



NOTICE OF MEETING

Members are advised that THE BAROSSA COUNCIL AUDIT COMMITTEE meeting will be held on Thursday 21 March 2019 in the Committee Room, 43-51 Tanunda Road, Nuriootpa, commencing at 10.30am.

Martin McCarthy
CHIEF EXECUTIVE OFFICER
THE BAROSSA COUNCIL

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11. **Confidential Agenda**
Nil

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13. Next Meeting

14. Close

NOTE: Should any Member be unable to attend, please contact the Presiding Member, Peter Brass, with comments on the Agenda items, for discussion at the meeting.



The Barossa Council

MINUTES OF THE MEETING OF THE AUDIT COMMITTEE OF THE BAROSSA COUNCIL

held on Tuesday 8 January 2019, commencing at 10.00am in the
Committee Room, 43-51 Tanunda Road, Nuriootpa

1. WELCOME

Mr Brass declared the meeting open at 10.00am and welcomed all in attendance, in particular, new Elected Member, Mr Russell Johnstone.

Ms Jo Thomas, Acting Chief Executive Officer, assumed the Chair.

2. MEMBERS PRESENT

Mr Peter Brass, Mr Ian Swan, Ms Tanya Johnston, Cr John Angas, Cr Russell Johnstone

Invited Staff Members

Ms Jo Thomas, Acting Chief Executive Officer

Mr Mark Lague, Manager Financial Services

Mr Derek Jones, Risk Advisor

Ms Annette Randall, Executive Assistant (Minute Secretary)

3. APOLOGIES

Mr Martin McCarthy, Chief Executive Officer

4. ELECTION OF CHAIRPERSON

B7455

Cr Johnstone nominated Peter Brass for the position of Audit Committee Chairperson.

MOVED Cr Johnstone that the Audit Committee recommends Peter Brass as its Chairperson until otherwise determined by the Committee and subject to Council approval.

Seconded Mr Swan

CARRIED 2018-19/14

PURPOSE

The Audit Committee, in accordance with its Terms of Reference, to appoint a Chairperson for the Committee.

REPORT

Appointment of Chairperson

Section 3.6 of the Audit Committee Terms of Reference states:

"The Committee shall, at its first meeting or at its first meeting following a Periodic Election, nomination a Chairperson, preferably from among the Independent Members. The nomination must be approved by Council. Should there be more nominations than required to fill the position, then all voting shall be by secret ballot."

ATTACHMENTS OR OTHER SUPPORTING REFERENCES

Nil

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTSCommunity Plan

How We Work – Good Governance

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6.2 Ensure that Council's policy and process frameworks are based on principles of sound governance and meet legislative requirements.

Legislative Requirements

Local Government Act 1999

FINANCIAL, RESOURCE AND RISK MANAGEMENT CONSIDERATIONS

There are no financial, resource or risk management considerations.

COMMUNITY CONSULTATION

Consultation is not required under legislation or Council policy.

Mr Brass assumed the Chair.

5. MEETING PROCEDURES
B7455

MOVED Cr Angas that the Audit Committee:

- (1) confirm that meetings will be conducted in accordance with the Local Government (Procedures at Meetings) Regulations 2013 ("the Regulations") (Parts 1 to 4), as per Clause 4.2 of its Terms of Reference;
- (2) determines, pursuant to S27 of the Regulations, that the Chairperson will have a deliberative vote on a matter arising for decision, but does not, in the event of a equality of votes, have a casting vote;
- (3) requests officers to undertake a review of the Terms of Reference, including clarification if the presiding member can move/second a motion, for presentation to the next Audit Committee meeting.

Seconded Mr Swan

CARRIED 2018-19/15

PURPOSE

The Audit Committee to consider its meeting procedures pursuant to the Local Government Act 1999 and Local Government (Procedures at Meetings) Regulations 2013.

REPORTIntroduction

Section 89 of the Local Government Act 1999 ("the Act") states:

89—Proceedings of council committees

- (1) Subject to this Act, the procedure to be observed in relation to the conduct of meetings of a council committee will be—
 - (a) as prescribed by regulation;
 - (b) insofar as the procedure is not prescribed by regulation—as determined by the council;
 - (c) insofar as the procedure is not prescribed by regulation or determined by the council—as determined by the council committee itself.

Discussion

The following statements are in the Audit Committee Terms of Reference (TOR) in relation to meetings and voting:

Clause 4.2 "The meetings of the Committee will be held in accordance with the Local Government (Procedures at Meetings) Regulations 2013 (the Regulations)."

Most formal committees are established under Parts 1, 3 and 4 of the Regulations. Part 2 has more onerous requirements. The Governance Advisor (GA) has provided clarification in relation to the Audit Committee.

Regulation 5 states:

5—Application of Part

The provisions of this Part apply to or in relation to—

- (a) the meetings of a council; and
- (b) the meetings of a council committee performing regulatory activities; and
- (c) the meetings of any other council committee if the council has, by resolution, determined that this Part should apply to that committee.

'Regulatory activity' is defined in the Local Government Act as 'an activity which involves the making or enforcement of by-laws, orders, standards or other controls under this or another Act'.

With reference to the TOR, the GA's view is that the Audit Committee makes or enforces 'standards or other controls' under the Local Government Act. Consequently, the meeting requirements/procedures prescribed under Part 2 of the Regulations must be followed. A copy of the Regulations is provided in Attachment 1 for information.

Clause 6.2 *"The Chairperson to have a determinative vote and a casting vote in the event of no majority being achieved."*

The above clause requires amendment as the presiding member of the Committee has a deliberative vote only and not a casting vote. Refer Section 27(3) of the Regulations below:

27—Voting at committee meetings

- (1) Subject to the Act and these regulations, a question arising for decision at a meeting of a council committee will be decided by a majority of the votes cast by the members present at the meeting and entitled to vote on the question.
- (2) Each member of a council who is a member of a council committee and who is present at a meeting of the committee must, subject to a provision of the Act to the contrary, vote on a question arising for decision at that meeting.
- (3) The presiding member of a council committee has a deliberative vote on a question arising for decision at the meeting but does not, in the event of an equality of votes, have a casting vote.

Clause 6.3 *"Members present must vote on all resolutions of the Committee. Proxy votes are not permitted."*

Advice to Officers has been that "all Members can move/second and should be voting, including the Chair". The Act and Regulations are silent in relation to the presiding member moving or seconding a motion. This process can be decided by the committee and recorded in the Minutes.

Summary and Conclusion

Officers recommend that the Terms of Reference be reviewed for discussion at the next Audit Committee meeting.

ATTACHMENTS OR OTHER SUPPORTING REFERENCES

Attachment 1: The Local Government (Procedures at Meetings) Regulations

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTSCommunity Plan

How We Work – Good Governance

Corporate Plan

6.2 Ensure that Council's policy and process frameworks are based on principles of sound governance and meet legislative requirements.

Legislative Requirements

Local Government Act 1999

Local Government (Procedures at Meetings) Regulations 2013

FINANCIAL, RESOURCE AND RISK MANAGEMENT CONSIDERATIONS

There are no financial, resource or risk management considerations.

COMMUNITY CONSULTATION

Consultation is not required under legislation or Council policy.

6. CONFLICT OF INTEREST DECLARATIONS

Nil

7. CONFIRMATION OF MINUTES FROM PREVIOUS MEETING

MOVED Cr Angas that the Minutes of the Audit Committee Meeting held 30 October 2018 be confirmed as a true and correct record of the proceedings of that meeting.

Seconded Mr Swan**CARRIED 2018-19/16****8. BUSINESS ARISING FROM PREVIOUS MINUTES**

Nil

9. CONSENSUS AGENDA**10. ADOPTION OF CONSENSUS AGENDA****10.1 ITEMS FOR EXCLUSION FROM THE CONSENSUS AGENDA**

Mr Brass - Item 9.1.5 Local Government (Ratepayer Protection and Related Measures) Amendment Bill 2018

MOVED Cr Johnstone that Consensus Agenda item 9.1.5 Local Government (Ratepayer Protection and Related Measures) Amendment Bill 2018, be withdrawn for Debate.

Seconded Ms Johnston**CARRIED 2018-19/17****10.2 RECEIPT OF CONSENSUS AGENDA**

MOVED Cr Angas that the Consensus Agenda reports, excluding item 9.1.5 Local Government (Ratepayer Protection and Related Measures) Amendment Bill 2018, be received.

Seconded Ms Johnston**CARRIED 2018-19/18****11. DEBATE AGENDA**

Not Confirmed**11.1.1****THE BAROSSA COUNCIL QUARTER 1– 2018/19 PERFORMANCE AND ACTIVITY REPORT****B3865**

Ms Thomas spoke to the report and answered questions from the Members.

Mr Lague drew attention to an error in the graph on page 98 of the Performance and Activity Report – *Operating Expenditure Against Budget*. The September Quarter information is incorrect and will be adjusted in the Second Quarter report.

MOVED Ms Johnston that the Audit Committee receives and notes The Barossa Council Quarter 1 – 2018/19 Performance and Activity Report.

Seconded Mr Swan

CARRIED 2018-19/19

PURPOSE

To provide Council's Quarter 1 – 2018/19 Performance and Activity Report on measures adopted within The Barossa Council Corporate Plan 2016/17 to 2019/20.

REPORTBackground

Since November 2016, Council and the Audit Committee has been presented with Quarterly Performance Reports on measures adopted within the Corporate Plan.

Introduction

The Barossa Council Quarter 1 – 2018/19 Performance and Activity Report provides performance results against Corporate Plan measures as at 30 September 2018. The report also includes a suite of activity measures, providing a snapshot of activity undertaken over the quarter in the delivery of key internal and external Council services under each Community Plan Theme.

Discussion

With the ongoing implementation of Council's holistic enterprise level strategic planning and reporting software (Magiq), officers are continuing to refine counting rules and formulas for the extraction and analysis of data, which may result in the revision of previously reported results where the data has been refined or cleansed. Where this is the case, the report will include a disclaimer regarding the nature of any changes implemented and its impact on the data.

Additionally, where justification exists, performance targets may be amended to reflect a more realistic figure. As above, where this is the case, the report will include an explanation of the nature of and justification for any changes implemented and its impact on the data.

Overall, it is anticipated that comparison data reported will become more longitudinal as the reporting system grows and allow the representation of trends over time. It is anticipated that this will facilitate an increase in evidence based strategic policy decision making by Council and the executive team.

Summary and Conclusion

The Barossa Council Quarter 1 – 2018/19 Performance and Activity Report is presented for Audit Committee information.

ATTACHMENTS OR OTHER SUPPORTING REFERENCES

The Barossa Council Quarter 1 – 2018/19 Performance and Activity Report.

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTSCommunity Plan

How We Work – Good Governance

Corporate Plan

A6.3 Align operational strategy to strategic objectives and measure organisational performance to demonstrate progress towards achieving our goals.

Legislative Requirements

Nil

FINANCIAL, RESOURCE AND RISK MANAGEMENT CONSIDERATIONS

Current resources are sufficient to provide ongoing quarterly reporting.

COMMUNITY CONSULTATION

Community consultation is not required under the Act or Council's Public Consultation Policy.

11.1.2

UPDATE – RISK MANAGEMENT PROGRAMS AND PROJECTS

B7531

Mr Jones spoke to the report and answered questions from the Members. The Risk Management Quarterly Report for the second quarter has not yet been finalised. Although the quarterly reports provide comprehensive information, Mr Brass requested that any high or extreme insurance claims be highlighted at future Audit Committee meetings to provide awareness of any pending financial and reputational risk considerations.

MOVED Cr Johnstone that the Audit Committee receives and notes the report on the progress of Risk Management Programs and Projects.

Seconded Cr Angas

CARRIED 2018-19/20

PURPOSE

To present a quarterly report on the progress of Risk Management programs and projects.

REPORT

Risk Management

The Risk Plan 2019-2021 was endorsed by the Corporate Management Team (CMT) on 24 October 2018. The Action Plan to support the Risk Plan 2019-2021 will be developed in Quarter 3 - 18/19. The Plan will be developed taking into account results from the recent Risk and WHS Evaluations, the Risk Services Review, Document Review Schedules and the Change Program.

Risk Management Action Plan

The 2019 Risk Management Action Plan will be developed in line with the Risk Plan 2019 – 2021 and signed off by the end of January 2019.

Strategic Risk Management

Further progress to Strategic Risk Management is pending the outcome of the Risk Evaluation conducted on 30 October and 1 November 2018. A preliminary version of this report was received by the Chief Executive Officer on 20 December 2018 and is yet to be accepted.

KPI Action Plan for 2018

The 2018 Key Performance Indicator Action Plan (KPI Action Plan), driven by Local Government Association Workers Compensation Scheme (LGAWCS), commenced in January 2018 and was evaluated in November 2018 as 97% complete.

Risk Services will draft a proposed KPI Plan for next year, drawing from the 2019 – 2021 Risk Plan.

Risk Management Quarterly Report

Council's Risk Management Quarterly Report for Quarter 2 - 2018/19 will be prepared in January 2019 and communicated to the Audit Committee at the following Committee meeting.

Emergency Management and Community Resilience

At the initial meeting of the new Council on 26 November 2018, Council resolved that the Risk Advisor be Council's representative on the Barossa Zone Emergency Management Committee.

A report detailing recommended locations for the eleven AEDs is on the agenda for the next Organisational Management Group (OMG) meeting. The report makes recommendations based on the following considerations:

- central to the townships
- easily accessed
- high exposure to all of the community, signage requirements to increase exposure
- Wi-Fi already available, or power for us to install a mobile Wi-Fi device
- is protected from direct sunlight
- well-lit or security installed
- public access AEDs already available from other parties
- access to health services; distance to nearest service
- how the storage cabinet might be mounted, directly or on posts

Business Continuity Plan (BCP)

A review of the BCP by the Risk Advisor and the Manager of Organisational Development and Risk is booked in January, prior to sending back onto Paul Kerrish for the next phase of the program.

Risk Team

In December 2018 the 0.8 FTE Administration Officer for the Risk team was successful in gaining full time employment with a neighbouring Council.

This provides opportunities for higher levels of collaboration with the neighbouring Council and an opportunity to review the structure of the Risk Team into the future.

ATTACHMENTS OR OTHER SUPPORTING REFERENCES

Nil

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTS

Corporate Plan



How We Work – Good Governance

- 6.2 Ensure that Council's policy and process frameworks are based on principles of sound governance and meet legislative requirements.
- 6.3 Align operational strategy to strategic objectives and measure organisational performance to demonstrate progress towards achieving our goals.

Legislative Requirements

Local Government Act 1999

Work Health Safety Act 2012

FINANCIAL, RESOURCE AND RISK MANAGEMENT CONSIDERATIONS

Addressed within the Report.

COMMUNITY CONSULTATION

Not required under legislation or Council's Public Consultation Policy.

11.1.3

RECOMMENDATION OF APPOINTMENT OF INDEPENDENT MEMBERS

B7126

Pursuant to S75 of the Local Government Act 1999, Mr Brass declared an actual conflict of interest in the matter 11.1.3 *Recommendation of Appointment of Independent Members*, as he was one of the applicants for the Independent Member positions. Mr Brass advised the Committee of the actual conflict of interest and left the meeting at 11.04am.

MOVED Cr Johnstone that Ms Thomas assume the Chair during Audit Committee consideration of Agenda item 11.1.3 *Recommendation of Appointment of Independent Members*.

Seconded Mr Swan

CARRIED 2018-19/21

Ms Thomas assumed the Chair.

Mr Lague provided clarification on paragraph 2 of the 'Discussion' section of the report. The Audit Committee, at its 30 October 2018 meeting, approved an interview panel "*consisting of the Chief Executive Officer, Manager Financial Services and two Elected Members appointed to the Audit Committee following the Elections*". The relevance being that Cr John Angas and Cr Russell Johnstone were appointed to the Audit Committee by Council on 26 November 2018, but the wording of the report suggests they were included on the selection panel prior to being elected.

MOVED Cr Angas that the Audit Committee:

- (1) Receives and notes the report regarding Recommendation of Appointment of Independent Members;
- (2) Recommends that Council appoint Mr Peter Brass and Ms Ellen Ewing as Independent Members of the Audit Committee for a two year term commencing on 27 January 2019, with one right of extension of the appointment.

Seconded Cr Johnstone

CARRIED 2018-19/22

PURPOSE

To make recommendation to Council regarding the appointment of two Independent Members to the Audit Committee, due to vacancies caused by effluxion of time in Mr Peter Brass and Ms Tanya Johnston's term on 27 January 2019.

REPORT

Introduction

As reported to the 30 October 2018 Audit Committee Meeting, Mr Peter Brass (Independent Chair) and Ms Tanya Johnston's term as Independent Members of the Audit Committee, expires on 27 January 2019. Council advertised for Expressions of Interest in local newspapers and on Council's website, with three submissions being received.

Discussion

Clause 3.8 of the Audit Committee Terms of Reference states "*All members of the Committee shall be appointed by Council on the recommendation of the Committee*".

The Audit Committee, at its 30 October 2018 meeting, approved an interview panel comprising Cr John Angas and Cr Russell Johnston, the Chief Executive Officer and Manager Financial Services. Three Expressions of Interest (EOIs) were received (one being after the closing date).

Interviews were held on 7 December 2018. The applicants' responses to the interview questions (Attachment 1) were considered. A summary of the Panel comments is provided in Attachment 2.

The Panel is satisfied with the interviewees' responses and understanding of the role required for this appointment. The Panel's opinion was that all three of the applicants demonstrated the required level of skill, expertise and experience to meet the requirements of Independent Committee Members. When combined with our ongoing Independent Member's experience, attributes and skills, applicant 1 (Mr Peter Brass) and applicant 2 (Ms Ellen Ewing) would provide greater diversity and balance to the membership. Further information can be provided at the Audit Committee meeting as/if required.

Clause 3.6 of the Audit Committee Terms of Reference states *"The Committee shall, at its first meeting or at its first meeting following the Periodic Election, nominate a Chairperson, preferably from among the Independent members. The nomination must be approved by Council. Should there be more nominations than required to fill the positions then all voting shall be by secret ballot."*

Mr Brass has expressed his desire to nominate as the Chair of the Audit Committee if his appointment is successful.

Summary

The Panel's opinion is that Mr Peter Brass and Ms Ellen Ewing demonstrate the required level of skill, expertise and experience to meet the requirements of an Independent Committee Member and asks the Audit Committee to recommend appointment by Council.

ATTACHMENTS OR OTHER SUPPORTING REFERENCES

Attachment 1: Interview Questions
Attachment 2: Applicant Summary Form

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTS

Community Plan



How We Work – Good Governance

Legislative Requirements

Local Government Act 1999

FINANCIAL, RESOURCE AND RISK MANAGEMENT CONSIDERATIONS

Financial

Costs related to advertising for the Independent Members are allowed for in the Budget.

Resource

Managed within existing officer resources.

Risk Management

Adherence to the Audit Committee Terms of Reference is a risk management tool.

COMMUNITY CONSULTATION

Not required under legislation or Council's Public Consultation Policy. A public notice requesting Expressions of Interest was placed in The Leader and Bunyip newspapers on 14 November 2018.

Mr Brass returned to the meeting at 11.09am and resumed the Chair.

11.1.4 ITEM EXCLUDED FROM THE CONSENSUS AGENDA

9.1.5 LOCAL GOVERNMENT (RATEPAYER PROTECTION AND RELATED MEASURES) AMENDMENT BILL 2018

Mr Brass led discussion on the Bill with the intent of providing feedback from the Audit Committee to Council and the Local Government Association (LGA).

Mr Swan left the meeting at 11.15am and returned at 11.16am.

Mr Lague advised that the South Australian Local Government Financial Management Group had also provided feedback to the LGA.

MOVED Cr Angas that the Audit Committee supports the feedback submitted by the Local Government Association of SA and Council's Corporate Management Team

Not Confirmed

comments in relation to the Local Government (Ratepayer Protection and Related Measures) Amendment Bill 2018 (the Bill), in particular:

- change to the title of the Bill - suggest it be called the 'Local Government (Ratepayer Accountability and Related Measures) Amendment Bill 2018';
- Clause 126 Membership of Audit committees remain as a mix of Independent and Elected Members;
- Clause 105A Publication of credit card expenditure to exclude personal names and clarify the purpose for expenditure.

Seconded Cr Johnstone

CARRIED 2018-19/23

A Bill for an Act to amend the Local Government Act 1999. SA Labour introduced the Bill into the Legislative Council in November 2018 as an alternative to the Government's rate capping bill. The LGA prepared a preliminary analysis of the Bill (copy attached) and requested feedback from councils by 30 November (Circular 45.7). Page 11/12 contains comments in relation to Amendment of section 126 – Audit Committees. The Audit Committee may consider it appropriate to provide comments or feedback to Council on the proposed reforms. The current inclusion of the Elected Members as members in the Audit Committee enables a direct relationship to Council and its discussions and detailed review at Financial, Governance, Audit and Risk areas. The Bill has passed the Upper House and is now subject to consideration in the Lower House where the Government has the majority numbers.

12. OTHER BUSINESS

Nil

13. NEXT MEETING

Late March 2019 – date to be advised

14. CLOSURE OF MEETING

As Ms Johnston did not seek reappointment to the Audit Committee, and with her current term ending on 27 January 2019, Mr Brass thanked her for her valuable contribution to the Committee and Council during her terms of service on the Audit Committee.

There being no further business, Mr Brass closed the meeting at 11.28am.

Confirmed:

Chairman:

Date:

AUDIT COMMITTEE

CONSENSUS

21 MARCH 2019

7.1 REPORTS FOR INFORMATION

7.1.1 AUDIT COMMITTEE WORK PLAN 2017/18

The Audit Committee Work Plan (*attached*) has been updated.

7.1.2 TIMETABLE – LONG TERM FINANCIAL PLAN AND ANNUAL BUDGET & BUSINESS PLAN

Council, at its meeting held 22 January 2019, endorsed the proposed timetable for the annual review, consideration and adoption of the Long Term Financial Plan 2019/20 to 2028/29 and the Annual Budget and Business Plan 2019/20. An excerpt from the Minutes is *attached*. The full Agenda report is available on Council's website at www.barossa.sa.gov.au

7.1.3 MID-YEAR BUDGET REVIEW (AS AT 31 DECEMBER 2018)

Council, at its meeting held 19 February 2019, adopted the Mid-year Budget Review 2018/19 (as at 31 December 2018) and the budget variations including reserve transfers contained therein. An excerpt from the Minutes is *attached*. The full Agenda report is available on Council's website at www.barossa.sa.gov.au

7.1.4 AUDIT COMMITTEE TRAINING

New Audit Committee members, Cr Russell Johnstone and Ms Ellen Ewing are registered to attend LGA facilitated Audit Committee training on 8 and 9 April 2019 (re-scheduled from 22 March 2019).

RECOMMENDATION:

That Reports for Information items 7.1.1 to 7.1.4 be received.

The Barossa Council Audit Committee Work Plan 2018/19

(4 meetings each financial year - October, December, February, June)

Attachment 7.1.1

Activity	Responsible Officer	Estimated Timing	Frequency	Current Status		Date Completed	Comments
						2018/19	
Financial Reporting							
Review and establish Audit Committee budget	Manager Financial Services	Feb Meeting	Annually				Refer Agenda item 9.1.3
Review draft Budget & LTFP - assumptions and indexation	Manager Financial Services	Feb meeting	Annually				Refer Agenda item 9.1.4
Review draft AB&BP document	Manager Financial Services	June meeting	Annually				
Review Treasury Management performance	Senior Accountant	Feb Meeting	Annually				Refer Agenda item 9.1.2
Review Budget Update – Quarterly as at 31 March	Manager Financial Services	June meeting	Annually				
Review Budget Update – Quarterly as at 30 September	Manager Financial Services	Dec meeting	Annually			8/01/2019	
Review Mid – year Budget Review – Quarterly as at 31 December	Manager Financial Services	Feb Meeting	Annually				Refer Agenda item 7.1.3
Receive draft Financial Statements for last financial year - Council and Nuriootpa Centennial Park Authority including Auditor attendance	Manager Financial Services	Oct meeting	Annually			30/10/2018	
Draft Report on Financial Results, including carry forwards	Manager Financial Services	Oct meeting	Annually			30/10/2018	
Receive adopted Financial Statements and Report on Financial Results for last year - Council and Nuriootpa Centennial Park Authority	Manager Financial Services	Dec meeting	Annually				Refer Agenda item 9.1.2
Review of Finance / Accounting Policies	Manager Financial Services		As required			30/10/2018	
Internal Controls and Risk Management Systems							

Activity	Responsible Officer	Estimated Timing	Frequency	Current Status		Date Completed	Comments
Review and recommend the approval of statements to be included in the annual report on internal control (Audit Committee TOR requirement)	Coordinator Internal Controls	Oct Meeting	Annually			30/10/2018	
Receive Internal Financial Controls Compliance report from Internal Control Co-ordinator	Coordinator Internal Controls	Each normal meeting	Quarterly			30/10/2018	
Review and recommend the approval of statements to be included in the annual report on risk management.	Risk Manager	Oct Meeting	Annually			30/10/2018	
Receive quarterly Performance and Activity Reports	CEO	Each normal meeting	Quarterly			- 30/10/18 - 8/1/19	Refer Agenda item 9.1.5
Receive Risk Management report from Risk Manager - Reports regarding WHS Planning Review, in particular, improvements made to the Organisational Risk Register	Risk Manager	Each normal meeting	Quarterly			- 30/10/18 - 9/1/19	Refer Agenda item 9.1.6 The regular reporting requirement reinforced from Audit Committee Self Assessment 2018
Receive directorate risk reports showing relevant risks and how they are being managed	CMT Members / Risk Manager		As required				Refer Agenda item 10. - Presentation by Director Development & Environmental Services
Report on Local Government Mutual Liability Risk Management Review	Risk Manager		As required				
Review decisions on interpretations of accounting standards taking into account the views of management and the external auditors.	Manager Financial Services		As required			30/10/2018	
External Audit							
Review any representation letter(s) requested by the external auditors	Manager Financial Services		As required			30/10/2018	
Discuss with management and/or external auditors any matters arising from the interim audits	Manager Financial Services		As required			30/10/2018	
Discuss with management and/or external auditors any matters arising from the year end audit	Audit Committee	Oct Meeting	Annually			30/10/2018	

Activity	Responsible Officer	Estimated Timing	Frequency	Current Status		Date Completed	Comments
Oversee the selection process for new auditors or reappointment of existing auditors	Audit Committee	prior to 30/6/17	By 30/6/17 and as required	Completed		4/05/2017	
Reporting Responsibilities							
Establish meeting schedule and work plan	Manager Financial Services	June Meeting	Annually				
Propose and provide information relevant to the review of Council's Strategic Management Plans	CEO		As required				
Risk Management/ Governance/Strategic/Finance policies review as required	Various Officers		As required				
Annual report on Audit Committee activities to Council	Audit Committee Chairperson	Oct meeting	Annually			30/10/2018	
Chairperson to present Audit Committee Annual Report to Council	Audit Committee Chairperson	Nov/Dec Council meeting	Annually			18/12/2018	
Review Council Annual Report	CEO	Oct Meeting	Annually			30/10/2018	
Complete Audit Committee annual self-assessment	Audit Committee	Dec meeting	Annually			30/10/2018	
Business Continuity Plan update	Risk Manager		As required			30/10/2018	
The annual LGAWCS KPI Audit Report	Risk Manager		Annually				
Other							
Appointment of Independent Members (2 year terms) Mr Brass - to 27 Jan 2019 Ms Johnston - to 27 Jan 2019 Mr Swan - 28/1/18 to 27/1/20	Manager Financial Services		As required				Peter Brass and Ellen Ewing appointed by Council to 27 Jan 2021
From Audit Committee Self Assessment 2018							
Induction/training of new Committee members			16				2 new members attending LGA Audit Committee training 8-9 April 2019

Activity	Responsible Officer	Estimated Timing	Frequency	Current Status		Date Completed	Comments
							Attachment 7.1.1
Council to consider internal audit function expansion beyond financial controls							
Audit Committee Membership - recruiting to ensure appropriate skill set and ability						8/01/2019	Peter Brass and Ellen Ewing appointed by Council at 22/1/19 Council Meeting
Meeting Actions							
(12/6/13 and 8/6/16 meetings) Policy and Process for treatment of Attractive Assets and review of current controls to ensure they are adequate	MFS			Work in progress			Stocktakes held; ICT and Depot Registers started; work progressing but considered low priority.
(5/10/17 meeting) Strategic Corporate Risks - CEO continue to provide reports and updated risk assessments to the Audit Committee as works are undertaken.	CEO		Quarterly			30/10/2018	Refer Agenda item 9.1.7 - Internal Management of the Strategic Risk Register
(5/10/17 meeting) Service Review and Continuous Improvement - CEO continue to provide reports and findings to the Audit Committee as works are undertaken.	CEO						
(22/5/18 meeting) MFS to prepare an action plan to record each matter identified in Bentley's draft report on Audit Findings, including the responsible person and date for completion, and that actions taken be reported to Council and the Audit Committee	MFS	2018/19 - various timelines		Work in progress			TRIM 18/35531 & 18/73278
(30/10/18 meeting) Officers prepare an action plan to record each matter identified in the Audit Committee Self-Assessment and that actions be reported to the Audit Committee	MFS					Oct-18	
(8/1/19 meeting) Officers undertake a review of the Terms of Reference, including clarification if the presiding member can move/second a motion	MFS						Deferred to the next Meeting
(8/1/19 meeting) Any high or extreme insurance claims be highlighted at future Audit Committee meetings to provide awareness of any pending financial and reputational risk considerations.	CEO						Refer Agenda item 9.1.6 Attachment 1

7.2.2.2**LONG TERM FINANCIAL PLAN 2019/20 to 2028/29 AND ANNUAL BUDGET & BUSINESS PLANNING TIMETABLE 2019/20****B7181**

Author: Manager Financial Services

MOVED Cr de Vries that Council endorses the proposed timetable for the annual review, consideration and adoption of the Long Term Financial Plan 2019/20 to 2028/29 and the Annual Budget & Business Plan 2019/20.

Seconded Cr Johnstone**CARRIED 2018-22/95****PURPOSE**

A business planning timetable is required to ensure Council meets key milestones for the annual review and adoption of the Long Term Financial Plan (LTFP) 2019/20 to 2028/29 and the consideration and adoption of the Annual Budget & Business Plan (AB&BP) 2019/20.

REPORTDiscussion

The Local Government Association has produced a number of information papers to assist Councils to meet requirements of the Local Government Act 1999 and the Local Government (Financial Management) Regulations 2011.

The proposed timetable for the annual review/update of the Long Term Financial Plan and the consideration/adoption of the Annual Budget & Business Plan is outlined in the table below:

Who	Activity	From	To
Council Meeting	Endorse AB&BP and LTFP timetable		22/1/19
Finance/Elected Members	New Initiatives and Capital Works to be submitted via website link – email will be sent to Elected Members with link.		22/1/19 Due date for submissions 22/2/19
Council Workshop	1st Review and discuss - EM's to be given the opportunity to put forward suggestions for the budget; CMT to present budget process, advisory groups' budget(s), priorities and pressures; strategic and long term aspirations; consider adopted long term indexing & assumptions		22/1/19 after Council meeting

Who	Activity	From	To
Council Workshop	2nd - General priorities and pressures – Review & Discuss - continue as/if required from the last workshop		6/2/19
Council Workshop	3rd - AB&BP and LTFP Prepare Rates report including: Rating Analysis of other Councils and consider other Council Rating Strategies to fund New Initiatives		6/2/19
Council	Due date for submissions/New initiatives from Elected Members		22/2/19
Advisory Groups	Due date for Advisory Groups' Budget submissions		22/2/19
Audit Committee	AB&BP and LTFP review To review indexing and assumptions		March 2019

Council Workshop	4th - AB&BP and LTFP Brief Council on EM and/or Community NI/Submissions, consider what to progress in the budget process		After 19/3/2019 Council meeting
Council Workshop	5th AB&BP and LTFP Review draft Operating Budgets & Capital Works submissions		After 16/4/2019 Council meeting
Council Management & Staff	<i>During January to April, budget preparation including rating and valuation modelling is undertaken</i>	Jan 2019	April 2019
Council Workshop	6th AB&BP and LTFP Summary - Rating & Valuation and New Initiatives review for DDR; update Operating budgets as/where required; LTFP annual review with KPIs'		1/5/2019
Audit Committee	AB&BP and LTFP review and endorse for consultation		May/ June 2019
Special Council Meeting	Endorse Nuriootpa Centennial Park Authority Budget Endorse draft AB&BP and LTFP for public consultation		14/5/19
	Public Notices in local papers and Council internet provision for web submissions		22/05/19
	Public Submissions period – 3 weeks AB&BP and LTFP	22/05/19	12/06/19
Special Council Meeting	1 hour period to be provided at a Special Council Meeting (coinciding with the Council workshop) - as per Local Government Act 1999, Sec 123 (4)(a)(i)(B)– “where members of the public may ask questions, and make submissions, in relation to the matter”		5/06/19
Council Meeting	AB&BP and LTFP Consideration of public submissions		18/06/19
Special Council Meeting	Adopt AB&BP and LTFP, Valuation and Rating		27/06/19

ATTACHMENTS OR OTHER SUPPORTING REFERENCES

Policy

Budget & Business Plan and Review Policy

LGA Information papers – No. 8 Long-term Financial Plan and No. 13 Annual Business Plan

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTS

Corporate Plan



How We Work – Good Governance

- 6.2 Ensure that Council's policy and process frameworks are based on principles of sound governance and meet legislative requirements.
- 6.3 Align operational strategy to strategic objectives and measure organisational performance to demonstrate progress towards achieving our goals.
- 6.4 Ensure that decisions regarding expenditure of Council's budget are based on an assessment of whole of life costs, risks associated with the activity and advice contained within supporting plans.

- 6.16 Provide contemporary internal administrative and business support services in accordance with mandated legislative standards and good practice principles.

Legislative Requirements

Local Government (Financial Management) Regulations 2011 - Reg 9(1)(b)
LGA Information paper no. 25 – Monitoring Council Budget Performance

FINANCIAL, RESOURCE AND RISK MANAGEMENT CONSIDERATIONS

Financial

To enable Council to make effective and strategic financial decisions, a regular up to date high level financial report is provided.

COMMUNITY CONSULTATION

Community Consultation was part of the original budget adoption process in June 2018, as per legislation. This report is advising Council of the monthly finance position compared to that budget.

7.2.2.2

MID – YEAR BUDGET REVIEW (AS AT 31 DECEMBER 2018)

B7181

Author: Senior Accountant

MOVED Cr Schilling that the Mid-year Budget Review for 2018/19 (as at 31 December 2018) be received and the budget variations including reserve transfers contained therein be adopted.

Seconded Cr Hurn

CARRIED 2018-22/114

PURPOSE

The Mid-year Budget Review for 2018/19 (as at 31 December 2018) is attached for Council consideration and adoption of budget variations.

REPORT

Discussion

The report provides information as to the financial position of Council, containing budget update reports which include: Executive Summary, Uniform Presentation of Finances, Key Performance Indicators, Summary of Operating Budget Variance Adjustments, Summary of Capital Budget Variance Adjustments and the Financial Statements.

The proposed variances between the original budget and this budget update are listed on the operating and capital budget adjustment pages. The report also includes details of new initiatives and capital expenditure adjustments.

ATTACHMENTS OR OTHER SUPPORTING REFERENCES

Attachment 1: Mid-year Budget Review 2018/19 (as at 31 December 2018)

Policy

Budget & Business Plan and Review Policy

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTS

Corporate Plan



How We Work – Good Governance

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- 6.3 Align operational strategy to strategic objectives and measure organisational performance to demonstrate progress towards achieving our goals.
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AUDIT COMMITTEE

CONSENSUS

21 MARCH 2019

7.2 CORRESPONDENCE

7.2.1 DATES – EXTERNAL AUDITOR – INTERIM AND FINAL AUDITS

Advice has been received from Bentleys SA that Council's interim audit will be held on 15-18 April 2019 and will cover all finance, rates, etc, along with updates on other areas including, but not limited to, internal control, risk, delegations and ICT access, contracts/tenders, procurement, asset management, AASBs and follow-up on items from audit management letters. The end of financial year balance day audit is scheduled from 23-25 September 2019.

7.1.2 LOCAL GOVERNMENT (RATEPAYER PROTECTION AND RELATED MEASURES) AMENDMENT BILL 2018

The Audit Committee, at its meeting held 8 January 2019, resolved the following:

***MOVED** Cr Angas that the Audit Committee supports the feedback submitted by the Local Government Association of SA and Council's Corporate Management Team comments in relation to the Local Government (Ratepayer Protection and Related Measures) Amendment Bill 2018 (the Bill), in particular:*

- *change to the title of the Bill - suggest it be called the 'Local Government (Ratepayer Accountability and Related Measures) Amendment Bill 2018';*
- *Clause 126 Membership of Audit committees remain as a mix of Independent and Elected Members;*
- *Clause 105A Publication of credit card expenditure to exclude personal names and clarify the purpose for expenditure.*

***Seconded** Cr Johnstone*

CARRIED 2018-19/23

The above feedback was submitted to the Local Government Association on 15 January 2019 (refer attached).

RECOMMENDATION:

That Correspondence items 7.2.1 and 7.2.2 be received.

Annette Randall

From: Annette Randall
Sent: Tuesday, 15 January 2019 2:36 PM
To: 'Alicia Stewart'
Subject: Feedback - Local Government (Ratepayer Protection and Related Measures) Amendment Bill 2018
Attachments: Excerpt from Minutes of Audit Committee Meeting - The Barossa Council.pdf

Hi Alicia

I have attached an Excerpt from the draft Minutes of Council's Audit Committee Meeting held on 8 January 2019 relating to their feedback on the Local Government (Ratepayer Protection and Related Measures) Amendment Bill 2018. The Chair, Peter Brass, requested that feedback be forwarded to the LGA. Kind regards
 Annette

From: Alicia Stewart [mailto:alicia.stewart@lga.sa.gov.au]
Sent: Tuesday, 8 January 2019 4:11 PM
To: Annette Randall
Subject: RE: Local Government (Ratepayer Protection and Related Measures) Amendment Bill 2018

Hello Annette

I am happy to receive any feedback you may have.

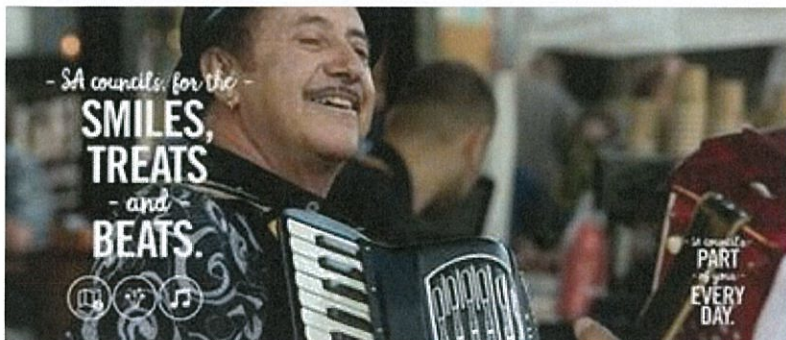
I am preparing the final submission at the moment and it will be presented to the LGA Board on 31 January.

In order to consider and incorporate your feedback into the LGA submission, I would need to receive it no later than COB 15 January.

