

# **AUDIT & RISK COMMITTEE MEETING**

# ATTACHMENTS

Tjulyuru Cultural and Civic Centre Warburton Community

> 15 December 2021 at 1.00 pm

| Risk<br>Number | Risk Assessment Category   | Risk Issue and Failure Modes  | Existing Controls  | Risk<br>Rating | Mitigation and Management Strategy (Possible Future<br>Controls)   | Responsible<br>Officer | Complete<br>Y/N/%    |
|----------------|--|---|--|----------------|--|------------------------|----------------------|
| 1              | Legislative / Regulatory / Policy /<br>Occupational Safety and Health  | Insufficient and/or inconsistent<br>procedures in relation to<br>procurement processes, including<br>selection criteria, assessment<br>requirements, declarations of<br>independence of assessors,<br>variations to contracts and review. | Purchasing policy  | High           | Review procurement processes to consider where gaps exist<br>and address deficiencies. Develop procedures/framework to<br>guide and direct procurement requirements for all staff.                 | DGS                    | A<br>cc<br>Pi<br>50% |
| 2              | Service Delivery/Business<br>Interruption  | Failure to prepare and plan for<br>potential events which could<br>interupt the administrative<br>operations in delivering services<br>to the community.  |  | High           | Identify and document key business continuity risks along<br>with the treatments to reduce risks to an aceptable level.<br>Develop into a Business Continuity Plan and test to ensure<br>validity. | DGS                    | Ti<br>ar<br>60%      |
| 3              | Environmental Risk   | Inadequate control and<br>management of reclaimed water<br>(for irrigation etc)   | Agreements with<br>Water Corporation   | Medium         | Develop procedures and review schedule for the control and management of reclaimed water.  | CEO                    | W<br>Y               |
| 4              | Environmental Risk   | Failure to adequately enforce<br>conditions and manage landfill<br>operations at unmanned landfill<br>sites.  | Waste<br>Management Plan   | High           | Articulate operating arrangements for waste disposal facilities.<br>Develop workflow diagrams for administration staff when processing front counter transactions for unmanned waste               | CEO                    | La<br>co<br>Y        |
| 5              | Legislative / Regulatory / Policy /<br>Occupational Safety and Health  | Inadequate processes to manage<br>and comply with OSH<br>requirements   | OSH safety audit,<br>OSH risk register,<br>toolbox meetings,<br>OSH officer                      | High           | Safety audit to be undertaken through to assess OSH<br>requirements.<br>Maintain OSH risk register and actions through OSH<br>meetings.  | DCS                    | Si<br>W<br>Ie<br>5%  |
| 6              | Legislative / Regulatory / Policy /<br>Occupational Safety and Health  | Failure to manage HR matters in accordance with statutory requirements.   | IR consultant /<br>professional advice<br>subscription   | Medium         | Review policies and procedures to address gaps relating to<br>HR in existing practices. Develop procedures and / or<br>workflows for HR activities.  | DCS                    | Pr<br>C<br>30%       |
| 7              | Financial  | Incorrect processing of employee payroll  | Processes for<br>timesheet<br>authorisation,<br>payroll<br>authorisation and<br>review processes |                | Develop procedures and/or workflows for appropriate<br>processing, review and authorisation process for all functions<br>of fortnightly payroll processing.  | DCS                    | U<br>85%             |
|                | RISK ASSESSMENT FROM REG   | 5. and REG 17. REVIEW.  |  | RISK ASSESS    | SMENT FROM REG 5. and REG 17. REVIEW.  |                        |                      |
| 6.2.1          | External Complaints<br>This policy governs the procedure<br>for complaints against elected<br>members of Council, which<br>contradicts the appointment of the<br>CEO as the Complaints Officer in<br>the Code of Conduct for Council |   |  | Medium         | Review and amend the policy with consideration of the complaints resolution procedures as documented in the Code of Conduct for Council Members, Committee Members and candidates for election.    | DGS                    | A<br>w<br>50%        |
|                | <b>Business Continuity &amp; Disaster</b>  | Recovery Fidli  |  |                |  |                        |                      |

A draft procurement and purchasing procedure has been completed. This will be reviewed as part of the new CEO Procedures.

The Business Continuity Plan has been reviewed and updated and is presented to Council for adoptption in December 2021.

Water management is managed by DoC REMS Contractor

Landfills are not the Shires. The Shire has report potentially contaminated sites to DEWR who are liaising with DoC / DPLH

Software (WHS monitor) in place to assist with managing Workplace Health and Safety requirements as per new legislation. Traning and input of base data in progress.

Policy Manual has been reviewed and endorsed by Council. CEO Procedures under review.

Updates to documentation in progress.

A draft complaint resoltion procedure has been completed. This will be reviewed as part of the new CEO Procedures.

