

MINUTES

ORDINARY COMMITTEE MEETING

NOTICE IS HEREBY GIVEN that an Ordinary Meeting of the AUDIT COMMITTEEwill be held, in Council Chambers, Newman, 8:00am, Friday, 28 August, 2020.

Jeremy Edwards
CHIEF EXECUTIVE OFFICER



DISCLAIMER

No responsibility whatsoever is implied or accepted by the Shire of East Pilbara for any act, omission or statement or intimation occurring during Council or Committee Meetings. The Shire of East Pilbara disclaims any liability for any loss whatsoever and howsoever caused arising out of reliance by any person or legal entity on any such act, omission or statement or intimation occurring during Council or Committee Meetings.

Any person or legal entity who acts or fails to act in reliance upon any statement, act or omission made in a Council or Committee Meeting does so at that person's or legal entity's own risk.

In particular and without derogating any planning application or application of a licence, any statement or intimation of approval made by any member or Officer of the Shire of East Pilbara during the course of any meeting is not intended to be and is not taken as notice of approval from the Shire of East Pilbara.

The Shire of East Pilbara warns that anyone who has any application lodged with the Shire of East Pilbara must obtain and should only rely on

WRITTEN CONFIRMATION

of the outcome of the application and any conditions attaching to the decision made by the Shire of East Pilbara in respect of the application.

| Signed: | |
|-------------------------|--|
| Jeremy Edwards | |
| Chief Executive Officer | |

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1 DECLARATION OF OPENING/ANNOUNCEMENT OF VISITORS

The Chairperson declared the meeting open at 8:02am.

2 RECORD OF ATTENDANCES/APOLOGIES/LEAVE OF ABSENCE

2.1 ATTENDANCES

Councillors

Geraldine Parsons Councillor
Anthony Middleton Councillor
Karen Lockyer Councillor

Officers

Mr Jeremy Edwards Chief Executive Officer

Mrs Lisa Davis Acting Executive Manager Corporate

Services

Ms Sian Appleton Manager Governance
Mrs Kylie Bergmann Coordinator Governance

Ms Kristen Milne Governance Administration Officer

Public Gallery

2.2 APOLOGIES

Councillor Apologies

Officer Apologies

2.3 LEAVE OF ABSENCE

3 CONFIRMATION OF MINUTES OF PREVIOUS COUNCIL MEETING

3.1 22 MAY 2020

OFFICER & COMMITTEE RECOMMENDATION:

MOVED: Cr Geraldine Parsons, SECONDED: Cr Karen Lockyer

THAT the Minutes of the Audit Committee held at Newman on 22 May 2020, be confirmed as a true and correct record of proceedings.

CARRIED UNANIMOUSLY

To be actioned by Mrs Kylie Bergmann, Coordinator Governance

4 OFFICER'S REPORTS

4.1 GENERAL

4.1.1 FINANCIAL MANAGEMENT REVIEW 2019 - IMPROVEMENT PLAN STATUS JULY 2020

File No: LEG-21-1

Attachments: Appendix 1 – FMR Improvement Plan Update

Responsible Officer: Mr Jeremy Edwards

Chief Executive Officer

Author: Ms Sian Appleton

Manager Governance

Location/Address: N/A
Name of Applicant: N/A

Author Disclosure of Interest: Nil

REPORT PURPOSE

To report on the status of the Financial Management Review Improvement Plan.

BACKGROUND

Pursuant to Regulation 5(2)(c) of the Local Government (Financial Management) Regulation 1996 (as amended) the CEO is to undertake a review of the Financial Management.

In June 2019 Moore Stephens undertook this review for the CEO and the report was presented to the Audit Committee on the 23rd August and subsequently at the Ordinary Council Meeting dated 22nd November 2019.

From this report a Financial Management Review (FMR) Improvement Plan was created and entered into Council's CAMMS Strategic Planning software for monitoring.

COMMENTS/OPTIONS/DISCUSSIONS

Attached is a copy of the CAMMS reporting document.

The previous financial year saw 12 of the 15 actions closed out. Currently 3 actions are outstanding or ongoing and are reported on. Of these 2 are on target, and one is ongoing.

STATUTORY IMPLICATIONS/REQUIREMENTS

Regulation 5(2)(c) of the Local Government (Financial Management) Regulation 1996 (as amended).

POLICY IMPLICATIONS

Nil

STRATEGIC COMMUNITY PLAN

5: Governance

Demonstrated accountability and corporate governance.

- G1 Provide efficient, accountable and ethical governance.
- G1.1 Enhance governance capability to deliver sustainable outcomes, roads and buildings

RISK MANAGEMENT CONSIDERATIONS

Compliance - Medium

FINANCIAL IMPLICATIONS

Resource requirements are in accordance with existing budgetary allocation.

VOTING REQUIREMENTS

Simple.

OFFICER & COMMITTEE RECOMMENDATION

MOVED: Cr Geraldine Parsons, SECONDED: Cr Karen Lockyer

That the Audit Committee review and receive the CAMMS Financial Management Review Improvement Plan status report as presented at *Appendix* 1.

CARRIED UNANIMOUSLY

To be actioned by Ms Sian Appleton, Manager Governance.

Appendix 1 FMR Improvement Plan Update



Action and Task Progress Report

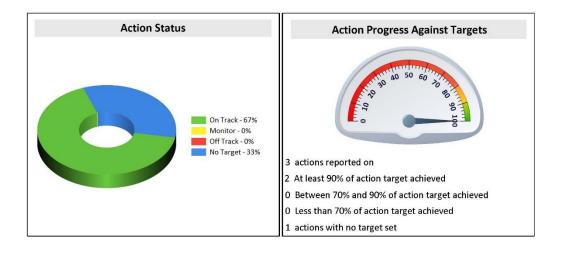
Shire of East Pilbara



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OVERVIEW



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Shire of East Pilbara Action and Task Progress Report

ACTION PLANS









At least 90% of action target achieved Between 70% and 90% of action target achieved Less than 70% of action target achieved No target set

Corporate Services

Corporate Services

20.1 Financial Services

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|--|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.125 FMR - Money held in investments must comply with the Shire's Investment Policy stating that the maximum held with one institution does not exceed 35%. INVESTMENTS LOW RISK | Lisa Davis - Manager Corporate Services | In Progress | 13-Oct-2019 | 30-Sep-2020 | 80.00% | 75.00% | GREEN |

A CTION PROGRESS COMMENTS:

13/10/2019 - 30% of money transferred from BankWest to Bendigo Bank. A further 35% needs to be moved to another institution.

08/11/2019 - Commonwealth Bank forms received to open new investment account.

31/01/2020 - Forms etc submitted. Just waiting for account to transfer.

07/05/2020 - Last transfer to be processed

31/07/2020 - No further update

Last Updated: 13-Aug-2020

Information Systems

23.1 Information Communication and Technology

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^{*} Dates have been revised from the Original dates

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.2517D and FMR - Review and update the Disaster Recovery Plan, identifying and documenting key ICT risks along with the treatments to reduce the risk to an acceptable level. HIGH RISK | EMCS - Vacant - Executive Manager - Corporate Services | In Progress | 17-Feb-2019 | 31-Dec-2021 | 80.00% | 0.00% | GREEN |

A CTION PROGRESS COMMENTS:

31/07/2019 - Resources allocated to project. Scope currently being created. Working with our IT consultants regarding the IT portion of the plan.

08/11/2019 - Coordinator IT since resigned. EMCS working with IT consultant to finalise this project.

30/04/2020 - Draft documented completed. In final review stage.

31/07/2020 - Final communications cut overs completed. This will enable documentation to be finalised.

Last Updated: 13-Aug-2020

Executive Services

Procurement and Contracts

9.1 Procurement

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET |
|--|---|---------|-------------|-------------|---------------|--------|-----------|
| 5.1.1.127 FMR - Ensure all purchases with a consideration worth more than \$150,000 incur a public tender process. TENDER PROCESS HIGH RISK | Dawn Ronchi - Contract Procurement Officer | Ongoing | 13-Oct-2019 | 31-Dec-2020 | ** | - | 600 |

A CTION PROGRESS COMMENTS:

7/1/20 - Internal audits of POs are taking place to ensure this is taking place. Staff are also made aware of both the Shire's Procurement Policy and the Act/Regs when undergoing their WALGA Procurement Training. Have highlighted some ongoing service / laboring works will need to be awarded via a Tender process.

11/2/20 - Internal audits still taking place.

6/5/20 - As above - note that the Tender threshold amount has been increased to \$250k. The target of 100% for May 20 has been delayed due to Tenders still being arranged for 19/20 (normally has ceased by this time of the finyear).

5/8/20 - Internal audits still taking place - ongoing for each financial year.

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| Shire of East Pilbara | Action and Task Progress Report |
|---------------------------|---------------------------------|
| | |
| Last Updated: 13-Aug-2020 | |

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4.1.2 REGULATION 17 REVIEW - IMPROVEMENT PLAN UPDATE AS AT 31 JULY 2020

File No: FIN-21-1

Attachments: Appendix 1 – Reg 17 Review – Improvement

Plan Update

Responsible Officer: Mr Jeremy Edwards

Chief Executive Officer

Author: Ms Sian Appleton

Manager Governance

Location/Address: N/A
Name of Applicant: N/A
Author Disclosure of Interest: Nil

REPORT PURPOSE

To report on the status of the Regulation 17 Review Improvement Plan.

BACKGROUND

Pursuant to the Local Government (Audit) Regulations 1996 (the regulations), Regulation 17 requires that the Chief Executive Officer undertakes a review of the appropriateness and effectiveness of its systems and procedures in regard to Risk Management, Legislative Compliance and Internal Control Frameworks.

Previously reviews of Council's audit systems needed to be carried out every two years. The regulations were revised and gazetted on Tuesday, 26 June 2018 to conduct the review no less than every three years. This means that the Shire of East Pilbara will not be required to complete another review until 2021.

In February 2019 Moore Stephens undertook this review for the CEO and the report was presented to the Audit Committee on the 22nd February 2019 and subsequently at the Ordinary Council Meeting dated 22nd February 2019.

From this report a Regulation 17 Improvement Plan was created and entered into Council's CAMMS Strategic Planning software for monitoring and presentation to the Audit Committee quarterly.

COMMENTS/OPTIONS/DISCUSSIONS

Attached is a copy of the CAMMS reporting document.

Currently there are 42 actions reported on. Of these 100% of the actions are on target, 0% are being monitored and 0% are off track and are being reviewed.

STATUTORY IMPLICATIONS/REQUIREMENTS

Part 7 - Audit (Division 4 - General) 7.13. Regulations as to audits (pg 274).

POLICY IMPLICATIONS

Nil

STRATEGIC COMMUNITY PLAN

5: Governance

Demonstrated accountability and corporate governance.

- G1 Provide efficient, accountable and ethical governance.
- G1.1 Enhance governance capability to deliver sustainable outcomes, roads and buildings

RISK MANAGEMENT CONSIDERATIONS

Compliance - Medium

FINANCIAL IMPLICATIONS

Resource requirements are in accordance with existing budgetary allocation.

