The Council of the City of Cockburn

Audit Risk and Compliance Committee
Agenda Paper

For Tuesday, 19 March 2024

**Audit Risk and Compliance Committee Meeting
6.00pm, Tuesday, 19 March 2024**

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Agenda

Committee Membership
Cr P Corke (Presiding Member)
Mayor L Howlett
Deputy Mayor C Stone
Cr K Allen
Cr C Reeve-Fowkes
Cr M Separovich
Independent Member W Gately
Independent Member A Kandie

1. Declaration Of Meeting

"Kaya, Wanju Wadjuk Budjar" which means "Hello, Welcome to Wadjuk Land".

The Presiding Member will acknowledge the Nyungar People who are the traditional custodians of the land on which the meeting is being held and pay respect to theElders of the Nyungar Nation, both past and present and extend that respect to Indigenous Australians present.

2. Appointment of Presiding Member (If required)

3. Disclaimer (To be read aloud by Presiding Member)

Members of the public, who attend Council Meetings, should not act immediately on anything they hear at the Meetings, without first seeking clarification of Council's position.

Persons are advised to wait for written advice from the Council prior to taking action on any matter that they may have before Council.

4. Acknowledgement of receipt of Written Declarations of Financial Interests and Conflict of Interest (by Presiding Member)

5. Apologies & Leave of Absence

Apology
Cr Kevin Allen

6.   Public Question Time

7.   Confirmation of Minutes

7.1   Minutes of the Audit Risk and Compliance Meeting - 7/12/2023

Recommendation
That Committee confirms the Minutes of the Audit Risk and Compliance Meeting held on Thursday, 7 December 2023 as a true and accurate record.

8.   Deputations

9.   Business Left Over from Previous Meeting (if adjourned)

Nil

10.   Declaration by Members who have Not Given Due Consideration to Matters Contained in the Business Paper Presented before the Meeting

11   Reports - CEO (and Delegates)

11.1   Governance and Strategy

11.1.1   Local Government Compliance Audit Return 2023

Responsible Executive	Executive Governance and Strategy
Author(s)	Risk and Governance Advisor
Attachments	1. Compliance Audit Return 2023 ⇩

RECOMMENDATION

That Council:

(1) ADOPTS the Local Government Compliance Audit Return 2023 for the 2023 calendar year, presented as the attachment to this report, for adoption by Council; and

(2) ACKNOWLEDGES that the Compliance Audit Return 2023 presented as the attachment to this report will be subsequently jointly certified by the Mayor and Chief Executive Officer for submission to the Department of Local Government, Sport and Cultural Industries.

Background

Pursuant to Regulations 14 and 15 of the *Local Government (Audit) Regulations 1996*, completion of the Local Government Compliance Audit Return (CAR) has been mandatory for all local governments in Western Australia since 2000.

The Audit Risk and Compliance (ARC) Committee is required to review the CAR and is to report to Council the results of that review.

The CAR is then required to be presented to the Council, adopted by the Council and recorded in the minutes if the meeting at which it is adopted.

Report

The *Local Government (Audit) Regulations 1996* require every local government to carry out a Compliance Audit for the period 1 January to 31 December each year and to complete a CAR as produced by the Local Government, Sports and Cultural Industries (DLGSC).

The CAR is to be:

- Reviewed by the Audit Committee
- Presented to Council at a meeting of the Council
- Adopted by the Council
- Recorded in the minutes of the council meeting at which it is adopted.

Pursuant to Regulation 14(3A) of the *Local Government (Audit) Regulations 1996* the CAR 2023 is to be presented to, and reviewed by, a meeting of the ARC Committee, and the result of that review reported to a meeting of Council for adoption.

Attachment 1 represents the CAR 2023 completed by City Officers, to be reviewed by the ARC Committee. The CAR 2023 was facilitated by the City's Legal and Compliance Service Unit.

The CAR 2023 did not identify any instances of non-compliance.

After the CAR has been presented to and adopted by Council, a certified copy is to be signed by the Mayor and CEO for lodgement with DLGSC by 31 March 2024 together with the relevant section of the council minutes and any additional information explaining or qualifying the CAR.

Following its adoption by Council, and pursuant to Regulations 14 and 15 of the *Local Government (Audit) Regulations 1996*, the City will submit the following documents to DLGSC by the 31 March 2023:

- City of Cockburn CAR 2023 Certified Copy of Return for the period 1 January 2023 to 31 December 2023, signed by the Mayor and Chief Executive Officer
- Copy of the relevant section of the Council Minutes, confirming Council's adoption of the CAR 2023.

Strategic Plans/Policy Implications

Listening & Leading
A community focused, sustainable, accountable and progressive organisation.
• Best practice Governance, partnerships and value for money.

Budget/Financial Implications

N/A

Legal Implications

Regulations 14 and 15 of the *Local Government (Audit) Regulations 1996* refer

Community Consultation

N/A

Risk Management Implications

Failure to adopt the recommendation will result in non-compliance with meeting the 31 March 2024 deadline for the CAR statutory reporting requirements to the regulator, the DLGSC.

Advice to Proponent(s)/Submitters

N/A

Implications of Section 3.18(3) *Local Government Act 1995*

Nil

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Cockburn – Compliance Audit Return

No	Reference	Question	Response	Comments
Commercial Enterprises by Local Governments				
1	s3.59(2)(a) F&G Regs 7,9,10	Has the local government prepared a business plan for each major trading undertaking that was not exempt in 2023?	Yes	Respondent: Anton Lees. ARC Business Plan, X 2 OCM 09/02/2023 (2023/Minute No 0012) OCM 09/11/2023 (2023/Minute No 0292).
2	s3.59(2)(b) F&G Regs 7,8A, 8, 10	Has the local government prepared a business plan for each major land transaction that was not exempt in 2023?	Yes	Respondent: Anton Lees. ARC Business Plan, X 2 OCM 09/02/2023 (2023/Minute No 0012) OCM 09/11/2023 (2023/Minute No 0292).
3	s3.59(2)(c) F&G Regs 7,8A, 8,10	Has the local government prepared a business plan before entering into each land transaction that was preparatory to entry into a major land transaction in 2023?	Yes	Respondent: Anton Lees. ARC Business Plan, X 2 OCM 09/02/2023 (2023/Minute No 0012) OCM 09/11/2023 (2023/Minute No 0292).
4	s3.59(4)	Has the local government complied with public notice and publishing requirements for each proposal to commence a major trading undertaking or enter into a major land transaction or a land transaction that is preparatory to a major land transaction for 2023?	Yes	Respondent: Anton Lees. ARC Business Plan, X 2 OCM 09/02/2023 (2023/Minute No 0012) OCM 09/11/2023 (2023/Minute No 0292).
5	s3.59(5)	During 2023, did the council resolve to proceed with each major land transaction or trading undertaking by absolute majority?	Yes	Respondent: Anton Lees. ARC Business Plan, X 2 OCM 09/02/2023 (2023/Minute No 0012) OCM 09/11/2023 (2023/Minute No 0292).

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Delegation of Power/Duty				
No	**Reference**	**Question**	**Response**	**Comments**
1	s5.16 (1)	Were all delegations to committees resolved by absolute majority?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/ab18903a-3995-4b10-8604-d19a1eda5233/ECM_11503667_v4_Ordinary-Council-Meeting-Minutes-11-May-2023-pdf.aspx
2	s5.16 (2)	Were all delegations to committees in writing?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/ab18903a-3995-4b10-8604-d19a1eda5233/ECM_11503667_v4_Ordinary-Council-Meeting-Minutes-11-May-2023-pdf.aspx
3	s5.17	Were all delegations to committees within the limits specified in section 5.17 of the Local Government Act 1995?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/ab18903a-3995-4b10-8604-d19a1eda5233/ECM_11503667_v4_Ordinary-Council-Meeting-Minutes-11-May-2023-pdf.aspx
4	s5.18	Were all delegations to committees recorded in a register of delegations?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/ab18903a-3995-4b10-8604-d19a1eda5233/ECM_11503667_v4_Ordinary-Council-Meeting-Minutes-11-May-2023-pdf.aspx

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5	s5.18	Has council reviewed delegations to its committees in the 2022/2023 financial year?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/ab18903a-3995-4b10-8604-d19a1eda5233/ECM_11503667_v4_Ordinary-Council-Meeting-Minutes-11-May-2023-pdf.aspx
6	s5.42(1) & s5.43 Admin Reg 18G	Did the powers and duties delegated to the CEO exclude those listed in section 5.43 of the Local Government Act 1995?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/ab18903a-3995-4b10-8604-d19a1eda5233/ECM_11503667_v4_Ordinary-Council-Meeting-Minutes-11-May-2023-pdf.aspx
7	s5.42(1)	Were all delegations to the CEO resolved by an absolute majority?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/ab18903a-3995-4b10-8604-d19a1eda5233/ECM_11503667_v4_Ordinary-Council-Meeting-Minutes-11-May-2023-pdf.aspx
8	s5.42(2)	Were all delegations to the CEO in writing?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/ab18903a-3995-4b10-8604-d19a1eda5233/ECM_11503667_v4_Ordinary-Council-Meeting-Minutes-11-May-2023-pdf.aspx

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9	s5.44(2)	Were all delegations by the CEO to any employee in writing?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/City-and-Council/Governance-and-Documents/Register-of-Delegated-Authorities Details in position descriptions and/or register.
10	s5.16(3)(b) & s5.45(1)(b)	Were all decisions by the Council to amend or revoke a delegation made by absolute majority?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/ab18903a-3995-4b10-8604-d19a1eda5233/ECM_11503667_v4_Ordinary-Council-Meeting-Minutes-11-May-2023-pdf.aspx
11	s5.46(1)	Has the CEO kept a register of all delegations made under Division 4 of the Act to the CEO and to employees?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/City-and-Council/Governance-and-Documents/Register-of-Delegated-Authorities
12	s5.46(2)	Were all delegations made under Division 4 of the Act reviewed by the delegator at least once during the 2022/2023 financial year?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/ab18903a-3995-4b10-8604-d19a1eda5233/ECM_11503667_v4_Ordinary-Council-Meeting-Minutes-11-May-2023-pdf.aspx
13	s5.46(3) Admin Reg 19	Did all persons exercising a delegated power or duty under the Act keep, on all occasions, a written record in accordance with Local Government (Administration) Regulations 1996, regulation 19?	Yes	Respondent: Michelle Todd. Records are required to be kept in Attain and/or ECM as required.

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		Disclosure of Interest		
No	**Reference**	**Question**	**Response**	**Comments**
1	s5.67	Where a council member disclosed an interest in a matter and did not have participation approval under sections 5.68 or 5.69 of the Local Government Act 1995, did the council member ensure that they did not remain present to participate in discussion or decision making relating to the matter?	N/A	Respondent: Michelle Todd.
2	s5.68(2) & s5.69(5) Admin Reg 21A	Were all decisions regarding participation approval, including the extent of participation allowed and, where relevant, the information required by the Local Government (Administration) Regulations 1996 regulation 21A, recorded in the minutes of the relevant council or committee meeting?	N/A	Respondent: Michelle Todd.
3	s5.73	Were disclosures under sections 5.65, 5.70 or 5.71A(3) of the Local Government Act 1995 recorded in the minutes of the meeting at which the disclosures were made?	Yes	Respondent: Michelle Todd. Recorded in Minutes of Council and Committee where declarations were made. Refer Minutes on City's website. https://www.cockburn.wa.gov.au/City-and-Council/About-Council-Meetings-and-Elections/Agendas-and-Minutes/?page=1&sortby=
4	s5.75 Admin Reg 22, Form 2	Was a primary return in the prescribed form lodged by all relevant persons within three months of their start day?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/City-and-Council/Governance-and-Documents/Primary-and-Annual-Returns
5	s5.76 Admin Reg 23, Form 3	Was an annual return in the prescribed form lodged by all relevant persons by 31 August 2022?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/City-and-Council/Governance-and-Documents/Primary-and-Annual-Returns

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6	s5.77	On receipt of a primary or annual return, did the CEO, or the Mayor/President, give written acknowledgment of having received the return?	Yes	Respondent: Michelle Todd. Recorded in Compliance System
7	s5.88(1) & (2)(a)	Did the CEO keep a register of financial interests which contained the returns lodged under sections 5.75 and 5.76 of the Local Government Act 1995?	Yes	Respondent: Michelle Todd. Refer ECM Doc Set ID 11307375 and 11307172.
8	s5.88(1) & (2)(b) Admin Reg 28	Did the CEO keep a register of financial interests which contained a record of disclosures made under sections 5.65, 5.70, 5.71 and 5.71A of the Local Government Act 1995, in the form prescribed in the Local Government (Administration) Regulations 1996, regulation 28?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/City-and-Council/Governance-and-Documents/Register-of-Declarations-of-Interest
9	s5.88(3)	When a person ceased to be a person required to lodge a return under sections 5.75 and 5.76 of the Local Government Act 1995, did the CEO remove from the register all returns relating to that person?	Yes	Respondent: Michelle Todd.
10	s5.88(4)	Have all returns removed from the register in accordance with section 5.88(3) of the Local Government Act 1995 been kept for a period of at least five years after the person who lodged the return(s) ceased to be a person required to lodge a return?	Yes	Respondent: Michelle Todd.
11	s5.89A(1), (2) & (3) Admin Reg 28A	Did the CEO keep a register of gifts which contained a record of disclosures made under sections 5.87A and 5.87B of the Local Government Act 1995, in the form prescribed in the Local Government (Administration) Regulations 1996, regulation 28A?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/City-and-Council/Governance-and-Documents/Gifts-and-Travel-Contributions
12	s5.89A(5) & (5A)	Did the CEO publish an up-to-date version of the gift register on the local government's website?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/City-and-Council/Governance-and-Documents/Gifts-and-Travel-Contributions

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13	s5.89A(6)	When people cease to be a person who is required to make a disclosure under section 5.87A or 5.87B of the Local Government Act 1995, did the CEO remove from the register all records relating to those people?	Yes	Respondent: Michelle Todd.
14	s5.89A(7)	Have copies of all records removed from the register under section 5.89A(6) of the Local Government Act 1995 been kept for a period of at least five years after the person ceases to be a person required to make a disclosure?	Yes	Respondent: Michelle Todd.
15	s5.70(2) & (3)	Where an employee had an interest in any matter in respect of which the employee provided advice or a report directly to council or a committee, did that person disclose the nature and extent of that interest when giving the advice or report?	Yes	Respondent: Michelle Todd. A review shows where interests are declared and appears to show disclosures made by employees where required.
16	s5.71A & s5.71B(5)	Where council applied to the Minister to allow the CEO to provide advice or a report to which a disclosure under section 5.71A(1) of the Local Government Act 1995 relates, did the application include details of the nature of the interest disclosed and any other information required by the Minister for the purposes of the application?	N/A	Respondent: Michelle Todd. Did not occur.
17	s5.71B(6) & s5.71B(7)	Was any decision made by the Minister under section 5.71B(6) of the Local Government Act 1995, recorded in the minutes of the council meeting at which the decision was considered?	N/A	Respondent: Michelle Todd. Did not occur.
18	s5.104(1)	Did the local government prepare and adopt, by absolute majority, a code of conduct to be observed by council members, committee members candidates that incorporates the model code of conduct?	Yes	Respondent: Michelle Todd. OCM 11/03/2021 – Minute No. 0021.
19	s5.104(3) & (4)	Did the local government adopt additional requirements in addition to the model code of conduct? If yes, does it comply with section 5.104(3) and (4) of the Local Government Act 1995?	N/A	Respondent: Michelle Todd.
20	s5.104(7)	Has the CEO published an up-to-date version of the code of conduct for council members, committee members and candidates on the local government's website?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/3016f3c0-e475-45be-9748-a6a8a91cfa67/ECM_10310611_v2_City-of-Cockburn-Elected-Member-Code-of-Conduct-March-2021-pdf.aspx

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| 21 | s5.51A(1) & (3) | Has the CEO prepared and implemented a code of conduct to be observed by employees of the local government? If yes, has the CEO published an up-to-date version of the code of conduct for employees on the local government's website? | Yes | Respondent: Michelle Todd.

https://www.cockburn.wa.gov.au/getattachment/deba8b36-f0b8-4017-ad40-629196592857/ECM_11145350_v2_The-Cockburn-Way-Code-of-Conduct-June-2022-pdf.aspx |

Disposal of Property				
No	**Reference**	**Question**	**Response**	**Comments**
1	s3.58(3)	Where the local government disposed of property other than by public auction or tender, did it dispose of the property in accordance with section 3.58(3) of the Local Government Act 1995 (unless section 3.58(5) applies)?	Yes	Respondent: Joe Saraceni. All disposals have been completed in accordance with s3.58(3) in its entirety, including all public notices required.
2	s3.58(4)	Where the local government disposed of property under section 3.58(3) of the Local Government Act 1995, did it provide details, as prescribed by section 3.58(4), in the required local public notice for each disposal of property?	Yes	Respondent: Joe Saraceni. All disposals have been completed in accordance with s3.58(3) in its entirety, including all public notices required.

