



Shire of Dardanup

# A G E N D A

## AUDIT & RISK COMMITTEE MEETING

To Be Held

Wednesday, 3 June 2020  
Commencing at 2.00pm

At

eMeeting via  
[www.dardanup.wa.gov.au](http://www.dardanup.wa.gov.au)

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NOTICE OF AN AUDIT & RISK COMMITTEE MEETING

Dear Committee Member

In accordance with the Local Government (Administration) Regulations 1996, the next The Audit & Risk Committee of the Shire of Dardanup will be held as an e-meeting (video conferencing) on Wednesday 3 June 2020 at 2.00pm.



**MR ANDRÉ SCHÖNFELDT**  
Chief Executive Officer

28 May 2020

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## VISION STATEMENT

“Provide effective leadership in encouraging balanced growth and development of the Shire while recognizing the diverse needs of our communities.”

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## COMMITTEE MEMBERSHIP:

- CR. T GARDINER - CHAIRPERSON
- CR M BENNETT – DEPUTY CHAIRPERSON
- CR P ROBINSON
- CR. C BOYCE
- CR. M HUTCHINSON

## TERMS OF REFERENCE

The Terms of Reference for this Committee are located in the Tardis records system – refer to the following link:  
[2019 - ToR - Audit and Risk Committee](#)

### COMMITTEE ROLE

|                     |   |
|---------------------|---|
| Advocacy            | When Council advocates on its own behalf or on behalf of its community to another level of government / body /agency.   |
| Executive/Strategic | The substantial direction setting and oversight role of the Council eg. Adopting plans and reports, accepting tenders, directing operations, setting and amending budgets.  |
| Legislative         | Includes adopting local laws, town planning schemes and policies.   |
| Review              | When Council reviews decisions made by Officers.  |
| Quasi-Judicial      | <p>When Council determines an application/matter that directly affects a person’s rights and interests. The Judicial character arises from the obligations to abide by the principles of natural justice.</p> <p>Examples of Quasi-Judicial authority include town planning applications, building licences, applications for other permits/licences (eg: under Health Act, Dog Act or Local Laws) and other decisions that may be appealable to the State Administrative Tribunal.</p> |

### DISCLAIMER

“Any statement, comment or decision made at a Council or Committee meeting regarding any application for an approval, consent or licence, including a resolution of approval, is not effective as an approval of any application and must not be relied upon as such.

Any person or entity that has an application before the Shire must obtain, and should only rely on, written notice of the Shire’s decision and any conditions attaching to the decision, and cannot treat as an approval anything said or done at a Council or Committee meeting.

Any advice provided by an employee of the Shire on the operation of a written law, or the performance of a function by the Shire, is provided in the capacity of an employee, and to the best of that person’s knowledge and ability. It does not constitute, and should not be relied upon, as a legal advice or representation by the Shire. Any advice on a matter of law, or anything sought to be relied upon as a representation by the Shire should be sought in writing and should make clear the purpose of the request.”

### RISK ASSESSMENT

|                     |  |
|---------------------|--|
| Inherent Risk       | The level of risk in place in order to achieve the objectives of the Council and before actions are taken to alter the risk’s impact or likelihood.  |
| Residual Risk       | The remaining level of risk following the development and implementation of Council’s response.  |
| Strategic Context   | These risks are associated with achieving Council’s long term objectives.  |
| Operational Context | These risks are associated with the day-to-day activities of the Council.  |
| Project Context     | <p>Project risk has two main components:</p> <ul style="list-style-type: none"> <li>• Direct refers to the risks that may arise as a result of project, which may prevent the Council from meeting its objectives.</li> <li>• Indirect refers to the risks which threaten the delivery of project outcomes.</li> </ul> |

