



Shire of Northam  
*Heritage, Commerce and Lifestyle*

## **Shire of Northam**

### **Agenda**

### **Audit & Risk Management Committee**

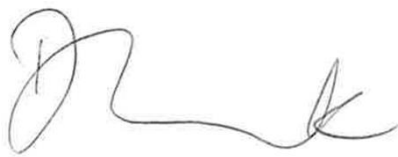
**29 February 2024**

**NOTICE PAPER**  
**Audit & Risk Management Committee**  
**29 February 2024**

Committee Members

I inform you that a Audit & Risk Management Committee will be held in the Council Chambers, located at 395 Fitzgerald Street, Northam on 29 February 2024 at 5:30 pm.

Yours faithfully



**Debbie Terelinck**  
**Chief Executive Officer**

## **DISCLAIMER**

This committee has been delegated authority by Council to receive and assess grant applications; and make a final determination on all grant applications received as part of the Community Grants Scheme.

This agenda has yet to be dealt with by the committee. The Recommendations shown at the foot of each item have yet to be considered by the committee and are not to be interpreted as being the position of the committee. The minutes of the meeting held to discuss this agenda should be read to ascertain the decision of the Council.

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## **1 DECLARATION OF OPENING**

## **2 ACKNOWLEDGEMENT OF COUNTRY**

The Shire of Northam would like to acknowledge the Traditional Owners of the land on which we meet, the Ballardong and Whadjuk people of the Nyoongar nation and pay our respects to Elders, past present and emerging.

## **3 ATTENDANCE**

### **3.1 ATTENDEES**

#### **Council:**

Shire President  
Deputy President  
Councillors

C R Antonio  
M P Ryan  
H J Appleton  
A J Mencshelyi  
M I Girak

#### **Staff:**

Chief Executive Officer  
Executive Manager Corporate Services  
Governance Coordinator  
Governance Officer

D Terelinck  
C J Young  
B J Hadlow  
T P Van Beek

### **3.2 APOLOGIES**

Nil.

### **3.3 APPROVED LEAVE OF ABSENCE**

Nil.

### **3.4 ABSENT**

Nil.

#### **4 DISCLOSURE OF INTERESTS**

Members should fill in Disclosure of Interest forms for items in which they have a financial, proximity or impartiality interest and forward these to the Presiding Member before the meeting commences.

As defined in section 5.60A of the Local Government Act 1995, a **financial interest** occurs where a Councillor / Committee Member, or a person with whom the Councillor / Committee Member is closely associated, has a direct or indirect financial interest in the matter. That is, the person stands to make a financial gain or loss from the decision, either now or at some time in the future.

As defined in section 5.61 of the Local Government Act 1995, an **indirect financial interest** includes a reference to a financial relationship between that person and another person who requires a Local Government decision in relation to the matter.

As defined in section 5.60B of the Local Government Act 1995, a person has a **proximity interest** in a matter if the matter concerns a proposed change to a planning scheme affecting land that adjoins the person's land; or a proposed change to the zoning or use of land that adjoins the person's land; or a proposed development (as defined in section 5.63(5)) of land that adjoins the person's land.

As defined in clause 22 of the Local Government (Model Code of Conduct) Regulations 2021, an **impartiality interest** means an interest that could, or could reasonably be perceived to, adversely affect the impartiality of the person having the interest and includes an interest arising from kinship, friendship or membership of an association.

<b>Item Name</b>	<b>Item No.</b>	<b>Name</b>	<b>Type of Interest</b>	<b>Nature of Interest</b>



**5 CONFIRMATION OF MINUTES**

**5.1 CONFIRMATION OF MINUTES FROM THE AUDIT AND RISK MANAGEMENT COMMITTEE MEETING HELD 11 DECEMBER 2023**

**RECOMMENDATION**

**That the minutes of the Audit and Risk Management Committee Meeting held on 11 December 2023 be confirmed as a true and correct record of that meeting.**

**6 COMMITTEE REPORTS**

**6.1 Debt Recovery**

<b>File Reference:</b>	N/A
<b>Reporting Officer:</b>	Mia Miller (Management Accountant)
<b>Responsible Officer:</b>	Colin Young (Executive Manager Corporate Services)
<b>Officer Declaration of Interest:</b>	Nil
<b>Voting Requirement:</b>	Simple Majority
<b>Press release to be issued:</b>	No

**BRIEF**

The purpose of this report is to provide an update on the Shire of Northam's outstanding Rates debt and Sundry debt.

**ATTACHMENTS**

Nil

**A. BACKGROUND / DETAILS**

Debt owed to the Shire of Northam arises due to various processes. Rates debt arises through the Shire's issuing of annual Rates Notices. Sundry debtors are created when an invoice is issued for goods or services provided by the Shire. Infringements are issued for (non) compliance matters, and those that remain unpaid after three months are referred to Fines Enforcement Registry (FER) for collection.

**B. CONSIDERATIONS**

**B.1 Strategic Community / Corporate Business Plan**

Performance Area: Performance. Outcome 12: Excellence in organisational performance and customer service.

Objective 12.1: Maintain a high standard of corporate governance and financial management.

Priority Action: Nil.

**B.2 Financial / Resource Implications**

The Shire is responsible for the upfront court filing and service fees for accounts referred to debt collection. However, solicitor's fees are now only billed once the ratepayer pays the Shire or the account is withdrawn. Under the Local Government Act 1995, these costs are recoverable.

**B.3 Legislative Compliance**

The Local Government Act 1995 Section 6.56(1) allows a Council to recover money owed to the Council and associated costs. 6.56. (1) If a rate or service charge remains unpaid after it becomes due and payable, the local government may recover it, as well as the costs of proceedings, if any, for that recovery, in a court of competent jurisdiction.

**B.4 Policy Implications**

F4.8 Rates Hardship Policy

**B.5 Stakeholder Engagement / Consultation**

Rates Notice issued August 2023, Final notice Issued October 2023, additional letters, emails and calls to follow up debt has commenced January 2024.

**B.6 Risk Implications**

Refer to Risk Matrix [here](#).

<b>Risk Category</b>	<b>Description</b>	<b>Rating (likelihood x consequence)</b>	<b>Mitigation Action</b>
Financial	\$25,001 - \$250,000	Medium (3) x Possible (3) = Moderate (9)	Adherence to debt management policy and procedures.
Health & Safety	N/A	N/A	N/A
Reputation	Low impact, low news item	Insignificant (1) x Possible (3) = Low (3)	Ensure debt management



			procedure is transparent.
Service Interruption	N/A	N/A	N/A
Compliance	N/A	N/A	N/A
Property	N/A	N/A	N/A
Environment	N/A	N/A	N/A

**B.7 Natural Environment Considerations**

Nil

**C. OFFICER'S COMMENT**

The Manage Rates Recovery and Debt Management procedures for the Shire's rate and service charges and sundry debt are currently under review. These procedures will take into consideration Policy F4.8 Rates Hardship Policy (if applicable) and be in compliance with the Local Government Act 1995.

Actions undertaken for rates and service charge recovery for 2023/2024 have commenced and the Rates Officer is making reasonable effort to contact ratepayers who have not responded to the Rates Notice or Final Demand. These actions are phone calls, emails and if required posted correspondence. The next step will be to refer cases for debt collection to the Shire's debt collection agent. This will be determined on a case-by-case basis.

As an ongoing measure to recover outstanding rates and charges and reduce overall rate debt, the Shire enters into special payment arrangements other than the two and four instalment options for outstanding rates and service charge debt. These are negotiated on an individual basis with ratepayers who may be experiencing financial difficulty. The Shire's expectation of an acceptable payment arrangement is to have the outstanding debts, and further rates as become due, recovered within two financial years. Since January the Shire has entered 51 new payment arrangements and it is our intention to review existing special arrangements annually.

Actions undertaken for sundry debt recovery are of an ongoing nature. The Debtors Officer reviews outstanding debtors weekly to identify overdue accounts. The accounts are followed up by email, phone and posted correspondence until paid. In the rare occasions that the debtor is unresponsive, the next step is to refer cases for debt collection to the Shire's debt collection agent. This is also determined on a case-by-case basis and considers the nature of the debt and value.



**RECOMMENDATION**

**That the Audit & Risk Management Committee endorses the following recommendation being presented to Council:**

- 1. That Council acknowledges the update regarding Rates debt and Sundry debt.**

## **6.2 Compliance Audit Return 2023**

<b>File Reference:</b>	1.6.1.6
<b>Reporting Officer:</b>	Britt Hadlow (Governance Coordinator)
<b>Responsible Officer:</b>	Debbie Terelinck (Chief Executive Officer)
<b>Officer Declaration of Interest:</b>	Nil
<b>Voting Requirement:</b>	Simple Majority
<b>Press release to be issued:</b>	No

### **BRIEF**

This report is to provide information to assist Council in the adoption of the 2023 Compliance Audit Return (CAR).

### **ATTACHMENTS**

1. Shire of Northam - 2023 Compliance Audit Return [**6.2.1** - 25 pages]
2. Shire of Northam - 2023 Compliance Review Report [**6.2.2** - 3 pages]

### **A. BACKGROUND / DETAILS**

Under the *Local Government (Audit) Regulations 1996*, a Local Government is required to carry out a Compliance Audit for the period 1 January to 31 December of each year. The certified return should be submitted to the Department of Local Government, Sport and Cultural Industries by 31 March each year.

The CAR must be:

1. Be reviewed by the Audit & Risk Management Committee;
2. Presented at a meeting of the Council;
3. Be adopted by the Council; and
4. Recorded in the minutes of the meeting at which it is adopted.

In relation to the year 2023, a copy of the return is to be submitted for Council Member perusal, comment and adoption prior to 31 March 2024. It is necessary for the Shire President and the Chief Executive Officer to sign off the return as a certified copy.

The 2023 Compliance Audit Return has been completed by an external consultant, Australian Audit due to Council requiring the CAR to be audited by an external consultant every 3 years.

The compliance review process provides Council and the Chief Executive Officer with an additional element of accountability through a check of internal management systems, procedures and record keeping and this demonstrates the Shire's emphasis on improving its governance and compliance, and demonstrating best practice.

**B. CONSIDERATIONS**

**B.1 Strategic Community / Corporate Business Plan**

Performance Area: Performance. Outcome 12: Excellence in organisational performance and customer service.

Objective 12.1: Maintain a high standard of corporate governance and financial management.

Priority Action: Nil.

**B.2 Financial / Resource Implications**

Budget expenditure for an external consultant to carry out the audit.

**B.3 Legislative Compliance**

*Local Government Act 1995;*

*Local Government (Functions and General) Regulations 1996;*

*Local Government (Administration) Regulations 1996;*

*Local Government (Elections) Regulations 1997;*

*Local Government (Audit) Regulations 1996;*

*Local Government (Rules of Conduct) Regulations 2007.*

**B.4 Policy Implications**

Nil.

**B.5 Stakeholder Engagement / Consultation**

Australian Audit, a WALGA preferred supplier was engaged to undertake the CAR audit for 2023.

**B.6 Risk Implications**

Refer to Risk Matrix [here](#).

<b>Risk Category</b>	<b>Description</b>	<b>Rating (likelihood x consequence)</b>	<b>Mitigation Action</b>
Financial	Financial misconduct occurring in the Shire.	Possible (3) x Major (4) = High (12)	Conduct required audits and report to Council.
Health & Safety	N/A		

Reputation	Poor Governance and Finance management.	Possible (3) x Major (4) = High (12)	Conduct required audits and report to Council.
Service Interruption	N/A		
Compliance	Non-compliance with relevant legislation.	Possible (3) x Medium (3) = Moderate (9)	Adopt the Compliance Audit Return by 31 March.  Undertake a monthly internal audit.  Have CAR audited externally every 3 years.
Property	N/A		
Environment	N/A		

**B.7 Natural Environment Considerations**

N/A

**C. OFFICER'S COMMENT**

Each year the Shire strives to improve the services it provides to both external and internal stakeholders. The 2023 CAR audit result of 99% is an increase from the 2022 CAR which was 97% compliant.

This year there were 11 categories with a total of 94 questions.

The 2023 CAR audit states that the Shire has 99% compliance overall. There was one non-compliance which is as follows:

- *F&G Reg 11A(1) & (3)*

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?

**Comment:** The Shire does comply with the procurement policy which is in line with the *Local Government (Functions and General) Regulations 1996, regulations 11A (1) and (3)* in relation to the supply of goods or services. However, based on the Shire's monthly monitoring there have been occasions where purchase orders have not been approved prior to a supplier invoice being received.

This finding is common across local governments; however, the Shire is actively attempting to mitigate the risk relating to non-compliance with the purchase order process through monthly procurement audits and ongoing staff training.

The final CAR and findings from the return can be found in Attachments 6.2.1 and 6.2.2.

#### **RECOMMENDATION**

**That the Audit & Risk Management Committee endorses the following recommendations being presented to Council:**

**That Council:**

- 1. Endorses the Compliance Audit Return for the period 1 January to 31 December 2023 as presented in Attachment 6.2.1.**
- 2. Notes the findings of the Compliance Audit Return as presented in Attachment 6.2.2.**
- 3. Authorises the CEO to submit the report to the Department of Local Government, Sport and Cultural Industries.**

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Compliance Audit Return Form - Starter Portal

[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

Northam, Shire of

### Created By

Britt Hadlow

### Year of Return

2023

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Compliance Audit Return Form - Starter Portal

Status

Draft

## Commercial Enterprises by Local Governments

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1. Has the local government prepared a business plan for each major trading undertaking that was not exempt in 2023? \*

N/A

Add comments

Please enter comments \*

No major trading activities were completed in 2023

2. Has the local government prepared a business plan for each major land transaction that was not exempt in 2023? \*

N/A

Add comments

Please enter comments \*

No major trading activities were completed in 2023

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 2023? \*

N/A

Add comments

Please enter comments \*

No major trading activities were completed in 2023

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 2023? \*

N/A

Add comments



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Compliance Audit Return Form - Starter Portal

**Please enter comments \***

No major trading activities were completed in 2023

**5. During 2023, did the council resolve to proceed with each major land transaction or trading undertaking by absolute majority? \***

N/A

**Add comments**

**Please enter comments \***

No major trading activities were completed in 2023

## **Delegation of Power/Duty**

---

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

Yes

**Add comments**

**Please enter comments \***

OCM Minutes 21/06/2023 - Website. Council approved 2023-24 Delegations OCM 21/6/2023.

Only Grant Committee has delegation (decision making).

**2. Were all delegations to committees in writing? \***

Yes

**Add comments**

**Please enter comments \***

MOU available on request.

Delegation Register on website: <https://www.northam.wa.gov.au/documents/11673/delegated-authority-register-2023-24>

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

Yes

**Add comments**

**Please enter comments \***

Delegation Register on website: <https://www.northam.wa.gov.au/documents/11673/delegated-authority-register-2023-24>

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Compliance Audit Return Form - Starter Portal

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

Yes

**Add comments**

**Please enter comments \***

Attachment.

**5. Has council reviewed delegations to its committees in the 2022/2023 financial year? \***

Yes

**Add comments**

**Please enter comments \***

OCM Minutes 21 June 2023

**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**

**Please enter comments \***

OCM Minutes 21 June 2023

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

Yes

**Add comments**

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Compliance Audit Return Form - Starter Portal

**Please enter comments \***

MOU available on request. Outlined in the 2023-24 Delegations Register listed on shire website.

<https://www.northam.wa.gov.au/documents/11673/delegated-authority-register-2023-24>

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

Yes

**Add comments**

**Please enter comments \***

MOU available on request. Outlined in the 2023-24 Delegations Register listed on shire website.

<https://www.northam.wa.gov.au/documents/11673/delegated-authority-register-2023-24>

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

N/A

**Add comments**

—

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

Yes

**Add comments**

**Please enter comments \***

Attachment.

**12. Were all delegations made under Division 4 of the Act reviewed by the delegator at least once during the 2022/2023 financial year? \***

Yes

**Add comments**

**Please enter comments \***

OCM Minutes 21 June 2023

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Compliance Audit Return Form - Starter Portal

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

Yes

**Add comments**

**Please enter comments \***

Attachment.

## 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**

**Please enter comments \***

Council minutes have disclosed the interest and agreed to allow the members to participate. Where participation approval not given relevant Council/Committee members left the room.  
There is also a hardcopy of all disclosures on site.

**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 \***

Shire does instruct all Council members to leave the room if they have a financial or proximity interest. No instances were noted where participation approval was required/resolved in 2023.

<https://www.northam.wa.gov.au/council-meetings/past/2023>

**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**

**Please enter comments \***

<https://www.northam.wa.gov.au/council-meetings/past/2023>

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Compliance Audit Return Form - Starter Portal

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

Yes

**Add comments**

**Please enter comments \***

Managed electronically (Attachment). Copies of returns and correspondence related is available on request.

**5. Was an annual return in the prescribed form lodged by all relevant persons by 31 August 2023? \***

Yes

**Add comments**

**Please enter comments \***

Managed electronically and available on request.

Managed electronically (Attachment). Copies of returns and correspondence related is available on request.

**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**

**Please enter comments \***

Managed electronically (Attachment). Copies of returns and correspondence related is available on request.

**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**

**Please enter comments \***

Managed electronically (Attachment). Copies of returns and correspondence related is available on request.

**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**

2/12/24, 2:57 PM

Compliance Audit Return Form - Starter Portal

**Please enter comments \***

Managed electronically (Attachment). Copies of returns and correspondence related is available on request.

**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**

**Please enter comments \***

Managed electronically (Attachment). There is a tick box which removes the staff/Elected Member from the register that goes on the website.

<https://www.northam.wa.gov.au/council/your-council/primary-annual-return-register.aspx>

**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**

**Please enter comments \***

Managed electronically (Attachment).

Yes – all annual returns are kept in Synergy record keeping system.

**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? \***

N/A

**Add comments**

**Please enter comments \***

<https://www.northam.wa.gov.au/council/documents-publications/council-registers.aspx>

Last entry was in 27/7/2019. No others since then were required to be recorded.

**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.northam.wa.gov.au/council/documents-publications/council-registers.aspx>

Last entry was in 27/7/2019. No others since then were required to be recorded.

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Compliance Audit Return Form - Starter Portal

**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 \***

<https://www.northam.wa.gov.au/council/documents-publications/council-registers.aspx>

Last entry was in 27/7/2019. No others since then were required to be recorded.

**14. Have copies of all records removed from the register under section 5.89A(6) of the 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? \***

N/A

**Add comments**

**Please enter comments \***

<https://www.northam.wa.gov.au/council/documents-publications/council-registers.aspx>

Last entry was in 27/7/2019. No others since then were required to be recorded.

**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**

**Please enter comments \***

Managed electronically, Attachment. 5 employee disclosures occurred in the 2023 period.

**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? \***

N/A

**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? \***

N/A

**Add comments**

<https://car.dlgsc.wa.gov.au/CAR/CAR-Edit/?id=43ebb7b2-62c9-ee11-92bd-00224895055d&stepid=93afe69e-6d74-ed11-81ab-00224892bd4b>

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Compliance Audit Return Form - Starter Portal

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**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 that incorporates the model code of conduct? \***

Yes

**Add comments**

**Please enter comments \***

OCM Minutes 21 April 2021. Will be reviewed early 2024.

<https://www.northam.wa.gov.au/documents/11532/g-14-code-of-conduct-for-councillors-committee-members-and-candidates>

**19. Did the local government adopt additional requirements in addition to the model code of conduct? \***

N/A

**Add comments**

**Please enter comments \***

No additional requirements were effected in 2023 period.

<https://www.northam.wa.gov.au/documents/11532/g-14-code-of-conduct-for-councillors-committee-members-and-candidates>

**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 \***

Adopted by Council 21 April 2021 and due for review in 2024.

<https://www.northam.wa.gov.au/documents/11532/g-14-code-of-conduct-for-councillors-committee-members-and-candidates>

**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 \***

Approved by CEO 27 December 2021 and is on the Shire's website.

<https://www.northam.wa.gov.au/documents/11543/g-115-code-of-conduct-employees-volunteers-contractors-and-agency-staff>



2/12/24, 2:57 PM

Compliance Audit Return Form - Starter Portal

**21a. 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 \***

4 public notices were made in the 2023 period being:  
• 10/1/2023 – Disposal of Hangar 34 105 Withers Street Northam  
• 17/2/2023 – Disposal of Hangar 17 Northam Airport  
• 28/2/2023 – Disposal of land 1 Withers Street Northam

**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**

**Please enter comments \***

4 public notices were made in the 2023 period being:  
• 10/1/2023 – Disposal of Hangar 34 105 Withers Street Northam  
• 17/2/2023 – Disposal of Hangar 17 Northam Airport  
• 28/2/2023 – Disposal of land 1 Withers Street Northam

## 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? \***

Yes

**Add comments**

**Please enter comments \***

No disclosures were recorded in 2023.

<https://www.northam.wa.gov.au/council/documents-publications/council-registers.aspx>

**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**

2/12/24, 2:57 PM

Compliance Audit Return Form - Starter Portal

**Please enter comments \***

Not applicable

**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? \***

Yes

**Add comments**

**Please enter comments \***

<https://www.northam.wa.gov.au/council/documents-publications/council-registers.aspx>

## 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 \***

SCM Minutes 25/10/2023

**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? \***

Yes

**Add comments**

**Please enter comments \***

OCM Minutes 21/06/2023

Council delegated only for the Audit and Risk Management Committee to meet with the Shire's Auditor which forms part of the Audit and Risk Management Committee's role.

**3. Was the auditor's report for the financial year ended 30 June 2023 received by the local government by 31 December 2023? \***

Yes

**Add comments**

2/12/24, 2:57 PM

Compliance Audit Return Form - Starter Portal

**Please enter comments \***

Audit & Risk Management Committee Minutes 11/12/2023  
OCM Minutes 20/12/2023

Dated 11/12/2023

**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 & Risk Management Committee 11/12/2023 – Report 7.2  
No matters were raised requiring Shire Action.

**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 \***

Audit & Risk Management Committee 11/12/2023 – Website – Report 7.2  
No matters were raised requiring Shire Action

**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? \***

Yes

**Add comments**

**FIN-AR-Publish14DaysComments \***

Published 22 December 2023

<https://www.northam.wa.gov.au/publicnotices/annual-meeting-of-electors-and-20222023-annual-report/334>

**7. Was the auditor's report for the financial year ending 30 June 2023 received by the local government within 30 days of completion of the audit? \***

Yes

**Add comments**

2/12/24, 2:57 PM

Compliance Audit Return Form - Starter Portal

**Please enter comments \***

Audit report dated 14 December and went to Audit Committee and Council approval 20 December.

Letter from OAG available on request.

## **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 \***

15/06/2023

—

**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 \***

21/06/2023

—

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

Yes

**Add comments**

**Please enter comments \***

<https://www.northam.wa.gov.au/news/shire-of-northam-plan-for-the-future-2022-2032/428>

## **Local Government Employees**

---

2/12/24, 2:57 PM

Compliance Audit Return Form - Starter Portal

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

Yes

**Add comments**

**Please enter comments \***

CEO is only senior employee

Senior Employees Policy: <https://www.northam.wa.gov.au/documents/11535/g-17-senior-employees>

Advertised in the West Australian 22 April 2023.

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

Yes

**Add comments**

**Please enter comments \***

Advertisement is an attachment.

**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? \***

Yes

**Add comments**

**Please enter comments \***

Council approved CEO salary package on 19 July 2023 Council meeting in line with advertisement.

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

N/A

**Add comments**

**Please enter comments \***

Not applicable – CEO is only senior employee

Senior Employees Policy: <https://www.northam.wa.gov.au/documents/11535/g-17-senior-employees>

**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**

2/12/24, 2:57 PM

Compliance Audit Return Form - Starter Portal

**Please enter comments \***

Not applicable – CEO is only senior employee

Senior Employees Policy: <https://www.northam.wa.gov.au/documents/11535/g-17-senior-employees>

## **Official Conduct**

---

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

Yes

**Add comments**

**Please enter comments \***

Designation made on 18/05/16, decision no.C.2693 for Colin Young, Executive Manager Corporate Services to be the Complaints Officer.