Elections				
No	**Reference**	**Question**	**Response**	**Comments**

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1	Elect Regs 30G(1) & (2)	Did the CEO establish and maintain an electoral gift register and ensure that all disclosure of gifts forms completed by candidates and donors and received by the CEO were placed on the electoral gift register at the time of receipt by the CEO and in a manner that clearly identifies and distinguishes the forms relating to each candidate in accordance with regulations 30G(1) and 30G(2) of the Local Government (Elections) Regulations 1997?	Yes	Respondent: Michelle Todd. There were no electoral gifts declared for the 2023 local government elections.
2	Elect Regs 30G(3) & (4)	Did the CEO remove any disclosure of gifts forms relating to an unsuccessful candidate, or a successful candidate that completed their term of office, from the electoral gift register, and retain those forms separately for a period of at least two years in accordance with regulation 30G(4) of the Local Government (Elections) Regulations 1997?	N/A	Respondent: Michelle Todd. No disclosures were received; therefore, no disclosures were required to be removed.
3	Elect Regs 30G(5) & (6)	Did the CEO publish an up-to-date version of the electoral gift register on the local government's official website in accordance with regulation 30G(5) of the Local Government (Elections) Regulations 1997?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/City-and-Council/Governance-and-Documents/Electoral-Gift-Register

Finance				
No	**Reference**	**Question**	**Response**	**Comments**
1	s7.1A	Has the local government established an audit committee and appointed members by absolute majority in accordance with section 7.1A of the Local Government Act 1995?	Yes	Respondent: Michelle Todd. OCM 30/10/2023 - Minute No.0254 Decision not carried by absolute majority of council. https://www.cockburn.wa.gov.au/getattachment/e6cf8944-f939-4b04-984c-f06d051185d1/ECM_11677777_v3_Special-Council-Meeting-Agenda-30-October-2023-pdf.aspx https://www.cockburn.wa.gov.au/getattachm

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				ent/7a5a97f6-edd0-4048-8d50-232da70f5118/ECM_11701930_v2_Special-Council-Meeting-Minutes-30-October-2023-pdf.aspx
2	s7.1B	Where the council delegated to its audit committee any powers or duties under Part 7 of the Local Government Act 1995, did it do so by absolute majority?	Yes	Respondent: Michelle Todd.

https://www.cockburn.wa.gov.au/getattachment/ab18903a-3995-4b10-8604-d19a1eda5233/ECM_11503667_v4_Ordinary-Council-Meeting-Minutes-11-May-2023-pdf.aspx |
| 3 | s7.9(1) | Was the auditor's report for the financial year ended 30 June 2023 received by the local government by 31 December 2023? | Yes | Respondent: Michelle Todd.

OCM 14/12/2023 - Minute No.0339

https://www.cockburn.wa.gov.au/getattachment/b92550f9-26e0-44c3-b370-564a4880ddb5/ECM_11749347_v2_Ordinary-Council-Meeting-Minutes-14-December-2023-pdf.aspx |
| 4 | s7.12A(3) | Where the local government determined that matters raised in the auditor's report prepared under section 7.9(1) of the Local Government Act 1995 required action to be taken, did the local government ensure that appropriate action was undertaken in respect of those matters? | Yes | Respondent: Sinta Rosita.

OCM 14/12/2023 - Minute No.0339; Management Letter (Confidential attachment) ARC 7/12/2023 - Minute No.0029.

https://www.cockburn.wa.gov.au/getattachment/b92550f9-26e0-44c3-b370-564a4880ddb5/ECM_11749347_v2_Ordinary-Council-Meeting-Minutes-14-December-2023-pdf.aspx |

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5	s7.12A(4)(a) & (4)(b)	Where matters identified as significant were reported in the auditor's report, did the local government prepare a report that stated what action the local government had taken or intended to take with respect to each of those matters? Was a copy of the report given to the Minister within three months of the audit report being received by the local government?	N/A	Respondent: Sinta Rosita. No significant matters identified. https://www.cockburn.wa.gov.au/getattachment/b92550f9-26e0-44c3-b370-564a4880ddb5/ECM_11749347_v2_Ordinary-Council-Meeting-Minutes-14-December-2023-pdf.aspx
6	s7.12A(5)	Within 14 days after the local government gave a report to the Minister under section 7.12A(4)(b) of the Local Government Act 1995, did the CEO publish a copy of the report on the local government's official website?	N/A	Respondent: Sinta Rosita. https://www.cockburn.wa.gov.au/getattachment/b92550f9-26e0-44c3-b370-564a4880ddb5/ECM_11749347_v2_Ordinary-Council-Meeting-Minutes-14-December-2023-pdf.aspx
7	Audit Reg 10(1)	Was the auditor's report for the financial year ending 30 June 2023 received by the local government within 30 days of completion of the audit?	Yes	Respondent: Sinta Rosita. Annual Financial Report was signed off on 7 December 2023 and Auditor's Report was received on 8 December 2023. https://www.cockburn.wa.gov.au/getattachment/b92550f9-26e0-44c3-b370-564a4880ddb5/ECM_11749347_v2_Ordinary-Council-Meeting-Minutes-14-December-2023-pdf.aspx

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Local Government Employees				
No	**Reference**	**Question**	**Response**	**Comments**
1	s5.36(4) & s5.37(3) Admin Reg 18A	Were all CEO and/or senior employee vacancies advertised in accordance with Local Government (Administration) Regulations 1996, regulation 18A?	Yes	Respondent: Chantelle Hanrahan. The role of CEO was advertised as a public notice in 'The West Australian' on Saturday, 17 December 2022. No other senior employee roles were advertised during the audit period.
2	Admin Reg 18E	Was all information provided in applications for the position of CEO true and accurate?	Yes	Respondent: Chantelle Hanrahan. All information in relation to the role was true and accurate.
3	Admin Reg 18F	Was the remuneration and other benefits paid to a CEO on appointment the same remuneration and benefits advertised for the position under section 5.36(4) of the Local Government Act 1995?	Yes	Respondent: Chantelle Hanrahan. Al remuneration and other benefits are consistent with that package that was advertised.
4	s5.37(2)	Did the CEO inform council of each proposal to employ or dismiss senior employee?	N/A	Respondent: Chantelle Hanrahan. No senior employees were appointed or dismissed during the period.
5	s5.37(2)	Where council rejected a CEO's recommendation to employ or dismiss a senior employee, did it inform the CEO of the reasons for doing so?	N/A	Respondent: Chantelle Hanrahan.

Official Conduct				
No	**Reference**	**Question**	**Response**	**Comments**
1	s5.120	Has the local government designated an employee to be its complaints officer?	Yes	Respondent: Michelle Todd. Executive Governance & Strategy appointed in writing by the CEO 2022.

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2	s5.121(1) & (2)	Has the complaints officer for the local government maintained a register of complaints which records all complaints that resulted in a finding under section 5.110(2)(a) of the Local Government Act 1995?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/City-and-Council/Governance-and-Documents/Register-for-Minor-Breach-Complaint-Orders
3	S5.121(2)	Does the complaints register include all information required by section 5.121(2) of the Local Government Act 1995?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/City-and-Council/Governance-and-Documents/Register-for-Minor-Breach-Complaint-Orders
4	s5.121(3)	Has the CEO published an up-to-date version of the register of the complaints on the local government's official website?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/City-and-Council/Governance-and-Documents/Register-for-Minor-Breach-Complaint-Orders

Tenders for Providing Goods and Services				
No	**Reference**	**Question**	**Response**	**Comments**
1	F&G Reg 11A(1) & (3)	Did the local government comply with its current purchasing policy, adopted under the Local Government (Functions and General) Regulations 1996, regulations 11A(1) and (3) in relation to the supply of goods or services where the consideration under the contract was, or was expected to be, $250,000 or less or worth $250,000 or less?	Yes	Respondent: Tony Natale. All purchases were made in accordance with the requirements of the Regulations and the City of Cockburn Procurement Policy. ECM Doc Set ID 4134032.

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2	s3.57 F&G Reg 11	Subject to Local Government (Functions and General) Regulations 1996, regulation 11(2), did the local government invite tenders for all contracts for the supply of goods or services where the consideration under the contract was, or was expected to be, worth more than the consideration stated in regulation 11(1) of the Regulations?	Yes	Respondent: Tony Natale. All applicable expenditure was tendered.
3	F&G Regs 11(1), 12(2), 13, & 14(1), (3), and (4)	When regulations 11(1), 12(2) or 13 of the Local Government Functions and General) Regulations 1996, required tenders to be publicly invited, did the local government invite tenders via Statewide public notice in accordance with Regulation 14(3) and (4)?	Yes	Respondent: Tony Natale. Tender registers are available through the Procurement and Tendering systems.
4	F&G Reg 12	Did the local government comply with Local Government (Functions and General) Regulations 1996, Regulation 12 when deciding to enter into multiple contracts rather than a single contract?	Yes	Respondent: Tony Natale. Documentation including Tender recommendations and Procurement Plans available within the Procurement systems.
5	F&G Reg 14(5)	If the local government sought to vary the information supplied to tenderers, was every reasonable step taken to give each person who sought copies of the tender documents, or each acceptable tenderer notice of the variation?	Yes	Respondent: Tony Natale. Tender varying notice transmission and distribution available through the Procurement and Tendering systems
6	F&G Regs 15 & 16	Did the local government's procedure for receiving and opening tenders comply with the requirements of Local Government (Functions and General) Regulations 1996, Regulation 15 and 16?	Yes	Respondent: Tony Natale. Tender transmission and distribution available on Tender records through the Procurement and Tendering systems.
7	F&G Reg 17	Did the information recorded in the local government's tender register comply with the requirements of the Local Government (Functions and General) Regulations 1996, Regulation 17 and did the CEO make the tenders register available for public inspection and publish it on the local government's official website?	Yes	Respondent: Tony Natale. Tender registers are available for public viewing and posted on the City of Cockburn website.
8	F&G Reg 18(1)	Did the local government reject any tenders that were not submitted at the place, and within the time, specified in the invitation to tender?	Yes	Respondent: Tony Natale. Tenders were rejected as documented on Tender recommendations and available within

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				the Procurement and Tendering systems. RFT15-2023 for Bus Shelters - Design, Fabrication and Installation at a value of $257K was accepted following an inquiry and review based on a submission not within the time as specified.
9	F&G Reg 18(4)	Were all tenders that were not rejected assessed by the local government via a written evaluation of the extent to which each tender satisfies the criteria for deciding which tender to accept?	Yes	Respondent: Tony Natale. Documentation including Tender recommendations available within the Procurement systems.
10	F&G Reg 19	Did the CEO give each tenderer written notice containing particulars of the successful tender or advising that no tender was accepted?	Yes	Respondent: Tony Natale. Notices available within the Procurement systems.
11	F&G Regs 21 & 22	Did the local government's advertising and expression of interest processes comply with the requirements of the Local Government (Functions and General) Regulations 1996, Regulations 21 and 22?	Yes	Respondent: Tony Natale. Information available on Tender registers.
12	F&G Reg 23(1) & (2)	Did the local government reject any expressions of interest that were not submitted at the place, and within the time, specified in the notice or that failed to comply with any other requirement specified in the notice?	N/A	Respondent: Tony Natale. No expressions of interest were conducted during the period.
13	F&G Reg 23(3) & (4)	Were all expressions of interest that were not rejected under the Local Government (Functions and General) Regulations 1996, Regulation 23(1) & (2) assessed by the local government? Did the CEO list each person as an acceptable tenderer?	N/A	Respondent: Tony Natale. No expressions of interest ware conducted during the period.
14	F&G Reg 24	Did the CEO give each person who submitted an expression of interest a notice in writing of the outcome in accordance with Local Government (Functions and General) Regulations 1996, Regulation 24?	N/A	Respondent: Tony Natale. No expressions of interest ware conducted during the period.
15	F&G Regs 24AD(2) & (4) and 24AE	Did the local government invite applicants for a panel of pre-qualified suppliers via Statewide public notice in accordance with Local Government (Functions & General) Regulations 1996 regulations 24AD(4) and 24AE?	Yes	Respondent: Tony Natale. Tender registers are available through the Procurement and Tendering systems. Panel of

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				prequalified Suppliers RFS01-2022 was issued during the year.
16	F&G Reg 24AD(6)	If the local government sought to vary the information supplied to the panel, was every reasonable step taken to give each person who sought detailed information about the proposed panel or each person who submitted an application notice of the variation?	Yes	Respondent: Tony Natale. Tender varying notice transmission and distribution available through the Procurement and Tendering systems.
17	F&G Reg 24AF	Did the local government's procedure for receiving and opening applications to join a panel of pre-qualified suppliers comply with the requirements of Local Government (Functions and General) Regulations 1996, Regulation 16, as if the reference in that regulation to a tender were a reference to a pre-qualified supplier panel application?	Yes	Respondent: Tony Natale. Tender transmission and distribution available on Tender records through the Procurement and Tendering systems
18	F&G Reg 24AG	Did the information recorded in the local government's tender register about panels of pre-qualified suppliers comply with the requirements of Local Government (Functions and General) Regulations 1996, Regulation 24AG?	Yes	Respondent: Tony Natale. Tender registers are available for public viewing and posted on the City of Cockburn website.
19	F&G Reg 24AH(1)	Did the local government reject any applications to join a panel of pre-qualified suppliers that were not submitted at the place, and within the time, specified in the invitation for applications?	Yes	Respondent: Tony Natale. Tenders were rejected as documented on Tender recommendations and available within the Procurement and Tendering systems.
20	F&G Reg 24AH(3)	Were all applications that were not rejected assessed by the local government via a written evaluation of the extent to which each application satisfies the criteria for deciding which application to accept?	Yes	Respondent: Tony Natale. Documentation including Tender recommendations available within the Procurement systems.
21	F&G Reg 24AI	Did the CEO send each applicant written notice advising them of the outcome of their application?	Yes	Respondent: Tony Natale. Notices available within the Procurement systems.

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| 22 | F&G Regs 24E & 24F | Where the local government gave regional price preference, did the local government comply with the requirements of Local Government (Functions and General) Regulations 1996, Regulation 24E and 24F? | Yes | Respondent: Tony Natale.

No regional price preference available or applicable within the City of Cockburn Procurement Policy. ECM Doc Set ID 4134032. |

Integrated Planning and Reporting				
No	**Reference**	**Question**	**Response**	**Comments**
1	Admin Reg 19C	Has the local government adopted by absolute majority a strategic community plan? If Yes, please provide the adoption date or the date of the most recent review in the Comments section?	Yes	9/07/2020 Respondent: Jane Downsborough. SCP adopted in at OCM 9 July 2020, Minor review adopted at SCM 27 June 2021.
2	Admin Reg 19DA(1) & (4)	Has the local government adopted by absolute majority a corporate business plan? If Yes, please provide the adoption date or the date of the most recent review in the Comments section?	Yes	29/06/2023 Respondent: Jane Downsborough. Adoption and review at SCM 29 June 2023.
3	Admin Reg 19DA(2) & (3)	Does the corporate business plan comply with the requirements of Local Government (Administration) Regulations 1996 19DA(2) & (3)?	Yes	Respondent: Jane Downsborough. Complete, the CBP is fully compliant with statutory requirements.

Optional Questions				
No	**Reference**	**Question**	**Response**	**Comments**
1	Financial Management Reg 5(2)(c)	Did the CEO review the appropriateness and effectiveness of the local government's financial management systems and procedures in accordance with the Local Government (Financial Management) Regulations 1996 regulations 5(2)(c) within the three financial years prior to 31 December	Yes	13/10/2022 Respondent: Nelson Mauricio. Presented to the 21 September 2022 Audit, Risk and Compliance Committee Meeting,

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		2023? If yes, please provide the date of council's resolution to accept the report.		Item 12.3 (2022/MINUTE NO 0018) Financial Management Review (FMR) Report. Adopted by Council at the 13 October 2022 OCM, Item 18.2 (2022/MINUTE NO 0211) Minutes – Audit, Risk and Compliance Committee Meeting 21 September 2022 Report.
2	Audit Reg 17	Did the CEO review the appropriateness and effectiveness of the local government's systems and procedures in relation to risk management, internal control and legislative compliance in accordance with Local Government (Audit) Regulations 1996 regulation 17 within the three financial years prior to 31 December 2023? If yes, please provide date of council's resolution to accept the report.	Yes	10/12/2020 Respondent: Michelle Todd. The last review pursuant to the requirements of regulation 17 was the triennial review for the 2019-2020 financial year submitted to the City's now superseded Audit and Strategic Finance Committee at its meeting on 19 November 2020, Item 15.1 (2020/Minute No 0021 – 'Chief Executive Officer's Triennial Review for Risk Management, Internal Control and Legislative Compliance'). Adopted by Council at the 10 December 2020 OCM, Item 13.3 (2020/MINUTE NO 0252) 'Minutes – Audit, Risk and Compliance Committee Meeting 21 September 2022' Report.
3	s5.87C	Where a disclosure was made under sections 5.87A or 5.87B of the Local Government Act 1995, were the disclosures made within 10 days after receipt of the gift? Did the disclosure include the information required by section 5.87C of the Act?	Yes	Respondent: Michelle Todd. Disclosures made appear to have been made within 10 days of receipt of gift.
4	s5.90A(2) & (5)	Did the local government prepare, adopt by absolute majority and publish an up-to-date version on the local government's website, a policy dealing with the attendance of council members and the CEO at events?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/dcd974ba-bf3c-4f14-836c-

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				6e7f8208b998/ECM_11299767_v3_Ordinary-Council-Meeting-Minutes-10-November-2022-pdf.aspx.
5	s5.96A(1), (2), (3) & (4)	Did the CEO publish information on the local government's website in accordance with sections 5.96A(1), (2), (3), and (4) of the Local Government Act 1995?	Yes	Respondent: Michelle Todd. The City does not record the exact decisions of Council in minutes of matters considered behind closed doors.
6	s5.128(1)	Did the local government prepare and adopt (by absolute majority) a policy in relation to the continuing professional development of council members?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/getattachment/0eb80e98-0620-49f2-a981-fbaebeadd732/ECM_11644722_v4_Ordinary-Council-Meeting-Minutes-14-September-2023-pdf.aspx
7	s5.127	Did the local government prepare a report on the training completed by council members in the 2022/2023 financial year and publish it on the local government's official website by 31 July 2023?	Yes	Respondent: Michelle Todd. https://www.cockburn.wa.gov.au/City-and-Council/Governance-and-Documents/Register-of-Elected-Member-Training-and-Profession
8	s6.4(3)	By 30 September 2023, did the local government submit to its auditor the balanced accounts and annual financial report for the year ending 30 June 2023?	Yes	Respondent: Nelson Mauricio. Submitted on Friday 29 September 2023. https://www.cockburn.wa.gov.au/getattachment/b92550f9-26e0-44c3-b370-564a4880ddb5/ECM_11749347_v2_Ordinary-Council-Meeting-Minutes-14-December-2023-pdf.aspx

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9	s.6.2(3)	When adopting the annual budget, did the local government take into account all its expenditure, revenue and income?	Yes	Respondent: Nelson Mauricio. All known revenue, income and expenditure taken into account in the adopted FY24 budget. https://www.cockburn.wa.gov.au/getattachment/11cdb717-2d0d-47da-930f-eaa0e9fab670/ECM_11544363_v4_Special-Council-Meeting-Minutes-29-June-2023-pdf.aspx

_____   _____

Daniel Simms Chief Executive Officer City of Cockburn   Date

_____   _____

His Worship Mayor Logan K. Howlett, JP, City of Cockburn   Date

11.1.2   Internal Audit Scope for Corporate Credit Cards

Responsible Executive	Executive Governance and Strategy
Author(s)	Risk and Governance Advisor
Attachments	1. Terms of Reference - Internal Audit Scope for Corporate Cards ⇩

RECOMMENDATION

That Council:

(1)   RECEIVES the Terms of Reference for the Internal Audit Scope for Corporate Card Expenditure, Controls and Reporting.