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|----------------|--|------------------------------|-------------------|----------------|--|------------------------|-------------------|------------------|
| 7.1.1          | A Business Continuity Plan was<br>prepared in 2016 however there<br>was no evidence of the plan being<br>tested to ensure its validity.  |                              |                   | High           | Progress the review, update of the Business Continuity Plan<br>and test it to ensure its validity, including validity of the<br>documented key business continuity risks along with the<br>treatments. Ensure content of the plan is relevant and<br>current to the Shire, and risk treatments are consolidated with<br>overarching risk management activities.<br>The plan should facilitate organised decision making in the<br>event of any major disruption impacting the Shire's ability to<br>continue normal operations, with testing involving relevant<br>and key personnel to ensure validity of the identified risks<br>and treatments within the plan. | DGS                    | 40%               | Re<br>bei        |
|                | ICT Disaster Recovery Plan   |                              |                   |                |  |                        |                   |                  |
| 7.1.2          | A Disaster Recovery Plan was<br>adopted by Council on 09<br>November 2016 however there<br>was no evidence of the plan being<br>tested to ensure its validity.   |                              |                   | Medium         | Review and update content of the Disaster Recovery Plan to<br>ensure relevancy and currency to the Shire. Maintain, review<br>and test the plan to ensure validity.  | DGS                    | 40%               | Se               |
|                | Administration Procedures  |                              |                   |                |  |                        |                   |                  |
| 7.1.3          | Documented procedures currently<br>exist in the form of a CEO<br>Procedures Manual (currently<br>under review). Some other   |                              |                   | High           | Finalise review of the CEO Procedures.   | DGS / DCS              | 50%               | A p<br>cor       |
|                | Asset Management Plan  |                              |                   |                |  |                        |                   |                  |
| 7.1.4          | The most recent Asset<br>Management Plan was adopted in<br>November 2018. The plan does<br>not meet the standards set within<br>the DLGSCI Integrated Planning<br>and Reporting Advisory Standard<br>(September 2016) in that the ratio  |                              |                   | High           | Review and update the Asset Management Plans to maintain<br>effective alignment with IPR documents, and to include all<br>required data and information as published within the<br>DLGSCI Integrated Planning and Reporting Advisory<br>Standard (September 2016).   | DIS                    | 20%               | Ro:<br>202       |
|                | Checklists & Workflow Diagrams   |                              |                   |                |  |                        |                   |                  |
| 7.2.1          | Checklists of key functions are<br>maintained for selected functions.<br>Checklists were not maintained<br>and evidenced for all standard<br>routine functions such as end of<br>month reconciliations and<br>reporting across the organisation.<br>It was noted some staff have<br>commenced with the creation of<br>checklists and procedures. |                              |                   | High           | Creation and maintenance of standard checklists may assist<br>in evidencing key points of control. Checklists assist in<br>ensuring compliance with repetitive legislative compliance<br>tasks. Staff are encouraged to continue with the development<br>of checklists and procedures for routine functions, including<br>evidencing independent review. In conjunction with, or as an<br>alternative to, the development of documented procedures<br>and checklists, development of workflow process diagrams<br>may assist in clearly identifying controls and processes to be<br>followed.  | DCS                    | 10%               | Up<br>cur<br>Pro |
|                | Procedure Changes<br>Process for amending or changing  |                              |                   |                | Establish a process for the development, review, amendment   |                        |                   | Pro              |
| 7.2.2          | procedures are not formalised<br>(administration procedures yet to<br>be finalised). This creates<br>opportunities for unilateral  |                              |                   | Medium         | and authorisation of procedures, checklists and other internal<br>control documentation, throughout the Shire to assist with<br>managing changes to procedures.  | DCS                    | 10%               |                  |
|                | Changes to Banking Details   |                              |                   |                |  |                        |                   |                  |

Review of BCDRP going to Council Dec 21. IT Recovery Plan being developed. Plans then to be tested.

See above comment

A prelimianry review of the CEO procedures has been completed. More work will be done in early 2022.

Road Map adopted November Council, to be completed April 2021.

Updates to happen to processes to incorporate a review to current checklists.

Procedures to be reviewed to include this.