OCM Minutes – 18/05/2016

**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**

**Please enter comments \***

<https://www.northam.wa.gov.au/council/documents-publications/council-registers.aspx>

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

Yes

**Add comments**

**Please enter comments \***

<https://www.northam.wa.gov.au/council/documents-publications/council-registers.aspx>

**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**

2/12/24, 2:57 PM

Compliance Audit Return Form - Starter Portal

**Please enter comments \***

<https://www.northam.wa.gov.au/council/documents-publications/council-registers.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 2023?**

Yes

**Add comments**

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

21/09/2022

**Please enter comments \***

Next due 2025.

Review was presented to A&R Management Committee 25/08/2022 and OCM 21/09/2023.

**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 2023?**

Yes

**Add comments**

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

21/12/2023

**Please enter comments \***

Next due 2025.

Review was presented to A&R Management Committee 16/12/2022 and OCM 21/12/2023.

Council use the Risk Management system "ProMapps". Risks are broken down into 7 categories – Compliance, Environmental, Financial, Health & Safety, Information, Operational & Strategic.

**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?**

N/A

**Add comments**

**Please enter comments \***

Not applicable – not gifts disclosed in 2023 period.

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Compliance Audit Return Form - Starter Portal

**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 \***

<https://www.northam.wa.gov.au/documents/11574/g-12-attendance-at-events-council-members-and-the-chief-executive-officer>

OCM 15/03/2023

**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?**

Yes

**Add comments**

**Please enter comments \***

<https://www.northam.wa.gov.au/documents/11548/shire-of-northam-ward-map>

<https://www.northam.wa.gov.au/documents/shire-of-northam-local-laws>

<https://www.northam.wa.gov.au/documents/21681/2023-2024-annual-budget>

<https://www.northam.wa.gov.au/documents/11676/fees-and-charges-2023-24>

**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 \***

<https://www.northam.wa.gov.au/documents/11574/g-12-attendance-at-events-council-members-and-the-chief-executive-officer>

OCM 15/03/2023

**7. Did the local government prepare a report on the training completed by council members in the 2022/2023 financial year and publish it on the local government's official website by 31 July 2023?**

Yes

**Add comments**

**OQ-CouncilMemberTrainingPublishComments \***

Recorded on website under the elected Members Professional Development Register.

<https://www.northam.wa.gov.au/council/documents-publications/council-registers.aspx>

**8. By 30 September 2023, did the local government submit to its auditor the balanced accounts and annual financial report for the year ending 30 June 2023?**

Yes

**Add comments**

<https://car.dlgsc.wa.gov.au/CAR/CAR-Edit/?id=43ebb7b2-62c9-ee11-92bd-00224895055d&stepid=93afe69e-6d74-ed11-81ab-00224892bd4b>

18/25



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**Please enter comments \***

Submitted 22/09/2023.

**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 \***

SCM 09/09/2023

## **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? \***

No

**Add comments**

**Please enter comments \***

The Shire does comply with the procurement policy which is in line with the Local Government (Functions and General) Regulations 1996, regulations 11A (1) and (3) in relation to the supply of goods or services. However, based on the shire's monthly monitoring there have been occasions where purchase orders have not been approved prior to a supplier invoice being received.

**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 \***

Yes – Vendor Panel Listings in Folder

All Tenders are managed through Vendor Panel.

**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)? \***

Yes

**Add comments**

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Compliance Audit Return Form - Starter Portal

**Please enter comments \***

<https://www.northam.wa.gov.au/council/documents-publications/tender-register.aspx>

All Tenders are managed through Vendor Panel.

**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**

**Please enter comments \***

All Tenders are managed through Vendor Panel.

**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**

**Please enter comments \***

<https://www.northam.wa.gov.au/council/documents-publications/tender-register.aspx>

All Tenders are managed through Vendor Panel.

**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.northam.wa.gov.au/council/documents-publications/tender-register.aspx>

All Tenders are managed through Vendor Panel.

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Compliance Audit Return Form - Starter Portal

**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? \***

Yes

**Add comments**

**Please enter comments \***

Yes – July 2023. Managed through Vendor Panel.  
All Tenders are managed through Vendor Panel.

**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**

**Please enter comments \***

Available on request.

**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**

**Please enter comments \***

Letters available on request.

**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 \***

Nil EOI's for Tenders over 2023 (Only RFQ)

**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**

2/12/24, 2:57 PM

Compliance Audit Return Form - Starter Portal

**Please enter comments \***

Nil EOI's over 2023.

**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 \***

Nil EOI's over 2023.

**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 \***

Nil EOI's over 2023.

**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 \***

Not applicable.

**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**

2/12/24, 2:57 PM

Compliance Audit Return Form - Starter Portal

**Please enter comments \***

Not applicable.

The Shire does not have pre qualified suppliers

**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 \***

Not applicable.

The Shire does not have pre qualified suppliers

**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 \***

Not applicable.

The Shire does not have pre qualified suppliers

**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 \***

Not applicable.

The Shire does not have pre qualified suppliers

**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 \***

Not applicable.

The Shire does not have pre qualified suppliers

2/12/24, 2:57 PM

Compliance Audit Return Form - Starter Portal

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

N/A

**Add comments**

**Please enter comments \***

Not applicable.

The Shire does not have pre qualified suppliers

**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? \***

Yes

**Add comments**

**Please enter comments \***

<https://www.northam.wa.gov.au/documents/1273/f-42-procurement-policy> Section 7

## **Documents**

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2/12/24, 2:57 PM

Compliance Audit Return Form - Starter Portal

[about a minute ago \(12/02/2024 2:55 PM\)](#)

Britt Hadlow

Letter from the OAG


 [6.7 Audit Reg 10\(1\) Letter from the OAG.pdf \(866.95 KB\) \(/ \\_entity/annotation/05584db6-73c9-ee11-9079-000d3aca76e9/976c0132-2a5b-ed11-9562-00224893390b?t=1707721002438\)](#)

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[less than a minute ago \(12/02/2024 2:55 PM\)](#)

Britt Hadlow

CEO Advertisement

 [8.1 & 8.3 The West Australian NOrtham 140mm h x 134mm w outline.pdf \(33.88 KB\) \(/ \\_entity/annotation/ef0649c3-73c9-ee11-9079-000d3aca76e9/976c0132-2a5b-ed11-9562-00224893390b?t=1707721002439\)](#)

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Britt Hadlow

Delegated Authority Register

 [Delegated Authority Register.pdf \(206.73 KB\) \(/ \\_entity/annotation/c090b8c9-73c9-ee11-9079-000d3aca76e9/976c0132-2a5b-ed11-9562-00224893390b?t=1707721002439\)](#)

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Britt Hadlow

Interest Disclosures Register


 [Interest Disclosures Register.pdf \(123.06 KB\) \(/ \\_entity/annotation/b2f301d0-73c9-ee11-9079-000d3aca76e9/976c0132-2a5b-ed11-9562-00224893390b?t=1707721002439\)](#)

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[less than a minute ago \(12/02/2024 2:56 PM\)](#)

Britt Hadlow

Primary/Annual Return Register

 [Primary \\_ Annual Return Register \(master\).pdf \(81.37 KB\) \(/ \\_entity/annotation/84b7b4dc-73c9-ee11-9079-00224810698d/976c0132-2a5b-ed11-9562-00224893390b?t=1707721002439\)](#)

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# AUSTRALIAN AUDIT



February 7, 2024

Debbie Terelinck  
Chief Executive Officer  
Shire of Northam  
395 Fitzgerald Street  
Northam WA 6401

Dear Debbie,

Please find attached our final review assessment report on the 2023 Compliance Audit Return (CAR).

We wish to confirm that only 1 legislative requirement has been reported by the Shire of Northam as a non-compliant . This is:

- F&G Regulation 11A (1) & (3) – Non -compliance with Shire Purchasing Policy regarding purchase orders

No other matters were noted that would indicate that the 2023 Compliance Audit Return information was incorrect.

Yours sincerely



Santo Casilli FCPA PFIIA  
Associate Director Internal Audit, Probity and Risk

**Australian Audit**

PO Box 7465, CLOISTERS SQUARE PO, WA 6850 | LEVEL 8, 251 ST GEORGES TERRACE, PERTH, WA 6000  
(08) 9218 9922 | [INFO@AUSAUDIT.COM.AU](mailto:INFO@AUSAUDIT.COM.AU) | [WWW.AUSTRALIANAUDIT.COM.AU](http://WWW.AUSTRALIANAUDIT.COM.AU) | ABN: 63 166 712 698

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## Shire of Northam Independent Review Report

### 2023 Legislative Compliance Audit Return Review

#### Introduction

Each local government is to carry out a legislative compliance review for the twelve-month period ending 31 December.

A review of the legislative compliance audit return has been performed for the period 1 January 2023 to 31 December 2023 against the requirements included in the 2023 Legislative Compliance Audit Return (CAR). The completed return is to be submitted to the Director General, Department of Local Government, Sport and Cultural Industries by 31 March 2024.

We conducted our review in accordance with ASAE 3000 “*Assurance Engagement Other than Audits or Reviews of Historical Financial Report*” per the Australian Auditing Standard on Review Engagements issued by the Auditing and Assurance Standards Board.

Our review consisted of making enquiries and assessing support documentation provided by the Shire of Northam for the completion of the 2023 Compliance Audit Return (CAR).

Our review conclusion was based on the evidence sighted regarding each legislative requirement as stated in the 2023 Compliance Audit Return.

#### Background

The completion of the (CAR) questionnaire is an annual event and is seen as an effective tool to assist local governments to enhance or develop their internal control processes to ensure they are meeting their statutory obligations and requirements under the local government legislation as required under Regulation 13 of the Local Government (Audit) Regulations 1996.

#### Review Objective

Australian Audit was contracted to review and assess compliance with the 2023 Compliance Return and to provide a conclusion as to whether the results of the 2023 Compliance Audit Return can be relied upon to correctly reflect the Shires compliance or non-compliance of the required legislative requirements.

#### Review Scope

The review focused solely on the assessment of the 2023 Compliance Audit Return information against relevant support documentation.

The review did not assess the Shire’s compliance with any other statutory obligations under the Local Government Act 1995 and associated Regulations, which were not included nor sought by the 2023 Compliance Audit Return.

### **Review Approach / Methodology**

The review undertook the following approach:

- Sighted relevant documentation of all the legislative requirements as outlined in the 2023 Compliance Audit Return as provided by the Shire's Governance Coordinator to support the assessment of compliance or non-compliance information reported in the 2023 Compliance Audit Return.

### **Review Conclusion**

We can conclude that nothing came to our attention during our review and assessment of the support documentation provided for all of the legislative items required by the 2023 Compliance Audit Return that would indicate that the 2023 Compliance Audit Return reported information is incorrect.

Based on our review we can conclude that the information recorded in the 2023 Compliance Audit Return for the Shire of Northam can be relied upon to be correct and we can confirm and agree that only 1 legislative non-compliance matter was identified and recorded.

This being:

- **F&G Regulation 11A (1) & (3)** – Non-compliance with Shire Purchasing Policy regarding purchase orders.

No other non-compliance matters came to our attention during our review.

### **6.3 Independent Committee Members Sitting Fee - Audit & Risk Management Committee**

<b>File Reference:</b>	2.1.3.5
<b>Reporting Officer:</b>	Britt Hadlow (Governance Coordinator)
<b>Responsible Officer:</b>	Debbie Terelinck (Chief Executive Officer)
<b>Officer Declaration of Interest:</b>	Nil
<b>Voting Requirement:</b>	Simple Majority
<b>Press release to be issued:</b>	No

#### **BRIEF**

In December 2023, the Salary and Allowance Tribunal (SAT) made a determination on fees available to be paid to an independent committee member.

At the previous Audit and Risk Committee Meeting it was reported that while this determination had been made, the update to section 5.100 of the *Local Government Act 1995* pertaining to fees paid and expenses reimbursed to committee members had not been updated.

Since the last meeting, the update to the legislation has been made and Council is being requested to consider fees paid to be paid for an independent member for the Audit and Risk Committee to allow the Chief Executive Officer (CEO) to commence advertising for a suitable qualified person.

#### **ATTACHMENTS**

Nil

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#### **A. BACKGROUND / DETAILS**

The role of the Audit and Risk Management Committee is to support Council in fulfilling its governance and oversight responsibilities in relation to financial reporting, internal control structure, risk management systems, internal and external audit functions and ethical accountability.

At the Special Council Meeting held on 25 October 2023, Council resolved to include an independent committee member on the Audit and Risk Management Committee. The Terms of Reference for the Audit and Risk Committee were endorsed by Council and included selection criteria pertaining to the independent member.

Since the Special Council meeting and the previous Audit and Risk Committee meeting, the SAT has made their determination on fees allowed to be paid to an independent committee member, and the relevant legislation was updated in January 2024.

**B. CONSIDERATIONS**

**B.1 Strategic Community / Corporate Business Plan**

Performance Area: Performance. Outcome 12: Excellence in organisational performance and customer service.

Objective 12.1: Maintain a high standard of corporate governance and financial management.

Priority Action: Nil.

**B.2 Financial / Resource Implications**

An extract from the Salary and Allowance Tribunal determination can be found below detailing the prescribed fees allowed to be paid to an independent committee member.

The Shire of Northam is a Class 2 local government and as such, can pay the independent committee member \$0 - \$305.00 per committee meeting attended.

**Table 6: Committee meeting and prescribed meeting fees per meeting – local governments and regional local governments**

	Elected members		Independent committee members	
Band	Minimum	Maximum	Minimum	Maximum
1	\$325	\$415	\$0	\$415
2	\$195	\$305	\$0	\$305
3	\$100	\$215	\$0	\$215
4	\$50	\$125	\$0	\$125
<b>All regional local governments</b>	\$50	\$125	\$0	\$125

There is currently no budget allocated for these sitting fees, however given the process to appoint an independent member, it is unlikely there will be any financial implications in 2023/24. Once the sitting fee has been determined an allocation will be considered for the 2024/25 budget.

**B.3 Legislative Compliance**

*Local Government Act 1995 s.5.100*

5.100. Fees paid and expenses reimbursed to committee members

- (1) A committee member who attends a meeting of the committee is entitled to be paid —
  - (a) the fee determined for attending a committee meeting; or
  - (b) if the local government has set a fee within the range determined for committee meeting attendance fees — that fee.
  
- (2) A committee member who attends a meeting of a prescribed type at the request of the council is entitled to be paid —
  - (a) the fee determined for attending a meeting of that type; or
  - (b) if the local government has set a fee within the range determined for meetings of that type — that fee.

**B.4 Policy Implications**

Nil.

**B.5 Stakeholder Engagement / Consultation**

As per the Audit and Risk Management Committee Terms of Reference, the CEO will publicly advertise an expression of interest for a suitably qualified External Independent Member.

It is proposed that relevant local businesses and the Chamber of Commerce will be amongst those that will be informed of the expression of interest.

The CEO will assess any applications received and make a recommendation to the Audit and Risk Management Committee for consideration.

**B.6 Risk Implications**

Refer to Risk Matrix [here](#).

<b>Risk Category</b>	<b>Description</b>	<b>Rating (likelihood x consequence)</b>	<b>Mitigation Action</b>
Financial	Unbudgeted sitting fees required to be paid once relevant legislation is enacted if an External Independent Person is appointed.	Possible (3) x Minor (2) = Moderate (6)	The Audit and Risk Management Committee make recommendations to Council on fees to be set in accordance with the budget.

Health & Safety	N/A		
Reputation	N/A		
Service Interruption	N/A		
Compliance	Non-compliance with the relevant Acts & Regulations.		Appoint the External Independent Person in accordance with the <i>Local Government Act 1995</i> and set the prescribed fee paid to an independent committee member in line with the SAT determination.
Property	N/A		
Environment	N/A		

**B.7 Natural Environment Considerations**

N/A

**C. OFFICER'S COMMENT**

It is noted that the new legislation states that the sitting fees are able to be set for all independent members of committees of Council. It is proposed that sitting fees will only be considered for the Audit and Risk Management Committee External Independent Member (and not other committees of Council) to provide remuneration for the independent member's level of expertise and advice.

**RECOMMENDATION**

**That the Audit & Risk Management Committee endorses the following recommendations being presented to Council:**

**That Council:**

- 1. Sets the prescribed fee for the External Independent Member for attendance of Audit and Risk Management Committee Meetings only, at \$\_\_\_\_\_ on a per meeting basis.**
- 2. Authorises the CEO to go out for an expression of interest for a suitably qualified External Independent Member for the Audit and**

**Risk Management Committee and provide a recommendation to the May 2024 meeting.**

## 6.4 Monthly Compliance Report (November - January 2023)

<b>File Reference:</b>	1.6.1.6
<b>Reporting Officer:</b>	Britt Hadlow (Governance Coordinator)
<b>Responsible Officer:</b>	Debbie Terelinck (Chief Executive Officer)
<b>Officer Declaration of Interest:</b>	Nil
<b>Voting Requirement:</b>	Simple Majority
<b>Press release to be issued:</b>	No

### BRIEF

This report provides an overview of the Shire's monthly compliance activities.

### ATTACHMENTS

1. Compliance Audit November 2023 - January 2024 [6.4.1 - 5 pages]
2. Procurement Audit November 2023 - January 2024 [6.4.2 - 3 pages]

## A. BACKGROUND / DETAILS

Under the *Local Government (Audit) Regulations 1996*, a Local Government is required to carry out a Compliance Audit for the period 1 January to 31 December of each year. To ensure compliance and to strengthen the auditing in key areas on a more regular basis, the Shire has implemented a monthly Compliance Calendar where specific activities and statutory requirements are audited internally.

## B. CONSIDERATIONS

### B.1 Strategic Community / Corporate Business Plan

Performance Area: Performance. Outcome 12: Excellence in organisational performance and customer service.

Objective 12.1: Maintain a high standard of corporate governance and financial management.

Priority Action 12.1.4: Provide internal auditing capabilities (including providing additional human or financial resources) and publish findings annually.

### B.2 Financial / Resource Implications

Not applicable.

### B.3 Legislative Compliance



There is no legislative requirement to maintain a Compliance Calendar, however it is considered best practice and covers the following legislation:

- *Local Government Act 1995;*
- *Local Government (Functions and General) Regulations 1996;*
- *Local Government (Administration) Regulations 1996;*
- *Local Government (Elections) Regulations 1997;*
- *Local Government (Audit) Regulations 1996;*
- *Valuation of Land Act 1978*
- *Building Services (Complaint Resolution and Administration) Regulations 2011*
- *Building and Construction Industry Training Fund and Levy Collection Act 1990*

**B.4 Policy Implications**

Policy G 1.8 Risk Management

**B.5 Stakeholder Engagement / Consultation**

Nil.

**B.6 Risk Implications**

Refer to Risk Matrix [here](#).

<b>Risk Category</b>	<b>Description</b>	<b>Rating (likelihood x consequence)</b>	<b>Mitigation Action</b>
Financial	Ability to misuse funds.	Rare (2)x Medium (3) = Low (3)	Compliance calendar assists to ensure compliance
Health & Safety	N/A		
Reputation	N/A		
Service Interruption	N/A		
Compliance	Staff not following legislative requirements	Rare (2)x Medium (3) = Low (3)	Compliance calendar assists to ensure compliance
Property	N/A		
Environment	N/A		

**B.7 Natural Environment Considerations**

Nil.

**C. OFFICER'S COMMENT**

The monthly Compliance Calendar is an effective tool to assist in populating the Annual Compliance Audit Return (CAR) and enhances the Shire's ability to

identify and manage issues which may arise during the year, in a timely manner.

Included in the Compliance Calendar is a random audit of creditors to ensure compliance with the Shire's purchasing policy and the requirements of the *Local Government Act 1995*.

A summary of the compliance reports are provided below:

Audit	Audit Month	Percentage Compliant	Non-Compliances
<b>Compliance Audit</b>	November 2023	86%	<ul style="list-style-type: none"> <li>• Code of conduct to be reviewed (completed Jan 2024)</li> <li>• Delegation not registered (updated Dec 2023)</li> <li>• Report to Valuer General not submitted by the 14<sup>th</sup> day of the month (completed Dec 2023)</li> <li>• BSL not paid by the 14<sup>th</sup> of the month</li> <li>• BCTF not paid by 10<sup>th</sup> of the month</li> <li>• Confirmed minutes for various meetings had not been posted to website (completed Feb 2024)</li> <li>• Continuing Professional Development Policy requires reviewing (being workshopped March 2024)</li> <li>• Non-compliance with Procurement Policy</li> <li>• Tender register required to be filled in (completed Dec 2023)</li> </ul>
	December 2023	94%	<ul style="list-style-type: none"> <li>• Report to Valuer General not submitted by the 14<sup>th</sup> day of the month</li> <li>• BSL not paid by the 14<sup>th</sup> of the month</li> <li>• BCTF not paid by 10<sup>th</sup> of the month</li> </ul>

			<ul style="list-style-type: none"> <li>Confirmed minutes for various meetings had not been posted to website</li> <li>Tender register required to be filled in</li> </ul>
	January 2024	96%	<ul style="list-style-type: none"> <li>BSL not paid by the 14<sup>th</sup> of the month</li> <li>BCTF not paid by 10<sup>th</sup> of the month</li> <li>Delegations not registered</li> </ul>
<b>Procurement Audit</b>	November 2023	85%	<ul style="list-style-type: none"> <li>2x purchase orders raised after the invoice</li> </ul>
	December 2023	100%	<ul style="list-style-type: none"> <li>Nil</li> </ul>
	January 2024	100%	<ul style="list-style-type: none"> <li>Nil</li> </ul>

**RECOMMENDATION**

**That the Audit & Risk Management Committee endorses the following recommendation being presented to Council:**

- 1. That Council receives the February 2024 update on the Compliance Calendar as provided in the Attachments 6.4.1 and 6.4.2.**

