure to soil contaminants and incidental ingestion of soil. There is also the possibility of inhalation of dust generated from the soil. Where volatile chemicals are present (e.g. TRH F1 and TRH F2), there is also the potential for inhalation of vapours. Where people are working in buildings at the site, there is the potential for volatile chemicals in soil (where present) to migrate into the



indoor air where people could be exposed. All of these potential exposures to people at the site have been considered in this HHERA.

The ecological organisms that may be exposed to the soil contamination include vegetation, soil invertebrates (e.g. earthworms), soil microorganisms (e.g. nitrifying soil bacteria) and transient animals (e.g. birds and mammals). Exposure to these organisms will only occur in areas without buildings, carparks or driveways.

Groundwater at the site has not been encountered in any of the site soil investigations. This has included soil test pits and bore holes up to 1.5 m bgl. Exposure to groundwater is considered unlikely to be relevant for this CSM or HHERA based on the following:

- many of the chemicals reported in the soil are likely to show low mobility with water due to their chemical properties (e.g. PAHs are known to bind very strongly to soils and not migrate considerable distances with water)
- there are no groundwater wells on the site, and it is understood that groundwater will not be used as part of the construction/redevelopment
- relatively low permeability soils are present in the subsurface at the site (and likely in the broader regional area) and viable groundwater abstraction and use under these conditions is considered to be low (JK Environments 2023a)
- the nearest registered groundwater bore is located 330 m west of the site and is registered for recreational purposes (JK Environments 2023a)
- there are no surface water bodies in the vicinity of the site, which means groundwater at the site is unlikely to discharge into surface water.

Based on the list above, potential exposure to site contaminants via the groundwater is an incomplete pathway. Therefore, groundwater has not been considered in this HHERA.

Section 3. Screening level assessment

3.1 General

This section presents a screening level (tier 1) assessment of the soil data for the site. The purpose of this assessment is to identify if chemicals reported in soil at the site are present at concentrations above national guidelines. If concentrations are above national guidelines, this does not necessarily mean that there is a risk to human health or ecosystem. Exceedances of guideline values warrant further site-specific assessment (i.e. further assessment specific to the land use for the proposed redevelopment of the Temora Hospital). If chemicals are present at concentrations below national guidelines, no further assessment is required, and risks are considered acceptable based on Australian guidance.

3.2 Screening assessment for soil chemical concentrations

The maximum concentrations of chemicals reported in soil from the PSI and DSI (**Section 2.5**) were compared to risk-based screening level guidelines in national guidance documents for the protection of human health and ecosystems. The list of chemicals included in this screening assessment were those reported above the LOR in at least one sample as part of the PSI or DSI (see **Table 3**). Where guidelines were not available from Australian sources, international guidelines were adopted for the screening assessment.

3.2.1 Human health screening assessment

The human health screening level assessment is summarised in **Table 4**. The guidelines adopted for this assessment were as follows:

- **ASC NEPM health investigation levels (HILs) (NEPC 1999 amended 2013a)** – the ACS NEPM (1999) provides risk based health investigation levels (HILs) for selected organic and inorganic chemicals in soils. Different levels are provided for a variety of generic exposure settings including residential (low and high density), public open space and commercial/industrial land uses. The HILs were developed to be protective of human health and do not consider potential ecological concerns. The maximum soil concentrations at the site were compared to the commercial/industrial HILs (HIL-D). These values assume that an adult is at the site 240 days/yr (i.e. working days of the year), is outside on the site for 1 hour each of those days, where they incidentally ingest soils (25 mg/day) and get soil on their skin. These assumptions are considered to be conservative for how most people will use and have access to the site (i.e. construction/intrusive workers, gardeners, hospital staff, patients and visitors). For an additional level of conservatism, the maximum concentrations were also compared to the public open space HILs (HIL-C). These HILs are protective of children who may play in an area every day of the year and incidentally ingest soil (50 mg/day) and get soil on their skin. These assumptions are considered conservative for people who may use the hospital grounds for recreational purposes.
- **ASC NEPM health screening levels (HSLs) (NEPC 1999 amended 2013a)** – the ACS NEPM provides risk based health screening levels (HSLs) for vapour intrusion based on soil concentrations. These are available for the same land uses as discussed above for the HILs but only relate to volatile chemicals (e.g. TRH F1 and TRH F2). For residential and commercial/industrial land uses, these relate to potential risks from vapour intrusion into

buildings. For public open space, these relate to potential inhalation risks in outdoor air. Where the soil concentration cannot be high enough to generate a soil vapour concentration that would pose a risk, the HSLs are listed as 'NL', which stands for 'not limiting'. Where these HSLs are relevant (i.e. for volatile chemicals) and are not 'NL', the values for public open space (HSL-C) and commercial/industrial (HSL-D) were adopted for the screening assessment.

- **CRC CARE direct contact HSLs (CRC CARE 2011)** – the Cooperative Research Centre for Contamination Assessment and Remediation of the Environment (CRC CARE) has derived direct contact HSLs for petroleum hydrocarbons. These have been developed for the same generic land uses as the HILs, as well as intrusive maintenance workers. For this screening assessment the CRC CARE direct contact HSLs have been used for public open space (HSL-C) and commercial/industrial (HSL-D). The HSL-D values are all lower than those developed for intrusive maintenance workers and are therefore protective of this group of people at the site.

Table 4: Human health screening assessment for soil at the Temora Hospital

Chemical	Maximum conc. (mg/kg)	Investigation	Location (depth m)	Screening guideline (mg/kg)	
				HIL-C/HSL-C	HIL-D/HSL-D
Heavy metals					
Arsenic	23	DSI	TP115 (0-0.1)	300 ^{N1}	3,000 ^{N2}
Cadmium	0.4	DSI	TP133 (0-0.1)	90 ^{N1}	900 ^{N2}
Chromium	140	DSI	TP123 (0-0.1)	300 ^{N1*}	3,600 ^{N2*}
Copper	500	DSI	TP146 (0.3-0.4)	17,000 ^{N1}	240,000 ^{N2}
Lead	470	DSI	TP131 (0-0.1)	600 ^{N1}	1,500 ^{N2}
Mercury	0.7	PSI	TP15 (1.3-1.5)	80 ^{N1}	730 ^{N2}
Nickel	30	DSI	TP123 (0-0.1)	1,200 ^{N1}	6,000 ^{N2}
Zinc	400	DSI	TP139 (0.2-0.3)	30,000 ^{N1}	400,000 ^{N2}
Polycyclic aromatic hydrocarbons (PAHs)					
Total PAHs	200	DSI	TP155 (0.2-0.5)	300 ^{N1}	4000 ^{N2}
Carcinogenic PAHs	24	DSI	TP153 (0-0.1)	3 ^{N1}	40 ^{N2}
Total recoverable hydrocarbons (TRHs)					
TRH F1 (C6-C10)	71	DSI	TP116 dup (0-0.05)	5,100 ^{C1}	260 ^{N2,V}
TRH F2 (>C10-C16)	210	DSI	TP144 (0-0.1)	3,800 ^{C1}	20,000 ^{C2}
TRH F3 (>C16-C34)	1,100	DSI	TP144 (0-0.1)	5,300 ^{C1}	27,000 ^{C2}
TRH F4 (>C34-C40)	440	DSI	TP144 (0-0.1)	7,400 ^{C1}	38,000 ^{C2}

Notes:

N1 = NEPM HIL C

N2 = NEPM HIL D

V = vapour intrusion

C1 = direct contact HSL-C from CRC CARE (2011)

C2 = direct contact HSL-D from CRC CARE (2011)

* = HILs for chromium are based on hexavalent chromium (CrVI)

Based on the human health screening assessment (**Table 4**), none of the maximum concentrations of any chemicals reported in the soil at the site exceed the commercial/industrial screening criteria. This indicates that the risk posed to construction workers, intrusive maintenance workers, gardeners, hospital staff, patients and visitors are acceptable based on Australian guidance. These do not require further assessment.

The concentrations of all chemicals were also below the public open space screening criteria (HIL-C/HSL-C), with the exception of carcinogenic PAHs. It is noted that the assumptions used to derive

the public open space HILs/HSLs are likely to be highly conservative for how people will use this site. However, the potential risks from carcinogenic PAHs are further assessed in this HHERA.

Where concentrations of chemicals exceed the screening level guidelines, the ASC NEPM provides a statistical test that can be used as the first step in evaluating soil contaminant concentrations. The test requires that the 95UCL concentration (i.e. the 95% upper confidence limit of the mean) be below the relevant guideline values (e.g. HIL or HSL), that the standard deviation be below half of the relevant guideline value and that the concentration in no single sample is above 250% of the relevant guideline value. For this dataset, the maximum concentration of carcinogenic PAHs is 24 mg/kg, which is above 250% of the guideline value (i.e. HIL-C, 3 mg/kg). Based on this, the potential exposure to carcinogenic PAHs for people using the site for recreational purposes is assessed in more detail in **Section 4**.

3.2.2 Ecological screening assessment

The ecological screening level assessment is summarised in **Table 5**. The guidelines adopted for this assessment were as follows:

- **ACS NEPM ecological investigation levels (EILs) (NEPC 1999 amended 2013a)** – the ASC NEPM (1999) provides risk based ecological investigation levels (EILs) for selected metals and organic chemicals in soils. These levels are applicable for assessing potential risks to terrestrial ecosystems and are provided for generic land uses, including, areas of ecological significance, urban residential/public open space and commercial/industrial. For some metals, the EILs have been derived to allow for the effects of soil type on the bioavailability. The EILs for these metals can be varied based on soil properties, including, soil pH, cation exchange capacity (CEC) and clay content. For this screening level assessment, the soil properties reported in the DSI (JK Environment 2023c) were used: pH = 7.3, CEC = 20 cmol⁺/kg and clay content = 39%. The NEPM toolbox provides a spreadsheet to derive site-specific EILs based on these properties. The EIL derivation for this site is provided in **Appendix B**. The EILs for urban residential/public open space were adopted for this screening assessment.
- **ACS NEPM ecological screening levels (ESLs) (NEPC 1999 amended 2013a)** – the ACS NEPM provides ecological screening levels (ESLs) for selected petroleum hydrocarbons and hydrocarbon fractions. These levels are also applicable for assessing potential risks to terrestrial ecosystems and broadly apply to coarse- and fine-grained soils for the same land uses as discussed above for the EILs. The ESLs for urban residential/public open space were adopted for this screening assessment.
- **Canadian Council of Ministers of the Environment**³ – for chemicals that do not have ecological guidelines in the ASC NEPM, values for this screening assessment were adopted from the Canadian Council of Ministers of the Environment (CCME). This source was selected as the derivation process is similar to the Australian framework for deriving EILs (NEPC 1999 amended 2013c). The CCME soil quality guidelines (SQGs) for residential and parklands were adopted. In the case of benzo(a)pyrene (BaP), the CCME SQG was adopted

³ <https://ccme.ca/en/summary-table>

for this screening assessment instead of the ASC NEPM ESL. The reason for this was because the Australian ESL for BaP is based on a previous CCME SQG which used a very conservative derivation technique (see (Warne 2013) for more details). The CCME SQG for BaP has been updated using a more detailed derivation process that is more consistent with the Australian EIL derivation framework (NEPC 1999 amended 2013c).

