

Agenda for a meeting of the Audit & Risk Committee of the Waikato District Council to be held via Audio Visual Conference on **WEDNESDAY, 6 APRIL 2022** commencing at **9.30am**.

- 1. APOLOGIES AND LEAVE OF ABSENCE**
- 2. CONFIRMATION OF STATUS OF AGENDA**  
*Representatives from Audit New Zealand will be in attendance*
- 3. DISCLOSURES OF INTEREST**
- 4. CONFIRMATION OF MINUTES**  
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## **7. REPORTS FOR INFORMATION**

The following reports will be taken as read:

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GJ Ion  
**CHIEF EXECUTIVE**

## TERMS OF REFERENCE AND DELEGATION

<b>Reports to:</b>	The Council
<b>Chairperson:</b>	External appointee – Mr Peter Stubbs
<b>Membership:</b>	Deputy Chairperson – Cr Janet Gibb Mayor Allan Sanson ( <i>ex officio</i> ) Cr Aksel Bech Cr Jacqui Church Cr Jan Sedgwick
<b>Meeting frequency:</b>	As required – no less than four times each year.
<b>Quorum:</b>	Four members

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### Purpose:

The Audit and Risk Committee is responsible for:

1. Considering and reviewing the adequacy of Council's risk management and internal control frameworks.
2. Monitoring and seeking assurance on the functioning of Council's risk management and internal control frameworks (including systems and processes).
3. Managing the independent auditor (internal and external) expectations and relationships.

### Terms of Reference:

To achieve the above purpose the Audit and Risk Committee will:

1. Annually review council's risk management framework to ensure it is effective
2. Ensure the strategic risk register is current and relevant
3. Ensure Council has an effective internal control framework to identify and manage business risk (at the risk portfolio level)
4. Review Council's insurance programme for adequacy of risk mitigation
5. Review the effectiveness of Council's business continuity and disaster recovery planning and testing arrangements
6. Ensure Council has an effective framework in place to prevent, detect and investigate fraud-related issues
7. Ensure Council has an effective Health and Safety/Zero Harm framework in place to prevent, detect and investigate safety-related issues
8. Review the internal audit framework to ensure that appropriate organisational structures, authority, access, and reporting arrangements are in place
9. Approve the annual internal and external audit programme and related plans
10. Consider Council's annual report from a risk perspective, and subject to audit clearance, make recommendations to Council regarding adoption
11. Review audit reports (internal and external) and monitor management's implementation of audit recommendations
12. Keep Council informed on significant risk or audit issues raised and proposed actions
13. Meet regularly with independent auditors to gain assurance on the risk frameworks and the management of them

**The Committee is delegated the following recommendatory powers:**

1. The committee has no decision-making powers.
2. The committee may make recommendations to the Council and/or the Chief Executive
3. The committee may conduct and monitor special investigations in accordance with Council policy and approved budget, including engaging expert assistance, on matters within its terms of reference.

**Administrative arrangements:**

**Meetings**

The committee will meet at least four times each year. An extraordinary meeting may be called to review the annual report. The chairperson is required to call a meeting if requested to do so by the Council, or the Chief Executive.

A meeting plan, including dates and agenda items, will be agreed by the committee each year. The meeting plan will cover all the committee's responsibilities as detailed in these Terms of Reference.

For clarity, the Council's Standing Orders and Code of Conduct will apply to committee meetings and members.

**Membership**

Members are appointed for an initial term of no more than the three years that aligns with the triennial elections, after which they may be eligible for extension or reappointment.

The Council appoints external members of the committee; the terms of the appointment are to be recorded in a contract.

**Attendance at meetings**

Meetings can be held in person, by telephone, or by video conference in accordance with Standing Orders.

The Chief Executive, Executive Leadership Team members, and external audit representatives will be invited to attend each meeting, unless requested not to do so by the chairperson of the committee. The committee may also ask other Council employees, or other suitably qualified persons with interest or expertise in special topics, to attend committee meetings or participate for certain agenda items.

The committee will meet separately with both the internal and external auditors at least once a year.

**Reporting**

The committee will regularly, and at least once a year, report to the Council on its operation and activities during the year.

The report should include:

- a summary of the work the committee performed to fully discharge its responsibilities during the preceding year; and
- a summary of the Waikato District Council's progress in addressing the findings and recommendations made in internal and external audit reports, and the Auditor-General's reports (if applicable).

The committee may, at any time, report to the Chief Executive or the Council on any other matter it deems of sufficient importance to do so. In addition, at any time an individual committee member may request a meeting with the Chief Executive or the Council.

**Assessment arrangements**

The chairperson of the committee will initiate a review of the performance of the committee at least once every two years and present it to the Council. This will support the committee's philosophy of continuous improvement.

**Review of Terms of Reference**

The committee will review its Terms of Reference at least once a year. This review will include consultation with the Council.

Any substantive changes to the Terms of Reference will be recommended for approval by the committee to the Council.

<b>To</b>	<b>Audit &amp; Risk Committee</b>
<b>Report title</b>	<b>Confirmation of Minutes</b>

### **1. Purpose of the report**

#### **Te Take moo te puurongo**

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To confirm the minutes for a meeting of Audit & Risk Committee held on Thursday, 16 December 2021.

### **2. Staff recommendations**

#### **Tuutohu-aa-kaimahi**

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**THAT the minutes for a meeting of the Audit & Risk Committee held on Thursday, 16 December 2021 be confirmed as a true and correct record.**

### **3. Attachments**

#### **Ngaa taapirihanga**

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Attachment 1 – A&R Minutes – 16 December 2021

Date:	Wednesday, 6 April 2022
Report Author:	Gaylene Kanawa, Democracy Team Leader
Authorised by:	Gavin Ion, Chief Executive

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**MINUTES** of a meeting of the Audit & Risk Committee of the Waikato District Council held via Audio Visual Conference on **THURSDAY, 16 DECEMBER 2021** commencing at **9.30am**.

**Present:**

Mr P Stubbs (Chairperson)  
Cr AD Bech  
Cr JM Gibb  
Cr JD Sedgwick

**Attending:**

Mr GJ Ion (Chief Executive)  
Mr TG Whittaker (Chief Operating Officer)  
Mrs S O’Gorman (General Manager Customer Delivery)  
Mr C Morgan (General Manager Community Growth)  
Ms A Diaz (Chief Financial Officer)  
Ms C Pidduck (Legal Counsel)  
Mr K Abbott (Projects & Innovation Manager)  
Mrs K Jenkins (Risk Advisor)  
Mrs L Shirley (Zero Harm Manager)  
Mr M Balloch (Building Quality Manager)  
Mr A Pipe (Environmental Health Team Leader)  
Ms K Newell (Resilience Manager)  
Mrs GJ Kanawa (Democracy Team Leader)  
Mr M Horsfield (Democracy Advisor)

**APOLOGIES AND LEAVE OF ABSENCE**

**Resolved: (Crs Bech/Sedgwick)**

**THAT the apologies for non-attendance from His Worship the Mayor, AM Sanson and Cr JA Church be received.**

**CARRIED**

**A&R21 | 2\01**

## **CONFIRMATION OF STATUS OF AGENDA ITEMS**

**Resolved: (Crs Sedgwick/Gibb)**

**THAT the Audit & Risk Committee:**

- a) confirms the agenda for the meeting of the Audit & Risk Committee held on Thursday, 16 December 2021;
- b) agrees all items therein be considered in open meeting, with the exception of those items detailed at agenda item 8 which shall be discussed with the public excluded; and
- c) receives all reports.

**CARRIED**

**A&R21 | 2/02**

## **DISCLOSURES OF INTEREST**

There were no disclosures of interest.

## **CONFIRMATION OF MINUTES**

**Resolved: (Crs Gibb/Bech)**

**THAT the minutes of the meeting for the Audit & Risk Committee held on Tuesday, 21 September 2021 be confirmed as a true and correct record.**

**CARRIED**

**A&R21 | 2/03**

## **ACTION REGISTER**

Agenda Item 5

The register was taken as read and the following discussion was held:

- Move to brevity is work in progress..
- Reference to a trending dashboard for zero harm - page 57 provides a residual risk reduction timeline indicating how our residual risk is tracking against risk appetite.

## **REPORTS**

### Chief Financial Officer Report Agenda Item 6.1

The report was received [A&R21/2/02] and taken as read. The following discussion was held:

- In terms of the vaccination policy some potential additional costs for our contractors had not been factored into the report and if our contractor costs go up then it would have an impact on us as well.
- Cr Bech involved with the submission to the Select Committee in regard to the RMA changes but it appears that little in the Act has changed in regard to Council's submission.
- Staff still have work to do regarding the implication of the changes to the RMA – certainly a key concern is what the changes mean from an infrastructure perspective.
- Speed of implementation of these changes will require Council to use short term consultants; we are expecting availability issues.
- The changes also coincide with the Three Waters Reform which will place us under additional pressure, as we have some significant water and wastewater issues in the district to be addressed.
- Unless the government provide funding and resources to get the work done it will provide challenges for us as part of the wider Hamilton metrospatial plan which sits under Tier 1.
- Affects both Waikato and Waipa Districts – quite broad implications across the urban areas of our district. Teams are working through the implications of these changes at both a local and sub-regional level.

**ACTION:** Chief Operating Officer to contact the Chairman following the meeting to determine if the Committee need to get involved early with the risks raised in regard to the impacts of RMA and Three Waters Reform changes.

- Cyber security – this risk may become uninsurable over time as insurance has increased in cost and reduced in scope, leading to possibility of self insurance in the future.
- Valuable to get results of “ComplyWith” survey which underscored the work done even though the results were fairly limited. Demonstrated almost a third of the issues were health and safety related.

**ACTION:** Staff to contact Cr Gibb to explain how the ComplyWith survey tool works, i.e. how do we get results from what appears to be a software package.

- Over time the tool will show trends on how we are performing against legislative requirements.



Strategic Risk Register & Emerging Risks Report for December 2021

Agenda Item 6.2

The report was received [A&R21 | 2/02] and taken as read. The following discussion was held:

- It was noted that current risks and additional issues raised in item 6.1 needed to be considered at the scheduled workshop following this meeting.
- Clarification sought regarding the comment in the report that six (6) risks were assessed and considered to be outside the Council's risk appetite. The process was explained by the ELT to the committee and it was noted that the "deep dive reports" cover these risks in more detail for the committee to consider/challenge at each meeting.
- Affordability underpins everything – sector wide systemic issue and we need to consider this further at the workshop.
- Query raised regarding sections that note "requiring action" and "requiring committee oversight" – it was noted that there were no additional actions required other than what was reported.
- Strategic mitigation plans to have more quality plans put against them and made up less of a tick box exercise, which comes with maturity and whilst we have come a long way not quite there yet.
- Workshop today will deliver a register that offers more value and easier to report on.
- A more focused strategic risk register over time should lead to a reduction in the emerging risks requiring discussion.

**ACTION:** Staff to clearly outline in future reports if something is a required action or oversight as the committee are reliant on the expertise of staff and ELT.

- No indication in the report as to what the presentation from MBIE on significant government reform covered – albeit it was noted later in the meeting that the presentation referred to related to the water economic regulations and consumer protection.

Risk Management Framework Review 2021

Agenda Item 6.3

The report was received [A&R21 | 2/02] and taken as read and no further discussion was held.

**Resolved: (Crs Gibb/Bech)**

**THAT the Audit and Risk Committee approves the Risk Management Framework V9.0.**

**CARRIED**

**A&R21 | 2/04**

Deep Dive Report – Waikato District Council Employee Covid-19 Exposure Risk Assessment

Agenda Item 6.4

The report was received [A&R21/2/02] and taken as read. The following discussion was held:

- Report was prepared whilst still going through staff consultation process – risk assessments followed sound process and good quality data from MOH and WorkSafe.
- Biological hazard and therefore falls under health and safety. Observation there appears to be a point on the journey where we came to junction and we took one road rather than another which made our conclusions reached inevitable.
- Interested in reflection – is this a matter through which a lens of health and safety in the workplace is the dominant lens as that seemed to dominate the outcome. Staff confirmed this was the only lens that could be utilised when developing the assessments and strategy.
- Scope was from an employee health and safety perspective as a responsible employer. Advice is to review in six (6) months. Linked this work around risk vs business continuity issues.
- It was queried why some councils have reached a different decision in relation to access to libraries and community facilities.
- Risk assessment process was developed in regard to keeping our staff safe, but appears we are trying to put one lens on a pandemic issue to keep our staff in a bubble.
- ELT disagree – this issue relates to health and safety for staff and the community – offers controls and more certainty for all. The majority of staff are supportive of approach.

Building Quality Audits - September 2021; MBIE Territorial Authority Compliance Schedules & BCA Accreditation Internal Audit Summary Report

Agenda Item 6.6

The report was received [A&R21/2/02] and taken as read. The following discussion was held:

- Acknowledged that this work was done on top of a huge business as usual workload and appreciate the team's effort.
- Local Authorities had issued the highest number of building consents in history in the last year, yet macro economists advise we may see a reduction in work. Hearing anecdotal evidence that consultants are slowing a little but our work has not decreased and it looks like the increased workload will continue for at least another year.
- Materials have become an issue, people are starting to forecast their material 15-16 weeks in advance.
- Building consents have to start work within a year and the BCA must decide whether to issue/refuse a Code of Compliance Certificate within two years.
- Legislation does not provide any latitude for consents lapsing – Council was reasonably accommodating due to various reasons.

Waikato District Council Zero Harm Report  
Agenda Item 6.5

The report was received [A&R2 / 12/02] and taken as read. The following discussion was held:

- On 18 November a staff member at the Raglan Holiday Park sustained an electric shock whilst installing a pillar. They received support and first aid treatment on site and the incident was reported to WorkSafe – an investigation was being finalised at present and would be reported to the March 2022 meeting.
- Hazard and risk management list of new uncontrolled hazards – seem to be mainly in the customer support area. Most injuries seem to be hitting objects creating lacerations, therefore expect most engagement conversations would be in this area. However, most conversations reported were non work related issues in the COO group (wellness).
- Need to do more work in regard to our mechanisms of harm in Bware as they are pre-populated, restrictive and forced to pigeon hole based on what is in app. It is not until you read the incident report that you become aware of what had occurred.
- Small number of events which fit within this data and a more detailed report going to council in February 2022.
- New recording mechanism for uncontrolled hazards – lots of incidents categorized as near misses rather than uncontrolled hazards. Customer delivery team is prolific at reporting these, which is good, 10 received this week from this team – mainly regard to face mask use.
- Trying to drive our leaders to have more risk based conversations with their teams and capture these within Bware, whereas the focus has been around personal wellbeing rather than some of the risks they have.
- Discussion around emerging area of concern being return to work after working at home, then hybrid model and back to the office – people need to be work ready – not reflected in the report.
- Still a piece of work around managing working remotely to ensure their home is safe and another refresher induction was sent out to staff who were coming back into the office.
- A quantum move in how WDC staff work remotely, therefore what are we looking to manage as risk of more people working remotely in environments we can't really control; but we are responsible to ensure they are working in a safe environment.
- Developed an assessment tool for staff to utilise to self assess their home work environment and working with the Comms team to roll these out as we didn't primarily have to deal with these issues pre-covid.
- Concern raised around team resourcing and mental wellbeing with extra workload. Focussing on assessments and a lot of other work having to be put aside – ELT provide great support to the team and check in with our wellbeing.
- Some targets may not be met due to capacity constraints within teams.

Recognised Agency Surveillance Report for Waikato District Council

Agenda Item 6.7

The report was received [A&R21 / 2/02] and taken as read. The following discussion was held:

- The Chairperson acknowledged the positive feedback received in the audit.
- Annual audit is undertaken with an MPI representative.

Final Audit New Zealand Management Report for Year Ended 30 June 2021

Agenda Item 6.8

The report was received [A&R21 / 2/02] and taken as read. The following discussion was held:

- Items raised through audit this year:
  1. Sensitive expenditure policy (refer item below).
  2. Fourteen of previous audit recommendations were implemented or closed off.
  3. Eight (8) recommendations were still open, with work underway to address these
- Key changes for the government rules of sourcing will pose some very particular challenges, nothing in report indicates how we are going to comply with these new rules.
- Staff participated as a sector in the intent to roll out new rules to local government, however only government agencies were mandated to do this. From a practical perspective there are certain rules we are picking up from our strategy preparation.
- Audit NZ would like us to comply irrespective of mandating, we are still mindful of the items they would like us to comply with and do take a lens toward social procurement and how we might engage with Maaori and Pasifika owned entities.
- The Chairperson spoke to Audit NZ who reported no concerns – credit to CFO and team that they were comfortable to debate issues that were appropriate, which is a really important component of the constructive tension that should always exist between management and the auditors.
- Managed the remote audit work programme really well by the Finance team.
- Acknowledged Cyber security, health and safety, government sourcing and the journey that the Committee were on.
- In general there was really good feedback to the Finance team for this audit and congratulations to the staff involved.

Sensitive Expenditure Policy Review

## Agenda Item 6.9

The report was received [A&R21/12/02] and taken as read. The following discussion was held:

- Audit NZ had not reviewed the policy but recommended changes through the audit process that Council should tighten up in the existing policy.
- Complied with the OAG advice regarding cash gifts, which was always our intention and incorporated a majority of the recommendations from the audit.
- Next year's audit would have a table which shows changes as per the recommendations and reasons those recommendations were not implemented.

**Resolved: (Crs Bech/Gibb)**

**THAT the Audit & Risk Committee's endorsement of the revised Sensitive Expenditure Policy is noted for the February 2022 Policy & Regulatory meeting.**

**CARRIED****A&R21/12/05**Future Annual Work Programme 2022

## Agenda Item 7.2

The report was received [A&R21/12/02] and taken as read. The following discussion was held:

- This work programme was a consequence of the adoption/updated terms of reference.

**Resolved: (Crs Sedgwick/Gibb)**

**THAT the Audit & Risk Committee adopts the Future Annual Work Programme for 2022.**

**CARRIED****A&R21/12/06**Quality and Governance Assurance Report – December 2021

## Agenda Item 7.1

The report was received [A&R21/12/02] and taken as read. The following discussion was held:

- Ten (10) weeks of no overdue processes for which our Continuous Improvement Analyst is very proud and has also spoken at a sector event sharing the insights of our process as others are interested in how this has been achieved.
- Risk Advisor leaving and Resilience Manager position had been broadened to incorporate the risk portfolio.
- Noted that internal audit resourcing risks were identified – traditional approach is a coalition from across the organisation, but a new resource will also be engaged to assist the Resilience Manager in the future.

Register of Interests – Elected and Appointed Members  
Agenda Item 7.3

The report was received [A&R21 | 2/02] and taken as read. The following discussion was held:

- Chairperson requested any guidelines that should be taken into account before we decide on this matter.
- The issue was raised of inconsistency that whilst the registers are on Community Board agendas they were not on Standing Committee agendas.
- It was noted that historically they were on Community Board agendas as many were allocating local funding, which provided transparency for the boards as to whether a member had a conflict.
- The declaration item would cover this, which was included in all agendas. There will always be a requirement to have a register which is updated annually and could possibly be held on the website for transparency to the public.
- Driven in the past by good practice – would still be good to have a register (noted that this is a legislative requirement) – audited action annually.

**Resolved: (Crs Bech/Gibb)**

**THAT the Audit & Risk Committee notes the registers of interests and confirms:**

- a) **That the elected members interest registers be removed from community board agendas, but the declaration item remains to enable members to still declare any interest at each meeting.**

**CARRIED**

**A&R21 | 2/07**

**ACTION:** Democracy team to continue sending declaration forms out annually and updating the register, but remove the actual registers from all agendas.

**ACKNOWLEDGEMENT OF STAFF MEMBER LEAVING**

- Cr Bech added personal thanks to the Risk Advisor who was leaving Council – her passion, professionalism and contribution to this area had really assisted both the Committee and organisation to move in the right direction in this area. Very sorry to see Risk Advisor go as they had energised this area and taken other staff along for the journey.

**EXCLUSION OF THE PUBLIC**

Agenda Item 8

**Resolved: (CrsGibb/Sedgwick)**

- a) **THAT** the public be excluded from the following parts of the proceedings of this meeting.

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

<b>General subject of each matter to be considered</b>	<b>Reason for passing this resolution in relation to each matter</b>	<b>Ground(s) under section 48(1) for the passing of this resolution</b>
<b>Item number 1 Confirmation of Minutes</b>	<b>Good reason to withhold exists under Section 6 or Section 7 Local Government Official Information and Meetings Act 1987</b>	<b>Section 48(1)(a)</b>
<b>Item number 2.1 Fraud Declaration</b>		
<b>Item number 2.2 Fraud and Corruption Risk Management Update</b>		
<b>Item number 2.3 Register of Members' Interests – Staff</b>		
<b>Item number 2.4 Committee time with Audit NZ (management excluded)</b>		

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

Item No.	Section	Interest
Item 1 Confirmation of Minutes		Refer to the previous Public Excluded reason in the agenda for this meeting.
Item 2.1 Fraud Declaration	7(2)(a)	To protect the privacy of natural persons, including that of deceased natural persons.
Item 2.2 Fraud and Corruption Risk Management Update	7(2)(a)	To protect the privacy of natural persons, including that of deceased natural persons
	7(2)(c)(ii)	To protect information which is subject to an obligation of confidence or which any person has been or could be compelled to provide under the authority of any enactment, where the making available of the information—  (ii) would be likely otherwise to damage the public interest;
Item 2.3 Register of Members' Interests – Staff	7(2)(a)	To protect the privacy of natural persons, including that of deceased natural persons.
Item number 2.4 Committee time with Audit NZ (management excluded)	7(2)(c)(ii)	To protect information which is subject to an obligation of confidence or which any person has been or could be compelled to provide under the authority of any enactment, where the making available of the information would be likely otherwise to damage the public interest.

**CARRIED**

**A&R2112/08**

Resolutions A&R2112/09 – A&R2112/11 are contained in the public excluded section of these minutes.





**To** | **Audit and Risk Committee**  
**Report title** | **Actions Register – March 2022**

**1. Purpose of the report**  
**Te Take moo te puurongo**

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To update the Audit and Risk Committee on the actions arising from the previous meeting.

**2. Staff recommendations**  
**Tuutohu-aa-kaimahi**

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**That the Audit and Risk Committee receives the report.**

**3. Attachments**  
**Ngaa taapirihanga**

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Attachment 1 – Audit and Risk Committee Actions Register March 2022

Date:	6 April 2022
Report Author:	Tony Whittaker, Chief Operating Officer

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**Audit & Risk Committee: Action Register – March 2022**

#	Action	Owner	Date Assigned	Date Due	Status
3	<p><b>Strategic Risk Register and Emerging Risks</b></p> <p>Reporting mechanisms to be refined to highlight the issues the committee need to be abreast of, with the balance of issues on track being in the attachment report.</p> <p>Reports to make it clear whether Committee action required.</p>	Risk Advisor	December 2021	July 2022	In progress. Dashboard provided for key strategic risks comparing residual risk to risk appetite. The trending dashboard used for the Zero Harm risk will now be rolled out to other risks.
7	<p><b>Audit &amp; Risk Committee Maturity</b></p> <p>Chair to consider the measurement of progress regarding the effectiveness and maturity of committee.</p>	Chair / Chief Operating Officer	September 2021	March 2022	<p>The Chair and Chief Operating Officer have contacted KPMG to explore ways to achieve this. Proposed actions are:</p> <ul style="list-style-type: none"> <li>• 360 feedback survey (incl in agenda)</li> <li>• Chair and COO to participate in LASS organized session on A&amp;RC effectiveness, what works well etc.</li> <li>• KPMG to observe an A&amp;RC meeting for assessment of effectiveness</li> </ul>
	<p><b>Reform – RMA and Three Waters</b></p> <p>Committee to be kept informed between meetings where early involvement re impact risk is required</p>	Chief Operating Officer	December 2021	Ongoing	Noted.
	<p><b>ComplyWith Legal Compliance Tool</b></p> <p>Connect with Cr Gibb for understanding of product.</p>	Chief Financial Officer	December 2021	April 2022	Meeting with Cr. Gibb set for Tuesday 5 <sup>th</sup> April.