Compliance Audit November 2023 - December 2024										
Compliance Area	Compliance Action	Compliance Requirement	Section / Ref	Compliance Frequency	November 2023	November Comments	December 2023	December Comments	January 2024	January 2024 Comments
Code of Conduct	Has the CEO published an up-to-date version of the code of conduct for employees on the local government's website	Local Government Act 1995	s5.104(7)	Monthly	Yes		Yes		Yes	
Code of Conduct	Has the CEO prepared and implemented a code of conduct to be observed by employees of the local government in accordance with section 5.51A(1) of the Local Government Act 1995	Local Government Act 1995	s5.51A(1) & (3)	Monthly	Yes		Yes		Yes	
Code of Conduct	Policy Review - Code of Conduct Following each Election - provide Council report to enable the 'new' Council to review and adopt the Code of Conduct.	Local Government Act 1995	s.5.103 s.5.104 Admin.Reg.	November	No	Review will be carried out at January or February OCM				
Commercial Enterprises by Local Governments	Has the local government prepared a business plan for each major trading undertaking that was not exempt?	Local Government Act 1995	s3.59(2)(a) F&G Regs 7,9,10	Monthly	Not applicable		Not applicable		Not applicable	
Commercial Enterprises by Local Governments	Has the local government prepared a business plan for each major land transaction that was not exempt?	Local Government Act 1995	s3.59(2)(b) F&G Regs 7,8A, 8, 10	Monthly	Not applicable		Not applicable		Not applicable	
Commercial Enterprises by Local Governments	Has the local government prepared a business plan before entering into each land transaction that was preparatory to entry into a major land transaction	Local Government Act 1995	s3.59(2)(c) F&G Regs 7,8A, 8, 10	Monthly	Not applicable		Not applicable		Not applicable	
Commercial Enterprises by Local Governments	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	Local Government Act 1995	s3.59(4)	Monthly	Not applicable		Not applicable		Not applicable	
Commercial Enterprises by Local Governments	Did the council resolve to proceed with each major land transaction or trading undertaking by absolute majority	Local Government Act 1995	s3.59(5)	Monthly	Not applicable		Not applicable		Not applicable	
Delegation of Power / Duty	Were all delegations to the CEO in writing	Local Government Act 1995	s5.42(2)	Monthly	Yes		Yes		Yes	MOU
Delegation of Power / Duty	Were all delegations by the CEO to any employee in writing	Local Government Act 1995	s5.44(2)	Monthly	Yes		Yes	1x letter issued	Yes	MOU
Delegation of Power / Duty	Were all decisions by the council to amend or revoke a delegation made by absolute majority	Local Government Act 1995	s5.18(3)(b) & s5.45(1)(b)	Monthly	Not applicable		Not applicable		Not applicable	
Delegation of Power / Duty	Did all persons exercising a delegated power or duty under the Act keep, on all occasions, a written record in accordance with Local Government (Administration) Regulations 1996, Regulation 19 Was the Delegated Authority Register updated?	Local Government Act 1995	s5.46(3) Admin Reg 19	Monthly	No	E02 - Exercised Delegation not included on Register - Road closure for an event.	Yes		No	E04 - Crossovers - 101 Coates Road A01 - Signing of lease document F02 - Signing of lease document A01 - Signing of contract C.202324-07 F04 - Advertisement RFT 1 of 2024 F04 - Award of RFT 1 of 2024
Disclosure of Interest	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	Local Government Act 1995	s5.67	Monthly	Yes	Strategic Council Meeting	Not applicable		Not applicable	
Disclosure of Interest	Were all decisions regarding participation approval, including the extent of participation allowed and, where relevant, the information required the Local Government (Administration) Regulations 1996 regulation 21A, recorded in the minutes of the relevant council or committee meeting	Local Government Act 1995	s5.68(2) & s5.69(5) Admin Reg 21A	Monthly	Yes	Strategic Council Meeting	Yes		Yes	
Disclosure of Interest	Were disclosures under section 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	Local Government Act 1995	s5.73	Monthly	Yes		Yes		Yes	
Disclosure of Interest	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	Local Government Act 1995	s5.70(2) & (3)	Monthly	Yes		Yes		Not applicable	
Disclosure of Interest	Where council applied to the Minister to allow the CEO to provide advice or a report to which a disclosure under s5.71A(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	Local Government Act 1995	s5.71A & s5.71B(5)	Monthly	Not applicable		Not applicable		Not applicable	
Disclosure of Interest	Was any decision made by the Minister under subsection 5.71B(6) of the Local Government Act 1995 recorded in the minutes of the council meeting at which the decision was considered	Local Government Act 1995	s5.71B(6) & s5.71B(7)	Monthly	Not applicable		Not applicable		Not applicable	
Disclosure of Interest	Where an employee has been delegated a power or duty relating to a matter and the employee has an interest in the matter, the employee must not exercise the power or discharge the duty. In the case of the CEO, the interest must be disclosed to the President. In the case of all other employees, the interest must be disclosed to the CEO.  Risk areas identified include: - Debt write off - Grant applications & use - Granting of subsidies & waivers - Granting of concessions & other relief - Tendering - Purchasing - Development approvals - Building approvals - Recruitment - Disposal of property, including leasing	Local Government Act 1995	s.5.71	Monthly	Not applicable	Fraud and Corruption Control Plan, action item from the 2022 Regulation 17 review.	Not applicable		Not applicable	

Compliance Audit November 2023 - December 2024										
Compliance Area	Compliance Action	Compliance Requirement	Section / Ref	Compliance Frequency	November 2023	November Comments	December 2023	December Comments	January 2024	January 2024 Comments
Disposal of Property	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)	Local Government Act 1995	s3.58(3)	Monthly	Not applicable		Not applicable		Yes	<a href="https://www.norham.wa.gov.au/public-notices/proposed-disposal-of-land-pursuant-to-local-government-act-1995-section-358(3)/354">https://www.norham.wa.gov.au/public-notices/proposed-disposal-of-land-pursuant-to-local-government-act-1995-section-358(3)/354</a>
Disposal of Property	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) of the Act, in the required local public notice for each disposal of property	Local Government Act 1995	s3.58(4)	Monthly	Not applicable		Not applicable		Yes	<a href="https://www.norham.wa.gov.au/public-notices/proposed-disposal-of-land-pursuant-to-local-government-act-1995-section-358(3)/354">https://www.norham.wa.gov.au/public-notices/proposed-disposal-of-land-pursuant-to-local-government-act-1995-section-358(3)/354</a>
Elections	Did the CEO remove any disclosure of gifts forms relating to an unsuccessful candidate, or a successful candidate 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	Local Government Act 1995	Elect Regs 30G(3) & (4)	November	Not applicable					
Elections	Elections - Enrolment Eligibility Claims (Owners and Occupiers) Register - Prepare for Elections - Review register and take action re expired Eligibility Claims (no longer property owner / claim based on occupation or nominee expired)	Local Government Act 1995	s.4.35, Elections Regs.14 and 15 Form 6 and 7	December May			Yes	Review is currently underway and expected to be completed by the end of Feb 2024.		
Elections	Elections - Declarations of Office for new Elected Members elected unopposed (due 2 months from declaration of result at close of nominations - s.2.32(c))	Local Government Act 1995	s.2.29	November	Yes	Declarations for all Elected Members carried out on 25 October 2023 at Special Council Meeting.				
Finance	Was the Annual Report including the auditor's report for the financial year ended 30 June received by the local government by 31 December	Local Government Act 1995	s7.9(1)	December			Yes	OCM 20 December 2023		
Finance	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?	Local Government Act 1995	s7.12A(3)	December			Yes	<a href="https://www.norham.wa.gov.au/council-meetings/audit-and-risk-management-committee/audit-and-risk-management-committee">https://www.norham.wa.gov.au/council-meetings/audit-and-risk-management-committee/audit-and-risk-management-committee</a>		
Finance	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?	Local Government Act 1995	s7.12A(4)(a) & (4)(b)	December			Yes	<a href="https://www.norham.wa.gov.au/council-meetings/audit-and-risk-management-committee/audit-and-risk-management-committee">https://www.norham.wa.gov.au/council-meetings/audit-and-risk-management-committee/audit-and-risk-management-committee</a>		
Finance	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	Local Government Act 1995	s7.12A(5)	December			Yes	<a href="https://www.norham.wa.gov.au/public-notices/annual-meeting-of-electors-and-20222023-">https://www.norham.wa.gov.au/public-notices/annual-meeting-of-electors-and-20222023-</a>		
Finance	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	Local Government Act 1995	Audit Reg 10(1)	December			Yes	<a href="https://www.norham.wa.gov.au/council-meetings/ordinary-">https://www.norham.wa.gov.au/council-meetings/ordinary-</a>		
Finance	Was a statement of financial activity reporting on the revenue and expenditure as set out in the annual budget under FM.Reg.22(1)(d) presented at an Ordinary Council meeting within 2-months after the end of the month to which the statement relates.	Local Government Act 1995	s.6.4 FM.Reg.34	Monthly	Yes		Yes		Yes	
Gifts	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	Local Government Act 1995	s5.89A(1), (2) & (3) Admin Reg 28A	Monthly	Yes		Yes		Yes	
Gifts	Did the CEO publish an up-to-date version of the gift register on the local government's website	Local Government Act 1995	s5.89A(5) & (5A)	Monthly	Yes		Yes		Yes	
Gifts	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	Local Government Act 1995	s5.89A(6)	Monthly	Not applicable		Not applicable		Not applicable	
Gifts	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	Local Government Act 1995	s5.89A(7)	Monthly	Not applicable		Not applicable		Not applicable	Nil removed.
Gifts	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	Local Government Act 1995	s5.87C	Monthly	Not applicable		Not applicable		Not applicable	
Gifts	Gift Register - Review After a person ceases to be an Elected Member [s.5.87A] or CEO [s.5.87B] required to disclose gifts, the CEO is required to remove from the register all records relating to that person. These records must be retained as LG records for a period of at least 5-years and be made available for public inspection.	Local Government Act 1995	s.5.89A(6) & (7)	November	Not applicable					
Local Government Employees	Were all CEO and/or senior employee vacancies advertised in accordance with Local Government (Administration) Regulations 1996, regulation 18A	Local Government Act 1995	s5.36(4) & s5.37(3) Admin Reg 18A	Monthly	Not applicable		Not applicable		Not applicable	
Local Government Employees	Was all information provided in applications for the position of CEO true and accurate	Local Government Act 1995	Admin Reg 18E	Monthly	Not applicable		Not applicable		Not applicable	
Local Government Employees	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	Local Government Act 1995	Admin Reg 18F	Monthly	Not applicable		Not applicable		Not applicable	
Local Government Employees	Did the CEO inform council of each proposal to employ or dismiss senior employee	Local Government Act 1995	s5.37(2)	Monthly	Not applicable		Not applicable		Not applicable	

Compliance Audit November 2023 - December 2024										
Compliance Area	Compliance Action	Compliance Requirement	Section / Ref	Compliance Frequency	November 2023	November Comments	December 2023	December Comments	January 2024	January 2024 Comments
Local Government Employees	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	Local Government Act 1995	s5.37(2)	Monthly	Not applicable		Not applicable		Not applicable	
Official Conduct	Has the local government designated an employee to be its complaints officer	Local Government Act 1995	s5.120	Monthly	Yes		Yes		Yes	
Official Conduct	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	Local Government Act 1995	s5.121(1) & (2)	Monthly	Yes		Yes		Yes	
Official Conduct	Does the complaints register include all information required by section 5.121(2) of the Local Government Act 1995	Local Government Act 1995	s5.121(2)	Monthly	Yes		Yes		Yes	
Official Conduct	Has the CEO published an up-to-date version of the register of the complaints on the local government's official website	Local Government Act 1995	s5.121(3)	Monthly	Yes		Yes		Yes	
Other	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 years prior to 31 December Next due: 2025	Local Government Act 1995	Financial Management Reg 5(2)(c)	December			Not applicable	Next due 2025.		
Other	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 Next due: 2025	Local Government Act 1995	Audit Reg 17	December			Not applicable	Next due 2025.		
Other	Was the Council / Committee Meeting schedule published on the Shire website before the beginning of the year in which the meetings are to be held	Local Government Act 1995	s.5.25(1)(g) Admin.Reg.12	December			Yes	<a href="https://www.northam.wa.gov.au/publicnotices/2024-council-and-committee-meeting-dates/332">https://www.northam.wa.gov.au/publicnotices/2024-council-and-committee-meeting-dates/332</a>		
Other	Was the below information provided to the Valuer General by the 14th day of each month: • building licenses issued • building license works completed • registered plans and amendments under the Strata Titles Act 1985	Valuation of Land Act 1978	s.37	Monthly	No		No	17 December 2023	Yes	
Other	Have Elected Members not been absent for 3 consecutive ordinary meetings with Leave of Absence being granted	Local Government Act 1995	s.2.25	August December June March			Yes			
Other	Building Services Levy - Payment made by 14th day of the month.	Building Services (Complaint Resolution and Administration) Regulations,2011	s.18	Monthly	No		No		No	
Other	Building Construction Training Fund Levy - Payment made the 10th day of the month Construction Training Fund.	Building and Construction Industry Training Fund and Levy Collection Act 1990	N/A	Monthly	No		No		No	
Other	Public Access to Information - Audit Check LG website, Library and LG office to ensure all information listed in s.5.94, s.5.96A and Admin. Reg.29 is publicly accessible (see s.5.96 too) and that customer service staff are trained to provide access accordingly. Audit to note limitations: s.5.95 and Admin. Regs. 29A and 29B	Local Government Act 1995	s.5.94, s.5.95, s.5.96, s.5.96A Admin. Reg.29, 29A, 29B	Monthly	No	Confirmed minutes under various categories have not have been uploaded.	No	Confirmed minutes under various categories have not have been uploaded, however this will be rectified in January 2024.	Yes	
Other	Emergency Services Levy payment made by 21 day	DFES - ESL Manual of Operating Procedures	2.2.12	December June March September			Yes	Paid 21/12/2023		
Policy	Was the Continuing Professional Development Policy reviewed after each ordinary election	Local Government Act 1995	s5.128	November	No	Has not been done yet. Noted to be completed in the new				
Primary / Annual Returns	Was a primary return in the prescribed form lodged by all relevant persons within three months of their start day	Local Government Act 1995	s5.75 Admin Reg 22, Form 2	Monthly	Yes	2x Primary Returns lodged in November. 1x to be lodged within the next 2 months.	Not applicable	1x Primary return to be lodged but still within the lodgment period.	Yes	1x Primary return to be lodged (currently within lodgment date)
Primary / Annual Returns	On receipt of a primary or annual return, did the CEO, or the mayor/president, give written acknowledgment of having received the return	Local Government Act 1995	s5.77	Monthly	Yes		Not applicable		Yes	
Primary / Annual Returns	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	Local Government Act 1995	s5.88(1) & (2)(a)	Monthly	Yes		Yes		Yes	
Primary / Annual Returns	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	Local Government Act 1995	s5.88(1) & (2)(b) Admin Reg 28	Monthly	Yes		Yes		Yes	
Primary / Annual Returns	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	Local Government Act 1995	s5.88(3)	Monthly	Yes		Yes		Yes	
Primary / Annual Returns	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	Local Government Act 1995	s5.88(4)	Monthly	Yes		Yes		Yes	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 11A(1) & (3)	Monthly	No	3x non-compliances	Yes	100% compliance - Procurement Audit	Yes	100% compliance in audit.

Compliance Audit November 2023 - December 2024										
Compliance Area	Compliance Action	Compliance Requirement	Section / Ref	Compliance Frequency	November 2023	November Comments	December 2023	December Comments	January 2024	January 2024 Comments
Tenders for Providing Goods & Services	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	Local Government Act 1995	s3.57 F&G Reg 11	Monthly	Yes	RFT 08 - Cleaning of Northam Townsite	Not applicable		Yes	Purchase orders issued for C.202324-07
Tenders for Providing Goods & Services	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)	Local Government Act 1995	F&G Regs 11(1), 12(2), 13, & 14(1), (3), and (4)	Monthly	Yes	1x Tender advertised through Vendor Panel, website & Ad in West Australian	Not applicable		Yes	RFT 1 2024
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 12	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 14(5)	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Regs 15 & 16	Monthly	Yes	RFT 7 - Northam Bike Hub	Yes	RFT 8	Yes	RFT 1 2024
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 17	Monthly	No	RFT 7 - Northam Bike Hub. Tender Register needs to be filled in with Accepted Tenders and the Advertisement while waiting on Council decision. Have	No	Followed up and now updated	Yes	RFT 1 2024 and RFT 8 2023
Tenders for Providing Goods & Services	Did the local government reject any tenders that were not submitted at the place, and within the time, specified in the invitation to tender	Local Government Act 1995	F&G Reg 18(1)	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 18(4)	Monthly	Yes		Not applicable		Not applicable	RFT 1 was a unique tender, there was no selection criteria to evaluate as this was for the purchase of the old CESM
Tenders for Providing Goods & Services	Did the CEO give each tenderer written notice containing particulars of the successful tender or advising that no tender was accepted	Local Government Act 1995	F&G Reg 19	Monthly	Not applicable	RFT 7 - Still pending decision of Council	Not applicable		Yes	RFT 1 2024
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Regs 21 & 22	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 23(1) & (2)	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 23(3) & (4)	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 24	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Regs 24AD(2) & (4) and 24AE	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 24AD(6)	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 24AF	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 24AG	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 24AH(1)	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	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	Local Government Act 1995	F&G Reg 24AH(3)	Monthly	Not applicable		Not applicable		Not applicable	
Tenders for Providing Goods & Services	Did the CEO send each applicant written notice advising them of the outcome of their application	Local Government Act 1995	F&G Reg 24AI	Monthly	Not applicable		Not applicable		Not applicable	

Compliance Audit November 2023 - December 2024										
Compliance Area	Compliance Action	Compliance Requirement	Section / Ref	Compliance Frequency	November 2023	November Comments	December 2023	December Comments	January 2024	January 2024 Comments
Tenders for Providing Goods & Services	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?	Local Government Act 1995	F&G Regs 24E & 24F	Monthly			Yes		Yes	
					Compliance Items	72	Compliance Items	78	Compliance Items	67
					Items Compliant	62	Items Compliant	73	Items Compliant	64
					Items Non-Compliant	9	Items Non-Compliant	5	Items Non-Compliant	3
					Percentage Compliant	86%	Percentage Compliant	94%	Percentage Compliant	96%
					Auditor:	Britt Hadlow	Auditor:	Britt Hadlow	Auditor:	Britt Hadlow
					Auditor Signature:	<i>Britt Hadlow</i>	Auditor Signature:	<i>Britt Hadlow</i>	Auditor Signature:	<i>Britt Hadlow</i>
					Date Completed:	14/12/2023	Date Completed:	24/1/2024	Date Completed:	14/2/2024



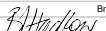
## Procurement Audit 2023

Audit Month	EFT Number	Creditor	Invoice Description	Invoice Amount	Invoice Date	Purchase Order Number	Purchase Order Amount	Purchase Order Date	Authorising Officer	Date of Order Prior to Invoice	Compliance with Purchasing Policy/Process	Comment
November	EFT49066	DEPARTMENT OF DEFENCE	FEES FOR ACCESS FOR THE MOTORCROSS CLUB TO PROPERTY 2019-2020	A\$1,105.48	01/03/18	NIL	NIL		EXECUTIVE MANAGER CORPORATE SERVICES	No	No	This invoice was regarding licence fee payments that were missed in 2019. Dept. of Defence contacted the Shire and requested payment to be made. Payment was made under "Purchase Request Form" instead of a PO.
November	EFT49218	WESTWIDE AUTO ELECTRICS AND AIR CONDITIONING	REPLACEMENT BEACONS TO HINO	A\$807.50	31/10/23	72830	A\$807.50	15/09/23	WORKS MANAGER	Yes	Yes	
November	EFT49126	BLACKWELL PLUMBING AND GAS PTY LTD	ADMIN REAR DONGA - REPAIR BROKEN TAP TO WATER COOLER	A\$229.90	09/11/23	73001	A\$229.90	02/10/23	BUILDING MAINTENANCE SUPERVISOR	Yes	Yes	
November	EFT49160	GRAFTON ELECTRICS	REPAIR POWER POINT AT AQUATIC CENTRE	A\$162.58	08/11/23	73594	A\$162.58	08/11/23	POOL DUTY MANAGER	Yes	Yes	
November	EFT49177	MALINOWSKI HOLDINGS PTY LTD	RENT 174 FITZGERALD STREET NORTHAM (AVON MALL) 1/11/2023-30/11/2023	A\$1,237.50	28/10/23	71789	A\$14,300.04	04/07/23	EXECUTIVE MANAGER CORPORATE SERVICES	Yes	Yes	Rolling PO
November	EFT49232	AVON WASTE	DELIVERY AND SUPPLY FOR 30 WEIGHTED BASE BINS FOR STREET BIN REPLACEMENT	A\$14,852.00	31/10/23	73506	A\$14,850.00	31/10/23	EXECUTIVE MANAGER CORPORATE SERVICES	Yes	Yes	
November	EFT49180	MCLEODS BARRISTERS & SOLICITORS	ONGOING LEGAL COSTS - 4 HOVEA CRESCENT WUNDOWIE	A\$393.80	31/10/23	73210	A\$2,000.00	11/10/23	ACTING EXECUTIVE MANAGER DEVELOPMENT SERVICES	No	Yes	File note included as to why PO was after date (previous PO's funds had been exhausted).
November	EFT49058	BUNNINGS	PADLOCK ECONOMY MASTERLOCK	A\$49.00	17/10/23	73286	A\$49.00	17/10/23	BUILDING MAINTENANCE SUPERVISOR	Yes	Yes	
November	EFT49381	OXTER SERVICES	CARTON OF 16 COMMERCIAL PAPER ROLLS	A\$83.95	31/10/23	73472	A\$85.00	30/10/23	ENGINEERING ADMIN OFFICER	Yes	Yes	
November	EFT49186	NORTHAM FLORIST	KILLARA MANAGER DEPARTING GIFT/FLOWERS	A\$100.00	30/10/23	73425	A\$100.00	25/10/23	KILLARA MANAGER	Yes	Yes	
November		<b>COMPLIANCE</b>										
November		<b>COMPLETED BY:</b>	Britt Hadlow									
November		<b>SIGNED</b>	<i>B Hadlow</i>									

## Procurement Audit 2023

Audit Month	EFT Number	Creditor	Invoice Description	Invoice Amount	Invoice Date	Purchase Order Number	Purchase Order Amount	Purchase Order Date	Authorising Officer	Date of Order Prior to Invoice	Compliance with Purchasing Policy/Process	Comment
December	EFT49423	BOUNCY FUN CASTLES	HIRE OF INFLATABLE SLIDE ON FRIDAY 1/12/23 AT THE WUNDOWIE OVAL	A\$730.00	27/11/23	73367	A\$730.00	23/10/23	EVENTS COORDINATOR	Yes	Yes	
December	EFT49437	EL CABALLO GOLF COURSE - SKANK BAY PL T/AS	SENIOR SPORTS KEVIN MULAVEY, PETER BUTTFIELD, RON SKELCHER, WILLIAM REINERS	A\$400.00	28/11/23		A\$400.00		RECREATION & YOUTH FACILITATOR		Yes	All Senior Sport Grants are paid by payment request.
December	EFT49419	BLACKWELL PLUMBING AND GAS PTY LTD	BERNARD PARK - REPAIR LEAKING WATER FOUNTAIN/DOG BOWL	A\$545.60	29/11/23	73755	A\$545.60	20/11/23	BUILDING MAINTENANCE SUPERVISOR	Yes	Yes	
December	EFT49473	POOL AND PUMP SERVICE AND REPAIRS	SERVICE WUNDOWIE POOL PLANTROOM	A\$1,985.93	01/12/23	73470	A\$1,985.93	29/10/23	POOL DUTY MANAGER	Yes	Yes	
December	EFT49440	FORPARK AUSTRALIA	REPLACEMENT CHAIN FOR PLAY EQUIPMENT	A\$644.60	21/11/23	73585	A\$644.60	08/11/23	PARKS & GARDENS MANAGER	Yes	Yes	
December	EFT49483	SPORTSPOWER NORTHAM	STOCK FOR AQUATIC FACILITY KIOSK	A\$1,820.80	01/12/23	73889	A\$1,820.80	28/11/23	POOL DUTY MANAGER	Yes	Yes	
December	EFT49498	WARRICKS NEWSAGENCY	ASSORTED STATIONERY FOR ADMIN OFFICE	A\$303.54	09/10/23	72872	A\$337.36	19/09/23	PROCUREMENT OFFICER	Yes	Yes	
December	EFT49455	MINT SWEEPING PTY LTD T/AS IMACU SWEEP	C.20/18/18-12 STREET SWEEPING & GULLY EDUCATION SERVICES (CLEANING TOWN ROADS)	A\$3,900.60	27/11/23	71930	A\$202,831.20	11/07/23	EXECUTIVE MANAGER ENGINEERING SERVICES	Yes	Yes	Instalment payment under contract
December	EFT49487	THE WATERSHED	HUNTER IRRIGATION SUPPLIES - RISERS & POP UPS	A\$2,280.00	29/11/23	73894	A\$2,280.00	29/11/23	PARKS & GARDENS MANAGER	Yes	Yes	
December	EFT49449	JASON SIGNMAKERS	DOUBLE SIDED STREET BLADE NON SPECS - BEAMISH AVE	A\$62.78	08/11/23	73605	A\$60.00	08/11/23	ENGINEERING ADMIN OFFICER	Yes	Yes	PO amount is less than the invoice, however is in the 10% range.
December		COMPLIANCE		100%								
December		COMPLETED BY:	Britt Hadlow									
December		SIGNED										

