



WEST ARNHEM



REGIONAL COUNCIL



WEST ARNHEM REGIONAL COUNCIL
RISK MANAGEMENT & AUDIT COMMITTEE MEETING
AGENDA

WEDNESDAY, 27 OCTOBER 2021



WEST ARNHEM REGIONAL COUNCIL

Notice is hereby given that the Risk Management and Audit Committee Meeting of West Arnhem Regional Council will be held in Council Chambers, Jabiru on Wednesday, 27 October 2021 at 10:30 am.

Daniel Findley
Chief Executive Officer

TABLE OF CONTENTS

ITEM	SUBJECT	PAGE NO
1	ACKNOWLEDGEMENT OF TRADITIONAL OWNERS	
2	PERSONS PRESENT	
3	APOLOGIES	
3.1	Apologies and Leave of Absence	6
4	ABSENT WITHOUT NOTICE	
4.1	Absent Without Notice	7
5	ACCEPTANCE OF AGENDA	
5.1	Acceptance of Agenda	8
6	DECLARATION OF INTEREST OF MEMBERS OR STAFF	
6.1	Disclosure of Interest of Members or Staff	9
7	CONFIRMATION OF PREVIOUS MINUTES	
7.1	Confirmation of Previous Risk Management and Audit Committee Minutes - 27 July 2021	10
8	GENERAL ITEMS	
8.1	Appointment of Audit Committee Members	18
8.2	WHS Management System Update.....	21
8.3	Internal Audit of the Management and Maintenance of Swimming Pools - Tracking Register Update	25
8.4	Update on General Action Items	29
8.5	Review of Risk Management and Audit Committee Charter and Terms of Reference	31
8.6	Recruitment of an Independent Member for the Risk Management and Audit Committee.....	44
8.7	Overview of Strategic and Operational Risk Register.....	47
8.8	Risk Management and Audit Committee Meeting Dates - 2022	90
9	AUDIT REPORTS	
	<i>Nil</i>	
10	PROCEDURAL MOTIONS	
10.1	Closure to the Public for the Discussion of Confidential Items.....	92
11	LATE REPORTS	
	<i>Nil</i>	

12 CONFIDENTIAL ITEMS

The information is classed as confidential under section 99(2) of the Local Government Act 2019 clause 51 of the Local Government (Administration) Regulations 2021.

- 1.1 Confirmation of Previous Minutes - Confidential Risk Management and Audit Committee Meeting held on 27 July 2021..... 4
The report will be dealt with under section 99(2) of the *Local Government Act 2019* and clause 51(e) of the *Local Government (General) Regulations 2021*. It contains information provided to the council on condition that it be kept confidential.

- 3.2 Audited Financial Statements 2020-2021: Status Update..... 9
The report will be dealt with under section 99(2) of the *Local Government Act 2019* and clause 51(e) of the *Local Government (General) Regulations 2021*. It contains information provided to the council on condition that it be kept confidential.

- 4.3 Disclosure of Confidential Resolutions and Re-admittance of the Public 11

13 NEXT MEETING

The West Arnhem Regional Council acknowledges and respects the Traditional Owners past and present of the West Arnhem Region.

We also acknowledge the attachment and relationship of Aboriginal people to country.

WEST ARNHEM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	3.1
Title:	Apologies and Leave of Absence
File Reference:	970353
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

This report is to table, for the Risk Management and Audit Committee's record, any apologies and requests for leave of absence received from Committee members for the meeting held on 27 October 2021.

BACKGROUND

Not applicable.

COMMENT

Not applicable.

POLICY IMPLICATIONS

This report has been prepared in accordance with Council's Scheduling and Conduct of Meetings (Elected, Local Authority and Council Committee Members) Policy.

STRATEGIC IMPLICATIONS

Not applicable.

VOTING REQUIREMENTS

Not applicable.

RECOMMENDATION:

That the Risk Management and Audit Committee notes members apologies and/or requests for leave of absence for the meeting held on 27 October 2021.

WEST ARNHEM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	4.1
Title:	Absent Without Notice
File Reference:	970354
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

This report is to table, for the Risk Management and Audit Committee's record, any members that are absent without notice for the meeting held on 27 October 2021.

BACKGROUND

Not applicable.

COMMENT

Not applicable.

POLICY IMPLICATIONS

This report has been prepared in accordance with Council's Scheduling and Conduct of Meetings (Elected, Local Authority and Council Committee Members) Policy.

STRATEGIC IMPLICATIONS

Not applicable.

VOTING REQUIREMENTS

Not applicable.

RECOMMENDATION:

That the Risk Management and Audit Committee notes members absences without notice for the meeting held on 27 October 2021.

WEST ARNHEM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	5.1
Title:	Acceptance of Agenda
File Reference:	970355
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

Agenda papers are submitted for acceptance by appointed members for the Risk Management and Audit Committee meeting of 27 October 2021.

BACKGROUND

Not applicable.

COMMENT

The Committee is encouraged to review the agenda and to accept or not accept the agenda.

STATUTORY ENVIRONMENT

Section 92(1) *Local Government Act 2019* is relevant to this matter.

POLICY IMPLICATIONS

This report has been prepared in accordance with Council's Scheduling and Conduct of Meetings (Elected, Local Authority and Council Committee Members) Policy.

STRATEGIC IMPLICATIONS

Not applicable.

VOTING REQUIREMENTS

Simple majority.

RECOMMENDATION:

That the agenda for the Risk Management and Audit Committee meeting of 27 October 2021 as circulated be accepted.

WEST ARNHEM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	6.1
Title:	Disclosure of Interest of Members or Staff
File Reference:	970356
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

Elected Members are required to disclose an interest in a matter under consideration by Council at a Council or Committee meeting:

- 1) In the case of a matter featured in an officer's report or written agenda item by disclosing the interest to the Council as soon as possible after the matter is raised.
- 2) In the case of a matter raised in general debate or by any means other than the printed agenda of the Council by disclosure as soon as possible after the matter is raised.

Under disclosure, the Member must abide by the decision of the Committee on whether he/she shall remain in the Chambers and/ or take part in the vote on the issue. The Committee may elect to allow the Member to provide further and better particulars of the interest prior to requesting him/her to leave the Chambers.

Staff members of the Council are required to disclose an interest in a matter at any time at which they are required to act or exercise their delegated authority in relation to the matter. Upon disclosure, the staff member is not to act or exercise his/her delegated authority unless the Council expressly directs him/her to do so.

STATUTORY ENVIRONMENT

Sections 114 (Elected Members) *Local Government Act 2019*.

Section 179 (staff members) *Local Government Act 2019*.

VOTING REQUIREMENTS

Not applicable.

RECOMMENDATION:

That the Committee receives and records declarations of interest for the meeting held on 27 October 2021.

WEST ARNHEM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	7.1
Title:	Confirmation of Previous Risk Management and Audit Committee Minutes - 27 July 2021
File Reference:	970357
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

Unconfirmed minutes of the 27 July 2021 Risk Management and Audit Committee meeting are submitted to the Committee for confirmation that the minutes are a true and correct record of the meeting.

BACKGROUND

Not applicable.

COMMENT

The minutes as submitted and confirmation of the minutes must comply with section 101 of the *Local Government Act 2019*.

STRATEGIC IMPLICATIONS

Not applicable.

VOTING REQUIREMENTS

Simple majority.

RECOMMENDATION:

That the minutes of the 27 July 2021 Risk Management and Audit Committee meeting are adopted as a true and correct record of the meeting.

ATTACHMENTS

- 1 2021.07.27 Risk Management and Audit Committee Minutes.pdf



Minutes of the West Arnhem Regional Council Audit Committee Meeting
 Tuesday, 27 July 2021 at 10:00 am
 Council Chambers, Darwin

Chairperson Iain Summers declared the meeting open at 10:06 am, welcomed all in attendance and acknowledged the Traditional Owners.

COMMITTEE MEMBERS PRESENT

Chairperson	Iain Summers
Committee Member	Matthew Ryan (Mayor)
Independent Member	Carolyn Eagle

STAFF PRESENT

Chief Executive Officer	Daniel Findley
Chief Corporate Officer	David Glover
Chief Operating Officer	Chris Kelly
Governance and Risk Advisor	Doreen Alusa
Finance Manager	Andrew Shaw (video conference)

VISITORS PRESENT

Nexia Edwards Marshall NT	Noel Clifford (video conference)
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APOLOGIES

3.1 APOLOGIES AND LEAVE OF ABSENCE

The Committee considered apologies and leave of absence.

The Risk Management and Audit Committee noted members apologies from Deputy Mayor Elizabeth Williams and Councilor Phillip Wasaga for the meeting held on 27 July 2021.

ABSENT WITHOUT NOTICE

4.1 ABSENT WITHOUT NOTICE

The Committee considered absences without notice.

The Risk Management and Audit Committee noted that no members were absent without notice for the meeting held on 27 July 2021.

ACCEPTANCE OF AGENDA**5.1 ACCEPTANCE OF AGENDA**

The Committee considered acceptance of the agenda.

**ACM18/2021 RESOLVED:
On the motion of Mayor Matthew Ryan
Seconded Independent Member Carolyn Eagle**

The agenda for the Risk Management and Audit Committee meeting of 27 July 2021 as circulated was accepted.

CARRIED

DECLARATION OF INTEREST OF MEMBERS OR STAFF**6.1 DISCLOSURE OF INTEREST OF MEMBERS OR STAFF**

The Committee considered the disclosure of interest of members or staff.

The Committee received no declarations of interest for the meeting held on 27 July 2021.

CONFIRMATION OF PREVIOUS MINUTES**7.1 CONFIRMATION OF PREVIOUS RISK MANAGEMENT AND AUDIT COMMITTEE MINUTES - 26 MAY 2021**

The Committee considered the confirmation of previous Risk Management and Audit Committee minutes for the meeting held on 26 May 2021.

**ACM19/2021 RESOLVED:
On the motion of Chairperson Iain Summers
Seconded Independent Member Carolyn Eagle**

The minutes of the 26 May 2021 Risk Management and Audit Committee meeting were adopted as a true and correct record of the meeting.

CARRIED

GENERAL ITEMS

8.1 INTERNAL AUDIT OF THE MANAGEMENT AND MAINTENANCE OF SWIMMING POOLS - TRACKING REGISTER UPDATE

The Committee considered the internal audit of the management and maintenance of swimming pools tracking register update.

ACM20/2021 RESOLVED:

On the motion of Mayor Matthew Ryan
Seconded Independent Member Carolyn Eagle

The Committee:

1. Noted the update provided regarding the internal audit of the operation of Council's swimming pool in Jabiru; and
2. Approved the removal of the following completed item.
 - a. The operation of the Prominent pool controller;
 and the following items for which no further reporting to the Committee is required, since these are items now being managed through grant funding applications:
 - b. Clear signage for male, female, disabled and family change rooms; and
 - c. The installation of ramps, hand rails, change areas, hoists and lifts in accordance with AS1428.1.

CARRIED

8.2 UPDATE ON THE REVIEW OF STRATEGIC AND OPERATIONAL RISK REGISTER

The Committee considered an update on the review of the Strategic and Operational Risk Register.

ACM21/2021 RESOLVED:

On the motion of Independent Member Carolyn Eagle
Seconded Mayor Matthew Ryan

The Committee:

1. Noted the significant progress made towards updating the Strategic and Operational Risk Register and approved the changes as detailed by management;
2. Recommended that the induction of Council members should include a briefing on the Strategic and Operational Risk Register; and
3. Recommended the inclusion of risk management training in the induction program for the 2021-2025 incoming Council.

CARRIED

8.3 UPDATE ON GENERAL ACTION ITEMS LIST

The Committee considered an update on the general action items list.

ACM22/2021 RESOLVED:

On the motion of Chairperson Iain Summers
Seconded Independent Member Carolyn Eagle

The Committee reviewed the list, and approved to remove the following completed items from the list:

1. The inclusion of safe work instructions, skills audit and improved staff induction in the mitigation strategies for Risk #2.2 in the Strategic and Operational Risk Register; and

2. The updates made to specific risks on the Strategic and Operational Risk Register as per the Committee's recommendations during the meeting held on 26 May 2021.

CARRIED

Minute note: Noel Clifford joined the meeting at 11:14 am and left at 11:52 am.

AUDIT REPORTS

9.1 AUDIT INTERIM COMPLETION REPORT FOR THE YEAR ENDED 30 JUNE 2021

The Committee considered the audit interim completion report for the year ended 30 June 2021.

ACM23/2021 RESOLVED:

On the motion of Chairperson Iain Summers
Seconded Independent Member Carolyn Eagle

The Committee:

1. Received and noted the Nexia Edwards Marshall NT audit interim completion report for the year ended 30 June 2021; and
2. Discussed the management of the external audit and noted the Committee's feedback to the auditor that although it was satisfied that there were no matters identified in the interim audit to report to management, the Committee had expected that the auditor would have identified how he would be assessing the carrying value of property plant and equipment in Jabiru as at 30 June 2021.

CARRIED

9.2 STRATEGIC INTERNAL AUDIT PLAN 2020 - 2022

The Committee considered the Strategic Internal Audit Plan 2020 - 2022.

ACM24/2021 RESOLVED:

On the motion of Mayor Matthew Ryan
Seconded Independent Member Carolyn Eagle

The Committee:

1. Noted the updates to the Strategic Internal Audit Plan and the revised Audit Review timelines for 2021/22; and
2. Requested that the subsequent 2 year audit plan topics be provided at the Committee's first meeting in 2022.

CARRIED

PROCEDURAL MOTIONS

10.1 CLOSURE TO THE PUBLIC FOR THE DISCUSSION OF CONFIDENTIAL ITEMS

The Committee considered a report on the closure to the public for the discussion of confidential items.

ACM25/2021 RESOLVED:

**On the motion of Mayor Matthew Ryan
Seconded Independent Member Carolyn Eagle**

The Committee approved the closure of the meeting to the public as confidential items were about to be discussed. The meeting was closed in accordance with clause 51(c) as the matters to be discussed included information that, if publicly disclosed, would be likely to cause commercial prejudice to, or confer an unfair commercial advantage on, any person; or (ii) prejudice the maintenance or administration of the law; or (iii) prejudice the security of the council, its members or staff; or (iv) subject to subregulation (3) – prejudice the interests of the council or some other person.

CARRIED

EXCLUSION OF THE PUBLIC

CONFIDENTIAL ITEMS

The information is classed as confidential under Section 99(2) of the *Local Government Act 2019* and clause 52 of the *Local Government (Administration) Regulations 2021*.

RE-ADMITTANCE OF THE PUBLIC

CONFIDENTIAL ITEMS

4.4 DISCLOSURE OF CONFIDENTIAL RESOLUTIONS AND RE-ADMITTANCE OF THE PUBLIC

The Committee considered the disclosure of confidential resolutions and re-admittance of the public.

ACM26/2021 RESOLVED:

**On the motion of Chairperson Iain Summers
Seconded Independent Member Carolyn Eagle**

The Committee opened the meeting to the public after the discussion of confidential items, and approved to disclose selected resolutions from the confidential section of this meeting in the non-confidential meeting minutes.

CARRIED

1.1 CONFIRMATION OF PREVIOUS MINUTES - CONFIDENTIAL RISK MANAGEMENT AND AUDIT COMMITTEE MEETING 26 MAY 2021

The Committee considered the confirmation of previous confidential Risk Management and Audit Committee meeting minutes for the meeting held on 26 May 2021.

ACM27/2021 RESOLVED:

**On the motion of Chairperson Iain Summers
Seconded Independent Member Carolyn Eagle**

The minutes of the 26 May 2021 confidential Risk Management and Audit Committee meeting were confirmed as a true and correct record of the meeting.

CARRIED

2.2 INTERNAL AUDIT - PAYROLL, INFRASTRUCTURE AND ASSET MANAGEMENT (PROCUREMENT) - TRACKING REGISTER UPDATE

The Committee reviewed the Internal Audit - Payroll, Infrastructure and Asset Management (Procurement) tracking register update.

ACM28/2021 RESOLVED:

**On the motion of Chairperson Iain Summers
Seconded Independent Member Carolyn Eagle**

The Risk Management and Audit Committee:

- 1. Noted the updates provided regarding the internal audit: Payroll, Infrastructure and Asset Management (Procurement);**
- 2. Approved the revision of due dates; and**
- 3. Approved the removal of the following completed item:**
 - a. Pre-approval of overtime and higher duties allowance.**

CARRIED

3.3 UPDATE ON CONFIDENTIAL ACTION ITEMS

The Committee considered reviewed the confidential action items list.

ACM29/2021 RESOLVED:

**On the motion of Chairperson Iain Summers
Seconded Independent Member Carolyn Eagle**

The Committee reviewed the confidential action items list, and approved the removal of completed actions from the internal audit – payroll, infrastructure and asset management (procurement) list.

CARRIED

NEXT MEETING

The next meeting is scheduled to be held on Wednesday, 27 October 2021 at 10:00 am.

MEETING DECLARED CLOSED

Chairperson Iain Summers declared the meeting closed at 12:27 pm. As this was his last Committee meeting, he thanked the Committee's elected members for their work on the Committee, and acknowledged the support provided to the Committee by the management and governance team members.

This page and the preceding pages are the minutes of the Audit Committee meeting held on Tuesday, 27 July 2021.

Chairperson

Date Confirmed

WEST ARNHAM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	8.1
Title:	Appointment of Audit Committee Members
File Reference:	970692
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

The purpose of this report is for the Committee to note the appointment of Elected Members and the Independent Chair to the Risk Management and Audit Committee.

BACKGROUND

At the July meeting of the Committee, and in accordance with the Committee's Terms of Reference, the tenure of the Elected Members of the Committee ceased pending the election of a new Council. Local Government elections were held in August 2021, and newly Elected Members were sworn in during Council's first meeting on 22 September 2021.

Appointments to the Risk Management and Audit Committee was considered at the September meeting, and the following motion was resolved:

8.13 RISK MANAGEMENT AND AUDIT COMMITTEE MEMBERSHIP: APPOINTMENT OF ELECTED MEMBERS AND COMMENCEMENT OF APPOINTMENT OF INDEPENDENT MEMBER

The Council considered a report on Risk Management and Audit Committee Membership: Appointment of Elected Members and Commencement of Appointment of Independent Member.

