SHIRE OF YORK

NOTICE OF MEETING

Dear Committee Members

I respectfully advise that the AUDIT AND RISK COMMITTEE MEETING will be held in Council Chambers, York Town Hall, York on Tuesday, 21 March 2023, commencing at 3.00pm.

MEETING AGENDA ATTACHED

Chris Linnell

CHRIS LINNELL
CHIEF EXECUTIVE OFFICER
Date: 17 March 2023

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MISSION STATEMENT
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Order Of Business

1 Opening ... 3

1.1 Declaration of Opening ... 3

1.2 Acknowledgement/Disclaimer ... 3

1.3 Attendance Via Electronic Means ... 3

1.4 Standing Orders ... 3

1.5 Announcement of Visitors ... 3

1.6 Declarations of Interest that Might Cause a Conflict ... 3

1.7 Declaration of Financial Interests ... 3

1.8 Disclosure of Interests that may affect Impartiality ... 4

2 Attendance ... 4

2.1 Members ... 4

2.2 Staff ... 4

2.3 Apologies ... 4

2.4 Leave of Absence Previously Approved ... 4

2.5 Number of People in the Gallery at Commencement of Meeting ... 4

3 Questions from Previous Meetings ... 4

4 Public Question Time ... 4

4.1 Written Questions – Current Agenda ... 5

4.2 Public Question Time ... 5

5 Applications for Leave of Absence ... 5

6 Presentations ... 5

7 Confirmation of Minutes of Previous Meetings ... 5

8 Announcements by Presiding Member without Discussion ... 5

9 Officer's Reports ... 6

9.1 Road Risk Register ... 6

9.2 Risk Management Update as at 8 February 2022 ... 12

9.3 Compliance Audit Return 2022 ... 38

9.4 Delegation Review - Tenders for Goods and Services and Contract Variations ... 66

10 Motions of which Previous Notice has been given ... 79

11 Questions from Members without Notice ... 79

12 Business of an Urgent Nature Introduced by Decision of the Meeting ... 79

13 Closure ... 79

1 OPENING

1.1 Declaration of Opening

1.2 Acknowledgement/Disclaimer

The Presiding Member advises the following:

"The York Shire Council acknowledges the Ballardong people of the Noongar Nation who are the Traditional Owners of this country and recognise their continuing connection to land, water, sky and culture. We pay our respects to all these people and their Elders past, present and emerging.

This meeting is being recorded on a digital audio and visual device to assist with minute taking purposes. The public is reminded that in accordance with Section 6.16 of the Shire of York Local Government (Council Meetings) Local Law 2016 that nobody shall use any visual or vocal recording device or instrument to record the proceedings of Council without the written permission of the presiding member.

I wish to draw attention to the Disclaimer Notice contained within the agenda document and advise members of the public that any decisions made at the meeting today, can be revoked, pursuant to the Local Government Act 1995.

Therefore members of the public should not rely on any decisions until formal notification in writing by Council has been received. Any plans or documents in agendas and minutes may be subject to copyright. The express permission of the copyright owner must be obtained before copying any copyright material."

1.3 Attendance Via Electronic Means

1.4 Standing Orders

1.5 Announcement of Visitors

1.6 Declarations of Interest that Might Cause a Conflict

Councillors/Staff are reminded of the requirements of s5.65 of the Local Government Act 1995, to disclose any interest during the meeting when the matter is discussed and also of the requirement to disclose an interest affecting impartiality under the Shire of York's Code of Conduct.

Name	**Item No & Title**	**Nature of Interest (and extent, where appropriate)**

1.7 Declaration of Financial Interests

A declaration under this section requires that the nature of the interest must be disclosed. Consequently a member who has made a declaration must not preside, participate in, or be present during any discussion or decision making procedure relating to the matter the subject of the declaration.

Other members may allow participation of the declarant if the member further discloses the extent of the interest and the other members decide that the interest is trivial or insignificant or is common to a significant number of electors or ratepayers.

Name	**Item No & Title**	**Nature of Interest (and extent, where appropriate)**

1.8 Disclosure of Interests that may affect Impartiality

Councillors and staff are required (Code of Conduct), in addition to declaring any financial interest, to declare any interest that might cause a conflict. The member/employee is also encouraged to disclose the nature of the interest. The member/employee must consider the nature and extent of the interest and whether it will affect their impartiality. If the member/employee declares that their impartiality will not be affected then they may participate in the decision making process.

Name	**Item No & Title**	**Nature of Interest (and extent, where appropriate)**

2 ATTENDANCE

2.1 Members

2.2 Staff

2.3 Apologies

2.4 Leave of Absence Previously Approved

2.5 Number of People in the Gallery at Commencement of Meeting

3 QUESTIONS FROM PREVIOUS MEETINGS

4 PUBLIC QUESTION TIME

Public Question Time is conducted in accordance with the Act and Regulations. In addition to this the Shire's *Local Government (Council Meetings) Local Law 2016* states –

6.7 Other procedures for question time for the public

(1) A member of the public who wishes to ask a question during question time must identify themselves and register with a Council Officer immediately prior to the meeting.

(2) A question may be taken on notice by the Council for later response.

(3) When a question is taken on notice the CEO is to ensure that—

(a) a response is given to the member of the public in writing; and
(b) a summary of the response is included in the agenda of the next meeting of the Council.

(4) Where a question relating to a matter in which a relevant person has an interest is directed to the relevant person, the relevant person is to—

(a) declare that he or she has an interest in the matter; and
(b) allow another person to respond to the question.

(5) Each member of the public with a question is entitled to ask up to 2 questions before other members of the public will be invited to ask their questions.

(6) Where a member of the public provides written questions then the Presiding Member may elect for the questions to be responded to as normal business correspondence.

(7) The Presiding Member may decide that a public question shall not be responded to where—

(a) the same or similar question was asked at a previous meeting, a response was provided and the member of the public is directed to the minutes of the meeting at which the response was provided;

(b) the member of the public uses public question time to make a statement, provided that the Presiding Member has taken all reasonable steps to assist the member of the public to phrase the statement as a question; or

(c) the member of the public asks a question that is offensive or defamatory in nature, provided that the Presiding Member has taken all reasonable steps to assist the member of the public to phrase the question in a manner that is not offensive or defamatory.

(8) A member of the public shall have 2 minutes to submit a question.

(9) The Council, by resolution, may agree to extend public question time.

(10) Where any questions remain unasked at the end of public question time they may be submitted to the CEO who will reply in writing and include the questions and answers in the agenda for the next ordinary Council meeting.

(11) Where an answer to a question is given at a meeting, a summary of the question and the answer is to be included in the minutes.

4.1 Written Questions – Current Agenda

4.2 Public Question Time

5 APPLICATIONS FOR LEAVE OF ABSENCE

6 PRESENTATIONS

7 CONFIRMATION OF MINUTES OF PREVIOUS MEETINGS

Audit and Risk Committee Meeting - 6 December 2022

Confirmation

That the minutes of the Audit and Risk Committee Meeting held on 6 December 2022 be confirmed as a correct record of proceedings.

8 ANNOUNCEMENTS BY PRESIDING MEMBER WITHOUT DISCUSSION

9 OFFICER'S REPORTS

9.1 ROAD RISK REGISTER

File Number:	**4.0466**
Author:	**Sinead McGuire, Executive Manager Infrastructure & Development Services**
Authoriser:	**Chris Linnell, Chief Executive Officer**
Previously before Council:	**23 March 2021 (060321)** **22 June 2021 (030621)** **28 September 2021 (040921)** **23 March 2022 (020322)** **13 September 2022 (100922)**
Disclosure of Interest:	**Nil**
Appendices:	**1. March 2023 Road Risk Register ⇩**

NATURE OF COUNCIL'S ROLE IN THE MATTER

Executive

PURPOSE OF REPORT

This report provides a review of the Road Risk Register (the Register) through regular reporting of the Register to Council through the Audit and Risk Committee (the Committee).

BACKGROUND

A key element in the Talis Report - 'Review of Delivery Against Road Design and Construction Guideline Standards, 2016' previously presented to Council, referenced road risk management in its Summary of Findings, as below:

> ***"4. Assessment of Risks to Road Users***
>
> *The failures to implement appropriate road management practices, particularly given the shortfall in required funding, has the potential to pose risks to road users associated with the failure to use detailed design when necessary, appropriate construction methods and a risk based maintenance strategy to make best use of the available funds. The risks to road users relate to the potential for increased crashes and increased vehicle operating costs associated with lower levels of service from the road system*."

Taking on board the Talis comments and previous commitments, Officers developed the Register to assist in tracking road safety risks.

At its March 2021 meeting Council first considered the Register and resolved in part (060321):

"That Council:

1. ***Resolve to adopt the "Road Risk Register", with the understanding that it is a living document that will be updated on an as needs basis.***
2. ***Endorse the use of the Road Risk Register as a method of informing the budget process of the importance of road safety projects.***
3. ***Requests the CEO to present the first formal Road Risk Register to the Audit and Risk Committee in June 2021 and then every six months, commencing with the September 2021 Audit and Risk Committee meeting."***

Most recently, at its September 2022 meeting Council again considered the Register and resolved (100922):

"That, with regard to the Minutes and Recommendations of the Audit and Risk Committee Meeting held on 13 September 2022, Council:

1. Receives the Unconfirmed Minutes of the Audit and Risk Committee (the Committee) Meeting held on 13 September 2022, as presented in Appendix 1, and adopts the following recommendations of the Committee:

a. Resolves to receive the Road Risk Register with the understanding that it is a living document that will be updated on an as needs basis.

b. Notes that Officers will review the current system and provide options for future reporting.

c. Requests the Chief Executive Officer to present the next review of the Road Risk Register to the Audit and Risk Committee at its March 2023 Ordinary Meeting.

d. Receives the Shire of York Risk Register Dashboard Report as at 31 August 2022.

e. Notes the progress made to date regarding the actions contained in the Risk Register and that Officers will review the current system and provide options for future reporting.

f. Requests the Chief Executive Officer to present the next review of the Risk Register to the Audit and Risk Committee at its December 2022 Ordinary Meeting.

g. Notes that Expressions of Interest for an external representative to the Audit and Risk Committee are currently open with a closing date of Friday 30 September 2022.

h. Notes that all applications received for external membership will be presented to the Audit and Risk Committee's December 2022 Meeting for consideration."

In accordance with point 1c of Council's September 2022 resolution, the Register is presented to the Committee for consideration.

COMMENTS AND DETAILS

As outlined in the September 2022 report, a detailed assessment has been undertaken of the road and drainage asset classes. To date this includes video capture of the entire road network and visual inspections of a sample size of drainage assets. This has informed a subsequent assessment of the roads and drainage condition. This data will advise the Shire's road and drainage asset management plans. These asset management plans will identify how roads and drainage assets can optimise performance, risks and costs. The asset management plans will provide the Shire with a comprehensive overview of the road and drainage network, identifying risks and associated actions for the Committee's consideration and recommendation to Council.

As a result of this review, the Register information and format is expected to be significantly updated, integrated closely with the new road and drainage asset management plans. Due to the implementation of the new Enterprise Resource Planning platform, it is timely to undertake a review of the current risk identification and reporting system. Officers will review the current system and provide options to the Committee through a Workshop for future reporting.

The current Register is presented in Appendix 1.

OPTIONS

The Committee has the following options:

Option 1: The Committee could recommend to Council that it receives the review of the Register and its operation and reporting.

Option 2: The Committee could recommend to Council that it not receive the review of the Register.

Option 3: The Committee could recommend to Council that it not receive the review of the Register and request the Chief Executive Officer to include additional information (which is to be identified).

Option 1 is the recommended option.

IMPLICATIONS TO CONSIDER

Consultative

Whilst no formal consultation process has been undertaken in relation to development of the Register, the feedback and complaints received by the Shire relating to roads has been included in the Register, and this will continue to occur.

Strategic

Strategic Community Plan 2020-2030

Goal 4: Built for Lifestyle and Resilience

To have a built environment which supports community, economy, and the environment, respects the past, and creates a resilient future.

Policy Related

G19 Risk Assessment and Management

While a Road Risk Register is not specifically mentioned in the Policy, the Policy principals apply.

Financial

The timely management of road risks will reduce the Shire's exposure to civil action regarding road conditions. It will also assist in the forward planning of works to ensure the most efficient use of Shire resources.

Legal and Statutory

Civil Liabilities Act 2002

Risk Related

If no formal Register is kept there is a risk that road risks will not be enacted on in a timely and efficient manner.

Workforce

The scope of this report is managed within current operational capacity.

VOTING REQUIREMENTS

Absolute Majority: No

RECOMMENDATION

That, with regard to the Road Risk Register, the Audit and Risk Committee recommend to Council that it:

1. **Resolves to receive the Road Risk Register, as presented in Appendix 1, with the understanding that it is a living document that will be updated on an as needs basis.**
2. **Notes that Officers will review the current system and provide options for future reporting.**
3. **Requests the Chief Executive Officer to present the Road and Drainage Asset Management Plans to the September 2023 Audit and Risk Committee Meeting.**

Shire of York Road Risk Register

Damage Parameters:
1 Damage to Road
2 Geometric/design
3 Overgrown vegetation
4 Drainage
5 Signage

Timing Parameters:
1 Within 6 months
2 From 6-12 months
3 From 12-24 months
4 From 24-36 months

Type of Damage	Road Name	ROAD number	SLK From	SLK to	Damage Description	Proposed Remediation	Level
4	Allen Road	4330040	5	5.5	Wind row needs to be pulled across road		1
4	Allen Road	4330040	4.08	4.08	Culverts need cleaned up LHS ONLY	Clean up culverts	1
4	Allen Road	4330040	3.34	3.36	LHS Drainage needs cleared out to allow for flow of water	Clear out Drain on LHS	1
4	Allen Road	4330040	2.08	2.13	LHS Drainage needs cleared out to allow for flow of water	Clear out Drain on LHS	1
4	Allen Road	4330040	1.85	1.88	LHS Drainage needs cleared out to allow for flow of water	Clear out Drain on LHS	1
4	Ashworth Road	4330051	5.95	6.08	RHS of Road Entire road needs to be lifted	Lift entire road running course so that drain can be inserted	3
4	Ashworth Road	4330051	5.6	5.95	RHS Needs Drain	Grade a drain into RHS shoulder	3
1	Ashworth Road	4330051	2.72	5.6	Requires seal	Road to have design and Sealed	4
1	Ashworth Road	4330051	1.23	2.24	Requires seal	Road to have design and Sealed	3
~~4~~	~~Bogling Road~~	~~4330026~~	~~2.35~~	~~2.35~~	~~Drainage scouring due to storm event.~~	~~Reform drains. To be addressed November 2022.~~	~~1~~
~~4~~	~~Bogling Road~~	~~4330026~~	~~0.84~~	~~0.84~~	~~Storm damage to culvert crossing.~~	~~Major repairs and updgrade of drainage required (mutiple years). Requires redesign. Structural Engineering Assessment Undertaken.~~	~~3~~
4	Boyercutty Road	4330015	4.15	5.25	LHS Drian needs material brought back across road	Remove material to middle of road	1
1	Carter Road	4330108	0.54	0.54	RHS drainage needs to be cleared out to allow for flow of water.	Clear vegetation	4
4	Crawford Court	4330164	0.14	0.14	Drainage scouring due to storm event.	Reform and clear out drains	1
4	Cut Hill Road	4330020	0.25	0.46	Drainage LHS	Requires cleaning / Possible Rock protection	3
4	Cut Hill Road	4330020	0.29	0.29	Crossover Full	Requires cleaning	3
4	Cut Hill Road	4330020	0.46	0.46	Culvert RHS	Requires extension	1
4	Cut Hill Road	4330020	0.57	0.57	Culvert Both sides	Requires Extension/ Headwall added	1
4	Cut Hill Road	4330020	1.6	1.75	Shoulder scour	Requires cleaning / Possible Rock protection	2
1	Cubine Road	4330038	0.2	1.6	Widening and Reseal (currently 3.6m wide). Shoulder erosion at SLK 1.53. Lip on edge of seal.	Reseal and widen, upgrade drainage. Tree clearance required. Shoulder works have been undertaken by internal crews Nov 2021.	4
1	Cubine Road	4330038	2.28	2.68	Widening and Reseal (currently 3.6m wide). Lip on edge of seal.	Reseal and widen, upgrade drainage. Tree clearance required. Shoulder works have been undertaken by internal crews Nov 2021.	4
1	Doodenanning Road	4330008	12	12.75	Sealed jumpup	Nothing needed	4
1	Doodenanning Road	4330008	7.35	10.05	Sealed-Old	Reseal in 5 years	4
1	Doodenanning Road	4330008	4.7	7.35	Sealed	Nothing needed	4
1	Doodenanning Road	4330008	3.9	4.7	Sealed-Old	Reseal in 5 years	4
1	Doodenanning Road	4330008	1.77	3.9	Sealed	Nothing needed	4
1	Doodenanning Road	4330008	0	1.77	Sealed	Nothing needed	4
2	Knotts Road	4330028	0	1.668	Drainage not constructed to satisfaction	Construct drainage to standard. Drainage works planned March 2023. Adjustment to design required due to fibre optic cables.	1
2	Knotts Road	4330028	0	1.668	Shoulders need to be uniform-both sides	Construct shoulders. Drainage works planned March 2023. Adjustment to design required due to fibre optic cables.	2
2	Knotts Road	4330028	0	0.2	Water in the stopping zone	Need to review to ensure that water is either drained away/the stopping zone needs to be built up to ensure capability of raining	2
1	Knotts Road	4330028	3.65	4.65	Shoulders need to be uniform-both sides	Construct and seal Shoulders (Death on Road)	2
4	Mackie Siding	4330022	0.48	0.48	Significant damage to river crossing as a result of storm event.	Major repairs and updgrade of drainage required (mutiple years). Concept designs presented to March 2023 OCM.	4
1	Mannavale Road	4330002	6.35	12.6	Widening and Reseal	Widen road by including shoulders and reseal entire road (Multiple years)	3
3	Mannavale Road	4330002	5.92	5.92	Reduced sight lines due to vegetation.	Tree pruning.	2
0	Marwick Road	4330069	0	0	N/A	N/A	0
4	Mokine Road	4330010	0	0.85	Drain needs to be cleared	clear drain on RHS Only	4
1	Mokine Road	4330010	11.09	11.16	Pavement failure.	Dip in road has been temporarily addressed by Shire roads team. Section of road to be cement stabilised to be scheduled by team.	1
4	Moore Road	4330063	0	2.5	Drainage needs cleared out	Requres cleaning	4
4	Moore Road	4330063	1.95	1.95	Culvert needs cleaning/Extension	Clean/ Extend	3
4	Moore Road	4330063	1.74	1.74	Culvert needs cleaning/Extension	Clean/ Extend	3
0	Penny road	4330219	0	0	N/A	N/A	0
4	Qualen West Road	4330019	10.69	10.69	Drainage scouring due to storm event.	Reform drain and shoulder.	2
4	Quellington Road	4330006	1.64	1.81	LHS Drain needs to clear the vegetation	Requires Cleaning	3

Shire of York Road Risk Register

Damage Parameters:
1 Damage to Road
2 Geometric/design
3 Overgrown vegetation
4 Drainage
5 Signage

Timing Parameters:
1 Within 6 months
2 From 6-12 months
3 From 12-24 months
4 From 24-36 months