# Procurement Audit 2024

Audit Month	Creditor Code	EFT Number	Creditor	Invoice Description	Invoice Amount	Invoice Date	Purchase Order Number	Purchase Order Amount	Purchase Order Date	Authorising Officer	Date of Order Prior to Invoice	Compliance with Purchasing Policy/Process	Comment
January	D29	EFT49609	DEPARTMENT OF WATER & ENVIRONMENT REGULATION	DWER Quarterly Return - Old Quarry Road Waste Management Facility October to December 2023	AS\$12,637.86	31/01/24	N/A	N/A	N/A	Executive Manager Development Services	Not Applicable	Yes	Paid by Payment Request Form. Compliant with Process
January	W416	EFT49631	WALLEY STACK INTERNATIONAL PTY LTD	Phil Walleystack performance for event, includes PA/audio/video	AS\$11,770.00	19/12/23	74187	AS\$11,770.00	19/12/23	Manager Activation & Communications	Yes	Yes	
January	A193	EFT49651	AVON VALLEY ARTS SOCIETY (INC)	NVC Sales (Visitor Centre)	AS\$387.52	15/12/23	74027	AS\$387.52	07/11/23	Manager Community Development & Tourism	Yes	Yes	
January	S488	EFT49676	CTI SECURITY SYSTEMS PTY LTD T/AS SECURUS	Admin building. Replace main alarm control panel due to old one failing and not serviceable.	AS\$3,356.67	18/12/23	73042	AS\$3,356.67	17/10/23	Building Maintenance Supervisor	Yes	Yes	
January	P379	EFT49702	P&M HODGSON STEEL FABRICATION	Replace lock down catches to tilt tray	AS\$308.00	14/12/23	74071	AS\$308.00	11/12/2023	Engineering Admin Officer	Yes	Yes	
January	W278	EFT49728	WHEATBELT (NRM) NATURAL RESOURCE MANAGEMENT	Maintenance of Northam Cemetery as per contract	AS\$4,628.86	15/12/23	71487	AS\$113,978.04	09/06/23	Executive Manager Engineering Services	Yes	Yes	Contract No: C.202223-14
January	D289	EFT49756	DUN DIRECT PTY LTD	Fuel for December 2023	AS\$31,332.85	31/12/23	N/A	N/A	N/A	Executive Manager Corporate Service	Not Applicable	Yes	Due to being a monthly account there is no PO issued. GL breakdown is created once account is received and signed off by Executive.
January	M501	EFT49774	MOVIES BY BURSWOOD (INC)	Hire & Operation Mobile Cinema Friday 22 December 2023. Film Hire The Grinch	AS\$1,760.00	28/12/23	73580	AS\$1,760.00	07/11/23	Events Coordinator	Yes	Yes	
January	T154	EFT49793	T-QUIP	20x TINE 24MM MOUNT X 400MM 20x TINE-HOLLOW 32 X 300 (24MM MOUNT)	AS\$2,355.20	08/01/24	74293	AS\$2,355.20	08/01/24	Parks & Gardens Manager	Yes	Yes	
January	E189	EFT49810	KASSIDY EMERY	KASSIDY PAID FOR FUEL FOR THE COMMUNITY SERVICES VEHICLE ON THE 13/01/2024 AS THE FUEL CARD DECLINED 3 TIMES	AS\$102.35	19/01/24	N/A	N/A	N/A	Senior Recreation Centre Coordinator	Not Applicable	Yes	Paid by Payment Request Form. Compliant with Process
January	W453	EFT49816	WOOLWORTHS GROUP LIMITED (WOOLWORTHS GROUP)	Purchases for December 2023	AS\$1,509.57	01/01/24	N/A	N/A	N/A	Executive Manager Corporate Service	Not Applicable	Yes	Due to being a monthly account there is no PO issued. GL breakdown is created once account is received and signed off by Executive.
January			<b>COMPLIANCE</b>			100%							
January			<b>COMPLETED BY:</b>										
January			<b>SIGNED:</b>										

## 6.5 Privacy and Responsible Information Sharing

<b>File Reference:</b>	1.4.4.14
<b>Reporting Officer:</b>	Britt Hadlow (Governance Coordinator)
<b>Responsible Officer:</b>	Debbie Terelinck (Chief Executive Officer)
<b>Officer Declaration of Interest:</b>	Nil
<b>Voting Requirement:</b>	Simple Majority
<b>Press release to be issued:</b>	No

### BRIEF

To protect the personal information of Western Australians and facilitate responsible use and sharing of government data, the State Government is drafting privacy and responsible information sharing (PRIS) legislation. Officers have developed an Action Plan to coordinate the PRIS readiness activities to ensure compliance when the new legislation comes into effect.

This report provides an update on the required actions and progress to date.

### ATTACHMENTS

1. PRIS Action Plan - February 2024 Update [**6.5.1** - 5 pages]

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### A. BACKGROUND / DETAILS

The privacy and responsible information sharing legislation will provide Western Australians with greater control over their personal information and improve the delivery of government services. This legislation will enable data to be shared within government for the right reasons and provide greater accountability and transparency about how government uses personal information.

Broadly, the legislation introduces reforms that provide:

1. guiding principles and a framework to govern the collection, protection, use and disclosure of personal information across the public sector;
2. a mandatory data breach notification scheme, requiring agencies to notify the Privacy Commissioner and affected individuals of serious data breaches involving personal information; and
3. a mechanism that supports Aboriginal data sovereignty and governance in WA, by requiring that Aboriginal people and

communities are involved or consulted when data about them is shared.

An Agency PRIS Readiness Plan and checklist has been developed to help agencies prepare for and implement the legislation. The Readiness Plan describes the approach, governance, key activities, deliverables and milestones to ensure agencies are prepared to meet both the privacy and responsible information sharing requirements of the legislation once it commences. The checklist outlines the minimum policies and processes an agency should have in place and includes the requirement to develop an agency action plan.

The Shire's Action Plan (Attachment 6.3.1) is an internal planning document, describing the approach the Shire will take to prepare for the proposed privacy and responsible information sharing reforms. It is a high-level document to direct and coordinate PRIS readiness activities across the organisation. The purpose is to enable Officers to work systematically towards a defined level of capability by the time new legislation is anticipated to come into force. The Action Plan describes the results of the Shire's PRIS Readiness Assessment, and the actions required to resolve any identified gaps in PRIS readiness capabilities. It notes who is responsible for these actions and indicates due dates for completion.

## **B. CONSIDERATIONS**

### **B.1 Strategic Community / Corporate Business Plan**

Performance Area: Performance.

Outcome 12: Excellence in organisational performance and customer service.

Objective 12.1: Maintain a high standard of corporate governance and financial management.

Priority Action: Nil.

### **B.2 Financial / Resource Implications**

Staffing resources are required in order to action the recommendations detailed within the PRIS Action Plan.

### **B.3 Legislative Compliance**

Privacy and Responsible Information Sharing (PRIS) reforms.

### **B.4 Policy Implications**

Nil.

### **B.5 Stakeholder Engagement / Consultation**

Nil.

**B.6 Risk Implications**

Refer to Risk Matrix [here](#).

<b>Risk Category</b>	<b>Description</b>	<b>Rating (likelihood x consequence)</b>	<b>Mitigation Action</b>
Financial	N/A		
Health & Safety	N/A		
Reputation	N/A		
Service Interruption	N/A		
Compliance	Non-compliance with PRIS reforms.	Possible (3) x Medium (3) = Moderate (9)	Implement agency Action Plan with regular monitoring and reporting undertaken to the Audit and Risk Management Committee.
Property	N/A		
Environment	N/A		

**B.7 Natural Environment Considerations**

Nil.

**C. OFFICER'S COMMENT**

Officers have developed the Action Plan which is provided in attachment 6.4.1. Progress has commenced towards the required actions within the specified timeframes.

Since the last Audit and Risk Management Committee Meeting there have been minimal updates made in the PRIS space, and there have been no further updates or information provided by the Department.

The PRIS Readiness Checklist and the PRIS Readiness Plan were originally developed based on some assumptions by the State Government with regards to timing and availability of resources to further the development of the legislation. These assumptions were for planning purposes. Originally the anticipated timeframe for agencies to complete the checklist was 20-months (from April 2023 to December 2024).

Correspondence from the PRIS representative states that they are currently focussing on the development of the legislation, and it can be expected that there will be adjustments made to the work progress target dates, as they are



likely to be pushed out 6 months. It is expected these updates will be communicated to agencies in March 2024.

Officers will continue to update the Audit & Risk Management Committee on PRIS activities.

Key to table:

**Completed**

**No Action**

**Underway**

**RECOMMENDATION**

**That the Audit & Risk Management Committee endorses the following recommendation being presented to Council:**

- 1. That Council receives the February 2024 update as provided in Attachment 6.5.1 in relation to the progress made towards the Privacy and Responsible Information Sharing (PRIS) Action Plan.**

## PRIS Action Plan

Readiness Plan Reference No.	Action Item.	Target	Target Completion Date	Responsible Officer	Progress To Date	Status	Completion Date
4.1	Designate PRIS Champions	The designated PRIS Champion(s) have attended sector wide PRIS awareness sessions and briefings. The PRIS Champion(s) consistently promotes a culture that values the protection of personal information, supports safe and responsible information sharing practices, and encourages integration of PRIS requirements with broader business processes.	30/04/23	Alysha McCall	Governance Coordinator designated as PRIS Champion. Briefing session held on 19 June 2023.	Completed	20/06/23
5.3	Complete PRIS Action Plan	The agency PRIS Action Plan is completed and approved by the responsible senior officer.	30/06/23	Alysha McCall, Jason Whiteaker	PRIS Readiness Assessment Tool completed and this plan has been developed based on this assessment. Approved by CEO and to be reported to Audit & Risk Management Committee quarterly.	Completed	04/07/23
4.3	Map PRIS to Agency Values	The agency has produced a document (e.g., fact sheet or intranet page) for use in staff training or inclusion in a policy, emphasising the connection between PRIS and the agency's corporate values, promoting a culture of respect for the personal information and privacy of individuals with whom the agency engages, and a commitment to responsible information sharing practices. This connection is understood by staff.	31/08/23	Alysha McCall	1/9/2023 Has been posted on staff intranet and included in staff inductions.	Completed	01/09/23
4.4	Designate PRIS Officers	A Privacy Officer and Information Sharing Officer have been formally designated. The Officer(s) may be primarily compliance-focused and have some practices, procedures and systems in place, but these are generally siloed from broader organisational frameworks. Some staff are aware of the Privacy Officer and Information Sharing Officer.	31/08/23	Alysha McCall	Reviewing role against current positions. Likely appointments to be Governance Coordinator, Governance Officer and Senior Records Officer. Clarified with Department of Premier Cabinet in relation to whether CEO can make appointment or if Council resolution is required.  1/9/2023 Governance Coordinator and Governance Officer have been appointed.	Completed	01/09/23
3.4	Attend PRIS Awareness Sessions	The designated Privacy Officer and Information Sharing Officer – and any other key staff from the Agency – have attended all relevant sector wide PRIS awareness sessions and briefings conducted to date.	31/10/23	Britt Hadlow, Kunal Sarma, Tamika Van Beek	2/10/2023 - Training for PRIS scheduled for 31 October 2023. Designated staff to attend. 31/10/2023 - Relevant officers from Governance, IT & HR attended webinar.	Completed	31/10/23
8.2	Conduct a Survey of Information Holdings	The agency has identified high risk and/or high value areas of its business, the information and systems that support these business areas. A survey of information holdings has been completed for privacy and responsible information sharing requirements across these business areas.	31/12/23	Britt Hadlow, Kunal Sarma	May 2023 - Baseline readiness report was sent to councils. PRIS champions are to be nominated from council. PRIS Readiness Assessment - 18 questions in checklist to fill in, submit progress assessment report#1 between Nov 10 - 17. Need to ensure PRIS Champion can access the dedicated team's site. Need to complete the PRIS readiness assessment - check baseline/progress. 4/12/2023 - Waiting on information from Department with information on what is required to complete the survey of information holdings. 5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	



Readiness Plan Reference No.	Action Item.	Target	Target Completion Date	Responsible Officer	Progress To Date	Status	Completion Date
8.3	Establish an information Asset Register	The agency has identified high risk and/or high value areas of its business, the information and systems that support these business areas. The IAR documents privacy and responsible information sharing requirements across these business areas. The IAR records the general categories of personal information that are collected, used and disclosed by the agency. It describes the purposes for which the information is collected and how it is stored (such as whether it is stored offshore, with a cloud service provider or other third party).	31/12/23	Britt Hadlow	4/12/2023 - No progress 5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	
8.4	Review Agency Legislation	The agency has completed an analysis of priority legislation to identify specific interactions with PRIS provisions or PRIS readiness activities. Activities to address these interactions have been completed or captured in the agency's PRIS Action Plan, or they have been brought to the attention of the PRIS Implementation Steering Committee for discussion.	29/02/24	Britt Hadlow	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	
9.1	Publish a Privacy Policy	A Privacy Policy is readily available to the public. The Policy is compliance-focused, and provides the information required by law. Staff have been made aware of the Policy.	31/03/24	Britt Hadlow	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	
10.1	Publish a Data Breach Policy	A Data Breach Policy is readily available to the public. The Policy is compliance-focused, and provides the information required by law. It covers all parts of the organisation. Staff have been made aware of the Policy.	31/03/24	Britt Hadlow	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	
10.2	Establish a Register of Data Breaches	A Data Breach Register has been established, which records the following information: (a) the type of breach – whether personal information was involved, whether the data was subject to an information sharing agreement, how the breach was assessed; (b) who was notified of the breach; (c) when the breach was notified; (d) details of actions taken to prevent future breaches; and (e) the estimated cost of the breach. All identified data breaches are recorded in the register, including: •data breaches involving personal information; •data breaches involving non-personal information; •data breaches assessed as "eligible" or "notifiable," and •data breaches that are not considered "eligible" or "notifiable" – and how this was assessed.	30/04/24	Britt Hadlow	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	

Readiness Plan Reference No.	Action Item.	Target	Target Completion Date	Responsible Officer	Progress To Date	Status	Completion Date
9.2	Publish Collection Notices	Privacy notices are provided where personal information is collected. Notices are compliance-focused, providing the information required by law. Privacy messaging is viewed neutrally as a legal requirement.	30/06/24	Britt Hadlow, Tamika Van Beek	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	
8.5	Publish a Privacy Management Plan	The agency has a Privacy Management Plan in place and some staff are aware of it. The Privacy Management Plan includes measures for addressing any known privacy compliance gaps.	31/08/24	Britt Hadlow	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	
10.3	Publish a Data Breach Response Plan	A basic Data Breach Response Plan is in place that reflects the recommended steps (Contain, Assess, Notify, Prevent). Staff are generally aware of how to recognise a data breach and are likely to speak up about breaches. Decision making in breach response is largely reliant on the Privacy Officer.	31/08/24	Britt Hadlow	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	
8.6	Review Agency Contracts	New or updated contracts include a confidentiality clause and standard privacy terms. The agency has established a clear and documented process to assess third party privacy policies, practices or systems. It is applied consistently where a third party may have access to personal information. Third parties are only engaged if their privacy practices are equivalent to the agency's, or any gaps are mitigated by contractual controls.	30/09/24	Britt Hadlow, Kristy Hopkins	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	

Readiness Plan Reference No.	Action Item.	Target	Target Completion Date	Responsible Officer	Progress To Date	Status	Completion Date
8.7	Review Retention and Disposal Requirements	The agency has completed an analysis of priority retention and disposal arrangements to identify specific interactions with PRIS provisions or PRIS readiness activities. Activities to address these interactions have been addressed or captured in the agency's PRIS Action Plan; or they have been brought to the attention of the PRIS Implementation Steering Committee for discussion.	30/09/24	Britt Hadlow, Marlene Plews, Tamika Van Beek	Retention and disposal arrangements have been identified in line with the PRIS provisions. Scheduled to be completed on 17/01/2024. 5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year.  On the 17/01/2024, A total of 60 Archive Boxes were collected from the Depot by Shred-X, for destruction as per GDA Authority.  The remaining 36 Archive boxes have been removed from the Depot Archives and have been placed in the Records room. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	Underway	30/11/23
9.3	Establish procedure for handling and tracking complaints about privacy or responsible information sharing	The agency has established procedures for responding to complaints about privacy or responsible information sharing. Key staff are able to identify and manage a complaint. There is a general channel for the public to engage with the agency and this can be used for complaints (e.g., 'Contact us webform). Management of complaints is reliant on the Privacy Officer or Information Sharing Officer.	31/10/24	Britt Hadlow	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	
9.4	Establish procedure for individual requests for access to, and correction of, personal information	The agency has established a procedure for responding to individual requests for access to, and correction of, personal information where it is determined to be lawful and appropriate. Key staff are aware of the procedures. Decision making for responses is largely reliant on the Privacy Officer. Request handling and response is compliance focused. Response timeframes may be exceeded, due to resource constraints or limited understanding of information holdings.	31/10/24	Britt Hadlow	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	
9.5	Establish procedure for handling and tracking information sharing requests and data holding requests	The agency has established procedures for responding to information sharing requests and data holdings requests, according to legal requirements. Key staff are aware of the procedures. Decision making for responses is largely reliant on the Information Sharing Officer.	31/10/24	Britt Hadlow	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	

Readiness Plan Reference No.	Action Item.	Target	Target Completion Date	Responsible Officer	Progress To Date	Status	Completion Date
10.4	Establish a procedure for data breach notification and reporting	Procedures for Data Breach Notification have been established. Clear processes are in place to evaluate breaches and assess whether notification is necessary or desirable, with a primary focus on compliance-risks to the agency. Determining whether to notify is driven by the Privacy Officer. Data breach notification occurs where required by law.	31/10/24	Britt Hadlow	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	
12.2	Establish a procedure for conducting Privacy Impact Assessments	PIA process is established but it is only used for high privacy-risk projects. Privacy issues which do not meet the high privacy risk threshold are rarely considered. Where PIAs are completed, they are run by privacy or risk staff and may not be integrated into wider agency change management or project management processes.	31/10/24	Britt Hadlow	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	
4.5 & 4.6	Deliver Internal Staff Training	A training program is established. All customer-facing staff have been trained and are aware of key PRIS requirements relevant to their role and function. All new staff are being trained at induction. Training is compliance-focused and targets specific legal obligations. Staff completion rates and understanding of privacy are monitored.	30/11/24	Britt Hadlow, Jan Byers	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	
12.4	Establish Monitoring and Reporting	Monitoring and reporting processes are established. Compliance with regulatory obligations is documented, including keeping records on privacy and responsible information sharing activities. Roles and accountabilities for compliance and senior oversight are documented and well understood across the organisation. Thresholds for escalation of risks, issues, incidents and complaints are defined. Reporting lines are clear and senior management is routinely informed about the performance of PRIS activities.	31/12/24	Britt Hadlow	5/1/2023 - There was an email to PRIS Champions on 1 November, indicating some of the target dates in the PRIS Readiness Plan and Checklist will be adjusted, to take account of this. There will be a further update on this in the new year. 6/2/2024 - Made contact with WA Gov to follow up if there is any further information that can be provided as to revised dates. WA Gov advised it is expected that the dates will be pushed out six months. It is expected that further information will be circulated by March 2024.	No Action	

## 6.6 Risk Register

<b>File Reference:</b>	8.2.7.1
<b>Reporting Officer:</b>	Britt Hadlow (Governance Coordinator)
<b>Responsible Officer:</b>	Debbie Terelinck (Chief Executive Officer)
<b>Officer Declaration of Interest:</b>	Nil
<b>Voting Requirement:</b>	Simple Majority
<b>Press release to be issued:</b>	No

### BRIEF

To provide information relating to the organisational risk register.

### ATTACHMENTS

1. Risk Register [6.6.1 - 30 pages]

## A. BACKGROUND / DETAILS

The Shire of Northam has an organisation-wide risk register that has been developed over a period of time. Council has been advised previously that the management of risk is an area which has been under-developed within the organisation and an area which was receiving a focus to ensure awareness of the identified risks and treatment strategies in place.

To assist in the effective management of risk, the Shire is using the Promapp system, which allows for recording of organisational risks and the tracking of the associated treatment actions.

## B. CONSIDERATIONS

### B.1 Strategic Community / Corporate Business Plan

Performance Area: Performance, Outcome 12: Excellence in organisational performance and customer service.

Objective 12.1: Maintain a high standard of corporate governance and financial management.

Priority Action 12.1.4: Provide internal auditing capabilities (including providing additional human or financial resources) and publish findings annually.

### B.2 Financial / Resource Implications

Council allocates \$27,000 per annum for the Promapp system. Promapp is used for process mapping, risk management and WHS management.

**B.3 Legislative Compliance**

AS/NZS ISO 31000:2018.

**B.4 Policy Implications**

Policy G1.11 – Risk Management.

**B.5 Stakeholder Engagement / Consultation**

Council was involved in the development and endorsement of the Risk Management Policy and associated Plan.

**B.6 Risk Implications**

Refer to Risk Matrix [here](#).

<b>Risk Category</b>	<b>Description</b>	<b>Rating (likelihood x consequence)</b>	<b>Mitigation Action</b>
Financial	N/A		
Health & Safety	N/A		
Reputation	Negative community perception due to lack of adequate risk management practices within the Shire of Northam	Minor(2) x Possible(3) = Moderate(6)	Continual review of the risk dashboard and associated risk treatments.
Service Interruption	N/A		
Compliance	Non-compliance of Australian Standards and legislation due to lack of risk management practices.	Minor(2) x Possible(3) = Moderate(6)	Continual review of the risk dashboard and associated risk treatments.
Property	N/A		
Environment	N/A		

**B.7 Natural Environment Considerations**

Nil.

**C. OFFICER'S COMMENT**

As part of the Risk Management Policy Council has established two performance indicators being:



1. % of high or extreme risks without mitigation / treatment strategies in place.

*Currently all high or extreme risks have mitigation/treatment strategies.*

2. % of risk mitigation / treatment strategies overdue

There are currently 141 risk mitigation/treatment strategies, of which two are overdue/non-compliant (which equates to 1.41%) as at 15 February 2024. These are outlined below together with a comment regarding risk mitigation:

- MC00042: Overdue – Ensure weekly inspections of fire appliance is being undertaken during fire season.
- MC00139: Undertake monthly workplace inspections of fire stations by Brigade captains or another appropriate brigade member.

*Comment:* Officers are working with volunteer brigade members to ensure these inspections are taking place at the appropriate intervals.