	<p><b>Members Interests</b></p> <p>Democracy to continue to update the interests register annually and remove the register from all registers, instead relying on member declarations.</p>	Chief Operating Officer/Democracy Manager	March 2022	Ongoing	<p>All interest registers have been removed from agendas. Each time a declaration of interest is made the democracy representative checks the register is up to date for that member. Elected members also send us an email if they have a new declaration as they arise. Elected member interests are to be available for the inspection of the public.</p> <p>Following the elections in October 2022 new declaration forms will be sent out to members and updated regularly as advised by elected members.</p>
	<p><b>Staff Interests</b></p> <p>To consider whether the Committee needs to see the entire register or whether an exceptions/changes basis is more practical.</p>	Chief Financial Officer/Democracy Manager	December 2021	April 2022	<p>Staff interests do not need to be made available to the public and will be removed from the Audit &amp; Risk Agendas moving forward.</p> <p>The staff declarations will continue to be collected as they are an important control in managing fraud risk, and actual or perceived conflicts of interest.</p>
8	<p><b>Audit &amp; Risk Committee Focus</b></p> <p>Chair driving brevity – focus on critical risks and assurance.</p>	Chair / Chief Operating Officer	September 2021	Ongoing	Work in progress. Committee to provide feedback on this agenda.
	<p><b>Internal Audit</b></p> <p>Consider internal audit of process mitigating future financial impact of development agreement</p>	Chief Financial Officer	December 2021		<p>Section 207C of the Local Government Act 2002 stipulates what must be contained in a development agreement.</p> <p>Timing, scope of works and cost of the infrastructure is critical to the process and while the contract may be amended through mutual agreement (as per section 207F) certainty of cost is the key reason developers request Council to consider a development agreement.</p> <p>Development agreements to support commercial/industrial requirements have a higher level of risk because the relative triggers that enable us to charge are limited and occur early in the development cycle – building consent code of compliance, and/or initial connection to service.</p>

					<p>Inaccuracies in forecast timing, scope or cost can result in adverse outcomes.</p> <p>The following mechanisms are used to reduce the risk to council:</p> <ul style="list-style-type: none"><li>• The development contribution model is used to determine the appropriate share of costs and factors in timing of development, infrastructure provision, inflation, and interest impacts.</li><li>• Where possible (e.g., the development relationship will span several years), the cost share will be incorporated into our DC Policy allowing for regular update of charges.</li><li>• Quality surveyor review of costings and/or open procurement process required.</li><li>• External legal advice is sought for DC/DA related matters.</li><li>• Stipulating a cap for council's contribution towards developer-led infrastructure.</li></ul> <p>The local government DC working group has been approached for insights on common pain points/best practice for commercial/industrial agreements. An update will be provided to the committee when information is available.</p>
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**To** | **Audit & Risk Committee**  
**Report title** | **Chief Financial Officer report**

## **1. Purpose of the report**

### **Te Take moo te puurongo**

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This report aims to keep the Audit & Risk Committee abreast of risks and issues that could impact council and its stakeholders from a financial perspective.

## **2. Executive summary**

### **Whakaraapopototanga matua**

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#### **Covid update**

A number of council staff and their households have been affected by covid-19 in the first quarter of 2022.

An 'opt-in' process has been established to allow council to access the government covid-19 leave scheme. To be eligible for the leave support scheme, affected staff (who are required to self-isolate for at least 4 consecutive days) must agree to Work and Income potentially sharing their covid status with other authorities.

To date, 33 staff have registered approximately 825 hours of leave under the covid-19 leave category. This gives an indication of how many staff have been impacted directly by covid, however, there will be some staff that have continued to work through their self-isolation period, and others who do not wish to disclose and have used other leave categories so the numbers could be understated.

The scheme will pay \$600 for full time equivalent workers and \$359 for part-time workers and will allow staff to be paid for that leave rather than having to use their usual sick leave balance. Council has up to 8 weeks from the end of the staff members self-isolation period to apply for the subsidy. The first subsidy payment was received in March.

Business continuity plans have been triggered in multiple business units which may ultimately result in higher costs (consultant/contractor cover) and/or delayed deliverables.

#### **Three Waters Reform update**

Following the decision to create 4 new water entities a working group was formed to further progress representation, governance, and accountability frameworks for the new water services entities.

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The report to the minister was presented on 28 February 2022, with a total of 47 recommendations. The key recommendations (as per the links provided at the end of this report) seek to address localism and further reduce the risk of privatisation, such as:

- Implementing a public shareholding structure with a proposed shareholding of 1 share per 50,000 head of population
- Creating sub-regional representation groups, from council and iwi/ hapū, to feed local voice into the regional entities to help with investment prioritisation
- Strengthening of Te Mana o te Wai and Te Tiriti within the three waters system

It has also been recommended that a review of the three waters structure is undertaken once the entities have been operational for a period of 5 years.

### **Audit timeframes**

June 2021 audits are still being completed by Audit New Zealand, which is anticipated to affect the interim, and potentially final, audit timings for the current year. The audit plan which is usually received in March will be deferred to the June committee meeting.

Internal preparation is underway based on resolving key audit issues raised in the 2021 management report.

### **Other matters**

#### **2022 Budget policy statement and initiatives open for submission**

The budget policy statement for 2022 was released in December 2021.

Budgets for the current parliamentary term seek to:

- Continue the effort to keep NZ safe from Covid-19
- Accelerate recovery and rebuild efforts
- Address climate change, housing affordability and child poverty

Main policy areas for 2022 are to embed the health reforms (moving district health boards to one national organisation supported by a Māori health authority and a dedicated public health agency) and to make progress towards emissions reduction (climate emergency response fund).

The following Ministry initiatives are also being consulted on currently and may impact council and its stakeholders:

Taumata Arowai	Drinking water standards (implementation requirements for councils/water services entities)
Ministry for the Environment	NZ emissions trading scheme and indigenous afforestation incentives (opportunity for council forestry holdings)
Ministry of Transport	Changes to the Road User Charges system to support uptake of low carbon vehicles (impacts for council fleet decisions, possible impact on fuel tax revenue, Waka Kotahi subsidies)
Ministry for the Environment	Proposals for changes to recycling (main impact for council is on proposals for consistent standards for recycling collection, and all urban populations to have kerbside food scrap collection)

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## Geopolitical events

The invasion of Ukraine is anticipated to raise global inflation to ~6% and could result in global recession if not resolved swiftly. While New Zealand does have direct trade dealings with both Russia and Ukraine, the impact for New Zealand is likely to come through rising global commodity prices.

Direct impacts for council could be:

- Continued supply chain disruptions – higher contract costs, limited availability of materials, delays in deliverables
- Reduction in subdivision and building activity
- Increased vehicle purchase costs (base metal supply)
- Increased fuel costs – Council fuel cost impacts for March not yet known, but have been increasing steadily with February comparative 20% higher than the prior year

## 3. Staff recommendations Tuutohu-aa-kaimahi

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**That the Audit & Risk Committee receives the report.**

## 4. Attachments Ngaa taapirihanga

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Three waters reform report

[https://www.dia.govt.nz/diawebsite.nsf/Files/Three-waters-reform-programme-2022/\\$file/Governance-Working-Group-Report\\_Executive-Summary.pdf](https://www.dia.govt.nz/diawebsite.nsf/Files/Three-waters-reform-programme-2022/$file/Governance-Working-Group-Report_Executive-Summary.pdf)

[https://www.dia.govt.nz/diawebsite.nsf/Files/Three-waters-reform-programme-2022/\\$file/Governance-Working-Group-Report.pdf](https://www.dia.govt.nz/diawebsite.nsf/Files/Three-waters-reform-programme-2022/$file/Governance-Working-Group-Report.pdf)

Date:	6 April 2022
Report Author:	Alison Diaz, Chief Financial Officer

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<b>To</b>	<b>Audit &amp; Risk Committee</b>
<b>Report title</b>	<b>Strategic Risk Register and Emerging Risks April 2022</b>

## **1. Purpose of the report**

### **Te Take moo te puurongo**

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To update/inform the Audit and Risk Committee on the:

- Risk Appetite Statement and Strategic Risk Register update (changes from the December 2021 workshop).
- Emerging Risks

## **2. Executive summary**

### **Whakaraapopototanga matua**

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Council's Risk Appetite Statement and Strategic Risk Register have been updated with outcomes from the Audit and Risk Committee workshop in December 2021. Work will now be undertaken to review existing mitigations in the risk register with the goal to increase the overall quality of mitigations we have in place.

Emerging risks, mostly relating to COVID-19 impacts and response, are being monitored and appropriate input is being provided through existing relationships and forums. Council continues to monitor developments associated with future reforms.

## **3. Staff recommendations**

### **Tuutohu-aa-kaimahi**

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**That the Audit and Risk Committee notes the updated Risk Appetite Statement and Risk Register.**

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## 4. Discussion Matapaki

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Council is managing eleven Strategic Risks. Attachments 1 and 2 detail the changes made following the review in December 2021.

In summary:

- Updated Risk Appetite Statement:
  - Greater appetite for reputational risk e.g., communication of affordability to the community;
  - Lower appetite for discretionary spend, focusing on financial capacity constraints to keep within LTP obligations;
  - Lower appetite for environmental risk, given Councils commitment to climate change and adaptation;
  - Greater appetite for risk associated with the legislative compliance;
  - Greater appetite for risk in delivering infrastructure and asset management; and
  - Greater appetite for digital execution
  
- Updated Strategic Risk Register
  - Four risks have been revised to better define the risk;
  - Four risks remain unchanged; and
  - Three risks have been archived and are now covered by refining other risks.

Further work is required to review risk treatments for all risks contained within the strategic risk register. This work aims to determine the effectiveness of existing risk treatments and to identify where the quality of the mitigations can be improved. This is an integral step in Council's risk maturity journey. It increases the value add from risk management practices and assists management to focus on key areas of importance.

### **Emerging Risks**

The following activities are identified as having potential business impact in the risk context.

#### **1. Pandemic Response**

Impact: Zero Harm: *Significant harm is caused to workers, or others, due to poor or inactive health and safety systems, non-compliance with legislative requirements, or inadequate governance/ management of shared health and safety responsibilities with other PCBUs*

Impact: Business Resilience: *Business function is significantly interrupted due to a lack of organisational resilience.*

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The national response to COVID-19 has continually evolved and as a business, Council remained receptive to this changing environment and sought to continue to deliver services in a way that National protocols and restrictions allow.

The ongoing COVID-19 response will continue to be managed by the Incident Management Team using the COVID-19 Safe Systems of Work Plan to inform decision making. This ensures our business understands the current operating model we must work with to meet Ministry of Health requirements, while continuing to deliver our services.

The current impacts on the workforce associated with the Omicron outbreak, is a reduction in resource capacity. Key risk impact areas are delivery of services to the community and challenges when responding to incident and emergency events outside of business as usual. The Incident Management Team continues to work with council teams to use Business Continuity Plans to re-prioritise staff appropriately.

A report examining our response to COVID-19 is planned for the last quarter.

## **2. Inflationary Pressure**

Impact: Business Resilience: *Business function is significantly interrupted due to a lack of organisational resilience.*

Impact: People & Culture: *Business outcomes are significantly impacted due to an inability to attract and or retain suitable personnel.*

Impact: Economic & Social Development: *Waikato district suffers inhibited economic and social development and or missed funding opportunity as a result of poor planning, investment strategy, or relationships.*

Impact: Community Expectations: *Waikato District Council fails to meet key community expectations associated with the capital works program and key plans as the result of failed processes, systems or due to a lack of capability.*

New Zealand is currently experiencing high rates of inflation. Prices for energy, food, housing, and goods, and supply-chain issues, including staff resource, are impacted. A rise in cost of living creates uncertainty for our communities and pressure on the supply chain requires our business to remain agile and prepared to continue to deliver our services.

Council will utilise a 'floating line' methodology where necessary to respond to these impacts. The floating line will help maintain relative delivery priorities of our work programmes.

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Council also has rates postponement and remission policies in place and will work with ratepayers on payment plans where required. Where property owners are unable to sustain their homeowner costs (rates or other bills) they would need to seek advice from their bank/financial advisor/citizens advice bureau etc.

## 5. Next steps Ahu whakamua

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### **Strategic Risk Activities**

During the last quarter, the following risk activities were conducted:

- Recruitment of a new Risk Advisor, David Tillman. David commences his new role on 4 April 2022.

Planned activities for the next quarter include:

- Review and update all strategic risk mitigations. This will require quite an overhaul to establish quality mitigations (as discussed prior to Christmas).
- Develop and refine the Strategic Risk Report (modelled on the Zero Harm mitigation effectiveness and timeline).

## 6. Attachments Ngaa taapirihanga

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Attachment 1 – Risk Appetite Statement (Updated December 2021)

Attachment 2 – Strategic Risk Register (Updated December 2021)

Date:	6 April 2022
Report Author:	Kelly Newell, Resilience Manager
Authorised by:	Tony Whittaker Chief Operating Officer

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Waikato District Council

# Risk Appetite Statement



Katja Jenkins  
30 March 2022

## Waikato District Council - Risk Appetite Statement

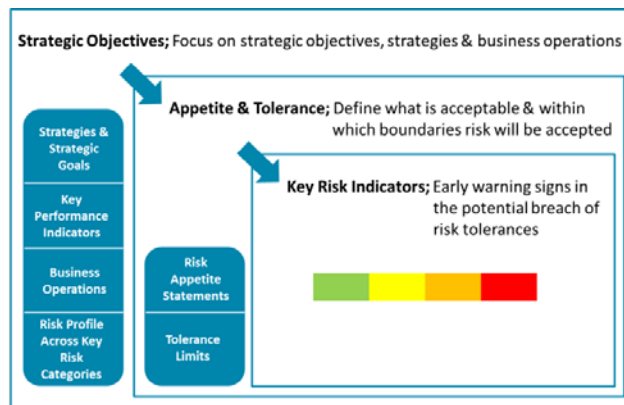


**Risk appetite** is the conscious decision about which risks, and how much of each, the organisation is willing to accept ~~in order to~~ deliver our vision of liveable, thriving, and connected communities. Councils risk appetite reflects how we run our business, our internal risk management capabilities, and our organisational culture. Our appetite for risk is influenced by several factors including the local, national, and global business environment, our people, our community needs and wants, our business systems and our policies.

Having a clearly defined risk appetite provides the wider organisation clarity on the nature and degree of risks that can be taken as we carry out our strategic, operational and project work.

Defining risk appetite helps to deliver the organisations overall strategy. It is therefore a task for the Executive Leadership Team and Council through the Audit & Risk Committee.

Defining and articulating risk appetite has a positive influence on our culture and behaviour. It gives our people an improved understanding of what levels of risk they can take to deliver outcomes and where risk needs to be escalated so they are empowered to make decisions, resulting in greater business efficiency.



- CLARITY**
  - Clarify & communicate ELT & Councils expectations on the amount of risk the organisation is willing to take and accept
  - Align understanding of risk strategies across the organisation
- GOVERNANCE**
  - Delegate authority at the operational level to proactively manage & monitor risks within agreed timeframes
  - Define clear reporting & escalation thresholds & protocols to ELT & ARC
- CONTROLS & ASSURANCE**
  - Enhance risk oversight & assurance by providing robust means to assume acceptable risk types and levels
  - Optimise risk management & control adequacy & effectiveness for key risks ensuring early actions are taken before risks materialise
- RISK CULTURE**
  - Encourage consistent & desired risk behaviours across the organisation
  - Involve stakeholders alongside the business to implement good risk management practices

Risk appetite is the key component of effectively communicating the Executive Leadership Teams risk expectations to our people. It encourages a common approach across our three lines of defence, which are made up of:

- The people who are managing risk
- The people who are setting and overseeing risk management practices, and,
- The people that provide risk assurance

Discrepancies between the Councils agreed risk appetite and residual risk levels reveal whether more controls are needed to appropriately manage a risk or whether there is potential for more opportunity to be sought.

Waikato District Council - Risk Appetite Statement



Council is driven by its vision to deliver Liveable, Thriving, and Connected Communities and recognises that achieving the associated objectives involves a comprehensive work programme. Eleven key themes provide staff and Management a shared understanding of the internal strategies that will deliver on the commitments made. The themes are:

Our Purpose	Partnership & Funding	Teams
Sustained Innovation	Empowerment	Growth
Community Focus	Capability	IM Roadmap
Risk	Accountability	

The strategic direction is summarised through the Community and Corporate outcomes detailed below:

**Note:** Post COVID-19 the Community and Corporate outcomes are supported by our Recovery Plan. The recovery plan affirms Council will work in partnership to deliver optimal outcomes for our people, both internally and externally, with the aim to ensure our business supports the recovery of our district.

**COMMUNITY OUTCOMES**

<b>Sustaining Our Environment</b>	Waikato District is a community that believes in environmental sustainability; Council will pursue and promote environmentally sustainable ideas and manage regulatory process to safeguard and improve the district.
<b>Providing value for money</b>	Residents/Ratepayers get value for money because Council finds innovative ways to deliver strategic, timely and fit for purpose infrastructure and services at the most effective cost.
<b>Supporting Our communities</b>	Council considers the well-being of all the people in the district during the planning and delivery of Council activities and will support and plan for the development of complete and connected communities.
<b>Building Our Economy</b>	Council aims to attract diverse enterprise/business which create jobs and opportunities for the districts communities whilst supporting existing industry. Support will also be provided to others who leverage our location to encourage tourism and bring benefits to a range of people in the district's communities.
<b>Working Together</b>	Council will work with communities to collectively focus on the right things at the right time.



## Waikato District Council - Risk Appetite Statement



### CORPORATE OUTCOMES

<b>Customer &amp; Community</b>	<p>We apply a human centred approach to our service design to support our business units to re-evaluate their services and reset their priorities where required.</p> <p>We coordinate the delivery of our information, so our customers understand it and want to engage with us.</p> <p>We co-design with our customers creating a multi-channel customer experience to meet their needs in step with our district growth and requirements, making navigating council easy.</p> <p>We understand who our customers are and what is important to them and build strong local relationships so that we can easily engage on topics that matter to them.</p> <p>We make engaging with us easy by understanding and aligning our marketing and communications to our communities' desires and by coordinating our efforts across the business</p> <p>We deliver a brand that has strong and respected recognition with our stakeholders and community.</p>
<b>Financial Stewardship</b>	<p>We know what activities to focus on, how they align with agreed strategies and when and where the money will come from. Resources are deployed to the best possible effect based on community wants or needs</p> <p>We have a deep understanding of our business, how to support long term service delivery, and, regularly review and test for efficiency and effectiveness. We try new things in recognition that value is broader than cost efficiency alone and have clear measures of what value should be delivered.</p> <p>We manage public money and we take our financial responsibilities seriously demonstrating effective cost control and accurate forecasting. We are transparent and adhere to financial controls.</p>
<b>Innovation</b>	<p>We are mobile and connected, with digital tools that can provide our services from anywhere in our district.</p> <p>Our information is presented to us in a way that we can understand and digest and is stored once in a master source location. We have access to the information that prepares our organisation to respond.</p> <p>We collaborate to deliver innovative services and digital engagement responsibly. Our systems are integrated to make it easy to access and share information internally and externally.</p> <p>We actively seek opportunities to provide benefits to the community, the organisation, and individuals.</p>
<b>Our People</b>	<p>We know that organisation strategy cannot be successful without an employee experience commitment. We are an employer of choice with highly engaged employees delivering exceptional service. We invest in our people and they understand the role of our organisation within communities and their role in contributing to the same.</p> <p>We recognise the skills and creativity of individuals and allow them to make and implement decisions. We focus on outcomes (not outputs) which encourage a supportive, sharing, integrated organisation.</p>



## Waikato District Council - Risk Appetite Statement



### STATEMENT SUMMARY

Council is willing to take well defined risks at a moderate to high level where it will result in delivering appropriate community solutions, specifically in the areas of [growth, projects, financial management and](#) internal culture.

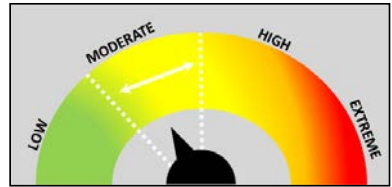
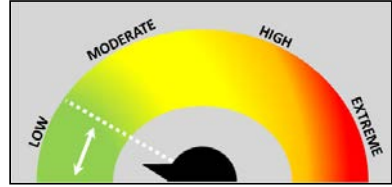
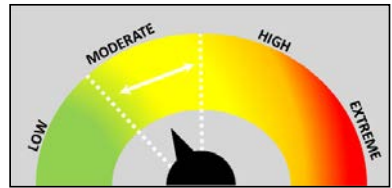
Council understands that the successful achievement of its objectives is significantly underpinned by its perceived reputation with its customers. [Council will continue. Accordingly, Council can only accept lower levels of risk where reputation is in question and to](#) places emphasis on seeking outcomes that encourage and support positive customer relationships [whilst accepting that a moderate level of risk may be required to achieve objectives in the current dynamic environment.](#)

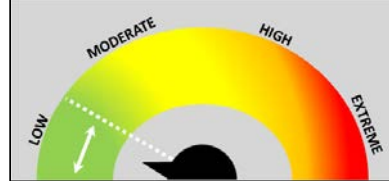
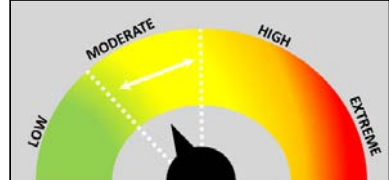
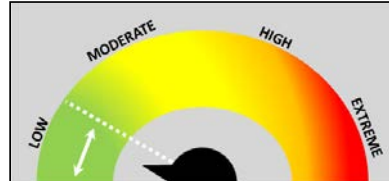
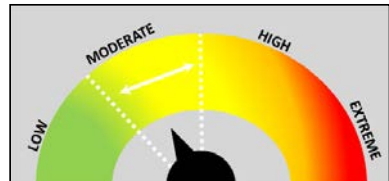
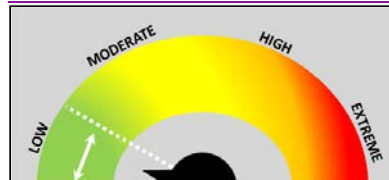
The risk appetite statements in this document are for Council, contractors, and partners. Details on individual risk portfolios are set out subsequently in this document.

Where the adoption of strategies, initiatives or actions has potential to exceed the stated risk appetite, consultation with the Executive Leadership Team and Council, through its Audit & Risk Committee, is required prior to those activities commencing.