Type of Damage	Road Name	ROAD number	SLK From	SLK to	Damage Description	Proposed Remediation	Level
4	Quellington Road	4330006	1.88	2.21	LHS Drain needs to clear the vegetation	Requires Cleaning	3
4	Quellington Road	4330006	3.6	3.65	LHS Drain needs to clear the vegetation	Requires Cleaning	3
4	Quellington Road	4330006	4.3	4.3	Culvert needs cleaning/Exte nsion	Requires Cleaning	2
1	Quellington Road	4330006	10.04	11.09	Seal needs replacement Shoulder buildup	Road widening needs to go ahead	2
1	Quellington Road	4330006	11.15	14.58	Seal needs replacement Shoulder buildup	Road widening needs to go ahead	2
1	Quellington Road	4330006	14.73	16.66	Seal needs replacement Shoulder buildup	Road widening needs to go ahead	2
1	Quellington Road	4330006	16.85	17.6	Shoulders need to be uniform-both sides	Road widening needs to go ahead	2
3	Quellington Road	4330006	17.6	19.34	Tree trimming require on RHS	Trim trees	2
4	Spencers Brook York Road	4330004	18.62	18.62	Drainage scouring due to storm event.	Clear out drain on LHS.	2
2	Talbot Road	4330003	4.4	4.4	Geometric Issue LHS	Requires Redesign	4
2	Talbot Road	4330003	4.53	4.53	Flat Road surface/ Slick surface	Requires Redesign	1
2	Talbot Road	4330003	4.71	4.77	Incorrect Superelevation/transition LHS	Requires Redesign	1
4	Talbot Road	4330003	4.8	4.8	No Crossover LHS	Install Crossover	3
4	Talbot Road	4330003	4.92	4.92	No drainage LHS	Requires cleaning	3
2	Talbot Road	4330003	5.1	5.1	Incorrect Camber RHS	Reform to correct camber	1
2	Talbot Road	4330003	5.1	5.1	Shoulder Narrow	Increase Shoulder	1
2	Talbot Road	4330003	5.1	5.1	Embankment Steep	Increase embankment	1
2	Talbot Road	4330003	9.77	10.12	Narrowing of Road on Bend and Crest	Increase seal width to 7.2 metres	1
2	Talbot Road	4330003	10.12	10.16	Narrowing of Culvert	Increase Culvert width	1
2	Talbot Road	4330003	10.16	11.52	Narrowing of Road	Increase seal width to 7.2 metres	3
2	Talbot west road	4330012	30.85	30.95	Inter Section Redesign	Redesign intersection To todays standards	1
4	Trigg Road	4330201	0	0.22	Insufficent drainage causing damage to road.	Design drainage system, reconstruct road where required.	4
4	Wallaby Road	4330030	0.2	0.2	Culverts needs to be cleaned out.	Clear out Drain.	1
4	Wambyn Road	4330014	3.18	3.22	LHS Drain needs to clear the vegetation	Clear vegetation	2
1	Wambyn Road	4330014	5.33	5.6	Rocks jutting through road.	Resheet road to higher level, or redsign.	3
~~1~~	~~Waterfall road~~	~~4330050~~	~~0~~	~~8~~	~~Resheet required~~	~~Resheet Road. Works to be complete March 2022.~~	~~2~~
~~1~~	~~Wilberforce Road~~	~~4330010~~	~~0~~	~~5.84~~	~~River crossing still submerged as a result of August 2022 storm event.~~	~~Structural assessment has been undertaken by independent engineer once water levels subside to inform works.~~	~~3~~
3	York-Tammin Road	4330001	33.2	33.5	Both sides vegetation clearing	Clear vegetation	4
1	York-Tammin Road	4330001	32.15	33.2	Both sides Edge line - Seal	Extend shoulders and seal. Shoulder works complete, sealing works scheduled for March 2023.	3
1	York-Tammin Road	4330001	31.15	31.5	Both shoulders require rework and seal extension	Extend shoulders and seal. Shoulder works complete, sealing works scheduled for March 2023.	3
1	York-Tammin Road	4330001	31.1	31.3	Floodway needs work. Has small potholes throughout the area,	Rework pavement and reseal. Shoulder works complete, sealing works scheduled for March 2023.	4
1	York-Tammin Road	4330001	29.3	29.6	Stripping of sealed section	Reseal. Shoulder works complete, sealing works scheduled for March 2023.	4

9.2 RISK MANAGEMENT UPDATE AS AT 8 FEBRUARY 2022

File Number:	**4.4274**
Author:	**Alina Behan, Executive Manager Corporate & Community Services**
Authoriser:	**Chris Linnell, Chief Executive Officer**
Previously before Council:	**28 June 2022 (020622)** **27 September 2022 (100922)** **20 December 2022 (141222)**
Disclosure of Interest:	**Nil**
Appendices:	**1. Risk Dashboard and Profiles ⇩**

NATURE OF COUNCIL'S ROLE IN THE MATTER

Executive

PURPOSE OF REPORT

This report provides the Audit and Risk Committee (the Committee) with an update regarding progress on the Shire's Risk Management.

BACKGROUND

The Shire of York's Risk Assessment and Management Policy, in conjunction with the Risk Management Framework, sets out the Shire's approach to the identification, assessment, management and monitoring of risks.

Appropriate governance of risk management within the Shire provides:

1. Transparency of decision making
2. Clear identification of the roles and responsibilities of the risk management functions
3. An effective governance structure to support the Risk Management Framework

The Committee's role and responsibilities include:

1. Regular review of the appropriate and effectiveness of the Risk Management Framework
2. Support Council to provide effective corporate governance
3. Oversight of all matters that relate to the conduct of external audits
4. Must be independent, objective and autonomous in deliberations

It is essential to monitor and review the management of risks as changing circumstances may result in some risks increasing or decreasing in significance. By regularly reviewing the effectiveness and efficiency of controls and appropriateness of treatment/action options selected, it can be determined if the organisation's resources are being put to the best use possible.

An internal Risk Working Group (RWG) has been formed to enable Officers from across the organisation to meet regularly and monitor the progress against the Risk Improvement Plan, Risk Management Framework and Register. Further, the RWG is responsible for implementation of timely and effective remedial measures to address risk management deficiencies.

This report presents an update of risks identified and addressed across the organisation for consideration and recommendation to Council. The Committee last considered the Risk Management Update at its December 2022 meeting which was endorsed by Council at its December 2022 Ordinary Meeting where it resolved (141222):

"That, with regard to the Minutes and Recommendations of the Audit and Risk Committee Meeting held on 6 December 2022, Council:

1. Receives the Unconfirmed Minutes of the Audit and Risk Committee (the Committee) Meeting held on 6 December 2022, as presented in Appendix 1, and adopts the following recommendations of the Committee:

a. Appoints Applicant 1 as the second external representative of the Audit and Risk Committee, with the term ending at the October 2023 Local Government Elections.

b. Requests the Chief Executive Officer to notify Applicant 2 of the outcome and thank them for their interest.

c. Receives the Shire of York Risk Register Dashboard Report as at 28 November 2022.

d. Notes the progress made to date regarding the actions contained in the Risk Register and that Officers will review the current system and provide options for future reporting.

e. Requests the Chief Executive Officer to present the next review of the Risk Register to the Audit and Risk Committee at its March 2023 meeting.

f. Adopts the Fraud and Corruption Framework.

g. Requests the Chief Executive Officer to develop a Fraud and Corruption Management Plan.

2. Authorises the Chief Executive Officer to make any minor typographical and formatting changes to the Fraud and Corruption Framework prior to publication."

In accordance with point 1e of Council's December 2022 resolution, the Register is presented to the Committee for consideration.

COMMENTS AND DETAILS

The RWG meets regularly to review and update the risk register and prioritise actions considering potential organisational opportunities and the adverse effects that could result. The RWG monitors these risks so that organisational objectives can be achieved considering the Shire's appetite for risk.

A comprehensive RWG review of actions was undertaken on 8 February 2023 and the risk dashboard updated accordingly. The dashboard report details a total of eight-seven (87) actions that are still in progress or ongoing or are new actions to be completed. The updated Risk Dashboard is presented in Appendix 1.

<u>Asset Sustainability</u>

The Transport Asset Management Plans have been developed and are ready for presentation to Council at its May 2023 Ordinary Meeting. The delayed completion of this project has resulted in a delayed commencement of the Building and Open Space Asset Management Plans. These asset classes are due for a review of Fair Value in the current financial year. Officers will undertake a separate procurement for Fair Value to ensure this information can be captured to inform the Annual Financial Statement for 2022/23.

<u>Compliance</u>

Two (2) Rangers have recently been appointed which has resulted in an immediate improvement in the Shire's ability to respond to compliance issues.

Officers have met with WA Country Health Services to agree responsibility for outstanding compliance actions at the Pioneer Memorial Lodge facility where expectations did not align with the prepared lease. A Memorandum of Understanding will be completed for both parties' signature to document compliance responsibilities.

Employment Practices

This financial year the Shire's insurer, LGIS, reduced its coverage under the Employee Assistance Program (EAP). With stress claims rising across the sector, the Shire has determined to seek an external provider to support employees where gaps exist. An interim arrangement is now in place and an RFQ will be released to service future years. Officers are negotiating with LGIS for a return to full service of the EAP program.

Engagement

Work to develop an Engagement Framework will be influenced by the local government reform requirements for all local governments to prepare a community and stakeholder engagement charter. A model charter will be produced to assist local government in the preparation of their own documents. This will form the base of the Shire of York's proposed Charter.

The 2022/23 Community Scorecard has now closed, and final results are being tallied ready to be shared with Council. Information gathered as part of this process will be used to inform the desktop review of the Strategic Community Plan.

Environment

At its February 2023 Ordinary Meeting, Council resolved (010223):

"That, with regard to the Request for Budget Allocation - Corella Management, Council:

1. ***Requests the Chief Executive Officer to adjust the 2022/23 budget to a total of $8,000 (being $5,000 to support this initiative and $3,000 for operational response) and allocate $13,000 in the 2023/24 and 2024/25 budgets for the purpose of Corella management and advise the Avon Regional Organisation of Councils' Executive Officer accordingly."***

This will support a regional response to reducing corella numbers by member Shires.

Information Technology

Work has commenced to improve connectivity to the Shire Administration, Depot and Residency Museum facilities through installation of direct fibre connections.

Misconduct

The Fraud and Corruption Framework was adopted by Council at its December 2022 Ordinary Meeting, Resolution 141222. A Fraud and Corruption Management Plan is being developed to support the aims of the Framework.

Safety and Security Practices

Work is being undertaken by an external contractor to conduct audits for Shire facilities to review compliance and update evacuation plans. Following the completion of this training, new fire wardens can commence and evacuation drills undertaken mitigating a long-standing Work Health and Safety risk for the Shire.

Work has been completed to upgrade the entry toggle system to the Shire's Administration building following equipment failure. This work was already scheduled for the 2022/23 financial year.

New actions

The RWG continues to monitor the environment for changes that could result in the need for new actions to mitigate risks to the Shire. There were no new actions identified in this quarter.

Superseded Actions

There are no superseded actions for this period.

Going Forward

Officers have been working with Government Frameworks to transition risk reporting to the new platform. It is anticipated that the new format will be presented to the Audit and Risk Committee at its June 2023 meeting.

OPTIONS

The Committee has the following options:

Option 1: The Committee could recommend that Council requests the Chief Executive Officer to ensure all issues have been dealt with within a certain timeframe. However, Officers have focused on those issues that present the highest risk to the Shire for immediate action within current resources and will continue to work through the remaining issues on the same basis.

Option 2: The Committee could recommend that Council accepts the Shire of York Risk Register Dashboard Report as at 8 February 2023

Option 2 is the recommended option.

IMPLICATIONS TO CONSIDER

Consultative

LGIS

RWG

Office of the Auditor General

Strategic

Strategic Community Plan 2020-2030

Goal 5: Strong Leadership and Governance

To have effective and responsive leadership and governance, where a sense of collective purpose and shared direction combine to work together.

Policy Related

G19 Risk Assessment and Management

Financial

Financial implications of the proposed risk mitigation strategies are presented to Council as they emerge and inform the annual budget process.

Legal and Statutory

Regulation 17 of the *Local Government (Audit) Regulations 1996* is applicable and states:

"17. CEO to review certain systems and procedures

(1) The CEO is to review the appropriateness and effectiveness of a local government's systems and procedures in relation to —

(a) risk management; and

(b) internal control; and

(c) legislative compliance.

(2) The review may relate to any or all of the matters referred to in subregulation (1)(a), (b) and (c), but each of those matters is to be the subject of a review not less than once in every 3 financial years.

(3) The CEO is to report to the audit committee the results of that review."

Risk Related

The development and regular update of an organisational Risk Register is a risk management tool.

Workforce

It is proposed that risk mitigation actions are undertaken within current resources. Where additional resources are required, this will be identified and submitted as part of the annual budget process.

VOTING REQUIREMENTS

Absolute Majority: No

RECOMMENDATION

That, with regard to the Risk Management Update as at 8 February 2022, the Audit and Risk Committee recommends that Council:

1. **Receives the Shire of York Risk Register Dashboard Report as at 8 February 2023, as presented in Appendix 1.**
2. **Notes the progress made to date regarding the actions contained in the Risk Register and that Officers will review the current system and provide options for future reporting.**
3. **Requests the Chief Executive Officer to present the next review of the Risk Register to the Audit and Risk Committee at its June 2023 meeting.**

Shire of York
Feb 2023

Asset Sustainability practices

Risk	Control
Moderate	Inadequate

Failure or reduction in service of infrastructure assets, plant, equipment or machinery. These include fleet, buildings, roads and playgrounds and all other assets during their lifecycle from procurement to disposal.

Actions	Due Date	Responsibility
Maintenance and repairs to be documented as part of AMP's to be redone	Oct-23	EMIDS
Develop asset replacement program for capital equipment and vehicles	Apr-23	EMIDS
Develop and implement asset management processes	Jun-23	EMIDS
Review Asset Management Plans and present to Council for noting	Dec-24	EMIDS
Prepare Asset Disposal Policy for adoption by Council	Jun-23	AGO
Prepare designs to repair Mackie Siding	Jun-23	EMIDS

Business & Community disruption

Risk	Control
High	Adequate

Failure to adequately prepare and respond to events that cause disruption to the local community and / or normal business activities. This could be a natural disaster, weather event, or an act carried out by an external party (e.g. sabotage / terrorism).

Actions	Due Date	Responsibility
Staffing - Illness, Attraction and Retention	Ongoing	EMCCS
IT Disaster Recovery Testing	16/08/2023	EMCCS

Failure to fulfil Compliance requirements (statutory, regulatory)

Risk	Control
Moderate	Adequate

Failure to correctly identify, interpret, assess, respond and communicate laws and regulations as a result of an inadequate compliance framework. This includes, new or proposed regulatory and legislative changes, in addition to the failure to maintain updated internal & public domain legal documentation.

Actions	Due Date	Responsibility
Establish and maintain a risk register	Ongoing	EMCCS
Review the Risk Register quarterly	Ongoing	EMCCS
Undertake training for staff that includes refresher training on policies and procedures including changes to the Local Government Act.	Ongoing	EMCCS
Review and refresh Compliance Calendar and report to AARC	Jun-23	EMCCS
Increasing number of dog attacks and compliance issues. Ranger absence. Risk to Level of Service	Jan-23	DSC
Bushfire Compliance - WHS Procedures	Ongoing	EMIDS
DMIRS new requirements for asbestos reporting	Ongoing	EMIDS
Review building compliance for PML with WACHS	Jun-23	DSC

Document Management processes

Risk	Control
Moderate	Effective

Failure to adequately capture, store, archive, retrieve, provide or dispose of documentation.

Actions	Due Date	Responsibility
Prepare project brief for records digitisation and disposal for consideration in 23/24 budget	Mar-23	AGC
iAuditor App being examined for storage and collection of WHS issues to promote ease of use and encourage compliance	Ongoing	ELT
Additional applications for compliance, WHS etc will dilute the 'one source of truth' record keeping system	Ongoing	EMCCS
Develop a culture of good record-keeping	Dec-23	EMIDS
Develop succession planning strategies	Ongoing	AGC

Employment practices

Risk	Control
Moderate	Adequate

Failure to effectively manage and lead human resources (full-time, part-time, casuals, temporary and volunteers).

Actions	Due Date	Responsibility
Ensure annual budget allocation to subscribe to WALGA HR assistance services	Ongoing	EMCCS
Implement annual training program for staff that includes refresher training on policies and procedures	Ongoing	EMCCS
Review Workforce Plan - informed gap analysis project	Jun-23	EMCCS
Complete Employee Manual for inclusion in employee inductions	Ongoing	ESO/HR
Include Employee Assistance Program process in Employee Manual.	Ongoing	EMCCS
Training needs identified as part of annual budget process	Ongoing	Executive & Supervisors

Engagement practices

Risk	Control
Low	Effective

Failure to maintain effective working relationships with the Community (including local Media), Stakeholders, Key Private Sector Companies, Government Agencies and / or Elected Members. This includes activities where communication, feedback or consultation is required and where it is in the best interests to do so.

Actions	Due Date	Responsibility
Implement the actions contained in the Disability Access and Inclusion Plan	1/06/2023	All staff
Develop new Engagement Framework	1/06/2023	EMCCS
Undertake Community Scorecard 2022/23	1/06/2023	EMCCS

Page 1

Shire of York
Feb 2023

Environment management

Risk	Control
Moderate	Adequate

Inadequate prevention, identification, enforcement and management of environmental issues.

Actions	Due Date	Responsibility
Identification of new and review of current hockey stick locations for endangered flora on roadsides	Ongoing	EMIDS
Develop a coordinated approach to disseminating information to new and existing residents re: waste and other environmental initiatives	Ongoing	EMIDS
Conduct a recycling education program once new waste collection contract is signed.	1/06/2023	EHO
Develop a strategy to manage corella control in the Shire of York.	Ongoing	DSC/EHO
Develop and implement procedures for the use of hazardous chemicals to include strategies for community consultation	1/06/2023	EMIDS

Errors, omissions & delays

Risk	Control
Moderate	Adequate

Errors, omissions or delays in operational activities as a result of unintentional errors or failure to follow due process including incomplete, inadequate or inaccuracies in advisory activities to customers or internal staff.

Actions	Due Date	Responsibility
Implement a staff training program that includes refresher training on procurement	Ongoing	EMCCS
Review Procurement Policy and Procedures	1/06/2023	FM
Works delayed by stock items	Ongoing	EMIDS
Undertake business planning to develop an asset register/recording system	1/03/2023	EMIDS
Develop the Intranet for use of staff to display current documents and information	1/06/2023	AGO
Mapping the customer expectations for works including action request process and looking for improvements	1/06/2023	EMIDS

External theft & fraud (Including Cyber)

Risk	Control
High	Inadequate

Loss of funds, assets, data or unauthorised access, (whether attempted or successful) by external parties, through any means (including electronic).

Actions	Due Date	Responsibility
Review procedures and provide refresher training on cash handling	1/06/2023	FM
Document clear internal processes and systems to report any potential fraud, that include anonymous reporting (Fraud & Corruption)	1/06/2023	EMCCS
Investigate cashless operations at the CFC Facility	1/06/2023	EMIDS
Review cybersecurity measures	1/06/2023	EMCCS/FM
Review departmental responsibilities around security and assigning tasks appropriately	1/06/2023	ELT

Management of Facilities / Venues / Events

Risk	Control
Low	Adequate

Failure to effectively manage the day to day operations of facilities, venues and / or events.

Actions	Due Date	Responsibility
Events Committee to undertake desktop review of event management procedures	Ongoing	CPC
Develop procedures for facility bookings and feedback - events especially.	Ongoing	AGC/EMIDS ESO
Booking forms to include details of Evacuation Plans for all facilities	1/12/2023	EMIDS ESO/AGC
Investigate online booking system to be integrated into Shire website for community bookings	1/06/2023	AGC
Review signage for all venues giving consideration to the Access and Inclusion Audit	Ongoing	DSC/PMO
YRCC sharing of information with teams re: bookings	Ongoing	CPC
Review of the Events procedures and processes to consider current risks such as terrorism	1/06/2023	CPC

IT or communication systems and infrastructure

Risk	Control
Moderate	Adequate

Disruption, financial loss or damage to reputation from a failure of information technology systems.
Instability, degradation of performance, or other failure of IT or communication system or infrastructure causing the inability to continue business activities and provide services to the community. This may or may not result in IT Disaster Recovery Plans being invoked.

Actions	Due Date	Responsibility
Implement regular testing regime for effectiveness of IT Disaster Recovery Plan	Ongoing	IT/P
Hot water system leak in server room to be rectified	Ongoing	EMIDS
Review levels of service with the external IT providers	Ongoing	EMCCS
Improve levels of service at Shire outstations (ie museum, swimming pool, depot, YRCC)	1/06/2023	IT/P

Misconduct

Risk	Control
Moderate	Effective

Intentional activities intended to circumvent the Code of Conduct or activities in excess of authority, which circumvent endorsed policies, procedures or delegated authority.

Actions	Due Date	Responsibility
Review stocktaking procedures for minor plant and equipment, portable and attractive items.	1/06/2023	FM
Complete Employee Induction Manual	Ongoing	EMCCS
Review Delegation Authority Register to ensure details of sub-delegations are accurate	Ongoing	AGC
Undertake training for all staff on HR policies and procedures	Ongoing	EMCCS
Develop and implement an annual staff training program that includes refresher training in HR policies and procedures.	Ongoing	EMCCS
Review cash handling procedures for outstations	1/12/2023	FM
Develop and implement a periodic fraud awareness training program for all staff	Ongoing	EMCCS
Declarations of conflict of interest when staff attend meetings with contractors where they could influence the work.	Ongoing	EMIDS
Review of purchasing segregation and delegations after receipt of OAG Management letter	1/06/2023	ELT
Need to confirm validity of driver licences with implicated employees	Annual	EMCCS

Page 2

Shire of York
Feb 2023

Project / Change management	Risk	Control
	Moderate	Adequate

Inadequate analysis, design, delivery and / or status reporting of change initiatives, resulting in additional expenses, time delays or scope changes.

Actions	Due Date	Responsibility
Develop and implement procedures around Grants Management	*1/06/2023*	*FM/EMIDS*
Consider grants management as part of the new Government Frameworks package	*1/06/2023*	*ELT*
Implement the new contractor/project management procedures and forms and train all relevant staff. Include this in annual refresher training	*1/06/2023*	*EMIDS*
Financial risk in completing projects in time to acquit against grants	*1/12/2023*	*EMIDS*

Safety and Security practices	Risk	Control
	Moderate	Adequate

Non-compliance with the Work Health and Safety Act, associated regulations and standards. It is also the inability to ensure the physical security requirements of staff, contractors and visitors. Other considerations are negligence or carelessness.

