

Audit and Risk Committee Meeting

2 October 2023

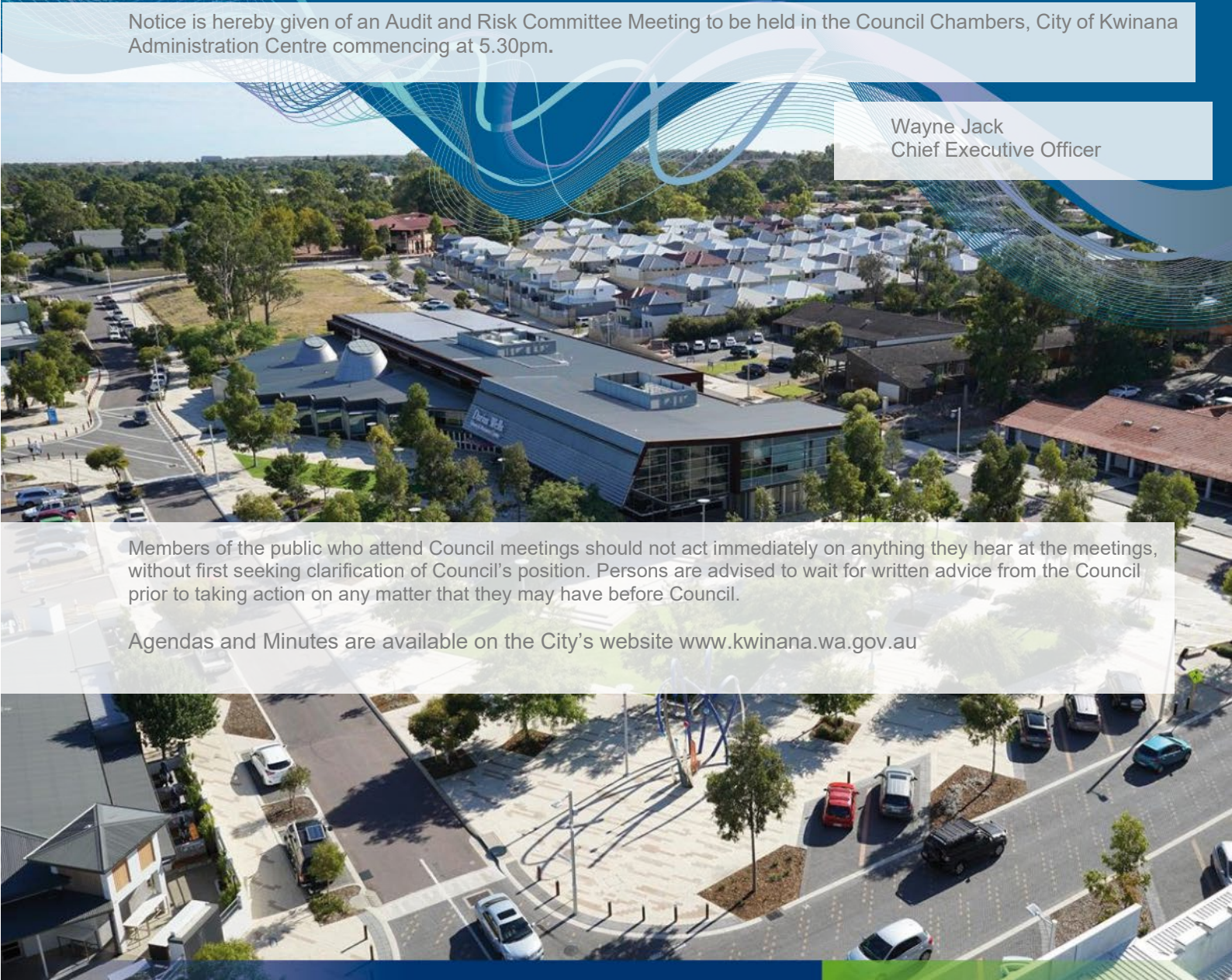
Agenda

Notice is hereby given of an Audit and Risk Committee Meeting to be held in the Council Chambers, City of Kwinana Administration Centre commencing at 5.30pm.

Wayne Jack
Chief Executive Officer

Members of the public who attend Council meetings should not act immediately on anything they hear at the meetings, without first seeking clarification of Council's position. Persons are advised to wait for written advice from the Council prior to taking action on any matter that they may have before Council.

Agendas and Minutes are available on the City's website www.kwinana.wa.gov.au



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1 OPENING AND ANNOUNCEMENT OF VISITORS

Presiding Member to declare the meeting open and welcome all in attendance.

Presiding Member to announce that the Audit and Risk Committee Meeting is being live streamed and recorded in accordance with the City's Live streaming and Recording Council Meetings policy.

By being present at this meeting, members of the public consent to the City recording and livestreaming their image and/or voice.

2 WELCOME TO COUNTRY AND ACKNOWLEDGEMENT OF COUNTRY

Councillor Barry Winmar to present the Welcome to Country:

"Ngullak nyinniny kooralong koora ngullak noitj nidja noongar boodjar. Noongar moort djoorapiny nyinniny nidja ngulla quopadok noongar boodjar kooralong.

From the beginning of time to the end, this is Noongar Country. Noongar people have been graceful keepers of our nation for many, many years.

Djinanginy katatjin djoorapiny nidja weern noongar boodjar ngalla mia mia boorda.

Look, listen, understand and embrace all the elements of Noongar Country that is forever our home.

Kaya wandju ngaany koort djoorpiny nidja Noongar boodjar daadjaling waankganinyj Noongar Boodjar.

Hello and welcome my heart is happy as we are gathered on country and meeting here on Noongar Country

"Presiding Member to read the Acknowledgement of country:

"It gives me great pleasure to welcome you all here and before commencing the proceedings, I would like to acknowledge that we come together tonight on the traditional land of the Noongar people and we pay our respects to their Elders past and present."

3 ATTENDANCE, APOLOGIES, LEAVE(S) OF ABSENCE (PREVIOUSLY APPROVED)

Apologies:

Unknown at the time of issuing the agenda.

Leave(s) of Absence (previously approved):

Nil

4 PUBLIC QUESTION TIME

In accordance with the *Local Government Act 1995* and the *Local Government (Administration) Regulations 1996*, any person may during Public Question Time ask any question.

In accordance with Regulation 6 of the *Local Government (Administration) Regulations 1996*, the minimum time allowed for Public Question Time is 15 minutes.

A member of the public who raises a question during Question Time is to state his or her name and address.

Members of the public must provide their questions in writing prior to the commencement of the meeting. A public question time form must contain all questions to be asked and include contact details and the form must be completed in a legible form.

Please note that in accordance with Section 3.4(5) of the *City of Kwinana Standing Orders Local Law 2019* a maximum of two questions are permitted initially. An additional question will be allowed by the Presiding Member if time permits following the conclusion of all questions by members of the public.

5 RECEIVING OF PETITIONS, PRESENTATIONS AND DEPUTATIONS

5.1 PETITIONS

A petition must –

- be addressed to the Mayor;
- be made by electors of the district;
- state the request on each page of the petition;
- contain at least five names, addresses and signatures of electors making the request;
- contain a summary of the reasons for the request;
- state the name of the person to whom, and an address at which, notice to the petitioners can be given; and
- be respectful and temperate in its language and not contain language disrespectful to Council.

The only motion which shall be considered by the Council on the presentation of any petition are –

- that the petition be received;
- that the petition be rejected; or
- that the petition be received and a report prepared for Council.

5.2 PRESENTATIONS

In accordance with Clause 3.6 of the *Standing Orders Local Law 2019* a presentation is the acceptance of a gift, grant or an award by the Council on behalf of the local government or the community.

Prior approval must be sought by the Presiding Member prior to a presentation being made at a Council meeting.

Any person or group wishing to make a presentation to the Council shall advise the CEO in writing before 12 noon on the day of the meeting. Where the CEO receives a request in terms of the preceding clause the CEO shall refer it to the presiding member of the Council committee who shall determine whether the presentation should be received.

A presentation to Council is not to exceed a period of fifteen minutes, without the agreement of Council.

5.3 DEPUTATIONS

In accordance with Clause 3.7 of the *Standing Orders Local Law 2019*, any person or group of the public may, during the Deputations segment of the Agenda with the consent of the person presiding, speak on any matter before the Council or Committee provided that:

- the person has requested the right to do so in writing addressed to the Chief Executive Officer by noon on the day of the meeting.
- setting out the agenda item to which the deputation relates;
- whether the deputation is supporting or opposing the officer's or committee's recommendation; and
- include sufficient detail to enable a general understanding of the purpose of the deputation.

A deputation to Council is not to exceed a period of fifteen minutes, without the agreement of Council.

6 DECLARATIONS OF INTEREST (FINANCIAL, PROXIMITY, IMPARTIALITY – BOTH REAL AND PERCEIVED) BY MEMBERS AND CITY OFFICERS

Section 5.65(1) of the *Local Government Act 1995* states:

A member who has an interest in any matter to be discussed at a council or committee meeting that will be attended by the member must disclose the nature of the interest —

- in a written notice given to the CEO before the meeting; or
- at the meeting immediately before the matter is discussed.

Section 5.66 of the *Local Government Act 1995* states:

If a member has disclosed an interest in a written notice given to the CEO before a meeting then —

- before the meeting the CEO is to cause the notice to be given to the person who is to preside at the meeting; and
- at the meeting the person presiding is to bring the notice and its contents to the attention of the persons present immediately before the matters to which the disclosure relates are discussed.

7 CONFIRMATION OF MINUTES

7.1 MINUTES OF THE AUDIT AND RISK COMMITTEE MEETING HELD ON 19 JUNE 2023

RECOMMENDATION

That the Minutes of the Audit and Risk Committee Meeting held on 19 June 2023 be confirmed as a true and correct record of the meeting.

8 REPORTS

8.1 BUSINESS CONTINUITY FRAMEWORK

SUMMARY

The City's Crisis Management and Business Disruption Procedures Manual (Manual) and Crisis Management and Business Disruption Response Plan (Plan) have been in place since circa 2015. Since then, the City has only conducted minor reviews of the documents and no further exercising or testing of the plans have been conducted.

At the last review undertaken pursuant to regulation 17 of the *Local Government (Audit) Regulation 1996*, it was noted that the Manual and Plan were out of date and recommended that a comprehensive review be conducted so that the documents can be brought up to date.

The City engaged Riskwest to conduct the review and align the City's Business Continuity Management (BCM) program with the international standards, AS ISO 22301:2020 Security and Resilience – Business continuity management system – Requirements.

The City's Business Continuity Framework, Business Continuity Plan and Crisis Management Plans (Plans) have now been reviewed and are detailed within **Confidential Attachments A, B and C** for review and comment by the Committee.

It is important to note that these Plans are live working documents. They will continue to be updated on an 'as required' basis.

As part of the next phase of implementation, Riskwest will be conducting a walkthrough and testing of the documentation.

OFFICER RECOMMENDATION

That the Audit and Risk Committee:

1. **Note the City's new, Business Continuity Framework, Business Continuity Plan and Crisis Management Plan as detailed in Confidential Attachments A, B and C,**
2. **Note that the Business Continuity Framework, Business Continuity Plan and Crisis Management Plan will continue to be live working documents and will receive regular minor updates on an as required basis; and**
3. **Notes that major review updates will be presented to the Audit and Risk Committee for noting.**

VOTING REQUIREMENT

Simple majority

DISCUSSION

Riskwest was engaged by the City to conduct the Business Continuity project. The project was split into the following phases:

Phase One – Baseline Review (completed):

- **Stage 1 - Review and Gap Analysis**
Conduct a baseline review of the existing Manual and Plan, and more broadly, the City's BCM program against contemporary better practice and alignment with relevant industry standards. The outcome of the review guided the improvements to the BCM program.
- **Stage 2 - Awareness and Desktop Scenario Workshop**
Prepare and conduct a two-hour awareness and desktop scenario workshop for the City's Leadership Team and other appropriate staff. The aim of the workshop is to:
 - Build a greater awareness and management buy-in of crisis management and business continuity; and
 - Highlight existing gaps and identify opportunities for improving the City's response capabilities.
- **Stage 3 - Reporting**
Riskwest prepared a report summarising the findings and observations from the baseline review and gaps analysis.

Based on the work undertaken in Phase One, Riskwest proposed the following scope of works to assist the City with the update and improve of the BCM program by implementing a BCM process that aligns with the international standards, AS ISO 22301:2020 Security and Resilience – Business continuity management system – Requirements:

- Develop a documented BCM framework that outlines the program objectives, requirements, governance structure, roles, and responsibilities and overall BCM implementation process at the City as detailed in Confidential Attachment A.
- Revised the business impact analysis (BIA) methodology and update the priorities of service and functions undertaken by the City and identify the resources requirements and interdependencies for each business area.
- Develop new business continuity plans (BCPs) and Crisis Management Plan (CMP) and Crisis Management Plan for the administration building and works depot to include notification and escalation procedures, strategic and operational response actions and business continuity strategies, solutions, and procedures for priority services in each business area, as detailed in Confidential Attachment B and C.
- Conduct planned walkthrough sessions with business areas to build awareness and validate the new BCP.

Phase Two - Proposed approach

- **Stage 1 – BCM Framework (inclusive of Business Continuity Plan and Crisis Management Plan)**
This stage was run parallel with Stages 2 and 3 and involved the development of a BCM framework for the City. The purpose of the framework is to set the standards, requirements, and management expectations of how the City's BCM program is to be implemented, managed, and maintained. This includes:
 - Objectives and scope of the BCM program
 - BCM governance structure
 - Roles, responsibilities, and accountabilities
 - Key requirements for BCM
 - BCM implementation process

- **Stage 2 – Strategic Business Impact Analysis**
Conducted a strategic business impact analysis (SBIA) with the City's Leadership Team to review and update the business continuity priorities and scope of the BCM program. The SBIA will provide a senior-level and City-wide perspective of what the 'value at risk' might be to the City if a disruption to services determines the maximum tolerable period of disruption (MTPD) and identify the priority services and locations that are of the most significant concerns to the City. The outcomes of the SBIA will help to set the strategic priorities and direction for the City's BCM program and form the basis for the development of the location specific BCPs.
- **Stage 3 – BCP Development**
The development of new location specific BCPs. The priority services and exact number of plans required will be informed by the outcome of the BCPs for the administration building and works depot. The BCPs for other facilities (such as the library and community centres), if required, may be developed later.

Next Steps - To be completed.

- **Stage 4 – Walkthrough**
This stage will constitute the formal roll-out of the completed BCPs. The purpose of the plan walkthrough is to familiarise managers and key personnel with the new BCPs.
- **Stage 5 – BCP Development – Other Sites (to be determined)**
This stage involves writing the BCPs for other sites that were not included in Stage 3. The key tasks identified in Stage 3 will be similar for this stage, but the process is expected to be more efficient as the City will be able to leverage on the work already completed.
- **Stage 6 – Exercising and Testing**
This stage involves conducting several tests/exercises to validate and rehearse the BCPs. The specific requirements for testing and exercising will be determined on the completion of the BCPs.

Business Continuity Management Framework (Confidential Attachment A)

The Business Continuity Management (BCM) Framework for the City is a strategic document that outlines how the City intends to prepare for and respond to business disruptions or crisis. The framework encompasses the City's Business Continuity Plan, Crisis Management Plan and Local Business Continuity Plans, these plan help support the mitigation of risk, prioritise safety, and maintain essential services. By having such framework in place, the City can ensure its resilience and ability to recover from unexpected events.

Business Continuity Plan (BCP) (Confidential Attachment B)

The purpose of the Business Continuity Plan (BCP) is to set out the principles to be followed, actions to be taken and resources to be used for the initial response, continuity of priority services and activities and long-term recovery in the event of a prolonged disruption impacting the City of Kwinana (the City). The plan provides a process that facilitates organised decision-making in the event of a major incident that might otherwise be quite chaotic.

The objectives of the BCP is to:

- Safeguard the health and safety of employees, contractors, and customers during and after a disruptive event;
- Minimise and prevent further damage to the City's property and other assets;
- Minimise any potential operational, reputational, financial, and legal/compliance impacts on the City, rate payers and other stakeholders resulting from a disruption;
- Ensure the continuity and resumption of priority services and business functions within pre-established timeframes and service levels following a disruption; and
- Meet the relevant compliance/regulatory requirements on business continuity.

Crisis Management Plan (CMP) (Confidential Attachment C)

The Crisis Management Plan (CMP) is to set out the principles to be followed, actions to be taken and resources to be used for supporting Executive decision-making, and coordination of communications and response at the City when the impact of an incident at the City reaches a point and is declared as a 'crisis'.

The primary focus of the plan is to deal with the broader strategic issues impacting the City, such as:

- Allocation and mobilisation of resources to support response and recovery of the impacted site;
- Communications with internal and external stakeholders;
- Management of public relations; and
- Coordination of decision making across business areas at the Executive level.

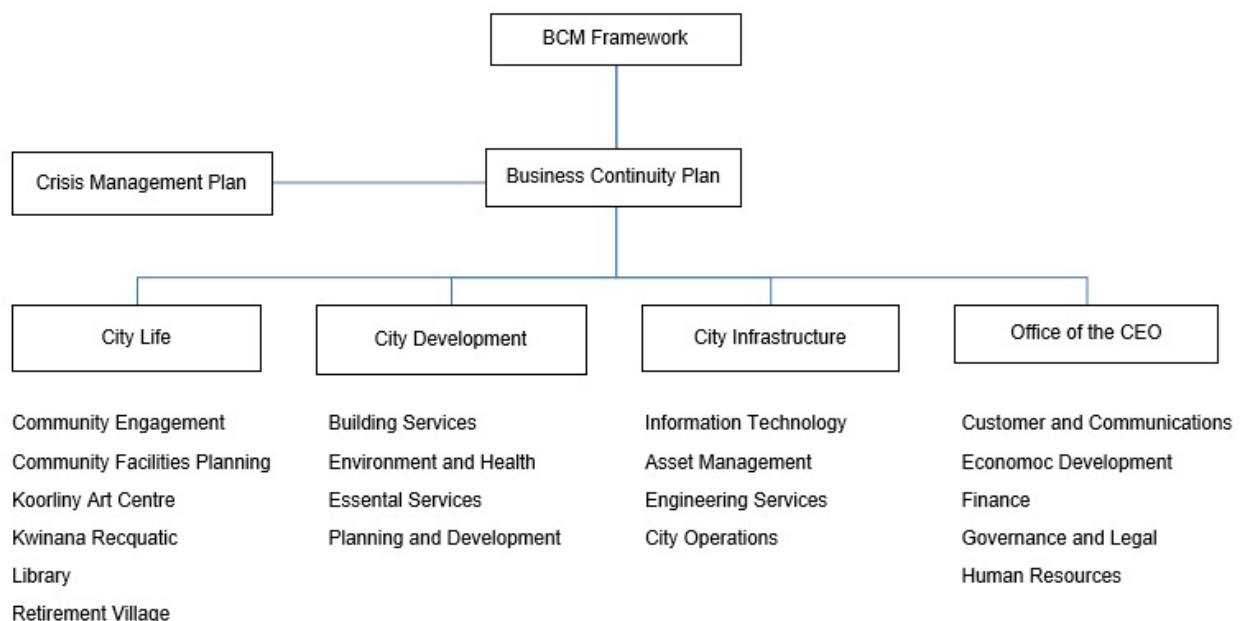
The CMP outlines the processes to be used for assessing and responding to any adverse events that threaten to cause prolonged disruption to services, irreparable damage to critical assets and/or serious reputational damage to the City. It is not based on any specific scenario or causes of disruption but considers the actions required of the Executive to provide strategic management oversight. It is activated when an incident is declared a crisis by the CEO.

Local Business Continuity Plans (LBCP)

The Local Business Continuity Plans (LBCP) are business area specific response plan that forms part of the City's Business Continuity Plan (BCP).

The LBCP is activated by the City's Crisis Management Team (CMT) when a major incident causes prolonged disruption to the City's prioritised services/functions and significant impacts on the community and other stakeholders.

The below image details how the City's Business Continuity is structured.