VOTING REQUIREMENTS

Simple.

OFFICER & COMMITTEE RECOMMENDATION

MOVED: Cr Karen Lockyer, SECONDED: Cr Geraldine Parsons

That the Audit Committee review and receive the CAMMS Regulation 17 Improvement Plan status report as presented at *Appendix 1*.

CARRIED UNANIMOUSLY

To be actioned by Ms Sian Appleton, Manager Governance.

Appendix 1 Reg 17 Review – Improvement Plan Update



Action and Task Progress Report

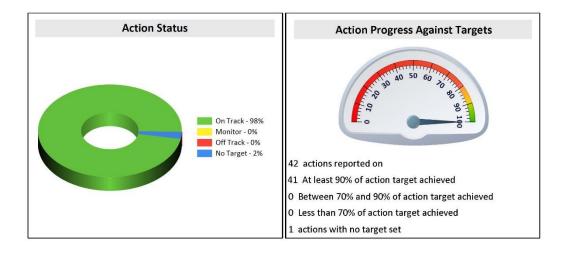
Shire of East Pilbara



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OVERVIEW



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ACTION PLANS









At least 90% of action target achieved Between 70% and 90% of action target achieved Less than 70% of action target achieved No target set

Commercial Services

Airport Services

6.2 Airport Services

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|---|----------------|--------------|-------------|---------------|--------|----------------|
| 5.1.1.3717D - Risk management practices at the airport should be undertaken in accordance the Shires Risk Management Policy and procedures. These procedures provide the framework for the rating of identified risk and reporting of risks when identified along with the routine reporting on the status of treated risks. HIGH RISK | Ben Lewis - Executive Manager- Commercial Services | In Progress | 17-Feb- 2019 | 31-Dec-2021 | 75.00% | 0.00% | GREEN |

A CTION PROGRESS COMMENTS:

8/3/19 - Implementation of shire wide incident and hazard reporting has been rolled out at the airport for all staff and subcontractors. HSE contractor inductions have been undertaken with the majority of the major contractors. This process is utilising the shire wide reporting process.

8/8/19 - The airport is now aligned and using the same processes as the rest of the organisation with the exception of the airport air side operations which are required to be operated under CASA legislation and requirements. There will be some ongoing adjustment and monitoring to be undertaken

5/5/20 - Reporting of hazards and risks for airside operations are to be considered in the Amis database system designed for aerodromes

12/08/20 - A risk audit by an external auditor was undertaken and completed with actions and recommendations which are in the process of being addressed.

Last Updated: 12-Aug-2020

Corporate Services

Corporate Services

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^{*} Dates have been revised from the Original dates

Shire of East Pilbara Action and Task Progress Report

20.1 Financial Services

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET |
|--|--|---------------|-------------|-------------|---------------|--------|-----------|
| 5.1.1.2217D - Rescind the Policy or alternatively review and amend the policies requiring Financial Statements to be prepared in accordance with Statutory requirements. MEDIUM RISK | Lisa Davis - Manager Corporate Services | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 50.00% | GREEN |

ACTION PROGRESS COMMENTS:

31/07/2019 - Policy updated and presented to Council at the August OCM.

Last Updated: 14-Aug-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|--|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.3317D - Given the high value of fees and charges in relation to the airport operations routine documented verification of the accuracy of fees and charges raised should be undertaken. MEDIUM RISK | Lisa Davis - Manager Corporate Services | In Progress | 17-Feb-2019 | 31-Dec-2021 | 51.00% | 0.00% | GREEN |

A CTION PROGRESS COMMENTS:

31/07/2019 - Processes being reviewed to determine how fee accuracy can be verified.

08/11/2019 - No further update.

31/01/2020 - No further update.

06/05/2020 - No further update.

Last Updated: 07-May-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE | TARGET | ON TARGET |
|--------|--------------------|--------|------------|----------|----------|--------|-----------|
| | | | | | % | | % |

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Shire of East Pilbara Action and Task Progress Report

| 5.1.1.35 17D - Creation and maintenance of standard checklists may assist in evidencing key points of control and serve as a reminder. Checklists are of assistance in ensuring compliance with repetitive legislative compliance tasks. HIGH RISK | BOOKS COLORS CONTROL | In Progress | 17-Feb- 2019 | 31-Dec-2021 | 50.00% | 0.00% | GREEN |
|---|----------------------|----------------|--------------|-------------|--------|-------|-------|
|---|----------------------|----------------|--------------|-------------|--------|-------|-------|

ACTION PROGRESS COMMENTS:

31/07/2019 - Detailed assessment being first undertaken to determine key areas where checklists are needed.

08/11/2019 - Checklist currently being created.

31/01/2020 - No further update.

07/05/2020 - Work continuing

Last Updated: 07-May-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET |
|--|--|---------------|-------------|-------------|---------------|---------|-----------|
| 5.1.1.3917D - In line with departmental guidelines, all officers issued with credit cards should sign a credit card agreement prior to the issuing of the credit card. Credit cards should physically be maintained by the person in whose name they are issued and credit card details should not be shared with other staff. HIGH RISK | Lisa Davis - Manager Corporate Services | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

A CTION PROGRESS COMMENTS:

31/07/2019 - Credit Card Agreements are now implemented and signed. Whole process still being improved.

08/11/2019 - Procedure and Checklist underway.

31/01/2020 - No further update.

Last Updated: 07-May-2020

| ACTION | RESPONSIBLE PERSON | STATUS START DATE | END DATE | COMPLETE | TARGET | ON TARGET |
|--------|--------------------|-------------------|----------|----------|--------|-----------|
| | | | | % | | % |

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Shire of East Pilbara Action and Task Progress Report

| 5.1.1.4117D - The list of payments made by the CEO under delegated authority should be presented to Council with only the minimum information required by legislation. HIGH RISK | Lisa Davis - Manager Corporate Services | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 0.00% | GREEN |
|---|--|---------------|-------------|-------------|---------|-------|-------|
|---|--|---------------|-------------|-------------|---------|-------|-------|

A CTI ON PROGRESS COMMENTS:

New process for presentation of creditors to Council complete to ensure compliance with legislative requirements.

Last Updated: 22-May-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|--|---------------|--------------|-------------|---------------|--------|----------------|
| 5.1.1.4217D - Prepare the Monthly Statements in accordance with legislative requirements. HIGH RISK | Lisa Davis - Manager Corporate Services | Complet ed | 17-Feb- 2019 | 31-Dec-2021 | 100.00% | 0.00% | GREEN |

A CTI ON PROGRESS COMMENTS:

New template introduced for the reporting on the monthly statements to meet legislative compliance.

Last Updated: 22-May-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|--|---------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.4917D - Outstanding items identified within the Financial Management Review be addressed. HIGH RISK | Lisa Davis - Manager Corporate Services | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 0.00% | GREEN |

A CTI ON PROGRESS COMMENTS:

31/07/2019 - Being dealt with through the update Financial Management Review

Last Updated: 14-Aug-2019

Human Resources

10.1 Human Resource Management

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Shire of East Pilbara Action and Task Progress Report

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET |
|--|---|---------------|-------------|-------------|---------------|--------|-----------|
| 5.1.1.3617D - In conjunction with, or as an alternative to, the development of documented procedures and checklists, update and development of workflow process diagrams may assist in clearly identifying controls and processes to be followed. MEDIUM RISK | Robin Austen - Manager Human Resources | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 0.00% | GREEN |

A CTION PROGRESS COMMENTS:

Task assigned to both HROs to work on documenting procedures and developing relevant workflow diagrams.

Currently Work Instructions exist for the following procedures;

- Visio Create Organisational Chart
- Performance appraisals
- Letters of Offer
- Inductions
- Exit Interviews
- EEO Plan and Survey
- New Starters Chcklist
- Annual Leave

These all need review and workflows created. 05/05/2020 - completed

Last Updated: 05-May-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|---|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.3.3 17D - Continuing with the development of a staff training matrix to identify staff training needs relevant to their role is important to ensuring it is co-ordinated across the organisation. | Robin Austen - Manager Human Resources | In Progress | 17-Feb-2019 | 31-Dec-2021 | 80.00% | 30.00% | GREEN |

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31/07/2019 - Currently adding/populating information on all positions for training/certification needs and concurrently linking these to the occupants of the position. This is a VERY slow process.

To date HR has completed the following;

- developed staff register to audit and update training/certification needs
- all new employees have their training/certification needs completed based on their position
- Existing employees on receipt of their Performance Appraisals the process is completed
- existing employees are being worked through however, this will take some time.

Currently the TNA is 80% completed with a summary of data and its upload to PES outstanding. This is a time consuming process that is scheduled to be completed 28/02/2020

15/07/2020 - the update and upload of the TNA is tied to the performance appraisal process. HRO1 will need to do this on an individual employee basis.

04/08/2020 - HRO1 tasked with updating TNA with employee required inductions notifications and receipts to all existing and new employees - aim 100% by end September 2020 (including updates in Synergy)

Last Updated: 04-Aug-2020

10.2 Occupational Health and Safety

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.5317D - OH&S induction is currently undertaken by the supervisors however; evidence of the induction being undertaken is not available for all employees as a signed 'Induction Completion Form' is not filed on each employee's personnel file. MEDIUM RISK | Robin Austen - Manager Human Resources | In Progress | 17-Feb-2019 | 31-Dec-2021 | 85.00% | 0.00% | GREEN |

ACTION PROGRESS COMMENTS:

Manager Human Resources position vacant for six months. Position now filled and processes will be reviewed.

The current OHS Induction Completion Form includes acknowledgement of risk assessment and risk matrix information provided in the Induction Presentation.

The Shire has recruited for a Coordinator OHS who will be commencing in Feb 2020 and the task of ensuring all staff complete the OHS Induction and have this recorded on their Personnel File will be assigned to the Coordinator to complete.

All inductions completed are signed by the new employee and saved on their personnel file.

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07/04/2020 - appointment to OHS/HR Coordinator role put on hold due to COVID-19

05/05/2020 - appointment to OHS/HR Coordinator role re-established and offer being made.

15/07/2020 - Coordinator OHS/HR appointed and tasked with implementing the Shire's Safety Management plan, including updating the Induction process.

04/08/2020 - HRO1 tasked with updating TNA with employee required inductions notifications and receipts to all existing and new employees - aim 100% by end September 2020 (including updates in Synergy)

Last Updated: 04-Aug-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.56 17D - A risk register be maintained consistent with the entity risk matrix, enabling reporting and review of OH&S risks identified. See also Action: 5.1.1.53 17D - Employee Inductions documented (inclusive of the need for risk management info) see also Action: 5.1.1.60 17D - The topic of risk management be included within the staff inductions. | Robin Austen - Manager Human Resources | In Progress | 17-Feb-2019 | 31-Dec-2021 | 40.00% | 10.00% | GREEN |

A CTION PROGRESS COMMENTS:

31/07/2019 - Manager Human Resources position vacant for six months. Position now filled and processes will be reviewed.