Actions	Due Date	Responsibility
Adopt the WHS Policy and Safety Manuals for staff	*1/06/2023*	*EMIDS/EMCCS*
Undertake training in WHS policies	*Ongoing*	*EMIDS/EMCCS*
CCTV to be installed at all buildings	*1/06/2023*	*IT/P/GEAM*
Update Evacuation Plans for the Depot to include new security gates and undertake emergency exercise	*1/06/2023*	*EMIDS*
Access register to be developed and maintained for Depot	*Ongoing*	*OAO*
MSDS for Depot missing - sheets and register to be updated	*1/06/2023*	*EMIDS ESO*
Undertake access and alarm upgrades at Administration, YRCC and Museum	*1/06/2024*	*EMIDS*
Undertake Emergency Evacuation testing at all facilities	*1/12/2023*	*EMIDS*
Front counter replacement to consider upgraded security measures	*1/06/2023*	*EMIDS*
Mechanism for flagging aggressive customers and properties.	*1/06/2023*	*ELT*
Bushfire volunteer safety inductions and training	*Ongoing*	*EMIDS ESO*
Continue to embed safety practices and processes into project work	*1/06/2023*	*EMIDS*

Supplier / Contract management	Risk	Control
	Moderate	Adequate

Inadequate management of external Suppliers, Contractors, IT Vendors or Consultants engaged for core operations. This includes issues that arise from the ongoing supply of services or failures in contract management & monitoring processes.

Actions	Due Date	Responsibility
Purchase orders need review to include terms and conditions to form a more comprehensive contract	*1/06/2023*	*FM*
Seek explanations for non-compliance and provide information on PO before authorisation	*Ongoing*	*ELT*
Implement regular monitoring of contracts register	*Ongoing*	*EMIDS*
Contractor Management Procedures	*Ongoing*	*EMIDS*

Asset Sustainability practices — Mar-23

Risk Context

Failure or reduction in service of infrastructure assets, plant, equipment or machinery.
Areas included in the scope are;

Potential causes include;	
Skill level & behaviour of operators	Unavailability of parts
Lack of trained staff	Lack of formal or appropriate scheduling (maintenance /
Outdated equipment	Unexpected breakdowns
Outdated Asset Management Plans	
Outdated Asset Management Framework	
Absence of Key Asset Documents (Plans etc.)	
Outdated Service Level Agreements	
Insufficient budget to maintain or replace assets	Portable attractive items inventory updates not completed

Key Controls	Type	Date	Rating
Procurement Process	Preventative	Mar-23	*Inadequate*
Disposal /Acquisition Process (Financial)	Preventative	Mar-23	*Inadequate*
Roads Routine Maintenance Program	Preventative	Mar-23	*Inadequate*
Plant Routine Maintenance Program	Preventative	Mar-23	*Adequate*
Buildings Routine Maintenance Program	Preventative	Mar-23	*Inadequate*
Asset Management Data Collection (RAMS and Finance)	Preventative	Mar-23	*Inadequate*
Asset replacement program (broad range of asset classes)	Preventative	Mar-23	*Inadequate*
Statutory requirements (licencing, etc) in place	Preventative	Mar-23	*Inadequate*
All maintenance and repairs are documented	Preventative	Mar-23	*Inadequate*
Reactive maintenance	Recovery	Mar-23	*Inadequate*
Insurance	Recovery	Mar-23	*Effective*
Equipment hire available if needed	Recovery	Mar-23	*Effective*
Training provided and qualifications updated.	Preventative	Mar-23	*Adequate*
		Overall Control Ratings:	*Inadequate*

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
EMCCS	Yes	Yes	Yes	Yes	Yes	Procurement review underway
EMIDS	Partial	Partial	Partial	Yes	Yes	Finance has a disposal process in place - asset register. Policy needed. EEDO to pass info on to EMIDS/Finance
EMIDS	Yes	Partial	Partial	Yes	Yes	
WS	Yes	Partial	Yes	Yes	Yes	Plant replacement program being developed
DSC / PMO	Partial	Partial	Yes	Yes	Yes	No routine maintenance program however when rental inspections are carried out, a list of maintenance jobs is created. Plan needed. Building asset management
ETO	Partial	Yes	Yes	Partial	Yes	Training needs to be updated.
EMIDS	Partial	Partial	Partial	Yes	Yes	Asset management processes incomplete
IT/P	Yes	Yes	Yes	Yes	Yes	
EMIDS	Yes	Partial	Partial	Yes	Yes	Documented through finance processes / action requests. Need to be registered.
TSO	Yes	Yes	Yes	Yes	Yes	As soon as maintenance issue is reported a P/O is completed.
IT/P	Partial	Yes	Yes	Partial	Yes	Claims not always submitted to Payroll Officer
EMIDS	Yes	Yes	Yes	Yes	Yes	
EMCCS / FM	Yes	Partial	Yes	Partial	Partial	Training identified as part of annual budget process. Need training regarding procurement and portable items, Maintenance and repairs.

Actions	Due Date	Responsibility	Status of Actions	Comments
~~Training needs submitted to 2019/20 Budget process~~	~~Mar-19~~	~~EMIDS~~	**Complete**	
~~Develop annual training program for staff that includes refresher training in procurement~~	~~Jun-19~~	~~EMCCS~~	**Complete**	
~~Review Asset Management Plans and submit for adoption by Council~~	~~Jun-19~~	~~ETO~~	**Complete**	Submitted to June OCM.
~~Develop and implement procedure for submitting insurance claims~~	~~Dec-19~~	~~IT/P~~	**Complete**	Circulated by Matthew
~~Undertake building risk assessments in consultation with LGIS~~	~~Dec-19~~	~~DSC/TSO/PMO~~	**Complete**	Now that asset management plans have been adopted.
~~Formalise Asset Disposal Process~~	~~Complete~~	~~EMIDS~~	**Not Started**	Will commence once AMPs received
~~Develop and implement Insurance Claims Checklist~~	~~Complete~~	~~IT/P~~	**Not Started**	Not yet commenced, to be undertaken by new Graduate Engineer - Asset Management as part of their
~~Open Space Asset Management Plan to be prepared~~	~~Complete~~	~~EMIDS~~	**Not Started**	Formal processes not yet commenced
Maintenance and repairs to be documented as part of AMP's to be redone	Oct-23	EMIDS	**Complete**	
Develop asset replacement program for capital equipment and vehicles	Apr-23	EMIDS	**Complete**	
Develop and implement asset management processes	Jun-23	EMIDS	**In progress**	Presented to ELT 19 August 2022
Review Asset Management Plans and present to Council for noting	Dec-24	EMIDS	**In progress**	Transport Asset Management Plan to be presented Council May 2023, Open Space Asset Management
Prepare Asset Disposal Policy for adoption by Council	Jun-23	AGO	**In progress**	Draft to be presented to AARC 22/23
Prepare designs to repair Mackie Siding	Jun-23	EMIDS	**In progress**	Designs for decommission, replacement and improvement have been undertaken and costed. These

Consequence Category	Risk Ratings	Rating
Financial / Reputational	***Consequence:***	*Minor (2)*
	Likelihood:	*Possible (3)*
	Overall Risk Ratings:	*Moderate*

Business & Community disruption — Mar-23

Risk Context

Failure to adequately prepare and respond to events that cause disruption to the local community and / or normal business activities. This could be a natural disaster, weather event, or an act carried out by an external party (e.g. sabotage / terrorism).

This includes;
-Lack of (or inadequate) emergency response / business continuity plans.
-Lack of training for specific individuals or availability of appropriate emergency response.
-Failure in command and control functions as a result of incorrect initial assessment or untimely awareness of incident.
-Inadequacies in environmental awareness and monitoring of fuel loads, curing rates etc
This does not include disruptions due to IT Systems or infrastructure related failures - refer "Failure of IT & communication systems and infrastructure".

Potential causes include:

Cyclone, storm, fire, earthquake, flooding	Extended utility outage (electricity, communications etc.)
Terrorism / sabotage / criminal behaviour	Economic Factors
Epidemic / Pandemic	Loss of key staff
Loss of suppliers	Loss of key infrastructure

Key Controls	Type	Date	Rating
Functional Local Emergency Management Arrangements (LEMA)	Preventative	Mar-23	*Effective*
Bushfire Risk Management Program	Preventative	Mar-23	*Effective*
Volunteer management & training (Volunteer inductions TBC)	Preventative	Mar-23	*Adequate*
Community recovery preparation	Preventative	Mar-23	*Inadequate*
Community fire prevention education	Preventative	Mar-23	*Effective*
Business Continuity Framework (Policy, Procedures & Plans)	Preventative	Mar-23	*Effective*
Internal Emergency Management Plan (Emergency Management Procedures and Evacuation Plans)	Preventative	Mar-23	*Inadequate*
Generator	Recovery	Mar-23	*Inadequate*
I.T. Disaster Recovery Plan	Recovery	Mar-23	*Effective*
		Overall Control Ratings:	***Adequate***

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
CESM	Yes	Yes	Yes	Yes	Yes	
CESM	Yes	Yes	Yes	Yes	Yes	
EMIDS	Yes	Yes	Yes	Yes	Yes	
EMIDS	Yes	Yes	Yes	Yes	Yes	
EMIDS	Yes	Yes	Yes	Yes	Yes	
IT/P	Yes	Partial	Yes	Yes	Yes	As part of IT Security Plan, Needs work
DSC	Partial	Partial	Partial	Partial	Yes	Training to be undertaken. Equipment now. Changes to be reviewed.
EMIDS	No	No	No	No	Yes	The Shire does not own a generator for Town Hall - Emergency services
IT/P	Yes	Yes	Yes	Yes	Yes	

Actions	Due Date	Responsibility
~~Undertake an emergency evacuation drill~~	~~Complete~~	~~TSO~~
~~Develop and document a Business Continuity Framework~~	~~Complete~~	~~EMCCS~~
~~Finalise and implement IT Security Plan~~	~~Complete~~	~~IT/P~~
~~Engage a BRMPC 4 days per fortnight to develop a BRMP~~	~~Complete~~	~~BRMPC~~
~~Distribute and seek feedback from staff regarding Business Continuity Framework~~	~~Jun-19~~	~~IT/P~~
~~Assign funding in the budget to purchase a generator~~	~~Superseded~~	~~EMIDS~~
~~Schedule testing of IT Security Plan and Business Continuity Framework procedures for effectiveness~~	~~Complete~~	~~IT/P~~
~~Develop organisational Business Continuity Plan in consultation with LGIS~~	~~Dec-20~~	~~EMCCS~~
~~Investigate the installation of infrastructure to facilitate hire of a generator in the event of an emergency~~	~~Superseded~~	~~DSC~~
~~Arrange replacement of UPS and Server~~	~~Complete~~	~~IT/P~~
~~Review IT Disaster Recovery Plan~~	~~Complete~~	~~IT/P~~
~~Covid Work Plan~~	~~Ongoing~~	~~EMCCS~~
Staffing - Illness, Attraction and Retention	Ongoing	EMCCS
IT Disaster Recovery Testing	Aug-23	EMCCS

Status of Actions	Comments
Complete	Action plan developed and being implemented.
Complete	As part of IT Security Plan
Complete	Security Plan developed. New IT Service Provider engaged.
Complete	BRMPC engaged. Plan developed and submitted to Council. Works in progress.
Complete	~~No comments received - commence testing phase~~
~~Not progressed - superseded~~	~~Due to changeover in EMIDS.~~
~~Complete - test successful~~	~~Process to be managed by IT Provider~~
Complete	~~Completed Dec 2021 presented to AARC March 2 2021 and OCM March 23~~
~~To be commenced~~	~~Review to fit into org BCP~~
Complete	~~Server and UPS at end of life - to be replaced prior to implementation of Altus Payroll, Procurement and Records.~~
To be commenced	COVID BCP prepared and adopted - wider BCP completed, Review still required
Complete	Adjusts in accordance with State Government Mandates
Ongoing	Recruitment and marketing processes under review to provide attraction. Housing Strategy to be developed to support key staff. Flexible Working Policy to be developed to capture offerings already in place to demonstrate to potential employees the value of working at the Shire. Wellness initiatives being included in recruitment advertisements. Advertising of internal secondment and higher duties opportunities.
Ongoing	Latest test conducted 26 August 22. Altus products cannot be tested in the sandpit environment. Scheduling further testing in live environment. Action reset to 2023 for yearly action. Focus Networks contacted re: testing for live sessions. NFA at Feb 23

Consequence Category	Risk Ratings	Rating
Service Interruption / Reputation	***Consequence:***	*Moderate (3)*
	Likelihood:	*Likely (4)*
	Overall Risk Ratings:	***High***

Failure to fulfil Compliance requirements (statutory,	Mar-23
Risk Context	
Failure to correctly identify, interpret, assess, respond and communicate laws and regulations as a result of an inadequate compliance It includes (amongst others) the Local Government Act, Planning & Development Act, Health Act, Building Act, Dog Act, Cat Act,	

Potential causes include;	
Lack of training, awareness and knowledge	Lack of Legal Expertise
Staff / Councillor Turnover/Vacancies and General Resourcing	No Compliance Officer or person responsible for Compliance oversight and enforcement
Inadequate record keeping/ failure of corporate electronic systems	Breakdowns in the tender or procurement process
Ineffective policies & processes	Ineffective monitoring of changes to legislation

Key Controls	Type	Date	Rating
Compliance framework / calendar	Preventative	Mar-23	*Inadequate*
'Advice' monitoring (subscriptions & memberships)	Preventative	Mar-23	*Effective*
Annual Compliance Return	Detective	Mar-23	*Effective*
Standardised forms & check sheets (Compliance)	Preventative	Mar-23	*Adequate*
State Administrative Tribunal / Ombudsman	Recovery	Mar-23	*Adequate*
Record-keeping	Preventative	Mar-23	*Inadequate*
FMR and Audit Reg 17 Reviews undertaken by independent auditor	Detective	Mar-23	*Effective*
Risk and WHS Working Group	Detective	Mar-23	*Adequate*
		Overall Control Ratings:	***Adequate***

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
EMCCS	Yes	Partial	Yes	Yes	Yes	Presented to Audit Ctee 050319
CEO	Yes	Yes	Yes	Yes	Yes	Annual budget allocation for memberships
EMCCS	Yes	Yes	Yes	Yes	Yes	Completed on time and with accuracy
AGC	Yes	Partial	Yes	Partial	Yes	On-going process of development
CEO	Yes	Partial	Yes	Partial	Yes	Legislated. Informal process.
AGC	Yes	Yes	Yes	Partial	Yes	State Records Act 2000
EMCCS	Partial	Yes	Yes	Yes	Yes	A budget allocations submitted to budget process.
EMCCS	Yes	Yes	Yes	Partial	Yes	Group established and meets bi-monthly. OSH working group to be established.

Actions	Due Date	Responsibility
~~Develop a Compliance Policy~~	~~Complete~~	~~EMCCS~~
~~Develop an Internal Control Policy~~	~~Complete~~	~~EMCCS~~
~~Amend Code of Conduct to require alleged breaches to be reported to the CEO.~~	~~Complete~~	~~EMCCS~~
~~Complete Compliance Calendar~~	~~Complete~~	~~EMCCS~~
~~Address risks outlined in Financial Management Review~~	~~Complete~~	~~FM~~
~~Include documentation of procedures as a KPI for all staff~~	~~Complete~~	~~Executive & Supervisors~~
~~Establish an OSH Working Group separate to Risk Working Group~~	~~Complete~~	~~EMIDS~~
~~Undertake training for elected OSH Representatives.~~	~~Complete~~	~~EMIDS~~
~~Review structure of AARC in line with new LG Act~~	~~Complete~~	~~FM~~
~~Develop a process for internal audit.~~	~~Jun-19~~	~~EMCCS~~
Establish and maintain a risk register	Ongoing	EMCCS
Review the Risk Register quarterly	Ongoing	EMCCS
Undertake training for staff that includes refresher training on policies and procedures	Ongoing	EMCCS
Review and refresh Compliance Calendar and report to AARC	Jun-23	EMCCS
Increasing number of dog attacks and compliance issues. Ranger absence. Risk to Level	Jan-23	DSC
Bushfire Compliance - WHS Procedures	Ongoing	EMIDS
DMIRS new requirements for asbestos reporting	Ongoing	EMIDS
Review building compliance for PML with WACHS	Jun-23	DSC

Status of Actions	Comments
Complete	Policy adopted by Council in September 2017.
Complete	Policy adopted by Council in September 2017.
Complete	Code of Conduct amended and presented to the Risk & OSH Working Group.
On-going	Risk training undertaken and register established with input from staff. Risks identified in previous Reg
Complete	Compliance calendar established and populated. To be moved to new Attain platform
Complete	All issues addressed. On-going process of documentation of procedures.
To be actioned	In 2018/19
Complete	Included in Performance Review Process undertaken in May.
On-going	Presented quarterly to Audit and Risk Committee
On-going	ELT met in August to prepare training program for 22/23. Full program yet to be rolled out due to other
Complete	Complete
To be actioned	Training programs are irregular - to be arranged asap.
Ongoing	Attain software purchased and implemented for compliance forms such as annual declarations.
To be actioned	New LG Act not yet in place. Audit and Risk Committee interim structure to commence following October
Current	Two (2) new Rangers have now been employed which is resulting in a an external change in perception
Ongoing	Compliance with WHS Act for volunteers. Stage one training and recording completed by end
To be actioned	Develop an awareness of new recording and reporting requirements for both staff and contractors (waste
New	Meeting was held with WACHS in February to determine liability for compliance items. This will be

Consequence Category	Risk Ratings	Rating
Reputation, Compliance	***Consequence:***	*Moderate (3)*
	Likelihood:	*Unlikely (2)*
	Overall Risk Ratings:	***Moderate***

Document Management processes — Mar-23

Risk Context

Failure to adequately capture, store, archive, retrieve, provide or dispose of documentation.

This includes:
-Contact lists.
-Procedural documents, personnel files, complaints.
-Applications, proposals or documents.
-Contracts.
-Forms or requests.

Potential causes include;

Incompatible systems	Outdated record keeping practices
Inadequate access and / or security levels	Lack of system/application knowledge
Inadequate Storage facilities (including climate control)	High workloads and time pressures
High Staff turnover	Standard Operating Policies not followed

Key Controls	Type	Date	Rating
Document receipt process (scanned, registered & dated)	Preventative	Nov-22	*Effective*
Documentation archival process	Preventative	Nov-22	*Adequate*
Records Management Policy / Processes / Manual	Preventative	Nov-22	*Effective*
Records Management Policy / Processes / Manual	Preventative	Nov-22	*Effective*
Document disaster recovery plan	Recovery	Nov-22	*Adequate*
Electronic records back up	Recovery	Nov-22	*Effective*
Induction Process includes records management training	Preventative	Nov-22	*Effective*
Policy review processes	Preventative	Nov-22	*Inadequate*
Exit process	Preventative	Nov-22	*Inadequate*
		Overall Control Ratings:	***Effective***

Actions	Due Date	Responsibility
~~More training for staff on records eg: entering & recording~~	~~Superseded~~	~~AGC~~
~~Develop annual training program for staff that includes refresher training on records~~	~~Jun-19~~	~~EMCCS~~
~~Undertake training for records management~~	~~Complete~~	~~AGC~~
~~Develop Records Management Strategic Plan~~	~~Complete~~	~~AGC~~
~~Address the need for more procedures to ensure staff accountability~~	~~Complete~~	~~AGC~~
~~Review Social Media Strategy~~	~~Complete~~	~~AGC~~
~~Investigate software options for records digitisation and disposal~~	~~Complete~~	~~AGC~~
~~Update the Records Keeping / Management Plan~~	~~Complete~~	~~AGC~~
Prepare project brief for records digitisation and disposal for consideration in 23/24	Mar-23	AGC
iAuditor App being examined for storage and collection of WHS issues to promote ease	Dec-23	EMIDS
Additional applications for compliance, WHS etc will dilute the 'one source of truth' record keeping system	Ongoing	AGC
Develop a culture of good record-keeping	Ongoing	ELT
Develop succession planning strategies	Ongoing	EMCCS

Consequence Category	Risk Ratings	Rating
Compliance / Reputation	***Consequence:***	*Minor (2)*
	Likelihood:	*Possible (3)*
	Overall Risk Ratings:	***Moderate***

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
RO	Yes	Yes	Yes	Yes	Yes	Clear process implemented
AGC	Yes	Yes	Partial	Yes	Yes	Part of record keeping plan
AGC	Yes	Yes	Partial	Yes	Yes	Have commenced working on procedures
RO	Yes	Yes	Partial	Yes	Yes	Strategic Records management plan being developed
IT/P / RO	Yes	Yes	Yes	Yes	Yes	
IT/P	Yes	Yes	Yes	Yes	Yes	
RO	Yes	Yes	Yes	Yes	Yes	
IT/RO						

Status of Actions	Comments
On-going	Records training undertaken for general staff. Administrator training undertaken using SynergySoft. New employees are now inducted in records training eg: entering & recording.
Complete	
Ongoing	Included as part of annual training refreshers. FOI & Records Info Session conducted December 2019.
Complete	Completed February 2020
Complete	Records procedures documented and reviewed regularly. OS records reports distributed monthly to EMG and staff.
In progress	Included in all inductions. Annual return requirement to acknowledge compliance. Annual refresher training. Additional staffing identified for records to assist other departments.
Ongoing	Workforce Management Plan
Completed	Record keeping software to be purchased in 22/23 that captures social media records
Completed	Further investigation may be required based on ELT priorities and budget constraints
Complete	Aiming for December OCM
To be actioned	Delayed due to key staff long service leave and change in AGC. Will be completed for 23/24 budget preparation
In progress	Investigating how this can be linked with the records system
Ongoing	Regular reminders through training. Check compatibility with new software and engage records team as a stakeholder in decision making

Employment practices — Mar-23

Risk Context

Failure to effectively manage and lead human resources (full-time, part-time, casuals, temporary and volunteers).