STRATEGIC IMPLICATIONS

There are no strategic implications as a result of this proposal.

SOCIAL IMPLICATIONS

There are no social implications as a result of this proposal.

LEGAL/POLICY IMPLICATIONS

No legal/policy implications have been identified as a result of this report or recommendation.

FINANCIAL/BUDGET IMPLICATIONS

There are no financial implications that have been identified as a result of this report or recommendation.

ASSET MANAGEMENT IMPLICATIONS

No asset management implications have been identified as a result of this report or recommendation.

ENVIRONMENTAL/PUBLIC HEALTH IMPLICATIONS

No environmental or public health implications have been identified as a result of this report or recommendation.

COMMUNITY ENGAGEMENT

There are no community engagement implications as a result of this report or recommendation.

ATTACHMENTS

- A. DRAFT - Business Continuity Management Framework - Confidential**
- B. DRAFT - Business Continuity Plan - Confidential**
- C. DRAFT - Crisis Management Plan - Confidential**

8.2 RISK MANAGEMENT ACTIVITY REPORT

SUMMARY

This report provides an update to the Audit and Risk Committee ('Committee') on the City's operational and strategic risk profile for the purpose of facilitating appropriate and independent oversight of the management and control of the City's risk management processes.

This report is a standard item for the Committee and details all identified strategic risks and high-level operational risks, including the status of identified actions to manage those risks.

There are presently no high level (residual) operational risks for reporting to the Committee.

The Strategic Risk Register is provided at Attachment A for noting and comment by the Committee.

OFFICER RECOMMENDATION

That the Audit and Risk Committee note and provide comment where appropriate on the City of Kwinana Organisational Risk Registers – Strategic Risks detailed in Attachment A.

VOTING REQUIREMENT

Simple majority

DISCUSSION

While it is not feasible to eliminate all risk, it is possible to manage uncertainty and create an environment where the occurrence of unexpected events is minimised.

Effective management of risk creates value for the organisation and its community and contributes to the demonstrable achievement of objective whether in strategic or project-based initiatives or in normal operations.

The City's Audit and Risk Committee is a Committee of Council in accordance with the *Local Government Act 1995* (the Act) and is responsible for providing guidance, assistance, and oversight to the Council, in relation to matters which include risk management.

The City's Risk Management Strategy sets the following role and responsibilities for the Committee in relation to risk management:

- a) Ensuring the City has appropriate risk management and internal controls in place.
- b) Approving and reviewing risk management programmes and risk treatment options for extreme risks.
- c) Setting and reviewing risk management tolerances/appetite and making recommendations to Council.
- d) Providing guidance and governance to support significant and/or high-profile elements of the risk management spectrum.
- e) Monitoring strategic risk management and the adequacy of internal controls established to manage the identified risks.
- f) Monitoring the City's internal control environment and reviewing the adequacy of policies, practices and procedures.
- g) Assessing the adequacy of risk reporting.
- h) Monitoring the internal risk audit function, including development of audit programs as well as monitoring of audit outcomes and the implementation of recommendations.
- i) Setting the annual internal audit plan in conjunction with the internal auditor taking into account the City Strategic and Operational Risk Registers.
- j) Conduct an annual review of the organisation's Risk Management Policy and Strategy; and
- k) Reporting through the Chief Executive Officer to the Council on its findings.

The Organisational Risk Registers are provided to the Audit and Risk Committee on a quarterly basis for their review and as an opportunity to provide advice regarding risk management, as the City is focussed on creating a culture that is committed to openness and transparency and fulfilling its responsibilities in relation to risk management.

The City of Kwinana Risk Management Strategy (Strategy) establishes the following risk assessment criteria:

Measures of Likelihood			
Level	Rating	Description	Frequency
A	Almost Certain	80-100% probability that the event will occur in the time period being considered.	Likely to occur at least once in every 1 to 1 ¼ years.
B	Likely	50-79% probability that the event will occur in the time period being considered.	Likely to occur once every 1 ¼ years to 2 years.
C	Possible	25-49% probability that the event will occur in the time period being considered.	Likely to occur once every 2 years to every 4 years.
D	Unlikely	2-24% probability that the event will occur in the time period being considered.	Likely to occur once every 4 years to every 50 years.
E	Rare	0-2% probability that the event will occur in the time period being considered.	Not likely to occur more than once in 50 years.

The City's risk appetite/attitude for residual risk set out in the Strategy is as follows:

Impact Category	Level of residual risk the City is willing to retain			
	Low	Medium	High	Extreme
Environment		●		
Financial	●			
Health and Safety	●			
ICT, Infrastructure and Assets		●		
Legislative Compliance	●			
Reputation/Image	●			
Service Delivery		●		

The Organisational Risk Register shows all 12 active strategic risks recorded for the City. Of the 107 operational risks recorded for the City, those that are recorded with a residual rating of 'high' or 'extreme' are presented.

The following is a summary of all active risks within the City's risk portfolio:

Risks		Risks by Ratings (Residual)	
Operational Risks	110	Extreme	0
		High	0
		Medium	51
		Low	57
Strategic	12	Extreme	0
		High	2
		Moderate	4
		Low	6

STRATEGIC IMPLICATIONS

This proposal will support the achievement of the following outcome/s and objective/s detailed in the Strategic Community Plan and Corporate Business Plan.

Strategic Community Plan			
Outcome	Strategic Objective	Action in CBP (if applicable)	How does this proposal achieve the outcomes and strategic objectives?
5 – Visionary leadership dedicated to acting for its community	5.1 – Model accountable and ethical governance, strengthening trust with the community	N/A – There is no specific action in the CBP, yet this report will help achieve the indicated outcomes and strategic objectives	City Officers report risk in an accountable and transparent manner.

SOCIAL IMPLICATIONS

There are no social implications as a result of this proposal.

LEGAL/POLICY IMPLICATIONS

Regulation 17 of the Local Government (Audit) Regulations 1996 provides:

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.*

FINANCIAL/BUDGET IMPLICATIONS

There are no financial implications that have been identified as a result of this report or recommendation.

ASSET MANAGEMENT IMPLICATIONS

No asset management implications have been identified as a result of this report or recommendation.

ENVIRONMENTAL/PUBLIC HEALTH IMPLICATIONS

No environmental or public health implications have been identified as a result of this report or recommendation.

COMMUNITY ENGAGEMENT

There are no community engagement implications as a result of this report or recommendation.

ATTACHMENTS

A. Attachment A - Strategic Risk Register

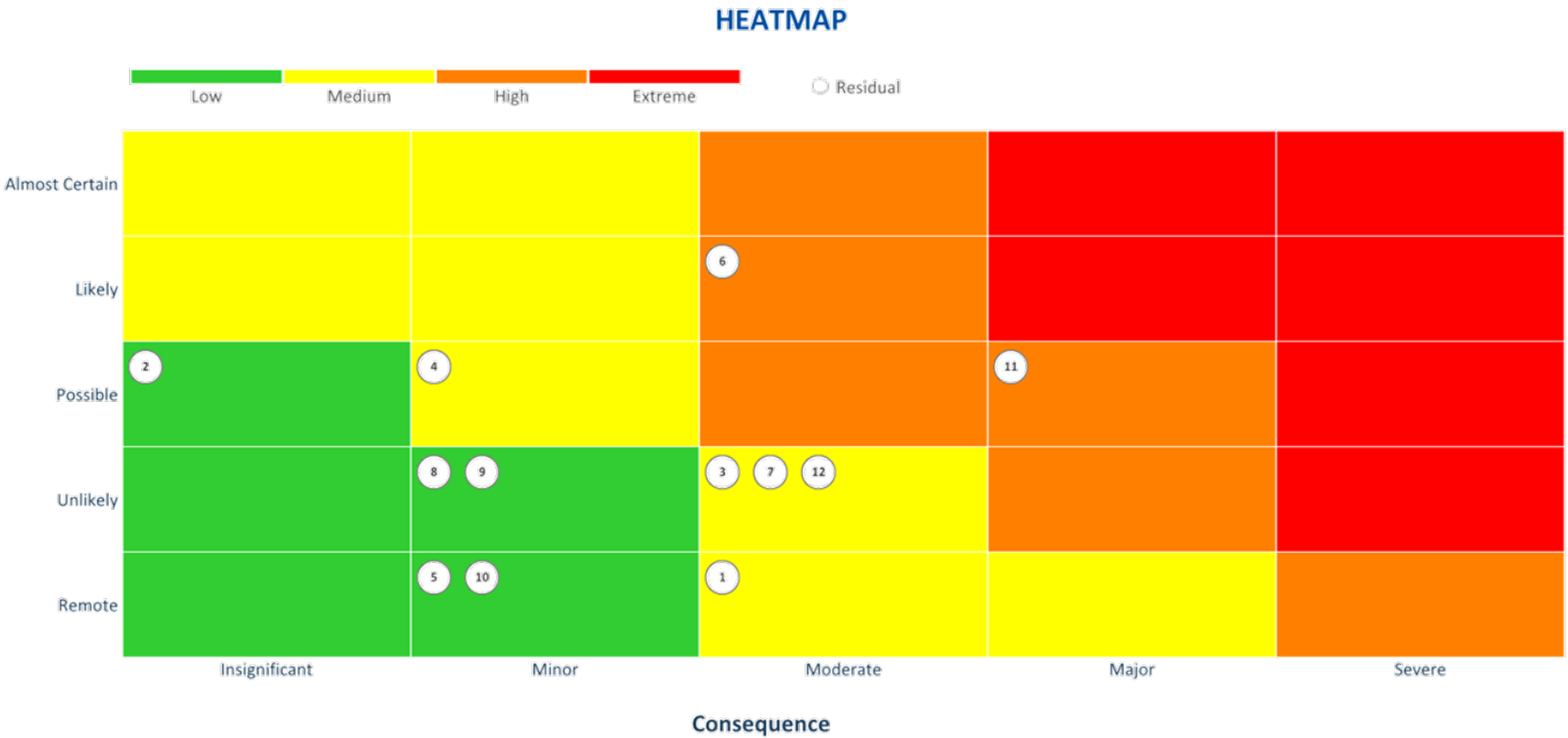


Heatmap Report

City of Kwinana

Camms.

Print Date: 15-Sep-2023



RISK SUMMARY

Strategic Risk

No.	Risk Title	Residual	Trend
1	SR2 - Financial ratios falling below DLGSC standards	Medium	
	Risk Comment: Financial ratios are no longer required to be included in the AFS, however they will be monitored via the LTFP processes.		
2	SR3 - Strategic performance not being reported back to Council	Low	
	Risk Comment: The risk item has been reviewed, amendments have been made including the addition of further controls and actions. These amendments reflect current processes and the future implementation of the required software.		
3	SR6 - Appropriate management of City assets	Medium	
	Risk Comment: Risk reviewed amended controls. Next review of Long Term Financial Plan will commence 2023, which will map out investments into asset management.		
4	SR12 - Ensuring compliance with Work Health and Safety (WHS) legislation and associated regulations	Medium	
	Risk Comment: As of the 31 March 2023, the transition period for the new WHS legislation ended, the City undertook several projects to ensure the City is compliant with the new legislation. Updating and implementing amendments to the WHS framework to achieve the strategic outcomes of this framework. Whilst the City has assessed and reviewed its documentation and processes against the new WHS legislation and this has been implemented across the City, (now considered as business as usual), moving forward there is a requirement to ensure that workers are adhering to and applying these updates. Ensuring this compliance is on-going strategic risk that needs to be mitigated."		
5	SR16 - Integrated planning requirements in accordance with the relevant legislation	Low	
	Risk Comment: The risk item has been reviewed, amendments have been made including the addition of further controls and actions.		
6	SR17 - State Government Waste Avoidance and Resource Recovery Strategy 2030 requirement for 3-bin FOGO waste systems to be implemented across Perth and Peel by 2025	High	
	Risk Comment: Feasibility Assessment project completed with the Feasibility Assessment Report endorsed by Council at the 28 June Ordinary Council Meeting with recommendations adopted. Feasibility Assessment has been provided to the Department for comment.		
7	SR18 - Community Engagement Practices	Medium	
	Risk Comment: In the past 12 months, the City have increased the levels and frequency of engagement with the community. While there is some inherent risks associated with community engagement practices, it must be noted that the overall risk in the space if declined due to greater levels of transparency and a greater involvement from the community in decisions that impact their lives.		

No.	Risk Title	Residual	Trend
8	SR19 - The City operating services and undertaking projects that are not aligned to the Strategic Community Plan and Corporate Business Plan	Low	
	<p>Risk Comment: This risk has been reviewed and an additional control has been identified and included: Team Business Plans.</p> <p>Additional comments to note:</p> <p>The Quarter 4 (April to June 2023), Quarterly Performance Report regarding the Strategic Community Plan and Corporate Business Plan are currently being prepared and will be presented to Council at an Ordinary Council Meeting scheduled to be held on 13 September 2023.</p> <p>The Team Business Templates have been circulated to all teams for completion, this is expected to be fully completed by September 2023.</p>		
9	SR20 - Under insuring assets resulting in insufficient insurance proceeds to fund projects if replacement required	Low	
	<p>Risk Comment: Asset valued as per LG requirements or if FV have been impacted.</p>		
10	SR23 - Financial loss arising from inaccurate assessment of DCP infrastructure cost estimates resulting in inability to deliver required infrastructure	Low	
	<p>Risk Comment: DCP Audit has been conducted, audit findings have been provided to the finance team. The new process with regards to minimising the use of multiple consultants has been developed and is currently being undertaken/tested with regards to engagement of external consultant.</p> <p>Risk reviewed 14/09/2022. Implementing tender to cover all estimates required for infrastructure. Contract will require consultant to directly enter estimates into costing system to remove risk of typographical error.</p> <p>24/05/2023 - Still current as of May 2023</p> <p>20/04/2023. Rawlinsons Cost Management (RCM) consultant has been appointed on a 3 year contract plus the possibility of extension by a 1 year plus 1 year. RCM undertook a full DCP infrastructure cost review for Public Open Space, Drainage and Road infrastructure and develop a cost data management software to ensure direct and automated electronic information sharing between engineering and finance and prevent manual and second hand data input.</p>		
11	SR25 - Impact of impending reform to the Retirement Villages Act 1992 on the City's ability to operate Banksia Park Retirement Estate	High	
	<p>Risk Comment: Continuing to monitor and investigating the impact this will have on Banksia Park Retirement Estate to determine the best business model for the future.</p>		
12	SR28 - Impact of mandated transition from Federal to State industrial relations (IR) system on 1 January 2023	Medium	
	<p>Risk Comment: The City's HR team continue to monitor the information being presented and attend information sessions held. The City is currently on schedule to transition to the new requirement by the 31 December 2024.</p>		

RISK OVERVIEW

Strategic Risk

SR2 Financial ratios falling below DLGSC standards

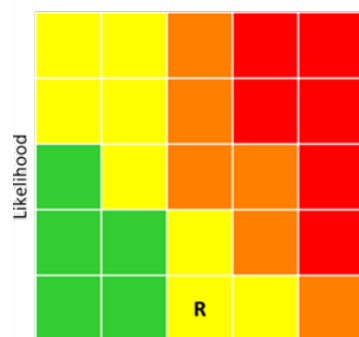
Risk Categories: Financial, ICT, Assets/Infrastructure

Risk Owner: Vanisha Govender

Last Reviewed Date: 02 Jun, 2023

Next Review Date: 01 Dec, 2023

Individual Heatmap



R Residual Risk Assessment

Effectiveness of control

R Substantially Effective



OUT OF APPETITE

The appetite benchmark score is 9.000000 for this category

Causes

- Inadequate asset sustainability practices

Consequences

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

Risk Review Comments: Financial ratios are no longer required to be included in the AFS, however they will be monitored via the LTFP processes.

Residual Controls

Control Title	Control Owner	Control Effectiveness	Next Review Date
2022-2041 Long Term Financial Plan	Vanisha Govender	Substantially Effective	30 Jun, 2023

Residual Solutions

Risk Action Title	Responsible Officer	Action Status	% Completed	End Date
Ensure that future budgets and LTFPs continue to increase asset renewal expenditure to bring the asset sustainability ratio to an acceptable level.	Vanisha Govender	In Progress	30	01 Dec, 2023
Investigate options to create a report in OneCouncil to provide current ratio status at quarterly intervals.	Vanisha Govender	Not Started	0	01 Dec, 2023

Strategic performance not being reported back to Council

Next Review Date: 31 Mar, 2024

Consequences



Residual Controls

Residual Solutions

R Residual Risk Assessment

R	Fully Effective
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The appetite benchmark score is 9.000000 for this category

SR6 Appropriate management of City assets				
Risk Categories: ICT, Assets/Infrastructure, Financial, Service Delivery		Risk Owner: Doug Elkins	Last Reviewed Date: 24 May, 2023	Next Review Date: 24 May, 2025
<div><div>Individual 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SR12 Ensuring compliance with Work Health and Safety (WHS) legislation and associated regulations																																																														
Risk Categories: Legislative Compliance		Risk Owner: Sue Wiltshire	Last Reviewed Date: 02 Mar, 2023	Next Review Date: 01 Jun, 2024																																																										
<div><div>Individual Heatmap</div><div><div><div><div><div></div><div></div><div></div><div></div><div></div></div><div><div></div><div></div><div></div><div></div><div></div></div><div><div></div><div>R</div><div></div><div></div><div></div></div><div><div></div><div></div><div></div><div></div><div></div></div><div><div></div><div></div><div></div><div></div><div></div></div></div><div>Consequence</div></div><div><div>R</div><div>Residual Risk Assessment</div></div><div><div>Effectiveness of control</div><div>R</div><div>Substantially Effective</div></div><div><div><div><div></div><div></div><div></div></div><div>OUT OF APPETITE</div></div></div></div></div>		<div><div>Causes</div><ul style="list-style-type: none">Changes to legislative requirements by State GovernmentDepartments/teams are not adhering to the WHS documentation and processes.Departments/teams not updating their risk assessments to align with WHS documentation.<div>Risk Review Comments: As of the 31 March 2023, the transition period for the new WHS legislation ended, the City undertook several projects to ensure the City is compliant with the new legislation. Updating and implementing amendments to the WHS framework to achieve the strategic outcomes of this framework. Whilst the City has assessed and reviewed its documentation and processes against the new WHS legislation and this has been implemented across the City, (now considered as business as usual), moving forward there is a requirement to ensure that workers are adhering to and applying these updates. Ensuring this compliance is on-going strategic risk that needs to be mitigated."</div><div><div>Consequences</div><ul style="list-style-type: none">Financial loss to the CityNegative reputation from bad publicityNew legislative obligations imposed on the CityNon-compliance to WHS legislation</div></div> <div><div>Residual Controls</div><table><tr><th>Control Title</th><th>Control Owner</th><th>Control Effectiveness</th><th>Next Review Date</th></tr><tr><td>Work Health and Safety (WHS) Regulations and advice from WALGA/LGIS.</td><td>Sue Wiltshire</td><td>Substantially Effective</td><td>19 Apr, 2023</td></tr><tr><td>WHS Framework</td><td>Sue Wiltshire</td><td>Substantially Effective</td><td>01 Mar, 2024</td></tr><tr><td>WHS Committee</td><td>Sue Wiltshire</td><td>Substantially Effective</td><td>01 Jul, 2025</td></tr><tr><td>LGIS/WorkSafe Audit</td><td>Sue Wiltshire</td><td>N/A</td><td>01 Jul, 2023</td></tr><tr><td>Hazards Guidelines</td><td>Sue Wiltshire</td><td>Partially Effective</td><td>01 Apr, 2024</td></tr><tr><td>City of Kwinana Safety and Wellbeing Strategy 2022-2024</td><td>Sue Wiltshire</td><td>Substantially Effective</td><td>19 Apr, 2023</td></tr></table></div> <div><div>Residual Solutions</div><table><tr><th>Risk Action Title</th><th>Responsible Officer</th><th>Action Status</th><th>% Completed</th><th>End Date</th></tr><tr><td>Continue to deliver training for key staff (including induction, where appropriate)</td><td>Sue Wiltshire</td><td>In Progress</td><td>50</td><td>19 Apr, 2023</td></tr><tr><td>Implement actions identified in GAP analysis.</td><td>Sue Wiltshire</td><td>Completed</td><td>100</td><td>31 Mar, 2023</td></tr><tr><td>Implement actions out of the City of Kwinana Safety and Wellbeing Strategy 2022-2024.</td><td>Sue Wiltshire</td><td>In Progress</td><td>20</td><td>01 Apr, 2024</td></tr><tr><td>Implement new Strategic Work Health and Safety Committee</td><td>Sue Wiltshire</td><td>Completed</td><td>100</td><td>19 Apr, 2023</td></tr><tr><td>Monitor implementation of Regulations and WALGA advice</td><td>Sue Wiltshire</td><td>Completed</td><td>100</td><td>03 Nov, 2022</td></tr></table></div>			Control Title	Control Owner	Control Effectiveness	Next Review Date	Work Health and Safety (WHS) Regulations and advice from WALGA/LGIS.	Sue Wiltshire	Substantially Effective	19 Apr, 2023	WHS Framework	Sue Wiltshire	Substantially Effective	01 Mar, 2024	WHS Committee	Sue Wiltshire	Substantially Effective	01 Jul, 2025	LGIS/WorkSafe Audit	Sue Wiltshire	N/A	01 Jul, 2023	Hazards Guidelines	Sue Wiltshire	Partially Effective	01 Apr, 2024	City of Kwinana Safety and Wellbeing Strategy 2022-2024	Sue Wiltshire	Substantially Effective	19 Apr, 2023	Risk Action Title	Responsible Officer	Action Status	% Completed	End Date	Continue to deliver training for key staff (including induction, where appropriate)	Sue Wiltshire	In Progress	50	19 Apr, 2023	Implement actions identified in GAP analysis.	Sue Wiltshire	Completed	100	31 Mar, 2023	Implement actions out of the City of Kwinana Safety and Wellbeing Strategy 2022-2024.	Sue Wiltshire	In Progress	20	01 Apr, 2024	Implement new Strategic Work Health and Safety Committee	Sue Wiltshire	Completed	100	19 Apr, 2023	Monitor implementation of Regulations and WALGA advice	Sue Wiltshire	Completed	100	03 Nov, 2022
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Risk Action Title	Responsible Officer	Action Status	% Completed	End Date
Undertake the role out of new WHS documentation to all teams within the City, advising them of the changes and their requirements	Sue Wiltshire	Not Started	0	01 Dec, 2023