The Shire has recruited for a Coordinator OHS who will be commencing in Feb 2020 and the task of ensuring all staff complete the OHS Induction and have this recorded on their Personnel File will be assigned to the Coordinator to complete.

15/07/2020 Inclusive of the following Actions;

17D - A risk register be maintained consistent with the entity risk matrix, enabling reporting and review of OH&S risks identified.

See also Action: 5.1.1.53 17D - Employee Inductions documented (inclusive of the need for risk management info) see also Action: 5.1.1.60 17D - The topic of risk management be included within the staff inductions.

15/07/2020 Coordinator OHS/HR - tasked with sourcing an appropriate system for the management of Safety, including Incident management and Injury Management. 04/08/2020 - OHS/HR Coordinator currently reviewing systems - report due 31/08/2020

Last Updated: 04-Aug-2020

Information Systems

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23.1 Information Communication and Technology

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.25 17D and FMR - Review and update the Disaster Recovery Plan, identifying and documenting key ICT risks along with the treatments to reduce the risk to an acceptable level. HIGH RISK | EMCS - Vacant - Executive Manager - Corporate Services | In Progress | 17-Feb-2019 | 31-Dec-2021 | 80.00% | 0.00% | GREEN |

A CTION PROGRESS COMMENTS:

31/07/2019 - Resources allocated to project. Scope currently being created. Working with our IT consultants regarding the IT portion of the plan.

08/11/2019 - Coordinator IT since resigned. EMCS working with IT consultant to finalise this project.

30/04/2020 - Draft documented completed. In final review stage.

31/07/2020 - Final communications cut overs completed. This will enable documentation to be finalised.

Last Updated: 13-Aug-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|---|---------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.3217D - We noted limited controls in relation to the access to IT systems both physical access to hardware and network access to software and data. MEDIUM RISK | EMCS - Vacant - Executive Manager - Corporate Services | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 0.00% | GREEN |

A CTION PROGRESS COMMENTS:

31/07/2019 - Physical access is limited by key entry. This will be replaced by swipe entry over the next few months. EMCS is currently working with consultants to diagramise access map to all network and application information.

13/10/2019 - Physical access now limited to swipe card entry. New form created regarding any new users needed access to network and directories and software.

Last Updated: 14-Oct-2019

| ACTION | RESPONSIBLE PERSON | STATUS START DATE | END DATE | COMPLETE | TARGET | ON TARGET |
|--------|--------------------|-------------------|----------|----------|--------|-----------|
| | | | | % | | % |

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| - 1 | 5.1.1.5217D - Routine testing of the effectiveness of the Plan through annual system recovery testing be | EMCS - Vacant - Executive Manager - Corporate Services | In Progress | 17-Feb- 2019 | 31-Dec-2021 | 25.00% | 0.00% | GREEN |
|-----|---|---|----------------|--------------|-------------|--------|-------|-------|
| | undertaken. | | | | | | | |
| | HIGH RISK | | | | | | | |

ACTION PROGRESS COMMENTS:

30/07/2019 - EMCS working with IT consultant to establish a routine testing regime of data recovery.

08/11/2019 - Waiting on documentation finalisation. EMCS has met with IT consultant to determine timing around testing.

30/04/2020 - Now document in final review stage - data recovery testing will take place over next few months.

31/07/2020 - Testing to commence shortly.

Last Updated: 13-Aug-2020

23.2 Records Management

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|--|---------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.34 17D - Review controls in relation to records to ensure records are maintained in accordance with statutory requirements and the Record Keeping Plan. HIGH RISK | Lisa Davis - Manager Corporate Services | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 0.00% | GREEN |

A CTI ON PROGRESS COMMENTS:

09/08/2019 - Senior System Support/ Records Officer appointed in May 2019, position its within the Records Room and monitors records and the logging out process. Scanning system and barrier installed to Records Room limiting access.

Vital records are now held within the Records Room in locked cabinet.

Last Updated: 09-Aug-2019

Executive Services

Governance

16.1 Corporate Governance

| ACTION | RESPONSIBLE PERSON | STATUS START DATE | END DATE | COMPLETE | TARGET | ON TARGET |
|--------|--------------------|-------------------|----------|----------|--------|-----------|
| | | | | % | | % |

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| 5.1.1.2317D - Following review of Policies by Council, update the latest Review/Amendment Date on the Policy to provide an accurate record of when the Polic was reviewed. MEDIUM RISK | Governance | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 0.00% | GREEN |
|--|------------|---------------|-------------|-------------|---------|-------|-------|
|--|------------|---------------|-------------|-------------|---------|-------|-------|

A CTI ON PROGRESS COMMENTS:

New process implemented to provide accurate record of policy review.

Last Updated: 22-May-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|--|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.28 17D - Establish process for the development, review, amendment and authorisation of procedures, checklists and other internal control documentation, to assist with managing changes to procedures. HIGH RISK | Kylie Bergmann - Coordinator Governance | In Progress | 17-Feb-2019 | 31-Dec-2021 | 15.00% | 0.00% | GREEN |

A CTI ON PROGRESS COMMENTS:

Processes currently being reviewed.

10/11/2019 - Process is still to be reviewed.

Last Updated: 10-Nov-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|--|---------------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.43 17D - Residual risks following a Council decision should be evaluated and recorded as required by the risk management framework. MEDIUM RISK | Kylie Bergmann - Coordinator Governance | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

A CTION PROGRESS COMMENTS:

31/07/2019 - Processes currently being reviewed.

10/11/2019 - Process is still to be reviewed.

06/05/2020 - Risk consideration and Residual Risk has been included within the Council Resolutions Register to be assessed by Officers and reported back to Council.

Last Updated: 06-May-2020

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Shire of East Pilbara Action and Task Progress Report

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET |
|--|--|---------------|--------------|-------------|---------------|--------|-----------|
| 5.1.1.4617D - Maintain a gift register on the Shire's website in accordance with legislative requirements. HIGH RISK | Kylie Bergmann - Coordinator Governance | Complet ed | 17-Feb- 2019 | 31-Dec-2021 | 100.00% | 0.00% | GREEN |

A CTION PROGRESS COMMENTS:

The gift register is maintained through the ATTAIN online compliance system. We now have a process in place to ensure that the register is downloaded once a month and uploaded to the website.

Last Updated: 05-Aug-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|--|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.4817D - To confirm adherence to documented policies and procedures and assist in the identification of internal control weaknesses an internal audit function is required to be established. MEDIUM RISK | Kylie Bergmann - Coordinator Governance | In Progress | 17-Feb-2019 | 31-Dec-2021 | 5.00% | 0.00% | GREEN |

A CTION PROGRESS COMMENTS:

Process to establish internal auditing function currently being investigated.

10/11/2019 - Internal Audit function requires additional resourcing and is currently being investigated.

Last Updated: 10-Nov-2019

Procurement and Contracts

9.1 Procurement

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET |
|--|---|---------------|--------------|-------------|---------------|---------|-----------|
| 5.1.1.2117D - Amend the Policy to provide the following: Purchasing requirements for the renewal or variation of contracts which did not arise from a public tender. | Dawn Ronchi - Contract Procurement Officer | Complet ed | 17-Feb- 2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |
| HIGH RISK | | | | | | | |

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A CTION PROGRESS COMMENTS:

Policy Updated

Last Updated: 22-May-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---|---------------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.2917D - All procurement of goods or services should be undertaken in accordance with the Procurement Policy and legislative requirements, regardless of the type of service or goods. HIGH RISK | Dawn Ronchi - Contract Procurement Officer | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

ACTION PROGRESS COMMENTS:

Processes currently under review to ensure all procurement is undertaken in accordance with legislation. 6/8/19 - Internal Auditing Process set up and being undertaken regularly.

Last Updated: 06-Aug-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---|---------------|--------------|-------------|---------------|---------|----------------|
| 5.1.1.30 17D -To help ensure probity and faimess when assessing tenders, procedures for the declaration of interests prior to assessing tender should be documented. Purchases over \$150,000 should be subject to the same assessment procedures as those applied to tenders. MEDIUM RISK | Dawn Ronchi - Contract Procurement Officer | Complet ed | 17-Feb- 2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

A CTION PROGRESS COMMENTS:

Prrocess updted.

Last Updated: 22-May-2019

| | | | | V | | | |
|--|--------------------|---------|------------|----------|----------|--------|-----------|
| ACTION | RESPONSIBLE PERSON | CTATHE | START DATE | END DATE | COMBLETE | TARGET | ON TARGET |
| ACTION | RESPONSIBLE PERSON | 3117103 | START DATE | ENDUALE | COMPLETE | TARGET | ONTARGET |
| | | | | | 0/ | | 0/ |
| , and the second se | | | | | 70 | | 70 |

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| associated with the purchase. MEDIUM RISK | The Control of the Co | | In Progress | 17-Feb- 2019 | 31-Dec-2021 | 50.00% | 50.00% | GREEN |
|--|--|--|----------------|--------------|-------------|--------|--------|-------|
|--|--|--|----------------|--------------|-------------|--------|--------|-------|

A CTION PROGRESS COMMENTS:

Processes currently under review.

6/8/19, 7/1/20 and 6/5/20 -It is already an internal process that as per the Tender process - the formal RFQ's are evaluated by set criteria and by 3 Panel members, and this has been the case. The process/procedure shall be written more clearly.

5/8/20 - Internal process/procedure for evaluating both RFTs and RFQs has been drafted.

Last Updated: 05-Aug-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|---|---------------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.4717D - To maintain the confidentiality of submissions received values of submissions received be removed from the tender register. MEDIUM RISK | Dawn Ronchi - Contract Procurement Officer | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

A CTI ON PROGRESS COMMENTS:

Process updated.

Last Updated: 22-May-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET |
|---|---|----------------|--------------|-------------|---------------|--------|-----------|
| 5.1.1.5917D - "Values were entered onto Manual Purchase orders after the goods were received. Purchase orders were issued after receipt of the goods or services | Dawn Ronchi - Contract Procurement Officer | In Progress | 17-Feb- 2019 | 31-Dec-2021 | 75.00% | 50.00% | GREEN |

A CTION PROGRESS COMMENTS:

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Review of processes and refresher training currently being considered. Finance working with Technical services to abolish manual purchase order books.

6/8/19 & 7/1/20 - Use of manual PO books were ceased mid July 19 with manual PO books returned to Finance. The use of Manual Requisition Books for a small number of remote staff are now in place - this will alleviate Purchase Orders being created without values and/or gl's. Finance and CPO have started to sit with Tech Services staff in a small training session environment. The use of the Req Books is currently being monitored - so have set the Completion level to 50%.

11/2/20 - Manual PO books are now only being used for a small % of purchases.

6/5/20 - as above.

5/8/20 - as above.

Last Updated: 05-Aug-2020

9.2 Management of Contracts, Leases and MOU's

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---|---------------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.40 17D - To help ensure all contractors have the relevant licences and have adequate insurance cover for the works they undertake for the Shire, procedures should be developed, and records maintained to ensure copies of contractor's insurances are held on file. HIGH RISK | Dawn Ronchi - Contract Procurement Officer | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

A CTION PROGRESS COMMENTS:

Process updated.