This includes:
- Not having appropriately qualified or experienced people in the right roles.
- Insufficient staff numbers to achieve objectives.
- Breaching employee regulations.
- Discrimination, harassment & bullying in the workplace.
- Poor employee wellbeing (causing stress).
- Key person dependencies without effective succession planning in place.
- Industrial activity.

Potential causes include;

Leadership failures	Ineffective performance management programs or procedures
Key / single-person dependencies	Limited staff availability - labour market conditions
Poor internal communications / relationships	Inadequate induction practices
Ineffective Human Resources policies, procedures and practices	Inconsistent application of policies

Key Controls	Type	Date	Rating
Induction process (including Code of Conduct Component)	Preventative	Mar-23	*Adequate*
Staff training and education program	Preventative	Mar-23	*Inadequate*
Performance Management (appraisals / reviews)	Preventative	Mar-23	*Effective*
Staff Exit process	Preventative	Mar-23	*Inadequate*
Workforce Planning	Preventative	Mar-23	*Adequate*
Employee Assistance Program & HR support	Recovery	Mar-23	*Effective*
Robust Recruitment Processes	Preventative	Mar-23	*Effective*
Advice and Support Available for General HR Matters	Preventative / Recovery	Mar-23	*Adequate*
		Overall Control Ratings:	*Adequate*

Actions	Due Date	Responsibility
~~Develop and implement staff exit procedure~~	~~Dec-17~~	~~ESOCCS~~
~~Review Performance Management Process~~	~~Ongoing~~	~~EMCCS~~
~~Update Uniform Policy with consideration to OSH~~	~~Complete~~	~~EMG~~
~~Develop Heat Management Policy for staff consultation.~~	~~Complete~~	~~EMIDS/OSH~~
~~Develop and implement improvements for internal communication.~~	~~Complete~~	~~EMG~~
~~Implement OSH Management Plans~~	~~Complete~~	~~EMIDS/OSH~~
~~Induction process updated~~	~~Complete~~	~~ESO/HR~~
~~Update Employee Code of Conduct~~	~~Complete~~	~~EMCCS~~
Ensure annual budget allocation to subscribe to WALGA HR assistance services	Ongoing	EMCCS
Implement annual training program for staff that includes refresher training on policies and procedures	Ongoing	EMCCS
Review Workforce Plan - informed gap analysis project	Jun-23	EMCCS
Complete Employee Manual for inclusion in employee inductions	Ongoing	ESO/HR
Include Employee Assistance Program process in Employee Manual.	Ongoing	EMCCS
Training needs identified as part of annual budget process	Ongoing	Executive & Supervisors

Consequence Category	Risk Ratings	Rating
Compliance, Health, Reputational, Financial	***Consequence:***	*Moderate (3)*
	Likelihood:	*Possible (3)*
	Overall Risk Ratings:	*Moderate*

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
EMCCS	Yes	Yes	Yes	Yes	Yes	
EMCCS	Yes	Partial	Yes	Yes	Yes	
EMCCS	Yes	Yes	Yes	Yes	Yes	
EMCCS	Partial	Partial	Partial	No	No	
EMCCS	Yes	Yes	Yes	Yes	Yes	
EMCCS	Yes	Yes	Yes	Yes	Yes	
EMCCS	Yes	Yes	Yes	Yes	Yes	
EMCCS	Yes	Yes	Yes	Yes	Yes	Communication and training

Status of Actions	Comments
Under Review	Induction checklist developed. Employee Manual complete. A review of this manual is a KPI of the ESO/HR
In Progress	LGIS have limited their EAP service. A temporary service has been put in place while a formal process for the delivery of this service can be completed. EMCCS negotiating with LGIS to have the full service returned
Ongoing	As part of annual budget process, RO's requested to identify training needs within each business area for inclusion in budget. Not all RO's responded in the first year. Performance appraisal process also includes discussion regarding training needs.
Complete	Checklist created for outgoing staff.
Complete	Procedure in place and implemented. RO's provided with training. A new process to be considered with Integrated Planning and Reporting tool.
Ongoing	2022/23 Budget includes allocation for subscription. WALGA HR services used extensively
Ongoing	Draft training program developed for 22/23. To be rolled out in 2023. Staff training for managing difficult customers, suicide awareness prioritised due to current climate
Complete	Policy updated to address safety matters in consultation with OSH Working Group
In Progress	Workforce Plan last adopted April 2017 - Gap analysis has informed organisational realignment which is year one of new workforce plan. Policy O9 Equal Employment Opportunity and subsequent Management Plan was adopted by Council December 22 Resolution 131222. Review of the Workforce Plan was set as a KPI for the A/EMCCS however no progress was made. Target reset to May 2023 due to pressure of ongoing audit, staff absences and recruitment. This work will now be outsourced.
Complete	
Complete	
Complete	
Complete	All new induction requirements are included in Induction forms and processes
Complete	To be adopted by ELT

Engagement practices — Mar-23

Risk Context

Failure to maintain effective working relationships with the Community (including local Media), Stakeholders, Key Private Sector Companies, Government Agencies and / or Elected Members. This includes activities where communication, feedback or consultation is required and where it is in the best interests to do so.

For example;
-Following up on any access & inclusion issues
-Infrastructure Projects
-Local planning initiatives
-Strategic planning initiatives
This does not include instances whereby Community expectations have not been met for standard service provisions such as Community Events, Library Services and / or Bus/Transport services.

Potential causes include;

Relationship breakdowns with community groups	Short lead times lack of planning
Leadership inattention to current issues	Miscommunication / poor communication
Inadequate documentation or procedures	Inadequate Regional or District Committee attendance.
Lack of clarity around roles and responsibilities	
Budget / funding issues	Inadequate involvement with, or support of community groups

Key Controls	Type	Date	Rating
Community engagement framework (committees, forums & workshops)	Preventative	Jun-23	*Effective*
Social media management	Preventative	Mar-23	*Effective*
Support local Volunteer groups	Preventative	Mar-23	*Inadequate*
Community communications (public notices / local papers / website / message boards	Preventative	Mar-23	*Effective*
Complaints management process	Recovery	Mar-23	*Effective*
Community involvement in decision making	Preventative	Mar-23	*Effective*
Well developed job descriptions and clear communication around roles	Preventative	Jun-23	*Adequate*
Customer Service Charter	Preventative	Mar-23	*Effective*
		Overall Control Ratings:	*Effective*

Actions	Due Date	Responsibility
~~Develop and implement procedures to establish and maintain a FB page~~	~~Complete~~	~~CEO~~
~~Ensure timelines allow for appropriate communication of information, deadlines etc.~~	~~Complete~~	~~All staff~~
~~More training on the complaints policy and procedures.~~	~~Superseded~~	~~All staff~~
~~Work with Wheatbelt Volunteer hub to increase service provision to support volunteer groups~~	~~Complete~~	~~EMCCS / CEDO~~
~~Develop an annual training program for staff that includes refresher training on the Customer Service Charter and Complaints Procedures.~~	~~Jun-19~~	~~EMCCS / CEDO~~
~~Develop Statement of Business Ethics.~~	~~Jun-19~~	~~EMCCS~~
~~Provide progress report on actions to date for 2020/21 budget.~~	~~Complete~~	~~PO~~
~~Undertake Residents' Satisfaction Survey.~~	~~Complete~~	~~EMG~~
Implement the actions contained in the Disability Access and Inclusion Plan	Jun-23	All staff
Develop new Engagement Framework	Jun-23	EMCCS
Undertake Community Scorecard 2022/23	Jun-23	EMCCS

Consequence Category	Risk Ratings	Rating
Reputation	***Consequence:***	*Minor (2)*
	Likelihood:	*Unlikely (2)*
	Overall Risk Ratings:	*Low*

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
CEO	Yes	Yes	Yes	Yes	Yes	Framework and policy adopted by Council.
CEO	Yes	Yes	Yes	Yes	Yes	
CEDO	Yes	Partial	Yes	Partial	Yes	No policy position other than the Community Grants Funding. Lot of work conducted around
CEO	Yes	Yes	Yes	Yes	Yes	
AGC	Yes	Yes	Yes	Yes	Yes	Policy adopted by Council and also included in Customer Service Charter. Training for staff
EMG	Yes	Yes	Yes	Yes	Yes	FB promotion / Community matters
ELT						
AGC	Yes	Yes	Yes	Yes	Yes	FB Promotion

Status of Actions	Comments
Complete	Market Creations engaged to manage FB and Instagram accounts. Allocation in 2018/19 budget.
Complete	Media deadlines distributed. Email reminders. Community Consultation and Engagement Plans developed for significant projects.
To be actioned	Complaints register maintained. Complaints Policy reviewed and adopted October 2016.
Complete	Proposal submitted to 2018/19 Budget process for a hub of WVN to be set up in York. Not considered a priority at this stage. YRCC Project Officer will assist clubs.
Complete	Incorporated into training with Marg Hemsley in March 2019
Complete	Developed as part of the Procurement Review and uploaded to website
In progress	Customer Service Area - all purchases completed
In progress	Original project timing incorrect - Survey conducted in June 21 with final report to Council in
In progress	Actions continuing. Front counter and CBD Accessibility Upgrades scheduled for 22/23/24
In progress	New engagement requirements under the Local Government Act are being investigated.
In progress	Survey is now complete and results being collated

Environment management — Mar-23

Risk Context

Inadequate prevention, identification, enforcement and management of environmental issues.

The scope includes;
-Lack of adequate planning and management of erosion issues.
-Failure to identify and effectively manage contaminated sites (including groundwater usage).
-Waste facilities (landfill / transfer stations).
-Weed & mosquito / Vector control.
-Ineffective management of water sources (reclaimed, potable)
-Illegal dumping.
-Illegal clearing / land use.

Potential causes include;

Inadequate management of landfill sites	Inadequate reporting / oversight frameworks
Lack of understanding / knowledge	Community apathy
Inadequate local laws / planning schemes	Differing land tenure (land occupancy or ownership conditions)
Lack of understanding of cultural requirements for landowners	
Prolific extractive industry (sand, limestone, etc.)	Competing land use (growing population vs conservation)

Key Controls	Type	Date	Rating
~~Environment management program~~	Preventative	Mar-23	*Adequate*
Community education & engagement e.g. schools / new home-owner packs	Preventative	Mar-23	*Inadequate*
Support volunteer environment management groups	Preventative	Mar-23	*Adequate*
Environmental monitoring, testing and inspection programs	Preventative	Mar-23	*Effective*
Encourage recycling efforts (glass, oil, batteries, etc.)	Recovery	Mar-23	*Adequate*
Clearing permits for road works obtained	Preventative	Mar-23	*Adequate*
Mosquito management program	Preventative	Mar-23	*Adequate*
RAP Working to inform education of landowners	Preventative	Mar-23	*Inadequate*
Standpipe water use education and regulation	Preventative	Mar-23	*Effective*
			Adequate

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
EHO	No	Yes	Yes	Partial		Informal but not documented.
EHO	No	No	No	No		Social media promotion/Community matters/New home owner packs available but not well know. Have a pack for home builders. Coordinated approach needed.
EMIDS	No	Partial	Partial	Partial	Yes	May be a lack of awareness due to lack of education
EHO	Yes	Yes	Yes	Yes	Yes	
TSO	Yes	Yes	Yes	Yes	Yes	Controlled by Waste Transfer Station management. All households are encouraged to use their recycling bin. Mobile Muster for drop offs also at Shire office. As part of Waste management contract??? Garage sale trail.
DAO	No	Partial	Yes	Yes	Yes	Have attended Environmental Planning Tool training through WALGA. Have yet to complete a desktop assessment.
EHO	No	Yes	No	No	Yes	Mosquito spraying undertaken as required
						Not a holistic approach
FO Rates & Debtors	Yes	Yes	Yes	Yes	Yes	

Actions	Due Date	Responsibility	Status of Actions	Comments
~~Develop and document process for road clearing permits~~	~~Complete~~	~~DAO~~		
~~Currently looking into a mosquito program & purchasing a fogger.~~	~~Superseded~~	~~EHO~~		
~~Undertake mosquito fogging on an as needs basis. Looking into purchasing fogger.~~	~~Complete~~	~~EHO~~		
~~Undertake recruitment process for Containers for Change site~~	~~Complete~~	~~EMIDS~~	**Ongoing**	Contract is in place. EHO to consider options and formulate program
~~Implement regular street sweeping program to address bird droppings in CBD~~	~~Complete~~	~~EHO/EMIDS~~	**Ongoing**	Report passed by Council at Feb 23 OCM to commit current and future budget towards regional initiatives
~~Engage contractor to undertake pigeon culling~~	~~Complete~~	~~EHO~~	**Not started**	No evidence of this work commencing
Identification of new and review of current hockey stick locations for endangered flora on	Ongoing	EMIDS		
Develop a coordinated approach to disseminating information to new and existing residents re: waste and other environmental initiatives	Ongoing	EMIDS	**Ongoing**	Street sweeping is in place, supported with adjustments to starting hours and noise control. Pigeon excreta remains an issue where it is able to accumulate in large quantities on buildings. Specialist contractors are being engaged to conduct removal with regulations not dissimilar to the process for asbestos removal. Contractor coming early Sept
Conduct a recycling education program once new waste collection contract is signed.	Jun-23	EHO	**Ongoing**	Reactive measures in place supported by budget for 22/23. This will continue into future years.
Develop a strategy to manage corella control in the Shire of York.	Ongoing	DSC/EHO	**Ongoing**	Identification of locations of endangered flora complete however this needs to be reconciled with existing hockey stick locations
Develop and implement procedures for the use of hazardous chemicals to include strategies for community consultation	Jun-23	EMIDS	**Ongoing**	

Consequence Category	Risk Ratings	Rating
Environment, Reputation, Financial	*Consequence:*	*Minor (2)*
	Likelihood:	*Possible (3)*
	Overall Risk Ratings:	***Moderate***

Errors, omissions & delays — Mar-23

Risk Context

Errors, omissions or delays in operational activities as a result of unintentional errors or failure to follow due process including incomplete, inadequate or inaccuracies in advisory activities to customers or internal staff.

Examples include;
-Incorrect planning, development, building, community safety and Emergency Management advice
-Incorrect health or environmental advice
-Inconsistent messages or responses from Customer Service Staff
-Any advice that is not consistent with legislative requirements or local laws.
-Human error
-Inaccurate recording, maintenance, testing or reconciliation of data.
-Inaccurate data being used for management decision-making and reporting.
-Delays in service to customers
This excludes process failures caused by inadequate / incomplete procedural documentation - refer "Inadequate Document Management Processes".

Potential causes include;

Human error	Incorrect information
Inadequate formal procedures or training	Miscommunication
Lack of trained staff	Work pressure / stress
Unrealistic expectations from community, council or management	Health issues
Lack of discoverable information	
Poor use of check sheets / FAQ's	Lack of understanding

Key Controls	Type	Date	Rating
Procurement Policy	Preventative	Mar-23	*Adequate*
Training for staff with purchasing authority	Preventative	Mar-23	*Effective*
Documented procedures / monitoring	Preventative	Mar-23	*Adequate*
Staff training program (mentoring, formal & on-the-job)	Preventative	Mar-23	*Adequate*
Documented information sheets / website information / FAQ's to assist customer service staff in providing advice to customers	Preventative	Mar-23	*Adequate*
External consultants such as legal, human resources, heritage	Preventative	Mar-23	*Effective*
Complaints resolution process	Recovery	Mar-23	*Effective*
Customer Management System	Preventative	Mar-23	*Inadequate*
Customer Service Charter	Preventative	Mar-23	*Effective*
Review and monitoring of outstanding correspondence	Preventative	Mar-23	*Adequate*
Centralised information systems which allows the discovery and use of the most up to date information			
		Overall Control Ratings:	*Adequate*

Actions	Due Date	Responsibility
~~Review Procurement Policy to ensure consistent quotation, probity & record keeping requirements and treatment of contract variations~~	~~Complete~~	~~EMCCS~~
~~Provide further training to staff with purchasing authority to enforce the need to adhere to purchasing policies.~~	~~Complete~~	~~EMCCS~~
~~Identify specific staff training needs for inclusion in the annual budget process~~	~~Complete~~	~~EMG~~
~~Include an allocation in the annual budget to provide for external advice.~~	~~Complete~~	~~EMG~~
~~Formalise the process for EMG review of outstanding correspondence~~	~~Complete~~	~~RO~~

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
EMCCS	Yes	Yes	Yes	Partial	Yes	Need review based on OAG feedback
EMCCS	Yes	Yes	Yes	Yes	Yes	RFQ Training to be conducted
All staff	Partial	Partial	Yes	Yes	Yes	Procedures in the process of being documented
EMG	Yes	Yes	Yes	Yes	Yes	Training needs identified and included in Staff Training Plan
AGC	Yes	Partial	Yes	Yes	Yes	FAQ's currently in process. Website review.
EMG	Yes	Yes	Yes	Yes	Yes	
EMCCS	Yes	Yes	Yes	Yes	Yes	Complaints Policy adopted. Procedures form part of the complaints policy. Register - Synergy based
EMIDS						Lots of different approaches
EMCCS	Yes	Yes	Yes	Yes	Yes	Charter adopted by Council.
EMG	Yes	Partial	Yes	Partial	Yes	OS records distributed monthly

Status of Actions	Comments
Complete	Policy was reviewed, amended and adopted by Council in September 2017. RFQ and RFT documents have been amended to include reference to variations.
Complete	EMCCS and FM met with individual business units to provide further training and answer questions regarding procurement. Officers authorising payments now check for non-compliance with Policy and send an email memo to the responsible officer noting non-compliance. Moore Stephens noted significant improvement during 2017/18 Interim Audit.
Complete	Managers and supervisors are asked to complete a Training Request Template as part of the annual budget process which incorporate training needs identified during performance management process.
Complete	Allocations for legal advice, WALGA subscription services, heritage advice and consultants for specific projects where required are included in the annual budget.
Complete	Report provided to EMG monthly for review and action.

~~Provide information to all staff regarding the Customer Service Charter and reminder regarding timeframes for response.~~	~~Complete~~	~~AGC~~	**Complete**	Email memo to all staff with customer service charter attached. Customer Service Charter also sent out with 2018/19 rates notices.
~~Develop organisational templates in relation to procurement management~~	~~Complete~~	~~EMCCS~~	**In progress**	
~~Undertake a Procurement Review and present findings and recommendations to the Audit Committee~~	~~Complete~~	~~EMCCS~~	**In progress**	
~~Undertake training to include amendments to the Procurement Policy and the new Procurement Manual~~	~~Complete~~	~~EMCCS~~	**Complete**	
~~Review Interim Audit Management Letter and implement recommendations made~~	~~Complete~~	~~EMG~~	**Complete**	
~~Review Final Audit Management Letter and implement recommendations made~~	~~Complete~~	~~FM~~	**Complete**	
~~Review Interim Audit Management Letter and implement timeline to address recommendations~~	~~Complete~~	~~FM~~	**Complete**	
~~Develop improvement plan based on findings of FMR and Audit Reg 17 Reviews~~	~~Complete~~	~~FM~~	**Complete**	
Implement a staff training program that includes refresher training on procurement	Ongoing	EMCCS	**In progress**	
Review Procurement Policy and Procedures	Jun-23	FM	**In progress**	Review needed to clearly detail treatment and recording of conflicts of interest in procurement processes and to review the level of delegations and controls. Awaiting outcome of OAG findings
Works delayed by stock items	Ongoing	EMIDS	**In progress**	Identify items in advance that may have impact upon critical path
Undertake business planning to develop an asset register/recording system	Mar-23	EMIDS	**In progress**	To be completed as part of the 23/24 budget preparation
Develop the Intranet for use of staff to display current documents and information	Jun-23	AGO	**In progress**	
Mapping the customer expectations for works including action request process and looking for improvements	Jun-23	EMIDS	**In progress**	

Consequence Category	Risk Ratings	Rating
Reputation / Compliance	***Consequence:***	*Minor (2)*
	Likelihood:	*Possible (3)*
	Overall Risk Ratings:	***Moderate***

External theft & fraud (Including Cyber) — Mar-23

Risk Context

Loss of funds, assets, data or unauthorised access, (whether attempted or successful) by external parties, through any means (including electronic).