**RISK CATEGORY CONSEQUENCE TABLE - GUIDELINE**

| Rating (Level)           | Health                                | Financial Impact          | Service Interruption  | Legal and Compliance   | Reputational  | Environment   |
|--------------------------|---------------------------------------|---------------------------|---|--|---|---|
| <b>Insignificant (1)</b> | Near miss<br>Minor first aid injuries | Less than \$10,000        | No material service interruption - backlog cleared < 6 hours                              | <b>Compliance</b> - No noticeable regulatory or statutory impact.<br><b>Legal</b> - Threat of litigation requiring small compensation.<br><b>Contract</b> - No effect on contract performance.   | Unsubstantiated, low impact, low profile or 'no news' item  | Contained, reversible impact managed by on site response                                |
| <b>Minor (2)</b>         | Medical type injuries                 | \$10,001 - \$50,000       | Short term temporary interruption – backlog cleared < 1 day                               | <b>Compliance</b> - Some temporary non compliances.<br><b>Legal</b> - Single minor litigation.<br><b>Contract</b> - Results in meeting between two parties in which one party expresses concern.   | Substantiated, low impact, low news item  | Contained, reversible impact managed by internal response                               |
| <b>Moderate (3)</b>      | Lost time injury <30 days             | \$50,001 - \$300,000      | Medium term temporary interruption – backlog cleared by additional resources < 1 week     | <b>Compliance</b> - Short term non-compliance but with significant regulatory requirements imposed.<br><b>Legal</b> - Single moderate litigation or numerous minor litigations.<br><b>Contract</b> - Receive verbal advice that, if breaches continue, a default notice may be issued. | Substantiated, public embarrassment, moderate impact, moderate news profile   | Contained, reversible impact managed by external agencies                               |
| <b>Major (4)</b>         | Lost time injury >30 days             | \$300,001 - \$1.5 million | Prolonged interruption of services – additional resources; performance affected < 1 month | <b>Compliance</b> - Non-compliance results in termination of services or imposed penalties.<br><b>Legal</b> - Single major litigation or numerous moderate litigations.<br><b>Contract</b> - Receive/issue written notice threatening termination if not rectified.                    | Substantiated, public embarrassment, high impact, high news profile, third party actions                                    | Uncontained, reversible impact managed by a coordinated response from external agencies |
| <b>Catastrophic (5)</b>  | Fatality, permanent disability        | More than \$1.5 million   | Indeterminate prolonged interruption of services – non-performance > 1 month              | <b>Compliance</b> - Non-compliance results in litigation, criminal charges or significant damages or penalties.<br><b>Legal</b> - Numerous major litigations.<br><b>Contract</b> - Termination of contract for default.  | Substantiated, public embarrassment, very high multiple impacts, high widespread multiple news profile, third party actions | Uncontained, irreversible impact  |

**RISK - LIKELIHOOD TABLE**

| LEVEL | RATING                | DESCRIPTION   | FREQUENCY   |
|-------|-----------------------|---|---|
| 5     | <b>Almost Certain</b> | The event is expected to occur in most circumstances  | The event is expected to occur more than once per year        |
| 4     | <b>Likely</b>         | The event will probably occur in most circumstances   | The event will probably occur at least once per year          |
| 3     | <b>Possible</b>       | The event should occur at some time                   | The event should occur at least once in 3 years               |
| 2     | <b>Unlikely</b>       | The event could occur at some time                    | The event could occur at least once in 10 years               |
| 1     | <b>Rare</b>           | The event may only occur in exceptional circumstances | The event is not expected to occur more than once in 15 years |

**LEVEL OF RISK GUIDE**

| CONSEQUENCE    |   | Insignificant | Minor         | Moderate     | Major        | Catastrophic  |
|----------------|---|---------------|---------------|--------------|--------------|---------------|
| LIKELIHOOD     |   | 1             | 2             | 3            | 4            | 5             |
| Almost Certain | 5 | Moderate (5)  | Moderate (10) | High (15)    | Extreme (20) | Extreme (25)  |
| Likely         | 4 | Low (4)       | Moderate (8)  | High (12)    | High (16)    | Extreme (20)  |
| Possible       | 3 | Low (3)       | Moderate (6)  | Moderate (9) | High (12)    | High (15)     |
| Unlikely       | 2 | Low (2)       | Low (4)       | Moderate (6) | Moderate (8) | Moderate (10) |
| Rare           | 1 | Low (1)       | Low (2)       | Low (3)      | Low (4)      | Moderate (5)  |

**SHIRE OF DARDANUP****AGENDA FOR THE SHIRE OF DARDANUP AUDIT & RISK COMMITTEE MEETING TO BE HELD ELECTRONICALLY [VIDEO CONFERENCING] ON WEDNESDAY 3 JUNE 2020, AT SHIRE OF DARDANUP - ADMINISTRATION CENTRE EATON, COMMENCING AT 2.00PM.****1 DECLARATION OF OPENING/ANNOUNCEMENT OF VISITORS**