OCM77/2021 RESOLVED:

**On the motion of Deputy Mayor Elizabeth Williams
Seconded Councillor James Marrawal**

Council:

- **Appointed the following Elected Members to the Risk Management and Audit Committee:**
 1. **Mayor Mathew Ryan**
 2. **Deputy Mayor Elizabeth Williams**
 3. **Councillor Gabby Gumurdul**
 4. **Councillor James Woods**
 5. **Councillor Catherine Ralph**
 6. **Councillor Jacqueline Phillips**
- **Approved the appointment of Carolyn Eagle as the Chairperson of the Risk Management and Audit Committee for the duration of this Council's term in office (4 years);**
- **Approved the commencement of the recruitment of an independent/ external member for the Risk Management and Audit Committee; and**
- **Reviewed and noted the attached Terms of Reference and Charter for the Risk Management and Audit Committee.**

CARRIED

COMMENT

As per Council's resolution, the recruitment of an Independent Member has commenced, and a paper about the process has been included in the confidential section of this meeting.

STATUTORY ENVIRONMENT

Part 5.3 of the *Local Government Act 2019*.

POLICY IMPLICATIONS

Appointments to the Committee are made in accordance with its Charter and Terms of Reference. The documents have been updated as per changes in the newly enacted *Local Government Act 2019* and the *Local Government (General) Regulations 2021*. The updated documents are included in this meeting's agenda for review and approval.

FINANCIAL IMPLICATIONS

Allowances for attending Committee meetings are included in the 2021-2022 budget as follows:

Allowance	Elected Member	Independent Member
Allowance per meeting	\$145.00 per meeting (to a maximum of \$9,006.64 per annum for all extra meeting allowances)	As per the C1 daily rate in the Northern Territory <i>Statutory Bodies Classification Structure</i>

STRATEGIC IMPLICATIONS

In considering this report, Council is fulfilling its obligations and meeting the objectives contained in the *Regional Plan and Budget 2021-2022* as follows:

GOAL 1 COMMUNITY ENGAGEMENT	
<i>Community members and stakeholders that are engaged in, connected to and participate in the affairs of the region.</i>	
Objective 1.4	Strong governance and leadership.
GOAL 2 LOCAL GOVERNMENT ADMINISTRATION	
<i>Systems and processes that support the effective and efficient use of financial and human resources.</i>	
Objective 2.1	An effective, efficient and accountable Regional Council.
Objective 2.4	Planning and reporting that informs Council's decision-making processes.
Objective 2.6	The minimisation of risks associated with the operations of Council.

VOTING REQUIREMENTS

Simple majority.

RECOMMENDATION:

That the Committee notes the appointment of the following members to the Risk Management and Audit Committee for the Fifth Council's term in office:

- 1. Ms Carolyn Eagle (Independent Chair)**
- 2. Mayor Mathew Ryan**
- 3. Deputy Mayor Elizabeth Williams**
- 4. Councillor Gabby Gumurdul**
- 5. Councillor James Woods**
- 6. Councillor Catherine Ralph**
- 7. Councillor Jacqueline Phillips**

WEST ARNHAM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	8.2
Title:	WHS Management System Update
File Reference:	969183
Author:	Linda Veugen-Yong, PL Coordinator WHS

SUMMARY

This report summarises improvement actions made to West Arnhem Regional Council's (WARC's) Work Health Safety (WHS) Management System during the 5-month period between May and September 2021.

BACKGROUND

This report is to provide an update on Council's WHS Management System.

COMMENT

WHS Management System progress and achievements for the above period include:

Consultation & Communication

- WHS Committee meeting held on 12 August 2021 - Chaired from Minjilang.
- Email communications to staff:
 - Online Abuse in the workplace
 - Men's Health Week – 14-20 June 2021
 - RU OK Day – 9 September 2021
 - Women's Health Week – 6-10 September 2021
- "In the Loop" contributions, topics included:
 - May – Assessing High Risk Activities – SWMs template, Fall's from Heights reminder, Evacuation diagrams installed around WARC,
 - June - Emergency Management Plan Consultation, Evacuation diagrams installed around WARC, Lunch & Learn pictures, Celebrating Incident Reporting, WHS Duty of Care, Manual Handling training notice
 - July – Lunch & Learn, COVID safety– Check-in, WHS Management Plan consultation, First aid kits - Waruwi
 - August – Side-by-Side vehicle operators – hew helmets, sun safety hat reminder, Let's talk – "hazards" visit Minjilang & Waruwi, near missing reporting reminder, clean air-clear lungs, Training – first aid & liquefied chlorine gas disinfection, Chemical Register & SDS Collection
 - September – Chemical Register & SDS Collection thank you and reminders, Look out for October National Safe Work Month, reminder final manual handling training session in series, Working in the heat & Working in head , know the warning signs.
- Safe Work Instructions (SWI) – Consultation was undertaken on SWI needs and priorities across the Works Teams. 55 instructions were identified, and were broken up into 3 groups. Senior Works Offers were each given 5 or 6 instructions to draft with their teams. 5 Instructions are almost completed.

Hazard Identification & Risk Control

- WHS and Training Coordinators visited Minjilang, Waruwi, Gunbalanya and Jabiru in August and September. "Let's talk – Hazards" group sessions were held as widely as possible

identifying hazards, current controls and opportunities to improve the controls and reduce risks. Identified areas of improvement will form basis of future WHS activities.

- Specialists were contracted to audit the Gunbalanya and Minjilang Fuel tanks. Neither had been audited in over 10 years, missing recommended audit scheduling at 5 & 10 years. The report on the Gunbalanya tank revealed significant works required to make it both safety and standard compliant. Technical Services team is taking the lead on researching best options moving forward.
- An audit on asbestos in the Waruwi office building was conducted revealing remediation works are required. (Asbestos is inside the ceiling cavity was on the Asbestos register and appropriately labelled and also an area with limited access). A quote was also obtained for the remediation works and the Technical Services Team is now taking care of this matter.
- Safe Work Method Statement template and resources were made available to staff.
- WHS Activities Calendar was developed and made available to staff.
- Emergency Evacuation Diagrams installed around WARC sites.
- Chemical Register and SDS:
 - resources and template developed;
 - training was provided to WHS Contact Officer;
 - instructions sent to staff to complete during September; and
 - work will continue on obtaining 100% completion.
- Side-by-side vehicle:
 - Safe Work Instruction (SWI) for operating side-by-side – developed by consultation;
 - helmet wearing instructions; and
 - all resources were communicated out to relevant staff.
- Emergency Management Plan – drafted and consulted.
- WHS Management Plan (Construction and Projects) – draft and consulted.

Training – WHS related

Council was pleased to report 72% of employees participated in at least one training activity during the six month period February to July 2021.

76 % of the type of training conducted was mandatory training activities (WHS, operations etc.), with 69 % of the mandatory training was related to WHS.

WHS training provided for this reporting period include:

- First Aid, Fire Warden and Fire Extinguisher training was delivered to Maningrida in July
- Work Safely at Heights
- NDIS Infection Control Training - COVID 19
- Aquatic Technical Operator Skill Set
- Asbestos Awareness Training
- Pool Lifeguard
- Liquefied chlorine gas
- Breathing Apparatus

“Lunch and Learn” sessions were held over teleconference, tying in all WARC sites. These sessions were aimed at building staff wellbeing. Information was presented by Council’s Employee Assistance provider - Drake WorkWise. The lunch time sessions were attend by 457 staff over eight sessions (eight weeks), topics were:

- EAP Awareness Session
- Insights on Mental Health in the Workplace
- Building a resilient workplace through leadership
- Stress and Resilience in the workplace
- Grief and Loss
- Domestic and Family Violence

- Personal Wellbeing and Mindfulness
- Assertive Communication

89% of attendees rated the lunch and learn activities positively.

Manual handling training was delivered via video conferencing to 135 employees over 4 sessions.

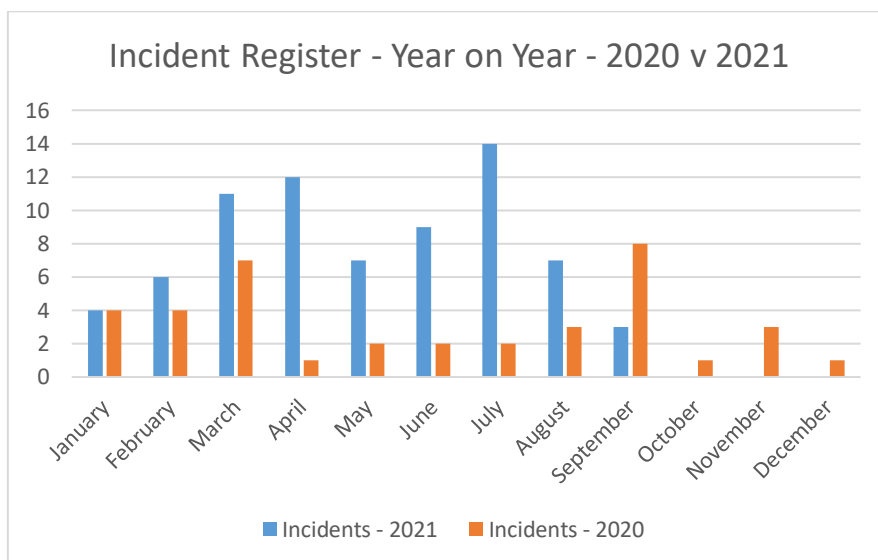
Work in progress

Items still undergoing work or due for completion soon:

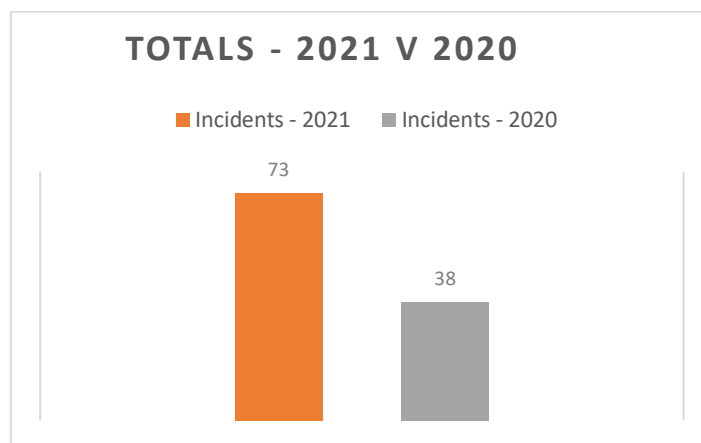
- Improved Staff Induction – Research conducted by Manager People & Capability to purchase an online induction and learning management platform.
- National Safe Work Month – Council participation, posters and competition.
- Chemical Register and SDS collection to 100% completion.
- Safe Work Instruction development.

Incident Reporting

Timely incident and injury reporting was identified as an area for improvement. Continual regular communications raising awareness and encouraging a reporting culture, has resulted in continual increases in reporting numbers in 8 out of 9 months of 2021 to date.



This year 73 incidents have been reported and total of 38 incidents for 2020^*. This represents a 92% increase to date (three months to go). This is directly evidencing a positive shift in a reporting culture which positively results in direct impacts on risk controls and reduction.



A very small number of 2020 year incidents are not directly related to WHS, recent data collection is focusing on reporting on only WHS relevant incidents.

STATUTORY ENVIRONMENT

Work Health and Safety (National Uniform Legislation) Act 2011

POLICY IMPLICATIONS

Work Health and Safety Policy

FINANCIAL IMPLICATIONS

Not applicable.

STRATEGIC IMPLICATIONS

The contents of this report are aligned to the following goal as outlined in the *Regional Plan and Budget 2020-2021*

GOAL 2 LOCAL GOVERNMENT ADMINISTRATION

Systems and processes that support the effective and efficient use of financial and human resources.

Objective 2.2

A professional, skilled, safe and stable workforce.

VOTING REQUIREMENTS

Not applicable

RECOMMENDATION

That the Committee notes the report.

WEST ARNHEM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	8.3
Title:	Internal Audit of the Management and Maintenance of Swimming Pools - Tracking Register Update
File Reference:	970358
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

The purpose of this report is to update the Committee on the progress of the internal audit being undertaken in relation to the effectiveness of West Arnhem Regional Council's (WARC's) swimming pools risk mitigation strategies.

BACKGROUND

At its meeting held on 28 February 2018, the Risk Management and Audit Committee accepted the terms of reference for the internal audit of the risk mitigation strategies associated with the operation of Council's swimming pools. At the commencement of this internal audit, it was intended that it be conducted in-house. Following initial work on this assignment, it became apparent that due to the technical nature of some of the aspects associated with this internal audit there was a need for expertise from external entities.

Consequently, a decision was taken to engage the following:

1. Royal Life Saving Society Australia (RLSSA) Northern Territory
2. Figleaf Pool Products

Both entities were fully briefed as to the requirements of the internal audit. The Committee was presented with the reports of the Figleaf products and the RSLLA at its August 2018 meeting. At the time, the Committee requested that management responses be provided at the February 2019 meeting which was rescheduled to March 2019.

At its March 2019 meeting, the Committee noted that action relating to several of the recommendations had already been initiated and completed since the reports were delivered, and that pending actions would be completed by the end of 2020. However, this was not achieved due to staffing changes and delays caused by the COVID 19 pandemic. Work on the pending actions has currently resumed at the swimming pools, and the remaining recommendations will be completed in 2021 as indicated in the attached swimming pools action items lists.

STATUTORY ENVIRONMENT

Part 5.3 of the *Local Government Act 2019*.

POLICY IMPLICATIONS

The internal audit is being undertaken in accordance with documents that guide WARC's approach to risk management, including:

- Audit Committee Charter Terms of Reference
- Risk Management Policy and Framework
- Strategic and Operational Risk Register
- Strategic Internal Audit Plan 2020-2022
- Internal Audit Protocol

FINANCIAL IMPLICATIONS

The costs associated with implementing the recommendations outlined in the attached swimming pools action items lists are contained in the approved budget.

STRATEGIC IMPLICATIONS

The completion of this audit will serve to achieve the following performance objectives of the *Regional Plan and Budget 2021-2022*:

GOAL 2 LOCAL GOVERNMENT ADMINISTRATION	
<i>Systems and processes that support the effective and efficient use of financial and human resources.</i>	
Objective 2.6	The minimisation of risks associated with the operations of Council.

GOAL 3 LOCAL INFRASTRUCTURE	
<i>Well maintained and enhanced built and natural environment.</i>	
Objective 3.1	Infrastructure and asset management strategies appropriate to the needs of Council.
Objective 3.5	Buildings, facilities and infrastructure assets that are fit for purpose and sufficient to service operational requirements

VOTING REQUIREMENTS

Simple majority.

RECOMMENDATION:

That the Committee:

1. Notes the update provided regarding the internal audit of the operation of Council's swimming pool in Jabiru; and
2. Approves the removal of completed items.

ATTACHMENTS

- 1 Jabiru Swimming Pool Action Items - Ongoing.pdf

FIGLEAF - Key Improvement Opportunities for the Aquatic Facility at Jabiru		
Item No.	Action Item	Response & Update
1.	The hair and lint strainer baskets within each pump must be replaced as they are beyond repair.	<p>The baskets have been ordered, however, they need to be prefabricated as they are not a standard item off the shelf. They are expected to arrive by the end of June</p> <p>17 August 2020 – Stephen Hoynes A review of the Jabiru aquatic centre infrastructure has been proposed as a part of the Jabiru Futures Beautification program. The works identified in the current action list will be considered in the site development proposal and where necessary, remedial works will be undertaken.</p> <p>23 February 2021 – Clem Beard At the December OCM, Council passed a resolution approving capital expenditure at the Jabiru and Maningrida swimming pools for remedial works listed in this report.</p> <p>Pristine Pools have been engaged (22/02/21) to provide quotes to carry out all listed mechanical and plumbing works including fabrication of baskets. The proposed works can be scheduled when the pool is closed whilst beautification works are undertaken.</p> <p>17 May 2021 – Clem Beard Pristine Pools have received a purchase order to proceed with works which involve the replacement of 6 filters and major overhaul of plant room operation including action items. The expected date of commencement is the first week of June 2021.</p> <p>20 July 2021- Clem Beard The administration has contracted HD Pumps to complete this action. The lint strainers are currently under fabrication at the Darwin fabrication workshop and will be installed by 30 August 2021.</p> <p>19 October 2021- Clem Beard The lint strainers/baskets have been fabricated and installed at the pool and are in operation as per action item</p>
2.	Anti-oxidisation treatment on pumps to prolong working life.	The Services Manager has put in place a program to have this rectified. This is now a maintenance process taken from the audit action items.
		Proposed Completion Date 30 August 2021

Item No.		Action Item	Response & Update	Proposed Completion Date
			<p>17 August 2020 – Stephen Hoyne A review of the Jabiru aquatic centre infrastructure has been proposed as a part of the Jabiru Futures Beautification program. The works identified in the current action list will be considered in the site development proposal and where necessary, remedial works will be undertaken.</p> <p>23 February 2021 – Clem Beard At the December OCM, Council passed a resolution approving capital expenditure at the Jabiru and Maningrida swimming pools for remedial works listed in this report.</p> <p>Pristine Pools have been engaged (22/02/21) to provide quotes to carry out all listed mechanical and plumbing works including sourcing anti-oxidation treatment. The proposed works can be scheduled when the pool is closed whilst beautification works are undertaken.</p> <p>17 May 2021 – Clem Beard This is an ongoing process that is included in regular maintenance routine.</p> <p>Further works in anti –oxidisation of pumps and equipment will proceed when contractor is onsite working on the upgrading of system and replacement of filters</p> <p>Pristine pools have received a purchase order to proceed with works which involve the replacement of 6 filters and major overhaul of plant room operation including action items. The expected date of commencement is the first week of June 2021.</p> <p>20 July 2021- Clem Beard HD Pumps has been contracted to complete this action. Anti-oxidisation treatment on the pumps will be done when the swimming pool filters have been replaced. Estimated date of completion is 30 August 2021.</p> <p>19 October 2021- Clem Beard Anti-oxidisation treatment on the pumps was completed at the installation of new swimming pool filters at the End of August as planned by HD Pumps Darwin.</p>	

WEST ARNHEM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	8.4
Title:	Update on General Action Items
File Reference:	970359
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

This report is submitted for the Committee to consider the progress on outstanding resolutions from Risk Management and Audit Committee meetings.