Waikato District Council - Risk Appetite Statement



RISK PORTFOLIO	PORTFOLIO DESCRIPTION	RISK APPETITE	RISK APPETITE STATEMENTS	POTENTIAL KEY RISK INDICATOR
<b>Business Continuity</b> Operational Resilience	Business continuity risks impacting the day to day business function and level of service delivery. These can be from inadequate or failed internal processes, activities, and systems (recruitment, training, change management), or from unforeseen external events (such as a natural disaster or unprecedented growth) that disrupt normal business operations.	Moderate 	<p>Continuity of services and availability of accurate and timely information to Council and the Executive is crucial. Organisational engagement with business continuity planning is therefore considered a key approach. Council has in place a resilience framework which incorporates Risk Management, Incident Management, and Emergency Management as the supporting disciplines which enable business continuity.</p> <p>Council strives to reduce risk to low to ensure we deliver services efficiently to our customers but recognises that we need to allow opportunity for innovation during times of change (as demonstrated during the initial lockdown resulting from the COVID-19 pandemic). We therefore have a moderate tolerance for risk whilst still carefully considering the impact of activities to ensure continuity of essential services.</p>	Business continuity/IMT Operational KPIs (number required through BU/GM reports)
<b>People</b> Zero Harm	Risks associated with both the health and safety of people and with the organisations internal culture. These types of risks typically result from: <ul style="list-style-type: none"> <li>Deficient health and safety procedures,</li> <li>Staff constraints resulting from attrition and recruitment,</li> <li>Capability (employees, partners or suppliers lack the necessary skill &amp; knowledge to do jobs correctly),</li> <li>Dishonesty or corruption, or</li> <li>Ineffective workplace culture</li> </ul>	Low 	<p>Employee wellbeing is a priority and hence Council is not prepared to compromise on health and safety standards in any way. We are committed to safety leadership, good health and safety practice and ensuring continuous improvement.</p> <p>Council recognises that there are a great many threats in our day to day operations that cannot be influenced or controlled and acknowledges that there must be a level of tolerance for those threats in order to operate effectively. We do not however have any appetite for taking risk when it comes to people’s health and safety and will not tolerate intentional risk taking with health and safety impacts of any kind.</p> <p>We aspire to be better than good enough.</p>	Number of zero harm incidents Lead KPI – TRIFR Near miss reports Safety Conversations
<b>People</b> People & Culture		Moderate 	<p>Council recognises that human capital (with consideration to people’s knowledge, skills, attitude, and behaviours) is a critical asset and key to achieving the organisational objectives.</p> <p>Council is willing to invest in attracting, developing, and retaining talent with the right skill sets and competencies, and will maintain a robust succession plan for key positions to ensure leadership capability and continuity.</p> <p>We are prepared to implement projects that support organisational change to deliver an efficient workplace culture and to make tough decisions to ensure the organisation is not compromising on its commitments to the values that ensure a compliant, healthy, and productive workplace culture.</p>	Staff turn-over Decline in staff engagement survey Number of internal complaints & investigations Whistleblowing Bullying

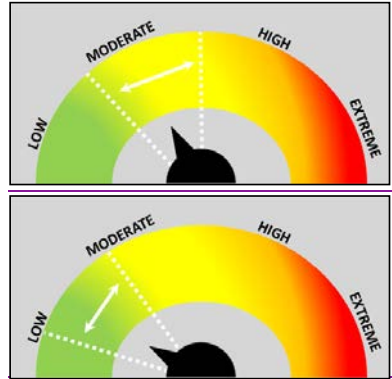
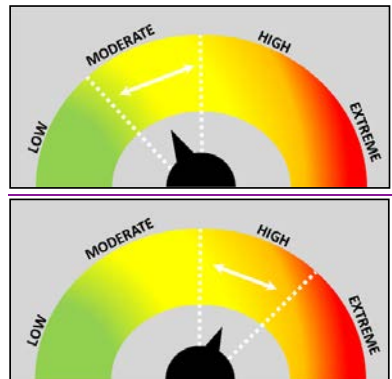
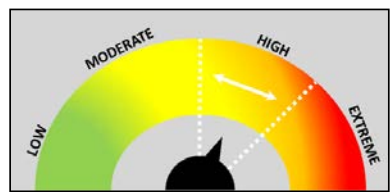
RISK PORTFOLIO	PORTFOLIO DESCRIPTION	RISK APPETITE	RISK APPETITE STATEMENTS	POTENTIAL KEY RISK INDICATOR
Financial	Risks related to the financial management and ability to fund Council activities and operations now, and into the future. Risks related to the management of operational and or project budgets (potential for loss). External economic factors related to changes in the prevailing market conditions that impact on Council's financial capability.	Moderate  	With consideration to Council's financial management, and our ability to fund operations now and into the future, Council's key approach is to be proactive rather than reactive. <del>With this in mind, need to spend to achieve; not because poor process has resulted in overspend, but because it is the right way to do things and we are getting value for that money.</del> Council <del>is willing to accept</del> will make financial investment decisions with a focus on value for money financial investment as a way of to delivering better outcomes and making hard decisions around finances for the future for the future.	Treasury Risk Management Policy Compliance Variance to budget <ul style="list-style-type: none"> <li>Opex</li> <li>Capex</li> </ul>
Financial Fraud		Low 	As a taxpayer funded organisation, Council has zero tolerance to fraud. Even a minor fraud incident or suspected fraud will result in the loss of customer trust and confidence.	Identified incident of fraud by Councillor, Executive, Staff or Partner Number of control breakdowns identified through audit and compliance programme Lead Indicator – Whistleblowing events
Reputation / Image	Risks related to the impact of organisation actions (business undertakings). Reputational risks typically result when the public perception of Councils actions and /or Councils personnel are deemed to be inappropriate.	Low  	The risk appetite of Council and the Executive is driven by the desire to earn the trust of our communities (reputation, image, and branding), and for our customers to understand we have their best interests at heart. We want our customers to view us as experts whose purpose is to provide for them and we accept that a moderate level of risk is required to deliver those outcomes. For this reason, Council and the Executive prefer to make decisions on issues that may impact reputation or community relationships.	Media response Complaints/Compliments Initiation of government tribunal inquiry

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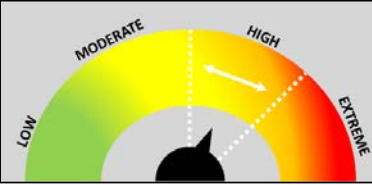
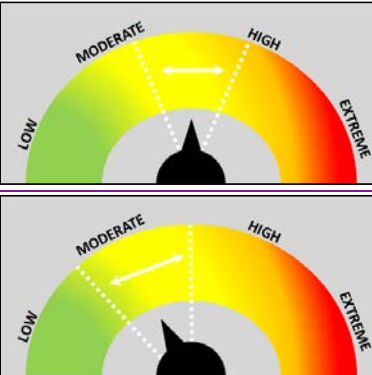
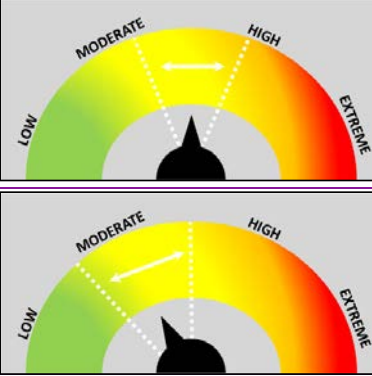
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Waikato District Council - Risk Appetite Statement



RISK PORTFOLIO	PORTFOLIO DESCRIPTION	RISK APPETITE	RISK APPETITE STATEMENTS	POTENTIAL KEY RISK INDICATOR
<b>Compliance / Regulatory</b>	Risks related to Council's exposure to liability (legal action, fines, non-compliance against consent conditions, codes etc.)	Low – Moderate 	<p>Council and the Executive have a strong desire to be compliant with regulatory requirements to ensure customers, staff, and Council are appropriately protected from exposure to liability. However, as a local government organisation, Council is subject to regulatory changes which sometimes take time to effect and may therefore need to be prioritized. Subsets of the risk appetite are defined as follows:</p> <ul style="list-style-type: none"> <li>• H&amp;S – Low</li> <li>• Legislation – Low</li> <li>• Corporate – Low to moderate</li> <li>• By-laws – Moderate</li> <li>• Consenting – Moderate</li> </ul> <p>Council's strategy is 'Engage; Educate; Enforce'.</p>	<p>Number of non-compliances identified through the compliance programme</p> <p>Instance of non-compliance raised by a regulatory body</p> <p>New/Changed legislation</p> <p>KPIs</p>
<b>Environmental</b>	Potential or actual negative environmental or ecological impacts, regardless of whether these are reversible or irreversible, man-made, or caused by natural occurrence.	High 	<p>Council supports environmental sustainability and stewardship. This includes pursuing and promoting environmental initiatives to improve and protect the district.</p> <p>Councils planning controls for development, building, transport, infrastructure, and recreation, along with our service provision, assist in protecting cultural heritage and the natural and physical environment through legislative compliance. Council has in place a Climate Response and Resilience Policy and Plan that outline actions which, when put into effect, meet audit and statutory obligations, and community expectations, to mitigate and adapt to climate change. Council is however cognisant of the risk of increasing costs to achieve satisfactory environmental outcomes, particularly where climate change and emissions reductions are concerned, and of the potential for forthcoming legislative change. Council currently has a <u>moderate-high</u> level of tolerance for these risks but will seek to review this position regularly as National Government reforms come into effect.</p>	<p>Challenge of decisions</p> <p>Maintaining monitoring programme</p> <p>Non-compliances identified</p>
<b>Political &amp; Strategic</b>	These risks impact the organisations ability to achieve its strategic objectives including the provision of infrastructure and services as a result of political conditions. This may be attributed to internal factors such as the actions of politicians, or external factors such as legislative change, or significant growth.	High 	<p>Council seeks opportunities to enhance the value it delivers to its customers. Lack of strategic planning and political action can impact our ability to remain relevant to our customers. Council is willing to take risks to achieve strategic objectives through key investments such as digital transformation, economic development, and innovation.</p>	<p>Delays in launch/progressing key strategic initiatives</p>



RISK PORTFOLIO	PORTFOLIO DESCRIPTION	RISK APPETITE	RISK APPETITE STATEMENTS	POTENTIAL KEY RISK INDICATOR
<p><b>Political &amp; Strategic</b> Growth</p>		<p>High</p> 	<p>Council has experienced substantial growth during the last decade however economic uncertainty associated with the impact of the COVID-19 pandemic may impact the accuracy of growth projections.</p> <p>The provision of appropriate infrastructure and services for a growing population has several challenges, including added pressure on Council to manage increasing workloads and in seeking alternative infrastructure funding opportunities.</p> <p>To facilitate development Council is prepared to consider new and innovative ways of providing services. These include exploring beneficial partnerships, providing incentives for local businesses, and supporting and promoting social initiatives including place making and environmental programmes.</p>	<p>Meeting NPS requirements Developer survey Economic development net promoter score</p>
<p><b>Technical</b> Cyber Security &amp; IT Dependence</p>	<p>These are quality risks affecting Councils ability to complete or have confidence in a task, activity, project, or operation.</p> <p>They include:</p> <ul style="list-style-type: none"> <li>• Technical capability and performance of new and existing equipment e.g. tools, technology, software, hardware</li> <li>• Project capability and performance</li> </ul>	<p>Low – Moderate</p> 	<p>Council recognises the business advantages of expanding its technological capability and performance. Council is actively seeking opportunities to use technology to improve customer service and anticipate a growing dependency on technology in delivering more effective and efficient business outcomes. Council acknowledges moving towards technological solutions comes with increased threat of cyber-attack and is willing to accept moderate <u>to high</u> risk to gain advantage, whilst remaining pro-active and vigilant to cyber security related risk.</p>	<p>Number of security incidents caused by malicious software Number of audit findings where recommendations have been accepted but not remediated/ have become over-due</p>
<p><b>Technical</b> Projects</p>		<p>Moderate</p> 	<p>Council undertakes varied projects to effectively deliver services to the community and will focus on meeting community expectations by delivering the right solutions to enable the development of our district and economy. Council understands this commitment brings additional risk associated with a higher degree of complexity and is willing to accept this in the interest of achieving long-term objectives.</p>	<p>Number of failures of benefits realised through key projects (failure / malfunction of technology / tools / equipment and or design / manufacturing competency) Project KPI's (RAG reports)</p>

## Attachment 2: Strategic Risk Register – Updates December 2021

Key	Title 2021	Description 2021	Title 2022	Description 2022
R00184	Zero Harm; Significant harm is caused to workers, or others, due to poor or inactive health and safety systems, non-compliance with legislative requirements, or inadequate governance/ management of shared health and safety responsibilities with other PCBUs.	People are harmed as a result of the Council failing to identify, implement, review and maintain appropriate health and safety policies, procedures, and processes or develop and sustain a culture of Zero Harm by eliminating or managing health, safety and wellbeing risks.	No Change	
R00234	Climate Resilience: Emission Reduction Targets Waikato District Council is exposed to litigation or financial impact as the result of failing to meet legislative requirements associated with emissions reduction.	Council fails to implement key actions to align with national reduction targets resulting in either prosecution or a need to financially offset emissions	Climate Resilience: Council experiences significant public scrutiny and or financial impact caused by Council being unable to effectively support Communities to adapt to climate impacts.	Communities hold Council accountable and or require significant emergency support from Council for inaction or untimely response to adverse and increasing climate impacts. This includes consideration of associated costs linked to poor planning and or inaction related to climate change adaptation.
R00235	Affordability: Waikato District Council is unable to deliver key community infrastructure and services due to insufficient funding streams.	Council is unable to provide or maintain required infrastructure or services due to a lack of funds sourced through rates or via other funding sources.	Affordability: Community needs are not met due to Council being unable to deliver new and or appropriately maintain existing infrastructure due to disparity between funding and cost.	Infrastructure delivery becomes unaffordable due to increasing costs associated with the current economic situation. This includes the cost of labour and supplies, and material availability.
R00233	Community Expectations: Waikato District Council fails to meet key community expectations associated with the capital works program (and other key plans) as the result of failed processes, systems or due to a lack of capability.	Inconsistent knowledge, practices and or efficiency results in Council failing to deliver or perform against expected programme outcomes.	Community Expectations: Council experiences significant public scrutiny due to being unable to meet key community expectations due to increasing costs and resources.	Misalignment between community wants and the viability of delivering those wants (financial and resourcing) results in communities losing faith in Council's ability and support.
R00128	Cyber Security: Council is exposed to significant business disruption caused by unauthorized access or damage to privileged information and or reduced data integrity resulting from cyber-attack or employee behaviour (externally or internally initiated).	Council systems or the information contained within are compromised by cyber-crime or a lack of compliance with process resulting in significant financial, reputational, and or business impact.	No Change	
R00190	People & Culture; Business outcomes are significantly impacted due to an inability to attract and or retain suitable personnel.	Council are unable to recruit, promote or keep staff in core service positions due to a lack of appropriately trained people, industry competition or perceived or actual Council culture.	No change	
R00053	Business Resilience: Business function is significantly disrupted due to a lack of organisational resilience.	Council operations are impacted through failure to create and prioritize action plans for implementation in the event of a business impact incident.	No Change	

R00189	Regional & National Strategic Planning & Legislative Reform; Council experiences significant disruption to business function caused by structural and legislative changes by central government and or national / regional strategic planning exercises.	Amendments to local or national legislation, government practices or other authorities require significant change to business operations.	Regional & National Strategic Planning & Legislative Reform; Council is financially disadvantaged and or experiences significant disruption due to being unable to effectively adapt to structural and legislative changes by central government and or national / regional strategic planning exercises.	A lack of insight, planning and or adaptability associated with national strategy and reforms results in Council incurring significant cost, additional resourcing pressure, and or wasted finance and resources.
New			Technical Capability: Council is unable to meet key business needs, including customer engagement, business resilience, and optimal service level requirements due to a lack of technical capability (people and systems).	Due to cost, insight and or capability, Council is unable to meet the demands of digital progression.
New			Workplace Culture: Business outcomes are significantly impacted due to a lack of change readiness and or poor internal culture within the workforce.	Council's people are unprepared, unwilling and or unable to effectively adapt to change resulting in poor performance and a degraded internal culture.
New			Project Delivery: Council is unable to deliver key capital projects due to a lack of capacity and or project capability.	Councils' capital works programme fails to meet timelines, cost and or quality requirements as the result of resourcing deficit and or poor planning and management practices.
R00185	Asset Management; Council fails to provide sustained delivery of core services as the result of critical assets failing or becoming unfit for purpose.	Assets failures (including Waters and Roding) caused by poor planning, maintenance and or management.	Archived (replaced by project and affordability risks)	
R00230	Growth; Council experiences significant business, financial and community disruption as the result of inaccurate growth forecasts.	This may include but is not limited to; decay in LOS, unmanageable funding allocations, speed of growth exceeding or not meeting growth forecasts, etc.	Archive (covered through infrastructure and community expectations risks)	
R00188	Economic & Social Development; Waikato district suffers inhibited economic and social development and or missed funding opportunity as a result of poor planning, investment strategy, and or relationships.	Council fails to promote and or identify opportunity for economic and social growth or fails to engage appropriately to encourage growth and development.	Archive (affordability and community expectations risks)	

<b>To</b>	<b>Audit and Risk Committee</b>
<b>Report title</b>	<b>WDC Zero Harm Safety Management System (ZHSMS) Review</b>

## **1. Purpose of the report**

### **Te Take moo te puurongo**

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To present a review of the Council's Zero Harm Safety Management System (ZHSMS) to ensure its continuing suitability, adequacy and effectiveness. As Council is using AS/NZS ISO 45001 ("the Standard") as its health and safety management system framework, this review has been undertaken in accordance with Section 9.3 of the Standard.

## **2. Executive summary**

### **Whakaraapopototanga matua**

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The management review attempts to provide an overview of the status of Council's evolving safety management system and highlights areas that have been developed and those that are currently in progress or planned for completion. The components that are planned for completion are detailed in the FY21/22 Zero Harm Strategic Improvement Plan.

The review process has identified the following items for consideration by the Executive Leadership Team (ELT);

- A review of Council's documented Zero Harm Commitment is undertaken before the end of 2022 as part of the 2022/2023 Strategic Plan workplan.
  - Subsequent audits of the ZHSMS are planned to be carried out annually by Council's internal audit function
  - Future management reviews of the ZHSMS are aligned with the end of the financial year for ease of performance data analysis and strategic improvement planning.
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### 3. Staff recommendations Tuutohu-aa-kaimahi

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**That the Audit and Risk Committee receives the report.**

### 4. Background Koorero whaimaarama

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Council is committed to pursuing a culture of Zero Harm by eliminating or managing health, safety and wellbeing risks. Our Zero Harm Safety Management System (consisting of policy, standards, guidelines, processes and procedures) will enable us to develop a sustainable zero harm culture and achieve best practice health and safety performance. We 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, safety and wellbeing.

### 5. Discussion Matapaki

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The following tables detail the elements that have been considered when undertaking the management review of our Zero Harm Safety Management System.

#### ***The status of actions from previous management review reports***

The first management review of the ZHSMS was completed in December 2020 and the findings presented to the Executive Leadership Team (ELT) and Audit & Risk Committee. No additional actions were identified following presentation of the report.

#### ***Changes in external and internal issues that are relevant to the ZHSMS including:***

- 1. The needs and expectations of interested parties***
- 2. Legal requirements and other requirements***
- 3. Risk and opportunities***

The recent electric shock event at the Raglan Holiday Park identified the need to review how elements of the ZHSMS are operationalised and implemented at this operational site. Examples include Safe Systems of Work (Standard operating procedures and Job Safety Analysis) and Contractor Management. An external Health & Safety consultant has been engaged to undertake a gap analysis of the Park's existing documentation and activities.

Where at all possible the Zero Harm team has been working closely with the Venue and Events and Open Spaces teams to provide support and advice on work being undertaken by volunteer community groups. The recruitment of a Halls Officer within the Venues and Events team will also further strengthen the ability to respond to health and safety support requests from Community Boards and Halls.

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A watching brief is occurring on WorkSafe NZ's latest good practice guidelines which are currently in draft. The target audience for these guidelines is PCBUs that fund, plan and undertake work activities on or near roads in New Zealand. Working on or near roadways is one of Council's critical safety risks and these guidelines may include additional control measures for managing this hazard and the risks it creates. These guidelines are intended to sit alongside Waka Kotahi's Code of Practice of Temporary Traffic Management (COPTTM). It should be noted that Waka Kotahi are currently consulting on eliminating COPTTM as a tool and resource and leaving road controlling authorities and contractors to develop their own.

The Covid-19 pandemic has continued to be one of the most significant risks of relevance to the ZHSMS. Throughout the pandemic our first priority has been the safety and wellbeing of our staff, contractors and customers. The Zero Harm team supports the Covid-19 response by providing advice and risk assessment support to the Incident Management Team (IMT) and frontline staff to ensure our people feel safe at work.

Covid-19 risk management controls have been integrated into contractor health and safety management requirements. Guideline documents have also been developed to support:

Covid-19 Risk exposure assessments and  
Covid-19 Rapid antigen testing

The introduction of risk controls such as compulsory facemask use and vaccine passes for customers accessing Council facilities, have led to a number of events being reported by customer facing staff in relation to the risk of dealing with difficult or aggressive customers.

Where possible and practicable, remote working has continued to be used as another risk control option in response to Covid-19.

In conjunction with the organisation's introduction of flexible working principles and to manage the risks associated with remote working, an electronic remote workstation risk assessment has been developed and is required to be completed by all staff during March 2022.

### ***Health, Safety and Wellbeing Policy and Objectives***

Council's Zero Harm Commitment (Policy) was developed and shared with the organisation in January 2020. The key elements of the Zero Harm Commitment including the Chief Executive's personal commitment to every staff member are shared with new workers via the Zero Harm induction programme and also included in the annual Zero Harm refresher induction. The ZHSMS details that Zero Harm Commitment is reviewed by every three years. It is recommended that the ELT plan to review the Zero Harm Commitment before the end of 2022.

To deliver on our Zero Harm Commitment and objectives, an annual Zero Harm Strategic Improvement Plan is developed. The extent to which the improvement objectives are met is reviewed by the Zero Harm team and reported to the Executive Leadership Team and Council on a regular basis. The FY21/22 plan contains 91 actions.

To date 24 are completed, 27 are underway and 21 are overdue. Overdue actions are related to the following activities

- Safety Leadership survey
- Safety Leadership training programme for People Leaders
- Wellbeing Collective strategy
- Zero Harm Assurance Calendar
- Contractor H&S Management training
- Community Hall Committees/Community Boards H&S needs analysis
- Critical Risk Bowtie for Working on or Near Roadways
- Emergency Management Standard and emergency response procedures

Completion of actions related to these activities have been affected by the Covid-19 pandemic with the Zero Harm team working on pandemic risk management and the resignation of a Zero Harm Advisor in December 2021.

### ***Health, Safety and Wellbeing Performance***

#### **Implementation of ISO45001**

Work has continued to progress over the last twelve months on developing, implementing and updating our ZHSMS to meet the ISO 45001 framework. The ZHSMS currently consists of 26 published standards and another 12 standards that are under development or not yet commenced (Refer to Attachment 1). Once developed the management standards are now published and readily accessible to the organisation on Waisite.