The Chairperson, Cr. T G Gardiner to declare the meeting open, welcome those in attendance, advise and acknowledge that the meeting will be conducted as an electronic meeting in accordance with the Local Government (Administration) Regulations 1996 and refer to the Acknowledgement of Country; Emergency Procedures; and the Disclaimer and Affirmation of Civic Duty and Responsibility on behalf of Councillors and Officers and

*Acknowledgement of Country*

*The Shire of Dardanup wishes to acknowledge that this meeting is being held on the traditional lands of the Noongar people. In doing this, we recognise and respect their continuing culture and the contribution they make to the life of this region by recognising the strength, resilience and capacity of Wardandi people in this land.*

*Affirmation of Civic Duty and Responsibility*

*Councillors and Officers of the Shire of Dardanup collectively declare that we will duly, faithfully, honestly and with integrity fulfil the duties of our respective office and positions for all the people in the district according to the best of our judgement and ability. We will observe the Shire's Code of Conduct and Standing Orders to ensure efficient, effective and orderly decision making within this forum.*

*Committee members acknowledge that only the Chief Executive Officer or a member of the Shire of Dardanup staff appointed by the Chief Executive Officer is to have contact with consultants and suppliers that are appointed under contract to undertake the development and implementation of projects.*

*The exception to this Policy is when there is a meeting of the committee or working group with the consultant and the Chief Executive Officer or the Chief Executive Officer's representative is present.*

*Members of committees acknowledge that a breach of this Policy may result in a request to Council to have them removed from the committee.*

**2. RECORD OF ATTENDANCE/APOLOGIES/LEAVE OF ABSENCE PREVIOUSLY APPROVED**

*The Chairman will confirm that each person expected to attend the meeting is connected to the eMeeting platform and therefore in attendance [Roll Call].*

*The Presiding Member will call the names of elected members and staff. Each person is to respond to confirm that they are in attendance.*

*Presiding Member will then ask "Is there anyone in attendance that has not yet been recorded?"*

2.1 Attendance

2.2 Apologies

**3. PRESENTATIONS**

None.

**4. CONFIRMATION OF MINUTES OF PREVIOUS MEETING**

4.1 Audit & Risk Committee Meeting Held 8 April 2020

**OFFICER RECOMMENDED RESOLUTION**

**THAT the Minutes of the Audit & Risk Committee Meeting held on 8 April 2020, be confirmed as true and correct subject to no / the following corrections:**

**5. ANNOUNCEMENTS OF MATTERS FOR WHICH MEETING MAY BE CLOSED**

None.

**6. QUESTIONS BY MEMBERS OF WHICH DUE NOTICE HAS BEEN GIVEN**

None.



## 7. DECLARATION OF INTEREST

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

Key Management Personnel (which includes Elected Members, CEO and Directors) are reminded of their requirement to disclose biannually transactions between Council and related parties in accordance with Council Policy CP039.

### eMEETING PROCESS – ADVICE TO PUBLIC & ELECTED MEMBERS

*The Chairperson will:*

- *Read aloud each disclosure of interest received in writing before the meeting.*
- *Ask if there are any further disclosures to be made.*

*If there are further disclosures to be made, the following process for disclosing interests in an eMeeting are to be followed:*

- *Once the Chairperson acknowledges you, State your name and the conflict of interest being disclosed (financial / indirect financial / proximity / impartiality) and the relevant Agenda Item and Title.*
- *The Chairperson will acknowledge the interest by repeating the Council Member's name and the details of the interest for recording in the Minutes.*
- *After the meeting, Council Members must provide the disclosure of interest in writing by email to the CEO.*

## 8 REPORTS OF OFFICERS AND COMMITTEES

### 8.1 Title: Risk Dashboard Biannual Report

|                              |   |
|------------------------------|---|
| <i>Reporting Department:</i> | <i>Corporate &amp; Governance Directorate</i>   |
| <i>Reporting Officer:</i>    | <i>Mrs Cindy Barbetti - Compliance Officer</i>  |
| <i>Legislation:</i>          | <i>Local Government Act 1995 and Local Government (Audit) Regulations 1996, Regulation 17</i> |

#### Overview

The purpose of this report is to present the six monthly Risk Dashboard Report to the Audit and Risk Committee for consideration.

#### Background

In August 2019, Council through the Audit and Risk Committee adopted the revised Risk Management Governance Framework (the Framework) for the Council. The Framework has been developed to connect all of the risk management processes and methodologies and to clearly articulate the appetite for risk. This ensures Council's commitment to meeting its compliance obligations pursuant to the Local Government (Audit) Regulations 1996, Regulation 17.