Table 5: Ecological screening assessment for soil at the Temora Hospital

Chemical	Maximum conc. (mg/kg)	Investigation	Location (depth m)	Screening guideline (mg/kg)
				EIL/ESL (urban residential/public open space)
Heavy metals				
Arsenic	23	DSI	TP115 (0-0.1)	100 ^{N1}
Cadmium	0.4	DSI	TP133 (0-0.1)	10 ^C
Chromium	140	DSI	TP123 (0-0.1)	630 ^{N1*}
Copper	500	DSI	TP146 (0.3-0.4)	230 ^{N1*}
Lead	470	DSI	TP131 (0-0.1)	1,100 ^{N1}
Mercury	0.7	PSI	TP15 (1.3-1.5)	6.6 ^C
Nickel	30	DSI	TP123 (0-0.1)	270 ^{N1*}
Zinc	400	DSI	TP139 (0.2-0.3)	770 ^{N1*}
Polycyclic aromatic hydrocarbons (PAHs)				
Total PAHs	200	DSI	TP155 (0.2-0.5)	na
Benzo(a)pyrene	15	DSI	TP153 (0-0.1)	20 ^C
Total recoverable hydrocarbons (TRHs)				
TRH F1 (C6-C10)	71	DSI	TP116 dup (0-0.05)	180 ^{N1}
TRH F2 (>C10-C16)	210	DSI	TP144 (0-0.1)	120 ^{N1}
TRH F3 (>C16-C34)	1,100	DSI	TP144 (0-0.1)	300 ^{N1}
TRH F4 (>C34-C40)	440	DSI	TP144 (0-0.1)	2,800 ^{N1}

Notes:

N1 = NEPM EIL-C

C = CCME residential/parkland SQG

* = EIL derived using site-specific soil properties (**Appendix B**)

na = not available

Based on the ecological screening assessment (**Table 5**), none of the maximum concentrations exceed the adopted screening level guidelines, except for TRH F2 (>C10-C16). However, it is noted that across both the PSI and DSI 119 primary samples were analysed for TRHs and only two of these samples were above the adopted screening level guideline. In addition, the maximum concentration was 175% of the adopted guideline value (i.e. <250%). It is also noted that the sampling locations surrounding the location where the maximum concentration was detected (i.e. TP144) were all below the LOR indicating that the concentrations of TRHs in this area are not widespread. Based on the low frequency of exceedances, the low level of exceedances and the limited distribution of contamination, the potential ecological risks from TRH F2 (>C10-C16) do not require further investigation. Based on this screening assessment, the ecological risks at the site are acceptable based on Australian guidance.

Section 4. Detailed assessment – carcinogenic PAHs

4.1 General

This section provides a detailed (tier 2) assessment for the potential risk to human health from carcinogenic PAHs in soil at the site. It includes two components to quantitatively assess the potential risk to people at the site: (i) toxicity summary for benzo(a)pyrene (BaP) and carcinogenic PAHs and (ii) calculation of a site-specific soil screening criteria based on the way people are likely to use Temora Hospital. The detailed assessment focuses on potential risks from carcinogenic PAHs for people using the site for recreational purposes as this is the only exposure that warranted further assessment based on the screening assessment (**Section 3**). The risks to all other potentially exposed populations (people and ecosystems) were concluded to be acceptable based on the outcomes of the screening level assessment.

4.2 Toxicity of benzo(a)pyrene and carcinogenic PAHs

4.2.1 General

Several comprehensive reviews of PAHs and BaP in the environment and toxicity to humans are available (ATSDR 1995; CCME 2008; USEPA 2017; WHO 1998). PAHs are a large group of organic compounds with two or more fused aromatic rings made up of carbon and hydrogen atoms. PAHs are formed from incomplete combustion of organic materials such as processing of coal, crude oil, combustion of natural gas, refuse, vehicle emissions, heating, cooking and tobacco smoking as well as natural processes including carbonisation. A natural background level is due to PAH production in plant species. Because of such widespread sources, PAHs are present almost everywhere. Food is considered to be the major source of human exposure to PAHs due to their formation during cooking or from atmospheric deposition of PAHs on grains, fruits and vegetables (WHO 1998).

There are several hundred PAHs, including derivatives of PAHs. Some of these are known or probable/possible human carcinogens. The best known (and studied) PAH is BaP. A detailed toxicity summary for BaP (and carcinogenic PAHs) is provided in **Appendix C**.

4.2.2 Toxic equivalence factor approach for carcinogenic PAHs

The major approach advocated by regulatory agencies such as the NEPC (Fitzgerald, D.J. 1991, 1998; Fitzgerald, D. James, Robinson & Pester 2004; NEPC 1999 amended 2013d), California EPA (CEPA 1999), Netherlands (Baars et al. 2001), the UK Environment Agency (UK DEFRA and EA 2002), Canada (CCME 2008, 2010) and USEPA (USEPA 2014) for assessing the human health risks of PAH-containing mixtures involves the use of 'toxicity equivalence factors' (TEFs). This approach relates the toxicity of other (potentially carcinogenic) individual PAHs to that of BaP, the most widely studied carcinogenic PAH.

It is not currently possible to develop different relative potency schemes across different exposure routes (oral, dermal, inhalation), owing to a lack of data. Hence, the TEFs adopted have been applied for all routes of exposure for the carcinogenic PAHs assessed. Application of the TEFs is relevant to the assessment of PAHs that are considered to be carcinogenic (known or probably/possible). Other PAHs that are not carcinogenic should be assessed separately on an individual basis using a threshold approach.

The TEFs that have been adopted for the assessment of carcinogenic PAHs are listed in **Table 6**. These TEFs were presented by the CCME and are consistent with the WHO recommendations, with minor modifications (CCME 2010; WHO 1998). These TEFs were also used in the derivation of the HILs in the ASC NEPM. Using the TEF approach, concentrations of carcinogenic PAHs in soil are presented as BaP toxic equivalence (TEQs).

Table 6: Toxicity equivalence factors (TEF) for carcinogenic polycyclic aromatic hydrocarbons (PAHs) and carcinogenic classifications

PAH	IARC classification ¹	US EPA classification ²	TEF
Benzo(a)anthracene	2B	B2	0.1
Benzo(a)pyrene	1	B2	1
Benzo(b+j)fluoranthene	2B	B2	0.1
Benzo(k)fluoranthene	2B	B2	0.1
Benzo(g,h,i)perylene ³	3	D	0.01
Chrysene	2B	B2	0.01
Dibenz(a,h)anthracene	2A	B2	1
Indeno(1,2,3-cd)pyrene	2B	B2	0.1

Notes:

¹ International Agency for Research on Cancer (IARC): 1 = human carcinogen, 2A = probable human carcinogen, 2B = possible human carcinogen, 3 = not classifiable

² United States Environmental Protection Agency (US EPA): A = human carcinogen, B1/2 = probable human carcinogen, C = possible human carcinogen, D = not classifiable

³ benzo(g,h,i)perylene is included due to positive findings in genotoxicity studies (WHO 1998). Note there are insufficient data available to determine carcinogenicity

4.2.3 Background exposure

Intakes of BaP from sources other than soil have been considered to range from 0.166-1.6 µg/day with intakes derived from food identified as the most significant (Fitzgerald, D.J. 1991). In 2006, the WHO Joint Expert Committee on Food Additives (JECFA) reviewed potential intakes and health effects of PAHs in food. They found that intake of BaP was on average 0.28 µg/day with a high level intake of 0.7 µg/day (WHO 2006).

4.2.4 Toxicity reference values

A detailed review of available toxicity reference values (TRVs) for BaP is provided in **Appendix C**. Based on this review, the following TRVs have been adopted for this site:

- oral TRV (TRV_O) = 0.233 (mg/kg/day)⁻¹ (MfE 2011) for oral and dermal exposures
- dermal absorption factor (DAF) = 0.06 (6%) (MfE 2011)
- oral bioavailability = 100%
- inhalation TRV = 0.6 (mg/m³)⁻¹ (USEPA 2017).

The oral TRV listed above, 0.233 (mg/kg/day)⁻¹ is different to the oral TRV adopted in the derivation of the HILs in the ASC NEPM, i.e. 0.5 (mg/kg/day)⁻¹. The reason for this is discussed in **Appendix C** and the implications in terms of this HHERA are discussed in **Section 4.4**.

For the assessment of exposures by young children (<2 years), a 10-fold age adjustment was applied to account for higher sensitivity when exposure occurs in early life. This approach is consistent with the derivation of HILs in the ASC NEPM.

4.3 Calculation of a site-specific soil screening criteria

Considering the only exceedance of the human health screening guidelines adopted for the site which warranted further detailed assessment was for carcinogenic PAHs (**Section 3**), the detailed assessment was done by adjusting the carcinogenic PAHs HIL used in the screening level assessment. This was done by applying site-specific assumptions about how people may be exposed to soil at the site using the HIL spreadsheets available from the ASC NEPM Toolbox (<https://www.nepc.gov.au/nepms/assessment-site-contamination/toolbox>). This approach results in a site-specific HIL that can be compared to the measured concentrations at the site.

As discussed in **Section 3.2.1**, the public open space HILs (HIL-C) which were used in the screening level assessment are likely to be highly conservative considering how people may use the hospital grounds for recreational purposes. The HIL-C for carcinogenic PAHs was the only screening criteria that was exceeded in this HHERA and required further detailed assessment (**Table 4**). The HIL-C in the ASC NEPM are protective of children who frequently use a playground where they may be exposed to contaminants in the soil. The values were derived using the following key assumptions (NB, there are a number of assumptions used to derive the HILs and just the key ones for the purposes of this HHERA are listed below):

- a child uses a playground 365 days/year
- every day in the playground, a child incidentally ingests 50 mg of soil and gets soil adhered to 2,700 cm² of skin (i.e. 44% of their total skin surface area).

There is no playground at the site (existing or proposed). Therefore, the assumptions listed above will be overconservative for the site. The main type of recreational activity that is likely to occur at the site is walking, which would in most cases be contained to the walking paths. There is the possibility that people (adults and children) may sit on the grassed areas, but this would likely occur at a much lower frequency.

The HIL spreadsheets in the ASC NEPM Toolbox include all of the default calculations/assumptions for the HILs for each land use (residential, public open space and commercial/industrial). This spreadsheet is publicly available and was used in this assessment to derive a site-specific HIL for carcinogenic PAHs by adjusting some of the parameters based on how people may use this site. **Table 7** summarises the default assumptions from the HIL-C calculation for parameters that were adjusted in this HHERA. In addition, the site-specific assumptions are also provided. These calculations were done for children (early-life) only as the most sensitive age group. Site-specific HILs based on exposure to young children will also be protective of older children and adults.

Table 7: Summary of default assumptions for the HIL-C calculations and site-specific assumptions that were used for this HHERA

Parameter	NEPM HIL-C default assumption	Site-specific assumption	Rationale for adjusting the assumption
Surface area of skin (child)	2,700 cm ² /day	2,434 cm ² /day	Skin surface area of a child that is assumed to be dirty every day, based on face, hands, forearms, lower legs and feet (MDEP 2002).
Soil-to-skin adherence factor (child)	0.5 mg/cm ² /day	0.35 mg/cm ² /day	Weighted adherence factor for a child (MDEP 2002).
Soil/dust ingestion rate	50 mg/day	25 mg/day	Assumes people using the site for recreational purposes are likely to have a much lower incidental ingestion rate of soil than the default used for HIL-C
Exposure frequency	365 days/year	52 days/year	Assume people may undertake activities at the site that involve contact with soil once a week.

Using the exposure assumptions summarised in **Table 7**, and the TRVs listed in **Section 4.2.4**, the site-specific HIL for recreational use of the Temora Hospital site is 80 mg/kg. The adapted HIL spreadsheet including the site-specific assumptions is provided in **Appendix D**.

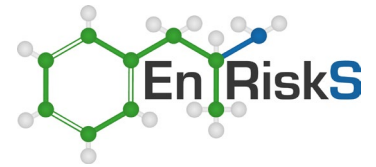
The maximum concentration of BaP TEQ reported at the site was 24 mg/kg. This is considerably lower than the site-specific HIL for recreational purposes. Based on this, the risks to people using the site for recreational purposes are acceptable based on Australian guidance. Therefore, risk management actions and a RAP are not warranted for the site.