For the purposes of;
-Fraud: benefit or gain by deceit
-Malicious Damage: hacking, deleting, breaking or reducing the integrity or performance of systems
-Theft: stealing of data, assets or information

Potential causes include;

Inadequate security of equipment / supplies / cash	Inadequate provision for patrons/staff belongings
Robbery	Lack of Supervision
Scam Invoices	Collusion with internal staff
Cyber crime	Lack of clarity around roles and responsibilities

Key Controls	Type	Date	Rating
Admin Building Security access controls (alarms, CCTV, keypad access)	Preventative	Mar-23	*Adequate*
Other Building Security access controls (alarms, CCTV, keypad access)	Preventative	Mar-23	*Inadequate*
Depot Building Security access controls	Preventative	Mar-23	*Adequate*
Equipment storage security access controls	Preventative	Mar-23	*Inadequate*
IT Security Framework (passwords / security protocols / records access)	Preventative	Mar-23	*Effective*
Cash handling processes	Preventative	Mar-23	*Effective*
CCTV Policy: storage, disposal and access	Preventative	Mar-23	*Inadequate*
Functionality review of roles and responses to security components	Preventative	Mar-23	*Inadequate*
		Overall Control Ratings:	*Inadequate*

Actions	Due Date	Responsibility
~~Request $15,000 for Depot upgrade to improve security and access as part of mid-year budget review~~	~~Complete~~	~~DAO~~
~~Replace all admin building access toggles with user identified toggles~~	~~Complete~~	~~IT/P~~
~~Update register of toggle holders for Admin Building~~	~~Complete~~	~~IT/P~~
~~Update register of users for access to other buildings~~	~~Complete~~	~~TSO~~
~~Develop an IT/Security Framework~~	~~Complete~~	~~IT/P~~
~~Install additional CCTV and document procedures~~	~~Complete~~	~~IT/P~~
~~Document cash handling and stocktake procedures for all areas and implement~~	~~Complete~~	~~FM~~
~~Install security gate at Depot and document procedures~~	~~Jun-19~~	~~DAO~~
Update registers of users, key/toggle holders including access to depot	Ongoing	IT/P OAO
~~Develop and implement procedures for use of EFTPOS at Museum~~	~~Complete~~	~~IT/P / MC~~
~~Develop robust procedures for administration of York Dollars~~	~~Complete~~	~~AGC~~
~~Develop cash handling procedures for Container Deposit Site~~	~~Complete~~	~~FM~~
~~Install lighting and security at Old Recreation Centre~~	~~Jun-23~~	~~EMIDS~~
Review procedures and provide refresher training on cash handling	Jun-23	FM
Document clear internal processes and systems to report any potential fraud, that include anonymous reporting (Fraud & Corruption)	Jun-23	EMCCS
Investigate cashless operations at the CFC Facility	Jun-23	EMIDS
Review cybersecurity measures	Jun-23	EMCCS/FM
Review departmental responsibilities around security and assigning tasks appropriately	Jun-23	ELT

Consequence Category	Risk Ratings	Rating
Financial / Property	***Consequence:***	*Moderate (3)*
	Likelihood:	*Likely (4)*
	Overall Risk Ratings:	***High***

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
IT/P	Yes	Yes	Yes	Yes	Partial	Project to replace in 22/23
TSO	Partial	Yes	Yes	Yes	Yes	CCTV for Rec Centre and Stadium. Policy for CCTV access / disposal. Re-keying of buildings needed.
DAO	Yes	Partial	Partial	Yes	Partial	Security gate installed with intercom system. Security cameras need to be installed at the gate. Risk lies in theft of plant and tools.
DAO	Partial	Partial	Partial	Partial	Partial	Procedure need to be developed.
IT/P	Yes	Yes	Yes	Yes	Yes	
FM	Yes	Yes	Yes	Yes	Yes	Procedures reviewed.

Status of Actions	Comments
On-going	Funds requested as part of 2018/19 Budget process for electric gate to be installed at Depot.
Complete	All staff issued with new toggles and PIN changed for Admin building.
Complete	Updated.
Complete	
Complete	IT Security Plan drafted and presented to Risk and OSH Working Group for feedback. Reconfiguration of firewalls, internet access, virus control undertaken.
Complete	CCTV cameras installed over cash handling areas.
Complete	Cash handling and stocktake procedures documented and implemented.
Complete	
Ongoing	To be conducted annually - OAO - Ongoing daily basis is updated as required
Complete	
Complete	York Dollars discontinued in 22/23
Complete	
Complete	Included in 2019/20 budget doors to be investigated but the external lighting to the back stair was completed.
Ongoing	Other priorities in training and finance have pushed delivery of this item back
In Progress	Recommendation from OAG - Undertaking this work with LGIS Fraud and Corruption Management Plan
In Progress	In accordance with the original contract
In Progress	LGIS member survey has identified vulnerabilities that were reviewed with the Shire's external IT provider in Nov/Dec. Provider to be engaged to do further audit
In Progress	Initial meeting held with all parties

Management of Facilities / Venues / Events — Mar-23

Risk Context

Failure to effectively manage the day to day operations of facilities, venues and / or events.

This includes;
-Inadequate procedures in place to manage quality or availability.
-Poor crowd control
-Ineffective signage
-Booking issues
-Stressful interactions with hirers / users (financial issues or not adhering to rules of use of facility)
-Inadequate oversight or provision of peripheral services (e.g.. cleaning / maintenance)

Potential causes include;

Double bookings	Traffic congestion or vehicles blocking entry or exit
Illegal / excessive alcohol consumption	Insufficient time between bookings for cleaning or maintenance
Bond payments poorly managed	Difficulty accessing facilities / venues.
Falsifying hiring agreements (alcohol on site / lower deposit)	Failed safety / chemical / health requirements
Inadequate oversight or provision of peripheral services (e.g.. cleaning / maintenance)	Poor service from contractors (such as catering or cleaning)
Terrorism	

Key Controls	Type	Date	Rating
Event management procedures and monitoring	Preventative	Mar-23	*Inadequate*
Inspection, maintenance and cleaning schedules	Preventative	Mar-23	*Adequate*
Facility / Venue booking system (including bonds)	Preventative	Mar-23	*Adequate*
Venue booking management procedures and monitoring	Preventative	Mar-23	*Adequate*
Events package given to hirer (information sheets, events questionnaire / procedures / checklist)	Preventative	Mar-23	*Effective*
Insurance certificate of currency checked	Preventative	Mar-23	*Effective*
Feedback from community and users of facilities	Recovery	Mar-23	*Effective*
MOUs in place for on-going users	Preventative	Mar-23	*Inadequate*
		Overall Control Ratings:	***Adequate***

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
EEDO	Yes	Yes	Yes	Yes	Yes	More events occurring. Improvements to increase LOS
EHO / venue managers	Partial	Yes	Yes	Yes	Partial	
AGC	Yes	Yes	Partial	Yes	Yes	Issues with tentative books / accuracy of data. System inadequate. Reactive.
AGC	Yes	Yes	Partial	Yes	Partial	
EEDO	Yes	Yes	Yes	Yes	Yes	
AGC	Yes	Yes	Yes	Yes	Yes	
AGC	Yes	Yes	Yes	Yes	Yes	Debriefings and forms provided.
YRCCPO	Partial	No	Partial	No	Yes	Regular users of the Town Hall / Stadium

Actions	Due Date	Responsibility
~~Staff training required in the area of venue bookings.~~	~~Complete~~	~~AGC~~
~~Synergy Booking Module currently being updated.~~	~~Complete~~	~~AGC~~
~~Social distancing measures and signage to be displayed in all Shire facilities~~	~~Ongoing~~	~~DSC~~
~~Maintain and record COVID-19 cleaning regime~~	~~Ongoing~~	~~EHO~~
~~Undertake an events review and develop/implement strategies to improve processes.~~	~~Complete~~	~~EEDO~~
~~COVID-19 Safety Plans to be prepared for Shire venues~~	~~Complete~~	~~DSC/AGC~~
Events Committee to undertake desktop review of event management procedures	Ongoing	CPC
Develop procedures for facility bookings and feedback - events especially.	Ongoing	AGC/EMIDS ESO
Booking forms to include details of Evacuation Plans for all facilities	Dec-23	EMIDS ESO/AGC
Investigate online booking system to be integrated into Shire website for community	Jun-23	AGC
Review signage for all venues giving consideration to the Access and Inclusion Audit	Ongoing	DSC/PMO
YRCC sharing of information with teams re: bookings	Ongoing	CPC
Review of the Events procedures and processes to consider current risks such as	Jun-23	CPC

Status of Actions	Comments
Complete	Training undertaken
Complete	Updated
Review	Events Committee established and review of current procedures undertaken. Internal checklist developed to assist each department with operational controls required. To include RAP findings. Roles and responsibility definition. Review to include role of contractor induction in bookings.
Review	Procedures in place and being tested. Feed back is provided in the booking hire form for users to complete. Also through debriefs with the Events Coordinator following an event. Information sheet to be developed around insurances and contractor induction
Complete	State of Emergency revoked
Complete	
Complete	Events policy review and guidelines adopted by Council. Monitoring of events still in progress
Need updating	Events booking now cover safety induction. Evacuation plan updates being sought.
In Progress	RFQ has been prepared for release to market
Complete	
In Progress	Not complete. Residency museum has not been done. Review and update of all facilities to be included as part of condition
Ongoing	Request to be extended again to Belgravia for staff attendance
In Progress	

Consequence Category	Risk Ratings	Rating
Reputation	***Consequence:***	*Minor (2)*
	Likelihood:	*Unlikely (2)*
	Overall Risk Ratings:	***Low***

IT or communication systems and infrastructure — Mar-23

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Disruption, financial loss or damage to reputation from a failure of information technology systems.
Instability, degradation of performance, or other failure of IT or communication system or infrastructure causing the inability to continue business activities and provide services to the community. This may or may not result in IT Disaster Recovery Plans being invoked.

Examples include failures or disruptions caused by:
-Hardware or software
-Networks
-Failures of IT Vendors
This also includes where poor governance results in the breakdown of IT maintenance such as;
-Configuration management
-Performance monitoring
This does not include new system implementations - refer "Inadequate Project / Change Management".

Potential causes include;	
Weather impacts	Non-renewal of licences
Power outage on site or at service provider	Inadequate IT incident, problem management & Disaster Recovery Processes
Out-dated, inefficient or unsupported hardware or software	Lack of process and training
Software vulnerability	Equipment purchases without input from IT department
Incompatibility between operating systems	Vulnerability to user error
Poor service from external IT providers	

Key Controls	Type	Date	Rating
Formal IT Infrastructure maintenance & replacement program	Preventative	Mar-23	*Adequate*
IT Vendor service level Agreement	Detective	Mar-23	*Effective*
Infrastructure Security (security access protocols, firewalls)	Preventative	Mar-23	*Effective*
UPS	Recovery	Mar-23	*Inadequate*
IT Disaster Recovery Plan	Recovery	Mar-23	*Effective*
Contract management	Preventative	Mar-23	*Inadequate*
		Overall Control Ratings:	*Adequate*

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
IT/P	Yes	Yes	Yes	Partial	Yes	Within budget constraints
IT/P	Yes	Yes	Yes	Yes	Yes	
IT/P	Yes	Yes	Yes	Yes	Yes	
IT/P	Partial	Yes	Yes	Partial	Yes	UPS needs to be updated
IT/P	Yes	Yes	Yes	Yes	Yes	

Actions	Due Date	Responsibility	Status of Actions	Comments
~~Develop an IT Security and Disaster Recovery Plan that incorporates maintenance and replacement of infrastructure~~	~~Mar-18~~	~~IT/P~~	**Complete**	IT Security Plan drafted and presented to Risk and OSH Working Group for feedback. Reconfiguration of firewalls, internet access, virus control undertaken.
~~Implement a protocol to ensure passwords are changed regularly.~~	~~Mar-18~~	~~IT/P~~	**Complete**	A new process has been documented to ensure passwords are changed regularly.
~~Review levels of access to server and develop a process to ensure security & confidentiality of information~~	~~Jun-18~~	~~IT/P~~	**Complete**	The server structure has been reconfigured and levels of access introduced.
~~Develop a written specification, seek quotes and engage an IT Service Provider.~~	~~Mar-23~~	~~IT/P~~	**Complete**	Focus Networks engaged as new IT support provider.
Investigate and implement transition to new communications provider	Mar-23	IT/P	**Complete**	
~~Arrange installation of EFTPOS facilities at the Museum~~	~~Sep-19~~	~~IT/P~~	**In Progress**	Works commenced to provide fibre connections to Administration, Museum and Depot
~~Review levels of access to Synergy and implement changes~~	~~Complete~~	~~IT/P / EMG~~	**Complete**	
~~Migrate email addresses from role based to individual officers~~	~~Complete~~	~~IT/P~~	**Complete**	
~~Review physical security of server room~~	~~Complete~~	~~IT/P~~	**Complete**	
~~Arrange replacement of UPS and Server~~	~~Complete~~	~~IT/P~~	**Ongoing**	Can be accessed by anyone with a master key. Conduct risk assessment to see whether measures are suitable
Implement regular testing regime for effectiveness of IT Disaster Recovery Plan	Ongoing	IT/P	**Complete**	~~Servers upgraded prior to Altus Procurement and ECM changeover~~
Hot water system leak in server room to be rectified	Ongoing	EMIDS	**Ongoing**	Last Disaster Recovery testing session conducted 26 August 2022. Altus products unable to be tested in the sandpit environment. Further testing to be scheduled as these need to be conducted in the live environment
Review levels of service with the external IT providers	Ongoing	EMCCS	**Ongoing**	Has been done. Redundant services still to be removed. Consider this as part of the risk assessment for the server room to remedy all defects.
Improve levels of service at Shire outstations (ie museum, swimming pool, depot, YRCC)	Jun-23	IT/P	**In Progress**	Contractor management meetings held with IT Vision to work to improve service. Alternative providers for support being sought

Consequence Category	Risk Ratings	Rating
Service disruption	***Consequence:***	*Moderate (3)*
	Likelihood:	*Possible (3)*
	Overall Risk Ratings:	*Moderate*

Misconduct — Nov-22

Intentional activities intended to circumvent the Code of Conduct or activities in excess of authority, which circumvent endorsed policies, procedures or delegated authority.

This would include instances of:
-Relevant authorisations not obtained.
-Distributing confidential information.
-Accessing systems and / or applications without correct authority to do so.
-Misrepresenting data in reports.
-Theft by an employee
-Inappropriate use of plant, equipment or machinery
-Inappropriate use of social media.
-Inappropriate behaviour at work.
-Purposeful sabotage
This does not include instances where it was not an intentional breach - refer Errors, Omissions or Delays.

Potential causes include;	
Inadequate training of code of conduct \ induction	Greed, gambling or sense of entitlement
Changing of job roles and functions/authorities	Collusion between internal & external parties
Delegated authority process inadequately implemented	Password sharing
Lack of internal checks	Low level of Supervisor or Management oversight
Covering up poor work performance	Believe they'll get away with it
Poor enforcement of policies and procedures	Undue influence from Manager / Councillor
Information leaked to Tenderers during the Tender process	Poor work culture
Insubordination	By-passing established administrative procedures
Disgruntled employees	Sharing of confidential information

Key Controls	Type	Date	Rating
Delegated authority framework	Preventative	Nov-22	*Effective*
IT Security Framework	Preventative	Nov-22	*Adequate*
Cash handling procedures	Preventative	Nov-22	*Adequate*
Staff on-boarding / induction program (Code of Conduct)	Preventative	Nov-22	*Effective*
External Audits	Preventative	Nov-22	*Effective*
Police clearances	Preventative	Nov-22	*Effective*
Annual drivers licence checks	Preventative	Nov-22	*Inadequate*
Strong management culture (Zero tolerance for misconduct)	Preventative	Nov-22	*Effective*
Social Media policy	Preventative	Nov-22	*Effective*
Segregation of duties (Financial)	Preventative	Nov-22	*Adequate*
		Overall Control Ratings:	*Effective*

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
EMCCS	Yes	Yes	Yes	Yes	Yes	Review based upon OAG recommendations
IT/P	Yes	Partial	Yes	Yes	Yes	
FM	Yes	Yes	Yes	Yes	Partial	CCTV Installed over cash handling areas
EMCCS	Yes	Partial	Yes	Yes	Yes	Induction manual to be finalised and training undertaken
EMCCS	Yes	Yes	Yes	Yes	Yes	
ESOCCS	Yes	Yes	Yes	Yes	Yes	Request for police clearances prior to confirmation of employment. Employee files reviewed and additional police clearance requested where required.
ESOCCS	Yes	Yes	Yes	Yes	Yes	Undertaken July 2017, annual declaration asks for this
CEO	Yes	Yes	Yes	Yes	Yes	Induction for all staff regarding Code of Conduct Policy and implementation. Alcohol and Drug Policy adopted. Culture reinforced through email correspondence and in person at staff meetings.
CEO	Yes	Yes	Yes	Yes	Yes	FB and Instagram sites launched December 2017
FM	Partial	Partial	Partial	Partial	Partial	Review following OAG feedback

Actions	Due Date	Responsibility
~~Develop an IT Security Framework~~	~~Jan-18~~	~~IT/P~~
~~Review and document cash handling procedures for implementation at all Shire outstations and administration~~	~~Jun-18~~	~~FM~~
~~Develop and implement a procedure for disciplining employees~~	~~Jun-18~~	~~EMCCS~~
~~Develop and implement a procedure for grievance resolution~~	~~Jun-18~~	~~EMCCS~~

Status of Actions	Comments
Ongoing	Under review. Definitive training to be incorporated with Payroll officer. Part A and B to be represented.
Ongoing	To be completed for Council Adoption in December every year. Last conducted OCM Dec 2021 Resolution 051221
Complete	Reviewed and adopted by Council November 2017 OCM. The server structure has been reconfigured and levels of access introduced. Passwords are changed regularly. Firewalls installed.
Complete	Cash handling procedures developed and implemented. CCTV cameras installed at all cash handling

~~Develop a Fraud and Corruption Framework for review every 2 years~~	~~Ongoing~~	~~EMCCS~~	**Complete**	Approved April 2018 following consultation and distributed to all staff.
~~Review user access to SynergySoft~~	~~Complete~~	~~IT/P / EMG~~	**Complete**	Approved April 2018 following consultation and distributed to all staff.
Review stocktaking procedures for minor plant and equipment, portable and attractive	Jun-23	FM	**Ongoing**	Marg Hemsley from LG People to undertook training on 6 March 2019. To be included in annual
Complete Employee Induction Manual	Ongoing	EMCCS	**In Progress**	Incomplete. Work has recommenced on this.
Review Delegation Authority Register to ensure details of sub-delegations are accurate	Ongoing	AGC	**In Progress**	Cash handling refresher updated planned for Containers for Change, Museum, Visitor Centre, Pool and
Undertake training for all staff on HR policies and procedures	Ongoing	EMCCS	**Complete**	
Develop and implement an annual staff training program that includes refresher training in HR policies and procedures.	Ongoing	EMCCS	**Ongoing**	Review being conducted currently. Delayed due to unexpected leave of responsible officer
Review cash handling procedures for outstations	Dec-23	FM	**Complete**	Fraud and Corruption Framework adopted by Council at its December 22 OCM Resolution 141222
Develop and implement a periodic fraud awareness training program for all staff	Ongoing	EMCCS	**Not started**	To be scheduled for 2023 as part of HR Leadership Training
Declarations of conflict of interest when staff attend meetings with contractors where	Ongoing	EMIDS	**In Progress**	This needs to be workshopped to see how it can implemented at the Shire.
Review of purchasing segregation and delegations after receipt of OAG Management	Jun-23	ELT	**In Progress**	EMCCS to meet with Mundaring to review their practices as recommended by OAG. Solutions will also
Need to confirm validity of driver licences with implicated employees	Annual	EMCCS	**Ongoing**	Officers to review whether Altus Payroll can record and issue notices for annual review. Currently this

Consequence Category	Risk Ratings	Rating
Reputation / Finance	***Consequence:***	*Minor (2)*
	Likelihood:	*Possible (3)*
	Overall Risk Ratings:	***Moderate***

Project / Change management — Mar-23

Risk Context

Inadequate analysis, design, delivery and / or status reporting of change initiatives, resulting in additional expenses, time delays or scope changes.