BACKGROUND

This report is a standard report submitted to the Committee to note the actions taken with respect to Risk Management and Audit Committee resolutions. The items included on the action items list emanate from resolutions that were passed during the Risk Management and Audit Committee meeting held on 27 July 2021.

POLICY IMPLICATIONS

As per the Risk Management and Audit Committee's Charter, the Committee is responsible for monitoring and evaluating management's responsiveness to matters raised during the course of its meetings.

STRATEGIC IMPLICATIONS

In fulfilling its responsibilities, the Committee is mindful of Council's Objectives detailed in the *Regional Plan and Budget 2021-2022* as follows:

GOAL 2 LOCAL GOVERNMENT ADMINISTRATION

Systems and processes that support the effective and efficient use of financial and human resources.

Objective 2.6

The minimisation of risks associated with the operations of Council.

VOTING REQUIREMENTS

Simple majority.

RECOMMENDATION:

That the Committee reviews the list, and approves to remove completed item from the list.

ATTACHMENTS

- 1 Risk and Audit Committee Action Items List - October 2021.pdf

Risk Management and Audit Committee Action Items List

Date Of Meeting	Resolution Number	Action Required	Status	Comment	Action Officer/Team
26 May 2021	ACM17/2021	<p>On the motion of Councillor Philip Wasaga Seconded Deputy Mayor Elizabeth Williams</p> <p>The Committee:</p> <ol style="list-style-type: none"> Noted the updates made, and after discussion with management about alternative review procedures being available, endorsed the removal of the following auditable areas from the plan: <ul style="list-style-type: none"> Planning and reporting (item 2.4); Strong governance and leadership (item 1.4); and Storage and retrieval of records (item 2.3). Requested that an updated Plan for 2021-22 and 2022-23 be prepared for the Committee's next meeting on 27 July 2021 to include priority areas of significant existing controls. 	In Progress	<p>20 July 2021 A report on this item, including the updated Strategic Internal Audit Plan 2021-2022 has been prepared for this meeting. The 2022-2023 Plan will be prepared for a subsequent meeting after the election of new Council members.</p>	Chief Corporate Officer
ACM24/2021		<p>On the motion of Mayor Matthew Ryan Seconded Independent Member Carolyn Eagle</p> <p>The Committee:</p> <ol style="list-style-type: none"> Noted the updates to the Strategic Internal Audit Plan and the revised Audit Review timelines for 2021/22; and Requested that the subsequent 2-year audit plan topics be provided at the Committee's first meeting in 2022. 		<p>19 October 2021 Management is on track to update the Strategic Internal Audit Plan as per the Committee's request and will provide a report on 29 March 2022.</p>	

WEST ARNHAM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	8.5
Title:	Review of Risk Management and Audit Committee Charter and Terms of Reference
File Reference:	971837
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

The purpose of this report is to inform the Committee about updates made to the Risk Management and Audit Committee's Charter and Terms of Reference, and to seek approval of the documents from the Committee's members.

BACKGROUND

The Committee is required to review its Terms of Reference bi-annually, or whenever there are legislative changes. On 19 February 2020, the Committee reviewed its Terms of Reference and resolved the following.

ACM47/2020 RESOLVED:

On the motion of Councillor Elizabeth Williams

Seconded Deputy Mayor Anna Egerton

That the Committee recommends that the Risk Management and Audit Committee Charter and Terms of Reference be further reviewed in light of the enactment of the *Local Government Act 2019* and associated Guidelines and Regulations which will be issued by the Department.

CARRIED

Following on from the above resolution, the *Local Government Act 2019* and the *Local Government (General) Regulations 2021* commenced on 1 July 2021, and the Committee's Charter and Terms of Reference have been updated as per provisions in the new legislation. The updated documents are attached to this report for the Committee's review and adoption.

COMMENT

The following key changes have been made:

Risk Management and Audit Committee Charter

- i. Reference to relevant sections of the *Local Government Act 2019* rather than the repealed *Local Government (Accounting) Regulations 2008* where applicable.
- ii. Reference to Council's recently approved Confidential Information and Business Policy.
- iii. Clarification on the scope of the Committee's activities.

Risk Management and Audit Committee Terms of Reference

Relevant legislation	Change	Section/Page
N/A	<ul style="list-style-type: none"> The inclusion of an independent member in the composition of the Committee. Changes relating to the naming convention of Council's new executive and senior organisational restructure. 	Section 3, page 1
Clause 59 of the Regulations and section 102(2) of the Act	<ul style="list-style-type: none"> Clarification on the contents, review and distribution of Committee minutes. 	Section 4, page 2
Section 86 of the Act	<ul style="list-style-type: none"> Update on term of appointment and termination for elected and independent members 	Section 6, pages 2-3
Clause 67 of the Regulations; <i>Remuneration and Other Entitlements Act 2012</i>	<ul style="list-style-type: none"> Update on the remuneration conditions of Committee members. 	Section 8, page 3

STATUTORY ENVIRONMENT

Sections 86 and 102 of the *Local Government Act 2019*

Clauses 59 and 67 of the *Local Government (General) Regulations 2021*

Remuneration and Other Entitlements Act 2012

POLICY IMPLICATIONS

Not applicable at this time.

FINANCIAL IMPLICATIONS

Allowances for attending Committee meetings are included in the 2021-2022 budget as follows:

Allowance	Elected Member	Independent Member
Allowance per meeting	\$145.00 per meeting (to a maximum of \$9,006.64 per annum for all extra meeting allowances)	As per the C1 daily rate in the Northern Territory <i>Statutory Bodies Classification Structure</i>

STRATEGIC IMPLICATIONS

In undertaking this review, the Committee is fulfilling Council's goals and objectives expressed in the *Regional Plan and Budget 2021-2022* as follows:

GOAL 1 COMMUNITY ENGAGEMENT	
<i>Community members and stakeholders that are engaged in, connected to and participate in the affairs of the region.</i>	
Objective 1.4	Strong governance and leadership.

GOAL 2 LOCAL GOVERNMENT ADMINISTRATION

Systems and processes that support the effective and efficient use of financial and human resources.

Objective 2.1	An effective, efficient and accountable Regional Council .
Objective 2.4	Planning and reporting that informs Council's decision-making processes.
Objective 2.6	The minimisation of risks associated with the operations of Council.

VOTING REQUIREMENTS

Simple majority.

RECOMMENDATION

That the Committee reviews and adopts the updated *Risk Management and Audit Committee Charter (Version 27.10.2021)* and the *Risk Management and Audit Committee Terms of Reference (Version 27.10.2021)*.

ATTACHMENTS

- 1 RMAC CHARTER - October 2021.pdf
- 2 RMAC TERMS OF REFERENCE -October 2021.pdf



Risk Management and Audit Committee Charter

1. Introduction

West Arnhem Regional Council established the Risk Management and Audit Committee (the Committee), pursuant to Part 5.3 of the *Local Government Act 2019* (the Act), as a key component of West Arnhem Regional Council's governance framework.

The Committee is an independent advisory body formed to add value and improve Council's operations. This Committee is to help the Council accomplish its objectives by bringing a systematic disciplined approach to evaluate and improve the effectiveness of Council's financial and corporate governance processes and compliance with legislative and regulatory requirements. This Charter is to be read in conjunction with the Risk Management and Audit Committee Terms of Reference.

2. Independence and Confidentiality

Subject to compliance with Council's Confidential Information and Business Policy, the Committee is authorised to have full, free and unrestricted access to all of Council's records, documents and information solely in the course of undertaking the Committee's activities.

Members of the Committee are responsible and accountable for maintaining the confidentiality of the information they receive during the course of their work on this Committee.

3. Scope of Committee Activities

The Committee's activities encompass all areas of Council including internal financial and operational controls, IT systems, assets management and information management. Nevertheless, the Committee has no direct authority or responsibility for the activities it reviews. The Committee has no responsibility for developing or implementing procedures or systems, and it does not prepare records or engage in line processing functions or activities. Additionally, the work of the Committee does not in any way relieve Council staff of their responsibilities for the development, implementation and maintenance of management control systems in their area.

4. Role and Responsibilities

The Committee will play an active role in:

- i. Developing and maintaining a culture of accountability and integrity;
- ii. Facilitating the integration of good financial and corporate governance practices into day-to-day business activities and processes;
- iii. Promoting a culture of cost-consciousness, self-assessment and adherence to high ethical standards; and
- iv. Promoting a culture of performance and achievement of outcomes.



Approved by Chief Executive Officer: _____ Date: _____
 Approved by Risk Management and Audit Committee Resolution: _____
 Approved by Council Resolution: _____

Page 1 of 2



5. Standards

The Committee's activities will also be conducted in accordance with relevant professional standards deemed appropriate and applicable including:

- 6.1 International Standards for the Professional Practice of Internal Auditing issued by the Institute of Internal Auditors;
- 6.2 Standards relevant to audit issued by Certified Public Accountants Australia and Chartered Accountants Australia and New Zealand;
- 6.3 Standards relevant to IT Audit and Assurance issued by the Information Systems and Control Association; and
- 6.4 Standards issued by Standards Australia and the International Standards Organisation.

6. Review of Charter

The Charter will be endorsed by Council, and shall be reviewed every two years or as deemed necessary by either Council or the Chief Executive Officer.

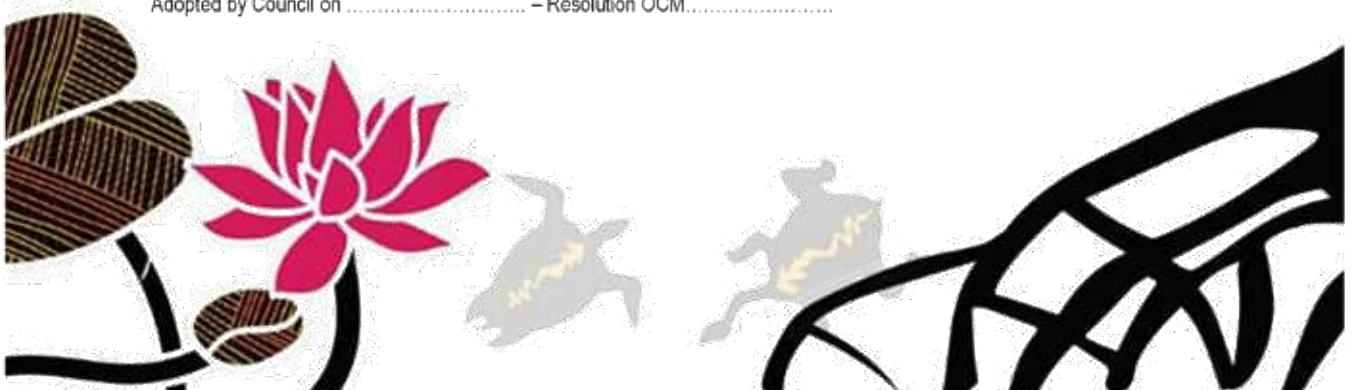




WEST ARNHEM REGIONAL COUNCIL
RISK MANAGEMENT AND AUDIT COMMITTEE
TERMS OF REFERENCE

Version 2021.0: Approved by Audit Committee Meeting held on - Resolution ACM...../2021

Adopted by Council on – Resolution OCM.....



Contents

1. Role.....	1
2. Responsibilities.....	1
3. Composition of the Committee.....	1
4. Committee Meetings and Reporting to Council.....	1
5. Voting Right of Committee Members.....	2
6. Term of Appointment and Termination of Committee Members.....	2
7. Performance and Review.....	3
8. Remuneration of the Committee Members.....	3
9. Committee Access to Council Records and Resources.....	3
10. Conflict of Interest.....	3
11. Review of Terms of Reference.....	3
Appendix: Detailed Responsibilities of the Audit Committee.....	4
1.1 Internal Control and Risk Management.....	4
1.2 Internal Audit.....	4
1.3 External Reporting.....	5
1.4 External Audit.....	6
1.5 Compliance with Standards.....	6

1. Role

The West Arnhem Risk Management and Audit Committee (the Committee) is created as an advisory committee as per provisions in the *Local Government Act 2019* (the Act) and the *Local Government (General) Regulations 2021* (the Regulations). Its role is to monitor West Arnhem Regional Council's (Council) compliance with financial and accounting regulations and standards, as well as any other matters related to the integrity of Council's internal risk controls.

2. Responsibilities

The Committees provides recommendations to Council and the Chief Executive Officer (CEO) that assist in the governance of Council, and the exercising of due care, diligence and skill in relation to:

- i. Internal Control and Risk Management
- ii. Internal Audit
- iii. External Reporting
- iv. External Audit
- v. Compliance with Standards

These responsibilities are expanded upon in the appendix.

3. Composition of the Committee

The Committee will comprise of a minimum of three and not more than six West Arnhem Regional Council elected members, an independent external Chair, and an independent member. At least one member of the Committee will be a qualified accountant holding current accounting certification (CPA or CA). All appointments to the Committee including any external member and the appointment of the Chair shall be approved by Council resolution.

In addition to the Committee members, the following Council staff may attend Committee meetings:

- i. Chief Executive Officer
- ii. Chief Corporate Officer
- iii. Chief Operating Officer
- iv. Governance and Risk Advisor
- v. Finance Manager

The Committee will receive secretariat support from Council staff. Additionally, internal and external auditors may be invited to attend the Committee's meetings at the discretion of the Committee members.

4. Committee Meetings and Reporting to Council

A quorum at each Committee meeting will be the smallest integer greater than half of the total number of Committee members. In the Chair's absence from a meeting, the members of the Committee present at the meeting will select a Chair for that particular meeting.

[1]

Meetings of the Committee may be held face-to-face or through any technological means by which members can participate in a discussion. The notice and agenda of each meeting will be made available to Committee members at least three (3) business days before each meeting. The Committee may invite any persons to attend its meetings as it sees fit, and consult with other persons or seek any information it considers necessary to fulfil its responsibilities. The Committee members may meet separately with the external audit provider and/or head of internal audit to discuss issues of mutual interest, without attendance by management (Council staff).

The Committee should meet at least four times a year to:

- i. Review the draft audited financial statements and auditors report at year end; set the audit agenda and the Committee's work plan. (By the end of August);
- ii. Meet with the auditors, discuss findings and review the draft audited financial statements that will be presented to Council for approval. (If possible, within a reasonable time to ensure compliance with clauses 15 and 16 of the Regulations);
- iii. Monitor the implementation of any audit recommendations accepted by Council; and undertake matters that the Committee is responsible for (for example, review policies, compliance, and so forth). (By the end of February); and
- iv. Undertake matters that the Committee is responsible for (for example, review compliance with legislation, contracts, accounting practices, and so forth). (By the end of May).

The minutes of each Committee meeting should be prepared as per the requirements in clause 59 of the Regulations. The Chair should review the minutes within five (5) business days after the meeting date. The secretariat is to ensure the minutes of Committee meetings are available on Council's website within ten (10) business days after the meeting to which they relate, to comply with section 102(2) of the Act.

The Committee Chair is to report to the Council following each Committee meeting to comply with section 101(4) of the Act. The manner of reporting may be by distribution of a copy of the minutes of the meeting supplemented by other written information if necessary, including any recommendations requiring Council action and/or approval.

The Committee Chair is to provide or facilitate the supply of information regarding the Committee which is to be included in the West Arnhem Regional Council Annual Report. The due date for the information will be advised by the officer responsible for compiling the Annual Report.

5. Voting Right of Committee Members

All Committee members (elected members and independent members) have equal voting rights on the Committee. Any matters requiring a decision will be decided by a majority of votes of members present. In the event of a tie, the Chair has the casting vote.

6. Term of Appointment and Termination of Committee Members

The term of membership for elected members will be the term of the Council. Elected members will be appointed to the Committee at the first Ordinary Council Meeting following the local government general election. Membership of an elected member ceases if they are no longer an elected member.

The independent Chair and independent member should not be elected members of West Arnhem Regional Council or Council staff. Independent members will be appointed by Council for a set period after suitable candidates are interviewed following a public call for expressions of interest. The appointment of independent members will be approved by Council resolution, and may be terminated by Council subject to their appointment agreements.

7. Performance and Review

The Committee will review its performance at least once every two years. This review may be conducted as a self-assessment, and will be coordinated by the Chair. The assessment may seek input from the CEO, the external audit provider, management and any other relevant stakeholders as determined by the CEO. Training needs will be monitored by the Chair.

8. Remuneration of the Committee Members

West Arnhem Regional Council's elected members of the Committee shall be remunerated for their attendance at Committee meetings in accordance with Council's Allowances and Expenses (Elected, Local Authority and Committee Members) Policy. The rate payable is specified annually in Council's Regional Plan and Budget.

The remuneration rate and conditions of the independent members are based on the C1 daily rate in the Northern Territory *Statutory Bodies Classification Structure*, and upon receipt of invoices.

9. Committee Access to Council Records and Resources

Council authorises the Committee, through the Chair, to:

- i. Seek any information it requires from:
 - a. any employee. All employees of the Council are directed to co-operate with any request made by the Committee, and
 - b. external parties;
- ii. Obtain outside legal or other independent professional advice with the agreement of the Council.

10. Conflict of Interest

Committee members will be asked to disclose conflicts of interest at the commencement of each meeting. Ongoing conflicts of interest need not be declared at each meeting once acknowledged. Where members or invitees Committee meetings are deemed to have a real or perceived conflict of interest, they will be excused from Committee discussions and deliberations on the issue where a conflict of interest exists.

11. Review of Terms of Reference

The Committee shall review its terms of reference every two (2) years to provide assurance that it remains consistent with Council's objectives and responsibilities. The Committee shall also review its terms of reference to ensure compliance with any legislative changes.