Kind Regards

Alicia Stewart • Director Governance and Legislation • Local Government Association

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EXCERPT FROM MINUTES

The Barossa Council Audit Committee Meeting held 8 January 2019

**9.1.5 LOCAL GOVERNMENT (RATEPAYER PROTECTION AND RELATED MEASURES)
AMENDMENT BILL 2018**

Mr Brass led discussion on the Bill with the intent of providing feedback from the Audit Committee to Council and the Local Government Association (LGA).

Mr Swan left the meeting at 11.15am and returned at 11.16am.

Mr Lague advised that the South Australian Local Government Financial Management Group had also provided feedback to the LGA.

MOVED Cr Angas that the Audit Committee supports the feedback submitted by the Local Government Association of SA and Council's Corporate Management Team comments in relation to the Local Government (Ratepayer Protection and Related Measures) Amendment Bill 2018 (the Bill), in particular:

- change to the title of the Bill - suggest it be called the 'Local Government (Ratepayer Accountability and Related Measures) Amendment Bill 2018';
- Clause 126 Membership of Audit committees remain as a mix of Independent and Elected Members;
- Clause 105A Publication of credit card expenditure to exclude personal names and clarify the purpose for expenditure.

Seconded Cr Johnstone

CARRIED 2018-19/23

AUDIT COMMITTEE

COORDINATOR INTERNAL CONTROL

21 MARCH 2019

9.1.1

INTERNAL FINANCIAL CONTROL REPORT

B7455

PURPOSE

To provide an update on the status of Internal Financial Control work.

RECOMMENDATION

That the report from the Coordinator Internal Control on the status of Internal Financial Control work, be received and noted.

REPORT

Refer to the Internal Financial Control Report attached.

ATTACHMENTS OR OTHER SUPPORTING REFERENCES

Attachment: Internal Financial Control Report for September 2018 to February 2019

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTS

Community Plan



How We Work – Good Governance

Corporate Plan

How We Work – Good Governance

- 6.2 Ensure that Council's policies and process frameworks are based on principles of sound governance and meet legislative requirements.
- 6.4 Ensure that decisions regarding expenditure of Council's budget are based on an assessment of whole of life costs, risks associated with the activity and advice contained within supporting plans.

Legislative Requirements

Local Government Act 1999 – Section 125, 126, 129 (1) (b)

Local Government (Financial Management) Regulations 2011, 14(e)

FINANCIAL, RESOURCE AND RISK MANAGEMENT CONSIDERATIONS

The regular monitoring and review of Council's financial internal controls and risk assessments will significantly facilitate the on-going safeguarding of Council assets. The control and review of risks is a core officer function and responsibility.

COMMUNITY CONSULTATION

Not required under legislation or Council's Public Consultation Policy.

INTERNAL FINANCIAL CONTROL REPORT

Date: 14/3/2018

To: CMT and Audit Committee

From: Nicole Rudd – Coordinator Internal Control

Subject: Internal Control activity – September 2018 to February 2019

Response: Not needed – for information only.

Legislative Requirement

Local Government Act, 1999

- Section 125
- Section 129(1)(b)
- Section 129 (3) (b)
- Section 130

Local Government (Financial Management) Regulations 2011

- Part 2, Regulation 4(2), (4), (5) (a-c)
- Part 6, Division 1, Regulation 19 (1)(b), (2), (3)

The following report has been developed to assist the Corporate Management Team (CMT) in the monitoring, action and review of the Internal Financial Control function of Council.

This report is also provided to the Audit Committee for information on the status of Internal Financial Control.

1. Internal Financial Control Self-Assessments (ControlTrack)

The new Risk Manager and Control Manager modules are now in place and Council has a contract for using the self-assessment tool with ControlTrack for the next three years.

The tool contains 92 financial risks and 260 financial controls used to mitigate those risks.

Within the tool, all risks have now had an inherent risk rating applied to them. This resulted in the following:

Summary of Risks

Rating	Inherent	Residual
Extreme	21	tba
High	41	tba
Medium	23	tba
Low	7	tba
Total	92	92



As time permits, further work is being done on completing the Residual Risk ratings for all financial risks.

2. External audits/correspondence from Auditors

Nothing further to report.



3. Summary of previous testing carried out

3.1 Sept to Dec 2017 (see 17/94461 for further details)

- Payroll – authorising payroll payments process
- Cash drawer discrepancies – process to monitor and report discrepancies where necessary
- Mt Pleasant Bowling Club – Community Loan – identified a process is required for monitoring the requirements of loan agreements eg insurance, financials etc.
- Barossa Community Mens Shed – documented financial information formalised
- GST Clauses in Council Agreements / Contracts – GST clauses clarified.
- Cash floats and Petty Cash Floats – reminder to OMG members to ensure cash floats are recorded on balance sheet.

3.2 Jan to Mar 2018 (see 18/592 for further details)

- Accounts Payable – bank account checking
- Finance Policies Review (Prudential Management and Budget & Business Plan & Review Policies)
- Corporate Cards – update on expansion program
- Construction Industry Training Levy – successful audit
- Finance Department – review of Sub-Delegations

3.3 Apr to Aug 2018 (see 18/43346 for further details)

- Cash and Petty Cash Float EOY Reconciliations
- Banking – Review of Daily Limit
- Accounts Payable transactional compliance checking
- Payment Method Review including cash transaction review

4. This periods Inspections/Internal Audits /Compliance Testing/Reviews

4.1 **Payment Card Industry Data Security Standards (PCI DSS)**

A review of the mandatory requirements which apply around the storing and processing of customer credit card details has been carried out with an external party and Council has been marked as compliant.

Together with this process – we have a Credit Card Payments – Card Not Present process which has been communicated to all staff who carry out any type of receipting processes to ensure they are aware of the process.

Under advisement by our NAB banker, further ICT checks have been run to ensure that no credit card information is being captured in Pathway as there has been another Pathway client of NAB who was found to have card information stored within their system. This check has been carried out and no credit card information has been found.

A reminder to all staff advising them of the importance the correct handling of customer credit card details will be provided shortly.

4.2 **Barossa Visitor Centre Stock Adjustment Process review.**

I have been working with the BVC to record and provide guidance in the way the stock take and stock adjustment process is recorded and then how and when some exception reporting can be carried out to monitor the stock movements, write-offs etc. Delegations for these actions are also being reviewed with the Governance Officer to ensure the correct Sub-delegations have been issued.

4.3 Items on the go which will be reported at subsequent meetings:

- **Fees and Charges Register review** (18/35565)
Checking of the 2017/18 fees and charges adopted by Council against the receipt codes and the general ledger to ensure the GST treatment is consistent and that the correct fees are being charged.
- **Transactional Banking fees and charges review** (18/12690)
- **Residual Risk Assessment (ControlTrack)** for all remaining Financial Risks to determine the highest areas of Financial Risk for the organisation.
- **Fraud and Corruption Risk Assessment** – review of the signed off document in line with:
 - o a 'Sample Testing of our Organisations ability to prevent fraud' which was carried out back in 2004 for Dean Newbery and Partners.
 - o information from a document 'Conducting a fraud risk scenario assessment' which was presented by the Institute of Internal Auditors at the International conference in May 2018; and
 - o The Fraud and Corruption Prevention Policy adopted by Council 20/5/2014

5. Finance Policy & Process Development/Review

Document Register Code	Finance Document	Council Approval Date	Audit Committee Date	Review Date	Status
TBCPOC4050	Asset Accounting Policy	27/6/18		26/6/19	Under review
TBCPOC4400	Budget and Business Plan and Review Policy **	15/5/18	16/5/18	14/5/22	Current
TBCPOC4650	Debt Recovery Policy	21/7/15	24/6/15	1/11/18	Under review
TBCPOC4750	Disposal of Land and Other Assets Policy	6/11/18	30/10/18	1/10/22	Current
TBCPOC4200	Funding Policy	21/7/15	24/6/15	1/6/19	Under review
TBCPOC4050	Procurement Policy **	19/6/18		19/6/22	Current
TBCPOC4700	Prudential Management Policy	15/5/18	16/5/18	14/5/22	Current
TBCPOC4350	Rates Hardship Policy	21/6/17		1/3/19	Under review
TBCPOC	Supplementary Hardship Policy for Residential Water Service Customers	21/6/17		1/9/19	Current
TBCPOC4550	Rating Policy	21/7/15	24/6/15	1/11/18	Under review
TBCPOC4150	Treasury Management Policy	21/7/15	24/6/15	1/6/19	Under review

Comments:

As per 2.1.2(i) of the Audit Committee's Terms of Reference, the accounting policies of Council together with any changes to them are to be reviewed and questioned by the Audit Committee.

** Both the process documents (which are extensive documents) for the Budget and Business Plan and Review Policy and the Procurement Policy are currently under review and are almost to consultation stage.

6. Audit Committee – Internal Control Action Items

Provide progress against action items within the minutes of the Audit Committee Meetings		
Meeting Date	Action	Status
	None to report	

7. South Australian Local Government Financial Management Group (SALGFMG) - Internal Control Working Party

No further meetings have been held at this stage.

8. South Australian Local Government Internal Audit Network (SALGIAN) - Internal Auditors

I attended a meeting on the 14th February 2019 with the following Agenda topics:

- Galpins provided an overview of using Continuous Audits for larger projects.
- Discussions around Audit Plans and what other Councils are including in theirs. This largely depended on the size of the Council and the resourcing to carry out Internal Audits, together with the level of detail the audits or reviews take.
- Guest speaker – Sarah Westmoreland, Finance Manager, Adelaide Airport Ltd. Sarah spoke on her experiences in internal audit at the Adelaide Airport.
- There were discussions around what programs Councils were using for the Risk Registers and Control Self Assessment Tools. Skytrust and ControlTrack were both mentioned. Our Council currently uses ControlTrack for the monitoring of Internal Financial Controls and is investigating the use of the same software for the Strategic and Operational Risk Registers. Skytrust is being used for the Training Register.

This group of Council representatives provide a great resource for our Council. The group shares the scopes of internal audits and compliance testing that they are doing and provide documentation to smaller Council's that don't have the full resources to always do them on their own.

AUDIT COMMITTEE

MANAGER FINANCIAL SERVICES

21 MARCH 2019

9.1.2

TREASURY MANAGEMENT REVIEW

B2237

Author: Senior Accountant

PURPOSE

Pursuant to Section 140 of the Local Government Act 1999, and in accordance with Council's Treasury Management Policy, Council must undertake an annual performance review of its Treasury Management activities.

RECOMMENDATION

That the report on Council's 2018 Treasury Management activities be received and noted.

REPORT

The key principles within Council's Treasury Management Policy are as follows:

Council will:

- Maintain target ranges for its Net Financial Liabilities ratio;
- Generally only borrow funds when it needs cash and not specifically for particular projects;
- Not retain and quarantine money for particular future purposes unless required by legislation or agreement with other parties;
- Apply any funds that are not immediately required to meet approved expenditure (including funds that are required to be expended for specific purposes but are not required to be kept in separate bank accounts) to reduce its level of borrowings or to defer and/or reduce the level of new borrowings that would otherwise be required.

Comments regarding the 2018 performance with regard to the above principles are outlined below:

Net Financial Liabilities Ratio

Council's policy regarding its net financial liabilities is that they shall not exceed 100% of total operating revenue (adopted February 2010).

As at 30 June 2018, Council's net financial liabilities represented 7% of total operating revenue, and it is projected to increase to 38% as at 30 June 2019 (as per Budget Review as at 30 September 2018). Accordingly, Council is currently operating within its policy threshold.

Loan Borrowings

Council's policy relative to loan borrowings states that the use of internal reserves be considered prior to consideration of external loan borrowings. The total variable borrowings for Nuriootpa Centennial Park Authority are currently \$1,160,000. A repayment of \$100,000 principal was made in July 2018. Two new fixed debenture loans

were borrowed in 2018: \$80,000 (Debenture 113) - this is for a community group loan for the Barossa Valley Machinery Preservation Society Inc and will be repaid to Council in half yearly repayments and \$1,750,000 (Debenture 114) – this was for accelerated road sealing and footpath works through the State Local Government Infrastructure Partnership (SLGIP) grant funded program and was available at a reduced loan interest rate.

The use of internal cash reserves has continued to be used in funding Council's capital works programs and has subsequently minimised the net interest cost to Council.

A summary of the fixed interest rate borrowings are shown below:

Debenture Loan Summary				
No.	Loan Amount	Interest Rate	Final Payment Date	Principal Outstanding as at 31 December 2018
98	2,000,000	6.65%	15/01/19	102,949
100	1,954,200	6.45%	15/03/20	289,030
101	2,500,000	6.24%	15/03/21	591,203
102	5,000,000	6.62%	16/10/21	1,423,194
103	100,000	6.80%	15/11/21	28,704
104	2,900,000	6.90%	15/03/22	959,882
105	7,000,000	7.02%	16/11/24	4,974,492
106	2,000,000	6.85%	15/04/26	1,247,337
107	113,000	4.75%	16/07/22	51,637
108	515,000	6.20%	15/01/34	446,893
109	125,000	5.30%	15/09/29	100,586
112	180,000	4.25%	15/12/27	165,212
113	80,000	4.50%	15/02/28	76,789
114	1,750,000	3.60%	15/08/28	1,750,000
				12,207,908

A summary of the variable interest rate borrowings are shown below:

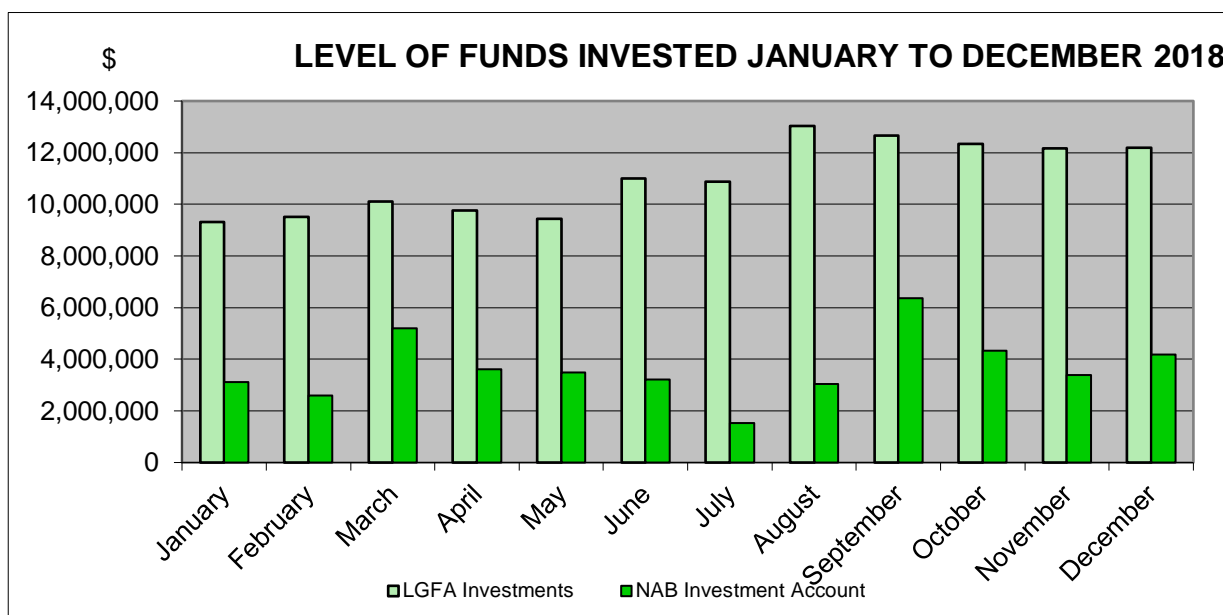
Cash Advance Loan Summary (Nuriootpa Centennial Park Authority)				
No.	Total Facility Loan Amount	Current Interest Rate	Facility End Date	Principal Outstanding as at 31 December 2018
CA110	1,000,000	3.75%	15/06/20	1,000,000
CA111	260,000	3.75%	15/03/21	160,000
				1,160,000

Investments

Council currently holds investments with National Australia Bank (NAB) and the Local Government Finance Authority (LGFA). Council's total investments as at 31 December 2018 were:

	Variable Interest Rate \$'000	≤ 1 year Fixed \$'000	> 1 year ≤ 5 years \$'000	> 5 years \$'000	TOTAL \$'000	Interest Rate Range 2018
LGFA	3,002	9,187	0	0	12,189	1.50% to 2.20%
NAB Investment A/c	4,190	0	0	0	4,190	2.00%
TOTAL	7,192	9,187	0	0	16,379	

The level of funds invested during the year is presented in the graph below. The graph excludes Council's separate operating bank account which was maintained at minimum working capital levels in accordance with the Policy.



ATTACHMENTS OR OTHER SUPPORTING REFERENCES

Policy

Treasury Management Policy

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTS

Community Plan



How We Work – Good Governance

Corporate Plan

- 6.2 Ensure that Council's policy and process frameworks are based on principles of sound governance and meet legislative requirements.
- 6.3 Align operational strategy to strategic objectives and measure organisational performance to demonstrate progress towards achieving our goals.
- 6.16 Provide contemporary internal administrative and business support services in accordance with mandated legislative standards and good practice principles.

Legislative Requirements

Local Government Act 1999, Section 140

FINANCIAL, RESOURCE AND RISK MANAGEMENT CONSIDERATIONS

Financial

A review of investments and borrowings is required as per the Treasury Management Policy and Local Government Act

COMMUNITY CONSULTATION

No separate consultation is required under Council's Public Consultation Policy.

AUDIT COMMITTEE

MANAGER, FINANCIAL SERVICES REPORTS

21 MARCH 2019

9.1.3

2019/20 AUDIT COMMITTEE BUDGET

B8923

PURPOSE

To consider a draft 2019/20 budget for the Committee's operations.

RECOMMENDATION

That the Audit Committee 2019/20 Consultant budget of \$XXX and Training budget of \$XXX be endorsed for consideration by Council.

REPORT

The budget for 2019/20 is being prepared by completing the base budget for activities that are externally and internally required by the Audit Committee.

In the Audit Committee budget, two items that require review are Consultant and Training/Seminar expenditure.

In the past, consultants have been used to undertake reviews and compliance checks for taxation and accounting, along with purchase and implementation of the internal control tracking tool. The training budget has previously been used by independent members to attend LGA programs.

A proposed 2019/20 budget to support the operations of the Audit Committee is outlined in the following table:

Audit Committee Financial Statement as at 19 February 2019:

	February YTD Actuals	Original Budget 2018/19 + Q2 Adj	Budget % YTD	Draft 2019/20 Budget
496 - Audit Committee				
Salaries & related costs (preparation of reports/agendas, attendance at meetings – CEO, Director C&CS, Manager Financial Services, Minute Secretary)	12,868	21,594	60%	21,924 *
Consultants (provision for sundry project work undertaken as part of Committee work plan or specifically requested by Council)	0	0	0%	0
Training / Seminar expenses	0	1,000	0%	1,000 ~
Sitting Fees (Independent Members)	2,780	5,745	48%	5,810 #
Advertising	652	700	93%	700 ~
Insurance & Other	270	270	100%	525
Total 496 - Audit Committee	16,570	29,309	57%	29,959

* Provides for expected increase for salary costs for Enterprise Agreement. Depending on cost centre allocations, this amount may change when the budget is finalised.

~ Training and advertising expenses provide for one independent member appointment if required.

- # Provides for Sitting Fees as follows: Chairperson \$575 and Independent Members x 2 - \$370 to attend 4 meetings each and the annual report attendance at Council meeting for the Chairperson; to be considered and adopted by Council – only provided for Audit Committee members' information. The Sitting fee will be considered and approved by Council as part of the 2019/20 budget process.

ATTACHMENTS OR OTHER SUPPORTING REFERENCES

Policy

Budget & Business Plan and Review Policy

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTS

Corporate Plan



How We Work – Good Governance

- 6.4 Ensure that decisions regarding expenditure of Council's budget are based on an assessment of whole of life costs, risks associated with the activity and advice contained within supporting plans.
- 6.16 Provide contemporary internal administrative and business support services in accordance with mandated legislative standards and good practice principles.

Legislative Requirements

Local Government (Financial Management) Regulations 2011 - Reg 9(1)(b)

LGA Information paper no. 25 – Monitoring Council Budget Performance

FINANCIAL, RESOURCE AND RISK MANAGEMENT CONSIDERATIONS

Financial

Funding to support the operations of the Audit Committee is required to ensure resources are adequate to undertake this vital role within Council and is included in the annual budget.

As part of the draft Budget 2019/20, Council has approved a zero based budget process where costs should be reviewed to actual \$ required for that ongoing service provision. Selected costs are increased by indexation where agreements, contracts, EBA, licensing, arranged service charges, etc provide for that option, along with costs outside of our control, can be increased where the service provider(s) initiate increases, ie fuel, postages.

The Independent Members - Sitting Fee is not subject to agreement or contract but should ensure Council can attract and retain qualified and experienced people and receive value for service provision. When compared to other Councils, The Barossa Council sitting fee is at the lower end of the scale. It is recommended that Council increase the fee by the CPI for Adelaide, last update December 2018 being 1.6%. In 2018/19, the sitting fee for the Chairperson is \$565 and Independent Members is \$365, adding 1.6% rounded to the nearest \$5. The proposed amount for 2019/20 financial year is \$575 and \$370 respectively. The Sitting Fee will be included in the draft 2019/20 budget to be considered and approved by Council.

COMMUNITY CONSULTATION

Public Consultation will be included as part of the draft 2019/20 Budget/Business Plan consultation and adoption process.

AUDIT COMMITTEE

MANAGER, FINANCIAL SERVICES REPORTS

21 MARCH 2019

9.1.4

REVIEW DRAFT BUDGET 2019/20 AND ANNUAL REVIEW LONG TERM FINANCIAL PLAN INDEXATION AND ASSUMPTIONS

B7181

PURPOSE

As per the 2019/20 Annual Budget/Business Plan timetable endorsed by Council in January 2019, the Audit Committee needs to receive and can provide comment on the indexation and assumptions for the Annual Budget & Business Plan (AB&BP) 2019/20 and Long Term Financial Plan (LTFP) 2019/20 to 2028/29.

RECOMMENDATION

That the Audit Committee notes the indexation and assumptions for the Annual Budget & Business Plan 2019/20 and Long Term Financial Plan 2019/20 to 2028/29.

REPORT

Overview

The review of indexing and assumptions for the Annual Budget & Business Plan 2019/20 and Long Term Financial Plan (LTFP) 2019/20 to 2028/29 has been considered by Council at the information briefing Workshop on 22 January 2019. This process enables Council to take a long term view and 'set the big picture' before starting the annual budget process.

Key Assumptions and Enhancements

Each annual review process provides an opportunity to introduce new assumptions or enhance the information base as required, using the existing indexation and assumptions.

The main assumptions and indexation being considered during this early stage of budget preparation is the income and expenditure indexation. As included in the presentation paper, Council reviews the proposed rate increase and the indexation application to operational expenditure.

The LGPI (Local Government Price Index) is used as a base for the plan(s) and considering local needs and requirements to meet service levels, including external influences such as service contracts where fuel prices and employment costs may vary the service cost. The Local Government Price Index (LGPI) increase for 12 months to 30 September 2018 was 2.9%; (noting the Adelaide CPI for the 31 December period was 1.6%).

As the cost indexation has been reducing from previous adopted Long Term Financial Plans, Council will reconsider the cost of delivering services and any changes to the level of service to ensure income or charges for the services are appropriate. The following indexation is sourced from the adopted LTFP.

Income

Rate increases to fund and ensure service level provision is maintained in line with revised sustainability requirements.

Both the residential and non-residential rate revenue (excluding growth) were budgeted to increase at 2.5% in 2019/20, and the years following at 2.5% per annum plus growth at 1%.

Due to the new contract for waste collection & disposal a review of the three services provided and cost recovery service charge is currently underway. The adopted Waste Service Rate Revenue indexation rate in the LTFP last year was budgeted to increase at:

2019/20 to 2022/23	2.5%
2023/24 to 2027/28	2.25%

The adopted Community Wastewater Management Systems Service Rate Revenue (excluding growth) indexation rates in the LTFP from last year was budgeted to increase at 2.5% for 2019/20 and then 2.5% and 2.75% alternate years for the life of the plan. An ongoing review of the service charge is underway for requirements from ESCOSA, including the cost of Capital and Risk, along with internal review of executive, administration and governance operating costs.

Other income indexation has a base increase of 2.0%.

Expenditure

Operating expenditure indexation will be assessed individually for internal and external factors as follows:

- employee costs at the enterprise bargaining agreements budgeted around 2.5%;
- contractors and materials will be reviewed to meet service requirements using a Zero Based Budget basis due for the 19/20 year (the current adopted plan is at 2.5%) where costs should be reviewed to actual \$ required for that ongoing service provision;
- selected costs are increased by indexation where agreements, contracts, licensing, arranged service charges, etc provide for that option, along with costs outside of our control; these will be considered where the service provider(s) initiate increases, ie fuel, postage;
- other operating costs have been isolated as increases to these are unique, eg. power – 2.5%, water - 2.5%, insurance – 4%, plus changes to service provision, ie. increased number of services provided (eg. no. of waste collection(s)) or usage (eg. water usage at parks and gardens). All indexation quoted is from the adopted LTFP, to be reviewed.

Long term plans for Capital expenditure will be reassessed, ensuring funding is allocated for renewal and replacement assets along with an allowance for new discretionary projects.

ATTACHMENTS OR OTHER SUPPORTING REFERENCES

Nil

Policy

Budget & Business Plan and Review Policy

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTS

Corporate Plan



How We Work – Good Governance

- 6.2 Ensure that Council's policy and process frameworks are based on principles of sound governance and meet legislative requirements.
- 6.3 Align operational strategy to strategic objectives and measure organisational performance to demonstrate progress towards achieving our goals.
- 6.4 Ensure that decisions regarding expenditure of Council's budget are based on an assessment of whole of life costs, risks associated with the activity and advice contained within supporting plans.
- 6.9 Provide access to Council's plans, policies and processes and communicate with the community in plain English.
- 6.16 Provide contemporary internal administrative and business support services in accordance with mandated legislative standards and good practice principles.

Legislative Requirements

Local Government Act 1999 Section 123

Local Government (Financial Management) Regulations 2011

FINANCIAL, RESOURCE AND RISK MANAGEMENT CONSIDERATIONS

Financial

Long term financial planning is an ongoing regular process. As new information is included in the planning process, the plans are reviewed and updated.

Each annual review process provides an opportunity to introduce new assumptions or enhance the information base as required.

COMMUNITY CONSULTATION

Included as part of the draft 2019/20 Budget/Business Plan consultation and adoption process.

AUDIT COMMITTEE

CHIEF EXECUTIVE OFFICER REPORT

21 MARCH 2019

9.1.5

THE BAROSSA COUNCIL QUARTER 2 – 2018/19 PERFORMANCE & ACTIVITY REPORT 19/7295

Author: Manager Strategic Projects

PURPOSE

To provide Council's Quarter 2 – 2018/19 Performance and Activity Report on measures adopted within The Barossa Council Corporate Plan 2016/17 to 2019/20.

RECOMMENDATION

That the Audit Committee receives and notes The Barossa Council Quarter 2 – 2018/19 Performance and Activity Report.

REPORT

Background

Since November 2016, Council and the Audit Committee has been presented with Quarterly Performance Reports on measures adopted within the Corporate Plan.

Introduction

The Barossa Council Quarter 2 – 2018/19 Performance and Activity Report (*attached*) provides performance results against Corporate Plan measures as at 31 December 2018. The report also includes a suite of activity measures, providing a snapshot of activity undertaken over the Quarter in the delivery of key internal and external Council services under each Community Plan Theme.

Discussion

With the ongoing implementation of Council's holistic enterprise level strategic planning and reporting software (Magiq), officers are continuing to refine counting rules and formulas for the extraction and analysis of data, which may result in the revision of previously reported results where the data has been refined or cleansed. Where this is the case, the report will include a disclaimer regarding the nature of any changes implemented and its impact on the data.

Additionally, where justification exists, performance targets may be amended to reflect a more realistic figure. As above, where this is the case, the report will include an explanation of the nature of and justification for any changes implemented and its impact on the data.

ATTACHMENTS OR OTHER SUPPORTING REFERENCES

Attachment: The Barossa Council Quarter 2 – 2018/19 Performance and Activity Report.

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTS

Community Plan



How We Work – Good Governance

Corporate Plan

A6.3 Align operational strategy to strategic objectives and measure organisational performance to demonstrate progress towards achieving our goals.

Legislative Requirements

Nil

FINANCIAL, RESOURCE AND RISK MANAGEMENT CONSIDERATIONS

Current resources are sufficient to provide ongoing quarterly reporting.

COMMUNITY CONSULTATION

Community consultation is not required under the Act or Council's Public Consultation Policy.



QUARTERLY PERFORMANCE & ACTIVITY REPORT

Quarter 2 – 2018/2019

Contents



Theme 1 – Natural & Built Heritage 5



Building Rules Consent Processing 5

Quarter 2 indicator revised and target under review – please see commentary for further explanation on the reivew of this indicator.



Planning Consent Processing 7

Quarter 2 indicator revised and target under review – please see commentary for further explanation oon the review of this indicator.

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Target exceeded

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Asset Sustainability 14

Target not met for 2017/18.



Asset Spending Ratio 16

2017/18 target achieved.

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Nuisance and Environmental Request Resolution Rate 20

Target not met for Quarter 2.






Waste Disposal Rate 23

Target of < 60.8% exceeded with a total of 59.7% of waste disposed to landfill during the 2nd Quarter

	Recycling Rate	25
	<i>Target of > 39.2% surpassed with 40.3% of waste recycled during Quarter 2</i>	
	Activity Snapshot	27







Theme 5 – Business & Employment 30




	Tourism Customer Satisfaction with Visitor Information Services	30
	<i>Target met for Quarter 2 with an average rating of very good.</i>	
	Visitor Information Centre Bookings	31
	<i>Quarter 2 revenue collected showed a slight downturn compared to September 2018.</i>	
	Cycle Hub – Bike Hire Revenue	32
	<i>The second quarter saw continued growth in revenue compared to June 2018.</i>	
	Activity Snapshot	33







How We Work – Good Governance 34

	Operating Surplus/(Deficit) Ratio	34
	<i>Result within target range for 2017/18.</i>	
	Net Financial Liabilities Ratio	35
	<i>Result exceeded target for 2017/18.</i>	
	Customer Request Completion Rate	36
	<i>Quarter 2 target exceeded.</i>	
	Customer Request Resolution Rate	37
	<i>Quarter 2 target not met, however a 8.26% improvement seen compared to Quarter 1.</i>	
	Operational Expenditure Against Budget	39
	<i>Quarter 2 target range not met.</i>	
	Capital Expenditure Against Budget	40
	<i>Quarter 2 target not met.</i>	
	Organisational Culture Improvement	42

Primarily a constructive result from the October 2016 OCI/OEI Employee survey. All Defensive styles are below the 50th percentile ring, and two Constructive styles are at or above the 50th percentile ring, which is desirable.

	Staff Development - Training	43
	<i>Target met for 2017/18.</i>	
	Staff Development – Performance Partnering	44
	<i>Target met for 2017/18.</i>	
	Staff Retention	45
	<i>Target not met, falling short by 1% with 89% of employees retained during 2017/18.</i>	
	Activity Snapshot	46

legend

-  Target not met
-  Target at risk or not improving
-  Heading toward target or progress acceptable
-  Target achieved



Theme 1 – Natural & Built Heritage



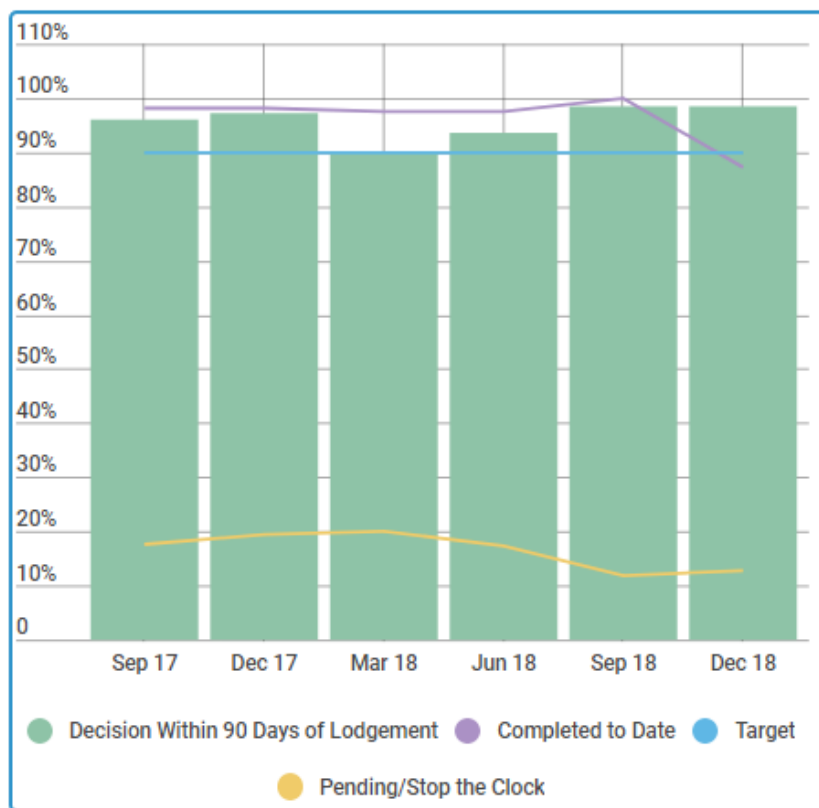
Building Rules Consent Processing

The percentage of Building Rules Consent Applications completed within three months of lodgement, accounting for delays outside of Council control.

Quarter 2 indicator revised and target under review – please see commentary for further explanation on the review of this indicator.

RESULTS

Building Rules Consent Processing



INTERPRETATION

This measure is a lag indicator, with performance measured on those consents due within the current quarter based on lodgment date within the previous quarter.

During the past quarter significant analysis of the data and its learnings has been undertaken and the measure redesigned to better represent performance of the system which includes Council, applicants and third parties. The data has been refined to separate out those applications that in the main fall into three main categories:

- a) Council has requested further including outstanding fees;
- b) The application requires referral to a third party agency and is awaiting response;
or
- c) The applicant themselves has asked for the application to be placed on hold.

Under the legislative framework these actions effectively “stop the clock” on the performance requirements. The revised data is designed to better represent this fact. In the above graph all the data dating back to April 2017 has been re-analysed and presented. The graph in essence shows:

1. A performance on time of 95.6% on average;
2. Of the applications submitted there is an average per quarter of 16.5% that fit into one of the above four categories;
3. Those completed to date average (at the time of running the data, this measure will change overtime) 96.5%.

Further work will now be undertaken over the next three months to refine the indicator for building and planning performance.

The following table provides the revised data in tabular form for member's interest over the period of data analysed.

	Quarter					
	Sep-17	Dec-17	Mar-18	Jun-18	Sep-18	Dec-18
Decision Within 90 Days of Lodgement	95.9%	97.2%	90.2%	93.5%	98.6%	98.6%
Completed To Date	98.3%	98.3%	97.5%	97.6%	100.0%	87.3%
Target	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%
Pending/Stop The Clock	17.7%	19.5%	20.1%	17.3%	11.7%	12.7%

Arising from the analysis and redevelopment of this indicator are downstream service improvements that will be considered including improved follow up on requests for information and referrals, concurrent requests for information at the commencement of applications so that a single planning and building request is made for combined applications and improved allocation processes. Further changes to the customer service provision and pre-lodgement service are being piloted from the week beginning 18 February in an effort to improve the quality of applications, customer outcomes and speed of processing

RESPONSE

Outlined above.



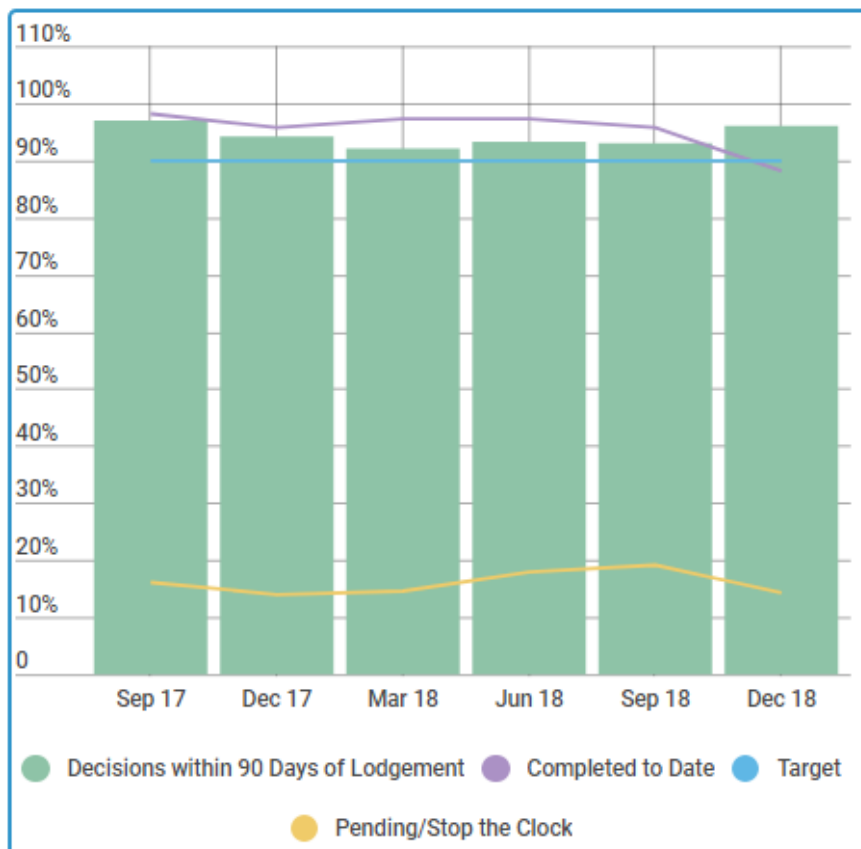
Planning Consent Processing

The percentage of Planning Consent Applications completed within three months of lodgement, accounting for delays outside of Council control.

Quarter 2 indicator revised and target under review – please see commentary for further explanation on the review of this indicator.

RESULTS

Planning Consent Processing



INTERPRETATION

As per the prior measure and the updated information provided, this measure is a lag indicator, with performance measured on those consents due within the current quarter based on lodgment date within the previous quarter.

Again as with the prior measure, during the past quarter significant analysis of the data and its learnings has been undertaken and the measure redesigned to better represent performance of the system which includes Council, applicants and third parties. The data has been refined to separate out those applications that in the main fall into four main categories:

- a) Council has requested further information including outstanding fees;

- b) The application requires referral to a third party agency and is awaiting response;
- c) The applicant themselves has asked for the application to be placed on hold; or
- d) The matter has been referred to the Barossa Assessment Panel and is awaiting a decision.

Under the legislative framework these actions effectively “stop the clock” on the performance requirements. The revised data is designed to better represent this fact. In the above graph all the data dating back to April 2017 has been re-analysed and presented. The graph in essence shows:

1. A performance on time of 94.3% on average;
2. Of the applications submitted there is an average per quarter of 15.9% that fit into one of the above five categories where the clock has effectively stopped;
3. Those completed to date average (at the time of running the data, this measure will change overtime as outstanding items are completed) 95.3%.

Further work will now be undertaken over the next three months to refine the indicator for building and planning performance.

The following table provides the revised data in tabular form for member's interest over the period of data analysed.