#### **RECOMMENDATION**

**That the Audit & Risk Management Committee endorses the following recommendation being presented to Council:**

1. **That Council receives the February 2024 update on the Shire of Northam Risk Register.**



**Risk Register**

RESIDUAL <b>15.0</b> EXTREME	GENERAL, HEALTH & SAFETY - PUBLIC <b>River Water Quality</b> Risk of public swimming in river during times of poor river quality and becoming unwell.	TREATMENT MC00124 Manage River Water Sampling - Prepare items required items to conduct sampling Ensure river sampling is conducted and results assessed. Ensure communication and signage is adequate with community.	CHANGE(S) PENDING SIGNOFF(S): Susan Burley DUE DATE: 01 Feb 2025 FREQUENCY: 1st day of every 12 months
	INHERENT <b>15.0</b>	OWNER Chadd Hunt CREATED 2/20/2023 12:18:55 PM LIKELIHOOD Possible SEVERITY Extreme CONTROL EFFECTIVENESS Deficiencies	

R00059

RESIDUAL <b>12.0</b> EXTREME	GENERAL, HEALTH & SAFETY - PUBLIC <b>Re-use water quality</b> Ensure re-use water quality meets Department of Health licensing requirements.	TREATMENT MC00125 Manage Reclaimed Water Sampling - Receive results Ensure procedures are followed for sampling.	CHANGE(S) PENDING SIGNOFF(S): Gordon Tester Neil Travers Paul Todd George Johnson Sean Cope Susan Burley DUE DATE: 01 Feb 2025 FREQUENCY: 1st day of every 12 months
	INHERENT <b>12.0</b>	OWNER Chadd Hunt CREATED 2/20/2023 12:23:15 PM LIKELIHOOD Possible SEVERITY Major CONTROL EFFECTIVENESS Deficiencies	

R00060



RESIDUAL  
**9.6**  
 HIGH

INHERENT  
**12.0**

R00062

DEVELOPMENT SERVICES, ENVIRONMENTAL - NATURAL

**Inadequate control of invasive flora species on Shire of Northam controlled land**

OWNER Chadd Hunt  
 CREATED 5/29/2023 4:32:00 PM

LIKELIHOOD Possible  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Adequate

TREATMENT MC00128  
 Develop annual spraying program for Shire of Northam land

SIGNOFF(S): Jennifer Abbott  
 Chadd Hunt  
 DUE DATE: 31 Aug 2024  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00129  
 Engage contractors to undertake spraying in identified areas

SIGNOFF(S): Jennifer Abbott  
 Chadd Hunt  
 DUE DATE: 30 Sep 2024  
 FREQUENCY: The last Weekday of every 12 months

RESIDUAL  
**9.6**  
 HIGH

INHERENT  
**12.0**

R00023

CORPORATE SERVICES, SERVICE INTERRUPTION

**Failure of IT &/or Communications Systems and Infrastructure**

Instability, degradation of performance, or other failure of IT Systems, Infrastructure, Communication or Utility 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
- IT Network
- Failures of IT Vendors

This also includes where poor governance results in the breakdown of IT maintenance such as;

- Configuration management
- Performance Monitoring
- IT Incident, Problem Management & Disaster Recovery Processes

This does not include new system implementations - refer "Inadequate Project / Change Management".

OWNER Colin Young  
 CREATED 7/1/2019 2:58:09 PM

LIKELIHOOD Possible  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Adequate

TREATMENT MC00047  
 Data Back-up Systems in place and documented

SIGNOFF(S): Colin Young  
 DUE DATE: 30 Sep 2024  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00048  
 Disaster Recovery Plan in place

SIGNOFF(S): Colin Young  
 DUE DATE: 01 Sep 2024  
 FREQUENCY: The first Day of every 12 months

RESIDUAL  
**9.6**  
HIGH

INHERENT  
**12.0**

R00040

AMP - BUILDINGS, SERVICE INTERRUPTION

**AM Service Levels not met**

Asset Management Plan identifies need to establish and monitor a range of service levels to ensure Council and community expectations are met

OWNER Paul Devcic

CREATED 7/16/2019 11:24:02 AM

LIKELIHOOD Likely

SEVERITY Medium

CONTROL EFFECTIVENESS Adequate

TREATMENT MC00019

Up to date and accurate building asset management plan in place

SIGNOFF(S):

Paul Devcic  
Colin Young  
Shane Moorhead

DUE DATE:

01 Jun 2025

FREQUENCY:

The first Day of every 24 months

RESIDUAL  
**9.6**  
 HIGH

INHERENT  
**12.0**

R00064

DEVELOPMENT SERVICES, HEALTH & SAFETY - BUSHFIRE VOLUNTEERS

**Farmer Response**

Risk associated with farmers turning out to fires

OWNER Chadd Hunt

CREATED 7/21/2023 1:47:37 PM

LIKELIHOOD Possible

SEVERITY Major

CONTROL EFFECTIVENESS Adequate

TREATMENT MC00133

Marketing to encourage farmers to have protective clothing in their vehicles in case of a fire emergency. Social media campaign to be developed to commence September annually in the lead up to fire season

SIGNOFF(S):

Alex Espey  
Chadd Hunt

DUE DATE:

25 Aug 2024

FREQUENCY:

25th day of every 12 months

TREATMENT MC00134

Provide Shire of Northam Fire appliance with one spare set of PPE. (confirm with brigade captains)

SIGNOFF(S):

Alex Espey  
Chadd Hunt

DUE DATE:

30 Aug 2024

FREQUENCY:

30th day of every 12 months

TREATMENT MC00135

Memo to Leadership Team and FCO's reminding them of importance of effective coordination on active fire grounds by ensuring fire control officers and brigade members are aware of importance of the sector commander or incident controller recording private fire units and of sectorising fires early,

SIGNOFF(S):

Alex Espey  
Chadd Hunt

DUE DATE:

29 Sep 2024

FREQUENCY:

29th day of every 12 months

Provide a mechanism for farmers to have private units certified / approved for use on fire ground, whether that be through provision of pre-season checks or requirement to self certify as part of response sticker application process

SIGNOFF(S):

Alex Espey  
Chadd Hunt

DUE DATE:

30 Aug 2024

FREQUENCY:

30th day of every 12 months

TREATMENT MC00137

Encourage young people (farmers) to become members of bushfire brigades through annual social media campaign

SIGNOFF(S):

Alex Espey  
Chadd Hunt  
Ian Kieley

DUE DATE:

29 Sep 2024

FREQUENCY:

29th day of every 12 months

TREATMENT MC00138

Investigate potential incentives to attract volunteers

SIGNOFF(S):

Alex Espey  
Chadd Hunt

DUE DATE:

FREQUENCY:

Once

TREATMENT MC00139

Undertake monthly workplace inspections of fire stations undertaken by Brigade captains of another appropriate brigade member

**OVERDUE**

SIGNOFF(S):

Alex Espey

DUE DATE:

23 Dec 2023

FREQUENCY:

23rd day of every 2 months

RESIDUAL  
**9.6**  
 HIGH

INHERENT  
**12.0**

R00065

DEVELOPMENT SERVICES, HEALTH & SAFETY - BUSHFIRE VOLUNTEERS

**Fire Station, Appliances & Equipment**  
 Ensure our volunteers have access to adequate / appropriate and safe buildings, appliances and equipment

OWNER Chadd Hunt  
 CREATED 7/21/2023 2:10:25 PM  
 LIKELIHOOD Possible  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Adequate

TREATMENT MC00140

Pre-season safety inspection of fire stations

SIGNOFF(S): Alex Espey  
 Joanne Griffiths  
 DUE DATE: 30 Sep 2024  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00141

Provide manual handling training / refreshers to all volunteers. May be in person or provision of online refresher opportunity

SIGNOFF(S): Alex Espey  
 DUE DATE: 17 Oct 2024  
 FREQUENCY: 17th day of every 12 months

TREATMENT MC00142

Ensure weekly inspections of fire appliance is being undertaken during fire season

**OVERDUE**  
 SIGNOFF(S): Alex Espey  
 DUE DATE: 01 Dec 2023  
 FREQUENCY: The first Day of every month

TREATMENT MC00143

Undertake Preseason Check of all appliances by qualified mechanic

SIGNOFF(S): Alex Espey  
 Chadd Hunt  
 DUE DATE: 18 Feb 2024  
 FREQUENCY: 18th day of every month

TREATMENT MC00144

Provide vehicle report forms to all brigades to ensure damage or maintenance requirements are being identified

SIGNOFF(S): Alex Espey  
 DUE DATE: 31 Mar 2024  
 FREQUENCY: The last Day of every 6 months

TREATMENT MC00145

Provide access to off-road training to all volunteers

SIGNOFF(S): Alex Espey  
 DUE DATE: 30 Sep 2024  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00146

Memo to all brigade members in relation to requirement for bushfire appliance operators to obey road rules when on public roads at all times, unless an exemption is provided due to driver having undertaken necessary training

SIGNOFF(S): Alex Espey  
 DUE DATE: 30 Sep 2024  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00147

Provide washing machines at all Fire Stations and encourage / recommend that all PPE be washed on site

SIGNOFF(S): Alex Espey  
 DUE DATE: 30 Sep 2024  
 FREQUENCY: The last Day of every 12 months

RESIDUAL  
**9.6**  
HIGH

INHERENT  
**12.0**

R00066

DEVELOPMENT SERVICES, HEALTH & SAFETY - BUSHFIRE VOLUNTEERS

**Volunteer Training**

Inadequate volunteer training could result in injury or death on fire ground

OWNER Chadd Hunt

CREATED 7/21/2023 2:44:26 PM

LIKELIHOOD Possible

SEVERITY Major

CONTROL EFFECTIVENESS Adequate

TREATMENT MC00148

Provide 2 sets of PPE to all active brigade members on their request.

SIGNOFF(S): Alex Espey

DUE DATE: 01 Oct 2024

FREQUENCY: The first Day of every 12 months

TREATMENT MC00149

Ensure minimum training standards for bushfire volunteers, including the leadership team, are endorsed by Council

SIGNOFF(S): Alex Espey

DUE DATE: 20 Aug 2025

FREQUENCY: The third Wednesday of every 24 months

TREATMENT MC00151

Have standard operating procedures in place

SIGNOFF(S): Alex Espey

DUE DATE: 30 Sep 2024

FREQUENCY: The last Day of every 12 months

TREATMENT MC00152

Ensure adequate training assessors are approved by DFES for the Shire of Northam

SIGNOFF(S): Alex Espey

DUE DATE: 31 Jul 2024

FREQUENCY: The last Day of every 12 months

TREATMENT MC00153

Provide volunteers with access to flexible training arrangements, with a particular focus on weeknight training to suit volunteers

SIGNOFF(S): Alex Espey

DUE DATE: 01 Aug 2024

FREQUENCY: The first Day of every 12 months

TREATMENT MC00154

Require minimum training before a volunteer can be active on the fire ground (utilising DFES guidelines) - reminder to be sent to all captains and volunteers

SIGNOFF(S): Alex Espey

DUE DATE: 30 Sep 2024

FREQUENCY: The last Day of every 12 months

TREATMENT MC00155

All volunteers to be required to undertake pre-season competency based training / annual induction prior to start of fire season

SIGNOFF(S): Alex Espey

DUE DATE: 31 Oct 2024

FREQUENCY: The last Day of every 12 months

TREATMENT MC00157

Review training records/registers to ensure they are up to date and utilised to identify training requirements

SIGNOFF(S): Alex Espey

DUE DATE: 01 Aug 2024

FREQUENCY: The first Day of every 12 months

RESIDUAL  
**7.5**  
 MODERATE

INHERENT  
**25.0**

R00004

CORPORATE SERVICES, STRATEGIC - ORGANISATIONAL

**Inadequate Insurance**  
 Organisation is exposed to financial loss due to failure to renew public indemnity insurance or renew it with adequate cover

OWNER Colin Young  
 CREATED 5/6/2019 1:42:09 PM

LIKELIHOOD Almost Certain  
 SEVERITY Extreme  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00061  
 Insurance coverage reviewed internally prior to presenting to Chief Executive Officer for sign off

SIGNOFF(S): Colin Young  
 DUE DATE: 01 Jul 2024  
 FREQUENCY: The first Day of every 12 months

TREATMENT MC00062  
 Insurance coverage assessed independently for adequacy

SIGNOFF(S): Colin Young  
 DUE DATE: 01 May 2024  
 FREQUENCY: The first Day of every 48 months

TREATMENT MC00097  
 Review of past 5 year Insurance performance (comparing premium contributions against claims). May result in assessing a range of factors including current level of cover, excesses and structure of workers compensation premium for example:

- Retention (deductible and excess) Review – assess what amount the Shire is able to retain for each applicable policy (please note LGIS Workers Compensation and Public Liability policies have Nil excess)
- Explore the options of moving from a fixed based Workers Compensation policy to Performance based policy. Whilst this could reduce up-front costs, poor performance does impact overall costs, due to a higher maximum rate.
- Overall Property Asset review – item by item, identify what the Shire would replace and what would not be replaced and amend sums insured accordingly. For example no intention of replacing an asset in the event of a total loss, you can choose to reduce the sum insured to an indemnity basis rather than re-in statement. Partial losses will need to be a consideration in this exercise.
- Policy Limits review against maximum fore see able losses. (this can be undertaken on the Brokered policies outside of the mutual policies).

SIGNOFF(S): Colin Young  
 Debbie Terelinck  
 DUE DATE: 31 May 2024  
 FREQUENCY: The last Day of every 36 months

RESIDUAL  
**7.5**  
 MODERATE

INHERENT  
**25.0**

R00011

CORPORATE SERVICES, COMPLIANCE - LEGISLATIVE, FINANCIAL - OPERATIONAL

**Inadequate procurement / tender process**  
 Council fails to meet legislative obligations, Council policy and Council delegations relating to procurement resulting in departmental investigation, potential disciplinary action, poor financial outcomes and reputation damage.

OWNER Colin Young  
 CREATED 5/7/2019 10:29:20 AM  
 LIKELIHOOD Almost Certain  
 SEVERITY Extreme  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00008  
 Manage Procurement - Identify need for procurement  
 Establish and comply with a purchasing policy.

**CHANGE(S) PENDING**  
 SIGNOFF(S): Colin Young  
 Kristy Hopkins  
 DUE DATE: 01 May 2025  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00009  
 Monthly random internal audit of five (5) purchases to be performed to ensure compliance with purchasing requirements.

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 14 Mar 2024  
 FREQUENCY: 14th day of every month

TREATMENT MC00010  
 Ensure the delegated authority register is up to date for tenders and purchases through E-Quotes.

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 14 Mar 2024  
 FREQUENCY: 14th day of every month

TREATMENT MC00112  
 Review Procurement Policy.

SIGNOFF(S): Kristy Hopkins  
 Colin Young  
 DUE DATE: 01 Oct 2024  
 FREQUENCY: 1st day of every 12 months

RESIDUAL  
**7.2**  
 MODERATE

INHERENT  
**9.0**

R00015

CHIEF EXECUTIVES OFFICE, COMPLIANCE - LEGISLATIVE, SERVICE INTERRUPTION

**Records Management**  
 Important information unable to be found and legislative requirements not met as a result of inadequate records management plans and practices

OWNER Debbie Terelinck  
 CREATED 5/24/2019 2:58:42 PM  
 LIKELIHOOD Possible  
 SEVERITY Medium  
 CONTROL EFFECTIVENESS Adequate

TREATMENT MC00023  
 Manage Records - File record  
 Process which explains how to register all records incoming and outgoing

**CHANGE(S) PENDING**  
 SIGNOFF(S): Britt Hadlow  
 DUE DATE: 01 Jul 2024  
 FREQUENCY: 1st day of every 12 months

TREATMENT MC00024  
 Current Records Management Plan in place

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 01 May 2024  
 FREQUENCY: The first Day of every 48 months

TREATMENT MC00025  
 Manage Document Control - Identify Document Need  
 Have an effective document control system in place

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 01 May 2024  
 FREQUENCY: The first Day of every 12 months

RESIDUAL <b>7.2</b> MODERATE	CHIEF EXECUTIVES OFFICE, REPUTATION - COMMUNITY <b>Inadequate engagement with Community / Stakeholders / Elected Members</b> Failure to maintain effective working relationships with the Community (including Local Media), Stakeholders, Key Private Sector Companies, Government Agencies and / or Elected Members. This invariably includes activities where communication, feedback and / or consultation is required and where it is in the best interests to do so.	TREATMENT MC00032 Current Community Engagement Plan in Place	SIGNOFF(S): DUE DATE: FREQUENCY:	Debbie Terelinck 01 Jan 2029 The first Day of every 112 months
	INHERENT <b>9.0</b>	R00018  OWNER Debbie Terelinck CREATED 6/19/2019 9:07:22 AM  LIKELIHOOD Possible SEVERITY Medium CONTROL EFFECTIVENESS Adequate		

RESIDUAL <b>7.2</b> MODERATE	DEVELOPMENT SERVICES, ENVIRONMENTAL - NATURAL <b>Contaminated property being used inappropriately</b>	TREATMENT MC00127 Ensure contaminated sites register is maintained and up to date	SIGNOFF(S): DUE DATE: FREQUENCY:	Chadd Hunt 30 Jun 2024 30th day of every 12 months
	INHERENT <b>9.0</b>	R00061  OWNER Chadd Hunt CREATED 5/29/2023 4:28:26 PM  LIKELIHOOD Possible SEVERITY Medium CONTROL EFFECTIVENESS Adequate		



<p>RESIDUAL <b>6.4</b> MODERATE</p> <p>INHERENT <b>8.0</b></p> <p>R00063</p>	<p>DEVELOPMENT SERVICES, ENVIRONMENTAL - NATURAL</p> <p><b>Inefficient use of water in/on Shire of Northam assets</b></p> <p>OWNER Chadd Hunt          CREATED 5/29/2023 4:37:13 PM</p> <p>LIKELIHOOD Likely          SEVERITY Minor          CONTROL EFFECTIVENESS Adequate</p>	<p>TREATMENT MC00130</p> <p>Establish internal Waterwise group to identify water saving opportunities</p>	<p>SIGNOFF(S): Jennifer Abbott Chadd Hunt</p> <p>DUE DATE: 29 Feb 2024</p> <p>FREQUENCY: The last Weekday of every 3 months</p>
		<p>TREATMENT MC00131</p> <p>Review water usage to identify high use facilities and identify saving opportunities</p>	<p>SIGNOFF(S): Jennifer Abbott Chadd Hunt</p> <p>DUE DATE: 29 Mar 2024</p> <p>FREQUENCY: The last Weekday of every 12 months</p>
		<p>TREATMENT MC00132</p> <p>Undertake water balance study to identify opportunities for greater utilisation of treated wastewater on Shire of Northam assets</p>	<p>SIGNOFF(S): Gordon Tester Keith Boase Chadd Hunt Paul Devcic</p> <p>DUE DATE:</p> <p>FREQUENCY: Once</p>

RESIDUAL  
**6.0**  
 MODERATE

INHERENT  
**20.0**

R00021

CORPORATE SERVICES, FINANCIAL - OPERATIONAL, FINANCIAL - STRATEGIC

**Inadequate Financial, Accounting or Business Acumen**

Inadequate identification or quantification of financial exposure or risk associated with decisions to invest in land transactions, financial derivatives or investments or poor long term forecasting / assumptions. Examples include;

- Poor credit management (short or long term borrowing restricting capacity or flexibility).
- Ineffective market analysis (over or under estimating).
- Ineffective Business Planning (poor scope / competition analysis).
- Ineffective financial modelling, forecasting and projection techniques / processes.

OWNER Colin Young  
 CREATED 7/1/2019 2:34:50 PM

LIKELIHOOD Likely  
 SEVERITY Extreme  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00034  
 Long Term Financial Plan in Place

SIGNOFF(S): Colin Young  
 DUE DATE: 01 Jul 2024  
 FREQUENCY: The first Day of every 12 months

TREATMENT MC00035  
 Annual Budget adopted and aligned with long term financial plan

SIGNOFF(S): Colin Young  
 DUE DATE: 31 Jul 2024  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00036  
 Investment strategy / policy in place

SIGNOFF(S): Colin Young  
 DUE DATE: 01 Jul 2024  
 FREQUENCY: The first Day of every 12 months

TREATMENT MC00037  
 Manage Debtors - Identify Debtor  
 Process to manage general debtors

**CHANGE(S) PENDING**  
 SIGNOFF(S): Colin Young  
 Kristy Hopkins  
 DUE DATE: 01 Jul 2024  
 FREQUENCY: The first Day of every 12 months

TREATMENT MC00038  
 Arrange payment plans for Rates - Setup payment arrangement with Rate payer  
 Process which ensures rate debts are collected / managed effectively

SIGNOFF(S): Colin Young  
 Michelle Gaasdalen  
 DUE DATE:  
 FREQUENCY: Once

TREATMENT MC00039  
 Develop Annual Budgets - Send Email  
 Ensure budget process is managed effectively

**CHANGE(S) PENDING**  
 SIGNOFF(S): Colin Young  
 Kristy Hopkins  
 DUE DATE: 29 Feb 2024  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00040  
 Manage Rates Recovery - Confirm rates outstanding  
 Manage recovery of rated

**CHANGE(S) PENDING**  
 SIGNOFF(S): Michelle Gaasdalen  
 DUE DATE: 01 Jul 2024  
 FREQUENCY: The first Day of every 12 months

TREATMENT MC00114  
 Undertake a financial review every 3 years

SIGNOFF(S): Colin Young  
 DUE DATE: 01 Jan 2025  
 FREQUENCY: The first Day of every 36 months

RESIDUAL  
**6.0**  
 MODERATE

INHERENT  
**20.0**

R00001

CHIEF EXECUTIVES OFFICE, COMPLIANCE - LEGISLATIVE

**Failure to fulfil statutory, regulatory or compliance requirements**

Council is exposed to reputation damage and serious breaches due to a failure to comply with legislative and compliance requirements

OWNER Debbie Terelinck  
 CREATED 4/8/2019 2:46:49 PM

LIKELIHOOD Almost Certain  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00002

Audit of monthly compliance calendar

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 14 Mar 2024  
 FREQUENCY: 14th day of every month

TREATMENT MC00007

Manage Inductions - Conduct New Employee Induction  
 All new employees are provided with adequate inductions

**CHANGE(S) PENDING**  
 SIGNOFF(S): Janice Byers  
 DUE DATE: 23 Feb 2024  
 FREQUENCY: Fri every week

TREATMENT MC00009

Monthly random internal audit of five (5) purchases to be performed to ensure compliance with purchasing requirements.

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 14 Mar 2024  
 FREQUENCY: 14th day of every month

TREATMENT MC00058

Organisational Compliance Calendar in place and reviewed by Executive Management Group

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 01 Mar 2024  
 FREQUENCY: The first Day of every 12 months

TREATMENT MC00059

Induction & Training provided to elected members

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 30 Nov 2025  
 FREQUENCY: The last Day of every 24 months

TREATMENT MC00060

Complete Annual Compliance Return (Dept Local Government)

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 29 Feb 2024  
 FREQUENCY: The last Day of every 12 months

RESIDUAL  
**6.0**  
 MODERATE

INHERENT  
**6.0**

R00058

DEVELOPMENT SERVICES, ENVIRONMENTAL - NATURAL

**Shire of Northam activities result in increasing carbon emissions**  
 Council activities do not meet State & Federal emissions reduction targets.

OWNER Chadd Hunt  
 CREATED 2/20/2023 12:08:24 PM

LIKELIHOOD Possible  
 SEVERITY Minor  
 CONTROL EFFECTIVENESS Deficiencies

TREATMENT MC00126

Develop and implement a climate mitigation and adaptation plan.

SIGNOFF(S): Jennifer Abbott  
 Chadd Hunt  
 DUE DATE: 30 Jun 2024  
 FREQUENCY: The last Day of every 12 months

RESIDUAL  
**4.8**  
 MODERATE

INHERENT  
**16.0**

R00008

CHIEF EXECUTIVES OFFICE, REPUTATION - COMMUNITY

**Not meeting community expectations**  
 Community service expectations are not as a result of a failure to provide expected levels of service, events and benefit to the community. This includes where precedents have set Community perceptions or where services are generally expected.

OWNER Debbie Terelinck  
 CREATED 5/6/2019 1:56:25 PM

LIKELIHOOD Likely  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00004

Review Corporate Business Plan annually to ensure reflects strategic community plan

SIGNOFF(S): Debbie Terelinck  
 DUE DATE: 03 Feb 2025  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00013

Manage Customer Requests - Receive Request  
 Ensuring that the organisation captures and responds appropriately to community and internal requests for works or services

**CHANGE(S) PENDING**  
 SIGNOFF(S): Debbie Terelinck  
 Britt Hadlow  
 DUE DATE:  
 FREQUENCY: Once

RESIDUAL  
**4.8**  
 MODERATE

INHERENT  
**16.0**

R00013

CORPORATE SERVICES, ENGINEERING SERVICES, ENVIRONMENTAL - BUILT, FINANCIAL - STRATEGIC, SERVICE INTERRUPTION

**Inadequate Asset Management Practices**

Failure or reduction in service of infrastructure assets, plant, equipment or machinery. These include fleet assets in addition to community use based assets including playgrounds, boat ramps and other maintenance based assets. Areas included in the scope are;

- Inadequate design (not fit for purpose).
- Ineffective usage (down time)
- Outputs not meeting expectations
- Inadequate maintenance activities.
- Inadequate or unsafe modifications.