Appendix: Detailed Responsibilities of the Audit Committee

1.1 Internal Control and Risk Management

- Assess the internal processes for determining and managing key risk areas, particularly:
 - i. compliance with laws, regulations, standards and best practice guidelines, including industrial relations laws;
 - ii. important judgements and accounting estimates;
 - iii. litigation and claims;
 - iv. fraud and theft; and
 - v. relevant business risks other than those that are dealt with by other specific Council committees.
- Based on the risk assessment undertaken by the Council, ensure that the areas of the region that are under Council's jurisdiction have an effective risk management system and that significant or material risks are reported back at least annually to the Council.
- Obtain and assess management reports on any suspected or actual fraud, theft or breaches of laws, and recommend appropriate actions.
- Address the effectiveness of the internal control, risk management and performance management systems with management and the internal and external audit providers.
- Evaluate the process the Council has in place for assessing and continuously improving internal controls, particularly those related to areas of significant risk.
- Assess whether management has controls in place for unusual types of transactions and/or any potential transactions that may involve an unacceptable degree of risk.
- Assess the effectiveness of and compliance with the corporate code of ethical conduct.
- Meet periodically with key management, internal and external auditors and compliance staff to understand and discuss the control environment.
- Review the adequacy of periodical internal financial reports.
- Review compliance with internal policies, plans and procedures.
- Review the delegations of Council staff members.

1.2 Internal Audit

- Make recommendations to Council on the appointment, remuneration and monitoring of the effectiveness and independence of internal audit.
- Be satisfied that sufficient funds are available to enable an effective, comprehensive and complete audit to be conducted for the areas identified for internal audit review.
- Communicate the Committee's expectations to the internal auditor in writing.
- Ensure the internal audit function (whether internal or external) reports directly to the Committee.

[4]

- Review the internal auditor's charter and resourcing (including qualifications, skills, experience, funding and equipment).
- Review and approve the scope of the internal audit strategic plan and annual work program.
- Monitor the progress of the internal audit plan and work program and consider the implications of internal audit findings for the control environment.
- Monitor and assess management's responsiveness to internal audit findings and recommendations.
- Evaluate the process for monitoring and assessing the effectiveness of the internal auditor.
- Ensure that the internal auditor and the external auditor programs are appropriately coordinated to achieve maximum effectiveness; and avoid duplication.
- Provide the opportunity for Audit Committee members to meet with the internal auditor without management personnel being present at least once a year.

1.3 External Reporting

- Consider the appropriateness of accounting policies and principles and any amendments thereto, as well as the methods of applying those policies/principles, ensuring that they are in accordance with the stated financial reporting framework.
- Assess significant estimates and judgements in financial reports by enquiring of management about the process used in making material estimates and judgements and then enquire of the internal and external auditors the basis for their conclusions on the reasonableness of management's estimates.
- Assess management explanations for unusual transactions or significant variances from prior year results or current year budget.
- Review management's processes for ensuring and monitoring compliance with laws, regulations and other requirements (including Australian Accounting Standards and the Local Government Act and its Regulations) relating to external reporting of Council's financial and non-financial information.
- Assess information from internal and external auditors that affects the quality of financial reports (for example, actual and potential material audit adjustments, financial report disclosures, non-compliance with the laws and regulations, internal control issues).
- Ask the external auditor for an independent judgement about the appropriateness, not just the acceptability, of the accounting principles used and the clarity of the financial disclosure practices used or proposed to be used by Council as put forward by management.
- Assess the management of non-financial information in documents (both public and internal) to ensure the information does not conflict with the financial statements or other documents.
- Assess internal control systems covering information releases that have the potential to adversely reflect on the conduct of Council.
- Recommend to Council whether the financial and non-financial statements should be signed by the CEO based on the Committee's assessment of them.
- Review and monitor related-party transactions.

[5]

1.4 External Audit

- Make recommendations to Council on the appointment, remuneration and monitoring of the effectiveness and independence of the external audit provider.
- Review the external audit provider's fee and be satisfied that an effective, comprehensive and complete audit can be conducted for the set fee.
- At the start of each audit, agree the terms of the engagement with the external audit provider. Review the external audit provider's annual engagement letter.
- Invite the external audit provider to attend Committee meetings to review the audit plan, discuss audit results, consider the implications of the external audit findings and otherwise discuss management and the control environment issues.
- Together with the external audit provider, review the scope of the external audit (particularly the identified risk areas) and any additional agreed-upon procedures on a regular and timely basis.
- Enquire of the external audit provider if there have been any significant disagreements with management irrespective of whether or not they have been resolved.
- Monitor and critique management's responsiveness to the external audit provider's findings and recommendations.
- Review all representation letters signed by management and ensure that the information provided is complete and appropriate.
- Provide the opportunity for the Committee members to meet with the external audit providers without management personnel being present at least once a year.
- Review the external audit provider's independence based on the external auditor's relationships and services with the Council and other organisations that may impair or appear to impair the external audit provider's independence.
- Advise Council on the rotation of the external audit provider at intervals of approximately each five years or otherwise as the need may arise.

1.5 Compliance with Standards

All activities and responsibilities of the Committee are to be performed to the standards published by the Council, relevant accounting and auditing standards and relevant legislation.

WEST ARNHEM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	8.6
Title:	Recruitment of an Independent Member for the Risk Management and Audit Committee
File Reference:	971907
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

The purpose of this report is to provide the Risk Management and Audit Committee with an update on the recruitment of an independent member for the Committee.

BACKGROUND

During its first meeting held on 22 September 2021, the Fifth West Arnhem Regional Council approved the recruitment of an independent member for the Risk Management and Audit Committee as per the motion below:

8.13 RISK MANAGEMENT AND AUDIT COMMITTEE MEMBERSHIP: APPOINTMENT OF ELECTED MEMBERS AND COMMENCEMENT OF APPOINTMENT OF INDEPENDENT MEMBER

The Council considered a report on Risk Management and Audit Committee Membership: Appointment of Elected Members and Commencement of Appointment of Independent Member.

OCM77/2021 RESOLVED:

**On the motion of Deputy Mayor Elizabeth Williams
Seconded Councillor James Marrawal**

Council:

- **Appointed the following Elected Members to the Risk Management and Audit Committee:**
 1. **Mayor Mathew Ryan**
 2. **Deputy Mayor Elizabeth Williams**
 3. **Councillor Gabby Gumurdul**
 4. **Councillor James Woods**
 5. **Councillor Catherine Ralph**
 6. **Councillor Jacqueline Phillips**
- **Approved the appointment of Carolyn Eagle as the Chairperson of the Risk Management and Audit Committee for the duration of this Council's term in office (4 years);**
- **Approved the commencement of the recruitment of an independent/ external member for the Risk Management and Audit Committee; and**
- **Reviewed and noted the attached Terms of Reference and Charter for the Risk Management and Audit Committee.**

CARRIED

The administration commenced the recruitment process on Monday, 11 October 2021 with an expression of interest advert that was placed on Council's website and other online platforms including LinkedIn. The advert run for two weeks and closed on Monday, 18 October 2021. To date, four applications have been received, and the Committee is being asked to consider the creation of a selection panel for the position.

COMMENT

Section 86 of the *Local Government Act 2019* requires Council to create and maintain an Audit Committee to monitor Council's compliance with financial and accounting regulations and standards, as well as any other matters related to the integrity of Council's internal risk controls.

The Committee functions as an advisory committee that provides recommendations to Council and the Chief Executive Officer (CEO). In doing so, the Committee assists in the governance of the West Arnhem Regional Council, and the exercising of due care and diligence in relation to:

1. Monitoring and overseeing Council's audit function which includes:
 - a. The development of audit programs;
 - b. The conducting of internal audits;
 - c. The review of audit outcomes; and
 - d. Assessing how audit recommendations have been implemented.
2. Advising Council about the appointment of external auditors, reviewing the auditor's recommendations about Council's key risk and compliance issues, and providing feedback about the auditor's performance.
3. Reviewing and if appropriate, recommending that Council approves financial statements (in conjunction with the auditor's report).
4. Monitoring changes in accounting and reporting requirements.
5. Reviewing compliance and legislative requirements, contracts, standards and best practice guidelines.
6. Monitoring and making recommendations on the adequacy of Council's risk management framework, internal policies, as well as Council's practices and procedures for managing risk.

STATUTORY ENVIRONMENT

Part 5.3 of the *Local Government Act 2019*

POLICY IMPLICATIONS

The Risk Management and Audit Committee Terms of Reference is relevant to this matter.

FINANCIAL IMPLICATIONS

Not applicable at this time.

STRATEGIC IMPLICATIONS

In considering this report, Council is fulfilling its obligations and meeting the objectives contained in the *Regional Plan and Budget 2021-2022* as follows:

GOAL 1 COMMUNITY ENGAGEMENT	
<i>Community members and stakeholders that are engaged in, connected to and participate in the affairs of the region.</i>	
Objective 1.4	Strong governance and leadership.

GOAL 2 LOCAL GOVERNMENT ADMINISTRATION

Systems and processes that support the effective and efficient use of financial and human resources.

Objective 2.1	An effective, efficient and accountable Regional Council.
Objective 2.4	Planning and reporting that informs Council's decision-making processes.
Objective 2.6	The minimisation of risks associated with the operations of Council.

VOTING REQUIREMENTS

Simple majority.

RECOMMENDATION

That the Committee:

- **Notes the report;**
- **Appoints the following to seat on the selection panel for the recruitment of an independent member for the Risk Management and Audit Committee:**
 1. **Ms Carolyn Eagle**
 2. **Mayor Matthew Ryan**
 3. **Deputy Mayor Elizabeth Williams**
 4. **Mr David Glover**

ATTACHMENTS

There are no attachments for this report.

WEST ARNHEM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	8.7
Title:	Overview of Strategic and Operational Risk Register
File Reference:	972186
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

This report has been prepared to provide the Committee with an overview of West Arnhem Regional Council's (WARC's) Strategic and Operational Risk Register.

BACKGROUND

The purpose of risk management is to proactively establish programs and processes that support the achievement of WARC's strategic goals and objectives while protecting the organisation's assets (which include its employees, property, income and reputation) from loss or harm, at the lowest possible cost. WARC has a Strategic and Operational Risk Register (the Register) that identifies what may affect the strategic direction of Council, and how to manage any risks that Council may encounter.

COMMENT

The Register is reviewed annually, and the last review was completed in July 2021. The periodic review and update of the Register:

- Enables management to identify, analyze, evaluate and treat risks that may have an impact on Council's operations.
- Contributes to good governance by providing information that enables Council to make informed decisions.

STATUTORY ENVIRONMENT

The activities of the Audit Committee are conducted in accordance with Part 5.3 of the *Local Government Act 2019* and relevant clauses of the *Local Government (General) Regulations 2021*.

POLICY IMPLICATIONS

The Risk Management and Audit Committee Terms of Reference is relevant to this matter.

FINANCIAL IMPLICATIONS

There are no financial implications.

STRATEGIC IMPLICATIONS

This report is aligned to the following objective in goal 2 of the *Regional Plan and Budget 2021-2022*:

GOAL 2 LOCAL GOVERNMENT ADMINISTRATION

Systems and processes that support the effective and efficient use of financial and human resources.

Objective 2.6

The minimisation of risks associated with the operations of Council.

VOTING REQUIREMENTS

Not applicable.

RECOMMENDATION:

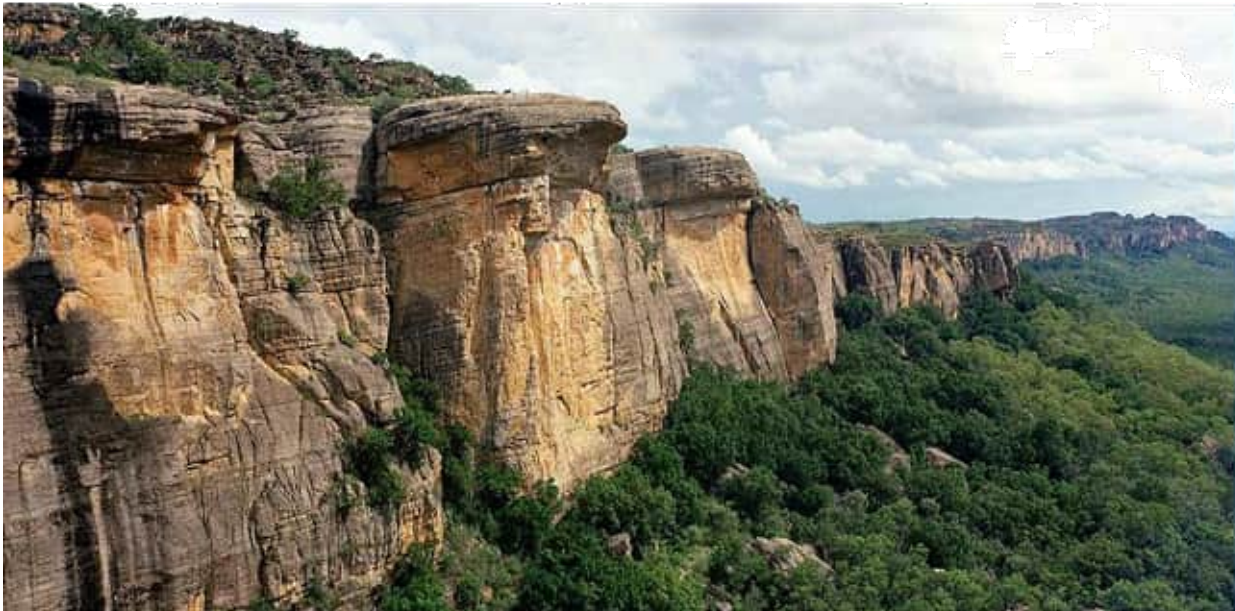
That the Committee notes and discusses WARC's Strategic and Operational Risk Register.

ATTACHMENTS

- 1 STRATEGIC AND OPERATIONAL RISK REGISTER - July 2021.pdf

WEST
ARNHEM
REGIONAL
COUNCIL

**STRATEGIC &
OPERATIONAL
RISK REGISTER:
Reviewed and
Updated July
2021**



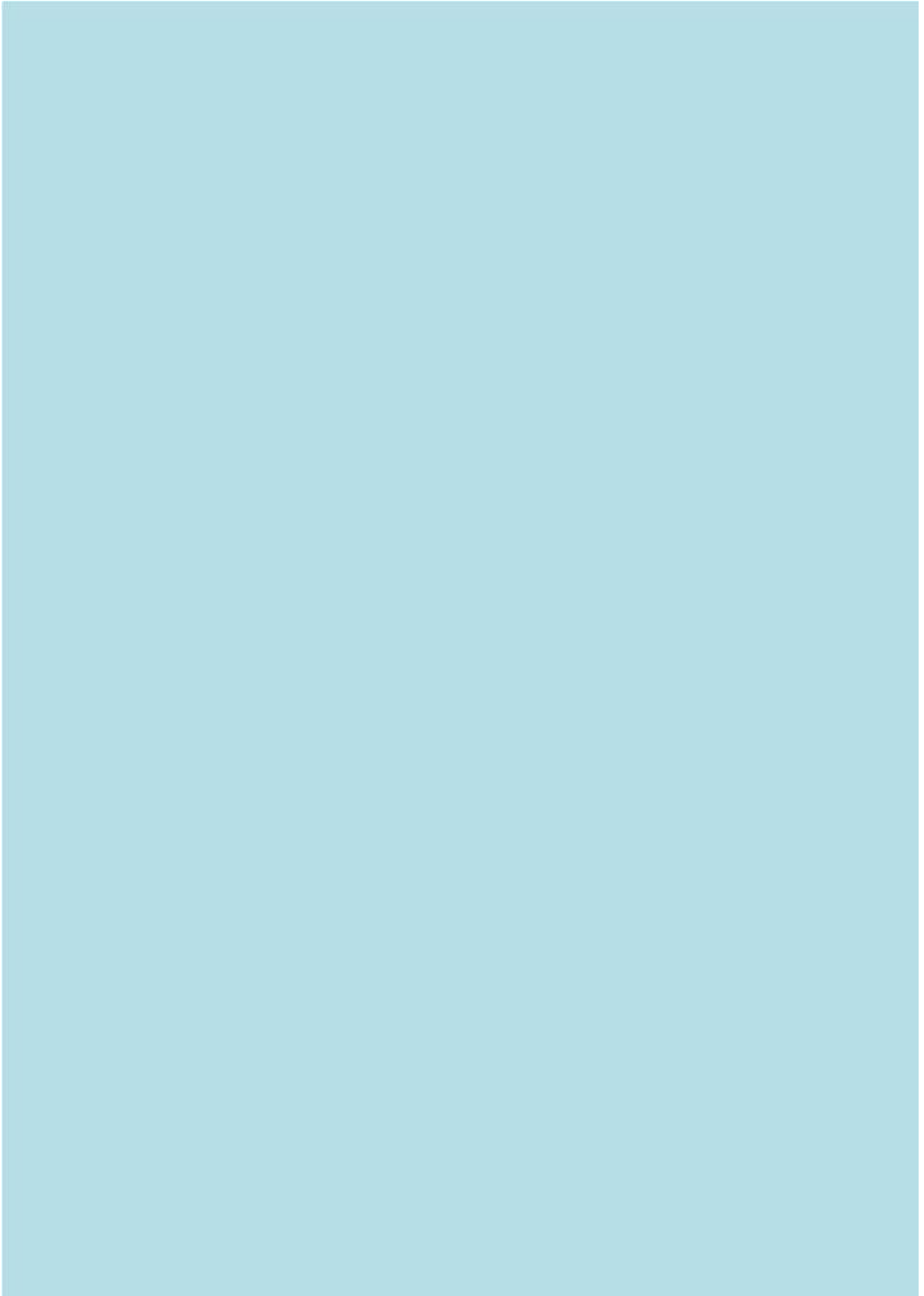


TABLE OF CONTENTS

TABLE OF CONTENTS	3
RISK MANAGEMENT	4
The Risk Register Overview	4
Stages in Completing the Risk Register	5
Strategic Plan	10
Performance Objectives	11
Core Service Activities	13
Community and Commercial Service Activities	15
IDENTIFIED RISKS	17
Community Engagement in Local Government	17
Local Government Administration	21
Local Infrastructure	28
Local Environmental Health	35
Local Civic Services	37
Social and Commercial Services	38

THE RISK REGISTER OVERVIEW

The purpose of risk management is to proactively establish programmes and processes that support the achievement of West Arnhem Regional Council's strategic goals and objectives while protecting the organisation's assets—its employees, property, income and reputation—from loss or harm, at the lowest possible cost.

To be effective, West Arnhem Regional Council's (WARC) risk management plan requires the development and maintenance of an ongoing process that enables the identification, analysis, evaluation, and treatment of risks that may impact the Council. This knowledge further enables the prioritisation of actions to reduce these risks to an acceptable level. What results from this risk management process is a substantial amount of risk management information that needs to be managed in such a way that it can be found and applied quickly and efficiently.