In accordance with the reporting requirements of the Framework, the Compliance Officer is required to present the Audit and Risk Committee with a Risk Dashboard Report (Appendix AAR 8.1A) every six months. In addition, the Terms of Reference for the Audit and Risk Committee state the following as a committee objective:

- 5.7 To consider the Shire of Dardanup Risk Management Governance Framework and progress on the relevant action plans biannually.*

The Risk Dashboard Report has been developed as part of the Framework and in collaboration with a risk consultant from Council's insurer (LGIS), and contains an overall snapshot of the following 15 Risk Theme Profiles:

1. Asset Sustainability Practices.
2. Business and Community Disruptions.
3. Failure to Fulfil Compliance Requirements (Statutory, Regulatory).
4. Document Management Processes.
5. Employment Practices.
6. Engagement Practices.
7. Environment Management.
8. Errors, Omissions and Delays.
9. External Theft and Fraud (includes Cyber Crime).
10. Management of Facilities, Venues and Events.
11. IT, Communication Systems and Infrastructure.
12. Misconduct.
13. Project/Change Management.
14. Safety and Security Practices.
15. Supplier and Contract Management.

Legal Implications

Local Government Act 1995

Local Government (Audit) Regulations 1996, Regulation 17:

17. CEO to review certain systems and procedures

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

(a) risk management; and

(b) internal control; and

(c) legislative compliance.

(2) The review may relate to any or all of the matters referred to in subregulation (1)(a), (b) and (c), but each of those matters is to be the subject of a review at least once every 2 calendar years.

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

[Regulation 17 inserted in Gazette 8 Feb 2013 p. 868.]

Strategic Community Plan

Strategy 1.1.2 - Monitor and ensure compliance with the regulatory framework for local government governance and operations. (Service Priority: High)

Strategy 1.1.3 - Maintain best practice governance systems and practices. (Service Priority: Moderate)

Strategy 1.3.6 - Establish a Risk Management Governance Framework for the Shire of Dardanup. (Service Priority: High)

Environment - None.

Precedents

The Audit and Risk Committee previously received a Risk Dashboard Report at the December 2019 meeting.

Budget Implications

As part of the Compliance Officer role, regular reporting of the Risk Management Governance Framework is essential. Therefore the cost to Council is through staff time and the usage of IT/Software systems where applicable.

Budget – Whole of Life Cost - None.

As no assets/infrastructure is being created, there are no whole of life costs relevant to this item.

Council Policy Compliance

Risk Management Governance Framework

- Administration Policy AP023
- Procedure PR036
- Australian Standard AS/NZS ISO 31000:2018 Risk Management – Principles and Guidelines

Risk Assessment

The Risk Management Governance Framework has been considered in arriving at the officer recommendation. Please refer to (Appendix AAR 8.1B)

| Tier 2 – ‘Low’ or ‘Moderate’ Inherent Risk.          |  |
|--|--|
| Risk Event   | Risk Dashboard Biannual Report   |
| Inherent Risk Rating (prior to treatment or control) | Low (1 - 4)  |
| Risk Action Plan (treatment or controls proposed)    | As the Inherent Risk Rating is below 12, this is not applicable.   |
| Residual Risk Rating (after treatment or controls)   | As the Inherent Risk Rating is below 12, this is not applicable.   |
| Risk Category Assessed Against                       | <p>Legal and Compliance      Failure to fulfil compliance obligations pursuant to the Local Government (Audit) Regulations 1996, Regulation 17.</p> <p>Reputational                      Council’s reputation could be seen in a negative light for not adhering to its requirement to fulfil duties and functions that are prescribed in legislation.</p> |

### Officer Comment

The Risk Dashboard Report for June 2020 (Appendix AAR 8.1A) provides members of the Audit and Risk Committee with the current treatment plans (actions) that have been identified by management to improve certain key control ratings. Typically these control ratings have been identified as inadequate and a treatment plan (action) has been determined to improve the control effectiveness to at least adequate.