#### **Audit Results, Corrective Actions and Continual Improvement**

The suitability and adequacy of the ZHSMS has also been reviewed by an internal audit conducted in November 2021 by trained ISO 45001 internal auditors, Debbie Dalbeth and Madelina Baena Escamilla. The outcomes of the audit are detailed in *Zero Harm Safety Management System Audit 2021 – Post Implementation Report* that has been prepared for the Audit & Risk Committee. It is recommended that subsequent audits are planned to be carried out annually by Council's internal audit function. Maintaining a periodic ZHSMS audit meets one of the ISO45001 requirements. It provides opportunity for improvement and ensures the risk mitigation becomes and remains fully effective going forward.

The Zero Harm team in conjunction with the Executive Leadership Team (ELT) has also continued to progress the implementation of improvement actions identified from the H&S Governance Audit undertaken by KPMG in 2019. Council received 29 improvement actions and to date we have now completed 93% (27 out of 29 actions). The remaining actions are being tracked to completion via BWare Safety Manager.

### **All Staff Survey Results**

In July 2021 an all-staff survey was undertaken in conjunction with external provider Ask Your Team. Three of the 78 questions were directly related to Zero Harm with the following results:

- I understand how I contribute to Zero Harm – 83% up from 82% in 2020
- Waikato District Council is committed to making our work environment health and safe – 82% up from 81% in 2020
- The health, safety and wellbeing of staff at Waikato District Council is appropriately reflected in our systems, processes and work environments – 78% stayed the same as 2020 result.

The results highlight good levels of staff engagement with our Zero Harm vision and recognition of the organisations commitment to Zero Harm.

### **Incident Performance Against Targets**

For the purposes of this report and the timing of the management review, incident data for FY20/21 and FY21/22 year to date have been compared. It is recommended that future management reviews are aligned with the end of the financial year for ease of performance data analysis. In the period July 2020 to June 2021, four total recordable injuries (TRIs) were recorded. The number of TRIs for the period July 2021 to February 2022 is two.

All of these TRI events were investigated using structured problem-solving tools e.g. Incident Causation Analysis Method (ICAM) or Root Cause Analysis (RCA). Two events in the period July 2020 to June 2021 were associated with the critical risk of working with dangerous animals. Following these events, additional resources were obtained, and attention was focused on the development of a bowtie and implementation of risk controls. The Working with Dangerous Animals bowtie is Council's largest risk control plans to date. It contains 62 controls. Significant progress has been made in the last 6 months to implement controls to manage this risk. In July 2021 risk controls were 19% implemented. Following a risk review with the Animal Control team in December 2021 it is now 58% implemented.

Analysis of "First Aid" injury events in the period of July 2020 to June 2021 showed the most common nature of harm to be sustained was bruising, but no common mechanism of harm was identified. First aid events between July 2021 and February 2022 have predominately resulted in minor cuts or lacerations, most associated with office equipment.

The reporting of "Near miss" events in the period of July 2021 to February 2022 remains consistent with the number of events reported between July 2020 and June 2021 despite decreased numbers of people in the workplace due to remote working.

### **Evaluation of Legal Requirements and Other Standards**

The legislative compliance evaluation tool ComplyWith was implemented in October 2021 and the first legislative compliance gap analysis (survey) was completed in November 2021. The survey completed by the Zero Harm team contained 80 compliance obligations. During the survey period, 15 partial compliance and 1 zero compliance obligations were identified. Corrective actions have been detailed against each obligation and are being tracked to completion via ComplyWith. Many of the corrective actions detailed are aligned with activities already contained in the FY21/22 Zero Harm Strategic Improvement Plan.

### **Consultation and Participation of Workers**

Consultation and participation of workers continues to remain a key focus of the Zero Harm Strategic Improvement Plan. The Safety Action Team (SAT) is currently made up of 20 representatives from across the organisation. A number of representatives have retired from or joined the team over the past 12 months. Due to Covid-19 disruptions training for the team has largely involved the progression through the Health and Safety Representative Stage 1 and 2 training courses.

Like other virtual teams the SAT has embraced the use of technology and meetings have continued monthly via Microsoft Teams. This method of meetings has enabled more consistent participation especially from the outer offices. SAT representatives have continued to be involved in organising the Work Safe, Home Safe 2022 event and critical risk reviews that have been undertaken throughout the year.

### **Risks and Opportunities Including Continual Improvement**

Identified potential risk and opportunities to the Zero Harm Safety Management system are:

- Appointment of Halls Officer to provide additional support and advice to Community Halls
- Subsequent Covid-19 variants and associated outbreaks drawing resource away from other Zero Harm strategic improvement activities
- Continued use of electronic platforms such as Waisite to ensure the ZHSMS is readily accessible to the organisation
- Introduction of the new plant and structures regulations. The Government is set to release draft regulations in early 2022, with the final regulations expected to be in place by late 2022. The new regulations will layer controls according to risk and introduce changes to the following; working with mobile plant including tractors and quad bikes, working with high-risk plant e.g. cranes and pressure equipment and amusement devices. The changes to amusement devices is proposed to include having territorial authorities issuing permits for higher-risk portable amusement devices only. Changes are also proposed to working at heights and excavation works.

### ***Adequacy of Resources***

Following the development of a business case, the Executive Leadership Team approved the addition of another Zero Harm Advisor to the existing Zero Harm team. The position was successfully filled in June 2021, however in December 2021, the staff member resigned for family reasons. A first round of recruitment commenced prior to Christmas, however, was unsuccessful. A second recruitment process was undertaken, the successful candidate is set to commence with Council at the beginning of April.

The adequacy of Zero Harm resources has and continues to be tested by the Covid-19 pandemic. The Zero Harm team continues to support the Incident Management Team (IMT) by providing technical advice on Covid-19 risk management and supporting the implementation of operational controls.

The temporary loss of resource and impacts of Covid-19 has resulted in some planned work to be either delayed or reprioritised.

### ***Relevant Communications with Interest Parties***

Engagement and communication with both internal and external stakeholders has and must continue to be a key focus for the Zero Harm team, to support the ongoing development, implementation and continual improvement of the ZHSMS.

Communication, coordination, and consultation with other PCBUs that Council shares overlapping duties has required and will continue to require significant focus by the Zero Harm team and other relevant parties. Health and safety expectations frameworks are now being used for long-term or high-risk contracted services and projects. Work is currently underway to develop a suite of templates as part of the ZHSMS to adequately capture the detail from these engagements to ensure that all involved parties are aware of their health and safety responsibilities.

## **6. Attachments**

### **Ngaa taapirihanga**

Attachment 1 – Zero Harm Management System Overview

Date:	6 April 2022
Report Author:	Lynn Shirley, Zero Harm Manager
Authorised by:	Gavin Ion Chief Executive

## Attachment 1 - Zero Harm Management System Overview

		Status of Management Standards/Guidelines		
Section	Elements	Developed	Underway	Not Yet Commenced
1.1	Leadership, Engagement and Governance	<ul style="list-style-type: none"> <li>• Worker Engagement, Participation and Representation Standard</li> <li>• Health and Safety Governance Standard</li> <li>• Safety Leadership and Culture Standard</li> </ul>		
1.2	Planning and Review			
1.3	Event Management	<ul style="list-style-type: none"> <li>• Event Management Standard</li> <li>• Post Critical Incident Response Standard</li> </ul>	<ul style="list-style-type: none"> <li>• First Aid Management Standard</li> </ul>	
1.4	Hazard and Risk Management	<ul style="list-style-type: none"> <li>• Hazard and Risk Management Standard</li> <li>• Remote Working Management Standard</li> <li>• Personal Protective Equipment and Clothing Standard</li> <li>• Computer Workstation Management Standard</li> <li>• Covid-19 Vaccination Risk Assessment Management Standard</li> <li>• Covid-19 Rapid Antigen Testing Guidelines</li> </ul>		
1.5	Health and Wellbeing			<ul style="list-style-type: none"> <li>• Occupational Health Monitoring</li> <li>• Workplace Monitoring – Occupational Hygiene</li> </ul>
1.6	Injury Management	<ul style="list-style-type: none"> <li>• Early Pain and Discomfort Management Standard</li> <li>• Injury Management and Rehabilitation Standard</li> </ul>		
1.7	Management of Change		<ul style="list-style-type: none"> <li>• Management of Change Standard</li> </ul>	
1.8	Contractor Management		<ul style="list-style-type: none"> <li>• Contractor Management Standard</li> </ul>	
1.9	Emergency Management		<ul style="list-style-type: none"> <li>• Emergency Management Standard</li> </ul>	
1.10	Volunteer Worker Management	<ul style="list-style-type: none"> <li>• Volunteer Worker Management Standard</li> </ul>		
1.11	Community Event Management			
1.12	Performance Reporting	<ul style="list-style-type: none"> <li>• Measuring and Monitoring Health and Safety Performance Standard</li> <li>• Legal Compliance Standard</li> </ul>		

1.13	Training and Competency	<ul style="list-style-type: none"> <li>• Training and Competency Management Standard</li> <li>• Worker Health and Safety Induction Management Standard</li> </ul>		
1.14	Zero Harm System Auditing	<ul style="list-style-type: none"> <li>• Zero Harm Auditing Standard</li> </ul>		
2..0	Safe Systems of Work	<ul style="list-style-type: none"> <li>• Job Safety Analysis (JSA) Standard</li> </ul>		<ul style="list-style-type: none"> <li>• Standard Operating Procedures (SOP) Standard</li> </ul>
3.0	Critical Risks	<ul style="list-style-type: none"> <li>• Critical Safety Risk Management Standard</li> <li>• Asbestos Management Standard</li> <li>• Workplace Violence Management Standard</li> <li>• Hazardous Substances Management Standard</li> <li>• Working Alone Management Standard</li> <li>• On Road Driving Management Standard</li> </ul>	<ul style="list-style-type: none"> <li>• Working with Firearms Management Standard</li> <li>• Working with Dangerous Animals Management Standard</li> </ul>	<ul style="list-style-type: none"> <li>• Working On or Near Roadways Management Standard</li> <li>• Mental Wellbeing Management Standard</li> <li>• On-Site Traffic Management Standard</li> </ul>



<b>To</b>	<b>Audit &amp; Risk Committee</b>
<b>Report title</b>	<b>Zero Harm Safety Management System Audit 2021 – Post Implementation Report</b>

## **1. Purpose of the report**

### **Te Take moo te puurongo**

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The purpose of this report is:

- To inform the Audit and Risk Committee (“the Committee”) of the internal audit process applied to the Zero Harm (“ZH”) Safety Management System (“SMS”) regarding compliance with the International Organisation for Standardisation (“ISO”) standard 45001:2018
- To provide the Committee with insight into key findings from the audit
- To provide a risk lens to the impact of the identified non-conformances and areas of improvement, and,
- To describe Management’s approach to delivering appropriate outcomes in response to audit findings.

## **2. Executive summary**

### **Whakaraapopototanga matua**

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The audit identified:

- Nine (9) non-conformances; two (2) minor and seven (7) major
- Five (5) opportunities for improvement, and,
- Sixteen (16) Auditor recommendations

In response the Zero Harm Manager has identified eleven (11) key actions to address the audit outcomes. Five (5) of the actions have already been fully implemented with the remaining six (6) on track to be implemented prior to the end of the year.

Opportunities for improvement have also been considered. Associated actions will be prioritized whilst ensuring that non-conformances are given precedence.

A summary table of the audit outcomes and responses can be found in Attachment 1 (**Summary Table of Audit Outcomes**).

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Waikato District Council's ("Council's") Zero Harm strategic risk currently lies outside of Councils risk appetite. A comprehensive plan that includes 23 mitigations has been developed to reduce the risk. The ZHSMS is a highly effective component of the risk mitigation plan and is currently partially in place. Implementing the audit actions assists to meet the requirements of ISO45001:2018 and results in the risk mitigation associated with the ZHSMS becoming fully effective.

A significant portion of the audit actions have been implemented. Plans are in place to complete the remaining actions prior to the end of the calendar year (2022) keeping the Zero Harm Team on track to reducing the residual risk rating for the strategic risk to within risk appetite by December 2022.

Subsequent audits are planned annually and will be carried out by the internal audit function. Maintaining a periodic ZHSMS audit meets one of the ISO45001:2018 requirements. It provides opportunity for improvement and ensures the risk mitigation becomes and remains fully effective going forward.

### 3. Staff recommendations Tuutohu-aa-kaimahi

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Noting that the ISO45001:2018 requires an annual review and this Internal Audit is a key informant of that review, the audit recommendations have been incorporated into the review of Waikato District Councils compliance and relevance framework.

**THAT the Audit and Risk Committee receives this report and notes that the recommendations are included in the Zero Harm Framework review.**

### 4. Background Koorero whaimaarama

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The ISO45001:2018 specifies requirements for an occupational health and safety ("OH&S") management system. It provides guidance for how to use the standard to enable organizations to provide safe and healthy workplaces and to proactively improve OH&S performance.

Waikato District Council ("Council") undertook a full systems documentation audit to evaluate Councils ZHSMS adherence to the ISO45001:2018, during October and November 2021.

The Audit objectives were:

1. To confirm that the management system conforms with the requirements of the ISO45001:2018 standard
  2. To confirm that Waikato District Council has effectively implemented its planned arrangements
  3. To confirm that the management system can achieve Waikato District Councils Zero Harm objectives
  4. To identify areas for potential improvement of the management system
-

The audit process included sampling documentation, activity observation, and interviews with:

- Zero Harm Team
- Animal control Team
- Customer Delivery Team
- The Chief Executive
- The Risk Advisor

Participating individuals and teams were selected because of their key involvement with, or responsibilities for, the implementation of the ZHSMS, or, because of varied exposure to the ZHSMS through their operational roles.

The audit was conducted by trained ISO45001:2018 internal auditors, Debbie Dalbeth and Madelina Baena Escamilla. The auditors' followed the Telarc checklist to complete the audit. Telarc Limited is a Crown Entity Subsidiary owned by the Accreditation Council. They are recognised as a Certification/Registration Body by the Joint Accreditation System of Australia and New Zealand ("JAS-ANZ"). The checklist is highly detailed and provides a comprehensive structure to enable auditors to deep dive into the SMS documentation. The auditors' feed back outcomes to the business owner using:

- Minor Non-Conformances ("N/C")
  - Defined as lapses against a well-documented system e.g. where a record could not be located during the audit. Note that four to six minor non-conformances against one process, procedure, system, regulatory requirement, or clause indicates a system failure and will be classed as a major non-conformance.
- Major Non-Conformance ("N/C")
  - Defined as lapses or inconsistencies in at least one area of the process, procedure, regulatory requirement or ISO45001 Standard requirements e.g. the total absence of a system or records against a requirement in the process or standard, evidence that a system has broken down, or, where the consequence of the non-conformance could be serious, or expensive
- Opportunities for Improvement ("OFI")
  - Defined as a situation where the evidence presented indicates a requirement has been effectively implemented, but based on auditor experience and knowledge, additional effectiveness or robustness might be possible with a modified approach.
- Recommendations ("R")
  - Auditors' recommendations for action to address a N/C, OFI, or as a standalone recommendation.

The audit identified:

- Nine (9) non-conformances; two (2) minor and seven (7) major
  - Five (5) opportunities for improvement
  - Sixteen (16) Auditor recommendations
-

Recommendations and actions from the audit are managed by the business owner. The Zero Harm Manager has identified eleven (11) actions to address the non-conformances and work has commenced to implement those actions. Current action status:

- Five (5) actions fully implemented
- Three (3) actions due to be complete by the end of the financial year 2022, and,
- Three (3) actions due to be complete by the end of the calendar year 2022.

A further five (5) actions have been identified to address the opportunities for improvement. Actions to address non-conformances will be given precedence however the OFI actions will be prioritized and added to the Zero Harm work programme.

This is the first audit of its kind since Waikato District Council converted from AS/NZS4801:2001 to ISO45001:2018 during 2019. It aims to provide gap analysis to improve Councils ZHSMS. Performing the audit meets the ISO45001:2018 requirement 9.2.2 (Internal Audit Programme) and provides a benchmark for subsequent audits which can delve further into specific areas of the ZHSMS. Planned intervals for subsequent audits are likely to be annual, this will be decided between the Zero Harm Manager and the internal audit function.

The Auditors' commented that the ZHSMS is a comprehensive system and that it is evident that significant work has gone into it to achieve its current condition. It should also be noted that three (3) of the actions associated with the audit recommendations had previously been identified as gaps by the Zero Harm Team. Those actions were already included in the risk mitigation plan for the Zero Harm strategic risk.

A summary of the audit outcomes can be found in Attachment 1 (**Summary Table of Audit Outcomes**). The table includes responses and actions identified by the Zero Harm Manager to address the audit outcomes.

## 5. Discussion Matapaki

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Council has a strategic risk specific to Zero Harm (ref:R00184). Council's appetite for Zero Harm risk is "Low". The residual risk assessment for the Zero Harm strategic risk is currently "Moderate". The risk therefore sits outside of Councils risk appetite.

The Zero Harm Team have a comprehensive risk mitigation plan in place which was developed in consultation with key stakeholders, including the Audit and Risk Committee ("the Committee"). The plan includes 23 mitigating actions which aim to systematically reduce risk to within appetite by the end of the calendar year (2022). Each risk mitigation has been assessed for effectiveness and is marked as being, in place, partially in place, or not in place. At present the mitigation status is:

- Thirteen (13) mitigations in place
- Eight (8) mitigations are partially in place
- Two (2) mitigations are not in place

Councils ZHSMS is a key mitigation for reducing risk in the Zero Harm area. It is documented in the plan (ref:MC00435). Delivery of the eleven key audit actions outlined in this report ensures that Council is working to meet the requirements of ISO45001:2018. Going forward these actions assist in the risk mitigation becoming fully effective.

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The Zero Harm Manager has ensured that audit action timeframes correspond with key timeframes in the existing mitigation plan. A significant portion of the actions have been implemented and those remaining are due for completion prior to the end of the calendar year. The Team is therefore on track to reduce the residual risk for the Zero Harm strategic risk from “Moderate” to “Low” by the end of December 2022 as planned.

## 6. Next steps Ahu whakamua

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The Zero Harm Manager has oversight of the key actions required to address audit outcomes. Steps include:

- Implementing the remaining six (6) actions associated with the identified non-conformances
- Prioritizing and implementing actions associated with the opportunities for improvement
- Planning, in consultation with the Internal Audit Function, the schedule, focus and activities for subsequent ISO45001:2018 audits, and,
- Providing updates to the Committee on outcomes post subsequent audits.

## 7. Attachments Ngaa taapirihanga

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Attachment 1 – **Summary Table of Audit Outcomes**

Date:	24 March 2022
Report Author:	Katja Jenkins
Authorised by:	Tony Whittaker Chief Operating Officer

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Table 1: Summary Table of Audit Outcomes

Category	Relevant Section	Description	Auditor's Recommendation	Comment	Ref #	Action	Status/ Due Date
Minor N/C 1	4.2 Understanding the needs & expectations of workers and other interested parties	At the time of the audit, with the evidence presented it was noted that Ratepayers and customers, including the users of the facilities, e.g., parks, libraries, cemeteries, halls, have not been considered nor the legal obligations regarding them.	Consideration is given to including interested parties outside of the organisation and the Councils legal obligations toward keeping them safe while using Council facilities.	Waikato District Council has in place an "Organisational Context" document; ref: ZHSMS0.4. The document was created based on best practice requirements for capturing scope and context.	A1	The Organisational Context document will be updated to include a section relating to the needs and expectations of ratepayers and customers.	30 June 2022
Major N/C 2	5.1 Leadership & Commitment	A) At the time of the audit, with the evidence presented it could not be demonstrated that top management has taken overall responsibility or accountability.	A) Responsibility and Accountability be bought together and explicitly defined.	A) Responsibility of "top management" (Chief Executive and the collective Person Conducting a Business or Undertaking) is outlined in the Zero Harm Policy (Zero Harm Commitment) meeting points 5.1 sections "a" to "m" of the standard. It is also demonstrated through the implementation of the internal audit, the Health and Safety Plan objectives, and it is documented in position descriptions and contractual agreements during the recruitment process. It is noted that it is not explicitly documented in a central location.	A2	A single document that outlines key responsibilities, including explicit documentation detailing the ultimate accountability of top management will be added to the ZHSMS.	30 June 2022
		B) The full Zero Harm management system is not easily accessible and there is limited understanding by people outside of top management.	B) The Management System be communicated to staff and interested parties and to be available on the Councils internal/external website as appropriate	B) The ZHSMS had been added to Waisite and is now accessible to all staff. All ZHSMS standards will be documented and available at this location by end of 2022 (as per mitigation ref: MC00435).	A3	The Zero Harm Team are currently rolling out the annual "Work Safe, Home Safe" campaign. This includes induction refresher training (complete by end of March 2022) with a supporting online booklet, and introduction and access to the Waisite location for the ZHSMS standards. New employees receive this information as part of their standard induction process.	Implemented
Major N/C 3	5.3 Org. roles, responsibilities & authorities	At the time of the audit, with the evidence presented it was noted that while all staff are aware they have responsibilities they are not aware of all the roles, responsibilities and authorities defined in the various management system standards.	For clarity and consistency, the responsibilities and authorities could be defined in one document. The roles, responsibilities and authorities are made available to the interested parties.	Noted	A2	As above	30 June 2022
					A3	As above	N/A
Major N/C 4	6.1 Actions to address risks & opportunities	The leadership team regularly assess the organisations Zero Harm Strategic Risk and the mitigations that have been, or are in the process of being, implemented and do not rate them as being effective enough to meet the objectives of the ZHSMS. This has been raised by the Audit and Risk Committee and further work is being done to assess the effectiveness of the controls.	Adequate controls are put in place that will give the leadership team confidence that the ZHSMS can achieve its objectives.	This requirement had previously been identified by the Zero Harm Team. A review of the Zero Harm Strategic Risk mitigations and their effectiveness was completed during December 2021. This work was approved by the Chief Executive and presented to the Committee at the December Audit and Risk Committee meeting.	A4	A timeline which tracks the delivery of the mitigations to reduce risk to within appetite is now included in the Zero Harm Update Report (provided quarterly to the Committee).	Implemented.
Major N/C 5	7.3 Awareness	Interviewed staff are aware of the ZH Policy but they don't know what the ZH objectives are, including their targets and results. The objectives included in the ZH Strategic Plan have not been widely communicated to all staff.	That the Zero Harm Team communicates to all staff the twelve objectives identified in the Zero Harm Strategic Plan.	The ZHSMS has been added to Waisite. It includes the twelve objectives.	A5	The ZH Strategic Plan and objectives is included in the Induction refresher training (rolled out March 2022). This information along with ZHSMS introduction is also included in the standard induction for new starters.	Implemented
					A3	As above	N/A.