Last Updated: 22-May-2019

Strategic and Business Planning

2.1 Risk Management and IPR

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---|---------------|--------------|-------------|---------------|---------|----------------|
| 5.1.1.20 CC & 17D - Review and update the Corporate Business Plan to ensure it remains current. MEDIUM RISK | EMCS - Vacant - Executive Manager - Corporate Services | Complet ed | 17-Feb- 2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

A CTION PROGRESS COMMENTS:

31/05/2019 - The Corporate Business Plan has been updated and accepted by Council at their OCM 26062019.

The process of updating the Corporate Business Plan annually has been entered into the budget process steps. The CBP will be updated by February every year.

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| Last Up | dated: | 14-Aug-2019 |
|---------|--------|-------------|
|---------|--------|-------------|

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|---|---------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.24 17D - Given recent staffing changes, update and review the Business Continuity Plan, identify and document key business continuity risks along with the treatments to reduce the risk to an acceptable level. HIGH RISK | EMCS - Vacant - Executive Manager - Corporate Services | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 0.00% | GREEN |

A CTION PROGRESS COMMENTS:

31/07/2019 - Resources allocated to project.

08/11/2019 - LGIS contacted and will assist in the review of this plan.

30/06/2020 - Business Continituity Plan updated and reviewed.

Last Updated: 05-May-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---|---------------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.2717D - Risk management procedures and process require review and updating in accordance with the latest risk management standard (ISO 31000:2018). HIGH RISK | EMCS - Vacant - Executive Manager - Corporate Services | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

A CTION PROGRESS COMMENTS:

31/07/2019 - Risk Management procedures and process reviewed internally and sent to LGIS for comment. Final updated documentation due for completion shortly. 08/11/19 - Risk Management Framework, policy and procedures reviewed and updated.

Last Updated: 08-Nov-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---|---------------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.4417D - Prepare the Statutory Budget in accordance with legislative requirements. HIGH RISK | EMCS - Vacant - Executive Manager - Corporate Services | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

A CTI ON PROGRESS COMMENTS:

New process and template established to ensure compliance.

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Shire of East Pilbara Action and Task Progress Report

Last Updated: 22-May-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET |
|--|---|---------------|-------------|-------------|---------------|---------|-----------|
| 5.1.1.45 17D - Maintaining risk registers for all identified risks is important to help ensure significant or high risks are adequately treated. HIGH RISK | EMCS - Vacant - Executive Manager - Corporate Services | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

A CTI ON PROGRESS COMMENTS:

31/05/2019 - Risk workshops with LGIS organised for June which will result in an updated Risk Register.

31/07/2019 - Risk controls workshops held with LGIS consultant and managers/ exec. Final updating of controls underway and once completed will be entered into CAMMS risk module for actions and monitoring.

31/10/2019 - All new risks entered into software for monitoring. Review of old risks still to take place to gauge their ongoing relevancy.

31/01/2020 - Risk register up to date. Ongoign training for staff is being provided.

Last Updated: 13-Feb-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|---------------------------------------|----------------|--------------|-------------|---------------|--------|----------------|
| 5.1.1.50 17D - Risk management procedures implemented uniformly across the organisation. HIGH RISK | Sian Appleton - Manager Governance | In Progress | 17-Feb- 2019 | 31-Dec-2021 | 50.00% | 50.00% | GREEN |

ACTION PROGRESS COMMENTS:

31/05/2019 - Risk Management processes currently being review and will then be rolled out to whole organisation.

31/07/209 - Particular focus on bringing the aiport risk process in line with organisational processes.

08/11/19 - Update of risk process and documentation completed. Roll out to entire organisation is currently in planning.

31/07/2020 - No update.

Last Updated: 13-Aug-2020

| ACTION | RESPONSIBLE PERSON | STATUS START DATE | END DATE | COMPLETE | TARGET | ON TARGET |
|--------|--------------------|-------------------|----------|----------|--------|-----------|
| | | | | % | | % |

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Shire of East Pilbara

Action and Task Progress Report

| 5.1.1.5117D - A central risk register routinely maintained as required by the Policy. | Sian Appleton - Manager Governance | Complet ed | 17-Feb- 2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |
|---|---------------------------------------|---------------|--------------|-------------|---------|---------|-------|
| HIGH RISK | | | | | | | |

A CTION PROGRESS COMMENTS:

31/05/2019 - A central register is maintained and is currently being updated.

Last Updated: 14-Aug-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---------------------------------------|---------------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.5417D - A single entity-wide Risk Register of identified risks be maintained, with key organisational risks identified and residual risk levels assessed and recorded. MEDIUM RISK | Sian Appleton - Manager Governance | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

A CTION PROGRESS COMMENTS:

31/07/19 - All Risk Management processes currently under review.

08/11/19 - Risk management documentation review completed. Controls have been reviewed this year and will be entered into CAMMS Risk Module for reporting.

Last Updated: 08-Nov-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---------------------------------------|---------------|--------------|-------------|---------------|---------|----------------|
| 5.1.1.5717D - Management continue to monitor the risk register and discuss any identified risk matters in their meetings. | Sian Appleton - Manager Governance | Complet ed | 17-Feb- 2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

ACTION PROGRESS COMMENTS:

31/07/2019 - On Executive Team meeting agenda. Ongoing action.

Last Updated: 14-Aug-2019

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE | TARGET | ON TARGET |
|--------|--------------------|--------|------------|----------|----------|--------|-----------|
| | | | | | | | |

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| 5.1.1.5817D - The improvements detailed within this report be adopted as an Improvement Plan to progress risk management at the Shire. MEDIUM RISK | Sian Appleton - Manager Governance | Complet ed | 17-Feb- 2019 | 31-Dec-2021 | 100.00% | 0.00% | GREEN |
|--|---------------------------------------|---------------|--------------|-------------|---------|-------|-------|
|--|---------------------------------------|---------------|--------------|-------------|---------|-------|-------|

A CTION PROGRESS COMMENTS:

 $Risk\ Improvement\ plan\ now\ entered\ into\ CAMMS\ software\ and\ reported\ to\ the\ Audit\ Committee\ and\ Council\ quarterly.$

Last Updated: 22-May-2019

Infrastructure Services

Project and Asset Management

11.2 Asset Management

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|---|---------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.26 CBP and 17D - Update and finalise asset management plans and present to Council for adoption. MEDIUM RISK Treatment Plans identified within asset management plans be monitored to ensure risks are reduced to an acceptable level. MEDIUM RISK | Lindon Mellor- Manager Projects & Assets | Ongoing | 17-Feb-2019 | 31-Dec-2021 | - | 100.00% | 600 |

A CTION PROGRESS COMMENTS:

13/08/20 - Refer to to action 5.1.1.7.

Last Updated: 13-Aug-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|---|---------------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.5517D - Treatment Plans identified within asset management plans be monitored to ensure risks are reduced to an acceptable level. MEDIUM RISK | Raees Rasool - Executive Manager Infrastructure Services | Complet ed | 17-Feb-2019 | 31-Dec-2021 | 100.00% | 100.00% | GREEN |

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A CTI ON PROGRESS COMMENTS:

Risk Assessments undertaken in accordance with ISO31000:2009 are included within the Asset Management Plans. Whilst the assessments appear appropriate the basis for the various ratings are not apparent. No subsequent reporting on effectiveness of the treatment Plans in reducing risk has been undertaken.

08/08/2019 - Risk treatment will form part of the asset management plans and so further reporting is not required

Last Updated: 08-Aug-2019

Waste Management

21.1 Landfill Management

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|--|----------------|-------------|-------------|---------------|--------|----------------|
| 4.2.1.2 17D - Undertake risk assessments in relation to each of the potentially contaminated sites and identify appropriate treatment plans. HIGH RISK | Bwalya Chilufya- Environmental Health Officer | In Progress | 17-Feb-2019 | 31-Dec-2021 | 10.00% | 0.00% | GREEN |

A CTION PROGRESS COMMENTS:

31/05/2019 Several contaminated sites exist within Shire properties. The extent of contamination and risks associated with these sites is to be determined. Initial steps taken to scope detail of risk assessments.

Last Updated: 05-Aug-2019

21.2 Waste Collection and Recycling

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET |
|--|---|----------|-------------|-------------|---------------|--------|-----------|
| 5.1.1.38 17D - Undertake a detailed review of all controls in relation to the waste facility. In particular, if possible, remove or significantly reduce the potential amount of cash received at the waste facility, through use of pre-purchased vouchers etc. Should cash continue to be accepted, appropriate procedures and controls are required. MEDIUM RISK | Raees Rasool - Executive Manager Infrastructure Services | Deferred | 17-Feb-2019 | 31-Dec-2021 | 2.00% | 0.00% | GREEN |

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Shire of East Pilbara Action and Task Progress Report

Project will be deferred until a new manager of waste services and a graduate engineer can be engaged

16/05/2019 - Project is still deferred, however staff have commenced work on a waste management plan which will highlight how we can improve the facility. In combination with the new manager of waste services and a graduate engineer this will provide the necessary resources to scope and review the facility with the view of increasing operational revenue from liquid waste. Waste Manager position has been advertised and the EMIS is liaising with universities to sell the graduate opportunity. Advertising for the graduate engineering role is planned to occur around June/July of 2019

10/06/2019 - Graduate role applications close on the 1st July 2019. Interviews for Manager of Waste completed with a view to commence in July

08/08/2019 - Manager of Waste Services commenced on the 29th of July 2019 and is finalizing a waste management plan for council to review as part of the september meeting. Graduate role interviews were undertaken. 153 applicants applied and the successful candidate has accepted their offer. Graduate is due to commence in September 2019.

10/09/2019 - Graduate Engineer Waste Services commenced on the 2nd of September and is working alongside the Manager of Waste (MoW) regarding management of the landfill site. This is largely in a project and operational space with respect to RFQ's for fencing and a flow meter being advertised, improvements to the liquid waste facility, submitting for the CDS scheme, investigating recycling and reviewing waste streams like mulch. With limited resources improving cash handling at the site is not a priority.

20/07/2019 - Due to competing priorities, this project has not been given priority as work is being as above.

05/11/2019 - No further update

05/11/2019 - No further update.

10/02/2020 - There will be no further updates for the 19/20 financial year

Last Updated: 10-Feb-2020

AUDIT COMMITTEE

4.1.3 STATUS OF RISK REGISTER, RISK CONTROLS AND ACTIONS

File No: GOV-2-1

Attachments: Appendix 1 – Risk Action Status Report

Appendix 2 – Risk Controls Report

Responsible Officer: Mr Jeremy Edwards

Chief Executive Officer

Author: Ms Sian Appleton

Manager Governance

Location/Address: N/A
Name of Applicant: N/A
Author Disclosure of Interest: Nil

REPORT PURPOSE

To present the status of the Council's risk register, risk controls and risk actions.

BACKGROUND

Pursuant to Regulation 17 of the *Local Government (Audit) regulations 1996,* the Chief Executive Officer is to review the Shire's systems and procedures in relation to risk management, internal control and legislative compliance, at least every 3 financial years. In 2019, the Shire engaged Moore Stephens to undertake this review.

