

Agenda for a meeting of the Audit & Risk Committee of the Waikato District Council to be held in Committee Rooms I & 2, District Office, 15 Galileo Street, Ngaruawahia on **WEDNESDAY 22 MARCH 2017** commencing at **1.00pm**.

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Information and recommendations are included in the reports to assist the Board in the decision making process and may not constitute Council's decision or policy until considered by the Board.

I. APOLOGIES AND LEAVE OF ABSENCE

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Representatives from Audit New Zealand will be in attendance.

3. DISCLOSURES OF INTEREST

4. <u>CONFIRMATION OF MINUTES</u>

3 Meeting held on 19 December 2016 5. **REPORTS – FOR DISCUSSION AND DECISION** 5.1 14 KPMG Waikato LASS Internal Audit Insights Panel Session 5.2 Waikato District Council's approach to the impact of disruptive technology 68 5.3 Conflicts of Interest 75 5.4 Update on Process Audit and Quality Improvement 80 5.5 **Drinking Water** 86 6. **REPORTS – STANDING ITEMS** 6.I Zero Harm Update 94 99 6.2 Update on progress against Audit issues 6.3 Annual Report 2016/17 122 6.4 Strategic Risk Update 130

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6.5	Organisational Risk Direction	148
6.6	Updated Future Workplan	151

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7. EXCLUSION OF THE PUBLIC

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GJ Ion CHIEF EXECUTIVE Agenda2017\A&R\170322 A&R OP.docx



Open Meeting

То	Audit & Risk Committee
From	Gavin Ion
	Chief Executive
Date	23 February 2017
Prepared by	Rose Gray
	Council Support Manager
Chief Executive Approved	Y
Reference #	GOVI318
Report Title	Confirmation of Minutes

I. EXECUTIVE SUMMARY

To confirm the minutes of the Audit & Risk Committee held on Monday 19 December 2016.

2. **RECOMMENDATION**

THAT the minutes of the Audit & Risk Committee held on Monday 19 December 2016 be confirmed as a true and correct record of that meeting.

3. ATTACHMENTS

Minutes



<u>MINUTES</u> of a meeting of the Audit & Risk Committee of the Waikato District Council held in the Committee Rooms I and 2, District Office, 15 Galileo Street, Ngaruawahia held on **<u>MONDAY 19 DECEMBER 2016</u>** commencing at <u>**9.00am**</u>.

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Present:

Ms M Devlin (Chairperson) His Worship the Mayor Mr AM Sanson Cr A Bech Cr JM Gibb Cr B Main

Attending:

Cr Fulton Cr Lynch Mr TG Whittaker (Acting Chief Executive) Ms S Duignan (General Manager Customer Delivery) Mr T Harty (General Manager Service Delivery) Mrs RJ Gray (Council Support Manager) Ms A Diaz (Finance Manager) Mr R Java (Procurement Manager) Mr C Clarke (Roading Manager) Mrs K Jenkins (Project Management Advisor) Ms M Russo (Corporate Planner) Mrs A Parquist (Customer Delivery Manager) Mr K Lockley (Zero Harm Manager) Mr V Ramduny (Strategy & Planning Manager) Mr M Wilcock (Chief Information Officer) Ms B Nand (KPMG) Mr D Sutton (KPMG) 2 staff

APOLOGIES AND LEAVE OF ABSENCE

Resolved: (Crs Gibb/Bech)

THAT an apology be received from and leave of absence granted to Cr Sedgwick.

CARRIED on the voices

A&R1612/01

The Chair noted an apology from Mr Pieterse and Ms Proctor, Audit New Zealand.

CONFIRMATION OF STATUS OF AGENDA ITEMS

Resolved: (Crs Gibb/Bech)

THAT the agenda for a meeting of the Audit & Risk Committee held on Monday 19 December 2016 be confirmed and all items therein be considered in open meeting with the exception of those items detailed at agenda item 7 which shall be discussed with the public excluded;

AND THAT in accordance with Standing Order 3.7.2 the order of business be changed with agenda item 6.2 [Zero Harm Update] being considered after agenda item 5.2 and agenda item 2.3 [Cash-Free Council Operations] being considered as the first report on the public excluded agenda.

CARRIED on the voices

A&R1612/02

DISCLOSURES OF INTEREST

The Chair advised members of the Committee that she would declare a non-financial conflict of interest in items containing discussion on City Care.

RECEIPT OF MINUTES

Resolved: (Cr Gibb/His Worship the Mayor)

THAT the minutes of a meeting of the Audit & Risk Committee held on Tuesday

27 September 2016 be received.

CARRIED on the voices

A&R1612/03

REPORTS

Procurement and Contract Management Review Agenda Item 5.1

The report was taken as read. The General Manager Strategy & Support provided a brief overview on the report including support of the recommendations by the Executive Team. He acknowledged further work was required on the 'one up' approval process which has been committed to. It was noted that the project was in place to deliver the outcome on the electronic 'one up' approval purchase ordering system. The software will be more prescriptive to enable reporting on risk transactions. A pilot group has been set up to work through the process prior to the wider rollout by the end of the financial year.

The overall recommendations have been included into a procurement work programme which includes a 'simplification' project. Mr Sutton, representing KPMG, provided key highlights from their internal audit and answered questions from the Committee.

Key issues raised:

- Opportunity to consolidate suppliers
- The need to take a more strategic approach to procurement ie what you are trying to achieve with the spend.

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- Contract Management documentation. Agreed that Council needs to improve this as a centralisation of reporting is not readily accessible to all.
- The need to tighten up the approved supplier process.

Members were happy with responses and timelines in the KPMG report.

KPMG suggested that once management work through the issues in the Procurement and Contract Management Review Draft Report a follow up review might be useful to ensure risks have been appropriately mitigated.

The Committee noted that a balance between a system which provided rigour and efficiency must be achieved.

Resolved: (Crs Gibb/Bech)

THAT the report from the Acting Chief Executive be received.

CARRIED on the voices

A&R1612/04/1

Waikato District Council Health and Safety Framework Agenda Item 5.2

The report was taken as read and the Zero Harm Manager provided the following highlights:

- busy year for Council in terms of zero harm programme
- tertiary level of achievement in the Work Safety Management Programme with ACC
- compliance with the new H&S at Work Act 2015
- emerging culture within the organisation.

The General Manager Strategy & Support agreed that the safety framework is continuing to improve, including enhanced reporting through to the Executive Team. He confirmed the strategy is tested to ensure compliance with legislation.

The Zero Harm Manager advised that there is a programme for maintenance of assets that could cause a health and safety issue, eg chemical storage included in the Strategic Plan but there is an opportunity to have a much more structured programme.

The Chair requested to attend a site visit of a Council operation to gain an improved understanding of the nature of the operations and hazards and risks associated with Council operations. The Committee were supportive of the progress made during the year.

Resolved: (Crs Main/Gibb)

THAT the report from the Chief Executive be received.

CARRIED on the voices

A&R1612/04/2

Zero Harm Update Agenda Item 6.2

The report was taken as read and the Zero Harm Manager provided a brief overview of key items for noting.

Resolved: (Crs Main/Bech)

THAT the report from the Acting Chief Executive be received.

CARRIED on the voices

A&R1612/04/3

NZ Transport Agency Investment Audit 2016 Agenda Item 5.3

Tabled:NZ Transport Agency Investment Audit Report

The report was taken as read. The Roading Manager provided an overview and spoke on the tabled item.

The General Manager Strategy & Support agreed to review the audit report to see if any lessons could be learned to support the recommendations in the KPMG internal audit around contract management. The Roading Manager agreed to confirm the issues in the tabled report at the next Audit & Risk meeting.

Resolved: (Crs Main/Bech)

THAT the report of the General Manager Service Delivery be received.

CARRIED on the voices

A&R1612/04/4

<u>Risk Management Framework Maturity Assessment</u> Agenda Item 5.4

The report was taken as read and the General Manager Strategy & Support confirmed that the Executive Team has received the report and has endorsed the recommendations. A key strategy to support moving forward was more regular reporting on progress to the Executive Team.

Mr Sutton advised that the level of risk maturity is consistent with other councils. The expectation is not for councils to be at the high level. The assessment is no criticism and is looking for re-energising of the framework. More effective governance can be achieved by managing the key risks (ie those risks that matter). It was suggested that Council look at the risk profile during the development of the LTP. It was agreed that small but meaningful changes will result in a more effective risk framework. Staff will consider the roadmap in the report and develop a work programme, an update of which will be regularly reviewed by the Committee.

The General Manager Strategy & Support advised that staff are managing risks every day. The objective now is to ensure they use the appropriate framework.

The Committee was comfortable with the road map and requested that staff work with KPMG to fast track some of the recommendations.

Resolved: (Crs Bech/Gibb)

THAT the report from the Acting Chief Executive be received

CARRIED on the voices

A&R1612/04/5

Internal Audit Programme Agenda Item 5.5

The report was taken as read. Additional internal audit work carried out externally not included on list: conflicts of interest and the subsequent broader procurement management report. KPMG has also been asked to undertake an internal audit of the Raglan Kopua Camp.

The Chair noted that the focus should now be on reducing the outstanding audit recommendations from the previous internal audits, including the Audit New Zealand Audit Management report items.

The General Manager Strategy & Support agreed with the comments provided by the Chair and advised that in the early part of 2017 staff would formulate an internal audit programme based on the revised strategic risks recently updated by the Committee.

Resolved: (Crs Bech/Main)

THAT the report from the Acting Chief Executive be received;

AND THAT the Committee support focus on resolving existing audit recommendations rather than progressing additional internal audit activity at this stage;

AND FURTHER THAT an allocation of internal audit funding be used to progress the recommendations from the Risk Maturity Assessment;

AND FURTHER THAT the updated Strategic Risk Register be used to formulate a new list of internal audit activity.

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CARRIED on the voices

A&R1612/04/6

The meeting was adjourned at 10.26am and resumed at 10.46am.

<u>Project Management Audit Actions Update</u> Agenda Item 6.1

The report was taken as read. The Project Management Advisor provided a brief overview.

The General Manager Strategy & Support advised that simplification was a key theme of the audit. The establishment of the Project Management Forum is a key cross organisation team of leaders who have been mandated to implement outcomes defined in a terms of reference. This terms of reference has been signed off by the Executive Team and will deliver on the recommendations in the audit. This will ensure broad organisation support for the recommendations rather than being the responsibility of a Project Management Adviser.

Resolved: (Crs Gibb/Bech)

THAT the report from the Acting Chief Executive be received.

CARRIED on the voices

A&R1612/04/7

Post Project Reviews Agenda Item 6.3

The report was taken as read. The Chief Information Officer provided a brief overview of the Crypto Virus report and noted the team is continually looking at business continuity practices. He considered the organisation is well protected. It was agreed that constant reinforcing to staff regarding the risks around emails is important.

It was agreed that subcontractor management from an IT security perspective was important in terms of protecting our network. The Chief Information Officer would review controls in place.

The Committee was pleased that staff had a process in place to learn from project/process outcomes and looked forward to further reviews in the future.

Resolved: (Crs Gibb/Bech)

THAT the report from the Acting Chief Executive be received.

CARRIED on the voices

<u>Update on Progress Against Issues Raised in the Interim Management Report</u> Agenda Item 6.4

The report was taken as read. The Corporate Planner provided a brief overview and answered questions from the Committee.

Resolved: (His Worship the Mayor/Cr Gibb)

THAT the report from the Acting Chief Executive be received.

CARRIED on the voices

A&R1612/04/9

<u>Strategic Risk Update</u> Agenda Item 6.5

The report was taken as read. The Corporate Planner advised that the Strategic Risk Register will be completed by the next Audit & Risk Committee meeting in March 2017.

As this had not been shared with the full Council it was agreed that following a workshop with the Committee, a report be provided to Council advising of work in progress. A further report was requested for the Audit & Risk Committee meeting in March.

Resolved: (Crs Gibb/Bech)

THAT the report from the Acting Chief Executive be received;

AND THAT the revised Strategic Risk Register be provided to Council for information.

CARRIED on the voices

A&R1612/04/10

ICT Security Risk Assessment Update Agenda Item 6.6

The report was taken as read. The Chief Information Officer spoke of some key points;

- focussing on Information Strategy and Business Continuity planning
- Disaster recovery (Tuakau Office)
- Back up recovery testing.

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A&RI6I2/04/8

The Chair raised the impact of disruptive technology. The General Manager Strategy & Support agreed this was relevant and important it was considered as part of future thinking.

The General Manager Service Delivery advised of progress on strategic plans around wastewater, transport, looking at where growth is at and where things are occurring. The team were exploring options to rationalise infrastructure around waters, parks and study on transport around facilities and infrastructure.

It was agreed that there is an additional opportunity and risk in the Waikato district coping with growth and putting a strain on the business. Forward thinking is required in this area, eg libraries and modern communities.

The Chair and Committee were keen to follow progress and close off some risks in this area.

Resolved: (Crs Gibb/Main)

THAT the report from the Acting Chief Executive be received.

CARRIED on the voices

A&R1612/04/11

<u>Updated Future Workplan</u> Agenda Item 6.7

The Council Support Manager agreed to schedule dates for the Audit & Risk meetings for 2017.

Resolved: (Crs Bech/Gibb)

THAT the report from the Acting Chief Executive be received.

CARRIED on the voices

A&R1612/04/12

<u>Update on Internal Audit and Quality Improvement</u> Agenda Item 6.8

The report was taken as read. The General Manager Customer Support shared some observations regarding the staff turnover level of 16%. The Executive Team is reviewing a more structured work programme in this area. It was agreed there was a need to understand the metrics better, to form a plan (early in the New Year) that is more intuitively dealing with the challenges rather than ad hoc responses. This is a strategic risk to the business and the Committee was keen to ensure it was being appropriately managed.

Resolved: (Crs Gibb/Bech)

THAT the report from the Acting Chief Executive be received.

CARRIED on the voices

A&R1612/04/13

EXCLUSION OF THE PUBLIC

Agenda Item 7

Resolved: (His Worship the Mayor/Cr Bech)

THAT the report of the Chief Executive be received;

AND THAT the public be excluded from the meeting during discussion on the following items of business:

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a. Receipt of Minutes dated Tuesday 27 September 2016.

REPORTS

a. Fraud Declaration

This resolution is made in reliance on section 48(1)(a) and 48(2)(a) of the Local Government Official Information and Meetings Act 1987 and the particular interest or interests protected by sections 6 or 7 of that Act which would be prejudiced by the holding of the whole or the relevant part(s) of the proceedings of the meeting in public are as follows:

		resolution		Ground(s) under section 48(1) for the					
withhold exists under:				passing of this resolution is:					

Section 7(2)(f)(i)(h)(i)(j)

Section 48(1)(a)(d)

b. Register of Members' Interests Elected Members & Senior Staff

This resolution is made in reliance on section 48(1)(a) and 48(2)(a) of the Local Government Official Information and Meetings Act 1987 and the particular interest or interests protected by sections 6 or 7 of that Act which would be prejudiced by the holding of the whole or the relevant part(s) of the proceedings of the meeting in public are as follows:

Reason for passing this resolution to Ground(s) under section 48(1) for the withhold exists under: passing of this resolution is:

Section 7(2)(f)(i) (h) (i) (j)

Section 48(1)(a)(d)

c. Cash-free Council Operations

This resolution is made in reliance on section 48(1)(a) and 48(2)(a) of the Local Government Official Information and Meetings Act 1987 and the particular interest or interests protected by sections 6 or 7 of that Act which would be prejudiced by the holding of the whole or the relevant part(s) of the proceedings of the meeting in public are as follows:

Reason for passing this resolution to Ground(s) under section 48(1) for the withhold exists under: passing of this resolution is:

Section 48(1)(d)

d. Committee Time with Audit New Zealand

This resolution is made in reliance on section 48(1)(a) and 48(2)(a) of the Local Government Official Information and Meetings Act 1987 and the particular interest or interests protected by sections 6 or 7 of that Act which would be prejudiced by the holding of the whole or the relevant part(s) of the proceedings of the meeting in public are as follows:

Reason for passing this resolution to withhold exists under:	Ground(s) under section 48(1) for the passing of this resolution is:
Section 7(2)(f)(g)(h)(i)(j)	Section 48(1)(a)(d)

CARRIED on the voices

A&R1612/05

Resolutions A&R1612/06 – A&R1612/08 are contained in the public excluded section of these minutes.

There being no further business the meeting was declared closed at 12.05pm.

M Devlin CHAIRPERSON Minutes2016/A&R/161219 A&R M.docx



Open Meeting

То	Audit & Risk Committee
From	Tony Whittaker
	General Manager Strategy & Support
Date	06 March 2017
Prepared by	Katja Jenkins
	Project Management Advisor
Chief Executive Approved	Y
Reference #	GOV1318 / 1690892
Report Title	KPMG Waikato LASS Internal Audit Insights Panel Session

I. EXECUTIVE SUMMARY

This report provides the Audit & Risk Committee an overview of the KPMG Waikato LASS Internal Audit Insights Panel Session held on Wednesday, 01 March 2017.

2. **RECOMMENDATION**

THAT the report from the General Manager Strategy & Support be received.

3. BACKGROUND

As part of the commitment to the LASS internal audit objectives, KPMG agreed to conduct an annual insights session on common areas of internal audit activity and focus within the sector. On Wednesday, 01 March KPMG shared their insights and experience at a session held at the Waikato Regional Council offices. The session agenda included:

- Common areas of Internal Audit focus current and emerging
- Health and Safety Practical challenges of implementation
- Procurement What are we seeing and where things are heading
- Risk Management

Waikato District Council has recently had audits completed in the three most common areas of focus being: Contract Management; Procurement; and risk management.

Other Councils' audit schedules included: Asset Management; Business Continuity; Finance; Health & Safety; IT; Project management; Resource Consents; and System Design.

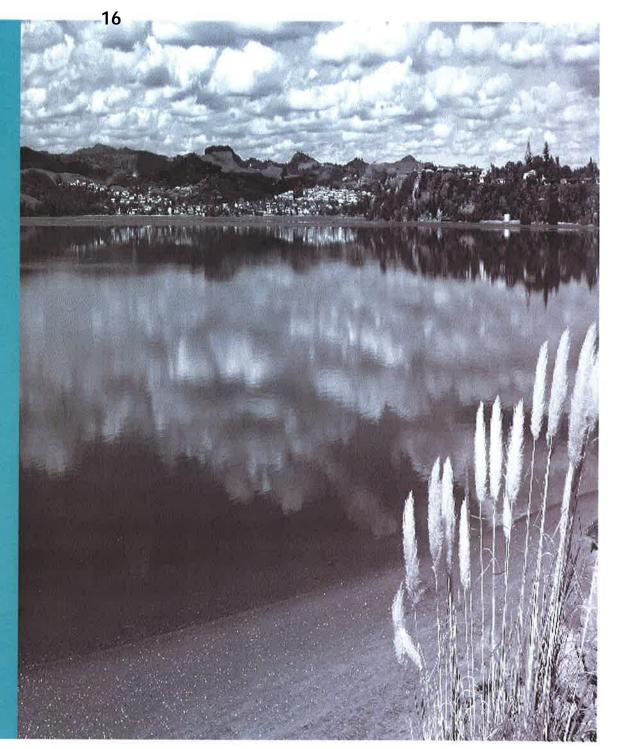
KPMG communicated that future sessions will include a hot topic from LASS council members for discussion. The session is seen as work in progress but was a useful oversight of audit focus and networking within the Waikato and Bay of Plenty at least. A copy of the presentation is attached for the Committee's information.

4. ATTACHMENTS

KPMG Waikato LASS Internal Audit Insights Panel Session presentation



Waikato LASS Internal Audit Insights Panel Session



March 2017

Agenda for today

Time	ltem
1:00-1:15	Introductions and overview
1:15-1:30	Internal Audit common areas of focus – current and emerging
1:30-2:15	Health & Safety – Practical challenges of implementation
2:15-3:00	Procurement – What are we seeing & where things are heading
3:00-3:30	Afternoon tea
3:30-4:15	Risk management
4:15-4:30	Closing Remarks



Internal Audit common areas of focus - current and emerging

Internal Audit Area	BOPLASS			Waikato LASS						
of Focus	BOPRC	KDC	TCC	WBOPDC	WRC	Waipa DC	Waikato DC	Waitomo DC	TCDC	HDC
Asset Management										5.461
Business continuity										
Contract Management										
Finance										1997
Health & Safety										
П									1.50	
Procurement										(Designed a
Project Management										
Resource Consents										
Risk Management							1.15		140,00	
System design			1,20							



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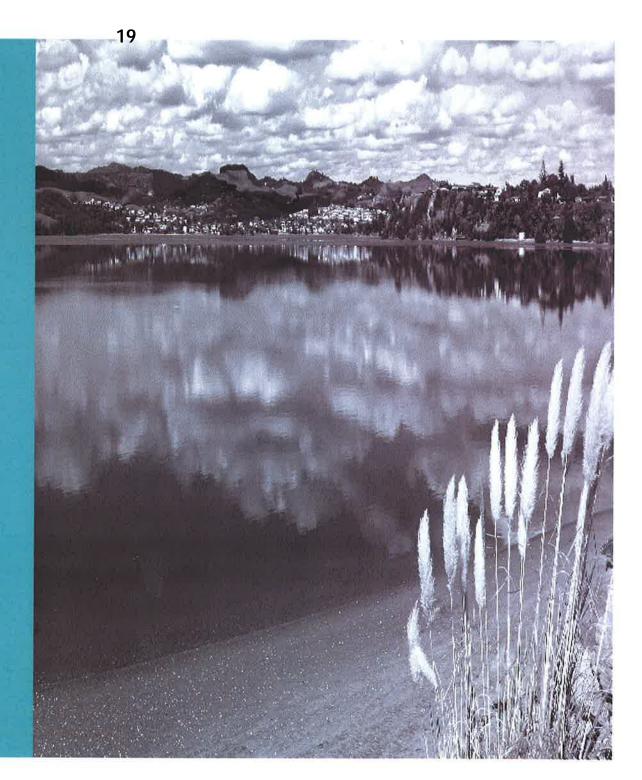
KPMG

Health and Safety

Practical challenges of implementation

Erica Miles Director, Advisory

March 2017





LEGISLATION Risk Management under HSWA.

PRACTICE Common findings.

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ACTIONS Your next steps.



Why focus on risk?



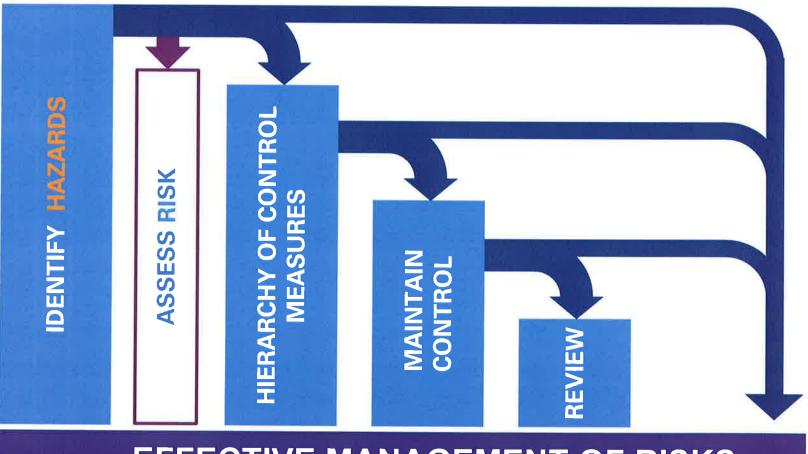
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Management of risks - general duty



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EFFECTIVE MANAGEMENT OF RISKS

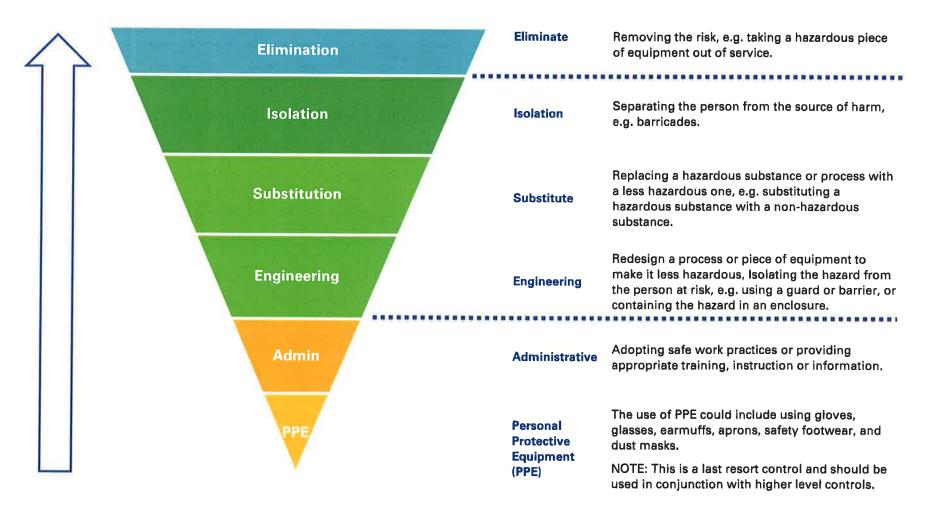


Key steps under HSWA

Move from hazard to risk So far as reasonably practicable test Application of hierarchy of control measures

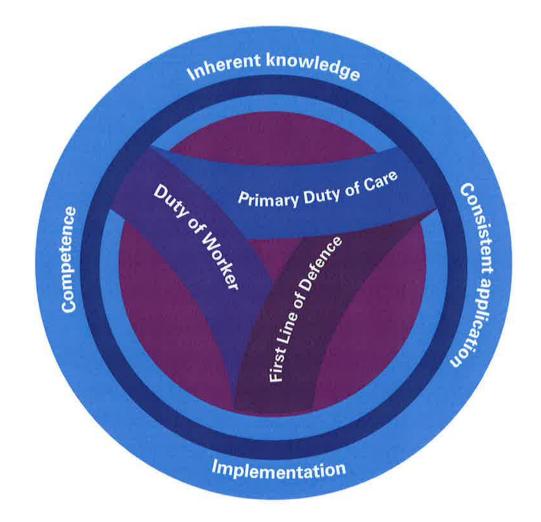


Hierarchy of control measures











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- Hierarchy of control measures
- So far as reasonably practicable test
- Overlapping duties







Health and Safety should be integrated

- What is the risk appetite of the council?
- How are consequences to "people" documented within the risk matrix?
- Are Health and Safety risks identified and communicated as per other risks?
- How do diverse teams understand the risks they face?