Background

This report is submitted to the Audit, Risk and Compliance (ARC) Committee to comply with Council Decision (3) as set out in the Minutes for the 9 November 2023 OCM record 2023/Minute No. 0299 -

> '*That Council:*
> *(1)   ADOPTS the amendments to the Procurement Policy;*
> *(2)   AMENDS Item 2, Value for Money, to include the following: All pre-qualified, approved, and strategic business partnership suppliers will be systematically reviewed in line with contract terms and performance criteria (at least three yearly or as required) and*
> *(3)   REQUESTs the CEO to present an internal Scope of Audit – Corporate Credit Card Expenditure, Controls and Reporting to the first Audit & Risk meeting in 2024 for consideration by the Committee.*'

Attached to this report is the documented terms of reference submitted to the ARC for its consideration.

Submission

N/A

Report

Council 2023/Minute No. 0299 records the reason for Council Decision (3) as:

> '*The City currently has 72 corporate credit cards averaging $100k total spend per month, equating to approximately $1.2mil expenditure per year.*
> *In the current economic climate, it is prudent that an audit is conducted to ensure public money is being spent wisely and ethically.*

This audit is one part of a wide ranging program we should put in place to make sure our spending is focussed on the right priorities and that strong controls govern how rates are spent.
Residents and ratepayers are under economic strain. There is no such thing as council money – there is only ratepayers' money that we are charged with spending wisely and frugally.
We should examine every area of spending to make sure ratepayers are getting value for money and ensure that their money is being spent in the most efficient and ethical way possible.'

The audit scope outlined in the terms of reference is to assess:

- The types of purchases made by credit cards;
- Whether or not credit cards are the most efficient / effective means for the types of costs incurred; and
- The oversight and control of the credit card spending.

The City is proposing that an external independent auditor will perform this audit. The audit methodology proposed is primarily confirming the City's compliance with the provisions of the *Local Government Act 1996* and associated *Local Government (Financial Management) Regulations 1996*. Additionally, the audit will confirm the City's compliance with its own policy, processes and identified controls in managing corporate credit cards.

The audit will provide an independent view to Council of the City's corporate credit card system, assure Council that the City continues to provide value for money to ratepayers and instil confidence to ratepayers that the City's credit card system manages spending in an efficient and ethical manner.

Strategic Plans/Policy Implications
Listening & Leading
A community focused, sustainable, accountable and progressive organisation.
• Best practice Governance, partnerships and value for money.

Budget/Financial Implications

Adequate provision exists in the Governance and Risk Services Unit budget for financial year 2024 for the delivery of internal audits.

Legal Implications

Local Government Act 1996 and *Local Government (Financial Management) Regulations 1996*.

Community Consultation

N/A

Risk Management Implications

The relevant risk identified in the City's RMSS risk register is 'Credit cards' and is described as 'Failure to properly manage and oversee the provision of corporate credit cards to authorised officers.' This risk is ranked Low due to effectiveness of the existing controls. The audit will confirm the adequacy of this risk ranking.

Advice to Proponent(s)/Submitters

N/A

Implications of Section 3.18(3) *Local Government Act 1995*

Nil

City of Cockburn Audit Terms of Reference - *Corporate Credit Card Expenditure, Controls and Reporting Audit*

Reason for audit

The Council of the City of Cockburn Ordinary Council meeting Minutes for Thursday 9 November 2023 record 2023/Minute No. 0299 Council Decision (3)

'*That Council:*

(1) *ADOPTS the amendments to the Procurement Policy;*
(2) *AMENDS Item 2, Value for Money, to include the following:*
    All pre-qualified, approved, and strategic business partnership suppliers will be systematically reviewed in line with contract terms and performance criteria (at least three yearly or as required); and
(3) *REQUESTS the CEO to present an Internal Scope of Audit – Corporate Credit Card Expenditure, Controls and Reporting to the first Audit & Risk meeting in 2024 for consideration by the Committee.*'

Background

Council 2023/Minute No. 0299 records the reason for Council Decision No. 3 as:

'*The City currently has 72 corporate credit cards averaging $100k total spend per month, equating to approximately $1.2 mil expenditure per year.*

In the current economic climate, it is prudent that an audit is conducted to ensure public money is being spent wisely and ethically.

This audit is one part of a wide ranging program we should put in place to make sure our spending is focused on the right priorities and that strong controls govern how rates are spent.

Residents and ratepayers are under economic strain. There is no such thing as council money - there is only ratepayers' money that we are charged with spending wisely and frugally.

We should examine every area of spending to make sure ratepayers are getting value for money and ensure that their money is being spent in the most efficient and ethical way possible.'

Strategic alignment

City of Cockburn, Strategic Community Plan 2020–2030
Listening and Leading
A community-focused, sustainable, accountable, and progressive organisation

Strategic Objectives
5.1 Best practice Governance, partnerships, and value for money

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Measurements
Improved satisfaction with the City's Governance and financial sustainability

Audit scope

The recommended scope of this audit is:

- to assess the types of purchase made by credit cards;
- to determine whether credit cards are the most efficient and effective means for the types of costs incurred;
- to assess the oversight and control of the credit card spending; and
- to make recommendations for improvement as required.

Audit methodology

The proposed methodology for this internal audit is outlined below:

- Review the provisions of the *Local Government Act 1996* and associated *Local Government (Financial Management) Regulations 1996* which impact on the use and control of corporate credit cards -this information is summarised on the webpage titled *Use of Corporate Credit Cards* of the Department of Local Government, Sport and Cultural Industries (the Department);
- Review the City's Credit Cards intranet information page, Administrative Corporate Credit Card Policy, and associated forms – Credit Card Receipt Form, and Memo – Missing Tax Invoice for Credit Card and determine if any guidance documentation is missing;
- Review transactions using credit cards for payment – this may focus on sampling some 'Credit Card Transactions Reports to Council' (embedded in 'Payments Made from Municipal Fund and Local Procurement Summary' reports),– these are submitted at every OCM, including evaluation of Officer categorisation and commentary; and
- Interview a sample of City officers responsible for credit card management – areas of discussion may consist of identified discrepancies or deviations from policy or process, identified control weakness.

The relevant risk identified in the City's risk register in RMSS is listed below:

Risk ID	Risk name	Risk description	Existing Controls	Risk rating
182	Credit cards	*Failure to properly manage and oversee the provision of corporate credit cards to*	Review of credit card acquittal statements by AP team; Procedure requiring all credit card acquittal reports to be countersigned by the cardholders manager (next manager up concept). For a Director or CEO, these will be countersigned by another Director or the CEO; Credit card acquittals have to be supported by	*Low 4*

Risk ID	Risk name	Risk description	Existing Controls	Risk rating
		authorised officers.	receipts; Staff sign off on credit card usage policy and guidelines; A credit card register is maintained in the TechOne system; and External audit.	

The findings of this audit will enable the City to confirm its compliance with legislation and assure ratepayers that the City's credit card system manages spending in an efficient and ethical manner.

This audit will identify whether the controls listed above are effective. Additionally, the audit will examine if the City's credit cards system is adding value to ratepayers. This will be determined by benchmarking the City's credit card system to the advantages of credit cards usage by local governments, which is listed by the Department's webpage, namely, that when used correctly, a credit card can:

- eliminate or reduce time spent on paper based ordering and payments;
- reduce administrative costs;
- reduce the number of payments made per month;
- provide a useful resource in remote and emergency situations;
- reduce the need to carry cash on the premises; and
- provide an effective audit trail of expenditures.

Internal resource

- Acting Financial Controller Danny Santoso;
- Acting Financial Accountant Flora Jia;
- Acting Chief Financial Officer Nelson Mauricio;
- Acting Head of Finance Sinta Rosita; and
- Risk and Governance Advisor Joseph Fiori.

External resource

- External auditor, to be confirmed.

Outcome

This audit will provide an independent view to Council of the City's corporate credit card system. It will evaluate the effectiveness of the internal controls such as policy, procedures and activities designed to prevent or detect fraudulent, improper, and abusive purchase card transactions.

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The audit will also assure Council that the City provides value for money to ratepayers and instil confidence to ratepayers that the City's credit card system manages spending in an efficient and ethical manner.

The audit will make recommendations to Council for improvements as identified.

Bibliography

1. City of Cockburn Credit Cards intranet page;
2. City of Cockburn Memo – Missing Tax Invoice for Credit Card, ECM Doc Set ID 11652000;
3. City of Cockburn Policy (Administration) *Corporate Credit Cards*, ECM Doc Set ID 4132084;
4. Corruption and Crime Commission, *Report on the Investigation of Alleged Public Sector Misconduct by the Commissioner of Police in Relation to the Use of the Western Australian Government Purchasing Card or Any Other Entitlement*, 16 July 2012;
5. Department of Local Government, Sport and Cultural Industries, Guidance on reporting credit card and purchasing card transactions webpage;
6. Department of Local Government, Sport and Cultural Industries, Use of Corporate Credit Cards webpage;
7. *Local Government Act 1996*;
8. *Local Government (Financial Management) Regulations 1996*;
9. Moore Australia, Financial Management Review City of Cockburn, September 2022, ECM Doc Set ID 11813073;
10. Office of the Auditor General, *Western Australian Auditor General's Report Controls Over Corporate Credit Cards*, Report 7: May 2018;
11. The Council of the City of Cockburn, Ordinary Council Meeting Amended Agenda for Tuesday 13 February 2024, Item 14.1.2 Payments Made from Municipal Fund and Local Procurement Summary – November and December 2023 Report, ECM Doc Set ID 11801206.

11.1.3   Strategic Service Review Program

Responsible Executive	Executive Governance and Strategy
Author(s)	Strategic Business Analyst
Attachments	N/A

RECOMMENDATION

That Council:

(1)   ENDORSES the City's adoption of the Service Review Methodology for review of its services; and

(2)   APPROVES the three-year timeline to implement the Service Review Program for the City, promoting a cycle of continuous improvement in service delivery and review.

Background

Service delivery reviews assist local governments to clarify the needs of their communities and assess how efficiently and effectively they are meeting those needs.

Using this information, local governments can determine what changes in delivery of services will provide benefits to all stakeholders whilst being financially sustainable.

These reviews are an ongoing process to ensure local government is delivering what the community needs in the best possible way, especially with changing community needs and emerging external factors, such as the global economic slowdown and the need to respond to climate change.

Establishing a review process builds the capacity of both staff and the community to think critically and systematically about current and future service needs.

The City faces challenges in continuing to deliver appropriate, effective, and efficient services to our community.

Our service provision is under increasing financial pressure, and there is often a widening gap between revenue and expenditure.

At the same time, our ratepayers expect us to be environmentally and socially responsible and to provide a wide range of quality services.

In meeting these challenges, the City recognises it must operate in a culture of continuous improvement. This approach ensures that the strategic thinking and innovative solutions to deliver more effective and efficient services becomes embedded into everyday work practice.

This improvement culture will be integrated within the City's strategic planning framework, and help inform financial and workforce planning, asset management and community engagement.

To this end, Governance and Strategy have implemented a Service Review Program utilising a methodology tailored to local government needs and adopting the principles of continuous service improvement.

Submission

N/A

Report

Best practice local governance requires transparent definition of services provided by the City including service cost, resource requirement and quality.

The definition of these services is provided by the City's 'Service Plans' which are available to the community and Council.

Historically, the City's Service Plans have described how the service is delivered from the provider's perspective, rather than what services the customer receives.

As a result, the City does not have a complete and accurate picture of whether all services meet customer needs.

Additionally, to plan for future delivery to best meet community expectation, it is necessary to look at future impacts to a service in terms of population growth, demographic change, and growth drivers.

In late 2023, the Governance and Strategy Division elected to adopt a methodology developed specifically for local government service review – the *Service Delivery Review: a how to manual for local government*[1].

This methodology has been developed by the Australian Centre of Excellence for Local Government at the University of Technology, Sydney and has been adopted by many local Councils.

Utilising a framework of continuous evaluation, the approach ensures stakeholders are in a state of readiness to begin the review process, before moving on to information gathering and analysis of the current service delivery model.

Through analysis of service outputs, expenditure and revenue, service risks, drivers for change, and customer satisfaction, opportunities for change are identified and, where appropriate, a plan for management and implementation of this change is developed.

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[1] Hunting, S.A., Ryan, R. & Robinson, T.P. 2014, *Service delivery review: a how to manual for local government*, 2nd edn, Australian Centre of Excellence for Local Government, University of Technology, Sydney. [Service Review Manual 2nd edition - PrintAndWeb.pdf (uts.edu.au)](Service Review Manual 2nd edition - PrintAndWeb.pdf)

Post implementation, the service change is evaluated and monitored in terms of efficiency and effectiveness. This ensures that service review is an ongoing process, and that local governments can adapt to future impacts to their services.

The process steps to the Service Delivery Review Methodology (the Methodology) are shown in Figure 1 below. As can been seen, the iterative nature of the process is particularly relevant to the Stakeholder Engagement, Information Gathering, and Analysis stages.

Figure 1: Service Review Methodology

In recognising the need for the City to review its service provision, and in line with the City's strategic planning framework, the Governance and Strategy Division have developed a Strategic Service Review Program (the Program). The Program will utilise the Methodology as outlined in Figure 1 above.

A phased approach to service review

It was proposed to implement a staged approach to the City's service review process.

This approach recognised that the 2023/24 year was a period of change for the City of Cockburn, in that appointment of a new CEO, an impending Organisational Review, and the introduction of the Australian Business Excellence Framework, alongside a new Long-Term Financial Plan and Workforce Plan, would result in the City's Council and administrative staff undergoing considerable change.

The Program has commenced and will run over a three-year period, with key activities for each year described below.

Year One: FY24

To familiarise the City and Council with the overall approach to the Program, Governance and Strategy provided several information sessions to key stakeholders on the Methodology and how this process would be applied in reviewing our services.

Stakeholders included elected members, the Executive Committee, and the Senior Leadership Team.

In limiting change activity in FY24, we elected to review only a subset of the City's services to the new Methodology.

We would prioritise those services to be investigated by applying a set of specific criteria.

Following this, and in consultation with our service units, an initial assessment of each of the City's services was undertaken in December 2023. The following criteria were used to prioritise services for review:

- Significant change in FY25 service cost to the City (+/- 5% change over prior year)
- Change in FY25 FTE
- Identification of change drivers that will impact on future service delivery
- Whether there are compliance issues related to the service (for example, statutory non-compliance or agreed service levels not met).

Using this method, six priority areas were identified for service review in FY24.

These were: Family Day Care, Waste Management, CoSafe, Building Compliance, Pools and Spas, and Streetscapes.

To date, three of these service reviews have been completed, and the remaining three are scheduled for completion by June 2024.

In year one of the Program, no service review will be carried out on the remaining services outside the six included above, rather, to meet reporting timelines for input into the City's Long Term Financial Plan and the Workforce Plan, these Service Plans will be completed to summary format, following the proforma templates in the review Methodology.

Year Two: FY25

It proposed to convene a Service Review working party (the Working Party) in July 2024 to commence work on review of all remaining services.

The Working Party will comprise subject-matter experts from all service teams and will utilise the Methodology to explore and recommend how the City will deliver its services to our customers to meet current and future community needs, operating within the confines of allocated budget and workforce.

Council will be engaged to define priorities for service review program and to review and endorse any recommended service changes. Council priorities will inform review scheduling.

After the recommendations have been documented and approved by Council, the Working Party will work with the service teams to plan, carefully manage, and implement the changes required to improve service delivery based on the agreed recommendations.

Year Three: FY26

In FY26, it is expected that the Program will be fully embedded into the City's business-as-usual activity.

Service delivery reviews conducted in FY24 and FY25 will be resource intensive, but this means that for subsequent reviews, the bulk of the work has already been done.

Subsequent effort can be targeted at updating and confirming, rather than establishing, the service information.

Service delivery reviews will then be incorporated into the City's continuous review cycle, rather than being a stand-alone Program.

Service delivery reviews will form part of the strategic planning framework, and will also inform review of operations, delivery programs, financial and workforce plans, and asset management plans.

Strategic Plans/Policy Implications

Listening & Leading
A community focused, sustainable, accountable and progressive organisation.
• Best practice Governance, partnerships and value for money.
• High quality and effective community engagement and customer service experiences.

Budget/Financial Implications

Strategic service review program work will be undertaken within existing budget allocation for the Strategy and Integrated Planning service unit.

Financial implications identified through the individual service reviews will be presented to the Expenditure review committee as they arise.

Legal Implications

N/A

Community Consultation

N/A

Risk Management Implications

It is recognised that through the service review process, any proposed changes must be assessed to ensure the City does not increase its exposure to risk.

The Service Review Process will link to the City's risk management processes to ensure appropriate risk assessment is undertaken and updates are made to the Corporate Risk Register. Any significant risks identified will be elevated to Council in line with standard risk management processes.

The Strategic Service Review Program supersedes item 2 on the current Internal Audit Plan 2024 – 2026 'Effectiveness of Service Delivery Planning and Review Processes'. It is recommended that item 2 is removed from the Internal Audit Plan in an additional report to the committee (refer Agenda item 11.4.3).