One of the improvements suggested by Moore Stephens is that the Audit Committee receive quarterly reports of identified high and extreme strategic and operational risks.

At the 22 November 2019 the Audit committee was presented with the updated Risk Control Report. From this report additional actions have been identified to further mitigate the 16 identified corporate risks and these are also reported on.

COMMENTS/OPTIONS/DISCUSSIONS

The presented reports show the following.

- Risk Status report showing -
 - Inherent, current and future risk on each of the 16 risk profiles
 - Further risk actions and the status and progress comments of each action.
- 2. Risk Control Overview Report showing
 - All current controls against Risk Profile.

STATUTORY IMPLICATIONS/REQUIREMENTS

Regulation 17 of the Local Government (Audit) Regulations 1996.

POLICY IMPLICATIONS

4.12 RISK MANAGEMENT

STRATEGIC COMMUNITY PLAN

5: Governance

Demonstrated accountability and corporate governance.

- G1 Provide efficient, accountable and ethical governance.
- G1.1 Enhance governance capability to deliver sustainable outcomes, roads and buildings

RISK MANAGEMENT CONSIDERATIONS

Reputational - Medium

FINANCIAL IMPLICATIONS

Resource requirements are in accordance with existing budgetary allocation.

VOTING REQUIREMENTS

Simple.

OFFICER & COMMITTEE RECOMMENDATION\

MOVED: Cr Geraldine Parsons, SECONDED: Cr Karen Lockyer

That the Audit Committee review and receive the CAMMS Risk Status Report and Risk Control Overview Report as presented in Appendix 1.

CARRIED UNANIMOUSLY

To be actioned by Ms Sian Appleton, Manager Governance.

Appendix 1 Risk Action Status Report



Risk Action Status Report

Shire of East Pilbara



Print Date: 14-Aug-2020

Solutions Summary

CR-100 Misconduct

Total Number of Risk Treatment Plans : 9
No: of Risk Treatment Plans Completed on Time : 9
No: of Overdue Risk Treatment Plans : 0
No: of Due Risk Treatment Plans : 0

CR103 Environmental Management

Total Number of Risk Treatment Plans : 2

No: of Risk Treatment Plans Completed on Time : 0

No: of Overdue Risk Treatment Plans : 2

No: of Due Risk Treatment Plans : 0

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|---|---------------------|-------------|------------|------------|------------|----------------|-----------------|
| Review operating arrangement for the Landfill sites at Nullagine and Marble Bar | Oliver Schaer | In Progress | 10 % | 31-05-2018 | 30-06-2020 | | 45 |
| Waste Water Treatment Plan | Philip Charley | In Progress | 10 % | 01-07-2019 | 30-06-2020 | | 45 |

CR104 Errors, Omissions and Delays

Total Number of Risk Treatment Plans : 1

No: of Risk Treatment Plans Completed on Time : 0

No: of Overdue Risk Treatment Plans : 1

No: of Due Risk Treatment Plans : 0

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|--|---------------------|---------|------------|------------|------------|----------------|-----------------|
| Identify and develop document procedures where relevant for Technical Services | Raees Rasool | Ongoing | 0% | 01-08-2019 | 30-06-2020 | | 45 |

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CR105 External Theft and Fraud

Total Number of Risk Treatment Plans : 2
No: of Risk Treatment Plans Completed on Time : 0
No: of Overdue Risk Treatment Plans : 2
No: of Due Risk Treatment Plans : 0

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|--|---------------------|-------------|------------|------------|------------|----------------|-----------------|
| Finalise community Safety Plan and have endorsed by Council | Brent Stein | Deferred | 10 % | 31-05-2018 | 30-06-2020 | | 45 |
| Review of CCTV coverage | Brent Stein | In Progress | 1% | 01-07-2019 | 30-04-2020 | | 106 |

CR-106 Fulfilling Statutory, Regulatory or Compliance Requirements

Total Number of Risk Treatment Plans : 2

No: of Risk Treatment Plans Completed on Time : 0

No: of Overdue Risk Treatment Plans : 1

No: of Due Risk Treatment Plans : 1

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|--|---------------------|-------------|------------|------------|------------|----------------|-----------------|
| Work Instruction for the updating of the Compliance Calendar to be completed | Kylie Bergmann | In Progress | 1% | 01-11-2019 | 29-05-2020 | | 77 |

Due Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date |
|--|---------------------|-------------|------------|------------|------------|
| Compliance Calendar to be entered into CAMMS and tabled monthly at EMT meeting | Sian Appleton | In Progress | 30 % | 01-11-2019 | 30-11-2020 |

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CR-107 Employment Practices

Total Number of Risk Treatment Plans : 4

No: of Risk Treatment Plans Completed on Time : 0

No: of Overdue Risk Treatment Plans : 4

No: of Due Risk Treatment Plans : 0

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|---|---------------------|-------------|------------|------------|------------|----------------|-----------------|
| Major HR Policy Review | Robin Austen | In Progress | 10 % | 03-06-2019 | 30-06-2020 | | 45 |
| Review Induction process to consider follow up sessions | Robin Austen | Not Started | 0 % | 31-05-2018 | 31-03-2020 | | 136 |
| Review Performance Review Process | Robin Austen | In Progress | 50 % | 31-05-2018 | 30-06-2020 | | 45 |
| Review Strategic Workforce Plan | Robin Austen | Completed | 100 % | 01-07-2019 | 30-04-2020 | 08-06-2020 | 39 |

CR-108 Safety and Security Practices

Total Number of Risk Treatment Plans : 3

No: of Risk Treatment Plans Completed on Time : 0

No: of Overdue Risk Treatment Plans : 3

No: of Due Risk Treatment Plans : 0

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|--|---|-------------|------------|------------|------------|----------------|-----------------|
| Arrange for Audit 4801 to be completed | Robin Austen | In Progress | 10 % | 03-06-2019 | 30-06-2020 | | 45 |
| Investigate water monitoring controls for Cape Keraudren water bore | Vacant - Manager Development - Health | In Progress | 10 % | 31-05-2018 | 31-03-2020 | | 136 |
| Review and improve Incident Management Process | Robin Austen | In Progress | 75 % | 01-07-2019 | 30-06-2020 | | 45 |

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CR-109 Business and Community disruption

Total Number of Risk Treatment Plans : 4

No: of Risk Treatment Plans Completed on Time : 2

No: of Overdue Risk Treatment Plans : 1

No: of Due Risk Treatment Plans : 1

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|------------------------------|---------------------|-------------|------------|------------|------------|----------------|-----------------|
| Review current LEMC Plans | Brent Stein | In Progress | 60 % | 31-05-2018 | 31-03-2020 | | 136 |

Due Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date |
|--|---------------------|-----------|------------|------------|------------|
| Develop internal BCM procedures and complete desktop exercise | EMCS - Vacant | Completed | 100 % | 28-02-2020 | 01-06-2021 |

CR-111 Document Management Processes

Total Number of Risk Treatment Plans : 3

No: of Risk Treatment Plans Completed on Time : 0

No: of Overdue Risk Treatment Plans : 3

No: of Due Risk Treatment Plans : 0

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|--|---------------------|-------------|------------|------------|------------|----------------|-----------------|
| Develop and implement a document / version control process | Lisa Davis | In Progress | 50 % | 30-05-2018 | 30-06-2020 | | 45 |
| Refresher on requirement to record (log) email correspondence | Lisa Davis | In Progress | 1% | 30-05-2018 | 30-06-2020 | | 45 |
| Revisit Style Guide and create templates for employee use (NB: templates to be available in Word / Powerpoint / Excel) | Amanda Curby | In Progress | 10 % | 30-05-2018 | 30-06-2020 | | 45 |

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CR-112 Asset Sustainability Practices

Total Number of Risk Treatment Plans : 3

No: of Risk Treatment Plans Completed on Time : 1

No: of Overdue Risk Treatment Plans : 2

No: of Due Risk Treatment Plans : 0

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|---|---------------------|-------------|------------|------------|------------|----------------|-----------------|
| Annual review of Building Asset Management Plans | Lindon Mellor | In Progress | 1% | 01-11-2019 | 31-03-2020 | | 136 |
| Review Asset management Plans to ensure consistency and alignment with LTFP | Lindon Mellor | In Progress | 50 % | 30-05-2018 | 30-06-2020 | | 45 |

CR-113 Inadequate Engagement Practices

Total Number of Risk Treatment Plans : 2

No: of Risk Treatment Plans Completed on Time : 0

No: of Overdue Risk Treatment Plans : 2

No: of Due Risk Treatment Plans : 0

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|------------------------------------|---------------------|-------------|------------|------------|------------|----------------|-----------------|
| Develop communication policy | Amanda Curby | In Progress | 75 % | 30-05-2018 | 30-06-2020 | | 45 |
| Restrict access to Facebook | Amanda Curby | In Progress | 10 % | 30-05-2018 | 31-03-2020 | | 136 |

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Risk Action Status Report

Shire of East Pilbara

CR-114 Project / Change Management

Total Number of Risk Treatment Plans : 1

No: of Risk Treatment Plans Completed on Time : 0

No: of Overdue Risk Treatment Plans : 1

No: of Due Risk Treatment Plans : 0

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|--|--|-------------|------------|------------|------------|----------------|-----------------|
| Formalise the internal Project Management Methodology (Procedures and Reporting) | Vacant - Manager Contracts & Procurement | In Progress | 10 % | 30-05-2018 | 31-03-2020 | | 136 |

CR-115 Management of Facilities / Venues / Events

Total Number of Risk Treatment Plans : 2

No: of Risk Treatment Plans Completed on Time : 1

No: of Overdue Risk Treatment Plans : 1

No: of Due Risk Treatment Plans : 0

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|---|---------------------|-------------|------------|------------|------------|----------------|-----------------|
| Formalise annual audits of venues, facilities and equipment | Vacant - MRE | In Progress | 10 % | 30-05-2018 | 30-06-2020 | | 45 |

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CR-116 Supplier / Contract Management

Total Number of Risk Treatment Plans : 1

No: of Risk Treatment Plans Completed on Time : 0

No: of Overdue Risk Treatment Plans : 1

No: of Due Risk Treatment Plans : 0

Overdue Risk Treatment Plans

| Solutions | Responsible Officer | Status | % Complete | Start Date | End Date | Completed Date | Days Overdue |
|--|---------------------|-------------|------------|------------|------------|----------------|-----------------|
| Conduct Evaluation Training to relevant officers | | In Progress | 10 % | 30-05-2018 | 30-06-2020 | | 45 |

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Appendix 2 Risk Control Report