SR16 Integrated planning requirements in accordance with the relevant legislation																												
Risk Categories: Legislative Compliance	Risk Owner: Alicia McKenzie Last Reviewed Date: 09 Feb, 2023 Next Review Date: 17 Nov, 2024																											
Individual Heatmap <p>Likelihood</p> <p>Consequence</p> <p>R Residual Risk Assessment</p> <p>Effectiveness of control</p> <p>R Fully Effective</p> <p>WITHIN APPETITE</p> <p>The appetite benchmark score is 9.000000 for this category</p>	Causes <ul style="list-style-type: none"> Failure to fulfill statutory regulations or compliance requirements Consequences <ul style="list-style-type: none"> Failure to correctly identify, interpret, assess, respond and communicate laws and regulations as a result of an inadequate compliance framework. This could result in fines, penalties, litigation or increase scrutiny from regulators or agencies. This includes, new or proposed regulatory and legislative changes, in addition to the failure to maintain updated legal documentation (internal and public domain) to reflect changes. This does not include Occupational Safety and Health Act (refer ""Inadequate safety and security practices"" or any Employment Practices based legislation (refer ""Ineffective Employment practices) It does include legislative based obligations for Local Government, such as the Local Government Act 1995. Risk Review Comments: The risk item has been reviewed, amendments have been made including the addition of further controls and actions.																											
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SR17 State Government Waste Avoidance and Resource Recovery Strategy 2030 requirement for 3-bin FOGO waste systems to be implemented across Perth and Peel by 2025																																									
Risk Categories: Legislative Compliance, Environmental, Financial, Reputation/Image		Risk Owner: Troy Morley	Last Reviewed Date: 19 Jul, 2023	Next Review Date: 30 Sep, 2025																																					
<p>Individual Heatmap</p> <p>R Residual Risk Assessment</p> <p>Effectiveness of control</p> <p>R Partially Effective</p>		<p>Causes</p> <ul style="list-style-type: none"> Change to the City's legislative obligations by State Government <p>Consequences</p> <ul style="list-style-type: none"> Financial implication estimated at approx \$1-2m to initially implement the 3-bin system and annual waste management costs will be increased. Non-compliance with State Government direction Reputation to State Government, other Local Governments and the public may be diminished. <p>Risk Review Comments: Feasibility Assessment project completed with the Feasibility Assessment Report endorsed by Council at the 28 June Ordinary Council Meeting with recommendations adopted. Feasibility Assessment has been provided to the Department for comment.</p> <p>Residual Controls</p> <table border="1"> <thead> <tr> <th>Control Title</th> <th>Control Owner</th> <th>Control Effectiveness</th> <th>Next Review Date</th> </tr> </thead> <tbody> <tr> <td>Undertake feasibility assessment of implementing a 3-bin system.</td> <td>Troy Morley</td> <td>Partially Effective</td> <td>20 Oct, 2022</td> </tr> <tr> <td>City of Kwinana Waste Plan 2021-25</td> <td>Troy Morley</td> <td>N/A</td> <td></td> </tr> </tbody> </table> <p>Residual Solutions</p> <table border="1"> <thead> <tr> <th>Risk Action Title</th> <th>Responsible Officer</th> <th>Action Status</th> <th>% Completed</th> <th>End Date</th> </tr> </thead> <tbody> <tr> <td>Assess initial viability of 3-bin system with Energy from Waste supply contract</td> <td>Troy Morley</td> <td>Completed</td> <td>100</td> <td>16 Apr, 2021</td> </tr> <tr> <td>Commit to feasibility assessment through adoption of City of Kwinana Waste Plan 2021-25</td> <td>Troy Morley</td> <td>Completed</td> <td>100</td> <td>10 Mar, 2021</td> </tr> <tr> <td>Participate in FOGO (Market) Feasibility for Perth and Peel Regions coordinated through Rivers Regional Council</td> <td>Troy Morley</td> <td>Completed</td> <td>100</td> <td>31 Dec, 2022</td> </tr> <tr> <td>Scope, procure and undertake City of Kwinana 3-bin feasibility assessment to determine optimal future delivery option</td> <td>Troy Morley</td> <td>Completed</td> <td>100</td> <td>30 Jun, 2023</td> </tr> </tbody> </table>			Control Title	Control Owner	Control Effectiveness	Next Review Date	Undertake feasibility assessment of implementing a 3-bin system.	Troy Morley	Partially Effective	20 Oct, 2022	City of Kwinana Waste Plan 2021-25	Troy Morley	N/A		Risk Action Title	Responsible Officer	Action Status	% Completed	End Date	Assess initial viability of 3-bin system with Energy from Waste supply contract	Troy Morley	Completed	100	16 Apr, 2021	Commit to feasibility assessment through adoption of City of Kwinana Waste Plan 2021-25	Troy Morley	Completed	100	10 Mar, 2021	Participate in FOGO (Market) Feasibility for Perth and Peel Regions coordinated through Rivers Regional Council	Troy Morley	Completed	100	31 Dec, 2022	Scope, procure and undertake City of Kwinana 3-bin feasibility assessment to determine optimal future delivery option	Troy Morley	Completed	100	30 Jun, 2023
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SR18

Community Engagement Practices

Risk Categories: Reputation/Image, Financial, Legislative Compliance, Service Delivery

Risk Owner: Alexi Peacock

Last Reviewed Date: 02 Jun, 2023

Next Review Date: 01 Aug, 2024

individual Heatmap

SR19 The City operating services and undertaking projects that are not aligned to the Strategic Community Plan and Corporate Business Plan																														
Risk Categories: Legislative Compliance		Risk Owner: Alicia McKenzie	Last Reviewed Date: 26 Apr, 2023 Next Review Date: 28 Aug, 2024																											
Individual Heatmap 		Causes <ul style="list-style-type: none"> Failure to fulfill statutory regulations or compliance requirements 																												
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Additional comments to note: The Quarter 4 (April to June 2023), Quarterly Performance Report regarding the Strategic Community Plan and Corporate Business Plan are currently being prepared and will be presented to Council at an Ordinary Council Meeting scheduled to be held on 13 September 2023.		The Team Business Templates have been circulated to all teams for completion, this is expected to be fully completed by September 2023.																												
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R Residual Risk Assessment

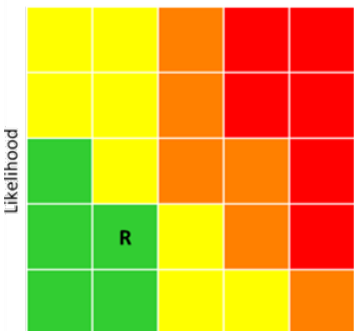
Effectiveness of control

R Substantially Effective

The appetite benchmark score is 9.000000 for this category

SR20	Under insuring assets resulting in insufficient insurance proceeds to fund projects if replacement required		
Risk Categories: Financial, ICT, Assets/Infrastructure	Risk Owner: Vanisha Govender	Last Reviewed Date: 02 Jun, 2023	Next Review Date: 18 Jul, 2023

Individual Heatmap



Consequence

R Residual Risk Assessment

Effectiveness of control	
R	Substantially Effective



WITHIN APPETITE

The appetite benchmark score is 9.000000 for this category

Causes

- Inaccurate asset valuations
- replacement costs

Risk Review Comments: Asset valued as per LG requirements or if FV have been impacted.

Consequences

- Insufficient insurance proceeds to fund project if replacement required

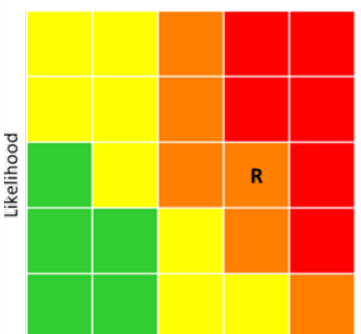

Residual Controls

Control Title	Control Owner	Control Effectiveness	Next Review Date
For each department across the City, cross check current asset list against assets insured	Vanisha Govender	Substantially Effective	01 Dec, 2023
Revaluation of assets	Vanisha Govender	Substantially Effective	30 Jun, 2025

Residual Solutions

Risk Action Title	Responsible Officer	Action Status	% Completed	End Date
Complete annual LGIS questionnaire, including checking with each department that all assets are adequately insured	Paula Hunt	Completed	100	31 Mar, 2022

SR23 Financial loss arising from inaccurate assessment of DCP infrastructure cost estimates resulting in inability to deliver required infrastructure																																				
Risk Categories: Financial, Reputation/Image, Service Delivery		Risk Owner: Pascal Balley	Last Reviewed Date: 24 May, 2023	Next Review Date: 19 May, 2026																																
<div>individual Heatmap</div> <div></div> <div>R Residual Risk Assessment</div> <div><div>Effectiveness of control</div><div>R Substantially Effective</div></div> <div></div>		<div><div>Causes</div><ul style="list-style-type: none">• Appointment of separate consultants for annual review of DCP calculations for landscaping for public open space, road drainage and road infrastructure resulted in incorrect infrastructure cost calculation figures not being identified.• Inaccurate assessment of costs. Lack of adequate information to guide DCP's infrastructure cost calculation and Cost Apportionment Schedule.<div>Risk Review Comments: DCP Audit has been conducted, audit findings have been provided to the finance team. The new process with regards to minimising the use of multiple consultants has been developed and is currently being undertaken/tested with regards to engagement of external consultant.</div><div>Risk reviewed 14/09/2022. Implementing tender to cover all estimates required for infrastructure. Contract will require consultant to directly enter estimates into costing system to remove risk of typographical error.</div><div>24/05/2023 - Still current as of May 2023</div><div>20/04/2023. Rawlinsons Cost Management (RCM) consultant has been appointed on a 3 year contract plus the possibility of extension by a 1year plus 1 year. RCM undertook a full DCP infrastructure cost review for Public Open Space, Drainage and Road infrastructure and develop a cost data management software to ensure direct and automated electronic information sharing between engineering and finance and prevent manual and second hand data input.</div></div> <div><div>Residual Controls</div><table><tr><th>Control Title</th><th>Control Owner</th><th>Control Effectiveness</th><th>Next Review Date</th></tr><tr><td>Developer Contributions Payment Audit</td><td>Pascal Balley</td><td>Substantially Effective</td><td>31 Dec, 2023</td></tr><tr><td>Minimise use of multiple external consultants where possible</td><td>Pascal Balley</td><td>Substantially Effective</td><td>24 May, 2024</td></tr></table><div>Residual Solutions</div><table><tr><th>Risk Action Title</th><th>Responsible Officer</th><th>Action Status</th><th>% Completed</th><th>End Date</th></tr><tr><td>Develop and implement processes to minimise use of multiple external consultants where possible.</td><td>Pascal Balley</td><td>Completed</td><td>100</td><td>21 Oct, 2022</td></tr><tr><td>Estimate of works costs to cover all works with a single consultant, and enter data directly into costing system.</td><td>Pascal Balley</td><td>Completed</td><td>100</td><td>31 Dec, 2022</td></tr><tr><td>Rawlinsons Cost Management has been appointed as sole quantity surveyor constant to manage the DCP infrastructure cost review, and apportionment schedule for (1) public Open Space, (2) Drainage and (3) Road infrastructure. The appointment is for 3 years plus the possibility of extension on 1 year + 1 year basis</td><td>Pascal Balley</td><td>Completed</td><td>100</td><td>19 Apr, 2024</td></tr></table></div>			Control Title	Control Owner	Control Effectiveness	Next Review Date	Developer Contributions Payment Audit	Pascal Balley	Substantially Effective	31 Dec, 2023	Minimise use of multiple external consultants where possible	Pascal Balley	Substantially Effective	24 May, 2024	Risk Action Title	Responsible Officer	Action Status	% Completed	End Date	Develop and implement processes to minimise use of multiple external consultants where possible.	Pascal Balley	Completed	100	21 Oct, 2022	Estimate of works costs to cover all works with a single consultant, and enter data directly into costing system.	Pascal Balley	Completed	100	31 Dec, 2022	Rawlinsons Cost Management has been appointed as sole quantity surveyor constant to manage the DCP infrastructure cost review, and apportionment schedule for (1) public Open Space, (2) Drainage and (3) Road infrastructure. The appointment is for 3 years plus the possibility of extension on 1 year + 1 year basis	Pascal Balley	Completed	100	19 Apr, 2024
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SR25 Impact of impending reform to the Retirement Villages Act 1992 on the City's ability to operate Banksia Park Retirement Estate																											
Risk Categories: Legislative Compliance, Financial, Reputation/Image		Risk Owner: Fiona Grieves	Last Reviewed Date: 02 Jun, 2023	Next Review Date: 30 Nov, 2023																							
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SR28		Impact of mandated transition from Federal to State industrial relations (IR) system on 1 January 2023																																								
Risk Categories: Financial, Legislative Compliance, Reputation/Image		Risk Owner: Sue Wiltshire		Last Reviewed Date: 25 May, 2023	Next Review Date: 31 Dec, 2024																																					
<p>Individual Heatmap</p> <p>Likelihood</p> <p>Consequence</p> <p>R Residual Risk Assessment</p> <p>Effectiveness of control</p> <p>R Partially Effective</p> <p>OUT OF APPETITE</p>		<p>Causes</p> <ul style="list-style-type: none"> Changes to legislation <p>Consequences</p> <ul style="list-style-type: none"> Financial loss to the City Loss of workforce Negative reputation from bad publicity Non-compliance with legislation <p>Risk Review Comments: The City's HR team continue to monitor the information being presented and attend information sessions held. The City is currently on schedule to transition to the new requirement by the 31 December 2024.</p> <p>Residual Controls</p> <table border="1"> <thead> <tr> <th>Control Title</th> <th>Control Owner</th> <th>Control Effectiveness</th> <th>Next Review Date</th> </tr> </thead> <tbody> <tr> <td>HR Strategic Project Officer</td> <td>Sue Wiltshire</td> <td>Fully Effective</td> <td>31 Dec, 2024</td> </tr> <tr> <td>Ensuring the City's compliance with amendments to Industrial Relations Act 1979 and Minimum Conditions of Employment Act 1993.</td> <td>Sue Wiltshire</td> <td>N/A</td> <td>06 Jun, 2023</td> </tr> </tbody> </table> <p>Residual Solutions</p> <table border="1"> <thead> <tr> <th>Risk Action Title</th> <th>Responsible Officer</th> <th>Action Status</th> <th>% Completed</th> <th>End Date</th> </tr> </thead> <tbody> <tr> <td>Consultation to take place with workforce regarding transition</td> <td>Sue Wiltshire</td> <td>Completed</td> <td>100</td> <td>06 May, 2023</td> </tr> <tr> <td>HR Strategic Project Officer</td> <td>Sue Wiltshire</td> <td>Completed</td> <td>100</td> <td>07 Feb, 2023</td> </tr> <tr> <td>HR Strategic Project Officer to undertake review of all relevant City policies and procedures.</td> <td>Sue Wiltshire</td> <td>In Progress</td> <td>90</td> <td>06 May, 2023</td> </tr> <tr> <td>Submit an application for the HR Strategic Project Officer to sit on WALGA State industrial relations working group</td> <td>Sue Wiltshire</td> <td>In Progress</td> <td>90</td> <td>01 Aug, 2023</td> </tr> </tbody> </table>				Control Title	Control Owner	Control Effectiveness	Next Review Date	HR Strategic Project Officer	Sue Wiltshire	Fully Effective	31 Dec, 2024	Ensuring the City's compliance with amendments to Industrial Relations Act 1979 and Minimum Conditions of Employment Act 1993.	Sue Wiltshire	N/A	06 Jun, 2023	Risk Action Title	Responsible Officer	Action Status	% Completed	End Date	Consultation to take place with workforce regarding transition	Sue Wiltshire	Completed	100	06 May, 2023	HR Strategic Project Officer	Sue Wiltshire	Completed	100	07 Feb, 2023	HR Strategic Project Officer to undertake review of all relevant City policies and procedures.	Sue Wiltshire	In Progress	90	06 May, 2023	Submit an application for the HR Strategic Project Officer to sit on WALGA State industrial relations working group	Sue Wiltshire	In Progress	90	01 Aug, 2023
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8.3 AUDIT ACTION LOG - PROGRESS REPORT

SUMMARY

The Audit and Risk Committee ('Committee') is responsible for assisting Council to discharge its responsibility to exercise due care, diligence, and skill in relation to the oversight of internal and external audits at the City.

Recommended areas of improvement identified through all internal and external auditing of the City are recorded and tracked within the City's audit log until such actions are finalised. A copy of the audit log, including updated comments from responsible officers, is presented as a standard item at each meeting of the Committee.

The City's audit log as at September 2023 is presented at Attachment A for noting by the Committee. New officer comments and any changes to completion dates are highlighted in red.

Actions arising from the recently completed Planning and Building internal audit by Paxon Group (Attachment B) have been added to the audit log.

Actions which were marked as finalised at the Committees meeting of 19 June 2023 and subsequently removed from the audit log are as follows:

- **Office of the Auditor General – General Computer Controls Review 2022**
 - a) EA: 2022/06 (1) Network Access Management – Generic Accounts
 - b) EA: 2022/06 (3) Financial System – User Access Management
 - c) EA: 2021/06 (2) Network – User Access Management
 - d) EA: 2021/06 (3) Physical and environmental security
 - e) EA: 2021/06 (4) Business Continuity
 - f) EA: 2021/06 (5) Network penetration management
 - g) EA: 2021/06 (7) Network password management

The following audits were recently undertaken at the City, with findings yet to be finalised:

- Interim finance audit by RSM;
- Information Technology General Controls (ITGC) audit by RSM; and
- Financial management systems and procedures review by RSM.

Finding will be presented at the next Committee meetings.