4.4 Uncertainties

Uncertainties in any assessment refers to a lack of knowledge (that could be better refined through the collection of additional data/information) and is an important part of the risk assessment process. Assessment of uncertainty is a qualitative process that relates to the selection and rejection of specific data, estimates or scenarios in the risk assessment. In general, to compensate for uncertainty, conservative assumptions are often used that result in an overestimate rather than an underestimate of risk.

There is always some level of error in sampling and analysis of environmental samples. In addition, sampling involved collecting samples from discrete locations and inferring the level of contamination between these sampling points. The actual concentrations between these points cannot be guaranteed. This HHERA was based on the available soil data for the site. These data were collected across two sampling events (the PSI and the DSI) and provide good coverage of the site. Therefore, they are considered sufficiently representative of the contamination present in soil at the site. To account for any potential uncertainty in these concentrations, the maximum concentrations were primarily used in this HHERA. This is a very conservative way to assess the site data as it assumes that the maximum reported concentrations are present in soils across the site.

For this site, there is uncertainty around the exposure assumptions relating to how people may be exposed to soil contaminants. The detailed assessment involved adjusting several default assumptions from the ASC NEPM HILs. The site-specific assumptions adopted are likely to be conservative and therefore are likely to overestimate exposure to chemicals in soil at the site and risk.



The TRV adopted for oral and dermal exposures to BaP (and carcinogenic PAHs) in this HHERA was $0.233 \text{ (mg/kg/day)}^{-1}$ (MfE 2011). This TRV was used in **Section 4.3** to derive a site-specific HIL for BaP TEQ of 80 mg/kg. This adopted TRV is lower than the TRV used in the ASC NEPM for BaP (i.e. $0.5 \text{ (mg/kg/day)}^{-1}$) and therefore is less conservative. If the TRV used in the ASC NEPM is applied to the site-specific calculations in this HHERA, the resulting site-specific HIL is reduced to 40 mg/kg for BaP TEQ. This HIL is still above all of the reported concentrations of BaP TEQ at the site. Therefore, the different TRV for BaP has no influence on the conclusions of this HHERA.

Section 5. Conclusions and recommendations

This report presents a HHERA in relation to the presence of contamination in soil at Temora Hospital, 169-189 Loftus Street, Temora NSW (the 'site'). The site is currently proposed for redevelopment, which is in the detailed design phase. This HHERA was undertaken to support town planning activities for the Temora Hospital and to determine if a RAP is needed for the site to address potential risk issues.

A range of potential sources of contamination were identified at the site as part of a PSI and a DSI which were conducted to inform the redevelopment work. These sources relate to current and historical activities at the site, and the use of imported fill material.

Investigations done for the PSI and DSI included analysis of soil samples for a wide range of chemicals. The concentrations of most chemicals were below the limit of reporting (LOR). However, a range of heavy metals, polycyclic aromatic hydrocarbons (PAHs) and petroleum hydrocarbons were reported in the soils.

Based on the review of available information for the site, the following groups of people were identified as potentially being present at the site:

- construction workers during the redevelopment
- intrusive maintenance workers following the redevelopment
- site gardeners and landscapers
- hospital staff during and after the redevelopment
- patients at the hospital and visitors (including volunteer workers) who may walk in the hospital grounds during and after the redevelopment
- the local community (including residents at the adjacent residential care facility) who may take walks through the hospital grounds during and after the redevelopment.

The HHERA assessed potential risks to all of the groups listed above. This focused on potential direct exposure to chemicals in the soil, as well as exposure to vapours for volatile chemicals (where relevant). The HHERA also assessed potential ecological risks for terrestrial organisms (e.g. vegetation, soil invertebrates and microorganisms).

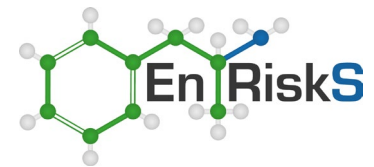
Based on the available data for the site, and considering the uncertainties identified, the following was concluded from the HHERA:

- human health risks are low and acceptable for all groups listed above
- ecological risks are low and acceptable.

Based on the data provided and the outcomes of the HHERA, risk management actions and a RAP are not warranted for the site.

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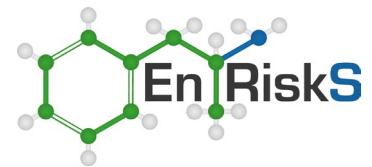
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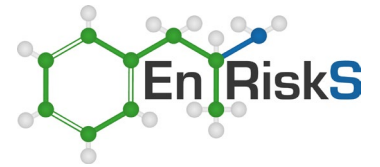
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Appendix A Site soil monitoring data



DSI Summary Tables

ABBREVIATIONS AND EXPLANATIONS

Abbreviations used in the Tables:

ABC:	Ambient Background Concentration	PCBs:	Polychlorinated Biphenyls
ACM:	Asbestos Containing Material	PCE:	Perchloroethylene (Tetrachloroethylene or Tetrachloroethene)
ADWG:	Australian Drinking Water Guidelines	pH_{KCL}:	pH of filtered 1:20, 1M KCL extract, shaken overnight
AF:	Asbestos Fines	pH_{ox}:	pH of filtered 1:20 1M KCL after peroxide digestion
ANZG:	Australian and New Zealand Guidelines	PQL:	Practical Quantitation Limit
B(a)P:	Benzo(a)pyrene	RS:	Rinsate Sample
CEC:	Cation Exchange Capacity	RSL:	Regional Screening Levels
CRC:	Cooperative Research Centre	RSW:	Restricted Solid Waste
CT:	Contaminant Threshold	SAC:	Site Assessment Criteria
EILs:	Ecological Investigation Levels	SCC:	Specific Contaminant Concentration
ESLs:	Ecological Screening Levels	S_{Cr}:	Chromium reducible sulfur
FA:	Fibrous Asbestos	S_{POS}:	Peroxide oxidisable Sulfur
GIL:	Groundwater Investigation Levels	SSA:	Site Specific Assessment
GSW:	General Solid Waste	SSHSLs:	Site Specific Health Screening Levels
HILs:	Health Investigation Levels	TAA:	Total Actual Acidity in 1M KCL extract titrated to pH6.5
HSLs:	Health Screening Levels	TB:	Trip Blank
HSL-SSA:	Health Screening Level-Site Specific Assessment	TCA:	1,1,1 Trichloroethane (methyl chloroform)
kg/L	kilograms per litre	TCE:	Trichloroethylene (Trichloroethene)
NA:	Not Analysed	TCLP:	Toxicity Characteristics Leaching Procedure
NC:	Not Calculated	TPA:	Total Potential Acidity, 1M KCL peroxide digest
NEPM:	National Environmental Protection Measure	TS:	Trip Spike
NHMRC:	National Health and Medical Research Council	TRH:	Total Recoverable Hydrocarbons
NL:	Not Limiting	TSA:	Total Sulfide Acidity (TPA-TAA)
NSL:	No Set Limit	UCL:	Upper Level Confidence Limit on Mean Value
OCP:	Organochlorine Pesticides	USEPA	United States Environmental Protection Agency
OPP:	Organophosphorus Pesticides	VOCC:	Volatile Organic Chlorinated Compounds
PAHs:	Polycyclic Aromatic Hydrocarbons	WHO:	World Health Organisation
%w/w:	weight per weight		
ppm:	Parts per million		

Table Specific Explanations:

HIL Tables:

- The chromium results are for Total Chromium which includes Chromium III and VI. For initial screening purposes, we have assumed that the samples contain only Chromium VI unless demonstrated otherwise by additional analysis.
- Carcinogenic PAHs is a toxicity weighted sum of analyte concentrations for a specific list of PAH compounds relative to B(a)P. It is also referred to as the B(a)P Toxic Equivalence Quotient (TEQ).
- Statistical calculations are undertaken using ProUCL (USEPA). Statistical calculation is usually undertaken using data from fill samples.

EIL/ESL Table:

- ABC Values for selected metals have been adopted from the published background concentrations presented in Olszowy et. al., (1995), Trace Element Concentrations in Soils from Rural and Urban New South Wales (the 25th percentile values for old suburbs with low traffic have been quoted).

Waste Classification and TCLP Table:

- Data assessed using the NSW EPA Waste Classification Guidelines, Part 1: Classifying Waste (2014).
- The assessment of Total Moderately Harmful pesticides includes: Dichlorovos, Dimethoate, Fenitrothion, Ethion, Malathion and Parathion.
- Assessment of Total Scheduled pesticides include: HBC, alpha-BHC, gamma-BHC, beta-BHC, Heptachlor, Aldrin, Heptachlor Epoxide, gamma-Chlordane, alpha-chlordane, pp-DDE, Dieldrin, Endrin, pp-DDD, pp-DDT, Endrin Aldehyde.

QA/QC Table:

- Field blank, Inter and Intra laboratory duplicate results are reported in mg/kg.
- Trip spike results are reported as percentage recovery.
- Field rinsate results are reported in µg/L.

TABLE S1
 SOIL LABORATORY RESULTS COMPARED TO NEMP 2013.
 HI-A: Residential with garden/accessible soils; children's day care centers; preschools; and primary schools'