It does not include issues with the inappropriate use of the Plant, Equipment or Machinery. Refer Misconduct.

OWNER Debbie Terelinck  
 CREATED 5/24/2019 2:29:02 PM

LIKELIHOOD Likely  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00018

Up to date and accurate transport management plan in place

SIGNOFF(S): Paul Devcic  
 Colin Young  
 DUE DATE: 01 Feb 2025  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00019

Up to date and accurate building asset management plan in place

SIGNOFF(S): Paul Devcic  
 Colin Young  
 Shane Moorhead  
 DUE DATE: 01 Jun 2025  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00020

Up to date and accurate parks & reserves asset management plan in place

SIGNOFF(S): Paul Devcic  
 Colin Young  
 DUE DATE: 01 Sep 2025  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00021

Long Term Financial Plan aligned to asset management plans

SIGNOFF(S): Colin Young  
 DUE DATE: 01 Dec 2024  
 FREQUENCY: The first Day of every 12 months

RESIDUAL  
**4.8**  
 MODERATE

INHERENT  
**16.0**

R00022

CHIEF EXECUTIVES OFFICE, HEALTH & SAFETY - OCCUPATIONAL

**Inadequate safety and security practices**

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

- 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 security protection measures in place for buildings, depots and other places of work (vehicle, community etc).
- Public Liability Claims, due to negligence or personal injury.
- Employee Liability Claims due to negligence or personal injury.
- Inadequate or unsafe modifications to plant & equipment

OWNER Debbie Terelinck  
 CREATED 7/1/2019 2:46:30 PM

LIKELIHOOD Likely  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00041  
 Undertake WHS Audit

SIGNOFF(S): Janice Byers  
 DUE DATE: 01 Sep 2025  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00042  
 Provide a progress update on the implementation of the recommendations from the 2023 WHS Audit to every second meeting of the Audit & Risk Committee

SIGNOFF(S): Janice Byers  
 DUE DATE: 30 Jun 2024  
 FREQUENCY: The last Day of every 4 months

TREATMENT MC00043  
 WHS Committee Meeting Regularly

SIGNOFF(S): Janice Byers  
 Joanne Griffiths  
 DUE DATE: 31 Mar 2024  
 FREQUENCY: The last Day of every 3 months

TREATMENT MC00044  
 Toolbox meetings occurring and discussing safety (attach minutes/notes to sign off)

SIGNOFF(S): Paul Devcic  
 DUE DATE: 29 Feb 2024  
 FREQUENCY: The last Day of every month

TREATMENT MC00046  
 WHS Policy Framework in place and reviewed

SIGNOFF(S): Janice Byers  
 DUE DATE: 31 Aug 2024  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00095  
 Undertake Workplace Safety Inspections - Undertake Inspection OSH inspections undertaken for each site.

**CHANGE(S) PENDING**  
 SIGNOFF(S): Britt Hadlow  
 DUE DATE: 29 Feb 2024  
 FREQUENCY: The last Day of every month

<b>RESIDUAL</b> <b>4.8</b> MODERATE	CORPORATE SERVICES, FINANCIAL - OPERATIONAL, FINANCIAL - STRATEGIC	TREATMENT MC00111 Fraud and Corruption Control Plan in place	SIGNOFF(S): Britt Hadlow Debbie Terelinck
	<b>External Theft &amp; Fraud (inc. Cyber Crime)</b> Loss of funds, assets, data or unauthorised access, (whether attempts 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 (no deceit)	DUE DATE: 31 Jul 2025 FREQUENCY: The last Weekday of every 24 months	TREATMENT MC00156 Incorrect bank details for payments - 100% of system changed reported on at end of month and signed off by Senior Finance Officer.
<b>INHERENT</b> <b>16.0</b> R00020	OWNER Colin Young CREATED 7/1/2019 2:32:52 PM LIKELIHOOD Likely SEVERITY Major CONTROL EFFECTIVENESS Strong		

<b>RESIDUAL</b> <b>4.8</b> MODERATE	AMP - TRANSPORT, HEALTH & SAFETY	TREATMENT MC00088 Transport Assets to be routinely inspected every 3 years (includes sealed and unsealed roads, kerbs and table drains. Excludes footpaths and piped drainage network)	SIGNOFF(S): Paul Devcic DUE DATE: 31 Jan 2027 FREQUENCY: The last Day of every 36 months
	<b>Transport Assets not routinely inspected</b> No formal safety & maintenance inspection procedures exist	TREATMENT MC00096 Safety inspections carried out in response to Customer Service Requests by members of the public and Shire staff.	SIGNOFF(S): Paul Devcic DUE DATE: 29 Feb 2024 FREQUENCY: The last Day of every 3 months
<b>INHERENT</b> <b>16.0</b> R00036	OWNER Paul Devcic CREATED 7/15/2019 4:35:25 PM LIKELIHOOD Likely SEVERITY Major CONTROL EFFECTIVENESS Strong		

RESIDUAL  
**4.5**  
 MODERATE

INHERENT  
**15.0**

R00017

DEVELOPMENT SERVICES, HEALTH & SAFETY - PUBLIC

**Inadequate Organisation and Community Emergency Management**

Failure to adequately conduct Prevention, Preparation, Response and Recovery (PPRR) in the organisation structure and community elements, inclusive of the management of all emergencies. This includes;

- Lack of (or inadequate) emergency response plans.
- Lack of training to 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

(References: AS 3745; AS 1851; AIIMS 4 Management Principles)

OWNER Chadd Hunt

CREATED 6/19/2019 8:51:12 AM

LIKELIHOOD Possible

SEVERITY Extreme

CONTROL EFFECTIVENESS Strong

TREATMENT MC00028

Current Local Emergency Management Arrangements & Recovery Plan

SIGNOFF(S):

Alex Espey  
 Chadd Hunt

DUE DATE:

01 Nov 2024

FREQUENCY:

The first Day of every 24 months

TREATMENT MC00029

Run annual emergency management exercise

SIGNOFF(S):

Alex Espey  
 Chadd Hunt

DUE DATE:

01 Nov 2024

FREQUENCY:

The first Day of every 12 months

TREATMENT MC00030

Bush fire Risk Management Plan in Place

SIGNOFF(S):

Alex Espey  
 Chadd Hunt

DUE DATE:

01 Sep 2024

FREQUENCY:

The first Day of every 12 months

TREATMENT MC00031

Fuel Loads risk register in place

SIGNOFF(S):

Alex Espey  
 Chadd Hunt

DUE DATE:

30 Sep 2024

FREQUENCY:

The last Day of every 12 months

TREATMENT MC00162

Establishment of a 'functional' Local Emergency Management Committee, which meets quarterly

SIGNOFF(S):

Alex Espey

DUE DATE:

01 Mar 2024

FREQUENCY:

Once



RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00002

CHIEF EXECUTIVES OFFICE, STRATEGIC - ORGANISATIONAL

**Inappropriate Organisational Structure**  
 Unable to achieve organisational objectives as the Organisation is not structured appropriately

OWNER Debbie Terelinck  
 CREATED 4/9/2019 11:32:51 AM  
 LIKELIHOOD Likely  
 SEVERITY Medium  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00003

Review Strategic Community Plan every two years (desktop) and four years (major). Reviews to coincide with new Council being elected

SIGNOFF(S): Debbie Terelinck  
 DUE DATE: 01 Feb 2025  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00004

Review Corporate Business Plan annually to ensure reflects strategic community plan

SIGNOFF(S): Debbie Terelinck  
 DUE DATE: 03 Feb 2025  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00005

Review Human Resource Plan to ensure it is reflective of strategic community plan

SIGNOFF(S): Janice Byers  
 DUE DATE: 31 May 2024  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00006

Corporate Business Plan clearly articulates how organisational objectives will be achieved

SIGNOFF(S): Debbie Terelinck  
 DUE DATE: 30 Jun 2024  
 FREQUENCY: The last Day of every 12 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00031

GENERAL, REPUTATION - COMMUNITY

**Providing inaccurate advice / information to stakeholders**  
 Incomplete, inadequate or inaccuracies in advisory activities to customers or internal staff. This could be caused by using unqualified, or inexperienced staff, however it does not include instances relating to Misconduct.

Examples include;

- incorrect planning, development or building advice,
- incorrect health or environmental advice
- inconsistent messages or responses from Customer Service Staff
- any advice that is not consistent with legislative requirements, local laws or policies.

OWNER Debbie Terelinck  
 CREATED 7/2/2019 1:27:54 PM  
 LIKELIHOOD Likely  
 SEVERITY Medium  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00007

Manage Inductions - Conduct New Employee Induction  
 All new employees are provided with adequate inductions

**CHANGE(S) PENDING**  
 SIGNOFF(S): Janice Byers  
 DUE DATE: 23 Feb 2024  
 FREQUENCY: Fri every week

TREATMENT MC00013

Manage Customer Requests - Receive Request  
 Ensuring that the organisation captures and responds appropriately to community and internal requests for works or services

**CHANGE(S) PENDING**  
 SIGNOFF(S): Debbie Terelinck  
 Britt Hadlow  
 DUE DATE:  
 FREQUENCY: Once

TREATMENT MC00051

Manage Staff Training - Identify Training Needs  
 Ensure staff training needs are identified and met

**CHANGE(S) PENDING**  
 SIGNOFF(S): Janice Byers  
 DUE DATE: 31 Oct 2024  
 FREQUENCY: The last Day of every 12 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00033

GENERAL, REPUTATION - COMMUNITY

**Errors, Omissions & Delays**

Errors, omissions or delays in operational activities as a result of unintentional errors or failure to follow due process or potentially inadequate resources. This includes instances of;

- Human errors, incorrect or incomplete processing
- Inaccurate recording, maintenance, testing and / or reconciliation of data.
- Errors or inadequacies in model methodology, design, calculation or implementation of models.

This may result in incomplete or inaccurate information. Consequences include;

- Inaccurate data being used for management decision making and reporting.
- Delays in service to customers
- Inaccurate data provided to customers

This excludes process failures caused by inadequate / incomplete procedural documentation - refer "Inadequate Document Management Processes".

OWNER Debbie Terelinck  
 CREATED 7/2/2019 1:56:01 PM

LIKELIHOOD Likely  
 SEVERITY Medium  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00002

Audit of monthly compliance calendar

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 14 Mar 2024  
 FREQUENCY: 14th day of every month

TREATMENT MC00007

Manage Inductions - Conduct New Employee Induction  
 All new employees are provided with adequate inductions

**CHANGE(S) PENDING**  
 SIGNOFF(S): Janice Byers  
 DUE DATE: 23 Feb 2024  
 FREQUENCY: Fri every week

TREATMENT MC00009

Monthly random internal audit of five (5) purchases to be performed to ensure compliance with purchasing requirements.

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 14 Mar 2024  
 FREQUENCY: 14th day of every month

TREATMENT MC00083

Manage Inductions - Conduct New Employee Induction  
 Ensure staff are inducted into the organisation

**CHANGE(S) PENDING**  
 SIGNOFF(S): Janice Byers  
 DUE DATE: 01 Oct 2024  
 FREQUENCY: The first Day of every 12 months

TREATMENT MC00084

Have critical processes mapped to assist staff eliminate errors, omissions and delays (wastage)

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 01 Dec 2024  
 FREQUENCY: The first Day of every 12 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00034

COMMUNITY SERVICES, COMPLIANCE - POLICY, REPUTATION - COMMUNITY

**Ineffective Management of Facilities / Venues / Events**

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

- Inadequate procedures in place to manage the quality or availability.
- Ineffective signage
- Booking issues
- Financial interactions with hirers / users
- Oversight / provision of peripheral services (eg. cleaning / maintenance)

OWNER Janice Byers

CREATED 7/2/2019 2:05:05 PM

LIKELIHOOD Likely

SEVERITY Medium

CONTROL EFFECTIVENESS Strong

TREATMENT MC00085

Manage Facilities & Bookings - Receive enquiry and determine which Department is responsible for administering the booking. Process for managing bookings to ensure no duplication

**CHANGE(S) PENDING**

SIGNOFF(S):

Janice Byers

DUE DATE:

01 Sep 2024

FREQUENCY:

The first Day of every 12 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00035

CHIEF EXECUTIVES OFFICE, COMPLIANCE - LEGISLATIVE, REPUTATION - COMMUNITY, REPUTATION - INDUSTRY

**Misconduct/Fraud**

Intentional activities (including fraud) in excess of authority granted to an employee, 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
- Collusion between Internal & External parties

This does not include instances where it was not an intentional breach - refer Errors, Omissions or delays in transaction processing, or Inaccurate Advice.

OWNER Debbie Terelinck  
 CREATED 7/2/2019 2:09:25 PM

LIKELIHOOD Possible  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00007

Manage Inductions - Conduct New Employee Induction  
 All new employees are provided with adequate inductions

**CHANGE(S) PENDING**

SIGNOFF(S): Janice Byers  
 DUE DATE: 23 Feb 2024  
 FREQUENCY: Fri every week

TREATMENT MC00059

Induction & Training provided to elected members

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 30 Nov 2025  
 FREQUENCY: The last Day of every 24 months

TREATMENT MC00087

Manage Procurement - Identify need for procurement  
 Process minimises opportunity for misconduct

SIGNOFF(S): Colin Young  
 Kristy Hopkins  
 DUE DATE: 01 Oct 2024  
 FREQUENCY: The first Day of every 12 months

TREATMENT MC00102

Fraud Control Plan in place (refer OAG 2019/20 Report 5 - Fraud Prevention)

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 28 Feb 2025  
 FREQUENCY: The last Day of every 24 months

TREATMENT MC00158

Review Employee IT Security Access on a quarterly basis

SIGNOFF(S): Kunal Sarma  
 DUE DATE: 01 May 2024  
 FREQUENCY: The first Weekday of every 3 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00037

AMP - TRANSPORT, ENVIRONMENTAL - BUILT  
**Asset Inventories inaccurate**  
 Asset inventories are not up to date and therefore inaccurate resulting in poor decision making  
 OWNER Paul Devcic  
 CREATED 7/15/2019 4:40:29 PM  
 LIKELIHOOD Likely  
 SEVERITY Medium  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00018  
 Up to date and accurate transport management plan in place

SIGNOFF(S): Paul Devcic  
 Colin Young  
 DUE DATE: 01 Feb 2025  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00019  
 Up to date and accurate building asset management plan in place

SIGNOFF(S): Paul Devcic  
 Colin Young  
 Shane Moorhead  
 DUE DATE: 01 Jun 2025  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00020  
 Up to date and accurate parks & reserves asset management plan in place

SIGNOFF(S): Paul Devcic  
 Colin Young  
 DUE DATE: 01 Sep 2025  
 FREQUENCY: The first Day of every 24 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00038

AMP - TRANSPORT, ENVIRONMENTAL - BUILT  
**Inaccurate Asset Valuations**  
 Valuations are carried out, however inaccurate resulting in impact on Council decision making and financial ratios  
 OWNER Colin Young  
 CREATED 7/15/2019 4:47:14 PM  
 LIKELIHOOD Possible  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00090  
 Revaluations of Council Building Assets (Fair Value)

SIGNOFF(S): Colin Young  
 DUE DATE: 01 Feb 2027  
 FREQUENCY: The first Day of every 60 months

TREATMENT MC00091  
 Revaluations of Council Transport Infrastructure Assets (Fair Value)

SIGNOFF(S): Colin Young  
 DUE DATE: 30 Jun 2028  
 FREQUENCY: The last Day of every 60 months

TREATMENT MC00092  
 Revaluation of Council Plant & Equipment

SIGNOFF(S): Colin Young  
 DUE DATE: 01 Oct 2025  
 FREQUENCY: The first Day of every 60 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00041

AMP - BUILDINGS, ENVIRONMENTAL - BUILT, HEALTH & SAFETY

**Condition of buildings is unknown**  
 Council is unclear as to the condition of its building assets and therefore unable to make informed decisions, resulting in poor building condition and building safety concerns

OWNER Paul Devcic  
 CREATED 7/16/2019 11:26:43 AM  
 LIKELIHOOD Possible  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00019

Up to date and accurate building asset management plan in place

SIGNOFF(S): Paul Devcic  
 Colin Young  
 Shane Moorhead  
 DUE DATE: 01 Jun 2025  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00090

Revaluations of Council Building Assets (Fair Value)

SIGNOFF(S): Colin Young  
 DUE DATE: 01 Feb 2027  
 FREQUENCY: The first Day of every 60 months

TREATMENT MC00093

Develop and maintain medium term building maintenance program to ensure future costs are understood

SIGNOFF(S): Shane Moorhead  
 DUE DATE: 01 Nov 2024  
 FREQUENCY: The first Day of every 12 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00042

AMP - BUILDINGS, FINANCIAL - OPERATIONAL

**Future financial requirements for buildings unknown**  
 Council fails to understand and plan for future building maintenance / expansion requirements

OWNER Debbie Terelinck  
 CREATED 7/16/2019 11:28:36 AM  
 LIKELIHOOD Possible  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00019

Up to date and accurate building asset management plan in place

SIGNOFF(S): Paul Devcic  
 Colin Young  
 Shane Moorhead  
 DUE DATE: 01 Jun 2025  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00021

Long Term Financial Plan aligned to asset management plans

SIGNOFF(S): Colin Young  
 DUE DATE: 01 Dec 2024  
 FREQUENCY: The first Day of every 12 months

TREATMENT MC00034

Long Term Financial Plan in Place

SIGNOFF(S): Colin Young  
 DUE DATE: 01 Jul 2024  
 FREQUENCY: The first Day of every 12 months

TREATMENT MC00035

Annual Budget adopted and aligned with long term financial plan

SIGNOFF(S): Colin Young  
 DUE DATE: 31 Jul 2024  
 FREQUENCY: The last Day of every 12 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00044

AMP - BUILDINGS, FINANCIAL - OPERATIONAL

**Maintenance not planned**  
 Planned Maintenance & operation schedules, with budgets, do not exist, resulting in long term financial costs and asset deterioration

OWNER Paul Devcic  
 CREATED 7/16/2019 11:36:36 AM

LIKELIHOOD Possible  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00019  
 Up to date and accurate building asset management plan in place

TREATMENT MC00035  
 Annual Budget adopted and aligned with long term financial plan

SIGNOFF(S): Paul Devcic  
 Colin Young  
 Shane Moorhead

DUE DATE: 01 Jun 2025

FREQUENCY: The first Day of every 24 months

SIGNOFF(S): Colin Young

DUE DATE: 31 Jul 2024

FREQUENCY: The last Day of every 12 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00045

AMP - BUILDINGS, FINANCIAL - STRATEGIC

**Financial sustainability performance indicators not met**  
 The asset class does not meet the established financial performance parameters, resulting in an indication of asset sustainability

OWNER Debbie Terelinck  
 CREATED 7/16/2019 11:38:59 AM

LIKELIHOOD Likely  
 SEVERITY Medium  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00019  
 Up to date and accurate building asset management plan in place

TREATMENT MC00021  
 Long Term Financial Plan aligned to asset management plans

TREATMENT MC00090  
 Revaluations of Council Building Assets (Fair Value)

TREATMENT MC00091  
 Revaluations of Council Transport Infrastructure Assets (Fair Value)

SIGNOFF(S): Paul Devcic  
 Colin Young  
 Shane Moorhead

DUE DATE: 01 Jun 2025

FREQUENCY: The first Day of every 24 months

SIGNOFF(S): Colin Young

DUE DATE: 01 Dec 2024

FREQUENCY: The first Day of every 12 months

SIGNOFF(S): Colin Young

DUE DATE: 01 Feb 2027

FREQUENCY: The first Day of every 60 months

SIGNOFF(S): Colin Young

DUE DATE: 30 Jun 2028

FREQUENCY: The last Day of every 60 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00050

MAJOR PROJECTS, COMPLIANCE - LEGISLATIVE

**Aquatic Facility - Inadequate Construction Contract**

Aquatic Facility Project construction contract not adequate which exposes Council to contract risk through the construction phase

OWNER Debbie Terelinck  
 CREATED 9/14/2020 2:27:38 PM  
 LIKELIHOOD Possible  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Strong

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00052

MAJOR PROJECTS, COMPLIANCE - LEGISLATIVE, FINANCIAL - STRATEGIC

**Sale of 239 Yilgarn Avenue - Contract Requirements not satisfied**

239 Yilgarn Avenue sale of land does not proceed as a result of non compliance with contract requirements

OWNER Debbie Terelinck  
 CREATED 9/14/2020 2:31:42 PM  
 LIKELIHOOD Possible  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00094

The Buyer shall submit a Development Application within six calendar months of the contract date

SIGNOFF(S): Debbie Terelinck

DUE DATE:

FREQUENCY: Once



RESIDUAL  
**3.0**  
 LOW

INHERENT  
**10.0**

R00054

ENGINEERING SERVICES, SERVICE INTERRUPTION

**PPOSAMP Service Levels Interruption**  
 Identify and budget for assets reaching end of life there will likely be service interruptions with delayed replacement timeframes.

OWNER Paul Devcic  
 CREATED 12/2/2020 9:37:11 AM

LIKELIHOOD Almost Certain  
 SEVERITY Minor  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00106  
 Review Asset Management plan every two years.

SIGNOFF(S): Keith Boase  
 DUE DATE: 01 Oct 2024  
 FREQUENCY: The first Day of every 24 months

TREATMENT MC00107  
 Ensure asset management plan financial requirements are included in long term financial plan

SIGNOFF(S): Keith Boase  
 DUE DATE: 31 Jan 2025  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00108  
 Ensure asset management plan financial requirements are included in annual budget

SIGNOFF(S): Keith Boase  
 DUE DATE: 01 Jun 2024  
 FREQUENCY: The first Day of every 12 months

RESIDUAL  
**2.7**  
 LOW

INHERENT  
**9.0**

R00057

GENERAL, COMPLIANCE - POLICY

**Up to date Council Policy**  
 Failure to review policies bi-annually.

OWNER Debbie Terelinck  
 CREATED 1/4/2023 3:39:02 PM

LIKELIHOOD Possible  
 SEVERITY Medium  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00115 Review Governance Policies.	SIGNOFF(S): DUE DATE: FREQUENCY:	Debbie Terelinck Britt Hadlow Janice Byers 30 Jun 2025 30th day of every 24 months
TREATMENT MC00116 Review Community Support Policies.	SIGNOFF(S): DUE DATE: FREQUENCY:	Janice Byers Jaime Hawkins Louisa Dyer Britt Hadlow 30 Jun 2024 30th day of every 24 months
TREATMENT MC00117 Review Finance / Accounting policies.	SIGNOFF(S): DUE DATE: FREQUENCY:	Colin Young Kudzai Matanga Kristy Hopkins 30 Jun 2025 30th day of every 24 months
TREATMENT MC00118 Review Works policies.	SIGNOFF(S): DUE DATE: FREQUENCY:	Paul Devcic Helen Singh Santo Leotta Keith Boase 30 Jun 2025 30th day of every 24 months
TREATMENT MC00119 Review Health Policies.	SIGNOFF(S): DUE DATE: FREQUENCY:	Gordon Tester Chadd Hunt 30 Jun 2025 30th day of every 24 months
TREATMENT MC00120 Review Planning Policies	SIGNOFF(S): DUE DATE: FREQUENCY:	Chadd Hunt 30 Jun 2025 30th day of every 24 months
TREATMENT MC00121 Review Building Policies.	SIGNOFF(S): DUE DATE: FREQUENCY:	Gordon Tester Chadd Hunt 30 Jun 2025 30th day of every 24 months
TREATMENT MC00122 Review Administration Policies.	SIGNOFF(S): DUE DATE: FREQUENCY:	Britt Hadlow Debbie Terelinck Alex Espey Chadd Hunt 30 Jun 2025 30th day of every 24 months

RESIDUAL  
**2.7**  
 LOW

INHERENT  
**9.0**

R00024

CHIEF EXECUTIVES OFFICE, COMPLIANCE - POLICY, FINANCIAL - OPERATIONAL, HEALTH & SAFETY - OCCUPATIONAL

**Inadequate Project Management**

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

OWNER Debbie Terelinck  
 CREATED 7/1/2019 3:20:45 PM

LIKELIHOOD Possible  
 SEVERITY Medium  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00053

Project management framework in place, providing parameters for staff to operate within

SIGNOFF(S): Debbie Terelinck  
 DUE DATE: 31 Jul 2024  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00054

Prepare Elected Members Monthly Report - Publish Monthly Report  
 Major Project status reporting to Council (through monthly elected member report)

**CHANGE(S) PENDING**  
 SIGNOFF(S): Tamika Van Beek  
 DUE DATE: 15 Feb 2024  
 FREQUENCY: 15th day of every month

TREATMENT MC00055

Internal audit of project and major project (as defined by corporate business plan) management framework compliance.