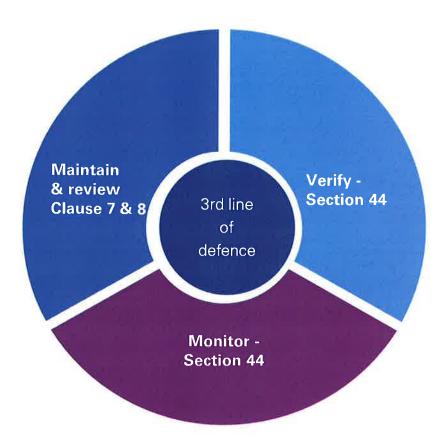
Are all "Officers" receiving (and responding to) appropriate information so they can meet Due Diligence obligations - s44(4)(b)?

- Deep dive into a risk
- Accurate information on controls
- Sharing of identified improvements across directorates





Are Health and Safety risks included in your assurance programme?

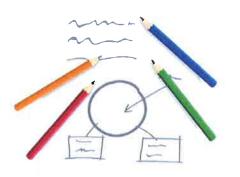




Practical exercise

Lone Worker

- Who are your lone workers?
- How have you engaged with lone workers?
- What controls are in place?
- Do they focus on elimination?
- Are the controls consistently applied across the TA?
- What register does 'lone worker' sit on?
- When and how is the risk and control communicated to officers?
- What is your process for monitoring and reviewing the controls across the whole TA?





Next steps





10 Top Tips: successful H&S risk management

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Involve key stakeholders



Identify top risks and those with high consequences



What are the options for control? Assess the effectiveness of each option



Eliminate in the first instance



Workshop all ideas



List 'minimise' actions, with timeline include all the BAU activities (routine monitoring, auditing)





Review Residual Risk What will be the post-mitigation (residual) risk rating?



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Thank you

The information contained herein is of a general nature and is not intended to address the circumstances of any particular individual or entity. Although we endeavour to provide accurate and timely information, there can be no guarantee that such information is accurate as of the date it is received or that it will continue to be accurate in the future. No one should act on such information without appropriate professional advice after a thorough examination of the particular situation.

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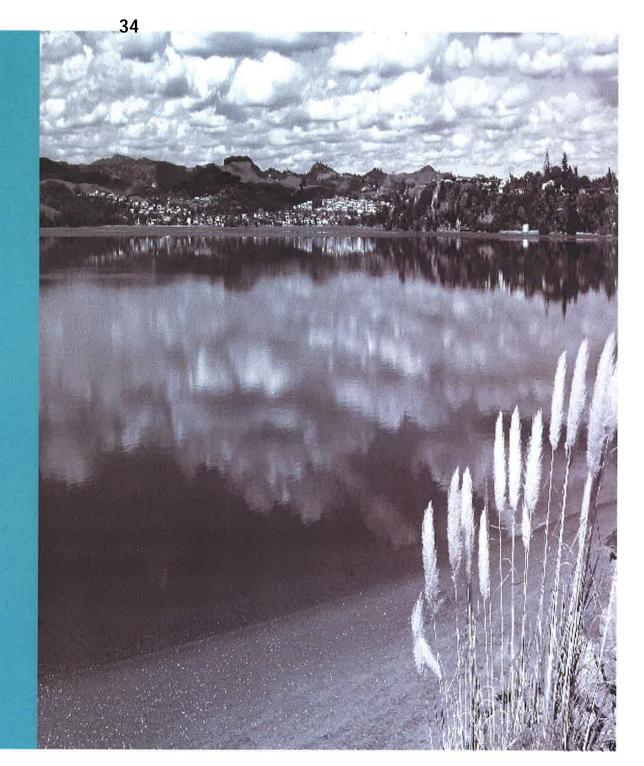
Procurement

What we are seeing and where things are heading

Julie Kim Procurement Specialist, Advisory

Bineeta Nand Director, Advisory

March 2017





CURRENT STATE

Where are we now and what are we seeing?

PROCUREMENT STRATEGY

Where are we headed?



What is the modern view of procurement?

"The term 'procurement' covers all aspects of the acquisition and delivery of goods or services, spanning the whole contract life cycle from the identification of needs to the end of a service contract, or the end of the useful life and subsequent disposal of an asset." - MBIE

Key points:

- All aspects of acquisition (not just the purchase transaction)
- Whole contract life cycle (including ongoing supplier and contract management)

Q: How does this differ from the traditional view of procurement? Which view do you take?



KPMG Insights

- Technological advances are changing the landscape of procurement as we know it
- Internal procurement **transformation and modernisation** is required to keep up with the pace of change in Government

- Government with modern procurement capabilities:
 - Reduce costs for goods and services
 - Increase the productivity of the central procurement department and staff across the business
 - Make more informed sourcing decisions
 - Provide greater transparency into spending for legislators and the public





Government Procurement

Good public service outcomes depend on good procurement. Properly planned and effectively executed procurement is essential for all agencies.

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Government Procurement Solutions – Ministry of Economic Development 2011



Common procurement fraud themes

- Potential for bribery and corruption to occur
- Conflict of interest / kick-back
- Inflated invoices for goods and services provided
- Goods receipting issues
- False invoicing / fictitious or duplicate suppliers / amended bank accounts
- Out of policy behaviour (purchase orders etc.)



KPING Global profiles of the fraudster: Technology enables and weak controls fuel the fraud

40

Fraud threats are constantly changing and companies need to conduct regular risk assessments, altering the way they prevent and detect fraud, as needed.

> To combat external threats, companies need to do thirdparty due diligence.

> > 5

on y of fraudsters alone

Fraudsters need to collude o circumvent controls.

Well respected (38%)

nearly 4x more likely than someone with a low reputation

> 0/ are 36-55 /0 years of age /0/ of fraudsters /0/ have unlimit authority



Anti-fraud controls are not strong enough and the problem is growing.

Weak controls are a factor in $61^{0/}$ /0 of frauds

Besed on a worldwide survey I KPMG professionels who nvostigated 750 fraudstens between March 2013 and August 2015 Fraudsters who exploited weak controls:





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Other forms of detection

Management 2

Accidental

Technology not a major means of detection



C through proactive data analytics

Cyber fraud is a growing threat, but many companies are not defending themselves.

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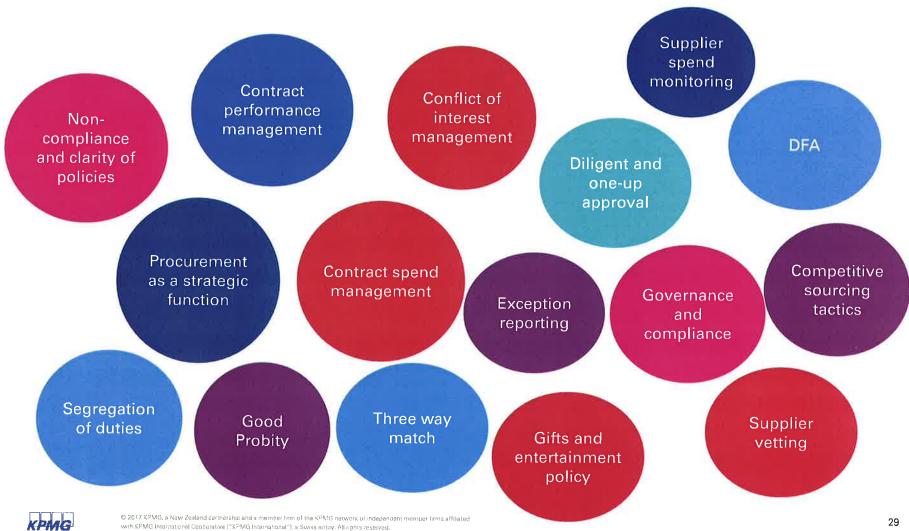
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Male fraudsters outnumber females, but the proportion of women has risen since 2010.

3° 17

emales, I

Common areas for improvement in Councils



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CURRENT STATE

Where are we now and what are we seeing?

PROCUREMENT STRATEGY

Where are we headed?



Tactical vs strategic procurement

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Tactical



- Short range decisions
- Transactional relationship with suppliers
- Sourcing decisions predominantly driven by price
- Reactive

Strategic



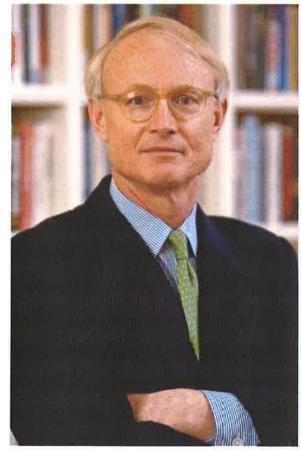
- Long term outlook
- Collaborative partnership with suppliers and across the business
- Holistic approach to sourcing
- Systematic
- Focus on demand
- Internal consultants



What is strategy?

Let's reflect on what a strategy guru has to say about strategy first...

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"Strategy is about being different. It means deliberately choosing a different set of activities to deliver a unique mix of value."

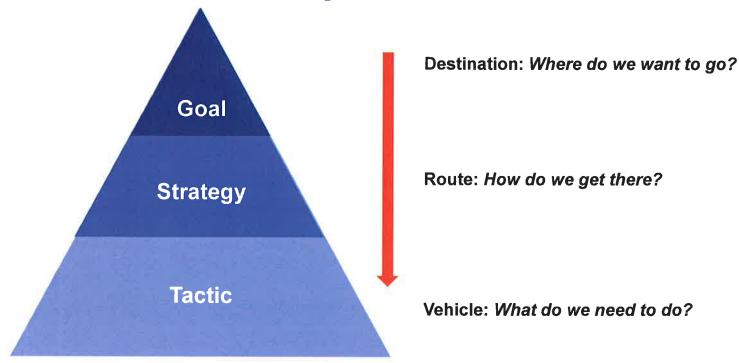
"Strategy requires you to make trade-offs in competing – to choose what not to do."

Michael Porter, Professor Harvard Business School



What is strategy?

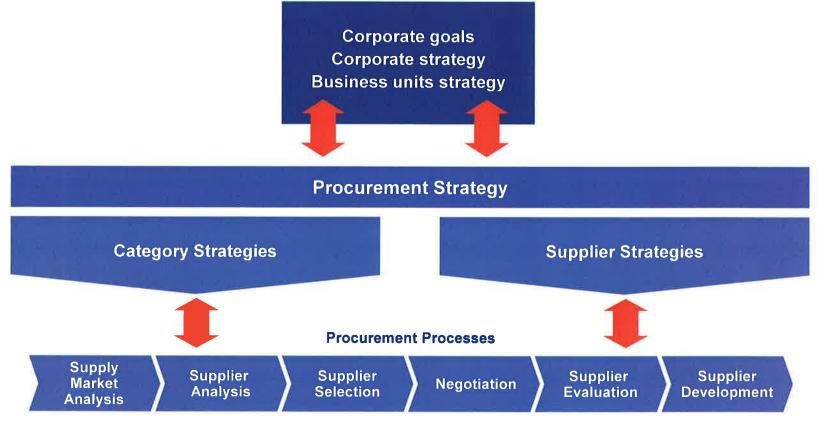
A strategy is dependent on the company goals which are to be achieved. A strategy will be executed through tactic.





Strategy Alignment

Procurement strategy provides the overarching framework for category and supplier strategies and the corresponding procurement processes





Future-proofing procurement



Futurology:

- Degree of digitalisation
- Age of algorithms
- Era of decentralism

Why future-proof?

- The need for a new key competency: dynaxibility the ability to competently manage dynamic and complex (dynaxic) developments
- Future-oriented planning such as building scenarios, as opposed to past-focused methods such as benchmarking
- Effectively using the broad datasets now available to Governments
- Great uncertainty about the future state of procurement, further intensified by automation and digitalisation





Thank you

The information contained herein is of a general nature and is not intended to address the circumstances of any particular individual or entity. Although we endeavour to provide accurate and timely information, there can be no guarantee that such information is accurate as of the date it is received or that it will continue to be accurate in the future. No one should act on such information without appropriate professional advice after a thorough examination of the particular situation.

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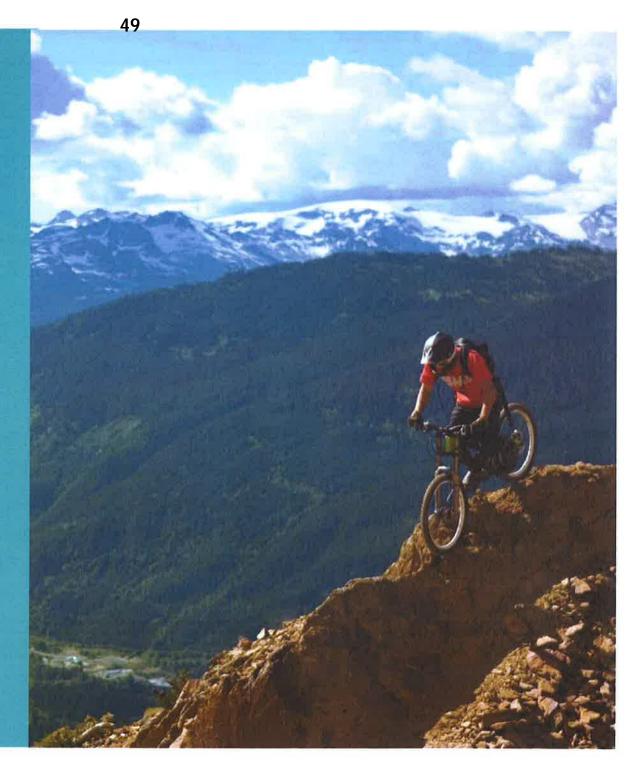


КРМС

Risk Management

David Sutton Partner, Advisory

March 2017





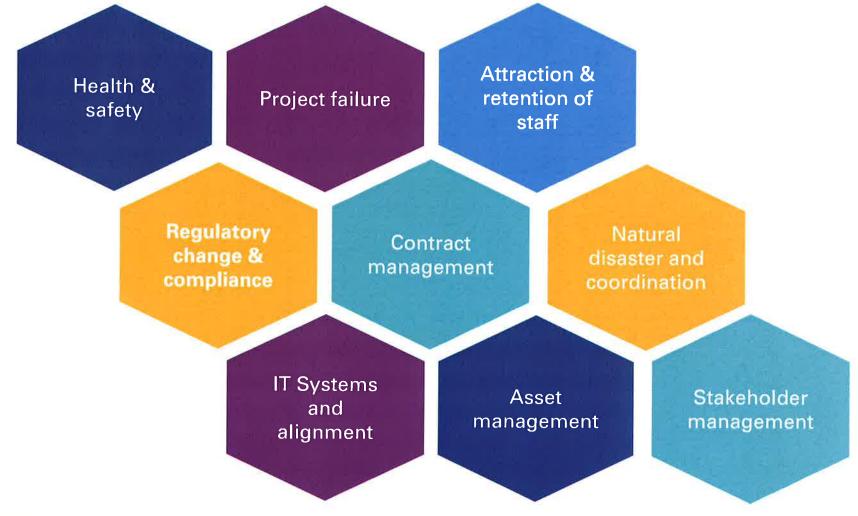
OVERLAPS & OUTLIERS RISK MANAGEMENT MATURITY TOP 5 AREAS FOR FOCUS







OVERLAPS Common Risk Areas across Waikato and BOP LASS

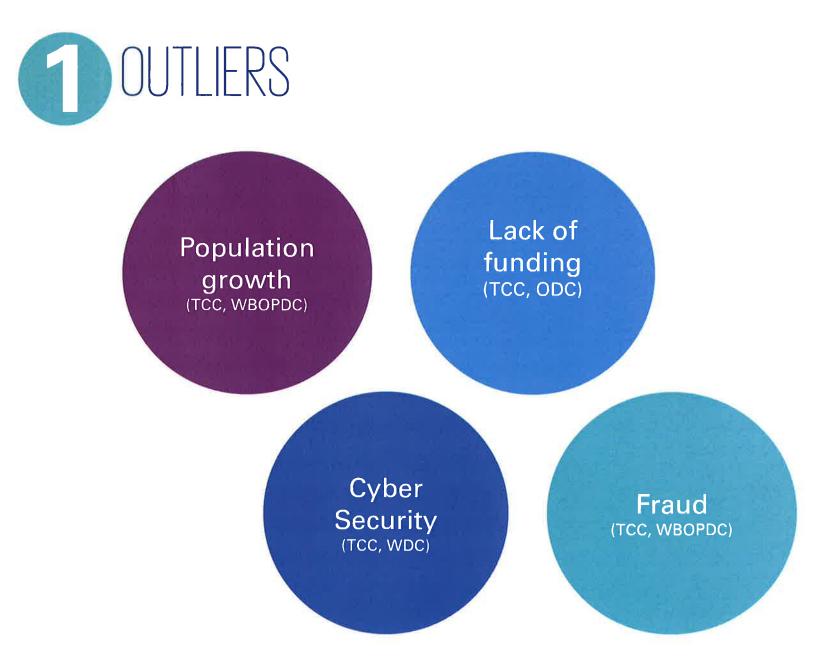


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RISK STRATEGY & APPETITE			RISK ASSESSMENT & MEASUREMENT	RISK MANAGEMENT & MONITORING	RISK REPORTING & INSIGHTS	DATA & TECHNOLOGY
Linkage to Corporate Strategy	Board Oversight & Committee	Knowledge & Understanding	Risk Definition & Taxonomy	Risk Mitigation, Response & Action Plans	Risk Reporting	Data Quality & Governance
Risk Strategy	Company Risk Operating Structure	Belief & Commitment	Risk Identification	Testing, Validation & Management's Assurance	Business/ Operational Requirements	Risk Analytics
Risk Appetite & Tolerance	Risk Guidance	Competencies & Context	Assessment & Prioritization	Monitoring	Board & Senior Management Requirements	Technology Enablement
	Roles & Responsibilities	Action & Determination		Risk in Projects/ Initiatives	External Requirements	
	Decision Support					





"Mature" level for non financial services







крид





executive team engagement -Timeliness and efficiency of -Alignment with organisation strategy and objectives (and existing performance measures)









 Consensus/ compromise between governance and management
 Moves from risk avoidance to risk discussions
 Allows management to highlight contention points in objectives



Illustrative risk appetite example

Risk type		Low Low		High
		Not willing to accept risk	Accept some risk	Pursue more opportunity
	Project failure			
gic	Population growth		a tan ing a said	
Strategic	Liquidity risk / Funding availability			
S	Development risk			
	Reliance on key 3 rd parties			
	Asset Management			
nal	Cyber risk			
Operational	Talent management		in the second	
Ope	Communications management			
	Natural disaster management			
JCe	Sustainability			
Compliance	Health & safety			
Con	Regulatory Change and Compliance			







Efficiency and less burden on the organisation
Removal of "disengagement" drivers
Higher quality discussion about a smaller number of risks







 Alignment of risk management and performance management
 Avoidance of a risk management "parallel universe"
 Greater engagement of management







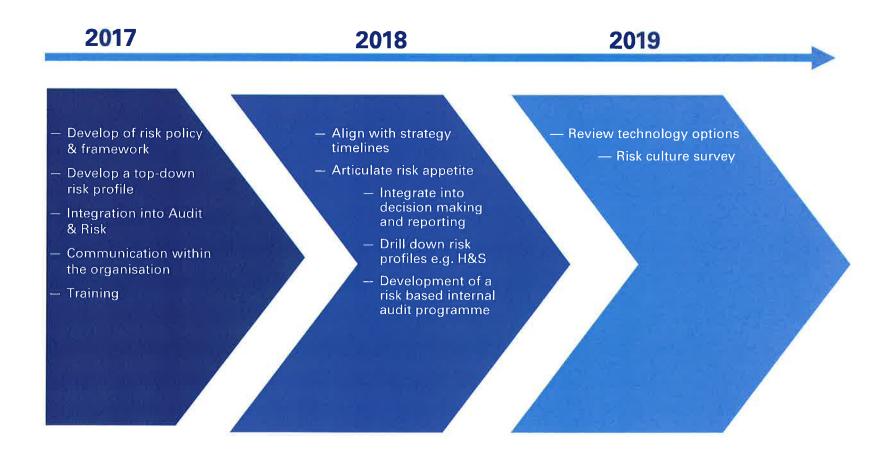
Benefits

 Faster escalation of potential risks within the organisation
 Greater understanding of the bigger picture in relation to individual roles



Setting a Strategy for Risk Management

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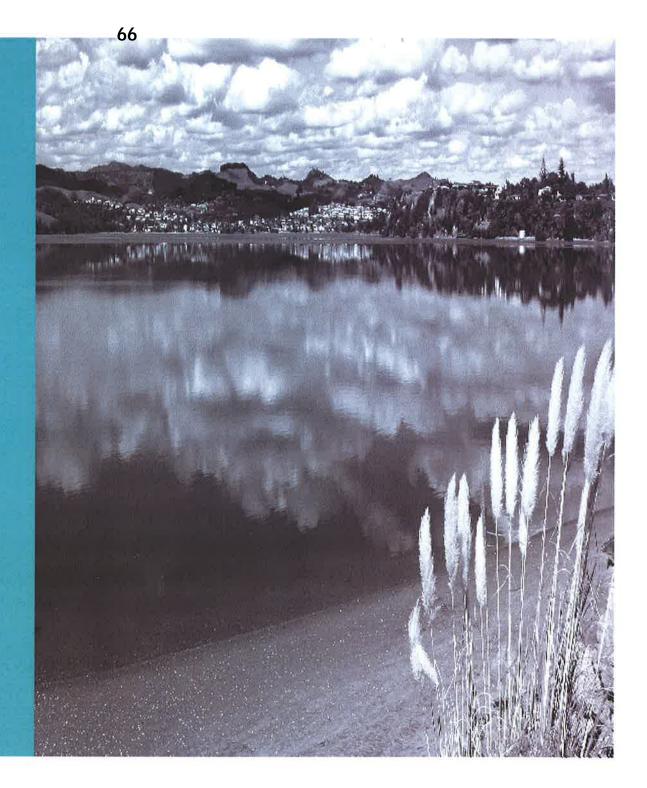
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Closing Remarks



WLASS Internal Audit Contacts

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For any further information, please feel free to reach out to us:

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Open Meeting

То	Audit & Risk Committee
From	Tony Whittaker
	General Manager Strategy & Support
Date	17 February 2017
Prepared by	Surya Pandey
	Asset Management Team Leader, Waters
Chief Executive Approved	Y
DWS Document Set #	GOV1318 / 1683007
Report Title	Waikato District Council's approach to the impact of disruptive technology

I. EXECUTIVE SUMMARY

A disruptive technology is a new emerging technology that unexpectedly displaces an established one. Disruptive technology is likely to play a major role in improving the quality of life of people, global economies, and business models of companies.

Waikato District Council ("Council") undertook a council-wide study to understand from a risk perspective Council's approach to the impact of disruptive technology. In particular the study addressed the impact of disruptive technology on long term investment decisions and the technologies that mattered for Council.

This report outlines work undertaken and planned to support understanding of disruptive technology across Council.

2. **RECOMMENDATION**

THAT the report from the General Manager Strategy & Support be received.

3. DISCUSSION

2.1. Disruptive technology

A disruptive technology is one that displaces an established technology and shakes up the industry or a ground-breaking product that creates a completely new industry. It can be separated into two categories: sustaining and disruptive. Sustaining technology relies on incremental improvements to an already established technology. Disruptive technology lacks refinement, often has performance problems because it is new, appeals to a limited audience and may not yet have a proven practical application.

Here are a few examples of disruptive technologies:

- The personal computer displaced the typewriter and forever changed the way we work and communicate.
- The Windows operating system's combination of affordability and a user-friendly interface was instrumental in the rapid development of the personal computing industry in the 1990s. Personal computing disrupted the television industry, as well as a great number of other activities.
- Email transformed the way we communicate, largely displacing letter-writing and disrupting the postal and greeting card industries.
- Cell phones made it possible for people to call us anywhere and disrupted the telecom industry.
- The laptop computer and mobile computing made a mobile workforce possible and made it possible for people to connect to corporate networks and collaborate from anywhere. In many organizations, laptops replaced desktops.
- Smartphones largely replaced cell phones and PDAs and, because of the available apps, also disrupted: pocket cameras, MP3 players, calculators and GPS devices, among many other possibilities.
- Cloud computing has been a hugely disruptive technology in the business world, displacing many resources that would conventionally have been located in-house or provided as a traditionally hosted service.
- Social networking has had a major impact on the way we communicate, especially for personal use, has disrupted telephone, email, instant messaging and event planning.