All data in mg/kg unless stated otherwise	HEAVY METALS										PAHs				ORGANOCHLORINE PESTICIDES (OCPs)					OP PESTICIDES (OPPs)		TOTAL PCBs	ASBESTOS FIBRES		
	Arsenic	Cadmium	Chromium (Total)	Chromium VI	Copper	Lead	Mercury	Nickel	Zinc	Total PAHs	Carbogenic PAHs	HCB	Endosulfan	Methoxychlor	Aldrin & Dieldrin	Chlordane	DDT, DDD & DDE	Heptachlor	Chlorpyrifos						
POL - EnviroLab Services	4	0.4	1	1	1	1	0.1	1	1	-	0.5	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	100	1	100		
Site Assessment Criteria (SAC)	100	20	N5L	100	6000	300	40	400	7400	300	3	10	270	300	6	50	240	6	160	1	1	1	1	1	
Sample Reference	Sample Depth	Sample Description	Arsenic	Cadmium	Chromium (Total)	Chromium VI	Copper	Lead	Mercury	Nickel	Zinc	Total PAHs	Carbogenic PAHs	HCB	Endosulfan	Methoxychlor	Aldrin & Dieldrin	Chlordane	DDT, DDD & DDE	Heptachlor	Chlorpyrifos	TOTAL PCBs	ASBESTOS FIBRES		
TP101	0-0.1	Fill: Silty Clay	6	<0.4	40	NA	65	21	0.2	11	36	19	2.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected	
TP101	0.4-0.5	Fill: Silty Clay	6	<0.4	51	NA	72	13	<0.1	12	26	<0.05	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP102	0-0.1	Fill: Silty Clay	6	<0.4	34	NA	58	20	<0.1	10	36	34	4.2	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP102	[LAB_DUP]	Laboratory Duplicate	6	<0.4	35	NA	60	20	<0.1	10	38	32	3.9	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP103	0-0.1	Fill: Silty Clay	6	<0.4	37	NA	43	28	<0.1	9	32	24	3.2	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP104	0-0.1	Fill: Silty Clay	5	<0.4	34	NA	58	21	<0.1	10	39	59	6.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP105	0-0.1	Fill: Silty Clay	4	<0.4	26	NA	52	21	<0.1	8	38	54	6.1	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP106	0-0.1	Fill: Silty Clay	5	<0.4	33	NA	72	18	<0.1	11	43	5.3	0.7	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP106	0.4-0.5	Silty Clay	5	<0.4	44	NA	100	8	<0.1	9	24	<0.05	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP107	0-0.1	Fill: Silty Clay	6	<0.4	39	NA	74	14	<0.1	10	39	2.8	0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP108	0-0.1	Fill: Silty Clay	11	<0.4	46	NA	81	21	0.2	11	49	2	<0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP108	0.4-0.5	Fill: Silty Clay	8	<0.4	46	NA	100	9	<0.1	10	30	<0.05	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP109	0-0.1	Fill: Silty Clay	5	<0.4	29	NA	61	19	0.1	9	44	3.1	0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP110	0-0.1	Fill: Silty Clay	10	<0.4	59	NA	190	10	0.1	12	30	<0.05	<0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP110	[LAB_DUP]	Laboratory Duplicate	9	<0.4	64	NA	200	8	<0.1	12	30	<0.05	<0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP111	0-0.1	Fill: Silty Clay	5	<0.4	25	NA	100	12	<0.1	7	33	3.6	0.6	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP112	0-0.1	Fill: Silty Clay	6	<0.4	21	NA	320	35	<0.1	10	68	1.3	<0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP113	0-0.1	Fill: Silty Clay	7	<0.4	47	NA	250	9	<0.1	13	53	2.9	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP113	0.9-1.0	Silty Clay	7	<0.4	29	NA	340	21	<0.1	11	280	1.4	1.3	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP114	0-0.1	Fill: Silty Clay	8	<0.4	33	NA	170	29	<0.1	15	77	6	0.8	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP115	0-0.1	Fill: Silty Sand	23	<0.4	27	NA	56	32	0.5	11	140	2.5	<0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP115	0.0-0.5	Fill: Silty Sand	5	<0.4	29	NA	61	19	0.1	9	44	3.1	0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP116	0.4-0.5	Silty Clay	5	<0.4	40	NA	110	6	<0.1	10	27	<0.05	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP117	0-0.1	Fill: Silty Clay	5	<0.4	36	NA	66	16	<0.1	10	38	2.4	<0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP117	[LAB_DUP]	Laboratory Duplicate	5	<0.4	38	NA	67	15	<0.1	11	39	2.9	<0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP118	0-0.1	Fill: Silty Clay	5	<0.4	36	NA	62	21	<0.1	10	42	13	1.8	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP119	0-0.1	Fill: Silty Clay	4	<0.4	44	NA	43	14	<0.1	10	37	2.1	<0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP120	0-0.1	Fill: Silty Clay	5	<0.4	37	NA	54	44	0.1	9	36	27	3.8	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP120	0.4-0.5	Silty Clay	5	<0.4	45	NA	80	11	<0.1	8	19	<0.05	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP121	0-0.1	Fill: Silty Clay	5	<0.4	40	NA	64	14	<0.1	10	38	3.5	<0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP122	0-0.1	Fill: Silty Clay	6	<0.4	29	NA	96	18	<0.1	9	42	3.4	0.6	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP123	0-0.1	Fill: Silty Clay	12	<0.4	140	NA	130	6	<0.1	30	54	<0.05	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP124	0-0.1	Fill: Silty Clay	10	<0.4	13	NA	120	9	<0.1	5	27	<0.05	<0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP124	[LAB_DUP]	Laboratory Duplicate	12	<0.4	26	NA	180	12	<0.1	9	42	<0.05	<0.5	<0.1	<0.1	<0.1	0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP124	[LAB_TRIP]	Laboratory Triplicate	11	<0.4	17	NA	140	11	<0.1	6	33	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP125	0-0.1	Fill: Silty Clay	19	<0.4	31	NA	240	21	<0.1	11	54	2.8	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP125	0.7-0.8	Silty Clay	9	<0.4	61	NA	210	10	<0.1	12	22	<0.05	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
BH126	0.2-0.2	Fill: Sandy Silty Clay	4	<0.4	11	NA	4	4	<0.1	1	3	<0.05	<0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP127	0-0.1	Fill: Silty Clay	6	<0.4	35	NA	84	34	0.1	9	59	1.5	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP127	0.3-0.4	Fill: Silty Clay	6	<0.4	71	NA	120	12	<0.1	11	23	0.5	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP128	0-0.1	Fill: Silty Clay	7	<0.4	45	NA	69	11	<0.1	13	30	0.4	0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP129	0-0.1	Fill: Silty Clay	6	<0.4	53	NA	60	18	0.1	12	35	2.9	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP130	0-0.1	Fill: Silty Clay	9	<0.4	56	NA	80	14	<0.1	15	31	3.4	0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP130	0.4-0.5	Silty Clay	8	<0.4	110	<1	160	12	<0.1	19	24	<0.05	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP131	0-0.1	Fill: Silty Clay	6	<0.4	18	NA	330	470	<0.1	9	190	<0.05	<0.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP131	0.2-0.3	XW Andesite	NA	NA	NA	NA	NA	9	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Not Detected
TP132	0-0.1	Fill: Silty Clay	5	<0.4	16	NA	210	32	<0.1	8	68	<0.05	<0.5	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	Not Detected
TP133	0-0.1																								

TABLE S8
SOIL LABORATORY TCLP RESULTS
 All data in mg/L unless stated otherwise

			Arsenic	Cadmium	Chromium	Lead	Mercury	Nickel	B(a)P
PQL - Envirolab Services			0.05	0.01	0.01	0.03	0.0005	0.02	0.001
TCLP1 - General Solid Waste			5	1	5	5	0.2	2	0.04
TCLP2 - Restricted Solid Waste			20	4	20	20	0.8	8	0.16
TCLP3 - Hazardous Waste			>20	>4	>20	>20	>0.8	>8	>0.16
Sample Reference	Sample Depth	Sample Description							
TP101	0-0.1	Fill: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
TP102	0-0.1	Fill: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
TP103	0-0.1	Fill: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
TP104	0-0.1	Fill: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
TP105	0-0.1	Fill: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
TP113	0.9-1.0	Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
TP118	0-0.1	Fill: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
TP120	0-0.1	Fill: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
TP131	0-0.1	Fill: Silty Clay	NA	NA	NA	0.2	NA	NA	NA
TP133	0-0.1	Fill: Silty Clay	NA	NA	NA	0.04	NA	NA	NA
TP134	0-0.1	F: Clayey Silt	NA	NA	NA	NA	NA	NA	<0.001
TP139	0-0.1	Fill: Silty Clay	NA	NA	NA	<0.03	NA	NA	NA
TP142	0-0.1	Fill: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
TP142 - [LAB_DUP]	0-0.1	Laboratory Duplicate	NA	NA	NA	NA	NA	NA	<0.001
TP147	0.6-0.7	F: Sandy Clay	NA	NA	NA	NA	NA	NA	<0.001
TP149	0.5-0.6	F: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
TP153	0-0.1	F: Silty Sandy Clay	NA	NA	NA	NA	NA	NA	<0.001
TP154	0-0.1	F: Gravelly Clayey Sand	NA	NA	NA	NA	NA	NA	<0.001
BH155	0.05-0.2	F: Silty Sand	NA	NA	NA	NA	NA	NA	<0.001
BH155	0.2-0.5	F: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
TP156	0-0.1	F: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
TP161	0-0.1	F: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
BH162	0.04-0.2	F: Silty Clay	NA	NA	NA	NA	NA	NA	<0.001
Total Number of samples			0	0	0	3	0	0	20
Maximum Value			NA	NA	NA	0.20	NA	NA	<PQL
General Solid Waste			VALUE						
Restricted Solid Waste			VALUE						
Hazardous Waste			VALUE						
Concentration above PQL			Bold						



PSI Summary Tables

ABBREVIATIONS AND EXPLANATIONS

Abbreviations used in the Tables:

ABC:	Ambient Background Concentration	PCBs:	Polychlorinated Biphenyls
ACM:	Asbestos Containing Material	PCE:	Perchloroethylene (Tetrachloroethylene or Teterachloroethene)
ADWG:	Australian Drinking Water Guidelines	pH_{KCL}:	pH of filtered 1:20, 1M KCL extract, shaken overnight
AF:	Asbestos Fines	pH_{ox}:	pH of filtered 1:20 1M KCl after peroxide digestion
ANZG	Australian and New Zealand Guidelines	PQL:	Practical Quantitation Limit
B(a)P:	Benzo(a)pyrene	RS:	Rinsate Sample
CEC:	Cation Exchange Capacity	RSL:	Regional Screening Levels
CRC:	Cooperative Research Centre	RSW:	Restricted Solid Waste
CT:	Contaminant Threshold	SAC:	Site Assessment Criteria
EILs:	Ecological Investigation Levels	SCC:	Specific Contaminant Concentration
ESLs:	Ecological Screening Levels	S_{Cr}:	Chromium reducible sulfur
FA:	Fibrous Asbestos	S_{POS}:	Peroxide oxidisable Sulfur
GIL:	Groundwater Investigation Levels	SSA:	Site Specific Assessment
GSW:	General Solid Waste	SSHSLs:	Site Specific Health Screening Levels
HILs:	Health Investigation Levels	TAA:	Total Actual Acidity in 1M KCL extract titrated to pH6.5
HSLs:	Health Screening Levels	TB:	Trip Blank
HSL-SSA:	Health Screening Level-Site Specific Assessment	TCA:	1,1,1 Trichloroethane (methyl chloroform)
kg/L	kilograms per litre	TCE:	Trichloroethylene (Trichloroethene)
NA:	Not Analysed	TCLP:	Toxicity Characteristics Leaching Procedure
NC:	Not Calculated	TPA:	Total Potential Acidity, 1M KCL peroxide digest
NEPM:	National Environmental Protection Measure	TS:	Trip Spike
NHMRC:	National Health and Medical Research Council	TRH:	Total Recoverable Hydrocarbons
NL:	Not Limiting	TSA:	Total Sulfide Acidity (TPA-TAA)
NSL:	No Set Limit	UCL:	Upper Level Confidence Limit on Mean Value
OCP:	Organochlorine Pesticides	USEPA	United States Environmental Protection Agency
OPP:	Organophosphorus Pesticides	VOCC:	Volatile Organic Chlorinated Compounds
PAHs:	Polycyclic Aromatic Hydrocarbons	WHO:	World Health Organisation
%w/w:	weight per weight		
ppm:	Parts per million		

Table Specific Explanations:

HIL Tables:

- The chromium results are for Total Chromium which includes Chromium III and VI. For initial screening purposes, we have assumed that the samples contain only Chromium VI unless demonstrated otherwise by additional analysis.
- Carcinogenic PAHs is a toxicity weighted sum of analyte concentrations for a specific list of PAH compounds relative to B(a)P. It is also referred to as the B(a)P Toxic Equivalence Quotient (TEQ).

EIL/ESL Table:

- ABC Values for selected metals have been adopted from the published background concentrations presented in Olszowy et. al., (1995), Trace Element Concentrations in Soils from Rural and Urban New South Wales (the 25th percentile values for old suburbs with low traffic have been quoted).

Waste Classification and TCLP Table:

- Data assessed using the NSW EPA Waste Classification Guidelines, Part 1: Classifying Waste (2014).
- The assessment of Total Moderately Harmful pesticides includes: Dichlorovos, Dimethoate, Fenthion, Fenitrothion, Ethion, Malathion, Methidathion and Parathion Methyl.
- Assessment of Total Scheduled pesticides include: HBC, alpha-BHC, gamma-BHC, beta-BHC, Heptachlor, Aldrin, Heptachlor Epoxide, gamma-Chlordane, alpha-chlordane, pp-DDE, Dieldrin, Endrin, pp-DDD, pp-DDT, Endrin Aldehyde.