	Quarter					
	Sep-17	Dec-17	Mar-18	Jun-18	Sep-18	Dec-18
Decisions Witin 90 Days of Lodgement	97.0%	94.3%	92.2%	93.2%	93.0%	95.9%
Completed To Date	98.1%	95.7%	97.2%	97.2%	95.6%	88.2%
Target	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%
Pending/Stop The Clock	16.1%	14.0%	14.5%	17.8%	19.0%	14.2%
Applications	161	164	179	107	158	169
Number Overdue	4	8	12	6	8	6

Arising from the analysis and redevelopment of this indicator are downstream service improvements that will be considered including improved follow up on requests for information and referrals, concurrent requests for information at the commencement of applications so that a single planning and building request is made for combined applications and improved allocation processes. Further changes to the customer service provision and pre-lodgement service are being piloted from the week beginning 18 February in an effort to improve the quality of applications, customer outcomes and speed of processing.

RESPONSE

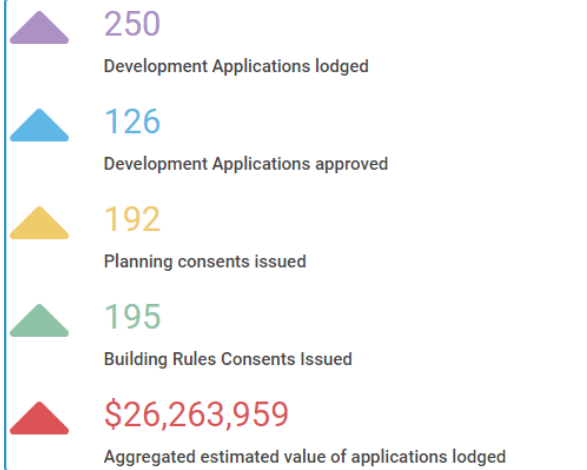
Outlined above.

Activity Snapshot

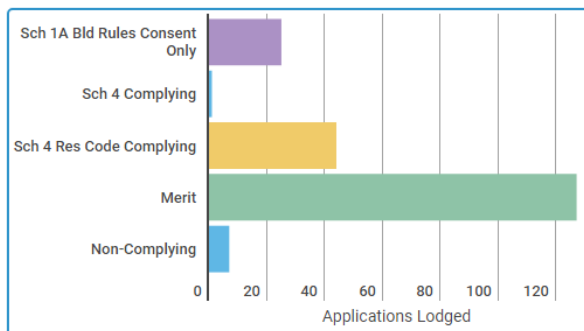


Development Applications

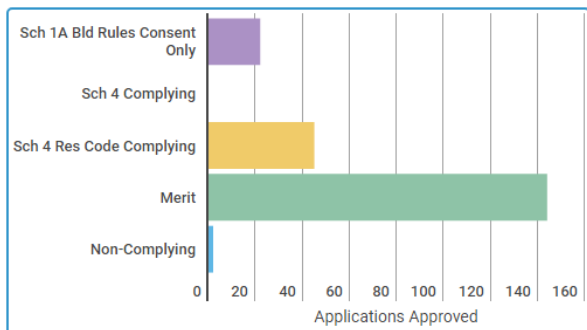
Development Applications Activity - Quarter 2



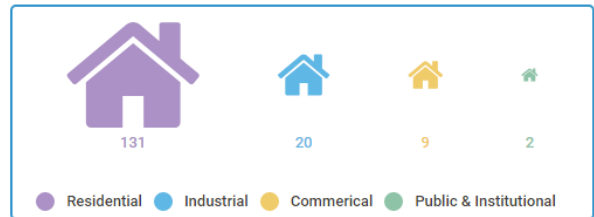
Number of Development Applications Lodged by Category - Quarter 2



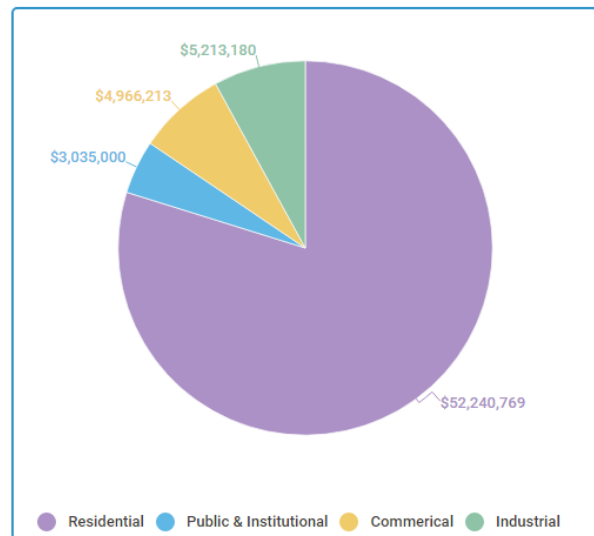
Number of Applications Approved by Category - Quarter 2



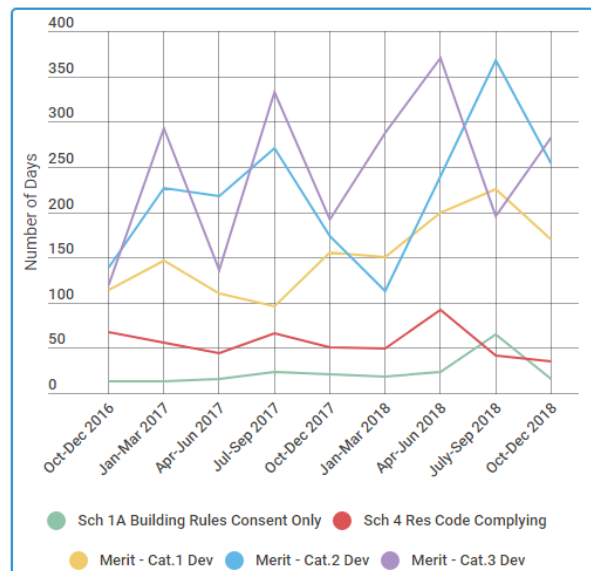
Applications Approved Per Development Type - Quarter 2



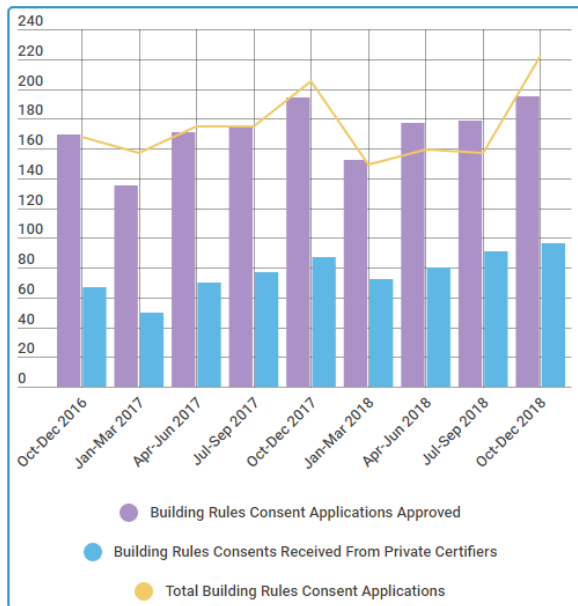
Est. Value of Applications Approved Per Development Type - Quarter 2



Median Number of Days for Applications to be Approved



Building Rules Consent Activity



Percentage of Building Rules Consents Received from Private Certifiers - Quarter 2





Theme 2 – Community & Culture



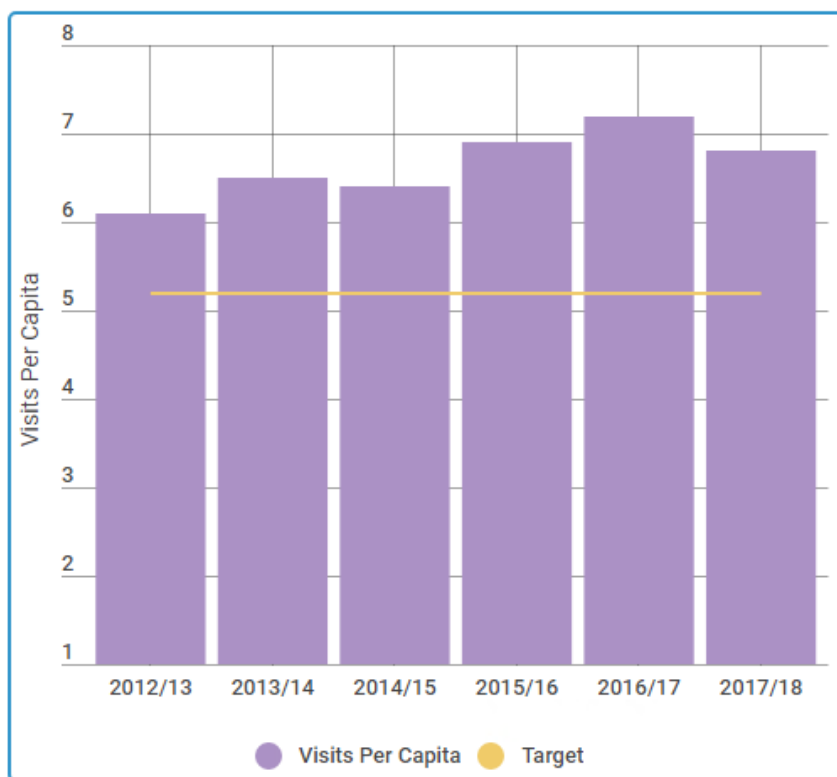
Library Visits

The number of library visits and participation within the Barossa Council Area

Target exceeded

RESULTS

Library Visits Per Capita



INTERPRETATION)

Annual Measure - Library visits (159,635 during 2017/18) continue to exceed the target of 5 visits per capita due to the diverse range of activities and uses of the library including regular borrowing (235,042 items), internet and Wifi access for homework, job seekers, printing and family history. Regular events increase library visitor numbers, with 723 library events held during 2017/18 with 9,976 participants. Events included author talks, story times and children's programs, health events, book clubs, book week activities, scrabble, mah-jong, chess, writers groups, craft, art and writing groups.

RESPONSE

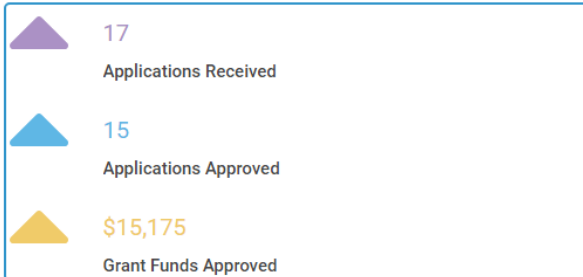
No response required.

Activity Snapshot

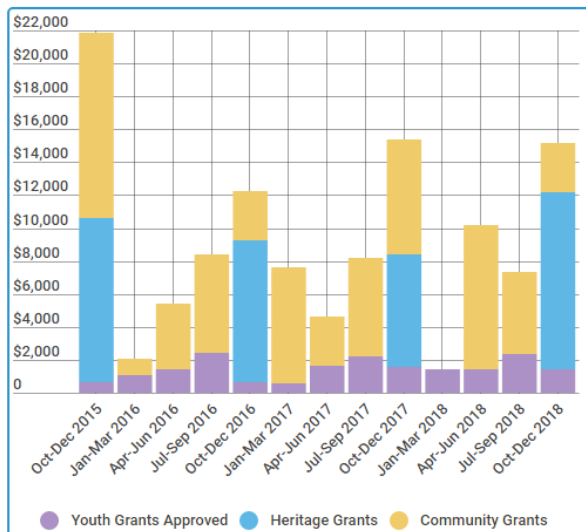


Community Assistance Grants

Grants Activity - Quarter 2 Results

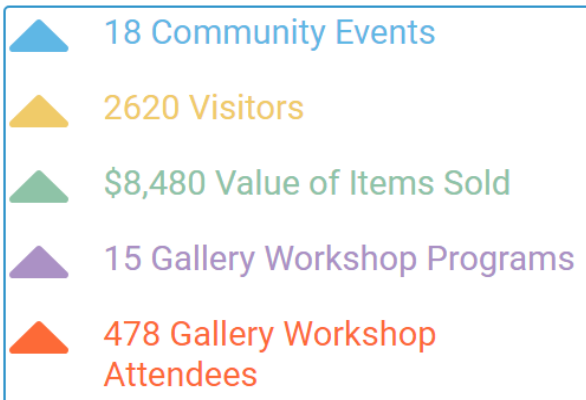


Value of Grant Funds Approved

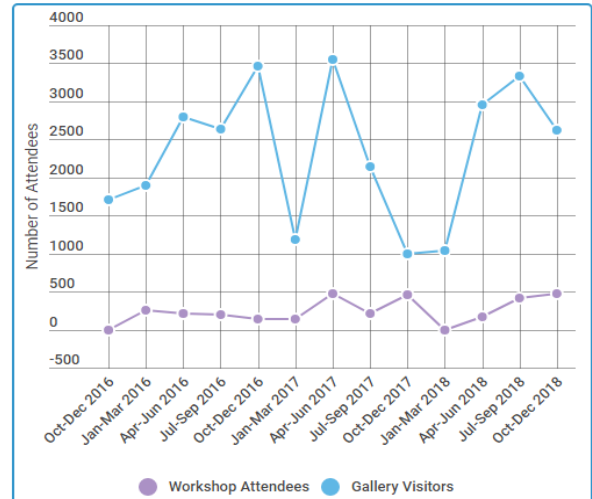


Regional Gallery

Gallery Activity - Quarter 2



Workshop Attendees & Gallery Visitors

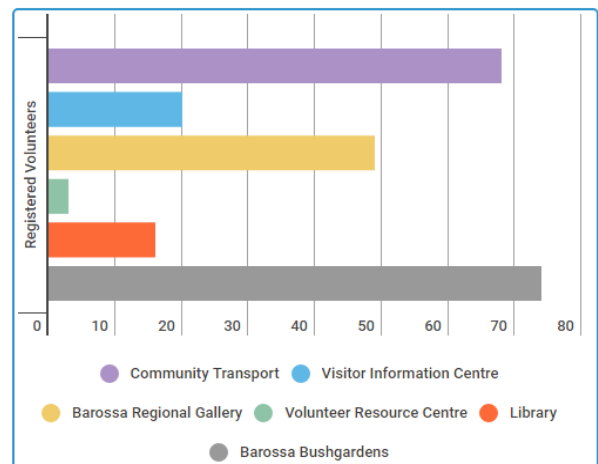


Volunteer Management

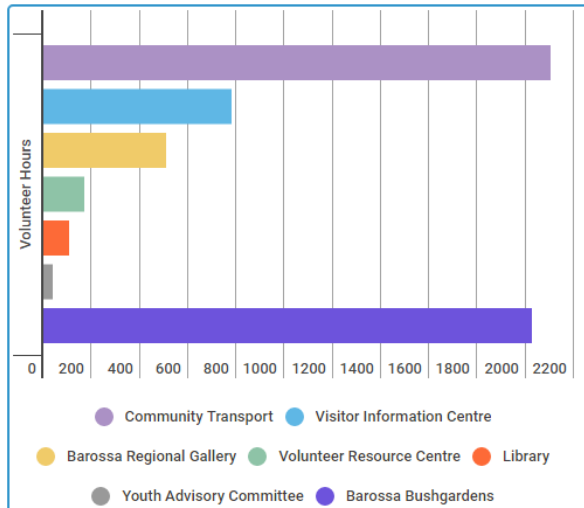
Volunteer Activity - Quarter 2



Registered Volunteers - As At December 2018



Volunteer Hours - Quarter 2



* The above charts do not represent Council's full volunteering profile, with additional volunteers currently contributing to the community committees and other programs which don't currently formally collect volunteer data.



Library Services

Library Activity - Quarter 2

	36,666 Library Visits Compared to 37,932 at the same time in 2017/18
	53,599 Items Loaned Compared to 55,700 in 2017/18
	6,753 eResource Loans Compared to 6,040 in 2017/18
	50,998 Collection Items Compared to 53,963 in 2017/18
	8,504 Active Library Members Compared to 8,815 in 2017/18
	305 Library Events Held Compared to 171 in 2017/18
	2,603 Participants in Library Events Compared to 2,503 in 2017/18



Theme 3 – Infrastructure



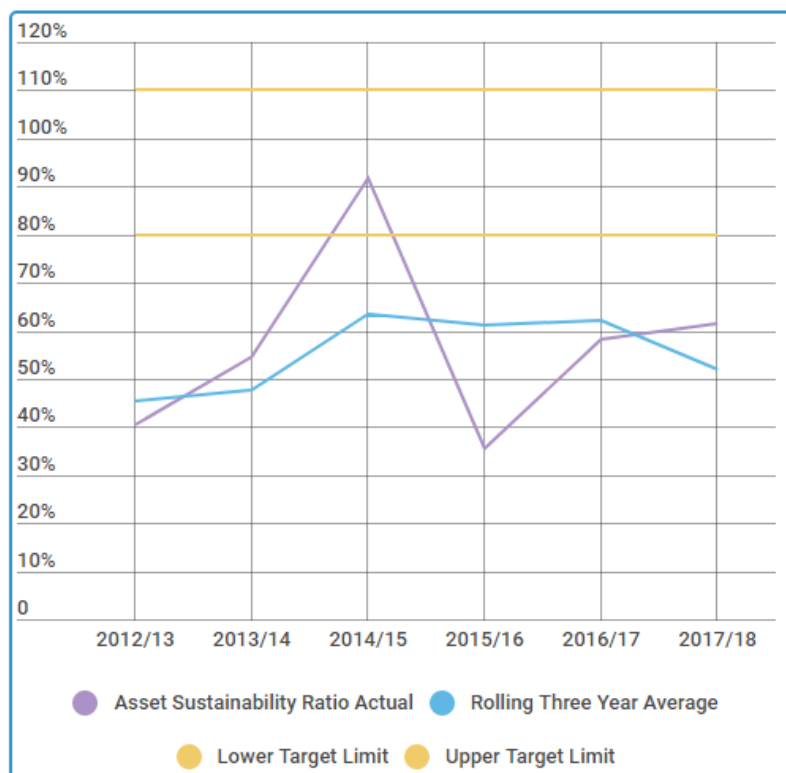
Asset Sustainability

Ratio of Capital expenditure on renewal or replacement of assets for a period compared to depreciation.

Target not met for 2017/18.

RESULTS

Asset Sustainability Ratio



INTERPRETATION

Annual Measure – The Asset Sustainability Ratio uses asset depreciation expense as the denominator and expenditure on replacement and renewal as the numerator.

The Financial data reported as at 30 June 2018 in Quarter 4 – 2017/18 was based on preliminary figures and were subject to change based on the finalisation of Council's end of financial year calculations.

The updated 2017/18 result was \$4,611K/\$7,503K or a ratio of 61% which is outside the target range. The rolling three year average stands at 52%, which is also still well below the target range of 80% to 110%. The unfavorable result for the 2017/18 ratio is the result of the ongoing under delivery of expenditure on renewal/replacement within the capital program.

In addition, a substantial amount of 'Upgraded' asset work completed each year (and for 2017/18 included capital work on Springton roads and district wide footpaths) is partly renewing components of existing assets. For normal work cycles, components of these assets would need to be replaced when the depreciation or consumption of them had reduced their remaining life to zero, but as they are being upgraded to a better service level, they are effectively replacing asset components that would normally need to be replaced as/when due.

The calculation to compile the Asset Sustainability Ratio does not include any upgrade costs as it is not considered to be 'renewal/replacement'. This is then effectively understating the expenditure for asset replacement and the ratio is not then reflecting the true actual net asset renewals.

Further this indicator is under review for its usefulness at sector level, it has inherent flaws as outlined above and is currently not being compared with predicted asset management plan spends which would see Council exceeding its target. It is the CEO's view that this indicator should be replaced with one known as the Asset Consumption Ratio which actually gives a stable long term picture of the "newness" or "utilisation" of the asset pool which indicates a much better representation over time of the state of the assets.

RESPONSE

The 2018/19 capital program includes \$3.259M in carry-overs from the 2017/18 capital program. It is anticipated that the delivery of these carryovers, along with the base 2018/19 capital program, will result in an asset sustainability ratio within the target range for 2018/19, along with improving the rolling three year average.

The 2018/19 capital program is already well advanced in comparison with the prior two years and significant funds have been already expended or committed at the end of quarter 1. Further the asset program will be reduced in quarter 2 as there is significant allowance for phase 1 The Big Project expenditure should the Regional Growth Fund application to the Federal Government being successful.

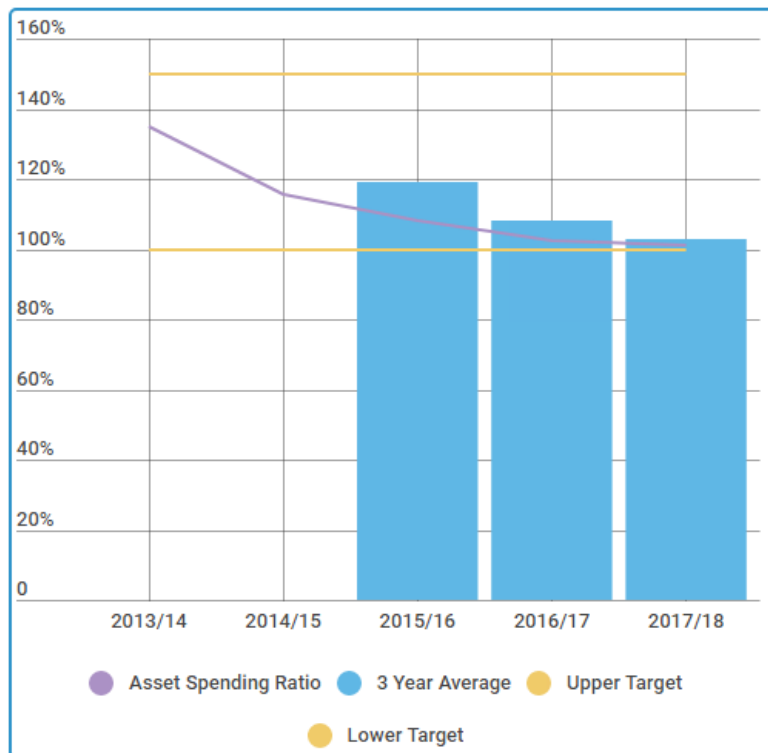
Asset Spending Ratio

Ratio of asset expenditure on renewal, replacement and upgraded assets and maintenance on assets.

2017/18 target achieved.

RESULTS

Asset Spending (Renewal & Upgrade) Compared to Depreciation and Target Maintenance



INTERPRETATION

Annual Measure – As a result of Council's ongoing commitment to refining data analysis methodology and increasing the accuracy and reliability of performance data, the counting rules for this measure have been modified during 2017/18 and applied across the last three financial years to include financial data from Council's caravan parks.

The Financial data reports as at 30 June 2018 was based on preliminary figures and was subject to change based on the finalisation of Council's end of financial year calculations.

The updated 2017/18 result shows the ratio of expenditure on renewal, replacement and upgraded assets plus maintenance expenditure on assets equaled 100.3%, which is within the target range. Analysis of expenditure over a three year period also shows performance within the target range. The asset spending ratio is however on a downward trend, which is directly linked to capital project performance.

RESPONSE

The downward trend in the asset spending ratio is being addressed primarily by the Works and Engineering Services Directorate via better forward planning and it is expected improved performance in the delivery of capital projects will see this trend addressed. It also reflects a low anticipated spend on maintenance activities and this has been accounted for in future budgets, especially as capital expenditure programs deliver renewed and upgraded assets, maintenance expenditure (especially reactive) is expected to be lower than long term trend.

Activity Snapshot

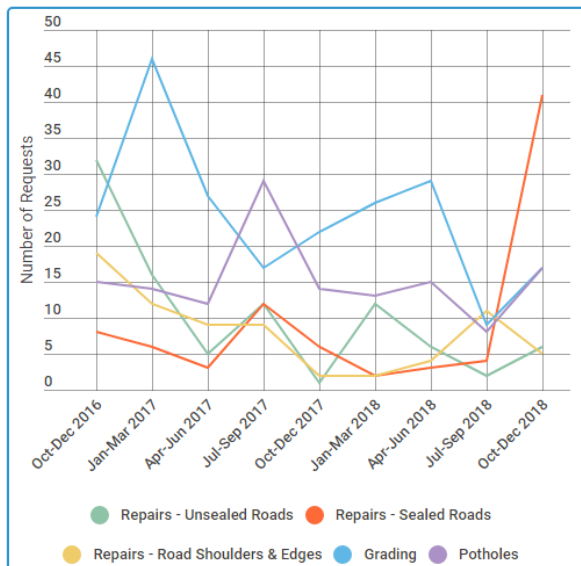


Traffic, Road & Footpath Management

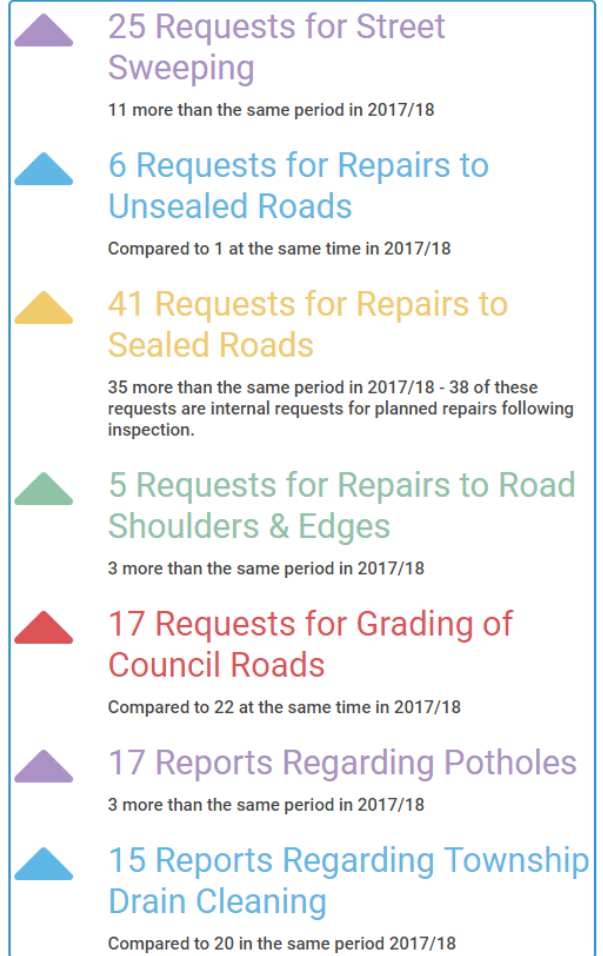
Footpath Maintenance Activity - Quarter 2



Traffic & Road Management - Customer Requests

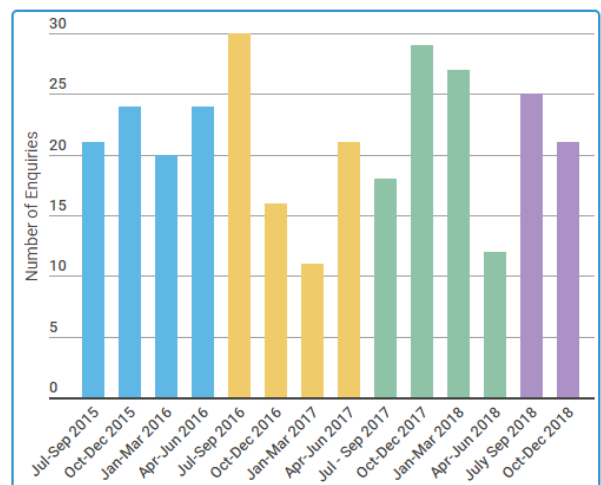


Traffic & Road Activity - Quarter 2



Cemetery Management

Cemetery Enquiries





Parks, Gardens & Reserves Maintenance

Requests for Parks, Gardens & Reserves Maintenance - Quarter 2





Theme 4 – Health & Wellbeing



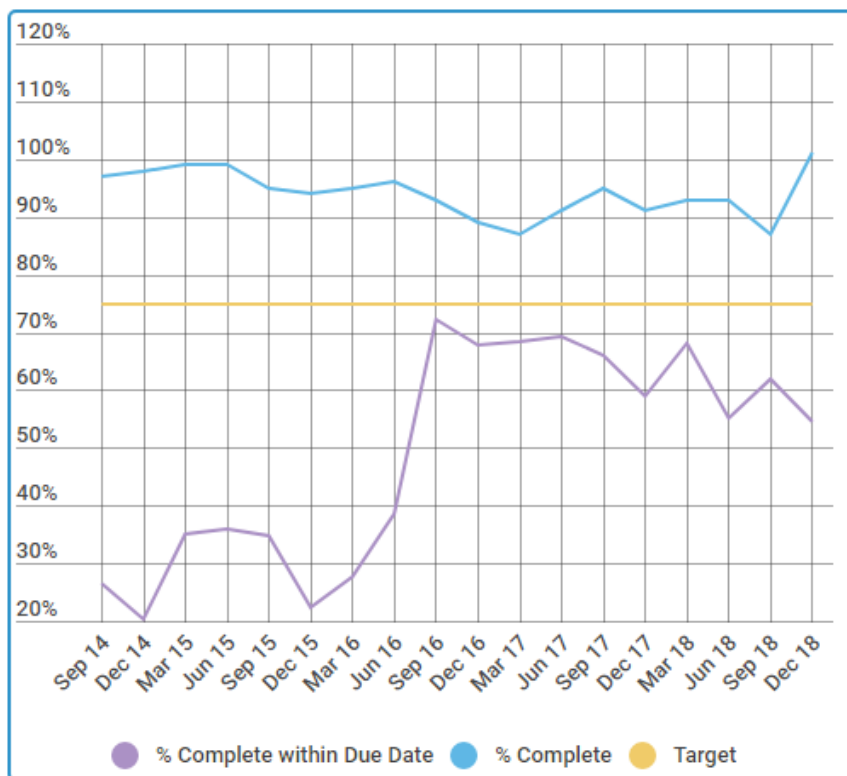
Nuisance and Environmental Request Resolution Rate

Percentage resolved within due date.

Target not met for Quarter 2.

RESULTS

Nuisance & Environmental Complaint Resolution



INTERPRETATION

During quarter 2 there was a decline in the percentage of nuisance and environmental requests completed within the nominated due date (54.45%), representing a 7.5% reduction compared to the first quarter.

This can be largely attributed Council's annual fire prevention program which commences during Quarter 2 (and concludes early in Quarter 4) and is a significant investment in time and resources. Officers undertake property inspections to increase awareness and reduce flammable vegetation in the lead up to and throughout the Fire Danger Season.

Early in Quarter 2, 282 advanced warning letters were sent out to property owners (based on data obtained in 17/18) reminding property owners to clean up their properties and reduce vegetation in preparation for the fire danger season.

In addition, during the quarter, 985 property inspections were recorded where an action was required. It is estimated that approximately 9500 properties are inspected, often multiple times each.

Of the above:

- 313 properties were identified as having excessive vegetation and an increased risk during the first inspection, resulting in clean up notices being issued;
- 116 of these properties failed to reduce the vegetation within the nominated timeframe of 14 days and were issued follow up notices;
- 276 previously identified properties were deemed satisfactory during the first inspection.

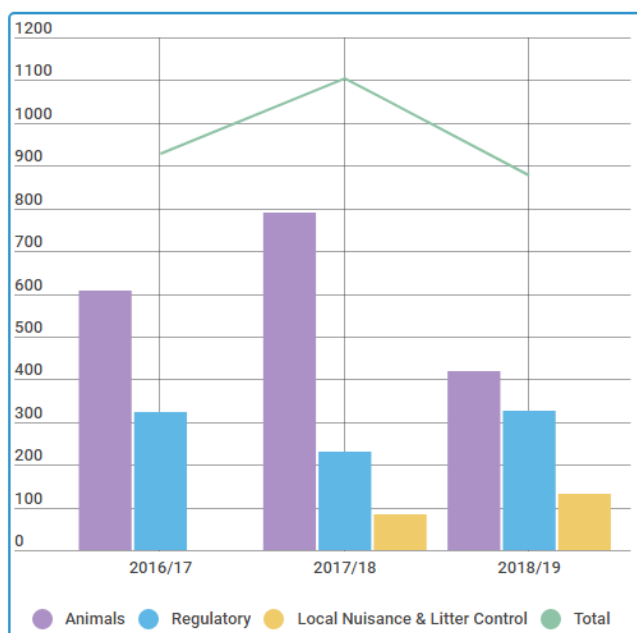
Council's fire prevention officers routinely undertake grassland fuel loading and fuel curing assessments in pre-determined sites across the Council area during the lead up to and during the fire danger season. This data is reported to the SA CFS on a weekly basis during Quarter which is used to determine fire danger ratings, CFS resourcing and overall risk.

Officers are also charged with the responsibility of assessing applications for hot works and solid fuel barbecue permits during the Fire Danger Season. A total of ten Schedule 10 permits were issued to allow such activities to be undertaken on a total fire ban.

In the Nuisance and Litter Control space, during the second quarter, there were a total of 70 requests across the Local Nuisance and Litter Control request types and 133 recorded year to date, compared to 83 year to date in 2017/18 and zero in 2016/17.

Over the second quarter Council data showed an ongoing decrease in the number of Animal request types compared to the same period in the previous two financial years, as seen below, due to the transition of dog and cat related activity to the State Governments 'Dogs and Cats Online' system.

Animals, Regulatory & Local Nuisance & Litter Control -
YTD Comparison



This reduction relates to a shift in the administrative functions and changes in processes associated with dog management due to the introduction of the Statewide Dogs and

Cats Online (DACO) Database. This enables owners and other agencies to input and update data. DACO continues to draw heavily on Councils administrative resources during its first year, which is difficult to quantify.

The operational aspects of dog and cat management remain constant with 316 requests received YTD for 2018/2019 compared with 320 YTD for 2017/2018.

A total of 30 limited liquor licenses at various events were reviewed and supported during Quarter 2. Of particular interest was the Barossa Beer and Cider Festival, which saw Council implement a temporary dry zone as part of the event management arrangements.

Parking and traffic management continues to be a focus area in line with community demand with 56 requests actioned during Quarter 2.

RESPONSE

Whilst DACO remains in its infancy and the development of the system and has been a significant investment. The ongoing management and maintenance continues to draw heavily on resourcing. It is hoped that this will reduce over time as the system matures and the community embraces the online platform.

Officers continue to strive to meet the nominated targets in an often complex and demanding area.

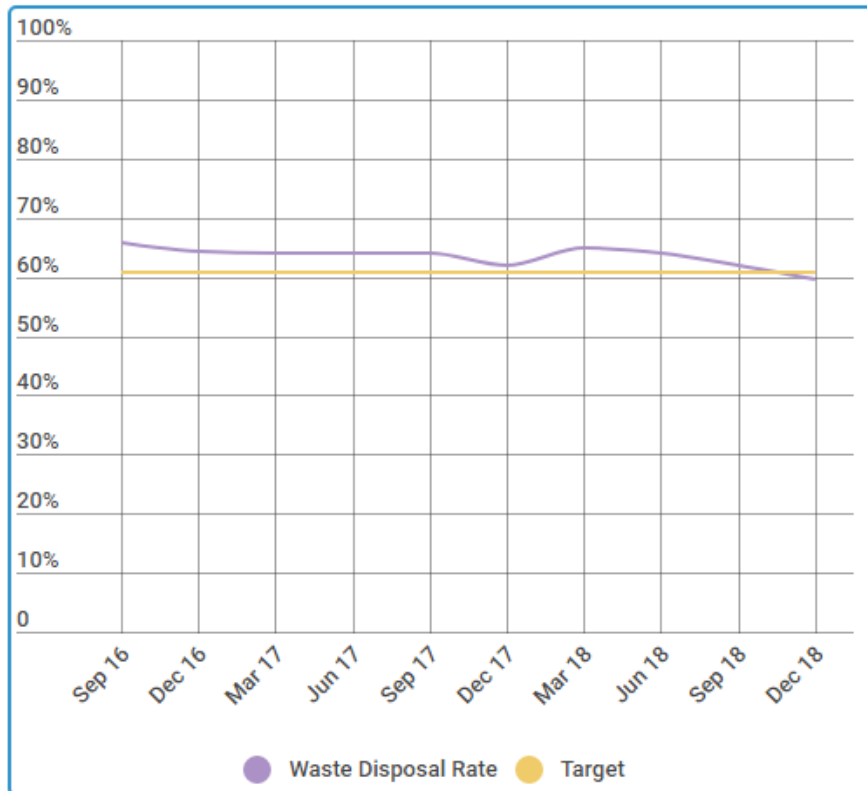
Waste Disposal Rate

Percentage of waste disposed to landfill

Target of < 60.8% exceeded with a total of 59.7% of waste disposed to landfill during the 2nd Quarter

RESULTS

Waste Disposal Rate



INTERPRETATION

During the second quarter for 2018/19, Council recorded a waste to landfill rate of 59.7%, surpassing the target of less than 60.8% waste to landfill.

Year to date, 2,400 tonnes of rubbish (landfill waste) has been collected, representing a reduction of 161 tonnes of rubbish compared to the same period in 2017/18.

RESPONSE

Council's waste and recycling collection service contract expired in June 2018. In the first half of 2017/18 Council participated in a regional tender for disposal services via the Barossa Regional Procurement Group and selected Solo Resource Recovery to deliver waste management services from July 2018. Under the new agreement, Council is continuing to offer rubbish, recycling and green waste collection services and to promote the ongoing diversion of waste from landfill to recycling and recovery.

Council is also currently developing a Waste Management Strategy to guide its approach in offering alternative waste management options for other waste streams including e-

waste and soft plastic, and for encouraging a reduction of waste disposed to landfill and increase in recycling and organics disposal.

Council endorsed a new Waste Management Services Policy on 26 April 2018, which defines Council's role as a waste and recycling service provider.

As part of the roll out of the new service, Council also commenced a campaign to encourage residents to take the challenge to **Waste Less, Recycle More**. This message was featured strongly in the lead up to the new contract and has continued during the first half of 2018/19. The new trucks and bins also display the message. As anticipated, this campaign is contributing to a reduction in the amount of waste put to landfill.

During the second quarter Council's part time Waste Management Officer continued to ensure that all licensing, environmental and contractual requirements are adhered to by the Waste Management Contractor and provided a coordinated response to customer issues relating to waste management.

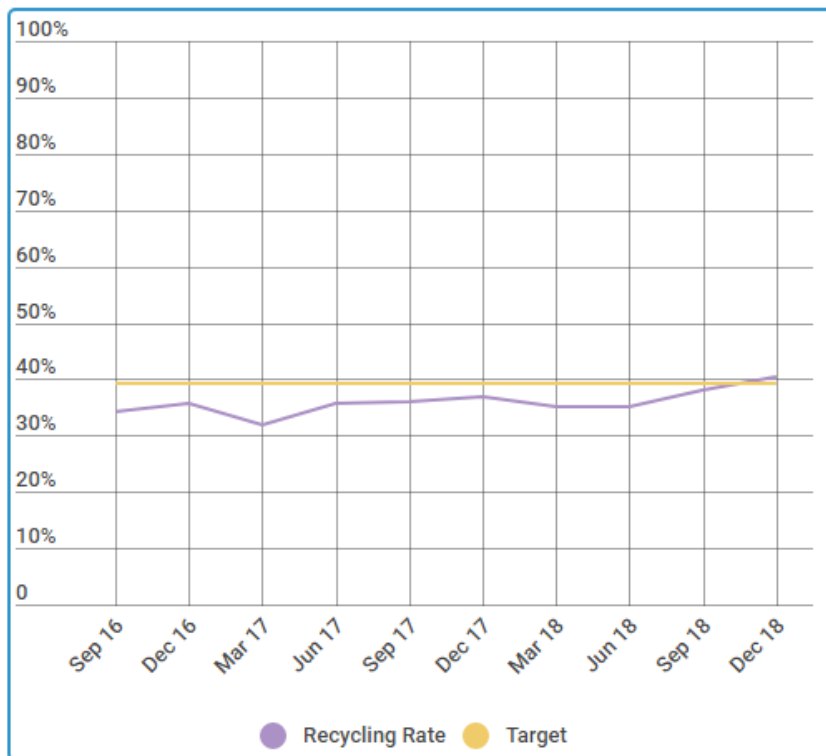
Recycling Rate

Percentage of waste recycled

Target of > 39.2% surpassed with 40.3% of waste recycled during Quarter 2

RESULTS

Recycling Rate



INTERPRETATION

Recycling statistics consist of both co-mingled recycling collected via Council's yellow lidded bins and organic material collected via the currently voluntary green lidded bin green waste collection service.