OFFICER RECOMMENDATION

That the Audit and Risk Committee:

1. **Note the status of previous audit recommended actions as detailed in Attachment A; and**
2. **Note the finding of the Planning and Building internal audit by Paxon Group as detailed in Attachment B.**

VOTING REQUIREMENT

Simple majority

DISCUSSION

Due to an increased focus on the accountability of local governments, a review of the effectiveness of all business processes is becoming best practice. Internal audit is one way to reduce risk and identify improvements in internal controls. There are many benefits to conducting internal audits, such as:

- improving the performance of the organisation.
- making the organisation process-dependent instead of person-dependent.
- identification of redundancies in operational and control procedures and the provision of recommendations to improve the efficiency and effectiveness of procedures.
- it serves as an early warning system, enabling deficiencies to be identified and remediated on a timely basis (i.e., prior to external, regulatory or compliance audits); and
- increases accountability within the organisation and supporting strategic objectives (for example cost reduction initiatives).

At its meeting of 13 October 2021, Council resolved to adopt the Strategic Internal Audit Plan 2021 /2022 to 2023/2024, a summary of which is as follows:

Area of Review	2021/22 (hours)	2022/23 (hours)	2023/24 (hours)
Planning & Building	80		
Asset Management	80		
Community Services – Events (Community Engagement, Resource Centre, Family Day Care, Events)	80		
Recquatic		80	
Environmental & Health Services/Waste		80	
Finance - Financial Management Regulation 5*		80	
Project/Program Management (Building, Operations & Engineering)		80	
Occupational Safety & Health / Human Resources			80
City Legal & Governance - Audit Regulation 17 (Legislative compliance, risk and internal control) *			80
Business Continuity/Disaster Recovery/Pandemic/Emergency Planning			80
Essential Services (Security, Rangers & Parking)			80
City Strategy			
Customer service			
Information Technology			
Contracts & Procurement	80		

The City's audit log showing all outstanding actions from previous audits is provided at Attachment A for noting.

STRATEGIC IMPLICATIONS

There are no strategic implications as a result of this proposal.

SOCIAL IMPLICATIONS

There are no social implications as a result of this proposal.

LEGAL/POLICY IMPLICATIONS

Section 7.13 of the *Local Government Act 1995* provides:

7.13. Regulations as to audits

- (1) *Regulations may make provision as follows —*
- (aa) *as to the functions of a CEO in relation to —*
 - (i) *a local government audit; and*
 - (ii) *a report (an **action report**) prepared by a local government under section 7.12A(4)(a); and*
 - (iii) *an audit report; and*
 - (iv) *a report on an audit conducted by a local government under this Act or any other written law;*
 - (ab) *as to the functions of an audit committee, including in relation to —*
 - (v) *the selection and recommendation of an auditor under Division 2; and*
 - (vi) *a local government audit; and*
 - (vii) *an action report; and*
 - (viii) *an audit report; and*
 - (ix) *a report on an audit conducted by a local government under this Act or any other written law;*
 - (ac) *as to the procedure to be followed in selecting an auditor under Division 2;*
 - (ad) *deleted]*
 - (ae) *as to monitoring action taken in respect of any matters raised in an audit report;*
 - (a) *with respect to matters to be included in an agreement in writing (**agreement**) made under section 7.8(1);*
 - (b) *for notifications and reports to be given in relation to an agreement, including any variations to, or termination of an agreement;*
 - (ba) *as to a copy of an agreement being provided to the Department;*
 - (c) *as to the manner in which an application may be made to the Minister for approval as an auditor under section 7.5;*
 - (d) *in relation to approved auditors, for the following —*
 - (i) *reviews of, and reports on, the quality of audits conducted;*
 - (ii) *the withdrawal by the Minister of approval as an auditor;*
 - (iii) *applications to the State Administrative Tribunal for the review of decisions to withdraw approval;*
 - (e) *for the exercise or performance by auditors of their powers and duties under this Part;*
 - (f) *as to the matters to be addressed in an audit report;*
 - (g) *requiring an auditor (other than the Auditor General) to provide the Minister with prescribed information as to an audit conducted by the auditor;*
 - (h) *prescribing the circumstances in which an auditor (other than the Auditor General) is to be considered to have a conflict of interest and requiring an auditor (other than the Auditor General) to disclose in an audit report such information as to a possible conflict of interest as is prescribed;*

- (i) *requiring local governments to carry out, in the prescribed manner and in a form approved by the Minister, an audit of compliance with such statutory requirements as are prescribed whether those requirements are —*
 - (i) *of a financial nature or not; or*
 - (ii) *under this Act or another written law.*
- (2) *Regulations may also make any provision about audit committees that may be made under section 5.25 in relation to committees.*

Regulation 16 of the *Local Government (Audit) Regulations 1996* provides:

16. Functions of audit committee

An audit committee has the following functions —

- (a) *to guide and assist the local government in carrying out —*
 - (i) *its functions under Part 6 of the Act; and*
 - (ii) *its functions relating to other audits and other matters related to financial management;*
- (b) *to guide and assist the local government in carrying out the local government's functions in relation to audits conducted under Part 7 of the Act;*
- (c) *to review a report given to it by the CEO under regulation 17(3) (the CEO's report) and is to —*
 - (i) *report to the council the results of that review; and*
 - (ii) *give a copy of the CEO's report to the council;*
- (d) *to monitor and advise the CEO when the CEO is carrying out functions in relation to a review under —*
 - (i) *regulation 17(1); and*
 - (ii) *the Local Government (Financial Management) Regulations 1996 regulation 5(2)(c);*
- (e) *to support the auditor of the local government to conduct an audit and carry out the auditor's other duties under the Act in respect of the local government;*
- (f) *to oversee the implementation of any action that the local government —*
 - (i) *is required to take by section 7.12A(3); and*
 - (ii) *has stated it has taken or intends to take in a report prepared under section 7.12A(4)(a); and*
 - (iii) *has accepted should be taken following receipt of a report of a review conducted under regulation 17(1); and*
 - (iv) *has accepted should be taken following receipt of a report of a review conducted under the Local Government (Financial Management) Regulations 1996 regulation 5(2)(c);*
- (g) *to perform any other function conferred on the audit committee by these regulations or another written law.*

FINANCIAL/BUDGET IMPLICATIONS

There are no financial implications that have been identified as a result of this report or recommendation.

ASSET MANAGEMENT IMPLICATIONS

There are no financial implications that have been identified as a result of this report or recommendation.

ENVIRONMENTAL/PUBLIC HEALTH IMPLICATIONS

No environmental or public health implications have been identified as a result of this report or recommendation.

COMMUNITY ENGAGEMENT

There are no community engagement implications as a result of this report or recommendation.

ATTACHMENTS

- A. City of Kwinana - Audit Log**
- B. Paxon - Audit Report - Planning and Building - August 2023**



AUDIT LOG

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AUDIT LOG

AUDITS UNDERTAKEN SINCE PREVIOUS AUDIT AND RISK COMMITTEE MEETING

Audit Details	Action	Approved Completion Date	Status	Proposed Completion Date															
Paxon - Building and Planning Internal Audit Review																			
<p>IA: 2023/08 (5.1) Pool Register Accuracy and Timely Inspection</p> <p>Finding Paxon reviewed a report of the register of pools extracted from Authority as at 18 January 2023 and noted there were a total of 1,860 pools, out of which 645 were scheduled for inspection in 2022/2023. There were 19 (1.0%) pools which were last inspected over four years ago which is non-compliant with the Building Regulations 2012 Part 8 Division 2, R.53.</p> <p>Through review of the last two DMIRS' progress reports on WA wide local government pool inspection status in 2020/21 and 2021/22 we noted that there were also overdue inspections during those periods, though the overdue % has decreased at the time of our review.</p> <table border="1"> <thead> <tr> <th>Year</th><th>Total no. of Pools</th><th>Number inspected</th><th>Overdue</th><th>Overdue %</th></tr> </thead> <tbody> <tr> <td>2020/21</td><td>1,779</td><td>325</td><td>78</td><td>4.4%</td></tr> <tr> <td>2021/22</td><td>1,834</td><td>421</td><td>100</td><td>5.5%</td></tr> </tbody> </table> <p>Paxon also selected a sample of 30 pools with coverage of different status within Authority e.g. compliant; non-compliant; removed; cancelled; completed; and returned to City from RLSSWA. We assessed the accuracy of the register and alignment of inspection status with underlying evidence such as inspection records and letters. Our testing identified in 4 of the sample of 30 pools the following inaccuracies:</p> <ul style="list-style-type: none"> • Brandon Mews, Parmelia - Pool was recorded as completed but had supporting evidence showing it was cancelled. • Gilmore Av, Medina - Pool was recorded as non-compliant but supporting evidence from 8/6/22 indicated it should be compliant. • Dargin Pl, Orelia - Pool was recorded as compliant, but 	Year	Total no. of Pools	Number inspected	Overdue	Overdue %	2020/21	1,779	325	78	4.4%	2021/22	1,834	421	100	5.5%	<p>Management Comment Building Services team in collaboration with the City Assist Compliance team have completed an entire review of the swimming pool inspection program including but not limited to the following actions:</p> <ul style="list-style-type: none"> • A full review of the City's live swimming pool register within Authority • Adding a column within the task list of Authority to include a due date to ensure the reports accurately reflect when the swimming pool is due for an inspection. • Training of Building Services Administration Officers in relation to updating and reporting of swimming pools within the live swimming pool register. • A review of the spreadsheet illustrating the inspections required to be completed by RLSSWA for 2021-2025. • Inspections and review of all swimming pools nominated as being removed/decommissioned to confirm actual status. • Creation of a separate spreadsheet highlighting all the swimming pools removed/decommissioned with the aim of removing all these pools from the live register and creating an archive register to be saved within CM9 for any required future reference. • A full review of any swimming pools that may have been missed or not noted on the current RLSSWA inspection list or still under construction. 	Completed	N/A	N/A
Year	Total no. of Pools	Number inspected	Overdue	Overdue %															
2020/21	1,779	325	78	4.4%															
2021/22	1,834	421	100	5.5%															



AUDIT LOG

evidence from 3/2/23 indicated a rusted fence that needed to be changed to meet compliance requirements.

- Parson Ave, Parmelia - Pool was recorded as compliant, but evidence showed it was referred back to the City from RLSWA on 22/8/22 so should have been recorded as returned to City or as decommissioned as this appears to be the status of the pool.

Recommendation

5.1.1 The overdue pools report should be re-run and all overdue pools scheduled for examination as soon as possible.

5.1.2 Implement a process of regular monitoring and spot checks to verify and validate the accuracy of the register and the status of pools. This should include pools of different status to ensure accuracy, time elapsed since last inspection and ensuring that non-compliant pools are followed-up on a timely basis.

The City is implementing the TechOne system which has the potential for greater reporting functionality including live dashboard reporting that could be considered as a longer-term solution.

Risk Rating

High

- The introduction of modified penalties for any owners/occupiers reluctant to comply with the legislated requirements.

- The City has introduced a six-monthly review of the active and archived swimming pool live registers to ensure accuracy of reporting and status of compliance, with the next scheduled review to be undertaken in November 2023.

These action and others have resulted in the City reporting back to DMIRS that only 4 swimming pools were pending compliance for the four yearly-mandated swimming pool safety barrier inspections, however these have all had an initial inspection completed but were pending items of non-compliance noted at time of inspection to be completed.

The swimming pools noted within the report for have differences in reporting of compliance or non-compliance have all been reviewed and the current information recorded within Authority is true and correct. It appears that you have looked at Authority and noted that the swimming pools were listed as Compliant or Not Compliant but may have not considered the 'Date' of that compliance or non-compliance determination being made.

In Authority, the City maintains a record of the status of the barrier (compliant or non-compliant) and the date/time that record was completed. In addition to this within the same register in Authority the City also has ongoing tracking steps/notes with regards to the booking in and undertaking of ongoing inspections.



AUDIT LOG

For example: A Compliant pool might have a ROC against it dated 16/08/2019 – but have additional tracking steps relating to ongoing inspections in 2023 due to potential non-compliance issues post the 2019 inspection.

I am confident that the City is taking the correct actions to ensure swimming pool legislation is being met and with addition of OneCouncil we will have a more accurate overview and reporting of the City's position regarding swimming pool compliance.

Responsible Officer
Manager Building Services



AUDIT LOG

Audit Details	Action	Approved Completion Date	Status	Proposed Completion Date
Paxon - Building and Planning Internal Audit Review				
<p>IA: 2023/08 (5.2) Pool Inspection Information</p> <p>Finding As part of our review Paxon examined reports derived from Authority including the Mandatory Pool Inspections 2021-25 and the DMIRS Swimming Pool Report, which is another internal report generated from Authority. The Mandatory Pool Inspections report contains a comprehensive list of pool inspections required for each year until 2025, serving as a useful resource for creating an inspection timeline. The DMIRS Swimming Pool Report has been modified by the Manager Building Services to include compliance status and referrals to specific staff members responsible for certain pools.</p> <p>Paxon noted differences between the DMIRS Swimming Pool Report and the Mandatory Pool Inspections 2021-25.</p> <p>Whilst we realise that excel reports from the system may be used for work scheduling, Authority needs to remain the single source of truth for pools, their status, supporting evidence and recording all interaction with the customer.</p> <p>Recommendation Exports from the system should be used for scheduling, but updates in status of pools should only be performed within Authority so that all officers have access to the most accurate and up to date information available and monitoring of pools status can be performed effectively.</p> <p>Risk Rating High</p>	<p>Management Comment The items of risk illustrated within the report were entirely correct at time of my commencement with the City in April 2022 and possibly up to January 2023 as indicated, however since that time the City's Building Services team in collaboration with the City Assist Compliance team have completed an entire review of the swimming pool inspection program including but not limited to the following actions:</p> <ul style="list-style-type: none"> • A full review of the City's live swimming pool register within Authority. • Adding a column within the task list of Authority to include a due date to ensure the reports accurately reflect when the swimming pool is due for an inspection. • Training of Building Services Administration Officers in relation to updating and reporting of swimming pools within the live swimming pool register. • A review of the spreadsheet illustrating the inspections required to be completed by RLSSWA for 2021-2025. • Inspections and review of all swimming pools nominated as being removed/decommissioned to confirm actual status. • Creation of a separate spreadsheet highlighting all the swimming pools removed/decommissioned with the aim of removing all these pools from the live register and creating an archive register to be saved within CM9 for any required future reference. • A full review of any swimming pools that may have been missed or not noted on the current RLSSWA 	Completed	N/A	N/A



AUDIT LOG

inspection list or still under construction.

- The introduction of modified penalties for any owners/occupiers reluctant to comply with the legislated requirements.

- Suitable training has been provided to all officers involved within the City's swimming pool compliance program, which includes but is not limited to all Building Surveyors, Building Services Administration Officers and the City's Compliance Officers to ensure consistency with data entry within Authority and when reviewing and updating the live swimming pool registers. Attendance to swimming pool compliance seminars/information sessions hosted by the States regulatory bodies. The City's Building Surveyors and Compliance Officers recently attended an information session hosted by DMIRS on the proposed swimming pool compliance regulations to be introduced in the near future. The information gained from this information session will be passed onto all City officers involved in the swimming pool compliance program.

These action and others have resulted in the City reporting back to DMIRS that only 4 swimming pools were pending compliance for the four yearly-mandated swimming pool safety barrier inspections, however these have all had an initial inspection completed but were pending items of non-compliance noted at time of inspection to be completed.

The swimming pools noted within the report for have differences in reporting of compliance or non-compliance have all been reviewed and the current



AUDIT LOG

information recorded within Authority is true and correct. it appears that you have looked at Authority and noted that the swimming pools were listed as Compliant or Not Compliant but may have not considered the 'Date' of that compliance or non-compliance determination being made.

In Authority, the City maintains a record of the status of the barrier (compliant or non-compliant) and the date/time that record was completed.

In addition to this within the same register in Authority the City also has ongoing tracking steps/notes with regards to the booking in and undertaking of ongoing inspections. For example: A Compliant pool might have a ROC against it dated 16/08/2019 – but have additional tracking steps relating to ongoing inspections in 2023 due to potential non-compliance issues post the 2019 inspection.

I am confident that the City is taking the correct actions to ensure swimming pool legislation is being met and with addition of OneCouncil we will have a more accurate overview and reporting of the City's position regarding swimming pool compliance.

Responsible Officer
Manager Building Services



AUDIT LOG

Audit Details	Action	Approved Completion Date	Status	Proposed Completion Date
Paxon - Building and Planning Internal Audit Review				
IA: 2023/08 (5.3) Pool Inspection Information				
<p>Finding</p> <p>Paxon reviewed the monthly and quarterly management information reporting to assess the effectiveness and adequacy of team performance and compliance with timeline requirements at the City for Verge, Planning, Development and Building Applications.</p> <p>In general there is adequate information in place, but with some limitations:</p> <ul style="list-style-type: none"> • The Authority system is not equipped to effectively handle and report against specified deadlines. Because of this information is extracted from the Authority system using crystal reports and then transferred onto spreadsheets. • The current reporting does not include information on the duration or number of days taken for each application. Instead, it focuses solely on compliance with the statutory time frame. This limitation may hinder the ability to analyse workload distribution, identify bottlenecks and implement targeted improvements that may benefit community. <p>Recommendation</p> <p>Improvements to management information should be considered to include the actual number of days taken in assessment/processing and also their complexity.</p> <p>Risk Rating</p> <p>Low</p>	<p>Management Comment</p> <p>Unfortunately as the City is moving away from Authority and actively moving toward having OneCouncil as the City's operating program together with having limited Staff within the City's current IT team that have the level of expertise required to make required changes within Authority, I have continued to work out the correct turn-around times by reviewing each application which I provide within a monthly report to the Director Community Development & Sustainability. This is tedious task, which will hopefully be rectified in the near future with assistance from the City's IT department.</p> <p>Responsible Officer</p> <p>Manager Building Services</p>	TBC		TBC



AUDIT LOG

ITEMS OUTSTANDING FROM PRIOR AUDITS

Audit Details	Action	Approved Completion Date	Status	Proposed Completion Date
Paxon - Reg 17 Review EA: 2021/05 (7) Disaster Recovery Plan Finding The City's Disaster Recovery Plan is outdated (2018) V2 and still includes names of previous CEO and officers. Reference to COVID-19 situations are not included. Paxon have been advised that a Cloud Disaster Recovery is being sourced. Recommendation The City should ensure updated Disaster Recovery Plan is updated to align with Cloud DR. Risk Rating Medium	Management Comment Agree to recommended action. Responsible Officer Manager Governance and Legal	1 December 2021	Whilst the City has a Disaster Recovery Plan, it is high level and outdated in parts. The City has retained an external consultant, namely Riskwest, to review the existing plan and prepare a new plan suited to the City's needs. A two-hour workshop is scheduled for 1 March 2023 with the Leadership Team and other managers to build better awareness of business continuity and the City's business priorities for recovery when a major disruption occurs. Workshop objectives: <ul style="list-style-type: none"> • To build an understanding of the basic principles of incident and business continuity response • To build better awareness of the roles and responsibilities for coordination, decision-making, and communications during a disruptive event • To reassess the business priorities for recovery and validate these against the City's existing business continuity arrangements • To identify opportunities for improving the City's response plans and capabilities 26/04/2023 – Manager Governance and Legal: The workshop has now been completed by Riskwest, who are moving to phase two involving: <ul style="list-style-type: none"> ▪ Develop and document a BCM policy and framework ▪ Revise the business impact 	September 2023

AUDIT LOG



analysis (BIA) methodology and update the priorities of services and functions undertaken

- Develop new business continuity plans (BCPs)
- Conduct plan walkthrough sessions with business areas

05/06/2023 Manager Information Technology:

The City has an IT DR plan which has yearly reviews (monitored via the City's audits). This only addresses IT matters. Riskwest are addressing organisation wide disaster recovery.

06/06/2023 Governance and Risk Officer:

Recently, Riskwest completed a desktop review and gap analysis of the City of Kwinana's (the City's) business continuity management (BCM) program against contemporary BCM standards and better practice and provided a number of recommendations for improvement. The City has moved onto Phase Two of these recommendations and will be commencing work mid-July, in partnership with Riskwest to deliver its BCM Policy and Framework, Strategic Business Impact Analysis, BCP Development and walkthrough.