2.2. Identifying the technologies that matter

The various views and discussions about the next big thing can make it difficult to identify which technologies truly matter. There have been many attempts, both within the Local Government and the wider industrial platforms, to sort through the many claims to identify the technologies that have the greatest potential to drive substantial economic impact and to identify which potential impacts leaders should know about. Important technologies can come in any field or emerge from any scientific discipline, but they share four characteristics:

- I. High rate of technology change;
- 2. Broad potential scope of impact;
- 3. Large economic value that could be affected; and
- 4. Substantial potential for disruptive economic impact.

Many technologies have the potential to meet these criteria eventually, but we need to focus on technologies with potential impact that is near enough at hand to be meaningfully anticipated and prepared for.

The Society of Local Government Managers ("SOLGM") has prepared a comprehensive paper dealing with disruptive technology.

A number of meetings and discussions with selected key Council staff have taken place in the last few weeks. This had led to the identification of a number of potentially economically disruptive technologies for Council. These are listed in Table I below.

Mobile Internet	Increasingly inexpensive and capable mobile computing devices and Internet connectivity.
Automation of knowledge work	Intelligent software systems that can perform knowledge work tasks involving unstructured commands and subtle judgments.
The Internet of Things	Networks of low-cost sensors and actuators for data collection, monitoring, decision making, and process optimization.
Cloud technology	Use of computer hardware and software resources delivered over a network or the Internet, often as a service.
Advanced financial management	Finance is increasingly recognising the importance of disruptive technology and transitioning to a new operating environment with an integrated architecture, which enables consistent, straight-through processing of granular data for reporting and analytics. The integrated end-to-end approach could include the ability to capture granular data for financial events, the implementation of master data management for data consistency, and near-real-time data visibility. This could be assisted by e-purchasing and e-payment.
Advanced Customer Service	In the age of the customer, organisations don't decide how customer-centric their companies are — customers do. Changing customer expectations for easy and effective service that is deeply personal are shaping customer service technology priorities. There is a big push for three Es in Top Customer Service Trends — Ease, Effectiveness and Empowerment.
Advanced water purification	Could benefit millions of people facing water shortages, but approaches with substantially better economics than currently known approaches hold the future. The new purification technologies will purify water to such levels that it will be suitable for a variety of future uses, including the potential future expansion of drinking water supplies and industrial purposes.

Table I. Potentially economically disruptive technologies for WDC

Advanced wastewater treatment	Future wastewater treatment plants will no longer be just pure waste management facilities, but rather resource recovery facilities that have the potential to produce clean water, recover nutrients (such as phosphorus and nitrogen), and reduce the dependence on fossil fuels through the production of renewable energy.
Transport of the future	Self-driving vehicles are already hitting public roads in limited tests around the world. Vehicles that can navigate and operate with reduced or no human intervention. A number of key aspects of the transit ecosystem that will need to evolve alongside self-driving technologies include: New pavement, paint, and signage; Responsive speed limits; Advanced vehicle to infrastructure (V2I) communications; and Tighter street design.

2.3. How are we dealing with disruptive technology at Council?

A number of high-level strategies and strategic documents cover various aspects of disruptive technology at Council. These include 50 year strategies, Activity Management Plans, Risk register, Business Plans, etcetera.

2.3.1 Corporate Risk Management Framework

Council has adopted a corporate level risk management framework using the AS/NZS 4360: Risk Management as a basis.

Risks are identified and managed at three levels; Strategic, Operational and Project level. Each risk level has corresponding processes that provide systematic steps to assess and manage risks relative to the risk level. Risk management processes and resources (guides, notes and templates) are made available to staff through the online process management tool - Promapp.

Once identified, risks are structured into meaningful risk statements and entered into the relevant risk register with the risk consequence category noted, i.e. Financial, reputation/ Image etc.

Strategic, Operational and in some instances, major project risks will use the Promapp risk register. Project risks will be recorded within the project files of the Integrated Project Manager ("IPM") software.

Examples from some such strategies and plan are produced below in Table 2.

Waikato District Council Strategy/Plan	Coverage/Statement	
Wastewater Activity Management Plan	Sustainability Initiatives for the Future	
2015-25 Business effectiveness and efficiency are compromised because of ineffective, insufficient or unreliable technology	'Develop sub-regional optimised decision-making processes for three waters management and apply them when assessing technology (including new and green technology), infrastructure, processes and programmes of work'. New technologies and processes are routinely assessed as part of wastewater treatment plant renewals and upgrades, or during new sub-division consents process.	
Risk Register (Business continuity, technical information management, operational, strategy and support) Information Services Business effectiveness and efficiency are compromised because of ineffective, insufficient or unreliable technology.	Implementation of Technical Work Programme 16/17. The technical work programme is specific technical tasks to deliver improvements to the IT infrastructure. This treatment impacts the likelihood by providing scheduled work plan and the consequence by ensuring technology is current.	
Strategic Risk Register (Current) (Compliance/regulatory, people, technical, strategic (Audit & Risk committee) Cyber security Council systems and or processes are compromised by cyber crime resulting in significant financial and or business impact.	IM Business Continuity Plan: The IM team are developing a BCP to align the technical IT recovery procedures to the overall enterprise BCP. This will include: a communication plan -prioritising the critical systems for recovery first; regular tests of back up and recovering procedures- simulations with various scenarios. This impacts the consequence by detailing priority procedures in the case of an incident, ensures systems/process are fully functional and that staff are aware of their responsibilities and trained to manage them in the case of an event.	

Table 2. Examples of Council strategies to address disruptive technology

Waikato District Council Strategy/Plan	Coverage/Statement
Waikato District Council IS strategy, December 2016	We will improve the speed and accuracy of information delivered to digital devices. We will do this in an intuitive, predictive and visual way that gives us insights into our business. We will refresh and invest in enterprise grade systems that are cloud based and can scale up and down as required, to manage our core services, including GIS and asset information. Our physical records will continue to be scanned and categorised. Each core system will benefit from an active business and information owner.
Customer Delivery Business Plan 2016/17	 a) Increased bandwidth to all sites (roll over from FY15/16) b) Thin clients replaced with PCs (roll over from FY15/16) c) Customer Count tool introduced into all sites (roll over from FY15/16) – supports first point resolution and resource planning/management d) Electronic notice boards/customer communication at all sites (roll over from FY15/16) e) Call Centre status boards throughout offices (roll over from FY15/16) * all initiatives in conjunction with IM Team

4. FUTURE WORK

Staff are considering disruptive technology as part of business planning, albeit not necessarily framed in this way. It is intended to refine the focus by:

- 1. As part of the 2018-2028 Activity Management Plan ("AMP") update, workshops are held with staff from all Council groups outlining the importance of disruptive technology and its implications for Council. This will help all staff understand from a risk perspective Council's approach to the impact of disruptive technology.
- 2. The workshops will contribute to the fine-tuning of potentially economically disruptive technologies for Council, as presented in Table I above. This will confirm the list of priorities to be addressed in AMP update and subsequent Long Term Plan proposals to Council.

3. An external speaker, specialising in disruptive technology and their implications, make two all staff presentations on topics selected and prioritised during the workshops in Table I above to maximise the staff buy-in.

5. ATTACHMENTS

NIL



Open Meeting

ToAudit & Risk CommitteeFromTony Whittaker
General Manager Strategy & SupportDate08 March 2017Chief Executive ApprovedYReference #GOV1318Report TitleConflicts of Interest

I. EXECUTIVE SUMMARY

Council has placed more emphasis on having a complete and robust interests register over the last few years. This register now includes key management who are involved in decision making. Questions are often asked by Councillors in regard to the breadth of interests required to be disclosed, including what specifically is a conflict of interest. The attached article written by the Independent Commission Against Corruption was seen to clearly articulate the position and hence is offered to the Committee for their information.

2. **RECOMMENDATION**

THAT the report from the General Manager Strategy & Support be received.

3. ATTACHMENTS

Independent Commission Against Corruption Article: Identifying and managing conflicts of interest in the public sector

JULY 2012

Identifying and managing conflicts of interest in the public sector



INDEPENDENT COMMISSION AGAINST CORRUPTION

As a public official, you have a responsibility to perform your role efficiently, effectively and fairly. Your personal situation, inclination or preferences and those of your family, friends and associates should not influence you when making decisions in a public capacity.

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Who does this apply to?

The information in this brochure is aimed at public officials working in the NSW Public Service. Those public officials working in local government should refer to the information on conflict of interests contained in the model Code of Conduct and the *Local Government Act 1993.*

What is a conflict of interest?

A conflict of interest occurs when you as a public official are in a position to be influenced, or appear to be influenced, by your private interests when doing your job. A conflict of interest can involve avoiding personal disadvantage as well as gaining personal advantage. A conflict of interest is not limited to circumstances where you, or others close to you, may gain or lose financially from your public position. It includes situations where your official decisions may be influenced by your private interests in social and professional activities, and interests with individuals or groups, including family and friends.

What are the different types of conflicts of interest?

Actual conflict of interest	Perceived conflict of interest	Potential conflict of interest
You hold a	You hold a public	You hold a
public position	position where	public position
where right	you appear to	where you may
now you can	be influenced	in future be
be influenced	by your private	influenced by
by your private	interests when	your private
interests when	doing your job.	interests when
doing your job.		doing your job.

Is it wrong to have a conflict of interest?

Conflicts of interest are not wrong in themselves. It is how they are managed that is important.

Public officials are also private individuals, and there will be occasions when your own private interests may come into conflict with your public duty to put the public interest first at all times. All conflicts of interest must be disclosed and effectively managed.

Why managing a conflict of interest properly is important

The community has a right to expect that public officials at all levels perform their duties in a fair and unbiased way, and that the decisions they make are not affected by self interest, private affiliations, or the likelihood that they, or those close to them, will financially gain or lose. The perception that a conflict of interest has influenced an outcome can undermine public confidence in the integrity of the organisation and the individual.

Unresolved or badly managed conflicts of interest can actually lead to corruption or abuse of public office, or the perception that these exist.

What is my responsibility?

Where reasonably possible, you should avoid conflicts between your personal interest and the public interest. Where conflicts of interest cannot reasonably be avoided, you have a responsibility to identify and effectively manage any conflicts of interest you may have, in consultation with your supervisor.

How do I know if I have a conflict of interest?

A personal interest outside of work does not automatically mean that there is going to be a conflict of interest. If something arises at work that is associated with those interests, then you may have a conflict of interest.

There are some factors you need to consider when making a decision about whether your public duty and your private interests are in conflict. Factors that may put you at risk of a conflict of interest include:

- financial and economic interests, such as debts or assets
- a family or private business
- a secondary employment commitment
- affiliations with for-profit and non-profit organisations, sporting bodies, clubs and associations

affiliations with political, trade union or professional organisations, and other personal interests

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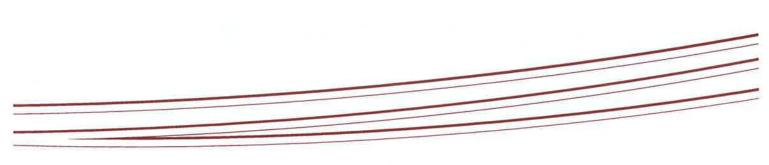
- obligations to professional, community, ethnic, family or religious groups in a personal or professional capacity
- obligations because of relationships to people living in the same household
- enmity towards, or competition with, another individual or group
- significant family or other relationships with clients, contractors or other staff working in the same (or a related) organisation
- highly specialist skill(s) in an area where demand for the skill(s) frequently exceeds supply
- future employment prospects or plans (that is, post-separation employment).

It is not always possible to avoid having a conflict of interest, particularly in smaller communities or specialist industries. What is important is what you do, or do not do, once you become aware of the conflict of interest.

What do I do if I identify a conflict of interest?

Depending on the legislation and policy that apply to your organisation generally, you would be required to formally register details of the conflict of interest and report the conflict to your supervisor. Situations might arise where you may need to disclose your conflict of interest verbally (for example, in a meeting), though, you should also ensure your disclosure is properly recorded.

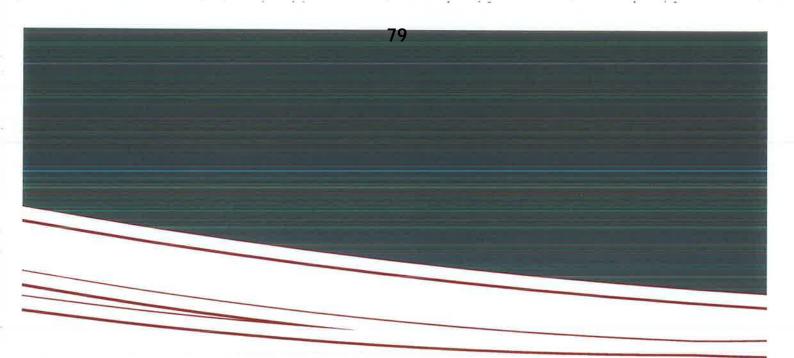
It is always better that you disclose and discuss a possible conflict of interest rather than conceal the matter. There are a number of strategies that you and your supervisor can choose from, to help you manage your conflict of interest effectively and transparently.



What strategies can I use to manage a conflict of interest?

Strategy	What this strategy means	When it is most suitable
Register *	You formally register details of the existence of a possible or potential conflict of interest.	 For very low-risk conflicts of interest, Where recording the conflict of interest is sufficient to maintain transparency.
Restrict	Restrictions are placed on your involvement in the matter to oversee part or all of the process that deals with the matter.	 You can be effectively separated from parts of the activity or process. The conflict of interest is not likely to arise frequently.
Recruit	Recruit a disinterested third party to oversee part or all of the process that deals with the matter.	 It is not feasible or desirable for you to remove yourself from the decision-making process. In small or isolated communities where your particular expertise is necessary and genuinely not easily replaced.
Remove	You choose to remove yourself completely from the matter.	 For ongoing serious conflicts of interest, where restriction or recruitment of others is not appropriate.
Relinquish	You relinquish the private interest that is creating the conflict.	Where your commitment to public duty outweighs your attachment to your private interest.
Resign	You resign from your position with the agency.	 No other options are workable. Where you cannot or will not relinquish your conflicting private work. Where you prefer this course as a matter of personal principle.

* All conflicts of interest should be registered, regardless of what additional management strategies are adopted



Frequently asked questions about conflicts of interest

Why should I worry about conflicts of interest?

Managing conflicts of interest is important because the public has entrusted you and others with powers and public resources, and expects you to carry out your official duties without bias.

Isn't it better to keep quiet about conflicts of interest?

No, it is better to manage conflicts of interest transparently. Things kept behind closed doors are more likely to attract suspicion and allegations of possible misconduct.

What can I be asked to do if I have a conflict of interest?

You can be asked to register the interest, to discuss it with your supervisor, and come to some agreement about how the interest will be managed.

Do I still need to disclose a conflict of interest if there is no financial benefit or loss involved?

Yes, conflicts of interest cover a range of activity that is wider than financial concerns – therefore your personal relationships, feelings and associations should also be taken into account.

Where do I get more information about conflicts of interest?

Contact the Independent Commission Against Corruption on 02 8281 5999 or 1800 463 909 (outside the Sydney metropolitan area) and ask for the corruption prevention advice line. Email queries can be sent to icac@icac.nsw.gov.au. Information is available on the Commission's website via the online toolkit, www.icac.nsw.gov.au/preventing-corruption/ knowing-your-risks/conflicts-of-interest.



INDEPENDENT COMMISSION AGAINST CORRUPTION

Level 21, 133 Castlereagh Street Sydney, NSW, Australia 2000

Postal Address: GPO Box 500, Sydney, NSW, Australia 2001

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E: icac@icac.nsw.gov.au www.icac.nsw.gov.au

Business Hours: 9.00 am - 5.00 pm Monday to Friday



Open Meeting

То	Audit & Risk Committee
From	Tony Whittaker
	Tony Whittaker General Manager Strategy & Support
Date	08 March 2017
Prepared by	Madelina Baena-Escamilla Continuous Improvement Analyst
	Continuous Improvement Analyst
Chief Executive Approved	Y
Reference #	1692091
Report Title	Update on Process Audit and Quality Improvement

I. EXECUTIVE SUMMARY

This report outlines work planned and undertaken to support quality improvement throughout the business. It covers the process audit programme, policy review and process improvement.

2. DISCUSSION

2.1. Process Audit Programme

The process audit programme for 2016/2017 is in progress; 15 audits were scheduled to audit 34 business processes. During the first quarter, a total of six audits (covering 15 Processes) have been carried out and another two (covering 7 processes) are in progress. The outcome of the six completed audits is six major non-conformance, five minor non-conformance and 36 recommendations for improvement. One Audit hasn't yet been done and will be included in the next audit schedule (see attached Process Audit Status (2016-2017) Activity Report).

Auditor training has been scheduled to be undertaken in the next three months. This will increase the number of auditors from 18 to 30, and allow more audits to be undertaken.

2.2. Policy

The work programme for reviewing internal and external Council policies is progressing as planned.

One new policy has been published this quarter:

Drug and Alcohol Policy

Page I

One policy has been reviewed:

Records Management Policy

New policies being created are:

- Child Protection Policy
- Disability Policy

Other policies being reviewed are:

- Lone Worker Policy
- 'Long Long' (long sleeve/long pants) Policy
- Harassment and Bullying Policy
- Corporate Uniform Policy
- Community Engagement
- Internet Use Policy
- Email Use Policy
- Email Release Policy
- Remote Access Policy

2.3. Process Improvement Forum

Excellent progress against process capture and improvement has been achieved in the past quarter. The main focus has been to review and re-publish out of date processes (processes that haven't been reviewed in the past 12 months). There are currently 941 published processes mapped (an additional 70 since December 2016) and 100 processes in draft status (20 less than in December 2016). To date, we have 1100 processes in Promapp.

The Improvement Forum meets on a monthly basis to drive our quality management system and encourage process mapping and continuous improvement. Process champions have been delivering training to new staff and helping process experts to finalise and publish their processes focussing on the Business Continuity processes.

The Promapp World initiative to inform all staff about new processes and policies has received good feedback after five months of the commencement of the initiative. These stories have being written by Process Champions and have cover different topics of interest such as the new Drug and Alcohol Policy and Working Alone Policy.

Process champions have been attending the Promapp Regional User Group, this is a hub of excellence where process experts from different organization get together to discuss case studies and share ideas. We have shared the results that we have accomplished in process mapping and process improvement. In the region, Waikato District Council is recognised as a leader in robust business processes and improvement tools and has been a reference site for other council and private organisations.

3. RECOMMENDATIONS

THAT the report from the General Manager Strategy & Support be received.

4. ATTACHMENTS

Process Audit Status (2016-2017)

Process Audit Programme 2016-2017 - Audit Status @ 08-03-2017 Status of agreed actions following Process Audit recommendations

						Outcome	-	
Macro process	Processes	owners and experts	Auditors	Date of Audit/ Status	Major NC (high)	Minor NC (medium)	Rec (Low)	Progress update
Community Funding	 Manage WDC Heritage Fund Provide Funding Accountability Report for all Grants Received 	Lianne Van Den Bemd Vishal Ramduny	Pam Osborne Elijah Tamati	14 th Nov 2016	0	1	7	Audit was carried out, and owners have made changes in the process. Audit is closed
Human Resources	<u>Apply for Parental leave</u>	Vanessa Jenkins Hayleigh Evett	Phyllis Hefang and Ross Bartley	25 & 30 August 2016	0	0	4	Audit was carried out, and owners have made changes in the process. Audit is closed
Zero Harm	 <u>Report and Investigate a Near</u> <u>Miss Work Event (Non Injury)</u> <u>Report and Investigate a Work</u> <u>Incident or Injury</u> <u>Manage Lone Workers</u> 	Kevin Lockley Kylie Anderson	Helen Geddes Kay Warren	твс				Date hasn't been scheduled yet. Due to staff time availability. This audit will be included in the next schedule.
	<u>Report a Notifiable Incident or</u> <u>Event - Injury, Illness or Incident</u>	Kevin Lockley	Debbie Dalbeth Madelina Baena- Escamilla	18 & 20 July 2016	0	0	8	Audit was carried out, and owners have made changes in the process. Audit is closed
Water Compliance and Income	 <u>Raise a New Water Connection</u> <u>Application</u> <u>Application for Restrictor</u> <u>Removal</u> <u>Manage Water Relief Application</u> 	Rosemary Towl Karl Pavlovich	Claude Shaw Phyllis Hefang	24 & 31 January 2017				First meeting has been carried out. Another interview needs to be done.
Roading	<u>Review Crash Analysis</u>	Nathan Hancock Wayne Furlong Paul Harrison	Adam Van Niekerk Deidre MacDonald	31st January & 08 March 2017				Audit has been done, Auditors are writing the report.

					Outcome				
Macro process Processes		owners and Auditors Date of the Date of th		Date of Audit/ Status	Major NC (high)	Minor NC (medium)	Rec (Low)	Progress update	
Business Continuity	 <u>Assess - Understand the</u> <u>significance and impact of the</u> <u>incident</u> <u>Plan - Understand how we are</u> <u>going to resolve the incident</u> <u>Resolve the incident</u> 	Kelly Newell Kurt Abbot	Debbie Dalbeth Reece Turner	30 November 2016	7	0	14	Audit was carried out, and owners have made changes in the process. Audit is closed	
Contractor Zero Harm	 <u>Carry out Contractor H&S</u> <u>Induction</u> <u>Carry out Initial Contractor</u> <u>Health & Safety Assessment</u> <u>Inspect/Audit Contract Health &</u> <u>Safety</u> <u>Record Contractor's H&S</u> <u>performance</u> 	Reuben Rink Kevin Lockley	Sandra Kelly Susan Toogood	22 February 2017				The initial interview has been done; some documents need to be checked in another interview to be schedule.	
	<u>Calculate KPI - Percentage of</u> <u>satisfied customers as per the</u> <u>council housing for the elderly</u> <u>survey</u>	Stephanie Courtney Gavin Benseman	Madelina Baena- Escamilla	10/02/2017	2	2	6	Audit has been done, Report has been sent to Process owner and experts.	
	<u>Calculate KPI - Percentage</u> progress of the Playground Strategy implementation plan	Duncan MacDougall Mark Janssen	Madelina Baena- Escamilla	13/02/2017	0	0	3	Audit has been done, Report has been sent to Process owner and experts.	
Parks and Facilities	 <u>Calculate KPI - Percentage of</u> <u>customers who are satisfied with</u> <u>the pool facility</u> <u>Calculate KPI - Percentage of</u> <u>natural areas (categorised in</u> <u>parks strategy) which have had</u> <u>restoration efforts undertaken</u> <u>Calculate KPI - Percentage of</u> <u>time that pool water meets the</u> <u>NZS5826 Part 1 Water Standards</u> <u>: 2000 code of practice for the</u> <u>operation of swimming pools</u> 	Elton Parata Annetta Purdy Ben Wolf	Madelina Baena- Escamilla	14/02/2017	2	1	8	Audit has been done, Report has been sent to Process owner and experts.	

						Outcome		
Macro process	cro processes Processes Owners and experts Auditors Date of Audit/ Status		Major NC (high)	Minor NC (medium)	Rec (Low)	Progress update		
Housing for the Elderly	 <u>Housing for the Elderly -</u> <u>Application Process</u> <u>Housing for the Elderly - Tenant</u> <u>Unit</u> <u>Housing for the Elderly -</u> <u>Terminate Tenancy</u> 	Gavin Benseman Samantha Frederick Stephanie Courtney	Beryl McAuley Christine Cunningham	20/02/2017	0	0	12	Audit has been done, Report has been sent to Process owner and experts.
Front Counter	 <u>Manage Front Counter</u> <u>Customers</u> <u>Create a Visitor in the Visitor</u> <u>Management System</u> <u>Create a Visit in the Visitor</u> <u>Management System</u> 	Elizabeth Saunders Jenna I. Smith Sally Clark Reece Turner	Sarfraz Hapuku Sharlene Jenkins	16 Jan 2017	2	2	5	Audit has been done, Report has been sent to Process owner and experts.
Environmental Health	Manage certificate Processes: Process Application for Manager's Certificate Issue Manager's Certificate Process Manager's Certificate Renewal Issue Manager's Certificate	Sudhir Kumar Alan Parkes Christine J. Cunningham	Annetta Purdy Teressa Howe	20/02/2017	0	0	2	Audit has been done, Report has been sent to Process owner and experts.
Total		1	1		13	6	69	



Open Meeting

То	Audit & Risk Committee
From	Tim Harty
	General Manager Service Delivery
Date	13 March 2017
Prepared by	Karl Pavlovich
	Compliance Income Team Leader
Chief Executive Approved	Y
DWS Document Set #	Audit & Risk Committee (22/03/2017)
Report Title	Drinking Water

I. EXECUTIVE SUMMARY

Over the 2014/15 and 2015/16 compliance years, Council has spent approximately \$7 million on a range of projects that have delivered tangible improvements to the standard of drinking water provided to residents. Most significantly, Council has been able to raise its level of compliance with New Zealand Drinking Water Standards. With continuing improvements to services and reporting, all Council supplies are expected to meet full compliance with New Zealand Drinking Water Standards in the 2016/17 compliance year.

2. **RECOMMENDATION**

THAT the report from the General Manager Service Delivery be received.

3. BACKGROUND

Hastings District Council recently experienced a Campylobacter outbreak in the Havelock North Community. This Community is supplied from three bores and faecal contamination of these is thought to be the likely cause of the outbreak. The incident has drawn significant media attention and has increased public awareness of the quality of its drinking water supply.