During the second quarter for 2018/19, Council recorded a recycling rate of 40.3% (22.8% yellow lidded waste and 17.5% green waste) which is just 1.2% short of the target.

Year to date, 924 tonnes of yellow lidded recycling and 617 tonnes of green waste has been collected, which represents a slight decrease in recycling and increase in green waste compared to the same period in 2017/18 (yellow – 1,090 and green – 571). Despite little growth in the tonnes of co-mingled recycling compared to the same period in 2017/18, the overall tonnes of waste across all three streams have reduced by 286 tonnes resulting in a favorable outcome in the percentage of waste recycled.

RESPONSE

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At the beginning of January, China banned foreign waste imports, including waste paper, textiles, plastics and certain types of metals. This ban is likely to force waste companies to stockpile recycling waste, or send it to landfill. There are strong calls on both Federal and State Governments to assist in creating new markets for recycled waste in Australia, and provide a 'relief package' for local government to offset potential increases in recycling costs. While NAWMA have already increased the recycling sorting charge, the new waste contract has provided Council with a buffer to this initial increase.

Notwithstanding the China situation, Council will continue to promote recycling, including green organics. The average garbage bin contains 60% organic material waste. The bulk of which is food (40%) and garden waste (20%). The introduction of green organic bins as part of the new waste service will go a long way to achieving our target to reduce waste to landfill in the household sector.

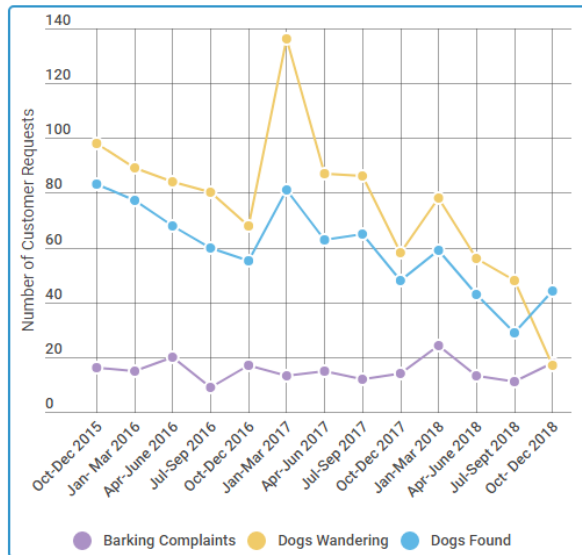
During the second quarter Council's part time Waste Management Officer continued to ensure that all licensing, environmental and contractual requirements are adhered to by the Waste Management Contractor and provided a coordinated response to customer issues relating to waste management.

Activity Snapshot



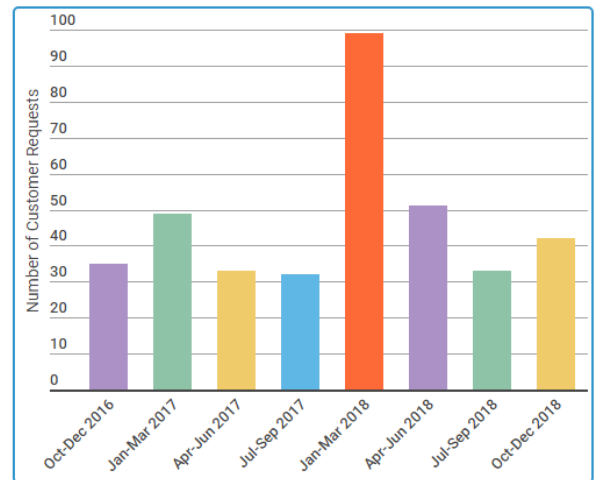
Animal Management

Dog Management Activity



Animal Based Customer Requests

(Excluding Dog Management)

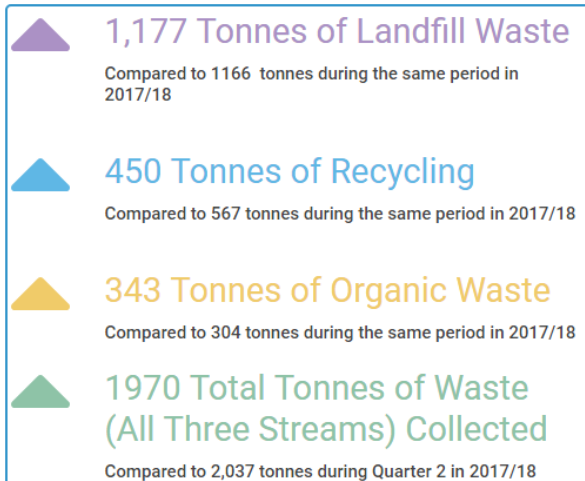


*Note – large increase in Jan-Mar 2018 was due to 66 reports relating to wasps.

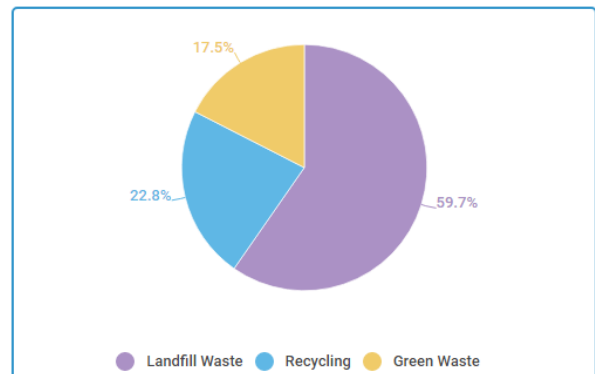


Waste Management

Waste Activity - Quarter 2



% of Waste Per Category

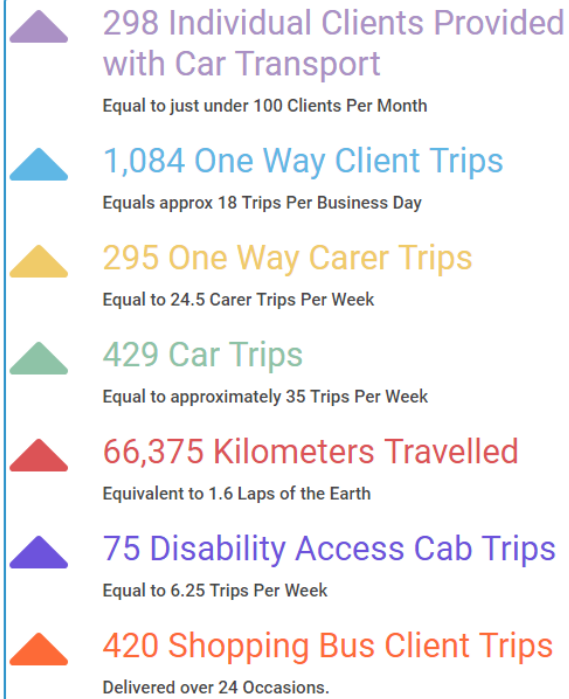


*Note – overall recycling rate reported on page 26 includes both recycling and green waste as recyclable materials diverted from landfill.

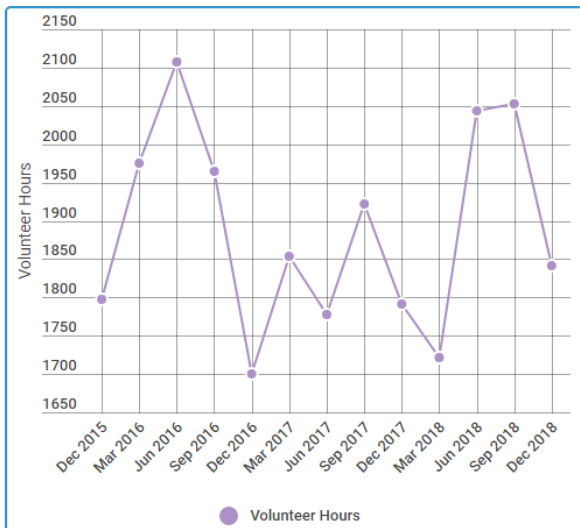


Community Transport

Community Transport Activity - Quarter 2



Community Transport Volunteer Hours



Home Assist & Social Support

Quarter 2 Activity

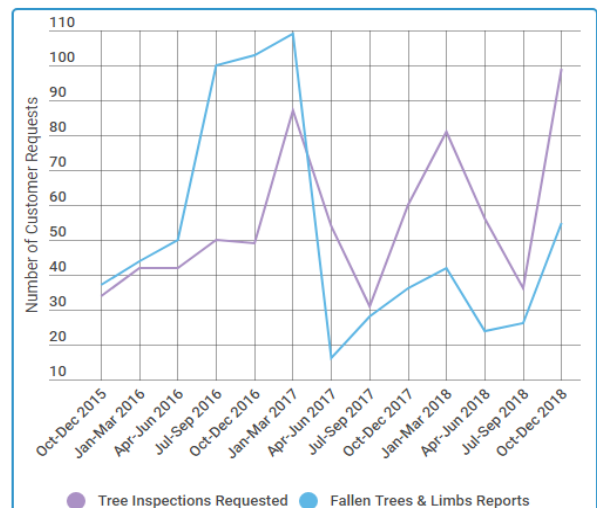


Tree Management

Quarter 2 Results



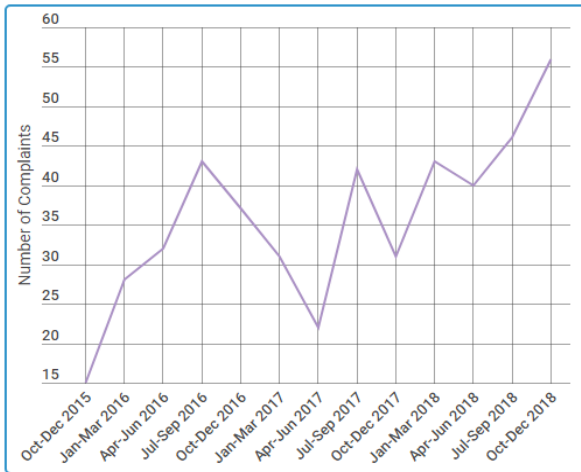
Tree Management Activity





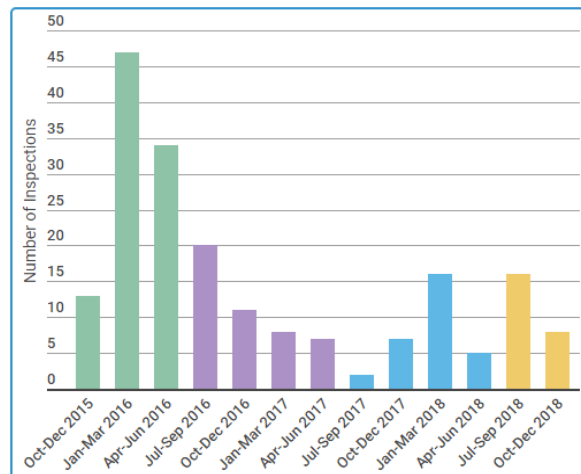
Parking Complaints

Parking Complaints



Pool Safety

Private Pool Inspections



Waste Water

Quarter 2 Result



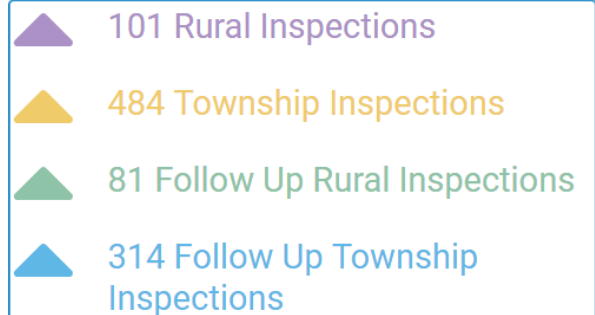
Health Services

Quarter 2 Result



Fuel Reduction Inspections

Fuel Reduction Inspections - Quarter 2 Activity



Note – the above inspections do not reflect the full number of inspections undertaken – only those property inspections of compliance interest due a previous or current inspection failure are recorded within Council's inspection system.



Theme 5 – Business & Employment



Tourism Customer Satisfaction with Visitor Information Services

Average Customer Satisfaction Rating

Target met for Quarter 2 with an average rating of very good.

RESULTS

Tourism Customer Satisfaction with Visitor Information Services



INTERPRETATION

Whilst the results show that the target rating of 4 continues to be achieved, demonstrating that on average customers rate the customer service at the Visitor Information Centre as very good, it should be noted that these averages are drawn from a relatively low number of ratings (6 in Quarter 2) compared to the total number of customers served – there were 12,761 visitor enquires during the second quarter. On this basis, the data is not considered representative of the customer base and should be interpreted conservatively.

RESPONSE

The Tourism Services team will continue to explore opportunities to encourage customers to provide feedback on their satisfaction with services provided. A range of web-based and social media tools will be utilised to engage customers.



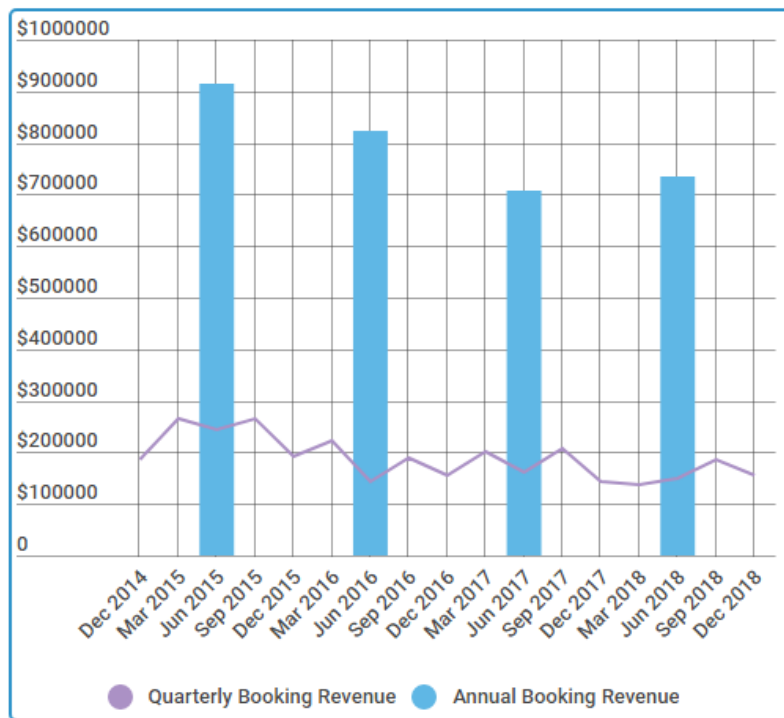
Visitor Information Centre Bookings

Booking Revenue (Accommodation/Tours/Tickets)

Quarter 2 revenue collected showed a slight downturn compared to September 2018.

RESULTS

Visitor Information Centre Booking Revenue for
Accommodation/Tickets & Tours



INTERPRETATION

The Barossa Visitor Centre reported very strong growth following the release of the Barossa Be Consumed Campaign in May 2013 with enquiries and sales growing strongly through 2013-2016. The 'Barossa Be Consumed' campaign was completed by 30 June 2016 and enquiries and sales have slowed down since. Sales remain steady when compared to results prior to the 'Barossa Be Consumed' Campaign (pre-2013). Total booking revenue for the second quarter equaled \$156,612, showing a slight reduction (\$29,291 less) than the first quarter, however still an overall improvement compared to the same period in 2017/18 (\$143,283).

Overall a number of external factors continue to impact sales performance. These include strong and aggressive competition for our booking site from Air BnB, Bookings.com, wotif, Expedia, stayz, Trip Advisor etc. Many of these international companies spend billions of dollars in google advertising and digital marketing to ensure their websites are within the top 3 search results. Barossa.com has in fact seen an overall decline in visitation as a result. The Tourism Services team are currently working with key regional stakeholders on a redevelopment of the Barossa.com to improve overall website performance, usability and booking functionality – particularly on mobile devices.

RESPONSE

No response required.

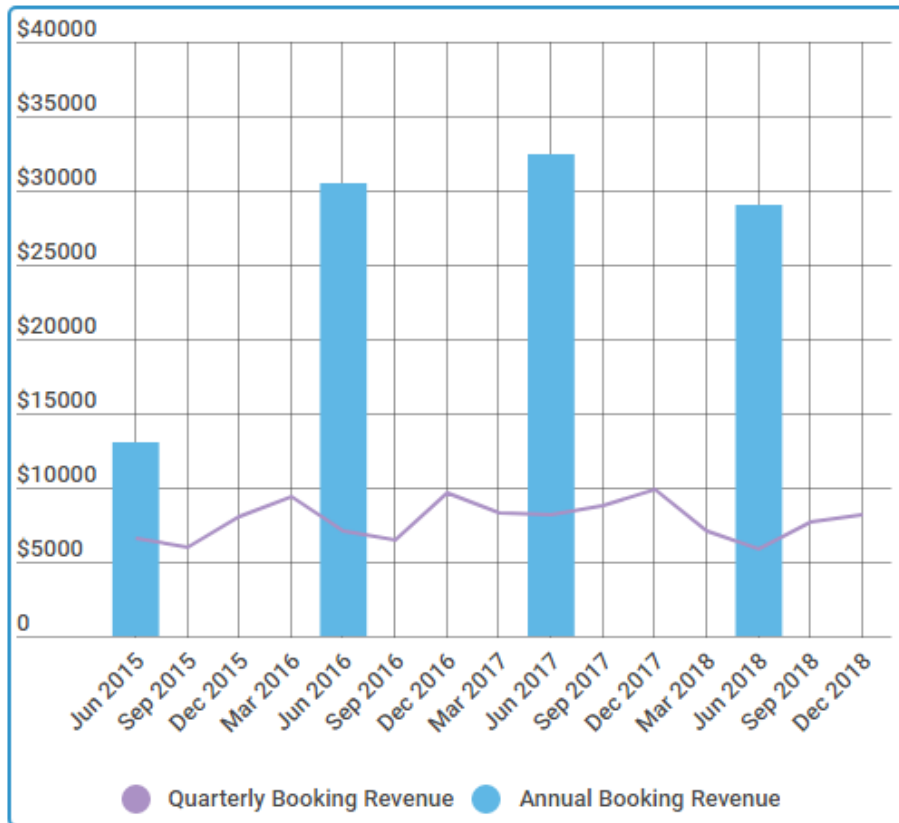
Cycle Hub – Bike Hire Revenue

Sales Revenue

The second quarter saw continued growth in revenue compared to June 2018.

RESULTS

Cycle Hub - Bike Hire Revenue



INTERPRETATION

During Quarter 2 the Cycle Hub recorded \$8,138 in bike hire revenue, the strongest quarterly result for the 2018 calendar year.

Over the second quarter, 110 bikes were hired compared to 123 during the same period in 2017/18.

In addition to the revenue being generated by this initiative, Council's ongoing investment and service delivery in cycling creates strong destination awareness of the Barossa leading to greater visitor yield and length of stay.

RESPONSE

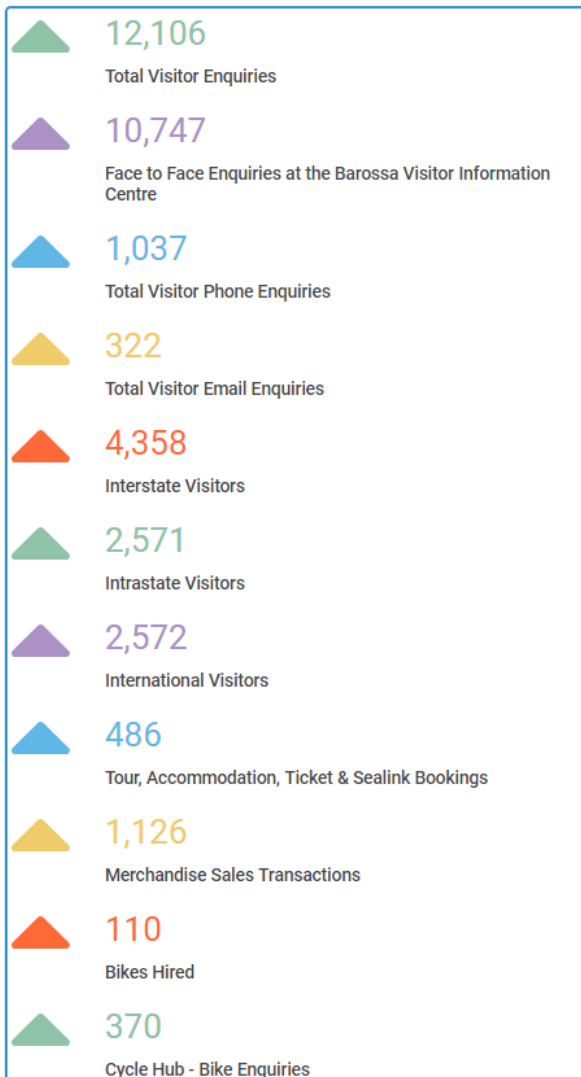
No response required.

Activity Snapshot

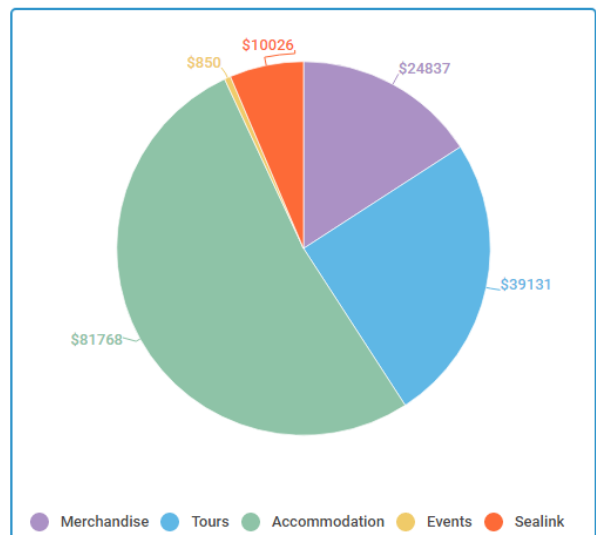


Visitor Information Centre & Cycle Hub

Cycle Hub & Visitor Information Centre Activity - Quarter 2



Value of Visitor Information Centre Sales - Quarter 2





How We Work – Good Governance

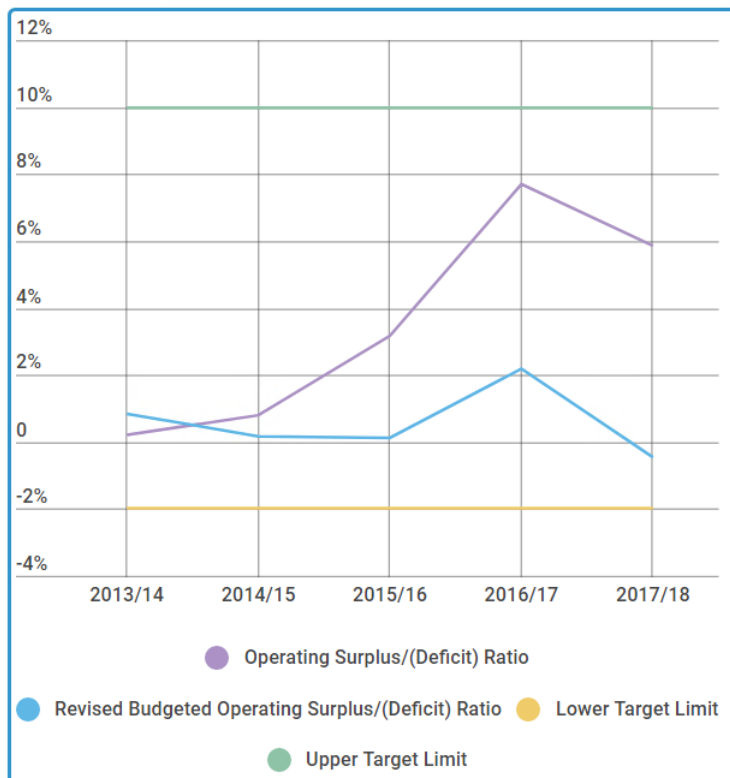
Operating Surplus/(Deficit) Ratio

Operating surplus (deficit) expressed as a percentage of operating income

Result within target range for 2017/18.

RESULTS

Operating Surplus/(Deficit) Ratio



INTERPRETATION

Annual Measure – Updated financial data as at 30 June 2018 shows an operating surplus/(deficit) ratio of 5.87 which is within the target range.

It is anticipated that the improved budget performance, budget estimations and improvements to processes in the organisation are containing expenditure growth to less than budgeted. The actual 2017/18 actual operating surplus was \$2.25M. Coupled with containing expenditure, Council received \$0.6M advance grant payment (from the 2018/19 expected grant allocation) from the Commonwealth the week prior to end of financial year which distorts the operating result for 2017/18 and 2018/19. The 2018/19 budget was based on a zero base calculation and the performance over the past two years is reflected in the operating budget for the 2018/19 financial year.

RESPONSE

No response required.

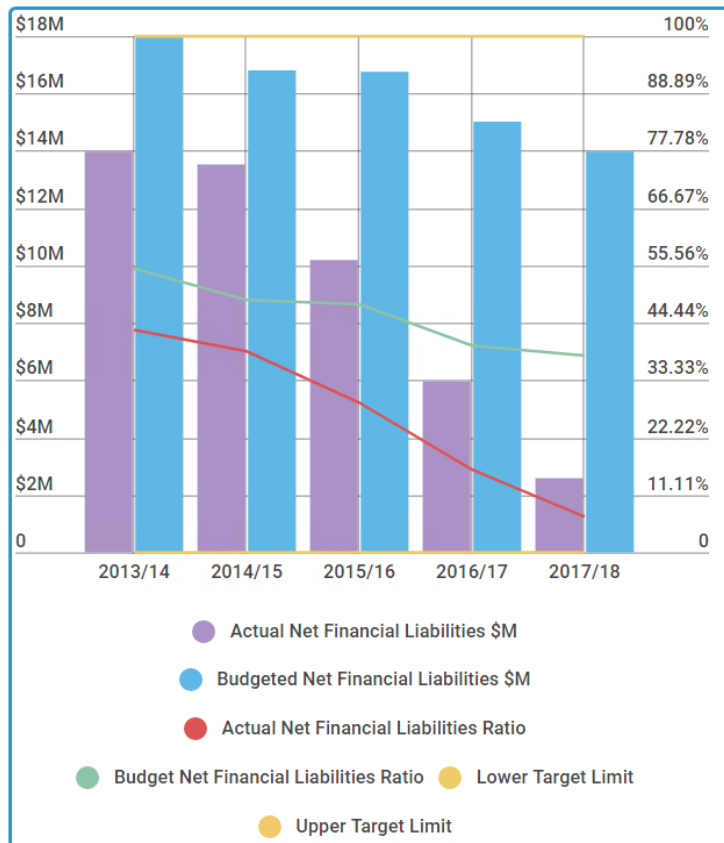
Net Financial Liabilities Ratio

Net financial liabilities at the end of the financial year as a percentage of operating income for the year

Result exceeded target for 2017/18.

RESULTS

Net Financial Liabilities Ratio



INTERPRETATION

Annual Measure – The Actual Net Liabilities for 2017/18 fell within the targeted range but was well below budgeted Net Financial Liabilities due to holding more cash at the end of the financial year than originally expected. This result is largely due to unexpected income including the Financial Assistance Grant for 2018/19 which was paid in June 2018 and numerous decreases to expenditure, including salaries, energy and materials costs together with a decrease to liabilities, additional cash holdings brought forward from the previous year, savings from budget projections and \$3.2m expenditure not spent carried forward to next year.

RESPONSE

No response required.



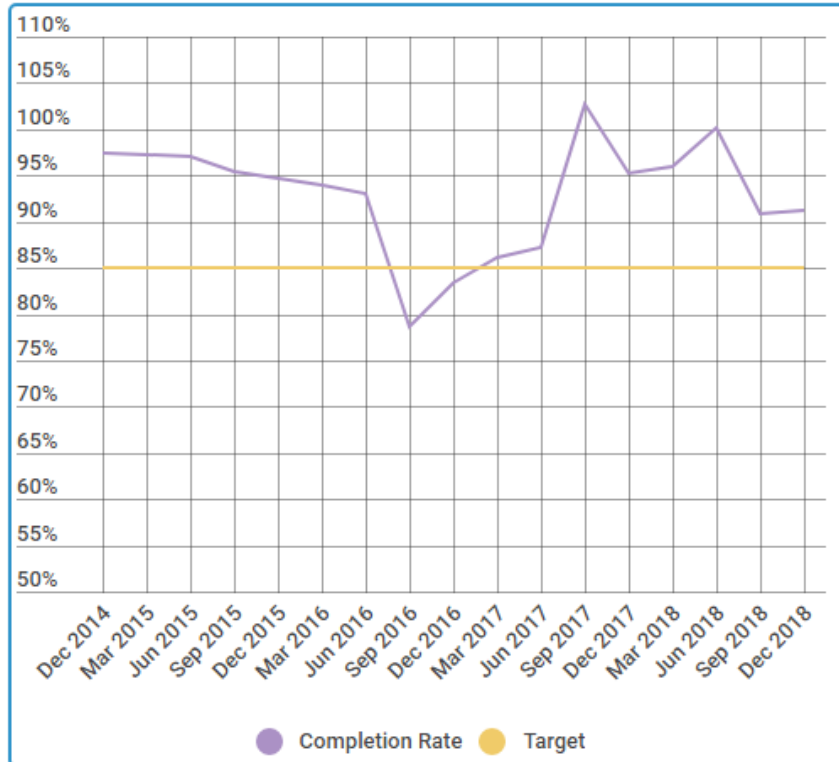
Customer Request Completion Rate

Percentage of Customer Requests Completed (On Time and Overdue)

Quarter 2 target exceeded.

RESULTS

Customer Request Completion Rate



INTERPRETATION

The second Quarter of 2018/19 saw a 91.17% request completion rate, exceeding the target of 85%. This measure is calculated using the number of requests completed year to date (regardless of when they were logged or due) versus the number of requests due for the same period. As a result, it is possible for the number of requests completed during the period to exceed the number logged.

RESPONSE

Council is continuing to focus on the improvement of customer request response times, particularly in relation to analysing duplication of effort both within and across directorates and focusing on administrative process optimisation within the customer service supply chain. The implementation of Pathway Smart Mobile applications under Council's Change Program will be a key strategy in improving the customer request completion rate by introducing greater mobility to Council's customer request management system and allowing officers to complete requests in real time out in the field.



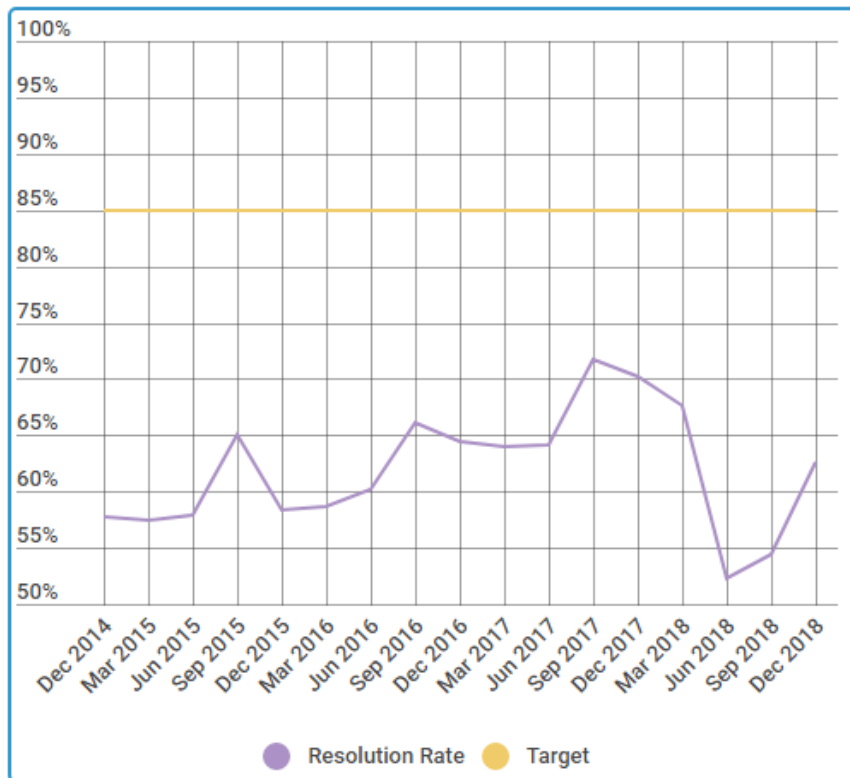
Customer Request Resolution Rate

Percentage of Customer Requests Resolved on Time

Quarter 2 target not met, however a 8.26% improvement seen compared to Quarter 1.

RESULTS

Customer Request Resolution Rate

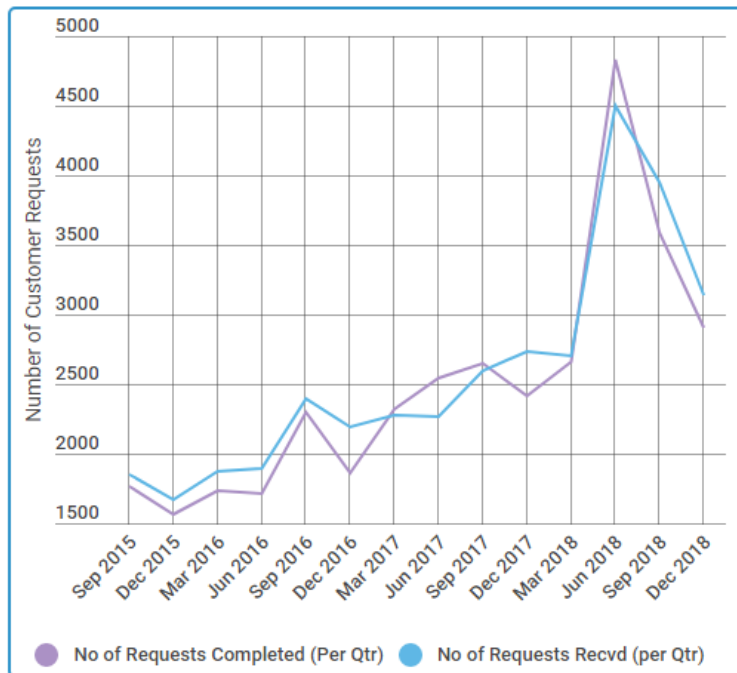


INTERPRETATION

The targeted resolution rate was not met for the second quarter, with only 62.67 of requests completed by the nominated due date. This result represents an 8.26% improvement compared to the first quarter, however is still less favorable than the same time last year due to the ongoing impact of the influx of waste related customer requests as a result of the rollout of the new Waste Management Contract.

As demonstrated in the chart below, the number of requests received during the second quarter continued to be exceptionally high (3,138 requests) compared to the same period in 2017/18 (2,734). A total of 362 requests during the first second quarter related to waste management. The mass influx of waste management requests carried over from the previous quarter had a continuing impact on the resolution rate, with the standard response time unachievable within existing resources.

Customer Request Analysis - Received Vs Completed



Even accounting for the impact of the Waste Management Contract rollout, Council has continued to see a much higher number of requests received per quarter compared to previous years. This increase is a direct reflection of a change in Council's customer request processing methodology and use of supporting corporate systems, whereby the organisation is transitioning to all requests being managed end to end in Council's customer request management system rather than multiple systems. This has meant that whilst request numbers appear to have increased significantly, workload has not necessarily increased across some key request types, it is now just recorded and measured in a central location. Previously a significant portion of the organisation's work was unable to be measured or quantified. The impact of this change can be seen in increased activity associated with processing of Council rates and requests for changes to Council's name and address register.

RESPONSE

As identified in the previous measure, key strategic projects currently being implemented to address customer request close out issues, to identify system and administrative process improvements and the review of customer service methodologies more broadly, and the implementation of Pathway Smart Mobile applications will result in continued progress towards achieving the nominated target.



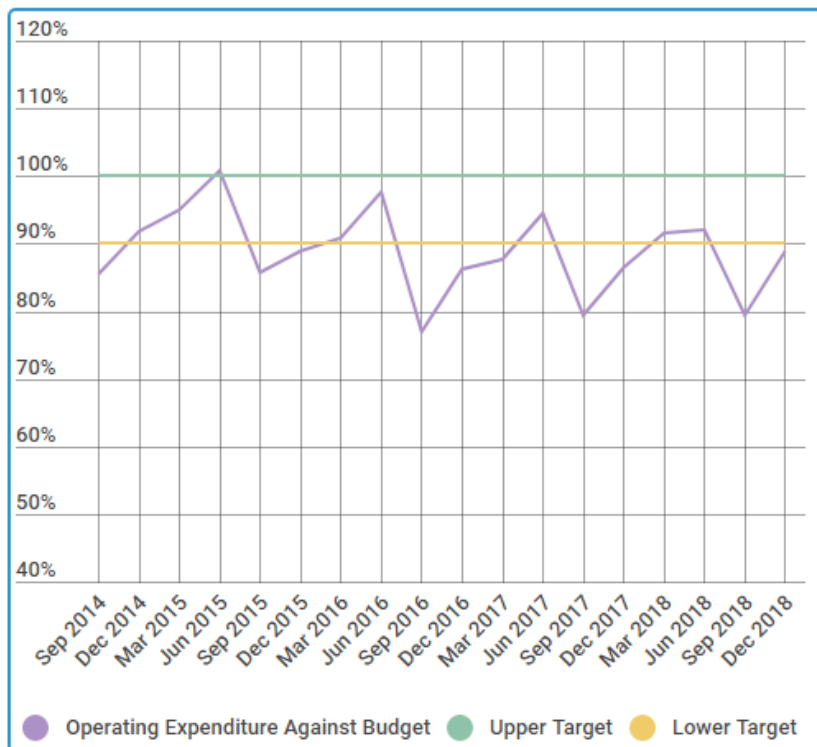
Operational Expenditure Against Budget

Actual Operating Expenditure as a % of Budgeted Operating Expenditure

Quarter 2 target range not met.

RESULTS

Operating Expenditure Against Budget



*Note – due to the identification of a data entry error in the result reported for Quarter 1 (19.88%) this figure has been amended to the correct result of 79.3%.

INTERPRETATION

As at 31 December 2018, 88.77% of the quarterly operational budget had been spent.

The current underspend is reflected across employee costs (due to vacancies, the effect of the ASU EBA and leave loading), contractors and consultants, rubble crushing, transport services and Barossa Visitor Centre/Library modifications. In most cases the current underspend is due to timing of activity and the allocated budget is expected to be fully spent by 30 June 2019.

RESPONSE

Officers will continue to monitor operational budget and service performance during 2018/19.