QA/QC Table:

- Field blank, Inter and Intra laboratory duplicate results are reported in mg/kg.
- Trip spike results are reported as percentage recovery.
- Field rinsate results are reported in µg/L.

TABLE S2 SOIL LABORATORY RESULTS COMPARED TO HSLs All data in mg/kg unless stated otherwise													
						C ₆ -C ₁₀ (F1)	>C ₁₀ -C ₁₆ (F2)	Benzene	Toluene	Ethylbenzene	Xylenes	Naphthalene	Field PID Measurement
PQL - Envirolab Services						25	50	0.2	0.5	1	1	1	ppm
NEPM 2013 HSL Land Use Category						HSL-A/B: LOW/HIGH DENSITY RESIDENTIAL							
Sample Reference	Sample Depth	Sample Description	Depth Category	Soil Category									
BH1	0-0.3	Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.5
BH1 - [LAB_DUP]	0-0.3	Laboratory Duplicate	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	NA
BH1	0.8-1.0	XW Andersite	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.3
BH2	0-0.2	F: Gravelly Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	1.3
BH2	0.3-0.5	Sandy Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	1.9
BH2	0.8-1.0	Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	1.8
BH3	0-0.1	F: Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.6
BH3	0.3-0.5	F: Sandy Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	2	0.7
BH3	1.3-1.5	Sandy Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	1.5
BH4	0-0.1	F: Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	2.2
BH4 - [LAB_DUP]	0-0.1	Laboratory Duplicate	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	NA
BH4	0.3-0.5	Sandy Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	2
BH4	0.8-1.0	XW Andersite	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	3.8
BH5	0-0.1	Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.6
BH5	0.8-1.0	Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.6
BH6	0-0.1	F: Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.4
BH6	0.3-0.5	Sandy Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.1
BH6	0.8-1.0	XW Andersite	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.1
BH7	0.02-0.3	F: Gravelly Silty Sand	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.8
BH7 - [LAB_DUP]	0.02-0.3	Laboratory Duplicate	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	NA
BH7	0.3-0.5	F: Silty Sand	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	2
BH8	0.02-0.2	F: Silty Sand	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0
BH8	0.3-0.5	Sandy Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.3
TP13	0-0.1	F: Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.6
TP13	0.5-0.6	Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	1.3
TP14	0-0.1	F: Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	1
TP14	0.4-0.5	Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.5
TP14	0.9-1.0	XW Andersite	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	1.1
TP15	0-0.1	F: Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.3
TP15 - [LAB_DUP]	0-0.1	Laboratory Duplicate	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	NA
TP15	0.9-1.0	F: Sandy Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.4
TP15	1.3-1.5	Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.5
TP16	0-0.1	Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	0.2
TP16	0.4-0.5	Silty Clay	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	1.2
SDUP1	0-0.1	Duplicate of TP16	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	NA
SDUP2	0-0.1	Duplicate of TP15	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	NA
SDUP3	0-0.1	Duplicate of TP14	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	NA
SDUP4	0-0.1	Duplicate of TP13	0m to <1m	Sand	<25	<50	<0.2	<0.5	<1	<1	<1	<1	NA
Total Number of Samples					38	38	38	38	38	38	38	38	30
Maximum Value					<PQL	<PQL	<PQL	<PQL	<PQL	<PQL	<PQL	2	3.8
Concentration above the SAC					VALUE								
Concentration above the PQL					Bold								
The guideline corresponding to the concentration above the SAC is highlighted in grey in the Site Assessment Criteria Table below													

HSL SOIL ASSESSMENT CRITERIA

Sample Reference	Sample Depth	Sample Description	Depth Category	Soil Category	C ₆ -C ₁₀ (F1)	>C ₁₀ -C ₁₆ (F2)	Benzene	Toluene	Ethylbenzene	Xylenes	Naphthalene
BH1	0-0.3	Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH1 - [LAB_DUP]	0-0.3	Laboratory Duplicate	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH1	0.8-1.0	XW Andersite	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH2	0-0.2	F: Gravelly Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH2	0.3-0.5	Sandy Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH2	0.8-1.0	Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH3	0-0.1	F: Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH3	0.3-0.5	F: Sandy Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH3	1.3-1.5	Sandy Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH4	0-0.1	F: Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH4 - [LAB_DUP]	0-0.1	Laboratory Duplicate	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH4	0.3-0.5	Sandy Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH4	0.8-1.0	XW Andersite	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH5	0-0.1	Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH5	0.8-1.0	Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH6	0-0.1	F: Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH6	0.3-0.5	Sandy Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH6	0.8-1.0	XW Andersite	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH7	0.02-0.3	F: Gravelly Silty Sand	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH7 - [LAB_DUP]	0.02-0.3	Laboratory Duplicate	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH7	0.3-0.5	F: Silty Sand	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH8	0.02-0.2	F: Silty Sand	0m to <1m	Sand	45	110	0.5	160	55	40	3
BH8	0.3-0.5	Sandy Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
TP13	0-0.1	F: Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
TP13	0.5-0.6	Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
TP14	0-0.1	F: Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
TP14	0.4-0.5	Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
TP14	0.9-1.0	XW Andersite	0m to <1m	Sand	45	110	0.5	160	55	40	3
TP15	0-0.1	F: Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
TP15 - [LAB_DUP]	0-0.1	Laboratory Duplicate	0m to <1m	Sand	45	110	0.5	160	55	40	3
TP15	0.9-1.0	F: Sandy Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
TP15	1.3-1.5	Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
TP16	0-0.1	Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
TP16	0.4-0.5	Silty Clay	0m to <1m	Sand	45	110	0.5	160	55	40	3
SDUP1	0-0.1	Duplicate of TP16	0m to <1m	Sand	45	110	0.5	160	55	40	3
SDUP2	0-0.1	Duplicate of TP15	0m to <1m	Sand	45	110	0.5	160	55	40	3
SDUP3	0-0.1	Duplicate of TP14	0m to <1m	Sand	45	110	0.5	160	55	40	3
SDUP4	0-0.1	Duplicate of TP13	0m to <1m	Sand	45	110	0.5	160	55	40	3

			C ₆ -C ₁₀ (F1) plus BTEX	>C ₁₀ -C ₁₆ (F2) plus naphthalene	>C ₁₆ -C ₃₄ (F3)	>C ₃₄ -C ₄₀ (F4)
PQL - Envirolab Services			25	50	100	100
NEPM 2013 Land Use Category			RESIDENTIAL, PARKLAND & PUBLIC OPEN SPACE			
Sample Reference	Sample Depth	Soil Texture				
BH1	0-0.3	Coarse	<25	<50	<100	<100
BH1 - [LAB_DUP]	0-0.3	Coarse	<25	<50	<100	<100
BH1	0.8-1.0	Coarse	<25	<50	<100	<100
BH2	0-0.2	Coarse	<25	<50	<100	<100
BH2	0.3-0.5	Coarse	<25	<50	<100	<100
BH2	0.8-1.0	Coarse	<25	<50	<100	<100
BH3	0-0.1	Coarse	<25	<50	130	230
BH3	0.3-0.5	Coarse	<25	<50	320	120
BH3	1.3-1.5	Coarse	<25	<50	<100	<100
BH4	0-0.1	Coarse	<25	<50	<100	<100
BH4 - [LAB_DUP]	0-0.1	Coarse	<25	<50	<100	<100
BH4	0.3-0.5	Coarse	<25	<50	<100	<100
BH4	0.8-1.0	Coarse	<25	<50	<100	<100
BH5	0-0.1	Coarse	<25	<50	<100	<100
BH5	0.8-1.0	Coarse	<25	<50	<100	<100
BH6	0-0.1	Coarse	<25	<50	<100	<100
BH6	0.3-0.5	Coarse	<25	<50	<100	<100
BH6	0.8-1.0	Coarse	<25	<50	<100	<100
BH7	0.02-0.3	Coarse	<25	<50	<100	<100
BH7 - [LAB_DUP]	0.02-0.3	Coarse	<25	<50	<100	<100
BH7	0.3-0.5	Coarse	<25	<50	<100	<100
BH8	0.02-0.2	Coarse	<25	<50	<100	<100
BH8	0.3-0.5	Coarse	<25	<50	<100	<100
TP13	0-0.1	Coarse	<25	<50	<100	<100
TP13	0.5-0.6	Coarse	<25	<50	<100	<100
TP14	0-0.1	Coarse	<25	<50	<100	<100
TP14	0.4-0.5	Coarse	<25	<50	<100	<100
TP14	0.9-1.0	Coarse	<25	<50	<100	<100
TP15	0-0.1	Coarse	<25	<50	<100	<100
TP15 - [LAB_DUP]	0-0.1	Coarse	<25	<50	<100	<100
TP15	0.9-1.0	Coarse	<25	<50	<100	<100
TP15	1.3-1.5	Coarse	<25	<50	<100	<100
TP16	0-0.1	Coarse	<25	<50	<100	<100
TP16	0.4-0.5	Coarse	<25	<50	<100	<100
SDUP1	0-0.1	Coarse	<25	<50	<100	<100
SDUP2	0-0.1	Coarse	<25	<50	<100	<100
SDUP3	0-0.1	Coarse	<25	<50	<100	<100
SDUP4	0-0.1	Coarse	<25	<50	<100	<100
Total Number of Samples			38	38	38	38
Maximum Value			<PQL	<PQL	320	230
Concentration above the SAC			VALUE			
Concentration above the PQL			Bold			

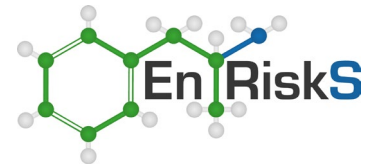
MANAGEMENT LIMIT ASSESSMENT CRITERIA

Sample Reference	Sample Depth	Soil Texture	C ₆ -C ₁₀ (F1) plus BTEX	>C ₁₀ -C ₁₆ (F2) plus naphthalene	>C ₁₆ -C ₃₄ (F3)	>C ₃₄ -C ₄₀ (F4)
BH1	0-0.3	Coarse	700	1000	2500	10000
BH1 - [LAB_DUP]	0-0.3	Coarse	700	1000	2500	10000
BH1	0.8-1.0	Coarse	700	1000	2500	10000
BH2	0-0.2	Coarse	700	1000	2500	10000
BH2	0.3-0.5	Coarse	700	1000	2500	10000
BH2	0.8-1.0	Coarse	700	1000	2500	10000
BH3	0-0.1	Coarse	700	1000	2500	10000
BH3	0.3-0.5	Coarse	700	1000	2500	10000
BH3	1.3-1.5	Coarse	700	1000	2500	10000
BH4	0-0.1	Coarse	700	1000	2500	10000
BH4 - [LAB_DUP]	0-0.1	Coarse	700	1000	2500	10000
BH4	0.3-0.5	Coarse	700	1000	2500	10000
BH4	0.8-1.0	Coarse	700	1000	2500	10000
BH5	0-0.1	Coarse	700	1000	2500	10000
BH5	0.8-1.0	Coarse	700	1000	2500	10000
BH6	0-0.1	Coarse	700	1000	2500	10000
BH6	0.3-0.5	Coarse	700	1000	2500	10000
BH6	0.8-1.0	Coarse	700	1000	2500	10000
BH7	0.02-0.3	Coarse	700	1000	2500	10000
BH7 - [LAB_DUP]	0.02-0.3	Coarse	700	1000	2500	10000
BH7	0.3-0.5	Coarse	700	1000	2500	10000
BH8	0.02-0.2	Coarse	700	1000	2500	10000
BH8	0.3-0.5	Coarse	700	1000	2500	10000
TP13	0-0.1	Coarse	700	1000	2500	10000
TP13	0.5-0.6	Coarse	700	1000	2500	10000
TP14	0-0.1	Coarse	700	1000	2500	10000
TP14	0.4-0.5	Coarse	700	1000	2500	10000
TP14	0.9-1.0	Coarse	700	1000	2500	10000
TP15	0-0.1	Coarse	700	1000	2500	10000
TP15 - [LAB_DUP]	0-0.1	Coarse	700	1000	2500	10000
TP15	0.9-1.0	Coarse	700	1000	2500	10000
TP15	1.3-1.5	Coarse	700	1000	2500	10000
TP16	0-0.1	Coarse	700	1000	2500	10000
TP16	0.4-0.5	Coarse	700	1000	2500	10000
SDUP1	0-0.1	Coarse	700	1000	2500	10000
SDUP2	0-0.1	Coarse	700	1000	2500	10000
SDUP3	0-0.1	Coarse	700	1000	2500	10000
SDUP4	0-0.1	Coarse	700	1000	2500	10000