WARC manages its risk management information through its Risk Register. The Risk Register serves as a central repository for WARC's risk information and allows for the information that results from the risk management process to be suitably sorted, standardised, and merged for relevance to the appropriate level of management. Its key function is to provide management, Council, and key stakeholders with significant information on the main risks faced by WARC. The risk register also gives WARC's risk management stakeholders a clear view of the current status of each risk, at any point in time.

The Risk Register, as part of the risk management plan, will help management to:

- Understand the nature of the risks the WARC faces in achieving its strategic goals and objectives.
- Become aware of the extent of those risks.
- Identify both the level of risk that WARC's management is willing to accept and the level of risk that WARC itself is willing to accept.
- Recognise its ability to control and reduce risk.
- Report the risk status at any point in time.

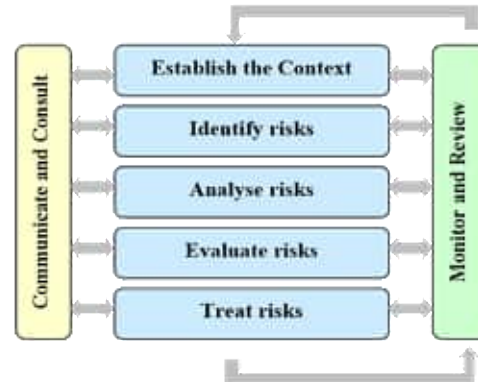
The Risk Register will help WARC record the following risk management information:

- Type of risk
- Likelihood of the risk occurring and its potential impact to the organization.
- Risk priority, based on its effect on WARC.
- Actions taken to prevent the risk from happening.
- Risk mitigation/reduction actions taken in case the risk does occur.

STAGES IN COMPLETING THE RISK REGISTER

The steps outlined below are based on the Australian/New Zealand ISO Standard - Risk Management AS/NZ ISO 31000:2009. Work groups are to follow this process in completing the risk register, and the same process can also be applied in project, contract and common operational areas.

Figure 2: The Risk Management Process (AS/NZS/ISO 31000:2009)



1.1 Stage 1: Establish the Context

- i. This step involves establishing the context in which the rest of the process will take place. The objectives, strategies and scope of the activity, or part of Council to which the risk management process is being applied, should be established.
- ii. A key step in Council's risk process is the need to identify and evaluate risks in relation to how they affect Council's ability to deliver the strategies identified in Council's Regional Plan.

1.2 Stage 2: Identify Risks and Risk Owner

- i. This step seeks to identify the risks that need to be managed. The aim is to generate a list of risks that might have an impact on the achievement of work group outcomes. These risks might prevent, degrade, delay or enhance the achievement of those objectives.
- ii. It is intended that risks are identified and measured using data where it is available. Only when objective data is not available are judgements based on experience and existing risk registers allowed.
- iii. Descriptions of identified risks consider source and impact, what the risk is, whom it impacts upon and what the impact is.
- iv. Identifying the risk and risk owner involves the following steps:
 - describe the nature of the risk (Risk Description);
 - link the risk to the most relevant strategic risk (Risk Number);
 - allocate a risk number (Risk Number);
 - identify a risk owner (Risk Owner);
 - identify the causes of the risk (Risk Factors/Cause); and
 - provide a brief description of the impact/consequence of the risk (Risk Effect). In assessing the impact/consequences, consideration may be given to a range of issues including business management, political, commercial and legal, finance and human resources.

Strategic & Operational Risk Register



1.3 Stage 3: Analyse Risks

Analysing risks involves the following steps to determine the inherent risk rating and residual risk rating.

Inherent Risk Rating

- i Rate the consequence of the risk should it occur, and the likelihood of the risk occurring using the descriptors provided in Tables 1 and 2 below. To determine the inherent risk rating, it is important that the consequence and likelihood of each risk is rated without considering the existing controls and mitigation strategies. This produces a score that indicates worse-case exposure in the event that there are no controls in place or the controls fail to take effect during a risk event.
- ii Now consider the matrix for assessing risks (see Tables 2 and 3 below). Using this matrix, identify the risk rating as Critical, High, Medium or Low.

Residual Risk Rating

- i. Consider what is currently being done to mitigate/manage the risk, i.e. what controls are in place? Are there already some mitigation strategies in place to manage the risk? Briefly list the controls and mitigation strategies.
- ii. Rate the consequence of the risk should it occur, and the likelihood of the risk occurring using the descriptors provided in Tables 1 and 2 below.
- iii. It is important that the consequence and likelihood of each risk is rated in the context of existing controls and mitigation strategies.
- iv. Now consider the matrix for assessing risks (see Tables 2 and 3 below). Using this matrix, identify the risk rating as Critical, High, Medium or Low.

1.3 Table 1 – Consequence of Risk Occurring

In rating the consequence of the risk occurring, the table below also provides some further qualitative descriptors of consequence to be considered when determining which consequence is the most appropriate.

Level		Strategic Delivery	Systems (Service Delivery)	Human Resources Health/Safety	Finance, Legal and Regulatory	Reputation / Stakeholder
5	Catastrophic	Community outrage; Major adverse quality problem; Major milestone missed by > 1 year.	Complete and indefinite disruption to services >6 months; Intervention by Minister.	A large number of key employees or elected members leave; Death or significant permanent disability to one or more persons.	Large scale class action; Material breach of legislation with very significant financial or reputational consequences; Direct loss >\$1m.	Extended Territory-wide adverse media coverage; Intervention by Minister.

Strategic & Operational Risk Register



Level		Strategic Delivery	Systems (Service Delivery)	Human Resources Health/Safety	Finance, Legal and Regulatory	Reputation / Stakeholder
4	Major	Failure to achieve some performance targets; Major milestone missed by 6 - 12 months.	Long term disruption to services with extended resources required to remedy >1 to <6 months.	Some key employees leave; High staff turnover; Poor reputation as an employer; Hospital admission (inpatient); Minor or reversible disability.	Regulatory breach with material consequences but which cannot be readily rectified; Direct loss of \$250,000 to \$1 million.	On-going local or Territory- wide adverse media coverage.
3	Moderate	Some reduction in performance; Major milestone or deadline missed by 1 - 6 months.	Service restored within expected timeframes < 1 week.	Some short term staff morale problems; First aid administered by Site First Aid Officer or possible professional medical treatment required resulting in lost time through injury.	Regulatory breach with minimal consequences but which cannot be readily rectified; Direct loss of \$50,000 to \$250,000.	Individual complaints; Local temporary adverse media.
2	Minor	Milestone missed by <1 month.	Issues rectified with corrective action.	First aid not required, no lost time or medical expenses.	Direct loss of \$0 to \$50,000.	Individual complaints immediately addressed.
1	Insignificant	Negligible performance reduction.	No loss of service.	Routine HR issues.	Regulatory breach with minimal consequences and readily rectified.	Negligible activity.

Strategic & Operational Risk Register



1.3 Table 2 – Risk Assessment Matrix – inc Likelihood Descriptors

Risk Assessment Matrix			Consequences				
			Insignificant 1	Minor 2	Moderate 3	Major 4	Catastrophic 5
Likelihood	5	Almost certain to occur in most circumstances	Medium	High	Critical	Critical	Critical
	4	Likely to occur frequently	Low	Medium	High	Critical	Critical
	3	Possible and likely to occur at some time	Low	Low	Medium	High	Critical
	2	Unlikely to occur but could happen	Low	Low	Low	Medium	High
	1	May occur but only in rare and exceptional circumstances	Low	Low	Low	Low	Medium

1.3 Table 3 – Risk Assessment of Consequences

Critical	Critical = a score of 8-10	6	7	8	9	10
High	High = a score of 7	5	6	7	8	9
Medium	Medium = a score of 6	4	5	6	7	8
Low	Low = a score of 2-5	3	4	5	6	7
		2	3	4	5	6

1.4 Stage 4: Evaluate and Treat Risks

Based on the analysis of the risks, it is necessary to decide whether any further actions are necessary and appropriate to further mitigate the risk. This will require consideration of the following:

- i Can additional controls and/or mitigation strategies be identified that can help with better management of the risk? If that is the case, provide a brief description. Note: A key priority for identifying additional controls and mitigation strategies should be reducing the likelihood and/or consequences of each 'Critical' or 'High' risk. For other lower ranked risks, the option may be simply ongoing monitoring and reporting on the status of the risk. The selected option should be the most appropriate and practicable, with the objective of reducing the level of risk to a tolerable level.
- ii Options may include the following:
 - *Likelihood Reduction* – eliminating sources of risk or substantially reducing the likelihood of their occurrence.
 - *Risk Avoidance* – a particular case of likelihood reduction, where undesired events are avoided by undertaking a different course of action.
 - *Impact Mitigation* – minimising the consequences of the risk.

Strategic & Operational Risk Register



- *Risk Transfer* – shifting responsibility of the risk to another party (also called *risk sharing* because risks can rarely be transferred or shed entirely).
- iii On the other hand there may be sufficient controls and mitigation strategies in place. For instance it may be impractical and/or inappropriate to consider further controls to mitigate the risk. If this is the case, place **No further action** in the Mitigation Strategy column. This option is referred to as *risk retention*, i.e. risks cannot be further reduced or avoided, or the costs of doing so would be too high. Risks can also be regarded as opportunities if they are retained and dealt with appropriately.
- iv Finally, consider whether it would be beneficial to include this area of risk on Council's internal audit programme. For example, an audit of the area may provide confidence that the controls and mitigation strategies in place are working adequately; an audit may also help by suggesting additional controls and mitigation actions that may not have been considered. By giving the Audit function consideration, it will assist Governance and the Audit Committee in developing the Internal Audit Plan for the Council. The Audit Committee will consider recommendations; however its decision to include/exclude certain areas from the programme will be guided by a number of other priorities as well.

1.4 Table 4 – Risk Treatment Summary

RISK TREATMENT	
Level of risk	Response expectations
Critical Risk	Must be managed by senior management with a detailed plan
High risk	Detailed research and management planning required at senior levels - management responsibility must be specified
Medium risk	Manage by specific monitoring or response procedures
Low risk	Manage by routine procedures - unlikely to need specific application of resources

1.5 Stage 5: Monitor and Review

- i Governance will meet with the Audit Committee regularly. This allows Council to assess the effectiveness of the risk management process on an ongoing basis. It also allows for a thorough review of the risk register and, in particular assists in identifying and monitoring risks of a cross-divisional nature. The identified risks and the effectiveness of mitigation strategies will be reviewed to reflect changing circumstances and priorities.
- ii A report will be prepared on the progress in achieving risk treatment objectives for presentation to the Audit Committee twice a year.

1.6 Stage 6: Communicate and Consult

The premise underlying Council's policy is that Council will consistently consult and communicate with stakeholders and all relevant parties involved. This is to be undertaken at all times in a fair, timely and transparent manner. In order to effectively identify the risks WARC may encounter it is important to first understand and appreciate the Goals and Objectives it strives to achieve. It is also important to fully understand the nature of the core services WARC delivers so that all risks can be assessed.

STRATEGIC PLAN

STRATEGIC FOCUS

Vision

Strong communities. We achieve our goals together by walking in both worlds.

Purpose

We work in partnership with community towards providing meaningful employment and economic opportunities, delivering outstanding customer services and infrastructure.

Core Values

The values or behaviours that Council will embrace to support our Purpose and guide us in achieving the Vision are:

Respectful: We respect our communities and staff of all cultures. We respect elders past, present and emerging for they hold the memories, the traditions the culture and hopes of Indigenous Australia. We acknowledge that Aboriginal culture is a living culture and that Aboriginal people continue to live in spiritual and sacred relationship with country.

Inclusive: We are open, transparent and engaged with our communities and partners. We value diverse perspectives and voices and encourage their incorporation into our work practices.

Innovative: We encourage and promote a culture of safety where innovation is celebrated and new ways of working are implemented to improve our services.

Integrity: We are open, transparent and accountable.

GOALS

The following goals represent the priorities, interests, requirements, aspirations and needs of the communities within West Arnhem Regional Council.

In line with the Act, and in order to ensure the West Arnhem Regional Council can best provide its Core Services, the Council has developed a Strategic Plan.

The Strategic Plan sets out the Council's six main goals:

- Goal 1** Inclusive community engagement within the region.
- Goal 2** Effective and supportive local government administration.
- Goal 3** Local infrastructure, which is fit for purpose.
- Goal 4** Initiatives that improve local environment health.
- Goal 5** Local civic services, which respect culture and heritage.
- Goal 6** Social and commercial services which contribute to the wellbeing of community members.

PERFORMANCE OBJECTIVES

GOAL 1 COMMUNITY ENGAGEMENT

Community members and stakeholders that are engaged in, connected to and participate in the affairs of the region.

Objective 1.1	Communication that engages the community.
Objective 1.2	Enthusiastic participation in civic and community events.
Objective 1.3	Efficient and effective community service delivery.
Objective 1.4	Strong governance and leadership.

GOAL 2 LOCAL GOVERNMENT ADMINISTRATION

Systems and processes that support the effective and efficient use of financial and human resources.

Objective 2.1	An effective, efficient and accountable Regional Council.
Objective 2.2	A professional, skilled, safe and stable workforce.
Objective 2.3	Storage and retrieval of records processes which support efficient administration.
Objective 2.4	Planning and reporting that informs Council's decision-making processes.
Objective 2.5	Modern Effective and innovative Information Technology solutions which maximise service delivery.
Objective 2.6	The minimisation of risks associated with the operations of Council.

GOAL 3 LOCAL INFRASTRUCTURE

Well maintained and enhanced built and natural environment.

Objective 3.1	Infrastructure and asset management strategies appropriate to the needs of Council.
Objective 3.2	Safe and reliable roads, footpaths and street lighting.
Objective 3.3	Attractive parks, gardens, streetscapes and open spaces.
Objective 3.4	Modern and well-maintained fleet, plant and equipment capable of meeting service delivery requirements.
Objective 3.5	Buildings, facilities and infrastructure assets that are fit for purpose and sufficient to service operational requirements
Objective 3.6	Effective development and enforcement of laws that enhance economic development and community safety

Strategic & Operational Risk Register

**GOAL 4 LOCAL ENVIRONMENTAL HEALTH**

Initiatives which promote healthy, clean living conditions to improve health outcomes

Objective 4.1	The provision of environmentally and economically sound solid waste, water and sewerage services.
Objective 4.2	Implementation of sustainable dog management programs which improve the overall health and wellbeing of remote communities.

GOAL 5 LOCAL CIVIC SERVICES

A Council that respects, protects and nurtures the diversity of our culture and heritage

Objective 5.1	Facilitate the delivery of library and cultural heritage services.
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GOAL 6 COMMUNITY SOCIAL PROGRAMMES AND COMMERCIAL SERVICES

A Council which provides programmes and services that support and contribute to the wellbeing of its community members.

Objective 6.1	Social programmes that support the safety and wellbeing of community members.
Objective 6.2	The provision of Commercial Services which contribute to the economic functionality of Council's communities.

CORE SERVICE ACTIVITIES

These goals and performance objectives are achieved through the delivery of core local government services which include the activities listed below. For reference WARC's internal activity codes, with descriptions, are also included. Generally, these services are delivered across all of Council's communities with few exceptions which are noted against the relevant activity.

❖ Community Engagement in Local Government

- **Public and Corporate Relations**
 - ◆ Support Civic and Community Events
 - ◆ Public Relations and Communications
 - ◆ Publish the West Arnhem Wire Newsletter
- **Customer Relationship Management, including complaints and responses**
 - ◆ Community Service Delivery
- **Governance: incl. administration of Council and Committee meetings, elections and elected member support and administration of Local Authorities.**
 - ◆ Manage Council Governance
- **Advocacy and Representation on local and regional issues.**
 - ◆ Manage JTDA Service Agreement

❖ Local Government Administration

- **Financial Management**
 - ◆ Corporate Financial Management
 - ◆ Executive Leadership Corporate and Community
- **Revenue Growth**
 - ◆ Manage Rates and Charges
 - ◆ Manage Council Investments
- **Human Resources**
 - ◆ Manage Human Resources
 - ◆ Manage Work Health and Safety (WHS)
- **Records Management**
 - ◆ Records Management

Strategic & Operational Risk Register



- **Risk Management**
 - ◆ Manage Corporate Risk
 - ◆ Manage Internal Audit
- **Council Planning and Reporting: Strategic, Financial and Service Delivery Planning and Reporting**
 - ◆ Executive Leadership CEO
- **IT and Communications.**
 - ◆ Manage Information Technology and Communications

❖ Local Infrastructure

- **Asset Management**
 - ◆ Manage Assets
- **Lighting for Public Safety, including Street Lighting**
 - ◆ Install and Maintain Street Lights (with the exception of Jabiru)
- **Local Road Traffic Management, Maintenance, Upgrading and Construction**
 - ◆ Maintain Local Roads
- **Maintenance and Upgrade of Parks, Reserves and Open Spaces inc Weed Control**
 - ◆ Parks and Public Open Space - including Weed Control
- **Fleet, Plant and Equipment Maintenance**
 - ◆ Operate Fuel Storage Facility (only in Gunbalanya and Minjilang)
 - ◆ Fleet - Stock Control
 - ◆ Maintain Plant, Equipment and Motor Vehicles
- **Maintenance and Upgrade of Buildings, Facilities and Fixed Assets**
 - ◆ Maintain & Construct Council Controlled Buildings & Facilities
 - ◆ Maintain Staff Houses
- **Management and maintenance of Swimming Pools**
 - ◆ Operate and Maintain Swimming Pools (only in Jabiru and Maningrida)
- **Administration of Local Laws and Strategic Infrastructure Management**
 - ◆ Community Service Delivery

Strategic & Operational Risk Register



❖ Local Environment Health

- **Waste, Water and Sewerage Management (including litter reduction)**
 - ◆ Waste Management
 - ◆ Water Management: Jabiru (only in Jabiru)
 - ◆ Sewerage Management (only in Jabiru)
- **Companion Animal Control**
 - ◆ Dog Control

❖ Local Civic Services

- **Library and Cultural Heritage Service**
 - ◆ Library Service: Jabiru (only in Jabiru)

COMMUNITY SOCIAL AND COMMERCIAL SERVICE ACTIVITIES

These goals and performance objectives are also achieved through the delivery of community social programmes and commercial services. Council determines to deliver these programmes and services because they support the safety and wellbeing of community members and they contribute to the economic functionality of Council's communities. They are generally not able to be delivered by other agencies or entities within the West Arnhem Region.