Advice to Proponent(s)/Submitters

N/A

Implications of Section 3.18(3) *Local Government Act 1995*

In reviewing services provided by the City; in proposing any changes to service delivery models, and in accordance with Section3.18(3) the City is to comply with the Act, namely:

(3) A local government is to satisfy itself that services and facilities that it provides:

   (a) integrate and coordinate, so far as practicable, with any provided by the Commonwealth, the State or any public body; and

   (b) do not duplicate, to an extent that the local government considers inappropriate, services or facilities provided by the Commonwealth, the State or any other body or person, whether public or private; and

   (c) are managed efficiently and effectively.

11.1.4　Three Year Internal Audit Plan

Responsible Executive	Executive Governance and Strategy
Author(s)	Executive Governance and Strategy
Attachments	1. City of Cockburn Internal Audit Plan 2024-2026 ⇩ 2. City of Cockburn Internal Audit Plan 2024-2026 - Revised ⇩

RECOMMENDATION

That Council:

(1)　AMENDS the Internal Audit Plan as outlined in the attachment, City of Cockburn Internal Audit Plan 2024-2026 Revised;

(2)　SUPPORTS a formal procurement process for delivery of internal audit services aligned with the City's Internal Audit Plan to a value of up $200,000 for the period, 2024–2026; and

(3)　REQUESTS a review the City of Cockburn Internal Audit Plan 2024-2026 by the Audit Risk and Compliance Committee following the outcomes of the Organisational Review using the Australian Business Excellence Framework, the ROKSteady Governance Review and the planned Risk Workshops with Riskwest.

Background

The City of Cockburn's current Enterprise Risk Management Framework subscribes to the four lines of defence assurance model in line with the Office of the Auditor General (OAG), as the mechanism to provide assurance of effective risk management.

This model ensures roles, responsibilities and accountabilities for decision making are structured to demonstrate effective governance and assurance.

The four lines of assurance are as follows:

- First line - held by the Business/Service Unit Heads and employees.
- Second line - held independently by the Legal and Compliance Service Unit.
- Third line - provided by the City's internal/external auditing mechanism.
- Fourth line - provided by the external performance and focus audits provided by the regulatory regimes – the Department of Local Government, Sport and Cultural Industries and the OAG.

As a third line of defence:

> '*Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations.*

It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, and governance processes' - definition from the *International Professional Practices Framework* issued by the Institute of Internal Auditors (IIA), 2017.

The City last presented the Internal Audit Plan (the Plan) to the Audit Risk and Compliance Committee (the ARC) in May 2023, however a number of factors has led to the City needing to make changes and reposition the Plan.

Submission

N/A

Report

In October 2022 Council endorsed the Interim Internal Audit Plan for FY23, which comprised of an "Acting Through" audit. This audit is still in progress due to the challenges experienced by the City in securing an auditor and is not anticipated to be presented to the ARC until the second half of 2024.

The City of Cockburn Internal Audit Plan 2024-2026 was endorsed by Council at the 8 June 2023 Ordinary Council Meeting with the following four audits to be undertaken during the period.
1.   Contract Management
2.   Effectiveness of Service Delivery Planning and Review Processes
3.   Fleet Management
4.   Climate Change Strategy – Adaptation

It is recommended to remove the Effectiveness of Service Delivery Planning and Review Processes audit from the schedule for the following reasons:

1. The current Audit, Risk and Compliance Committee agenda includes Item 11.1.3 on the "Strategic Service Review Program", seeking endorsement for the City's adoption of the Service Review Methodology for review of its services and approval for the three-year timeline to implement the Service Review Program for the City, promoting a cycle of continuous improvement in service delivery and review.

2. This negates the need for the proposed audit; however, the Committee may wish to consider an audit to evaluate the program after the three-year period.

It is recommended to include the audit for Corporate Card Expenditure, Controls and Reporting on the Internal Audit Report schedule in line with the Council recommendation from the 9 November 2023 meeting for which the terms of reference are to be considered in Item 11.1.2 on this ARC Committee agenda.

The City is also recommending prioritising an audit of Information Management at the City with the last Records Management internal audit undertaken in 2018. The City's

records are important because they are the corporate knowledge of the organisation, independent of staff turnover. They may form important evidence in legal proceedings but most importantly, records and good recordkeeping practice promote accountable and transparent decision making.

In 2024, locating information for, Freedom of Information requests, legal purposes and staff related matters have continued to surface as an ongoing matter for the City.

It is important to test the outcomes of the previous audit in line with the *State Records Act 2000* that sets the framework for records management of local government entities and consider the impact of the City's community growth, staff turnover and periods of COVID related shutdown to ensure that information management is keeping pace with organisational change and explore any potential software solutions to support information management requirements.

In October 2023 the City, with Council endorsement, engaged Learning Horizons, to support the CEO in undertaking an organisational review using the Australian Business Excellence Framework (ABEF) and review the organisation's governance performance with Roksteady GRC.

The ABEF is an integrated leadership and management system used to assess and improve aspects of an organisation, including leadership, strategy and planning, people, information and knowledge, safety, service delivery, product quality and bottom-line results.

The purpose of the ABEF is to create an environment for aligned continuous improvement at all levels of the organisation, a leadership focus on sustainable performance and the organisation's improved capability to deliver outcomes.

A report on the outcomes will be presented to Council by the May 2024 Ordinary Council Meeting.

Cockburn's Elected Members and designated employees have recently completed the Roksteady GRC Survey to measure the organisation's Governance performance.

The outcome will be a report enabling the City to highlight and build on its strengths, identify gaps and areas for development or improvement via an easy to understand and action, improvement plan.

The City is also working to finalise dates for two Risk Awareness workshops with Council. These workshops will provide an opportunity for Council to deepen their understanding of Risk Management and their role as Elected Members, setting of risk appetite and tolerance and a review of the Strategic risks.

As the City is currently in a period of review it is recommended that following the outcome of the organisational review using the ABEF, the review of the organisation's governance performance with Roksteady GRC and the work with Riskwest, a further review of the Internal Audit is undertaken to ensure the audits still to be scheduled are aligned with organisational priorities and outcomes.

In consideration of the above, it is recommended that these matters be considered and incorporated as amendments to the City of Cockburn Internal Audit Plan 2024-2026.

Strategic Plans/Policy Implications

Listening & Leading
A community focused, sustainable, accountable, and progressive organisation.
• Best practice Governance, partnerships and value for money.

Budget/Financial Implications

Funding required from municipal budget of $200,000 across calendar years 2024 to 2026.

Legal Implications

N/A

Community Consultation

N/A

Risk Management Implications

An internal audit plan serves as a roadmap within an organisation and outlines the key areas of focus for audits, the timeline for conducting them, and the resources required. It is important to align audits with organisational objectives and risks, ensuring the plan addresses the most critical risks and areas that impact the organisation's ability to achieve its objectives.

An outdated plan, misaligned with organisational changes can lead to several risks, including:
Ineffectiveness: Audits may not address the most pressing risks or areas of concern if the plan doesn't reflect current challenges.
Missed opportunities: Emerging risks or vulnerabilities might go undetected, potentially leading to financial losses, reputational damage, or operational disruptions.
Wasted resources: Resources may be allocated to audits that are no longer relevant, hindering the efficiency and effectiveness of the internal audit function.
Reduced credibility: Outdated plans can raise concerns about the internal audit function's ability to stay current with the organisation's evolving landscape, potentially impacting its credibility and influence.
Compliance issues: If the plan doesn't consider recent regulatory changes or industry best practices, the organisation may be at risk of non-compliance.

Advice to Proponent(s)/Submitters

N/A

Implications of Section 3.18(3) Local Government Act, 1995

Nil

City of Cockburn Internal Audit Plan 2024 – 2026 [ECM Doc Set ID: 9531923]

Function/Process/Activity	Reason	Likelihood	Consequence	Risk	Audit Scope	Organisational Context	2024	2025	2026
1. Contract Management Finance [ExCo member: Nelson Mauricio; Responsible Person: Tony Natale]	The potential costs and legal implication of contract noncompliance are so significant, it is vital to conduct regular audits to identify potential issues and opportunities within the existing contracts management processes. *Linked to Strategic Community Plan 2020-2030, Strategic Outcomes and Objectives; Listening and Leading – A community focussed, sustainable, accountable, and progressive organisation.* *Strategic Objectives – 5.1 Best practice Governance, partnerships, and value for money. Measurements – Improved satisfaction with the City's Governance and financial sustainability.*	Possible 3	Minor 2	**Moderate 6**	An evaluation of how the City of Cockburn (the City) manages contracts to verify and ensure that systems, policies, and controls (including resourcing capacity) are being met, and that all obligations and stipulations are taking place as agreed upon and scheduled.	On 20 June 2022, the Chief Financial Officer suggested scheduling this audit for the 2023 calendar year. The reason for this being that the Procurement Team at capacity with tenders and the conversion from *Ci* to *Ci – Anywhere* until December 2022.	✔		
2. Effectiveness of Service Delivery Planning and Review Processes Governance and Strategy [ExCo member: Emma Milne; Responsible Person: Jane Downsborough]	Over time, the needs and expectations of communities can change. The City should have robust and comprehensive processes for service planning and review to ensure all services continue to provide value for money that is in line with community expectations. Community engagement is a critical aspect in prioritising resources for service provision against other responsibilities such as asset maintenance and capital works. How does the City ensure it remains focused on the delivery of services at optimal service levels that match community expectations and use the best, most efficient delivery models? *Extracted from the City of Cockburn Strategic Community Plan 2020-2030:* *Community, Lifestyle and Security objective 3.1 – 'Provide a diverse range of accessible, inclusive and targeted community services, recreation programs, events and cultural activities that enrich our community.'* *City Growth and Moving Around objective 4.2 – 'Sustainable revitalise urban areas to deliver high levels of amenity and to cater for population growth.'*	Unlikely 2	Critical 4	**Moderate 8**	The audit objective is to assess the effectiveness of the City's service delivery planning and review processes, do they: • Determine the viability and sustainability of the City's current service delivery model for services, • Forecast future demand and service needs. • Consider the best type of service delivery model (insource, outsource, mix etc.), • Identify future funding challenges and solutions for controlling financial costs, • Survey and monitor community expectations (industry trends, benchmarking, customer satisfaction levels etc.), • Measure the level and quality of services and require benefit analysis. • Consider and embrace technological changes, • Enable reshaping or repurposing of existing services? To be undertaken in a staged approach with the first stage being a high-level review to determine overall current state and identify gaps and improvement opportunities. Second (and future stages if necessary) will be to review specific areas identified and progress of improvement plan delivery).	On 02 June 2020, the then Executive Manager Strategy & Civic Support suggested that this audit be postponed after the COVID-19 pandemic restrictions are removed because this audit requires significant input and resources from all business / service units in the organisation. On 04 November 2022, the Manager Strategy and Integrated Planning stated that assessing the effectiveness of the services requires meaningful KPIs and determining indicators for service level. This information should be included in the service plans.		✔	

City of Cockburn Internal Audit Plan 2024 – 2026 [ECM Doc Set ID: 9531923]

Function/Process/Activity	Reason	Likelihood	Consequence	Risk	Audit Scope	Organisational Context	2024	2025	2026
3. Fleet management Operations [ExCo member: Anton Lees; Responsible Person: Lou Vieira]	The city has a considerable investment in its fleet assets and considerable resources are consumed in operating and maintaining the fleet to ensure it services the City's business requirements. Independent review will assist determine the effectiveness of the fleet management model. *Linked to Strategic Community Plan 2020-2030, Strategic Outcomes and Objectives; Listening and Leading – A community focussed, sustainable, accountable, and progressive organisation.* *Strategic Objectives – 5.1 Best practice Governance, partnerships, and value for money. Measurements – Improved satisfaction with the City's Governance and financial sustainability.*	Unlikely 2	Major 3	**Moderate 6**	The objective of the review is to assess the adequacy of the management control framework and related risk management strategies for the fleet management function, including processes relating to the planning, organising, controlling, directing, communicating, and the management of vehicle assets. Extent to which the City's is complying with policies, procedures, guidelines, and with laws and regulations pertaining to fleet management.	Emerging Strategic & Operational Risks		✔	
4. Climate Change Strategy - Adaptation Built and Natural Environment [ExCo member: Daniel Arndt; Responsible Person: Christopher Beaton]	Climate change has significant social, economic and legal implications for local government. The City of Cockburn is already experiencing the effects with increased coastal erosion, higher summer temperatures, more severe heatwaves and a longer bushfire season. The City has a critical role in responding to climate change through its responsibilities for land use planning, emergency management, ownership of public infrastructure and delivery of community services. On 22 April 2020 Ernst and Young facilitated a risk assessment for the City, to update its climate change risk register. The process considered the consequences and likelihood of 18 climate risks using the City's ratings frameworks, which are consistent with AS ISO 31000:2018 *Risk management-Guidelines*. The 18 risks have been grouped into their areas of impact and consolidated into the six overarching risks below: 1. Reduced water availability from decreased rainfall 2. Biodiversity loss from sea level rise 3. Coastal impacts from sea level rise 4. Urban forest decline from climate change 5. Community infrastructure damage from climate change impacts 6. Public health decline from climate change	Likely 4	Catastrophic 5	**Extreme 20**	The City has identified key solutions in its climate resilience roadmap in the form of six adaptation objectives that will help the City reduce the impacts of climate change: 1. Waterwise City 2. Conserve biodiversity 3. Coastal adaptation 4. Increase the urban forest 5. Protect community infrastructure 6. Enhance health and wellbeing. The audit objective is to assess the effectiveness of the six adaptation objectives that will help the City reduce the impacts of climate change. Due to its size and complexity, the carbon neutral strategy would require a number of audits, over several periods, to track the implementation of the six adaptation objectives that will help the City reduce the impacts of climate change.	The vision of the *City of Cockburn Climate Change Strategy 2020-2023* is for the City to continue to be a leader in climate resilience and sustainability. The City aspires to become a carbon neutral City and commit to working with the community to adapt to our changing climate. .		✔	✔

City of Cockburn Internal Audit Plan 2024-2026_Revised

Function/Process/Activity	Reason	Likelihood	Consequence	Risk	Audit Scope – to be refined in partnership with the Auditor	Organisational Context	2024	2025	2026
1. Procurement Finance [ExCo member: Nelson Mauricio; Responsible Person: Tony Natale]	**Ensuring Value for Money:** The City is entrusted with public funds, and procurement is often a significant area of expenditure. An audit helps ensure these funds are used effectively and efficiently to acquire goods and services that meet the needs of the community at a fair price. **Promoting Transparency and Accountability:** Public trust is essential for the City. An audit fosters transparency by scrutinizing procurement practices and revealing any potential irregularities or non-compliance with regulations. This promotes accountability and helps ensure public funds are used ethically and for intended purposes. **Identifying and Mitigating Risks:** Procurement processes can be complex and susceptible to various risks, such as fraud, corruption, or errors in judgment. An audit can identify these risks, assess their likelihood, and impact, and recommend strategies to mitigate them, safeguarding public funds and ensuring the integrity of the procurement process. **Enhancing Efficiency and Effectiveness:** An audit can identify areas where procurement procedures can be streamlined or improved, potentially leading to cost savings and increased efficiency. It can also evaluate the effectiveness of procurement strategies in achieving desired results and suggest improvements for better alignment with the City's objectives. *Linked to Strategic Community Plan 2020-2030, Strategic Outcomes and Objectives; Listening and Leading – A community focused, sustainable, accountable, and progressive organisation.* *Strategic Objectives – 5.1 Best practice Governance, partnerships, and value for money. Measurements – Improved satisfaction with the City's Governance and financial sustainability* *Local Government Act 1995* *Local Government (Functions and General) Regulations 1996.*	Possible 3	Minor 2	**Moderate 6**	**Contract Formation and Award:** Adherence to established procurement policies and procedures in the formation and award of contracts. Review of tender documentation and evaluation processes to ensure compliance with regulations and fairness. Assessment of contract award decisions and justifications for chosen suppliers. **Contract Management:** Effectiveness of contract management practices. **Contract Variations and Extensions:** Review of the process for authorising contract variations and extensions. **Contractual Dispute Resolution:** Effectiveness of mechanisms for resolving disputes arising from contracts. **Contract Close-out and Post-Contract Review:** Review of contract close-out procedures. **Training and Awareness:** Availability and effectiveness of training programs for staff on procurement policies, procedures, and best practice. Assessment of staff awareness and understanding of their roles and responsibilities.	On 20 June 2022, the Chief Financial Officer suggested scheduling this audit for the 2023 calendar year. The reason for this being that the Procurement Team at capacity with tenders and the conversion from *Ci* to *Ci – Anywhere* until December 2022. OAG Local Government Focus Audit - Timely Payment Of Suppliers – 2018. Procurement Improvement Internal Audit Completed 2014/15. Procurement/Supply Chain Management Process 2011 Internal Audit Plan Completed 2012/13.	✓		
2. **[NEW]** Information Management Finance – Information Management [ExCo member: Nelson Mauricio; Responsible Person: Emma Machura]	**Ensuring Transparency and Accountability:** Effective information management is crucial for transparent decision-making and public accountability. An audit evaluates how information is collected, stored, and accessed, ensuring it's readily available for public scrutiny and supports informed decision-making by Council. **Mitigating Risks and Protecting Data:** The City manages vast amounts of sensitive data, and proper information management is critical for mitigating risks like data breaches, loss, or			Risk assessment to be undertaken	**Information Governance Framework:** Existence and effectiveness of a documented information governance framework that outlines policies, procedures, and responsibilities for information management. Alignment of the framework with relevant regulations and best practice. **Information Lifecycle Management:** Effectiveness of processes for creating, capturing, storing, accessing, using, archiving, and disposing of information throughout its lifecycle. Compliance with relevant retention and disposition schedules for different types of information.	The last Records Management internal audit was undertaken in 2018. A Privacy Impact Assessment Audit was undertaken in 2020. In 2024, locating information for FOI requests, legal purposes and staff related matters continues to be challenging and an ongoing		✓	

City of Cockburn Internal Audit Plan 2024-2026_Revised

Function/Process/Activity	Reason	Likelihood	Consequence	Risk	Audit Scope – to be refined in partnership with the Auditor	Organisational Context	2024	2025	2026

	unauthorised access. An audit assesses the security measures in place, identifies potential vulnerabilities, and recommends improvements to safeguard sensitive data.
	