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|----------------|--|------------------------------|-------------------|----------------|--|------------------------|-------------------|
| 7.2.3          | Current procedures to restrict<br>changes to bank details are<br>considered appropriate, however<br>do not appear to always be<br>consistently documented to<br>evidence all control validations fo<br>changes which have occurred.<br>We noted more formal<br>procedures relating to changes to<br>banking details for employees and                                  | r                            |                   |                | <ul> <li>Progress and complete the review and update procedures to ensure the following matters are appropriately considered and controls are adequate to:</li> <li>•√alidate the change request and its origin;</li> <li>•∆uthority exists for the change request; and</li> <li>•√alidate and control the changes once completed.</li> </ul> Procedures should require documentary support to evidence all controls having been applied when applying changes to banking details within the Shire's ERP.  | DCS                    | Pro               |
|                | End of Month Processes<br>Creditors invoices appears to be   |                              |                   |                | Supplier invoices should be processed in a timely fashion  |                        | Pro               |
| 7.2.4          | processed and entered only at the<br>time where a routine creditors<br>payment run is scheduled<br>resulting in month end creditor<br>balances being nil at the end of<br>each month selected for review.  | 9                            |                   | High           | and entered through the Shire's ERP system as soon as<br>practicable after receipt to provide a more accurate<br>representation of the Shire's liabilities at any given time.<br>Invoices should be followed up where not received for goods<br>or services obtained.  | DCS                    | foll<br>90%       |
|                | General Journal Entries  |                              |                   |                |  |                        |                   |
| 7.2.5          | There are limited documented<br>internal control procedures for<br>general journals. No general<br>journal audit trail is currently<br>produced to ensure no<br>unauthorised journals have been<br>posted.   |                              |                   | Medium         | Document internal controls to ensure journals requests<br>initiated are reviewed and approved/authorised prior to<br>posting by an appropriate officer, the current practice of<br>independent review is maintained, and evidence of review is<br>consistently applied. A monthly journal audit trail report<br>should be produced and independently reviewed prior to<br>preparation of the monthly statement of financial activity. IT<br>permissions should also be considered when developing<br>controls.   | DCS                    | Prc<br>10%        |
|                | Receipting and Banking   |                              |                   |                |  |                        |                   |
| 7.2.6          | Evidence of an independent<br>review of end of day receipting<br>reports selected for testing was<br>not always recorded.  |                              |                   | High           | Update procedures and controls to ensure an appropriate review process has been undertaken for all end of day receipting activities processed for banking.   | DCS                    | Prc<br>10%        |
|                | Petty Cash   |                              |                   |                |  |                        |                   |
| 7.2.7          | Our testing of petty cash noted a<br>breakdown within the systems and<br>controls described to us. The<br>March 2021 reconciliation did not<br>evidence review and authorisation<br>of an appropriate senior officer.  |                              |                   | Medium         | Undertake a review of systems and processes relating to<br>petty cash, to ensure adequate controls exist for the security<br>of cash held, as well as maintaining and processing of petty<br>cash transactions.  | DCS                    | Prc               |
|                | Credit Cards   |                              |                   |                |  |                        |                   |
| 7.2.8          | Credit card statement in<br>December 2020 selected for<br>review was not signed by the FAC<br>for the transactions incurred as<br>required by the documented polic<br>and procedure in place.<br>Our review noted a credit card<br>transaction in December 2020<br>which did not reconcile to the<br>support documentation included<br>with the credit card statement. |                              |                   | Medium         | Update systems and processes relating to credit cards, to<br>ensure adequate controls exist relating to ensure compliance<br>with adopted policy and approved procedure requirements.<br>This should also provide for controls for robust control and<br>review processes prior to payments being deducted through<br>automated bank payments.<br>Ensure processes exist to maintain adherence to and detect<br>any deviation from established documented procedures and<br>controls. Where possible, segregation of duties should exist<br>where those who have incurred charges on corporate credit<br>cards are not also responsible for reconciling and entering<br>credit card transactions. If circumstances prevent the full<br>segregation of duties, documented procedures should<br>describe the controls in place to reduce associated risks. | DCS                    | Pro               |
|                | Procurement  |                              |                   |                |  |                        |                   |
|                |  |                              |                   |                |  |                        |                   |

Procedures under review.

Process to be developed for outstanding Purchase Order ollowup.

Procedures under review.

Procedures under review.

Procedures under review.