The format of the Dashboard enables each treatment plan (action) to be categorised according to the relevant 15 risk theme profiles and provides the following information:

- The overall control rating (how effective the controls in place are operating).
- The overall risk rating (the determined level of risk).
- The overall assigned officer for the theme profile according to the level of risk responsibility:
  - Low – responsibility of Staff Member/Supervisor
  - Moderate – responsibility of Supervisor/Manager
  - High – responsibility of Manager/Director/EMT
  - Extreme – responsibility of EMT/CEO/Council
- The current treatment plan based on the following evaluation of risks:
  - Controls that are rated as inadequate must have a treatment plan to improve the control effectiveness to at least adequate.
  - Where the residual risk rating is high or extreme, treatment plans must be implemented.
- The due date of the treatment.
- The officer responsible for managing the individual treatment plans.

To provide a comparison between reporting periods, table 1 below indicates that there are currently 23 treatments in place, compared with 30 treatments in December 2019. 5 new treatments have been added, with 12 being completed in the last 6 months. As treatments are cleared or completed they are removed from the Dashboard. To note, some extensions on the due dates have been granted for uncompleted treatments, as a direct result of COVID-19 impacting officer’s workload.

**Table 1 – Treatment Plan Summary**

| December 2019 (last reporting period) |           |             | June 2020 (this reporting period) |     |             |
|---------------------------------------|-----------|-------------|-----------------------------------|-----|-------------|
| Total                                 | Completed | In Progress | Total                             | New | In Progress |
| 30                                    | 12        | 18          | 23                                | 5   | 18          |

The Risk Dashboard Report also provides an indication to the Audit and Risk Committee of the value of the combined controls in mitigating the risk. Of the 15 Risk Profile Themes, 13 have had their combined controls rated as adequate and 2 as effective. By regularly reviewing the effectiveness and efficiency of controls and the appropriateness of treatment options selected, we can determine if Council resources are being put to the best use possible.

The Audit and Risk Committee can expect the next Risk Dashboard Biannual Report at the committee meeting scheduled for 2 December 2020.

Committee Role - Legislative.

Voting Requirements - Simple Majority.

#### **OFFICER RECOMMENDED RESOLUTION**

**THAT the Audit and Risk Committee receive the Risk Dashboard Report provided in (Appendix AAR 8.1A).**

## 8.2 Title: Update on the Financial Management Systems Review Actions

Reporting Department: Corporate & Governance  
 Reporting Officer: Mr Phil Anastasakis - Deputy Chief Executive Officer  
 Legislation: Local Government Act 1995 and Local Government (Financial Management) Regulations 1996

### Overview

This report provides the Audit and Risk Committee with an update on the implementation of the Financial Management Systems Review (FMSR) actions.

### Background

In accordance with regulation 5(2)(c) Local Government Financial Management Regulation 1996, the Chief Executive Officer is required to undertake reviews of the appropriateness and effectiveness of the financial management systems and procedures of the Local Government regularly (not less than once in every 3 financial years) and report to the Local Government the results of those reviews. This review was undertaken by AMD Chartered Accountants in February 2019 and the report, along with management comments were presented to the Audit Committee meeting held on 6 March 2019.

Since that time, regular updates on outstanding items have been provided to the former Audit Committee, and since December 2019 the Audit and Risk Committee. At the meeting of the Audit and Risk Committee on the 4 March 2020 and subsequent Council meeting of 25 March 2020, the following was resolved [54-20]:

*THAT Council acknowledges that action 7.2.1 Code of Conduct, will remain outstanding until mid-2020 when the Department of Local Government, Sport and Cultural Industries releases model Codes of Conduct.*

This report is provided to the members of the Audit and Risk Committee as an update by management on the current status of the only outstanding action resulting from the review, being 7.2.1 Code of Conduct.

### Legal Implications

Local Government Act 1995

Local Government (Financial Management) Regulations 1996 (as Amended):

- (2) The CEO is to —
- c) *undertake reviews of the appropriateness and effectiveness of the financial management systems and procedures of the local government regularly (and not less than once in every 3 financial years) and report to the local government the results of those reviews.*

### Strategic Community Plan

Strategy 1.1.2- Monitor and ensure compliance with the regulatory framework for local government governance and operations. (Service Priority: High)

Strategy 1.1.3- Maintain best practice governance systems and practices. (Service Priority: Moderate)

Environment - None.

Precedents

The previous review was undertaken by Butler Settineri in 2015 and presented to the Chief Executive Officer on 13 January 2016. The scope of the previous review was to compare the financial policies adopted by the Shire with the minimum requirements of the Local Government Act 1995 and its associated regulations and to determine the extent to which the stated policies and procedures as adopted by the Shire have been implemented by the Chief Executive Officer.