23/08/2023 Governance and Risk Officer:

Riskwest have met with all directorates and will provide draft documentation shortly.



AUDIT LOG

Audit Details	Action	Approved Completion Date	Status	Proposed Completion Date
Paxon - Contracts and Procurement Strategic Internal Audit				
IA: 2022/11 (5.2) Procurement Monitoring				
<p>Finding</p> <p>Monitoring of procurement activity such as overall expenditure and the existence of contracts and invoice received before purchase order is raised is in place to assess compliance. The latter was commenced in July 2018 and since then the levels of purchase order being raised after invoice has decreased from over 200 a month to around 30.</p> <p>5.1.1 Within our sample we identified two invoices that were received before purchase orders were raised for PO 137423 (RFQ 132/18 Corporate Business System) and PO 131661 (approval of procurement).</p> <p>5.1.2 There is no monitoring in place to identify if purchase order splitting is occurring to avoid delegation or tender thresholds.</p> <p>Paxon's testing did not indicate any instances where purchase order splitting had occurred.</p> <p>Lack of monitoring of procurement may result in inappropriate procurement processes being performed.</p> <p>Recommendation</p> <p>5.2.1 Continued effort should be made to eradicate the practice of purchase order being raised after invoice, including training and reiteration of expected process.</p> <p>5.1.2 The practice of monitoring for purchase orders raised for the same supplier on the same day or within a few days should be introduced.</p> <p>Risk Rating</p> <p>Medium</p>	<p>Management Comment</p> <p>Acknowledge the above and agree with the recommendations concerning PO's. Training already happens. City will review training practices and identify areas of improvement.</p> <p>In relation to splitting PO's, the City will explore with its specialist support consultant the viability of adding limitations within OneCouncil.</p> <p>Responsible Officer</p> <p>Manager ICT/Chief Financial Officer</p>	July 2023	<p>The City provides a report to senior managers each month providing a list of any occurrence of a purchase order being raised after the invoice has been received. This report is monitored, and where necessary investigated. A significant reduction in occurrences has resulted from his process. With the new corporate business system, the ability to update orders will further reduce the incidence of purchase orders being raised after an invoice is received.</p> <p>The Procurement and Contracts team run a report at least once a year, to look for high-expenditure with a single supplier where an ongoing contract is not in place. Where these occurrences are identified, the Procurement and Contracts team speak with the responsible manager and review the purchasing processes used to engage the supplier. Where appropriate in the circumstance, the Procurement and Contracts team may recommend a longer-term contract be established. Forming longer-term contracts may assist with reducing the number of purchase orders raised and/or provide administrative efficiencies.</p> <p>17/02/2023 – Coordinator Procurement and Contracts: Recommendation 1 – Finance have run reports on PO's raised after the invoice and have sent to departments for input on why these instances occur. Following that will be increased training and monitoring.</p> <p>Also, advice to be included in next weeks CEO weekly update advising of</p>	<p>July 2023</p> <p>Closed</p>

AUDIT LOG



the city's expectation and process relating to PO's after invoices.

Recommendation 2 – remains in progress

31/03/23 – Coordinator Procurement and Contracts:
Complete and now ongoing practice.

Recommendation 1 – Process implemented to work toward eradication. Ongoing practice.

Recommendation 2 – Management comment relating to system limitations is redundant. Monitoring practice implemented and this monitoring will continually be enhanced as we gather data and learnings.

14/08/2023 – Coordinator Procurement and Contracts:
This item can be closed – this monitoring is now part of process. The City audits monthly for PO splitting, PO exemption use and PO amendments.



AUDIT LOG

Audit Details	Action	Approved Completion Date	Status	Proposed Completion Date
Paxon - Contracts and Procurement Strategic Internal Audit				
IA: 2022/11 (5.4) Contract Management Framework Finding Within the 'Procurement Procedure for Procurement of Good & Services 2021' is documented a high level guide to contracting and contract management. However, this is not detailed and does not provide specific expectations or templates that could be used, so is open to interpretation as to how it should be implemented. It was also noted that contract management is paper based and a system could be considered to better enable contract management processes and their monitoring and reporting. High level guidance for contract management leading to inconsistent interpretation and implementation. Recommendation More detailed guidance on contract management should be developed and implemented to provide consistency of expectation and operational contract management processes. This could include a system including templates, monitoring activity, supplier KPI monitoring, audit and quality assurance practice, contract close out and renewal. Risk Rating Medium	Management Comment Agree with the recommendation. Although the current procedures link to various promapps that do contain some templates and guidance, this does not deter from the fact that improvement can be made in areas as identified. The City shall review current high level documentation to formalise processes and develop appropriate framework and templates, exploring the capabilities of the OneCouncil system also. Responsible Officer Coordinator Procurement and Contracts	August 2023	17/02/2023 – Coordinator Procurement and Contracts: Remains in progress 31/03/2023 – Coordinator Procurement and Contracts: Drafting of new Contract Management Framework has commenced, and is on schedule to be rolled out by August 2023. 14/08/2023 – Coordinator Procurement and Contracts: Due to staff movements, there has not been opportunity to complete the Contract Management Framework. An extension is required until November 2023. The team are considering the training requirements at the same time and need time to ensure the Framework contains the relevant content that will appropriately flow into the applicable training activities.	August 2023 November 2023



AUDIT LOG

Audit Details	Action	Approved Completion Date	Status	Proposed Completion Date
Paxon - Contracts and Procurement Strategic Internal Audit				
IA: 2022/11 (5.5) Financial Delegation Finding Each year a memo is sent from the Chief Financial Officer to the Chief Executive Officer detailing positions and their delegated authority limits for approval and payment. This memo was obtained and compared to the delegations set up within the finance system to compare the designed limit control with the actual limits in place. It was noted that one officer has an authorisation of \$40,000 as opposed to their usual limit of \$10,000. The officer acts up regularly in a position with a delegation of \$40,000 however, at the end of the acting-up period the delegation had not reverted to its normal level of \$10,000. Delegated limits are not system enforced. Recommendation After the acting up period is over the system should immediately revert back to the original delegation limit. If possible this should be done automatically by including a date for the delegation to revert or alternatively through regular comparison of the memo limits to the system. Risk Rating Low	Management Comment In the City's old Authority/Civica system, the end dates were entered and automatically reverted back, with the one exception as listed above. City implemented new OneCouncil System in July 2022. In regards to delegations now, the process of delegation means that a persons personal delegations are not increased, they have access to delegation of the position they are covering. Which is set for a specific time period and their access to this position is revoked at the end. This is all automatic so does not have the issue of being forgotten or accidentally missed or changed. Responsible Officer Coordinator Finance/ Information Technology Manager	30 June 2023	17/4/2023 Manager Information Technology: New workflow has been logged with IT and consultant is currently working with a solution. 23/08/2023 Manager Information Technology: Implementation of OneCouncil at the City has resolved this concern and the action may be closed. A workflow is inbuilt within the OneCouncil system to revert officers to their original role and financial delegation at the conclusion of any acting period.	Completed



AUDIT LOG

Audit Details	Action	Approved Completion Date	Status	Proposed Completion Date
Office of the Auditor General - Financial Statements Audit 2022				
EA: 2022/06 (1) Infrastructure Valuation	Management Comment	30 June 2023	In progress. Draft is 70% complete and addresses the process of valuations, recovery of project management and design costs, traffic management and the application of asset condition assessments to determine remaining useful life.	30 June 2023
Finding During financial year ending 30 June 2022, management conducted an in-house revaluation of the entire infrastructure class of assets. As with any valuation exercise, the revaluation included a number of inputs that are subject to significant judgement. In our review of the valuation, we noted the following area which significant judgement has been applied: Project management costs: Management has applied a 15% markup to the costs of materials and services (applied to roads, footpaths, carparks, parks, and ovals). This markup is in relation to survey, design and project management costs conducted inhouse. Management used a historical rate of 15% which has been used in the previous years. Management does not have a formal policy to determine and retest the validity of the markup on a regular basis. Management have since provided a calculation to support the markup percentage. Although the methodology appears reasonable, it is difficult to ascertain the accuracy of the number as it has been performed on an adhoc basis just for one year. Given the significant value of Infrastructure assets, even small variations in judgement can lead to a material change to the fair value.	Agree. The accounting for the allocation of design and project management costs should be clear within the financial statements, with the costs offset against an income account that is funded as a charge to capital projects. This approach will create a clear connection between the costs and the delivered projects. Responsible Officer Director City Infrastructure/Chief Financial Officer		13/06/2023: Draft is now 98% completed. CEO will sign off upon return from leave. 11/08/2023 Director City Infrastructure: Complete and approved by CEO.	Completed
Recommendation The City should consider engaging an independent third-party valuer to assess the fair value of assets on a periodic basis to ensure that management's valuation methodology and techniques are current and the valuation can be validated.				
Risk Rating Moderate (Medium)				



AUDIT LOG

Audit Details	Action	Approved Completion Date	Status	Proposed Completion Date
Office of the Auditor General - Computer Controls Review 2022				
EA: 2022/06 (2) Network Security Management	Management Comment Agree. The draft IT Strategy includes using the SIEM system to address this deficit.	30 December 2023	In progress.	30 December 2023
Finding Effective monitoring and logging mechanisms provide the ability to track user activities in preventing, detecting, or minimising the impact of a security / data compromise. The presence of logs in all environments allows thorough tracking, alerting, and analysis. The cause of a compromise is very difficult, if not impossible, to determine without system activity logs. We identified that the City's systems have the capability to produce network and system logs. However, logs are only reviewed when incidents are reported and are not actively monitored. Further, there is no technology that supports threat detection, compliance and security incident management through the collection and analysis (both near real time and historical) of security events, as well as a wide variety of other event and contextual data sources. Without effective logging and monitoring processes, there is an increased risk that the City will not be able to detect and or respond to unauthorised access or malicious activity. This could lead to potential downtime, unauthorised access, loss or compromise of confidential or critical information and data.	Responsible Officer Manager Information Technology		05/05/2023 Manager Information Technology: There is a timeline of works being followed and this action has been prioritised to be addressed by December 2023. 23/08/2023 Manager Information Technology: Implementing system now, with work continuing. Expected completion date remains December 2023.	
Recommendation The City should: <ul style="list-style-type: none"> • Develop, document and implement appropriate security logging and monitoring processes and requirements • Conduct appropriate independent routine reviews of the key system / activity logs • Consider appropriate technology that supports threat detection, compliance and security incident management through the collection and analysis of security events to ensure adequate protection in preventing, detecting, or minimising the impact of a security / data compromise. (E.g., Security information and event management (SIEM) technology). 				

AUDIT LOG

Risk Rating

Moderate (Medium)





AUDIT LOG

Audit Details	Action	Approved Completion Date	Status	Proposed Completion Date
Office of the Auditor General - General Computer Controls Review 2021				
EA: 2021/06 (6) IT governance - policies and procedures	2021 Management Comment A new ICT Strategic Plan will be developed. Formally documented ICT governance policies and standards will be addressed by a Cyber Security Policy and Manual that is currently being developed. Where appropriate, processes and controls will be implemented to address these findings. The network diagram is being updated to reflect the current architecture.	2021 Completion Date 31 December 2021 - Cyber Security Policy and Manual 30 June 2022 - ICT Strategic Plan	05/05/2023 Manager Information Technology: The Strategy has been prepared and has been presented to ELT for approval and implementation. They have requested further visionary statements. Currently with external consultant. To be finalised current financial year.	30 March 2023 Completed
2021 Finding When reviewing the City's IT policies and procedures we identified the 'Acceptable Use of IT Systems' policy has not been reviewed since November 2007 and there were no formal policies and procedures for the following key IT functional areas: <ul style="list-style-type: none"> Information security, objectives, principles, responsibilities and compliance requirements; Incident management (Handling of security breaches and or inappropriate use); System and user password requirements and configuration; Protection from malware and malicious code; User access / remote access / wireless networks management (Granting / revoking access to systems); Review and monitoring of user access / System audit logging and monitoring; Restrictions on software user and installations; Mobile device management / Data loss prevention management; Information system back-up and recovery; and IT asset management and disposal. <p>In addition to this we noted the following:</p> <ul style="list-style-type: none"> the City's network diagram is not periodically reviewed to ensure the diagram accurately reflect the City's current network architecture; and the City's IT Strategy (2016 to 2020) has not been reviewed and updated to be aligned to the City's business strategy for the current and future financial years. <p>2022 Status The City has developed a Cyber Security Manual which includes the relevant IT functional areas identified in our previous audits.</p> <p>However, we identified that the City does not have a current up to date IT strategy aligned to the City's business strategy for the current and future financial years.</p>	2021 Responsible Officer Manager Information Technology (new incumbent)	2022 Completion Date 30 March 2023	23/08/2023 Manager Information Technology: Draft ICT Digital Strategy document has now finalised. This action can now be closed. This action was identified in the 2023 OAG audit, as the document was still in draft at the time.	
	2022 Management Comment Agree. IT Strategy is currently being finalised.			
	2022 Responsible Officer Manager Information Technology			



AUDIT LOG

We acknowledge that the City is in the process of developing an appropriate IT strategy.

Without an appropriately documented and approved IT strategic plan, there is an increased risk that IT resources (e.g. finance, systems and people) will not be aligned to the City’s strategy and priorities.

Recommendation

The City should develop, approve, implement and communicate IT Strategies to all key stakeholders to ensure that IT investments support business objectives.

Risk Rating

Minor (Low)

PAXON

CITY OF KWINANA

Building and Planning Internal Audit Review

Version 1.0 | September 2023

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1. INTRODUCTION

1.1 Background & Objective

The City of Kwinana's "Strategic Internal Audit Plan - 2021/2022 to 2023/2024" provides for the conduct of a planning and building internal audit. The overall objective for this internal audit is to provide assurance that effective and efficient processes and controls are in place for planning and building systems and processes.

The registers for pools and other areas of planning and compliance are contained within Authority and information recorded within Content Manager. Most areas of inspection are performed in-house, with Royal Life Saving WA (RLSWA) providing an outsourced pool inspection service in conjunction with the City's inspection team.

1.2 Risks & Scope

Operational Risks 9, 10, 29, 31, 32, 33, 34, 35, 36, 38, 43

The internal audit review included assessment of the following processes and controls for their design and operational effectiveness:

- Pool inspections are not performed in line with regulation:
 - o Processes for performing inspections, including monitoring and exception reporting e.g. time expired since last inspection
 - o Addition and removal of pools from the register
 - o Notification to residents of results of inspections, infringements and legal proceedings
 - o Follow up of pools where inspection cannot be performed or reinspection
 - o Appropriate records are kept of inspections
- The monitoring of timeframes and team performance for processing verge, development and building applications
- Training of staff, and
- The availability of educational process information for the community

The review covered systems and processes in place during the period from February – June 2023 and performed testing of the pools register as at 18 January 2023.

2. EXECUTIVE SUMMARY

Paxon's work has highlighted that there is non-compliance with the Building Regulations as inspection of pools is not being performed in all cases to meet the required four year timeframe for inspection. It was noted that this is an on-going risk for the City as the Department of Mines, Industry Regulation and Safety (DMIRS) annual report on local government pool inspections has highlighted in 2020/21 and 2021/22.

It was noted that exported information from the Authority Pool Register is being used to allocate inspections to staff, but they are also being updated for the status of pools post inspection. Testing identified that in 4 out of 30 pools tested, the status within Authority did not align with underlying inspection information that was provided to us. This would indicate that Authority is not being used as the sole source of truth for pool inspections, which may contribute to the non-compliance.

It was also noted that the management reporting used to monitor team performance in processing applications focusses on compliance/non-compliance and does not also provide the number of actual days taken to process, which could be used to monitor team workload, identify bottlenecks and potentially improve outcome for community in terms of quicker processing, not just compliance/non-compliance.

The City is in the process of implementing TechOne which is estimated go live for the Planning and Building modules in the 4th Quarter of 2024 with a budget for training staff in place, which should help to improve the management information available.

Our findings are summarised below and documented in detail within section 5 of this report. The management comment and action have not been audited.

We would like to thank all officers that assisted with the performance of this review.

Risk Area	Finding	Risk Rating
Pool Inspections	Pool Register Accuracy and Timely Inspection	High
Reporting	Pool Inspection Information	High
Reporting	Management Information	Low

Given the ratings of the findings above in relation to pool inspection compliance and the enhancements to management information and monitoring of performance to ensure compliance, we would recommend that risks within the Risk Register are reassessed by Management to reflect the results of this review, as they are generally rated as a Low residual risk.

2.1 Good Practice

Based upon the work performed during this review the following areas were noted as having appropriate practice in place:

- Processes by design are compliant, and
- There is good availability of educational process information for the Community.

3. METHODOLOGY

Our methodology for this review comprised of the following steps:

- Conducted an initial meeting with management to obtain an understanding of processes and potential issues;
- Developed overview documentation of the processes including key controls by discussion with staff and review of the processes;
- Evaluated the effectiveness of the design of controls to cover the identified risk and tested the operation of the key controls;
- Followed up and confirmed action taken on any previous business issues identified and recommendations made;
- Researched the issues, weaknesses and potential improvements noted from our discussions and review of the existing processes and identified key controls;
- Developed appropriate recommendations for improvement for discussion with management;
- Drafted a report of findings and recommendations and obtained formal responses from management; and
- Finalised the report and issued it to Management for distribution to the Audit and Risk Committee.

Each finding detailed in section 5 is rated based on the following scale:

Rating	Definition
High	Major contravention of policies, procedures or laws, unacceptable internal controls, high risk for fraud, waste or abuse, major opportunity to improve effectiveness and efficiency, major risk identified. Immediate corrective action is required. A short-term fix may be needed prior to it being resolved properly.
Medium	Moderate contravention of policies, procedures or laws, poor internal controls, significant opportunity to improve effectiveness and efficiency, significant risk identified. Corrective action is required. Need to be resolved as soon as resources can be made available, but within six months.
Low	Minor contravention of policies and procedures, weak internal controls, opportunity to improve effectiveness and efficiency, moderate risk identified. Corrective action is required. Need to be resolved within twelve months.



4. INHERENT LIMITATIONS

Due to the inherent limitations in any internal control structure, it is possible errors or irregularities may occur and not be detected. Further, the internal control structure, within which the control procedures that have been reviewed operate, has not been reviewed in its entirety and therefore no opinion is expressed as to the effectiveness of the greater internal control structure.

It should also be noted our review was not designed to detect all weaknesses in control procedures as it was not performed continuously throughout the period subject to review.

The review conclusion and any opinion expressed in this report have been formed on the above basis.

5. DETAILED AUDIT FINDINGS

5.1 Pool Register Accuracy and Timely Inspection

Audit Finding

Paxon reviewed a report of the register of pools extracted from Authority as at 18 January 2023 and noted there were a total of 1,860 pools, out of which 645 were scheduled for inspection in 2022/2023. There were 19 (1.0%) pools which were last inspected over four years ago which is non-compliant with the Building Regulations 2012 Part 8 Division 2, R.53.

Through review of the last two DMIRS' progress reports on WA wide local government pool inspection status in 2020/21 and 2021/22 we noted that there were also overdue inspections during those periods, though the overdue % has decreased at the time of our review.

Year	Total no. of Pools	Number inspected	Overdue	Overdue %
2020/21	1,779	325	78	4.4%
2021/22	1,834	421	100	5.5%

Paxon also selected a sample of 30 pools with coverage of different status within Authority e.g. compliant; non-compliant; removed; cancelled; completed; and returned to City from RLSWA. We assessed the accuracy of the register and alignment of inspection status with underlying evidence such as inspection records and letters.

Our testing identified in 4 of the sample of 30 pools the following inaccuracies:

- Pool was recorded as completed but had supporting evidence showing it was cancelled.
- Pool was recorded as non-compliant but supporting evidence from 8/6/22 indicated it should be compliant.
- Pool was recorded as compliant, but evidence from 3/2/23 indicated a rusted fence that needed to be changed to meet compliance requirements.
- Pool was recorded as compliant, but evidence showed it was referred back to the City from RLSWA on 22/8/22 so should have been recorded as returned to City or as decommissioned as this appears to be the status of the pool.