This includes:
-Inadequate change management framework to manage and monitor change activities.
-Inadequate understanding of the impact of project change on the business.
-Failures in the transition of projects into standard operations.
-Failure to implement new systems
-Inadequate handover process
This does not include new plant & equipment purchases. Refer "Inadequate Asset Sustainability Practices"

Potential causes include:

Lack of communication and consultation	Excessive growth (too many projects)
Lack of investment	Inadequate monitoring and review
Failures of project Vendors/Contractors	Geographic or transport difficulties sourcing equipment / materials
External consultants underquoting on costs	Lack of project methodology knowledge and reporting requirements
Ineffective management of expectations (scope creep)	Project risks not managed effectively
Inadequate project planning (resources/budget)	

Key Controls	Type	Date	Rating
Project Management Methodology	Preventative	Mar-23	*Adequate*
Status reporting and monitoring program	Preventative	Mar-23	*Inadequate*
Stakeholder engagement policy and framework	Preventative	Mar-23	*Adequate*
Council submission process (including Risk)	Preventative	Mar-23	*Adequate*
Post-project debriefs	Preventative	Mar-23	*Inadequate*
Risk assessments are conducted before and during projects	Preventative	Mar-23	*Inadequate*
Project Management Teams	Preventative	Jan-00	*Adequate*
		Overall Control Ratings:	***Adequate***

Actions	Due Date	Responsibility
~~Project Planning Template (including risk assessment) is developed and distributed to~~	~~Feb-18~~	~~EMIDS~~
~~Provide staff training regarding risk implications for inclusion in agenda reports.~~	~~Mar-18~~	~~EMCCS~~
~~Conduct Project Management Training for relevant staff~~	~~Jun-18~~	~~Relevant staff~~
~~Project plans including milestones, reporting, stakeholder engagement, risk assessment and formal debriefs are documented for projects~~	~~Jun-19~~	~~Relevant staff~~
~~Undertake staff training to include amendments to Procurement Policy and new Procurement Manual~~	~~Dec-19~~	~~EMCCS~~
~~Incorporate review of grants register into quarterly FACR processes~~	~~Superseded~~	~~FM~~
~~Review Project Management processes and develop checklist~~	~~Complete~~	~~EMIDS~~
Develop and implement procedures around Grants Management	Jun-23	FM/EMIDS
Consider grants management as part of the new Government Frameworks package	Jun-23	ELT
Implement the new contractor/project management procedures and forms and train all	Jun-23	EMIDS
Financial risk in completing projects in time to acquit against grants	Dec-23	EMIDS

Consequence Category	Risk Ratings	Rating
Financial / Reputational / Health	***Consequence:***	*Minor (2)*
	Likelihood:	*Possible (3)*
	Overall Risk Ratings:	***Moderate***

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
EMIDS	Yes	Yes	Yes	Yes	Yes	
EMIDS	Partial	Yes	Partial	Partial	Yes	Procurement Review to be undertaken
CEO	Yes	Yes	Yes	Yes	Yes	Policy G2.9 Community Engagement & Consultation adopted by Council 24/10/16
EMCCS	Yes	Partial	Yes	Yes	Yes	Agenda template includes consideration of Risk Implications. Training
EMIDS	No	Partial	Partial	Partial	Partial	Informal only
EMIDS	Yes	Partial	Yes	Partial	No	Procurement Review
EMIDS						Training planned, education on process and methodology

Status of Actions	Comments
Complete	Risk tables distributed to all staff. Agenda writing workshops conducted where elements of the agenda
Complete	Project management training provided to relevant staff.
In progress	Project plan developed. To be distributed to all staff.
Complete	Project management training provided to relevant staff.
Complete	
Incomplete	Review existing and incorporate into project procedures
New	Examine the new Government Frameworks ERP to include grant management and reporting similar to
Incomplete	This process has not been conducted. New process to be developed for regular review as the FACR
Complete	EMIDS has produced contractor management suite of information and has provided to the OAG as per
In Progress	Training has been conducted with all relevant staff. Refresher training to be scheduled in 23/24
In progress	Project spreadsheet captures grant spending and reports in a dashboard to highlight risk. Will be rolled out

Safety and Security practices — Mar-23

Risk Context

Non-compliance with the Work Health and Safety Act, associated regulations and standards.
It is also the inability to ensure the physical security requirements of staff, contractors and visitors. Other considerations are negligence or carelessness.

Potential causes include;

Lack of appropriate PPE / equipment	Inadequate signage, barriers or other exclusion techniques
Inadequate first aid supplies or trained first aiders	Poor storage and use of dangerous goods
Inadequate security protection measures in place for buildings, depots and other places of work	Ineffective / inadequate testing, sampling or other health-related requirements
Inadequate or unsafe modifications to plant & equipment	Lack of mandate and commitment from senior management
Inadequate policy, frameworks, systems and structure to prevent the injury of visitors, staff, contractors and/or tenants.	Inadequate organisational Emergency Management requirements (evacuation diagrams, drills, wardens etc.).
Inadequate supervision, training or mentoring of staff	Slow or inadequate response to notifications from public

Key Controls	Type	Date	Rating
Building Security access controls (alarms, CCTV, keypad access)	Preventative	Mar-23	*Adequate*
WHS Management Framework	Preventative	Mar-23	*Adequate*
Contractor site inductions	Preventative	Mar-23	*Effective*
Staff site inductions	Preventative	Mar-23	*Effective*
Drug and alcohol policy	Preventative	Mar-23	*Effective*
Employee Assistance Program	Preventative	Mar-23	*Adequate*
Hazardous Substance and Dangerous Goods registers	Preventative	Mar-23	*Inadequate*
Health and Wellbeing program	Preventative	Mar-23	*Adequate*
Incident register / incident reporting procedures	Preventative	Mar-23	*Effective*
Organisational Emergency Management Plan and evacuation diagrams	Preventative	Mar-23	*Inadequate*
Purchasing policies and procedures consider safety issues	Preventative	Mar-23	*Adequate*
Regular documented safety inspections	Preventative	Mar-23	*Effective*
Safe work practices (Safe Work Method Statements)	Preventative	Mar-23	*Adequate*
Toolbox meetings	Preventative	Mar-23	*Effective*
Trained first aiders	Preventative	Mar-23	*Effective*
Return to work programs	Recovery	Mar-23	*Adequate*
Establish WHS Committee	Preventative	Mar-23	*Adequate*
Embed safety procedures and policies into project management framework	Preventative	Mar-23	*Inadequate*
Defib training	Preventative	Mar-23	*Adequate*
		Overall Control Ratings:	***Adequate***

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
IT/P	Yes	Yes	Yes	Yes	Partial	
DSC	Partial	Partial	Partial	Partial		ongoing
EMIDS	Partial	Yes	Yes	Yes		
EMIDS	Yes	Yes	Yes	Yes		
EMCCS	Yes	Partial	Partial	Partial	Yes	
EMCCS	Yes	Partial	Partial	Yes	Yes	Communication
DAO	Partial	Partial	Partial	Partial	Yes	
EMCCS	Partial	Yes	Yes	Yes	Yes	Through LGIS. Awareness
DSC	Yes	Yes	Yes	Yes	Yes	ongoing as incident's happen
DSC	Yes	Partial	Partial	Yes	Yes	ongoing at the moment
EMCCS	Yes	Yes	Partial	Partial	Yes	Does the purchase order need to be enhanced to capture conditions
DSC	Yes	Yes	Yes	Partial	Yes	Undertaken in January 2019
WS	Partial	Partial	Partial	Yes	Yes	
WS	Yes	Yes	Yes	Yes	Yes	
ESOCCS	Yes	Yes	Yes	Yes	Yes	
IT/P	Partial	No	No	Partial	Partial	
DSC						
						Training, process

Actions	Due Date	Responsibility
~~Establish procedures in liaison with LGIS for EAP~~	~~Jan-18~~	~~EMCCS~~
~~Update Hazardous Substance and Dangerous Goods Register~~	~~Mar-18~~	~~DAO~~
~~Develop procedures for the implementation of the Alcohol & Other Drugs Policy~~	~~Complete~~	~~EMCCS / OSH~~
~~Develop and implement a Grievance, Bullying and Harassment resolution procedure~~	~~Jun-18~~	~~EMCCS~~
~~Undertake training in HR policies~~	~~Superseded~~	~~EMCCS~~
~~Implement the recommendations of the Emergency Exercise report~~	~~Jun-19~~	~~TSO~~
~~Implement action plan incorporating results of OSH Audit~~	~~Complete~~	~~TSO~~
~~Review Safety Wardens at outstations and provide training~~	~~Ongoing~~	~~ESO EMIDS~~
~~Seek quotes for new YRCC and Gym access and arrange installation~~	~~Complete~~	~~IT/P/RM~~
~~Update procedure to reflect LGIS requirements for fire ground attendance~~	~~Dec-22~~	~~EMIDS ESO~~
~~Clarification from LGIS on private vehicle attendance to a fire ground~~	~~Dec-22~~	~~EMIDS ESO~~
Adopt the WHS Policy and Safety Manuals for staff	Jun-23	EMIDS/EMCCS
Undertake training in WHS policies	Ongoing	EMIDS/EMCCS
CCTV to be installed at all buildings	Jun-23	IT/P/GEAM
Update Evacuation Plans for the Depot to include new security gates and undertake	Jun-23	EMIDS
Access register to be developed and maintained for Depot	Ongoing	OAO
MSDS for Depot missing - sheets and register to be updated	Jun-23	EMIDS ESO

Status of Actions	Comments
Complete	Support provided on a case by case basis. Employees are recommend to the service when required
Complete	
Incomplete	Minor CCTV instalments have occurred. Shire to develop a strategy for use to understand the desired
Complete	Approved April 2018 following consultation and distributed to all staff.
Complete	Amalgamated with later training item
Closed	Now out of date. Replaced by regular audits and emergency evacuation item below.
In Progress	Work being undertaken by contractor currently
Ongoing	Sign in board for staff and visitor log for others - ongoing as the document is live
In Progress	Being completed along with evacuation training
Complete	New project in place to replace existing hardware.
In Progress	Update to reference new legislation. Safety inductions updated and rolled out for all staff. New
Ongoing	A training schedule is being prepared for 2022/23 to capture all of our training needs including HR
Complete	To be replaced by regular inspections. Hazards will be captured on register. Contact Worksafe to see
Complete	Policy adopted 18/09/17 Procedures in place. Two random tests conducted to date.
In progress	MSDS file has been located but sheets need updating.
In progress	Budget allocation made for 22/23. Toggle entry access upgraded to Administration building. Other
In progress	Still a risk. Key positions are being filled before Evacuation testing can occur at all facilities.

Undertake access and alarm upgrades at Administration, YRCC and Museum	Jun-24	EMIDS	In progress	To be considered as part of the refurbishment project
Undertake Emergency Evacuation testing at all facilities	Dec-23	EMIDS	In progress	Staff training scheduled for March 23 in dealing with aggressive customers. Discussed at WHS Working Group that incidents will be shared to all front facing teams to alert them to possible threats. ACO to develop procedure
Front counter replacement to consider upgraded security measures	Jun-23	EMIDS	In progress	Good uptake of usefmfc volunteer safety induction and training. Forward program of additional training agreed with volunteers
Mechanism for flagging aggressive customers and properties.	Jun-23	ELT	Complete	
Bushfire volunteer safety inductions and training	Ongoing	EMIDS ESO	Complete	
Continue to embed safety practices and processes into project work	Jun-23	EMIDS	Ongoing	

Consequence Category	Risk Ratings	Rating
Health	*Consequence:*	*Moderate (3)*
	Likelihood:	*Possible (3)*
	Overall Risk Ratings:	*Moderate*

Note: This list is exhaustive of all WHS actions as further items are reported through the WHS Working Group

Supplier / Contract management — Mar-23

Risk Context

Inadequate management of external Suppliers, Contractors, IT Vendors or Consultants engaged for core operations. This includes issues that arise from the ongoing supply of services or failures in contract management & monitoring processes.

This also includes:
- Concentration issues (contracts awarded to one supplier)
- Vendor sustainability

Potential causes include;

Insufficient funding	Inadequate contract management practices
Complexity and quantity of work	Ineffective monitoring of deliverables
Suppliers not willing to provide quotes	Limited availability of suppliers
Inadequate tendering process	Lack of planning and clarity of requirements
Contracts not renewed on time	Historical contracts remaining

Key Controls	Type	Date	Rating
Strict procurement / tender processes	Preventative	Mar-23	*Adequate*
Contract management and review program	Preventative	Mar-23	*Adequate*
Regular supplier / contractor review meetings	Preventative	Mar-23	*Adequate*
Legal advice (to confirm correct drafting of documentation and to prevent unknowingly accepting liability of the contractor or other parties)	Preventative	Mar-23	*Effective*
Contractor Online Induction	Preventative	Mar-23	*Effective*
Contract/Project Management Process	Preventative	Mar-23	*Inadequate*
		Overall Control Ratings:	*Adequate*

Actions	Due Date	Responsibility
~~Adjust Purchase Order Form to provide space for details of quotations sought.~~	~~Sep-17~~	~~FM~~
~~Meet with individual business units to provide further training on procurement policy~~	~~Sep-17~~	~~EMCCS~~
~~Review Delegation DE5-1 to remove delegation not to invite tenders~~	~~Dec-17~~	~~EMCCS~~
~~Establish a register of contracts.~~	~~Complete~~	~~EMIDS~~
~~Provide contractor induction training~~	~~Complete~~	~~TSO~~
~~Develop Statement of Business Ethics~~	~~Complete~~	~~EMCCS~~
~~Develop and implement a process for progress reporting on Shire contracts.~~	~~Complete~~	~~EMIDS~~
~~Implement procedures for online contractor inductions~~	~~Complete~~	~~TSO~~
Purchase orders need review to include terms and conditions to form a more	Jun-23	FM
Seek explanations for non-compliance and provide information on PO before	Ongoing	ELT
Implement regular monitoring of contracts register	Ongoing	EMIDS
Contractor Management Procedures	Ongoing	EMIDS

Consequence Category	Risk Ratings	Rating
Service interruption, Financial	***Consequence:***	*Moderate (3)*
	Likelihood:	*Possible (3)*
	Overall Risk Ratings:	*Moderate*

Control Assurance

Control Owner	Control Documented	Completeness	Accuracy	Timeliness	Fraud	Comments
EMCCS	Yes	Yes	Yes	Partial	Yes	Procurement Policy in place and implemented. Tender documentation using WALGA templates. Procurement Review
EMIDS	Partial	Partial	Yes	Yes	Yes	Procurement Review
EMIDS	Yes	Yes	Partial	Yes	Partial	As required. No formal process.
EMIDS	Yes	Yes	Yes	Yes	Yes	WALGA templates are used.
						Investigated next week

Status of Actions	Comments
Complete	EMCCS and FM have attended meetings with each business unit to answer questions and clarify the procurement process.
Annual	Completed last year. All officers trained in new Altus procurement and refresher. Add to training roster.
Ongoing	Authorising officers seek information from purchasing officers. Delegation removed by Council at November 2017 OCM
Complete	
Ongoing	Register established. Contract dates being reviewed. Quotations sought for building services. Formal
Complete	Adopted by Council 29 July 2019. Available to public on Shire Webpage
Ongoing	This practice has been embedded now. Non-compliance is reduced by the new Altus Procurement
Ongoing	Damstra/Velpic system rolled out to all contractors who attend Shire premises and is followed dup with
Complete	Contract register complete and in use
Ongoing	To amalgamate with contractor management procedures
Ongoing	EMIDS has produced contractor management suite of information and has provided to the OAG as per
In Progress	Reference material available. Workshop to be undertaken to ascertain draft. Lawyer to complete T&Cs

9.3 COMPLIANCE AUDIT RETURN 2022

File Number:	**4.4175**
Author:	**Vanessa Green, Council & Executive Support Officer**
Authoriser:	**Chris Linnell, Chief Executive Officer**
Previously before Council:	**Not Applicable**
Disclosure of Interest:	**Nil**
Appendices:	**1. Compliance Audit Return ⇩**

NATURE OF COUNCIL'S ROLE IN THE MATTER

Legislative

PURPOSE OF REPORT

This report presents the Compliance Audit Return (CAR) 2022 for the Audit and Risk Committee's (the Committee) consideration and recommendation to Council.

BACKGROUND

Western Australian local governments are required to complete a CAR annually and submit it to the Department of Local Government, Sport and Cultural Industries (DLGSC) in accordance with the requirements of the *Local Government (Audit) Regulations 1996*, in relation to activities undertaken by the local authority in the preceding calendar year.

The CAR is a checklist of a local government's compliance with the requirements of the *Local Government Act 1995* (the Act) and its Regulations. The 2022 CAR content focuses on areas considered high risk. It examines whether the Council has complied with each action listed on the return under the following activities:

1. Commercial Enterprises (five (5) audit questions)
2. Delegation of Power (thirteen (13) audit questions)
3. Disclosure of Interest (twenty-one (21) audit questions)
4. Disposal of Property (two (2) audit questions)
5. Elections (three (3) audit questions)
6. Finance (seven (7) audit questions)
7. Integrated Planning and Reporting (three (3) audit questions)
8. Local Government Employees (five (5) audit questions)
9. Official Conduct (four (4) audit questions)
10. Optional Questions (nine (9) audit questions)
11. Tenders (twenty-two (22) audit questions)

The audit questions are specific in nature and require a yes/no/NA response. Officers have provided further comment where appropriate.

The CAR covers the period 1 January 2022 to 31 December 2022 and is presented in Appendix 1.

COMMENTS AND DETAILS

The completed 2022 CAR is required to be:

1. Presented for review by the Committee before being presented for consideration and adoption by Council
2. Returned to the DLGSC with a copy of the relevant Committee and Council Minutes by 31 March 2023

The CAR has been undertaken as an internal audit, sourcing evidence of compliance through the Shire's record keeping systems and where required, through additional information held within respective sections of the organisation.

A summary of areas reviewed as part of the 2022 CAR is provided below:

Audit Focus	Comment
Commercial Enterprises	No major trading activities were undertaken during the reporting period
Delegation of Power	No areas of non-compliance were identified
Disclosure of Interest	No areas of non-compliance were identified
Disposal of Property	No areas of non-compliance were identified
Elections	No elections were held during the reporting period
Finance	The Office of the Auditor General was not able to provide a copy of the financial/auditors report by 31 December 2022
Integrated Planning and Reporting	The Committee will note the comment in relation to the vote via Absolute Majority
Local Government Employees	No areas of non-compliance were identified
Official Conduct	No areas of non-compliance were identified
Optional Questions	The Committee will note the comment in relation to consolidated versions of the Shire's Local Laws
Tenders	No areas of non-compliance were identified

OPTIONS

The Committee has the following options:

Option 1: The Committee could choose not to recommend acceptance of the CAR and request changes be made to the document prior to submission. Noting that the CAR is required to be presented to the Committee and Council prior to submission to the DLGSC by 31 March 2023.

Option 2: The Committee could choose to recommend Council accept the CAR and submit it to the DLGSC by 31 March 2023.

Option 2 is the recommended option.

IMPLICATIONS TO CONSIDER

Consultative

Executive Leadership Team

Other Officers as required

Strategic

Strategic Community Plan 2020-2030

Goal 5: Strong Leadership and Governance

To have effective and responsive leadership and governance, where a sense of collective purpose and shared direction combine to work together.

Policy Related

G19 Risk Assessment and Management

G20 Legislative Compliance

O6 Internal Controls

Financial

Nil

Legal and Statutory

Regulations 14 and 15 of the *Local Government (Audit) Regulations 1996* are applicable and state:

"14. Compliance audits by local governments

(1) A local government is to carry out a compliance audit for the period 1 January to 31 December in each year.

(2) After carrying out a compliance audit the local government is to prepare a compliance audit return in a form approved by the Minister.

(3A) The local government's audit committee is to review the compliance audit return and is to report to the council the results of that review.

(3) After the audit committee has reported to the council under subregulation (3A), the compliance audit return is to be —

(a) presented to the council at a meeting of the council; and

(b) adopted by the council; and

(c) recorded in the minutes of the meeting at which it is adopted.

15. Certified copy of compliance audit return and other documents to be given to Departmental CEO

(1) After the compliance audit return has been presented to the council in accordance with regulation 14(3) a certified copy of the return together with —

(a) a copy of the relevant section of the minutes referred to in regulation 14(3)(c); and

(b) any additional information explaining or qualifying the compliance audit,

is to be submitted to the Departmental CEO by 31 March next following the period to which the return relates.

(2) In this regulation —

***certified** in relation to a compliance audit return means signed by —*

(a) the mayor or president; and

(b) the CEO."

Risk Related

The requirement to lodge an adopted CAR with the DLGSC is a legislative requirement. Failure to do so exposes Council to significant risk. This report and its appendices mitigate this risk.

Workforce

The CAR has been completed in-house within existing resources.