TABLE S4 SOIL LABORATORY RESULTS COMPARED TO DIRECT CONTACT CRITERIA All data in mg/kg unless stated otherwise											
Analyte		C ₆ -C ₁₀	>C ₁₀ -C ₁₆	>C ₁₆ -C ₃₄	>C ₃₄ -C ₄₀	Benzene	Toluene	Ethylbenzene	Xylenes	Naphthalene	PID
PQL - EnviroLab Services		25	50	100	100	0.2	0.5	1	1	1	
CRC 2011 -Direct contact Criteria		4,400	3,300	4,500	6,300	100	14,000	4,500	12,000	1,400	
Site Use											
RESIDENTIAL WITH ACCESSIBLE SOIL- DIRECT SOIL CONTACT											
Sample Reference	Sample Depth										
BH1	0-0.3	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.5
BH1 - [LAB_DUP]	0-0.3	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	NA
BH1	0.8-1.0	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.3
BH2	0-0.2	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	1.3
BH2	0.3-0.5	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	1.9
BH2	0.8-1.0	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	1.8
BH3	0-0.1	<25	<50	130	230	<0.2	<0.5	<1	<1	<1	0.6
BH3	0.3-0.5	<25	<50	320	120	<0.2	<0.5	<1	<1	2	0.7
BH3	1.3-1.5	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	1.5
BH4	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	2.2
BH4 - [LAB_DUP]	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	NA
BH4	0.3-0.5	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	2
BH4	0.8-1.0	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	3.8
BH5	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.6
BH5	0.8-1.0	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.6
BH6	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.4
BH6	0.3-0.5	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.1
BH6	0.8-1.0	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.1
BH7	0.02-0.3	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.8
BH7 - [LAB_DUP]	0.02-0.3	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	NA
BH7	0.3-0.5	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	2
BH8	0.02-0.2	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0
BH8	0.3-0.5	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.3
TP13	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.6
TP13	0.5-0.6	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	1.3
TP14	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	1
TP14	0.4-0.5	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.5
TP14	0.9-1.0	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	1.1
TP15	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.3
TP15 - [LAB_DUP]	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	NA
TP15	0.9-1.0	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.4
TP15	1.3-1.5	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.5
TP16	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	0.2
TP16	0.4-0.5	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	1.2
SDUP1	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	NA
SDUP2	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	NA
SDUP3	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	NA
SDUP4	0-0.1	<25	<50	<100	<100	<0.2	<0.5	<1	<1	<1	NA
Total Number of Samples		38	38	38	38	38	38	38	38	38	30
Maximum Value		<PQL	<PQL	320	230	<PQL	<PQL	<PQL	<PQL	2	3.8
Concentration above the SAC		VALUE									
Concentration above the PQL		Bold									



TABLE S8				
SOIL LABORATORY TCLP RESULTS				
All data in mg/L unless stated otherwise				
			Lead	B(a)P
PQL - Envirolab Services			0.03	0.001
TCLP1 - General Solid Waste			5	0.04
TCLP2 - Restricted Solid Waste			20	0.16
TCLP3 - Hazardous Waste			>20	>0.16
Sample Reference	Sample Depth	Sample Description		
BH3	0.3-0.5	F: Sandy Silty Clay	NA	0.0086
BH8	0.02-0.2	F: Silty Sand	NA	<0.001
TP14	0-0.1	F: Silty Clay	0.07	NA
TP15	0.9-1.0	F: Sandy Silty Clay	NA	<0.001
SDUP3	0-0.1	Duplicate of TP14	0.3	NA
Total Number of samples			2	3
Maximum Value			0.30	0.0086
General Solid Waste			VALUE	
Restricted Solid Waste			VALUE	
Hazardous Waste			VALUE	
Concentration above PQL			Bold	



Appendix B Site-specific ecological investigation levels

Chromium

Inputs
Select contaminant from list below
Cr III
Below needed to calculate fresh and aged ACLs
Enter % clay (values from 0 to 100%)
39
Below needed to calculate fresh and aged ABCs
Measured background concentration (mg/kg). Leave blank if no measured value
or for fresh ABCs only
Enter iron content (aqua regia method) (values from 0 to 50%) to obtain estimate of background
or for aged ABCs only
Enter State (or closest State)
NSW
Enter traffic volume (high or low)
low

Outputs		
Land use	Cr III soil-specific EILs (mg contaminant/kg dry soil)	
	Fresh	Aged
National parks and areas of high conservation value	#NUM!	210
Urban residential and open public spaces	#NUM!	630
Commercial and industrial	#NUM!	1000

Copper

Inputs
Select contaminant from list below
Cu
Below needed to calculate fresh and aged ACLs
Enter cation exchange capacity (silver thiourea method) (values from 0 to 100 cmolc/kg dwt)
20
Enter soil pH (calcium chloride method) (values from 1 to 14)
7.3
Enter organic carbon content (%OC) (values from 0 to 50%)
1
Below needed to calculate fresh and aged ABCs
Measured background concentration (mg/kg). Leave blank if no measured value
or for fresh ABCs only
Enter iron content (aqua regia method) (values from 0 to 50%) to obtain estimate of background
or for aged ABCs only
Enter State (or closest State)
NSW
Enter traffic volume (high or low)
low

Outputs		
Land use	Cu soil-specific EILs	
	(mg contaminant/kg dry soil)	
	Fresh	Aged
National parks and areas of high conservation value	#NUM!	85
Urban residential and open public spaces	#NUM!	230
Commercial and industrial	#NUM!	320

Nickel

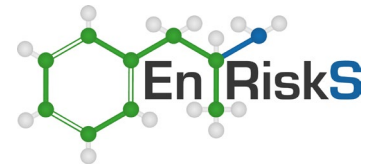
Inputs	
Select contaminant from list below	
Ni	
Below needed to calculate fresh and aged ACLs	
Enter cation exchange capacity (silver thiourea method) (values from 0 to 100 cmolc/kg dwt)	
20	
Below needed to calculate fresh and aged ABCs	
Measured background concentration (mg/kg). Leave blank if no measured value	
or for fresh ABCs only	
Enter iron content (aqua regia method) (values from 0 to 50%) to obtain estimate of background	
or for aged ABCs only	
Enter State (or closest State)	
NSW	
Enter traffic volume (high or low)	
low	

Outputs		
Land use	Ni soil-specific EILs	
	(mg contaminant/kg dry soil)	
	Fresh	Aged
National parks and areas of high conservation value	#NUM!	50
Urban residential and open public spaces	#NUM!	270
Commercial and industrial	#NUM!	460

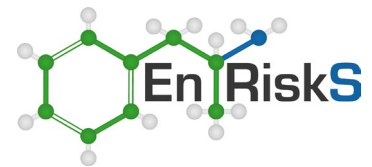
Zinc

Inputs
Select contaminant from list below
Zn
Below needed to calculate fresh and aged ACLs
Enter cation exchange capacity (silver thiourea method) (values from 0 to 100 cmolc/kg dwt)
20
Enter soil pH (calcium chloride method) (values from 1 to 14)
7.3
Below needed to calculate fresh and aged ABCs
Measured background concentration (mg/kg). Leave blank if no measured value
or for fresh ABCs only
Enter iron content (aqua regia method) (values from 0 to 50%) to obtain estimate of background
or for aged ABCs only
Enter State (or closest State)
NSW
Enter traffic volume (high or low)
low

Outputs		
Land use	Zn soil-specific EILs	
	(mg contaminant/kg dry soil)	
	Fresh	Aged
National parks and areas of high conservation value	#NUM!	230
Urban residential and open public spaces	#NUM!	770
Commercial and industrial	#NUM!	1200



Appendix C Toxicity summary for benzo(a)pyrene



C1 Benzo(a)pyrene

General

Several comprehensive reviews of polycyclic aromatic hydrocarbons (PAHs) and benzo(a)pyrene (BaP) in the environment and toxicity to humans are available (ATSDR 1995; CCME 2008; USEPA 2017; WHO 1998).

PAHs are a large group of organic compounds with two or more fused aromatic rings made up of carbon and hydrogen atoms. PAHs are formed from incomplete combustion of organic materials such as processing of coal, crude oil, combustion of natural gas, refuse, vehicle emissions, heating, cooking and tobacco smoking as well as natural processes including carbonisation. A natural background level is due to PAH production in plant species. Because of such widespread sources, PAHs are present almost everywhere. Food is considered to be the major source of human exposure to PAH due to the formation of PAH during cooking or from atmospheric deposition of PAHs on grains, fruits and vegetables (WHO 1998).

There are several hundred PAHs, including derivatives of PAHs. The best known (and studied) is BaP. While there are hundreds of PAHs, typically only 16 individual PAHs are analysed in site contamination investigations. These individual PAHs address a broad range of the equivalent carbon spectrum and are therefore more commonly reported and assessed (WHO 1998).

The major sources of PAHs in soil at any given location invariably contribute a mixture of PAHs, not just single compounds. Various PAH source types can be distinguished based on the characteristic compositions of PAH mixtures and information on the site history, but the contaminated soil matrix is nonetheless challenging from an environmental risk assessment perspective, since in a PAH contaminated soil there is likely to be a diverse compositional range of non-carcinogenic, and carcinogenic PAHs of varying potency (WHO 1998).

The major approach advocated by regulatory agencies such as the NEPC (Fitzgerald, D.J. 1991, 1998; Fitzgerald, D. James, Robinson & Pester 2004; NEPC 1999 amended 2013d), California EPA (CEPA 1999), Netherlands (Baars et al. 2001), the UK Environment Agency (UK DEFRA and EA 2002), Canada (CCME 2008, 2010) and USEPA (USEPA 2014) for assessing the human health risks of PAH-containing mixtures involves the use of 'toxicity equivalence factors' (TEFs). This approach relates the toxicity of other (potentially carcinogenic) individual PAHs to that of BaP, the most widely studied carcinogenic PAH.

There are more than a dozen sets of equivalency numbers that have been proposed over the last two decades. The most recent (published final) review of TEFs and their basis, presented by CCME suggests the use of TEFs recommended by the World Health Organization, with minor modifications (CCME 2008, 2010; WHO 1998). This is a scheme based on order of magnitude cancer potency.

Any finer-scale assertions about relative potency for more generic application are hard to justify given the current state of knowledge and confounding influences such as the route of exposure, or non-additive effects in complex PAH mixtures. It is not currently possible to develop different relative potency schemes across different exposure routes (oral, dermal, inhalation), owing to a lack of data. Hence, the TEFs adopted have been applied for all routes of exposure for the carcinogenic PAHs

assessed. The application of the TEFs is relevant to the assessment of PAHs that are considered to be carcinogenic. Other PAHs that are not carcinogenic should be assessed separately on an individual basis using a threshold approach.