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|----------------|--|------------------------------|-------------------|----------------|--|------------------------|----------------------|
| 7.2.9          | Through limited testing of<br>payments we noted the following:<br>•An instance where the<br>requirements of the purchasing<br>policy had not been adhered to;<br>•Authorisation of invoices to be<br>processed for payment made by<br>the same individual who<br>requested and authorised the<br>purchase order;<br>•Some invoices did not evidence<br>independent review and<br>authorisation when<br>entered/processed for payment<br>•Purchase orders being issued<br>with no assigned value. |                              |                   | Medium         | All procurement of goods or services should be undertaken in<br>accordance with legislative requirements and the purchasing<br>policy. A review of the purchasing policy may be required to<br>ensure the policy reflects the purchasing objectives of the<br>Shire.<br>Appropriate segregation of duties relating to the<br>requisitioning, approval and authorisation of procurement<br>related activities should exist. If circumstances prevent the<br>full segregation of duties then procedures should exist to<br>demonstrate alternate controls in place to reduce associated<br>risks.<br>Review and update procedures to ensure appropriate review<br>and authorisation has occurred and is evidenced prior to<br>creditors invoices being authorised for payment.<br>Values should be assigned to all purchase orders to ensure<br>purchasing authorisations and policy requirements have<br>been adhered to and controls have been developed to<br>prevent unauthorised changes being applied after purchase<br>orders have been approved. | DCS                    | A<br>to<br>P<br>90%  |
| 7.2.10         | Outstanding Purchase Orders<br>We did not observe any formal<br>procedures relating to the routine<br>monitoring of and clearance of<br>outstanding purchase orders.<br>Regular review of outstanding  |                              |                   | Medium         | Update procedures to include review of the status of<br>outstanding purchase orders as part of end of month<br>processes. Ensure any controls developed are routinely and<br>consistently applied.   | DCS                    |                      |
| 7.2.11         | ICT Security<br>We noted some levels of<br>permissions have been<br>established for IT network access<br>to software and data, however this<br>is largely undocumented. A<br>number of recommendations were  | 3                            |                   | High           | Progress the implementation of recommendations included<br>within the Shire's recent IT Strategic Plan and consider<br>undertaking a comprehensive IT general security review,<br>articulate current practices and implement findings of the<br>review.  | DGS                    | TI<br>C<br>as<br>60% |
| 7.2.12         | Art Shop Controls<br>Purchases for the Warta Shop are<br>managed by an officer who has<br>responsibility for operation of the<br>centre, negotiating purchases of<br>art with artists, recording the art,<br>setting of prices for the disposal of<br>the art, sale of art and issuing<br>cash payment when purchasing   |                              |                   | High           | A full review of procedures and controls is required to<br>determine practical procedures, documentation and controls<br>for the purchase and sale of art. Procedures should ensure<br>compliance with the regulatory requirements in relation to the<br>setting of fees and charges and ensure appropriate stock<br>reconciliation controls are in place.   | DCS                    | P<br>10%             |
| 7.2.13         | Grants Management<br>Limited procedures exist to<br>support processes and controls in<br>respect to:<br>• application of grants;<br>• acquittal of grants;<br>• compliance with grant<br>conditions; and<br>Segregation of Duties and  |                              |                   | High           | Systems relating to grants management should include<br>controls for the monitoring of grants with funding conditions<br>and acquittal processes. Incomplete consideration of these<br>factors may contribute to the Shire's ability to effectively<br>deliver grant programs.   | DCS                    | G<br>in<br>10%       |

All procurement of goods and services is undertaken according to legislation and the Shire's purchasing policy.

Duties are segregated and all processes require an independent review by a senior officer.

Procedures are under review.

The IT Strategic Plan was adopted by Council, and a new IT Contractor (Focus Networks) has been engaged by the shire to assist in completing the actions from the IT Strategic plan.

Procedures under review.

Grant register to be implemented. Review of procedures to nclude.