The provision of these programmes and services include all of the risks associated with many of Council's activities, such as the provision of human resources and financial management. However, they pose their own unique set of risks which are outlined as separate identified risks further in this document.

The individual programmes and services delivered are listed as follows:

❖ Community Social Programmes

- Home Care Packages Programme (HCP; previously CACP)
- Commonwealth Home Support Programme (CHSP)
- NT Jobs Package - Aged Care
- Night Patrol
- Day Patrol (12-month pilot program)
- Warruwi Outside School Hours Care
- Safety and Wellbeing - Sport and Recreation
- Remote Sport Programme

Strategic & Operational Risk Register

- Bininj Gunwok Language Project
- Remote Indigenous Broadcasting Programmes (RIBS)
- Warruwi and Minjilang Crèche
- Jabiru Daycare
- Children and Schooling - Youth
- Disability in Home Support Services (DIHS)
- Manage Community Services
- Gunbalanya Women's Safe House
- Library Services (including after-school and holiday programs)
- Aquatic Centres (general swimming, gym, fitness and swim classes and events)

❖ Commercial Services

- Operate Long day care
- Operate Centrelink service
- Provide Airstrip maintenance
- Manage Electricity and water business
- Manage Visitor accommodation
- Operate post office businesses
- Maintain and Manage ERISS Housing - Jabiru Only
- Maintain and Manage DAWE Housing – Jabiru Only
- Manage Commercial Services
- Private Works
- Operate a Concrete Batching Plant
- ERA House rectification works – Jabiru Only

Strategic & Operational Risk Register



IDENTIFIED RISK – COMMUNITY ENGAGEMENT IN LOCAL GOVERNMENT

Risk Reference	Community Engagement - Public and Corporate Relations
Strategic Objective	Objective 1.1 - Communication that engages the community.
Strategic Risk Description and Risk Effect – Risk #1.1	Poor community consultation, media management and public relations pose risks to Council which can result in damage to council's reputation, a breakdown in communications and consequent lack of community engagement.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to build and maintain proactive, positive and engaging relationships with the media • Unauthorised/accidental/uncontrolled release of sensitive or damaging information or public statements • Deliberate leaking of information by staff • Inaccurate reporting by the media • Failure to identify articles that impact on Council's reputation • Failure to ensure council proactively manages communications with constituents and stakeholders • Failure to ensure all editorial matter is reviewed for content, layout and factual information prior to publication • Failure of council to understand constituents and stakeholders needs and expectations • Marketing strategies that do not successfully communicate and promote council's core services • Layout and content of website and digital communications media are not in accordance with policy and guidelines • Website and digital communications media faults
Inherent Risk Rating	High (Likelihood 4, Consequence 3)
Existing Controls	<ul style="list-style-type: none"> • Council employs a dedicated Media Coordinator • Publication of the Wire once a fortnight • Management of Council's social media platforms and website • Local Authorities facilitate communication with community members
Residual Risk Rating	Medium (Likelihood 3, Consequence 3)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Manage by regular monitoring – unlikely to need specific application of resources
Strategy Timeline	<ul style="list-style-type: none"> • Target achieved.
Risk Rating Target	Low (Likelihood 3, Consequence 2)
Management Progress	Risk is to be retained and accepted.
Responsible Position & Related Activities	Public Relations Coordinator <ul style="list-style-type: none"> • Public Relations and Communications • Publish the West Arnhem Wire Newsletter

Strategic & Operational Risk Register



IDENTIFIED RISK – COMMUNITY ENGAGEMENT IN LOCAL GOVERNMENT

Risk Reference	Community Engagement - Public and Corporate Relations
Strategic Objective	Objective 1.2 - Enthusiastic participation in civic and community events.
Strategic Risk Description and Risk Effect – Risk #1.2	As a result of poor planning, engagement and consultation with all stakeholders regarding civic and community events there is a risk that members of the community will lack any enthusiasm to participate in these events.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to liaise with stakeholders • Inadequate planning and coordination • Inadequate allocation of resources – financial, infrastructure and human • Unrealistic community expectations that events will be solely run and managed by Council • Unrealistic community expectations as to what support Council is able to provide • Community apathy
Inherent Risk Rating	Medium (Likelihood 3, Consequence 3)
Existing Controls	<ul style="list-style-type: none"> • Relevant staff participate in the organising of community events. • Civic events are conducted by WARC which recognise and celebrate community sentiment . • A monthly community event calendar is published on notice boards and the website. • Support is provided to community organisations to deliver community based events. • Formal community events process including review post event.
Residual Risk Rating	Low (Likelihood 3, Consequence 2)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • WARC must participate in and support at least one high-profile event per community each year. • Development of a formal community events process including review post event. • Events management being transferred to Community Well-being
Strategy Timeline	<ul style="list-style-type: none"> • 31 December 2021
Risk Rating Target	Low (Likelihood 3, Consequence 2)
Management Progress	Risk is to be retained and accepted.
Responsible Position & Related Activities	Community Support Business Manager / Public Relations Coordinator <ul style="list-style-type: none"> • Support Civic and Community Events

Strategic & Operational Risk Register



IDENTIFIED RISK – COMMUNITY ENGAGEMENT IN LOCAL GOVERNMENT

Risk Reference	Community Engagement - Customer Relationship Management
Strategic Objective	Objective 1.3 - Efficient and effective community service delivery.
Strategic Risk Description and Risk Effect – Risk #1.3	If Council fails to provide efficient and effective community service delivery the result may be increased levels of community dissatisfaction. This poses a risk to Council's reputation and an increase in customer complaints.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to ensure staff are trained appropriately in customer service delivery • Failure to develop and monitor appropriate controls and procedures for cash handling • Failure to adhere to Council policy and guidelines for the hire and use of Council facilities
Inherent Risk Rating	High (Likelihood 4, Consequence 3)
Existing Controls	<ul style="list-style-type: none"> • Ensure capacity for customer relationship management including complaints procedures and mechanisms for community feedback on service delivery • Front counter customer service is provided in each community • Services for the hire and lease of Council facilities are provided • Services for the receipting of Council payments are provided • Switchboard services are provided during business hours • Mail and courier services are provided • Staff undertake regular training
Residual Risk Rating	Medium (Likelihood 4, Consequence 2)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Manage by regular monitoring – unlikely to need specific application of resources • Introduce specific customer service training
Strategy Timeline	<ul style="list-style-type: none"> • 31 December 2021
Risk Rating Target	Low (Likelihood 2, Consequence 2)
Management Progress	Council employs Service Managers in each community who are responsible for ensuring compliance with set procedures. Risk is to be retained and accepted at this time.
Responsible Position & Related Activities	Council Service Managers and Administration Senior staff <ul style="list-style-type: none"> • Community Service Delivery

Strategic & Operational Risk Register



IDENTIFIED RISK – COMMUNITY ENGAGEMENT IN LOCAL GOVERNMENT

Risk Reference	Community Engagement – Governance, Administration of Local Authorities, Advocacy and Representation
Strategic Objective	Objective 1.4 – Strong governance and leadership.
Strategic Risk Description and Risk Effect – Risk #1.4	In failing to provide adequate resources which support Council, its Committees and the CEO, there is a risk that poor decisions will result and the reputation of Council will be compromised.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to meet Council's obligations under applicable legislation • Failure to develop appropriate policies and to regularly review and maintain existing Council policies and to ensure policies are understood by all staff • Failure to ensure decision making processes are based on complete and accurate information • Failure to provide effective advocacy • Failure to engage in community consultation
Inherent Risk Rating	High (Likelihood 3, Consequence 4)
Existing Controls	<ul style="list-style-type: none"> • Meetings are convened in accordance with Legislative requirements. • Non-confidential Agendas and Minutes of Council and Committee meetings are publicly available on the Website as per the requirements in the Local Government Act. • Strong administrative support is provided to Council, Local Authorities and Committees • Key policy and direction documents are produced for the council (including the Regional Plan, Annual Reports and policies) • Full compliance with council statutory requirements including Local Government Act (LGA); Local Government (Accounting) Regulations (LGAcR); Local Government (Administration) Regulations (LGAdR); Guidelines and General Instructions
Residual Risk Rating	Medium (Likelihood 3, Consequence 3)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Develop and implement an ongoing training programme for elected members • Develop and implement a policy on training for elected members and local authority members
Strategy Timeline	<ul style="list-style-type: none"> • Development and implementation of an ongoing training program for elected members and Local Authority members by October 2021. • Responsibilities, Induction and Training (Elected, Local Authority and Committee Members) Policy was developed and approved by Council Resolution OCM27/2021 on 12 May 2021.
Risk Rating Target	Low (Likelihood 2, Consequence 3)
Management Progress	Following consultation with Senior Management, it has been determined that training will be provided to Elected members as and when the opportunity and/or need arises. LGANT provides several training modules and these are considered by Management when they are offered. The Department of the Chief Minister has also established a Training and Learning Steering Committee, which is working closely with Council to develop a training framework for Elected and Local Authority Members in the Northern Territory. The scheduled release date of the

Strategic & Operational Risk Register



	training framework is September 2021, and the development of Council's training program will be based on the Department's framework.
Responsible Position & Related Activities	Executive Manager/ Governance Coordinator <ul style="list-style-type: none"> • Manage Council Governance

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL GOVERNMENT ADMINISTRATION

Risk Reference	Local Government Administration – Financial and Corporate Management
Strategic Objective	Objective 2.1 - An effective, efficient and accountable Regional Council.
Strategic Risk Description and Risk Effect – Risk #2.1	Sound financial management is dependent upon strong internal accounting processes and controls, and external audit, without which Council cannot operate effectively or efficiently. In the absence of these elements the financial sustainability of Council is at risk.
Operational Causal Risks	<ul style="list-style-type: none"> • Reporting timelines not adhered to – Monthly financials not ready for Council or annual for external auditors • Failure to develop and implement policy and procedures to manage investments • Inaccurate forecasting of rates • Failure to manage rate collections in a timely manner • Failure to raise external invoices for services provided • Failure to comply with applicable accounting standards and to adhere to legislative deadlines
Inherent Risk Rating	Critical (Likelihood 4, Consequence 5)
Existing Controls	<ul style="list-style-type: none"> • Council's annual statutory and financial reporting obligations including: preparation of annual financial statements, financial reporting, cash flow reports, cash available after internal and external restrictions, reconciliations and other month end processes • Finance Report approved by Council or when unable to meet, with the Special Finance Committee • Monitoring of external funding provided through grants and commercial contracts through monthly reports. • Compliance with internal accounting policies and standards • Up to date Fixed Asset Register • Council's investments information presented as part of the monthly Finance Report and in accordance with adopted policy • Appropriate segregation of duties and exception report controls within Council's accounts payable and receivable processes • All taxation obligations are met • Long term financial plan, annual budget and budget reviews are prepared and approved by Council
Residual Risk Rating	Medium (Likelihood 2, Consequence 3)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Continuous improvement of Monthly Finance reports, including delivery of results in graphical form. Keeping up to date with relevant legislation and accounting standards. Ensuring the rates income is secured as the town lease expired 30 June 2021
Strategy Timeline	<ul style="list-style-type: none"> • Reached target
Risk Rating Target	Low (Likelihood 2, Consequence 3)
Management Progress	<p>Risk is to be retained and accepted.</p> <ul style="list-style-type: none"> • The process improvements in 2020 has settled with reporting graphically to Council and to Local Authorities.

Strategic & Operational Risk Register



	<ul style="list-style-type: none"> • Changes took place in 2020 in the annual financial statements with regard to compliance of accounting standards (reporting of revenue and right of use leases). • Liaison has been in place with Gundjeihmi Aboriginal Corporation - Jabiru Town to ensure all properties are rated as licences are issued. • Investment as well as the current ratio form a part of the reporting to council and continue to be closely monitored
<p>Responsible Position & Related Activities</p>	<p>Chief Corporate Officer / Manager Finance</p> <ul style="list-style-type: none"> • Corporate Financial Management • Executive Leadership Corporate and Community • Manage Rates and Charges • Manage Council Investments

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL GOVERNMENT ADMINISTRATION

Risk Reference	Local Government Administration – Human Resources
Strategic Objective	Objective 2.2 - A professional, skilled, safe and stable workforce.
Strategic Risk Description and Risk Effect – Risk #2.2	Council is at risk of not being able to deliver its core services if it can't recruit staff who are properly trained/accredited and adequately remunerated and who perform their duties in an unsafe manner and environment.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to manage payroll, allowances and superannuation entitlements • Failure to embed safe working behaviours • Failure to implement WHS incident tracking • Failure to develop and implement an approved training and development programme • Deficiencies or perceived flaws in the recruitment process • Inability to recruit and retain key employees • Inability to provide adequate staff housing • Failure to ensure timesheets for staff are verified for accuracy and coded correctly
Inherent Risk Rating	Critical (Likelihood 4, Consequence 5)
Existing Controls	<ul style="list-style-type: none"> • Training programmes are delivered that meet WHS, staff and organisational needs • Annual performance appraisals are conducted • Workplace health and management systems are managed • Workers compensation claims are managed • Industrial relations matters and implement solutions are managed • Effective employment practices, policies and procedures in accordance with statutory requirements are in place • Manage payroll services
Residual Risk Rating	High (Likelihood 3, Consequence 4)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Investigate feasibility of pre-employment medical checks. • Weekly HR meetings to review and improve processes • Development of Reward and Recognition Framework • Safe work instructions • Skills audit • Improved staff induction
Strategy Timeline	<ul style="list-style-type: none"> • New structure implemented in 2020, and has undergone further minor reviews/changes in 2021.
Risk Rating Target	Medium (Likelihood 3, Consequence 3)
Management Progress	Weekly HR meetings are being held, and WARC has recruited a People and Learning Manager and this position will oversee the development of a rewards and recognition framework and investigate feasibility of pre-employment medical checks.
Responsible Position & Related Activities	Director of Organisational Growth/ Manager People & Learning <ul style="list-style-type: none"> • Manage People & Capability • Manage Work Health and Safety (WHS)

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL GOVERNMENT ADMINISTRATION

Risk Reference	Local Government Administration – Records Management
Strategic Objective	Objective 2.3 - Storage and retrieval of records processes which support efficient administration.
Strategic Risk Description and Risk Effect – Risk #2.3	If Council fails to develop, implement and manage records management policies and standards Council is at risk of losing its corporate knowledge and memory.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to embed a strong records management culture across Council • A records management system that doesn't meet the requirements of legislation, standards and users • Inappropriate security levels applied for user access • Failure to ensure staff are trained • Failure to follow file structure rules • Failure to ensure all relevant staff are provided training in the processing of applications for information • Disposal schedules are not updated to reflect legislative or other change which may impact on disposal date • Cloud Storage
Inherent Risk Rating	Critical (Likelihood 4, Consequence 4)
Existing Controls	<ul style="list-style-type: none"> • Records management system has secure access levels • Training resources are available • Sound backup systems are in place • Records management systems, policies and procedures are in place • Council's requests and compliance relating to Freedom of Information are managed • Council employs a highly qualified Records Management Coordinator • Council has developed a disposal schedule which ensures the integrity of stored documents.
Residual Risk Rating	Medium (Likelihood 2, Consequence 4)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Review of InfoXpert folders to assess appropriateness and level of activity. • Create a better record management culture across the organisation and to embed records in the organisational and management conversation.
Strategy Timeline	<ul style="list-style-type: none"> • Internal Audit review completed in May 2021.
Risk Rating Target	Low (Likelihood 2, Consequence 3)
Management Progress	Risk is to be retained and accepted. The Merits internal audit scope of works for Payroll and Infrastructure and Asset Management (Procurement) incorporated records management was undertaken in 2021. The Records Co-Ordinator notes that an internal audit over the record management processes including infoXpert folders, and Business systems records remains
Responsible Position & Related Activities	Chief Corporate Officer / Records Coordinator <ul style="list-style-type: none"> • Activity 2035 – Records Management

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL GOVERNMENT ADMINISTRATION

Risk Reference	Local Government Administration – Strategic Planning and Reporting
Strategic Objective	Objective 2.4 - Planning and reporting that informs Council's decision-making processes.
Strategic Risk Description and Risk Effect – Risk #2.4	If appropriate consultation and engagement is not achieved Council is at risk of developing meaningless strategic goals and objectives resulting in programmes being either over or under-resourced.
Operational Causal Risks	<ul style="list-style-type: none"> Managers and staff are not fully engaged in the development of strategic goals and strategies Failure to ensure business plans accurately capture all key activities of Council Lack of a Performance Management Framework which includes the development of KPI's
Inherent Risk Rating	Critical (Likelihood 4, Consequence 4)
Existing Controls	<ul style="list-style-type: none"> Lead development and implementation of Council plans, policy and decisions Manage council's legislative compliance and policy development Regular reporting against Council's strategic plans Statutory compliance
Residual Risk Rating	High (Likelihood 3, Consequence 4)
Risk Mitigation Strategies	<ul style="list-style-type: none"> Intensive review of performance measures for the 2021-2022 Regional Plan Consultation with Communities through Local Authorities Development of policies that are up-to-date and are aligned to current legislation.
Strategy Timeline	<ul style="list-style-type: none"> Completion of 2021-2022 Regional Plan and Budget by 30 June 2021. Review and development of Council policies by 31 December 2021.
Risk Rating Target	Medium (Likelihood 3, Consequence 3)
Management Progress	<ul style="list-style-type: none"> Staff, local authorities, and elected members were consulted in 2020/21 on the visions, mission values, strength, weakness, opportunities and threats. Feedback was reviewed and collated and a new vision and mission were developed and incorporated into Council's operations in 2020. The 2021-2022 Regional Plan was completed and received approval from the Department of the Chief Minister in June 2021. The administration has been reviewing and developing policies that are aligned to the new <i>Local Government Act 2019</i>, as well as new Regulations and Guidelines. The scheduled completion date for all policies is 31 December 2021.
Responsible Position & Related Activities	Executive Manager/ Governance Coordinator <ul style="list-style-type: none"> Executive Leadership CEO