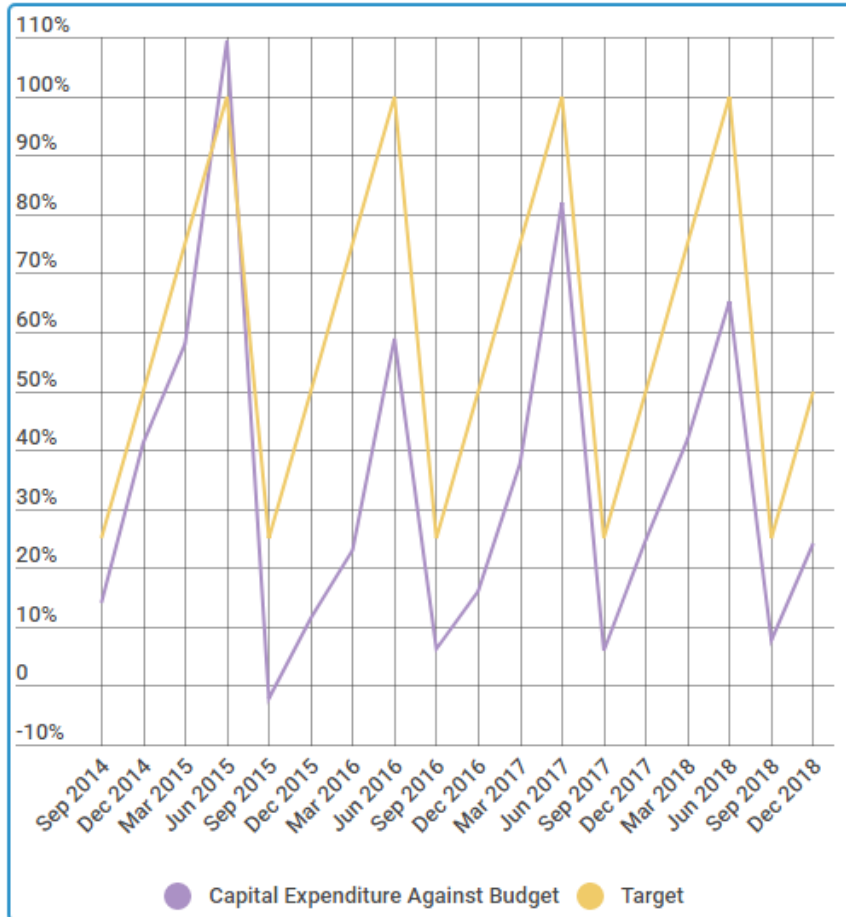
Capital Expenditure Against Budget

Actual Capital Expenditure as a percentage of Budgeted Capital Expenditure

Quarter 2 target not met.

RESULTS

Capital Expenditure Against Budget



INTERPRETATION

As at 31 December 2018, 24.08% of the \$24,340,504 capital budget had been spent. The original adopted budgeted for 2018-19 was \$19.4m, however following the quarter 1 budget adjustments was amended to \$24.3m.

As reported following Quarter 1, there is \$3.3M in the capital budget that was linked to a successful Regional Growth Fund application with the Federal Government which was unsuccessful, this will be removed from the forward estimates in the Quarter 2 adjustments effectively reducing the capital budget.

RESPONSE

Capital expenditure spend against budget is forecast to improve significantly during Quarter 3 as work is progressed and when the necessary adjustments outlined have been made during Quarter 3 as this will reflect a new, reduced, target spend in the order of \$20.6M

Significant projects that were previously on hold pending external funding have now been given approval to proceed such as the Williamstown QVJP bridge with preliminary work also now commenced on the upgrade of the Carrarra Hill and Stockwell Road intersection, a HVSPP funded project.

A number of other moderate projects will also be completed during Quarter 3 such as region wide shoulder work, Queen Street in Williamstown, Graetz Terrace in Springton and Light Pass Road widening.

A further \$400k will roll over from commitments to actuals as Council takes delivery of new plant and machinery during Quarter 3

Council continues to employ an additional resource to assist with the delivery of the significant works program. Contractors are also mobilising a third works crew to expedite delivery of the Springton Road acceleration upgrade work, a part State Government funded program of work.

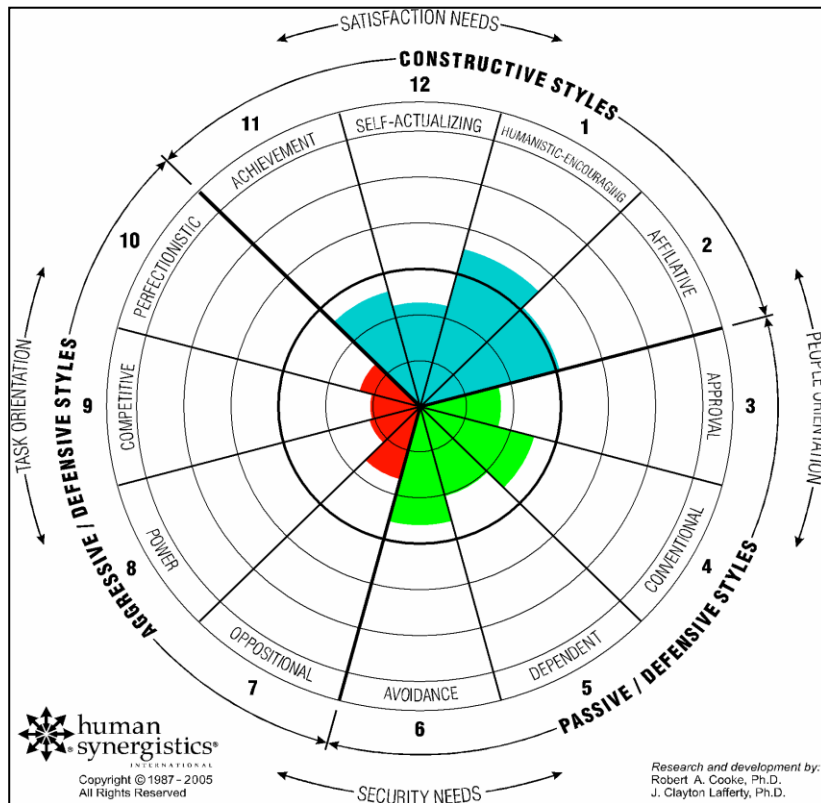


Organisational Culture Improvement

Percentage percentile shift in the culture survey results to an organisation of progressively improving achievement and self-actualising styles of operation

Primarily a constructive result from the October 2016 OCI/OEI Employee survey. All Defensive styles are below the 50th percentile ring, and two Constructive styles are at or above the 50th percentile ring, which is desirable.

RESULTS



INTERPRETATION

Biennial Measure - Whilst the results from the 2016 Culture survey are steady, with some improvements in causal factor results (from the Organisational Effectiveness Inventory (OEI)), the most striking difference between the 2014 survey and the 2016 survey is the increased response rate, at around 25%. This is a very positive indicator as it demonstrates an increased willingness to engage in organisational improvement.

RESPONSE

Each directorate has reviewed their individual results and formulated an action plan to address areas of improvement identified.

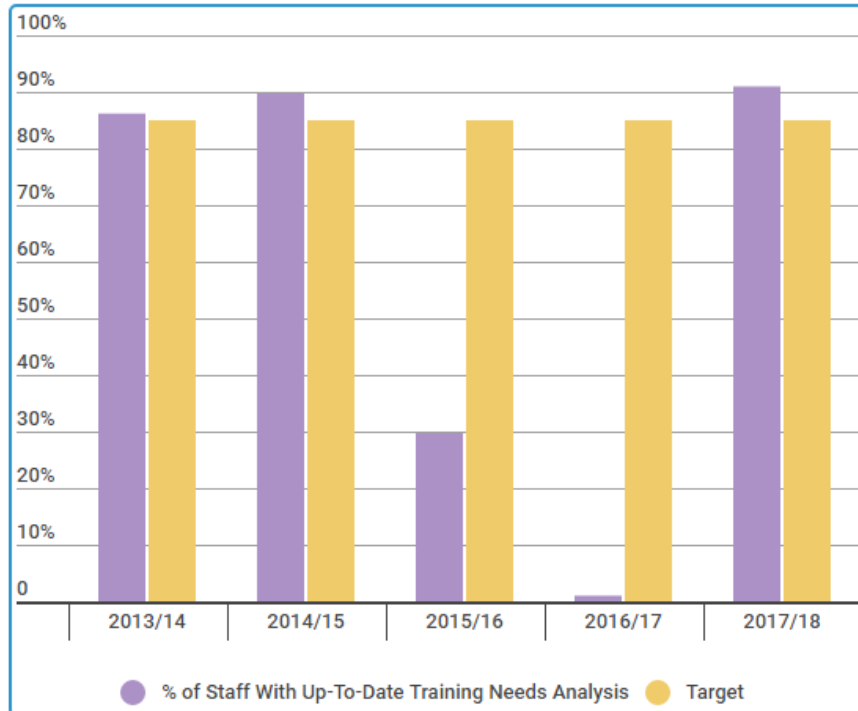
Staff Development - Training

Percentage of staff with an approved training needs analysis

Target met for 2017/18.

RESULTS

Staff Development - Training Needs Analysis



INTERPRETATION

Annual Measure - All employees have an individual training plan which is scheduled for review on a 12-month cycle.

During 2017/18 Council implemented an online system (Skytrust) for managing staff competencies, TNA's and training records. As a result, during the first quarter for 2017/18, 132 TNA's were completed and an additional 18 were completed during quarter 2, resulting in an improvement in the rate of staff with an approved Training Needs Analysis to 91% as at 30 June 2018.

RESPONSE

No response required.



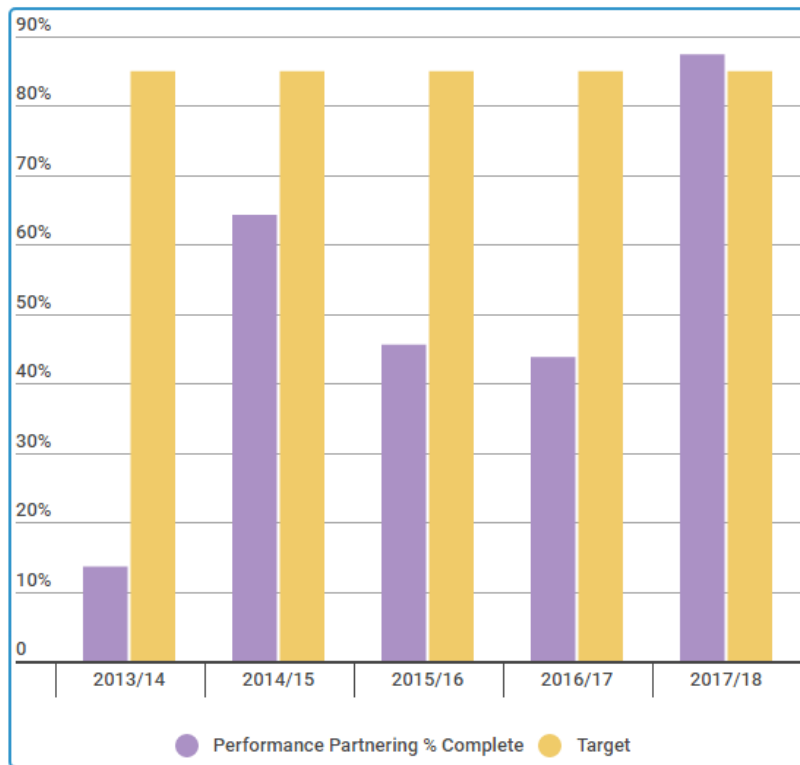
Staff Development – Performance Partnering

Percentage of staff who have completed performance partnering

Target met for 2017/18.

RESULTS

Staff Development - Performance Partnering



INTERPRETATION

Annual Measure – Council achieved a performance partnering completion rate of 87.4% for 2017/18. Performance partnering workbooks were due to be completed by the end of March 2018.

A new workbook was rolled out during the 2017/18 performance partnering review cycle and resulted in a slight improvement in the completion rate within the nominated due date, however there were still a significant percentage of outstanding workbooks which managers were working to address by 30 June 2018.

A significant improvement was recorded during 2017/18, with 118 of 135 eligible employees completing Performance Partnering. During 2017/18 there were 17.28% (28) employees that were not required to complete Performance Partnering as they were absent due to long term illness, were casual or still within their probation period.

RESPONSE

No response required.



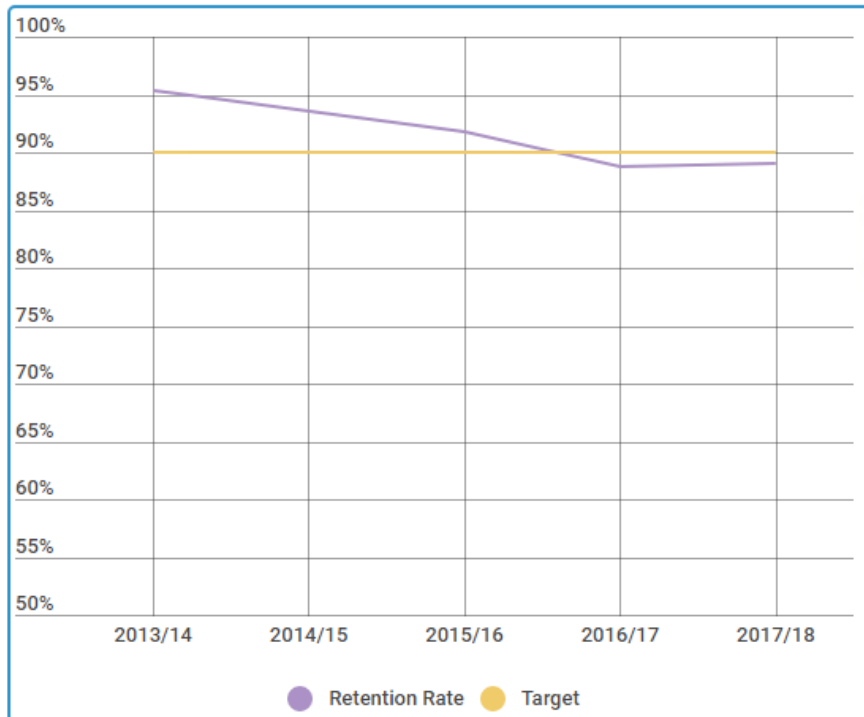
Staff Retention

Percentage of employees retained

Target not met, falling short by 1% with 89% of employees retained during 2017/18.

RESULTS

Employee Retention Rate



INTERPRETATION

Annual Measure – During 2017/18, Council recorded a retention rate of 89%, falling just short of the targeted 90% which equates to only 1 additional vacancy. This result is identical to the retention rate recorded in 2016/17.

Turnover in 2017/18 occurred due to natural attrition, retirements and cessation of fixed term contracts. We have also seen increasing competition for skilled workers in the planning and building fields, resulting in the movement of staff within the industry.

RESPONSE

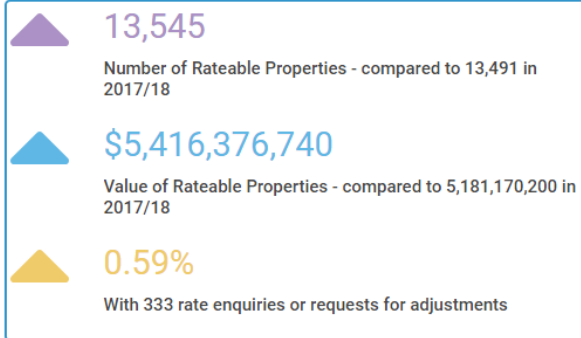
Council continues to support the retention of staff through the development and implementation of contemporary organisational development and human resource management practices.

Activity Snapshot

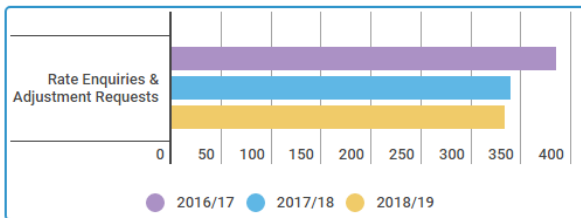


Rate Management

Rate Activity - Quarter 2

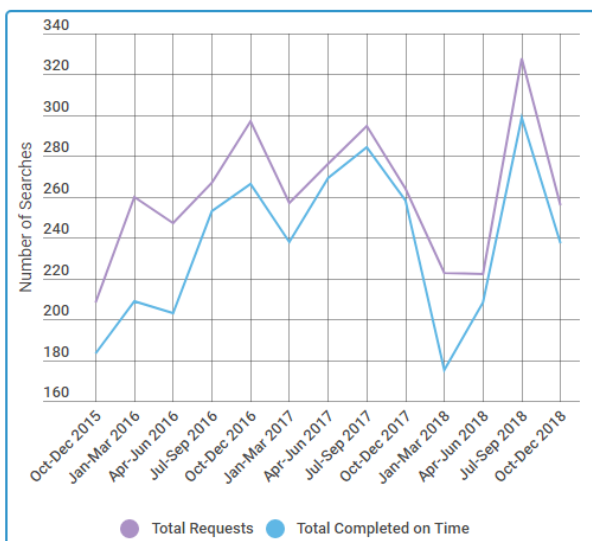


Rate Enquiries - Quarter 2

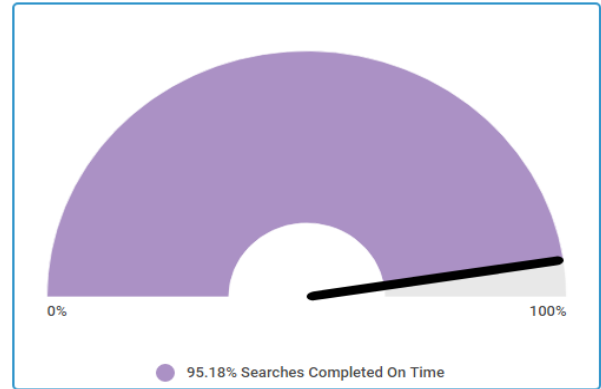


Local Government Records Searches

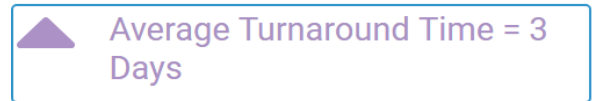
Local Government Search Requests Vs Completions



Searches Completed on Time

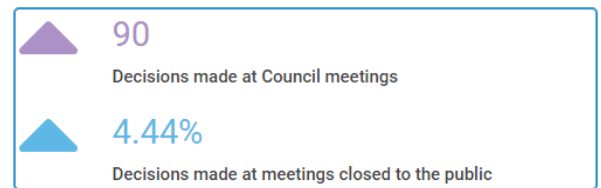


Search Process Turnaround Time



Council Decision Making

Council Decisions - Quarter 2

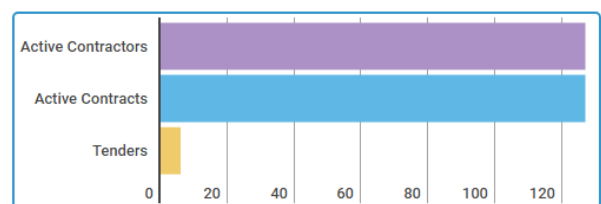


Elected Member Attendance - Quarter 2



Procurement

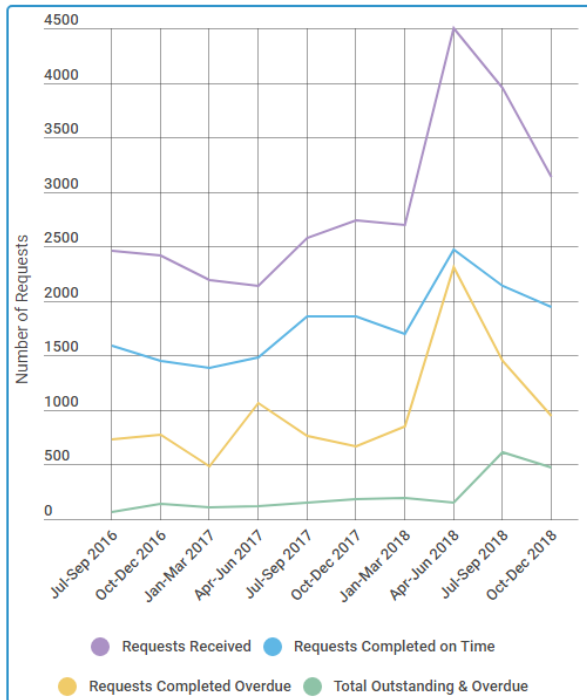
Procurement Activity as at 31 December 2018





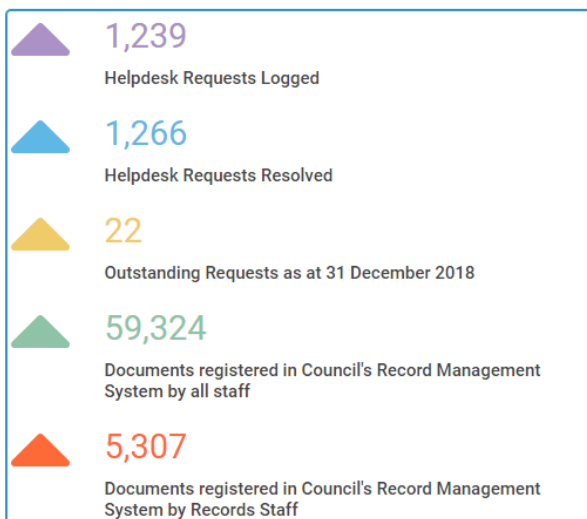
Customer Requests

Customer Request Activity

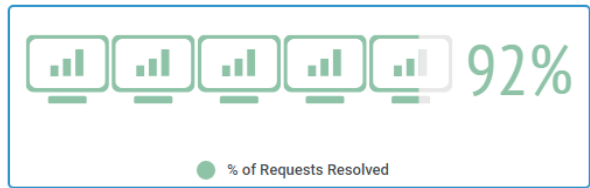


Knowledge & Technology Services

Knowledge & Technology - Quarter 2

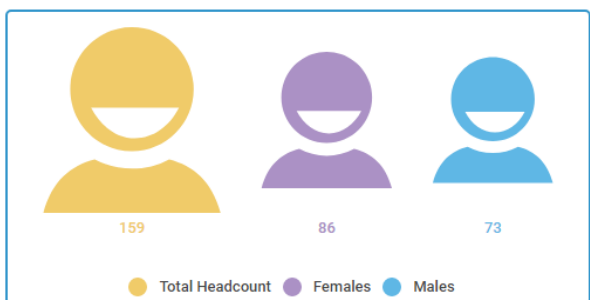


Help Desk Resolution Rate - Quarter 2



Human Resources & Payroll

Workforce Demographics



HR Activity - Quarter 2



Payroll Activity - Quarter 2



AUDIT COMMITTEE

MANAGER ORGANISATIONAL DEVELOPMENT AND RISK

21 MARCH 2019

9.1.6

UPDATE – RISK MANAGEMENT PROGRAMS AND PROJECTS

B7531

Author: Risk Advisor

PURPOSE

To present a Quarterly report on the progress of Risk Management programs and projects.

RECOMMENDATION

That the Audit Committee receives and notes this report, incorporating the Quarter 2 Risk Management Report and the Risk Evaluation Summary Report.

REPORT

Risk Management

A body of work to develop “Control Track / Risk Manager” in readiness for inputting strategic and organisational risks has commenced; the intention to utilise this as the Risk Register with the ability to review all risks in one location, filter based on risk type, risk rating and organisational department, and adjust risk type and rating based on the effectiveness of the identified controls.

A scoping meeting is booked with Local Government Risk Services in late April to assist with final development, implementation and training of the Risk Framework. The Risk Policy is due for review by 17 November 2019; the Process Framework is currently noted as Draft.

Strategic Risk Management

The Chief Executive Officer will update the Committee with the status of the Strategic and Organisational Risk Register and the future management strategy.

Risk Management Action Plan

The final version of the report from the Risk Evaluation conducted by the Local Government Association in October 2018 was received 27 February 2019, delaying the development of the 2019 Risk Management Action Plan. The Plan is in draft to be presented to the Corporate Management Team (CMT) by the end of April 2019

KPI Action Plan for 2019

The final version of the report from the Work Health Safety and Injury Management Evaluation conducted by the Local Government Association in October 2018 was received 27 February 2019, delaying the development of the 2019 KPI Action Plan. The Plan is in draft to be presented to CMT by the end of April.

Risk Management Quarterly Report

Council’s Risk Management Quarterly Report for Quarter 2 - 2018/19, was endorsed by CMT 13 March 2019. The Report is provided in Attachment 1 for the Audit Committee to review.

Risk Team

The Executive Services Administration Review Project is in the process of reviewing administrative needs across the Executive Services Directorate, including the Risk Administrator vacancy; this position has been Vacant since the start of 2019.

Risk Evaluation Summary Report

The Risk Evaluation reviewed the Risk, Work Health Safety, and Injury Management systems and evidence of implementation.

Risk - against an industry developed sector baseline	Total # of sector baselines evaluated	Sector Baseline Met	Sector Baseline Not Yet Met
Risk Management Systems	6	0	6
Roads and Footpaths	8	3	5
Planning and Development Administration	3	3	0

Work Health & Safety - against the performance standard for self-insurers	Total sub elements evaluated	Conformance	Observation	Non-conformance
Standard 1- Commitment and Policy	1	0	0	1
Standard 3 - Implementation	8	1	4	3
Standard 4 - Measurement & Evaluation	1	0	1	0
Standard 5 - Management systems review and improvement	1	0	0	1

Injury Management - against the performance standard for self-insurers	Total no of sub elements	Conformance	Observation	Non-conformance
Standard 1.2 Resources	5	5	0	0
Standard 1.6 Information provided to employees	2	2	0	0
Standard 2.8 Early intervention, recovery and RTW	2	2	0	0
Standard 4- Measurement, monitoring review	2	2	0	0

Please refer to Attachment 2 for more details.

Hazard Management Procedural Validation

An internal audit regime for all councils and prescribed bodies is a condition of the five year self-insured licence agreement with Return To Work SA. To assist councils who do not have an endorsed internal audit program to achieve this requirement, the Local Government Association has implemented a two yearly "Procedural Validation" program.

In March 2019, Bob Raymond from the Procedural Validation Team was provided with approximately 100 documents to review as evidence of implementation of a management system. On 13 and 14 March 2019, Bob attended on-site to interview various workers, supervisors and managers, as well as observe workers to assess them against the relevant Safe Work Instruction or Safe Operating Procedure.

The report is expected to be complete by 19 April 2019.

Local Government Association Mutual Liability Scheme

The Quarter 2 Risk Report gives an overview of insurance claims in graph format, with comparisons to similar sized councils.

New Claims:

1. Claim for vines affected by Spray Drift from January 2018:
 - Loss of production for 5 years
 - Cost to remove and replant
 - Tonnage lost was 1 tonne of young vine shiraz and ½ tonne of old vine shiraz
2. Member of public who fell adjacent the Nuriootpa Skate Park. The individual was walking in skates across a dirt area when the incident occurred. The claimant is suggesting there was an inadequate level of seating available creating a need to walk across the dirt. Photographs taken at the time show adequate seating was installed and a designated path was in place. This claim is unlikely to be accepted.
3. A road user who damaged tyres and rims when the car came off of a road shoulder.

ATTACHMENTS OR OTHER SUPPORTING REFERENCES

Attachment 1: Quarterly Risk Management Report – Quarter 2 – 2018/2019

Attachment 2: 2018 Risk Evaluation Summary Report

COMMUNITY PLAN / CORPORATE PLAN / LEGISLATIVE REQUIREMENTS

Corporate Plan



How We Work – Good Governance

- 6.2 Ensure that Council's policy and process frameworks are based on principles of sound governance and meet legislative requirements.
- 6.3 Align operational strategy to strategic objectives and measure organisational performance to demonstrate progress towards achieving our goals.

Legislative Requirements

Local Government Act 1999

Work Health Safety Act 2012

FINANCIAL, RESOURCE AND RISK MANAGEMENT CONSIDERATIONS

Addressed within the Report.

COMMUNITY CONSULTATION

Not required under legislation or Council's Public Consultation Policy.



*The***Barossa***Council*

QUARTERLY RISK MANAGEMENT REPORT

Quarter 2 – 2018/2019

Contents

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Other Activities for the Quarter	20

Legend



Target not met



Target at risk or not improving



Heading toward target or progress acceptable



Target achieved



Parked/Not Applicable (N/A) this quarter

Quarterly Risk Management Report

The following report has been developed to assist Council's Corporate Management Team (CMT) in monitoring and reviewing their Risk, Work Health Safety and Injury Management (Return to Work) duties. It is comprised of Risk/WHs monitoring information as well as the current WHs Plan actions (programs/projects).

Risk Management

Risk Plan

RESULTS/INTERPRETATION

Risk Services "Risk Plan 2019 – 2021" CMT endorsed the plan on 24 October 2018.

A detailed Action Plan to support the Risk Plan 2019-2021 throughout 2019 will be developed in Quarter 3 -18/19. The Plan will be developed taking into account results from the recent Risk and WHs Evaluations, the Risk Services Review, Document Review Schedules and the Change Program.



Heading toward target or progress acceptable

RESPONSE

No response required.

Strategic Risk Register

RESULTS/INTERPRETATION

No additional work was conducted on or around the Strategic Risk in Qtr 2, CMT have undertaken ongoing work in Qtr 3 presenting the Register to Council who subsequently adopted the Register.

Control track is being customised for The Barossa Council to advance it from a financial risk tool to one compatible to operational/corporate and strategic risks.



Heading toward target or progress acceptable

RESPONSE

No response required.

Operational Risk Register

RESULTS/INTERPRETATION

As above.



Heading toward target or progress acceptable

RESPONSE

No response required.

LGRS (LGA MLS/WCS/AMF)

RESULTS/INTERPRETATION**LGA Mutual Liability Scheme (LGAMLS)**

LGAMLS/LGAWCS Bi-Annual Risk Evaluation - Conducted at The Barossa Council from 30/10/2018 to 1/11/2018. Evidence submitted/reviews and interviews/site visits completed. The Risk Evaluation looked at Council's Risk and Work Health Safety (including injury management) Management processes. A preliminary version of this report was received by the Chief Executive Officer on 20 December 2018 and is yet to be accepted.

A review of the evaluation report in Qtr 2 raised concerns about the quality of the report, the content and some of the recommendations. The LGA were informed of the concerns in late Qtr 2, a revised evaluation report was received in mid Qtr 3.

Risk Management Action Plan for 2019 - The 2019 Risk Management Action Plan will be developed to be drafted in line with recommendations from the evaluation report and the 2019 – 2021 Risk Plan.

[Local Government Risk Services - Mutual Matters eNewsletter - November 2018](#)

[Local Government Risk Services - Mutual Matters eNewsletter - December 2018](#)

LGA Workers Compensation Scheme (LGAWCS)

Key Performance Indicator Action Plan for 2018 - Risk Services sought an extension of time from LGAWCS to assist with closing out actions from the 2018 KPI Action Plan. Extension was granted by LGAWCS until the end of October 2018. The Regional Risk Coordinator signed off 32 of the 33 actions as complete, giving us a 97% completion.

Incomplete action – Complete risk assessments for hazardous chemicals. The LGRS offer fee free assistance through the Tailored Implementation Plan Services (TIPS) program, the assistance is catered towards our needs. Risk Services will seek to utilise the program to:

- Review ChemAlert
- Identify the hazardous chemicals requiring risk assessment
- Train appropriate personnel in the use of ChemAlert
- Train appropriate personnel how to conduct a chemical risk assessment in ChemAlert
- Develop a schedule for those trained personnel to work to and complete all outstanding chemical risk assessments

Timeline for this to occur:

- E-mail Tony Grey with application for Tailored Implementation Plan Services by 1 April 2019
- One to two weeks for application evaluation and approval
- One to two weeks for Local Government Risk Services to attend a scoping meeting to draft up an implementation plan including timeline.

WHS Procedure Validation - In 2017 the LGAWCS acknowledged the need for a centralised approach to WHS audit. The WHS procedure validation team have set 13 & 14 March 2019 for the Hazard Management Process - Procedural Validation.

LGAWCS Investigation Simulation – As a prequel to the Court Simulations that LGAWCS, SafeWork SA and Sparke Helmore have presented in the past they now have a 3-4 hour simulation of a Notifiable Incident and the internal and SafeWork SA investigation that follows. The LGAWCS were looking for locations to host a simulation The Barossa Council have volunteered to host a simulation; date to be advised.

LGA Asset Mutual Fund (LGAAMF)

Please refer to LGRS Member for further details



Heading toward target or progress acceptable

RESPONSE

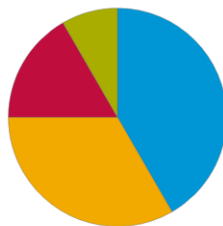
That CMT endorse the proposal to utilise the Tailored Implementation Plan Services to assist with training and completion of Chemical Risk Assessments by relevant departments.

2018/2019 Financial Year Insurance Claims:

The Barossa Council Dashboard – 18/19 Financial Year to date

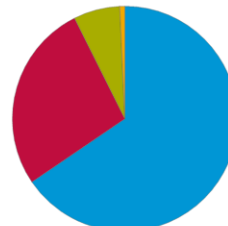


Class of Business % of Claims



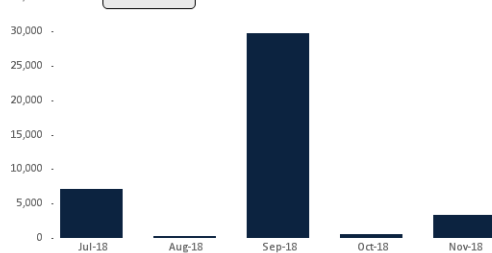
Motor	42%
Liability	33%
Personal Injury	17%
Property	8%

Class of Business % of Paid

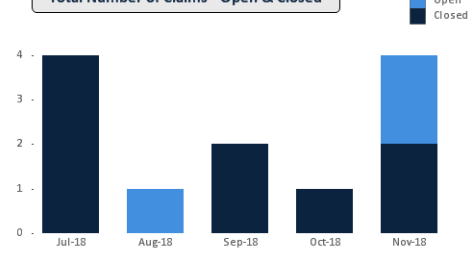


Motor	65%
Personal Injury	27%
Property	7%
Liability	1%

Total Paid



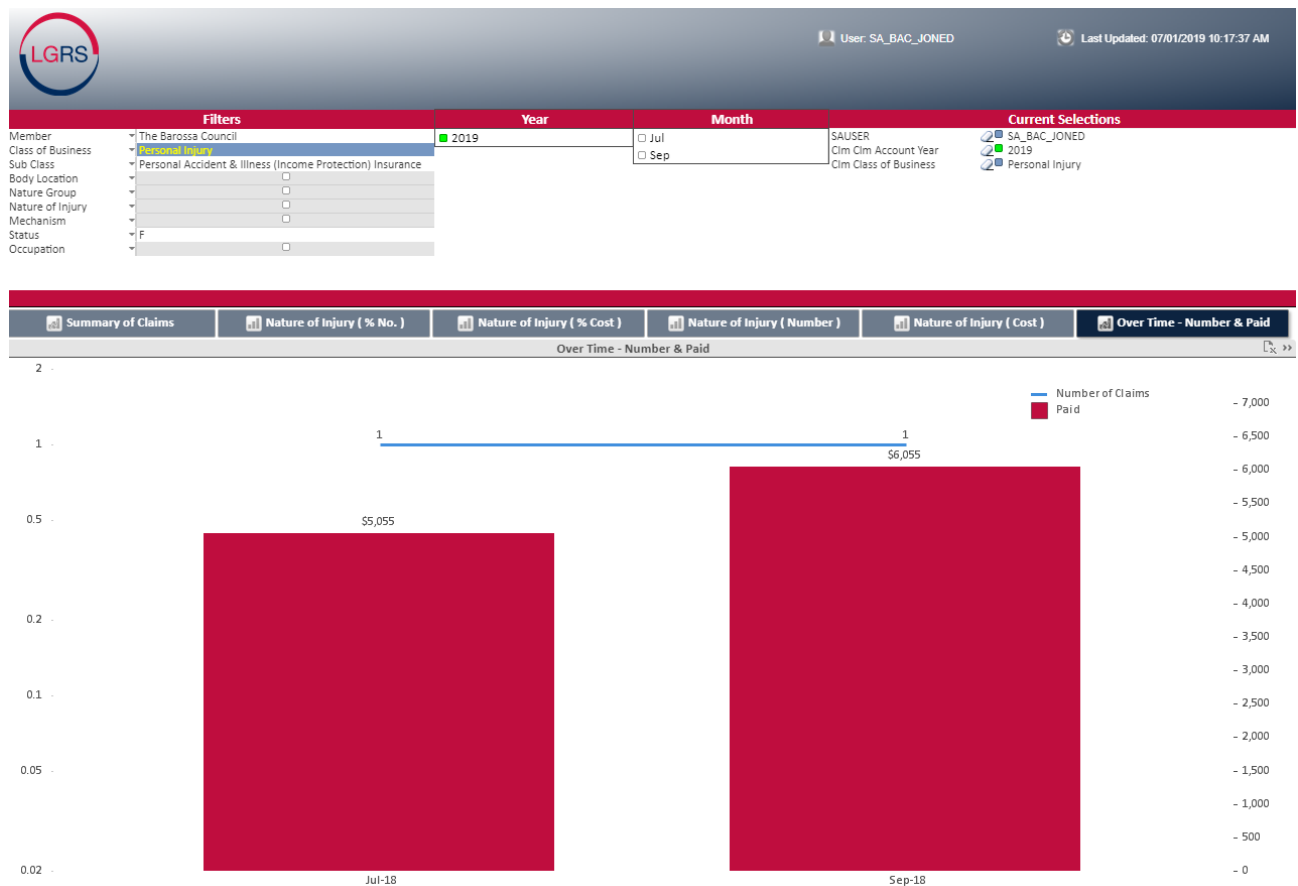
Total Number of Claims - Open & Closed



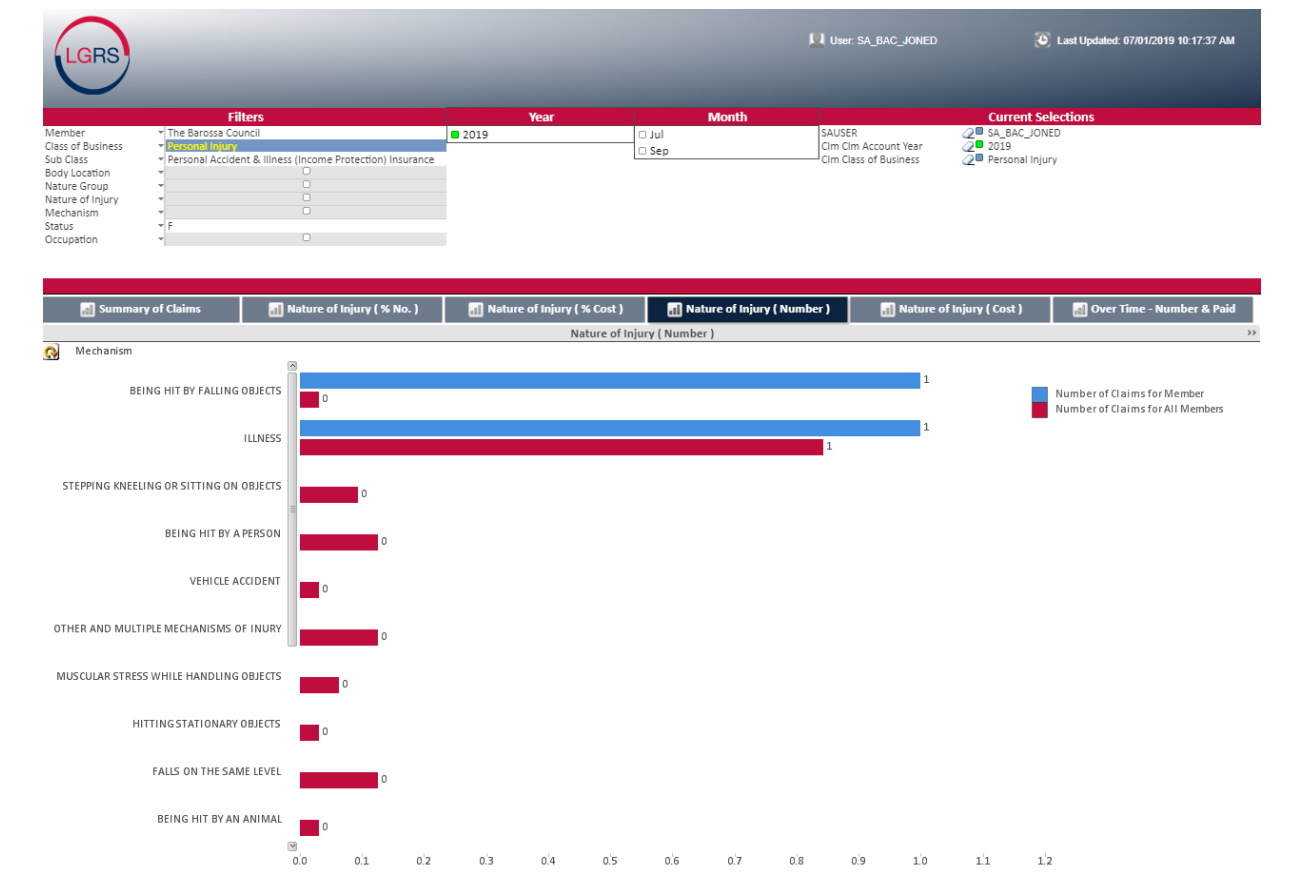
Injury by Body Location – 18/19 Financial Year to date