	Enhancing Efficiency and Effectiveness:
	Efficient information management underpins various government functions. An audit evaluates information flow, access, and utilisation, identifying areas for improvement. This can lead to streamlined processes, improved information sharing, and ultimately contribute to better service delivery and decision-making for the benefit of the community.
	
	Linked to Strategic Community Plan 2020-2030, Strategic Outcomes and Objectives; Listening and Leading – A community focused, sustainable, accountable, and progressive organisation.
	
	Strategic Objectives – 5.1 Best practice Governance, partnerships, and value for money. Measurements – Improved satisfaction with the City's Governance and financial sustainability.
	
	Local Government Act 1995
	
	State Records Act 2000
					Information Security:
					Adequacy of security controls to protect information from unauthorised access, modification, loss, or misuse.
					Information Technology Infrastructure:
					Effectiveness of the information technology (IT) infrastructure in supporting information management needs, including:
					  o Hardware and software systems for data storage, processing, and access.
					  o System uptime and performance monitoring.
					  o Backup and disaster recovery capabilities.
					Information Access and Transparency:
					Availability of clear and accessible procedures for internal and external access to public information, complying with relevant open government and freedom of information (FOI) requirements.
					Effectiveness of communication strategies to educate the public about information access rights and procedures.
					Records Management:
					Effectiveness of the City's records management program.
					Information Management Training and Awareness:
					Availability and effectiveness of training programs for staff on information management policies, procedures, and data security best practices.
					Assessment of staff awareness and understanding of their roles and responsibilities in managing information effectively.
						matter for the City.
						
						It is important to test the outcomes of the previous audit in line with the City's community growth, staff turnover and periods of shutdown due to Covid to ensure that information management is keeping pace with organisational change.			

3. Corporate Card Expenditure, Controls and Reporting
 	
Finance
 	
[ExCo member: Nelson Mauricio; Responsible Persons: TBC]
	This internal Audit is required to comply with Council Decision (3) as set out in the Minutes for the 9 November 2023 OCM record 2023/Minute No. 0299 -
	
	    'That Council:
	    (1) ADOPTS the amendments to the Procurement Policy;
	    (2) AMENDS Item 2, Value for Money, to include the following:
	    All pre-qualified, approved, and strategic business partnership suppliers will be systematically reviewed in line with contract terms and performance criteria (at least three yearly or as required) and
	    (3) REQUESTs the CEO to present an internal Scope of Audit – Corporate Credit Card Expenditure, Controls and Reporting to the first Audit & Risk meeting in 2024 for consideration by the Committee.'
		Minor
		2
			Unlikely
			2
				Low
				4
					The recommended scope of this audit is:
					• to assess the types of purchase made by credit cards;
					• to determine whether credit cards are the most efficient and effective means for the types of costs incurred;
					• to assess the oversight and control of the credit card spending; and
					• to make recommendations for improvement as required.
						Council 2023/Minute No. 0299 records the reason for Council Decision (3) as:
						
						'*The City currently has 72 corporate credit cards averaging $100k total spend per month, equating to approximately $1.2mil expenditure per year. In the current economic climate, it is prudent that an audit is conducted to ensure public money is being spent wisely and ethically. This audit is one part of a wide-ranging program we should put in place to make sure our spending is focused on the right priorities and that strong controls govern how rates are spent. Residents and ratepayers are under economic strain. There is no such thing as council money – there is*
							✓		

City of Cockburn Internal Audit Plan 2024-2026_Revised

Function/Process/Activity	Reason	Likelihood	Consequence	Risk	Audit Scope – to be refined in partnership with the Auditor	Organisational Context	2024	2025	2026
						only ratepayers' money that we are charged with spending wisely and frugally. *We should examine every area of spending to make sure ratepayers are getting value for money and ensure that their money is being spent in the most efficient and ethical way possible.'*			
2. ~~Effectiveness of Service Delivery Planning and Review Processes~~ ~~Governance and Strategy~~ ~~[ExCo member: Emma Milne; Responsible Person:~~ 4. ~~Jane Downsborough]~~	~~Over time, the needs and expectations of communities can change. The City should have robust and comprehensive processes for service planning and review to ensure all services continue to provide value for money that is in line with community expectations. Community engagement is a critical aspect in prioritising resources for service provision against other responsibilities such as asset maintenance and capital works. How does the City ensure it remains focused on the delivery of services at optimal service levels that match community expectations and use the best, most efficient delivery models?~~ ~~*Extracted from the City of Cockburn Strategic Community Plan 2020-2030:*~~ ~~*Community, Lifestyle and Security objective 3.1 –*~~ ~~*'Provide a diverse range of accessible, inclusive and targeted community services, recreation programs, events and cultural activities that enrich our community.'*~~ ~~*City Growth and Moving Around objective 4.2 –*~~ ~~*'Sustainable revitalise urban areas to deliver high levels of amenity and to cater for population*~~ ~~*growth.'*~~	~~Unlikely 2~~	~~Critical 4~~	~~*Moderate 8*~~	~~The audit objective is to assess the effectiveness of the City's service delivery planning and review processes, do they:~~ ~~• Determine the viability and sustainability of the City's current service delivery model for services,~~ ~~• Forecast future demand and service needs.~~ ~~• Consider the best type of service delivery model (insource, outsource, mix etc.),~~ ~~• Identify future funding challenges and solutions for controlling financial costs,~~ ~~• Survey and monitor community expectations (industry trends, benchmarking, customer satisfaction levels etc.),~~ ~~• Measure the level and quality of services and require benefit analysis.~~ ~~• Consider and embrace technological changes,~~ ~~• Enable reshaping or repurposing of existing services?~~ ~~To be undertaken in a staged approach with the first stage being a high-level review to determine overall current state and identify gaps and improvement opportunities.~~ ~~Second (and future stages if necessary) will be to review specific areas identified and progress of improvement plan delivery).~~	~~On 02 June 2020, the then Executive Manager Strategy & Civic Support suggested that this audit be postponed after the COVID-19 pandemic restrictions are removed because this audit requires significant input and resources from all business / service units in the organisation.~~ ~~On 04 November 2022, the Manager Strategy and Integrated Planning stated that assessing the effectiveness of the services requires meaningful KPIs and determining indicators for service level. This information should be included in the service plans.~~		✓	
5. *Fleet Management* *Operations* 6. *[ExCo member: Anton Lees; Responsible Person: Lou Vieira]*	*The city has a considerable investment in its fleet assets and considerable resources are consumed in operating and maintaining the fleet to ensure it services the City's business requirements. Independent review will assist determine the effectiveness of the fleet management model.* *Linked to Strategic Community Plan 2020-2030, Strategic Outcomes and Objectives; Listening and Leading – A community focused, sustainable, accountable, and progressive organisation.* *Strategic Objectives – 5.1 Best practice Governance, partnerships, and value for money. Measurements – Improved satisfaction with the City's Governance and financial sustainability.*	*Unlikely 2*	*Major 3*	*Moderate 6*	*The objective of the review is to assess the adequacy of the management control framework and related risk management strategies for the fleet management function, including processes relating to the planning, organising, controlling, directing, communicating, and the management of vehicle assets. Extent to which the City's is complying with policies, procedures, guidelines, and with laws and regulations pertaining to fleet management.*	*Emerging Strategic & Operational Risks*		✓	✓

City of Cockburn Internal Audit Plan 2024-2026_Revised

Function/Process/Activity	Reason	Likelihood	Consequence	Risk	Audit Scope – to be refined in partnership with the Auditor	Organisational Context	2024	2025	2026
4. *Climate Change Strategy - Adaptation* *Built and Natural Environment* 7. *[ExCo member: Daniel Arndt; Responsible Person: Christopher Beaton]*	*Climate change has significant social, economic and legal implications for local government. The City of Cockburn is already experiencing the effects with increased coastal erosion, higher summer temperatures, more severe heatwaves and a longer bushfire season.* *The City has a critical role in responding to climate change through its responsibilities for land use planning, emergency management, ownership of public infrastructure and delivery of community services.* *On 22 April 2020 Ernst and Young facilitated a risk assessment for the City, to update its climate change risk register. The process considered the consequences and likelihood of 18 climate risks using the City's ratings frameworks, which are consistent with AS ISO 31000:2018 Risk management-Guidelines. The 18 risks have been grouped into their areas of impact and consolidated into the six overarching risks below:* 1. *Reduced water availability from decreased rainfall* 2. *Biodiversity loss from sea level rise* 3. *Coastal impacts from sea level rise* 4. *Urban forest decline from climate change* 5. *Community infrastructure damage from climate change impacts* *Public health decline from climate change.*	*Likely* *4*	*Catastrophic* *5*	**Extreme** **20**	*The City has identified key solutions in its climate resilience roadmap in the form of six adaptation objectives that will help the City reduce the impacts of climate change:* 1. *Waterwise City* 2. *Conserve biodiversity* 3. *Coastal adaptation* 4. *Increase the urban forest* 5. *Protect community infrastructure* 6. *Enhance health and wellbeing.* *The audit objective is to assess the effectiveness of the six adaptation objectives that will help the City reduce the impacts of climate change.* *Due to its size and complexity, the carbon neutral strategy would require a number of audits, over several periods, to track the implementation of the six adaptation objectives that will help the City reduce the impacts of climate change.*	*The vision of the City of Cockburn Climate Change Strategy 2020-2023 is for the City to continue to be a leader in climate resilience and sustainability. The City aspires to become a carbon neutral City and commit to working with the community to adapt to our changing climate.* *.*		✓	✓

Function/Process/Activity	Reason	Likelihood	Consequence	Risk	Audit Scope	Organisational Context	2023	
1. 'Acting through' Finance [ExCo member: Nelson Mauricio; Responsible Person: Tony Natale]	The City of Cockburn (the City) included this audit in the City of Cockburn Strategic Internal Audit Plan 2022-2023 (ARC September 2022) for completion in the 2022 - 2023 financial year to comply with a 14 April 2022 resolution of Council. *There is uncertainty by some Elected Members of the application of the principle of 'acting through'. This was identified in the City of Cockburn Governance Review 2021 at the City of Cockburn Governance Steering Committee Meeting on 22 March 2022. Subsequently, Council resolved on 14 April 2022 to list the item in the City's Strategic Internal Audit Plan 2022-2023 to be completed in the 2022 -2023 financial year.* *Local Government Act 1995 (the Act)*			Risk assessment to be undertaken	The auditor will be required to examine how procurement at the City implements and administers its: · Authorisations provided under legislation · Delegations provided under the Act · Acting through another person	Section 5.45 of the Act states that provisions concerning delegations do not prevent a local government from performing any of its functions by acting through a person, or a CEO from performing any of his or her functions through the actions of another person. While what constitutes an 'acting through' arrangement is not defined in legislation, the Department's published guidance on the matter states that acting through arrangements can be employed where an Officer performs tasks at the direction of the authority holder.	**IN PROGRESS** it has taken the City significant time to procure the services of an Auditor to undertake this work.	

11.2 People Experience and Transformation

11.2.1 Organisational Culture Review by Independent Member

Responsible Executive	Acting Executive, People Experience and Transformation
Author(s)	Acting Executive, People Experience and Transformation
Attachments	N/A

RECOMMENDATION

That Council:

(1)   DEFERS consideration of the Organisational Culture Review to a more appropriate time, as determined by the Chief Executive Officer.

Background

The following Council decision was made at the 13 October 2022 Ordinary Council Meeting.

That Council:

(1)   RECEIVES the Minutes of the 21 September 2022 Audit, Risk and Compliance Committee Meeting.

(2)   ADOPTS the recommendations contained within.

(3)   REQUESTS quotations for Council consideration for an external review of the City's policies covering workplace bullying and harassment, and workplace bullying, and harassment claim made in 2022; and

(4)   REQUESTS for quotations for Council consideration of an Organisational Culture Review by an independent consultant.

A report was presented to the 25 May 2023 Audit and Risk Committee in response to points (3) and (4) of the Council resolution.

Three proposals from external consultants were presented with the report.

The ARC recommended that Council:

(1)   RECEIVES the proposals received and attached to the report; and

(2)   DEFERS consideration of the Organisational Culture Review to an Audit Risk and Compliance Meeting to be held within six months of the commencement of the Chief Executive Officer.

Submission

N/A

Report

An organisational culture review would seek to:

- Undertake an analysis of previous engagement surveys, pulse surveys, exit surveys and other workforce metrics to ascertain the organisational culture at the City
- Include direct, in person engagement with employees through interviews and focus groups
- Undertake a whole of business engagement survey
- Provide a debrief to the Chief Executive Officer and Executive Members in relation to findings and make recommendations about opportunity for growth.

The City has recently commenced an Organisational Review against the Australia Business Excellence Framework.

This process has included extensive consultation and feedback from across the organisation.

An Action Plan relating to opportunities for growth and improvement will be implemented, which may result in a significant change in the management process for the organisation.

It is recommended that the City does not commence an organisational culture review until the Organisational Review has been concluded, associated Action Plan implemented, and associated change management feedback collated and analysed.

The City remains committed to ensuring that our people are still provided with an opportunity to provide feedback and will continue to:

- Undertake the annual workplace engagement survey
- Undertake employee pulse survey monthly
- Provide an opportunity for ceasing employees to provide feedback through exit surveys
- Provide briefings to the Executive Committee regarding key findings, trends, and proposed strategies in response to themes identified through the Workplace Survey Program.

The rationale for this is that major organisational change will impact on organisational culture.

Undertaking a cultural review at the same time, or immediately after a major change management process will not provide accurate results relating to the overall culture of the business and will be more reflective of the change process that has been undertaken.

Strategic Plans/Policy Implications

Listening & Leading
A community focused, sustainable, accountable and progressive organisation.
• Employer of choice focusing on equity, innovation and technology.

Budget/Financial Implications

There are no financial implications associated with the adopting of the recommendation.

Legal Implications

N/A

Community Consultation

N/A

Risk Management Implications

The risk associated with the endorsement of this recommendation is low as the City will continue to engage with the workforce and seek feedback in relation to organisational culture.

Advice to Proponent(s)/Submitters

N/A

Implications of Section 3.18(3) *Local Government Act 1995*

Nil

11.2.2 Workplace Health and Safety Audit and Performance Program

Responsible Executive	Acting Executive, People Experience and Transformation
Author(s)	Acting Executive, People Experience and Transformation
Attachments	1. LGIS Safety Audit 2022 ⇓
	2. Safety Improvement Plan ⇓

RECOMMENDATION

That Council:

(1) RECEIVES the LGIS Safety Audit Report 2022;

(2) NOTES the deliverables and actions in the associated Safety Improvement Plan; and

(3) NOTES the ongoing continuous improvement actions being undertaken as part of the Safety Improvement Plan.

Background

As part of the Local Government Insurance Scheme (LGIS), the City of Cockburn (the City) can request LGIS to conduct an independent safety audit every three years.

The '3 Steps to Safety' Program was established by LGIS to recognise and meet the need of local governments with the aim of driving safety performance and minimising claim exposure.

In 2022, the City requested LGIS to conduct a '3 Steps to Safety, Step One – Assessment Report' audit.

This report to the Audit, Risk and Compliance Committee summarises the LGIS audit conducted during 15 to 22 August 2022.

The LGIS Safety Audit 2022 is attached to this report (refer Attachment 1).

The audit program comprises the following three steps:

(1) Assessment of the safety system against the requirements of the WorkSafe Plan and the undertaking of workplace inspections of selected work areas.

(2) Development of an agreed action plan between the local government and LGIS.

(3) Implementation of the agreed action plan by the local government.

The audit assigns a finding and score against five categories as follows:

1. Management Commitment
2. Planning
3. Consultation and Reporting
4. Hazard Management
5. Training and Supervision.

These categories are summarised in Table 5 'Status of agreed action plan'.

The LGIS audit has set the foundation for the safety improvement program at the City.

In addition to implementing the agreed action plan, several other elements have been developed and deployed to ensure that continuous improvement of health, safety and wellbeing is occurring across the City to ensure that our legislative obligations as a Person Conducting a Business or Undertaking (PCBU).

Whilst Council does not meet the definition of a PCBU or an Officer under the *Work Health and Safety act 2020*, it does play an important role in ensuring that the business, and susequently Officers, are supported in executing their health, safety and wellbeing duties.

In addition, Elected Members have an obligation under the WHS Act 2020, specifically section 29 in relation to 'duties of other persons at the workplace'. Specifically,

- Take reasonable care for their own health and safety
- Take reasonable care that their acts or omissions do not adversely affect the health and safety of other persons
- Comply, so far as reasonably able, with any reasonable instruction that is given by the local government (as the PCBU) to ensure the local government complies with its duty under the Act.

Submission

N/A

Report

The following tables compare the findings between the 2019 and 2022 audits, for each of the categories and elements.