Please note these addresses will be removed from final version report.

Risk Rating

Paxon has determined this finding to be of **High Risk**

Implication

- As pools go further past the 4-year regulatory inspection time period they are more likely to be a safety risk to the community.
- The City is non-compliant with regulation due to lack of clear oversight due to inaccuracy or untimely recording of information within the pools register.

Recommendation

- 5.1.1 The overdue pools report should be re-run and all overdue pools scheduled for examination as soon as possible.
- 5.1.2 Implement a process of regular monitoring and spot checks to verify and validate the accuracy of the register and the status of pools. This should include pools of different status to ensure accuracy, time elapsed since last inspection and ensuring that non-compliant pools are followed-up on a timely basis.

The City is implementing the TechOne system which has the potential for greater reporting functionality including live dashboard reporting that could be considered as a longer term solution.

Management Comment & Action

Building Services team in collaboration with the City Assist Compliance team have completed an entire review of the swimming pool inspection program including but not limited to the following actions:

- A full review of the City's live swimming pool register within Authority
- Adding a column within the task list of Authority to include a due date to ensure the reports accurately reflect when the swimming pool is due for an inspection.
- Training of Building Services Administration Officers in relation to updating and reporting of swimming pools within the live swimming pool register.
- A review of the spreadsheet illustrating the inspections required to be completed by RLSSWA for 2021-2025.
- Inspections and review of all swimming pools nominated as being removed/decommissioned to confirm actual status.
- Creation of a separate spreadsheet highlighting all the swimming pools removed/decommissioned with the aim of removing all these pools from the live register and creating an archive register to be saved within CM9 for any required future reference.
- A full review of any swimming pools that may have been missed or not noted on the current RLSSWA inspection list or still under construction.
- The introduction of modified penalties for any owners/occupiers reluctant to comply with the legislated requirements.

These action and others have resulted in the City reporting back to DMIRS that only 4 swimming pools were pending compliance for the four yearly-mandated swimming pool safety barrier inspections, however these have all had an initial inspection completed but were pending items of non-compliance noted at time of inspection to be completed.

The swimming pools noted within the report with differences in reporting of compliance or non-compliance have all been reviewed and the current information recorded within Authority is true and correct.

In Authority, the City maintains a record of the status of the barrier (compliant or non-compliant) and the date/time that record was completed. In addition to this within the same register in Authority the City also has ongoing tracking steps/notes with regards to the booking in and undertaking of ongoing inspections.

I am confident that the City is taking the correct actions to ensure swimming pool legislation is being met and with addition of OneCouncil we will have a more accurate overview and reporting of the City's position regarding swimming pool compliance.

Action Owner

Manager Building Services

Target Completion Date

Completed

5.2 Pool Inspection Information

Audit Finding

As part of our review Paxon examined reports derived from Authority including the Mandatory Pool Inspections 2021-25 and the DMIRS Swimming Pool Report, which is another internal report generated from Authority. The Mandatory Pool Inspections report contains a comprehensive list of pool inspections required for each year until 2025, serving as a useful resource for creating an inspection timeline. The DMIRS Swimming Pool Report has been modified by the Manager Building Services to include compliance status and referrals to specific staff members responsible for certain pools.

Paxon noted differences between the DMIRS Swimming Pool Report and the Mandatory Pool Inspections 2021-25.

Whilst we realise that excel reports from the system may be used for work scheduling, Authority needs to remain the single source of truth for pools, their status, supporting evidence and recording all interaction with the customer.

Risk Rating

Paxon has determined this finding to be of **High Risk**

Implication

The City is non-compliant with regulation due to lack of clear oversight or untimely or inaccurate recording of information within the pools register.

Recommendation

Exports from the system should be used for scheduling, but updates in status of pools should only be performed within Authority so that all officers have access to the most accurate and up to date information available and monitoring of pools status can be performed effectively.

Management Comment

The items of risk illustrated within the report were entirely correct at time of my commencement with the City in April 2022 and possibly up to January 2023 as indicated, however since that time the City's Building Services team in collaboration with the City Assist Compliance team have completed an entire review of the swimming pool inspection program including but not limited to the following actions:

- A full review of the City's live swimming pool register within Authority
- Adding a column within the task list of Authority to include a due date to ensure the reports accurately reflect when the swimming pool is due for an inspection.
- Training of Building Services Administration Officers in relation to updating and reporting of swimming pools within the live swimming pool register.
- A review of the spreadsheet illustrating the inspections required to be completed by RLSSWA for 2021-2025.
- Inspections and review of all swimming pools nominated as being removed/decommissioned to confirm actual status.
- Creation of a separate spreadsheet highlighting all the swimming pools removed/decommissioned with the aim of removing all these pools from the live register and creating an archive register to be saved within CM9 for any required future reference.
- A full review of any swimming pools that may have been missed or not noted on the current RLSSWA inspection list or still under construction.
- The introduction of modified penalties for any owners/occupiers reluctant to comply with the legislated requirements.

These action and others have resulted in the City reporting back to DMIRS that only 4 swimming pools were pending compliance for the four yearly-mandated swimming pool safety barrier inspections, however these have all had an initial inspection completed but were pending items of non-compliance noted at time of inspection to be completed.

The swimming pools noted within the report with differences in reporting of compliance or non-compliance have all been reviewed and the current information recorded within Authority is true and correct.

For example: A Compliant pool might have a ROC against it dated 16/08/2019 – but have additional tracking steps relating to ongoing inspections in 2023 due to potential non-compliance issues post the 2019 inspection.

I am confident that the City is taking the correct actions to ensure swimming pool legislation is being met and with addition of OneCouncil we will have a more accurate overview and reporting of the City's position regarding swimming pool compliance.

Action Owner

Manager Building Services

Target Completion Date

Completed

5.3 Management Information

Audit Finding

Paxon reviewed the monthly and quarterly management information reporting to assess the effectiveness and adequacy of team performance and compliance with timeline requirements at the City for Verge, Planning, Development and Building Applications.

In general there is adequate information in place, but with some limitations:

- The Authority system is not equipped to effectively handle and report against specified deadlines. Because of this information is extracted from the Authority system using crystal reports and then transferred onto spreadsheets.
- The current reporting does not include information on the duration or number of days taken for each application. Instead, it requires interpretation and reworking to determine statutory timeframes (where it has value) but has limited value about timeframes on process steps within the statutory timeframe. This limitation may hinder the ability to analyse workload distribution, identify bottlenecks and implement targeted improvements that may benefit community.

Risk Rating

Paxon has determined this finding to be of **Low Risk**

Implication

Limited oversight of team performance and compliance and manual reporting processes.

Recommendation

Improvements to management information should be considered to include the actual number of days taken in assessment/processing and also their complexity.

Management Comment

It is evident that the current reporting system (authority) has its limitations and would require significant investment and effort from the organisation to review the process workflows and crystal reporting to be able to gain accurate and reliable data without the need for external work arounds. It does make the process of monthly reporting more timely and increases the risk of inaccuracies in reporting.

The City has embarked on a major program of converting to Tech One (One Council) software to replace Authority (Civica). The intent is that the new Tech One modules and systems will be established to provide accurate reporting data for development from day one of its operation. The City's Project Manager, Corporate Business Systems advises that from a Planning & Building perspective, the earliest go live for these modules in TechOne would be Quarter 4 2024. Training sessions have not yet been scheduled because it is too early, but training is a significant component of Kwinana's investment.

Action Owner

Manager Building Services & Manager Planning & Development.

Target Completion Date

TechOne being operational at Quarter 4 2024

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8.4 WORK HEALTH AND SAFETY (WHS) STATISTICAL REPORT - 2 OCTOBER 2023

SUMMARY

Council has endorsed a Health and Safety Policy to meet its moral and legal obligation to provide a safe and healthy work environment for all employees, contractors, customers, and visitors. This commitment extends to ensuring the City's operations do not place the community at risk of injury, illness, or property damage. It is usual practice to provide a report detailing statistical data at each Audit and Risk Committee meeting. The data has been migrated to the new MyOSH system, however, the report only has a few graphical representations, as some of the data that has been migrated requires further refinement. Officers are currently working on the development and modification of the data to produce meaningful statistical information. The report is enclosed as Attachment A. There have been no notable incidents reported during this period.

OFFICER RECOMMENDATION

That the Audit and Risk Committee note the City of Kwinana Statistical data report detailed in Attachment A.

VOTING REQUIREMENT

Simple majority

DISCUSSION

Summary of Statistical Data and OSH System Update:

The full statistical data report is not available for this report as the City is continuing to refine the migrated data to ensure that the data can provide accurate and meaningful statistical information. The report does include several high-level reports that give an overview of the incidents over this reporting period. Accordingly, Officers are progressing the development and refinement of the system to enhance and provide further clarity on the reporting fields contained in the MyOSH software system.

A summary of the incidents recorded over the quarter from 01 June 2023 to 31 August 2023 is as follows. A total of thirteen incidents have been recorded during the three-month period. Five from the City Life directorate, four from the City Infrastructure directorate and two from both the City Development and Sustainability directorate and Office of the CEO. Six incidents were recorded as injuries, three incidents were recorded as a near miss and four incidents were classified as report only - Inappropriate Behaviour/Violence and Abuse involving members of the public. It should be noted that the report only incidents were assessed and the employee interaction with the member of the public did not require further action to be implemented.

Further categorization of the six injuries determined that one was a loss time injury, two were recorded as medical treatments, two injuries required first aid treatment and one was a report only. All six of the recorded injuries have now been closed.

STRATEGIC IMPLICATIONS

There are no strategic implications as a result of this proposal.

SOCIAL IMPLICATIONS

There are no social implications as a result of this proposal.

LEGAL/POLICY IMPLICATIONS

Regulation 17 of the Local Government (Audit) Regulations 1996 provides:

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.*

FINANCIAL/BUDGET IMPLICATIONS

There are no financial implications that have been identified as a result of this report or recommendation.

ASSET MANAGEMENT IMPLICATIONS

No asset management implications have been identified as a result of this report or recommendation.

COMMUNITY ENGAGEMENT

There are no community engagement implications as a result of this report or recommendation.

ATTACHMENTS

A. Attachment A - WHS Statistical Data Report - 1 June 2023 - 31 August 2023



Work Health and Safety

Audit & Risk Committee Statistical Report

1 June 2023 - 31 August 2023

ATTACHMENT A



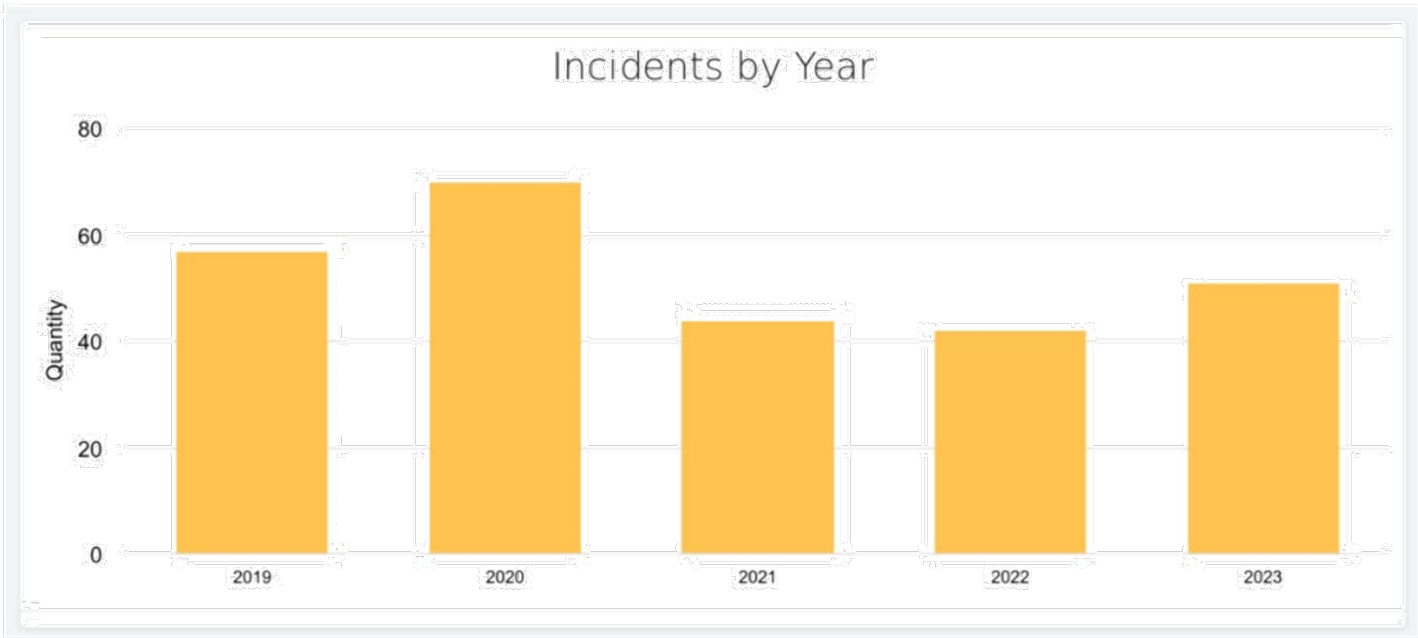
Safety Statistics Report

Page 1 of

Incident Data by Year



01/06/2023 - 31/08/2023



Incidents: 1 June 2023 – 31 August 2023

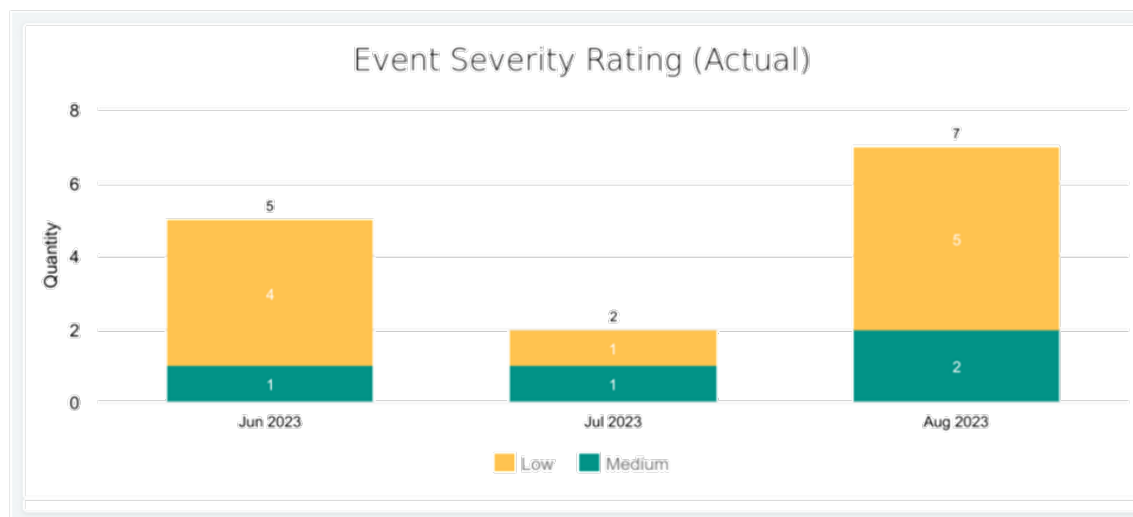


Total incidents = 13

*Note: Total incidents do not include “non-work related” incidents.



01/06/2023 - 31/08/2023



Total incident Count:

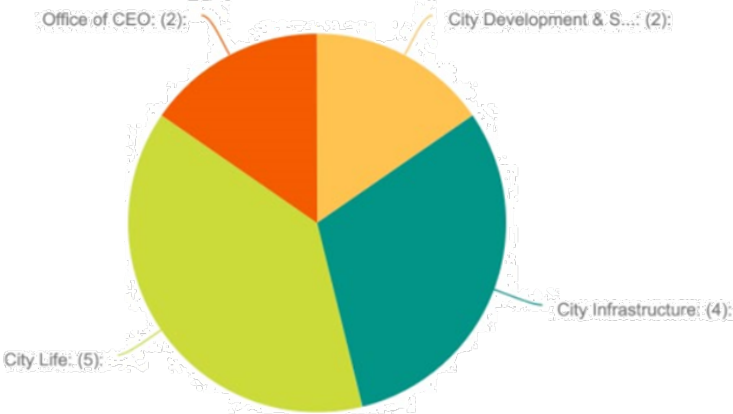
- June 2023 = 5
- July 2023 = 2
- August 2023 = 6

*Note: For the purposes of the above graph event severity rating data is captured from the field “ Actual Incident Category – Rating”.



Incidents: 1 June 2023 – 31 August 2023

Incidents By Directorate



City Development & Sustainability
2/13



City Life
5/13

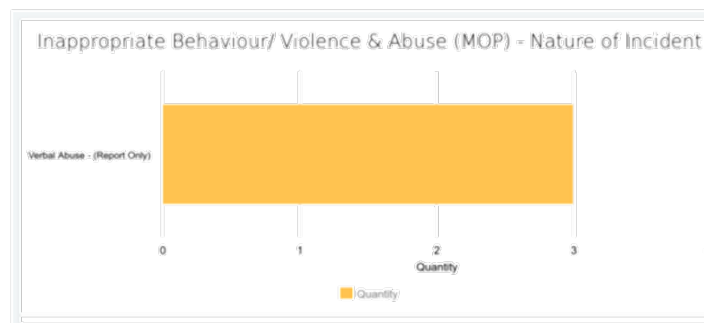
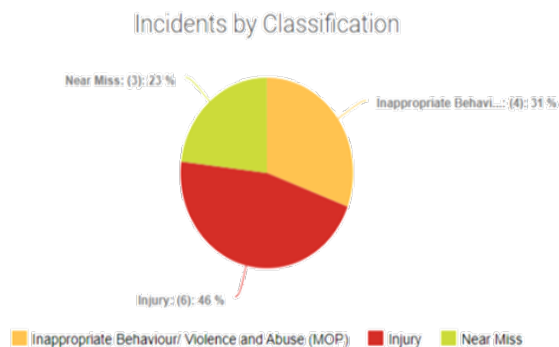


City Infrastructure
4/13



Office of the CEO
2/13

Incidents: 1 June 2023 – 31 Aug 2023



Incidents by classification can include:

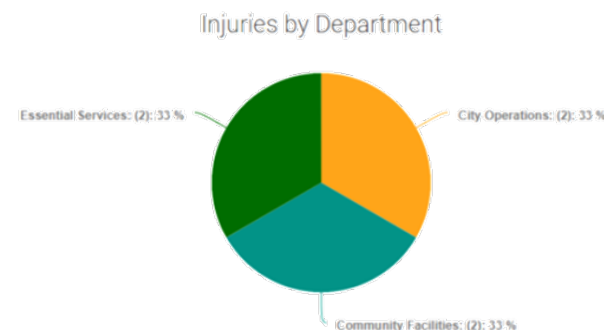
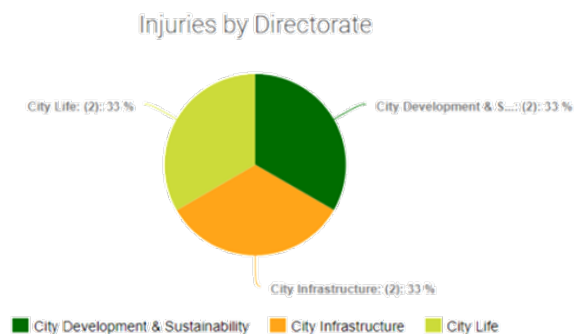
- Inappropriate Behavior/ Violence & Abuse (MOP)
- Injury
- Near Miss
- Environment
- Equipment
- Community Complaint
- Vehicle
- Security
- Other

From the 4 incidents listed as "Inappropriate Behavior/ Violence & Abuse (MOP)":

- 4 are Report Only



Injuries: 1 June 2023 – 31 Aug 2023



Total Injuries = 6

Out of 13 incidents reported in the June-August 2023 6 were reported as Injuries.