Category	Relevant Section	Description	Auditor's Recommendation	Comment	Ref #	Action	Status/ Due Date
Major N/C 6	8.1 Operational planning and control	At the time of the audit, with the evidence presented there is no evidence that the organisation plans, implements and controls the processes needed to meet the requirements of the ZH management system and to implement the actions determined in Clause 6.	That a documented process/standard is created, including establishing criteria for the processes, the controls for the processes according to the criteria, and detail how the organisation ensures that outsourced processes are controlled.	Noted	A6	The ZH Team will create an SOP (Standard Operating Procedure) standard that includes the key criteria for Health and Safety in the workforce (ref: Section 2.3 of the ZH Master Record Index). The standard will include audit and review timeframes for processes and can be used to ensure processes meet criteria requirements and link processes back to the ZHSMS requirements.	31 December 2022
					A7	Criteria regarding control of outsourced work will be covered in contract management standard ZHSMS1.8.1	31 December 2022
Major N/C 7	8.1 Operational planning and control	At the time of the audit, with the evidence presented the organisation has no established processes for implementing and controlling planned temporary and permanent changes that impact the performance of the ZH management system.	The Management of Change Standard is completed, and control is included of temporary and permanent changes that impact the performance of the ZH management system, including new services and processes, changes to legal requirements, changes to knowledge or information about hazards and ZH or changes to existing services and processes.	This requirement had previously been identified by the Zero Harm Team and was part of mitigation planning.	A8	A Management of Change standard has been created (currently in draft format).	30 June 2022
Major N/C 8	8.2 Emergency preparedness and response	Even though the organisation has a set of documents, there is no evidence presented of the plans for responding to potential emergency situations.	Create a process where it is detailed how the organisation provides training for the emergency responders, evaluates the performance of the response, and communicates the relevant information to all workers.	This requirement had previously been identified by the Zero Harm Team and was part of mitigation planning.	A9	This action is included in the Induction refresher training and in the new starter induction (implemented during March 2022).	Implemented.
Minor N/C 9	10.3 Continual improvement	At the time of the audit, with the evidence presented it was noted that there is no record of how the organisation maintains and retains documented information as evidence of continual improvement	A record is maintained with information of how the organisation implements actions for continual improvement of the OH&S management system	Training records are maintained e.g. new recruits' and refresher training. ZHSMS is following quality management guidelines in terms of version control for records and changes are highlighted for users in new versions. Corrective actions, outcomes, and improvements are documented in the BWare system	A10	All ZHSMS documentation will be stored in ECM (Enterprise Content Management).	31 December 2022
					A11	New and or updated standards will be communicated through internal communication channels	Implemented
R 1	5.4 Consultation & participation of workers	It should be noted the 'ZHSMS 1.1.2 Worker Engagement, Participation and Representation Standard V1 050718' has not been reviewed or updated in just over 3 years. While this is not considered a non-conformance, it is recommended that the standards are reviewed every 3 years.	Review the 'ZHSMS 1.1.2 Worker Engagement, Participation and Representation Standard V1 050718' for continued relevance.	Noted	A12	The Zero Harm team will review this standard	TBA
OFI 1	7.2 Competence	Opportunity for Improvement: To find how often training is required for a specific role, it is needed to check each one of the ZH management standards, this information could be centralised in a separate document.	It is recommended to include the frequency of each one of the training courses in the Training Need Analysis Matrix.	ZH Team are currently looking at opportunities to lean the admin requirements for training documentation. This OPI will be considered as part of that process.	A13	Changes to the H&S training records spreadsheet have been made.	Implemented

Category	Relevant Section	Description	Auditor's Recommendation	Comment	Ref #	Action	Status/ Due Date
OFI 2	7.4 Communication	Opportunity for Improvement: There is not a documented process for external communication, and there is no evidence how the external communication of H&S information takes into account legal and other requirements.	Create a communication matrix document that determines how to communicate, on what topic/subject, when and with whom to communicate internally and externally.	Noted	A14	H&S Communications plan to be developed	TBA
OFI 3	8.1 Operational planning and control	Opportunity for Improvement: Hazard and risk is used interchangeably in all documents of the ZH management system. It is better to separate the two terms and be consistent in their use. The 'ZHSMS 1.4.1 Hazard and Risk Management Standard' should be called the risk and hazard standard.	Separate the terms hazard and risk and be consistent in their use. The 'ZHSMS 1.4.1 Hazard and Risk Management Standard' should be called the risk and hazard standard.	Will not be actioned. Section 6.1.2 of the ISO45001:2018 applies the term hazard identification preceding the term assessment of risk opportunities.	N/A	N/A	N/A
OFI 4	9.1 Monitoring, measurement, analysis and performance evaluation	Opportunity for improvement: Expand on the current measures with more defined criteria, frequency, and audience. Legal compliance has been maintained in the past by the team compiling a list of legislative compliance requirements, legal bulletins and have spent time proactively investigating legal requirements. ComplyWith is a new tool recently subscribed to that will make legal compliance easier. Documents and standards can be improved with the addition of this tool.	Expand on the current measures with more defined criteria, frequency, and audience.	Noted	A15	A review of the standard to incorporate the OFI recommendations will be conducted.	TBA
OFI 5	10.1 General	Opportunity for Improvement: Create a documented process/standard to describe how the organisation determines and selects improvement opportunities. The organisation has an 'Innovations and Ideas Framework' the objective of this framework is to implement specific and rigorous criteria for selecting the ideas/improvements to be actioned. It could be worth looking at this framework to evaluate if the ZH Improvement ideas could be managed the same way.	Create a documented process/standard to describe how the organisation determines and selects improvement opportunities. Review the 'Innovations and Ideas Framework' to evaluate if the this could be used.	The BWare system currently has functionality to report opportunities for improvement with an integrated workflow.	A16	ZH Team to document the process for reporting and managing opportunities for improvement through BWare.	TBA



<b>To</b>	<b>Audit and Risk Committee</b>
<b>Report title</b>	<b>WDC Zero Harm Report</b>

## **1. Purpose of the report**

### **Te Take moo te puurongo**

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To present an overview of Waikato District Council's current health and safety performance to the Audit and Risk Committee.

## **2. Executive summary**

### **Whakaraapopotanga matua**

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- Over the last three months there has been a decrease in 'Personal Wellbeing' conversations and an increase in conversations related to either 'Work-related Health' or 'Work-related Safety' topics.
- The FY21/22 plan contains 91actions. To date 24 are completed, 27 are underway and 21 are overdue.
- A focus on safety culture and safety leadership has been included in the Zero Harm Refresher Induction for 2022.
- The FY21/22 plan contains 91actions. To date 24 are completed, 27 are underway and 21 are overdue.
- Since implementing the revised Zero Harm induction programme, the changed process has resulted in a time saving of approximately 45% (from 41 hrs to 22.5hrs) for the Zero Harm team.
- Risk reviews for Asbestos and Workplace Violence critical risks are scheduled to be completed in April and May respectively.

## **3. Staff recommendations**

### **Tuutohu-aa-kaimahi**

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**That the Audit and Risk Committee receives the report.**

## **4. Background**

### **Koorero whaimaarama**

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Council is committed to pursuing a culture of Zero Harm by eliminating or managing health, safety and wellbeing risks.

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## 5. Discussion Matapaki

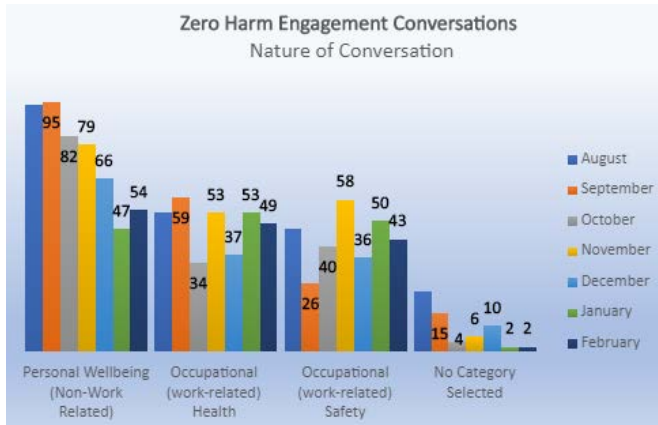
### People and Organisational Safety Culture

#### **Zero Harm Engagement Conversations**

It has now been seven months since the revised Zero Harm Engagement Conversation process was implemented. The data being captured in BWare continues to be reported on weekly to the Executive Leadership Team (ELT) and analysed monthly.

The Zero Harm team has noticed a decrease in support request from People Leaders in relation to the new process. New and seconded People Leaders are provided training on the process as part of the Zero Harm People Leader Induction module.

A total of 200, 149, 153 and 148 Zero Harm Engagement Conversations were recorded in BWare for November, December, January and February respectively.



Analysis of this data highlights the following.

- Over the last three months there has been a decrease in 'Personal Wellbeing' conversations and an increase in conversations related to either 'Work-related Health' or 'Work-related Safety' topics.
- There are less conversations being entered with no category being selected, indicating that People Leaders are becoming more familiar with the recording process.

The top three topics of each Zero Harm Engagement Conversation type from the last three months are detailed in the table below

Personal Wellbeing (Non-work related)	Occupational (Work-related) Health	Occupational (Work-related) Safety
- Personal health	- Work stress	- Hazard/Risk management
- Personal stress	- Mental wellbeing	- On road driving
- Relationships/family	- Covid-19	- Contractor management

## ***Safety Leadership***

As discussed previously, the additional health and safety workload created by the Covid-19 pandemic and the temporary loss of resource in the Zero Harm team due to the resignation of a Zero Harm Advisor has impacted completion of activities in relation to safety leadership. Therefore, to raise awareness of this important component of our health and safety management system a focus on safety culture and safety leadership has been included in the Zero Harm Refresher Induction for 2022.

## **Disciplined Management Systems**

### ***Strategic Improvement Planning***

A quarterly review has once again been completed on progress made to deliver the improvement activities detailed in the FY21/22 Zero Harm Strategic Plan. The FY21/22 plan contains 91 actions. To date 24 are completed, 27 are underway and 21 are overdue. Overdue actions are related to the following activities

- Safety Leadership survey
- Safety Leadership training programme for People Leaders
- Wellbeing Collective strategy
- Zero Harm Assurance Calendar
- Contractor H&S Management training
- Community Hall Committees/Community Boards H&S needs analysis
- Critical Risk Bowtie for Working on or Near Roadways
- Emergency Management Standard and emergency response procedures

Priority over the next three months will be given to completing activities related to the management of critical risks or legislative compliance.

Completion of some activities in the plan have been impacted by the resignation of a Zero Harm Advisor. Recruitment was successfully completed in February and a new advisor is joining the team at the end of March.

During the recent internal ISO45001 Zero Harm Safety Management System (ZHSMS) audit, a major non-conformance was identified in relation to the Zero Harm Commitment (Policy) and strategic objectives. To address this non-conformance, both of these topics were included in the Zero Harm Refresher Induction and its associated assessment.



### **Performance Reporting**

The Zero Harm team has again completed a review of our zero harm performance across several health and safety metrics for the period July 2021 to February 2022. The results are shown in the table below along with the results for the period July 2020 to June 2021.

Measures	July 20 to June 21	July 21 to Feb 22
Events reported in BWare Safety Manager (Lead)	203	106
Total Recordable Injuries (TRIs) e.g. Lost Time Injury, Restricted Work Injury or Medical Treatment Injury (Lag)	4	2
WorkSafe NZ Notifiable Events (Lag)	1	1
First Aid Injury events (Lag)	19	13
Serious Near Miss events (Lead)	4	0
Near Miss events (Lead)	107	53
New Uncontrolled Hazards (Lead)	17	116
Safety Engagement Conversations (Lead)	2872	1380

The attached Zero Harm Dashboard illustrates safety performance for February 2022.

### **Event Investigation**

In November a notifiable event (Severity 2) occurred at the Raglan Holiday Park. The event was reported to WorkSafe and an investigation was undertaken using the Incident Causation Analysis Method (ICAM). The findings and recommendations from the event were shared with the Holiday Park Manager and Raglan Holiday Park Board. One of the recommendations is the completion of an independent gap analysis (audit) of the camp's health and safety systems and their alignment with Council's ZHSMS. An external consultant has been engaged to undertake this.

### **Worker Information, Training, Instruction and Supervision**

Since implementing the revised Zero Harm induction programme, 88 new or transferring workers have completed the new process. The changed process has resulted in a time saving of approximately 45% (from 41 hrs to 22.5hrs) for the Zero Harm team.

### **External Training and Competency**

As previously reported the Covid-19 pandemic has significantly impacted the delivery of scheduled and proposed health and safety training for FY21/22. The Zero Harm team has been focused on using other alternatives to progress planned training including on-line and self-paced learning.

Recently delivered or planned health and safety training is summarised in the following table:

Training delivered or planned	Number of workers required to complete training	Number of workers trained
Asbestos Awareness Training (Self-paced online course delivered by Safety N Action)	11	9 out of 11 have completed to date. Another 13 new staff have been identified to complete this training also.
H&S Representative Stage 1 (2-day online training)	8	5 out of 8 scheduled to complete training
H&S Representative Stage 2 (2-day online training)	9	Training currently being booked
Mental Health First Aid Training (1 day training delivered by St Johns)	14 (Animal Control Officers, Pound Keepers, AC Team Leader)	3 have completed training, 9 scheduled, 2 to be booked

## **Critical Safety Risk Management**

### ***Critical Risks***

The management of critical health and safety risks has again been a key component of this year's Work Safe, Home Safe Event. This year the induction refresher programme has included information on controls for managing the following critical risks;

- Working on or Near the Roadway
- Mental Wellbeing at Work

A risk review was completed in February for the critical risk of Hazardous Substances. Risk reviews are also scheduled for Asbestos and Workplace Violence in April and May respectively.

### ***Covid-19 Risk Management***

The Zero Harm team has continued to support the Incident Management Team's response to the Covid-19 Omicron outbreak. Primary focus has been strengthening existing risk controls in particular mask use. The Zero Harm team has been able to source consistent supplies of both medical-grade facemasks and P2 respirators manufactured to Australian/New Zealand Standards.

Through a Waikato Local Authority Shared Services (WLASS) arranged Council was also able to purchase Rapid Antigen Tests (RATs). These have been used to undertake twice weekly surveillance testing for staff in roles with a high level of in-person customer interaction. Staff are also able to access RATs on a more ad-hoc basis, where their role requires them to attend a large gathering, such as a large community meeting, engagement event or consultation event. The results of the testing are being reviewed by the Zero Harm team on a weekly basis and actions following any positive result are being managed by the IMT.

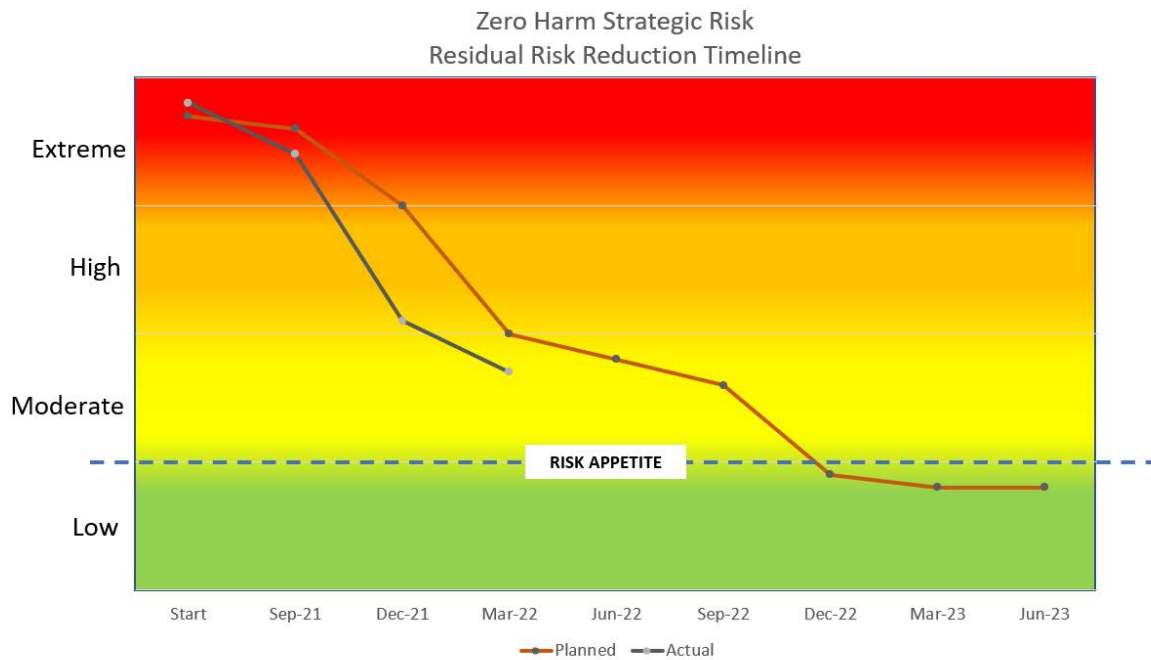
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### **Zero Harm Strategic Risk Management**

Following the last quarters activity another review of progress against the Zero Harm strategic risk control plan has been undertaken. Since the last risk review in November the following treatments have either been implemented or partially implemented;

- Legislative compliance gap analysis
- Internal audit

The updated Zero Harm Strategic Risk Reduction Timeline is illustrated below.



## **6. Attachments** **Ngaa taapirihanga**

Attachment 1 – Zero Harm Dashboard – February 2022

Date:	6 April 2022
Report Author:	Lynn Shirley, Zero Harm Manager
Authorised by:	Gavin Ion Chief Executive



# Zero Harm Performance Dashboard - February 2022



## Contractor Safety Management

## Key Take Outs

### Contractor Safety Management Activity Undertaken by the Zero Harm Team and Contract Managers

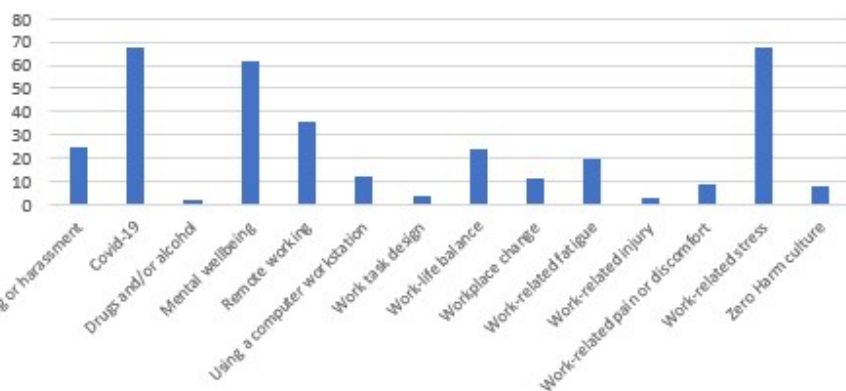
	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Contracted Work H&S Risk Assessment		3	2	3						4		1		2	2	
Contract Manager H&S Advice and Support			3	3	3	2				1	4	4	2		4	
Contractor Site Visit or Inspection	1	2		4	15	15	3	1			2	2	4		1	
Contractor Pre-Start or Tool Box Meeting					2	1	1			1	2				1	
Contractor H&S Meeting	2	1	2		3		3		1	3	2				1	
Contractor Task or JSA Review and Approval		3	3	3	1		2	1		1		1	1			
Contractor Task or JSA Field Audit					1	1				1						
Contracted Work Safety Plan Review and Approval	2	3	2	2	4	1	2	1		2	3		1	1	1	
Contracted Work Safety Plan (SSSP) Field Audit				1	2	1	1					1	1			
Contracted Work End of Project H&S Review								1								

### A summary of key insights from February's Zero Harm Performance

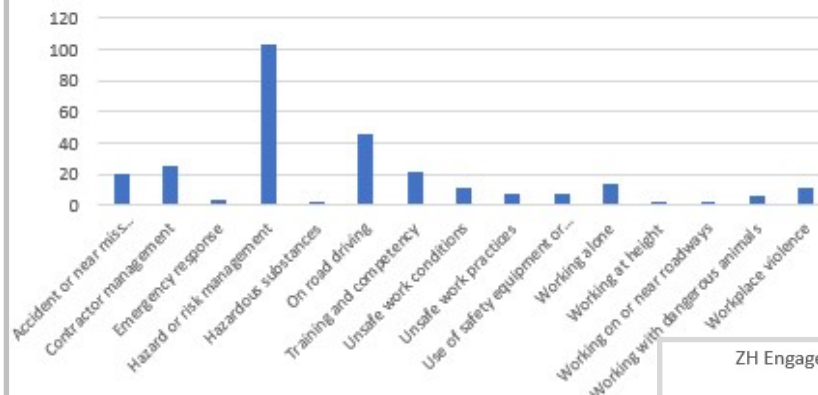
- High level of event reporting continues in the Customer Support Business Unit
- Two First Aid (Severity 6) injury events and 7 near miss (Severity 7) events were reported. The two first aid events resulted in minor lacerations/bruising to hands. No uncontrolled hazard trends were identified from these events. A review of the near miss events reported shows that 6 out of the 7 were associated with the risk of dealing with aggressive customers.
- High levels of hazard reporting have continued in the Customer Support Business Unit again this month. A total of 27 hazards were reported. 11 of these were related to vaccine passes and 10 were related to facemask use. One trip hazard and one electrical safety hazard were also identified by our Facilities maintenance contractors.

## Zero Harm Engagement Conversations (Safety Leadership) - Deep Dive on Year to Date (YTD) Data

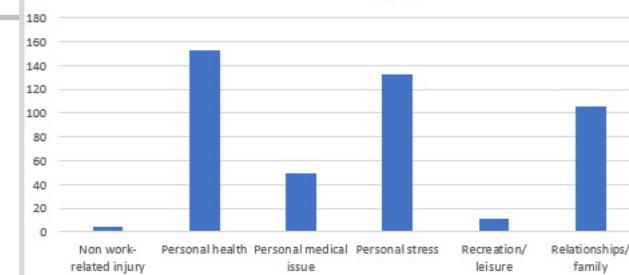
ZH Engagement Conversations YTD - Work-related Health Topics



ZH Engagement Conversations YTD - Work-related Safety Topics



ZH Engagement Conversations YTD - Non-work related Personal Wellbeing Topics



### Summary of Insights from Zero Harm Engagement Conversation Data Analysis

- A total of 1359 conversations recorded in BWare since August 2021. This consists of 572 Personal Wellbeing conversations, 392 Work-related health conversations and 332 Work-related safety conversations.
- The topic of Covid-19 was added in November to capture conversations related to the management of this risk.
- Further analysis of the Work-related Safety topic of Hazard and Risk Management showed that there were a number of conversations related to trip hazards, Council's vaccination policy and the Raglan Airfield safety upgrade.



<b>To</b>	<b>Audit &amp; Risk Committee</b>
<b>Report title</b>	<b>Strategic Communications at WDC – Current issues, risks, and opportunities</b>

## **1. Purpose of the report**

### **Te Take moo te puurongo**

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To inform the Risk & Audit Committee about work being undertaken to improve our communications, marketing, and engagement function for Council – focusing on the current key risks relating to this portfolio of work and the proposed solutions to enhance our current offering for our people, our customers, and communities.

## **2. Executive summary**

### **Whakaraapopotanga matua**

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Strategic communication sits at the core of all our current challenges and by giving it the attention it deserves and committing to do it well, there is a real opportunity to shift the dial on several disruptive conversations and existing narratives that often reflect negatively on the good work and reputation of Council.

We live in an always-on society with a culture of expectation when it comes to feeling informed, involved, and empowered. To meet that we must always communicate clearly and effectively and in ways that our people, customers, and communities expect.

Building trust and confidence, and through that, strengthening relationships with our ratepayers, stakeholders, and staff, should be our primary objective. To succeed it requires recognition of the importance of strong strategic communications that should be led by a central corporate communications team who are seen as a trusted advisory service and consulted appropriately to achieve the best outcomes for all.

We need to evolve as the landscape around us changes, harnessing the power of data, insight, digital, and technological innovations - moving from our historic role of 'broadcaster' to relationship-builder and from a service that has often been seen as a fixer to one that should pre-empt problems and help design the solutions. This is the real value add opportunity and where we will have greater ability to enhance and build our reputation and visibility with our communities.