Assessment and Audit Summary

Table 1: Audit Summary

Management Commitment			
Element	**Description**	**2019 Status**	**2022 Status**
1.1	There is a document safety and health policy that is reviewed on a regular basis.	Insufficient	Unsatisfactory
1.2	The safety and health policy is available to workers, suppliers, contractors, customers and visitors to the workplace.	Exemplary / Proficient	Ad Hoc
1.3	The organisation identified and monitored safety and health legislation, standards, codes of practice, guidance notes, agreement, and guidelines relevant to its operations.	Exemplary / Proficient	Satisfactory
1.4	There is a process that makes all parties aware of the accountable for identifying, monitoring, and managing their safety and health risk and responsibilities.	Exemplary / Proficient	Insufficient
1.5	The organisation coordinates safety management activities.	Satisfactory	Insufficient
1.6	Financial and physical resources are provided for all aspects of safety and health.	Exemplary / Proficient	Insufficient
1.7	All workers have sufficient time to complete safety and health related tasks.	Exemplary / Proficient	Unsatisfactory
1.8	Recommendation to improve safety and health risk management are actioned upon.	Exemplary / Proficient	Insufficient

Planning			
Element	**Description**	**2019 Status**	**2022 Status**
2.1	The organisation approach to safety and health management is planned and review in consultation with senior management at least annually.	Insufficient	Unsatisfactory
2.2	Specific safety and health objective and measurable targets have been established for relevant functions and levels within the organisation.	Unsatisfactory	Unsatisfactory
2.3	Arrangements are in place for people with special needs.	Exemplary / Proficient	Unsatisfactory
2.4	Arrangement for visitors in the workplace are in place.	Satisfactory	Insufficient
2.5	Policies and procedure for engaging and managing contractors are in place.	Ad Hoc	Unsatisfactory
2.6	Potential emergency situations have been identified and relevant emergency procedures are in place.	Exemplary / Proficient	Ad Hoc
2.7	The organisation's procedures, work instructions and work practices reflect current safety and health legislation, standards, codes of practice, guidance materials, agreement, and guidelines.	Exemplary / Proficient	Insufficient
2.8	All workers have access to current legislation, standards, codes of practice, guidance notes, agreements and guidelines that impact upon their activities.	Exemplary / Proficient	Insufficient
2.9	The organisation and individuals' safety legal requirements to undertake specific activities, perform work or operate equipment.	Exemplary / Proficient	Satisfactory

Consultation and Reporting			
Element	**Description**	**2019 Status**	**2022 Status**
3.1	There are agreed procedures for the involvement and consultation with workers on safety and health issues.	Exemplary / Proficient	Insufficient
3.2	Consultative arrangements are communicated to workers and are well understood.	Exemplary / Proficient	Insufficient
3.3	Workers and their representatives are involved in planning process for the management of safety and health at the workplace.	Insufficient	Unsatisfactory
3.4	Workers of their representatives are consulted regarding proposed changes to their work environment, processes or procedures and the purchasing decisions that could affect their safety and health.	Exemplary / Proficient	Ad Hoc
3.5	Workers or their representatives and consulted regarding the management of hazards in the workplace.	Satisfactory	Ad Hoc
3.6	There are arrangements in place for the acquisition, provision and exchange or safety and health information with external parties, including customers, suppliers, contractors and relevant public authorities.	Insufficient	Unsatisfactory
3.7	Consultative and reporting arrangement are regularly evaluated and modified where required.	Unsatisfactory	Unsatisfactory

Hazard Management			
Element	**Description**	**2019 Status**	**2022 Status**
4.1	Requirements for reducing risks are understood by management and workers.	Exemplary / Proficient	Ad Hoc
4.2	Work environments are regularly inspected and hazards are identified.	Exemplary / Proficient	Insufficient
4.3	Work activities are analysed and hazards identified.	Exemplary / Proficient	Insufficient
4.4	Risk assessments are undertaken on identified hazards.	Exemplary / Proficient	Insufficient
4.5	Hazards are prioritised and controlled using the hierarchy of controls and having regards to the identified level of risk.	Satisfactory	Insufficient
4.6	The effectiveness or hazard identification, risk assessment and risk control process is periodically reviewed and documented.	Ad Hoc	Unsatisfactory
4.7	Incidents, injuries and diseases and reported and investigated.	Exemplary / Proficient	Satisfactory

Training and Supervision			
Element	Description	2019 Status	2022 Status
5.1	An induction program is in place for all workers and contractors, providing relevant safety and health information and instruction.	Exemplary / Proficient	Insufficient
5.2	All management and supervisory personnel have received training in safety and health management principles and practices appropriate to their roles and responsibilities.	Unsatisfactory	Satisfactory
5.3	The organisation has identified the training needs of all workers.	Satisfactory	Exemplary / Proficient
5.4	Tasks are allocated according to capability, level of training and supervision of workers.	Exemplary / Proficient	Satisfactory
5.5	Training is delivered by people with appropriate knowledge, skills and experience.	Exemplary / Proficient	Satisfactory
5.6	The training program is evaluated and reviewed.	Satisfactory	Satisfactory
5.7	Supervision is undertaken by people with appropriate health and safety knowledge.	Exemplary / Proficient	Satisfactory

The LGIS Audit Report identified shortcomings in the City's Safety Management System that could be categorised into five key themes.

Table 2: Key themes emanating from LGIS-identified opportunities for improvement:

Theme	Description
WHS Management Framework	There were shortcomings in documentation related to managing workplace health and safety in the workplace.
Communication and Consultation	The audit was unable to ascertain, to an acceptable standard, that leaders and workers worked together to identify and solve barriers in relation to health and safety in the workplace and that feedback and continuous improvement was lacking.
Education and Induction	The audit was unable to ascertain, to an acceptable standard, from workers that they had an understanding of health and safety principles which indicated a lack of education and induction.
Accountability	There is a lack of shared accountability for workplace health and safety principles across the City.
Process and continuous improvement	Whilst a process was established it was no longer fit for purpose or was due for review either at the audit date or close to the audit date.

As a summary, the agreed action plan (attachment two) resulted in fifty-eight (58) individual actions items in relation to the five audit categories.

Table 3: Action plan agreed between LGIS and City of Cockburn

Theme	Audit Categories				
	Management Commitment	Panning	Consultation and Reporting	Hazard Management	Training and Supervision
WHS Management Framework	4	6	3	0	0
Communication and Consultation	4	2	2	0	0
Education and Induction	3	2	3	1	2
Accountability	2	4	2	5	0
Process and continuous improvement	3	8	1	1	0
Total	16	22	11	7	2

Status of agreed action plan items

At the date of this report, the City has made considerable progress in relation to the actions detailed in the agreed action plan and remains on track to complete or commence projects by 30 June 2024.

Table 4: Status of agreed action plan

Audit Category	Total Action Items	Completed	In Progress
Management Commitment	16	16	0
Planning	22	17	5
Consultation and Reporting	11	11	0
Hazard Management	7	7	0
Training and Supervision	2	2	0
Total	58	53	5

Implementation of Safety and Wellbeing Key Performance Indicators

The City remains committed to ensure the health, safety and wellbeing of its people and the community.

As a result, key performance indicators (KPIs) have been developed for all the Executive Committee (ExCo) Members and these have been cascaded, where appropriate, through the management hierarchy and employees.

Associated KPI outcomes are assessed on an annual basis as part of an employee's Annual Performance Appraisal and planning process.

Organisational safety performance of the organisation is reported to the ExCo) monthly to ensure that performance is tracked and barriers to success identified and removed.

Table 5: Safety and Wellbeing KPIs

Desired Outcome	Mechanism of Measure	FY24 KPI Target	Out-performance
Ensure that hazards are reported, and corrective actions identified within five business days.	Reporting through safety management system (RMSS)	2 hazards per FTE	3 hazards per FTE
Ensure that corrective actions, associated with hazards reports, near miss reports and investigations, are actioned within the agreed deadline.	Reporting through safety management system (RMSS)	90%	100%
Actively engage our people in safety conversations to ensure that safety and wellbeing is a priority.	Ability to evidence that conversations have occurred and actions items resolved.	2 conversations per week	4 safety conversations per week
Ensure that consultation is undertaken in relation to all new and amended safety related documentation and that these processes are documented.	Consultation processes are undertaken and documented, demonstrating feedback that was given and action taken.	100%	N/A

Commencement of high-risk auditing program

To ensure continuous improvement and risk mitigation, the City will commence a High-Risk Auditing Program.

Audits will be undertaken by an independent consultant who will:

1. Undertake a gap analysis of the Safety Management System to identify shortcomings on a corporate level and/or identify deployment issues for the specific service area.

2. Undertake interviews with employees with the service area to ascertain the level of understanding of the Safety Management System, their role in safety and the overall safety leadership of the service area.

3. Undertake a site inspection to ensure physical safety risks have been identified and controls implemented.

4. Observe behaviours and interactions on site to ensure psychological risks have been identified and controls implemented, including the observing of safety conversations, team meetings and/or toolbox meetings and consultation processes.

The High-Risk Audit Program commenced in February 2024 with Cockburn Resource Recovery Park.

The outcome of the Audit will be delivered to an Audit and Risk Committee (ARC) Meeting.

It is programmed that high-risk audits will be undertaken at Cockburn ARC and specific service units within the Operations Division and Community Services Division.

Safety Leadership Program

A positive safety culture is fostered from the top. The expectation of our leaders is that they:

• Actively address and seek to understand the risks of their divisions and drive towards lowest possible risk outcomes

• Choose to drive towards best practise indicators as a measure of success

• Develop a curious and collaborative mindset in a physical and psychologically safe environment to set the tone for people to constructively raise ideas, ask questions and provide feedback

• Initiate and grow relationships with Work Health and Safety and subject matter experts to investigate and implement best practise initiatives to eliminate and/or mitigate risk.

To ensure that our leaders are able to meet the expectation of their roles in relation to safety, the City will be developing and will commence delivery of a Safety Leadership Program by the end of April 2024.

This Program will focus on building and embedding the following behaviours in all of our leaders:

1. Involve others in the decision-making process through consultation, genuinely listening and considering feedback to ensure outcomes are the best result for the worker and City.
2. Foster a positive safety culture by demonstrating care for our people by creating an environment which encourages team members to raise concerns, give feedback and lead change.
3. Build collaborative partnerships across whole of business, acknowledging that safety is everyone's responsibility and utilise these relationships and knowledge to ensure positive outcomes for individual teams.
4. Actively seek to understand the safety risks facing their workforce and strive towards best practise controls and lowest possible risk.
5. Be visible, flexible, and proactive within their teams towards improvements in physical and psychological safety.

Listening & Leading
A community focused, sustainable, accountable and progressive organisation.
• Best practice Governance, partnerships and value for money.

Budget/Financial Implications

A budget provision exists in the Workplace Health and Safety Service Unit Budget for financial year 2024, for the delivery of actions items and programs associated with the Safety Improvement Plan.

In addition, there is budget provision for the delivery of the Safety Leadership Program.

No additional funding will be requested for these programs.

A budget provision will be sought for the ongoing delivery of programs, including the High-Risk Audit Program, in the Budget for financial year 2025.

Legal Implications

Work Health and Safety Act 2020
Work Health and Safety (General Regulations 2022

Community Consultation

N/A

Risk Management Implications

There is a risk to the City if we do not execute all our due diligence obligations provided for in the relevant legislation.

The risk of this is mitigated through the delivery of agreed action items from the Audit.

It is important that the City undertakes both internal and independent audits to ensure continuing compliance and continuous improvement.

In addition to the legislation obligations at the City, there is also a moral obligation to ensure our people and community members are in an environment that is free of harm.

Advice to Proponent(s)/Submitters

N/A

Implications of Section 3.18(3) *Local Government Act 1995*

Nil

3 Steps to Safety

Step One – Assessment Report
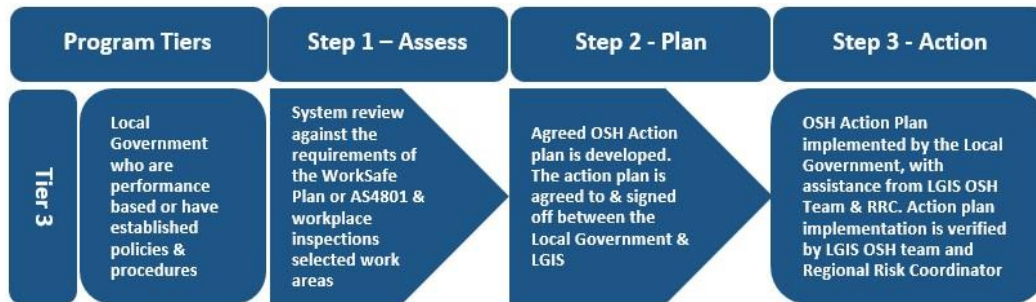
City of Cockburn

August 2022

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INTRODUCTION

The 3 Steps to Safety program was established to recognise and meet the needs of Local Government with the aim of driving safety performance and minimising claim exposure. This report is the outcome of Step 1 of that program. The next steps are included at the end of this report.

Program Summary

Verification Report

The purpose of this report is to provide the City of Cockburn with a summary of the assessment findings.

Verification Details

The verification activity was undertaken by Emma Horsefield (People Risk Manager). The City of Cockburn was represented by Cheryl Taveira (Manager – Workplace Health & Safety), Rhys Vaughan (Senior Safety Advisor) for the duration of the verification activity. This report has been peer reviewed by Katherine Kempin (Senior Risk Consultant - WHS) at LGIS.

The assessment was undertaken 15 -22 August 2022. The sites visited as part of the activity were the City Operations Centre, Henderson Waste Transfer Station, ARC, Success Library, Coolbellup Library, Fleet Division, Coogee Marina, Cockburn Youth Centre, Coolbellup Hub, and Jean Willis Centre.

Assessment Methodology

All evidence for this assessment was examined and verified on site through examination of documents, workplace inspections and interviews with representatives from the City of Cockburn. The assessment was undertaken based upon the WorkSafe Plan using the LGIS scoring methodology.

Finding	Score	Definition
Exemplary	4	The organisation has sustained performance requirements for the criteria. Strong supporting documentation and other applicable evidence is in place and is updated regularly. Consistent application for the criteria is in place over a considerable period of time. Some minor problems may occur from time to time
Satisfactory	3	The organisation satisfies the requirements of the criterion and has not gone significantly beyond it. Evaluation and review processes as part of continuous improvement is evident with strong supporting documentation
Insufficient	2	Documentation exists however there are gaps in the WHS Management System documentation, their implementation and/or the evidence that shows the criteria hasn't quite been met
Ad Hoc	1	The organisation has not met the criteria due to evidence being sporadic and ad hoc. Early drafts of documentation and/or processes are available
Unsatisfactory	0	The organisation cannot provide any evidence to support compliance with the criteria. No awareness or intention to implement

Limitations

This assessment was undertaken as part of the LGIS *3 Steps to Safety* program. It should not be relied upon for any assurance of legislative compliance. This assessment does not protect against enforcement action against the City of Cockburn by any regulatory authority including WorkSafe and, was not undertaken as per the requirements of WorkSafe for the purposes of a WorkSafe Plan certificate. Reliance on this assessment should not be used to determine City of Cockburn meets WorkSafe requirements.

Disclaimer

This verification report was produced in good faith by LGIS to assist Local Governments and reflects information that was considered accurate and reliable at the time of its publication. The employees of LGIS shall accept no liability or responsibility for any statutory enforcement or legal action against any Local Governments for reliance or use of the information contained herein.

Overall Scores

Category	Member Score	Available Score	Section Achievement
Management Commitment	12	32	**38%**
Planning	10	36	**28%**
Consultation and Reporting	6	28	**21%**
Hazard Management	12	28	**43%**
Training and Supervision	21	28	**75%**
Overall Score	61	152	**40%**

ASSESSMENT FINDINGS

1.0 Management Commitment

Element 1.1	**There is a documented safety and health policy that is reviewed on a regular basis**
Findings:	Unsatisfactory
Observation:	• The policy provided as evidence in the assessment, was dated 2019. It was endorsed by the previous CEO, and refers to old legislation. The document has not been reviewed.
Recommendations:	• The Policy should be updated to reflect current legislation, should be endorsed by the executive team (rotating CEO's) and recommunicated to all parties. It should then be reviewed at minimum annually or if there is an organisational change.

Element 1.2	**The safety and health policy is available to workers, suppliers, contractors, customers and visitors to the workplace**
Findings:	Ad hoc
Observation:	• Whilst the Policy was on display throughout the City, as mentioned in 1.1 it is currently out of date. • During the assessment it was unclear how the policy is communicated to suppliers and contractors.
Recommendations:	• Once the Policy has been updated to reflect current legislation, endorsed by the executive team (rotating CEO's) it should be embedded within all relevant processes to ensure that suppliers, contractors, customers and visitors are aware of the City's commitment.

Element 1.3	**The organisation identifies and monitors safety and health legislation, standards, codes of practice, guidance notes, agreements and guidelines relevant to its operations**
Findings:	Satisfactory
Observation:	• The City's WHS Team monitor safety and health legislation and industry standards in a variety of ways such as, but not limited to, WorkSafe WA, SAI Global and LGIS newsletters and email updates as well as safety and health industry specific podcasts.

Element 1.4	**There is a process that makes all parties aware of and accountable for identifying, monitoring and managing their safety and health risks and responsibilities**
Findings:	Insufficient
Observation:	• Safety responsibilities are incorporated within position descriptions, senior management attend the WHS Committee. The City has provided

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education and awareness sessions on the updated WHS legislation at executive, manager & supervisor level – with worker sessions planned.
- There is a lack of ensuring that processes and procedures are adhered to, which in turns demonstrates a lack of accountability.

Recommendations:	• The City should review how and when workers will be held accountable for WHS responsibilities. This may include spot check audits by the safety team. Managers, supervisors and co-ordinators checking that procedures have been completed appropriately etc.

Element 1.5 — The organisation coordinates safety management activities

Findings: Insufficient

Observation:
- Whilst the City has implemented a WHS Team who coordinate health and safety activities on behalf of the organisation. This team is very new, and still becoming familiar with the activities performed within the organisation.
- The WHS Team includes a number of roles who support the WHS management system. The WHS Team includes WHS Manager, Injury Management and 2 x Safety advisors.
- Whilst these positions have PD's it is unclear what their individual objectives and targets are.

Recommendations:
- The WHS Team should work in collaboration with stakeholders to develop and co-ordinate safety activities for the City.
- WHS Team should be set clear objectives and targets, aligned with the deliverables within the plan.

Element 1.6 — Financial and physical resources are provided for all aspects of safety and health

Findings: Insufficient

Observation:
- The City did not provide documented evidence at the time of the audit to demonstrate this element.
- Through the inspection and interview process the assessor confirmed that financial resources are provided in relation to safety.