Table C1 table presents a summary of the TEFs adopted for the assessment of carcinogenic PAHs:

Table C1: TEFs for PAHs (CCME 2010)

PAH	IARC Classification	US EPA Classification	TEF
Benzo(a)anthracene	2B	B2	0.1
Benzo(a)pyrene	1	B2	1
Benzo(b+j)fluoranthene	2B	B2	0.1
Benzo(k)fluoranthene	2B	B2	0.1
Benzo(g,h,i)perylene*	3	D	0.01
Chrysene	2B	B2	0.01
Dibenz(a,h)anthracene	2A	B2	1
Indeno(1,2,3-cd)pyrene	2B	B2	0.1

Notes: 1/A= Human Carcinogen, 2A/B2= Probable Human Carcinogen, 2B/C=Possible Human Carcinogen, 3/D= Not classifiable.

* Benzo(g,h,i)perylene included due to positive findings in genotoxicity studies (WHO 1998). Note there are insufficient data available to determine carcinogenicity.

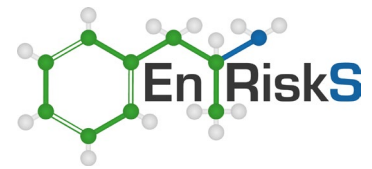
The toxic effects of different PAH compounds in a mixture are additive. Experimental evidence suggests that this is a fair assumption (CCME 2008, 2010; Fitzgerald, D.J. 1991, 1998).

The following relates to the approach used to assess BaP (which can be used for the assessment of BaP alone or for carcinogenic PAHs using the above TEFs).

Dermal Exposures

BaP is suggested to act largely as a point-of-contact carcinogen (Knafla et al. 2006) when dermal exposure occurs rather than via systemic mechanisms. Therefore, it is more appropriate to derive soil guideline values for the dermal route of exposure using a route-specific slope factor (i.e. a slope factor based on studies using dermal exposure only), as opposed to considering it on the basis that BaP is absorbed through skin into the circulatory system and the internal dose can be assessed using the oral slope factor.

For most compounds such data are not available, however, for BaP Knafla et al. (2011) from Health Canada derived a dermal slope factor, normalised to a per unit skin surface area basis, that is relevant to the assessment of BaP in soil in skin (Knafla et al. 2011). The dermal slope factor derived by Knafla et al. was $3.5 (\mu\text{g}/\text{cm}^2/\text{day})^{-1}$ and appropriate methods and parameters have been suggested by Knafla et al. (2011) for the use of this factor in the assessment of soil exposures. The dermal slope factor is an extension of previous work published by these researchers where a dermal slope factor was derived on the basis of skin carcinogenicity from skin painting studies with mice (Knafla et al. 2006). The revised dermal slope factor (Knafla et al. 2011) considered various factors for interspecies extrapolation, particularly in relation to sensitivity (to tumour development) and differences in epidermal (target tissue) thickness. This dermal slope factor has not yet been adopted for use by other international agencies, however, CCME (CCME 2010) indicate that Health Canada may consider the revised dermal slope factor once published (as occurred in 2011).



USEPA 2017 notes the following in their discussion of the risk of cancer via dermal exposure.

Skin cancer in humans has been documented to result from occupational exposure to complex mixtures of PAHs including benzo[a]pyrene, such as coal tar, coal tar pitches, unrefined mineral oils, shale oils, and soot. In animal models, numerous dermal bioassays have demonstrated an increased incidence of skin tumors with increasing dermal exposure of benzo[a]pyrene in all species tested, although most benzo[a]pyrene bioassays have been conducted in mice.

Carcinogenicity studies in animals by the dermal route of exposure are available for benzo[a]pyrene and are supportive of the overall cancer hazard. A quantitative estimate of skin cancer risk from dermal exposure is not included in this assessment, as methodology for interspecies extrapolation of dermal toxicokinetics and carcinogenicity are still under development.

The USEPA review did not include consideration of the Knafla studies from Health Canada.

Background

Intakes of BaP from sources other than soil have been considered to range from 0.166-1.6 µg/day with intakes derived from food identified as the most significant (Fitzgerald, D.J. 1991). In 2006 the WHO Joint Expert Committee on Food Additives (JECFA) reviewed potential intakes and health effects of PAHs in food. They found that intake of BaP was on average 0.28 µg/day with a high level intake of 0.7 µg/day (WHO 2006).

Classification

The International Agency for Research on Cancer has classified BaP as 1: human carcinogen (IARC 2010). The USEPA has classified BaP as B2: probable human carcinogen (USEPA 2014).

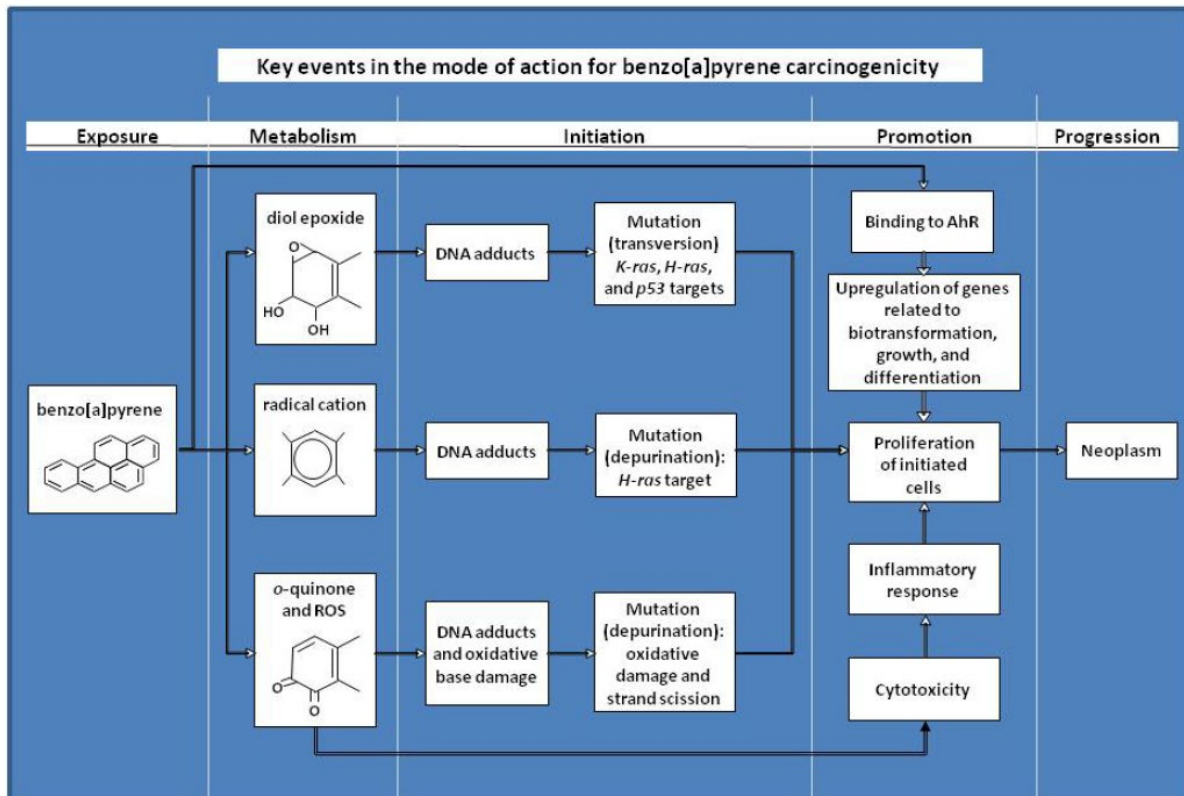
Toxicity reference values

The most recent USEPA toxicological review notes that exposure to BaP is associated with developmental (including developmental neurotoxicity), reproductive, and immunological effects in animal studies. Epidemiology studies (i.e. studies in people) have shown exposure to BaP is associated with adverse birth outcomes (including reduced birth weight, postnatal body weight, and head circumference), neurobehavioral effects, and decreased fertility (USEPA 2017).

In regard to cancer, studies have shown that BaP is carcinogenic at multiple tumour sites (alimentary tract, liver, kidney, respiratory tract, pharynx, and skin) by all routes of exposure in animals. In addition, occupational studies where people are exposed to PAH mixtures such as aluminium production, chimney sweeping, coal gasification, coal-tar distillation, coke production, iron and steel founding, and paving and roofing with coal tar pitch there is strong evidence of carcinogenicity, particularly lung cancer (USEPA 2017).

BaP is an indirect carcinogen, that is, its carcinogenicity results from its metabolites, primarily various epoxides, as opposed to BaP itself. These metabolites can attach to DNA forming adducts which cause disruption when DNA replicates. Several different types of tumours have been observed as a result of exposure to BaP, although tumour development is closely related to route of

administration, i.e., dermal application induces skin tumours and oral administration induces gastric tumours. BaP is considered to be a genotoxic carcinogen (USEPA 2017; WHO 1998).



Proposed metabolic activation pathways and key events in the carcinogenic mode of action for benzo(a)pyrene (USEPA 2017)

In addition, BaP has been demonstrated to be a skin irritant and dermal sensitiser (WHO 1998).

The USEPA has concluded that BaP (and carcinogenic PAHs assessed on the basis of TEFs) acts via a mutagenic mode of action and recommends that susceptibility associated with early lifetime exposures be addressed. No non-threshold values available for BaP have been derived to specifically address early lifetime susceptibility and hence this issue needs to be addressed when characterising exposure to BaP at a particular site depending on the age of people who may be users of the site (USEPA 2005, 2017).

On this basis, a peer-reviewed non-threshold reference value is recommended for BaP. **Table C2** summarises non-threshold values that are available from Level 1 Australian and International sources:

Table C2: Published toxicity reference values for PAHs/benzo(a)pyrene

Source	Value	Basis/Comments
ADWG (NHMRC 2011 updated 2022)	Not available	Current guideline of 0.00001 mg/L is based on the consideration of health effects in relation to the limit of determination for analysis. The assessment provided by the WHO is noted.
OCS	No evaluation available	
WHO (WHO 2017) (WHO 2000) (WHO 2010)	SF = 0.5 (mg/kg/day) ⁻¹ UR = 8.7x10⁻⁵ (ng/m³)⁻¹	A drinking water guideline of 0.0007 mg/L was derived on the basis of an excess lifetime cancer risk of 10 ⁻⁵ from an oral carcinogenicity study and a two-stage birth-death mutation model. Slope factor has been calculated on the basis of a 70kg adult and consumption of 2 L water per day. Inhalation unit risk derived based on observations in coke oven workers to mixtures of PAHs. It is noted that the composition of PAHs to which coke oven workers are exposed may differ from that present in ambient air or derived from soil contamination. It is noted that an inhalation UR is in the same order of magnitude as that derived using a linear multistage model associated with lung tumours in a rat inhalation study of coal tar/pitch condensation aerosols.
MfE (MfE 2011)	SF = 0.233 (mg/kg/day)⁻¹	Review of the carcinogenic reference values available for oral intakes by MfE considered the range of values available and differences in approaches adopted for low dose extrapolation. The application of cross-species scaling appeared to be the most significant factor affecting the cancer potency estimates. While not applying cross-species scaling is consistent with the approach outlined in NHMRC, the MfE review recommended that it is appropriate for BaP (NHMRC 1999). Review of available studies (14 risk estimates using 4 databases) resulted in the calculation of a slope factor based on the geometric mean and scaled allometrically.
MfE (MfE 2002)	Air GV = 0.0003 µg/m ³	Air guideline value (based on annual average) is based on the WHO unit risk value (noted above) and adopting a target risk of 1 in 10,000 to 1 in 100,000.
UK (UK DEFRA and EA 2002)	Derived index doses from WHO evaluations	Oral index dose derived on the basis of WHO approach and a lifetime cancer risk of 10 ⁻⁵ . Inhalation index dose based on WHO approach and adopting an air guideline of 0.25 ng/m ³ . The air guideline is equivalent to a lifetime cancer risk of 4x10 ⁻⁵ .
RIVM (Baars et al. 2001)	SF = 0.2 (mg/kg/day) ⁻¹	Oral SF derived by RIVM based on a chronic oral carcinogenic rat study and linear multistage model. The study considered was more recent than that considered by the WHO. No inhalation assessment is provided by RIVM.
CCME (CCME 2010)	SF = 2.3 (mg/kg/day) ⁻¹	Oral SF derived from a less than lifetime diet study on inbred CFW-Swiss mice associated with incidence of papillomas and squamous cell carcinomas and linear extrapolation. This is the same study as used by the USEPA in the derivation of their oral slope factor. The CCME review also noted that dermal exposures and primary oral exposures result in different kinds of cancers. Health Canada is currently reviewing data with respect to the derivation of a dermal cancer slope factor, which may require consideration when peer-reviewed and published. The oral slope factor has been used to derive a soil guideline associated with exposures via oral, dermal and inhalation exposures.