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL GOVERNMENT ADMINISTRATION

Risk Reference	Local Government Administration – Information & Communications Technology
Strategic Objective	Objective 2.5 - Modern information and communications technology to maximise service delivery.
Strategic Risk Description and Risk Effect – Risk #2.5	In failing to ensure Council's ICT systems are adequate for its needs Council is at risk of experiencing system failures, loss of records and data, poor communications and significant downtime.
Operational Causal Risks	<ul style="list-style-type: none"> • Council's reliance on an external service provider and limited numbers of key personnel to manage the system • Poor ICT physical environment in remote communities • Failure of key individual business systems/applications • Failure to correctly manage user accounts • Failure to manage inventory and consumables • Loading unauthorised or unlicensed software • Switchboard equipment/system failures • Lack of capacity/training
Inherent Risk Rating	Critical (Likelihood 3, Consequence 5)
Existing Controls	<ul style="list-style-type: none"> • Secure password controls • Management of ICT contracts • Provision of Help-desk services • Utilisation of modern information and communications technology to maximise Service Delivery
Residual Risk Rating	High (Likelihood 3, Consequence 4)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Proposal to develop and implement an ICT strategy for next 5 years. The strategy will include: <ul style="list-style-type: none"> ○ Implementation of Service level Agreements with all critical vendors including CouncilBIZ ○ Strategy for long term direction including the role played by CouncilBIZ ○ Strategy for consideration of ICT platform, ICT services, IT roles and responsibilities • Consideration of 3rd party to develop ICT Strategy • Recruit IT Manager
Strategy Timeline	<ul style="list-style-type: none"> • ICT draft strategic plan to be moved from 30 June 2021 to 31 December 2021.
Risk Rating Target	Medium (Likelihood 2, Consequence 4)
Management Progress	Council engaged an ICT Process Improvement Specialist in 2020, until January 2021. A network upgrade program is in place which should see improvements in the physical environment of remote communities as well as Jabiru and Darwin. This process is anticipated to be completed by the end of December 2021. At strategic plan is not yet underway, and is expected the new ICT Manager, who commences early September 2021 will have ownership of this task, and manage it.
Responsible Position & Related Activities	ICT Manager/ Information Technology Coordinator <ul style="list-style-type: none"> • Manage Information Technology and Communications

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL GOVERNMENT ADMINISTRATION

Risk Reference	Local Government Administration – Risk Management
Strategic Objective	Objective 2.6 - The minimisation of risks associated with the operations of Council.
Strategic Risk Description and Risk Effect – Risk #2.6	A lack of understanding of risk management principles can result in a failure to identify and ameliorate, where possible, the risks associated with the core operations of Council.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to embed a risk management culture within Council • Failure to review operational risk assessments regularly • Failure to maintain adequate internal audit capacity • Failure to ensure Council has appropriate classes and levels of insurance coverage • Failure to investigate and obtain substantiating evidence to support insurance claims
Inherent Risk Rating	High (Likelihood 4, Consequence 3)
Existing Controls	<ul style="list-style-type: none"> • Implementation of a risk management framework at strategic and operational levels • Audit Committee in place • Increased internal audit capacity • Insurances managed to ensure adequate levels of coverage
Residual Risk Rating	Medium (Likelihood 3, Consequence 3)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Development and Implementation of annual and 3-year audit programme objectives and timeframes.
Strategy Timeline	<ul style="list-style-type: none"> • A Strategic Audit programme has been provided to the Committee in May 2020, and the Committee was satisfied with the timelines then provided..
Risk Rating Target	Low (Likelihood 2, Consequence 3)
Management Progress	<p>One internal audit on 2.2.2 and 3.1 was completed in May 2021.</p> <p>One internal audit on 6.1 Social Programs (the KPMG report) was not completed to the satisfaction of management or the committee in 2020</p>
Responsible Position & Related Activities	<p>Chief Corporate Officer/Executive Manager</p> <ul style="list-style-type: none"> • Manage Corporate Risk • Manage Internal Audit

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL INFRASTRUCTURE

Risk Reference	Local Infrastructure – Asset Management
Strategic Objective	Objective 3.1 – Infrastructure and asset management strategies appropriate to the needs of Council.
Strategic Risk Description and Risk Effect – Risk #3.1	The failure to manage and implement a Council wide framework for sustainable whole of life asset management will result in the risk that Council cannot provide the desired level of service to the community. If appropriate strategies are not developed Council is also at risk of not achieving organisational long-term goals and effective alignment of the infrastructure assets required to meet a changing environment. Council's inability to resolve land tenure places control of its assets at risk.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to develop asset management policies, standards and procedures • Failure to develop and implement a robust infrastructure assets condition inspection programme • Failure to develop, implement and maintain a corporate asset register • Failure to ensure renewal and replacement programmes are adequately captured through capital works plans and condition/maintenance assessments • Failure to adequately budget for the development of asset management systems and to strategically manage the asset portfolio to best achieve service delivery objectives • Failure to resolve land tenure issues thereby jeopardising Council's control of its assets and ability to effectively deliver services
Inherent Risk Rating	Critical (Likelihood 4, Consequence 4)
Existing Controls	<ul style="list-style-type: none"> • A Strategic Asset Management Plan and Framework has been adopted by Council to direct decision-making and the allocation of resources. • Collection and maintenance of asset information • Forward works planning • Major contracts and procurements awarded through a transparent tender process • Administer and monitor contracts and contractor performance to minimise Council's risk exposure • Manage the delivery of Council's capital works programme • Provide project management services and advice across Council for all capital works projects
Residual Risk Rating	High (Likelihood 3, Consequence 4)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Effective budgeting for capital replacement. • Identify and apply for appropriate funding streams to provide the ability to meet the Councils Asset Strategic Replacement Plan.
Strategy Timeline	<ul style="list-style-type: none"> • Ongoing and reviewed every six months
Risk Rating Target	Medium (Likelihood 3, Consequence 3)
Management Progress	Six monthly inspections are now performed with continual monitoring of asset condition undertaken. Building better working relationship with the funding bodies to enable asset management plans to be actioned as per the replacement strategy.
Responsible Position & Related Activities	General Manager, Technical Services <ul style="list-style-type: none"> • Manage Assets • Strategic Infrastructure & Service Delivery

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL INFRASTRUCTURE

Risk Reference	Local Infrastructure – Roads, Footpaths and Street Lighting
Strategic Objective	Objective 3.2 - Safe and reliable roads, footpaths and street lighting.
Strategic Risk Description and Risk Effect – Risk #3.2	If Council fails to adequately maintain its roads, footpaths and street lighting there is a risk of potential on-going hazards which will impact on the safety of the public.
Operational Causal Risks	<ul style="list-style-type: none"> • Poor funding resulting in deterioration of assets • Failure to plan, budget and implement a sound asset management programme • Failure to ensure that rectification works are carried out in a timely manner • Works not conducted to approved standards
Inherent Risk Rating	High (Likelihood 4, Consequence 3)
Existing Controls	<ul style="list-style-type: none"> • Manage the construction/maintenance of roads and footpaths throughout the region • Projects delivered in accordance with the Roads to Recovery Federal funding programme • Hazard identification and road condition assessment report templates completed • Operational Maintenance Programme in place • Continual monitoring and performance of minor road repairs • Street lighting operational costs minimised and maximum functionality achieved • Condition of footpaths and walkways monitored throughout the region
Residual Risk Rating	Medium (Likelihood 3, Consequence 3)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • All projects and maintenance programs are reviewed to ensure suitable materials available. • Fit for purpose equipment is purchased to carryout maintenance and upgrade activities. • Monthly inspection carried out on street lights. • 6 monthly inspections on all other assets. • Improve the skill sets of employees through competency based training and development.
Strategy Timeline	Ongoing and reviewed every six months
Risk Rating Target	Medium (Likelihood 3, Consequence 3)
Management Progress	The inclusion of purchasing appropriate materials and fit for purpose plant along with the introduction of the competency-based training will reduce the maintenance costs in to the future. The inspection program will ensure greater understanding for the management of the road assets.
Responsible Position & Related Activities	General Manager, Technical Services <ul style="list-style-type: none"> • Install and Maintain Street Lights • Maintain Local Roads • Activities as required for Roads to Recovery Projects

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL INFRASTRUCTURE

Risk Reference	Local Infrastructure – Parks and Gardens
Strategic Objective	Objective 3.3 - Attractive parks, gardens, streetscapes and open spaces.
Strategic Risk Description and Risk Effect – Risk #3.3	Council is at risk of creating low community spirit, of damaging its reputation and of providing a lack of community amenity if it fails to provide aesthetically pleasing parks, ovals, public open spaces and gazetted cemeteries.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to develop, implement and manage a parks management programme, including provision of infrastructure and service delivery standards • Failure to maintain cemetery grounds and internment records • Failure to undertake rectification works in a timely manner • Failure to maintain irrigation systems and deliver sustainable irrigation practices for open spaces
Inherent Risk Rating	Medium (Likelihood 3, Consequence 3)
Existing Controls	<ul style="list-style-type: none"> • Irrigation systems maintained and sustainable irrigation practices delivered for Council's open spaces • Maintenance of gazetted cemeteries
Residual Risk Rating	Medium (Likelihood 3, Consequence 3)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Undertake community consultation on the establishment of gazetted cemeteries in Gunbalanya, Maningrida, Minjilang and Warruwi.
Strategy Timeline	<ul style="list-style-type: none"> • Complete community consultation regarding cemeteries by 31 December 2021. • Consultation and formation of the cemeteries in Maningrida and Minjilang has been completed with further consultation required in Gunbalanya and Warruwi.
Risk Rating Target	Low (Likelihood 3, Consequence 2)
Management Progress	<p>The NT Government has prepared new draft legislation relating to all aspects of cemeteries. Once gazetted WARC will ensure full compliance.</p> <p>The NT Government have delayed the implementation of the new Act to provide further consultation with the Land Councils and Traditional Owners. For Council to meet the guidelines, action is required from the Northern Land Council and the Traditional Owners to identify appropriate sites in Warruwi and Gunbalanya.</p>
Responsible Position & Related Activities	<p>General Manager, Technical Services</p> <ul style="list-style-type: none"> • Parks and Public Open Space - including Weed Control • Maintain Cemeteries

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL INFRASTRUCTURE

Risk Reference	Local Infrastructure – Fleet, Plant and Equipment Maintenance
Strategic Objective	Objective 3.4 - Modern and well maintained fleet, plant and equipment capable of meeting service delivery requirements.
Strategic Risk Description and Risk Effect – Risk #3.4	Council is at risk of failing to achieve effective and efficient service delivery if Council's fleet, plant and equipment is poorly maintained and not replaced at end of useful life.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to ensure budget processes are adequate to support purchase and upgrade of the vehicle fleet • Failure to develop and implement robust procurement practices • Failure to ensure that fleet, plant and equipment meets the operational requirements of Council • Failure to ensure that disposal processes are conducted under approved policy and procedures • Failure to ensure robust maintenance processes are developed, implemented and managed effectively • Failure to maintain servicing records and to monitor registrations • Failure to ensure that the correct hire rate is applied to recover cost of vehicles and plant
Inherent Risk Rating	High (Likelihood 4, Consequence 3)
Existing Controls	<ul style="list-style-type: none"> • Provide preventative and programmed maintenance and repair to Council's fleet • Continuously monitor vehicle usage in relation to compliance with Council policy • Purchase and dispose of vehicles and plant resources • Securely store Council vehicles after hours and when not in use • Provide fuel distribution facilities capable of safely meeting Council's service delivery requirements • Adequate fuel stock levels provided
Residual Risk Rating	Medium (Likelihood 3, Consequence 3)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Monitor incident reports to ensure they are actioned and where possible insurance claims are lodged and the fleet is kept in the appropriate condition. • Monitor daily prestart inspection documentation and ensure all maintenance identified is carried out.
Strategy Timeline	<ul style="list-style-type: none"> • To be completed by 31 December 2021.
Risk Rating Target	Low (Likelihood 3, Consequence 2)
Management Progress	Management has determined that Incident reports and monitoring the prestart checks are the best way to insure all fleet is maintained to a standard for safe and reliable condition at all times.
Responsible Position & Related Activities	General Manager, Technical Services/ Council Service Managers <ul style="list-style-type: none"> • Operate Fuel Storage Facility (only in Gunbalanya and Minjilang) • Fleet Stock Control • Maintain Plant, Equipment and Motor Vehicles

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL INFRASTRUCTURE

Risk Reference	Local Infrastructure – Maintenance & Upgrade of Buildings, Facilities and Infrastructure
Strategic Objective	Objective 3.5 - Buildings, facilities and infrastructure assets that are fit for purpose and sufficient to service operational requirements.
Strategic Risk Description and Risk Effect – Risk #3.5.1	Council's buildings, facilities and fixed assets, if poorly maintained and not upgraded as and when required, will result in Council not being able to operate effectively or efficiently. Deterioration of these assets poses a health and safety risk, an increased risk of injury to staff and the public and low staff morale.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to plan, budget and implement a robust maintenance programme and to undertake scheduled preventative maintenance in accordance with the approved programme and to Australian Standards • Failure to undertake urgent repairs in a timely manner • Failure to supervise contractors working on behalf of council • Failure to implement an inspection programme and to maintain compliance with all applicable Building Regulations • Failure to undertake refurbishment and capital works programmes to council assets • Failure to manage the risk from hazardous material including asbestos
Inherent Risk Rating	High (Likelihood 4, Consequence 3)
Existing Controls	<ul style="list-style-type: none"> • All assets are managed and maintained in accordance with plans and policies • Accurate building infrastructure records are maintained • Ongoing maintenance and capital upgrades to all Council controlled building infrastructure are provided • Staff and visitor accommodation is provided for internal and external stakeholder use • Opportunities to source external funding for infrastructure upgrades identified. • Proactive asset service request system in place
Residual Risk Rating	Medium (Likelihood 3, Consequence 3)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Manage by regular monitoring – unlikely to need specific application of resources • Identify and apply for appropriate funding streams to provide the ability to meet the Councils Asset Strategic Plan. • Purchase and Implement the Konnect data collection Software system.
Strategy Timeline	<ul style="list-style-type: none"> • Every six months
Risk Rating Target	Medium (Likelihood 3, Consequence 3)
Management Progress	From the 6 monthly inspection, all works are logged into the works request system to ensure ongoing maintenance is carried out on all of WARC's Buildings, Facilities and Infrastructure.
Responsible Position & Related Activities	General Manager, Technical Services <ul style="list-style-type: none"> • Maintain & Construct Council Controlled Buildings & Facilities • Maintain Staff Houses • Visitor Accommodation

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL INFRASTRUCTURE

Risk Reference	Local Infrastructure – Management & Maintenance of Swimming Pools
Strategic Objective	Objective 3.5 - Buildings, facilities and infrastructure assets that are fit for purpose and sufficient to service operational requirements.
Strategic Risk Description and Risk Effect – Risk #3.5.2	If Council fails to effectively manage and maintain the community swimming pools in Maningrida and Jabiru it risks endangering the health and well-being of the community through possible disease transmission, accidents and injury.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to employ appropriately qualified pool managers • Failure to comply with legislative requirements • Failure to provide ongoing maintenance and capital upgrades • Failure to adequately supervise bathers • Failure to develop and implement a chemical use policy and standards
Inherent Risk Rating	Critical (Likelihood 4, Consequence 5)
Existing Controls	<ul style="list-style-type: none"> • Provide opening hours to meet the community requirements and to ensure reasonable operating costs • Employ staff to meet supervision ratios and cultural needs as per RLSSA Guidelines • Provide ongoing maintenance and capital upgrades to Council's swimming pools while targeting highest priority works • Measures are undertaken aimed at reducing future reactive maintenance of Council swimming pools
Residual Risk Rating	High (Likelihood 3, Consequence 4)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Provide staff training to ensure plant operations are safe and efficient. • The employment of qualified life guards.
Strategy Timeline	<ul style="list-style-type: none"> • Internal audit recommendations to be implemented by 30.12.2020. Increased the time line due to the travel restriction imposed as contractor movement has been very difficult.
Risk Rating Target	Medium (Likelihood 3, Consequence 3)
Management Progress	<p>Management action items that are yet to be implemented from the recommendations are being addressed. This includes documented operational manual for the swimming pools and the upgrade to the Jabiru/Maningrida pool filtration plant.</p> <p>The Committee has been presented with recommendations resulting from the internal audit of WARC's pools and management's response to those recommendations.</p>
Responsible Position & Related Activities	<p>General Manager, Technical Services/Council Services Manager</p> <ul style="list-style-type: none"> • Management and maintenance of Swimming Pools

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL INFRASTRUCTURE

Risk Reference	Local Infrastructure –Management and Administration of Local Laws
Strategic Objective	Objective 3.6 - The development and enforcement of laws that enhance economic development and community safety.
Strategic Risk Description and Risk Effect – Risk #3.6	There is a risk that the community and general public do not understand Council's role in the development and enforcement of bylaws.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to manage compliance with existing bylaws and the development of new bylaws • Failure to ensure appropriate and accurate information is available to the community and public regarding bylaws
Inherent Risk Rating	Medium (Likelihood 3, Consequence 3)
Existing Controls	<ul style="list-style-type: none"> • By-laws are in place in the Jabiru community • The administration is working with the Local Government Association of the Northern Territory (LGANT) and the department of the Chief Minister to develop By-laws. • Appropriate signage is in place
Residual Risk Rating	Low (Likelihood 3, Consequence 2)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Manage by specific monitoring – unlikely to need specific application of resources
Strategy Timeline	<ul style="list-style-type: none"> • The development of new By-laws to be completed by 31 December 2021
Risk Rating Target	Low (Likelihood 3, Consequence 2)
Management Progress	The administration is currently working with the Department of the Chief Minister and Cabinet, and the NT Office of Parliamentary Counsel to develop new By-laws for Jabiru in anticipation of the abrogation of the Jabiru Town Development Authority By-laws after the repeal of the <i>Jabiru Town Development Act 1978</i> . The administration has requested for By-laws that affect Council's operations to be retained until the new By-laws are gazetted.
Responsible Position & Related Activities	Chief Operating Officer/ Governance Coordinator <ul style="list-style-type: none"> • Strategic Infrastructure and Service Delivery • Train and Manage Local Authorities