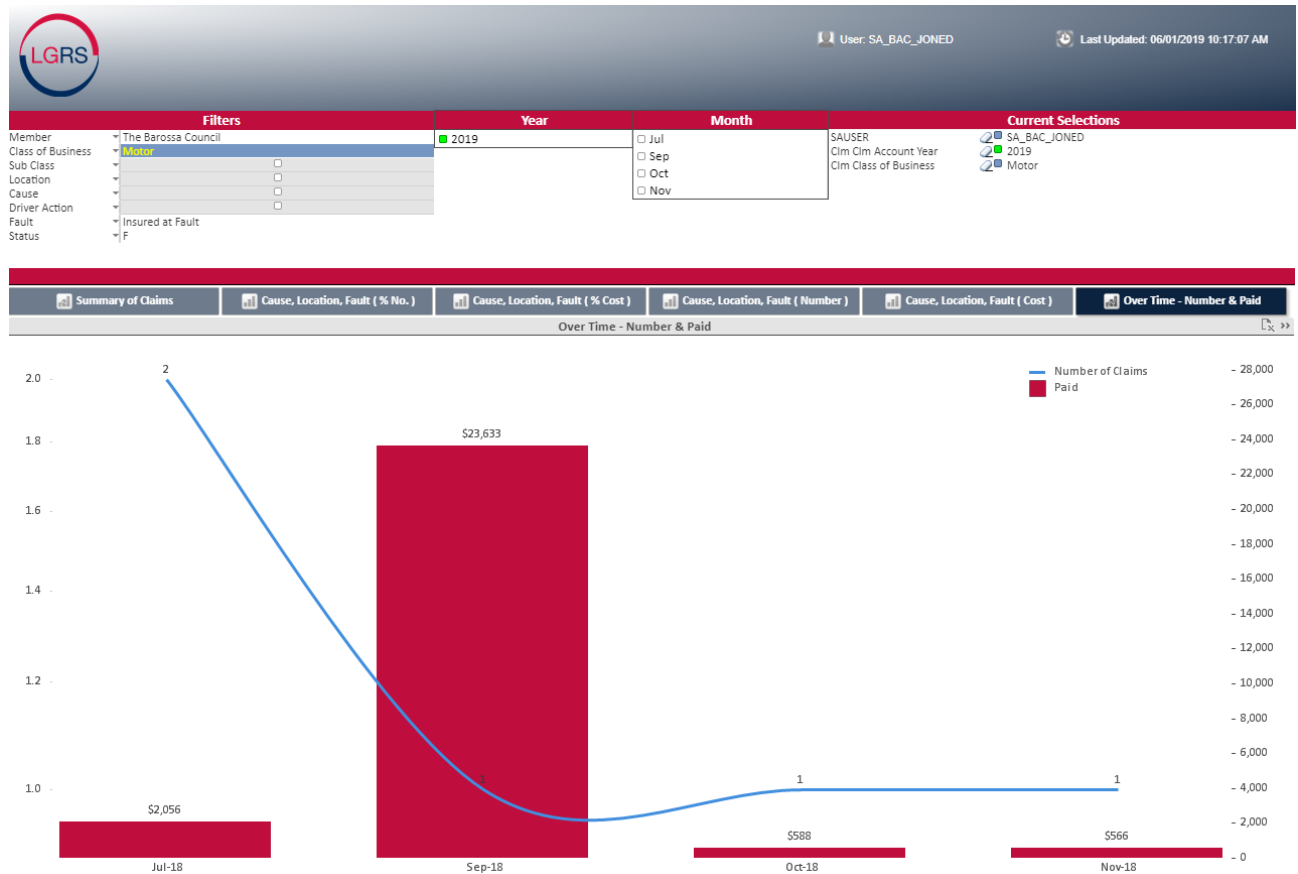
Workers Compensation - Claims Count 2- Net Paid \$11,110



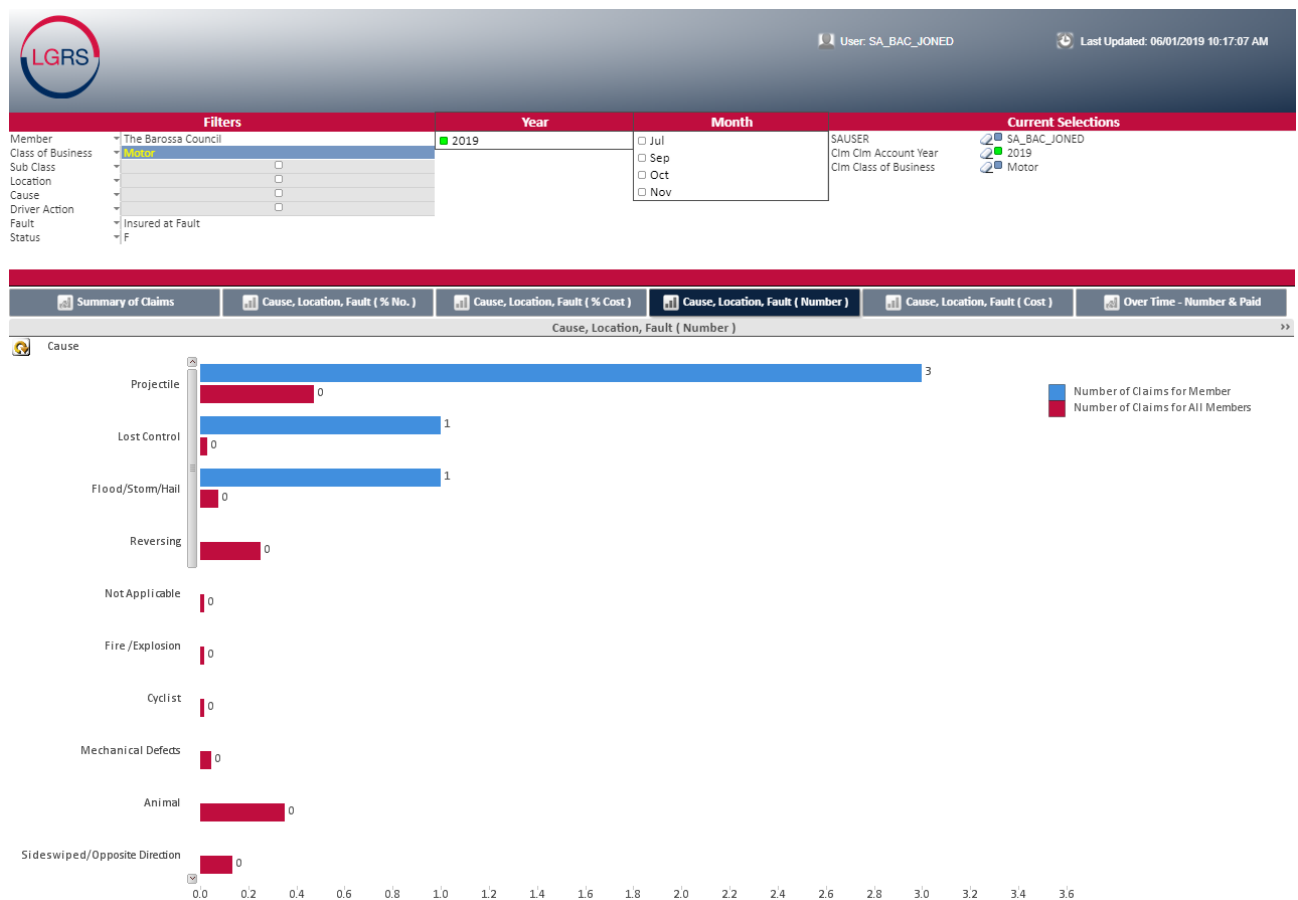
Workers Compensation – Claims Count 2 - By Mechanism of Injury Comparison



Motor Claims – Claim Count 5 - Net Paid \$26,843

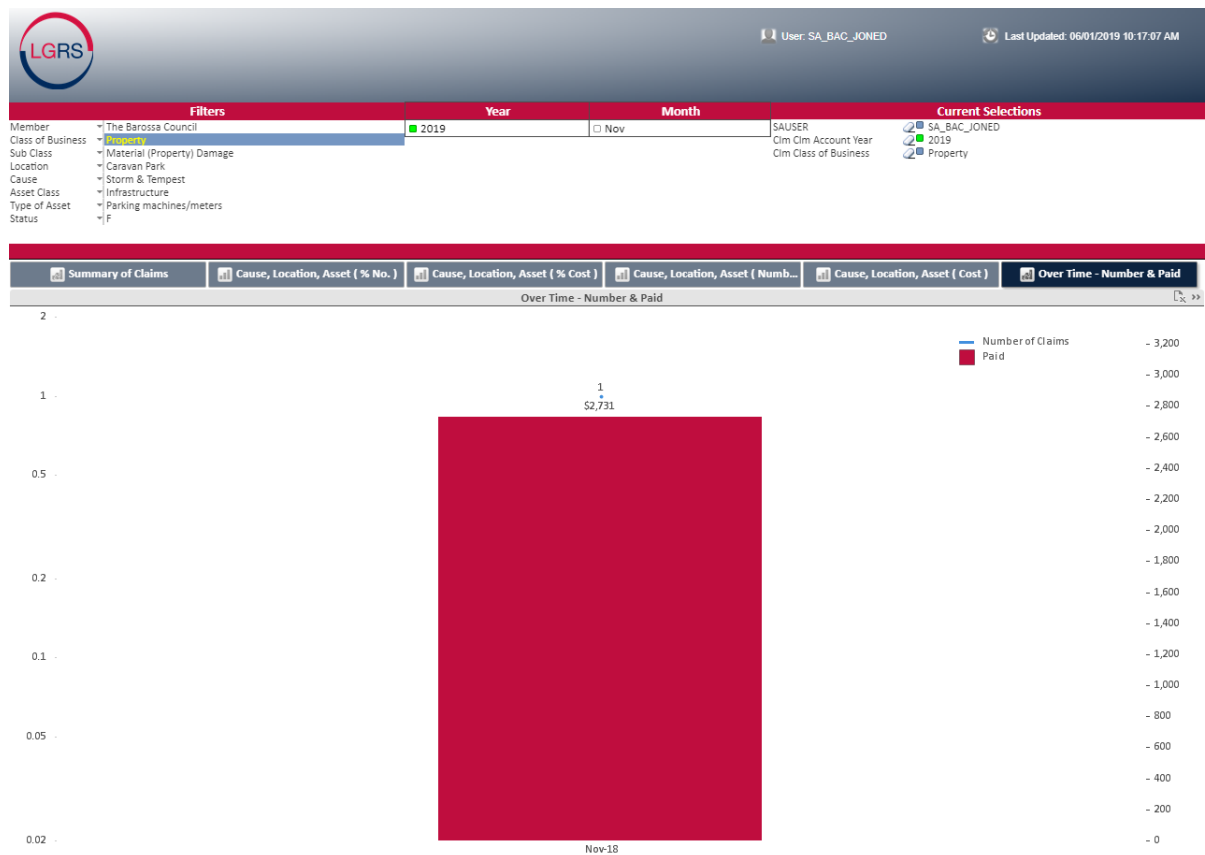


Motor Claims – Claim Count 5 – By Cause



Quarterly Risk Management Report – Quarter 2 - 2018/19

Property Claims – Claim Count 1 – Net paid \$2,731



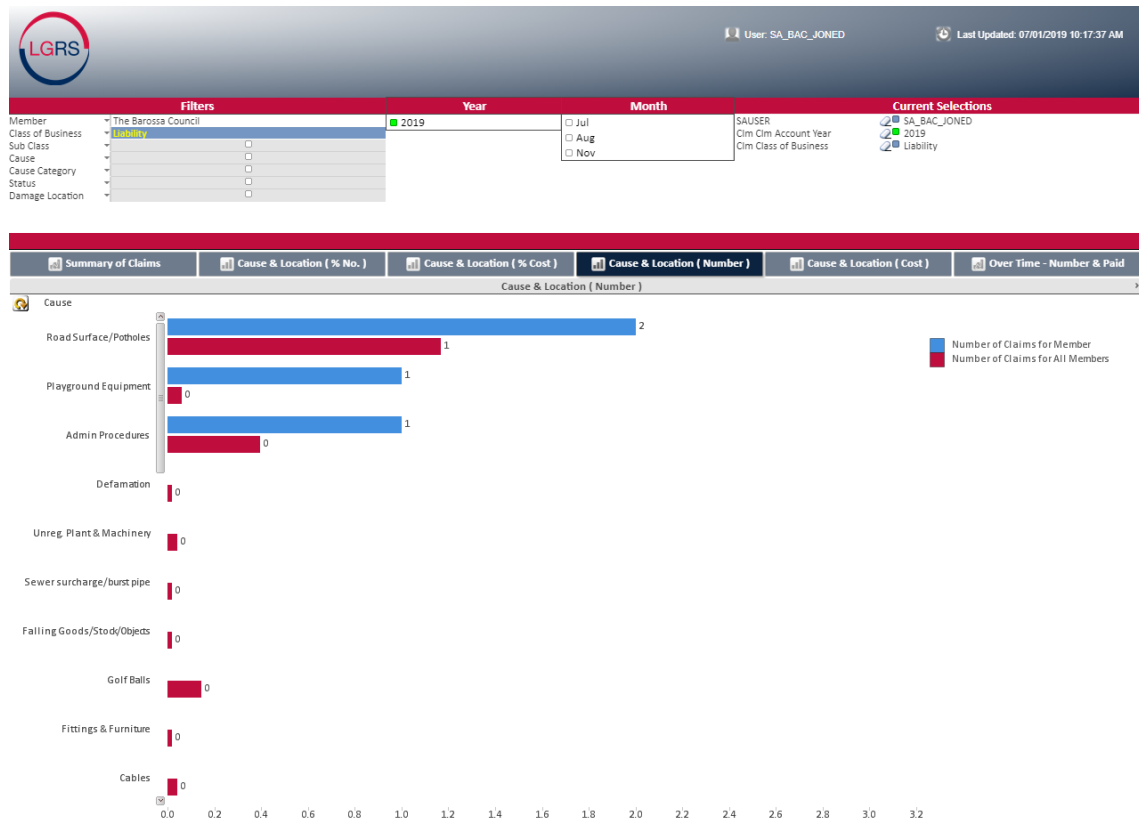
Property Claims – Claim Count 1 – By Cause Comparison



Mutual Liability Scheme – Claim Count 4 - Net paid \$300



Mutual Liability Scheme – Claim Count 4 – By Cause Comparison



RESPONSE

No response required.

Risk Plan

RESULTS/INTERPRETATION

Risk Services "Risk Plan 2019 – 2021" CMT endorsed the plan on 24 October 2018.

A detailed Action Plan to support the Risk Plan 2019-2021 throughout 2019 will be developed in Quarter 3 -18/19. The Plan will be developed taking into account results from the recent Risk and WHS Evaluations, the Risk Services Review, Document Review Schedules and the Change Program.



Heading toward target or progress acceptable

RESPONSE

No response required.

WHS Committee

RESULTS/INTERPRETATION

The Terms of Reference for the WHS Committee and the Sub Committees, drafted in consultation with HSRs Alyssa Sanders & Tomas Hennessy, was reviewed at the last WHS Committee meeting for 2018 and has been out for further comment by the WHS Committee and HSRs. Final draft is on hold as the document refers to the Risk Administration position around some of the administration and minute recording tasks; this will be reviewed once a determination on how The barossa Council will progress with this vacancy.



Heading toward target or progress acceptable

RESPONSE

No response required.

Emergency Management

RESULTS/INTERPRETATION

- Emergency Planning Committee (EPC) held Emergency Control Organisation (ECO) refresher training on 27 November 2018
- Australasian Fire and Safety conducted certificated warden training on 22 November 2018, the training included Chief Warden Training
- Business Continuity Plan (BCP) – final once over required before sending to Paul Kerrish for the next phase of plan development.
- i-Responda Essentials and i-Responda Flood and Fast Moving Water training sessions were hosted at The Barossa Council Chambers on 13 December 2018 and attended by workers from Town of Gawler, Light Regional and The Barossa Council.

- A full report with recommendations for proposed Defibrillator locations across The Barossa Council District has been prepared by Risk Services for OMG to review and endorse.
- Emergency Exercises – Majority of the planned exercises have gone to schedule, a review of the schedule to pick up on the incomplete exercises is planned for January 2019
- Zone Emergency Management Committee (ZEMC)
 - 9 October 2019 meeting held at The Barossa Council
 - January Meeting was Canceled
 - Next meeting yet to be scheduled
- Zone Emergency Support Team (ZEST), future meeting dates:
 - 7 May 2019
 - 7 August 2019
 - 5 November 2019



Heading toward target or progress acceptable

RESPONSE

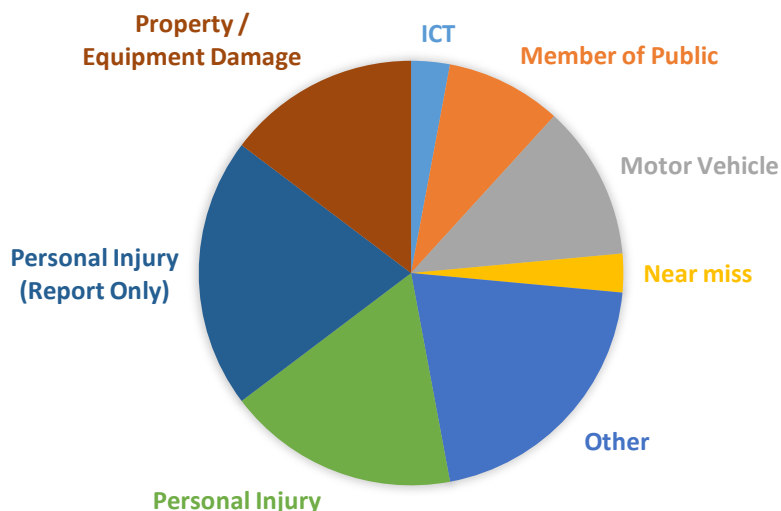
No response required.

Risk/WHS Incidents

RESULTS

Type	CCS		DES		ES		WES		Total	
	Q1	Q2	Q1	Q2	Q1	Q2	Q1	Q2	Q1	Q2
Hazards	0	0	0	0	0	0	1	0	1	0
Near Misses	0	0	0	0	0	0	0	1	0	1
*WHS Incidents	6	6	9	1	1	1	8	20	24	28
Property / Equipment Damage	0	0	0	0	0	0	3	5	3	5
Total of Incidents for this Quarter	6	6	9	1	1	1	12	26	28	34

WHS INCIDENTS - 18/19 QTR 2



*WHS Incidents	CCS		DES		ES		WES		Total	
	Q1	Q2	Q1	Q2	Q1	Q2	Q1	Q2	Q1	Q2
Business Process	0	0	0	0	0	0	0	0	0	0
Environmental Impact	0	0	0	0	0	0	0	0	0	0
ICT	0	0	0	0	0	0	0	1	0	1
Member of Public	1	2	5	0	0	0	2	1	8	3
Motor Vehicle	3	0	1	0	0	1	2	3	6	4
Non-work related	0	0	0	0	0	0	0	0	0	0
Occupational illness / disease	0	0	0	0	0	0	0	0	0	0
Other	0	1	1	1	0	0	1	5	2	7
Personal Injury	1	1	0	0		0	1	5	2	6
Personal Injury (Report Only)	1	2	2	0	1	0	2	5	6	7
Pre-existing medical condition	0	0	0	0	0	0	0	0	0	0
Total WHS Incident	6	6	9	1	1	1	8	20	24	28

RESULTS/INTERPRETATION

The 7 "Other" incidents vary from identifying asbestos cement products in excavations to a lost mobile phone and inappropriate behavior.

Works and Engineering Services (WES) have seen a sharp increase in incidents this quarter, contributing factors may be:

- increased reporting under current depot management
- decrease in presence from the Risk Team
- increased number of staff and contractors



Heading toward target or progress acceptable

RESPONSE

No response required.

Corrective and Preventative Actions

RESULTS/INTERPRETATION

Corrective And Preventative Actions (CAPAs) 2018/2019 Quarter 2												
Risk Rating	Corporate & Community Services			Development & Environmental Services			Executive Services			Works & Engineering Services		
	New	Closed	Active	New	Closed	Active	New	Closed	Active	New	Closed	Active
Extreme	0	0	0	0	0	0	0	0	0	0	0	1
High	0	0	0	0	0	0	0	0	0	0	0	1
Moderate	0	0	0	3	3	0	0	3	1	0	0	0
Low	3	0	7	20	19	2	6	8	5	12	11	12
Total	3	0	7	23	22	2	6	11	6	12	11	14

RESULTS/INTERPRETATION

44 New CAPA items entered
44 CAPA items closed
29 CAPA entries remain Active

7 Active items from 2017
17 Active items from 2018



Heading toward target or progress acceptable

RESPONSE

CMT to monitor CAPA's, raw numbers are stabilising however the closing of some older actions is still pending.

Active Extreme Risk rated CAPA:

Created April 2017 - Develop a Standby Process to clarify requirements of resting appropriately trained staff in the lead up to potential emergency response situations, including trigger points. Link this process to the Adverse Weather Process, with reference to legislation – WHS Act, National Heavy Vehicle Regulation (Fatigue Management), Industrial Relations, Codes of Practice.

Document Management

RESULTS/INTERPRETATION

A large number of the WHS and risk documents (Policies and Processes) are past the review date, Risk Services propose two options to assist in ensuring the management system is within the review period.

1. Assess the documents due, rate the documents based on risk and extend the review date by 1, 2, and 3 years from the day of assessment. Documents requiring review due to legislation change will not be given the extension.
2. Assess the pros and cons of accepting the One System documents and the risk if the One System is not fully implemented. Accepting the One System with little modification could potentially save 3 weeks of review time annually.

Previously this section was a list of documents developed and a list of documents pending by document title, I propose a simple table as below. This proposal is part of the review of tasks in the Risk Services department with the aim of providing more succinct information that will be more efficient to collate. Note no data has been collated for this report.

Document Development and Review 2018/2019 Quarter 2												
Document Type	Corporate & Community Services			Development & Environmental Services			Executive Services			Works & Engineering Services		
	New	Reviewed	Pending	New	Reviewed	Pending	New	Reviewed	Pending	New	Reviewed	Pending
Policy/ Process	0	0	0	0	0	0	0	0	0	0	0	0
Tools	0	0	0	0	0	0	0	0	0	0	0	0
Risk Assessment	0	0	0	0	0	0	0	0	0	0	0	0
SWI/SOP /SWMS	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	0	0	0	0	0	0	0	0	0	0

RESULTS/INTERPRETATION



Target at risk or not improving

RESPONSE

1. Please provide approval or recommendation on the document review proposal
2. Please provide approval or recommendation on reporting format for document reviews

Training and Induction

RESULTS/INTERPRETATION

Training Courses Provided	Date	Attendance No's	Absent	Record #
Emergency Warden Training	22/11/18	7	1	18/83290
Internal Emergency Control Organisation training - Using UHF radios during emergency - Emergency Management - Nuriootpa Office and Library -	27/11/18	19	2	18/83311
Equal Opportunity Diversity and Inclusion Training	5/12/18	16	7	18/83613
i-Responda Overview - Flood and Fast Moving Water	13/12/18	19	1	18/88040

RESULTS/INTERPRETATION



Heading toward target or progress acceptable

RESPONSE

No response required.

Workplace Inspection Schedule

ITEM	Frequency	2018											
		Oct				Nov				Dec			
		Wk1	Wk2	Wk3	Wk4	Wk1	Wk2	Wk3	Wk4	Wk1	Wk2	Wk3	Wk4
Nuriootpa Office	6M									P			
Depot - Tanunda	6M	CL											
Bushgardens - Nuriootpa	6M							P					
Dog Pound - Nuriootpa	6M						CE		P				
Barossa Regional Gallery - Tanunda	6M		P										
Library - Angaston	6M	P			CL								
Library - Mt Pleasant	6M						P						
Library - Lyndoch	6M	CE	P										
Springton Transfer Station	6M						CL						
Springton Quarry	6M						CE				P		
Library - Nuriootpa	6M					CP							
Altona Landcare Trail	12M								CP				
CWMS Treatment Plants/Lagoons/Pump Stations													
WILLIAMSTOWN													
Williamstown Waste Water Treatment Plant	12M		CP										
Little Adams - Pump Station	12M		CP										
Williamstown - Wild Street Pump Station	12M		CP										
Williamstown - South Terrace Pump Station	12M		CP										
Williamstown - Yettie Road Pump Station	12M		CP										
Williamstown - Caravan Park	12M		CP										
MT PLEASANT													
Mt Pleasant Williamstown Rd Pump Station	12m		CP										
Mt Pleasant Waste Water Treatment Plant	12M		CP										
Springton Waste Water Treatment Plant	12m		CP										
springton Redford Rd Pump Station	12m		CP										
Springton William Street Pump Station	12M		CP										
Parks/Halls/Men's Shed													
Williamstown Queen Victoria Jubilee Park, Williamstown	12M							P					
Angas Recreation Park, Angaston	12M		P										
Talunga Park, Mt Pleasant	12M									P			
Mt Pleasant Soldiers Memorial Hall	12M					P	CL						

ITEM	Frequency	2018											
	Weekly, Monthly, 3M, 6M, 12M	Oct				Nov				Dec			
		Wk1	Wk2	Wk3	Wk4	Wk1	Wk2	Wk3	Wk4	Wk1	Wk2	Wk3	Wk4
Ladders													
No. 1 - Ivan's Ute	6M		CL										
No. 2 - Tanunda Depot Main Shed	6M		CL										
No. 3 - Tanunda Depot Main Shed	6M		CL										
No. 4 - Tanunda Depot Main Shed	6M		CL										
No. 5 - Ivan Grieger's ute	6M		CL										
No. 6			CL										
No. 1 - Barossa Regional Gallery	6M		P										
No. 2 - Barossa Regional Gallery	6M		P										
No. 3 - Barossa Regional Gallery	6M		P										
Air Compressor													
Tanunda Depot Air Compressor	6M	CL											
Emergency Stop Buttons													
Depot - Tanunda	6M	CL											
Portable Eyewash Kit and Emergency Eyewash & Shower Station													
Depot - Tanunda	6M	CL											
Fume Extraction Unit													
Tanunda Depot	6M	CL											
Washdown Bay													
Tanunda Depot	6M		CL										
Fuel System													
Tanunda Depot	6M		CL										
P - Planned	CP - Completed as Planned/ CE – Completed Early / CL – Completed Late												

RESULTS/INTERPRETATION



Target not met

Only inspections recorded in schedule as complete have been included in this data. Inspections not recorded in the schedule as complete are highlighted in orange.

RESPONSE

Risk is working with workgroups to develop skills to complete the inspections without assistance.

The implementation of a digital management system like Skytrust will assist with workflow notifications, automatic update of inspection schedule and creation of corrective actions in CAPA register.

Internal and/or External Audits

RESULTS/INTERPRETATION

Risk and WHS evaluation.

Audit Area	No. of Conformances	No. of Non Conformances	No. of Opportunities for Improvement
Nil			

RESPONSE

No response required.

Legislative Changes

RESULTS/INTERPRETATION

Electrical Installation Compliance at Events

The Office of the Technical Regulator released a [Booklet](#) in January 2019 to provide guidance for event organisers and land owners; land owners are considered to be a facilitator according to the booklet

CMT reviewed a report prepared in February 2019 and made the following decisions:

1. CMT require officers to inform Event Organisers of guidelines and need of OTR use of licenced electricians through notes on Event Application Form;
 - a. Complete, Event application and conditions have been updated to include this information
2. CEO to write to LGRS CEO about matter and no direction from scheme and need to clarify what a festival/event is;
3. Determine what other Councils are doing through Gov Network and Risk Network.

RESPONSE

No response required.

Other Activities for the Quarter

RESULTS/INTERPRETATION

Activities:

- WHS Committee meeting
- Emergency Planning Committee meeting
- Change Program - Smarter Ways to Working Safely
- LGA Central Region Forum
- TDU Finish Line meeting with Angaston Business and Community Alliance
- LGFSG Pre Season Briefing – via Webinar
- Barossa ZEMC meeting
- Quarry crushing contract start up meeting
- SafeWork SA presentation on isolated work
- Risk Coordinator from Marion Council
- Beer & Cider Festival site assessment
- Risk Evaluation Conducted on 30/10/2018 and 1/11/2018
- Cash Handling Risk Discussion
- Path risk assessment on site at Altona Landcare Reserve
- Interactive Incident Investigation simulation
- Barossa Bush Gardens morning tea training session
- NHVR – Risk Assessment
- Conducted Emergency Management Presentation at Staff Meetings
- First Aid kit replenishment
- Conducted asbestos survey of Angaston Railway Precinct
- Consulted on revision to the event application form

RESPONSE

No response required.

Quarterly Risk Management Report Record Number: 18/72915*
Quarterly Risk Management Report Template Record No: 14/6470*

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Mutual Liability Scheme
Workers Compensation Scheme
Local Government Association
of South Australia

2018 Risk Evaluation Summary Report

The Barossa Council

Date of Evaluation: 30th October – 1st November 2018

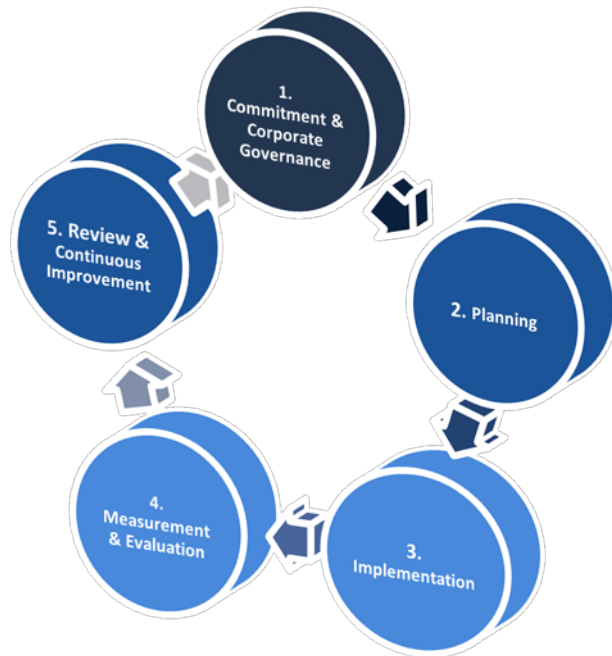
Date Report Issued: 19th December 2018

Name of Evaluators: Colleen Green & Sandy Munro

Local Government Risk Services (LGRS) have been specialist risk providers to Local Government in South Australia for over 40 years. Over this time, LGRS has developed a comprehensive range of services that deliver solutions to its Members regardless of whether it involves a self-insurance risk scheme, a traditional insurance product or a risk consultancy project.

As Local Government develops in South Australia, LGRS is working with the sector to develop and implement proactive systems and processes for risk management, claims management and insurance risk transfer.

Risk Evaluation Overview



The LGAWCS and LGAMLS provide a Risk Evaluation service to their Members, every two years. The aim of the Risk Evaluation process is to review each Member's risk management systems (including WHS and IM) against both LG Industry agreed Sector Baselines and other external requirements (e.g. RTWSA Performance Standards for Self Insurer requirements and relevant legislation). The objective of the evaluation is to assist Members to recognise and share LG risk management excellence, identify where opportunities for system improvements exist and to work in partnership with them to implement identified improvements.

The Risk Evaluation in its current format was introduced in 2017. Please see the overview on the Members Centre for more information in relation to the structure and process.

The summary report is structured as follows:

- An Executive Summary, which is completed by the Lead Evaluator, for both Risk and WHS/IM system aspects and briefly outlines the overall results of the evaluation and potential focus areas and recommended actions. This includes a Results Table, which summarises the results for both Risk Management (RM) and Work, Health and Safety (WHS) and Injury Management (IM) components.
- The RM Evaluation Report, which includes the chosen evaluation scope, names of evaluators, summary of findings and specific recommendations for each evaluated question within the identified evaluation scope.
- The WHS and IM Evaluation Report, which includes the evaluation scope, names of evaluators, summary of findings and specific recommendations for each sub-element within the evaluation scope.
- A conclusion, which is completed by the Lead Evaluator. This aims to identify where overall system trends and issues are occurring and what may be of assistance to the Member to progress them forward.



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Executive Summary

Overview and Objective:

Every two years, the Local Government Mutual Liability and Workers Compensation Schemes conduct an evaluation of each Scheme Member's Risk Management, Work Health and Safety and Injury Management systems. The purpose of these evaluations is to test (within the scope of the evaluation):

- a) How well the organisation's Risk Management systems meet Local Government sector established baselines and
- b) The organisation's level of conformance with ReturnToWork SA's Performance Standards for Self-Insurers for Work Health and Safety and Injury Management systems.

Members should use this information in their management planning and review systems to drive further improvement to their Risk, Safety and Injury Management systems.

In addition to this, the evaluations allow for sector-wide results to be collated and analysed to enable the Schemes to further assist the Local Government industry, either via sector wide programs or individual programs of targeted support.

This executive summary provides a brief overview of the results of the risk evaluation of The Barossa Council on the 30th October to the 1st November 2018. The participation of Member representatives in the evaluation is a critical part of the evaluation process, is integral to the quality of the evaluation and is always greatly appreciated.

Executive management are encouraged to review the evaluation summary report in its entirety for further detail and recommendations.

The completed risk evaluation, WHS and IM tools that support these findings are available from your allocated Risk Consultant, RRC or WHSC. The tools and reports are also available in your Member documents on the Members Centre.

SUMMARY OF FINDINGS:

Risk Management

Within the risk management systems, there are three mandatory areas and five electives of which Scheme Members may choose two to be evaluated.

In evaluating the organisation's Risk Management systems, reference was made to sector baselines, being a minimum standard expected to be in place. Sector baselines were established by a consultative group that included membership from both metropolitan and regional Scheme Members. It is to be noted that the baselines are not all legislative requirements, but a set of minimum requirements that is expected within the Local Government sector. All the criteria within the defined sector baseline must be met in order for the sector baseline to be deemed as being met.