SIGNOFF(S): Debbie Terelinck  
 DUE DATE: 31 May 2024  
 FREQUENCY: The last Day of every 12 months

RESIDUAL  
**2.7**  
 LOW

INHERENT  
**9.0**

R00025

CHIEF EXECUTIVES OFFICE, COMMUNITY SERVICES, CORPORATE SERVICES, DEVELOPMENT SERVICES, ENGINEERING SERVICES, FINANCIAL - OPERATIONAL, HEALTH & SAFETY - OCCUPATIONAL, SERVICE INTERRUPTION

**Inadequate Supplier / Contract Management**

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
- Vendor sustainability

It does not include failures in the tender process; refer "Inadequate Procurement, Disposal or Tender Practices".

OWNER Colin Young  
 CREATED 7/1/2019 3:54:58 PM

LIKELIHOOD Possible  
 SEVERITY Medium  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00160

Have an external legal review of standard contract documents every three years.

SIGNOFF(S): Kristy Hopkins  
 DUE DATE: 31 Jul 2024  
 FREQUENCY: The first Day of every 36 months

TREATMENT MC00161

Internal audit of one major contract for compliance every 12 months.

SIGNOFF(S): Kristy Hopkins  
 Britt Hadlow  
 DUE DATE: 31 Aug 2024  
 FREQUENCY: The last Day of every 12 months

RESIDUAL  
**2.7**  
 LOW

INHERENT  
**9.0**

R00003

CHIEF EXECUTIVES OFFICE, STRATEGIC - ORGANISATIONAL

**Ineffective People Management / Employment Practices**

Failure to effectively manage and lead human resources (full/part time, casuals, temporary and volunteers). This includes not having an effective Human Resources Framework in addition to not having appropriately qualified or experienced people in the right roles or not having sufficient staff numbers to achieve objectives. Other areas in this risk theme to consider are;

- Breaching employee regulations (excluding OH&S).
- Discrimination, Harassment & Bullying in the workplace.
- Poor employee wellbeing (causing stress)
- Key person dependencies without effective succession planning in place.
- Induction issues.
- Terminations (including any tribunal issues).
- Industrial activity.

Care should be taken when considering insufficient staff numbers as the underlying issue could be a process inefficiency.

OWNER Debbie Terelinck  
 CREATED 5/6/2019 1:23:01 PM

LIKELIHOOD Possible  
 SEVERITY Medium  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00007

Manage Inductions - Conduct New Employee Induction  
 All new employees are provided with adequate inductions

**CHANGE(S) PENDING**

SIGNOFF(S): Janice Byers  
 DUE DATE: 23 Feb 2024  
 FREQUENCY: Fri every week

TREATMENT MC00049

100% of annual performance reviews undertaken

SIGNOFF(S): Janice Byers  
 DUE DATE: 31 Dec 2024  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00050

Manage Employee Termination - Receive notification  
 Ensuring that employee terminations are managed appropriately and equitably to minimise risk of further action

SIGNOFF(S): Janice Byers  
 DUE DATE: 01 Apr 2024  
 FREQUENCY: The first Day of every 3 months

TREATMENT MC00051

Manage Staff Training - Identify Training Needs  
 Ensure staff training needs are identified and met

**CHANGE(S) PENDING**

SIGNOFF(S): Janice Byers  
 DUE DATE: 31 Oct 2024  
 FREQUENCY: The last Day of every 12 months

TREATMENT MC00052

Manage Employee Discipline / Misconduct - Receive Notification / Identify Misconduct  
 Ensure any / all staff misconduct in managed effectively and consistently

**CHANGE(S) PENDING**

SIGNOFF(S): Debbie Terelinck  
 Colin Young  
 Paul Devcic  
 Chadd Hunt  
 DUE DATE: 01 Apr 2024  
 FREQUENCY: The first Day of every 3 months

RESIDUAL  
**2.4**  
 LOW

INHERENT  
**8.0**

R00014

GENERAL, SERVICE INTERRUPTION

**Business Interruption**

A local physical event causing the inability to continue business activities and provide services to the community. This may or may not result in Business Continuity Plans to be invoked.

This does not include disruptions due to:

- IT Systems or infrastructure related failures should be captured under "Failure of IT Systems and Infrastructure".
- Contractor / Supplier issues should be captured under "Inadequate Supplier / Contract Management".
- People issues should be captured under "Inappropriate People Management".

OWNER Debbie Terelinck

CREATED 5/24/2019 2:43:56 PM

LIKELIHOOD Unlikely

SEVERITY Major

CONTROL EFFECTIVENESS Strong

TREATMENT MC00022

Business Continuity Plan in place and up to date

SIGNOFF(S):

Britt Hadlow  
 Debbie Terelinck

DUE DATE:

01 Nov 2024

FREQUENCY:

The first Day of every 48 months

## **6.7 Risk Register Review - Property & Reputation**

<b>File Reference:</b>	8.2.7.1
<b>Reporting Officer:</b>	Britt Hadlow (Governance Coordinator)
<b>Responsible Officer:</b>	Debbie Terelinck (Chief Executive Officer)
<b>Officer Declaration of Interest:</b>	Nil
<b>Voting Requirement:</b>	Simple Majority
<b>Press release to be issued:</b>	No

### **BRIEF**

For the Committee to endorse the review of the “Property” and “Reputation” risk section of the Shire of Northam Risk Register for consideration by Council.

### **ATTACHMENTS**

1. Risk Register - Reputation [**6.7.1** - 5 pages]

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### **A. BACKGROUND / DETAILS**

The Shire of Northam has an organisation-wide risk register that has been developed over a long period of time. Council has been advised previously that the management of risk is an area which has been under-developed within the organisation and an area which was to receive focus to ensure awareness of the identified risks and treatments strategies in place.

To assist in the effective management of risk, the Shire is using the Promapp system which allows for recording of organisational risks and the tracking of the associated treatment actions.

The Shire's Risk Register is categorised into the following sections, with the intent to review one section at each Audit and Risk Committee meeting (red indicates review completed, bold is the review in this agenda item):

1. Compliance – Review Completed
  - a. Legislation
  - b. Policy
2. Environmental – Review Completed
  - a. Built
  - b. Natural
3. Financial
  - a. Operating
  - b. Strategic

- 4. Health & Safety
  - a. General
  - b. Occupational
  - c. Bush Fire Volunteers
  - d. Public
- 5. Property – NIL RISKS
  - a. Damage
  - b. Liability
- 6. Reputation
  - a. Community
  - b. Industry
- 7. Strategic
  - a. Community
  - b. Organisational

**B. CONSIDERATIONS**

**B.1 Strategic Community / Corporate Business Plan**

Performance Area: Performance. Outcome 12: Excellence in organisational performance and customer service.

Objective 12.1: Maintain a high standard of corporate governance and financial management.

Priority Action: Nil.

**B.2 Financial / Resource Implications**

Each of the mitigation actions has been incorporated into annual delivery plans with appropriate budgets and time allocations to ensure achievable.

**B.3 Legislative Compliance**

AS/NZS ISO 31000:2018

**B.4 Policy Implications**

Policy G1.11 – Risk Management

**B.5 Stakeholder Engagement / Consultation**

Appropriate staff have been included in the review of the register.

**B.6 Risk Implications**

Refer to Risk Matrix [here](#).

<b>Risk Category</b>	<b>Description</b>	<b>Rating (likelihood x consequence)</b>	<b>Mitigation Action</b>
Financial	Nil.		
Health & Safety	Nil.		

Reputation	Negative community perception due to lack of adequate risk management practices within the Shire of Northam	Minor(2) x Possible(3) = Moderate(6)	Per recommendation within this report
Service Interruption	Nil.		
Compliance	Nil.		
Property	Nil.		
Environment	Nil.		

**B.7 Natural Environment Considerations**

Nil.

**C. OFFICER'S COMMENT**

The next category due for review at this meeting is "Property" however, this category does not have any risks or treatments associated with it.

The next category is "Reputation". This category is split into community and industry. Officers have made recommendations after reviewing the respective risks and treatments.

<b>Community</b>		
<b>Risk</b>	<b>Treatment</b>	<b>Recommendation</b>
<u>R00018</u> Inadequate engagement with Community / Stakeholders / Elected Member	MC00032 Current Community Engagement Plan in Place	Change the frequency of sign off from 112 months to 12 months (noting this may be a typographic error).
<u>R00008</u> Not meeting community expectation	MC00004 Review Corporate Business Plan annually to ensure reflects strategic community plan	Change the frequency of sign off to 12 months to match the treatment.
	MC00013 Manage Customer Requests - Receive request ensuring that the organisation captures and	Change treatment to: "Conduct random audit of 10 ICSs per month to ensure compliance with the relevant



	responds appropriately to community and internal requests for works or service	management process.”
<u>R00031</u> Providing inaccurate advice / information to stakeholder	MC00007 Manage Inductions - Conduct New Employee Induction All new employees are provided with adequate inductions.	Remove from this section and keep in “Not meeting community expectation”
	MC00013 Manage Customer Requests - Receive request ensuring that the organisation captures and responds appropriately to community and internal requests for works or services,	Remove from this section and keep in “Not meeting community expectation”
	MC00051 Manage Staff Training - Identify training needs ensure staff training needs are identified and met.	Nil changes required.
<u>R00033</u> Errors, Omissions & Delays	MC00002 Audit of monthly compliance calendar.	Nil changes required.
	MC00007 Manage Inductions - Conduct new employee induction all new employees are provided with adequate inductions.	Remove from this section and keep in “Misconduct/Fraud”.
	MC00009 Monthly random internal audit of five (5) purchases to be performed to ensure compliance with purchasing requirements.	Change treatment to reflect current audit practices:  “Conduct random audit of 10 purchases per month to be performed to ensure compliance with the relevant management process.”

	<p>MC00083                  Manage Inductions - Conduct new employee induction ensure staff are inducted into the organisation.</p>	<p>Remove treatment due to being a duplication of MC00007.</p>
	<p>MC00084                  Have critical processes mapped to assist staff eliminate errors, omissions and delays (wastage).</p>	<p>Remove treatment as current critical processes have been mapped and are accessible to all staff. The need for additional critical processes will be managed as required.</p>
<p><u>R00034</u>                  Ineffective Management of Facilities / Venues / Events                   Remove this risk.</p>	<p>MC00085                  Manage Facilities &amp; Bookings - Receive enquiry and determine which Department is responsible for administering the booking. Process for managing bookings to ensure no Duplication.</p>	<p>Remove.                   Process for managing facilities and bookings has been created and is prompted for review on a 6 monthly basis.                   Treatment is no longer required to be managed through risk dashboard.</p>

<b>Industry</b>		
<b>Risk</b>	<b>Treatment</b>	<b>Recommendation</b>
<p><u>R00035</u>                  Misconduct/Fraud</p>	<p>MC00007                  Manage Inductions - Conduct new employee induction all new employees are provided with adequate inductions</p>	<p>Nil changes required.</p>
	<p>MC00059                  Induction &amp; Training provided to elected members</p>	<p>Nil changes required.</p>
	<p>MC00087                  Manage Procurement - Identify need for procurement process</p>	<p>Remove treatment as there is a Council Procurement Policy in place that is</p>

	minimises opportunity for misconduct	regularly reviewed as well as the process being mapped.
	MC00102 Fraud Control Plan in place (refer OAG 2019/20 Report 5 - Fraud Prevention)	Change treatment to: Conduct review of Fraud Control Plan every 2 years (refer OAG 2019/20 Report 5 - Fraud Prevention).
	MC00158 Review Employee IT Security Access on a quarterly basis	Nil changes required.

**RECOMMENDATION**

**That the Audit & Risk Management Committee endorses the following recommendation being presented to Council:**

- 1. That Council approves the category “Reputation” risk register as presented with the following amendments:**
  - a. MC00032 - Change the frequency of sign off from 112 months to 12 months.**
  - b. MC00004 - Change the frequency of sign off to 12 months to match the treatment.**
  - c. MC00013 - Change treatment to: “Conduct random audit of 10 ICSs per month to ensure compliance with the relevant management process.”**
  - d. MC00007 - Remove from section R00031.**
  - e. MC00013 - Remove from section R00031.**
  - f. MC00007 - Remove from section R00033.**
  - g. MC00009 – Change treatment to “Conduct random audit of 10 purchases per month to be performed to ensure compliance with the relevant management process.”**
  - h. MC00083 - Remove treatment.**
  - i. MC00084 - Remove treatment.**
  - j. R00034 – Remove Risk and associated treatment MC00085.**
  - k. MC00087 – Remove treatment.**
  - l. MC00102 - Change treatment to “Conduct review of Fraud Control Plan every 2 years (refer OAG 2019/20 Report 5 - Fraud Prevention)”.**



**Risk Register**

Filter: Classification(s): Reputation - Community

<p>RESIDUAL <b>7.2</b> MODERATE</p>	<p>CHIEF EXECUTIVES OFFICE, REPUTATION - COMMUNITY  <b>Inadequate engagement with Community / Stakeholders / Elected Members</b>                  Failure to maintain effective working relationships with the Community (including Local Media), Stakeholders, Key Private Sector Companies, Government Agencies and / or Elected Members. This invariably includes activities where communication, feedback and / or consultation is required and where it is in the best interests to do so.                  OWNER Debbie Terelinck                  CREATED 6/19/2019 9:07:22 AM                  LIKELIHOOD Possible                  SEVERITY Medium                  CONTROL EFFECTIVENESS Adequate</p>	<p>TREATMENT MC00032                  Current Community Engagement Plan in Place</p>	<p>SIGNOFF(S): Debbie Terelinck                  DUE DATE: 01 Jan 2029                  FREQUENCY: The first Day of every 112 months</p>
<p>INHERENT <b>9.0</b></p>	<p>R00018</p>		
<p>RESIDUAL <b>4.8</b> MODERATE</p>	<p>CHIEF EXECUTIVES OFFICE, REPUTATION - COMMUNITY  <b>Not meeting community expectations</b>                  Community service expectations are not as a result of a failure to provide expected levels of service, events and benefit to the community. This includes where precedents have set Community perceptions or where services are generally expected.                  OWNER Debbie Terelinck                  CREATED 5/6/2019 1:56:25 PM                  LIKELIHOOD Likely                  SEVERITY Major                  CONTROL EFFECTIVENESS Strong</p>	<p>TREATMENT MC00004                  Review Corporate Business Plan annually to ensure reflects strategic community plan</p>	<p>SIGNOFF(S): Debbie Terelinck                  DUE DATE: 03 Feb 2025                  FREQUENCY: The first Day of every 24 months</p>
<p>INHERENT <b>16.0</b></p>	<p>R00008</p>	<p>TREATMENT MC00013                  Manage Customer Requests - Receive Request Ensuring that the organisation captures and responds appropriately to community and internal requests for works or services</p>	<p><b>CHANGE(S) PENDING</b>                  SIGNOFF(S): Debbie Terelinck                  Britt Hadlow                  DUE DATE:                  FREQUENCY: Once</p>

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00031

GENERAL, REPUTATION - COMMUNITY

**Providing inaccurate advice / information to stakeholders**

Incomplete, inadequate or inaccuracies in advisory activities to customers or internal staff. This could be caused by using unqualified, or inexperienced staff, however it does not include instances relating to Misconduct.

Examples include;

- incorrect planning, development or building advice,
- incorrect health or environmental advice
- inconsistent messages or responses from Customer Service Staff
- any advice that is not consistent with legislative requirements, local laws or policies.

OWNER Debbie Terelinc

CREATED 7/2/2019 1:27:54 PM

LIKELIHOOD Likely

SEVERITY Medium

CONTROL EFFECTIVENESS Strong

TREATMENT MC00007

Manage Inductions - Conduct New Employee Induction  
 All new employees are provided with adequate inductions

**CHANGE(S) PENDING**

SIGNOFF(S): Janice Byers

DUE DATE: 23 Feb 2024

FREQUENCY: Fri every week

TREATMENT MC00013

Manage Customer Requests - Receive Request  
 Ensuring that the organisation captures and responds appropriately to community and internal requests for works or services

**CHANGE(S) PENDING**

SIGNOFF(S): Debbie Terelinc  
 Britt Hadlow

DUE DATE:

FREQUENCY: Once

TREATMENT MC00051

Manage Staff Training - Identify Training Needs  
 Ensure staff training needs are identified and met

**CHANGE(S) PENDING**

SIGNOFF(S): Janice Byers

DUE DATE: 31 Oct 2024

FREQUENCY: The last Day of every 12 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00033

GENERAL, REPUTATION - COMMUNITY

**Errors, Omissions & Delays**

Errors, omissions or delays in operational activities as a result of unintentional errors or failure to follow due process or potentially inadequate resources. This includes instances of;

- Human errors, incorrect or incomplete processing
- Inaccurate recording, maintenance, testing and / or reconciliation of data.
- Errors or inadequacies in model methodology, design, calculation or implementation of models.

This may result in incomplete or inaccurate information. Consequences include;

- Inaccurate data being used for management decision making and reporting.
- Delays in service to customers
- Inaccurate data provided to customers

This excludes process failures caused by inadequate / incomplete procedural documentation - refer "Inadequate Document Management Processes".

OWNER Debbie Terelinck  
 CREATED 7/2/2019 1:56:01 PM

LIKELIHOOD Likely  
 SEVERITY Medium  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00002

Audit of monthly compliance calendar

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 14 Feb 2024  
 FREQUENCY: 14th day of every month

TREATMENT MC00007

Manage Inductions - Conduct New Employee Induction  
 All new employees are provided with adequate inductions

**CHANGE(S) PENDING**  
 SIGNOFF(S): Janice Byers  
 DUE DATE: 23 Feb 2024  
 FREQUENCY: Fri every week

TREATMENT MC00009

Monthly random internal audit of five (5) purchases to be performed to ensure compliance with purchasing requirements.

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 14 Feb 2024  
 FREQUENCY: 14th day of every month

TREATMENT MC00083

Manage Inductions - Conduct New Employee Induction  
 Ensure staff are inducted into the organisation

**CHANGE(S) PENDING**  
 SIGNOFF(S): Janice Byers  
 DUE DATE: 01 Oct 2024  
 FREQUENCY: The first Day of every 12 months

TREATMENT MC00084

Have critical processes mapped to assist staff eliminate errors, omissions and delays (wastage)

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 01 Dec 2024  
 FREQUENCY: The first Day of every 12 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00034

COMMUNITY SERVICES, COMPLIANCE - POLICY, REPUTATION - COMMUNITY

**Ineffective Management of Facilities / Venues / Events**

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

- Inadequate procedures in place to manage the quality or availability.
- Ineffective signage
- Booking issues
- Financial interactions with hirers / users
- Oversight / provision of peripheral services (eg. cleaning / maintenance)

OWNER Janice Byers  
 CREATED 7/2/2019 2:05:05 PM

LIKELIHOOD Likely  
 SEVERITY Medium  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00085

Manage Facilities & Bookings - Receive enquiry and determine which Department is responsible for administering the booking. Process for managing bookings to ensure no duplication

**CHANGE(S) PENDING**

SIGNOFF(S): Janice Byers  
 DUE DATE: 01 Sep 2024  
 FREQUENCY: The first Day of every 12 months

RESIDUAL  
**3.6**  
 LOW

INHERENT  
**12.0**

R00035

CHIEF EXECUTIVES OFFICE, COMPLIANCE - LEGISLATIVE, REPUTATION - COMMUNITY, REPUTATION - INDUSTRY

**Misconduct/Fraud**

Intentional activities (including fraud) in excess of authority granted to an employee, 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
- Collusion between Internal & External parties

This does not include instances where it was not an intentional breach - refer Errors, Omissions or delays in transaction processing, or Inaccurate Advice.

OWNER Debbie Terelinck  
 CREATED 7/2/2019 2:09:25 PM

LIKELIHOOD Possible  
 SEVERITY Major  
 CONTROL EFFECTIVENESS Strong

TREATMENT MC00007

Manage Inductions - Conduct New Employee Induction  
 All new employees are provided with adequate inductions

**CHANGE(S) PENDING**

SIGNOFF(S): Janice Byers  
 DUE DATE: 23 Feb 2024  
 FREQUENCY: Fri every week

TREATMENT MC00059

Induction & Training provided to elected members

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 30 Nov 2025  
 FREQUENCY: The last Day of every 24 months

TREATMENT MC00087

Manage Procurement - Identify need for procurement  
 Process minimises opportunity for misconduct

SIGNOFF(S): Colin Young  
 Kristy Hopkins  
 DUE DATE: 01 Oct 2024  
 FREQUENCY: The first Day of every 12 months

TREATMENT MC00102

Fraud Control Plan in place (refer OAG 2019/20 Report 5 - Fraud Prevention)

SIGNOFF(S): Britt Hadlow  
 DUE DATE: 28 Feb 2025  
 FREQUENCY: The last Day of every 24 months

TREATMENT MC00158

Review Employee IT Security Access on a quarterly basis

SIGNOFF(S): Kunal Sarma  
 DUE DATE: 01 May 2024  
 FREQUENCY: The first Weekday of every 3 months



## **6.8 Progress Towards the Regulation 17 Review**

<b>File Reference:</b>	8.2.7.1
<b>Reporting Officer:</b>	Britt Hadlow (Governance Coordinator)
<b>Responsible Officer:</b>	Debbie Terelinck (Chief Executive Officer)
<b>Officer Declaration of Interest:</b>	Nil
<b>Voting Requirement:</b>	Simple Majority
<b>Press release to be issued:</b>	No

### **BRIEF**

To provide Council with an update of the progress made towards the Regulation 17 Review Action Plan that was presented to the Ordinary Council Meeting for adoption on 21 December 2022.

This report aims to establish a level of accountability in respect to completing the actions identified through the Regulation 17 Review to ensure that the Shire's risk management, internal controls and legislative compliance is appropriate and effective.

### **ATTACHMENTS**

1. Regulation 17 Action Plan Tracker [**6.8.1** - 5 pages]

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### **A. BACKGROUND / DETAILS**

Section 17 of the *Local Government (Audit) Regulations 1996* requires the Chief Executive Officer to review the appropriateness and effectiveness of the Shire's systems and procedures as they relate to the following areas:

- Risk management
- Internal controls
- Legislative compliance

The review is required to be conducted at least every three years.

The Shire previously carried out the review internally. A report has been prepared identifying the findings from the review along with recommendations (if applicable). These findings and recommendations have been developed into an Action Plan and provided in Attachment 6.8.1.

### **B. CONSIDERATIONS**

**B.1 Strategic Community / Corporate Business Plan**

Performance Area: Performance. Outcome 12: Excellence in organisational performance and customer service.

Objective 12.1: Maintain a high standard of corporate governance and financial management.

Priority Action 12.1.4: Provide internal auditing capabilities (including providing additional human or financial resources) and publish findings annually.

**B.2 Financial / Resource Implications**

Staffing resources are required in order to action the recommendations detailed within the BPR Action Plan

**B.3 Legislative Compliance**

*Local Government (Administration) Regulations 1996* – Regulation 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.

**B.4 Policy Implications**

Nil.

**B.5 Stakeholder Engagement / Consultation**

Nil.