GERAGE

Risk Controls Overview Report

Shire of East Pilbara



Print Date: 14-Aug-2020

Risk Type: Corporate Risk

Shire of East Pilbara Risk Controls Overview Report

| Risk Code | Risk Title | Control Name | Control Owner | Owner Rating | Last Review Date | Next Review Date |
|-----------|------------|---|--|-----------------|---------------------|---------------------|
| CR-100 | Misconduct | Accounts Payable Process | Lisa Davis - Manager Corporate Services | Adequate | 01/07/2019 | 01/07/2020 |
| CR-100 | Misconduct | Annual Review Authorisation and Delegations Manual | Kylie Bergmann - Coordinator Governance | | | |
| CR-100 | Misconduct | Authorisations and Delegations Manual | Kylie Bergmann - Coordinator Governance | Adequate | 01/07/2019 | 01/07/2020 |
| CR-100 | Misconduct | Batch Authority Report | Lisa Davis - Manager Corporate Services | | | |
| CR-100 | Misconduct | Change of Bank Account Detail Forms | Lisa Davis - Manager Corporate Services | | | |
| CR-100 | Misconduct | Credit Card Authority Form / Policy / Agreements | Lisa Davis - Manager Corporate Services | | | |
| CR-100 | Misconduct | Elected Member Code of Conduct | Kylie Bergmann - Coordinator Governance | Adequate | 01/11/2019 | 01/06/2020 |
| CR-100 | Misconduct | Governance Software - Attain | Kylie Bergmann - Coordinator Governance | Effective | 01/08/2019 | 01/07/2020 |
| CR-100 | Misconduct | Internal Financial Control | Lisa Davis - Manager Corporate Services | Adequate | 01/11/2019 | 01/07/2020 |
| CR-100 | Misconduct | IT Policy and Guidelines | EMCS - Vacant - Executive Manager - Corporate Services | Adequate | 01/07/2019 | 01/07/2020 |
| CR-100 | Misconduct | New Creditor Form | Lisa Davis - Manager Corporate Services | | | |
| CR-100 | Misconduct | Procurement and Requisition Process | Sian Appleton - Manager Governance | Adequate | 01/07/2019 | 01/07/2020 |
| CR-100 | Misconduct | Retrospective PO forms | Lisa Davis - Manager Corporate Services | | | |

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AUDIT COMMITTEE

Shire of East Pilbara Risk Controls Overview Report

| Risk Code | Risk Title | Control Name | Control Owner | Owner Rating | Last Review Date | Next Review Date |
|-----------|--|--|--|-----------------|---------------------|---------------------|
| CR-100 | Misconduct | Review of Code of Conduct Annually | Kylie Bergmann - Coordinator Governance | | | |
| CR-100 | Misconduct | Review Procurement Process Annually | Dawn Ronchi - Contract Procurement Officer | | | |
| CR-100 | Misconduct | Tender and Procurement Policy | Sian Appleton - Manager Governance | Adequate | 01/07/2019 | 01/07/2020 |
| CR-100 | Misconduct | Work Instructions | Lisa Davis - Manager Corporate Services | | | |
| CR102 | Providing Inaccurate Advice / Information | Community Feedback Process (Synergysoft CSR) | Suzy Jones - Customer Services Officer | Effective | 01/08/2019 | 01/07/2020 |
| CR102 | Providing Inaccurate Advice / Information | Industry Qualification / Network Groups | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR102 | Providing Inaccurate Advice / Information | Information / Application Forms | Lisa Davis - Manager Corporate Services | Adequate | 01/07/2019 | 01/07/2020 |
| CR102 | Providing Inaccurate Advice / Information | Qualified / Trained Staff | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR102 | Providing Inaccurate Advice / Information | Website Content Management | Lisa Clack - Executive Manager - Customer and Community Services | Adequate | 01/11/2019 | 01/07/2020 |
| CR103 | Environmental Management | Disease Control Program | Vacant - Manager Development - Health - Development Services - Health | Effective | 01/11/2019 | 01/07/2020 |
| CR103 | Environmental Management | Food Safety Program | Vacant - Manager Development - Health - Development Services - Health | Effective | 01/11/2019 | 01/07/2020 |
| CR103 | Environmental Management | Landfill / Waste Management Plans and Processes | Tom Wheeler - A/Manager Waste Services | Adequate | 01/11/2019 | 01/07/2020 |

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AUDIT COMMITTEE

Shire of East Pilbara Risk Controls Overview Report

| Risk Code | Risk Title | Control Name | Control Owner | Owner Rating | Last Review Date | Next Review Date |
|-----------|------------------------------|--|--|-----------------|---------------------|---------------------|
| CR103 | Environmental Management | Monitoring Bores at Landfill Sites | Tom Wheeler - A/Manager Waste Services | Effective | 01/07/2019 | 01/07/2020 |
| CR103 | Environmental Management | Planning Application Process | David Evrett - Manager Development Services - Building | Effective | 01/07/2019 | 01/07/2020 |
| CR103 | Environmental Management | Supervision at Landfill Sites (Newman) | Tom Wheeler - A/Manager Waste Services | Adequate | 01/07/2019 | 01/07/2020 |
| CR103 | Environmental Management | Tip Site Septage Ponds Monitoring Process | Tom Wheeler - A/Manager Waste Services | Adequate | 01/07/2019 | 01/07/2020 |
| CR103 | Environmental Management | Waste Water Treatment Process | Philip Charley - Senior Projects Manager | Adequate | 01/07/2019 | 01/07/2020 |
| CR103 | Environmental Management | Water Quality Management | Vacant - Manager Development - Health - Development Services - Health | Effective | 01/11/2019 | 01/07/2020 |
| CR104 | Errors, Omissions and Delays | Building Assessment Process | David Evrett - Manager Development Services - Building | Adequate | 01/08/2019 | 31/07/2020 |
| CR104 | Errors, Omissions and Delays | Customer Action Request Process | Lisa Davis - Manager Corporate Services | Effective | 01/11/2019 | 01/07/2020 |
| CR104 | Errors, Omissions and Delays | Documented Procedures and Checklists | Lisa Davis - Manager Corporate Services | Adequate | 01/08/2019 | 30/06/2020 |
| CR104 | Errors, Omissions and Delays | Feedback / Work Request Process | Suzy Jones - Customer Services Officer | Adequate | 01/08/2019 | 01/07/2020 |
| CR104 | Errors, Omissions and Delays | Planning / Building Statutory Processes | David Evrett - Manager Development Services - Building | Effective | 01/07/2019 | 01/07/2020 |
| CR104 | Errors, Omissions and Delays | Rates Modelling and Billing | Vacant - Rates Revenue Officer - Rates Revenue Finance Officer | Adequate | 01/11/2019 | 01/07/2020 |

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Shire of East Pilbara

Risk Controls Overview Report

| Risk Code | Risk Title | Control Name | Control Owner | Owner Rating | Last Review Date | Next Review Date |
|-----------|---|--|--|-----------------|---------------------|---------------------|
| CR104 | Errors, Omissions and Delays | Supervisory Oversight | Kylie Bergmann - Coordinator Governance | Adequate | 01/07/2019 | 01/07/2020 |
| CR105 | External Theft and Fraud | ссту | Brent Stein - Manager Community Safety | Adequate | 17/02/2020 | 30/06/2020 |
| CR105 | External Theft and Fraud | Floodlighting Shire Assets | Lindon Mellor - Manager Projects & Assets | Adequate | 01/08/2019 | 01/07/2020 |
| CR105 | External Theft and Fraud | IT Firewall Systems and Awareness | Justin Hawkins - IT Support Officer | Adequate | 01/07/2019 | 01/07/2020 |
| CR105 | External Theft and Fraud | Security Access (major sites) | Lindon Mellor - Manager Projects & Assets | Effective | 04/05/2018 | 01/07/2020 |
| CR105 | External Theft and Fraud | Security Access (Information Services) | EMCS - Vacant - Executive Manager - Corporate Services | Adequate | 01/11/2019 | 01/07/2020 |
| CR105 | External Theft and Fraud | Tree Guards | Vacant - Manager Technical Services Newman - Manager Technical Services - Newman | Adequate | 01/07/2019 | 01/07/2020 |
| CR105 | External Theft and Fraud | Working Relationship with Police | Brent Stein - Manager Community Safety | Effective | 01/07/2019 | 01/07/2020 |
| CR-106 | Fulfilling Statutory, Regulatory or Compliance Requirements | Airport Operational Management Processes | George Christianson - Manager Compliance - Airport | Effective | 01/07/2019 | 01/07/2020 |
| CR-106 | Fulfilling Statutory, Regulatory or Compliance Requirements | Compliance Calendar | Kylie Bergmann - Coordinator Governance | Adequate | 01/08/2019 | 01/07/2020 |
| CR-106 | Fulfilling Statutory, Regulatory or Compliance Requirements | Financial Reporting Process | Lisa Davis - Manager Corporate Services | Adequate | 01/11/2019 | 01/07/2020 |
| CR-106 | Fulfilling Statutory, Regulatory or Compliance Requirements | Induction Process - Contractors | Dawn Ronchi - Contract Procurement Officer | Adequate | 01/07/2019 | 01/07/2020 |

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Shire of East Pilbara Risk Controls Overview Report

| Rísk Code | Risk Title | Control Name | Control Owner | Owner Rating | Last Review Date | Next Review Date |
|-----------|---|---|--|-----------------|---------------------|---------------------|
| CR-106 | Fulfilling Statutory, Regulatory or Compliance Requirements | Induction Process - Councillors | Kylie Bergmann - Coordinator Governance | Adequate | 01/07/2019 | 01/07/2020 |
| CR-106 | Fulfilling Statutory, Regulatory or Compliance Requirements | Induction Process - Staff | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR-106 | Fulfilling Statutory, Regulatory or Compliance Requirements | Operational Management Process (Aquatic Centre) | Vacant - MRE - Manager Recreation & Events | Adequate | 01/07/2019 | 01/07/2020 |
| CR-106 | Fulfilling Statutory, Regulatory or Compliance Requirements | Public Building Management | David Evrett - Manager Development Services - Building | Adequate | 01/07/2019 | 01/07/2020 |
| CR-106 | Fulfilling Statutory, Regulatory or Compliance Requirements | Review Changes to current Privacy Act | Kylie Bergmann - Coordinator Governance | | | |
| CR-106 | Fulfilling Statutory, Regulatory or Compliance Requirements | Staff Network Channels (MBA, HIA, OoE) | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR-106 | Fulfilling Statutory, Regulatory or Compliance Requirements | Subscriptions (SAI Global, BCA, State Publisher, WALGA, State Gazette | Kylie Bergmann - Coordinator Governance | Adequate | 01/07/2019 | 01/07/2020 |
| CR-106 | Fulfilling Statutory, Regulatory or Compliance Requirements | Tender and Procurement Policy | Vacant - Manager Contracts & Procurement - Manager Contracts and Procurement | Effective | 01/07/2019 | 01/07/2020 |
| CR-107 | Employment Practices | Human Resources Staff Procedures Manual | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR-107 | Employment Practices | Induction Process - Staff | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR-107 | Employment Practices | Performance Management Framework | Robin Austen - Manager Human Resources | Adequate | 01/11/2019 | 01/07/2020 |