| Risk<br>Number | Risk Assessment Category   | Risk Issue and Failure Modes | Existing Controls | Risk<br>Rating | Mitigation and Management Strategy (Possible Future<br>Controls)   | Responsible<br>Officer | Complete<br>Y/N/% |                   |
|----------------|--|------------------------------|-------------------|----------------|--|------------------------|-------------------|-------------------|
| 7.1.14         | We noted a lack of independent<br>oversight for some key roles, with<br>some existing controls considered<br>inadequate, especially where<br>multiple process controls for high<br>risk transactions are performed by<br>a single individual or involve<br>closely related parties. Where a<br>single individual or closely related<br>parties are responsible for or<br>involved in multiple stages of<br>various processes, there is an<br>increased risk and opportunity for<br>error, misconduct etc to occur. |                              |                   | High           | Interventions should be available at various stages for a<br>number of operational functions, including routine<br>independent reviews of controls to ensure they are being<br>observed and maintained as required. Where resourcing<br>constraints exist (such as small local governments with<br>limited staff), other considerations should be applied such as<br>training and engaging officers within the organisation who<br>may not normally be involved in these processes, to assist<br>with checks and controls, or engaging independent parties to<br>provide sufficient levels of oversight. | DCS                    | 10%               | Pro               |
|                | Procurement Assessment   |                              |                   |                |  |                        |                   | Th                |
| 7.2.15         | Documented formal requirements<br>when undertaking assessments of<br>responses to requests for<br>quotations exist, however are not<br>always consistently recorded /<br>maintained with our samples<br>selected for testing. Procedures   |                              |                   | High           | To help ensure probity and fairness when assessing high<br>value procurement, at least three persons should assess the<br>procurement responses independently of each other.<br>Documented processes should require a higher level of<br>probity and due diligence, for higher value or higher risk<br>purchases.  | DCS / DGS              | I                 | The<br>hig<br>Pro |
|                | Rates  |                              |                   |                |  |                        |                   |                   |
| 7.2.16         | Evidence of routine reviews of<br>rate exempt properties as defined<br>by section 6.26(2)(g) of the Local<br>Government Act 1995 was not<br>available for our inspection.  |                              |                   | Medium         | Develop and maintain systems and processes whereby<br>routine reviews are undertaken of rate exempt properties<br>within the Shire, confirming these properties are used<br>exclusively for rate exempt purpose, in accordance with<br>policy 2.6 Rating Exemption.  | DCS                    | 10%               | Pro               |
|                | Fixed Assets   |                              |                   |                |  |                        |                   |                   |
| 7.2.17         | We noted two instances of asset<br>additions being incorrectly<br>recorded on the fixed assets<br>register due to incosistent GST<br>treatment of some line item<br>expenses for the asset   |                              |                   | High           | Ensure appropriate controls are in place to correctly identify<br>the initial carrying value of new assets. Review procedures<br>and controls for updates to the asset register, including<br>review and authorisation by an independent officer.  | DCS                    | 10%               | Pro               |
|                | Stock Controls   |                              |                   |                |  |                        |                   |                   |
| 7.2.18         | Controls in relation to<br>management of stock for the<br>Warta Shop are considered<br>inadequate. Documented<br>procedures for annual stocktakes<br>of artwork and other items of<br>value as well as reconciliations to  |                              |                   | High           | Review and update systems and procedures relating to stock<br>controls at Shire facilities, including permission/authorisation<br>requirements for stock pricing changes and stock write offs.<br>Periodic stocktakes should minimally include reconciliation of<br>stock movements against sales and independent review of<br>data etc.   | DCS                    | 10%               | Pro               |
|                | Employee Appointment Procedu   | ures                         |                   |                | Develop and implement procedures to answer all new staff   |                        |                   | Dre               |
| 7.3.1          | Staff inductions are inconsistently<br>applied throughout the Shire, and<br>induction processes do not<br>consistently communicate to staff<br>required expectations and<br>requirements when performing<br>local government functions. It is<br>noted that draft procedures for this<br>are currently being developed.  |                              |                   | High           | Develop and implement procedures to ensure all new staff<br>are appropriately inducted and aware of the parameters of<br>their employment responsibilities and obligations including:<br>•OH&S<br>•Duties and responsibilities;<br>•Security;<br>•Code of Conduct;<br>•HR Policies and Procedures;<br>•Eegislative Compliance;<br>•Risk Management; and<br>•Other relevant and required topics.  | DCS                    | 10%               | Pro               |
|                | Employee Termination Procedu   | res                          |                   |                |  |                        |                   |                   |

Procedures under review.

The draft procurement procedures outline the requirements for high value procurement.

Procedures under review.

Procedures under review.

Procedures under review.

Procedures under review.