The Barossa Council's results against the mandatory question sets are as follows:

Overview of Results – Mandatory Areas - Risk Management Systems

MANDATORY AREAS			
QUESTIONS	Total # of sector baselines evaluated	Sector Baseline Met	Sector Baseline Not Yet Met
Risk Management Systems	6	0	6

Specific Results and Improvement areas – Risk Management Systems

Q #	Risk Management Systems	Sector Baseline and Summary of any improvement required	Baseline Met or Not Met
1	Has Council endorsed a Risk Management System?	<p>Endorsed, documented, maintained/-reviewed system for managing risk</p> <p>The Barossa Council has in place an endorsed Risk Management Policy; however the Risk Management Process (Framework) is still being developed.</p> <p>Consideration:</p> <ul style="list-style-type: none"> Council to finalise the review and update of the Risk Management Process and endorse/approve in line with Councils internal document management process Review other related documentation to ensure consistency of information throughout 	NOT YET MET
1a	Has Council implemented a Risk Management System?	<p>Evidence of implementation (training, etc.) in accordance with unique system requirement, key stakeholders have been made aware (Elected Members, Exec)</p> <p>There appears to be some activity happening in the risk management space however, at the time of the evaluation, this does not appear to be systematic or structured and a key document in the risk management system is still under development.</p> <p>Consideration:</p> <ul style="list-style-type: none"> Council to consider the requirements for the implementation of their Risk Management System across the organisation and plan for this once their risk management system has been defined Council should consider how they monitor, review and report on their risk management system (strategic and operational) 	NOT YET MET
1b	What does Council's Risk Management System consist of?	<p>Documentation containing objectives, roles and responsibilities, risk management process: identification, assessment, evaluation, treatment, review, communication and reporting.</p>	NOT YET MET

		<p>Records management processes.</p> <p>Councils Risk Management System consists of a Policy, draft Process, Strategic Risk Register, some Operational Risk Registers and a suite of supporting documentation. At the time of the evaluation, not all documentation is developed and endorsed.</p> <p>Consideration:</p> <ul style="list-style-type: none"> • Council to continue with the review and update of their Risk Management Process (as per the suggested improvement noted in question 1) • During the review/development of the Risk Management process, ensure alignment to other risk documentation (e.g. risk categories) such as the Risk Management Policy and Risk Management Framework – Flowchart. • Continue to develop the Operational Risk Registers across the organisation 	
1c	Does Council have a Risk Register?	<p>Register captures key areas (Emergency/BCP/Disaster Risks, WHS, Assets, Projects/ Contracts/ Procurement)</p> <p>Council has recently developed a Strategic Risk Register which captures some of the sector baseline criteria as mentioned above. Operational Risk Registers are still being developed.</p> <p>Consideration:</p> <ul style="list-style-type: none"> • During the review/development of the Risk Management Process, ensure alignment to other risk documentation (e.g. risk categories) such as the Risk Management Policy, Risk Registers and Risk Management Framework – Flowchart. • Continue with the development of the Operational Risk Registers • Look at their frequency for monitoring their Corporate and Operational Risks. This information should also be captured in the reviewed Risk Management Process document • Consider the wording of the risks captured in the risk register to ensure it is clear with regards to what the risk to Council actually is (this will also help with identifying the appropriate controls to mitigate the risk) • Identify clearly what the controls are for each risk, ensuring the controls would mitigate the risk and the controls are able to be tested • Consider looking at the benefit of testing their controls in place (certainly for their higher risk rated risks) 	NOT YET MET

1d	Has training been identified and provided to all persons with responsibilities and accountabilities for risk management?	<p>Training occurs in accordance with system requirements and is undertaken by both initial and refresher training sessions.</p> <p>Training requirements are not currently captured in Councils Risk Management documentation. There is some Risk Management Policy awareness occurring during induction. There is a large body of work being undertaken with the training and qualification requirements from position descriptions being captured in Skytrust. There was no regular or refresher training identified or planned for at the time of the evaluation.</p> <p>Consideration:</p> <ul style="list-style-type: none"> • Capture specific Risk Management training requirements (for all persons with responsibilities and accountabilities) in the new Risk Management Process document • Ensure training requirements captured in the new Risk Management Process are transferred to the TNA and that training is planned for • Identify any of the other organisational risk training required (e.g. cyber/fraud awareness) and capture these requirements in the TNA 	NOT YET MET
1e	Which risks has Council identified via the risk management process as the top three risks, in order of priority?	<p>Risk Register with prioritised risks</p> <p>Council is still in the process of implementing their Risk Management System and haven't yet got to the stage of prioritising all their risks.</p> <p>Consideration:</p> <ul style="list-style-type: none"> • Continue with the development of the Operational Risk Registers, including the rating and prioritisation of risks • Council to consider the wording of their risks captured in their risk registers to ensure it is clear with regards to what the risk to Council actually is (this will also help with identifying the appropriate controls to mitigate the risk) • Council to identify clearly what their controls are for each risk, ensuring the controls would mitigate the risk and the controls are able to be tested • Council to consider looking at the benefit of testing their controls in place (certainly for their higher risk rated risks) • Council to determine what their monitoring and reporting requirements for their risk registers (Corporate and Operational), based 	NOT YET MET

		on their priorities	
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Overview of Results – Mandatory Areas - Roads and Footpaths

MANDATORY AREAS			
QUESTIONS	Total # of sector baselines evaluated	Sector Baseline Met	Sector Baseline Not Yet Met
Roads and Footpaths	8	3	5

Specific Results and Improvement areas – Roads and Footpaths

Q #	Roads and Footpaths	Sector Baseline and Summary of any improvement required	Baseline Met or Not Met
2	Does Council have systems in place to authorise or permit 3rd party alterations to a public road (non-business purposes)?	<p>Can Council demonstrate:</p> <ul style="list-style-type: none"> Criteria for the circumstances for the use of the permit are clearly defined Public access to the permit A defined and documented submission process A process for assessment of lodged form A process for response to applications, including dispute resolution Trained staff to assess permit applications Contingencies for staff absence Record management procedures <p>Not all sector baseline criteria listed above was able to be evidenced at the time of the evaluation. Some potential gaps have been identified in dot points 1, 3, and 6 above.</p> <p>Consideration:</p> <ul style="list-style-type: none"> Review and update the Section 221 Permit Application and associated information (also includes Council's internal documentation) to ensure all requirements are captured for each of the different types of works which are covered under Section 221 Review training requirements for persons with delegated authority to assess Section 221 Permit applications and ensure all persons have the required level of understanding to undertake this work 	NOT YET MET
2a	Does the authorisation process or permit consider structures and installations for their safety and suitability?	<p>The permit considers safety and suitability of structures and installations, where they</p> <ul style="list-style-type: none"> a) Unduly obstruct use of the road; or b) Unduly interfere with construction of the road; or c) Have an adverse effect on road safety <p>Not all activities covered by the section</p>	NOT YET MET

		<p>221 permit appear to cover the above criteria in the sector baseline.</p> <p>It appears that only activities relating to laying underground water services, laying underground electrical household connections and laying gas pipeline services considers this information.</p> <p>Consideration:</p> <ul style="list-style-type: none"> Review and update the Section 221 Permit Application and associated information, including the conditions to ensure the permit considers the safety and suitability of structures as listed in the sector baseline criteria 	
2b	Does the authorisation or permit include an indemnity from the applicant to the Council?	<p>The permit includes:</p> <ul style="list-style-type: none"> Indemnity for the Council, its employees and/or agents against all actions, costs, claims and demands for injury, loss or damage arising out of any negligent act or omission of the applicant in relation to any activities under the authorisation arising out of breach of any condition attaching to the authorisation, and Requirement for the applicant to take out and keep current (for the term of the application) a public liability policy of insurance to an appropriate level of cover per claim in respect of any negligent act or omission of the applicant in relation to any activities under the authorisation. assessment of lodged form <p>Not all activities covered by the section 221 permit appear to include the requirement for the applicant to take out and keep current an appropriate level of public liability insurance or include any indemnity information.</p> <p>It appears that only activities relating to laying underground water services, laying underground electrical household connections and laying gas pipeline services considers this information.</p> <p>Consideration:</p> <ul style="list-style-type: none"> Review and update the Section 221 Permit Application and associated information, including the conditions to ensure the permit considers contains the sector baseline criteria for appropriate insurance and indemnity clauses 	NOT YET MET
2c	Does Council have an asset management plan that covers the management and maintenance of roads and footpaths?	<p>The plan includes:</p> <ul style="list-style-type: none"> Asset listing Condition grading Issue log including close out of action <p>Council have an Infrastructure Asset Management Plan - Transport and supporting systems in place which meet</p>	MET

		the criteria set out in the sector baseline.	
2d	Does Council have an inspection and maintenance regime (or schedule) to inspect roads and footpaths?	<p>The regime or schedule includes:</p> <ul style="list-style-type: none"> • Road and footpath assessments • Consideration of roads which have been altered and reinstated <p>Council has an inspection and maintenance regime in place to inspect the roads and footpaths that includes consideration of the sector baseline criteria.</p>	MET
2e	How does Council prioritise roads during scheduling of maintenance/repair?	<p>The schedule considers the following when prioritising roads for maintenance or repair:</p> <ul style="list-style-type: none"> • Reported faults/issues • Traffic volumes • Proximity to public amenities • Areas concentrated with vulnerable people such as elderly • Areas where frequent complaints arise (trend analysis) <p>The Maintenance and Road Reseal and Rehabilitation Program for the asset is guided by the condition assessment, the customer requests, volume use and the budget. The road hierarchy is based on roads importance for traffic carrying function. The road hierarchy information is captured in the Infrastructure Asset Management Plan - Transport with further detail captured in Conquest.</p>	MET
2f	How does Council prioritise footpaths during scheduling of maintenance/repair?	<p>The schedule considers the following when prioritising footpaths for maintenance or repair:</p> <ul style="list-style-type: none"> • Reported faults/issues • Traffic volumes • Proximity to public amenities • Areas concentrated with vulnerable people such as elderly • Areas where frequent complaints arise (trend analysis) <p>Council has a Capital Works Program in place for footpath upgrades in place (Footpath Upgrade program). It appears that most of the maintenance for footpaths is reactive maintenance. In summary, it appears that Council is prioritising maintenance based on the sector baseline criteria; however nothing is documented to show that there is a process in place.</p> <p>Consideration:</p> <ul style="list-style-type: none"> • Council to document their process for prioritising their footpaths for maintenance and/or repair 	NOT YET MET
2g	If Council has Railway Interface/s, does Council fulfil its duties as a	Railway Interface Agreement completed and risk assessment conducted within 12 months of	

	Road Manager?	<p>agreement being signed.</p> <p>At the time of the evaluation there was no executed Railway Interface Agreement in place. There was no evidence of Risk Assessments conducted in conjunction with the Railway Infrastructure Manager/ Operator.</p> <p>It was stated that the railway crossings in the Council area are not active (dormant rail line), however there is no documentation received from the Rail Operator to confirm this.</p> <p>Consideration:</p> <p>Council to contact the Rail Operator/ Authority to follow up either:</p> <ul style="list-style-type: none"> Request a formal declaration stating that the Rail Corridor through the Barossa Council area is dormant, or Progress this obligation (as the road manager) to the point of having a signed Railway Interface Agreement in place and coordinate the completion of the required risk assessments 	NOT YET MET
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Overview of Results – Planning and Development Administration

MANDATORY AREAS			
QUESTIONS	Total # of sector baselines evaluated	Sector Baseline Met	Sector Baseline Not Yet Met
Planning and Development Administration	3	3	0

Specific Results and Improvement areas – Planning and Development Administration

Q #	Planning and Development Administration	Sector Baseline and Summary of any improvement required	Baseline Met or Not Met
3	Does Council have systems in place to guide Planning and Development activities?	<p>Can Council demonstrate:</p> <ul style="list-style-type: none"> Criteria for applications are clearly defined Information is accessible to the public with a clear process for assessment and response including dispute resolution Application process is accessible to the public (e.g. website) A defined and documented submission process Trained staff assess applications Contingencies are in place for staff absence Record management procedures are 	MET

		<p>followed</p> <p>It was confirmed that Council has adequate systems in place to guide planning and development activities.</p>	
3a	<p>Are building surveyors/-inspectors, planners, planning officers or planning staff, who are employed or engaged by Council accredited to provide planning advice and access new development applications?</p>	<ul style="list-style-type: none"> • Building surveyor: licenced via 'Surveyors Board SA' • Planner: <ul style="list-style-type: none"> ○ Corporate membership of the Urban and Regional Planning Chapter of the Planning Institute of Australia Incorporated, or ○ Such qualifications or experience in urban regional planning, environmental management or a related discipline as are in the opinion of the Minister appropriate (e.g. Cert IV in Local Government (Planning)). <p>All Council Building Inspectors and Planning Officers are qualified and have current accreditation.</p>	MET
3b	<p>Does Council have a process in place to manage written complaints related to development applications and completed projects?</p>	<p>The complaints process:</p> <ul style="list-style-type: none"> • Is defined and documented including escalation/appeal process under the Development Regulations S103 • Is accessible to the public (e.g. website) • Is assessed by trained staff • Includes a response in a timely fashion to the appropriate stakeholders (Complainant, Minister, etc.) <p>Following discussions with staff it was determined that Council has a process in place to manage written complaints related to development applications and completed projects. Council would follow Council's existing policies and processes; however there is an opportunity to clarify this.</p> <p>Consideration:</p> <ul style="list-style-type: none"> • It is suggested that Council consider documenting their internal procedure to capture what their process is for responding to S103 complaints. For example (reminder this is an example only): the Manager Development Services receives the complaint (from the Minister), investigates the complaint, notifies and briefs the CEO, notifies and provides relevant information to the LGAMLS and a response is provided via the CEO. The process/procedure should also capture things like who will attend any court hearings, when does legal get involved etc. <p>Please note: Councils internal process will need to consider the changes to the Planning & Development legislation (Planning, Development and Infrastructure Act (PDI Act) 2016 and the</p>	MET WITH COMMENTS



		associated Regulations, 2017).	
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Specific details of the identified gaps are available in the Risk Systems Evaluation Findings table in the Risk Management Detailed Findings section of this summary report.

Work Health and Safety

Work Health and Safety Systems are evaluated against selected elements from ReturnToWork SA's Performance Standards for Self-Insurers (PSSI). The Performance Standards describe the WHS and IM management system requirements for self-insured organisations in South Australia. The Performance Standards are designed to provide organisations with the opportunity to demonstrate the presence of effective business management systems. The model consists of 5 inter-related standards, 23 elements and 55 sub elements.

The LGA is the group self-insurance licence holder for all Councils and Prescribed Bodies in South Australia. Self-insured employers (Councils and Prescribed Bodies) are required to design, implement and maintain WHS systems to meet the self-insurance requirements.

This year, the WHS evaluation scope has been reduced to focus on areas identified as still requiring improvement from the 2017 RTWSA evaluation and two elements from standard 4 and 5 that are focussed on monitoring, reporting, review and improvement of the WHS system.

RTWSA provides guidance in relation to the specific requirements of each sub-element and evaluators are trained in understanding and applying this guidance to determine if an organisation is conforming to the requirements. Assessment is provided in line with the published PSSI definitions for conformance, non-conformance and observation.

The Barossa Council's results are as follows:

STANDARDS	Total sub elements evaluated	Conformance	Observation	Non-conformance
Standard 1- Commitment and Policy	1	0	0	1
Standard 3 - Implementation	8	1	4	3
Standard 4 - Measurement & Evaluation	1	0	1	0
Standard 5 - Management systems review and improvement	1	0	0	1

Specific Results and Improvement areas – WHS Management Systems

Q #	Sub-element requirements	Summary of any identified issues and improvement required	Baseline Met or Not Met
1.2.1	Supporting policies and procedures are in place?	Good foundations exist for Work Health and Safety Management System (WHSMS) documentation. Whilst supporting policies and procedures are in place review of these has not been consistent. Changes to review processes have not been updated to reflect current practices. It is recommended that reviews are conducted for Policies and Process documents to ensure they are in date and reflect Barossa Council practices.	Non-Conformance
3.2.1	A relevant Training program is in place and being implemented (relating to the TNA and subsequent plan and effective delivery thereof)	Barossa Council is implementing a revised system for their TNA and training program utilising Skytrust and should be acknowledged for their strong engagement across departments to	Observation

		<p>enable this.</p> <p>The system still requires full implementation. Identified training is required to be scheduled and undertaken and Hazardous Manual Task Risk Assessment training is recommended.</p>	
3.3.2	Accountability mechanisms are being used where relevant	<p>Barossa Council has a variety of accountability mechanisms, from line-of-sight reporting to Executive via CMT and OMG.</p> <p>Council may wish to consider the inclusion of KPI's for executive and program sponsorship of corporate safety plans.</p>	Conformance
3.7.1	The organisation must ensure contingency plans are periodically tested and/or evaluated to ensure an adequate response, if required.	<p>Significant work has been undertaken in this area in the last 12 months which is commendable. Updating site Emergency Management Plans, training of appointed wardens and i-Responda training has recently occurred. The LGRS is assisting with BCP review.</p> <p>Recommendations include implementing a program of works that include a schedule of testing (evacuation drills/ desktop exercises) and increasing the EPC meeting frequency to enable timely progress of actions.</p>	Observation
3.8.1	Hazard management systems including identification, evaluation and control are in place.	<p>The Hazard Management Process was due for review in August 2016 and the draft has not yet been endorsed. Information on the Hazard Register is outdated. Hazardous manual task risk assessments have not been undertaken. The Hazard Register is not reviewed by either by OMG, CMT or the WHS Committee.</p> <p>Recommendations include ensuring both the Hazard Management Process and Hazard Register are updated. A schedule for Hazardous Manual Task risk assessments needs to be considered. The implementation of the Skytrust Incident and Hazard module is highly recommended to reduce manual processes and to improve efficiencies.</p>	Non-Conformance
3.8.3	Control measures are based on the hierarchy of control process	<p>The hierarchy of controls is used on a day to day basis across various areas of the organisation and there appears to be good recognition and awareness of higher order controls.</p> <p>Consider ways to record and capture the rationale for accepting a lower level control. This is particularly important in the CAPA and Incident Reports (quality of reporting).</p> <p>Implementation of a Hazardous Manual Task Risk Assessment is also recommended to enable review of control</p>	Observation



		measures as required.	
3.8.5	Program(s) are in place to ensure an appropriate WHS consideration is given at the time of purchase, hire or lease of plant, equipment and substances.	<p>Council has a number of procurement and purchasing policies and procedures however there is some confusion around processes. Training and mentoring was last provided in 2014. Awareness exists of WHS considerations when purchasing plant however system requirements are not always being followed, e.g. static risk assessment could not be provided for the recent plant purchase of the trailer for cemetery works. Application of Councils process requiring Chemaalert risk assessments prior to purchase could not be evidenced.</p> <p>Recommendations include ensuring pre-purchase risk assessments (or static) are completed as per Council process for plant. Refresher training for Chemaalert and overall training in Council purchasing processes should assist awareness and consistency.</p>	Non-Conformance
3.8.6	Contractor and volunteer management systems are in place to meet the organisations duty of care to all persons.	<p>Volunteers are a significant part of Barossa Council operations and there has been considerable work undertaken to ensure their safety and awareness of WHS when assisting council.</p> <p>Contractor management has a good structure and there are concerted attempts at implementing a systematic process.</p> <p>Both Volunteer and Contractor processes still require further implementation. It is recommended Volunteer Policy and Process documentation (including Volunteer Induction manual) are finalised, endorsed and implemented. Contractor monitoring scheduling is recommended, as is training in contractor monitoring, including use of forms/ templates. Consideration could be given to IT system such as Skytrust to assist the monitoring function.</p>	Non-Conformance
3.9.1	That the implementation of relevant inspection and testing procedures are conducted by the relevant, competent person(s).	<p>There was evidence of processes that ensure inspection and testing is conducted by relevant, competent personnel (i.e. first aid, emergency service training, electrical test & tagging etc.).</p> <p>Improvements can be made with the quality of Workplace Inspection Checklist completion. Refresher training is suggested in addition to a review of the checklists to ensure items are current for sites.</p>	Observation
4.1.1.	The organisation must ensure planned objectives, targets and performance indicators for key elements of program(s) are	The 2015-2017 WHS Plan was -- extended over 2017-2018 period. There is a recently endorsed 2019-2021 Risk Plan (incorporating WHS). Evidence of	Observation

	maintained, and monitored and reported.	<p>monitoring and reporting to CMT and the WHS Committee was provided.</p> <p>Some currency issues with WHS Plans are now being rectified. Recommend review of the performance indicators in the new Draft Risk Plan which in their current form may be hard to quantify and measure. Issues with inconsistent progress reporting need to be addressed.</p>	
5.3.1	The organisation must ensure the system is reviewed and revised, if required, in line with current legislation, the workplace and work practices.	<p>There are a number of methods the Council uses in order to keep abreast of legislative changes (and these are raised in Quarterly Reports to CMT). There are recognised gaps with ensuring evidence of actions or changes required are documented. This is being addressed by inserting a document control section to capture any changes that are required.</p> <p>Yearly system reviews have not occurred due to resourcing issues. The review process undertaken for the new 2019-2021 Risk Plan was not clearly evidenced, and therefore could not be evaluated against Barossa procedures.</p> <p>Recommendations include implementing the document control process and ensuring yearly systematic WHSMS review is scheduled as per Council's Planning & Program Development Process.</p>	Non-Conformance

Specific details of the identified gaps are available in the WHS results table in the WHS/IM Detailed Findings section of this summary report.

In order to further develop systems and processes in the sub elements where observation/s and non-conformance/s have been identified, it is suggested that The Barossa Council review the findings and recommendations and include relevant actions that address the root cause of system failures into their Risk Evaluation action plan going forward.

Injury Management

The ReturnToWork SA's Injury Management Standards provide a framework from which a self-insured employer's exercise of its delegated powers and discretions can be evaluated. The Code of conduct for self-insured employers states the performance of the employer or self-insured employer will be measured against the Code and Injury management standards.

This year, the evaluation scope has been limited to only those IM sub-elements that sit under the revised Code of Conduct for Self-Insured Employers version 12 relevant to LGAWCS Members.

Whilst the IM Standards are measured by RTWSA at the LGAWCS level, the following sub-elements have been scoped and amended for the 2017 Risk Evaluation specifically for Scheme Members to meet their requirements in supporting the LGAWCS.

The Barossa Council's results are as follows:

SUB-ELEMENT	Total no of sub elements	Conformance	Observation	Non-conformance
Standard 1.2 Resources	5	5	0	0
Standard 1.6 Information provided to employees	2	2	0	0
Standard 2.8 Early intervention, recovery and RTW	2	2	0	0
Standard 4- Measurement, monitoring review	2	2	0	0

Specific Results and Improvement areas – Injury Management Systems

Q #	Sub-element requirements	Summary of any identified issues and improvement required	Baseline Met or Not Met
1.2.1	Documented job descriptions for all injury management personnel and where relevant management, supervisors and employees.	Position descriptions evidenced and relevant.	Conformance
1.2.2	Ensuring injury management personnel are competent to administer their role in a reasonable manner.	Certification provided and training is in currency. Consideration: when PD's next reviewed consider placing the specific LGAWCS training in skills/ training including the Payroll Officer (as specific course now available).	Conformance
1.2.3	Ensuring the allocation of resources is appropriate for the organisations type, volume and complexity of the case load.	There are adequate resources for this area. Consideration: it is worthy to consider some RTW training for the Manager or Supervisor of Nurioopta Centennial Park Authority (NCPA) for awareness and support in this area.	Conformance
1.2.4	Suitability of facilities and accommodation to ensure restricted access to	Secure facilities provided for both electronic records, hard copy files and required discussions.	Conformance

	information, including maintaining confidentiality during interaction with injured workers and service providers		
1.2.5	A Scheme Member is required to appoint a return to work coordinator and ensure the person appointed to this role has successfully completed relevant LGAWCS training. Where this role becomes vacant, the Scheme Member is required to re-appoint an employee within 3 months and ensure the employee(s) appointed have received relevant LGAWCS training within 3 months of the appointment being made.	Appointed and evidenced in 1.2.1 and 1.2.2	Conformance
1.6.1	How to report a work related injury	Induction processes (checklist) ensures workers are aware of work related injury reporting processes in addition to electronic resources.	Conformance
1.6.2	The process for lodging a claim for compensation	Process is outlined in Barossa Council's Workplace Return to Work Process, available online via Intranet and supported by ICC and RTW Coordinators.	Conformance
2.8.5	Where a worker has not returned to pre-injury employment within 6 months from date of first incapacity and is not working to their full capacity, new or other employment options are considered for the worker by the Scheme Member in conjunction with the LGAWCS.	Outlined in The Barossa Council Suitable Employment Process under Section 4.1. This has not yet occurred for Barossa Council.	Conformance
2.8.6	Where a Scheme Member does not provide suitable employment to a former work injured employee the Scheme Member notifies and consults with the LGAWCS.	Outlined in The Barossa Council Re-employment Process (Work Injury). This has not yet occurred for Barossa Council.	Conformance
4.1.1	Processes are in place that monitor, measure and review the effective implementation of the injury management system and where relevant, strategies to improve performance of the injury management system are identified.	Injury management statistics are reported in the HR Quarterly report which goes to the Corporate Management Team. Performance Indicators and Targets have been set and are monitored (i.e. 80% of claims reported to LGAWCS within the 24 hour timeframe).	Conformance
4.1.3	The Service Standards set out in Schedule 5, Part 2 of the Return to Work Act 2014 are in	Evidenced on site at Civic Centre and Depot (noticeboards).	Conformance



	place.		
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Specific details of the identified gaps are available in the IM results table in the WHS/IM Detailed Findings section of this summary report.

In order to progress to conformance in the sub elements where observation/s and non-conformance/s have been identified, it suggested that The Barossa Council incorporates the recommendations into their Risk Evaluation action plan going forward.

CONCLUSION

In relation to the risk management systems, it is suggested that Council consider the suggestions provided in relation to the development and subsequent implementation of their Risk Management System across the businesses. There has also been some commentary provided in the Roads and Footpaths management area which Council should consider and this should form part of the basis for Councils risk action plan over the coming two years.

The Barossa Council's Injury Management system is well controlled and processes appear to be well known with respect to notifying Council of injuries and progression through the claims process. There is consistency and reliability with all the sub-elements that were evaluated.

Continuous improvement is occurring with the WHS Management System and of note there are good reporting mechanisms available and there have been large bodies of work undertaken in order to progress areas in the last several years for emergency management, document control, health and well-being initiatives and hazard management in general. These have required a level of resource intensity to administrate and Barossa Council has effectively used technological innovation to assist administration and effectiveness (as evidenced by utilising Skytrust capabilities for the training area).

There have been system gaps due to some resourcing and staff changeover which was recognised and currently being addressed. It was acknowledged Barossa Council is implementing some new structures (safety sub-committees) and has a new WHS Plan 2019-2021 which provides direction moving forward. The consideration of further IT systems (e.g. Skytrust Incident and Hazard Module) should further reduce manual, person centric knowledge and workarounds and enable strong systematic management in the work health and safety space.

Risk Management Detailed Findings

The evaluation of The Barossa Council's risk management (RM) system included a review of existing documentation and meeting with employees and other workers. Comments and recommendations, including action items will provide management with some suggested ways to improve their systems, however it may be appropriate to implement an alternative action and this is at the discretion of each individual organisation and their management team.

Summary of the evaluation scope

The Risk Management Evaluation considered the presence & degree of implementation of systems relating to:

- Risk Management Systems
- Roads & Footpaths
- Planning & Development

The scope did not extend to preparedness for legislative change, (in relation to planning & development in particular) & Council should ensure it is actively reviewing & updating its policies, procedures & systems in anticipation of that change.

Employees and other workers involved in the evaluation process included:

- Derek Jones: Risk Advisor
- Jayne Glover: Risk/WHs Administration Officer
- Kimberley Rohan: HR Advisor
- Rugiyya Martin: Governance Advisor
- Josh Pukala: Project Officer
- Andrew Evans: Project Coordinator
- Donna Gray: Coordinator Operations
- Louis Monteduro: Manager Development Services

Documentation Review

The review included reviewing policies, processes and supporting documentation within the Council's RM, and supporting organisational systems, as provided by the Auditee prior to and during the evaluation.

Additional evidence provided after the evaluation will only be accepted as evidence for this evaluation if agreed by the evaluator or the Client (i.e. LGAWCS and LGAMLS management).

Physical Verification

The Risk Management section of this evaluation was conducted at The Barossa Councils Nuriootpa Office and the Tanunda Depot and involved the demonstration & interrogation of live systems to support the evidence provided prior to the evaluation.

Report Findings and Recommendations

Report findings and recommendations for each evaluation question are provided in the following table.

Further broader system recommendations are provided in the executive overview and conclusion.

It should be recognised that the findings and recommendations of this report should be used for:

- Planning and continuous improvement by Council of their RM Systems

2.1.1 RM Systems Evaluation Findings

Q #	Topic Area	Question and Findings Summary
1	Risk Management Systems	<p>Has Council endorsed a Risk Management System?</p> <p>I looked at Councils Risk Management Systems and discussed this with Derek Jones, who is the Risk Advisor.</p> <p>This leads me to the following findings:</p> <p>The Barossa Council has in place an endorsed/approved Risk Management Policy (TRIM Ref 13/47307; next review 17/11/2019). The Risk Management Policy was approved by Council on 17th November 2015. Evidence of this was sighted:</p> <ul style="list-style-type: none"> Minutes of the Meeting of The Barossa Council - 7.2.1.4: Risk Management Policy B1997 (Carried 2014-18/449) <p>It was noted at this Council meeting that "The Risk Management Process shall be completed after the policy is approved and authorised". At the time of the evaluation, this had not been completed.</p> <p>Councils Risk Management Policy refers to Council's Risk Management Framework (which by definition in the policy is "associated processes, databases and tools"). It is noted that one of these "associated processes" is Councils Risk Management Process, which was not in place at the time of the evaluation. Council are in the process of reviewing/drafting this document.</p> <p>It is noted that a number of other documents across the organisation refer to Councils Risk Management Policy for information on the risk assessment process (e.g. WHS – Task Risk Assessments; Corporate Risk Assessments) and it appears that this information is actually going to be contained in Councils Risk Management Process, not the policy itself. The Risk Management Policy does not contain this information.</p> <p>Council does have a range of other supporting/associated documents which form part of their risk management system and this information is captured in question 1b.</p> <p>I have therefore deemed this as not yet meeting the sector baseline and Council may wish to consider the following suggestions for improvement:</p> <ul style="list-style-type: none"> Continue the review and update of the Risk Management Process (recommend to consider doing this in line with the latest version of the ISO 31000). The LGAMLS has developed and updated the Risk Management Policy and the Risk Management Framework template documents which could be used by Council to assist their review process. It is imperative that Councils Risk Management system is tailored to suit and that the documentation contains enough information to explain the "how to" part of the process for the end users (provide them enough information so they know how to apply it). The updated Risk Management Process to be endorsed/approved in line with Council's internal document management process. Council should review their other documentation (e.g. Hazard Management Process, risk assessment templates) to ensure there is consistency with the information (including the likelihood/consequence tables and risk matrix) and ensuring that this documentation refers to the correct procedure/process for the relevant information.
1a	Risk Management Systems	<p>Has Council implemented a Risk Management System?</p> <p>There appears to be some evidence that Council has undertaken some ad-hoc implementation processes, however Council's Risk Management System has not yet been fully defined – this is still work in progress.</p> <p>Council's Risk Management Policy itself doesn't mention any implementation or training requirements; however there was some evidence that people are being made aware of Councils Risk Management System through the induction process.</p> <p>It appears that the training requirements for those with responsibilities and accountabilities with regards to risk management will be captured in the reviewed Risk</p>

		<p>Management Process document as there is a heading in the draft document for this.</p> <p>Risk management is covered as part of the induction process and evidence of this was sighted.</p> <ul style="list-style-type: none"> The Barossa Council Induction Process template: HPE Content Manager Ref: 13/4941; next review 11/9/2020; Risk Management covered on page 7 <p>There was evidence of risk management information (training) being provided to Elected Members during induction and subsequent information/training provided in the lead up to the development/adoption of the Risk Management Policy.</p> <p>The following Risk Management presentations were sighted:</p> <ul style="list-style-type: none"> The Barossa Council Elected Member Induction; Internal Training: 12th November 2014 – 18.31910 Presentation – Risk Management Framework: Council Workshop 3rd June 2015 (noted that this was in the lead up to Council endorsing/approving the Risk Management Policy on 17th November 2015) – 17.37603 <p>Additional training/ presentations were sighted during the evaluation, however there was no evidence provided of attendance records for any regular structured training:</p> <ul style="list-style-type: none"> Risk Management Framework Council Workshop; 12th December 2016 – 18.42004 Risk Management System Presentation; 2016 – 18.30781 <p>There was evidence that risk management training requirements are captured on the TNA (this appears to be only relating to the induction information: awareness of the Risk Management Policy and Process (which, as mentioned hasn't yet been developed) provided during the induction process). There did not appear to be evidence during the evaluation of Risk Management training being provided as regular/refresher training.</p> <p>There is a quarterly report with includes information on risk provided to the Audit Committee.</p> <p>There has been some work done recently to develop a Strategic Risk Register, however the finalisation and subsequent implementation of this register is still work in progress. At the time of the evaluation, the Strategic Risk Register (and likelihood and consequence tables and the risk matrix) were in the final stages of being endorsed by the Audit Committee. Further commentary on the register is provided in question 1c.</p> <p>The Risk Services Report to the Audit Committee dated 30th October 2018 was sighted. The following information was provided in the report under the heading of Strategic Risk Register:</p> <ul style="list-style-type: none"> Audit Committee endorsement of the Consequence and Likelihood Tables and Risk Matrix (Attachment 1) and Strategic Risk Register (Attachment 2) is requested CMT has endorsed the revision of the Consequence and Likelihood Tables, Risk Matrix and Strategic Risk Register. The Strategic Risk Register has been assessed by CMT and Risk Services. All risk items have either been accepted with the routine processes and any control already in place, or where appropriate, additional controls have been recommended. The next phase will be to create an action plan to ensure the controls are implemented and reviewed for effectiveness Risk Services has looked at how other councils manage their Risk Register with the intention of making it a valuable working document. Options will be presented to CMT for consideration. <p>There are some Operational Risk Registers in place across the organisation and the process for the management of these risks sit with the operational / department managers (as a decentralised process). There have been a number of Corporate Risk Assessments undertaken; however it was unclear if the risks identified and the associated controls in place are captured in the organisational risk register or the CAPA for follow up. A copy of the following was sighted during the evaluation:</p> <ul style="list-style-type: none"> Corporate Risk Assessment – Technology Services – Completed 31st October
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		<p>2017</p> <p>Also sighted during the evaluation was the Quarterly Risk Management Report – Quarter 1 – 2018-19. This report is provided to the CMT and the Audit Committee as a regular update.</p> <p>In summary, there appears to be some activity happening in the risk management space however, at the time of the evaluation, this does not appear to be systematic or structured and a key document in the risk management system is still under development.</p> <p>It is noted that there is a body of work planned for 2019 in the risk management space. Sighted the body of work captured in the following 2018 Risk Action Plan:</p> <ul style="list-style-type: none"> 2018 Risk Management Action Plan; 18.14617 <p>I have therefore deemed this as not yet meeting the sector baseline and Council may wish to consider the following suggestions for improvement:</p> <ul style="list-style-type: none"> It is suggested that Council consider their requirements for the implementation of their Risk Management System across the organisation and plan for this once their risk management system has been defined (including the Risk Management Process finalised and approved). Note: The LGAMLS has developed a Risk Management Implementation Plan which could be used by Council to assist them when structuring up their implementation requirements. This document has been developed to assist Councils with identifying the steps involved in reviewing, updating and implementing their Risk Management System across the organisation. Council should consider how they monitor, review and report on their risk management system – e.g. to their Audit Committee and CMT and determine what is monitored and the frequency of this monitoring. The determination of the monitoring, reviewing and reporting requirements should also include the operational risks.
1b	Risk Management Systems	<p>What does Council's Risk Management System consist of?</p> <p>The Barossa Council have a Risk Management Policy (Date Code: TBCPOC3100; next review 17th November 2019) in place. This policy will be supported by a Risk Management Process (Framework).</p> <p>The Risk Management Process is currently under development and this will be the key document which will contain the sector baseline information. At the time of the evaluation, it was noted that this document still requires quite a bit of work to get it to the stage where it is ready for consultation before being finalised. There may be subsequent work aligning the risk management information with other Council documentation (e.g. WHS processes, risk assessment templates etc.). This is the key/critical document which outlines the risk management process for the organisation.</p> <p>Council has developed a Risk Management Framework Flowchart, which is a one page map of key legislation, standards, guidelines, plans, Council teams and business processes and a list of risk categories. The risk category information in this document doesn't appear to match up with the information in the Risk Management Policy.</p> <p>Council have recently developed a Strategic Risk Register which was in the process of going to the Audit Committee for endorsement at the time of the evaluation. The risks in the Strategic Risk Register have linkages to the Strategic Plan Goals. See further commentary about the risk register at question 1c</p> <p>The Operational Risk Registers are still being developed. The management of these risks sit with the operational / department managers (as a decentralised process). At the time of the evaluation, it was noted that not all departments have risk registers in place.</p> <p>There is a Risk Plan 2019 – 2021 which has recently been developed/ drafted. This plan contains four (4) programs and the associated actions are captured in the Risk Management Action Plan. The outcomes from the Risk Management Plan will be reported by way of the Risk Management Quarterly Report and the annual system review to CMT, OMG and WHS Committee. The objectives, outcomes, measures and</p>

		<p>targets will be reviewed by the CMT, OMG and WHS Committee at least annually. As this is a newly developed process, evidence of this occurring was not able to be sighted during the evaluation.</p> <p>In addition to these, Council have a suite of operational documentation including Emergency Management Plans (for each site), a Business Continuity Plan (BCP), and a suite of other operational processes (procedures) in place.</p> <p>There is a records management process in place. Council use HPE TRIM to manage their records. There is an internal records management process (procedure) in place.</p> <p>I have therefore deemed this as not yet meeting the sector baseline and Council may wish to consider the following suggestions for improvement:</p> <ul style="list-style-type: none"> • Council to continue with the review and update of their Risk Management Process (as per the suggested improvement noted in question 1) • During the review/development of the Risk Management process, ensure alignment to other risk documentation (e.g. risk categories) such as the Risk Management Policy and Risk Management Framework – Flowchart. • Continue to develop the Operational Risk Registers across the organisation
1c	Risk Management Systems	<p>Does Council have a Risk Register?</p> <p>The Barossa Council have recently developed a Strategic Risk Register and this was in the final stages of endorsement by the Audit Committee at the time of the evaluation. This register appears to capture the main areas mentioned in the sector baseline. This Risk Register contains 20 risks (register is missing risk number 15). The Strategic Risk Register captures description, risk types, risk categories, risk owner, risk causes and potential causes, consequences, existing controls, residual risk rating, risk acceptance, target level of risk, treatment options and information related to following up treatment options.</p> <p>Council's Operational Risks are captured on individual Operational Risk Registers which are located on Sharepoint (Councils intranet site). This is managed by the department managers as part of a decentralised process. It is noted at the time of the evaluation, not all Operational Risk Registers are in place. It also hasn't been determined how these registers will be monitored, reviewed and reported on (as mentioned in question 1a).</p> <p>The structure of the Strategic Risk Register appears to be in place, however, at the time of the evaluation, it was noted that some of the risks are not clearly articulated (i.e. what is the actual risk to council?), some of the controls are quite broad and would be difficult to test, not all of the controls documented appear to mitigate the risk and there was no evidence to see that the current controls in place are being tested, or have been tested. For example: Strategic Risk #1 – 2nd existing control – Reporting on planned activities". The question is, how would this be tested, how many reports and what frequency? It is noted there are many existing controls listed for this risk and measuring these controls listed would be difficult. This would be part of the implementation of the risk register once the rest of the risk management system has been finalised.</p> <p>The key document outlining the process for monitoring and reporting on organisational (strategic and operational) risks is still being developed.</p> <p>I have therefore deemed this as not yet meeting the sector baseline and Council may wish to consider the following suggestions for improvement:</p> <ul style="list-style-type: none"> • During the review/development of the Risk Management Process, ensure alignment to other risk documentation (e.g. risk categories) such as the Risk Management Policy, Risk Registers and Risk Management Framework – Flowchart. • Continue with the development of the Operational Risk Registers • Suggest Council look at their frequency for monitoring their Corporate and Operational Risks. This information should also be captured in the reviewed Risk Management Process document • Council to consider the wording of their risks captured in their risk register to ensure it is clear with regards to what the risk to Council actually is (this will also help with identifying the appropriate controls to mitigate the risk)

		<ul style="list-style-type: none"> • Council to identify clearly what their controls are for each risk, ensuring the controls would mitigate the risk and the controls are able to be tested (succinct) • Council to consider looking at the benefit of testing their controls in place (certainly for their higher risk rated risks)
1d	Risk Management Systems	<p>Has training been identified and provided to all persons with responsibilities and accountabilities for risk management?</p> <p>The training requirements are not currently documented in Councils Risk Management Process; however this document is currently being developed. It was noted at the time of the evaluation, that there is a heading for training in the draft Risk Management Process. Council should clearly define and document their requirements in their reviewed Risk Management Process.</p> <p>A range of training is currently being identified in Council's TNA which is housed in Skytrust. The information from each of the position descriptions as well as any training requirements identified during the performance appraisal process is being collated and entered into Skytrust. This body of work is still being undertaken and was not completed at the time of the evaluation.</p> <p>There has been a limited amount of "wider" risk training which has been undertaken across the organisation, including on Code of Conduct and ICAC. There has been some more "operational" training undertaken including Managing Difficult Customers and Mandatory Reporting.</p> <p>Training/awareness of the Risk Management Policy and Process (Framework) is part of the induction process with new employees signing off saying they have been made aware of the Risk Management Policy as well as other key organisational policies.</p> <p>There was no evidence of any regular or refresher Risk Management training being undertaken or planned for across the organisation for those people with risk management responsibilities.</p> <p>There was also no evidence of the wider risk management training planned for or undertaken in key risk areas such as Cyber or Fraud Awareness.</p> <p>I have therefore deemed this as not yet meeting the sector baseline and Council may wish to consider the following suggestions for improvement:</p> <ul style="list-style-type: none"> • Capture specific Risk Management training requirements (for all persons with responsibilities and accountabilities) in the new Risk Management Process document • Ensure training requirements captured in the new Risk Management Process are transferred to the TNA and that training is planned for • Identify any of the other organisational risk training required (e.g. cyber/fraud awareness) and capture these requirements in the TNA
1e	Risk Management Systems	<p>Which risks has Council identified via the risk management process as the top three operational risks, in order of priority?</p> <p>Council is still in the process of implementing their Risk Management System and haven't yet got to the stage of prioritising all their risks.</p> <p>There are currently 20 strategic risks on the risk register (the register is missing risk number 15). The register allows for the capture of the residual risk rating and whether the risk is accepted.</p> <p>Council is also in the process of finalising the Corporate Risk Assessments with Council teams to determine their top 3 operational risks.</p> <p>As mentioned in question 1c, Council should consider the wording of their risks captured in their risk register to ensure it is clear with regards to what the risk to Council actually is (this will also help with identifying the appropriate controls to mitigate the risk).</p> <p>Implementation of the risk management system should include the prioritisation of Council risks.</p> <p>I have therefore deemed this as not yet meeting the sector baseline and Council</p>