Injuries by classification can include:

- Report Only
- First Aid Injury
- Medical Treatment Injury
- Restricted Work Injury
- Lost Time Injury

8.5 UPDATE ON ONECOUNCIL PROJECT

SUMMARY

Phase two of the OneCouncil implementation project is currently underway, with the first of the 'mini go-lives' successfully completed. The second phase implementation project is currently ahead of schedule and under budget. As part of the phase two roll out, the City's website has been updated to allow residents to directly enter requests and feedback into the OneCouncil system. In addition to an enhanced service to the community through the website access to the system, the project will also result in new coding to the website homepage providing an obvious and useful link to the request system and the City's engagement platform, Love My Kwinana.

It is recommended that the Audit and Risk Committee note the OneCouncil update.

OFFICER RECOMMENDATION

That the Audit and Risk Committee:

- 1. Note the project update; and**
- 2. Make the following comments:**

VOTING REQUIREMENT

Simple majority

DISCUSSION

The implementation of a new corporate business system is a significant organisational project, that carries a number of risks. In particular, once the new system is turned on, it needs to work, and the users of the new system need to be able to make it work. Due to the complexity of the system, there is also the risks associated with the implementation itself, including estimating the implementation cost, providing the skilled resources to deliver the project, and estimating the delivery timeframe.

Phase two of the project implementation is underway, with the first of the staged roll-out 'mini go lives' successfully occurring. The second phase of the project has had the benefit of a 'copy config' approach, where the base configuration from another local government is used, rather than the vendor base configuration. Utilising this approach allows the project to start from an estimated 95% ready config for most modules, rather than an estimated 20% starting point from the vendor, saving significant time. In addition, the second phase of the project has been able to rely more heavily on internal resources, ensuring the building of internal skill and retention of skilled project champions on completion of the project.

The first of the 'mini go lives' included the following features from the customer request module:

- Waste and Rates;
- Essential Services (Animals); and
- Feedback/Complaints.

The next module to be progressed in phase two is enforcement and infringements. In addition, research into the suitability of config 'donors' for the Compliance (Planning, Health and Building processes) module is underway in anticipation of commencing this module early in the new calendar year.

In summary, the phase two of the implementation is on schedule, and the copy config approach has so far been successful in constraining cost and accelerating the program of works. At this stage, no new risks have been identified. It is worth noting that the Compliance module is the most complex, so, while there is high confidence in the copy config approach, it is likely that there will be more in-house configuration requirements than other modules, which could slow down progress. However, based on the inspection of donor configurations with the key internal subject matter experts, at this stage it is anticipated that additional configuration of this module will be limited.

STRATEGIC IMPLICATIONS

This proposal will support the achievement of the following outcome/s and objective/s detailed in the Strategic Community Plan and Corporate Business Plan.

Strategic Community Plan			
Outcome	Strategic Objective	Action in CBP (if applicable)	How does this proposal achieve the outcomes and strategic objectives?
5 – Visionary leadership dedicated to acting for its community	5.3 – Provide a high standard of customer service with the community as priority	N/A – There is no specific action in the CBP, yet this report will help achieve the indicated outcomes and strategic objectives	Provides enhanced oversight of the business and drives continuous improvement. The system can provide increased self-service opportunities and tracking of applications. The system will generate automatic responses to inform customers of progress of requests or applications.

SOCIAL IMPLICATIONS

There are no social implications as a result of this proposal.

LEGAL/POLICY IMPLICATIONS

No legal/policy implications have been identified as a result of this report or recommendation.

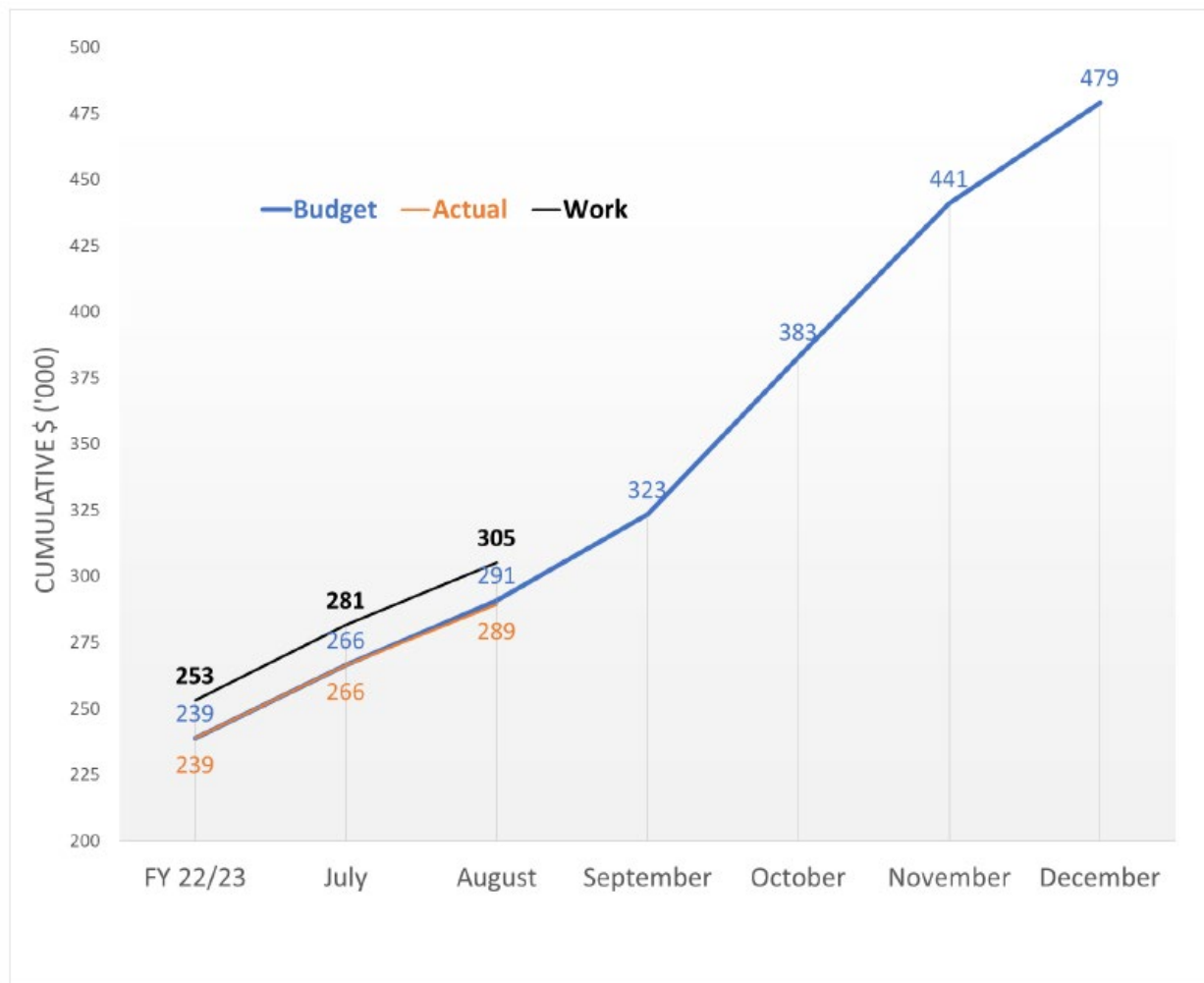
FINANCIAL/BUDGET IMPLICATIONS

The phase two estimated cost of implementation is as follows:

Function	Description	Consult Days	Cost (\$)	Sub Total (\$)
Stage 1	<i>Property, Names, Requests, Rates, Waste</i>			75,200
	Config upload	8	12,800	
	Config & Training	14	22,400	
	Rates Config & Training	20	32,000	
	Waste	5	8,000	
Stage 2	<i>Billing, Debtors, Cash Receipting, Rates</i>			176,000
	Config	15	24,000	
	Training	15	24,000	
	Rates UAT	5	8,000	
	Finance backfill (1 FTE)		120,000	
Stage 3	<i>Animals, Infringements, Enforcement</i>			48,000
	Config	15	24,000	
	Training	15	24,000	
Stage 4	<i>Planning & Development, Licences & Permits</i>			368,000
	Config	40	64,000	
	Training	40	64,000	
	Compliance backfill (2 FTE)		240,000	
Data Migration	<i>All of Release 2</i>			183,200
	Integration Middleware Infrastructure		60,000	
	Professional Services			
	Config copy and updating	5	8,000	
	Property & Names	10	16,000	
	Rates	20	32,000	
	Revenue & Compliance	15	24,000	
	Records	7	11,200	
	Tolerance	20	32,000	
Program	<i>Strategy, Architecture, Reporting</i>			120,000
	Solution Architecture	10	16,000	
	UAT & Go Live Planning	10	16,000	
	GIS	5	8,000	
	Website & online services	10	16,000	
	Reporting, Analytics, & Dashboards	40	64,000	
Program	<i>CiAnywhere Project Environments</i>			71,200
	TechOne Cloud Services (3 environments)		64,800	
	Environment Planning	4	6,400	
Program	<i>Wages</i>			450,000
	Project Manager (2.5 years)		450,000	
	Project Systems Analyst (Proposal accepted)		-	
ECM	<i>Records</i>			104,000
	Stage 1 Consultancy	15	24,000	
	Stages 2 - 4 Consultancy	20	32,000	
	ECM Data Migration Consultancy	30	48,000	
Release 2 Totals		413		\$1,595,600
	Program Tolerance		20%	\$ 319,120
Release 2 Budget				\$1,914,720

Similar to phase one, the second phase of the project has no budget capacity for contingency, with the estimated project cost approximately \$30k under the agreed budget. To mitigate the risk associated with not having sufficient contingency, an internal decision has been made to delay the refilling of two positions within the business so that the savings in salary will create the required contingency, should it be required. Furthermore, a conservative approach has been taken to estimating the number of days of effort required to deliver the project, and careful overview is maintained on the project budget.

For the purpose of reporting project budget performance against work delivered, an Earned Value Performance Management (EVPM) approach is taken, which plots work delivered and amount spent (actual incurred cost, rather than invoiced value) against the original estimate. At the end of August, the project was ahead of schedule, and ahead of budget. The EVPM graph is below.



ASSET MANAGEMENT IMPLICATIONS

No asset management implications have been identified as a result of this report or recommendation.

ENVIRONMENTAL/PUBLIC HEALTH IMPLICATIONS

No environmental or public health implications have been identified as a result of this report or recommendation.

COMMUNITY ENGAGEMENT

There are no community engagement implications as a result of this report or recommendation.

ATTACHMENTS

Nil

8.6 DEVELOPER CONTRIBUTION PLANS - QUARTERLY PROGRESS REPORTING

SUMMARY

A recent audit by Crowe Australasia of the City's practices and procedures relating to developer contribution payments recommended an increase of management reporting to monitor Developer Contribution Plans (DCP's) activity.

A report showing developer contribution activity for all current Developer Contribution Plans for the 4th Quarter 2022/23 is presented for noting and comment by the Audit and Risk Committee. A copy is included at Attachment A.

OFFICER RECOMMENDATION

That the Audit and Risk Committee note and provide comment with respect to the Quarterly Progress Report – 4th Quarter 2022/23 - Details on Developer Contribution Activity as shown at Attachment A.

VOTING REQUIREMENT

Simple majority

DISCUSSION

In 2021, Crowe Australasia completed an audit of the City's handling of DCPs. In relation to the management reporting of DCPs, the following was identified:

- Currently, the level of regular management reporting of DCP activity is limited to:
 - A monthly finance report that outlines the DCA reserve balances.
 - Ad hoc council briefings where there has been a change to the delivery of a DCP that has a financial impact that requires Council approval.
 - Cost Apportionment Schedule (CAS) is presented to Council on an annual basis and is published on the website.
 - Annual reviews of development activity
- This level of reporting is:
 - not adequate to support decision making.
 - does not facilitate adequate oversight to identify potential risks that may need to be managed, and
 - does not provide assurance to Council that the DCP function is operating as expected.
- The current reporting does not provide oversight of key activities such as:
 - Status of the development
 - Income collected.
 - Projects delivered.
 - Projects to be completed.
 - Level of developer liability

As a result of the above findings, the following recommendations were made:

1. Management needs to develop management reporting for DCP activity. Reporting should include data pertaining to the status of all DCP activity as identified. Management reporting should be tailored to both the Cross Functional Team, the Working Group and Council.
2. Management reporting should be developed to monitor the level of developer liability.

This reporting should form the basis of a 'statement of liability' that is provided to each developer on a regular basis.

In accordance with such recommendations, the City's DCP Cross-Functional Team have developed the report annexed hereto as Attachment A for review and comment by the Audit and Risk Committee.

The Quarterly Report breaks down contributions into DCP activity and DCP payments and seeks to highlight spatially, where the activity is located. It is also intended to reconcile the progress of active facility development against the facility total costs and its respective DCP contributions for the quarter. The report also includes maps illustrating DCP infrastructure and facilities and provides a DCA financial summary for the Quarter.

Fourth Quarter 2022/23 Highlights

Highlights include: -

- Activity around DCA payments made as part of the subdivision activity at a range of new housing estates within the City. This includes Apsley Estate in Mandogalup and the residential estates in Anketell North.
- The Anketell North area was a 'hot spot' of subdivision activity during the quarter with Albero Estate and Lot 30 Treeby Road both making developer contributions as part of subdivision clearance.
- Group dwelling development in Cassia Glades, Kwinana City Centre contributing to community infrastructure.
- Ongoing improvements were made to Thomas Road by Main Roads.
- Continued fit out works on the Ngook Boorn Mia Mia / Honeywood Pavilion in Wandi. There are some outstanding minor associated costs for the completion of the project.
- The finalisation and now progression of compensation to the landowner for the portion of Lot 9003 Lyon Road (termed the Galati Triangle) which the City had been pursuing for acquisition for several years. The land will now form the final part of the development of the senior oval adjacent the Honeywood Primary School (Reserve 54045). The landowner is seeking compensation for the land acquisition under the Land Administration Act 1997. The City has engaged legal support for the process of determining a suitable compensation amount.

STRATEGIC IMPLICATIONS

There are no strategic implications as a result of this proposal.

SOCIAL IMPLICATIONS

There are no social implications as a result of this proposal.

LEGAL/POLICY IMPLICATIONS

No legal/policy implications have been identified as a result of this report or recommendation.

FINANCIAL/BUDGET IMPLICATIONS

No financial or budget implications have been identified as a result of this report or recommendation. The developer contributions received during the quarter are highlighted in Attachment A.

ASSET MANAGEMENT IMPLICATIONS

No asset management implications have been identified as a result of this report or recommendation.

ENVIRONMENTAL/PUBLIC HEALTH IMPLICATIONS

No environmental or public health implications have been identified as a result of this report or recommendation.

COMMUNITY ENGAGEMENT

There are no community engagement implications as a result of this report or recommendation.

ATTACHMENTS

- A. Attachment A - Developer Contribution Quarterly Progress Report - 4th Quarter 2022/23**

Quarterly Progress Report – 4th Quarter 2022/23
Details of Developer Contribution Activity
DCA Activity during Quarter

DCA's	Infrastructure Item	Project Owners	Project Manager	Project Value (inc GST)	Spent to date	Expenditure for Quarter	Comment
DCA8 (Community Infrastructure)	Ngook Boorn Mia Mia / Honeywood Pavilion	City of Kwinana	Builders are Shelford Construction and Architect is Donavon Payne.	\$3.7 million (of which \$3.3 million was from DCA funds and \$400K from the Community Sporting and Recreation Facilities Fund (CSRFF))	\$3,512.998	\$1000?	Expenses for the quarter were related to fit-out costs. There are some outstanding minor associated costs for the completion of the project.
DCA 6	POS B construction	QUBE development	QUBE	Prefunding Agreement was finalized at end of May 2023. Total Prefunding Amount, including 2 years maintenance period is \$536,796.15	\$0	\$0	The prefunding amount creditable for improvement is \$437,280.00. After the 2-year maintenance period, the remaining maintenance funds will be released.
DCA 3 & 4 (Civil Infrastructure)	Thomas Road Construction.	Main Roads	Main Roads commissioned Raubex Construction	Estimated cost \$18 million (Main Roads) but the DCA contribution is currently est. at \$10 million.	\$0	\$0	Main Roads continuing to undertake improvements to Thomas Road with partial funding being received from Developer Contribution Scheme.
DCA3	Peel Sub P drain -Piped 900mm pipe- 640m	Aigle Royal	Constructed by Wormall Civil	Estimated Cost-\$1,379,121 for 815m	\$550,916 for 640m - Actuals	\$0	Crediting was completed for \$550,916 in February 2023.

DCA5	A 2089m ² triangular portion of Lot 9003 Lyon Road (formerly owned by Terra Novis)	City of Kwinana	City of Kwinana	Advertising costs paid in April associated with DPLH acquisition. Costs for legal representation on compensation claim likely in the first quarter 2023/34. Total cost unknown at this stage.	\$4,013.52	\$4,013.52	For several years, the City has been pursuing the acquisition of a portion of Lot 9003 under the Contribution Plan for DCA5 (termed the Galati Triangle). The land acquisition and reservation is now finalized and will be part of the oval adjacent the Honeywood Primary School (Reserve 54045). The former landowner is seeking compensation under the Land Administration Act 1997. The City has engaged McLeod's Lawyers to represent the City as part of the compensation claim.
DCA1	Environmental Approvals associated with the Wellard Road widening Project	City of Kwinana	City of Kwinana	Total cost for referrals to State and Federal Government for environmental assessments is \$56,308. This includes fee payment for Environmental Protection Biodiversity Conservation Act, 1999	\$56,308	\$,8,808	Federal referral now submitted to the Federal Government under the Environmental Protection Biodiversity Conservation Act, 1999.

DCA Payments / Contributions during Quarter

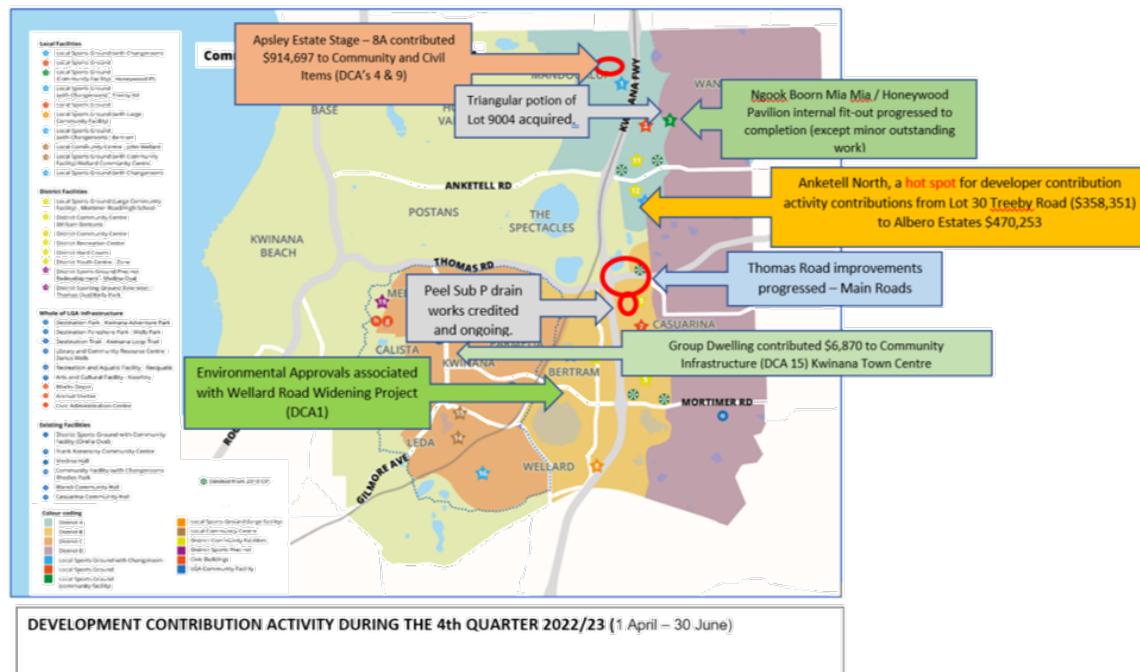
DCA's	Location; Estate and developers	Stages	Clearance Area (ha) or Lots created	Land Use	Amount	Comment
DCA4 (Civil) DCA9 (Community Infrastructure)	Albero Estate, Anketell North	Stage 2	0.9517ha 18 lots	Residential	DCA4 \$342,421 DCA9 \$127,832	Residential subdivision in Anketell North, Ongoing with future stages to come.