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AUDIT COMMITTEE

Shire of East Pilbara Risk Controls Overview Report

| Risk Code | Risk Title | Control Name | Control Owner | Owner Rating | Last Review Date | Next Review Date |
|-----------|-------------------------------|---|---|------------------|---------------------|---------------------|
| CR-107 | Employment Practices | Performance Review Process | Robin Austen - Manager Human Resources | Non Effective | 01/07/2019 | 01/07/2020 |
| CR-107 | Employment Practices | Recruitment and Selection Guidelines | Robin Austen - Manager Human Resources | Effective | 01/11/2019 | 01/07/2020 |
| CR-107 | Employment Practices | Review Strategic Workforce Plan | Robin Austen - Manager Human Resources | | | |
| CR-107 | Employment Practices | Staff Exit Process | Robin Austen - Manager Human Resources | Adequate | 01/11/2019 | 01/07/2020 |
| CR-107 | Employment Practices | Staff Training and Development | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR-107 | Employment Practices | Strategic Workforce Plan | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR-107 | Employment Practices | Succession Planning / Multi Skilling Practices | Robin Austen - Manager Human Resources | Non Effective | 01/07/2019 | 01/07/2020 |
| CR-108 | Safety and Security Practices | Asbestos Management Program (Register and Plan) | Lindon Mellor - Manager Projects & Assets | Adequate | 01/06/2019 | 29/02/2020 |
| CR-108 | Safety and Security Practices | Conduct Audit 4801 | Robin Austen - Manager Human Resources | Non Effective | 01/11/2019 | 30/06/2020 |
| CR-108 | Safety and Security Practices | Formalise Contractor Management / Induction Process | Ben Lewis - Executive Manager - Commercial Services | | | |
| CR-108 | Safety and Security Practices | Hazard Management and Safe Work Practices | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR-108 | Safety and Security Practices | Identify and train wardens | Robin Austen - Manager Human Resources | | | |

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Shire of East Pilbara Risk Controls Overview Report

| Risk Code | Risk Title | Control Name | Control Owner | Owner Rating | Last Review Date | Next Review Date |
|-----------|-------------------------------|--|--|------------------|---------------------|---------------------|
| CR-108 | Safety and Security Practices | Incident and Investigation Process | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR-108 | Safety and Security Practices | Induction Process - Contractors | Vacant - Manager Contracts & Procurement - Manager Contracts and Procurement | Adequate | 01/07/2019 | 01/07/2020 |
| CR-108 | Safety and Security Practices | Induction Process - Staff | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR-108 | Safety and Security Practices | OH&S Workplace Consultation | Robin Austen - Manager Human Resources | Non Effective | 01/11/2019 | 01/07/2020 |
| CR-108 | Safety and Security Practices | OHS Management Framework | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR-108 | Safety and Security Practices | Organisational Emergency Management | Brent Stein - Manager Community Safety | Adequate | 17/02/2020 | 01/07/2020 |
| CR-108 | Safety and Security Practices | Sentinel Chicken Program | Vacant - Manager Development - Health - Development Services - Health | Effective | 01/07/2019 | 01/07/2020 |
| CR-108 | Safety and Security Practices | Staff Individual Training Plans | Robin Austen - Manager Human Resources | Non Effective | 11/05/2018 | 01/07/2020 |
| CR-108 | Safety and Security Practices | Training and Supervision | Robin Austen - Manager Human Resources | Adequate | 01/11/2019 | 01/07/2020 |
| CR-108 | Safety and Security Practices | Warden Training for all Sites | Robin Austen - Manager Human Resources | Non Effective | 01/07/2019 | 01/07/2020 |
| CR-108 | Safety and Security Practices | Water Monitoring Controls for Cape Keraudren Water Bore | Vacant - Manager Development - Health - Development Services - Health | Adequate | 01/07/2019 | 01/07/2020 |

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AUDIT COMMITTEE

Shire of East Pilbara Risk Controls Overview Report

| Risk Code | Risk Title | Control Name | Control Owner | Owner Rating | Last Review Date | Next Review Date |
|-----------|---|---|--|------------------|---------------------|---------------------|
| CR-109 | Business and Community disruption | Business Continuity Framework (Policy and Procedures) | Brent Stein - Manager Community Safety | Non Effective | 01/07/2019 | 30/04/2020 |
| CR-109 | Business and Community disruption | Business Continuity Plan and Annual Exercises | EMCS - Vacant - Executive Manager - Corporate Services | Effective | 28/02/2020 | 01/07/2021 |
| CR-109 | Business and Community disruption | Continue Skills Training (volunteers) | Brent Stein - Manager Community Safety | | | |
| CR-109 | Business and Community disruption | Develop internal BCM procedures and complete desktop scenario exercise (IT) | EMCS - Vacant - Executive Manager - Corporate Services | | | |
| CR-109 | Business and Community disruption | LEMAC and Recovery Plans and Exercises | Brent Stein - Manager Community Safety | Adequate | 17/02/2020 | 31/05/2020 |
| CR-109 | Business and Community disruption | Qualified / Trained Staff | Robin Austen - Manager Human Resources | Adequate | 01/07/2019 | 01/07/2020 |
| CR-109 | Business and Community disruption | Volunteer Management and Training | Brent Stein - Manager Community Safety | Adequate | 17/02/2020 | 01/07/2020 |
| CR-110 | IT &/or Communication Systems and Infrastructure | Disaster Recovery Plan (ICT) | EMCS - Vacant - Executive Manager - Corporate Services | Adequate | 01/07/2019 | 01/07/2020 |
| CR-110 | IT &/or Communication Systems and Infrastructure | ICT Asset Management Program | EMCS - Vacant - Executive Manager - Corporate Services | Adequate | 01/11/2019 | 01/07/2020 |
| CR-110 | IT &/or Communication Systems and Infrastructure | Information Security Framework | EMCS - Vacant - Executive Manager - Corporate Services | Adequate | 01/11/2019 | 01/07/2020 |
| CR-110 | IT &/or Communication Systems and Infrastructure | IT Infrastrucutre Security | EMCS - Vacant - Executive Manager - Corporate Services | Effective | 01/11/2019 | 01/07/2020 |
| CR-111 | Document Management Processes | Records Management System | Lisa Davis - Manager Corporate Services | Adequate | 01/11/2019 | 01/07/2020 |
| CR-111 | Document Management Processes | Training of Staff on induction in records | Lisa Davis - Manager Corporate Services | Adequate | 01/11/2019 | 01/07/2020 |

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Shire of East Pilbara Risk Controls Overview Report

| Risk Code | Risk Title | Control Name | Control Owner | Owner Rating | Last Review Date | Next Review Date |
|-----------|---|---|--|-----------------|---------------------|---------------------|
| CR-112 | Asset Sustainability Practices | Building Maintenance Program | Lindon Mellor - Manager Projects & Assets | Adequate | 01/08/2019 | 01/07/2020 |
| CR-112 | Asset Sustainability Practices | Parks, Open Spaces & Playgrounds Maintenance Program | Raees Rasool - Executive Manager Infrastructure Services | Adequate | 01/11/2019 | 01/07/2020 |
| CR-112 | Asset Sustainability Practices | Plant & Vehicle Maintenance Program | Oliver Schaer - Manager Technical Services - Rural | Adequate | 01/11/2019 | 01/07/2020 |
| CR-112 | Asset Sustainability Practices | Roads, Drainage & Footpath Maintenance Program | Raees Rasool - Executive Manager Infrastructure Services | Adequate | 01/11/2019 | 01/07/2020 |
| CR-114 | Project / Change Management | Project Approval, Allocation and Management | Lindon Mellor - Manager Projects & Assets | Not Rated | 01/11/2019 | 01/07/2020 |
| CR-114 | Project / Change Management | Project Status Reporting | Lindon Mellor - Manager Projects & Assets | Not Rated | 01/11/2019 | 01/07/2020 |
| CR-115 | Management of Facilities / Venues / Events | External Events Process | Han-Mari Roets - Coordinator Club & Events | Adequate | 01/11/2019 | 01/07/2020 |
| CR-115 | Management of Facilities / Venues / Events | Facility Booking System | Suzy Jones - Customer Services Officer | Effective | 01/11/2019 | 01/07/2020 |
| CR-115 | Management of Facilities / Venues / Events | Implement training and recruitment procedures to secure qualified staff | Robin Austen - Manager Human Resources | | | |
| CR-115 | Management of Facilities / Venues / Events | Internal Events Process | Han-Mari Roets - Coordinator Club & Events | Adequate | 01/11/2019 | 01/07/2020 |
| CR-115 | Management of Facilities / Venues / Events | Recreation Centre Booking System | Vacant - CRS - Coordinator Recreation Services | Effective | 01/11/2019 | 01/07/2020 |
| CR-116 | Supplier / Contract Management | Contract Management Process | Ben Lewis - Executive Manager - Commercial Services | Adequate | 01/08/2019 | 01/07/2021 |

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Shire of East Pilbara Risk Controls Overview Report

| Risk Code | Risk Title | Control Name | Control Owner | Owner Rating | Last Review Date | Next Review Date |
|-----------|-----------------------------------|---|--|-----------------|---------------------|---------------------|
| CR-116 | Supplier / Contract Management | Procurement Management Process | Dawn Ronchi - Contract Procurement Officer | Effective | 01/11/2019 | 01/07/2020 |
| CR-116 | Supplier / Contract Management | Review components of cleaning contract prior to formal retender | Vacant - Manager Contracts & Procurement - Manager Contracts and Procurement | | | |

Shire of East Pilbara Risk Controls Overview Report





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AUDIT COMMITTEE

4.1.4 FRAUD & CORRUPTION CONTROL PLAN UPDATE

Attachments: Appendix 1 - Fraud & Corruption Control Plan

Update

N/A

Responsible Officer: Mr Jeremy Edwards

Chief Executive Officer

Author: Mrs Kylie Bergmann

Coordinator Governance

Location/Address: N/A

Author Disclosure of Interest: Nil

REPORT PURPOSE

Name of Applicant:

To report on the status of the Fraud and Corruption Control Plan.

BACKGROUND

As per previous reports to the Audit Committee, an action plan has been developed following the performance report on Fraud and Corruption Control conducted by the Office of the Auditor General.

From this action plan, a Fraud and Corruption Control Improvement Plan was developed and entered into Council's CAMMS Strategic Planning software for monitoring.

COMMENTS/OPTIONS/DISCUSSIONS

A copy of the CAMMS reporting document is attached at **Appendix 1.**

Currently there are 12 actions reported on. Of these 10 are on target with 1 off target. One action is ongoing. It is expected that all actions will be completed by 30 June 2021.

STATUTORY IMPLICATIONS/REQUIREMENTS

Nil

POLICY IMPLICATIONS

1.19 FRAUD AND CORRUPTION CONTROL POLICY

STRATEGIC COMMUNITY PLAN

5: Governance

Demonstrated accountability and corporate governance.

• G1 Provide efficient, accountable and ethical governance.

RISK MANAGEMENT CONSIDERATIONS

Legislative – Low Financial - Medium

FINANCIAL IMPLICATIONS

No financial resource impact.

VOTING REQUIREMENTS

Simple.

OFFICER & COMMITTEE RECOMMENDATION

MOVED: Cr Karen Lockyer, SECONDED: Cr Geraldine Parsons

That the Audit Committee review and receive the Fraud and Corruption Control Plan update as presented at *Appendix 1*.