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|----------------|--|------------------------------|-------------------|----------------|--|------------------------|-------------------|----------------------|
| 7.3.2          | No formal process or procedure is<br>currently in place to ensure the<br>appropriate process on<br>termination of employees ensuring<br>security and IT permissions are  |                              |                   | High           | Establish policies, procedures or checklists to manage and<br>document the termination of employees, ensuring access to<br>IT systems, etc. is appropriately restricted and all allocated<br>Shire assets are recovered.   | DCS                    | 10%               | Pro                  |
|                | Employee Identity and Credenti   | als                          |                   |                |  |                        |                   |                      |
| 7.3.3          | Practices and procedures for<br>verifying employee identity, right to<br>work in Australia, background<br>checks, verification of employmen<br>history and qualifications are<br>considered inadequate. We noted<br>a breakdown in controls where an   | nt<br>I                      |                   | Medium         | Develop, implement and maintain appropriate policies and<br>procedures to reduce the risk of unqualified or unsuitable<br>staff being employed by the Shire, in line with the Western<br>Australian Auditor General's Report in June 2019 relating to<br>Verifying Employee Identity and Credentials.  | DCS                    | 10%               | Pr                   |
| 7.3.4          | Staff Training<br>Planned and required staff training<br>needs for employees are currently<br>recorded for some operational<br>areas/departments. A central<br>training matrix is not currently<br>maintained.   |                              |                   | Medium         | Refine the current practice of documenting training<br>requirements to add further value by developing and<br>maintaining a central training matrix to identify staff training<br>needs relevant to their role, ensuring it is co-ordinated across<br>the organisation and monitors currency of required licences<br>and qualifications.   | DCS                    | 10%               | W<br>to<br>Pr        |
| 7.3.5          | Payroll<br>Evidence of review and<br>authorisation of fortnightly payroll<br>reports was not recorded by both<br>review/authorising officers.<br>The officer responsible for<br>preparing and processing<br>employee pays is also tasked with<br>authorising the payments through<br>the bank. Risks may exist where<br>reduced impartiality and lack of<br>segregation of duties are<br>associated with payroll | 1                            |                   | Medium         | Implement documented procedures to ensure adequate<br>controls are consistently followed for review and authorisation<br>of fortnightly payroll reports, with appropriate evidence of<br>these reviews consistently recorded.<br>Where possible, segregation of duties should exist where<br>those responsible for processing payroll transactions are not<br>responsible for approving payments through the bank. If<br>circumstances prevent the full segregation of duties,<br>documented procedures should describe the controls in<br>place to reduce associated risks. | DCS                    | 10%               | Pro<br>Du<br>rev     |
| 7.3.6          | Payroll Audit Trails<br>A review of changes to the payroll<br>is made each pay run and is<br>conducted prior to the payroll<br>being updated into the bank.<br>However, our testing noted a<br>payroll audit trail had no preparer   |                              |                   | High           | Procedures to minimise risk of erroneous or unauthorised<br>changes to employee details should be consistently<br>evidenced and maintained. Regular reviews of software audit<br>trails is one form of control and this practice is strongly<br>encouraged to continue with the addition of consistent<br>evidence of the review.  | DCS                    | 80%               | Inc<br>pe<br>en      |
| 7.3.7          | Payroll Exception Reporting<br>The officers responsible for<br>processing and reviewing payroll<br>are tasked with review and<br>capture of employee entitlements<br>allowances, deductions, etc. with<br>no verification to contractual<br>entitlements. Staff have advised<br>more formal documentation /<br>checklists are intended to be<br>created to assist with payroll                                   |                              |                   | Medium         | Review of procedures and controls to define procedures,<br>documentation and controls for the accurate processing of<br>payroll each fortnight. Details for each employee should be<br>reviewed against individual employment contracts to capture<br>allowances, deductions, entitlements etc, into a master list,<br>with appropriate review and authorisation for changes.<br>Payroll exception reporting and review of audit trails should<br>be undertaken to capture anomalies or unauthorised<br>changes.   | DCS                    | 10%               | Pro                  |
| 7.4.1          | Contractor Insurance<br>Contractors' insurances are not<br>always assessed prior to award of<br>contracts. Reliance is placed on<br>contract managers to ensure<br>copies of insurances are provided<br>and are current.<br>Register of Hazardous Materials  | 1                            |                   | High           | To help ensure contractors have the relevant licences and<br>have adequate insurance cover for the works they undertake<br>for the Shire, procedures should be finalised, and records<br>maintained to ensure copies of contractors' current<br>insurances and licences are held on file.  | DCS                    | 5%                | Sc<br>co<br>ne<br>Pr |

Procedures under review.

Procedures under review.

WHS Monitor software will assist with documentation in relation to staff training.

Procedures under review.

Procedures under review.

Duties are segregated and all processes require an independent review by a senior officer.

Independent review of all changes to employee database is performed by a senior officer. The process to be developed to ensure supporting documentation is maintained.

Procedures under review.

Software (WHS monitor) in place to assist with managing contractor Workplace Health and Safety requirements as per new legislation.