**B.6 Risk Implications**

Refer to Risk Matrix [here](#).

<b>Risk Category</b>	<b>Description</b>	<b>Rating (likelihood x consequence)</b>	<b>Mitigation Action</b>
Financial	Revenue loss to the Shire	Rare (1) x Minor (2) = Low (2)	Managed by ensuring good practices.
Health & Safety	Nil.		
Reputation	Disruption to current service.	Rare (1) x Minor (2) = Low (2)	Ensure IT and other services are managed professionally.

Service Interruption	Potential for IT and Administrative disruption.	Rare (1) x Insignificant (1) = Low (1)	Ensure changes are managed professionally.
Compliance	Not compliant with legislation.	Rare (1) x Minor (2) = Low (2)	Review legislation regularly.
Property	Nil.		
Environment	Nil.		

**B.7 Natural Environment Considerations**

Nil.

**C. OFFICER'S COMMENT**

This initial review indicated that the Shire is proactive in managing risk, internal controls and legislative compliance as well as taking the necessary steps to ensure appropriate risk management, internal controls and legislative compliance policies and practices are in place.

Officers are working towards addressing the recommendations from the review whilst continuing the improvements already underway in order to achieve an optimum levels of risk management, internal controls and legislative compliance into the future. The Action Plan has been provided in Attachment 6.8.1 with an update of the progress made towards the recommendations.

Key to table:

**Completed**

**No Action**

**Underway**

**RECOMMENDATION**

**That the Audit & Risk Management Committee endorses the following recommendation being presented to Council:**

- 1. That Council receives the February 2024 update as provided in Attachment 6.8.1 in relation to the progress made towards the Regulation 17 Action Plan.**

## Regulation 17 Action Plan Tracker

Number	Area	Control	Recommendation	Responsible Officer	Progress To Date	Status
1	1. Risk Management	1.1 Reviewing whether the local government has an effective risk management system and that material operating risks to the local government are appropriately considered;	Review Risk Management Policy	Britt Hadlow	15/03/2023 - Policy adopted by Council.	Completed
2	1. Risk Management	1.1 Reviewing whether the local government has an effective risk management system and that material operating risks to the local government are appropriately considered;	Develop a Risk Management Process	Britt Hadlow	14/04/2023 - Framework and Process is set out in risk policy, process in Promapp not required. Committee has reviewed the overall risk register framework and is reviewing each individual risk area at each of their meetings.	Completed
3	1. Risk Management	1.2 Reviewing whether the local government has a current and effective business continuity plan (including disaster recovery) which is tested from time to time;	Review a Business Continuity Plan	Britt Hadlow	1/9/2023 No progress. 3/11/2023 No progress. 4/12/2023 - Draft Disaster Recovery Plan under review, Governance Coordinator is working on first draft of Business Continuity Plan with LGIS. 5/1/2023 - Currently obtaining quotes to assist with staff training and specialised advice on the development of BCP. 2/2/2024 - Quotes received and submitted for budget review considerations. - JHCS supplied server hardware and currently configuring for BCDR. BCDR testing to commence when configuration successful with no errors.	Underway
4	1. Risk Management	1.2 Reviewing whether the local government has a current and effective business continuity plan (including disaster recovery) which is tested from time to time;	Review the IT Disaster Recovery Plan	Colin Young	12/04/2023 have sought input from Councils external ICT provider. 17/07/2023 external ICT provider has provided with a quote for a BCDR plan - need to review. 1/12/2023 An ICT BDDR plan has been developed and will be presented to the Audit Committee on the 6 December 2023.	Completed

Number	Area	Control	Recommendation	Responsible Officer	Progress To Date	Status
5	1. Risk Management	1.2 Reviewing whether the local government has a current and effective business continuity plan (including disaster recovery) which is tested from time to time;	Establish a program to test the Business Continuity Plan and IT Disaster Recovery Plan annually to ensure efficacy.	Britt Hadlow, Colin Young, Kunal Sarma	<p>12/04/2023 Have liaised with external ICT provider JH Computers to organize a testing phase for the IT Disaster recovery and Business Continuity plan.</p> <p>05/05/2023 Preparing on how to carry out the IT Disaster recovery plan. Waiting for JH Computers to provide more information on the existing backups and system recovery.</p> <p>2/06/2023 - Awaiting to hear back from Tim from JH Computers.</p> <p>7/07/2023 - JH Computers have provided quote for a complete BCDR plan - need to review. We don't have a full-fledged working BCDR plan in place.</p> <p>23/08/2023 - To present document for review in Sept.</p> <p>1/9/2023 Business Continuity Plan pending 1.1 being completed.</p> <p>03/11/2023 - BCDR document has been updated with the relevant costing to consider for. And needs to go to committee to review.</p> <p>4/12/2023 - Shire of Northam IT Backup &amp; Recovery Plan - signed off by executive group.</p> <p>16/01/2023 - To liaise with JHCS and provide them with PO &amp; get the BCDR plan into action.</p> <p>13/02/2024 - JHCS supplied hardware, currently being configured to ensure backup replication is happening with no errors. Upon successful completion - BCDR testing can take place.</p>	Underway
6	1. Risk Management	<p>1.3 Assessing the internal processes for determining and managing material operating risks in accordance with the local government's identified tolerance for risk, particularly in the following areas;</p> <p>1.10 Ascertaining whether fraud and misconduct risks have been identified, analysed, evaluated, have an appropriate treatment plan which has been implemented, communicated, monitored and there is regular reporting and ongoing management of fraud and misconduct risks.</p>	Review the Fraud and Corruption Plan prior to June 2023.	Britt Hadlow	<p>31/07/2023 - Reviewed plan being presented to Audit &amp; Risk Management Committee on 22 August 2023.</p> <p>29/8/2023 - Pending adoption by Council - 20 Sept.</p> <p>6/10/2023 - Minor amendments being made then complete.</p>	Completed
7	1. Risk Management	1.3 Assessing the internal processes for determining and managing material operating risks in accordance with the local government's identified tolerance for risk, particularly in the following areas;	Develop internal audit framework to include audits on identified risks in the Fraud and Corruption Control Plan.	Britt Hadlow	01/08/2023 - Risks treatments to be audited bi-monthly on rotation (i.e. 50% audited each month).	Completed

Number	Area	Control	Recommendation	Responsible Officer	Progress To Date	Status
8	1. Risk Management	1.3Assessing the internal processes for determining and managing material operating risks in accordance with the local government's identified tolerance for risk, particularly in the following areas;	Implement an annual review and sign off for the Code of Conduct for Employees, Volunteers, Contractors and Agency Staff.	Janice Byers, Shire of Northam	2/2/2024 - Currently a part of new employee induction process that the COC is signed and returned.  COC is reviewed annually and signed off by the CEO. COC for 2024 complete, just waiting on finalisation of document and sign off by CEO.  New Human Resource Information System is expected to be implemented by the end of 2024, and will include a requirement for staff to reread and sign off COC annually.  Item will remain open until this is completed.	Underway
9	1. Risk Management	1.3Assessing the internal processes for determining and managing material operating risks in accordance with the local government's identified tolerance for risk, particularly in the following areas;	Provide staff with specific training on fraud controls and conducting investigations.	Janice Byers, Shire of Northam	2/2/2024 - Early stages of investigating content for training and best way to deliver of training underway.	Underway
10	1. Risk Management	1.3Assessing the internal processes for determining and managing material operating risks in accordance with the local government's identified tolerance for risk, particularly in the following areas;	Review ICT Strategy prior to June 2024.	Colin Young, Kunal Sarma	Yet to review the current strategy that the Shire has in place and then work from there.  05/05/2023 - Yet to review and then create the strategy  02/06/2023 - Yet to review and then create the strategy  7/07/2023 - Yet to review existing document in place  23/08/2023 - Not yet started reviewing.  03/11/2023 - ICT security policy for fileserver has been created and will be incorporated in Promapp's. This will be part of the ICT strategy document as well (which is creation process).  4/12/2023 - to incorporate it in Promapp's security strategy.  16/01/2024 - to develop Northam Shires ICT strategy shortly.  5/01/2024 - plan is in the early stages of development  13/02/2024 - through ITV/ReadyTech to change the security settings in Synergy. Currently reviewing existing strategy policy.	Underway
11	1. Risk Management	1.5Assessing the adequacy of Local Government processes to manage insurable risks and ensure the adequacy of insurance cover, and if applicable, the level of self-insurance;	Implement systems to ensure appropriate insurance is maintained where required by the Shire of Northam for leases and licenses.	Britt Hadlow	06/02/2023 - Documenting within Smartsheet leased properties and the requirements with respect to insurance. Review yet to be undertaken comparing the property insurance register to lease register. 1/08/2023 - A review was undertaken for leased properties against the insurance property register to ensure appropriate insurance is maintained. An annual review has been incorporated as an action on the CEO Office Annual Delivery Plan.	Completed

**Audit & Risk Management Committee Agenda  
29 February 2024**

**Attachment 6.8.1**

Number	Area	Control	Recommendation	Responsible Officer	Progress To Date	Status
12	2. Internal Control	2.2Control of approval of documents, letters and financial records;	Staff to be provided with training/reminder of need to register certain documents whilst limiting access.	Britt Hadlow, Janice Byers	Developing a suite of weekly 'Did you know' alerts to staff in addition with training videos for registering documents.  1/9/2023 Monthly updates to be communicated to staff. 13/10/23 Commenced.	Completed
13	2. Internal Control	2.3Limit of direct physical access to assets and records;	Store physical lease and licence records in the Records room to ensure records are appropriately administered.	Britt Hadlow	Cabinet moved on 21/04/2023.	Completed
14	2. Internal Control	2.8Comparison of the result of physical cash and inventory counts with accounting records.	Develop process and procedure for offsite stock management.	Kristy Hopkins	1/2/2024 - Preliminary investigations are underway.	Underway
15	3. Legislative Compliance	3.1Reviewing the annual Compliance Audit Return and reporting to council the results of that review;	Have the Compliance Audit Return (CAR) undertaken independently once in every three years (next due for 2023 period)  CAR completed progressively on a monthly basis as part of internal audit process.	Britt Hadlow	01/02/2023 - No progress able to be taken until second quarter of 2023/24. Sourcing quotes to include in 2023/24 budget. 12/04/2023 - Quotes sought and budget request submitted for 2023/24. 1/08/2023 - Included in 2023/24 budget. 1/9/2023 - Budget approved - seeking quotes. 6/10/2023 - Finalising quote. 21/10/2023 - Consultant engaged. 4/12/2023 - No progress 5/1/2023 - Governance Coordinator is currently compiling evidence to send to auditors. 2/2/2024 - Auditors currently assessing evidence provided. Expected site visit in the coming weeks. Report will be prepared for A&R meeting in Feb. 12/2/2024 - Report completed and uploaded to portal. Waiting on Council review from A&R Management Committee, and then endorsement from Council before finalising for submission to the Department.	Underway
16	3. Legislative Compliance	3.2How management is monitoring the effectiveness of its compliance and making recommendations for change as necessary;	Report non-compliances identified through internal audits to the Executive Management monthly meeting.	Britt Hadlow, Tamika Van Beek	Executive Managers Meeting Agenda template (V8) has been updated and uploaded in to Promapps. This version will commence use in March 2023	Completed
17	3. Legislative Compliance	3.3Reviewing whether the local government has procedures for it to receive, retain and treat complaints, including confidential and anonymous employee complaints;	Review the Customer Service Charter	Kudzai Matanga	1/2/2024 - Review will be completed by the end of February 2024.	Underway

Number	Area	Control	Recommendation	Responsible Officer	Progress To Date	Status
18	3. Legislative Compliance	3.3 Reviewing whether the local government has procedures for it to receive, retain and treat complaints, including confidential and anonymous employee complaints;	Review the Manage Complaints Process incorporating the following: a) Translating services being provided where appropriate. b) Special arrangements that may be required for responding to particular client groups. c) Reference to the public interest disclosure and misconduct processes. d) Declaring interests. e) The Ombudsman's Conducting Investigations Guidelines. f) The Ombudsman's Procedural Fairness Guidelines. g) A review process in which the Complaint Handling Officer's decision is reviewed by a suitably experienced colleague/superior before the complaint is finalised. h) An independent internal review process. i) Consideration towards establishing a designated Complaint Handling Officer. j) A system for analysing complaint information to enable continuous improvement.	Britt Hadlow	01/02/2023 - Limited. 12/04/2023 - Review underway. 4/07/2023 - Complaints process and website updated. Waiting for finalisation of process for complaints relating to council member breaches of the code of conduct. 01/08/2023 - Policy for council member breaches of the code of conduct has been workshopped with council and to be presented to the August OCM for endorsement. 16/08/2023 - Policy endorsed for Council member breaches of the code of conduct which is incorporated into the complaints process.	Completed
19	3. Legislative Compliance	3.3 Reviewing whether the local government has procedures for it to receive, retain and treat complaints, including confidential and anonymous employee complaints;	Review the information available on the Shire of Northam website incorporating the following: a) Providing clear information that complaints are handled at no charge. b) Providing the information in the form of other languages and incorporating a "Listen" option.	Britt Hadlow, Colin Young	01/02/2023 - Requested quote for 'Listen' feature 12/04/2023 - Feature implemented.	Completed
20	3. Legislative Compliance	3.3 Reviewing whether the local government has procedures for it to receive, retain and treat complaints, including confidential and anonymous employee complaints;	Include the effectiveness of the complaint handling system within the internal audit framework.	Britt Hadlow, Colin Young	1/08/2023 - Complaint audit implemented commencing July 2023.	Completed



## **6.9 Progress Towards the ICT Strategy Plan**

<b>File Reference:</b>	1.1.9.1
<b>Reporting Officer:</b>	Tamika Van Beek (Governance Officer)
<b>Responsible Officer:</b>	Colin Young (Executive Manager Corporate Services)
<b>Officer Declaration of Interest:</b>	Nil.
<b>Voting Requirement:</b>	Simple Majority
<b>Press release to be issued:</b>	No

### **BRIEF**

To provide Council with an update on the progress made towards the ICT Strategy Plan.

This report aims to establish a level of accountability in respect to completing the actions identified through the audit undertaken by LGIS in 2019 in order to ensure that continuous improvement occurs within the organisation.

### **ATTACHMENTS**

1. ICT Strategic Plan Action Plan [**6.9.1** - 3 pages]

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### **A. BACKGROUND / DETAILS**

The Shire of Northam is moving through a significant period of change and development. In recognition of this and the need to ensure that it can continue to meet the aspirations of the community, the Shire of Northam has undertaken to put in place a number of Strategic and Business Plans to deliver short-, medium and long-term objectives. The Shire of Northam is providing committed strategic planning and leadership, focused on strengthening our community, providing growth, and diversifying the local economy.

One such Plan is the ICT Strategy Plan and this report provides an update on implementation of the actions associated with this Plan

### **B. CONSIDERATIONS**

#### **B.1 Strategic Community / Corporate Business Plan**

Performance Area: Prosperity.

Outcome 10: An attractive destination for investors, business and visitors; helping to grow the economy and local jobs.

Objective 10.1: Pursue economic growth, innovation and diversification.

Priority Action: Nil.

**B.2 Financial / Resource Implications**

To be advised / determined

**B.3 Legislative Compliance**

Local Government Act 1995 and relevant subsidiary legislation.

**B.4 Policy Implications**

Nil.

**B.5 Stakeholder Engagement / Consultation**

Nil.

**B.6 Risk Implications**

Refer to Risk Matrix [here](#).

<b>Risk Category</b>	<b>Description</b>	<b>Rating (likelihood x consequence)</b>	<b>Mitigation Action</b>
Financial	Lack of investment into ICT	Possible (3) x Medium (3) = Moderate (9)	ICT Strategic / forward planning involving stakeholders to determine needed and desired current and future outcomes that can be budgeted for.
Health & Safety	EOL/less than WHS ideal ICT hardware, RF and prolonged machine noise exposure	Possible (3) x Medium (3) = Moderate (9)	EOL hardware replacement decisions to consider WHS requirements. Suitable placement or enclosures for noisy ICT gear such as servers and switches.
Reputation	Slow take up of new technologies	Likely (4) x Minor (2) = Moderate (8)	ICT Team continuing to engage with Shire

			stakeholders, 3 <sup>rd</sup> party vendors, and other councils re: current and emerging technologies and methods of delivering desired services.
Service Interruption	Nil.	Nil.	Nil.
Compliance	Nil.	Nil.	Nil.
Property	Nil.	Nil.	Nil.
Environment	Nil.	Nil.	Nil.

**B.7 Natural Environment Considerations**

Nil.

**C. OFFICER'S COMMENT**

ICT services are presently provided to approximately 130 full time, part time, and casual employees across the following sites, Administration, Northam depot, Wundowie Depot, Northam library, Wundowie library, Bilya Koort Boodja Cultural centre, Visitor centre, Killara adult day care, Northam aquatic facility, the Wundowie swimming pool, Bush Fire Brigade facilities, as well as to the community and stakeholders. This ICT Strategic Plan establishes a course of action to guide the future development and delivery of ICT services for the Shire of Northam.

Key to table:

**Completed**

**No Action**

**Underway**

**RECOMMENDATION**

**That the Audit & Risk Management Committee endorses the following recommendation being presented to Council:**

- 1. That Council receives the update as provided in Attachment 6.9.1 in relation to the progress made towards the ICT Strategic Plan.**

Number	Area for Further Development	Recommendation / Action	Timeframe	Responsibility	Progress To Date	Status
1	Governance	ICT decisions and operations within the Shire will be controlled and guided through a formalised ICT Governance framework. This framework will ensure the alignment of ICT activities with business priorities.	2021 / 2026	Corporate Services / ICT	<p>Draft strategic and operations plans developed. SLAs to be determined.</p> <p>February 2022 Update: In early discussions with external provider regarding SLAs.</p> <p>August 2022 Update: No progress.</p> <p>December 2022 Update: No progress.</p> <p>April 2023 - to review and work on it.</p> <p>Jan 2024 - ICT security document to control AD and Synergy Security Access. Promapps process has been set up. Liaising with ITVision to amend Synergy Security Access.</p>	Underway
2	Emerging Trends and Technologies	ICT policies and procedures need to be current enabling the organisation to conduct considered reviews of emerging technologies and trends, to ensure they meet current and emerging needs of the organisation.	2021 / 2026	Corporate Services / ICT	Acceptable Use and BYOD policies adopted.	Completed
3	Business Systems and Applications	Appropriately managed business systems and applications will help consolidate and streamline business processes.	2021 / 2026	Corporate Services / ICT	<p>Inventory Register established. RFQ re: potential CRM/RMS upgrade/migration from Synergysoft occurring.</p> <p>February 2022 Update: Tenders have been received and staff will be evaluation and expecting to present to the next Audit Committee meeting.</p> <p>May 2022 Update: No progress.</p> <p>August: Staff are expecting to receive an overview of the Altus System within the month, this will then determine the best way forward.</p> <p>Feb 2023 Data Cleaning in process. COA restructuring project will be commencing soon.</p> <p>April 2023 - COA restructuring underway.</p> <p>July 2023 - Go live with new COA.</p> <p>Aug 2023 - New COA restructuring completed and currently used in Synergy. Staff's are being trained on using the new codes.</p> <p>Discovery phase for Health/Planning/Building modules through Greenlight to commence for 3 days starting 15th August 2023. Parallely to run HR ,module workshop through Pulse.</p> <p>Jan 2024 - Pulse HR module workshops &amp; training scheduled with HR team to commence. Prerequisites were to have name based email addresses. For 30 odd mailboxes, name based id have been created to meet requirements.</p> <p>Greenlight - Building/Planning/Health - identified by internal team that the test environment wasn't fit for purpose for the Shire and has been put on hold. ReadyTech account manager to provide quote for alternative and organize demo session.</p> <p>Altus Content Management - Replacement for Central Records was identified as need to go live before Greenlight due to integration. Queried ITV\Readytech regarding Payroll implementation and go live (April 2024) to go ahead of Altus Content Management.</p>	Underway

Number	Area for Further Development	Recommendation / Action	Timeframe	Responsibility	Progress To Date	Status
4	Infrastructure and Technology	ICT has extensive assets and services under management. The best value and maximum benefit from this investment can only be obtained if suitably managed.		Corporate Services / ICT	<p>Systems manual to be developed. Network communications infrastructure plan to be developed.</p> <p>February 2022 Update: No progress.</p> <p>May 2022 Update: No progress.</p> <p>August 2022, limited progress made largely around the Shires CCTV infrastructure which is having a needs assessment carried out.</p> <p>December 2022 Update: No progress.</p> <p>April 2023 - To investigate and enquire with Telstra if they have any open nodes available across Fitzgerald St to rent lines to connect the CCTV poles in order to reduce the congestion in the wireless link for the CCTV infrastructure.</p> <p>July 2023 - To update the existing document as per Shire strategy for grant funding and improving the current CCTVs in place.</p> <p>November 2023 - CCTV Strategy and Audit Complete</p>	Completed
5	Disaster Recovery	ICT needs to work with the organisation to establish mission critical services and ensure that disaster recovery and business continuity plans meet current and emerging needs	2021 / 2026	Corporate Services / ICT	<p>Adhoc DR / Business Continuity plan in place and partially tested. Data retention plan developed</p> <p>Jan 2024 - BCDR - Business Continuity &amp; Disaster Recovery program adopted by Council in Dec 2023. PO given out to WALGA supplier JHCS. Currently under configuration state.</p> <p>Feb2024 - BCDR - Hardware DR server delivered, configuration and testing being conducted by JHCS.</p>	Underway

Number	Area for Further Development	Recommendation / Action	Timeframe	Responsibility	Progress To Date	Status
6	Security	The threat of cyber security incidents continues to rise. The Shire needs to develop and implement security policies and procedures to meet this increasing threat.	2021 / 2026	Corporate Services / ICT	<p>Ongoing development and training will always be occurring.</p> <p>May 2022 Update: No progress.</p> <p>August 2022, No progress.</p> <p>Februarys 2022 Update: No progress.</p> <p>April 2023 - Currently Northam has in place Rocket cyber with is a 24/7 managed security operations centre (SOC) which monitors for any unusual activity on the network including the 365 tenancy , Datto SAAS protection is the 365 tennacy backups, Datto defence is software that sits in the 365 tenancy and monitors for any injected code into emails, phishing and ransomware attacks on teams, Sharepoint, Outlook, OneDrive . Datto EDR is endpoint detection and remediation . EDR is designed to sit between AV and SOC services and protect endpoints from any unusual activity. And we have Trend AV on all machines</p> <p>July 2023 - Existing Cybersecurity in place is currently functioning well. Next phase is enabling Office365 MFA (multifactor authentication).</p> <p>November 2023 - MFA identification is currently being rolled out and now covers 50% of Staff. In Addition the ICT Disaster Recovery Plan has also been updated.</p> <p>Jan 2024 - MFA rolled out to councilors. Other staff being rolled in with MFA to be completed by mid Feb 2024.</p> <p>Feb 2024 - MFA roll out complete. Requested for quotes for Pen testing &amp; Vulnerability assessment testing.</p>	Underway
7	Project Management	The effective delivery of ICT projects requires a suitable management framework to be implemented	2022	Corporate Services / ICT	<p>Project Management ICT Procedure to be developed.</p> <p>February 2022 Update: No progress.</p> <p>August 2022 Update: No progress.</p> <p>December 2022 Update: No progress.</p> <p>April 2023 - to review and develop a frame work</p> <p>May 2023 - yet to review and develop</p> <p>July 2023 - Project Management document currently available reviewing that document.</p> <p>November 2023 - Project Management Document has been reviewed and signed off on.</p>	Completed

**7 URGENT BUSINESS APPROVED BY DECISION**

Nil.

**8 DATE OF NEXT MEETING**

Upcoming meetings:

- 23 May 2024 at 5:30pm
- 29 August 2024 at 5:30pm
- 28 November 2024 at 5:30pm

**9 DECLARATION OF CLOSURE**