This report is intended to update Councillors on the compliance status of Council's drinking water supplies and also an update on the works undertaken over recent years to ensure public safety and compliance.

4. DISCUSSION

4.1 COMPLIANCE

The October 2007 (Drinking Water) amendment to the Health Act 1956 served to focus the attention of drinking water suppliers on compliance with the New Zealand Drinking Water Standards (2005). The amendment announced a legislative compliance date for all water suppliers, determined by the size of the supply. Waikato District Council was categorised as a medium supplier and had a compliance date of I July 2010.

In June 2009 the legislative compliance dates were revised and Council received a revised compliance date of 1 July 2013.

Results presented in the Ministry of Health's Annual Report on Drinking-Water Quality 2013-2014, show that Council was unable to meet compliance with Drinking-Water Standards. A summary of these results showed that only 67% of zones (a zone is an isolatable section of the distribution or piped network) supplied by Council met Bacteriological compliance requirements while no zone met the protozoological compliance requirement, (though this result does improve to 17% when zones supplied by the Hamilton City Water Treatment Plant are taken into consideration).

Several barriers to compliance were identified including inadequate treatment, lack of reliable online monitoring data and human error. In order to remove these barriers a multifaceted works programme was developed and approved by Council. A majority of works required were completed over the 2014/15 and 2015/16 compliance years.

4.2 WORKS PROGRAMME

Notable works completed in the 2014/15 compliance year include:

- The replacement of the Raglan Water Treatment Plant with a new treatment plant fitted with UV disinfection units capable of deactivating protozoa present in the source water (\$850,000).
- Installation of a bulk watermain from Watercare's Tuakau Water Treatment Plant to Pokeno (\$2,400,000), allowing the Pokeno Water Treatment Plant to be decommissioned and risk profile of the supply significantly reduced.
- Further to these physical works, Council undertook an upgrade of the SCADA network (\$400,000) to improve connectivity by removing reliance upon radio communication, while standardising plant control with the installation of Archestra control software across all sites. This work significantly improved the reliability of the online data required to confirm compliance.

 Installation of a bulk watermain from Watercare's Tuakau Water Treatment Plant to Tuakau (\$907,000).

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- Installation of a bulk watermain from the Ngaruawahia Water Treatment Plant to Hopuhopu (\$1,635,000) and subsequent decommissioning of both the Peter Springs and Hopuhopu Water Treatment Plants.
- Also during this time Huntly, Ngaruawahia and Te Kauwhata Water Treatment Plants received new online instrumentation (\$400,000) providing redundancy in measurement for both compliance and process control.

These works have resulted in significantly improved compliance with technical aspects of the Drinking-Water Standards, highlighted by an increase in both bacteriological and protozoological zone compliance to 94% and 83% respectively in quarter 4 of 2015/16.

Further improvements scheduled for completion in the 2016/17 compliance year include:

- Construction of a bulk watermain from the Huntly Water Treatment Plant to Hopuhopu (\$3,715,000), building redundancy in supply.
- Installation of UV treatment to the Huntly Water Treatment Plant (\$600,000), providing additional disinfection.
- Bleed valve installed in the Rotongaro zone to improve turnover of water in this zone and maintain residual chlorine levels.

4.3 **OVERALL COMPLIANCE**

4.3.1 Compliance Matters

Current compliance with New Zealand Drinking Water Standards to date for the 2016/17 compliance year is as follows:

- Bacteriological compliance, 50% for plant, 100% for zone.
- Protozoological compliance, 75% for plant, 94% for zone.

4.3.2 **Protozoological Compliance**

Protozoological compliance is not at 100% due to an issue at the Ngaruawahia Water Treatment Plant during quarter I. An operator performed a verification on a turbidity meter without removing the attached filter from service, resulting in a transgression. – Reviewed by Drinking Water Assessors, plant remains compliant.

Protozoological compliance is at 75%/94% due to UV faults experienced in Raglan over quarter I and 2 of 2016/17. These faults were the result of some programming errors in the treatment plant code, which have now been corrected. These incidents are also under review by drinking water assessors for compliance.

4.3.3 Bacteriological Compliance

Bacteriological plant compliance is 50% (two plants out of four) due to chlorination issues experienced at the Huntly and Raglan plants.

- The Huntly Water Treatment Plant experienced process issues during July 2016. While bringing the plant back online the residual chlorine concentration dropped below drinking water standards. This water was not delivered to the community and the event is being reviews by Drinking Water Assessors for compliance.
- Following the November 2016 Kaikoura earthquake, the Raglan Water Treatment Plant was unable to treat the spring water and was shutdown until conditions improved. While bringing the plant back online the residual chlorine concentration dropped below drinking water standards. This water was not delivered to the community and the event is being reviews by Drinking Water Assessors for compliance.

4.3.4 Overall

The rate of progress has been rapid and condensed, providing improvements quarter on quarter, unfortunately improvements on this time scale are not accurately reflected in current Ministry of Health reporting. With drinking water compliance measured annually, there has been little change in overall statistics presented in Annual Reports on Drinking-Water Quality 2014/15 and 2015/16. Improvements must be in place and operating for a full compliance year before the benefits become visible in the Annual Report on Drinking-water Quality. Furthermore, compliance with New Zealand Drinking-Water Standards is a very blunt measurement of public health risk. Drinking water compliance the public health risk.

It should be emphasised that whilst Council work to the New Zealand Drinking-Water Standards, non-compliances can, and do, occur. If and when these events do occur, Council has a number of robust emergency response plans that minimise the impact of these events and protect public health.

4.4 Risk

Though improvement has been achieved through investment in infrastructure, Council supplies have remaining risks that need to be managed or mitigated. All Council supplies share the common risks of non-compliance due to human error or mechanical failure as well as the potential zone infection by water carriers (water tankers) resulting from inadequate sanitary practice. Council continues to work to mitigate these wider risks through the implementation of Water Safety Plans across all supplies, development and maintenance of robust promapp processes, continual operator training, improvement to plant programming, instrument maintenance and working closely with Waikato District Health Board to have all water carriers within the District registered with Drinking Water New Zealand.

In addition to these wider risks, more specific risks exist associated with the failure of treatment processes utilised at Council treatment plants or management of distribution zones. The significance of these risks is a function of their likelihood and the potential impact on the community. Taking these factors into account, the most significant specific risks are:

 Ngaruawahia Water Treatment Plant relies upon a single protozoological barrier, failure of this barrier may expose our second largest population to protozoa such as Giardia or Cryptosporidium.

- Huntly Water Treatment Plant, until the UV upgrade is completed, also relies upon a single protozoological barrier.
- Port Waikato Water Treatment Plant is a remote site serving a population with significant seasonal population change and while the plant has multiple treatment barriers, these treatment processes require intensive management to be effective.

A risk assessment table for all Council supplies is presented in appendix 2.

5. CONCLUSION

Recent events in Havelock North have focussed attention on the robustness of water supplies. This Council has invested in projects that provide significant benefits to drinking-water quality; and where possible, decommissioning smaller treatment plants, replacing them with bulk supply.

6. ATTACHMENTS

- Compliance dashboard
- Risk table



		ng Water Incident		17	
Area	Period	Part 4 Incident	Part 5 Incident	Zone Incident	Total
	Jul-Sep	3	0	0	
Huntly	Oct-Dec	0	0	0	(
(4 zones)	Jan-Mar	0	0	0	(
	Apr-Jun	0	0	0	(
	Jul-Sep	0	0	0	(
Ngaruawahia	Oct-Dec	0	0	0	(
(2 zones)	Jan-Mar	0	0	0	(
	Apr-Jun	0	0	0	C
	Jul-Sep		المتكر ومروجا وموسية	0	C
Onewhero	Oct-Dec		1.5.5	0	C
(1 zone)	Jan-Mar			0	0
	Apr-Jun			0	0
	Jul-Sep			0	0
Port Waikato	Oct-Dec			0	0
(1 zone)	Jan-Mar			0	0
	Apr-Jun		and the second second	0	0
	Jul-Sep	0	3	0	3
Raglan	Oct-Dec	1	4	0	3 5
(1 zone)	Jan-Mar	0	1	0	1
	Apr-Jun	0	0	0	0
	Jul-Sep		1. To 1. To 1. To 1.	0	0
Te Akau	Oct-Dec			0	0
(1 zone)	Jan-Mar		in the second	0	0
	Apr-Jun			0	0
	Jul-Sep	0	0	0	0
Te Kauwhata	Oct-Dec	0	0	0	0
(2 zones)	Jan-Mar	0	0	0	0
	Apr-Jun	0	0	0	0
AND A DECK	Jul-Sep			0	0
Tuakau/Pokeno	Oct-Dec			0	0
(3 zones)	Jan-Mar			0	
all and all all	Apr-Jun			0	0
and a new o	Jul-Sep			0	
outhern/Western	Oct-Dec			0	0
Districts	Jan-Mar			0	0
(3 zone)	Apr-Jun	and the second s		0	0

Data Powered by: wateroutlook

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	Population					Treatment					Retie
	served								Health Risk Presented by		hea
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Raglan	3187	UV	CI		Faults, UVI, UVT, Turb, Flow	Dosing pump failure, empty cylinders			Moderate (Unlikely x Minor supply)		1137 110
Te Akau	45	Cartridge filters	Cl		Breakthrough, incorrect filters	Dosing pump fallure, incorrect batching, empty dose tank			Low (Possible x Neighbourhood supply)		
Ngaruawahia	6150	Coag, sed, filt	CI		Dosing pump failure, floc carryover, poor filter performance	Dosing pump failure, empty cylinders			Moderate (Possible x Medium supply)		
Huntly	7340	Coag, sed, filt	CI		Dosing pump failure, floc carryover, poor filter performance	Dosing pump failure, empty cylinders		Water Safety Plan, Training, Maintenance	Moderate (Unlikely x Medium supply)		
Te Kauwhata	2149	Coag, sed, filt	UV	Cl	Dosing pump failure, floc carryover, poor filter performance	Faults, UVI, UVT, Turb, Flow	Dosing pump failure, empty cylinders	program	Low (Rare x Minor supply)	Poor sanitary practice	SOP develo
Onewhero	36	Cartridge filters	UV		Breakthrough, incorrect filters	Faults, UVI, UVT, Turb, Flow			Low (Possible x Neighbourhood supply)	used when connecting to the reticulation system,	infrastructu carriers req
Port Waikato	60	Coag, sed, filt	Cl	UV	Dosing pump failure, floc carryover, poor filter performance	Dosing pump failure, incorrect batching, empty dose tank	Faults, UVI, UVT, Turb, Flow		Low (Unlikely x Neighbourhood supply)	low chlorine	registration DWS compl sampling pla
Hopuhopu	729	Coag, sed, filt	CI		Dosing pump failure, floc carryover, poor filter performance	Dosing pump failure, empty cylinders		Plant decomissioned, replaced by bulk supply from Ngaruawahia	Moderate (Unlikely x Minor supply)		Serubung bi
Pokeno	519	Cartridge filters	UV	CI	Breakthrough, incorrect filters	Faults, UVI, UVT, Turb, Flow	Dosing pump failure, incorrect batching, empty dose tank	Plant decomissioned, replaced by bulk supply	Moderate (Unlikely x Minor supply)		
Tuakau	3942	сі			Dosing pump failure, empty cylinders			from Watercare	Moderate (Possible x Minor supply)		
	10 10		_								
Key Geographic Sta	Description		1 Cluster								
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UVI	UV intensity		untina	resuits	in a ranure to deliver designed functiona	antà					
UVT	UV transmis										_
1		sion									
Turb	Turbidity										

Reticulation	1	-
Management	Health Risk Presented	Overall Health Risk
	Moderate (Possible x Minor supply)	Moderate
	Low (Possible x Neighbourhood supply)	Low
	Moderate (Possible x Medium supply)	Moderate
veloped for	High (Likely x Medium supply)	Moderate
on water Icture, water	Low (Possible x Minor supply)	Moderate
require tion with DWNZ.	Low (Possible x Neighbourhood supply)	Low
mpliant zone g plan	Low (Possible x Neighbourhood supply)	Low
P Pion	Moderate (Possible x Minor supply)	Moderate
	Moderate (Possible x Minor supply)	Moderate
	Moderate (Possible x Minor supply)	Moderate
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WAIKATO DISTRICT COUNCIL 3 WATERS COMPLIANCE

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AKAU				NI C C	True Laws. C	ne l		Reservoirs to here sampling rationets installed
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	Open Meeting Audit & Risk Committee Gavin Ion Chief Executive 10 March 2017 Kevin Lockley
То	Audit & Risk Committee
From	Gavin Ion
	Chief Executive
Date	10 March 2017
Prepared by	Kevin Lockley

Chief Executive Approved Reference # Report Title

Gavin Ion Chief Executive 10 March 2017 Kevin Lockley Zero Harm Manager Y 1693492 Zero Harm Update

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I. EXECUTIVE SUMMARY

The purpose of this report and its attachments is to provide an update on current health and safety performance. Council recognise that compliance is essential but they aspire to achieve best practice in health and safety performance and to develop a sustainable culture that is supported by sound policies, systems and procedures that enables best practice health and safety workplace behaviours by all workers. Contractors, volunteers and visitors. Council aim for more than just compliance by observing the principle that workers and others should be given the highest level of protection against harm to ensure their health and safety and welfare.

2. **RECOMMENDATION**

THAT the report from the Chief Executive be received.

3. BACKGROUND

Managers continue to carry out Safety conversations.

The Chief Executive continues to carry out due-diligence duties through site visits and carrying out safety conversations with both staff and contractors.

The new reporting and recording software programme has now been rolled out to Managers and staff. Staff are now recording incidents and near miss reports in the new programme.

A "Safe Start" Induction programme was carried out in January to re-focus staff back into working mode. A session was held specifically for Councillors when they recommenced the year. The day involved staff undertaking a one hour must see safety induction session which covered aspects such as critical risks, policies, incident reporting requirements, health and wellness, risk and hazard identification. Invited suppliers and business partners put up stalls and displays in the committee rooms where staff could discuss numerous aspects of health, wellness and safety with them. The Drug Detection Agency also put on a sausage sizzle. All of the outer offices and libraries held similar sessions for the inductions. Tuakau, also had the suppliers set up in the town hall. The Executive Leadership Team were represented at all the outer office sessions.

All staff and management training has been undertaken for the implementation of the Council Drug & Alcohol programme which commences on the first of April.

Health and Safety presentations have been carried out to Community Boards and Committees outlining roles and responsibilities, and changes to the legislation. A session has also been held for Hall Committees. A further session to cover Halls in the Northern part of the District is planned.

Over Speed Reporting

An opportunity for improvement is the ongoing reduction of excessive speeding against Council critical risk (driving). Currently managers carry out safety conversations with drivers who exceed 104km and up to 109km. Where speeds of over 110km are recorded General Managers discuss the circumstances around the speeding events in a formal manner. We are discussing a consequential driver training course with our provider for recidivist drivers who appear to be not taking on board the strong safety message to alter their at risk driving behaviour. It is proposed that we will reduce the limits over time to further encourage speed reduction.

Injury Statistics

Near Miss reporting over the last three months has shown an increase. There is an opportunity to change the focus of just near miss reporting as a number to promoting the identification of hazards/risks associated with a near miss. The change in focus may assist to clarify the actual definition of a near miss and the presence or absence of a defence mechanism which would culminate in a damage or injury event or not. Council currently records and reports on the Alliance statistics. City Care contract statistics are now also included in monthly dashboard reports to the Executive Leadership Team and Councillors.

Over this reporting period there has been one lost time injury, where an animal control officer sustained a back injury when attempting to lift a heavy dog into his vehicle. All other injuries were either superficial not requiring first aid or first aid was administered. Whilst there are encouraging signs, it is recognised that there is still a significant amount of work to be done to achieve Best Practice in not only systems and processes but more importantly consistent safe and healthy behaviours across the staff and contractor work streams.

4. DISCUSSION AND ANALYSIS OF OPTIONS

4.1 DISCUSSION

This report is to assist Councillors with their due diligence requirements as Officers. The report should start the conversation and provide opportunities for Councillors to raise questions and discuss progress.

4.2 **OPTIONS**

Council could choose to accept the report or not. Council could ask for additional information if needed.

5. CONSIDERATION

5.1 FINANCIAL

There are no direct financial requirements identified in this report.

5.2 LEGAL

This report is prepared as part of assisting Council with compliance with Health & Safety at Work Act 2015.

Considerations

The following are considerations in relation to the role of the Executive Leadership Team and Councillors as officers.

- Are we confident that good health and safety management is working?
- How can we improve our worker engagement and risk management to identify opportunities and improvements?
- What can we do more effectively to eliminate health risks?
- Are our health and safety reports providing sufficient insight and understanding to ensure the Executive Leadership Team and Councillors can make informed decisions?
- What further activities need to take place to ensure our practices and systems remain fit for purpose?
- Where do we currently sit on the "what does good look like" continuum?

5.3 STRATEGY, PLANS, POLICY AND PARTNERSHIP ALIGNMENT

Council has a Zero Harm Strategy which forms the basis of our health & safety systems and philosophy. An internal Zero Harm Strategic Plan is also in place and has been updated to reflect the strategies for the next 12 months.

5.4 ASSESSMENT OF SIGNIFICANCE AND ENGAGEMENT POLICY AND OF EXTERNAL STAKEHOLDERS

Highest	Inform	Consult	Involve	Collaborate	Empower							
levels of			\checkmark									
engagement												
	Councillors, as Officers under the Health & Safety at Work Act 2015											
	are required to undertaken due diligence to ensure appropriate health &											
	satety syster	ns are in place	and operating.	safety systems are in place and operating.								

State below which external stakeholders have been or will be engaged with:

Planned	In Progress	Complete	
	✓		Internal
	✓		Community Boards/Community Committees
			Waikato-Tainui/Local iwi
			Households
			Business
	✓		Other Please Specify

Council engages with our Community Boards and Community Committees to ensure they are clear on their requirements. Council also undertakes audits and safety conversations in relation to our contractors.

Hall Committees have also been engaged with a further session scheduled for later in March.

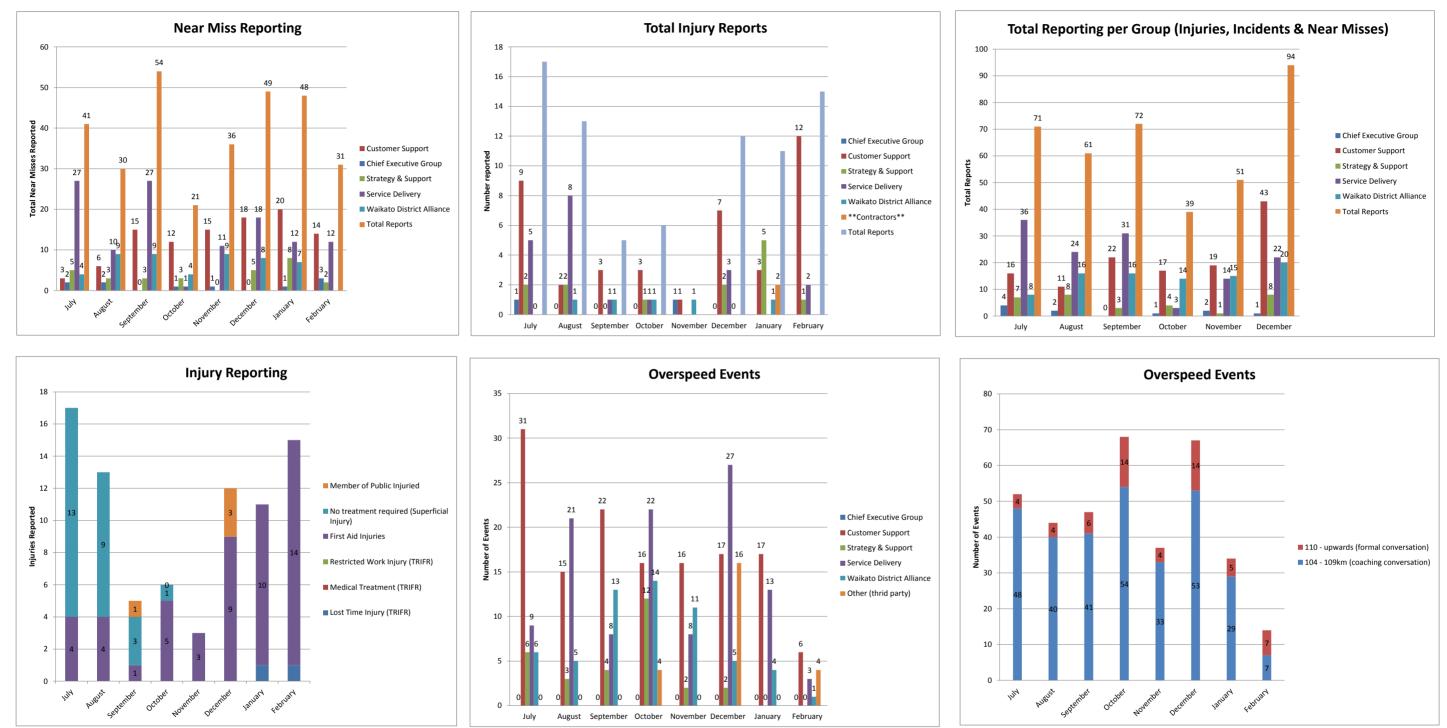
6. CONCLUSION

This report provides an update on progress with our Zero Harm systems and processes, and monthly statistics progress

7. ATTACHMENTS

Zero Harm Dashboard – Quarter Three (January-March 2017)

Zero Harm Dashboard - Quarter Three (January - March 2017)



"Work safe, home safe"



Open Meeting

То	Audit & Risk Committee
From	Tony Whittaker
	General Manager Strategy & Support
Date	07 March 2017
Prepared by	Melissa Russo
	Corporate Planner
Chief Executive Approved	Y
Reference #	1691389
Report Title	Update on progress against Audit issues

I. EXECUTIVE SUMMARY

All issues raised by the various recent audits have been combined into one report for ease of tracking.

This purpose of this report is to provide an update on progress against issues raised through the audits. The audits included are:

- Annual Report process
- Cyber security systems
- Risk management
- Project management
- Procurement and contract management
- Council's Internal audits

2. **RECOMMENDATION**

THAT the report from the General Manager Strategy and Support be received.

3. SUMMARY OF PROGRESS

The table below outlines the areas and status of issues - either completed, in progress or pending. Pending issues are yet to be determined if the recommendation will be actioned as the issue may be addressed through other controls. The pending actions are at this stage not a priority, however will be reviewed periodically):

Areas of audit issues

	Pending	Work in progress	Complete	Total
Audit New Zealand	2	14	9	25
Cyber security	19	7	4	30
Internal audit	0	5	0	5
Procurement and contract management	0	11	I	12
Risk management	12	14	11	37
Project management	7	19	7	33
Total	40	70	32	142

Of the 'work in progress' issues, many of these are scheduled to be completed by the end of this financial year and the remainder being scheduled to be completed by the end of the calendar year.

The Information Management team have recently secured additional resourcing to assist in the delivery of the virus protection programme.

Organisational risk awareness and understanding of risk management is progressing. Training, proposed to commence March 2017, will facilitate this ongoing progress. A continued focus on change management aims to successfully embed risk management into business activity. Monthly reports of progress to the Executive Leadership Team is in place and good progress is being made.

Progress against Project Management audit recommendations required full engagement of key stakeholders to facilitate implementation of associated change. This engagement has now been achieved (with support from external project management advisors) and progress is being made to deliver outcomes associated with the recommendations.

4. CONCLUSION

There is a total of 142 issues that have been raised by various audits across the organisation 32 of which are complete. Staff are continuing to make progress on the remaining issues.

5. ATTACHMENTS

Progress against audit issues

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Audit Area	Domain	Recommendation / Action Required	Proposed Action / Plan	Who	By When	Status	Comn
AuditNZ	AMP's	Include assumptions - reliability of data in the Parks and Property AMP		Parks and Property		Complete	
AuditNZ	Back Ups	Regular restores from back up tape		Julian		Complete	Need to calenda
AuditNZ	BC and DR Planning	Complete the move to Tuakau	Card on Kanban	Julian	End of March 2017	Work in progress	Final re move
AuditNZ	BC and DR Planning	Finalise BCP work	Card on Kanban	Julian	End of March 2017	Work in progress	This is v aplicati
AuditNZ	BC and DR Planning	Develop IM BCP process	Develop plan that outlines the processes required within the business to utilise the DR installation.	Mark	End of April 2017	Work in progress	Initial d develop individu
AuditNZ	BC and DR Planning	Test	Card on Kanban	Julian	End of March 2017	Work in progress	Test of is done
AuditNZ	Contract management	Develop and implement a contract management system					
AuditNZ	Controls	Establish IT security and risk calendar	Draft calendar - done Review existing processes Hold first calendar review in first week of March	Mark	End of March 2017	Work in progress	Include back up reviews
AuditNZ	IT Service performance	Monitoring and reporting	IM Service Performance Review (36)	Mark	End of March 2017	Work in progress	Overall
AuditNZ	IT Service performance	Change Management	IM Service Performance Review (36)	Mark	End of April 2017	Pending	Overall
AuditNZ	Segregation of duties	Establish controls for a 'one up' approach to the approval purchase orders	Incorporate, where practicable, into EPO project Design reports for audit checks	Alison	30-Jun-17	Work in progress	The cur purchas not hav someor manage higher o else in t receipt anythin set up o
AuditNZ	Service performance reporting	Ensure reports generated from the CRM system are extracting the correct information		Debbie		Complete	
AuditNZ	Service performance reporting	Job summary sheets that record the date and times the job started and finished				Work in progress	Mobile will pro audit tr
AuditNZ	Systems Updates	Establish maintenance window		Mark		Complete	
AuditNZ	Systems Updates	Create IT asset register	Device Review (work program item #22)	Phil	Jun-17	Work in progress	Registe being v Other d

iments

to schedule these every 6 months - add to IT dar

replication testing is occuring before physical

is validating that the DR solution covers the key ations required in business unit BCP plans.