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Since joining the organisation late last year, I have spent time assessing the outputs, volumes, and types of requests that are received by the Communications team and have met with various stakeholders to better understand their needs and expectations.

My reflections from this discovery phase are many, and whilst I can see there has been some good intention and progress made with respect to communications and engagement, there is still much to be done to maximise our opportunities to effectively tell our story and ensure that both our people and our communities understand what, when, and how, we are delivering on our vision of liveable, thriving and connected communities.

### 3. Staff recommendations Tuutohu-aa-kaimahi

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**That the Audit & Risk Committee considers the implications of this report and how members might recognise and further contribute to this work.**

### 4. Discussion Matapaki

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Current issues and solutions identified for further discussion.

***Issue: We need a strategic communications framework that aligns with our organisational vision and goals.***

**Challenges:** Although there are existing plans in place for how and when we communicate, these now need a review and refresh because there is still ad-hoc and uncoordinated activity happening across the Council that is not achieving the desired results.

There is currently limited ability to maintain oversight of all communications and engagement activities and therefore ensure cohesive messaging that will help us deliver a clear overarching narrative, to all our audiences, articulating how we are delivering thriving, liveable, and connected communities across the district.

***Solution: Design and deliver a strategic communications and engagement framework that sits across all Council functions and supports a more integrated approach – ensure it is well understood and consistently applied to achieve collective outcomes.***

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***Issue: Lack of a cohesive narrative and storytelling approach.***

**Challenges:** When it comes to our external communications, we operate reactively and not proactively enough to ensure that we are illustrating the benefits that we bring to our communities. There is not enough human-centred content and therefore people are not feeling connected to what we offer and how it resonates with and impacts their lives.

This of course includes why they should get involved in decision making and how active participation can affect change and influence outcomes in their communities. This may also have a positive flow on effect in terms of people's interest in participating in local government, either by voting or standing as an elected member.

**Solution:** *Develop a compelling story that articulates our purpose and understands how best to speak to our audiences using a deliberate and considered channel approach that is refined and adjusted according to engagement results.*

***Issue: We consult but we don't truly engage our communities.***

**Challenges:** Currently there is a fractured and inconsistent approach to community engagement and participation across Council. Not enough time and resource is available to implement an approach with significant lead times that would allow for early and considered community engagement. Additionally, there is no overarching framework or planning that enables efficiencies such as coordinated touchpoints where multiple teams could engage with one community simultaneously on various outcomes.

**Solution:** Implement a community engagement framework with clearly defined principles and approaches, managed and coordinated by a Community Engagement centre of excellence. Appoint a lead role to bring this discipline/ best practice to WDC.

***Issue: We need a refreshed internal communications plan and robust channels.***

**Challenges:** Currently there is a lack of understanding and awareness of the importance of strategic internal communication and its relationship to our external positioning, reputation, and brand. Lack of clear and purposeful channels that enable internal sharing and information flow that encourages less silo mentality and builds wider understanding of progress and success against our organisational objectives.

**Solution:** *Implement internal communications practices and channels that not only enable our people to be better connected to the organisation and each other, but ultimately create an organisation of advocates who champion our mahi and vision and can articulate this compellingly out in the community in which they live and work.*

**Issue: Council's brand is fractured, inconsistently applied, and lacks opportunity for positive recognition/attribution.**

**Challenges:** The Council brand and its importance as a presence in our community is not currently well understood either internally or externally. It is not protected in the way that it should be or valued with respect to what it offers in terms of reputational image and public perception of performance. An inconsistent and continued lack of curation negatively impacts our reputation and people's awareness of what we are delivering or enabling in their community.

**Solution:** *Our brand should speak to who we are as a Council and what we represent to our ratepayers as well as our people and potential people (employer brand). It should form an important aspect of our overall storytelling approach; help build awareness of where we are in the community and develop trust and confidence with our customers.*

**Issue: Inconsistent approach used to communicate with the community boards and committees, and therefore beyond to our communities.**

**Challenges:** Currently there is no shared or standardised templates for two-way communication/ information sharing at scheduled meetings. There is also no consistent approach across Council teams to how information and progress updates should be shared with elected members and so opportunities are missed to be able to do this efficiently and with storytelling for our communities in mind. This results in us not being able to best support our elected members who are of course important stakeholders in our brand and reputation and a key conduit to the communities we serve.

**Solution:** *Implement an agreed framework for ongoing communications and include a workable briefing template and digital hub for information to be shared in real-time.*

## 5. Attachments Ngāa taapirihanga

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There are no attachments for this report.

Date:	6 April 2022
Report Author:	Emma Edgar - Communications, Marketing & Engagement Manager
Authorised by:	Tony Whittaker Chief Operating Officer

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<b>To</b>	<b>Audit &amp; Risk Committee</b>
<b>Report title</b>	<b>Committee Performance Evaluation</b>

## **1. Purpose of the report**

### **Te Take moo te puurongo**

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To inform the Audit & Risk Committee (the Committee) of the proposed strategy to deliver on the Committee's objective to improve its performance.

**AND**

To seek approval for the attached Committee Evaluation Questionnaire.

## **2. Executive summary**

### **Whakaraapopotanga matua**

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The Committee added evaluation of its own performance to the recent review of its terms of reference. This was to support the objective of continuous improvement.

The Chair of the Committee has worked with staff and KPMG, Council's internal auditor, to propose a programme of suggested actions to deliver on this objective. This report presents those actions and seeks support of the document pertaining to the first action, being a Committee Evaluation Questionnaire. The results of the Questionnaire will provide a basis for a committee improvement plan.

The Questionnaire is proposed to be distributed and collated by the Democracy team utilising digital technology, being "Survey Monkey".

## **3. Staff recommendations**

### **Tuutohu-aa-kaimahi**

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**That the Audit & Risk Committee approves:**

- a. the following as its continuous improvement strategy:**
    - i. undertake a 360-degree feedback survey (Attachment 1);**
    - ii. KPMG to annually observe a committee meeting to assess effectiveness;**  
**and**
    - iii. the Chair and Chief Operating Officer participate in regional meetings of the Audit & Risk Committee representatives to discuss best practice; and**
  - b. the attached Committee Evaluation Questionnaire (Attachment 1).**
-

## 4. Background

### Koorero whaimaarama

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The Committee adopted a revised terms of reference at its meeting in September 2021. The revision included:

- *The chairperson of the committee will initiate a review of the performance of the committee at least once every two years and present it to the Council. This will support the committee's philosophy of continuous improvement.*

The Chairperson has liaised with staff and KPMG to develop a plan to deliver on this. This paper includes the proposed plan together with a questionnaire intended to deliver on one of the actions.

## 5. Discussion and analysis

### Taataritanga me ngaa tohutohu

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The Committee supports a philosophy of continuous improvement across the business of Council. The recommendations in this paper deliver on this philosophy in the context of the business of the Committee.

Three proposed actions have been provided. These actions can be revised or refreshed in the future as required.

It is proposed that the Questionnaire be completed by key stakeholders of the Committee, being the Committee members themselves, senior members of staff who support the committee and Audit New Zealand staff who regularly attend the Committee.

## 6. Financial considerations

### Whaiwhakaaro puutea

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There are no material financial considerations associated with the recommendations of this report.

## 7. Risks

### Tuuraru

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The resolution in this paper is not considered to have any risk associated with it. In fact the performance evaluation process is good practice and is consistent with Council's innovation and improvement philosophy, hence mitigating any risk from Committee operations.

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## 8. Significance and engagement assessment Aromatawai paahekoheko

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### 8.1 Significance Te Hiranga

The decisions and matters of this report are assessed as of low significance, in accordance with the Council's [Significance and Engagement Policy](#).

### 8.2 Engagement Te Whakatuutakitaki

The Committee requested the Chair to consider and develop options for the Committee in addressing the evaluation of its own performance in accordance with the recent review of its terms of reference. This was to support the objective of continuous improvement. This report supports this request. Engagement with KPMG from a best practice advisor was sought in arriving at the recommendations in this report.

## 9. Next steps Ahu whakamua

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Support for the recommendations in this report will lead to an immediate commencement of the 360-degree feedback survey and programming the remaining two recommendations into the work plan. Consideration could be given as to the timing of future initiatives based on either wanting a baseline to measure from now or an assessment of effectiveness at some time in the future after certain specific good practice actions have been put in place (e.g., having made progress on brevity).

It is proposed to send the Questionnaire to key stakeholders of the Committee, being Committee members, Senior staff who support the Committee and Audit New Zealand staff who are regular attendees of the Committee.

## 10. Attachments Ngaa taapirihanga

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Attachment 1 – Committee Evaluation Questionnaire

Date:	6 April 2022
Report Author:	Tony Whittaker, Chief Operating Officer
Authorised by:	N/A

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## COMMITTEE EVALUATION QUESTIONNAIRE

Each statement below should be responded to based on your belief.

	Disagree		Neither Agree or Disagree	Agree	
Strongly Agree					
Slightly Agree					
Neither Agree or Disagree					
Slightly Disagree					
Strongly Disagree					
<b>1. The Committee is effective and reports regularly on its activities, key issues and major recommendations to Council.</b>	1	2	3	4	5
<b>Comment:</b>					
<b>2. The Committee's scope and mandate is clear in relation to the Council and other Committees.</b>	1	2	3	4	5
<b>Comment:</b>					
<b>3. The Committee confronts the real issues relevant to Council within its scope.</b>	1	2	3	4	5
<b>Comment:</b>					
<b>4. The composition of the Committee is appropriate with a broad base of relevant skills and experience represented.</b>	1	2	3	4	5
<b>Comment:</b>					
<b>5. Members are up to date with developments in the areas relevant to the work of the Committee</b>	1	2	3	4	5
<b>Comment:</b>					



Strongly Agree	5	Disagree		Neither Agree or Disagree	Agree	
Slightly Agree	4					
Neither Agree or Disagree	3					
Slightly Disagree	2					
Strongly Disagree	1					
<b>6. Members are adequately supported in terms of self development</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Comment:</b>						
<b>7. The Committee and members act in accordance with Council's code of conduct.</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Comment:</b>						
<b>8. New members to the Committee are effectively inducted.</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Comment:</b>						
<b>9. The leadership of the Committee is effective.</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Comment:</b>						
<b>10. The Committee appropriately challenges Management and provides them with candid, decisive and actionable feedback.</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Comment:</b>						
<b>11. The Committee's feedback accurately reflects the views of the majority of Committee members and the Committee makes effective and timely collective judgements.</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Comment:</b>						

Strongly Agree	5	Disagree		Neither Agree or Disagree	Agree	
Slightly Agree	4					
Neither Agree or Disagree	3					
Slightly Disagree	2					
Strongly Disagree	1					
<b>12. The agenda of the Committee meetings allow the Committee to sufficiently consider important matters relevant to the remit of the Committee.</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Comment:</b>						
<b>13. Committee meetings are run effectively.</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Comment:</b>						
<b>14. The Committee receives reliable and timely information necessary for it to perform its role (i.e. nature, clarity, quality and timeliness).</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Comment:</b>						
<b>15. Executive risk governance, via the Executive Leadership Team and Risk Adviser, is effective and appropriately supports and interacts with the Audit &amp; Risk Committee.</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Comment:</b>						
<b>16. The Committee allocates the right amount of time for its work and the Committee allocates the right amount of time to risk issues.</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Comment:</b>						
<b>17. The Committee maintains constructive professional relationships with the internal and external auditors.</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Comment:</b>						

Strongly Agree 5 Slightly Agree 4 Neither Agree or Disagree 3 Slightly Disagree 2 Strongly Disagree 1	Disagree		Neither Agree or Disagree	Agree	
<b>18. The Committee appropriately discusses, challenges and oversees the reporting process in order to be able to make a risk based recommendation to the Council on adoption of the Annual Report.</b>	1	2	3	4	5
<b>Comment:</b>  					

<b>Overall, are there any other aspects of the operation of the Committee that could be improved?</b>
<b>Comment:</b>  

<b>To</b>	<b>Audit &amp; Risk Committee</b>
<b>Report title</b>	<b>Quality and Governance Assurance</b>

## **1. Purpose of the report**

### **Te Take moo te puurongo**

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The purpose of this report is:

To update the Audit and Risk Committee of the status of those activities within the programmes designed to provide quality improvement and assurance at Council. It covers:

- Business Process Improvement Programme;
- Internal Audit activity; and
- Independent Audit New Zealand reviews.

## **2. Executive summary**

### **Whakaraapopototanga matua**

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- The internal audits scheduled in 2021 are all complete other than two that have been rescheduled for 2022. There are three major non conformances outstanding from the completed audits which are planned to be addressed by the end of the 2022 financial year. All other non-conformances have been addressed.
  - Four policies have been published and/or reviewed. 30 policies are currently being reviewed, and one policy is scheduled for review.
  - Our goal of zero overdue processes has been maintained for the past five (5) months
  - There are 189 issues that various audits have raised across the organisation, 167 of which are complete.
  - The Zero Harm team has now completed 27 (93%) of the 29 actions received from the KPMG Health & Safety Governance Audit.
-

### 3. Staff recommendations Tuutohu-aa-kaimahi

That the Audit and Risk Committee receives this report.

### 4. Discussion Matapaki

#### 4.1. Business Process Improvement Programme

##### 4.1.1 Internal Audit Schedule (2021)

In the last three months, two internal audits were unable to be completed due to workload and Covid-19 restrictions. These audits will be included in the Internal Audit Schedule for 2022, which will be completed by April 2022.

The internal audit of the Zero Harm management system against ISO4500 was completed last November. This audit was undertaken by two staff members trained in auditing Health and Safety Management Systems to ISO45001. The report was provided to the Zero Harm Manager on the 5<sup>th</sup> of December 2021. The audit identified nine (9) non-conformances; two (2) minor and seven (7) major, five (5) opportunities for improvement and sixteen (16) Auditor recommendations. The Zero Harm Manager has responded to the internal audit report describing 11 actions to address the non-conformance. As of this date, five (5) actions have been fully implemented, three (3) are due to be complete by the end of the 2022 financial year, and three (3) are due to be completed by the end of the 2022 calendar year. The details of these actions are described in a separate report "Zero Harm Safety Management System Audit 2021 – Post Implementation" presented to the Audit & Risk Committee by the Chief Operating Officer

A dashboard summary of internal audit outcomes for 2021 is presented in Table 1, including the number of internal audits planned and undertaken, the findings, and the number of outstanding non-conformances.

**Table 1 - Outcome of the 2021 Internal Audit schedule**

Team	Internal Audits - Planned	Internal Audits - Undertaken	Major Non-Conformances	Minor Non-Conformances	Recommendations	Outstanding Non-conformances
<b>Total</b>			<b>9</b>	<b>5</b>	<b>39</b>	<b>3</b>
Customer Support - Consents	1 Audit 2 Processes	1 Audit 2 Processes	0	2	4	0
Community Safety - Environmental Health	5 Audits 16 Processes	5 Audit 16 Processes	0	0	9	0
Risk Management Processes	1 Audit 5 Processes	1 Audit 5 Processes	2	1	5	0
Zero Harm	1 Audit All ZH Management System	1 Audit All ZH Management System	7	2	5	3
Projects & Initiatives	1 Audits 7 Processes	1 Audits 7 Processes	0	0	16	0
<b>Red</b>	Major Non-conformances haven't been addressed					
<b>Orange</b>	Minor Non - Conformances haven't been addressed					
<b>Green</b>	All Non - Conformances have been addressed / There were no Non - Conformances					

## 4.1.2 Special Internal Audits

### 4.1.2.1 Burial Processes (Requested by the Community Venues & Events Team Leader)

The internal audit of the burial process was requested by the Community Venues & Events Team Leader. The actions required to address 3 minor non-conformances have been completed. There is one action that will be addressed shortly.

### 4.1.2.1 Sensitive Expenditure and Fraud Prevention Policies and Processes (Requested by the Chief Financial Officer)

The internal audit of the Sensitive Expenditure and Fraud Prevention Policies and Process was requested as part of an investigation into the suspected fraudulent use of the Council Credit Card. The actions required to address the five minor non-conformances have been completed.

**Table 2 - Outcome of the Special Internal Audits in 2021**

Team	Internal Audits - Planned	Internal Audits - Undertaken	Major Non-Conformances	Minor Non-Conformances	Recommendations	Outstanding Non-conformances
<b>Total</b>			<b>0</b>	<b>9</b>	<b>11</b>	<b>1</b>
Service Delivery - Community Venues and Events Team	1 Audit 4 Processes	1 Audit 4 Processes	0	4	4	1
Operations - Finance	1 Audit 2 Processes 2 Policies	1 Audit 2 Processes 2 Policies	0	5	7	0
<b>Red</b>	Major Non-conformances haven't been addressed					
<b>Orange</b>	Minor Non - Conformances haven't been addressed					
<b>Green</b>	All Non - Conformances have been addressed / There were no Non - Conformances					

## 4.1.3 Policy Review

The work programme for reviewing internal and external Council policies is progressing as follows:

Policies published and/or reviewed and updated in the last three months:

- Climate Response and Resilience Policy
- Easter Trading Policy
- Administrator Social Media Policy
- Staff Social Media Policy

Other policies currently being created or reviewed are:

- Activity Management Policy
  - Appointments to Community Boards and Other Committees Policy
  - Appointing Directors and Trustees to Council Controlled Organisations Policy
  - Cellular Network Site Policy
-

- Conferences and Seminars Policy – Attendance and Payment of Expenses (including Local Government NZ Conferences)
- Dog Control Policy
- Heritage Policy
- Leases to Individuals and Commercial Organisations Policy
- Leasing of Reserve Land Policy
- Licences/Grazing Policy
- Livestock Movement Policy
- Local Alcohol Policy
- Notable Tree Policy
- Procurement, Entitlement and Disposal of Council Vehicles Policy
- Property Management Policy
- Reimbursements for Elected Members Policy
- Road Closure for Motor Sport Events Policy
- Road Naming Policy
- Sensitive Expenditure Policy
- Staff Involvement in Local Government Elections Policy
- Staff Remuneration and Employment Policy
- Stock Underpass Policy
- Stock Underpasses – Financial Assistance Policy
- Strategic Land Acquisition and Disposal Policy
- Street Lighting and Other Security/Amenity Lighting Policy
- Strategic Land Acquisition and Disposal Policy
- Te Reo Maaori Policy
- Time in Lieu Policy
- Treasury Risk Management Policy (including Liability and Investment Policies)
- Vehicle Crossings Policy
- Vehicle Entrance Policy
- Visitor Management Policy

Policies scheduled to be reviewed in the following months:

- Funding for Road Closures for Community Events Policy
-

#### 4.1.4 Improvement Forum

- The Continuous Improvement Agents continue to promote Continuous Improvement (CI) and help process owners and experts manage and review their business processes. We have maintained our goal of zero overdue processes for the past five (5) months. We are working towards our objective for 2022 to keep our process 'current' to focus on improvement and reduce the number of draft processes to a minimum.
- The Continuous Improvement Agents have completed the Lean Six Sigma Yellow Belt online training course. This course has provided to our CI Agents with an understanding of the core fundamentals of Lean Six Sigma and the Define, Measure, Analyse, Improve, Control (DMAIC) roadmap. The CI Agents have now three months to complete the exam and project assignment. As of this date, we have one CI Agent who has already been certified and three who have already passed the exam.
- Process mapping training continues to be delivered online using the Nintex University online training and follow-up meetings using MS teams. In the past three months, 30 new starters have been trained in process mapping and process improvement as part of their induction, and three process authors have been trained in process creation training.
- The Innovation and Ideas Forum (IIF) is well established and meets monthly to review and select ideas worth pursuing using rigorous criteria detailed in the Improvement and Ideas framework. Amongst these, the IIF is studying an initiative to improve the travel booking process to be less paper-based, reduce the processing time, and produce better quality data for the calculation Council's Emission Stocktake.

#### 4.2 Independent Audit Activities

The table below outlines the areas and status of issues – either completed or in progress since the last report in December 2021.

Table 3 reflects those items staff consider are completed or a work in progress.

**Table 3 - Areas of audit issues- March 2022**

	Pending	Work in progress	Complete	Total
Audit New Zealand	0	3	41	44
Cyber security	0	8	35	43
Internal audit	0	0	5	5
Procurement and contract management	0	0	15	15
Risk management	0	0	37	37
Project management	0	0	33	33
Information and Record Management	4	7	1	12
<b>Total</b>	<b>4</b>	<b>18</b>	<b>167</b>	<b>189</b>



There are a total of 189 issues that have been raised by various audits across the organisation, 167 of which are complete.

### 4.3. KPMG Health and Safety Governance Audit

The Zero Harm team continues to progress the completion of the actions from the KPMG Health & Safety Governance Audit. Council received 29 improvement actions and to date 93% (27 actions) have been actioned. The following table provides an update on the remaining two actions.

Proposed Corrective Action	Timeframe	Current Status	Action Owner
Work with those ELT members who are yet to attend to the internal People Leader Health and Safety training modules. Schedule training for them and their People Leaders.	June 2022 – to be extended to December 2022	Safety Leadership and Culture material has been included in Zero Harm Induction Refresher for 2022. New People Leader Zero Harm Induction programme developed that includes Safety Leadership. This activity is captured as part of the Zero Harm Strategic Improvement Plan for FY21/22 however the timeframe for completion will need to be extended due to other completing priorities.	Lynn Shirley
Develop assurance plan for health and safety management system and where possible integrate into existing audit programme.	June 2022	First internal ISO45001 has been undertaken and action plan has been developed to close out non-conformances. Ongoing audit programme to be developed by Internal Audit function.	Lynn Shirley

## 5. Attachments Ngāa taapirihanga

There are no attachments for this report.

Date:	The 6th of April 2022
Report Author:	Madelina Baena-Escamilla, Continuous Improvement Analyst Bessie Clarke, Corporate Planner Lynn Shirley, Zero Harm Manager
Authorised by:	Tony Whittaker, Chief Operating Officer

<b>To</b>	<b>Audit &amp; Risk Committee</b>
<b>Report title</b>	<b>Insurance policy/premium confirmation</b>

### **1. Purpose of the report**

#### **Te Take moo te puurongo**

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To inform the Committee on the outcome of the insurance renewal and related premiums.

### **2. Executive summary**

#### **Whakaraapopototanga matua**

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The insurance market remains in a hard market cycle with professional indemnity and cyber liability cover most challenging from a terms and premium perspective.

Total premiums have increased by 21.11% to \$1.1 million for the 2021 renewal (excl. GST, Fire Service and EQC levies). The effective rate change, which is the change in premium when adjusted for the increase in the total declared value, ranged between -16.03% on commercial motor through to 87.04% on cyber liability.

The full premium summary and comparison can be viewed on the attachment to this report and should you wish to receive a full copy of the policy document please email [democracy@waidc.govt.nz](mailto:democracy@waidc.govt.nz).

### **3. Staff recommendations**

#### **Tuutohu-aa-kaimahi**

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**That the Audit & Risk Committee receives the report.**

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## 4. Attachments

### Ngaa taapirihanga

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Attachment 1 – Summary and comparison from the full insurance renewal report for Nov 2021-Nov 2022

Date:	6 April 2022
Report Author:	Alison Diaz, Chief Financial Officer
Authorised by:	Tony Whittaker Chief Operating Officer

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# Executive Summary/Renewal Overview

Firstly, we would like to thank the staff at Waikato District Council for the information supplied for the renewal process.