VOTING REQUIREMENTS

Absolute Majority: No

RECOMMENDATION

That, with regard to the Compliance Audit Return 2022, the Audit and Risk Committee recommends that Council:

1. **Resolves to adopt the completed 2022 Compliance Audit Return, as presented in Appendix 1, for certification by the Shire President and the Chief Executive Officer in accordance with Regulation 15(2) of the *Local Government (Audit) Regulations 1996.***
2. **Requests the Chief Executive Officer to submit the 2022 Compliance Audit Return to the Departmental CEO of the Department of Local Government, Sport and Cultural Industries prior to 31 March 2023 in accordance with Regulation 15(1) of the *Local Government (Audit) Regulations 1996*.**

Home (/) / Compliance Audit Return (/CAR/) / **Compliance Audit Return Form**

Compliance Audit Return Form

- Start ✔
- Details ✔
- Commercial Enterprises ✔
- Delegation ✔
- Disclosure of Interest ✔
- Disposal of Property ✔
- Elections ✔
- Finance ✔
- IPR ✔
- Employees ✔
- Conduct ✔
- Other ✔
- Tenders ✔
- Documents ✔
- Review
- Finalise

Print

Details

Local Government

York, Shire of

Created By

Vanessa Green

Year of Return

2022

Status

Draft

Commercial Enterprises by Local Governments

1. Has the local government prepared a business plan for each major trading undertaking that was not exempt in 2022? *

N/A

☑ **Add comments**

Please enter comments *

No major trading activities were undertaken during the reporting period

2. Has the local government prepared a business plan for each major land transaction that was not exempt in 2022? *

N/A

☑ **Add comments**

Please enter comments *

No major land transactions were undertaken during the reporting period

3. Has the local government prepared a business plan before entering into each land transaction that was preparatory to entry into a major land transaction in 2022? *

N/A

☐ **Add comments**

—

4. Has the local government complied with public notice and publishing requirements for each proposal to commence a major trading undertaking or enter into a major land transaction or a land transaction that is preparatory to a major land transaction for 2022? *

N/A

☐ **Add comments**

—

5. During 2022, did the council resolve to proceed with each major land transaction or trading undertaking by absolute majority? *

N/A

☐ **Add comments**

—

Delegation of Power/Duty

1. Were all delegations to committees resolved by absolute majority? *

N/A

☑ **Add comments**

Please enter comments *

No Committee has delegated authority

2. Were all delegations to committees in writing? *

N/A

☑ **Add comments**

Please enter comments *

No Committee has delegated authority

3. Were all delegations to committees within the limits specified in section 5.17 of the Local Government Act 1995? *

N/A

☑ **Add comments**

Please enter comments *

No Committee has delegated authority

4. Were all delegations to committees recorded in a register of delegations? *

N/A

☑ **Add comments**

Please enter comments *

No Committee has delegated authority

5. Has council reviewed delegations to its committees in the 2021/2022 financial year? *

N/A

☑ **Add comments**

Please enter comments *

No Committee has delegated authority

6. Did the powers and duties delegated to the CEO exclude those listed in section 5.43 of the Local Government Act 1995? *

Yes

☐ **Add comments**

—

7. Were all delegations to the CEO resolved by an absolute majority? *

Yes

☐ **Add comments**

—

8. Were all delegations to the CEO in writing? *

Yes

☐ **Add comments**

—

9. Were all delegations by the CEO to any employee in writing? *

Yes

☐ **Add comments**

—

10. Were all decisions by the Council to amend or revoke a delegation made by absolute majority? *

Yes

☐ **Add comments**

—

11. Has the CEO kept a register of all delegations made under Division 4 of the Local Government Act 1995 to the CEO and to employees? *

Yes

☐ **Add comments**

—

12. Were all delegations made under Division 4 of the Act reviewed by the delegator at least once during the 2020/2021 financial year? *

Yes

☑ **Add comments**

Please enter comments *

Delegations reviewed December 2021 Item SY157-12/21 Resolution 051221

13. Did all persons exercising a delegated power or duty under the Local Government Act 1995 keep, on all occasions, a written record in accordance with Local Government (Administration) Regulations 1996 regulation 19? *

Yes

☐ **Add comments**

—

Disclosure of Interest

1. Where a council member disclosed an interest in a matter and did not have participation approval under sections 5.68 or 5.69 of the Local Government Act 1995, did the council member ensure that they did not remain present to participate in discussion or decision making relating to the matter? *

Yes

☐ **Add comments**

—

2. Were all decisions regarding participation approval, including the extent of participation allowed and, where relevant, the information required by the Local Government (Administration) Regulations 1996 regulation 21A, recorded in the minutes of the relevant council or committee meeting? *

N/A

☑ **Add comments**

Please enter comments *

Council were not required to approve a participation request

3. Were disclosures under sections 5.65, 5.70 or 5.71A(3) of the Local Government Act 1995 recorded in the minutes of the meeting at which the disclosures were made? *

Yes

☐ **Add comments**

—

4. Was a primary return in the prescribed form lodged by all relevant persons within three months of their start day? *

Yes

☐ **Add comments**

—

5. Was an annual return in the prescribed form lodged by all relevant persons by 31 August 2022? *

Yes

Add comments

—

6. On receipt of a primary or annual return, did the CEO, or the mayor/president, give written acknowledgment of having received the return? *

Yes

Add comments

—

7. Did the CEO keep a register of financial interests which contained the returns lodged under sections 5.75 and 5.76 of the Local Government Act 1995? *

Yes

Add comments

—

8. Did the CEO keep a register of financial interests which contained a record of disclosures made under sections 5.65, 5.70, 5.71 and 5.71A of the Local Government Act 1995, in the form prescribed in the Local Government (Administration) Regulations 1996, regulation 28? *

Yes

Add comments

—

9. When a person ceased to be a person required to lodge a return under sections 5.75 and 5.76 of the Local Government Act 1995, did the CEO remove from the register all returns relating to that person? *

Yes

☐ **Add comments**

—

10. Have all returns removed from the register in accordance with section 5.88(3) of the Local Government Act 1995 been kept for a period of at least five years after the person who lodged the return(s) ceased to be a person required to lodge a return? *

Yes

☐ **Add comments**

—

11. Did the CEO keep a register of gifts which contained a record of disclosures made under sections 5.87A and 5.87B of the Local Government Act 1995, in the form prescribed in the Local Government (Administration) Regulations 1996, regulation 28A? *

Yes

☐ **Add comments**

—

12. Did the CEO publish an up-to-date version of the gift register on the local government's website? *

Yes

☑ **Add comments**

Please enter comments *

https://www.york.wa.gov.au/gift-and-travel-register.aspx

13. When people cease to be a person who is required to make a disclosure under section 5.87A or 5.87B of the Local Government Act 1995, did the CEO remove from the register all records relating to those people? *

N/A

☑ **Add comments**

Please enter comments *

No person ceased to be a relevant person during the reporting period

14. Have copies of all records removed from the register under section 5.89A(6) Local Government Act 1995 been kept for a period of at least five years after the person ceases to be a person required to make a disclosure? *

Yes

☐ **Add comments**

—

15. Where an employee had an interest in any matter in respect of which the employee provided advice or a report directly to council or a committee, did that person disclose the nature and extent of that interest when giving the advice or report? *

Yes

☐ **Add comments**

—

16. Where council applied to the Minister to allow the CEO to provide advice or a report to which a disclosure under section 5.71A(1) of the Local Government Act 1995 relates, did the application include details of the nature of the interest disclosed and any other information required by the Minister for the purposes of the application? *

Yes

☐ **Add comments**

—

17. Was any decision made by the Minister under section 5.71B(6) of the Local Government Act 1995, recorded in the minutes of the council meeting at which the decision was considered? *

Yes

☑ **Add comments**

Please enter comments *

Item SY138-12/22 December 2022 Resolution 081222

18. Did the local government prepare and adopt, by absolute majority, a code of conduct to be observed by council members, committee members and candidates within 3 months of the prescribed model code of conduct coming into operation (3 February 2021)? *

Yes

☑ **Add comments**

Please enter comments *

Adopted July 2021 Resolution 060421, reviewed August 2022 Resolution 150822

19. Did the local government adopt additional requirements in addition to the model code of conduct? If yes, does it comply with section 5.104(3) and (4) of the Local Government Act 1995? *

No

☐ **Add comments**

—

20. Has the CEO published an up-to-date version of the code of conduct for council members, committee members and candidates on the local government's website? *

Yes

☑ **Add comments**

Please enter comments *

https://www.york.wa.gov.au/plan-build/planning/council-policies.aspx

21. Has the CEO prepared and implemented a code of conduct to be observed by employees of the local government? *

Yes

☑ **Add comments**

Please enter comments *

Policy O8 - https://www.york.wa.gov.au/plan-build/planning/council-policies.aspx

Has the CEO published an up-to-date version of the code of conduct for employees on the local government's website? *

Yes

Disposal of Property

1. Where the local government disposed of property other than by public auction or tender, did it dispose of the property in accordance with section 3.58(3) of the Local Government Act 1995 (unless section 3.58(5) applies)? *

Yes

☑ **Add comments**

Please enter comments *

Three leases entered into and approved by Council during this period

2. Where the local government disposed of property under section 3.58(3) of the Local Government Act 1995, did it provide details, as prescribed by section 3.58(4), in the required local public notice for each disposal of property? *

Yes

☐ **Add comments**

—

Elections

1. Did the CEO establish and maintain an electoral gift register and ensure that all disclosure of gifts forms completed by candidates and donors and received by the CEO were placed on the electoral gift register at the time of receipt by the CEO and in a manner that clearly identifies and distinguishes the forms relating to each candidate in accordance with regulation 30G(1) and regulation 30G(2) of the Local Government (Elections) Regulations 1997? *

N/A

☑ **Add comments**

Please enter comments *

No election held

2. Did the CEO remove any disclosure of gifts forms relating to unsuccessful candidates, or successful candidates that completed their term of office, from the electoral gift register, and retain those forms separately for a period of at least two years in accordance with regulation 30G(4) of the Local Government (Elections) Regulations 1997? *

N/A

☑ **Add comments**

Please enter comments *

No election held

3. Did the CEO publish an up-to-date version of the electoral gift register on the local government's official website in accordance with regulation 30G(5) of the Local Government (Elections) Regulations 1997? *

N/A

☑ **Add comments**

Please enter comments *

No election held

Finance

1. Has the local government established an audit committee and appointed members by absolute majority in accordance with section 7.1A of the Local Government Act 1995? *

Yes

☑ **Add comments**

Please enter comments *

November 2021 Item SY144-11/21 Resolution 331121

2. Where the council delegated to its audit committee any powers or duties under Part 7 of the Local Government Act 1995, did it do so by absolute majority? *

N/A

☑ **Add comments**

Please enter comments *

The Committee has no delegated authority

3. Was the auditor's report for the financial year ended 30 June 2022 received by the local government by 31 December 2022? *

No

☑ **Add comments**

Please enter comments *

The Office of the Auditor General was not able to provide a copy of the financial/auditors report by 31 December 2022, as confirmed in email from the OAG dated 14 December 2022

4. Where the local government determined that matters raised in the auditor's report prepared under section 7.9(1) of the Local Government Act 1995 required action to be taken, did the local government ensure that appropriate action was undertaken in respect of those matters? *

N/A

☑ **Add comments**

Please enter comments *

Audit Report not received to enable any matters raised to be addressed

5. Where matters identified as significant were reported in the auditor's report, did the local government prepare a report that stated what action the local government had taken or intended to take with respect to each of those matters? Was a copy of the report given to the Minister within three months of the audit report being received by the local government? *

N/A

☑ **Add comments**

Please enter comments *

Refer above

6. Within 14 days after the local government gave a report to the Minister under section 7.12A(4)(b) of the Local Government Act 1995, did the CEO publish a copy of the report on the local government's official website? *

N/A

☑ **Add comments**

FIN-AR-Publish14DaysComments *

Refer above

7. Was the auditor's report for the financial year ending 30 June 2022 received by the local government within 30 days of completion of the audit? *

N/A

☑ **Add comments**

Please enter comments *

Refer above

Integrated Planning and Reporting

1. Has the local government adopted by absolute majority a strategic community plan? *

Yes

☑ **Add comments**

Please provide the adoption date or the date of the most recent review *

23/06/2020

Please enter comments *

SCP was adopted in 2020 reporting year Item SY085-06/20 Resolution 060620 *Note* Council report states Absolute Majority not required. However, vote count was an Absolute Majority

2. Has the local government adopted by absolute majority a corporate business plan? *

Yes

☑ **Add comments**

Please provide the adoption date or the date of the most recent review *

25/08/2020

Please enter comments *

CBP was adopted in 2020 reporting year by Absolute Majority Item SY122-08/20 Resolution 060820

3. Does the corporate business plan comply with the requirements of Local Government (Administration) Regulations 1996 19DA(2) & (3)? *

Yes

☐ **Add comments**

—

Local Government Employees

1. Were all CEO and/or senior employee vacancies advertised in accordance with Local Government (Administration) Regulations 1996, regulation 18A? *

N/A

Add comments

Please enter comments *

An Acting EMCCS role was appointed. However, this was not required to be advertised in accordance with Admin Reg 18A(1)(b) as the contract term was 6 weeks

2. Was all information provided in applications for the position of CEO true and accurate? *

N/A

Add comments

Please enter comments *

No recruitment process was required for selection & appointment of a CEO

3. Was the remuneration and other benefits paid to a CEO on appointment the same remuneration and benefits advertised for the position under section 5.36(4) of the Local Government Act 1995? *

N/A

Add comments

Please enter comments *

No recruitment process was required for selection & appointment of a CEO

4. Did the CEO inform council of each proposal to employ or dismiss senior employee? *

Yes

Add comments

Please enter comments *

The Acting EMCCS role was presented to Council September 2022 SY093-09/22 Resolution 010922

5. Where council rejected a CEO's recommendation to employ or dismiss a senior employee, did it inform the CEO of the reasons for doing so? *

N/A

Add comments

Please enter comments *

Council did not reject the CEO's recommendation

Official Conduct

1. Has the local government designated an employee to be its complaints officer? *

Yes

☑ **Add comments**

Please enter comments *

Council appointed the CEO at its February 2021 Meeting SY11-02/21 Resolution 130221

2. Has the complaints officer for the local government maintained a register of complaints which records all complaints that resulted in a finding under section 5.110(2)(a) of the Local Government Act 1995? *

Yes

☐ **Add comments**

—

3. Does the complaints register include all information required by section 5.121(2) of the Local Government Act 1995? *

Yes

☐ **Add comments**

—

4. Has the CEO published an up-to-date version of the register of the complaints on the local government's official website? *

Yes

☑ **Add comments**

Please enter comments *

https://www.york.wa.gov.au/council/your-council/register-of-complaints.aspx

Other

1. Did the CEO review the appropriateness and effectiveness of the local government's financial management systems and procedures in accordance with the Local Government (Financial Management) Regulations 1996 regulations 5(2)(c) within the three financial years prior to 31 December 2022?

Yes

☑ **Add comments**

Please provide the date of council's resolution to accept the report. *

29/09/2020

Please enter comments *

Last done 29 September 2020 SY134-09/20 Resolution 020920

2. Did the CEO review the appropriateness and effectiveness of the local government's systems and procedures in relation to risk management, internal control and legislative compliance in accordance with Local Government (Audit) Regulations 1996 regulation 17 within the three financial years prior to 31 December 2022?

Yes

☑ **Add comments**

Please provide the date of council's resolution to accept the report. *

29/09/2020

Please enter comments *

Last done 29 September 2020 SY134-09/20 Resolution 020920

3. Where a disclosure was made under sections 5.87A or 5.87B of the Local Government Act 1995, were the disclosures made within 10 days after receipt of the gift? Did the disclosure include the information required by section 5.87C of the Act?

Yes

☑ **Add comments**

Please enter comments *

https://www.york.wa.gov.au/disclosure-of-gifts.aspx

4. Did the local government prepare, adopt by absolute majority and publish an up-to-date version on the local government's website, a policy dealing with the attendance of council members and the CEO at events?

Yes

Add comments

Please enter comments *

Policy E9 available https://www.york.wa.gov.au/plan-build/planning/council-policies.aspx

5. Did the CEO publish information on the local government's website in accordance with sections 5.96A(1), (2), (3), and (4) of the Local Government Act 1995?

No

Add comments

Please enter comments *

Section 5.96A(1)(b) is non-compliant in that the published local laws are not consolidated versions. Instead the original local law and the amendment local law are individually published. All other Sections are compliant

6. Did the local government prepare and adopt (by absolute majority) a policy in relation to the continuing professional development of council members?

Yes

Add comments

Please enter comments *

Policy E2 adopted 28 January 2016, last reviewed 31 March 2020 SY039-03/20 Resolution 100320

7. Did the local government prepare a report on the training completed by council members in the 2021/2022 financial year and publish it on the local government's official website by 31 July 2022?

Yes

Add comments

OQ-CouncilMemberTrainingPublishComments *

https://www.york.wa.gov.au/council/your-council/councillors.aspx

8. By 30 September 2022, did the local government submit to its auditor the balanced accounts and annual financial report for the year ending 30 June 2022?

Yes

Add comments

Please enter comments *

Submitted via email on Friday 30 September 2022 at 3.53pm

9. When adopting the annual budget, did the local government take into account all its expenditure, revenue and income?

Yes

☑ **Add comments**

Please enter comments *

All anticipated income and expenditure was taken into account at the time of budget adoption.

Tenders for Providing Goods and Services

1. Did the local government comply with its current purchasing policy, adopted under the Local Government (Functions and General) Regulations 1996, regulations 11A(1) and (3) in relation to the supply of goods or services where the consideration under the contract was, or was expected to be, $250,000 or less or worth $250,000 or less? *

Yes

☑ **Add comments**

Please enter comments *

The Shire of York Policy requires tenders to be called for amounts over $150,000

2. Subject to Local Government (Functions and General) Regulations 1996, regulation 11(2), did the local government invite tenders for all contracts for the supply of goods or services where the consideration under the contract was, or was expected to be, worth more than the consideration stated in regulation 11(1) of the Regulations? *

Yes

☑ **Add comments**

Please enter comments *

Three tenders were called during the reporting period, conducted via WALGA's Preferred Supplier Program (F&G Reg 11(2)(b

3. When regulations 11(1), 12(2) or 13 of the Local Government Functions and General) Regulations 1996, required tenders to be publicly invited, did the local government invite tenders via Statewide public notice in accordance with Regulation 14(3) and (4)? *

N/A

☑ **Add comments**

Please enter comments *

Tenders were called through WALGA's Preferred Supplier Program

4. Did the local government comply with Local Government (Functions and General) Regulations 1996, Regulation 12 when deciding to enter into multiple contracts rather than a single contract? *

N/A

☐ **Add comments**

—

5. If the local government sought to vary the information supplied to tenderers, was every reasonable step taken to give each person who sought copies of the tender documents or each acceptable tenderer notice of the variation? *

Yes

☐ **Add comments**

—

6. Did the local government's procedure for receiving and opening tenders comply with the requirements of Local Government (Functions and General) Regulations 1996, Regulation 15 and 16? *

Yes

☐ **Add comments**

—

7. Did the information recorded in the local government's tender register comply with the requirements of the Local Government (Functions and General) Regulations 1996, Regulation 17 and did the CEO make the tenders register available for public inspection and publish it on the local government's official website? *

Yes

☑ **Add comments**

Please enter comments *

https://www.york.wa.gov.au/tender-register.aspx

8. Did the local government reject any tenders that were not submitted at the place, and within the time, specified in the invitation to tender? *

N/A

☑ **Add comments**

Please enter comments *

No tenders were not submitted at the place and within the time specified

9. Were all tenders that were not rejected assessed by the local government via a written evaluation of the extent to which each tender satisfies the criteria for deciding which tender to accept? *

Yes

☐ **Add comments**

—

10. Did the CEO give each tenderer written notice containing particulars of the successful tender or advising that no tender was accepted? *

Yes

☐ **Add comments**

—

11. Did the local government's advertising and expression of interest processes comply with the requirements of the Local Government (Functions and General) Regulations 1996, Regulations 21 and 22? *

N/A

☑ **Add comments**

Please enter comments *

No expressions of interest were called

12. Did the local government reject any expressions of interest that were not submitted at the place, and within the time, specified in the notice or that failed to comply with any other requirement specified in the notice? *

N/A

☑ **Add comments**

Please enter comments *

As above

13. Were all expressions of interest that were not rejected under the Local Government (Functions and General) Regulations 1996, Regulation 23(1) & (2) assessed by the local government? Did the CEO list each person as an acceptable tenderer? *

N/A

☑ **Add comments**

Please enter comments *

As above

14. Did the CEO give each person who submitted an expression of interest a notice in writing of the outcome in accordance with Local Government (Functions and General) Regulations 1996, Regulation 24? *

N/A

☑ **Add comments**

Please enter comments *

As above

15. Did the local government invite applicants for a panel of pre-qualified suppliers via Statewide public notice in accordance with Local Government (Functions and General) Regulations 1996, Regulations 24AD(4) and 24AE? *

N/A

☑ **Add comments**

Please enter comments *

No panels of pre-qualified suppliers processes were undertaken

16. If the local government sought to vary the information supplied to the panel, was every reasonable step taken to give each person who sought detailed information about the proposed panel or each person who submitted an application notice of the variation? *

N/A

☑ **Add comments**

Please enter comments *

As above

17. Did the local government's procedure for receiving and opening applications to join a panel of pre-qualified suppliers comply with the requirements of Local Government (Functions and General) Regulations 1996, Regulation 16, as if the reference in that regulation to a tender were a reference to a pre-qualified supplier panel application? *

N/A

☑ **Add comments**

Please enter comments *

As above

18. Did the information recorded in the local government's tender register about panels of pre-qualified suppliers comply with the requirements of Local Government (Functions and General) Regulations 1996, Regulation 24AG? *

N/A

☑ **Add comments**

Please enter comments *

As above

19. Did the local government reject any applications to join a panel of pre-qualified suppliers that were not submitted at the place, and within the time, specified in the invitation for applications? *

N/A

☑ **Add comments**

Please enter comments *

As above

20. Were all applications that were not rejected assessed by the local government via a written evaluation of the extent to which each application satisfies the criteria for deciding which application to accept? *

N/A

☑ **Add comments**

Please enter comments *

As above

21. Did the CEO send each applicant written notice advising them of the outcome of their application? *

N/A

☑ **Add comments**

Please enter comments *

As above

22. Where the local government gave regional price preference, did the local government comply with the requirements of Local Government (Functions and General) Regulations 1996, Regulation 24E and 24F? *

N/A

☑ **Add comments**

Please enter comments *

Regional price preference was not applicable to the tenders

Documents

There are no notes to display.