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL ENVIRONMENT HEALTH

Risk Reference	Local Environment Health –Waste, Water and Sewerage Management
Strategic Objective	Objective 4.1 - The provision of an environmentally and economically sound solid waste, water and sewerage services.
Strategic Risk Description and Risk Effect – Risk #4.1	Environmental health is targeted towards preventing disease and creating health-supportive environments. In failing to provide acceptable water quality and the effective treatment of sewerage in Jabiru Council is at risk of endangering public health. If Council fails to effectively manage waste throughout the region it risks creating adverse impacts on the environment.
Operational Causal Risks	<ul style="list-style-type: none"> • Legal and economic risks associated with inadequate maintenance resulting in a health situation/incident • Failure to provide ongoing maintenance and capital upgrades which pose risks to the environment • Failure to develop water sampling plans, water safety, reliability monitoring plans, for Jabiru's water supply • Failure to undertake planning and development for landfill and waste management facilities. • Failure to develop waste management strategies, recycling policies and management programmes.
Inherent Risk Rating	Critical (Likelihood 4, Consequence 5)
Existing Controls	<ul style="list-style-type: none"> • Manage and maintain council's water infrastructure and distribution network (Jabiru) • Manage and maintain council's sewerage infrastructure network (Jabiru) • Manage effective and efficient waste collection and recycling services
Residual Risk Rating	High (Likelihood 2, Consequence 5)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Ensure landfills at each community are licensed and operate in accordance with NRETAS requirements. • Ensure the quality of Jabiru's water supply complies at all times with the <i>Water Supply and Sewerage Services Act 2000</i>
Strategy Timeline	<ul style="list-style-type: none"> • Licensed landfills to be achieved by 31 December 2021
Risk Rating Target	Medium (Likelihood 2, Consequence 4)
Management Progress	This internal audit was completed during 2016-17. WARC is still in the process of implementing all of the recommendations which resulted from this audit. Work is progressing on the licensing of WARC's landfills with the assistance of LGANT who have employed a Waste Management Officer to ensure appropriate documentation is developed and approved in principle by the EPA. NLC approval will be required to license the Landfill sites.
Responsible Position & Related Activities	General Manager, Technical Services /Chief Operating Officer <ul style="list-style-type: none"> • Waste Management • Water Management: Jabiru • Sewerage Management: Jabiru

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL ENVIRONMENT HEALTH

Risk Reference	Local Environment Health –Sustainable Dog Management Programmes
Strategic Objective	Objective 4.2 - Implementation of sustainable dog management programmes which improve the overall health and wellbeing of remote communities.
Strategic Risk Description and Risk Effect – Risk #4.2	In failing to implement sustainable dog management programmes Council is at risk of contributing to poor health outcomes and unsafe communities.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to ensure facilities are maintained to standards • Failure to manage public safety issues • Lack of training in animal behaviour and animal management • Failure to ensure complaints are addressed within timeframes • Failure on the part of community members to understand Council's role in the development and enforcement of rules and bylaws as they relate to dog management • Failure to adequately budget for effective and sustainable dog management programmes
Inherent Risk Rating	High (Likelihood 4, Consequence 3)
Existing Controls	<ul style="list-style-type: none"> • Manage effective relationships with the communities, Northern Land Council rangers, and National Park authorities • Investigate and record dog complaints • Enforce dog registrations as required and breaches in accordance with approved bylaws • Undertake community education initiatives regarding responsible ownership and bylaws
Residual Risk Rating	Medium (Likelihood 3, Consequence 3)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Implementation of Region-wide dog control management plans/bylaws following appropriate community consultation. • Implementation of periodic veterinarian services in all communities. • Identify and apply for appropriate funding opportunities.
Strategy Timeline	<ul style="list-style-type: none"> • To be completed by 31 December 2021
Risk Rating Target	Low (Likelihood 3, Consequence 2)
Management Progress	The Dog Management Plan has already been implemented in Maningrida and Waruwi with education programs delivered in to these two communities. Gunbalanya and Minjilang have voluntary veterinary services each year. However, the region needs additional services across all communities. Proposals for funding options for running a veterinary service across the region has commenced and is currently being presented to Local Authorities.
Responsible Position & Related Activities	Chief Operating Officer /Community Services Managers <ul style="list-style-type: none"> • Dog Control

Strategic & Operational Risk Register



IDENTIFIED RISK – LOCAL CIVIC SERVICES

Risk Reference	Local Civic Services – Library Services
Strategic Objective	Objective 5.1 - Facilitate the delivery of library and cultural heritage services.
Strategic Risk Description and Risk Effect – Risk #5.1	In failing to provide adequate and accessible public library services in Jabiru Council is at risk of not taking the opportunity to promote and support the recreational and life-long learning needs of the community. It also risks not preserving the cultural heritage of Jabiru in particular.
Operational Causal Risks	<ul style="list-style-type: none"> • Failure to engage with the community as to the nature of services provided • User dissatisfaction • “Run down” and “tired” facility • Inadequate policies defining the nature of literary and other material to be held in the library • Inability to recruit and retain qualified staff
Inherent Risk Rating	Medium (Likelihood 3, Consequence 3)
Existing Controls	<ul style="list-style-type: none"> • Maintain a regular turnover of book stocks • Provide variable opening hours to suit seasonal demand • Manage and maintain library collections • Provide access to information in a variety of formats, including digital
Residual Risk Rating	Low (Likelihood 3, Consequence 2)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Provide services and programmes that satisfy the recreational and learning needs of the community. • Promote Library services in the Wire • Include the Library in asset management and maintenance plans
Strategy Timeline	<ul style="list-style-type: none"> • Manage by routine procedures - unlikely to need specific application of resources
Risk Rating Target	Low (Likelihood 2, Consequence 2)
Management Progress	Risk is to be retained and accepted.
Responsible Position & Related Activities	Library Coordinator <ul style="list-style-type: none"> • Library Service

Strategic & Operational Risk Register



IDENTIFIED RISK – SOCIAL AND COMMERCIAL SERVICES

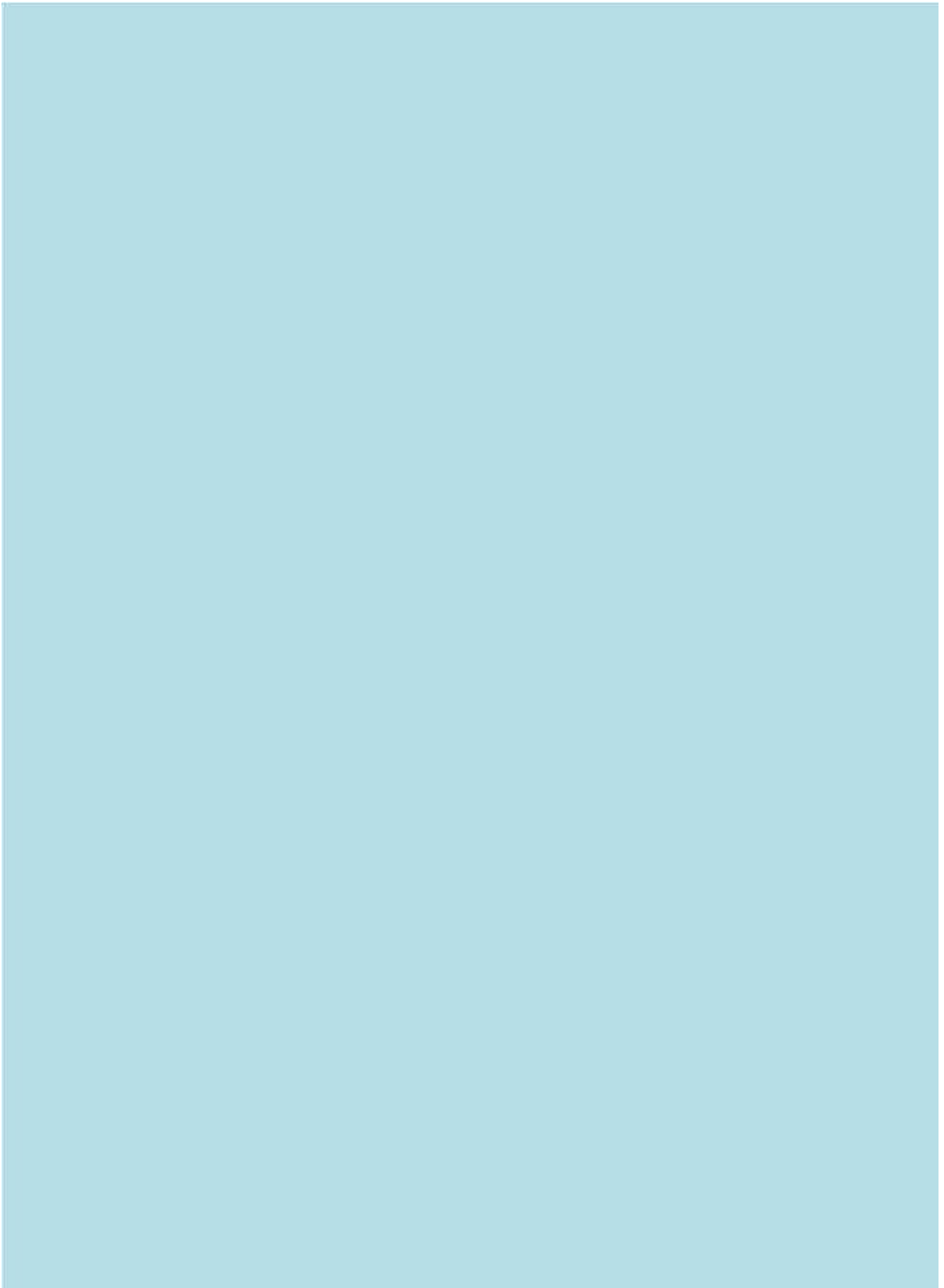
Risk Reference	Social and Commercial Services – Social Programmes
Strategic Objective	Objective 6.1 - Social programmes that support the safety and wellbeing of community members
Strategic Risk Description and Risk Effect – Risk #6.1	Council delivers social programmes to assist and support disadvantaged and marginalised groups within its communities. Council delivers these programmes often due to the absence of other entities/organisations within its communities to deliver them. Council is at risk of alienating these groups and creating negative community perceptions of Council if it fails to effectively and efficiently deliver these programmes.
Operational Causal Risks	<ul style="list-style-type: none"> • Exposure to changes in the political environment • Failure to develop and implement a strategic approach to seeking external grants • Funding agreements are breached and funds may either be withdrawn or future funding applications are not viewed favourably • Delivery of programmes constrained by limited and finite funding and resources • Failure to recruit and retain skilled and qualified staff • Failure to manage the community's perception of the value of programmes • Limited accessible space available for the delivery of programmes • Limited resources available to service increasing community demands • Failure to ensure compliance with grant/service agreements • Uncertain levels of funding and the ongoing availability of funding • Low staff morale due to limited tenure contracts and job support • "At risk" working environments and remoteness
Inherent Risk Rating	Critical (Likelihood 4, Consequence 4)
Existing Controls	<ul style="list-style-type: none"> • Council employs a dedicated Community Services Manager and Grants and Program Coordinators • Policies and procedures have been developed for specific programs • Grants are managed in accordance with specified service levels and terms and conditions of funding agreements • Current grant funding status is reported to Council monthly • On-going staff training provided
Residual Risk Rating	High (Likelihood 4, Consequence 3)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Undertake a full risk and cost benefit analysis of the delivery of social programmes
Strategy Timeline	<ul style="list-style-type: none"> • A review of all community programs and funding to be completed by 31.12.2021.
Risk Rating Target	Medium (Likelihood 3, Consequence 3)
Management Progress	A report on Council's communities programme was commissioned and delivered in late 2019, this has contributed to the new organisational structure. The new organizational structure was implemented in 2020, and a review of all community programs and funding is being undertaken.
Responsible Position & Related Activities	Community Support Business Manager /Grants & Contracts Coordinator <ul style="list-style-type: none"> • Manage Community Services • Various Activities dependent upon grant funding – refer to page 15

Strategic & Operational Risk Register



IDENTIFIED RISK – SOCIAL AND COMMERCIAL SERVICES

Risk Reference	Social and Commercial Services – Commercial Programmes
Strategic Objective	Objective 6.2 - The provision of Commercial Services which contribute to the economic functionality of remote communities.
Strategic Risk Description and Risk Effect – Risk #6.2	These Commercial services create employment opportunities and additional sources of revenue for Council. If Council fails to effectively deliver these services it is at risk of creating community dissatisfaction and suffering economic loss.
Operational Causal Risks	<ul style="list-style-type: none"> • Quasi commercial operations of Council (eg Childcare) not operated effectively leading to higher than appropriate Council subsidisation. • Poor monitoring leading to cost over-run/performance issues • Poor performance leading to loss of contracts, liability claims • Non-compliance with agency services agreements • Failure to capture true costs of service delivery • Failure to recruit, retain and train staff
Inherent Risk Rating	Critical (Likelihood 4, Consequence 4)
Existing Controls	<ul style="list-style-type: none"> • Council employs a dedicated Project Coordinator to oversee commercial activities • External contracts are monitored by the Grants & Contracts Coordinator • Processes are mapped to ensure the timeliness of invoicing
Residual Risk Rating	High (Likelihood 3, Consequence 4)
Risk Mitigation Strategies	<ul style="list-style-type: none"> • Internal audit review to ensure all recommendations from the internal audit conducted have been implemented and that problems have been ameliorated.
Strategy Timeline	<ul style="list-style-type: none"> • Review to be completed by 31 December 2021
Risk Rating Target	Medium (Likelihood 3, Consequence 3)
Management Progress	An internal audit was undertaken 2016/2017 and a number of recommendations implemented over time. It is recommended that a new internal review be conducted to ensure the recommendations that were fully implemented remain, and are robust, especially in view of high staff turnover rates.
Responsible Position & Related Activities	Grants & Contracts Coordinator <ul style="list-style-type: none"> • Manage Commercial Services • Various Activities dependent upon commercial opportunities



WEST ARNHEM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	8.8
Title:	Risk Management and Audit Committee Meeting Dates - 2022
File Reference:	972054
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

The purpose of this report is to inform the Risk Management and Audit Committee about the scheduled meeting dates for 2022.

BACKGROUND

Meetings are an integral component of Council's governance framework. It is through meetings that elected members, appointed members, representatives from various government agencies and non-governmental organizations, and members of the public participate in discussions and debates on various issues. Through its meetings, Council ensures that:

1. The needs and wishes of the community are raised and addressed.
2. There is transparency about decisions that are made in the public interest.
3. The development and management of community assets, resources and infrastructure, as well as the delivery of services is monitored and improved.

To meet legislative and regulatory requirements, Council must:

1. Hold a minimum of four Risk Management and Audit Committee meetings each year.
2. Provide the public with information about the meeting dates, times and locations.

COMMENT

Next year's meetings for the Risk Management and Audit Committee are scheduled to take place on the following dates:

1. Tuesday, 29 March 2022
2. Tuesday 31 May 2022
3. Wednesday 27 July 2022
4. Wednesday, October 26 2022

A laminated calendar as well as a soft copy of the calendar will be provided to each Committee member.

STATUTORY ENVIRONMENT

Section 90(3)(b) of the *Local Government Act 2019*.

Clauses 50 and 103 of the *Local Government (General) Regulations 2021*.

POLICY IMPLICATIONS

Scheduling and Conduct of Meetings (Elected, Local Authority and Council Committee Members) Policy is relevant to this report.

FINANCIAL IMPLICATIONS

Provisions for meeting expenses are included in Council's annual budget

STRATEGIC IMPLICATIONS

In conducting its meetings, Council is mindful of the performance objectives contained in the *Regional Plan and Budget 2021-2022* as follows:

GOAL 1 COMMUNITY ENGAGEMENT	
<i>Community members and stakeholders that are engaged in, connected to and participate in the affairs of the region.</i>	
Objective 1.1	Communication that engages the community.
Objective 1.2	Enthusiastic participation in civic and community events.
Objective 1.3	Efficient and effective community service delivery .
Objective 1.4	Strong governance and leadership.

GOAL 2 LOCAL GOVERNMENT ADMINISTRATION	
<i>Systems and processes that support the effective and efficient use of financial and human resources.</i>	
Objective 2.1	An effective, efficient and accountable Regional Council .
Objective 2.4	Planning and reporting that informs Council's decision-making processes.
Objective 2.6	The minimisation of risks associated with the operations of Council.

VOTING REQUIREMENTS

Not applicable.

RECOMMENDATION:
That the Committee notes the 2022 meeting dates.

WEST ARNHEM REGIONAL COUNCIL

FOR THE MEETING 27 OCTOBER 2021

Agenda Reference:	10.1
Title:	Closure to the Public for the Discussion of Confidential Items
File Reference:	972056
Author:	Doreen Alusa, Governance and Risk Advisor

SUMMARY

Pursuant to section 99(2) of the *Local Government Act 2019* and clause 52 of the *Local Government (Administration) Regulations 2021*, the meeting is to be closed to the public to consider confidential matters.

STATUTORY ENVIRONMENT

Section 99(2) of the *Local Government Act 2019*

Clauses 51 and 52 of the *Local Government (Administration) Regulations 2021*

VOTING REQUIREMENTS

Simple majority.

RECOMMENDATION:

That the Committee approves the closure of the meeting to the public as confidential items are about to be discussed. The meeting is closed in accordance with clause 51(c) of the *Local Government (General) Regulations 2021* as the matters to be discussed include information that, if publicly disclosed, would be likely to cause commercial prejudice to, or confer an unfair commercial advantage on, any person; or (ii) prejudice the maintenance or administration of the law; or (iii) prejudice the security of the council, its members or staff; or (iv) subject to subregulation (3) – prejudice the interests of the council or some other person.

WEST ARNHEM REGIONAL COUNCIL
FOR THE MEETING 27 OCTOBER 2021

EXCLUSION OF THE PUBLIC

*The information is classed as confidential under section 99(2) of the Local Government Act 2019
clause 51 of the Local Government (Administration) Regulations 2021.*

WEST ARNHEM REGIONAL COUNCIL
FOR THE RISK MANAGEMENT AND AUDIT COMMITTEE MEETING

27 OCTOBER 2021

RE-ADMITTANCE OF THE PUBLIC