The following executive summary provides commentary of the renewal outcomes and a brief overview of the market conditions as at the renewal in November 2021.

We have already detailed most of the renewal outcomes at various presentations leading up to the renewal.

## Market Conditions

The insurance market has been in a hard market cycle for the last 4-5 years. We will cover off commentary for each of the major classes

### Material Damage and Business Interruption

Whilst we have been in a hard market, we have started to see the pricing pressures easing for well presented risks, with a good property portfolio. The collective approach of marketing for the Waikato LASS has enabled the market impacts to be kept to a minimum.

### Infrastructure

Pricing for the infrastructure programme has also stabilised from previous years, although this is still a slightly distressed market, with limited appetite. However, through the relationships that have been built with offshore markets over the last few years we have been able to secure the required capacity at minimal rating increases. Again, the LASS approach to marketing this cover is key to mitigating any market impacts.

### Liability - Professional Indemnity and Public Liability

The Professional Indemnity market remains challenging with there still being an increase in claims made in the Council sector, mostly from Building Consenting issues. However, your current lead insurers Berkshire Hathaway remain committed to the Council sector and they have kept rating increases to a minimum.

The pricing pressures on the Public Liability has eased from previous years. There are still claims in the Council sector however the premium adjustments that were made at the 2020 policy renewal where significant increases were seen, has had the effect of correcting the portfolio and meant that pricing can be stable for this policy period

### Motor

The Commercial Motor market is largely claims driven, and for accounts with a good claims history we are starting to see pricing reductions. The Waikato group of councils have had a good claims outturn for the last couple of years and this has been reflected in a rating reduction for the 2021 period.

### Cyber Liability

This was by far the hardest market for this renewal. Globally there has been a significant increase in the frequency and cost to claims under Cyber Liability cover. Many markets are no longer writing this cover and those that do are increasing premiums dramatically and also restricting cover available.

## Renewal Outcomes

The table shown under the Premium Summary and Comparison section of this report details all the premiums for the 2021 period and provides a comparison against the 2020 period.

However, one of the key factors that needs to be considered is the increase in either the Total Declared Values (TDV) of the assets being insured for the Material Damage and Business Interruption and Infrastructure covers, or for the Liability programme the increase in the total Revenue declared.

These two figures are factors used by underwriters when setting premiums. Therefore, when comparing premiums year on year, there also must be consideration for the increase in either Total Declared Values or Revenue declared as these will also impact the overall premium required.

### Material Damage and Business Interruption

The total premium for Waikato DC increased over last year by \$79,878.02. This is a 22.19% increase in premium. However, the Total Declared Values increased by 13.72%. Therefore, the effective rating increase was only 8.48%.

This is slightly ahead of the normal market increases that have been seen of approx 10%, this is therefore a good outcome.

#### **Infrastructure Programme – Main Placement 40% Cover**

The Total Declared Values for Waikato District Council have increased by 19.65% over 2020. The premium increase for 2021 over 2020 was 29.11%. When the increase in declared values is factored into this the actual underlying rate increase is only 9.51%. This is in line with the market expectations we had of 10%, and is therefore a good outcome.

#### **Infrastructure Programme - 60% “sidecar”**

There has been an increase in this premium over last year of 60% and even taking into account the increase of the Total Declared values of 19.6% this is still an effective increase of 41%. However there does need to be some context to these percentage figures. The premium for 2020 was \$18,633.68 and the premium for this year is \$29,938.52. This is a dollar increase of \$11,304.84.

#### **Liability - Public Liability**

For this renewal there has been a rating decrease, whilst the total revenue declared has increased by 12.43% approx. \$185,100,000 to \$208,100,000 a 12.43% increase the premium has only increased by 5%, which is an effective rating decrease of 7.43%.

#### **Liability - Professional Indemnity**

As mentioned in the market summary this is still a hard market and for this year the premium has increased year on year by 25%. However again we must consider the increase in the declared revenue figure of 12.43%. This means that the effective rating increase 12.57%. This is well ahead of the market where we have seen increases in rates of 30% to 40% for other large corporate entities. This level of increase is an outstanding outcome in the current market and further evidence of your current insurers being committed to the Council sector.

We were also able to gain further local market interest for this cover with a third insurer being added to the panel of insurers involved in the placement. This is a deliberate move to future proof the programme by reducing each of the existing markets capacity slightly to accommodate the new market. This reduces all of the markets exposures slightly, again offering future proofing to the placement.

#### **Motor**

There has been a significant reduction in the premium for this year. This is a combination of factors. Firstly the good claims performance of the LASS collective placement has allowed for their to be rating reductions. Secondly, the removal of “windscreen” cover from the programme. This has allowed further reduction in premiums. The removal of “windscreen” cover is not an unusual thing to do. Most large corporate fleets do not include this cover, as it is largely a dollar swapping exercise.

In fact, for every \$1 that is claimed an insurer will most likely charge \$1.20 in premium.

The removal of this cover saved Waikato District Council \$10,760.32

#### **Cyber Liability**

As previously mentioned, this is by far the hardest market that we have had this year. There has been a significant increase we have already provided separate commentary on the issues that were faced at renewal.

The current insurers Berkshire Hathaway (BH) requested more information relating to the levels of cyber security that each council has. There are minimum levels required before the insurers will quote. Several councils were found to not be in an ideal situation in respect of the levels of cyber security and were unable to secure cover.

Waikato District Council was able to secure cover, however this is on a shared limit basis with 13 other Councils of \$7.5M and an annual aggregate of \$1M per Council.

This was on the proviso that more information will be supplied in relation to the cyber security systems currently in place. A mid-year review is being undertaken to review these, with the objective of being able to increase the level of cover available. This is an ongoing piece of work scheduled for Q2 2022.

## Premium Summary and Comparison

The following is a comparison excluding GST and Levies GST of the insurer premiums and statutory charges that are compared to the prior year. This table also shows changes in Declared Values (TDV) and the Revenue figure declared (this is italicised) for the classes of insurance that utilise the Revenue figure for underwriting purposes

WAIKATO DISTRICT COUNCIL 2020 - 2021 COMPARISON							
Policy	2020 TDV/ Revenue	2020 Premium	2021 TDV/ Revenue	2021 Premium	% Change in Values	% Change in Premium	Effective Rate Change
Material Damage (excl Fire)	\$ 262,520,612	\$ 359,916.49	\$ 298,530,119	\$ 439,794.51	13.72%	22.19%	8.48%
Material Damage (Fire)							
Business Interruption	\$ 4,552,916	\$ 7,129.85	\$ 4,552,916	\$ 7,201.78	0.00%	1.01%	1.01%
Infrastructure Cover	\$ 447,233,345	\$ 101,099.69	\$ 534,875,826	\$ 130,529.99	19.60%	29.11%	9.51%
Infrastructure Cover - 60% Side Car Cover	\$ 447,233,345	\$ 18,633.68	\$ 534,875,826	\$ 29,938.52	19.60%	60.67%	41.07%
Commercial Motor	\$ 2,959,198	\$ 59,088.27	\$ 2,539,191	\$ 41,232.41	-14.19%	-30.22%	-16.03%
Employers Liability		\$ 1,109.00		\$ 1,164.00		4.96%	4.96%
Statutory Liability		\$ 8,531.00		\$ 8,958.00		5.01%	5.01%
Fidelity/Crime	\$ 185,100,000	\$ 13,28.00	\$ 208,100,000	\$ 14,110.00	12.43%	7.48%	-4.95%
General Liability	\$ 185,100,000	\$ 50,387.00	\$ 208,100,000	\$ 52,906.00	12.43%	5.00%	-7.43%
Professional Indemnity	\$ 185,100,000	\$ 250,156.00	\$ 208,100,000	\$ 312,695.00	12.43%	25.00%	12.57%
PL & PI - Liability Excess Layer	\$ 185,100,000	\$ 31,015.94	\$ 208,100,000	\$ 38,213.80	12.43%	23.21%	10.78%
Cyber Liability	\$ 185,100,000	\$ 19,120.00	\$ 208,100,000	\$ 38,136.99	12.43%	99.46%	87.04%
Boiler Explosion	\$ 156,750	\$ 355.20	\$ 156,750	\$ 500.00	0.00%	40.77%	40.77%
Personal Accident		\$ 915.75		\$ 915.75		0.00%	0.00%
Standing Timber	\$ 252,500	\$ 708.25	\$ 252,500	\$ 777.45	0.00%	9.77%	9.77%
Aviation Hull	\$ 1,900	\$ 43.77	\$ 1,900	\$ 383.84	0.00%	-12.12%	-12.12%
Aviation Non Owners / Hangerkeepers		\$ 800.00		\$ 840.00		5.00%	5.00%
Marine Hull		\$ 697.00	Policy Cancelled	\$ -			
Trustees Liability		\$ 1,260.00		\$ 1,323.00		5.00%	5.00%
Total Premium (excl GST, FSL & EQC levies)		\$ 924,487.89		\$ 1,119,621.04		21.11%	

The Following table shows the premiums for this year inclusive of levies and GST

Policy	Company Premium	EQC Levy	FENZ Levy	Aon Admin Fee	Sub-Total (excl GST)	GST	Total
Material Damage & Business Interruption (Combined)	\$ 446,996.29	\$ 12,094.16	\$ 30,952.00	\$ 6.00	\$ 490,048.45	\$ 73,507.27	\$ 563,555.72
Infrastructure Cover	\$ 130,529.99	\$ -	\$ -	\$ 6.67	\$ 130,536.66	\$ 1.00	\$ 130,537.66
Infrastructure Cover - 60% Side Car Cover	\$ 29,938.52	\$ -	\$ -	\$ 7.50	\$ 29,946.02	\$ 1.13	\$ 29,947.15
Commercial Motor	\$ 41,232.41	\$ -	\$ 744.90	\$ 6.00	\$ 41,983.31	\$ 6,297.50	\$ 48,280.81
Employers Liability	\$ 1,164.00	\$ -	\$ -	\$ 60.00	\$ 1,224.00	\$ 183.60	\$ 1,407.60
Statutory Liability	\$ 8,958.00	\$ -	\$ -	\$ 60.00	\$ 9,018.00	\$ 1,352.70	\$ 10,370.70
Fidelity/Crime	\$ 14,110.00	\$ -	\$ -	\$ 6.00	\$ 14,116.00	\$ 2,117.40	\$ 16,233.40
General Liability	\$ 52,906.00	\$ -	\$ -	\$ 60.00	\$ 52,966.00	\$ 7,944.90	\$ 60,910.90
Professional Indemnity	\$ 312,695.00	\$ -	\$ -	\$ 60.00	\$ 312,755.00	\$ 46,913.25	\$ 359,668.25
PL & PI - Liability Excess Layer	\$ 38,213.80	\$ -	\$ -	\$ -	\$ 38,213.80	\$ 327.43	\$ 38,541.23
Cyber Liability	\$ 38,136.99	\$ -	\$ -	\$ 2.86	\$ 38,139.85	\$ 5,720.98	\$ 43,860.83
Boiler Explosion	\$ 500.00	\$ -	\$ -	\$ 60.00	\$ 560.00	\$ 84.00	\$ 644.00
Personal Accident	\$ 915.75	\$ -	\$ -	\$ 10.00	\$ 925.75	\$ 70.18	\$ 995.93
Standing Timber	\$ 777.45	\$ -	\$ -	\$ 60.00	\$ 837.45	\$ 9.00	\$ 846.45
Aviation Hull	\$ 383.84	\$ -	\$ -	\$ 60.00	\$ 443.84	\$ 9.00	\$ 452.84
Aviation Non Owners / Hangerkeepers	\$ 840.00			\$ -	\$ 840.00	\$ -	\$ 840.00
Marine Hull	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Trustees Liability	\$ 1,323.00	\$ -	\$ -	\$ 100.00	\$ 1,423.00	\$ 213.45	\$ 1,636.45
<b>Totals</b>	<b>\$1,119,621.04</b>	<b>\$ 12,094.16</b>	<b>\$ 31,696.90</b>	<b>\$ 565.03</b>	<b>\$1,163,977.13</b>	<b>\$ 144,752.78</b>	<b>\$ 1,308,729.91</b>

## Notes

1. Statutory charges are passed on to the applicable statutory authority 100% by either the insurer or Aon. Aon do not receive commission. Fire and Emergency New Zealand (FENZ) is mainly funded by a levy on contracts of insurance where property is insured against the risk of fire (fire and emergency levy/FEL).
2. Aon's administration charge is \$60 plus GST per invoice transaction. The total amount is shown above.
3. GST is charged as required by New Zealand law. Please note GST may not apply to all insurers premiums or may not be a 'flat' 15%.

<b>To</b>	<b>Audit &amp; Risk Committee</b>
<b>Report title</b>	<b>Future Work Plan</b>

### **1. Purpose of the report** **Te Take moo te puurongo**

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To provide the Committee's work programme for information.

### **2. Staff recommendations** **Tuutohu-aa-kaimahi**

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**THAT the Audit and Risk Committee receives the Future Work Plan update for March 2022.**

### **3. Attachments** **Ngaa taapirihanga**

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Attachment 1 – A&R Future Work Plan 2022

Date:	Wednesday, 6 April 2022
Report Author:	Gaylene Kanawa, Democracy Team Leader
Authorised by:	Tony Whittaker, Chief Operating Officer

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## Audit &amp; Risk Committee: Future Work Plan

	March 2022	June 2022	September 2022	December 2022	Standing items for all meetings
<b>Risk</b>	<b>Health &amp; Safety Framework Review</b>  <b>Risk Assessment of Council Controlled Organisations Statements of Intent</b>			<b>Risk Management Framework review</b>  <b>Strategic Risk Register Review (workshop)</b>  <b>Annual Risk Appetite Review (workshop)</b>	<ul style="list-style-type: none"> <li>▪ <b>Chief Financial Officer Report</b> Update on risks and issues that could impact council and its stakeholders from a financial perspective, including insurance and procurement matters.</li> <li>▪ <b>Strategic Risk Register and Emerging Risks</b> Update on key strategic risks and associated management actions, including trajectory of risk assessment.  Opportunity to discuss emerging risks with potential for strategic impact.</li> <li>▪ <b>Risk Conversations</b> Opportunity for Committee to dialogue with key staff to obtain assurance that appropriate controls and culture are in place.</li> <li>▪ <b>Strategic Risk Deep Dive</b> Detailed inspection of a key risk for the purpose of assurance.</li> <li>▪ <b>Zero Harm Update</b> Health &amp; Safety performance update against agreed targets, systemic issues identified which can be fed into the risk control framework. To include monthly statistics.</li> <li>▪ <b>Quality Governance and Assurance</b> Progress against audit issues and rolling review of bylaw &amp; policies: <ul style="list-style-type: none"> <li>- Anti-fraud and corruption framework (and related policies)</li> <li>- Health &amp; Safety Policy</li> <li>- Risk Management Policy</li> <li>- Treasury Risk Management Policy</li> </ul> </li> <li>▪ <b>Post Implementation Reviews and/or Incident Debrief Reports</b> Post project appraisals on key investments.</li> </ul>
<b>Internal Audit</b>		<b>Internal Audit Framework review</b>  <b>Internal Audit TBC</b>	<b>Internal Audit Work Programme</b>	<b>Internal Audit TBC</b>	
<b>Insurance</b>	<b>Insurance Policy / Premium Confirmation</b>				
<b>Annual Report</b>	<b>Annual Report Risk Assessment (Deferred as delays by Audit NZ)</b>		<b>Annual Report Process Review</b>	<b>Final Audit Management Report</b>	
<b>Other</b>		<b>Committee Terms of Reference review</b>  <b>Zero Harm Site Visit</b>	<b>Audit &amp; Risk Committee Key Achievements</b> Review of Audit & Risk Committee performance against Terms of Reference	<b>Fraud and corruption risk management update</b>  <b>Zero Harm Site Visit</b>	

**Strategic Risk Deep Dives****Completed:**

- People and Culture ✓
- Zero Harm ✓
- Waters Social Franchise Model ✓
- Regional / National Strategic Planning ✓
- Stakeholder Engagement ✓
- Funding Partnerships ✓
- Business Resilience ✓
- Asset Management ✓
- People & Capability ✓
- Climate Resilience: Emissions Reduction Targets Strategic Risk ✓
- Affordability ✓
- Growth ✓

**To be confirmed:**

- Community Expectations
- Cyber Security
- Economic and Social Development
- Legislative Reform

<b>To</b>	<b>Audit &amp; Risk Committee</b>
<b>Report title</b>	<b>Register of Interests – Elected and Appointed Members</b>

## **1. Purpose of the report**

### **Te Take moo te puurongo**

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The purpose of this report is to provide a summary of interests declared by elected and appointed members of Council's committees and community boards, and the elected members of community committees.

## **2. Staff recommendations**

### **Tuutohu-aa-kaimahi**

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**THAT the Register of Interests for Elected and Appointed Members to March 2022 be received.**

## **3. Attachments**

### **Ngaa taapirihanga**

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- A Financial Interests – Statement Reference
- B Register of Elected Members Interests
- C Register of Elected Members Interests – External Appointees
- D Register of Elected Members Interests – Community Boards
- E Register of Elected Members Interests – Community Committees
- F Register of Elected Members Interests – Creative Communities (CCS)

Date:	Wednesday, 6 April 2022
Report Author:	Gaylene Kanawa, Democracy Team Leader
Authorised by:	Gavin Ion, Chief Executive

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<b>Financial Interests</b>	
<b>Statement Reference</b>	
<b>1</b>	I am, or my spouse or partner is, a party to a contract with Waikato District Council
<b>2</b>	I, or my spouse or partner, individually or together own(s) 10% or more of the shares in a <b>contracting company</b> or <b>controlling company</b> .
<b>3</b>	I am, or my spouse or partner is, a shareholder in a <b>contracting company</b> or <b>controlling company, AND</b> either I am, or my spouse/partner is, also a shareholder of the <b>controlling company</b> .
<b>4</b>	I am, or my spouse or partner is, a managing director or a general manager of a <b>contracting company AND</b> either I am, or spouse/partner is, also a shareholder of the <b>controlling company</b> .
<b>5</b>	I, or my spouse or partner, individually or together, has/have an <b>indirect concern or interest in a contract</b> with Waikato District Council not already disclosed above.
<b>6</b>	If you answered 'Yes' to any of questions 1 to 5, does the total value of all contracts listed above, exceed \$25,000 (including GST) for the current financial year.

Register of Elected Members Interests												
COUNCIL	Financial Interests			Non - Financial Interests								
	Please refer to Statement Reference here.			Companies		Employment/Paid Positions	Other Organisations		Property	Gifts (received since 21 October 2019)	Payments for activities and services (since 21 October 2019)	Debts
	1 to 6	With the exception of		Director/Manager	Financial Interests		Trustee/Beneficiary	Other Bodies				
Aksel Bech	No	N/A		• Frost Solutions Ltd (Frost protections and HR consultancy)	<ul style="list-style-type: none"> <li>Synthase Biotech (Enzyme Company)</li> <li>NDA Engineering (Stainless Steel Manufacturing)</li> <li>Wing Acoustics (Audio Driver Manufacturing)</li> <li>Heilala Vanilla (Vanilla Producer)</li> <li>Rua Biosciences (Medical Cannabis Company - formally Waiaipu Investments)</li> <li>Spoke Network Ltd (Telecom Software)</li> <li>Mighty River Power (Electricity Generator)</li> <li>Genesis Energy (Electricity Generator)</li> <li>James Street Ltd. (Property Investment)</li> <li>Snell Street Ltd (Property Investment)</li> <li>Mastaplex (Animal Welfare Co.)</li> <li>Beany (Accounting Software Co)</li> <li>Inhibit Coatings Ltd. (Anti-microbial Surface Coating)</li> <li>Toto Investments LP (Property)</li> <li>UBCO (Electric Motorcycles - minor holder of convertible note)</li> </ul>	<ul style="list-style-type: none"> <li>Synthase Biotech (Director)</li> <li>St. Peters Trust (Board Trustee)</li> </ul>	<ul style="list-style-type: none"> <li>St. Peters School &amp; Foundation (Trustee/Chair)</li> <li>Jepsen Family Trust (Trustee)</li> <li>A.B. Jepsen Trust (Trustee)</li> <li>Feline Adventure Trust (Trustee)</li> </ul>	<ul style="list-style-type: none"> <li>Coastguard (Northern) - (Ordinary Member)</li> <li>Kerikeri Cruising Club (Ordinary Member)</li> <li>Waikato Lacrosse Association (Chairperson)</li> </ul>	1x Tamahere (Beneficiary of Trust)	<ul style="list-style-type: none"> <li>Complimentary access to Promoter's Lounge at Sevens tournament with +17 (Donor- 37 South Ltd)</li> <li>Waikato Business Awards (13 Nov 2020) \$219.50</li> <li>Hospice Bucket-List Dinner (4 May 2021). Value \$160.</li> </ul>	N/A	<ul style="list-style-type: none"> <li>Loan to Individual in Ward.</li> </ul>
Carolyn Eyre	No	N/A		• Pepepe Investments (Farming)	• Pepepe Investments (Farming)	• SM Eyre Trust (Office Manager)	• SM Eyre Trust (Beneficiary)	• Waikato Diocesan School for Girls Proprietors Board (Representative)	• Huntly (Beneficiary of Trust)	2 x corporate box tickets (Hamilton City Council) Counties V Waikato Rugby @ the FMCG Hamilton Stadium Clarke Lounge. Estimate \$150. 10 Oct 2020	N/A	N/A
Chris Woolerton	No	N/A		• Middle Ridge Farms Ltd. (Dairy farm)	<ul style="list-style-type: none"> <li>Fonterra</li> <li>Balance</li> <li>LIC</li> </ul>	• Middle Ridge Farms Ltd.	• Woolerton Trust	• Oaks Church (Parish Council/ Building Committee)	• Taupiri (Owner)	N/A	N/A	N/A
Eugene Patterson	No	N/A		• Complete Painting & Decorating (Painting)	N/A	N/A	N/A	Ngaruawahia Bowling Club (Treasurer)	• Ngaruawahia (Owner)	N/A	N/A	N/A
Frank McInally	No	N/A		McInally Truckpainters (Panel-paint)	N/A	N/A	N/A	Huntly RSA (President)	2x Huntly (Owner)	N/A	N/A	N/A
Jacqui Church	No	N/A		• Great Goods Limited (Coffee & Food Service Wholesale Distributor)	N/A	N/A	• Southwest Trust (Trustee)	<ul style="list-style-type: none"> <li>Pukekohe Lions (Member)</li> <li>Franklin &amp; Districts Justices of the Peace Association (Member)</li> <li>BPW Franklin – Business &amp; Professional Women Franklin (Member)</li> <li>Port Waikato Pink Breakfast (Committee Chair)</li> <li>Tuakau Cleanup &amp; Planting (Member)</li> <li>Franklin &amp; North Waikato [FAWN] Trails Forum (Member)</li> <li>Onewhero Golf Club (Colin Church – Husband – Member &amp; on Match Committee)</li> <li>Port Waikato Blue Breakfast (Colin Church – Husband – committee member)</li> </ul>	• 2x Tuakau (Owner)	2 x corporate box tickets (Hamilton City Council) Counties V Waikato Rugby @ the FMCG Hamilton Stadium Clarke Lounge. Estimate \$150. 10 Oct 2020	N/A	N/A
Jan Sedgwick	No	N/A		N/A	<ul style="list-style-type: none"> <li>Auckland Airport</li> <li>Contact Energy</li> <li>AMP</li> <li>Methven</li> <li>Cochlear</li> <li>Telstra</li> <li>Wherescape</li> <li>CBA</li> <li>Bank of Queensland (public shareholder in all above)</li> </ul>	N/A	<ul style="list-style-type: none"> <li>Holbrook Family Trust (beneficiary)</li> <li>Carrara Wharf Trust (Beneficiary)</li> <li>Harvey S'pore Trust (Beneficiary)</li> <li>WWF NZ - Trustee (Board Member)</li> <li>Te Araroa Trail Trustee (Board Member)</li> </ul>	N/A	• Te Kauwhata (Shareholder in company)	N/A	N/A	N/A
Janet Gibb	No	N/A		<ul style="list-style-type: none"> <li>JMG Ltd (Rental Properties)</li> <li>Ede Investments Ltd (Farming)</li> </ul>	N/A	• Ede Investments Ltd (Farming)	<ul style="list-style-type: none"> <li>Janet Gibb Family Trust (Trustee/Settlor/Beneficiary)</li> <li>Rarangi Trust (Trustee/Beneficiary)</li> <li>Mangatokotoka Trust (Trustee/Beneficiary)</li> <li>Tironui Trust (Trustee/Beneficiary)</li> </ul>	• Business + Professional Women NZ (Advocacy + Education – Member/Past Executive)	<ul style="list-style-type: none"> <li>2x Taupiri (Owner)</li> <li>4x Taupiri (Trustee or Director)</li> <li>2x Taupiri (Trustee/Beneficiary/Director)</li> </ul>	2 Tickets to rugby match from Hamilton City Council value of \$150 5 July & 10 Oct 2020	N/A	<ul style="list-style-type: none"> <li>ASB (mortgages Rental Properties)</li> <li>ASB (Farm Mortgages + Overdrafts)</li> </ul>
Lisa Thompson	No	N/A		N/A	N/A	<ul style="list-style-type: none"> <li>Raglan Area School (Board of Trustees &amp; Administrator)</li> <li>Trade Aide Importer (Retail)</li> </ul>	• Raglan Event & Multi Sport Trust (Event Coordinator/Trustee)	<ul style="list-style-type: none"> <li>Whaingaroa Raglan Affordability Project/Affordable Housing/Council</li> <li>Raglan Naturally (Community Organisation)</li> <li>Raglan Business Chamber (Local Business Development)</li> <li>Council &amp; Community Board</li> </ul>	1x Raglan (owner)	N/A	N/A	N/A