Close Previous Next

9.4 DELEGATION REVIEW - TENDERS FOR GOODS AND SERVICES AND CONTRACT VARIATIONS

File Number:	**4.4175**
Author:	**Vanessa Green, Council & Executive Support Officer**
Authoriser:	**Chris Linnell, Chief Executive Officer**
Previously before Council:	**Not Applicable**
Disclosure of Interest:	**Nil**
Appendices:	**1. Existing Delegations ⇩** **2. Draft Delegation DE5-6 ⇩**

NATURE OF COUNCIL'S ROLE IN THE MATTER

Legislative

PURPOSE OF REPORT

This report presents a review of delegations relating to tenders for goods and services to Council for consideration and, if satisfactory, adoption.

BACKGROUND

Officers are in the process of conducting the annual review of the Delegations Register. The review is extensive and will be presented to Council before 30 June 2023.

The main objective of the review is to formalise the delegations based on the WALGA model both in terms of content and formatting. This ensures the delegations are legislatively correct, can be entered into the Shire's new compliance platform (Attain) and align with best practice.

The review has highlighted a need to consider the review of delegations relating to tenders and contracts prior to presenting the full review of delegations to Council.

The WALGA model provides delegations relating to tenders for goods and services, accepting and rejecting tenders, varying contracts and exercising contract extension options.

Council's existing delegations (DE5-2 – Tender Evaluation Criteria, DE5-3 – Minor Variation for Goods and Services and DE5-5 – Tenders to be invited for Certain Contracts) do not provide the ability for contracts to be varied once they have been entered into, nor for contracts to be extended. The existing delegations are presented in Appendix 1.

With anticipated contracts being or soon to be entered into, specifically for tree pruning, road sealing and the light industrial area upgrade, it is expected that contract variations and extensions may be necessary.

Without a delegation authorising the Chief Executive Officer and, on a sub-delegation, other Officers to have that decision making ability, all such decisions need to be considered by Council. This would result in delays to the contract and service delivery, or the requirement to conduct a Special Council Meeting to enable such a decision to be made.

COMMENTS AND DETAILS

Officers propose to revoke Council's existing delegations DE5-2 – Tender Evaluation Criteria, DE5-3 – Minor Variation for Goods and Services and DE5-5 – Tenders to be invited for Certain Contracts and replace them with the draft delegation DE5-6 - Tenders for Goods and Services – Accepting and

Rejecting Tenders, Varying Contracts and Exercising Contract Extension Options. A copy of the draft delegation is presented in Appendix 2.

The draft delegation varies from Council's existing delegations as follows:

1. Threshold limit increased from $150,000 to $250,000 in line with legislative requirements. An amendment will be required to Policy F2 – Procurement as a result
2. Authority to accept tenders
3. Authority to accept the next most advantageous tender
4. Authority to determine whether variations are minor
5. Authority to make minor variations after a contract has been entered into
6. Authority to accept a contract extension
7. The inclusion of conditions on the original delegation, which also apply to the sub-delegation
8. The inclusion of a sub-delegation to Executive Managers and the provision of conditions on the use of that sub-delegation

Of note is the definition of 'minor variation' provided within Regulation 20(3) of the *Local Government (Functions & General) Regulations 1996* which states:

***"minor variation** means a variation that the local government is satisfied is minor having regard to the total goods or services that tenderers were invited to supply."*

OPTIONS

Council has the following options:

Option 1: Council could choose to revoke Delegations DE5-2 – Tender Evaluation Criteria, DE5-3 – Minor Variation for Goods and Services and DE5-5 – Tenders to be invited for Certain Contracts and replace them with draft Delegation DE5-6 - Tenders for Goods and Services – Accepting and Rejecting Tenders, Varying Contracts and Exercising Contract Extension Options.

Option 2: Council could choose to reject revoking Delegations DE5-2 – Tender Evaluation Criteria, DE5-3 – Minor Variation for Goods and Services and DE5-5 – Tenders to be invited for Certain Contracts.

Option 3: Council could choose to revoke Delegations DE5-2 – Tender Evaluation Criteria, DE5-3 – Minor Variation for Goods and Services and DE5-5 – Tenders to be invited for Certain Contracts and replace them with an amended version of draft Delegation DE5-6 - Tenders for Goods and Services – Accepting and Rejecting Tenders, Varying Contracts and Exercising Contract Extension Options. Council would need to identify the amendments necessary.

Option 1 is the recommended option.

IMPLICATIONS TO CONSIDER

Consultative

WALGA Governance Team

Executive Leadership Team

Strategic

Strategic Community Plan 2020-2030

Goal 5: Strong Leadership and Governance

To have effective and responsive leadership and governance, where a sense of collective purpose and shared direction combine to work together.

Policy Related

F2 Procurement

F9 Panels of Pre-Qualified Suppliers

G30 Contractor Management Policy

Financial

There are no financial implications associated with the review of delegations.

Legal and Statutory

Section 3.57 of the *Local Government Act 1995* is applicable to tenders and states:

"3.57. Tenders for providing goods or services

(1) A local government is required to invite tenders before it enters into a contract of a prescribed kind under which another person is to supply goods or services.

(2) Regulations may make provision about tenders."

Sections 5.42, 5.43, 5.44, 5.45 and 5.46 of the *Local Government Act 1995* are applicable to delegations and state:

"5.42. Delegation of some powers and duties to CEO

(1) A local government may delegate to the CEO the exercise of any of its powers or the discharge of any of its duties under —*

(a) this Act other than those referred to in section 5.43; or

(b) the Planning and Development Act 2005 section 214(2), (3) or (5).

** Absolute majority required.*

(2) A delegation under this section is to be in writing and may be general or as otherwise provided in the instrument of delegation.

5.43. Limits on delegations to CEO [28]

A local government cannot delegate to a CEO any of the following powers or duties —

(a) any power or duty that requires a decision of an absolute majority of the council;

(b) accepting a tender which exceeds an amount determined by the local government for the purpose of this paragraph;

(c) appointing an auditor;

(d) acquiring or disposing of any property valued at an amount exceeding an amount determined by the local government for the purpose of this paragraph;

(e) any of the local government's powers under section 5.98, 5.98A, 5.99, 5.99A or 5.100;

(f) borrowing money on behalf of the local government;

(g) hearing or determining an objection of a kind referred to in section 9.5;

(ha) the power under section 9.49A(4) to authorise a person to sign documents on behalf of the local government;

(h) any power or duty that requires the approval of the Minister or the Governor;

(i) such other powers or duties as may be prescribed.

5.44. CEO may delegate powers and duties to other employees

(1) A CEO may delegate to any employee of the local government the exercise of any of the CEO's powers or the discharge of any of the CEO's duties under this Act other than this power of delegation.

(2) A delegation under this section is to be in writing and may be general or as otherwise provided in the instrument of delegation.

(3) This section extends to a power or duty the exercise or discharge of which has been delegated by a local government to the CEO under section 5.42, but in the case of such a power or duty —

(a) the CEO's power under this section to delegate the exercise of that power or the discharge of that duty; and

(b) the exercise of that power or the discharge of that duty by the CEO's delegate,

are subject to any conditions imposed by the local government on its delegation to the CEO.

(4) Subsection (3)(b) does not limit the CEO's power to impose conditions or further conditions on a delegation under this section.

(5) In subsections (3) and (4) —

***conditions** includes qualifications, limitations or exceptions.*

5.45. Other matters relevant to delegations under this Division

(1) Without limiting the application of sections 58 and 59 of the Interpretation Act 1984 —

(a) a delegation made under this Division has effect for the period of time specified in the delegation or where no period has been specified, indefinitely; and

(b) any decision to amend or revoke a delegation by a local government under this Division is to be by an absolute majority.

(2) Nothing in this Division is to be read as preventing —

(a) a local government from performing any of its functions by acting through a person other than the CEO; or

(b) a CEO from performing any of his or her functions by acting through another person.

5.46. Register of, and records relevant to, delegations to CEO and employees

(1) The CEO is to keep a register of the delegations made under this Division to the CEO and to employees.

(2) At least once every financial year, delegations made under this Division are to be reviewed by the delegator.

(3) A person to whom a power or duty is delegated under this Act is to keep records in accordance with regulations in relation to the exercise of the power or the discharge of the duty."

Regulations 11(1A) to 24G inclusive of the *Local Government (Functions & General) Regulations 1996* stipulate the requirements to conduct a tender or expression of interest process, and how the tender/expression of interest is to be a managed through a contract for the supply of goods and services. Section 11(1) states:

"(1) Tenders are to be publicly invited according to the requirements of this Division before a local government enters into a contract for another person to supply goods or services if the consideration under the contract is, or is expected to be, more, or worth more, than $250 000 unless subregulation (2) states otherwise."

Risk Related

An appropriate framework of delegations:

1. Ensures accountability
2. Adequately manages risk
3. Increases efficiency and effectiveness of processes and practices
4. Ensures decisions are implemented in a timely manner
5. Complies with relevant legislation, policies and guidelines

Workforce

The scope of this report is managed within current resources.

Where an Officer is delegated or sub-delegated authority, he/she is required to complete a Primary Return and Annual Return in accordance with Sections 5.75 and 5.76 of the *Local Government Act 1995.*

VOTING REQUIREMENTS

Absolute Majority: Yes

RECOMMENDATION

That, with regard to the Delegation Review - Tenders for Goods and Services and Contract Variations, Council:

1. **Revokes Delegations DE5-2 – Tender Evaluation Criteria, DE5-3 – Minor Variation for Goods and Services and DE5-5 – Tenders to be invited for Certain Contracts.**
2. **Adopts Delegation DE5-6 - Tenders for Goods and Services – Accepting and Rejecting Tenders, Varying Contracts and Exercising Contract Extension Options, as presented in Appendix 2.**
3. **Authorises the Chief Executive Officer to amend Policy F2 – Procurement to increase the tender threshold limit from $150,000 to $250,000 to align with Delegation DE5-6 - Tenders for Goods and Services – Accepting and Rejecting Tenders, Varying Contracts and Exercising Contract Extension Options.**
4. **Authorises the Chief Executive Officer to make any minor typographical and formatting changes to Delegation DE5-6 - Tenders for Goods and Services – Accepting and Rejecting Tenders, Varying Contracts and Exercising Contract Extension Options prior to publication.**

DE5-2 Tender Evaluation Criteria

Function to be performed:

The local government must, before tenders are publicly invited, determine in writing the criteria for deciding which tender should be accepted.

Legislative Power or Duty delegated:

Regulation 14(1), (2), (3), (4) or (5) of the *Local Government (Function and General) Regulations 1996.*

Legislative Power to delegate:

Section 5.42 and Section 5.44, *Local Government Act 1995*

Policy Provision:

F2 - Procurement

Delegation to:

Chief Executive Officer

Delegation:

The Chief Executive Officer is delegated the power to determine in writing the tender evaluation criteria prior to tenders being advertised.

Conditions and Exceptions:

After a notice has been given under the *Local Government (Function and General) Regulations 1996* 14(1) or (2), a local government may vary the information referred to in (3) by taking reasonable steps to give each person who has sought copies of the tender documents or each acceptable tenderer, as the case may be, notice of the variation.

Chief Executive Officer delegates to:

Executive Manager: Infrastructure and Development Services
Executive Manager: Corporate and Community Services

Power of Duty Delegated by Chief Executive Officer:
The CEO delegates the exercise of this delegated power to the above Officers. The exercise of the delegated power does not include the power of further delegation.

Reporting Requirements:

Details for the use of this delegation will be recorded in the records & information management system to meet legislative requirements.

Financial Interest Return Required: Yes

Details of Review: Adopted - 18 April 2016
Reviewed – 24 October 2016
Amended – 27 November 2017

Reviewed – 17 December 2018
Reviewed – 25 November 2019
Amended – 22 December 2020
Reviewed – 21 December 2021

DE5-3 Minor Variation for Goods and Services

Function to be performed:

A local government may, with the approval of the tenderer, make a minor variation in a contract for goods or services before it enters the contract with the successful tenderer.

Legislative Power or Duty delegated:

Regulation 20(1) of the *Local Government (Function and General) Regulations 1996*

Legislative Power to delegate:

Section 5.42 and Section 5.44, *Local Government Act 1995*

Policy Provision:

F2 - Procurement

Delegation to:

Chief Executive Officer

Delegation:

The Chief Executive Officer is delegated the power, with the approval of the tenderer, to make a minor variation in a contract for goods or services before the Shire enters the contract with the successful tenderer, subject to Regulation 20(1) of the *Local Government (Functions and General) Regulations 1996*.

Conditions and Exceptions:

Minor variations before entering a contract are limited to a maximum value of aggregated variations which remain under 10% of the total contract value and remain within the relevant adopted Budget allocation.

Chief Executive Officer delegates to:

Nil

Delegation delegated by the CEO:

N/A

Reporting Requirements:

Details for the use of this delegation will be recorded in the records & information management system to meet legislative requirements.

Financial Interest Return Required: Yes

Details of Review:
Adopted – 18 April 2016
Reviewed – 24 October 2016
Amended – 27 November 2017
Reviewed – 17 December 2018
Reviewed – 25 November 2019
Reviewed – 22 December 2020
Reviewed – 21 December 2021

DE5-5 Tenders to be invited for Certain Contracts

Function to be performed:

a) Determining, in writing, the criteria for deciding which tender should be accepted prior to tenders being publicly invited; and
b) Publicly inviting tenders before entering into a contract for the supply of goods or services if the consideration under the contract is, or is expected to be, worth more than $150,000.

Legislative Power or Duty delegated:

a) Regulation 14(2a) of the *Local Government (Function and General) Regulations 1996*; and
b) Section 3.57(1) of the *Local Government Act 1995*; and
c) Regulation 11(1) of the *Local Government (Function and General) Regulations 1996*.

Policy:

F2 - Procurement

Delegation to:

Chief Executive Officer

Delegation:

The CEO is delegated the authority to:

a) Determining, in writing, the criteria for deciding which tender should be accepted prior to tenders being publicly invited; and

b) Publicly inviting tenders before entering into a contract for the supply of goods or services if the consideration under the contract is, or is expected to be, worth more than $150,000.

Conditions and Exceptions:

Tenders will be awarded by the Council on receipt of a report on the evaluation against predetermined criteria and officers' recommendation.

Chief Executive Officer Delegates to:

Nil

Delegation delegated by the CEO:

N/A

Reporting Requirements:

Details for the use of this delegation will be recorded in the records & information management system to meet legislative requirements.

Financial Interest Return Required: Y*es*

Details of Review:	New – 24 October 2016 Amended – 27 November 2017 Reviewed – 17 December 2018 Reviewed – 25 November 2019 Reviewed – 22 December 2020 Reviewed – 21 December 2021

DE5-6 Tenders for Goods and Services – Accepting and Rejecting Tenders; Varying Contracts; Exercising Contract Extension Options

Delegator: *Power / Duty assigned in legislation to.*	Local Government
Express Power to Delegate: *Power that enables a delegation to be made.*	*Local Government Act 1995:* s.5.42 Delegation of some powers or duties to the CEO s.5.43 Limitations on delegations to the CEO
Express Power or Duty Delegated:	*Local Government Act 1995*: s.3.57 Tenders for providing goods or services *Local Government (Functions and General) Regulations 1996:* r.11(2)(j) Exercising contract extension options r.18(2), (4), (4a), (5), (6) and (7) Rejecting and accepting tenders r.20(1), (2), (3) Variation of requirements before entry into contract r.21A Varying a contract for the supply of goods or services
Delegate:	**Chief Executive Officer**
Function: *This is a precis only. Delegates must act with full understanding of the legislation and conditions relevant to this delegation.*	1. Authority to determine whether or not to reject tenders that do not comply with requirements as specified in the invitation to tender [F&G.r.18(2)]. 2. Authority to seek clarification from tenderers in relation to information contained in their tender submission [F&G r.18(4a)]. 3. Authority to assess, by written evaluation, tenders that have not been rejected, to determine: a. The extent to which each tender satisfies the criteria for deciding which tender to accept; and b. To accept the tender that is most advantageous within the $250,000 detailed as a condition on this Delegation [F&G r.18(4)]. 4. Authority to decline to accept any tender [F&G r.18(5)]. 5. Authority to accept the next most advantageous tender if, within 6-months of accepting a tender, a contract has not been entered into <u>OR</u> the local government and the successful tenderer agree to terminate the contract [F&G r.18(6) & (7)]. 6. Authority to determine whether variations in goods and services required are minor variations, and to negotiate with the successful tenderer to make minor variations <u>before</u> entering into a contract [F&G r.20(1) and (3)].

	7. Authority to choose the next most advantageous tender to accept, if the chosen tenderer is unable or unwilling to form a contract to supply the varied requirement OR the minor variation cannot be agreed with the successful tenderer, so that the tenderer ceases to be the chosen tenderer [F&G r.20(2)]. 8. Authority to vary a tendered contract, after it has been entered into, provided the variation/s are necessary for the goods and services to be supplied, and do not change the scope of the original contract or increase the contract value beyond 10% or to a maximum of $100,000 whichever is the lesser value [F&G r.21A(a)]. 9. Authority to exercise a contract extension option that was included in the original tender specification and contract in accordance with r.11(2)(j).
Council Conditions on this Delegation:	a. Exercise of authority under F&G.r.18(2) requires consideration of whether or not the requirements as specified in the invitation to tender have been expressed as mandatory and if so, discretion may not be capable of being exercised – consider process contract implications. b. In accordance with s.5.43(b), tenders may only be accepted under this delegation, where: i. The total consideration under the resulting contract is $250,000 or less; ii. The expense is included in the adopted Annual Budget; and iii. The tenderer has complied with requirements under F&G r.18(2) and (4). c. A decision to vary a tendered contract before entry into the contract *[F&G r.20(1) and (3)]* must include evidence that the variation is minor in comparison to the total goods or services that tenderers were invited to supply. d. A decision to renew or extend the contract must only occur where the original contract contained the option to renew or extend its term as per r.11(2)(j) and that the contractor's performance has been reviewed and the review evidences the rationale for entering into the extended term.
Express Power to Sub-Delegate:	*Local Government Act 1995:* s.5.44 CEO may delegate some powers and duties to other employees
Sub-Delegate/s: *Appointed by CEO.*	**Executive Manager Corporate and Community Services** **Executive Manager Infrastructure and Development Services**

CEO Conditions on this Sub-Delegation:	a. Each sub-delegate may only use the sub-delegation in regard to contracts that are within the scope of the incumbent's position role and responsibilities. b. Conditions on the original delegation also apply to the sub-delegations. c. The performance of sub-delegation under Function 8 only applies to lump sum contracts and is to align with the authorised limits contained in financial delegations.

Compliance Links:	Delegates are designated employees under s.5.74 and are required to provide Primary and Annual Returns. *Local Government (Functions and General) Regulations 1996* – prescribe applicable statutory procedures WALGA Subscription Service – Procurement Toolkit F2 Procurement Policy
Record Keeping:	Each instance of this delegation being exercised is to be recorded in the Delegations Register (available in Attain via the following link https://attain.net.au/Account/Login) in accordance with r.19 of the *Local Government (Administration) Regulations 1996*. The Delegation's Register is reported to Council in conjunction with the Concept Forum.

Version Control:

1	
2	

10 MOTIONS OF WHICH PREVIOUS NOTICE HAS BEEN GIVEN

Nil

11 QUESTIONS FROM MEMBERS WITHOUT NOTICE

12 BUSINESS OF AN URGENT NATURE INTRODUCED BY DECISION OF THE MEETING

13 CLOSURE