Element 1.7 — All workers have sufficient time to complete safety and health related tasks

Findings: Unsatisfactory

Observation:
- Discussions with the majority of workers including health and safety representatives confirmed that they do not feel they have capacity to perform health and safety tasks effectively.
- Whilst safety is discussed in meetings, there are inconsistencies with meetings occurring.
- The WHS Committee has recently recommenced.
- Despite the City having a Take 5 process, JSA's or Safe work procedures these are not consistently implemented or enforced.
- Workplace inspections are not carried out.

- Emergency drills are lacking at the majority of facilities.
- Discussions confirmed that health and safety representatives are provided the opportunity to attend accredited training, and are in the process of being more involved with investigations with plans for them to be further involved with workplace inspections.

Recommendations:	• The City need to review why workers do not have capacity to complete safety activities. Reinforce expectations and hold workers accountable to the process. • The City should ensure that facilities carry out workplace inspections, these should be recorded and reviewed for improvements.
Element 1.8	**Recommendations to improve safety and health risk management are acted upon**
Findings:	Insufficient
Observation:	• Health and safety recommendations are identified through a range of sources such as, but not limited to hazard and incident reporting. • The City were also able to demonstrate that actions are taken following incidents, however it is currently happening in a reactive manner.
Recommendations:	• The City needs to ensure that they respond adequately to recommendations. This should be documented and communicated to all workers.

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2.0 Planning

Element 2.1	**The organisations approach to safety and health management is planned and reviewed in consultation with senior management at least annually**
Findings:	Unsatisfactory
Observation:	• The City provided a safety and health plan dated 2019 – 2022, however it could not be confirmed if this was endorsed or implemented. It was published on the City's intranet.
Recommendations:	• The City should look to develop a current WHS plan, this should filter through to each applicable business unit. The plan should be developed in consultation and appropriately communicated. • Health and safety performance should be regularly monitored and reviewed throughout the year by the Executive Team and WHS team.
Element 2.2	**Specific safety and health objectives and measurable targets have been established for relevant functions and levels within the organisation**
Findings:	Unsatisfactory
Observation:	• The City were unable to provide evidence to demonstrate that they have specific safety and health objectives and targets.
Recommendations:	• The City should look to develop health and safety objectives and measureable targets, for relevant functions and levels within the organisation. • Objectives should be measured and reviewed on a regular basis to ensure they are relevant.
Element 2.3	**Arrangements are in place for people with special needs**
Findings:	Unsatisfactory
Observation:	• The City were unable to provide evidence that they have arrangements in place for people with special needs.
Recommendations:	• The City should look to ensure they have appropriate systems in place to assist people with special needs. These may include but not be limited to, pre-employment medicals for roles considered to be high risk, Fitness to Work Statement, medical questionnaire, and job dictionaries. • The City should provide education and awareness for leaders to support workers and others with disabilities or special needs in the workplace.
Element 2.4	**Arrangements for visitors to the workplace are in place**
Findings:	Insufficient
Observation:	• Whilst there are processes in place for visitors, in the form of a sign in process, this doesn't extend to site specific known or potential hazards, depending on the location visitors may be provided with identification tags and supervised.

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- Although workers understood and uniformly enacted a suitable visitor management process, a visitor procedure was not provided as evidence in the assessment.
- Emergency diagrams were prominent within the workplace.

Recommendations:	• Develop a Visitor Procedure in consultation with workers to ensure visitor management has been clearly identified and understood.

Element 2.5   **Policies and procedures for engaging and managing contractors are in place**

Findings: Unsatisfactory

Observation:
- The City were unable to provide documented processes or procedures in relation to contractor management.
- Verbally stakeholders at the City articulated various processes in place for engaging and managing contractors. Documented evidence was sporadic.

Recommendations:
- The City should look to ensure they have appropriate processes and procedures in place for the engagement, monitoring and evaluation of contractors. This should be further supported with adequate training on the new procedures to all those who engage and manage contractors.
- The City would benefit from the WHS Team conducting spot check audits to ensure that procedures are being adhered to.
- The City may wish to consider WHS KPI's for contract managers, as an accountability measure.

Element 2.6   **Potential emergency situations have been identified and relevant emergency procedures are in place**

Findings: Ad hoc

Observation:
- The City were unable to provide evidence that all potential emergency situations have been identified, although there were a small number of locations that have done this in isolation – Coogee Marina, and ARC.

Recommendations:
- Ensure that all locations have appropriate plans & diagrams in place.
- Ensure that emergency wardens and first aid officers are identified within the organisation and training is provided regularly.
- The City should ensure that locations conduct evacuation drills, these should be recorded. In addition the emergencies should extend to situations outside of fire e.g. Bomb threat, medical, spill response, lock down or extreme weather event.

Element 2.7   **The organisation's procedures, work instructions and work practices reflect current safety and health legislation, standards, standards, codes of practice, guidance materials, agreements and guidelines**

Findings: Insufficient

Observation:
- Documentation provided as part of the assessment, referred to previous legislation, and had not been reviewed in the last 3 years.

Recommendations:	•	The City should look to review all procedures, work instructions and practices to ensure that they reflect current legislation and standards, and are still appropriate for City operations. This should be conducted in consultation with workers or their representatives.

Element 2.8	**All workers have access to current legislation, standards, codes of practice, guidance notes, agreements and guidelines that impact upon their activities**
Findings:	Insufficient

Observation:	•	Some workers have access to the City's intranet/internet where access to current legislation, and codes of practice.
	•	Discussions had with workers confirmed that they were not always aware of the legislative requirements for the work tasks performed as well as where they could obtain further information.
	•	There was minimal evidence that risk assessments are conducted.
	•	Health and safety information is available on staff noticeboards and the intranet.

Recommendations:	•	The City should provide mechanisms for all workers to have access to legislation, codes of practice relevant to the work practices performed.

Element 2.9	**The organisation and individuals satisfy legal requirements to undertake specific activities, perform work or operate equipment**
Findings:	Satisfactory

Observation:	•	Training needs analysis (TNA) has been developed to identify high risk licencing, training, skills and expertise workers are required to have to perform certain work tasks.
	•	Whilst there was evidence some plant and equipment is regularly maintained and registered, this was not consistently applied.

3.0 Consultation and Reporting

Element 3.1	**There are agreed procedures for involvement and consultation with workers on safety and health issues**

Findings: Insufficient

Observation:
- There is currently a draft Terms of Reference for the WHS Committee.
- WHS Committee meetings have recently recommenced, and minutes were available.
- There is an issue resolution procedure, however this hasn't been reviewed and was not widely known by the workers.

Recommendations:
- The City should look to develop a consultation & communication procedure. This can also incorporate the issue resolution procedure.
- Once developed the City should communicate to all workers, and update any induction materials to reflect.

Element 3.2	**Consultative arrangements are communicated to workers and are well understood**

Findings: Insufficient

Observation:
- There were areas that have regular safety meetings namely – ARC, Coogee Marina, and Jean Willis. However, in the more operational areas there were inconsistencies.
- Discussions had with workers in these areas confirmed that there is a lack of communication and consultation in recent years.

Recommendations:
- Ensure that consultation arrangements are communicated to all workers.
- Consultative methods should be further reinforced by managers and supervisors in the form of pre-start, toolbox and team meetings.
- The City could also consider setting a KPI for people leaders (executive, senior leaders, supervisors) to conduct safety conversations.

Element 3.3	**Workers or their representatives are involved in planning processes for the management of safety and health at the workplace**

Findings: Unsatisfactory

Observation:
- Discussions with workers indicated that there are inconsistences. Some areas have more autonomy in how they operate their facilities with plans at a local level.
- The City were unable to demonstrate that they involve workers in the planning of safety decisions.
- Whilst the WHS Committee has re started this is in its beginning stages, and has not extended to planning.

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Recommendations:	• The City need to ensure that when they develop the safety plan, workers or the HSR's are involved in the overall process.

Element 3.4	**Workers or their representatives are consulted regarding proposed changes to the work environment, processes or procedures and purchasing decisions that could affect their safety and health**

Findings:	Ad hoc

Observation:	• Evidence provided for the assessment, showed recent activity following incidents – e.g. Pod wash in fleet workshop. However, there was no evidence that processes are embedded and followed.

Recommendations:	• The City should ensure that any changes to work environments, processes and procedure are communicated to workers. This should extent to the purchases of new equipment. This can be achieved through proactive toolbox and team meetings and the WHS Committee.

Element 3.5	**Workers or their representatives are consulted regarding management of hazards in the workplace**

Findings:	Ad hoc

Observation:	• Discussions with workers and their representatives confirmed that consultation has recommenced with the establishment of the new safety team, however this is sporadic and has been lacking in the last few years. • Meeting minutes sighted from the newly commenced WHS Committee, confirm workers or their representatives are consulted regarding recent hazards within the workplace.

Recommendations:	• The City should continue with the WHS Committee, ensure that workers and their representatives are updated on the management of hazards. In addition the safety team should provide information to business units to include in team meetings, or toolbox meetings.

Element 3.6	**There are arrangements in place for the acquisition, provision and exchange of safety and health information with external parties, including customers, suppliers, contractors and relevant public authorities**

Findings:	Unsatisfactory

Observation:	• No evidence was provided at the time of the assessment that the exchange of safety information occurs.

Recommendations:	• The City should ensure that there are processes in place to meet their obligations. These should be incorporated into procurement processes, contractor management and hazard/risk assessment processes. • Workers, including contract managers should be provided with education and awareness on how to manage this information and verify. • Requirements should be communicated to contractors, and external parties – this may include information about potential hazards in a work area they are working in e.g. asbestos, anti-social behaviour.

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	• The City should consider incorporating the requirement into the induction process for contractors. • Contracts should refer to the exchange of safety and health information between the City and contractors.
Element 3.7	**Consultative and reporting arrangements are regularly evaluated and modified where required**
Findings:	Unsatisfactory
Observation:	• The WHS team have not had the opportunity to review the consultative or reporting processes.
Recommendations:	• The WHS Team should take the opportunity to have discussions with workers and their representatives around what consultation and reporting looks like at the City. It would also be beneficial to then present this to the management group to ensure they are comfortable it meets their requirements. All discussions should be documented to demonstrate consultation has occurred and how decisions were formed. These should then be reviewed annually to ensure they still meet the City and worker requirements.

4.0 Hazard Management

Element 4.1	**Requirements for reducing risks are understood by management and workers**

Findings: Ad hoc

Observation:
- Whilst there are many documents in place at the City e.g. Safe work procedures, Job Safety Analysis there was a lack of Implementation City wide, with minimal risk assessments in place.
- Discussions had with workers confirmed that they have been provided with information, instruction and resources to identify and reduce risks within their workplace, however they don't always use them.
- Workers and contractors are required to take part in an Induction which includes an element on hazard/risk management.
- Managers and supervisors have undertaken roles and responsibility training that has included recently updated WHS legislative changes and requirements.

Recommendations:
- The City should look to ensure that all procedures relating to the reduction of hazards and risks are implemented and that workers are held accountable.
- Managers should reinforce the need for risk reduction activities to be completed, this should be complimented with hazard and risk management training aligned with the City's procedures.

Element 4.2	**Work environments are regularly inspected and hazards are identified**

Findings: Insufficient

Observation:
- Workplace inspections, are currently not completed on a regular basis.
- Some plant and equipment are on regular schedules for maintenance and calibration, however this wasn't consistently applied.

Recommendations:
- The City should ensure that workplace inspections are conducted on a regular basis. Individuals who are conducting the inspections should have training on the tools being used, and how to identify a hazard.
- In addition workers should be encouraged to report hazards within their own work areas.

Element 4.3	**Work activities are analysed and hazards identified**

Findings: Insufficient

Observation:
- Whilst the City has a number of documents in place pertaining to analysis of work activities, there was no evidence provided at the time of the assessment that these were being followed.
- The City did provide evidence job dictionaries have been developed, but these have not been reviewed since 2019.

Recommendations:
- The City should ensure that where there are procedures identifying hazards associated with tasks and controls to reduce the likelihood of injury that these are followed by workers.

- Managers should look to remind workers of safe work practices and the importance
- The WHS Team may wish to consider running spot check audits to ensure that workers are following.

Element 4.4	**Risk assessments are undertaken on identified hazards**
Findings:	Insufficient
Observation:	• Whilst the City has documentation in place as identified in element 4.3 and risks are assessed through such tools as SWMS, JSA, hazard identification, incident reports, these are not fully implemented. • Workers confirmed in interviews that they do not always conduct plant prestart or risk assess tasks. • The WHS Team were unable to provide a register of operational risks.
Recommendations:	• The City should ensure that risk assessments are conducted and recorded on all identified hazards. • The City should look to review all risk management processes to ensure that they are fit for purpose, for their workers and the activities that they perform. • Workers should be trained on the importance of completing a risk assessment. • Managers, Supervisors in collaboration with the WHS Team should perform checks to ensure that processes are being followed and are understood by workers.
Element 4.5	**Hazards are prioritised and controlled using the hierarchy of controls and having regard to the identified level of risk**
Findings:	Insufficient
Observation:	• The WHS team demonstrated through recent incident reports where the hierarchy of control has been applied. However, there was no historical examples of this process being applied.
Recommendations:	• The City should ensure that all hazards are assessed using the hierarchy of control. • Education and awareness should be provided to workers on how to assess a hazard and use of the hierarchy of control, to mitigate the risk.
Element 4.6	**The effectiveness of the hazard identification, risk assessment and risk control process is periodically reviewed and documented**
Findings:	Unsatisfactory
Observation:	• There was no evidence provided during the assessment that the effectiveness of controls had been reviewed.
Recommendations:	• The City should build into the hazard/risk assessment processes, a review process. When reviews are conducted these should be documented. In addition they should be discussed with workers and their representatives.

Element 4.7	**Incidents, injuries and diseases are reported and investigated**
Findings:	Satisfactory
Observation:	• The City demonstrated that they recorded incidents, injuries and that they are reported to the regulator where necessary. • Investigations are conducted by people adequately trained.

5.0 Training and Supervision

Element 5.1	**An induction program is in place for all workers and contractors, providing relevant safety and health information and instruction**
Findings:	Insufficient
Observation:	• Whilst there is a health and safety induction program in place for workers, contractors and visitors this wasn't implemented at all locations.
Recommendations:	• The City should ensure that they are providing adequate induction, and information around hazards. • Additional inductions may be required for individual business units such as plant and equipment, role and workplace specific.
Element 5.2	**All management and supervisory personnel have received training in safety and health management principles and practices appropriate to their roles and responsibilities**
Findings:	Satisfactory
Observation:	• Senior personnel such as executive, managers and supervisors have undertaken roles and responsibilities training appropriate to their role and level. Training has been provided in-house as well as utilising third party subject matter experts for particular topics such as, health and safety lawyers regarding recently adopted WHS legislative requirements.
Element 5.3	**The organisation has identified the training needs of all workers**
Findings:	Exemplary
Observation:	• A TNA has been developed for all workers, at all levels throughout the organisation, where legislative training requirements have been identified as well as other health and safety training that may further support the worker in their role. • Discussions had with workers and their representatives confirmed that they are consulted regarding their training needs and they are also provided health and safety training applicable to their role. Records are maintained within personnel files • Training is annually budgeted for and further reviewed where required to ensure it is sufficient.
Element 5.4	**Tasks are allocated according to capability, level of training and supervision of workers**
Findings:	Satisfactory
Observation:	• Whilst position descriptions and the TNA identify specific core skills and experience required for the role to be performed safely, inclusive of refresher training where identified, there were instances indicated by workers that some training was outstanding.

	• Discussions had with workers and their representatives confirmed that they felt the level of supervision and training could be improved. With feedback that sometimes workers feel isolated.

Element 5.5	**Training is delivered by people with appropriate knowledge skills and experience**
Findings:	Satisfactory
Observation:	• The organisation assesses trainers before training is provided which includes, but not limited to, obtaining internal or external trainer qualifications skills and experience. • All training assessments and applicable information is maintained within the human resources department.

Element 5.6	**The training program is evaluated and reviewed**
Findings:	Satisfactory
Observation:	• The TNA is reviewed on an annual basis. • Incidents area also monitored by the WHS Committee for training improvements.

Element 5.7	**Supervision is undertaken by people with appropriate safety and health knowledge, skills and experience**
Findings:	Satisfactory
Observation:	• Management and supervisors have undertaken health and safety training relevant to their roles and responsibilities, and this has been recorded within personnel files.

ISSUES IDENTIFIED DURING THE ASSESSMENT NOT RECORDED ELSEWHERE

Site Inspections were conducted at the following locations. Workers, managers and supervisors were interviewed as part of the process.

City Facility	Issues	Observations
ARC	No Issues	Processes and procedures are in place specific for ARC. They understand their facility, the hazards & risks and address them as part of their business as usual process.
Success Library	No issues	Feedback from the facility was that they have been provided with training around dealing with anti-social behaviour. They have confidence in their HSR. Due to the location they also confirmed that emergency drills are conducted. Positive feedback was received on the role of Co-Safe
Cockburn Youth Centre	No Issues	It is recommended that the City review the risk assessment process for the XLR8 Program, this should involve a member of the WHS Team. The Youth centre has a number of practiced processes and procedures in place. Positive feedback was received on the role of Co-Safe
Fleet Workshop Operations Centre	Significant Issues	It was confirmed that the fleet workshop have no safety procedures in place. No workplace inspections are conducted. Slings, and chains are not inspected or checked. There are no formal safety meetings. Whilst the WHS Team provided an action plan identifying issues, a risk assessment process using the hierarchy of control had not been applied. In addition the workers when interviewed made no reference to the action plan. It is recommended that the WHS team support this area specifically to apply the hierarchy of control. In addition to the physical hazards, it was identified that there are a number of Psychosocial hazards. These relate to work design, work demands, resourcing, and a lack of leadership. Feedback was also provided that there have been issues around behaviours specifically around disrespect and bullying. The Welding area is not always practical depending on the task. This results in workers welding in an environment that is not set up for that activity. Currently workers are entering the rear of waste trucks to service/clean etc. The City should establish with the manufacturer whether this is deemed a confined space. In addition it is highly recommended that an observation and risk assessment is conducted. The Location of the eyewash shower should be reviewed. In addition the eyewash shower should be tested weekly. Wash down bay has housekeeping issues – these should be addressed. In addition the location of the isolation switch for the compressor should be reviewed.