| 8.2.1 | A register of hazardous materials was not available for our  |    |        | Controls)   | Officer   | Y/N/% |                           |
|-------|--|----|--------|---|-----------|-------|---------------------------|
|       | inspection, to reflect properties<br>under the control of the Shire  |    | High   | Develop and maintain a register to record details of hazardous materials, such as asbestos, for properties under the control of the Shire.  | DIS / DCS | 50%   | 90%<br>haz<br>LGI<br>of N |
| 8.2.2 | Investment Register<br>An investment register was not<br>available for our inspection<br>detailing the nature and location of<br>all investments and all related<br>transactions.  |    | High   | Recording the nature and location of all investments and<br>related transactions is required by Regulation 19 (2) of the<br>Local Government (Financial Management) Regulations<br>1996. Tracing of funds on maturity of investments is essential<br>and record of where funds are transferred and who<br>authorised the transfer should be maintained within the<br>register. Maintaining printed copies of the investment<br>register, reviewed and authorised by a senior manager,<br>independent of the control of the investments, prevents<br>subsequent amendment to the register. | DCS       | 95%   | Inve                      |
|       | Contracts Register   |    | <br>   |   |           |       | -                         |
| 8.2.3 | A contracts register was not<br>available for our inspection<br>detailing the status of contracts<br>held by the Shire.  |    | Medium | Maintain a register to record details of all contracts (current<br>and expired) and their status in a form to assist with ensuring<br>contracts are monitored and actioned as required and<br>reflecting the value of the contracts.  | DGS       |       | To I                      |
|       | Tender Register  |    |        |   |           |       |                           |
| 8.2.4 | Inspection of the register noted<br>the inclusion of a procurement<br>activity which was not a tender,<br>but rather a request for quotation.<br>Procurement processes which are   |    | Medium | Ensure the tender register contains only the information required to comply with Regulation 16 & 17 of the Local Government (Functions and General) Regulations 1996.   | DGS       |       | Ong                       |
|       | Financial Interest Register  |    |        |   |           |       |                           |
| 8.2.5 | Our testing noted several returns<br>prior to 2018/19 are not recorded<br>within the register for some   |    | Medium | Maintain systems and procedures to obtain all returns required under the Local Government Act 1995.   | DGS       |       | This<br>cale              |
|       | Community Complaints   |    |        |   |           |       |                           |
| 8.4.1 | A procedure to guide the process<br>for managing community<br>complaints was prepared in 2017.<br>An update to this procedure is<br>being prepared, including the  |    | High   | Finalise and implement procedure to ensure community complaints are adequately reported, actioned, and addressed.   | DGS       |       | A dı<br>This              |
|       | Internal Audit   |    |        |   |           |       |                           |
| 8.5.1 | Currently, no internal auditors<br>have been appointed, and limited<br>internal audit functions have been<br>undertaken.   |    | Medium | We suggest as the level of documented procedures<br>increases, an expanded internal audit function to confirm<br>adherence to documented policies and procedures may be<br>required as recommended by the OAG in their report to<br>Parliament on the Audit Results Report – Annual 2017-18<br>Financial Audits of Local Government Entities.   | DGS       |       | The<br>poli               |
|       | Significant Adverse Trend Report   | rt |        | -   |           |       |                           |
| 8.5.2 | A significant adverse trend was<br>identified during the 2018-19 &<br>2019-20 audits. We noted the<br>following legislative requirements<br>were not met:<br>•A report was not prepared stating<br>actions intended to be taken in<br>relation to the adverse trends |    | High   | Prepare a report stating actions intended to be taken relating<br>to the significant adverse trend identified during the 2018-19<br>& 2019-20 audits and present for consideration by the Audit<br>Committee and Council, forward to the Minister after<br>adoption, and publish the report on the Shire's website.<br>Ensure any future reports are prepared and published as<br>required by section 7.12A of the Local Government Act 1995.   | CEO       |       |                           |
|       | Audit Regulation 17 Review   |    |        | Ensure the post review is undertaken within the time of the   |           |       | lare c                    |
| 8.6.1 | A review was last undertaken in<br>August 2017, which is outside of<br>the time period as required by.<br>regulation 17 of <i>Local</i><br><i>Government (Audit) Regulations</i><br>1996.  |    | Medium | Ensure the next review is undertaken within the time period<br>as required by legislation.<br>Ensure future review identifies operational and financial risk,<br>control weaknesses and compliance weaknesses.  | DCS / DGS | 50%   | Imp<br>mai<br>legi<br>Pro |

90% of Shire owned buildings have been inspected for nazardous materials and data collected for input into register. .GIS generic risk register being reviewed and adapted for Shire of Ngaanyatjarraku purposes.

nvestment register to be established.

To be developed

Ongoing

his is being actioned as part of the annual compliance alendar

draft community complaint procedure has been completed. his will be reviewed as part of the new CEO Procedures.

The Shires Internal Audit function will be reviewed once the policies and procedures have been completed.

nprovements are being made and control weakenesses nanaged. A continual process to ensure compliance with the egislation.

Procedures and documentation established and updated.