Budget Implications

The annual budget provides sufficient expenditure allocation for consultancies to cover the cost of the next review which will capture the period from January 2019 to December 2021.

Budget – Whole of Life Cost

As no assets/infrastructure is being created, there are no whole of life costs relevant to this item.

Council Policy Compliance - None.

Risk Assessment

The Risk Management Governance Framework has been considered in arriving at the officer recommendation. Please refer to (Appendix AAR: 8.2) for full assessment document.

| Tier 2 – ‘Low’ or ‘Moderate’ Inherent Risk.          |  |
|--|--|
| Risk Event   | Financial Management System review not being undertaken in accordance with regulation 5(2)(c) Local Government Financial Management Regulation 1996 and not less than once in every 3 financial years.   |
| Inherent Risk Rating (prior to treatment or control) | Low (1 - 4)  |
| Risk Action Plan (treatment or controls proposed)    | As the Inherent Risk Rating is below 12, this is not applicable.   |
| Residual Risk Rating (after treatment or controls)   | As the Inherent Risk Rating is below 12, this is not applicable.   |
| Risk Category Assessed Against                       | <p>Legal and Compliance</p> <p>Failure to fulfil compliance obligations pursuant to regulation 5(2)(c) of the Local Government (Financial Management) Regulations 1996.</p> <p>Reputational</p> <p>Council’s reputation could be seen in a negative light for not adhering to its requirement to fulfil duties and functions that are prescribed in legislation.</p> |

As the Financial Management System review was completed by an independent professional third party recognised accounting firm and delivered within the required timeframe (not less than once in every 3 financial years), the Risk Assessment for this report is considered low.

Officer Comment

The Code of Conduct (Item 7.2.1) remains the only outstanding action from the February 2019 Financial Management Systems Review. The auditor's recommendation and management comment for this action is provided in the table below:

| Ref       | Issue   | Risk Rating | Proposed Completion Date  | Status      |
|-----------|---|-------------|---|-------------|
| <b>7.</b> | <b>Preparation of budgets, budget reviews, accounts and reports required by the Act or the Regulations</b>  |             |   |             |
| 7.2.1     | <p><b>Code of Conduct</b><br/>The Shire Code of Conduct for Council Members, Committee Members and Staff was last reviewed and adopted by Council on the 6 November 2013.</p> <p><b>Auditor Recommendation</b><br/>We recommend the Code of Conduct be reviewed and subsequently communicated to current Council Members, Committee Members and Staff.</p> <p><b>Management Comment</b><br/>Management acknowledges and accepts the recommendation. Council staff have been working with Councillors and WALGA during 2018 to review the Code of Conduct. This was put on hold pending the finalisation of the Local Government Act review.</p> | Minor       | <p>Former proposed completion date:<br/>31 December 2019</p> <p>Now extended to:<br/>30 June 2020</p> | In Progress |

Management have advised that they anticipate the model Codes of Conduct, both for Employee's and Elected Member's, will be presented to the Ordinary Council Meeting on 24 June 2020 for Council's consideration.

If these models are successfully endorsed by Council, all outstanding action items resulting from the February 2019 Financial Management Systems Review will be completed. This report will therefore serve as the final update to the members of the Audit and Risk Committee.

Committee Role - Legislative.

Voting Requirements - Simple Majority.

**OFFICER RECOMMENDED RESOLUTION**

**THAT the Audit and Risk Committee receive the June 2020 update report on the implementation of actions required from the findings of the February 2019 Financial Management Systems Review.**



**9. ELECTED MEMBER MOTIONS OF WHICH PREVIOUS NOTICE HAS BEEN GIVEN**

None.

**10. NEW BUSINESS OF AN URGENT NATURE**

[Please Note: This is Not General Business – This is for Urgent Business Approved By the Person Presiding or by Decision. In cases of extreme urgency or other special circumstance, matters may, with the consent of the person presiding, or by decision of the members present, be raised without notice and decided by the meeting.]

**11. MATTERS BEHIND CLOSED DOORS**

None.

**12. CLOSURE OF MEETING**

The date of the next Audit & Risk Committee Meeting will be Wednesday, 2 September 2020.

*Process:*

*Before closing the meeting, the Presiding Member should undertake a final 'roll call' so the Minutes evidence continued attendance of Elected Members at the eMeeting and record attendance.*

There being no further business the Chairperson to declare the meeting closed.