CARRIED UNANIMOUSLY

To be actioned by Mrs Kylie Bergmann, Coordinator Governance.

Appendix 1 Fraud & Corruption Control Plan Update



Action and Task Progress Report

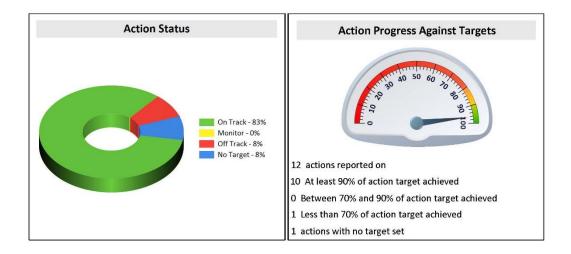
Shire of East Pilbara



《西宋主任巫

Print Date: 14-Aug-2020

OVERVIEW



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ACTION PLANS









At least 90% of action target achieved Between 70% and 90% of action target achieved Less than 70% of action target achieved No target set

Corporate Services

Human Resources

10.1 Human Resource Management

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---|---------------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.5 FR - Develop a policy / procedure to verify the identity and integrity of employees | Robin Austen - Manager Human Resources | Complet ed | 01-Jul-2019 | 30-Jun-2021 | 100.00% | 100.00% | GREEN |

ACTION PROGRESS COMMENTS:

Only item now requiring attention is;

Consider any gaps in employment history and reasons for those gaps addressed at interview or prior to appointment. This will be included in Recruitment and Selection Guidelines.

The Recruitment and Selection Guidelines have now been updated to include all identity and integrity requirements.

Last Updated: 13-Feb-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|---|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.97 FR - Establish a regular training program to raise and maintain staff awareness on fraud risks. Maintain records of staff participation in those training programs. Include in training package - Code of Conduct, Records, Fraud and Procurement | Robin Austen - Manager Human Resources | In Progress | 01-Oct-2018 | 31-Dec-2020 | 30.00% | 50.00% | RED |

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^{*} Dates have been revised from the Original dates

ACTION PROGRESS COMMENTS:

The Shire has access to the training tools provided by the Public Sector Commission for Accountable and Ethical Decision Making. Additionally, WALGA has training modules for managing Conflicts of Interest that have been delivered to Councillors and is available to staff.

Assigned to HRO to liaise with WALGA to provide training in the region. This will be scheduled bi-annually.

28/02/2020 - HR/OHS Officer has commenced the process of engaging WALGA to undertake this training with staff.

07/04/2020 - All training on hold due to COVID-19

05/05/2020 - Face to face training on hold. Looking at basic online training.

15/07/2020 - the HRO has been tasked with this outcome and is in the process of scheduling this training for all staff. In addition, we will be offering this to new employees online to ensure all employees are compliant.

04/08/2020 - HRO1 liaising with Coordinator Governance to establish on site training schedule with Steve Tweedie. Have asked for an update on when training will be offered.

Last Updated: 04-Aug-2020

Executive Services

Governance

16.1 Corporate Governance

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET |
|---|--|---------------|-------------|-------------|---------------|--------|-----------|
| 5.1.1.94 FR and CC - Review the Fraud and Corruption Plan in line with the current schedule - Completed March biannually. | Kylie Bergmann - Coordinator Governance | Complet ed | 01-Jul-2019 | 31-Jul-2020 | 100.00% | 12 | 600 |

A CTION PROGRESS COMMENTS:

10/11/2019 - Review is to be completed in March 2020 in line with current scheduled.

05/05/2020 - Review was not completed in March 2020 due to staff responsibilities being diverted due to the COVID-19 response. Review will be presented to Council in June 2020.

11/06/2020 - Fraud and Corruption Plan has been reviewed and will be presented to the June Council Meeting.

Last Updated: 11-Jun-2020

| ACTION | RESPONSIBLE PERSON | STATUS START DAT | END DATE | COMPLETE | TARGET | ON TARGET |
|--------|--------------------|------------------|----------|----------|--------|-----------|
| 9 | | | | % | | % |

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| 5.1.1.95 FR - Ensure that all new employees receive Code of Conduct training in their induction, and annually thereafter. Ensure employees sign off annually their understanding of the code of conduct. | Kylie Bergmann - Coordinator Governance | In Progress | 01-Jul-2019 | 31-Dec-2020 | 50.00% | 50.00% | GREEN |
|--|--|----------------|-------------|-------------|--------|--------|-------|
|--|--|----------------|-------------|-------------|--------|--------|-------|

A CTION PROGRESS COMMENTS:

10/11/2019 - All new employees do currently receive Code of Conduct training. Program to be developed by March 2020 for re-induction of all current employees and Councillors.

11/02/2020 - Coordinator Governance has been in discussion with LG Professionals and Steven Tweedie re, conducting integrity & Code of Conduct Training. To be discussed with HR for

11/U2/2U2U - Coordinator Governance has been in discussion with LG Professionals and Steven I weedle re, conducting integrity & Code of Conduct Training. To be discussed with HR for a collaborative/whole of organisation approach.

05/05/2020 - Integrity & Code of Conduct Training has been put on hold due to COVID-19 restrictions. However, the Coordinator Governance will be reviewing the Code of Conduct for approval by Council in June 2020.

06/07/2020 - Updated Code of Conduct has been sent to all Councillors with acknowledgement of receipt to be completed/signed.

Last Updated: 06-Jul-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|--|---------------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.103 FR - Develop a policy outlining the various avenues on reporting any potential fraud, including anonymous reporting. | Kylie Bergmann - Coordinator Governance | Complet ed | 01-Jul-2019 | 31-Jul-2020 | 100.00% | 100.00% | GREEN |

A CTION PROGRESS COMMENTS:

10/11/2019 - Draft Policy to be presented to Corporate Discussion in February 2020 and for adoption by Council at the March 2020 Council Meeting.

11/02/2020 - Policy requires some further research before it can be presented to Corporate Discussion. Will likely be presented to Corporate Discussion in March2020 and Council in April 2020.

05/05/2020 - Completion date extended to 31 July 2020 due to staff responsibilities being diverted due to the COVID-19 response.

14/05/2020 - Amendments have been made to the Fraud & Corruption Control Policy to include various avenues on reporting any potential fraud, including anonymous reporting. This will be presented to Council in June as part of the Policy Manual Annual Review.

Last Updated: 14-May-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|--|---------------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.105 FR - Develop a conflict of interest register (for staff and Councillors) to record all conflict of interest. | Kylie Bergmann - Coordinator Governance | Complet ed | 13-Oct-2019 | 31-Jul-2020 | 100.00% | 100.00% | GREEN |

A CTI ON PROGRESS COMMENTS:

10/11/2019 - To be completed by March 2020.

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05/05/2020 - In progress.

30/07/2020 - Complete. The Conflicts of Interest Policy will also be discussed at upcoming Governance Inductions.

Last Updated: 30-Jul-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|--|---------------|-------------|-------------|---------------|---------|----------------|
| 5.1.1.109 FR - Communicate the internal processes and avenues for reporting any potential fraud including anonymous reporting. | Kylie Bergmann - Coordinator Governance | Complet ed | 13-Oct-2019 | 31-Jul-2020 | 100.00% | 100.00% | GREEN |

A CTI ON PROGRESS COMMENTS:

10/11/2019 - Process to be documented by March 2020.

05/05/2020 - Process to be communicated once the Policy has been finalised.

11/06/2020 - Fraud and Corruption Policy has been updated to include the avenues for reporting. This will be presented to the June Council Meeting. Following the meeting staff will be notified.

06/07/2020 - All staff have been notified via email of the update/change to the Fraud and Corruption Control Policy/Plan.

Last Updated: 06-Jul-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|---------------------------------------|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.110 FR - Develop and implement a Fraud Risk Register to capture, collate and analyse information about potential fraud. | Sian Appleton - Manager Governance | In Progress | 13-Oct-2019 | 30-Aug-2020 | 50.00% | 50.00% | GREEN |

ACTION PROGRESS COMMENTS:

10/11/2019 - To be completed by March 2020.

05/05/2020 - Completion date extended.

31/07/2020 - Register to be completed by 31 August 2020.

Last Updated: 14-Aug-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|--|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.172 FR - Implement a policy for the active protection of whistleblowers | Kylie Bergmann - Coordinator Governance | In Progress | 27-Jul-2020 | 30-Jun-2021 | 50.00% | 0.00% | GREEN |

ACTION PROGRESS COMMENTS:

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30/07/2020 - Paragraph on whistleblower protection included within the Fraud & Corruption Control Policy - to be presented at the November Audit Committee Meeting. Last Updated: 13-Aug-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|---|--|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.173 FR - Ensure there is a policy/procedure for how allegations of fraud and corrupt conduct whould be reported to the police, other appropriate law enforcement agency or other government body. | Kylie Bergmann - Coordinator Governance | In Progress | 27-Jul-2020 | 30-Jun-2021 | 50.00% | 0.00% | GREEN |

A CTION PROGRESS COMMENTS:

30/07/2020 - Paragraph on external reporting included within the Fraud & Corruption Control Policy - to be presented at the November Audit Committee Meeting. Also researching other local governments for management procedures on reporting misconduct.

Last Updated: 13-Aug-2020

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET % |
|--|--------------------|----------------|-------------|-------------|---------------|--------|----------------|
| 5.1.1.174 FR - Develop a policy requiring that recovery action be undertaken where there is clear evidence of fraud or corruption and where the likely benefits of such recovery will exceed the funds and resources invested in the recovery actions. | | In Progress | 27-Jul-2020 | 30-Jun-2021 | 50.00% | 0.00% | GREEN |

A CTION PROGRESS COMMENTS:

30/07/2020 - Paragraph on recovery action added within the Fraud & Corruption Control Policy - to be presented to Council at the November Audit Committee meeting. Last Updated: 13-Aug-2020

Procurement and Contracts

9.1 Procurement

| ACTION | RESPONSIBLE PERSON | STATUS | START DATE | END DATE | COMPLETE % | TARGET | ON TARGET |
|--|---|----------------|-------------|-------------|---------------|--------|-----------|
| 5.1.1.171 FR - Undertake "vendor audits" for high risk providers | Dawn Ronchi - Contract Procurement Officer | In Progress | 27-Jul-2020 | 30-Jun-2021 | 25.00% | 0.00% | GREEN |
| A CTION PROGRESS COMMENTS: | | | | | | | |

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Shire of East Pilbara Action and Task Progress Report

5/8/20 - New Suppliers are 'audited' prior to adding into Creditors system. Insurances & licences are checked, as are the ABN, Bank Accounts (to ensure these all match & are a legitimate entity). Process to be implemented to ensure existing high risk suppliers are audited throughout the year as well.

Last Updated: 05-Aug-2020

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- 5 CONFIDENTIAL MATTERS BEHIND CLOSED DOORS
- **6 GENERAL BUSINESS**
- 7 DATE OF NEXT MEETING

To be advised.

8 CLOSURE

8:16am.