I discussions have been held. Plan to be loped and validated with business units against idual team plans

of DR installation will be completed once move ne.

de the regularly required tasks on a calendar, up test, DR test, account reviews, policy ews. Etc.

all Service Performance Review is underway

all Service Performance Review is underway

current EPO setups allow for 92 staff to raise hase orders on behalf of council. 6 of these do have delegations so have 'write-only' access (i.e. eone will always have to approve), 16 are agers who can only approve (this forces the er delegation levels to always have someone in the transaction) and the remainder can raise, ipt and approve within their delegation hing higher requires a one-up approval. It is the up of these 70 staff that the team will review.

ile solution is currently being implemented and provide us with the relevant information and an trail.

ter of most PCs exists in ManageEngine. This is validated for the PC replacement this year. r devices need a 'stocktake' to be completed.

AuditNZ	Systems Updates	All devices have virus definition updates and patches applied	Item 14 on Technical Work Program	Jaysal	Jun-17	Work in progress	Current
AuditNZ	Update IT Policies	Email use policy		Mark	February 2017	Complete	
AuditNZ	Update IT Policies	Email release policy		Mark	February 2017	Complete	
AuditNZ	Update IT Policies	Internet use policy	Replace with Acceptable User policy	Mark	End of March 2017	Work in progress	
AuditNZ	Update IT Policies	Records Management policy		Jan	February 2017	Complete	
AuditNZ	Update IT Policies	Remote access policy	Revise policy	Mark	End of March 2017	Work in progress	
AuditNZ	User Access	Set up new user account review	User Management (29) item on the technical work program	Niall	End of March 2017	Work in progress	New for validate
AuditNZ	User Access	Terminated user account review	User Management (29) item on the technical work program	Niall		Complete	A recen regular
AuditNZ	User Access	Review and update IM induction document / process	User Management (29) item on the technical work program	Niall		Complete	Induction in use. (
AuditNZ	User Access	Regular review of user accounts	User Management (29) item on the technical work program Need to schedule these regularly - add to IT calendar	Niall	End of March 2017	Work in progress	Current as abov
AuditNZ	User Access	Review of users who have remote access	User Management (29) item on the technical work program	Niall	End of March 2017	Pending	
Cyber Security	Bus Own and Direction for IT	Rec01: Formalise business owners for major information assets and information systems	 Develop the IM Service Catalogue, identify system / module owners as part of that and validate the ownership with ET and other organisation leaders. Within the Our Plan roadmap, develop data management disciplines and ensure there are owners for all master data categories. 	Mark	1. End of March 2017 2. TBC	 Work in progress TBC 	1. Servi
Cyber Security	Bus Own and Direction for IT	Rec02: Business owners (from Rec01) formalise information security requirements for the assets owned		GMs	Pending outcome of above recommendation	Pending	
Cyber Security	Bus Own and Direction for IT	Rec03: Integrate ICT governance in to council governance processes	Recommendation still being considered	ET		Pending	
Cyber Security	Bus Own and Direction for IT	Rec04: Develop ICT strategy for coming financial year		ET		Complete	
Cyber Security	Bus Own and Direction for IT	Rec05: Review and report on internet sites visited to gauge use of shadow IT and cloud		IM	Jun-17	Pending	

nt tools being reviewed for suitablility.
form has been drafted. Overall process being ated with other stakeholders.
ent review was completed. Will be part of ar review calendar going forward.
tion documentation has been reviewed and is e. Continuous improvements are underway.
ntly this is done informally. Formalising process ove (terminated user account review)
vice Catalogue progress has been slow.

Cyber Security	Bus Own and Direction for IT	Rec06: Raise awareness on ICT strategy and use of shadow IT and cloud	ICT strategy has been presented to Leadership Forum and IM team - Dec 2016	Mark	Jun-17	Work in progress	Part of t roadma
Cyber Security	Bus Own and Direction for IT	Rec07: Utilise ICT strategy and resource management to identify resource gaps		Mark	Jun-17	Pending	Resourc roadma
Cyber Security	Bus Own and Direction for IT	Rec08: Improve employee engagement	This is being addressed by the 'Way we do things around here.	ET & HR		Work in progress	
Cyber Security	Bus Own and Direction for IT	Rec09: Identify and address cases of skills dependency in IM team	1. Additional resource approved to deliver technical work program - Oct 2016 2. Wider review of IM team make-up to be completed	Mark	1. Done 2. June 2017	1. Complete 2. Pending	Resourc roadma
Cyber Security	Bus Own and Direction for IT	Rec10: Review, improve and periodically test Business Continuity Plans		OPPS/IM		Work in progress	
Cyber Security	Employee and contractor practices	Rec01: Review and improve employee agreements and induction in terms of information security requirements, record keeping and outlining disciplinary processes	Recommendation still being considered	HR/IM		Pending	
Cyber Security	Employee and contractor practices	Rec02: Improve management of disgruntled employees	Recommendation still being considered	HR & leaders		Pending	
Cyber Security	Employee and contractor practices	Rec03: Undertake targeted training for employees who handle sensitive information and/or for instances of poor practices.	Recommendation still being considered	HR, IM, & Comms		Pending	
Cyber Security	Employee and contractor practices	Rec04: Outline information security requirements in employees job descriptions	Recommendation still being considered	HR		Pending	
Cyber Security	Employee and contractor practices	Rec05: Improve clarity and transparency around security roles and responsibilities	Recommendation still being considered	HR & ET		Pending	
Cyber Security	IM practices	Rec01: Undertake periodic testing of Disaster Recovery Plans		IM	End of March 2017		See ear
Cyber Security	IM practices	Rec02: Review and improve how privileged access is granted to improve accountability	User Management (29) item on the technical work program	Niall	End of April 2017	Pending	
Cyber Security	IM practices	Rec03: Review and improve removal of access for critical ICT applications following role changes	User Management (29) item on the technical work program	Niall	End of April 2017	Pending	
Cyber Security	IM practices	Rec04: Develop ICT strategy for coming financial year	ICT strategy has been developed - December 2016	ET & IM		Complete	
Cyber Security	IM practices	Rec05: Undertake periodic pointwise testing of backups	Tested in November 2016	IM		Complete	
Cyber Security	IM practices	Rec06: Review and improve asset management, monitoring and capacity planning (including for environment support systems)	1. Device Review (22) item on technical work program2.More will be required.	ІМ	Jun-17	Work in progress	See IT A
Cyber Security	IM practices	Rec07: Undertake periodic penetrations tests for critical systems, internal applications interfaces and internet-facing systems	1. Arrange a pen test through external provider (perhaps Lateral Security)	ІМ	Jun-17	Pending	

of the Our Plan work and IT strategy napping.
irce model for IT function to be part of nap.
rce model for IT function to be part of nap.
arlier DR / BCP actions under Audit NZ
Asset Register under Audit NZ



Cyber Security	IM practices	Rec08: Review and improve communications plan for incident response		IM & Comms	End of April 2017	Work in progress	See ear
Cyber Security	IM practices	Rec09: Review and improve monitoring for security incidents, incident response plan, patch management, change control and release management processes		IM	Jun-17	Pending	
Cyber Security	IM practices	Rec10: Undertake usability and security design review for online services and public website		IM	End of March 2017	Work in progress	Firewal underw
Cyber Security	IM practices	Rec11: Include link to scam advice on public website and in emails to members of the public		IM	End of April 2017	Work in progress	Plans fo staff.
Cyber Security	Mngt of external suppliers	Rec01: Review and improve contracts with service providers for coverage of information security requirements, service transition and termination and right to audit	Recommendation still being considered	Legal & Procurement		Pending	
Cyber Security	Mngt of external suppliers	Rec02: Review Service Level Agreements with service providers and include penalties where relevant	Recommendation still being considered	Procurement & IM		Pending	
Cyber Security	Mngt of external suppliers	Rec03: Undertake service provider management including performance monitoring	Recommendation still being considered	Procurement & IM		Pending	
Cyber Security	Mngt of external suppliers	Rec04: Perform pre-planning for cases of change to service provider and review contracts for changes required	Recommendation still being considered	Procurement & IM		Pending	
Cyber Security	Mngt of external suppliers	Rec05: Review contractor agreements in terms of information security requirements, record keeping and non-disclosure agreements	Recommendation still being considered	Legal & Procurement		Pending	
Cyber Security	Mngt of external suppliers	Rec06: Require vendors to use secure development practices and vulnerability testing for applications	Recommendation still being considered	Legal & Procurement		Pending	
Risk Management	Risk Strategy & Appetite	Create a clear linkage to WDC's strategic objectives and/or community outcomes to ensure that all risks associated with strategic objectives have been completely considered and are being mitigated appropriately. We recommend that risks are considered as key aspects of the annual planning and discussed by the Executive Team (ET) and the Council when setting up strategic objectives and/or community outcomes. Other opportunities include framing key planning activities such as asset management and district plan development such that risk discussions become more live and visible.	This workshop is planned for April.	ET & Risk Coordinator		Pending	
Risk Management	Risk Strategy & Appetite	Establish and document a Risk Appetite Statement (RAS) for key areas of risks which are approved by the Council.	Engage KPMG to facilitate workshop with ET and produce RAS	ET & Risk Coordinator	30-06-2017	Work in progress	KPMG t ET 02/0
Risk Management	Risk Strategy & Appetite	Ensure alignment between the documented risk appetite levels and relevant Council policies.		Risk Coordinator	30-06-2017	Pending	

arlier DR / BCP actions under Audit NZ
all and other security reviews currently rway.
for increased security awareness training for

IG to be engaged for this process. Discussed with 2/02/2017 & confirmed with Tony 27/02/2017

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Risk Management	Risk Strategy & Appetite	Communicate the RAS to the wider organisation, or at least mid tier management levels.		ET	30-06-2017	Pending	
Risk Management	Risk Strategy & Appetite	Ensure that the RAS is reviewed at least annually or updated for any significant change.	To be added to annual risk calendar as part of BAU	Risk Coordinator	30-06-2017	Pending	
Risk Management	Risk Governance	The existing Risk Management Framework and Policy are dated February 2013 and March 2014 respectively. These need to be updated. This presents an opportunity for WDC to align the framework with the strategic objectives of the organisation and the key elements of a risk management process.	Included in the Organisational Risk Awareness project.	Risk Coordinator	30-06-2017	Work in progress	In prog drafted To CE a
Risk Management	Risk Governance	Currently, risk management activities appear to be driven by the risk coordinator who has a function reporting line to the General Manager, Strategy and Support. Risk Management should be championed at the ET level.		ET	30-03-2017	Complete	Worksh their re ET to ch promot and sup
Risk Management	Risk Governance	WDC should adopt a formal risk operating structure to ensure that there is a clarity of roles, responsibilities and accountabilities for the different parties who are part of WDC's risk management framework.	Included in the Organisational Risk Awareness project. The structure is clearly defined in the existing risk management framework and will be socialised as part of the project. This will include a request from ET to support the formation of the Risk Forum (as per the existing documentaion).		30-03-2017	Complete	Reques meeting launch
Risk Management	Risk Governance	The risk operating structure should be communicated to all staff so that they understand their roles and responsibilities and how can they contribute making WDC's risk management more robust and effective. For example risk owners responsibilities for risk treatments.	Included in the Organisational Risk Awareness project. The structure is clearly defined in the existing risk management framework and will be socialised as part of the project. This will include a request from ET to support the formation of the Risk Forum (as per the existing documentaion).		30-03-2017	Complete	Reques meetin launch
Risk Management	Risk Governance	Council level thresholds for escalation and reporting are not defined. Currently there is quarterly reporting on the organisational risk register (ORR).	Included in the Organisational Risk Awareness project as part of review. From perspective of reporting, Framework does capture reporting levels and delegations.	Risk Coordinator & ET	30-12-2017	Complete	

ogress as part of ORA. Reviewed policy has been ted and approved by Continuous improvement. E and CWP next.

shop with ET 02/02/2017 to establish basis for reporting requirements & established need for champion risk. This will be achieved by notion and prioritisation of risk related activities upport of the ORA.

est for formation of Forum approved during ET ing 02/02/2017. ORA to develop training and h Forum.

est for formation of Forum approved during ET ing 02/02/2017. ORA to develop training and th Forum.

Risk Management	Risk Governance	Council level thresholds for escalation and reporting are not defined. Currently there is quarterly reporting on the organisational risk register (ORR).	Included in the Organisational Risk Awareness project. Reporting frequency is capturedin Risk Management Framework. Reporting media to be defined and approved.	Risk Coordinator & ET	30-12-2017	Work in progress	Fram Meet requi explo revie
Risk Management	Risk Governance	Risk management understanding and capability is limited in the business to use risk management in business as usual activities. There is a need for more guidance and coaching for the business to enable risk information to be used in day to day business and decision making.	Included in the Organisational Risk Awareness project. Training to be provided to all staff involved in risk management.	Risk Coordinator	30-12-2017	Work in progress	Train comp Curre meet Lead
Risk Management	Risk Culture	There was consistency among the ET in terms of WDC's risk management which was generally described as "reactive, static, mechanical, conservative". Management is good at managing risks when presented with risk information. However, a fully engaged, proactive management of risks needs to be practiced. Leadership of risk management is lacking in the business. Risk management is viewed as a "laborious' process particularly to update the operational risk register on a 6 monthly basis.	Included in the Organisational Risk Awareness project. Training to be provided to all staff involved in risk management. ET to promote reviews and implement reporting requirements related to risk register development and maintainance.	Risk Coordinator	30-12-2017	' Complete	Requ Fram Post sche
Risk Management	Risk Culture	Encourage a more open risk communication, dialogue across the organisation to embed risk management in day to day activities.	Included in the Organisational Risk Awareness project.	Risk Coordinator	30-12-2017	Complete	Mee Poke Ongo
Risk Management	Risk Culture	Consider regular risk communication and updates from the CE to 'walk the talk' demonstrate good leadership, commitment and a strong tone at the top. Guidance may be taken from the current approach to Health and Safety Management which appears to be well embedded and understood across the organisation.		ET		Complete	Discu ORA that
Risk Management	Risk Culture	Conduct formal risk workshops at least annually to allow for an open risk discussion. Employee engagement is developed through participation in the risk identification and management process.	To be added to annual risk calendar as part of BAU	Risk Coordinator	30-06-2017	Pending	Caler
Risk Management	Risk Culture	Risk Management should be formalised as part of the team meeting agendas. Responsibility to lead the risk discussion should be rotated among the team to shift the mindset that risk management is primarily led by senior management.		ET		Work in progress	Discu begin sche draft

amework clearly captures thresholds for reporting. eeting ET on 2/2/2017 to explore reporing quirements. Meeting with BA 23/02/2017 to plore reporting formats. Draft formats ready for view.

aining package to be created post RMF review mpleted and RAS captured.

arrently, knowledge gaps being identified through eetings with Business Unit Managers and Team aders as operational registers are being reviewed.

quirement for 6 monthly review captured in mework.

st ORA this will be implemented by ET and neduled training provided as part of ORA outputs.

eetings will Unit Managers & TL's along with ET. keno Growth workshops an example. ngoing.

cussions with ET 2/2/2017. Engagement plan for A includes schedule and mediums. ET confirmed at risk management will be prioritised as a topic.

lendar expected to be finalised by 01/07/2017

scussions with ET 2/2/2017. Monthly reporting to egin with ORA progress. Post ORA reporting hedule to be implemented. BA has created first aft of reporting format.

Consider introducing risk management into employee Risk FT Risk Culture performance plans to encourage the desired risk Pending Management management culture and behaviours. Consider enhancing the dissemination of risk management information down through business line personnel. For instance, at each ARC meeting, 4 top Risk key risks are selected for detailed discussion and Risk Culture A&R Pending Management action monitoring. Management should consider sharing the information and actions arising from these discussions with the business line personnel. Included in the Organisational Risk Risk management awareness sessions and trainings Risk Awareness project. Risk Risk Culture should be considered to enhance risk management 30-12-2017 Work in progress Management Training to be provided to all staff Coordinator capability in the organisation. involved in risk management. The ET strategic risk register is out of date. The operational risk registers were created about 2 years Included in the Organisational Risk Risk Risk Assessment ago. While there is a process to review these on a 6 Risk Awareness project. 30-06-2017 Complete Coordinator Management & Measurement monthly basis, the review by the business is more Reviews commence February 2017 from a compliance to process perspective rather than a robust review of existing and emerging risks. Included in the Organisational Risk Awareness project. There is a lack of understanding and clarity around the Training to be provided to all staff Risk Risk Assessment distinction between 'issue' and 'risk'. There is a Risk 30-06-2017 Complete involved in risk management. Management & Measurement combination of risks and issues reported together as Coordinator Diagram to be created to risks. demonstrate risk, issue and continuous improvement cycle A facilitated risk workshop to derive a top-down view of risks is important to help deliver on WDC's Risk ET & Risk Risk Assessment objectives. This will ensure that ET and the ARC focus 30-06-2017 Pending Management & Measurement on strategic risks and provide monitoring and Coordinator guidance for risks which matter the most to organisation's strategy. Annual bottom-up risk workshops facilitated by the To be added to annual risk risk team should be considered to update the current calendar as part of BAU. First operational risk registers. This will also enable an Risk Risk Assessment review included in the Risk organisational wide risk management culture and 30-06-2017 Work in progress & Measurement facilitation of risk insights from the front line. Any Management Organisational Risk Awareness Coordinator project. Reviews commencing significant risks identified during this process should February 2017 be included in the ORR.

Training package to be created post RMF review completed and RAS captured.

Currently, knowledge gaps being identified through meetings with Business Unit Managers and Team Leaders as operational registers are being reviewed.

All operation register reviews completed 01/03/2016.

Monthly discussion and 6 monthly review to be implemented as part of ORA reporting schedule and training.

Draft created for inclsion in training to provide understanding of difference and how processes should work towards continuous improvement. Introduced to ET 2/2/2017.

Risk Management	Risk Assessment & Measurement	Going forward, a consistent approach should be adopted for business unit/functional risk registers. A clear guidance should be provided to business units regarding developing their business unit risk registers including frequency and roles and responsibilities.	Included in the Organisational Risk Awareness project. Training to be provided to all staff involved in risk management.	Risk Coordinator	30-12-2017	Work in progress	Frame Risk ca
Risk Management		The programme/projects risks should be consolidated and aggregated to ensure effective reporting of programme/project risks. A portfolio view of all programme/project risks should be developed and only top programme/project risks should be reported to the ARC.	To be raised with Project Management Forum	Project Management Forum	30-03-2017	Work in progress	See PN
Risk Management	Risk Assessment & Measurement	Update and revise the risk matrix to ensure that it caters to effective assessment and measurement of strategic and operational risks of WDC.	Included in the Organisational Risk Awareness project.	Risk Coordinator	30-03-2017	Work in progress	Under
Risk Management	Risk Management & Monitoring	Risk treatments do not always refer to specific action plans, policies or processes. There is a lack of understanding from risk owners on the risk treatments required and any impact on BAU.	Included in the Organisational Risk Awareness project. Training to be provided to all staff involved in risk management.	Risk Coordinator	30-12-2017	Work in progress	To be i
Risk Management	Risk Management & Monitoring	Support and assistance should be provided by the risk team to identify appropriate risk mitigations and treatment plans to manage risks		ET		Work in progress	Risk Fo risk str Curren facilite with ris and do Draft p on hov
Risk Management	Risk Management & Monitoring	Management should be report on the effectiveness of the treatment plans particularly those relating to the key strategic risks	Training. Create templates for action plans.	ET		Work in progress	Templa Growt
Risk Management	Risk Management & Monitoring	A process to test or validate the effectiveness of management's current activities to mitigate or reduce risk to acceptable levels should be considered (i.e. Internal Audit). These processes are relied upon by Council, ET, and external parties to gain confidence in the appropriateness and effectiveness of risk mitigation, responses, and action plans.		ET		Pending	
Risk Management	Risk Reporting & Insight	Review the current risk reporting to ARC and ensure there is a consistent criteria based on which key risks are selected for quarterly reporting. The criteria should be discussed and approved by the ARC.		ARC, ET and Risk Coordinator		Pending	

nework review including scheduled requirement. calendar development to provide schedule.

PM work plan.

lerway. First matrix review conducted 3/3/2017.

be included in training.

Forum not yet implemented although is part of structure.

rent practice is for Risk Coordinator to arrange, lite and promote all risk management associate n risk tool and to coach/assist in the identification documentation of risks and treatments.

ft process being developed to provided guidance now to seek support.

nplates being drafted. To be trialed with Pokeno wth Forum 7/3/2017. To be included in training.

Risk Management	Risk Reporting & Insight	Council and ET reporting processes need to be defined so that there is alignment with Council expectations and risk appetites. Council and ET's risk reporting requirements are vital to the effective discharge of their risk oversight responsibilities. It is also focused on supporting decision making.	Included in the Organisational Risk Awareness project.	ET & Risk Coordinator		Pending	
Risk Management	Risk Reporting & Insight	The number of key controls reported to the ARC should be reviewed. Management may want to report key risks identified as a result of the top down risk identification and assessment once implemented.		ET		Pending	
Risk Management	Risk Reporting & Insight	A process has not yet been identified for monitoring or reporting incidents. An incident monitoring process for all risk areas of the organisation, including reporting processes needs to be implemented.	Included in the Organisational Risk Awareness project.	Risk Coordinator	30-12-2017	Work in progress	Forma been i include identif proces contex evalua require
Risk Management	Risk Reporting & Insight	Opportunities to improve include greater focus on future risk issues (i.e. forward-looking key risk indicators, scenario analysis, etc.) and a comprehensive single view of risks.				Complete	This w organi
Risk Management	Data & Technology	Little awareness of Promapp as the central repository of risks. Ensure that staff are aware and use Promapp as a central repository rather than maintaining their own repositories of risk information.	Included in the Organisational Risk Awareness project. Training to be provided to all staff involved in risk management.	Risk Coordinator	30-12-2017	Complete	Proma will be 2/2/20 them a caturin report forma
Project Management	Methodology	Project Reporting - Specify information which must be included in project reports, frequency of reporting, and how reporting should differ based on the nature of the project, audience reported to etc. Link this aspect to approved templates to facilitate consistency across the organisation.		PMF	ТВА	Pending	Repor define and ap agreer
Project Management	Methodology	Resource Management - While resource allocation will differ considerably across enterprise, explain the key methods and how capacity is managed in total. Also, provide useful checklists for resource requirements and costing methods.	Recommendation to be developed by PMF and presented to ET.	ET and PMF		Pending	

mal incident reporting processes have recently in implemented within the organisation. ORA to ude a process review to identify if incidents relate ntified risks and how to engage the evaluation cess with risk/incident management in the itext of CI. This will also require a process for luating if the possibility of incident recurrance uires escalation onto the risk register.

will be added to future works programme as the anisational maturity evolves

mapp has built in risk training programme. This be included as part of overall training package. /2017 ET agreed that Promapp will be used by m and the organisation for the purpose of uring risks and that they will support use through orting requirements and non-acceptance of other mats.

orts have been created with specific information ined in fields. These reports need to be reviewed approved by PMF to ensure cross organisational eement.

Project Management	Methodology	Link to Contract Management expecations - Clarify Councils project governance and project management roles where some or all parts of a project are contracted out. For example, even though a project may be contracted out from a delivery perspective Council still requires visibility of risks which it continues to own.	Recommendation to be developed by PMF and presented to ET.	ET and PMF		Pending	
Project Management	Methodology	The guide appears to be a useful tool for inducting new project personnel. Consider explaining the concept of project portfolios at Council and how these fit within the organisational structure.	Workshop with PMF and key LTP contributers. First workshop 10/02/2017	PMA & Rocket Projects	30-06-2017	Work in progress	First w PMF ha workst recom April 2
Project Management	Methodology	Consider developing mandatory policies and linking the Guide to such policies as part of the overall strategy to improve project management culture.	Policies to be developed and implemented by PMF	PMF	30-12-2017	Work in progress	The on require
Project Management	Methodology	As part of the above recommendation, clarify how project stage gates are approved within the organisations delegation of authority. For certain high risk projects, stipulate the use of independent quality assurance for various parts (e.g. revalidating a business case proposal or reviewing project deliverables).	Workshop with PMF and key LTP contributers. first workshop 10/02/2017	PMA & Rocket Projects	30-06-2017	Work in progress	First w PMF ha workst recom April 2
Project Management	Methodology	Establishmenbt of an Entrprise Project Management Office (ePMO). Consider an ePMO's involvement in stage gate reviews to induce greater levels of quality and compliance with the Guide.	In consultation with ET and PMF this recommendation will not be applied. In line with culture incentives, a softer approach to implementation of project management methodologies and maturity development has been selected. The selected approach applies a learning culture that aims to develop capability through training and to implement a periodic peer/managerial/PMA quality and compliance audit	ET		Complete	The PN

t workshop 10/02/2017 F have developed project to create and develop kstreams to deliver against this ommendation. Work-streams to be completed by il 2017.

ongoing works within PMF will identify policy uirements and inform development of policy

t workshop 10/02/2017 F have developed project to create and develop kstreams to deliver against this ommendation. Work-streams to be completed by il 2017.