DCA4 (Civil) DCA9 (Community Infrastructure)	Lot 30 Treeby Road		0.9129ha 12 Lots	Residential	DCA4 \$285,304 DCA9 \$73,047	Residential subdivision in Anketell North
DCA6 (Civil Infrastructure) DCA8 (Community Infrastructure)	Apsley Estate – Lots 682 and Lot 52 Rowley Road, Mandogalup (Qube)	Stage 8A	1.9536 ha 36 lots	Residential	DCA6 \$661,123 DCA8 \$253,574	Residential Subdivision – Ongoing with future stages to come.
DCA15	108 Hawkeswood Boulevard, Kwinana Town Centre	n/a	4 units	Residential	DCA15 \$6,870	Group Dwellings (Detached)

Location of DCA Items Construction and Subdivision Activity during the 4th Quarter 2022/23.

A map illustrating the location of DCA Activities and payments for Civic and Community Infrastructure items during the 4th Quarter is shown below.

The underlying map is the draft Community Infrastructure Plan adopted in 2021.



Developer Contribution Plans (DCP's) and Contribution Items

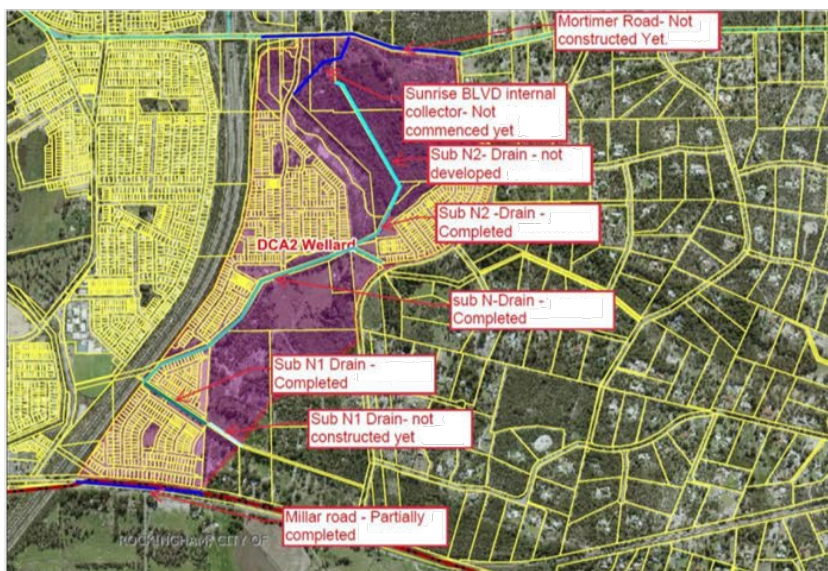
Civil Infrastructure

The location and status of Civil Infrastructure Items as per respective DCP's 1 – 6 is shown below.

DCA 1



DCA2



DCA3



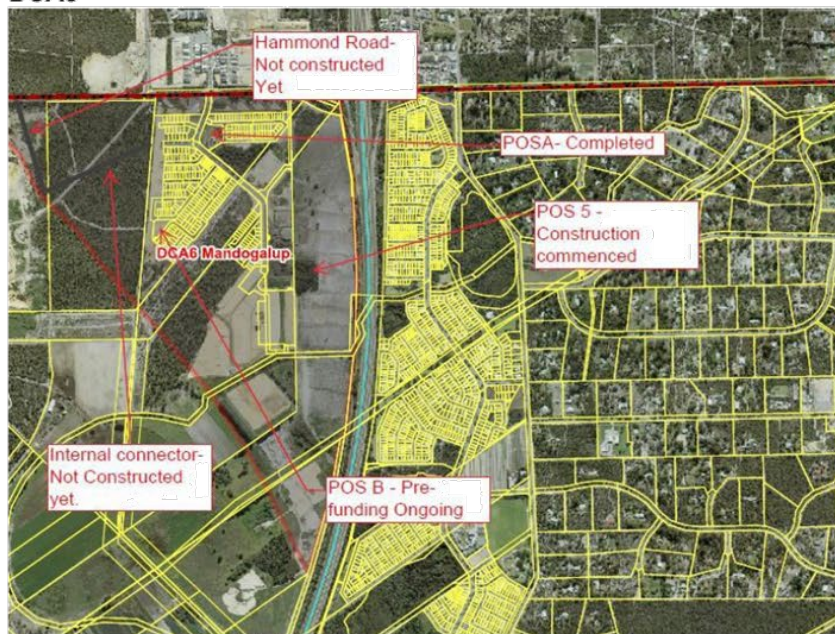
DCA4



DCA5



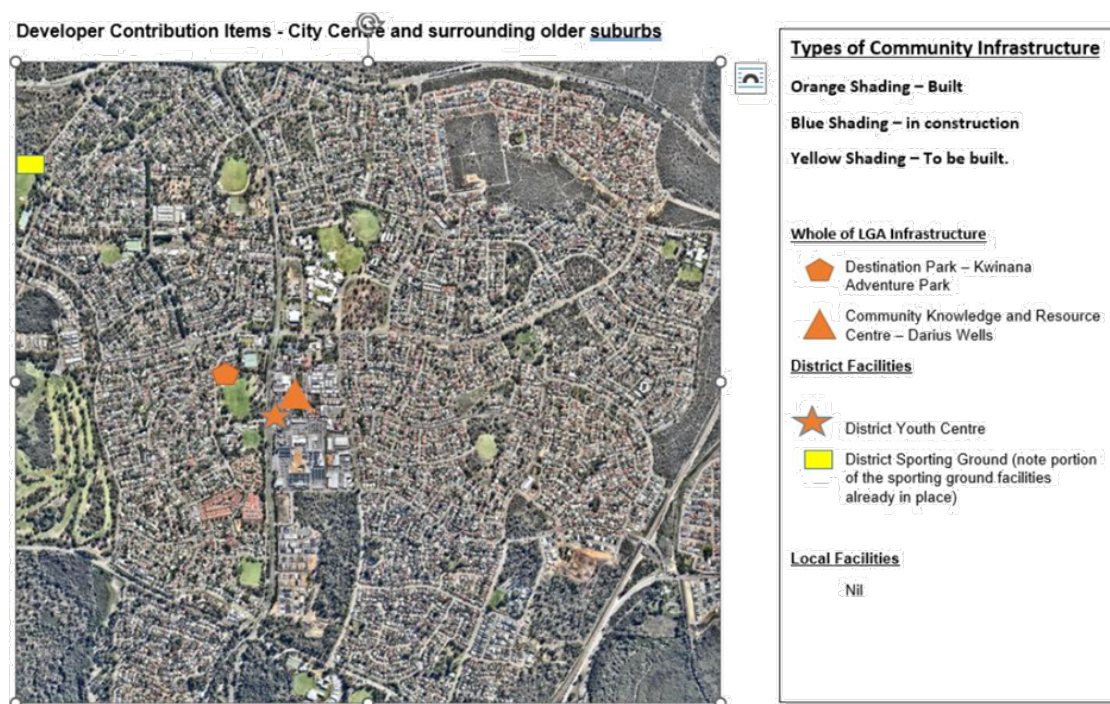
DCA6



Community Infrastructure

On 14 December 2022, Council resolved to adopt Community Infrastructure Plan 2021-2026 (CIP 2021) and revised Amendment 145 to Local Planning Scheme No. 2 (LPS2). Amendment 145 is now with the Western Australian Planning Commission for its consideration for final adoption and gazettal.

The following maps for areas illustrate the community infrastructure either built, in construction, or to be built across the City under the developer contribution schemes for community infrastructure.



Developer Contribution Items – Bertram



Types of Community Infrastructure

Orange Shading – Built

Blue Shading – in construction

Yellow Shading – To be built.

Whole of LGA Infrastructure

Nil

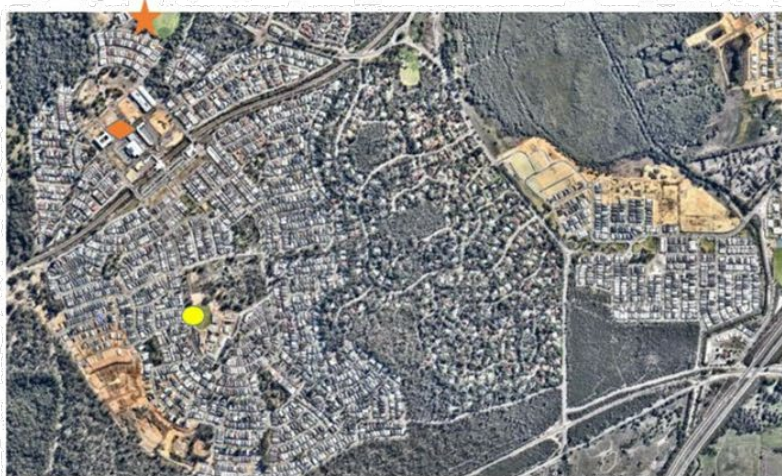
District Facilities

Orange pentagon: District Community Centre (William Bertram) (District B)

Local Facilities

Yellow circle: Local Sports Ground (with changeroom) – Bertram

Developer Contribution Items – Wellard



Types of Community Infrastructure

Orange Shading – Built

Blue Shading – in construction

Yellow Shading – To be built.

Whole of LGA Infrastructure

Nil

District Facilities

Nil

Local Facilities

Orange diamond: Local Community Centre (John Wellard)

Red star: Local Sports Ground (with Community Facility) Wellard Community Centre

Yellow circle: Local Sports Ground (with changeroom)

Developer Contribution Items – Casuarina

**Types of Community Infrastructure**

Orange Shading – Built

Blue Shading – in construction

Yellow Shading – To be built.

Whole of LGA Infrastructure

Nil

District Facilities

District Hard Courts (District A & B)

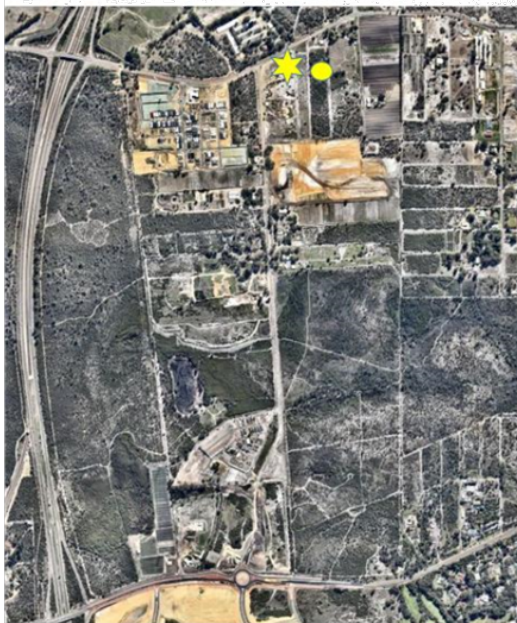


Local Sports Ground (Large Community Facility) – Mortimer Road/High School (District B)

Local Facilities

Local Sports Ground

Developer Contribution Items – Anketell North and Anketell South

**Types of Community Infrastructure**

Orange Shading – Built

Blue Shading – in construction

Yellow Shading – To be built.

Whole of LGA Infrastructure

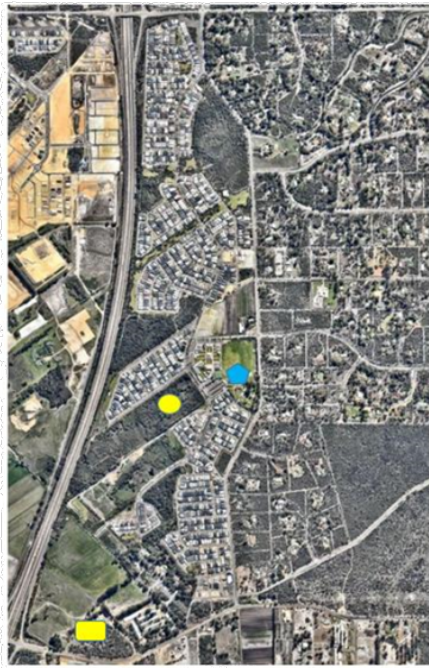
Nil

District Facilities

District Recreation Centre (Districts A and B)

Local FacilitiesLocal Sports Ground (with Changeroom)
– Treeby Road

Developer Contribution Items – Wandl

**Types of Community Infrastructure**

Orange Shading – Built

Blue Shading – in construction

Yellow Shading – To be built.

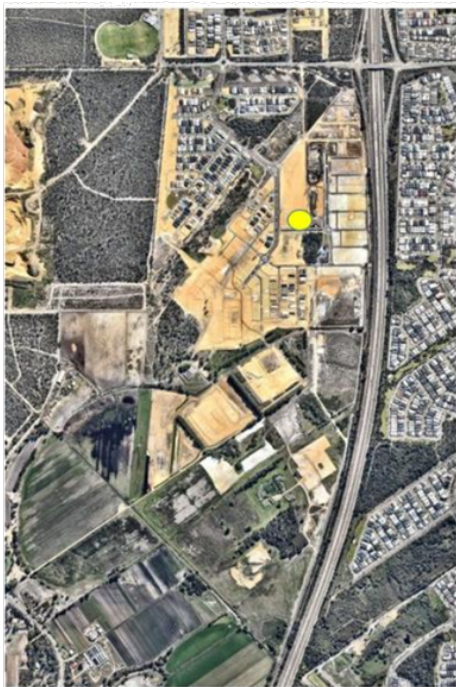
Whole of LGA Infrastructure

Nil

District Facilities
 District Community Centre (District A & B)
Local Facilities
 Local Sports Ground (Community Facility) -
Honeywood PS

 Local Sports Ground

Developer Contribution Items – Mandogalup

**Types of Community Infrastructure**

Orange Shading – Built

Blue Shading – in construction

Yellow Shading – To be built.

Whole of LGA Infrastructure

Nil

District Facilities

Nil

Local Facilities
 Local Sports Ground (with Changeroom)

Developer Contribution Items – Item on the City's coastline.




Types of Community Infrastructure

Orange Shading – Built

Blue Shading – in construction

Yellow Shading – To be built.

Whole of LGA Infrastructure

 Sub-Regional (Wells Park) Foreshore Upgrade

District Facilities

Nil

Local Facilities

Nil

DCA Financial Summary for 4th Quarter 2022/23 Summary for each DCA

DCA 1 Quarterly Report Summary		Current Reconciliation	Quarterly Change
Total CAS		19,992,482	0
Payments made		7,273,749	209,573
Credits given		4,959,997	0
Admin paid		(332,139)	0
Capital Expenditure		(9,944,329)	16,105
Balance held by City		1,957,278	225,678
Remainder to be collected		7,758,736	(209,573)
DCA 2 Quarterly Report Summary		Current Reconciliation	Quarterly Change
Total CAS		6,331,042	0
Payments made		2,804,684	48,460
Credits given		1,054,562	0
Admin paid		(142,200)	0
Capital Expenditure		(1,925,025)	0
Balance held by City		1,792,021	48,460
Remainder to be collected		2,471,796	(48,460)
DCA 3 Quarterly Report Summary		Current Reconciliation	Quarterly Change
Total CAS		51,521,793	0
Payments made		100,466	100,466
Credits given		0	0
Admin paid		(162,804)	0
Capital Expenditure		0	0
Balance held by City		100,466	263,270
Remainder to be collected		51,421,327	(100,466)

DCA 4 Quarterly Report Summary	Current Reconciliation	Quarterly Change
Total CAS	25,467,489	0
Payments made	2,929,350	704,858
Credits given	759,761	0
Admin paid	(153,406)	0
Capital Expenditure	(759,761)	0
Balance held by City	2,775,944	704,858
Remainder to be collected	21,778,378	(704,858)

DCA 5 Quarterly Report Summary	Current Reconciliation	Quarterly Change
Total CAS	55,648,294	0
Payments made	2,417,390	378,639
Credits given	45,894,064	0
Admin paid	(180,441)	0
Capital Expenditure	(45,894,064)	0
Balance held by City	2,236,949	378,639
Remainder to be collected	7,336,840	(378,639)

DCA 6 Quarterly Report Summary	Current Reconciliation	Quarterly Change
Total CAS	25,603,877	0
Payments made	6,040,699	372,718
Credits given	2,648,457	0
Admin paid	(158,817)	0
Capital Expenditure	(2,648,457)	0
Balance held by City	5,881,882	372,718
Remainder to be collected	16,914,721	(372,718)

DCA 7 Quarterly Report Summary	Current Reconciliation	Quarterly Change
Total CAS	1,785,254	0
Payments made	145,466	15,014
Credits given	0	0
Admin paid	(35,005)	0
Capital Expenditure	0	0
Balance held by City	110,461	15,014
Remainder to be collected	1,639,788	(15,014)

DCA 8 Quarterly Report Summary	Current Reconciliation	Quarterly Change
Total CAS	4,864,904	0
Payments made	4,232,003	1,237,713
Credits given	0	0
Admin paid	(58,032)	0
Capital Expenditure	0	0
Balance held by City	4,173,970	1,237,713
Remainder to be collected	632,901	(1,237,713)

DCA 9 Quarterly Report Summary	Current Reconciliation	Quarterly Change
Total CAS	13,339,505	0
Payments made	15,156,526	665,228
Credits given	0	0
Admin paid	(136,630)	0
Capital Expenditure	(3,517,774)	(203,953)
Balance held by City	11,502,122	461,275
Remainder to be collected	(1,817,021)	(1,151,793)

DCA 10 Quarterly Report Summary	Current Reconciliation	Quarterly Change
Total CAS	12,145,642	0
Payments made	257,997	6,578
Credits given	0	0
Admin paid	(68,994)	0
Capital Expenditure	0	0
Balance held by City	189,003	6,578
Remainder to be collected	11,887,645	(6,578)

DCA 11 Quarterly Report Summary	Current Reconciliation	Quarterly Change
Total CAS	3,574,211	0
Payments made	6,316,948	161,274
Credits given	0	0
Admin paid	(141,138)	0
Capital Expenditure	(103,046)	0
Balance held by City	6,072,764	161,274
Remainder to be collected	(2,742,737)	(161,274)

DCA 12 Quarterly Report Summary	Current Reconciliation	Quarterly Change
Total CAS	13,103,060	0
Payments made	11,787,001	877,736
Credits given	0	0
Admin paid	(181,214)	0
Capital Expenditure	(280,647)	0
Balance held by City	11,325,140	877,736
Remainder to be collected	1,316,059	(877,736)

DCA 13 Quarterly Report Summary	Current Reconciliation	Quarterly Change
Total CAS	4,708,748	0
Payments made	460,082	9,089
Credits given	0	0
Admin paid	(135,201)	0
Capital Expenditure	(61,144)	0
Balance held by City	263,736	9,089
Remainder to be collected	4,248,666	(9,089)

DCA 14 Quarterly Report Summary	Current Reconciliation	Quarterly Change
Total CAS	4,997,784	0
Payments made	3,252,612	107,746
Credits given	0	0
Admin paid	(160,859)	0
Capital Expenditure	(2,080,612)	0
Balance held by City	1,011,141	107,746
Remainder to be collected	1,745,172	(107,746)

DCA 15 Quarterly Report Summary	Current Reconciliation	Quarterly Change
Total CAS	1,766,926	0
Payments made	1,023,509	20,177
Credits given	0	0
Admin paid	(164,415)	0
Capital Expenditure	(513,345)	0
Balance held by City	345,749	20,177
Remainder to be collected	743,417	(20,177)

9 LATE AND URGENT BUSINESS

Note: In accordance with Clauses 3.13 and 3.14 of Council's Standing Orders, only items resolved by Council to be Urgent Business will be considered.

10 ANSWERS TO QUESTIONS WHICH WERE TAKEN ON NOTICE**11 CLOSE OF MEETING**