Register of Elected Members Interests											
COUNCIL	Financial Interests		Non - Financial Interests								
	1 to 6	With the exception of	Companies		Employment/Paid Positions	Other Organisations		Property	Gifts (received since 21 October 2019)	Payments for activities and services (since 21 October 2019)	Debts
			Director/Manager	Financial Interests		Trustee/Beneficiary	Other Bodies				
Noel Smith	No	N/A	N/A	<ul style="list-style-type: none"> <li>National Australian Bank (Bank)</li> <li>Farmlands Loop Ltd (Farm Supplies)</li> </ul>	• Self Employed (Farming)	N/A	<ul style="list-style-type: none"> <li>Waikato JP Assn Inc (JP Duties – Senior Vice President)</li> <li>Huntly JP Assn (JP Support – IPP)</li> </ul>	x2 Ngaruawahia (owner)	N/A	N/A	N/A
Rob McGuire	No	N/A	N/A	<ul style="list-style-type: none"> <li>Fonterra (Shareholder)</li> </ul>	• Self-employed (Farming)	• McGuire Family Trust (Beneficiary)	N/A	1x Puketaha (Family Trust/Beneficiary)	N/A	N/A	N/A
Mayor Allan Sanson	No	N/A	Sanpat Ltd (Farming)	Sanpat Ltd (Farming)	N/A	AM & PA Sanson Family Trust (Trustee)	N/A	x3 Huntly (owner)	January 2020 Return Airfare to Guangzhou (China) from Yashili International Holdings, including 3 nights accommodation.	N/A	N/A
Stephanie Henderson	No	N/A	N/A	N/A	N/A	N/A	N/A	1x Te Kohanga (owner)	N/A	N/A	N/A
Shelley Lynch	No	6. No answer entered	N/A	N/A	N/A	N/A	<ul style="list-style-type: none"> <li>Huntly Rotary (Charity) – Organisation has received, or applied to receive, funding from Council/Community Board/Community Committee</li> <li>BPW Huntly (Dinner meetings)</li> <li>Huntly &amp; Ngaruawahia RSA (Dinner)</li> </ul>	x3 Huntly (owner)	N/A	N/A	N/A

## Register of Elected Members Interests

Name	Financial Interests <i>Please refer to Statement Reference</i>		Non - Financial Interests								
	1 to 6	With the exception of	Companies		Employment	Other Organisations		Property	Gifts (received since 21 October 2019)	Payments for activities and services (since 21 October 2019)	Debts
			Director/Manager	Financial Interests		Trustee/Beneficiary	Governing Body				
Brendon John Green	No	No	<ul style="list-style-type: none"> <li>Peak 2 Peak limited</li> <li>Advanced biotech</li> </ul>	n/a	n/a	n/a	<ul style="list-style-type: none"> <li>Watercare (director)</li> <li>Ministry of Education (taumata aronui)</li> <li>Waikato Tainui (member)</li> <li>Maitiaki Advisory limited (director)</li> <li>Tainui Kawhia Inc (director)</li> <li>Manukau Institute of Technology (Runanga)</li> </ul>	n/a	n/a	n/a	ANZ Mortgage
Maxine Moana-Tuwhangai	No	n/a	n/a	n/a	n/a	<ul style="list-style-type: none"> <li>Te Whakakitenga o Waikato (Marae representative)</li> <li>Koheroa 39D1B and 39D2 Trust (trustee)</li> <li>Te Aho o Te Kura Pounamu (Trustee)</li> </ul>	<ul style="list-style-type: none"> <li>Haukura Hauora o Tainui (director)</li> <li>Kiwi Rail Holdings (director)</li> </ul>	n/a	n/a	n/a	n/a



Jack Ayers	Ngaruawahia	No	N/A	N/A	N/A	N/A	• Waipa School Board of Trustees (Board Member)	N/A	N/A	N/A	N/A	N/A
Rongo Kirkwood	Ngaruawahia	No	N/A	• Riverbed Motel (Accommodation)	• Riverbed Motel (Accommodation)	• Trust Waikato (Community Trust)	• Ngaruawahia High School Board of Trustee (Board Member)	N/A	N/A	N/A	N/A	N/A
Dianne Firth	Ngaruawahia	No	N/A	N/A	• Soalchery (Soap Making) • Shipits (Dress Making)	N/A	• Dianne Firth Family Trust (Trustee) • KH & CL Ulrich Trust (Beneficiary)	• Glen Massey School PTA (Treasurer) • Ngaruawahia High School Board of Trustees	1x Ngaruawahia (Beneficiary of Trust) 1x Hamilton (Beneficiary of Trust)	N/A	N/A	N/A
Venessa Rice	Ngaruawahia	No	N/A	N/A	N/A	• Ngaruawahia Community House (local community services and activities) • Ngaruawahia High School (Husband employed as groundsman)	N/A	Ngaruawahia Community Patrol	2x Ngaruawahia (Owner)	N/A	N/A	N/A
David Whyte	Huntly	No	N/A	N/A	• Zestos (Boutique citrus production, writing on environmental/tree issues, rental property management)	N/A	N/A	• New Zealand Tree Crops Association (President moving to Past President in 2021) • Waikato Tree Crops (Committee Member)	2x Ohinewai (Owner) 2x Huntly (Owner) 2x Ngaruawahia (Owner)	2x Complimentary tickets to Huntly Wearable Art Show	N/A	• Westpac (bank loan)
Red Wootton	Huntly											
Rewi Cork	Huntly											
Greg McCutchan	Huntly	No	N/A	N/A	N/A	Declined to answer	N/A	N/A	Declined to answer	N/A	N/A	N/A
Kim Bredenbeck	Huntly	No	5. GM of WEA who hold a contract for iSITE delivery services for Raglan. Contract will end possibly in June 2020 (value of contract 142k)	N/A	N/A	• Waikato Enterprise Agency Trust Inc. (Education and Tourism services)	• Friendship House Inc (Treasurer)	• Huntly War Memorial Hall Committee (Secretary) (Currently negotiating funds to continue the refurbishment of the hall as outlined by Chairperson who is the project manager aligned to plan) • Huntly Residency and Ratepayers Association (Secretary) • Lets Get Together Huntly (Committee member - delivers Wearable Arts Competition every second year- will apply to the culture fund and community board for this event in July)	1x Huntly (owner)	N/A	N/A	N/A
Eden Watawai	Huntly	No	N/A	N/A	N/A	• Waikato District Council (Employee-Customer Service)	N/A	• Huntly RSA (Committee Member) • Harty Sistaz Huntly Girls Youth Group (Co-Facilitator)  Anzac Day funding for Huntly RSA Access to Council resources as Huntly Youth Action Group Contributors (Harty Sistaz)	1x Huntly (Tenant)	N/A	N/A	N/A
Dorothy Lovell	Taupiri	No	N/A	N/A	N/A	• Hamilton Hearing Assoc. (Administrator)	N/A	N/A	N/A	N/A	N/A	N/A
Howard Lovell	Taupiri	No	No	HW & JE Lovell Ltd			• Kildore Development (Director) • Mountain View Developments (Director) • Taupiri School Board of Trustees (Trustee)		6x Taupiri	N/A	N/A	
Rudy Van Dam	Taupiri	No	N/A	• St. Isadore Co Ltd. (Farming)	N/A	N/A		N/A	1x Taupiri (Owner)	N/A	N/A	N/A
Joanne Morley	Taupiri	No	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Sharnay Cocup	Taupiri	No	N/A	N/A	N/A	N/A	• Taupiri School Board Trustees (Trustee) • Taupiri Youth Group (Trustee) • Waikato Trout Committee (Trustee)	• Taupiri Rugby Club (Weigh in deligate)	N/A	N/A	N/A	N/A
Jacqueline Henry	Taupiri	No	N/A	N/A	N/A	• Waikato Regional Council (Senior Social Scientist)	N/A	N/A	1x Taupiri (Owner)	N/A	N/A	N/A

YELLOW INDICATES THAT THE ELECTED MEMBER DID NOT SUBMIT A COMPLETED FORM



## Register of Elected Members Interests

Name	Community Committee	Financial Interests <i>Please refer to Statement Reference here.</i>		Non - Financial Interests								
		1 to 6	With the exception of	Companies		Employment	Other Organisations		Property	Gifts (received since 21 October 2019)	Payments for activities and services (since 21 October 2019)	Debts
				Director/Manager	Financial Interests		Trustee/Beneficiary	Governing Body				
Jim Katu	Meremere	No	N/A	N/A	N/A	N/A	N/A	N/A	1x Meremere (Owner)	N/A	N/A	N/A
James Harman	Meremere	No	N/A	N/A	N/A	N/A	N/A	• Meremere Development Committee incorporated (Chairman) Received community funding	x1 Meremere (Owner)	N/A	N/A	N/A
Angela Dobby	Meremere	No	6 - No answer entered	N/A	N/A	N/A	N/A	N/A	1x Meremere (Beneficiary of Trust)	N/A	N/A	N/A
Lauren Horsfall	Meremere	No	N/A	N/A	N/A	N/A	N/A	• Meremere Community Development Committee (Find funding for events & programs run in Meremere) <i>Funding: Christmas events in past.</i>	x1 Meremere (Owner)	N/A	N/A	N/A
Cecilia Heta	Meremere	No	N/A	N/A	N/A	N/A	N/A	N/A	N/A	\$500 gift card each to Cecilia Heta, Trish van der Wende and Okeroa Rogers, all members of the MMCC Hall Committee, on behalf of MMCC, as resolved by email resolution (MMCC2002/04)	N/A	N/A
Ben Brown	Meremere	No	N/A	• Decal Ltd (Director)	N/A	N/A	N/A	• Meremere Development Committee (Secretary)	1x Meremere (Owner)	N/A		
Toni Grace	Te Kauwhata	No	N/A	N/A	• Mercury Energy (shares)	• Suits & Gumboots Country Daycare (Early Childhood Centre)	• Tolemisa Trust (Trustee)	• Te Kauwhata Squash Club (Club Captain)	1x Te Kauwhata (Owner/Trustee)	N/A	N/A	Home Mortgage
John Cunningham	Te Kauwhata	No	N/A	Aparangi Retirement Village	• Ignition Partner Ltd (Business Advice & capital raising) • Resin & Wax Holdings (Chemical Development) • Cawthron Institute (Aquaculture Research) • IMMR (Research) • Climsystems Ltd. (Climate forecasting & risk management)	N/A	N/A	N/A	2 x Te Kauwhata (Owner)	N/A	N/A	N/A
Carolyn Berney	Te Kauwhata	No	N/A	N/A	N/A	• Te Kauwhata Primary School (Teaching)	N/A	N/A	1 x Te Kauwhata (Owner)	N/A	N/A	N/A
Courtney Howells	Te Kauwhata	No	N/A	N/A	N/A	• Century 21 Tuakau	N/A	• Wife is District Commissioner of Te Kauwhata Area Pony Club	1x Waerenga (Owner)	N/A	N/A	Home Mortgage
Barry Weaver	Te Kauwhata	No	N/A	N/A	N/A	N/A	N/A	N/A	1 x Te Kauwhata (Owner)	N/A	N/A	N/A
Angela Van de Munckhof	Te Kauwhata	No	N/A	•Te Kauwhata Pharmacy (Pharmacy/Retail)	•Te Kauwhata Pharmacy (Pharmacy)	• Te Kauwhata Pharmacy (Retail)	N/A	N/A	1x Onewhero (Owner)	N/A	N/A	N/A
Tim Hinton	Te Kauwhata	YES Sub contractor to City Care (Value of contract \$600,00)	YES No.6	Inform Landscapes (Horticulture Contractor)	Inform Landscapes (Horticulture Contractor)	• Inform Landscapes (Horticulture Contractor)	Tim Hinton Family Trust (Director)	• Te Kauwhata Emergency Services Trust (Funding for emergency services)	1x Te Kauwhata (Owner)	N/A	N/A	N/A



Register of Elected Members Interests

Name	Community Committee	Financial Interests <i>Please refer to Statement Reference here.</i>		Non - Financial Interests								
		1 to 6	With the exception of	Companies		Employment	Other Organisations		Property	Gifts (received since 21 October 2019)	Payments for activities and services (since 21 October 2019)	Debts
				Director/Manager	Financial Interests		Trustee/Beneficiary	Governing Body				
Ric Odom	Pokeno	No	N/A	Franklin Hospice Charitable Trust (Provision of palliative care)	Jeneric Investments Ltd. (Investment)	Franklin Hospice Charitable Trust (Provision of palliative care)	Jeneric Family Trust (Trustee)	Franklin JP Assn (Council member. Justices of the Peace)	1x Pokeno (Owner/Trustee)	N/A	N/A	New Zealand Home Loans (Mortgage)
Helen Clotworthy	Pokeno	No	N/A	Pokeno Bacon Co. (Manufacturers-Retailers)	Pokeno Bacon Co. (Manufacturers-Retailers)		David Evans Family Trust (Trustee & Beneficiary)	Pokeno Hall Committee (Treasurer) Pokeno Community Hall (Manager)	x4 Pokeno (Owner)	N/A	N/A	N/A
Lance Straker	Pokeno											
Allen Grainger	Pokeno	No	N/A	<ul style="list-style-type: none"> <li>•Waikato Rugby Union</li> <li>•Frankton Rugby Sports Club Inc</li> </ul>	N/A	N/A	N/A	<ul style="list-style-type: none"> <li>• Waikato Rugby Union (Director)</li> <li>• Frankton Rugby Sports Club (Board Member)</li> </ul>	N/A	N/A	N/A	N/A
Peter Koizumi	Pokeno											
Todd Miller	Pokeno											
Kris Hines	Pokeno	No	N/A	N/A	N/A	N/A	N/A	N/A	1x Pokeno (Owner)	N/A	N/A	N/A
Brenda Ann Roberts	Pokeno	No	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Doug Rowe	Pokeno	No	N/A	N/A	N/A	N/A	N/A	Pokeno Community Patrol Member Pokeno Hall Committee Member	1x Pokeno (Owner)	N/A	N/A	N/A
Helen Johnson	Pokeno	No	N/A	N/A	N/A	NZ Police (Intelligence Analyst & Support)	N/A	Pokeno Tennis & Rec Club (Committee Member-rebuilding a community facility)	N/A	N/A	N/A	N/A
James McRobbie	Pokeno											

YELLOW INDICATES THAT THE MEMBER DID NOT SUBMIT A COMPLETED FORM

## Register of Elected Members Interests

Name	Committee	Financial Interests <a href="#">Please refer to Statement Reference here.</a>		Non - Financial Interests								
		1 to 6	With the exception of	Companies		Employment	Other Organisations		Property	Gifts (received since 21 October 2019)	Payments for activities and services (since 21 October 2019)	Debts
				Director/Manager	Financial Interests		Trustee/Beneficiary	Governing Body				
Judith Anne Muru	Creative Communities Scheme Assessment Committee	No	N/A	N/A	N/A	Te Wharekura o Rakaumanga - Education	N/A	N/A	Owner 1x property, Huntly	N/A	N/A	N/A
Mark Leslie Vincent	Creative Communities Scheme Assessment Committee	No	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Heather Joy Cunningham	Creative Communities Scheme Assessment Committee	No	N/A	N/A	N/A	Raglan Community Arts Council - Clay Tutor	N/A	N/A	N/A	N/A	Tutor Fee in employment for Raglan Community Arts Council	N/A
Annette Joan Taylor	Creative Communities Scheme Assessment Committee	No	N/A	N/A	N/A	N/A	N/A	Home Range/Number 8 Network (Editor) - received grants from WDC Discretionary Fund	N/A	N/A	N/A	N/A
Amomai Pihama	Creative Communities Scheme Assessment Committee											
Claire du Bosky	Creative Communities Scheme Assessment Committee	No	N/A	N/A	Shares in Genesis	Relief Teacher - Waitakaruru School, Te Kauwhata Primary School and Waerenga Primary School	N/A	Te Kauwhata Fitness Centre - Committee Member	Owner 1x property - Te Kauwhata	N/A	N/A	N/A
Miriama (Tilly) Turner	Creative Communities Scheme Assessment Committee	No	N/A	Mighty Fine Product Ltd (Food Caravan)	Trading as Taana Ltd (Mussel Fritters)	N/A	Hone & Miriama Turner Whanau Trust (Trust for Whanau Papakainga)	Turangawaewae Maori Women's Welfare League (Branch of the Waikato Regional MWWL and part of National MWWL)	1 x property Ngaruawahia (Trustee members & beneficiary)	N/A	N/A	ANZ Bank (Trust for home mortgage)

YELLOW INDICATES THAT THE MEMBER DID NOT SUBMIT A COMPLETED FORM

**To** | **Audit and Risk Committee**  
**Report title** | **Exclusion of the Public**

**1. Staff recommendations**  
**Tuutohu-aa-kaimahi**

**THAT the Audit and Risk Committee:**

- a. **exclude the public from the following parts of the proceedings of this meeting.**

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

General subject of each matter to be considered	Reason for passing this resolution in relation to each matter	Ground(s) under section 48(1) for the passing of this resolution
<p>Item number PEX 1 Confirmation of Minutes</p> <p>Item PEX 2 Action Register</p> <p>Item PEX 3.1 Fraud Declaration</p> <p>Item PEX 3.2 Risk Assessment of Council Controlled Organisations Statements of Intent</p> <p>Item PEX 3.3 ComplyWith Legal Compliance Survey Results</p> <p>Item PEX 3.4 Cyber Security - 360 Degree Security Review &amp; Threat Assessment</p>	<p>Good reason to withhold exists under Section 6 or Section 7 Local Government Official Information and Meetings Act 1987</p>	<p>Section 48(1)(a)</p>

<p><b>Item PEX 3.5</b> <b>Register of Members’</b> <b>Interests – Senior Staff</b></p> <p><b>Item PEX 3.6</b> <b>Committee Time with</b> <b>Audit New Zealand</b></p>	<p><b>Good reason to withhold</b> <b>exists under Section 6 or</b> <b>Section 7 Local</b> <b>Government Official</b> <b>Information and</b> <b>Meetings Act 1987</b></p>	<p><b>Section 48(1)(a)</b></p>
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This resolution is made in reliance on section 48(1)(a) of the Local Government Official Information and Meetings Act 1987 and the particular interest or interests protected by Section 6 or Section 7 of that Act which would be prejudiced by the holding of the whole or relevant part of the proceedings of the meeting in public, as follows:

Item No.	Section	Interest
<p><b>Item number PEX 1</b> <b>Confirmation of</b> <b>Minutes</b></p> <p><b>Item PEX 2</b> <b>Action Register</b></p>		<p><b>Refer to the previous Public Excluded reason in the agenda for this meeting.</b></p>
<p><b>Item PEX 3.1</b> <b>Fraud Declaration</b></p>	<p><b>7(2)(a)</b></p> <p><b>7(2)(c)(ii)</b></p>	<p><b>To protect the privacy of natural persons, including that of deceased natural persons.</b></p> <p><b>To protect information which is subject to an obligation of confidence or which any person has been or could be compelled to provide under the authority of any enactment, where the making available of the information—</b></p> <p><b>(ii) would be likely otherwise to damage the public interest.</b></p>
<p><b>Item PEX 3.2</b> <b>Risk Assessment of</b> <b>Council Controlled</b> <b>Organisations</b> <b>Statements of</b> <b>Intent</b></p>	<p><b>7(2)(f)(i)</b></p>	<p><b>To maintain the effective conduct of public affairs through free and frank expression of opinion</b></p>
<p><b>Item PEX 3.3</b> <b>ComplyWith Legal</b> <b>Compliance Survey</b> <b>Results</b></p>	<p><b>6(a)</b></p>	<p><b>To protect the maintenance of the law.</b></p>

Item PEX 3.4 Cyber Security - 360 Degree Security Review & Threat Assessment	7(2)(c)(ii)  7(2)(j)	To protect information that is subject to an obligation of confidence and to protect the public  To prevent use of the information for improper gain or advantage.
Item PEX 3.5 Register of Members' Interests – Senior Staff	7(2)(a)	Protect the privacy of natural persons, including that of deceased natural persons.
Item PEX 3.6 Committee Time with Audit New Zealand	7(2)(c)(ii)	To protect information which is subject to an obligation of confidence or which any person has been or could be compelled to provide under the authority of any enactment, where the making available of the information would be likely otherwise to damage the public interest

- b. THAT Ms Macown and Mr Susan from Audit NZ be permitted to remain at this meeting, after the public has been excluded, because of their knowledge of audit requirements for Waikato District Council. This knowledge, which will be of assistance in relation to the matter to be discussed, is relevant to that matter to inform and advise the Committee members.

## 2. Attachments Ngaa taapirihanga

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There are no attachments for this report.

Date:	6 April 2022
Report Author:	Gaylene Kanawa, Democracy Team Leader
Authorised by:	Gavin Ion, Chief Executive

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