PMF has instead been implemented.

Project Management	Methodology	Increase awareness of the Guide through training sessions that include alinging it to how it can prevent common failures. This training must go beyond the methodology and cover the soft side of effective project management, for example, how to manage a disengaged sponsor.	Recommendation to be developed by PMF and presented to ET. Agreed options include implemenation of periodic (suggested 1/4ly) project management fundamentals training (facilitated by an external party) and regular custom internal group training sessions that promote the awareness of the Guide and application of the methodology. Individual coaching sessions to be facilitated ad-hoc where a requirement is identified by management.	PMF & PMA	30-12-2017	Work in progress	First v PMF ł works recon April 2
Project Management	Adoption of Framework	As part of strategy to improve culture, develop an awareness programme to educate project teams on the roles of the different components of the framework and the practical benefits. It is essential to de-couple the negative sentiments associated with the IPM from the rest of the framework and its significant benefits to Council.	Implemenation of periodic (suggested 1/4ly) project management fundamentals training (facilitated by an external party) and regular custom internal group training sessions that promote the awareness of the Guide and application of the methodology. Individual coaching sessions to be facilitated ad-hoc where a requirement is identified by management. De-coupling of the tool from methodology to be included as part of fundamental and custom training.	PMA	30-12-2017	Work in progress	De-co comm
Project Management	Adoption of Framework	Review the valuable feedback received from project teams on IPM. Consider whether the reasons for poor adoption are in fact valid and how this can be addressed with the tool or application of it. Where there is clearly a user perception gap, address this through the training programme.	Initial review has commenced (Sept 2016). Amendments applied to tool (in progress). Further reviews to be conducted with PMF as part of ongoing programme of works.	PMA & PMF	30-12-2017	Work in progress	Trail v tool ((vendo
Project Management	Adoption of Framework	Having addressed/identified the most suitable tool (IPM or other) to support project management, establish a roll out programme which fits with the project management training and awareness programme.	To be workshopped with PMF	PMF & PMA	30-12-2017	Pending	PMF f works recom April 2 Trail v tool (0 vendo

t workshop 10/02/2017

IF have developed project to create and develop orkstreams to deliver against this commendation. Work-streams to be completed by ril 2017.

-coupling of the tool from methodology has mmenced in coaching sessions.

ail version of cloud based project maangement ol (CAMMsProject) has recently been provided by ndor.

IF have developed project to create and develop orkstreams to deliver against this commendation. Work-streams to be completed by ril 2017. all version of cloud based project maangement of (CAMMsProject) has recently been provided by ndor.

			1	1	1	1	
Project Management	Adoption of Framework	Establish manadatory project management standards. This may create the perception of more administration for those who are not practicing good project management disciplines.	To be workshopped with PMF	PMF & PMA	30-06-2017	Pending	first w PMF h works recom April 2
Project Management	Adoption of Framework	Differentiate between the tool versus the framework.	De-coupling of the tool from methodology to be included as part of fundamental and custom training.	РМА	30-12-2017	Work in progress	De-cou comm
Project	Adoption of	Enroll project personnel to help pilot the tool to			20 42 2047	M/ 1 *	To be
Management	Framework	establish buy in.	To be workshopped with PMF	PMF & PMA	30-12-2017	Work in progress	progra
Project Management	Adoption of Framework	Ensure use of tool simplifies compliance with mandatory project management standards. A fit for purpose exercise is required to ensure the tool selected match the project type (e.g. capital works outsourced project)	To be workshopped with PMF	PMF & PMA	30-12-2017	Work in progress	
Project Management	Adoption of Framework	Ensure the tool has demonstrable benefits for the user to encourage voluntary adoption. This means targeting the pain points of project teams today. For example, the tool may integrate with finance system to track costs incurred, to avoid dual entry against budget. Another example is where the user can intelligently import an existing project plan that was externally developed.	To be workshopped with PMF	PMF & PMA	30-12-2017	Pending	
Project Management	Adoption of Framework	Win positive feedback from smaller user communities before rolling out too widely (given the diverse nature of projects at council).	To be workshopped with PMF	PMF & PMA	30-12-2017	Work in progress	PMF a Rocke on cha
Project Management	Adoption of Framework	Ensure that the tool is not overtly prescriptive and utilises consistent terminology to the messages contained within the Guide.	Initial review has commenced (Sept 2016). Amendments applied to tool (in progress). Further reviews to be conducted with PMF as part of ongoing programme of works.	PMA & PMF	30-12-2017	Complete	Note: tool is
Project Management	Practices	Establish an ePMO, with ultimate accountability at the organisational ET level, which has a clear mandate to delver increased levels of project success. As part of this, decide upon the style and model of ePMO. For example, a 'weather station' ePMO acts as a central information collector, analyser and reporter of enterprise activity. A 'control tower' ePMO adds high level direction to projects (i.e. recommends critical decisions to a governing body). A 'wind commander' ePMO also controls/owns resources.	In consultation with ET and PMF this recommendation will not be applied. In line with culture incentives, a softer approach to implementation of project management methodologies and maturity development has been selected. The selected approach applies a learning culture that aims to develop capability through training and to implement a periodic peer/managerial/PMA quality and compliance audit	ET		Complete	

t workshop 10/02/2017 F have developed project to create and develop rkstreams to deliver against this ommendation. Work-streams to be completed by il 2017.

coupling of the tool from methodology has nmenced in coaching sessions.

be conducted with PMF as part of ongoing gramme of works.

F and broader org project group established. ket Projects engaged to assist with project based change management.

e: This will be review again once new version of is decided and implemented.

Project Management	Practices	Involve th ePMO in reviewing projects and providing support. For example, the ePMO could be involved in reviewing deliverablea at phase gates and assessing performance against project management standards. For high risk projects, deploy independent quality assurance. All insights need to be looped back to training and wareness programme.	In consultation with ET and PMF this recommendation will not be applied. In line with culture incentives, a softer approach to implementation of project management methodologies and maturity development has been selected. The selected approach applies a learning culture that aims to develop capability through training and to implement a periodic peer/managerial/PMA quality and compliance audit	ET		Complete	
Project Management	Practices	Use a project manager accreditation process to allocate projects of varying difficulty/risk levels. This may simply involve the adoption of well-established industry qualification programmes.	To be workshopped with PMF	PMF & PMA	30-12-2017	Work in progress	PMF h workst recom April 2
Project Management	Practices	Establish training and awareness programme through which accreditation may be attained. The range of activities can vary and need not all be formalised. For example regular case studies of completed Council projects could provide valuable insights in terms of the importance of good project management. These should include risk management, stakeholder management, reporting, forecasting, contract negotiation and management.	To be workshopped with PMF Implemenation of periodic (suggested 1/4ly) project management fundamentals training (facilitated by an external party) and regular custom internal group training sessions that promote the awareness of the Guide and application of the methodology. Individual coaching sessions to be facilitated ad-hoc where a requirement is identified by management.	PMF & PMA	30-12-2017	Work in progress	PMF h workst recom April 2
Project Management	Practices	Encourage project managers to attend project management networking events where they can share their good and bad personal experiences for others to learn from.	To be workshopped with PMF	PMF & PMA	30-12-2017	Work in progress	PMF h works recom April 2
Project Management	Practices	Have project managers peer review projects to reinforce the project management steps and personally experience the effects of poor quality documentation. Training can be made engaging through combining peer review reports, post audit insights and networking events.	To be workshopped with PMF	PMF & PMA	30-12-2017	Work in progress	PMF h works recom April 2

F have developed project to create and develop kstreams to deliver against this ommendation. Work-streams to be completed by il 2017.

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Project Management	Practices	Regardless of project management systems used, projects should regularly report on issues and these should be visible to the ePMO. Aside from seeking help, this will facilitate root cause analysis and help to address any project management deficiencies. All projects should complete a lessons learned document at the end of the project to further uncover project management issues. New projects should be challenged at the start to see how they have prepared to utilise prior lessons learned.	This process and documentation is currently in place. Further development is scheduled to take place with PMF to ensure cross organisational buy-in.	PMF & PMA	30-12-2017	Work in progress	PMF worl reco April
Project Management	Practices	Specific training may be required where projects are contracted out. This is to ensure sufficient Council visibility of project mangement areas. The reporting should meet the informational needs of Council. For example, reporting on risks should align with Councils risk matrix so that projects can be measured consistently.	To be workshopped with PMF	PMF & PMA	30-12-2017	Pending	
Project Management	Practices	Undertake prescribed audits to ensure critical project planning documentation (e.g. project plans nad business cases) are retained so that the success of the project can be measured against planned benefits and success criteria.	To be workshopped with PMF	PMF & PMA	30-12-2017	Work in progress	PMF worl reco Apri
Project Management	Practices	Perform an organisation wide project management competency assessment that includes nominated project role definitions, to determine knowledge and skills gaps for the purpose of implementing targeted training.	In consultation with ET and PMF this recommendation will not be applied. In line with culture incentives, a softer approach to implementation of project management methodologies and maturity development has been selected. The selected approach applies a learning culture that aims to develop capability through training and to implement a periodic peer/managerial/PMA quality and compliance audit	ET		Complete	
Project Management	Practices	Where necessary, consider the use of fixed term project management specialists to run complex/high risk/resource intensive projects for the organisation.	To be workshopped with PMF	PMF & PMA	30-12-2017	Work in progress	PMF worl reco Apri
Project Management	Tool	Simplify IPM configuration to a basic version. It should identify the minimum requirements to manage projects across the majority of Council. Look to implement other features as user capability over project management improves, and linked to this the demands on the system functionality to keep pace with this.	Initial review has commenced (Sept 2016). Amendments applied to tool (in progress). Further reviews to be conducted with PMF as part of ongoing programme of works.	PMA & PMF	30-12-2017	Complete	

MF have developed project to create and develop orkstreams to deliver against this ecommendation. Work-streams to be completed by pril 2017.

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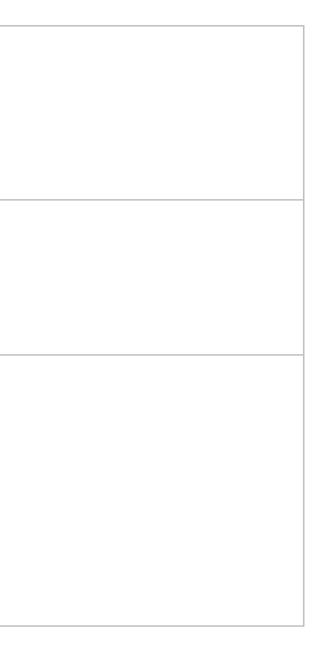
Project Management	Tool	Explore capability of CAMMS to provide a working prototype of the enhanced solution for WDC to trail. Determine whether the prototype meets requirements and any concerns with current version.	Conversations with CAMMs have been initiated.	PMA, CAMMS & IT	30-06-2017	Complete	
Project Management	Tool	Work through current frustrations with CAMMS and seek out quick wins (such as improving response times).	Conversations with CAMMs have been initiated.	PMA, CAMMS & IT	30-06-2017	Work in progress	
Project Management	Tool	Increase user awareness of tool functionality including understanding of basic project management terminology and relationship with WDC project management methodology.	To be workshopped with PMF Implemenation of periodic (suggested 1/4ly) project management fundamentals training (facilitated by an external party) and regular custom internal group training sessions that promote the awareness of the Guide and application of the methodology. Individual coaching sessions to be facilitated ad-hoc where a requirement is identified by management.	PMF & PMA	30-12-2017	Work in progress	PMF h workst recom April 2
KPMG review of Procurement and Contract Management	Procurement	Develop a procurement strategy and ensure consistency and clarity of procurement guidelines. 1) WDC should consider developing a procurement strategy. The strategy should set out: • procurement aims and objectives for the next 3 to 5 years • procurement vision • demonstrates the support by senior management • maps out the major initiatives to be addressed in the forthcoming 3 to 5 years • WDC's public commitment to maintain and improve the day-to-day procurement work within WDC and emphasises a determination to make continual improvements in that work • framework upon which WDC's procurement policy and procedures are based • objectives against which progress can be measured and reported 2) Review procurement guidelines to ensure there is consistency between procurement policy, the manual and ProMapp process descriptions.	The two recommendations above are noted and supported. The Procurement work programme for 15/16 includes a simplification review which will certainly address the inconsistency issues referred to in (2). Council did have a procurement strategy but it is accepted it is dated and needs review.	Raj Java	30-06-17	Work in progress	

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						1	
KPMG review of Procurement and Contract Management	Finance	 Implement a 'one-up' approval of PO and strengthen controls to detect breach of Delegation of Authority. 1) Update WDC's procurement policies and procedures to require invoices to be approved by "one-up" level for POs raised and approved by the same staff within their DoA. 2) Ensure that manual POs and invoices are checked by the Accounts Payable team on a random basis to ensure that the approval is in line with DoA until the ePO system is rolled out throughout the WDC. 	Council has a number of mitigating controls in place such as approved suppliers, management reporting against budget and delegation levels that reflect risk. However, staff acknowledge one up approvals do further reduce risk. This recommendation will be reviewed in light of further mitigation controls and ease of one up approvals available through electronic purchasing.	Whittaker	31-03-17	Work in progress	
KPMG review of Procurement and Contract Management	Finance	 Implement exception reporting over key supplier Masterfile changes. 1) Implement exception reporting to identify changes to supplier bank account details. 2) Review of the exception report should be performed by an independent staff on a regular basis. 	A new exception report has been created and this will be reviewed by the Financial Operations Team Leader on a daily basis.	Stephen Thompson	Done	Complete	
KPMG review of Procurement and Contract Management	Procurement	 Strengthen supplier vetting and improve monitoring over duplicate supplier accounts. 1) Update the new supplier form to include checks for conflict of interest declaration by staff involved in the procurement and approval by the Zero Harm team where applicable. 2) Instruct staff to complete new supplier form before committing WDC to procure goods/services from a new supplier. 3) Management should consider validation controls in the new ePO system to restrict entry of duplicate vendor records. Duplicate vendor records should be allowed in exceptional circumstances. 	enrolment. The current process does not include conflict of interest declaration and this will be	Raj Java	31-07-17	Work in progress	
KPMG review of Procurement and Contract Management	Procurement	 Perform supplier rationalisation and spend monitoring. 1) Perform supplier spend monitoring on a regular basis to identify opportunities for formalising arrangements with suppliers (including invoice consolidation) for potential cost savings and ensure appropriate levels of due diligence checks are performed. 2) Consider developing a preferred supplier listing over high volume procurement areas and communicate across the organisation to consolidate supplier spend for potential cost savings. 	A number of cost savings have and are being delivered via our lead and involvement in LASS procurement initiatives and one off projects/focus within Council. There is an opportunity to make significant further savings by supplier rationalisation and invoice consolidation. This will be reviewed when formulating the procurement strategy and steps will be identified to address these opportunities.	Raj Java	30-06-17	Work in progress	



KPMG review of Procurement and Contract Management	Procurement	 Address ePO system inefficiencies and ensure controls over manual PO books in the future. 1) Ensure that system inefficiencies and other issues identified during the pilot phase are rectified before the system is rolled out to rest of WDC. 2) Ensure that adequate controls are in place to limit the use of manual PO only in exceptional circumstances. 	Inefficiencies in electronic purchasing (ePO) are being addressed with the suppliers and will be addressed before final roll out. All manual purchase order books will be withdrawn on roll out.	Stephen Thompson	30-06-17	Work in progress
KPMG review of Procurement and Contract Management	Procurement	 Formalise and document acceptable variation threshold between PO and invoice value. 1) Formalise and document acceptable threshold for variation between PO and invoice value. Any variations above the threshold should be reviewed and approved as per DoA. 2) Ensure that the threshold consist of lesser of a percentage and a hard cap number. 	Agreed. This will be addressed during the ePO rollout and variations permitted will be formalised.	Stephen Thompson	30-06-17	Work in progress
KPMG review of Procurement and Contract Management	Finance	 Implement controls to detect duplicate invoice into FinanceOne. 1) Implement the following system controls within FinanceOne: Prevent entry of invoices with the same invoice number against the same supplier. Prevent entry of invoices dated prior to the PO date. 2) Alternatively, implement a monitoring reporting function to highlight all invoices dated prior to the purchase order date. 	Our current system matches invoice number, creditor and the date to identify duplicate entries. In all the cases reported as duplicates the dates were different and specific account numbers were entered against invoice numbers to allow periodic payments. We will review the risk involved and consider whether current practice needs to change.		30-06-17	Work in progress



KPMG review of Procurement and Contract Management	Contract management	Compliance with WDC's contract management policies and procedures needs to be strengthened. 1) Further investigation is required by Management to ensure that WDC's policies and procedures were followed in the above instances identified by Internal Audit through sample testing. 2) Reinforce WDC's procurement policies and procedures to staff. In particular, consider revising the one-page summary of the procurement requirements to clearly set out all procurement requirements. 3) Perform a sample-based check of all newly created contracts on a six-monthly basis to identify and reinforce compliance. 4) Ensure that adequate documentation and evidence of due processes followed by WDC staff is maintained to support WDC's decision relating to supplier contracts.	system will involve removing access for file storage in personal drives which will address the 'perceived' lack of documentation. The balance of the recommendations are being addressed through the procurement training and procurement 'simplification' process – which is a cross	Raj Java	30-07-17	Work in progress	
KPMG review of Procurement and Contract Management	Contract management	 Develop guidelines relating to tender evaluation team and criteria. 1) Formalise WDC's procurement guidelines relating to the composition of the tender evaluation team and weighting of tender evaluation criteria. For example, consider the following: Specify the minimum number of tender evaluation members depending on the value and risk of the procurement. Specify whether a finance team member and/or the Procurement Manager should be part of the tender evaluation team where the procurement reaches a certain value or risk threshold. Specify a default weighting to be applied for the tender evaluation criteria. Deviation from the default 	Noted. These recommendations will be addressed as part of the simplification review.	Raj Java	31-03-17	Work in progress	
KPMG review of Procurement and Contract Management	Contract management	 Implement a supplier performance measurement framework and strengthen supplier performance monitoring. 1) Develop and implement a performance management framework for measuring and monitoring contractor performance against agreed KPIs. This should form part of the Contract Management Policy. 	Noted and agree to develop and implement a performance management framework for measuring and monitoring contractor performance against agreed KPIs forming part of the Contract Management Policy.	Raj Java	30-06-17	Work in progress	



KPMG review of	Contract	Strengthen tracking of supplier spend.	Our procurement policy is based	Raj Java			
Procurement	management	1) Implement a regular spend analysis which should	on a value for a piece of work and				
and Contract		include:	not annual spends. In the example				
Management		Review of expenditure incurred by supplier. Where	cited above it appears that a				
		spend with a supplier is over the anticipated value,	number of individual jobs have				
		consideration should be made whether additional due	been allocated through multiple				
		diligence/checks needs to be performed in line with	purchase orders.				
		the policy.	Some steps have been undertaken				
		• Review of expenditure by category/nature of spend.	to enlist Tier 2 suppliers under a				
		Identify opportunities to consolidate spend with	main contractor like City Care to		31-03-17	Work in progress	
		suppliers.	carry out smaller jobs. This needs				
		 Review of expenditure by contracted and non- 	to be further strengthened.				
		contracted suppliers. Where spend with non-	This will be discussed with key				
		contracted expenditure exceeds a predetermined	stakeholders and improvement				
		threshold (e.g. \$50K), consider entering into	steps will be implemented.				
		negotiations with the respective supplier to formalise					
		a contract and agree better trading terms.					
Internal Audit	Community	One minor non-conformance in relation to the	Process will be reviewed and	Lianne van			See
	Funding	documentation used in the process "Provide Funding	documentation will be updated	den Bemd			
	Processes	Accountability Report for all Grants Received".					
		* The 'Funding Project Accountability" document					
		references the old public email address. This should					
		be updated with the new 'info@waidc.govt.nz' email			27-01-17	Work in progress	
		address.					
		* Clarify any Escalations Within Processes and Update					

ee proposed action/plan

Internal Audit	Business Continuity Processes	 4 major non-conformaces in the "Assess - Understand the significance and impact of the incident" process * Steps 1- 4 have not been rolled out to staff and training has not been provided yet. * Step 6a. During previous incidents a call centre representative has not been invited to updates * Step 6b. The incident Risk Profile tool has not been used. * Action Plans have not been created in the last two incidents. The current Action Plan template lacks clear direction of role specific tasks. 	 * The incident management process is scheduled to be rolled out to staff at Chamber Chat. Thereafter the training will be provided as part of the council induction programme (still to be discussed with HR). * Process needs to be followed. Consideration will also be given on Call Centre representatives potentially participating in the IMT. * Requires training and this has been included with the risk management rollout being undertaken. Training has been scheduled to show the IMT how to use the tool. * A process and training are required to detail how to create and develop an action plan. Clarity of direction and role specific tasks can be included in the process. Proposed incident and emergency management framework would also improve this by having staff experts in this task. 	Kurt Abbot / Kelly Newell	ТВА	Work in progress	See pro
Internal Audit	Business Continuity Processes	 2 major non-conformaces in the "Plan - Understand how we are going to resolve the incident" process. * Medium to long term planning during the event has not been consistently done. * No action plan documents have been created in this process. 	* Can be included in the Promapp process for development of the action plan or could be a linked process. Requires templates and guidance to assist in the requirements for longer term planning and at what stage initiation should be considered. Proposed incident and emergency management framework would also improve this by having staff experts in this task. * To be included in IMT training	Kurt Abbot / Kelly Newell	ТВА	Work in progress	See pro
Internal Audit	Business Continuity Processes	1 major non-conformaces in the "Resolve the Incident" process. *No documented action plans were created or executed	* To be included in IMT training	Kurt Abbot / Kelly Newell	ТВА	Work in progress	See pro

proposed action/plan

proposed action/plan

proposed action/plan

Internal Audit	Parks and	2 Major non-conformances in the "Calculate KPI -	Stephanie			See pro
	Facilities (KPI	Percentage of satisfied customers as per the council	Courtney /			
	Process)	housing for the elderly survey" process	Gavin			
		* Survey hasn't been carried out this year, the	Benseman			
		processes state that survey letters has to be sent on				
		the 3rd week of january but at the date of audit				
		(10/02/2017) this hasn't been done. In 2016 this was				
		done in June instead in the first quarter.		TDA	Mark in prograss	
		* Completed surveys from 2016 weren't saved in ECM		TBA	Work in progress	
		as per the processed state.				
		2 Minor non-conformances				
		* Roles responsible for the activities are not correct.				
		*Forms and template are no easily identifiable and				
		located.				

proposed action/plan





Open Meeting То Audit & Risk Committee **Tony Whittaker** From General Manager Strategy and Support 07 March 2017 Date **Prepared by** Melissa Russo **Corporate Planner Chief Executive Approved** Υ 1691388 **Reference # Report Title** Annual Report 2016/17

I. EXECUTIVE SUMMARY

The purpose of this report is to provide the Audit & Risk Committee with an update from staff on the project scope for the 2016/17 Annual Report and Summary including key deliverables, milestones and the areas of audit focus.

2. **RECOMMENDATION**

THAT the report from the General Manager Strategy and Support be received.

3. BACKGROUND

Section 98 of the Local Government Act 2002 requires Council to prepare and adopt in respect of each financial year, an annual report. The purposes of an annual report are:

- To compare the intended level of performance with the actual level of performance during the relevant financial year, as set out in the Long Term Plan; and
- To promote the local authority's accountability to the community for the decisions made throughout the year.

The annual report must be completed and adopted, within four months after the end of the financial year to which it relates. The financial year runs from 01 July to 30 June, therefore the report must be adopted by 30 October each year.

4. **OBJECTIVE AND DELIVERABLES**

Produce an Annual Report and Summary for the 2016/17 financial year that:

- I. Complies with legislative and Audit New Zealand requirements.
- 2. Addresses matters raised in the Management Report received from Audit New Zealand in respect of the audit of Waikato District Council for the year ended June 2016.
- 3. Outlines the activities, levels of service delivered and the cost of providing those services.
- 4. Assesses our efficiency, effectiveness and the cost-effectiveness of our activities.
- 5. Makes sense and is relevant to all our stakeholders i.e. residents, ratepayers, Councillors and staff.

5. MILESTONES

Description	Date
First interim audit	06 March – 10 March
Second interim audit	12 June – 16 June
Final audit	28 August – 15 September
Audit New Zealand verbal clearance	27 September
Audit & Risk Committee – review of Annual Report from a risk perspective	27 September
Strategy & Finance approve Annual Report and Summary to Council for adoption	27 September
Council adopt Annual Report and Summary	09 October

Staff met with Audit New Zealand to discuss key Waikato District Council issues. The dates of the two interim audits and the final audit are indicative from Audit New Zealand and are yet to be finalised.

The areas of focus during the audit is outlined in the attached 'Areas of audit focus' document.

6. CONCLUSION

Council is required to adopt an Annual Report and Summary by 30 October each year. The Annual report and Summary will be audited by our auditors, Audit New Zealand prior to adoption.

7. ATTACHMENTS

Appendix I - Areas of audit focus

Audit planning for the year ending 30 June 2017

Areas of audit focus

We have some thoughts about what areas we need to be focusing on as part of our audit. Do these align with the Audit & Risk Committee's views?