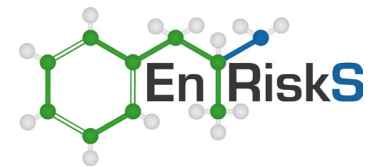
Source	Value	Basis/Comments
OEHHA (CEPA 1999)	SF = 11.5 (mg/kg/day) ⁻¹ UR = 0.0011 to 0.0033 (ug/m ³) ⁻¹	Oral SF derived using the same model and study as reported by the USEPA (IRIS 2010) and CCME (2008), with the upper end of the range of values adopted by OEHHA. Inhalation UR derived on the basis of respiratory tract tumours in an inhalation study in hamsters and a linearised multistage model.
USEPA (USEPA 2014)	SF = 7.3 (mg/kg/day) ⁻¹	Oral SF (last reviewed in 1994) derived on the basis of the same study considered by CCME (above) where a range of slope factors were derived (4.5 to 11.7 (mg/kg/day) ⁻¹). The geometric mean was adopted as the recommended slope factor for derivation of a drinking water guideline. No assessment of inhalation toxicity is available.
USEPA (USEPA 2017)	SF = 1 (mg/kg/day) ⁻¹ IUR = 6x10 ⁻⁴ (µg/m ³) ⁻¹	Oral SF was derived using two studies from 1998 and 2001. The study from 2001 was conducted on male and female Wistar rats which showed forestomach, liver, oral cavity, jejunum, kidney, auditory canal (Zymbal gland) tumours, and skin or mammary gland tumours. The 1998 study reported forestomach, oesophageal, tongue, and larynx tumours in female B6C3F1 mice. Slope factors were calculated using body weight scaling to determine a human equivalent dose. The slope factors for the study in rats ranged from 0.04 to 0.3 (mg/kg/day) ⁻¹ . For the mice study the slope factor was 1.4 (mg/kg/day) ⁻¹ . There are no data to support any one result as most relevant for extrapolating to humans. If it is assumed all slope factors are equally relevant for extrapolating to humans, then statistical evaluation of the data gives slope factors of 0.5, 0.6 and 0.7 per mg/kg-day depending on the statistic. The mice study found tumours in forestomach, an organ not found in people and which may increase how long the stomach lining is exposed to BaP. The rat study used exposure via gavage rather than in food. So, while the studies were robust there are some aspects that create uncertainty. For the inhalation unit risk (IUR), the single lifetime inhalation study available for BaP was used. This study was undertaken in 1981 and used hamsters. Other studies since have used instillation to dose animals and these supported the findings but are not able to be used to develop the IUR.

The review conducted by MfE provided a discussion of the impact of differences in methodology used by various agencies for low dose extrapolation (MfE 2011).

There is a wide range of non-threshold reference values available for oral intakes of BaP (and the other carcinogenic PAHs).

The MfE (MfE 2011) discussion notes that the following:

- the WHO slope factor based on a study from 1990 used unrealistic exposure conditions (rejected by USEPA)
- the WHO determined a slope factor of 0.5 per mg/kg/day using this study and their approach for genotoxic carcinogens but USEPA determined a slope factor of 5.9 per mg/kg/day using the same SF study and their approach for genotoxic carcinogens which included allometric scaling
- other organisations (California, UK, Canada) have used a much older study (from 1967) which did not cover exposure over a whole lifetime



- the major difference between all the various slope factors for BaP was the different approaches to extrapolate from the point of departure dose (usually 5 or 10% effect) to the slope factor, including allometric scaling rather than the toxicological data
- the US agencies use allometric scaling while some European agencies and the NHMRC in Australia recommend against use of such scaling when calculating slope factors
- a number of assessments covered in this review have used the same more recent studies as used by the USEPA in their most recent assessment from 2017
- the most recent studies used by the USEPA (and other reviews) are ones where the animals were exposed to coal tar.

As a result, the geometric mean value for the slope factors without scaling was chosen for use in contaminated land investigations in Australia.

As noted in Appendix A2 of Schedule B7 of the ASC NEPM, a number of variations were considered in the HIL calculations. The calculations of the HILs considered the use of a range of different values for some of the assumptions required for these calculations. The different values were presented to the Australian regulators overseeing the ASC NEPM process for their consideration.

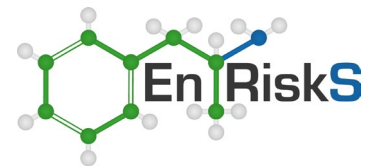
The variations included using:

- the standard USEPA approach to assess exposure via dermal contact
- the Knafla et al. approach for dermal contact
- the slope factor derived from the WHO drinking water guidelines (0.5 per mg/kg bw/d)
- the slope factor from the NZ Ministry for the Environment guidance (0.233 per mg/kg bw/d)
- an age dependent adjustment factor for cancer or not (NEPC 1999 amended 2013d).

A choice was made by Australian regulators as to which set of these variables were to be included in the calculations for the HILs. HILs for low density residential land uses were calculated using 5 different sets of values for the relevant assumptions:

- use of oral TRV from NZ MfE (for both ingestion and dermal contact) and no age dependent adjustment factor
- use of oral TRV from WHO (for both ingestion and dermal contact) and no age dependent adjustment factor
- use of oral TRV from NZ MfE (for both ingestion and dermal contact) with age dependent adjustment factors
- use of oral TRV from WHO (for both ingestion and dermal contact) with age dependent adjustment factors
- use of oral TRV from NZ MfE for ingestion and Knalfa approach for dermal contact) and no age dependent adjustment factor.

The resultant guidance values (HIL-A) ranged from 0.3 to 20 mg/kg. The Australian regulators chose 3 mg/kg for use as the conservative, widely applicable guideline. This was on the basis that while some sites requiring evaluation are former gasworks or other sites with highly bioavailable PAHs, many sites have PAHs present from less bioavailable sources including asphalt and ash.



The ASC NEPM review recommends the use of the MfE slope factor for site-specific risk assessments especially where the source of PAHs is one of these less bioavailable forms (MfE 2011; NEPC 1999 amended 2013d). It also recommends that consideration of whether to adjust for early life stage exposure and dermal exposure be undertaken on a site-specific basis depending on the source of PAHs at the site and the proposed use of the site. For this site, which is a hospital, early life stage exposures are potentially relevant. In addition, there is no evidence of coal tars and hence the Knafla approach to the assessment of dermal toxicity is not relevant.

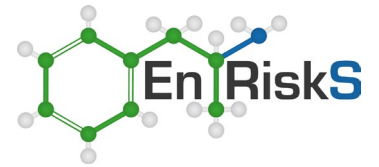
The data available on inhalation exposures are dominated by occupational studies associated with exposure to coke oven emissions or coal tar pitch aerosols. BaP is not volatile and hence the relevance of these studies to the assessment of dust issues derived from contaminated sites is not clear.

On the basis of the discussion above, the following toxicity reference values (TRVs) have been adopted for BaP for this site:

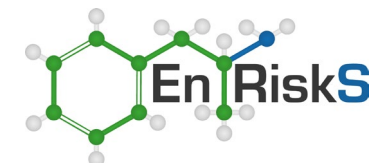
- oral TRV (TRV_O) = $0.233 \text{ (mg/kg/day)}^{-1}$ (MfE 2011) for oral and dermal exposures.
- dermal absorption factor (DAF) = 0.06 (6%) (MfE 2011) unless site-specific dermal bioavailability data is available
- oral bioavailability = 100% unless site-specific oral bioavailability is available.
- inhalation TRV = $0.6 \text{ (mg/m}^3\text{)}^{-1}$ from the more recent review from the USEPA (USEPA 2017).

For the assessment of exposures by children, age dependent adjustment factors have been adopted as follows (USEPA 2005):

- exposures before 2 years of age – 10 fold adjustment
- exposures between 2 and <16 years – 3 fold adjustment
- for exposures after 16 years – no adjustment.



Appendix D Site-specific health investigation level calculations



Site-specific recreation health investigation level for the Temora Hospital

Summary of Exposure Parameters		Abbreviation	units	Parameter	References/Notes
Soil and Dust Ingestion Rate	- Young children (0-5 years)	IR _{SC}	mg/day	25	site specific assumption
Surface Area of Skin	- Young children (0-5 years)	SA _C	cm ² /day	2434	skin surface are assumed to be dirty each day, based on face, hands, forearms, lower legs and feet, as per MDEP 2002
Soil-to-Skin Adherence Factor		AF	mg/cm ² /day	0.35	weighted adherence factor as per MDEP 2002
Time Spent Outdoors		ET _O	hours	2	Schedule B7, Table 5
Time Spent Indoors		ET _I	hours	0	Schedule B7, Table 5
Lung Retention Factor		RF	-	0.375	Schedule B7, Table 5
Particulate Emission Factor		PEF _O	(m ³ /kg)	2.6E+07	As per Equation 21 based assumptions presented in Schedule B7
Outdoor Air-to-Soil Gas Attenuation Factor		α	-	0.05	Value adopted as discussed in Section 5.5 of Schedule B7
Body weight	- Young children (0-5 years)	BW _C	kg	15	Schedule B7, Table 5
	- Adults	BW _A	kg	70	Schedule B7, Table 5
Exposure Frequency		EF	days/year	52	site-specific assumption
Exposure Duration	- Young children (0-5 years)	ED _C	years	6	Schedule B7, Table 5
	- Adults	ED _A	years	29	Schedule B7, Table 5
Averaging Time (non-carcinogenic)		AT _T	days	ED*365	Calculated based on ED for each relevant age group, multiplied by 24 hours for the assessment of inhalation exposures
Averaging Time (carcinogenic)		AT _{NT}	days	25550	Based on lifetime of 70 years, multiplied by 24 hours for the assessment of inhalation exposures

Non-Threshold Effects - Lifetime Exposures [young child and adult]														
Compound	Toxicity Reference Value Oral (TRV _O) (mg/kg/day) ⁻¹	GI Absorption (GAF) (unitless)	Non-Threshold Slope Factor Dermal (SFD) (mg/kg/day) ⁻¹	Oral Bioavailability BA _O (%)	Dermal Absorption Factor (DAF) (unitless)		Toxicity Reference Value Inhalation (TRV _I) (mg/m ³) ⁻¹		Target Risk (TR)	Pathway Specific HILs (mg/kg)			Derived Soil HIL (not rounded) (mg/kg) (eqn 2 for relevant pathways)	Derived Soil HIL (to 1 or 2 s.f.) (mg/kg)
										Soil Ingestion (eqns 4 and 5)	Dermal (eqns 7 and 8)	Dust (eqns 10 and 11)		
benzo(a)pyrene (Early-Life)	0.233	1	0.233	100%	0.06		6.66E-02		1E-05	3.5E+02	1.0E+02	6.4E+05	80.5	80