| Risk<br>Number | Risk Assessment Category  | Risk Issue and Failure Modes   | Existing Controls  | Risk<br>Rating | Mitigation and Management Strategy (Possible Future<br>Controls)  | Responsible<br>Officer | Complete<br>Y/N/% |                                     |
|----------------|---|--|--|----------------|---|------------------------|-------------------|-------------------------------------|
| 8.6.2          | Evidence of a previous review<br>was not available for our review.<br>Staff representations indicated the<br>previous review was performed in<br>house by staff responsible for |  |  | Medium         | Ensure the next review is undertaken within the time period,<br>by parties with required levels of independence and is<br>considered by Council as required Local Government<br>(Financial Management) Regulations 1996.                  | DCS/DGS                |                   | Ens                                 |
| 8              | Financial   | Expenditure exceeds policy<br>threshold or tender threshold set<br>within regulations.   | Purchasing policy  |                | Ensure policy sets out guidance in relation to management of price variations, review procurement processes to allow for early detection of variations (through creditors processing etc).  | DGS                    |                   | A d<br>con<br>Pro                   |
| 9              | Financial   | Collusion and/or perceived or<br>actual conflict of interest during<br>procurement assessment<br>process.  | Purchasing policy  |                | Review or develop procurement procedures to set out requirements for assessment panels to meet objectives of the purchasing policy.   | CEO                    |                   |                                     |
| 10             | Performance   | Inability to deliver projects due to<br>poor contract management,<br>expenditure over budget etc   | ocesses and reportir   | High           | Maintain contract register, implement regular procurement training to set out required monitoring processes etc.  | DGS                    |                   | To                                  |
| 11             | Performance   | Infrastructure failure   | nent Plans, Mainten  | High<br>;      | Progress with implementation of asset management plans<br>and improvement plans (including scheduling for required<br>maintenance activities etc)   | DIS                    | 20%               | See                                 |
| 12             | Service Delivery/Business<br>Interruption   | Inability to attract and retain staff to maintain operational services   | Professional<br>Development<br>Incentives,<br>Subsidised<br>Accommodation  | High           | Consider external services available for key roles to assist<br>during periods of position vacancy.<br>Succession planning and development strategies to multi skill<br>workforce.  | DGS                    |                   | Ong                                 |
| 13             | Service Delivery/Business<br>Interruption   | Insufficient consideration of ICT risks and subsequent management  | ICT Strategic Plan   | High           | Develop ICT Strategic Plan to highlight and address ICT risks.  | DGS                    |                   | Also                                |
| 14             | Service Delivery/Business<br>Interruption   | Inadequate management of facilities and events   | Booking<br>system/process,<br>facility operation<br>manuals,<br>maintenance<br>schedules and<br>reports_gualified  | High           | Develop and / or review facility operation manuals to consider<br>and address risk management for relevant facilities.  | DIS/DGS                | 70%               | Buil<br>dev<br>This<br>of N<br>defe |
| 15             | Legislative / Regulatory / Policy /<br>Occupational Safety and Health   | Deliberate actions by an employee<br>to bypass procedures,<br>authorisations or controls for<br>personal benefit or the unfair<br>benefit of others. | e Segregation of<br>duties, delegated<br>authority, ICT<br>permissions,<br>procurement<br>processes, cash<br>management<br>controls, financial<br>management | High           | Review induction procedures to ensure adequate training and<br>informaiton is available on misconduct and reporting<br>processes.<br>Establish documented procedures for high risk functions (e.g.<br>cash management and stock control). |                        | 10%               | Pro                                 |

| Action taken  |
|---|
| nsure compliance with the legislation.  |
| draft procurement and purchasing procedure has been<br>ompleted. This will be reviewed as part of the new CEO<br>rocedures.   |
|   |
|   |
|   |
| o be developed  |
|   |
| ee Item 7.1.4 above   |
|   |
| ingoing   |
| lso see 7.1.1 above   |
|   |
|   |
| uilding Risk Management and Maintenance Plan has been<br>eveloped and approved by Council at the September OCM.<br>his covers all buildings under the care and control of the Shire<br>f Ngaanyatjarraku. It also contains a plan to remediate all<br>efects in the building that will be updated annually. |
| rocedures under review.   |
|   |

|   | isk<br>nber | Risk Assessment Category                  | Risk Issue and Failure Modes   | Existing Controls  | Risk<br>Rating | Mitigation and Management Strategy (Possible Future<br>Controls)   | Responsible<br>Officer | Complete<br>Y/N/% |
|---|-------------|---|--|--|----------------|--|------------------------|-------------------|
| 1 | 16          | Reputational Damage                       | Inaccurate representation of<br>information or reports   | Staff training,<br>internal review and<br>authorisation<br>processes.                                | High           | Ensure independent review and authorisation processes exist<br>throughout the organisation. Implement risk based staff<br>training matrix to ensure high risk positions are resourced<br>with appropriate training.  | DCS                    | Pro               |
|   |             |   |  |  |                |  |                        |                   |
| 1 | 17          | Reputational Damage                       | Operational activities conducted<br>erroneously, or not performed<br>within required time frames.  | Procedures and<br>checklists, review<br>and authorisation<br>processes,<br>segregation of<br>duties. | High           | Establish compliance calendars, review and / or develop documented procedures for core compliance functions.   | DGS                    | Co                |
|   |             |   |  |  |                |  |                        |                   |
| 1 | 18          | Financial                                 | Theft, fraud, malicious damage or<br>unauthorised access to data or<br>assets.   | Procedures and<br>checklists, review<br>and authorisation<br>processes,<br>segregation of            | High           | Maintain appropriate hierarchy of controls to IT systems.<br>Review insurances to ensure appropriate level of insurance<br>is in place to cover events of malevolence.   | DGS/DCS                | То                |
|   |             |   |  |  |                |  |                        |                   |
| 1 | 19          | Service Delivery/Business<br>Interruption | Failure to prepare and plan for<br>potential events which could<br>interupt safe service delivery to<br>the community during a pandemic. | Procedures and<br>checklists, review<br>and authorisation<br>processes,<br>segregation of<br>duties. | High           | Follow and comply with government advice, including from<br>the Department of Health, to provide accurate updates on the<br>current COVID-19 (Coronavirus) health issue based on the<br>latest information from the Federal and State health<br>departments. | CEO                    |                   |

Procedures under review.

Compliance calendar adopted and maintained.

To be reviewed with new IT contractors