Significant areas of audit focus:

- The impact of growth on: staff capacity; development contributions; infrastructure readiness 'just in time';
- Revaluation of PPE (everything except land & buildings).

Other areas of focus:

- Management of water supply (CCO);
- Strada carrying values;
- Work in progress and capitalising assets;
- Vesting assets from NZTA;
- Waste water (Raglan);
- Changes in Annual Plan;
- Progress in Asset Management Plans (getting ready for the Long Term Plan).

Other matters to be aware of:

- Governance role (new councillors) and getting up to speed for the new LTP;
- Participation in the Infrastructure Funding round from MBIE.

Audit planning for the year ending 30 June 2017

Next steps

- Input from others into our risk identification and assessment process:
 - Audit & Risk Committee (A&RC); and
 - Chief Executive and senior management (the last meetings were held on 3 March 2017).
- Audit Arrangements Letter (AAL) will be drafted and provided for review and comment to GM Strategy and Support in the first instance.
- AAL to be presented to A&RC at the next meeting for consideration.
- Audit Proposal Letter and Audit Engagements Letter need to be updated. Proposed fees first go the OAG prior to being forwarded to Council.

Audit planning for the year ending 30 June 2017

Audit logistics (provisional)

Audit team:

 Leon Pieterse (Director), Maree Procter (Manager), Kataraina Macown (Supervisor).

<u>Provisional</u> dates (being confirmed with management):

- Interim Audit: March and June 2017.
- Interim Management Report:

draft to management on 5 July 2017; and management comments requested back by 19 July so it can be finalised by 21 July 2017.

- Final Audit: 28 August 2017 to 15 September 2017.
- Verbal Audit Clearance: 27 September 2017 (A&RC meeting).
- Audit Report: 9 October 2017 (Council Meeting).
- Management Report:

draft to management on 27 September 2017; and management comments requested back by 5 October so it can be finalised on the same date as the audit report is issued.

Role of the Council

From an audit perspective (per our Engagement Letter) regarding the Annual Audit process:

- Prepare the Annual Report to comply with legislation and accounting standards.
- Internal controls to prevent material misstatement through error or fraud.
- Provide us with "ready to audit" information and access to complete our audit.

Audit planning for the year ending 30 June 2017

Role of Audit New Zealand

- We are responsible for expressing an independent opinion on the financial statements and non-financial performance information prepared by WDC.
- We assess whether the financial statements and non-financial performance information comply with generally accepted accounting practice and fairly reflect WDC's performance and position.

Scope of our annual audit

- The scope of our annual audit includes:
 - the financial statements and non-financial performance information; and
 - WDC's compliance with legislation that we consider to be relevant and material to our audit role.
- We are also required to maintain awareness for issues of efficiency and effectiveness, waste and a lack of probity or financial prudence.

Audit risk

- Our audit approach is risk based.
- In the context of a public sector audit, audit risk is wider than simply expressing an incorrect opinion on the financial statements and/or performance reporting.
- Risks include:
 - risks/issues that could impact on the financial statements and/or performance reporting;
 - legislative compliance issues; and
 - issues of efficiency and effectiveness, waste and a lack of probity or financial prudence.

Audit planning for the year ending 30 June 2017

For your consideration

We will formally request Council's:

- assessment of fraud risk processes;
- monitoring of management's fraud prevention responsibilities;
- view of the culture of honesty and ethical behaviour by management; and
- assessment of the potential for management override of controls for preventing and detecting fraud.

Please remember to inform us if you become aware of any actual or suspected frauds.

OAG multi-year programme

For your information, the OAG's multi-year focus areas are:

- Service delivery (2013/14).
- Governance and Accountability (2014/15).
- Investment and Asset Management (2015/16).
- Information (2016/17).
- Water (2017/18).





Open Meeting

То	Audit & Risk Committee
From	Tony Whittaker
	General Manager Strategy & Support
Date	06 March 2017
Prepared by	Katja Jenkins
	Project Management Advisor
Chief Executive Approved	Y
Reference #	GOV1318
Report Title	Strategic Risk Update

I. EXECUTIVE SUMMARY

This report details actions and outcomes associated with the organisations Strategic Risk activities.

2. **RECOMMENDATION**

THAT the report from the General Manager Strategy & Support be received;

AND THAT the Audit & Risk Committee approves the provision of the updated Strategic Risk Register to Council.

3. BACKGROUND

In August 2016 KPMG facilitated a workshop with the Audit & Risk Committee to review the Councils Strategic Risk Register. In September, as a result of this workshop, twelve (12) risks either new or amended) were adopted by the Committee. Since then, twenty-four (24) workshops have been conducted by staff with Subject Matter Experts ("SME"s) to capture:

- Inherent risk scores;
- Risk treatments (mitigations, contingencies etc);
- Residual risk scores.

The Strategic Risk Register, including documented treatments (both existing and for action), is now complete. Treatment action planning workshops will commence March 2017 and are due to be completed prior to July ARC.

4. **DISCUSSION**

Key stakeholders and subject matter experts have been fully involved in the process of documenting the organisations strategic risks and treatments and many of the new treatments have initial sign-off completed. As part of the Organisational Risk Awareness project, training sessions are scheduled during March and early April to provide risk and treatment owners the necessary skills and knowledge to complete the sign-off process. All strategic risk treatments are expected to be sign-off or actioned by 13 April 2017. A regular and on-going training schedule will be implemented from 01 July 2017.

5. CONCLUSION

A lot of work has been conducted to ensure the Strategic Risk Register is active and progress is evident in the attendance at and out-put from associate meetings. On-going engagement to embed a risk culture within the organisation and to deliver proactive use and management of the register is planned.

6. ATTACHMENTS

Strategic Risk Register

Risk Register



Filter: Classification(s): STRATEGIC (A&R Committee)

RESIDUAL	COMPLIANCE/ REGULATO	RY, PEOPLE, STRATEGIC (A&R COMMITTEE)	TREATMENT MC00415	SIGNOFF(S):	Kevin Lockley
15.0	Zero Harm Significant harm is caused to workers, or others, due to poor or inactive health and safety procedures, non- compliance with legislative requirements and reforms, and or inadequate governance of contractual health and safety requirements and		Zero Harm Strategic Plan	DUE DATE:	01 Jun 2017
HIGH INHERENT 20.0 R00184			The strategic plan provides high level priorities and documents agreed outcomes/results the organisation aims to meet. This treatment impacts the likelihood of the risk by providing clear expectation of organisational requirements and describing agreed governance and management methods.	FREQUENCY:	1st day of every 6 months
	management.		TREATMENT MC00416	SIGNOFF(S):	Kevin Lockley Kylie Anderson
	People are harmed or injured as a result of Council failing to		Monitor and maintain operational Zero Harm risk registers	DUE DATE:	01 Jun 2017
	measures.	Implement and or maintain appropriate health and safety neasures. Register includes operation related to risk management. impacts the likelihood of ha prioritizing operational risks organisation and planning neasures.	Register includes operational requirements related to risk management. This treatment	FREQUENCY:	1st day of every 3 months
			impacts the likelihood of harm by identifying and prioritizing operational risks across the organisation and planning mitigation to reduce, transfer or avoid the risk.		
	RISK LIKELIHOOD DESCRIPTORS	Often (4)	TREATMENT MC00435	SIGNOFF(S):	Kevin Lockley
			Council Health and Safety management systems and processes are audited to AS/NZS 4801 Standard, currently Council has achieved ACC WSMP tertiary level. The chief executive and management team carry out due-diligence site visits in compliance with the Health and Safety at Work Act 2015. Contractors are audited on an on going schedule. This treatment impacts the likelihood of the risk by ensuring that our systems and processes meet the required standards however, it should be noted that they may not meet the legislative requirements.	DUE DATE:	01 Feb 2018
	RISK CONSEQUENCE DESCRIPTORS	Catastrophic (5)		FREQUENCY:	The first Day of every 12 months
	RESIDUAL RISK LIKELIHOO DESCRIPTORS	RISK Catastrophic (5) ENCE			
	RESIDUAL RISK CONSEQUENCE DESCRIPTORS				
			TREATMENT MC00437	SIGNOFF(S):	Gavin Ion
			Executive team review the organisation critical risk register 6mthly. Service delivery review risks	DUE DATE:	29 Jun 2017
			specific to their operational group monthly. This treatment impacts the likelihood of the risk by ensuring the executive team and managers are aware of the risks and relevant treatment processes.	FREQUENCY:	The last Thursday of every 6 months

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RESIDUAL	REPUTATION/ IMAGE, STR	ATEGIC (A&R COMMITTEE)	TREATMENT MC00121	SIGNOFF(S):	Vishal Ramduny
12.0	Stakeholder Engage	ement	Engagement practices, including public meetings,	DUE DATE:	01 Feb 2018
INHERENT 20.0 R00187	most engaged com communities, lwi ar disengaged as a res stakeholder assess inadequate or inapp and procedures. People become/remain of	ver its core objective of having the munity by 2020 due to customers, and key stakeholders being sult of poor customer and ment and management and or propriate engagement practices disengaged as a result of Council failing to appropriately and or as a result of unsuitable and interaction.	are conducted to provide public engagement opportunities. These include but are not limited to: - Long Term Plan, Bylaws and Annual Plans Special Consultative Procedure - Reserve Management Plan (RMP - as per the Act) - Policy (statutory) Special Consultative Procedure - Policy (non-statutory) Section 82 and significance and engagement policy specification. This treatment impacts the likelihood by providing opportunities for people within the community to engage with Council in a variety of different mediums.	FREQUENCY:	1st day of every 12 months
	OWNER Sue Duignan		TREATMENT MC00164	SIGNOFF(S):	Vishal Ramduny
	CREATED 9/5/2016 11:20):04 AM	Community Engagement Strategy: This Strategy provides WDC with guidance on its community engagement activities. This treatment impacts the likelihood of the risk by providing Council employees a practical guide in best practice engagement and the community an understanding of how Council aims to engage with them. TREATMENT MC00165	DUE DATE:	01 Feb 2018
	REVIEWED RISK LIKELIHOOD DESCRIPTORS RISK CONSEQUENCE DESCRIPTORS	Frequent (5) Major (4)		FREQUENCY:	1st day of every 12 months
	RESIDUAL RISK LIKELIHOOD Likely (3) DESCRIPTORS	OD Likely (3)		SIGNOFF(S):	Vishal Ramduny
	RESIDUAL RISK	Major (4)	Significance & Engagement Policy	DUE DATE:	01 Feb 2018
	CONSEQUENCE DESCRIPTORS		The policy oulines how WDC will assess "significance", as required by the LGA amendment bill. A particular issue is the determination of whether an issue is of "high" significance or not in regard to the impact on communities, rather than just on economic impact which is generally the current basis for council decisions.	FREQUENCY:	1st day of every 12 months
		Environmental, social and cultural well-beings must also form part of a significance determination which should not be overshadowed by financial considerations.			
			This treatment impacts the likelihood of the risk by providing a practical guide that outlines how to assess the impact of action and suitable engagement practices to meet the assessment		

engagement practices to meet the assessment.

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TREATMENT MC00457	SIGNOFF(S):	Vishal Ramduny
Implementation of appropriate strategies and	DUE DATE:	01 Aug 2017
policies to ensure community needs are captured and met. These include, but are not limited to: - Confirmation of the Long Term Plan priority projects - Community engagement policy - Significance and engagement policy - Community engagement strategy - Customer complaints and compliments policy This treatment impacts the likelihood of the risk by documenting Councils commitments and associated expectations relating to how councils engages with the community. TREATMENT MC00458 TO DO	FREQUENCY: SIGNOFF(S): DUE DATE:	1st day of every 6 months Jacob Quinn
Develop a Communications Strategy.	FREQUENCY:	01 Apr 2017
This treatment will impact the likelihood of the risk by providing practical guidance for Council to support community engagement practices and the consequence by ensuring a consistent, defined and measured approach when planning and/or managing communications.		1st day of every month
TREATMENT MC00459	SIGNOFF(S):	Gavin Ion
CE and Executive Team provide updates to	DUE DATE:	01 Aug 2017
Councillors, Community Boards and Committees on community plans through forward facing meetings. This treatment impacts the likelihood of the risk by ensure adequate engagement with the community by communicating relevant plans, decisions and actions and by providing opportunity (through Board or Committee, venue or other medium) for feedback. TREATMENT MC00460	FREQUENCY:	1st day of every 6 months
	SIGNOFF(S): DUE DATE:	Tony Whittaker 13 Apr 2017
Community Development roles and Operational Field Staff.		•
A number of roles including Youth Engagement Advisor, lwi Liaison and Community Development Advisor, aim to ensure that appropriate engagement is conducted with specific community groups. These roles are targeted, extending and adding to the engagement activities of front facing field staff e.g. Animal Control, Building, Libraries etc This treatment impacts the likelihood of the risk by facilitating consideration of communication and engagement practices for community minorities, isolated groups and/or key community	FREQUENCY:	The first Day of every 12 months

stakeholders.

135		
TREATMENT MC00461	SIGNOFF(S):	Jacob Quinn
TO DO	DUE DATE:	01 May 2017
Seek mandate for the implementation of an Engagement Forum. The proposed purpose of the forum would be to discuss and document how to champion engagement within the organisation and how to develop plans that provide direction of engagement associated with meeting the 2020 Challenge.	FREQUENCY:	1st day of every 3 months
This treatment will impact the likelihood of the risk by providing a dedicated team whose function is specific to development of engagement plans and practices within the organisation.		
TREATMENT MC00462	SIGNOFF(S):	Angela Parquist
Council operates library and Council services from a number of locations across the district.	DUE DATE:	13 Apr 2017
This provides outreach and accessibility for communities within the district. Along with the provision of multiple offices, late night opening hours have been implemented to accommodate availability and convenience for communities. This treatment impacts the likelihood of the risk by facilitating community engagement through the facilitation of front facing interactions.	FREQUENCY:	1st day of every 12 months
TREATMENT MC00463	SIGNOFF(S):	Mark Willcock
TO DO	DUE DATE:	13 Apr 2017
Review/research requirement for technology to better maintain/manage customer records for the purpose of ensuring accuracy and accessibility.	FREQUENCY:	1st day of every 3 months
This treatment will impact the likelihood of the risk by improving Councils access to current, relevant information to ensure community members are accessible.		
TREATMENT MC00163	SIGNOFF(S):	Martin Mould
The WDC 2015-2045 Infrastructure Strategy	DUE DATE:	Chris Clarke 13 Apr 2017
documents the management philosophy that is applied to Waikato Districts' infrastructure assets.	FREQUENCY:	The first Day of every 12 months
The strategy covers the following asset types: - Water Treatment and supply - Wastewater Treatment and Disposal - Stormwater Drainage	THE YOL WOT	

- Roads and Footpaths.

This treatment impacts the likelihood of the risk by detailing and providing visibility of expectations to ensure Council works to a consistent standard.

R00188

12.0

INHERENT **20.0**

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	PUTATION/ IMAGE, STRATEGIC (A&R	TREATMENT MC00469	SIGNOFF(S):	Clive Morgan
COMMITTEE)	Dovelonment	Economic Development Strategy	DUE DATE:	01 Aug 2017
Economic & Social Development Waikato district suffers inhibited economic and social development and or missed funding opportunity as a result of inadequate planning, inefficient procurement and investment strategy or insufficient engagement with key stakeholders at a local, regional or national level. Council fails to promote and or identify opportunity for economic and social growth or fails to engage appropriately to encourage growth and development.		The strategy assesses the economic profile of the district and identifies SWOT for the purpose of informing strategic direction. There is a limited reference to social development within the strategy. A regional economic development strategy is also in place to serve the wider community at a regional level, this strategy is aligned to the Waikato District EDS. This treatment impacts the likelihood of the risk by ensuring that communities and businesses are engaged on an on-going basis, allocates effort and funding to targeted economic development initiatives and promotes the district as a viable prospect for business investment, residential and	FREQUENCY:	The first Day of every 6 months
CREATED 9/5/2016 11:32: REVIEWED	26 AM	visitor (lifestyle) growth and development. TREATMENT MC00470	SIGNOFF(S):	Vishal Ramduny
RISK LIKELIHOOD	DD Often (4) District Development Strategy and relevant growth management plans (structure plans) are in	DUE DATE:	01 Aug 2017	
DESCRIPTORS RISK CONSEQUENCE DESCRIPTORS	Catastrophic (5)	place to guide development and align land use and infrastructure planning. This treatment impacts the likelihood of the risk by ensuring efficiency in and documentation of planning and funding processes. TREATMENT MC00471	FREQUENCY:	The first Day of every 6 months
RESIDUAL RISK LIKELIHOO DESCRIPTORS	DD Likely (3)			
RESIDUAL RISK	Major (4)		SIGNOFF(S):	Vishal Ramduny
CONSEQUENCE DESCRIPTORS		Social Development Initiatives	DUE DATE:	01 Aug 2017
		Council has adopted a number of socially related strategies that aim to consider and provide for the social outcomes in the districts communities. These include, but are not limited to: - Place Making Strategy - Heritage Strategy - Youth Engagement Plan - Grant Funding Scheme Although these initiatives impact the likelihood of the risk by providing a degree of focus and resources dedicated to social development they are essentially limited as a result of no guiding social development strategy or policy (for example, the ex-Frankin Social Wellbeing Policy).	FREQUENCY:	The first Day of every 6 months

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		TREATMENT MC00472	SIGNOFF(S):	Vishal Ramduny
		Cross Boundary Initiatives	DUE DATE:	01 Feb 2018
		These initiatives aim to foster integrated planning across territorial boundaries, ensuring greater efficiencies and settlement planning across boundaries. Example: - North Waikato Infrastructure Programme Business Case, - Future Proof - Waikato Plan - MOU Auckland COuncil - National Policy Statement on Urban Development capacity (requires collaboration with HCC to make land available for infrastructure to support residential and commercial development) This treatment impacts the likelihood of the risk by providing a holistic approach to economic development and preventing limitations associated with territorial authority boundaries.	FREQUENCY:	The first Day of every 12 months
RESIDUAL	BUSINESS CONTINUITY, PEOPLE, STRATEGIC (A&R COMMITTEE)	TREATMENT MC00430	SIGNOFF(S):	Tim Harty Sue Duignan
12.0	Projects & Initiatives	Every three years Council creates Long Term Plan (LTP) works streams that capture programmed	DUE DATE:	01 Feb 2018
HIGH INHERENT 16.0	Council experiences diminished public confidence, financial loss and or fails to produce required project benefits due to failure to deliver planned assets and or technologies as a result of poor delivery of programmes and projects or due to a lack of resource	works scheduled to deliver the LTP commitments. These work streams include annual Activity Management Plans (AMPs) that dictate which programmes will be undertaken (through projects and initiatives) for the subsequent period. This treatment impacts the likelihood of the risk	FREQUENCY:	1st day of every 12 months
R00191	capability. Inconsistent knowledge, practices and or efficiency results in Council failing to deliver or perform against expected programme or	by detailing and documenting Councils annual and triannual work plan. TREATMENT MC00431	SIGNOFF(S):	Kurt Abbot
	project outcomes.	In 2010 Council introduced a business specific Project Management Framework based on best practice project management methodology. The	DUE DATE:	01 Aug 2017
	OWNER Tony Whittaker		FREQUENCY:	1st day of every 6 months
	CREATED 9/5/2016 12:23:20 PM REVIEWED RISK LIKELIHOOD Often (4) DESCRIPTORS RISK CONSEQUENCE Major (4) DESCRIPTORS RESIDUAL RISK LIKELIHOOD Likely (3) DESCRIPTORS RESIDUAL RISK Major (4) CONSEQUENCE DESCRIPTORS	methodology provides a common and widely understood set of processes and tools to be used across Council to: 1. Deliver a consistent project approach 2. Align projects to strategic goals and outcomes 3. Facilitate collaboration between organisational teams 4. Offer an organisational view of all project work 5. Improve status/progress reporting 6. Increase project management knowledge 7. Identify opportunity for improvement and development This treatment impacts the likelihood by providing a higher level of transparency, by facilitating the identification and assessment of risks during		
		planning and by providing a consistent approach to planning and managing project work.		

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TREATMENT MC00436	SIGNOFF(S):	Kurt Abbot
Implementation of Project Management Forum.	DUE DATE:	01 Aug 2017
The forum was mandated in September 2016 in response to recommendations of an external audit commissioned by Audit & Risk Committee during 2016. The Forum is primarily tasked to deliver priority recommendations that both aim to improve future project delivery at Council and provide greater consistency in project management and understanding across the organisation. This treatment impacts the likelihood by promoting cross organisation buy-in and developing a consistent project minded culture.	FREQUENCY:	1st day of every 6 months
TREATMENT MC00438	SIGNOFF(S):	Kurt Abbot
Strategic Review Team	DUE DATE:	01 Feb 2018
The strategic review team (SRT) was implemented in June 2015. The purpose of the SRT is: - to work with ET to develop a programme of work that delivers the Our Plan objectives - to support and work with Project Managers to ensure projects are set up and executed correctly - provide a level of governance and reporting medium for the programme to ensure transparency in project progress - make recommendations on project/programme specifics including; funding; resource allocation; prioritizing issues This treatment impacts the consequence of the risk by ensuring that issues are identified and addressed in a timely manner and the likelihood by providing an additional, high level of governance and structure to projects that are likely to have strategic impact.	FREQUENCY:	1st day of every 12 months
TREATMENT MC00493 Council Committees	SIGNOFF(S):	Sue Duignan Tim Harty
Council has regular committee and council	DUE DATE:	Tony Whittaker 13 Apr 2017
meetings where proposals and issues are considered and decisions are made. The format of Committee and Council reports requires staff to refer to any legislative or policy aspects and implications, i.e. statutory authorities or duties to act, or policy consideration, pertaining to the information and recommendations of the reports. Councillors are informed of proposed, new or	FREQUENCY:	The first Day of every 12 months

This treatment impacts the likelihood of the risk by providing information to reduce the possibility of Council acting in contravention of statues or policies.

amended legislation at Council or Committee

12.0

INHERENT **12.0** R00192

meetings.

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COMPLIANCE/ REGULATORY, STRATEGIC (A&R COMMITTEE)	TREATMENT MC00494	SIGNOFF(S):	Gavin Ion
Compliance Management	In-House Legal Team	DUE DATE:	01 Feb 2018
Exposure to significant financial loss, harm and or significant business disruption as a result of failure to meet, or non-compliance with, legislative,	council has a legal team which provides advice on legislative requirements across the organisation. The team promotes early involvement and input in projects and activities in respect of legal aspects.	FREQUENCY:	The first Day of every 12 months
regulatory or policy requirements. Council are impacted as a result of being uniformed and or failing to comply with legal requirements.	This treatment reduces the likelihood of Council being unaware of, or ignoring legal obligations in the course of conducting business. TREATMENT MC00495	SIGNOFF(S):	Gavin Ion
OWNER Sue Duignan	Corporate Documents	DUE DATE:	01 Feb 2018
CREATED 9/5/2016 12:23:40 PM	•	FREQUENCY:	The first Day of every 12 months
REVIEWED RISK LIKELIHOOD Likely (3) DESCRIPTORS	Long Term and Annual Plans and Reports, finance policies and documented processes mitigate Councils exposure to financial risk by		
RISK CONSEQUENCE Major (4) DESCRIPTORS	documenting planning activities and financial forecasts.		
RESIDUAL RISK LIKELIHOOD Likely (3) DESCRIPTORS	This treatment reduces the likelihood of Councils planning and expenditure being undertaken in contravention of good stewardship and		
RESIDUAL RISK Major (4) CONSEQUENCE DESCRIPTORS	governance principles required under the Local Government Act 2002. TREATMENT MC00496	SIGNOFF(S):	Sue Duignan
	Council Reporting Regular Council function includes scheduled reporting that captures key considerations (such as financial and legal matters).	DUE DATE:	Tony Whittaker Tim Harty 13 Apr 2017
		FREQUENCY:	The first Day of every 12 months
	This treatment impacts the likelihood of the risk by providing Council confidence when making decisions that all pertinent legislative, regulatory and/or policy considerations have been taken into account.		
	TREATMENT MC00497	SIGNOFF(S):	Kurt Abbot
	Annual Audit The annual audit (Office of Attorney General)	DUE DATE:	01 Feb 2018
	identifies failures, weaknesses and/or exceptions in compliance process and provides recommendations/mandate for improvement.	FREQUENCY:	The first Day of every 12 months
	This treatment reduces the likelihood of non- compliance by ensuring the Council is meeting requirements and/or identifies non-compliance for action.		
	TREATMENT MC00498	SIGNOFF(S):	Madelina Baena-Escamilla
	Documented processes.	DUE DATE:	01 Feb 2018
	Council uses an internal centralised repository (Promapp) to document organisational processes to allow cross organisational visibility for access and application.	FREQUENCY:	The first Day of every 12 months
	This treatment impacts the likelihood of the risk by providing a tool to guide users in the application of required standardised procedures, contributing to compliance management.		