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Henderson Waste Facility	Minor issues	There were no significant hazards identified during the inspection, with the drop off point well managed, tidy and adequately staffed. Signage, and access roads well maintained. An area of improvement is to review the current work procedures in consultation with workers, and remind workers not to complete manual handling tasks alone. The facility should also plan emergency management drills, which have not been conducted for some time. It was observed that some workers were not wearing seatbelts, this was flagged with the Coordinator. During the assessment a broken down piece of plant was observed on the cell. The issue was discussed with the coordinator, around how it would be repaired. The assessor was confident the approach had factored in the hazards, and that controls identified. Assessor requested that all associated paperwork be submitted as part of the assessment. These were received.
Coogee Marina	Minor issues	The Marina has an experienced team. The standout for this location was the Safety Emergency Plan, this is an excellent document. During the inspection the contractors completing the marina extension were on site. The assessor walked through the site, and flagged a number of issues. The Manager acknowledged and will address with the lead contractor, who is based on site. The site do at times feel isolated and would value more interaction on site with the safety team. The facility should ensure that they have up to date safety procedures for tasks, in addition should run emergency drills and ensure they are recorded.
Coolbellup Library & Hub	Minor Issues	Staff at Coolbellup library indicated that they feel isolated and would benefit from interaction from the WHS Team. In addition they can at times have a number of anti-social behaviour issues with members of the public. Workers indicated that it has been number of years since they had training to assist them in dealing with difficult behaviours. In addition to the physical hazards, it was identified that there are a number of Psychosocial hazards. These relate to work design, work demands, resourcing, and a lack of leadership and support. There was a table & chairs located in front of emergency exit in the children's section, this should be relocated, to ensure egress is not blocked. The location has not conducted emergency drills for some time. These should be scheduled, observed and recorded. Positive feedback was received on the role of Co-Safe
Jean Willis Centre	Minor Issues	There were no significant hazards identified at the Jean Willis Centre. The bathroom should not be used as a storage area – this was discussed with the participant of the audit and will be addressed. Processes and procedures should be updated to reflect current legislation. Workplace inspections should be conducted and recorded, included emergency drills.

Overall observations by the assessor are that there is a lack of direction & accountability when it comes to safety.

Since the last assessment in 2019 there seems to have been little movement in the safety space.

In 2019, feedback from workers was that we are doing more with less people. The feedback appears to be the same 3yrs later.

In addition there has been significant organisational changes at the City, which has also impacted staff.

Psychosocial hazards may result in Psychological claims in the future, which will in turn impact the organisation and other workers.

When we look at what are some Psychosocial Hazards, these include the following; all were observed during the safety assessment.

Poor Leadership	Poor or no policies and procedures
Work demands	Low Level of control
Inadequate Support	Lack of Role Clarity
Lack of Change Management	Fatigue & Burnout

The City are also lacking some of the basic safety fundamentals.

- Workplace Inspections

- Emergency management Drills

- Safety Observations/Conversations

- Verification & Checking – All workers

- Take 5's, Pre-Starts

- Toolbox Meetings

- Lack of Implemented Safe work procedures, JSA, & Risk assessments

- Lack of Contractor Management (procedures, and verification)

- Lack of implementation of permit to work system

- Management involvement in Injury Management

Whilst the WHS Team have some influence within these areas, the above indicates a lack of responsibility and accountability at all levels.

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NEXT STEPS

Step 2 of the *3 Steps to Safety* program involves the City of Cockburn developing an Action Plan to address any outcomes assessed as *insufficient, ad hoc* and *unsatisfactory*.

Once the Action Plan is developed, it should be provided to the Assessor to ensure that the actions proposed will address the criteria and drive continuous improvement.

LGIS, through the People Risk Team, is available to provide ongoing assistance during the development of the Action Plan, and thereafter to assist the City of Cockburn to continuously improve their performance.

ACKNOWLEDGEMENTS

LGIS would like to thank the City of Cockburn for their hospitality during the assessment. This appreciation is extended to all personnel who were involved in the activity who made themselves available or prepared and presented documents.

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Safety Improvement Plan

1.0 Management Commitment					
Element	**Description**	**Current Status**	**Action Item**	**Theme**	**Action Item Status**
1.1	There is a documented safety and health policy that is reviewed on a regular basis.	Unsatisfactory	1.1.1 Safety and health policy to be reviewed, updated and presented to ExCo for endorsement.	WHS Management Framework	Completed
			1.1.2 Endorsed safety and health policy is reviewed at least annually.	WHS Management Framework	Completed
1.2	The safety and health policy is available to workers, suppliers, contractors, customers and visitors to the workplace.	Ad Hoc	1.2.1 The endorsed safety and health policy is distributed and displayed at all City facilities, including being placed in City vehicles.	WHS Management Framework	Completed
			1.2.2 Endorsed Policy is communicated to all employees through "Message From the CEO"	Communication/Consultation	Completed
1.3	The organisation identifies and monitors safety and health legislation, standards, codes of practice, guidance notes, agreement and guidelines relevant to its operations.	Satisfactory	1.3.1 All People Leaders are advised, in writing, to subscribe to the WorkSafe (DMIRS) safety subscription.	Communication/Consultation	Completed
			1.3.2 A member of the safety team is nominated as the lead for the provision of Safety Alerts to the business. Utilising the subscription to WorkSafe, the WHS team member will assess updates and distribute to relevant areas to ensure that they are appropriately informed.	Communication/Consultation	Completed
1.4	There is a process that makes all parties aware of and accountable for identifying, monitoring and managing their safety and health risks and responsibilities.	Insufficient	1.4.1 Roles and responsibility training is coordinated for all ExCo, SLT and People Leaders.	Education and Induction	Completed
			1.4.2 All Employees are accountable for Safety and this forms part of their annual performance appraisal.	Accountability	Completed
1.5	The organisation coordinates safety management activities.	Insufficient	1.5.1 In consultation with stakeholders, the WHS team will create an annual calendar of events to be coordinated across the entirety of the business. Calendar of events will include toolbox topics and safety and health programs.	Process Improvement	Completed

1.6	Financial and physical resources are provide for all aspects of safety and health.	Insufficient	1.6.1 Management Budget clearly defines budget provision for WHS, including but not limited too, PPE, safety and health programs and training.	Process Improvement	Completed
1.7	All workers have sufficient time to complete safety and health related tasks.	Unsatisfactory	1.7.1 Development and implementation of a Communication and Consultation Policy that sets the minimum expectation for team meetings and toolbox meetings, including the setting of minimum standards of discussion items.	WHS Management Framework	Completed
			1.7.2 Development of inspection schedule, based on risk, for all relevant sites, including the nomination of the relevant officer who is accountable for undertaking the inspection as per the schedule.	Process Improvement	Completed
			1.7.3 Development and provision of training for relevant officers who will be accountable for the undertaking of inspections.	Education and Induction	Completed
			1.7.4 Development and provision of education for all employees in the process and importance of completing a Take 5, JSA and/or SWMS.	Education and Induction	Completed
1.8	Recommendations to improve safety and health risk management are acted upon.	Insufficient	1.8.1 Corrective actions are assigned as part of investigations and hazard reporting and are followed up and documented.	Accountability	Completed
			1.8.2 WHS Committee discusses any issues or barriers that have been experienced and these are addressed, feedback provided and an outcome documented as part of the meeting minutes.	Communication/Consultation	Completed

2.0 Planning					
Element	**Description**	**Current Status**	**Action Item**	**Theme**	**Action Item Status**
2.1	The organisations approach to safety and health management is planned and reviewed in consultation with senior management at least annually.	Unsatisfactory	2.1.1 Develop Safety Management Plan, in consultation with stakeholders, that sets clear priorities and targets for Workplace Health and Safety at the City.	WHS Management Framework	Completed
			2.1.2 Report to ExCo on progress of Safety Management Plan priorities and targets on a quarterly basis.	Accountability	In Progress
			2.1.3 Provide performance data in relation to safety, including present date metrics and comparisons to previous years.	Accountability	Completed
2.2	Specific safety and health objectives and measurable targets have been established for relevant functions and levels within the organisation.	Unsatisfactory	2.2.1 Creation of high level safety objectives in relation to consultation, hazard management, supervision and training which are reported on at ExCo quarterly.	Accountability	Completed
			2.2.2 Inclusion of objectives and priorities in the Safety Management Plan to reflect the commitment and accountability in relation the safety, health and wellbeing	Accountability	Completed
2.3	Arrangements are in place for people with special needs.	Unsatisfactory	2.3.1 Creation of risk based pre-employment medical program for new starters	Process Improvement	Completed
			2.3.2 Review and updated fitness for work procedure, including applicable letter templates, to ensure WHS and HR compliant process	WHS Management Framework	Completed
			2.3.3 Engage external party to review and update job dictionaries to ensure that these are up to date and fit for purpose	Process Improvement	Completed
2.4	Arrangements for visitors to the workplace are in place.	Insufficient	2.4.1 There is an established and documented process for visitors at each City facility to ensure that there is consistency in the approach and risk is mitigated.	Process Improvement	In Progress
2.5	Policies and procedures for engaging and managing contractors are in place.	Unsatisfactory	2.5.1 Internal process is established within the Procurement process to ensure that contract owners ensure contractors have the required workplace health and safety protocols in place prior to contracts being awarded and commenced.	Process Improvement	Completed

		 	2.5.2 Establishment and implementation of Contractor Management Procedure.	WHS Management Framework	In Progress
			2.5.3 Contract owners are provided with education relating to contractor management and understand their roles and responsibilities in relation to this.	Education & Induction	In Progress
2.6	Potential emergency situations have been identified and relevant emergency procedures are in place.	Ad Hoc	2.6.1 Development and implementation of Emergency Management Procedure including the provision of drawings for facilities.	Process Improvement	Completed
			2.6.2 Ensure all Chief Wardens and Wardens are trained in line with legislation, including quality of training and timeframes.	Process Improvement	Completed
			2.6.3 Develop and implement drill schedule for all facilities and liaise with Chief Wardens to ensure that these are occurring.	Process Improvement	Completed
2.7	The organisation's procedures, work instructions and work practices reflect current safety and health legislation, standards, codes of practice, guidance materials, agreements and guidelines.	Insufficient	2.7.1 Creation of WHS Management Framework that delivers all required procedures, guidelines and education to ensure compliance with WHS legislation and regulation.	WHS Management Framework	Completed
			2.7.2 Review all current procedures, guidelines and education to ensure compliance with current legislation.	WHS Management Framework	Completed
			2.7.2 Development, implementation and delivery of documentation that is identified as a short coming through a gap analysis process after the development of the Framework.	WHS Management Framework	In Progress
2.8	All workers have access to current legislation, standards, codes of practice, guidance notes, agreements and guidelines that impact upon their activities.	Insufficient	2.8.1 Undertake review of Safety and Emergency Management intranet page to ensure current and fit for purpose information is obtainable for employees.	Communication/Consultation	Completed
			2.8.2 Undertake a review to ensure that all SDS's are up to date and easily obtainable.	Process Improvement	Completed
			2.8.3 Ensure that all City vehicles and work places have a contact list for WHS team members, relevant Chief Wardens, relevant Fire Wardens, designated first aid officers and health and safety representatives.	Communication/Consultation	Completed

| 2.9 | The organisation and individuals satisfy legal requirements to undertake specific activities, perform work or operate equipment. | Satisfactory | 2.9.1 Education provided in relation to the importance of not undertaking roles that Employees have not been trained to undertake or in circumstances where they do not have the required licences, tickets or accreditations. | Education & Induction | Completed |

3.0 Consultation and Reporting					
Element	Description	Current Status	Action Item	Theme	Action Item Status
3.1	There are agreed procedures for involvement and consultation with workers on safety and health issues.	Insufficient	3.1.1 Develop and implement Communication and Consultation Procedure to set the minimum expectation around communication, consultation and issues handling.	WHS Management Framework	Completed
			3.1.2 Communicate Communication and Consultation Procedure through induction for Employees and People Leaders, WHS Committee Meeting and Toolbox/Team Meetings.	Education & Induction	Completed
3.2	Consultative arrangements are communicated to workers and are well understood.	Insufficient	3.2.1 Communicate Communication and Consultation Procedure through induction for Employees and People Leaders, WHS Committee Meeting and Toolbox/Team Meetings.	Education & Induction	Completed
3.3	Workers or their representatives are involved in planning processes for the management of safety and health at the workplace.	Unsatisfactory	3.3.1 Develop and implement WHS Plan that clearly sets our objectives and targets.	Accountability	Completed
			3.3.2 Ensure that objectives and targets set out in WHS Plan are communicated through the WHS Committee Meetings, with the expectation that representatives bring Employee feedback back for discussion and that this discussion is documented.	Communication/Consultation	Completed
3.4	Workers or their representatives are consulted regarding proposed changes to their work environment, processes or procedures and purchasing decisions that could affect their safety and health.	Ad Hoc	3.4.1 In instances where the City is making modification to a work environment, Employees must be involved and any feedback or discussion recorded as consultation. This includes the purchasing of new equipment or revision of JSA's.	Communication/Consultation	Completed
3.5	Workers or their representatives are consulted regarding management of hazards in the workplace.	Ad Hoc	3.5.1 There is a documented process for providing feedback to workers in relation to identified hazards and how these will be mitigated. Hazard management reports should also be communicated to the WHS Committee and into the hazard report within the system.	WHS Management Framework	Completed

3.6	There are arrangements in place for the acquisition, provision and exchange of safety and health information with external parties, including customers, suppliers, contractors and relevant public authorities.	Unsatisfactory	3.6.1 Assessment of the current procurement process to ensure that engaged contractors have the relevant safety mechanisms in place to mitigate risk.	Process Improvement	Completed
			3.6.2 Employees who are contract owners are provided with education in relation to procurement process to ensure that they understand contractor management.	Education and Induction	Completed
3.7	Consultative and reporting arrangements are regularly evaluated and modified where required.	Unsatisfactory	3.7.1 The Communication and Consultation Procedure should be reviewed on an annual basis, with channels being assessed for effectiveness and this being reported back to the WHS Committee.	WHS Management Framework	Completed
			3.7.2 A Safety Pulse Survey is conducted in order to identity areas of improvement in relation to consultation and communication.	Accountability	Completed

4.0 Hazard Management					
Element	**Description**	**Current Status**	**Action Item**	**Theme**	**Action Item Status**
4.1	Requirements for reducing risks are understood by management and workers.	Ad Hoc	4.1.1 Development and implementation of education in relation to hazard identification and risk management, ensuring that Employees and People Leaders are informed and are aware of their obligations and also how to undertake this process.	Education and Induction	Completed
4.2	Work environments are regularly inspected and hazards are identified.	Insufficient	4.2.1 Develop and implement inspection schedule, based on risk, for each City facility in which Employees are based. Relevant officers/HSR are to provide reports back to the WHS team to document that inspections have occurred.	Process Improvement	Completed
4.3	Work activities are analyses and hazards identified.	Insufficient	4.3.1 Risk assessments are undertaken prior to the commencement of all relevant tasks. Hazards are identified and mitigated. Take 5 assessments are to be spot checked by supervisors and WHS team.	Accountability	Completed
4.4	Risk assessments are undertaken on identified hazards.	Insufficient	4.4.1 Risk assessments are to be completed as and when required, with no expectations. WHS team will conduct spot checks to ensure that these are occurring and reporting back when it is not.	Accountability	Completed
4.5	Hazards are prioritised and controlled using the hierarchy of controls and having regards to the identified level of risk.	Insufficient	4.5.1 The City has a risk register.	Accountability	Completed
4.6	The effectiveness of hazard identification, risk assessment and risk control process is periodically reviewed and documented.	Unsatisfactory	4.6.1 There is a risk register that is reviewed and updated regularly, including risk mitigation strategies.	Accountability	Completed
4.7	Incidents, injuries and diseases are reported and investigated.	Satisfactory	4.7.1 Incidents are investigated, with investigation format being based on escalation, and these are clearly documented. Any corrective actions are recorded and followed up.	Accountability	Completed

5.0 Training and Supervision					
Element	**Description**	**Current Status**	**Action Item**	**Theme**	**Action Item Status**
5.1	An induction program is in place for all workers and contractors, providing relevant safety and health information and instruction.	Insufficient	5.1.1 Development and implementation of safety induction for Employees and People Leaders, ensuring that roles, responsibilities, accountability and process is clearly communicated.	Education and Induction	Completed
			5.1.2 Ensure that newly developed inductions are rolled out to all current Employees and People Leaders in addition to new starters.	Education and Induction	Completed
5.2	All management and supervisory personnel have received training in safety and health management principles and practices appropriate to their roles and responsibilities.	Satisfactory	No action needed		LGIS agreed no action required
5.3	The organisation has identified the training needs of all workers.	Exemplary / Proficient	No action needed		LGIS agreed no action required
5.4	Tasks are allocated according to capability, level of training and supervision of workers.	Satisfactory	No action needed		LGIS agreed no action required
5.5	Training is delivered by people with appropriate knowledge, skills and experience.	Satisfactory	No action needed		LGIS agreed no action required
5.6	The training program is evaluated and reviewed.	Satisfactory	No action needed		LGIS agreed no action required
5.7	Supervision is undertaken by people with appropriate safety and health knowledge, skills and experience.	Satisfactory	No action needed		LGIS agreed no action required

12. Motions of Which Previous Notice Has Been Given

Nil

13. Notices Of Motion Given At The Meeting For Consideration At Next Meeting

14. New Business of an Urgent Nature Introduced by Members or Officers

15. Matters to be Noted for Investigation, Without Debate

Nil

16. Confidential Business

Nil

17. Closure of Meeting