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ESIDUAL	BUSINESS CONTINUITY, STRATEGIC (A&R COMMITTEE)	TREATMENT MC00138	SIGNOFF(S):	Kurt Abbot
9.0 MODERATE INHERENT 12.0 R00053	Business Resilience	as part of the Our Plan 2015/16 programme of	DUE DATE:	01 Dec 2017
	Business function is significantly interrupted due to a lack of business continuity planning and organisational resilience. Business is impacted as a result of Council failing to create prioritized action plans for implementation in the event of a business impact incident.		FREQUENCY:	1st day of every 12 months
55	OWNER Kurt Abbot	an ongoing activity - Potential governance was considered as part of		
	CREATED	JENCE Major (4) K LIKELIHOOD Likely (3) This impacts the consequence by identifying and prioritizing critical business function in the event of an incident. It also provides a defined method of governance and communication to ensure management, support and recovery procedures		
	REVIEWED			
	RISK LIKELIHOOD Likely (3) DESCRIPTORS			
	RISK CONSEQUENCE Major (4) DESCRIPTORS			
	RESIDUAL RISK LIKELIHOOD Likely (3) DESCRIPTORS			
	RESIDUAL RISK Moderate (3) CONSEQUENCE DESCRIPTORS			
		TREATMENT MC00456	SIGNOFF(S):	Kelly Newell
		Civil Defence & Emergency Management (CDEM)	DUE DATE:	01 Aug 2017
		Waikato District Council is part of the CDEM group. The role of the group is to work in	FREQUENCY:	1st day of every 6 months
	group. The fole of the group is to work in partnership with communities to ensure the effective and efficient delivery of emergency management within the Waikato region. Council employees are obligated to provide support where necessary as part of their roles (subject to situation specific circumstance). Council staff are trained in specific emergency management roles and have processes and procedures that aim to both reduce the impact of incidents and (where possible) to maintain the provision of Council services.			
		This treatment impacts the consequences of the risk by ensuring there is an organisational understanding of Councils commitment to maintain and manage the on-going delivery of Council services during an incident.		

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RESIDUAL	PEOPLE, STRATEGIC (A&R COMMITTEE)	TREATMENT MC00474	SIGNOFF(S):	Vanessa Jenkins
RESIDUAL 9.0 MODERATE INHERENT 25.0 R00190	People & CultureBusiness outcomes are significantly impacted due to inability to attract and or retain appropriate staff or as a result of undesirable workplace culture.Council are unable to recruit or keep staff in core service positions due to a lack of appropriately trained people, industry competition and or perceived or actual Council culture.OWNERVanessa JenkinsCREATED9/5/2016 12:22:54 PM	To Do Develop an HR Strategy that guides the direction Councils personnel management including but not limited to; - Succession, recruitment and workforce planning - Initiatives - Support requirements (inc technology, market analytics and metrics) This treatment impacts the likelihood by providing the structure to implement pro-active actions associated with attracting and maintaining resources. TREATMENT MC00475	DUE DATE: FREQUENCY: SIGNOFF(S):	01 May 2017 The first Day of every 3 months Tim Harty
	REVIEWED RISK LIKELIHOOD Frequent (5) DESCRIPTORS Catastrophic (5) DESCRIPTORS Catastrophic (5) RESIDUAL RISK LIKELIHOOD Likely (3) DESCRIPTORS RESIDUAL RISK Moderate (3) CONSEQUENCE DESCRIPTORS	TREATMENT MC00475Maintenance of peripheral workforce.Council's business groups maintain relationshipswith key consultancy practices for the purpose ofemploying specialist services and/or for providingresources where personnel vacancies exist orwhere it is identified that supplementarypersonnel are required in addition to thepermanent workforce.This treatment impacts the consequence of therisk by providing options for temporarily fillingvacancies facilitating time for recruitment whilstmaintaining business as usual.TREATMENT MC00476	SIGNOFF(S): DUE DATE: FREQUENCY: SIGNOFF(S):	Tim Harty Sue Duignan Tony Whittaker 13 Apr 2017 The first Day of every 6 months Gavin Ion
		An organisational change program has been implemented to deliver initiatives associated with improved workplace culture and leadership. The program comprises a number of project work- streams championed by the Executive Team. This treatment impacts the likelihood of the risk by providing a strategic approach to changing the organisational culture.	DUE DATE: FREQUENCY:	01 May 2017 The first Day of every 3 months
RESIDUAL 8.0 MODERATE INHERENT 20.0 R00189		TREATMENT MC00135 Council participates as a key stakeholder in the Waikato Mayoral forum, Waikato LASS and Future Proof. Through these initiatives Council proactively contributes to a single voice for the Waikato region to central government. This treatment impacts the likelihood of the risk by capitalising on relationships with other councils in the region and by being part of a collaborative governance approach.	SIGNOFF(S): DUE DATE: FREQUENCY:	Gavin Ion 01 May 2017 1st day of every 3 months

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POLITICAL, STRATEGIC (A&R	COMMITTEE)	TREATMENT MC00490	SIGNOFF(S):	Tony Whittaker
Regional/National Stra	ategic Planning	The Long Term Plan (LTP) and Annual Plan	DUE DATE:	13 Apr 2017
Waikato District is sig suffers disruption to b	nificantly impacted and or ousiness function as a result of	process provide a basis for an assessment of legislative and other external and internal influences on the business.	FREQUENCY:	1st day of every 3 months
through other externa influences. Amendments to local or nat	delegation of authority or Il or internal authoritative tional legislation and or government	This treatment impacts the likelihood of the risk be ensuring Council is adequately informed of Regional and National governance development and provides a set process to accommodate currency of information to future planning. TREATMENT MC00491	SIGNOFF(S):	Gudrun Jones
practices impact Council through the requirement of significant changes to business operations.OWNERVishal RamdunyCREATED9/5/2016 12:21:58 PM		Through applied process Councils keeps abreast	DUE DATE:	01 May 2017
		of Government's legislative pronouncements and becomes involved through the submissions process in any development that would advocate Councils best interest.	FREQUENCY:	1st day of every 3 months
REVIEWED RISK LIKELIHOOD I DESCRIPTORS	Frequent (5)	This treatment impacts the likelihood of the risk by ensuring that Council not only has the required		
RISK CONSEQUENCE DESCRIPTORS	Major (4)	information regarding developments but an avenue to respond/influence outcomes. TREATMENT MC00492	SIGNOFF(S):	Gavin lon
RESIDUAL RISK LIKELIHOOD	Possible (2)	Councils Chief Executive (CE) is committed to	DUE DATE:	01 May 2017
RESIDUAL RISK Major (4) CONSEQUENCE DESCRIPTORS		building a relationship with Wellington to facilitate open communication and ensure the organisation receives timely information and has opportunity for response and contribution.	FREQUENCY:	1st day of every 3 months
		This treatment impacts the likelihood of the risk by assisting in the timely communication of		

information and developments. TREATMENT MC00500

District Development Strategy

direction and development planning.

The purpose of the District Development Strategy is to provide the Council with a strategic spatial framework for development planning. The District Development Strategy links to the District Plan Review, the Long Term Plan, the Economic Development Strategy, the Infrastructure Strategy and the Integrated Land Transport Strategy. This treatment impacts the likelihood of the risk by ensuring Councils has a plan for development that incorporates a scheduled formal review process to consider and communicate changes in

SIGNOFF(S):	Vishal Ramduny
DUE DATE:	01 Feb 2018
FREQUENCY:	The first Day of every 12 months

			143		
RESIDUAL	FINANCIAL, TECHNICAL, ST	TRATEGIC (A&R COMMITTEE)	TREATMENT MC00162	SIGNOFF(S):	Tim Harty
6.0	Asset Management		TO DO	DUE DATE:	Sue Duignan 13 Apr 2017
MODERATE	-	ustained delivery of core services	Update Activity Management Policy		
INHERENT 16.0 R00185	due to deficient ass development, inade condition and or ine Delivery of core services	et planning, forecasting and or quate knowledge of existing asset effective management of assets. , including water and roading, are assets failing or becoming unfit for	Councils Activity Management Policy provides statements on how Council will manage assets and deliver associated services in a cost effective, sustainable, well planned and coordinated manner to provide agreed levels of service. Its purpose is to outline the level of management appropriate for each activity for Council to achieve best management practice and meet statutory	FREQUENCY:	The first Day of every 12 months
	OWNER Tim Harty		obligations.		
	CREATED 9/5/2016 11:06:2 REVIEWED	29 AM	This treatment impacts the likelihood of the risk by outlining what level of activity management the		
	RISK LIKELIHOOD DESCRIPTORS	Often (4)	organisation is willing to commit to, therefore setting expectations for the organisation to deliver against.		
	RISK CONSEQUENCE DESCRIPTORS	Major (4)	TREATMENT MC00163	SIGNOFF(S):	Martin Mould Chris Clarke
	RESIDUAL RISK LIKELIHOO DESCRIPTORS	DD Possible (2)	The WDC 2015-2045 Infrastructure Strategy documents the management philosophy that is	DUE DATE:	13 Apr 2017
	RESIDUAL RISK	Moderate (3)	applied to Waikato Districts' infrastructure assets.	FREQUENCY:	The first Day of every 12 months
	CONSEQUENCE DESCRIPTORS		The strategy covers the following asset types: - Water Treatment and supply - Wastewater Treatment and Disposal - Stormwater Drainage - Roads and Footpaths.		
			This treatment impacts the likelihood of the risk by detailing and providing visibility of expectations to ensure Council works to a consistent standard. TREATMENT MC00464	SIGNOFF(S):	Tim Harty
			The National Asset Management Standards dictate		Sue Duignan
			and define the Councils Activity Management	DUE DATE:	01 Feb 2018
		Plans (AMPs). The AMPs are reviewed yearly and undergo a 3 yearly re-write to feed into Councils Long Term Plan (LTP) cycle.	FREQUENCY:	1st day of every 12 months	
			This treatment impacts the likelihood of the risk		

by ensuring Councils AMPs adhere with national standards.

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TREATMENT MC00465	SIGNOFF(S):	Martin Mould
Council has a number of asset management		Elton Parata Chris Clarke
specific strategies in place and under development. These include:	DUE DATE:	13 Apr 2017
 Parks & Facilities; Toilet Strategy, Cemetery Strategy, Trails Strategy, Te Kauwhata Trails Strategy, Esplanade Strategy, Parks Strategy, Aquatic Facilities Strategy, Sport and Recreation Strategy (joint with Sport Waikato), Playground Strategy Roading; Waikato Integrated land transport strategy (TO DO) Waters; 50 year water/wastewater/storm water strategies, 30 year infrastructure plan 	FREQUENCY:	The first Day of every 12 months
This treatment impacts the likelihood of the risk by detailing and making visible Councils commitments for the management and maintenance of assets along with Councils commitment to level of service requirements. TREATMENT MC00466	SIGNOFF(S):	Elton Parata
Service Delivery performs regular and continual		Chris Clarke Martin Mould
collection of asset data for the purpose of condition assessment. This data informs	DUE DATE:	13 Apr 2017
programmes of work associated with asset maintenance and renewals. Data collection sources include (but are not limited to): - RAMM - Asset Finder - SPM - dTIMS	FREQUENCY:	The first Day of every 12 months
This treatment impacts the likelihood of the risk by ensuring that data driven planning can take place to maintain assets. It also impacts the consequence by supplying the information required to ensure currency of asset condition reporting and any required contingency activities.		

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RESIDUAL	· · · · · · · · · · · · · · · · · · ·	EOPLE, POLITICAL, STRATEGIC (A&R	TREATMENT MC00467	SIGNOFF(S):	Jacob Quinn
4.0	COMMITTEE) Sub-Regional Waters CCO		Communications Plan	DUE DATE:	13 Apr 2017
INHERENT 12.0 R00186	 4.0 Sub-Regional Waters CCO Significant disruption to business function as a result of poor engagement and communication practices, loss of resources (staff), insufficient knowledge transfer or incompatible systems and or operating procedures. Council has in place a detailed communications plan that aims to ensure that both internal staff, external organisations (including other councils), and the public are informed of developments relating to the Waters CCO. This plan includes, but is not limited to: - Cross council communications updates - Waikato Water Study Website 	FREQUENCY:	The first Day of every 6 months		
	CREATED 9/5/2016 11:16	:11 AM	Regular staff updates relating to		
	REVIEWED RISK LIKELIHOOD DESCRIPTORS RISK CONSEQUENCE	Likely (3) Major (4)	progress/changes associated with the CCO are provided to internal stakeholders via team meetings and briefs providing information forwarded from the CCO project & governance group.		
	DESCRIPTORS	OD Para (1)			
	RESIDUAL RISK LIKELIHOOD Rare (1) This treatment impacts the likelihood by ensuring DESCRIPTORS pro-active engagement both internally and	pro-active engagement both internally and			
	RESIDUAL RISK CONSEQUENCE	Major (4)	externally with key stakeholders. TREATMENT MC00468	SIGNOFF(S):	Tim Harty
	DESCRIPTORS		Waters Governance Group	DUE DATE:	13 Apr 2017
			The group comprises three (3) political members meeting periodically to discuss and represent Council on Waters CCO decisions, future development and associated action. This group has the delegation to meet collectively with other councils and external bodies if a requirement is identified. This treatment impacts the likelihood of the risk by ensuring Council is well informed, has an opportunity to consider developments, and, provides an avenue for internal, cross council, and, external communications pathways.	FREQUENCY:	The first Day of every 6 months
			TREATMENT MC00486	SIGNOFF(S):	Tim Harty
			Waters Project Group The group (staff based at General Manager level)	DUE DATE:	13 Apr 2017
			meet fortnightly to discuss CCO associated progress/changes and inform the governance group of any progress and any emerging issues or risks associated with project.	FREQUENCY:	The first Day of every 6 months
			This treatment impacts the likelihood of the risk by ensuring that all stakeholders are aware of current situation and likely progress associated with CCO.		

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RESIDUAL		RY, PEOPLE, TECHNICAL, STRATEGIC (A&R	TREATMENT MC00427	SIGNOFF(S):	Alison Diaz
4.0			Cyber security insurance cover (CyberEdge	DUE DATE:	01 Dec 2018
INHERENT 25.0 R00128	suffers legislative k unauthorized acces information, malicit due to external cyb Council systems and or	significantly interrupted and or preaches as a result of as facilitating theft of privileged ous code and or virus introduction er attack or employee behaviour. processes are compromised by cyber cant financial and or business impact.	Liability Insurance) has been purchased. Inclusions listed are: - Data administrative investigations - Data administrative fines - Electronic data - Repair of policy holders reputation - Repair of individuals reputation - Notification and monitoring costs - Forensic service costs - Media content library - Cyber extortion	FREQUENCY:	The first Day of every 12 months
	OWNER Mark Willcock		 Network interruption insurance This impacts the consequence of the risk by 		
	CREATED		facilitating expert resources, financial support and		
	REVIEWED RISK LIKELIHOOD	Frequent (F)	remedial works in the event of an incident. TREATMENT MC00428	SIGNOFF(S):	Mark Willcock
	DESCRIPTORS	Frequent (5)	IM Business Continuity Plan:	DUE DATE:	01 Feb 2018
	RISK CONSEQUENCE	Catastrophic (5)	The IM team are developing a BCP to align the		
	DESCRIPTORS RESIDUAL RISK LIKELIHO DESCRIPTORS	OD Rare (1)	technical IT recovery procedures to the overall enterprise BCP. This will include; - a communication plan	FREQUENCY:	1st day of every 12 months
	RESIDUAL RISK CONSEQUENCE DESCRIPTORS	Major (4)	 prioritising the critical systems for recovery first regular tests of back up and recovering procedures simulations with various scenarios. This impacts the consequence by detailing priority procedures in the case of an incident, ensures systems/process are fully functional and that staff are aware of their responsibilities and trained to manage them in the case of an event. 		
			TREATMENT MC00433	SIGNOFF(S):	Mark Willcock
			Cyber security is managed using best practise	DUE DATE:	01 Feb 2018
			methodologies by using security measures at various layers of connection. a) Firewalls b) Server c) PC d) User e) Physical f) Wireless access g) WDC website This impacts the likelihood by increasing the	FREQUENCY:	1st day of every 12 months
			security of the environment. TREATMENT MC00434	SIGNOFF(S):	Mark Willcock
			Audit NZ performs periodic audits as part of the	DUE DATE:	01 Feb 2018
			annual audit programme. This impacts the	FREQUENCY:	1st day of every 12 months
			likelihood of the risk occurring by identifying possible weaknesses in process.	I NEQUENCI:	ist day of every 12 months

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RESIDUAL	PEOPLE, TECHNICAL, STRA	ATEGIC (A&R COMMITTEE)	TREATMENT MC00483	SIGNOFF(S):	Mike James Elton Parata
4.0	Council Partnership	S	Council has in place a robust tender process that		Martin Mould
LOW		are significantly impacted and or	includes in-depth detail regarding contractual requirements.	DUE DATE:	01 Aug 2017
INHERENT 20.0 R00183	Council suffers dimi result of failed or ina inappropriate engag inconsistent values Councils reputation/opera	anished public confidence as a adequate delivery of services, ement practices or display of by Partnership enterprises. ations are impacted as a result of actions, ct demonstrated by Partners and/or 01 AM Frequent (5) Major (4)	Long term public facing contracts and partnerships are effected through rigorous contractual agreements and continuous management plans. These include terms relating to contractual service level agreements, employee training plans, safety inductions (all employees), and audit expectations. Long term contracts and partnerships include (but are not limited to): - Belgaria Aquatics - City Care - Franklin Trees - Alliance - Water Care - HCC (for water supply & waste water treatment) This treatment impacts the likelihood of the risk by ensuring that all partners and long term contracts are selected through compliance with Councils requirements, and, that they understand Councils expectations and commit to delivering	FREQUENCY:	The first Day of every 6 months
	RESIDUAL RISK	Major (4)	an agreed level of service in a safety and appropriate manner.		
	CONSEQUENCE DESCRIPTORS		TREATMENT MC00485	SIGNOFF(S):	Martin Mould
			Shared Services (HCC, Waipa & WDC) Councils shared services agreements are	DUE DATE:	13 Apr 2017
			managed using agreed processes and a governance structure which ensures they deliver against expectations. Arrangements include: - Quarterly governance meetings - Monthly operational meetings - Auditing schedule (zero harm perspective).	FREQUENCY:	The first Day of every 12 months
			This treatment impacts the likelihood of the risk by ensuring regular communication and identification of emerging risks or issues and the consequence by providing opportunity for timely governance and action where issues are identified and/or it is deemed that expectations are not being met. TREATMENT MC00499	SIGNOFF(S):	Sue Duignan
			TO DO		Tony Whittaker Tim Harty
			Implement a set protocol/process that defines how Council plans to implement new	DUE DATE:	13 Apr 2017
			partnerships/long term contracts from the perspective of providing seamless integration of systems and resources at the point of requirements design and tender review.	FREQUENCY:	The first Day of every 3 months
			This treatment aims to impact the likelihood of risk by minimizing lost efficiency and the consequence by reducing the risk of impact on customer services.		



Open Meeting

То	Audit & Risk Committee
From	Tony Whittaker
	General Manager Strategy & Support
Date	06 March 2017
Prepared by	Katja Jenkins
	Project Management Advisor
Chief Executive Approved	Y
Reference #	GOV1318 / 1690950
Report Title	Organisational Risk Direction

I. EXECUTIVE SUMMARY

This report provides an overview of organisational risk direction demonstrated through:

- A progress update on the Organisational Risk Awareness project in response to KPMG's risk maturity assessment and recommendations; and
- Organisational risk activities Pokeno Growth.

2. **RECOMMENDATION**

THAT the report from the General Manager Strategy & Support be received.

3. BACKGROUND

On 19 December 2016 the Audit & Risk Committee communicated that they were comfortable with the road map provided by KPMG in relation to the direction of risk travel within the organisation and requested that staff work with KPMG to fast track some of the recommendations.

Organisational Risk Awareness project ("ORA")

The ORA commenced 08 February 2017. Activities completed to date include:

- Project workshops aimed to;
 - Encourage buy-in
 - Determine a holistic view of the scope and objectives
 - Facilitate identification of existing skills and knowledge gaps
- Cleanse of operational registers

- Review and update of Strategic Risk Register
- Alignment of risk classification with business structure
- Attendance at Waikato LASS internal audit insights session

Activities currently underway include:

- Alignment of risk terminology (to simplify the language with consideration to Promapp tool limitations)
- KPMG engaged to facilitate Risk Appetite Statement workshop with ELT
- KPMG engaged to provide training to ELT, including a top down risk assessment
- KPMG engaged to assist with development of ongoing risk reporting
- Monthly reporting to ELT re project progress
- Engagement planning
- Benchmarking against other Councils (BOPLASS and LASS)
- Risk Management Framework update
- Risk Matrix update
- Policy update

Change management is seen as a key contributor to deliver project outcomes. Executive support, driven by a set engagement plan, is seen as a critical component to deliver outcomes. ELT has committed to the promotion and prioritization of project activities.

Pokeno Growth

Staff have worked with the Executive Leadership Team to develop a precedent for the management of specific risk activity (processes to be documented). The pilot model is focussed on identifying and managing risks associated with growth.

The following activities have informed the model:

- A Pokeno Growth Forum was created (November 2016) to address emerging risks and issues associated with the development.
- Eight (8) risk workshops were conducted with key stakeholders and Subject Matter Experts ("SME"s).
- An active risk register has been approved and implemented.
- An action planning workshop (held on Tuesday, 07 March) provided risk owners and treatment sign-off personnel with training, tools and support to progress risk mitigation activity.
- A regular forum meeting and reporting cycle has been implemented for ongoing management.

Progressive improvement in staff engagement has been observed, along with a developing understanding of the requirements associated with identifying and assessing risks and

treatments. Monthly progress reporting to ELT has been implemented to monitor ongoing activity.

4. CONCLUSION

Organisational risk direction is progressing. A greater awareness of risk activity is apparent amongst the leadership team. Training, aimed to commence with the Executive Leadership Team in April/May and wider organisation March/April (then on-going from July 2017), will facilitate ongoing progress. We continue to focus on change management to successfully embed risk management into business activity.

5. ATTACHMENTS

NIL



Open Meeting

То	Audit & Risk Committee
From	Tony Whittaker
	Acting Chief Executive
Date	08 March 2017
Prepared by	Sharlene Jenkins
	PA General Manager Strategy & Support
Chief Executive Approved	Y
Reference #	GOVI318
Report Title	Updated Future Workplan

I. EXECUTIVE SUMMARY

The purpose of this report is to present an updated Future Work Plan for the Committee's information.

2. **RECOMMENDATION**

THAT the report from the General Manager Strategy & Support be received.

3. ATTACHMENTS

Updated Future Work Plan

AUDIT & RISK COMMITTEE Updated Future Work Plan

Date	Key meeting topic	Standing items for all meetings
22 March 2017	 Review of CCO Statements of Intent Annual Report Programme 	 H&S update on H&S performance against agreed targets, systemic issues
05 July 2017	 Risk Management framework Internal Audit Programme Annual Report Programme Compliance External contracts 	 identified which can be fed into the risk control framework Rolling review of bylaw & policies – schedule to be agreed Post project appraisals on key
27 September 2017	 Review of Audit & Risk Committee performance against Terms of Reference Annual Report Insurance review 	 investments. Update on progress against Audit management report Update on risk management actions, progress on mitigations
13 December 2017	H&S Management frameworkAudit Management Report	and direction of travel of risk



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Open Meeting	
То	Audit & Risk Committee
From	Gavin Ion
	Chief Executive
Date	23 February 2017
Prepared by	Rose Gray
	Council Support Manager
Chief Executive Approved	Y
Reference #	GOVI318
Report Title	Exclusion of the Public

EXECUTIVE SUMMARY Ι.

To exclude the public from the whole or part of the proceedings of the meeting to enable the Audit & Risk Committee to deliberate and make decisions in private on public excluded items.

2. RECOMMENDATION

THAT the report of the Chief Executive be received;

AND THAT the public be excluded from the meeting to enable the Audit & Risk Committee to deliberate and make decisions on the following items of business:

Confirmation of Minutes dated 19 December 2016

REPORTS

Risk Assessment of Council Controlled Organisations' Draft Statements of a. Intent

The general subject of the matter to be considered while the public is excluded, the reason, and the specific grounds under section 48(1) of the Local Government Official Information and Meetings Act 1987 are as follows:

Reason for passing this resolution to Ground(s) under section 48(1) for the withhold exists under: passing of this resolution is:

Section 7(2)(b)(i)

Section 48(1)(3)(d)

Page I - Public Excluded

b. Register of Interest

The general subject of the matter to be considered while the public is excluded, the reason, and the specific grounds under section 48(1) of the Local Government Official Information and Meetings Act 1987 are as follows:

Reason for passing this resolution to withhold exists under:	Ground(s) under section 48(1) for the passing of this resolution is:
Section 7(2)(f),(h),(i),(j)	Section 48(1)(a)(d)

c. Fraud Declaration

The general subject of the matter to be considered while the public is excluded, the reason, and the specific grounds under section 48(1) of the Local Government Official Information and Meetings Act 1987 are as follows:

Reason for passing this resolution to	Ground(s) under section 48(1) for the
withhold exists under:	passing of this resolution is:

Section 7(2)(a)

Section 48(1)(a)(d)

d. Committee Time with Audit New Zealand

The general subject of the matter to be considered while the public is excluded, the reason, and the specific grounds under section 48(1) of the Local Government Official Information and Meetings Act 1987 are as follows:

Reason for passing this resolution to Ground(s) under section 48(1) for the passing of this resolution is:

Section 7(2)(f)(g)(h)(i)(j)

Section 48(1)(a)(d)

AND FURTHER THAT representatives of Audit New Zealand remain in the meeting after the public has been excluded to facilitate the discussion on item PEX 3.4 [Committee Time with Audit NZ] in the public excluded section of the meeting.

3. ATTACHMENTS

Nil