		<p>may wish to consider the following suggestions for improvement:</p> <ul style="list-style-type: none"> • Continue with the development of the Operational Risk Registers, including the rating and prioritisation of risks • Council to consider the wording of their risks captured in their risk registers to ensure it is clear with regards to what the risk to Council actually is (this will also help with identifying the appropriate controls to mitigate the risk) • Council to identify clearly what their controls are for each risk, ensuring the controls would mitigate the risk and the controls are able to be tested (succinct) • Council to consider looking at the benefit of testing their controls in place (certainly for their higher risk rated risks) • Council to determine what their monitoring and reporting requirements for their risk registers (Corporate and Operational), based on their priorities
2	Roads and Footpaths	<p>Does Council have systems in place to authorise or permit 3rd party alterations to a public road (non-business purposes)?</p> <p>I looked at Councils Road and Footpath Management Systems, including the S221 permitting process, the documentation associated with roads and footpaths and railway interface agreements. This was also discussed with Donna Gray (Coordinator Operations), Andrew Evans (Project Coordinator) and Josh Pukala (Project Officer).</p> <p>This leads me to the following findings listed for each of the sector baseline criteria:</p> <p><u>Criteria for the circumstances for the use of the permit are clearly defined (permit is used for alterations to the arrangement of the road)</u></p> <p>The permit application and standard specification outlines relevant criteria for application to be assessed against. It is noted that the permit application only contains basic information and doesn't include any conditions of the permit. The standard specification appears to only cover 3 types of works and there may be a gap with other types of works covered by the section 221 permit.</p> <p><u>Public access to the permit (download from website)</u></p> <p>It was confirmed that the permit application is readily available for members of the public to download on Councils website.</p> <p><u>A defined and documented submission process</u></p> <p>The submission process is defined and documented with information on the website, questions to complete on the permit application and information contained in the Standard Specification for Excavation and Reinstatement of Services under Council Controlled Land.</p> <p>As mentioned above, there may be a gap in relation to the provision of information of permit applications for activities other than laying underground water services, laying underground electrical household connections and laying gas pipeline services. It is also noted that this standard specification document requires an update as it still refers to outdated legislation/Council Policy reference (e.g. 4.3 Safety: Occupational Health & Safety).</p> <p><u>A process for assessment of lodged form</u></p> <p>The applications are assessed against the criteria set out in the specification document. Council also has in place an internal document outlining the process with regards to landscaping and maintenance of Council verge. Sighted the following document:</p> <ul style="list-style-type: none"> • Policy Guidelines for Landscaping and Maintenance of Council Road Verge in Established Urban Areas <p>It was advised that a site inspection is undertaken on each permit application.</p> <p><u>A process for response to applications, including dispute resolution</u></p> <p>Council has a process for responding to applications. Response letters are sent for approvals as well as non-approvals. There is an internal process for following up on disputes or where people want a review of a Council decision. The following documentation was sighted:</p>

		<ul style="list-style-type: none"> Complaint Handling Policy; next review 01/03/2020; HPE Content Manager Ref: 18/16770 Complaint Handling Process; next review 01/04/2016; TRIM Ref: 13/24507 Internal Review of Council Decision Policy; next review 01/08/2019; HPE Content Manager Ref: 15/32472 Internal Review of Council Decision Process; next review 01/08/2019; HPE Content Manager Ref: 15/42710 <p><u>Trained staff to assess permit applications</u></p> <p>Simon Marschall: Project Officer and Josh Pukala: Project Officer both have the delegated authority to approve applications. They have both been trained in assessing permit applications; however, the level of understanding of the requirements of the Local Government Act is not clear.</p> <p>As part of the evaluation process, information was requested so the evaluation tool could be completed. There was an email about the section 221 permit process provided as part of the evidence which contained a question "what is a structure?" The definition of a structure is documented section 221 of the Local Government Act and the expectation would be that anyone who has the delegated authority under the Local Government Act should be aware of this information.</p> <p><u>Contingencies for staff absence</u></p> <p>As mentioned above, Simon Marschall: Project Officer and Josh Pukala: Project Officer have the delegated authority to approve applications. They back each other up in the event of staff absence.</p> <p><u>Record management procedures</u></p> <p>Council has an internal procedure in place for Records Management (Records Management Process).</p> <p>Completed applications and any correspondence are captured in HPE - TRIM, Councils corporate record keeping system.</p> <p>I have therefore deemed this as not yet meeting the sector baseline and Council may wish to consider the following suggestions for improvement:</p> <ul style="list-style-type: none"> Review and update the Section 221 Permit Application and associated information (also includes Council's internal documentation) to ensure all requirements are captured for each of the different types of works which are covered under Section 221 Review training requirements for persons with delegated authority to assess Section 221 Permit applications and ensure all persons have the required level of understanding to undertake this work
2a	Roads and Footpaths	<p>Does the authorisation process or permit consider structures and installations for their safety and suitability?</p> <p>Not all activities covered by the section 221 permit appear to include the following information/criteria in the sector baseline:</p> <p>The permit considers safety and suitability of structures and installations where they:</p> <ol style="list-style-type: none"> unduly obstruct use of the road; or unduly interfere with construction of the road; or have an adverse effect on road safety <p>It appears that only activities relating to laying underground water services, laying underground electrical household connections and laying gas pipeline services considers this information.</p> <p>I have therefore deemed this as not yet meeting the sector baseline and Council may wish to consider the following suggestions for improvement:</p> <ul style="list-style-type: none"> Review and update the Section 221 Permit Application and associated information, including the conditions to ensure the permit considers the safety and suitability of structures as listed in the sector baseline criteria

2b	Roads and Footpaths	<p>Does the authorisation or permit include an indemnity from the applicant to the Council?</p> <p>Not all activities covered by the section 221 permit appear to include the requirement for the applicant to take out and keep current an appropriate level of public liability insurance or include any indemnity information as per the following sector baseline criteria:</p> <ul style="list-style-type: none"> • indemnity for the Council, its employees and/or agents against all actions, costs, claims and demands for injury, loss or damage arising out of any negligent act or omission of the Applicant in relation to any activities under the Authorisation or arising out of breach of any condition attaching to the Authorisation, and • requirement for the applicant to take out and keep current (for the term of the application) a public liability policy of insurance to an appropriate level of cover per claim in respect of any negligent act or omission of the Applicant in relation to any activities under the Authorisation <p>It appears that only activities relating to laying underground water services, laying underground electrical household connections and laying gas pipeline services contains this information.</p> <p>I have therefore deemed this as not yet meeting the sector baseline and Council may wish to consider the following suggestions for improvement:</p> <ul style="list-style-type: none"> • Review and update the Section 221 Permit Application and associated information, including the conditions to ensure the permit considers contains the sector baseline criteria for appropriate insurance and indemnity clauses
2c	Roads and Footpaths	<p>Does Council have an Infrastructure and Asset Management Plan that covers the management and maintenance of roads and footpaths?</p> <p>The Barossa Council have an Infrastructure Asset Management Plan Transport in place (TRIM Ref 17/32485). This Infrastructure Asset Management Plan Transport was first developed in November 2008 (Version 1.0). It has been updated in May 2017 (Version 4.1).</p> <p>The Infrastructure and Asset Management Plan Transport was sighted during the evaluation. The plan includes information about the condition grading of roads and footpaths. The plan also covers asset risk management information and talks about critical risks and risk treatment plans (section 5.2).</p> <p>"Conquest" contains the listing of the roads and footpaths.</p> <p>Capital works schedules are in place (for both roads and footpaths) covering a 15 year period.</p> <p>The Infrastructure and Asset Management Plan Transport contains the Projected 10 year Capital Renewal and Replacement Works in Appendix B.</p> <p>The Infrastructure Asset Management Plan contains information on maintenance, including reactive, planned and specific maintenance work activities. Conditional assessments of roads are also undertaken. At the time of the evaluation, these assessments were currently being done.</p> <p>Issues or requests are captured through the Customer Request Maintenance System (CRM). The information from the CRM goes onto the maintenance list to be followed up. The actions on the maintenance list are monitored and tracked until completed. The data from the Road Condition Audit Assessment gets collated to map out the next three (3) years of Road Reseal and Rehabilitation Program.</p> <p>I have therefore deemed this as meeting the sector baseline.</p>
2d	Roads and Footpaths	<p>Does Council have an inspection and maintenance regime (or schedule) to inspect roads and footpaths?</p> <p>The Barossa Council has an inspection and maintenance regime in place to inspect the roads and footpaths.</p> <p>Condition audits/assessments are undertaken for roads and footpaths every four (4) years. The information from here feeds into the Road Reseal and Rehabilitation</p>

		<p>Program. In between these four (4) yearly audits, Council staff also go out and check the roads and footpaths as they are undertaking their normal work (ad-hoc inspections). They will escalate any issues that they see.</p> <p>For alterations and works reinstatement around development sites, the quality of the works which has been completed is checked to ensure any issues are addressed. Council tries to liaise with other providers e.g. SA Water, SA Power Networks and APA. Council have indicated that the biggest issue for them at the time of the evaluation is that generally, the reinstatements are of poor quality.</p> <p>In addition to the inspections undertaken by staff, issues/concerns raised by members of the public are captured in the CRM System. This information is followed up, areas inspected and outcomes fed into the maintenance list.</p> <p>I have therefore deemed this as having met the sector baseline.</p>
2e	Roads and Footpaths	<p>How does Council prioritise roads during scheduling of maintenance/- repair?</p> <p>The Maintenance and Road Reseal and Rehabilitation Program for the asset is guided by the condition assessment, the customer requests, volume use and the budget. High traffic areas receive greater frequency of inspection. The road hierarchy is based on roads importance for traffic carrying function. The road hierarchy information is captured in the Infrastructure Asset Management Plan Transport with further detail captured in Conquest.</p> <p>As mentioned in question 2d, Council has a maintenance list/ schedule in place. The information from the CRM System and other inspections/audits is captured in this list and work is prioritised and allocated to the workforce to be scheduled for completion, or contracted out if needed.</p> <p>Sealed road maintenance is outsourced. Only urgent repairs are undertaken internally by Council staff. This is generally pothole work done with cold mix. All other work is contracted out. Work is collated and a "program of works" is emailed to the contractor from the panel (panel contracts in place).</p> <p>For unsealed roads, Council has a routine grading program in place. If Council Officers notice any issues whilst they are out on the roads, a Pathway request (CRM) is sent through and an inspection is undertaken. If the road needs intervention, Council staff will either grade the road, or plan for the works to be undertaken. Following discussions with staff during the evaluation, it was noted that safety is their first and foremost concern. They always look to see if there is a higher intervention required and if so, they plan for this to occur.</p> <p>The maintenance of the roads is prioritised based on the following:</p> <p><u>Reported faults/issues</u></p> <p>These could be reported by staff during other works being undertaken, inspections/audits as well as from members of the public (captured through the CRM System)</p> <p><u>Traffic volumes</u></p> <p>The roads are categorised and priority given to parts of the road network which have high traffic volumes (road hierarchy)</p> <p><u>Proximity to public amenities</u></p> <p>Roads in close proximity to public amenities are given higher priority when considering any maintenance required (road hierarchy)</p> <p><u>Areas concentrated with vulnerable people such as elderly</u></p> <p>Roads which are concentrated with vulnerable people are given higher priority when considering any maintenance required. Staff have mentioned that this has already been taken into consideration when the road hierarchy was developed. Above the road hierarchy, this is not a mandated part of their road program; however following discussions with staff, it appears that this is taken into consideration when prioritising their work.</p> <p><u>Areas where frequent complaints arise (trend analysis)</u></p>

		<p>The software Council use for road management allows them to track trends. This information is reviewed by Council Officers and the information on any maintenance required or renewal can be updated as needed.</p> <p>I have therefore deemed this as having met the sector baseline.</p>
2f	Roads and Footpaths	<p>How does Council prioritise footpaths during scheduling of maintenance/repair?</p> <p>It was advised that Council has a Capital Works Program in place for footpath upgrades (Footpath Upgrade program).</p> <p>The Sealed Road Audit which Council undertakes (every 4 years), also looks at the condition of the footpaths. Information from this is used to inform the Footpath Upgrade program.</p> <p>It appears that most of the maintenance for footpaths is reactive maintenance. Council Officers undertaking other works who notice an issue will send in a Pathway request (CRM) and the area of footpath will be inspected to see what work may need to be undertaken, or if it needs to be fed into the Footpath Upgrade Program.</p> <p>Council have lots of rubble paths which need to be managed. Rectifying any identified tripping issues are dealt with first. Minor repairs are undertaken by Council staff and major works are contracted out.</p> <p>Council have stated that their biggest gap (and concern) is their unsealed footpaths.</p> <p>Conquest records the different type of footpaths (sealed/unsealed, connector paths etc.). Council main street footpaths receive 1st priority when planning for maintenance. The connector footpaths (e.g. to schools, aged care facilities, shops – key connections) are prioritised over some of the “lessor” used footpaths, however it was stated that this is undertaken subjectively and this is not necessarily documented.</p> <p>In summary, it appears that Council is prioritising maintenance based on the sector baseline criteria; however nothing is documented to show that there is a process in place.</p> <p>I have therefore deemed this as not yet meeting the sector baseline and Council may wish to consider the following suggestions for improvement:</p> <ul style="list-style-type: none"> • Council to document their process for prioritising their footpaths for maintenance and/or repair
2g	Roads and Footpaths	<p>If Council has Railway Interface/s, does Council fulfil its duties as a Road Manager?</p> <p>At the time of the evaluation there was no executed Railway Interface Agreement in place. There was no evidence of Risk Assessments conducted in conjunction with the Railway Infrastructure Manager/ Operator.</p> <p>It was stated that the railway crossings in the Council area are not active (dormant rail line), however there is no documentation received from the Rail Operator to confirm this.</p> <p>Council does liaise with Genesee & Wyoming when work is undertaken near railway corridor i.e. recent bike path installation over railway line opposite Nuriootpa Head Office. The following evidence of a licence agreement/email was sighted:</p> <ul style="list-style-type: none"> • Licence Agreement - Tanunda Road Bike Path -18/70304 <p>I have therefore deemed this as having not yet met the sector baseline and Council may wish to consider the following suggestions for improvement:</p> <ul style="list-style-type: none"> • Council to contact the Rail Operator/Authority to follow up either: <ul style="list-style-type: none"> ○ Request a formal declaration stating that the Rail Corridor through the Barossa Council area is dormant, or ○ Progress this obligation (as the road manager) to the point of having a signed Railway Interface Agreement in place and coordinate the completion of the required risk assessments
3	Planning and	<p>Does Council have systems in place to guide Planning and Development</p>

	Development Administration	<p>activities?</p> <p>I looked at Councils Planning and Development Administration Systems and discussed this with Louis Monteduro (Manager Development Services) and Rugiyya Martin (Governance Advisor).</p> <p>This leads me to the following findings, listed under each of the sector baseline criteria:</p> <p><u>Criteria for applications are clearly defined</u></p> <p>The Barossa Council has a range of information in place that documents their planning and development activities.</p> <p>The criteria for applications are clearly defined and are included in the Barossa Council's Development Plan, on Development Information Guides (Fact Sheets) as well as on their website. The following information was sighted during the evaluation:</p> <ul style="list-style-type: none"> • Fact Sheet Development Information Guide – Development Application Requirements • Guidelines for undertaking land Division • Fact Sheet Development Information Guide – Owner and Builder Information • Fact Sheet Development Information Guide – Important Information for Owners and Builders • Fact Sheet Development Information Guide – Vineyard Development • Fact Sheet Development Information Guide – Swimming Pools and Spas <p><u>Information is accessible to the public with a clear process for assessment and response including dispute resolution</u></p> <p>The overarching process is described on Council's website. Additional information is also contained in the many Development Information Guides (Fact Sheets), as they relate to many aspects of the development assessment process and these can also be found on Council's website.</p> <p>Examples sighted include:</p> <ul style="list-style-type: none"> • The Barossa Council's Development Plan • Fact Sheet Development Information Guide – Development Application Decision Process • Fact Sheet Development Information Guide – Development Approval (this DIG contains the steps of the Development Application Process) • Fact Sheet Development Information Guide – Non-Complying Development <p>Information on the appeal rights are captured in the Development Information Guides. Council also has information on their website on the Internal Review of Decisions.</p> <p><u>Application process is accessible to the public via website</u></p> <p>It was confirmed during the evaluation that the application process is accessible to the public via Council's website.</p> <p>People are able to lodge Development Applications using a Development Application form. The application can be lodged at any one of The Barossa Council Offices</p> <p><u>A defined and documented submission process</u></p> <p>Council has a defined and documented submission process that is clear to members of the public. A wide range of information stepping people through the process is available on line. There is also a clear process for staff to follow internally when they are receiving, assessing and responding to development applications.</p> <p><u>Trained staff assess applications</u></p> <p>All staff receiving, assessing and responding to development applications have been trained in their role. Requirements are documented in the position descriptions. Information is also captured in the Development Services TNA. This was sighted during the evaluation.</p> <p>Specific qualifications/training/ accreditation information is captured in question 3a.</p>
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3a	Planning and Development Administration	<p>Are Building Surveyors, Inspectors, Planners, Planning Officers, or Planning staff who are employed or engaged by Council accredited to provide planning advice, and assess new development applications?</p> <p>Council has a number of qualified staff undertaking their planning and development activities. Requirements are documented in the position descriptions. Information is also captured in the Development Services TNA. This was sighted during the evaluation. The following qualifications, accreditation and membership information was sighted during the evaluation:</p> <ul style="list-style-type: none"> • Brad Gaspar – Level three assistant Building Surveyor • Tony Manuel – Level two assistant Building Surveyor • Peter Xerri - Level two assistant Building Surveyor • Janine Lennon – Master of Urban and Regional Planning with Honours • Jake Boswell – Bachelor of Urban and Regional Planning with Honours • Dylan Grieve - Bachelor of Urban and Regional Planning with Honours • Paul Mickan – Grad. Dip. Urban Planning • Louis Monteduro – Bachelor of Arts (Planning) <p>The contingency arrangements in place include the use of contractors. Evidence of information captured for contractors undertaking planning and development activities for Council include the following:</p> <ul style="list-style-type: none"> • Assist Planning & Development Services: Janine Lennon – sighted relevant documentation as part of the contractor engagement process <p>I have therefore deemed this as having met the sector baseline.</p>
3b	Planning and Development Administration	<p>Does Council have a process in place to manage written <i>complaints</i> related to development applications and completed projects?</p> <p>Following discussions with staff it was determined that Council has a process in place to manage written complaints related to development applications and completed projects.</p> <p>The Barossa Council has the following documents in place (as sighted on their website):</p> <ul style="list-style-type: none"> • Complaint Handling Policy; next review 01/03/2020; HPE Content Manager Ref: 18/16770 • Complaint Handling Process; next review 01/04/2016; TRIM Ref: 13/24507 • Internal Review of Council Decision Policy; next review 01/08/2019; HPE Content Manager Ref: 15/32472 • Internal Review of Council Decision Process; next review 01/08/2019; HPE Content Manager Ref: 15/42710 <p>As mentioned above, there is information available to the public on the Council website. Applicants are usually encouraged to go via the ERD courts but if a complaint was made to the minister, it would follow the same internal complaints process as identified in their documentation listed above.</p> <p>Although this has been deemed this as having met the sector baseline, Council</p>



		<p>should consider the following suggestion for improvement:</p> <ul style="list-style-type: none">It is suggested that Council consider documenting their internal procedure to capture what their process is for responding to S103 complaints. For example (reminder this is an example only): the Manager Development Services receives the complaint (from the Minister), investigates the complaint, notifies and briefs the CEO, notifies and provides relevant information to the LGAMLS and a response is provided via the CEO. The process/procedure should also capture things like who will attend any court hearings, when does legal get involved etc. <p>Please note: Councils internal process will need to consider the changes to the Planning & Development legislation (Planning, Development and Infrastructure Act (PDI Act) 2016 and the associated Regulations, 2017).</p>
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WHS/IM Management Detailed Findings

The evaluation of the The Barossa Council's work, health and safety (WHS) management system and injury management (IM) processes, included a review of existing documentation and meeting with employees and other workers. Comments and recommendations, including action items will provide management with some suggested ways to improve their systems, however it may be appropriate to implement an alternative action and this is at the discretion of each individual organisation and their management team.

Summary of the evaluation scope

The scope of the evaluation process is an evaluation to:

- Test Council's WHS management system conformance against the ReturnToWorkSA (RTWSA) Code of Conduct for Self Insured Employers and specifically nominated elements within the Performance Standards for Self Insurers (PSSI).
- Provide recommendations to the evaluated Council with the aim of assisting the Council to continuously improve their WHS management system and IM processes.
- The evaluation boundary was defined by the pre-defined 11 sub elements of the PSSI. The evaluation was conducted over a three day period.

Employees and other workers involved in the evaluation process included:

- Derek Jones - Risk Advisor
- Jayne Glover – Administration Officer (Risk)
- Alfie Spehr – Risk & Safety Officer
- Kimberley Rohan – HR Advisor -(Internal Claims Coordinator (ICC) & Internal RTW Coordinator)
- Donna Gray - Co-ordinator Operations
- Amir Eskandari – Manager Operations
- Jo Wilson – Manager Strategic Projects
- Debra Scott – Procurement Advisor
- Karen McDonald – Co-ordinator Volunteering Services
- Michael Clarke – CWM Co-ordinator (Community Waste Water Management)
- Shane Parks – Project Officer – Operations
- Craig North – Team Leader - Operations
- Chris Hunter – Leading Worker – Operations/ Health & Safety Representative (HSR)

Documentation Review

The review included reviewing policies, procedures and supporting documentation within the Council's RM, WHS and IM systems as provided by the Auditee prior to and during the evaluation.

Additional evidence provided after the evaluation will only be accepted as evidence for this evaluation if agreed by the evaluator or the Client (i.e. LGAWCS and LGAMLS management).

Physical Verification

The evaluation scope incorporated both the Civic Centre and site visit to The Barossa Council Depot (based at Tanunda location) with walk around of both facilities.

Report Findings and Recommendations

Report findings and recommendations for each evaluation question are provided in the following table.

Further broader system recommendations are provided in the executive overview and conclusion.

It should be recognised that the findings of this report should be used for:

- Planning and continuous improvement by Council of their WHS and IM Systems
- Reviewing potential conformance levels with the RTWSA Performance Standards for Self Insurers.

3.1.1 WHS System Evaluation Findings

Q #	Sub-Element	Sub-Element Details and Findings Summary
1	1.2.1	<p>Evidence of policies and/or procedures to support the policy statement</p> <p>The following documents were reviewed and discussions held with the Administration Officer – Risk (Jayne Glover):</p> <ul style="list-style-type: none"> • Barossa Council – Work Health & Safety Management System (WHSMS) –Document Map • The Barossa Council – Intranet (evidenced and sighted) • The Barossa Council – WHS Document Development Process (12/42328 [v2]) • Barossa Council document Register – Sharepoint (sighted) • Afron Travel Tower (fields) – Static Risk Assessment – Schedule for review (including SOP) located in Sharepoint (evidenced) • Risk Management Quarterly Report – Quarter 4 – 1 April 2018 to 30 June 2018. • Safe Work Instruction template – TBCSWI3828 – template (* out of date – due for review 19/08/16) • Safe Operating Process – TBCFOR3349 – template (* out of date – due for review 19/08/16) • Task Risk Assessment form – Template (inserted into email from J Glover 31/10/18) (* out of date – due for review 19/08/16) <p>The Barossa Council has a range of WHS documentation that has been adapted from the suite of LGAWCS One System policies and procedures. Additional documents have been developed and include a cornerstone policy, i.e. WHS Health & Wellbeing Policy, and additional process documents (N.B.* Barossa Council uses terminology of 'process' instead of 'procedure').</p> <p>Supporting documentation includes Static Risk Assessments, SOP's, etc. Staff can access documentation via Sharepoint or via HPE Content Manager. Risk assessment documentation for Hazardous Manual Tasks is yet to be developed.</p> <p>The Risk Management Quarterly Report (page 11 – Quarter 4 – 17/18) updates Executive on Policy and Process review status – but does not include review timeframes.</p> <p>A Document Register is in place and denotes document control and reviews etc. It was advised that gaining feedback has been challenging when documents require review. Now an all staff communication is sent out in addition to 3 all-staff meetings held each year. Health & Safety Representatives (HSR's) now assist in communicating to their areas to enable more timely reviews. These activities have not been included in the relevant process document.</p>

		<p>It was recognised the endorsement and review process for WHS documentation has been delayed due to resourcing issues.</p> <p>A number of documents requiring endorsement (i.e. Health & Wellbeing Policy and 4 associated process documents are all currently in draft). There are also several out of date process documents requiring review such as the WHS Document Development Process (review date July 2016).</p> <p>As part of new document control improvements an 'Internal Office Use' section will be inserted into documents (i.e. TRA's and SWI's) to serve as a prompt to ensure review steps have been completed. It was acknowledged this will take time to embed as reviews come around and the SWI, SOP and TRA templates require review as these are all currently out of date (19/08/16).</p> <p>Whilst supporting policies and procedures are in place review of these has not been consistent. Changes to review processes have not been updated to reflect current practices therefore this has been deemed a Non-Conformance.</p> <p>Recommendations / Considerations</p> <ul style="list-style-type: none"> Schedule (apply dates) and conduct reviews of out of date policies and process documents. Gain endorsement of policy and process documents currently noted as DRAFT. Update relevant process documentation to reflect Barossa Council review practices.
2	3.2.1	<p>The organisation must ensure a relevant training program is being implemented</p> <p>The following documents were reviewed and discussions held with the Risk Advisor (Derek Jones); Administration Officer – Risk (Jayne Glover) and Human resources Advisor (Kimberley Rohan):</p> <ul style="list-style-type: none"> Training and Professional Development Policy (in date) Training Needs Analysis (TNA) Process (in date) Training Request and Approval Process (in date) TNA – Depot Staff – Qualifications and Training Needs TNA – Direct Reports of Manager Development Services (excel) TNA – Direct Reports of Manager – Operations - October (excel) Training Needs Analysis (TNA)– Report on Review 2017 to 2018 TNA– email to all staff 26/7/17 noting new process for Annual Mandatory TNA. Annual Training Plan 2018/ 2019 (excel spreadsheet) Notification of Plan (email 7/3/18) following Nov 17 change of process of TNA review. Training Attendance Form – Emergency Warden Training – 10/4/2018 (* no record on form of TRIM entering for documented record keeping purposes) Training Feedback Questionnaire – Emergency Warden Training – 3/5/18 – various participant feedback forms attached Email (10/5/18) of non-attendance follow up for Deborah Petney for Emergency Warden Training and Gawler Attendance and Evaluation Form for Deborah Petney (16/5/18) entered into Barossa Council Skytrust system. Risk Management Quarterly Report -1 April 2018 to 30 June 2018 <p>A major review conducted in 2016-2017 resulted in the introduction of the Skytrust training module to gain integration and improved document control.</p> <p>Barossa Councils training processes are outlined in 3 documents:</p> <ol style="list-style-type: none"> 1) Training and Professional Development Policy (in date) 2) Training Needs Analysis (TNA) Process (in date) 3) Training Request and Approval Process (in date) <p>As at the end of 31/10/17, 155 out of 159 workers had a TNA completed however it was advised the current status was unknown. Volunteers have a separate TNA which has been completed and currently managed under the Better Impact System. It was noted Elected Members are included</p>



		<p>on the TNA and inductions and training undertaken.</p> <p>Within 3 months of appointment all workers are required to have completed their induction checklist. Exception reports are run by HR from Skytrust to capture gaps. At the 3 month mark a TNA meeting is held with the worker and immediate supervisor and the Barossa Council Performance Partnering process (conducted Nov-March) captures other identified training needs for each worker, which aligns with Position Description Review.</p> <p>The Training Plan for 2018 showed training was undertaken (noted as WHS Competencies). The Plan included manual handling training but there was no training planned in how to undertake a hazardous manual task risk assessment.</p> <p>Records of attendance were sighted and outline the following: expected outcomes, attendance, signatures, those who were absent and require further training. They also note any meeting agenda item where training attendance needs to be raised.</p> <p>Follow up of attendees who did not complete the training on the attendance record was evidenced, e.g. missed Emergency Warden Training. The attendance record and evaluation form were entered into Skytrust.</p> <p>Training feedback and evaluation forms are completed for both internal and external training.</p> <p>Training that has occurred is reported via the Quarterly Risk Management Report which is provided to the Corporate Management Team (CMT), (Quarter 4 -2017/2018 evidenced). An opportunity exists to provide relevant statistics on training delivery and effectiveness (from feedback forms) to CMT via quarterly Risk Management reports.</p> <p>As the system requires maturation to be fully implemented and for recognised training gaps to be addressed this has been deemed an Observation</p> <p>Recommendations / Considerations</p> <ul style="list-style-type: none"> • Ensure all identified training gaps are scheduled and addressed. • Review training requirements for hazardous manual task risk assessment training. • Include name of participant on feedback sheet (optional) in case further discussion re the training requires undertaking. • Provide CMT with statistics from feedback obtained from training evaluation forms. • Consider Volunteer training integration into Skytrust as a whole of organisation system.
14	3.3.2	<p>The organisation must ensure accountability mechanisms are being used when relevant</p> <p>The following documents were reviewed and discussions held with the Risk Advisor (Derek Jones) and Administration Officer – Risk (Jayne Glover) and Human Resources Advisor (Kimberley Rohan):</p> <ul style="list-style-type: none"> • Performance Management Process – TBCPRO1021 (* due for review 13/8/18) • Performance Appraisal Policy (in date) • Performance Partnering Workbook (excel) • Corrective and Preventative Action Register (CAPA) Incident Register ID 1997 (site Safety Observation) • Contract Superintendent Safety Requirements – Email 17/08/17 – from Matt Elding to Contract Superintendents (re validating contractors WHS systems, licences, monitoring responsibilities) • Angaston Construction Site Works – Email 17/08/17 & 2nd email 15/09/17- from Matt Elding to relevant teams (re investigation of safety breach by contractor) • Contractor Management – Procurement & WHS Requirements (PowerPoint Presentation) presented to Organisational Management Group Meeting (OMG) 09/10/17. • Risk Management Quarterly Report -1 April 2018 to 30 June 2018 <p>The Barossa Council's Performance Management Process outlines the steps undertaken for both informal and formal warnings and covers WHS breaches.</p> <p>An example was provided of a worker driving into the depot at speed whilst using a mobile phone.</p>



		<p>Formal disciplinary action was taken in line with Barossa Council processes.</p> <p>The Performance Appraisal Policy aligns with the supporting processes of Performance Partnering and Performance Partnering Workbook which includes sections: Achieve: Develop: Enjoy and Partner. This provides a platform for both workers and managers to discuss and address any operational or behavioural issues that impact safety. This process is relatively new.</p> <p>Accountability mechanisms were evidenced following a safety breach incident (lack of fall protection) for a Contractor (Angaston Construction Site Works). Evidence demonstrated the processes undertaken which included notification to contractor to stop works, investigation and resolution – all captured under the Barossa Council CAPA (incident reference 2017). Following this a presentation on responsibilities was presented to the OMG on 9 October 2017 and emails sent to contract superintendents.</p> <p>Position Descriptions show evidence of accountability however accountability mechanisms are not currently included in Director level work plans.</p> <p>Quarterly Risk Management Reports are presented to CMT and the CAPA is presented to the OMG (refer to notes regarding CAPA in sub element 3.8.1) for review (with commentary).</p> <p>Based on the above this has been deemed a Conformance.</p> <p>Recommendations / Considerations</p> <ul style="list-style-type: none"> • Introduction of KPI's could be considered for key directors in work plans or as part of the Performance Partnering process (outcomes). • Director level sponsorship of programs within Corporate WHS plans would also provide evidence of accountability.
18	3.7.1	<p>The organisation must ensure contingency plans are periodically tested and/or evaluated to ensure an adequate response, if required</p> <p>The following documents were reviewed and discussions held with the Risk Advisor (Derek Jones); Administration Officer – Risk (Jayne Glover) and Human resources Advisor (Kimberley Rohan):</p> <ul style="list-style-type: none"> • Barossa Council Emergency Management Policy (in date) • Barossa Council Emergency Management Process (* out of date – review was due 28/8/16) • Emergency Planning Committee (EPC) Members Sheet (current & version controlled) • Emergency Control Organisation (ECO) <i>example</i> 1) Nuriootpa Office & Library 2) Tanunda Depot (current & version controlled) • Emergency Planning Committee meeting minutes 24/10/17 and 13/09/18. • Record of notes ref 12/42342(v2) for updates required to Emergency Management Process document following various incidents/ exercises. • Emergency Evacuation – Desktop Exercise Form - (30/8/18) conducted by Library CSO – Sarah Powell • Emergency Observation Checklist – TRIM Ref: 17/104550 – conducted at Williamstown Depot on 20/12/17. • Emergency Evacuation Debrief Form – Tanunda Depot – Evacuation Drill 21/02/17 • CAPA screen print – ID 2310 from Tanunda Depot Evacuation Drill Ref 17/13868) • i-Responda Training Attendance Form – Floods & Fast Moving Water -19/9/18 (entered into Skytrust) • Training Attendance Form – Emergency Warden Training – 10/4/18 (15 participants) <p>The Emergency Planning Committee (EPC) is a sub-committee of the WHS Committee. The Emergency Control Organisations (ECO's) consist of appointed Chief Warden, Wardens, First Aiders and a Communications Person.</p> <p>An Emergency Management Policy (in date) is in place with an Emergency Management Process (out of date – due for review 28/8/16). There are a number of process areas that need to be</p>

		<p>amended for currency. The update has been delayed to enable a full review to occur.</p> <p>EPC meetings have been held in Sep 2017 and Sep 2018. The recent meeting minutes (page 2) notes more regular meetings are required to progress the large number of actions, with the next meeting scheduled for November.</p> <p>A Services Review held in mid-2017 identified that a review of the Business Continuity Plan (BCP) was required. Following discussions in March 2018 with the LGRS – Paul Kerrish was engaged in June 2018 to commence this body of work (ongoing).</p> <p>Emergency Evacuation Exercises are conducted and actions requiring attention from the Williamstown Emergency Observation Checklist (were noted (2584, 2585 and 2586). These are entered onto the CAPA. Debriefs from evacuation drills are also entered. This data is provided to both the WHS Committee and Executive by way of Quarterly Risk Reports.</p> <p>In order to address identified gaps, Warden and i-Responda training has recently occurred and the updating of Emergency Management Plans has occurred. Testing of these plans now needs to be scheduled.</p> <p>Based on the need to fully implement Emergency Management processes and testing schedules this has been deemed an Observation.</p> <p>Recommendations / Considerations</p> <ul style="list-style-type: none"> Schedule and conduct more frequent EPC meetings as required to ensure outstanding actions are progressed. Ensure testing/ drills are scheduled and conducted in line with Barossa Council Process (meeting AS 3745). Update Emergency Management Process documents to reflect amendments
19	3.8.1	<p>The organisation must ensure a hazard management process that includes identification, evaluation and control is in place</p> <p>The following documents were reviewed and discussions held with the Risk Advisor (Derek Jones); Administration Officer – Risk (Jayne Glover); Co-ordinator Operations (Donna Gray) and Manager Operations (Amir Eskandari):</p> <ul style="list-style-type: none"> Hazard Register - <i>sample</i> – Bushgardens – Gardening, Propagation and General Maintenance. Safe Work Instruction – Bushgardens – Propagation (in date) Pinnacle – Manual Handling Training – Outline and content of Training conducted Task Risk Assessment (TRA) Form – Bushgardens – Gardening Propagation – General Maintenance – undertaken 7/8/18 (* was due 19/8/16) Safe Work Instruction (SWI) –Bushgardens – Propagation – undertaken 7/08/18 (* was due 19/8/16) CAPA Extreme and High – extract given to CMT 5/9/18 Evidence (screen short) of CMT Meeting 5/9/18 - Agenda Item – CAPA Register Review <p>A Hazard Register (currently on excel) is in place. Evidence indicated that the Bush Gardens area information on the Hazard Register is current but it was advised the rest of the Hazard Register is outdated.</p> <p>The Hazard Management Policy is current but the Hazard Management Process is not current and was due for review in August 2016. A draft document is currently under review. In 2014 all work areas completed Task Risk Assessments (TRA's) and Safe Work Instructions (SWI's) and these were included on the register. Currently the Hazard Register is not reviewed by either by OMG, CMT or the WHS Committee. Council is currently looking at transition into Skytrust to enable improved control and reporting.</p> <p>The Hazard Register identifies many tasks that involve a manual task risk however Hazardous Manual Tasks Risk Assessments could not be evidenced.</p> <p>The CAPA has undergone a significant change process as a result of a recommendation from CMT to the Risk Department to review the CAPA register. This was as a response to the need to control the enormous number of items on the CAPA and a recognised 'drop off 'in people reporting</p>

		<p>issues. This area requires close scrutiny to ensure items are closed out or kept open appropriately. The Hazard Management Policy and Process documents both need updating to reflect amended processes.</p> <p>It was noted incident and hazard reporting has improved (now electronically submitted) however manual workarounds are still required in order to report data to the Scheme as part of the self-insured requirements.</p> <p>Significant work has been undertaken to address and review the management of hazards within Council but there is still some way to go. It is strongly recommended Council consider IT system capabilities (e.g. Skytrust) to assist in this area and enable Incident Management comparisons against other similar sized councils and sector wide comparisons.</p> <p>The Hazard Management Process was due for review in August 2016 and the draft has not yet been endorsed. Information on the Hazard Register is outdated. Hazardous manual task risk assessments have not been undertaken. The Hazard Register is not reviewed by either by OMG, CMT or the WHS Committee. Therefore this has been deemed a Non-Conformance</p> <p>Recommendations / Considerations</p> <ul style="list-style-type: none"> • Update the Hazard Management Process. • Update the Hazard Register – recommend Skytrust Hazard and Incident module implementation. • Develop a schedule to undertake risk assessments for hazardous manual tasks.
19	3.8.3	<p>The organisation must ensure control measures are based on the hierarchical control process</p> <p>The following documents were reviewed and discussions held with the Risk Advisor (Derek Jones); Administration Officer – Risk (Jayne Glover); Co-ordinator Operations (Donna Gray) and Manager Operations (Amir Eskandari):</p> <ul style="list-style-type: none"> • Barossa Council Risk Management Policy (in date) • Email – 28/02/18 – Re: Nuriootpa Flood Wall (from Matt Elding – Director) to various relevant staff) • Barossa Council Investigation Form – Trim Reference – 16/71206 (hours of work during flood emergency) noting CAPA ID #2356 for flood gates • Task Risk Assessment – Deport – Cemetery Management – Grave Digging and Backfill – 3 May 2018 – 14.10764(v2) • Safe Work Instruction – Deport – Cemetery Management – Grave Digging and Backfill – 3 May 2018 – 14.18221 (v2) • Safe Work Instruction :Task: Grave digging and using Shoring System 14/18221* (signed) <p>There is some evidence control measures have been applied utilising the Hierarchy of Control. For example, following flooding events in previous years (recognised through EPC and via incident report - Trim Reference 16/71206 - CAPA number # 2356) and the steps taken to mitigate flooding risks. A purpose built structure (flood wall) has been designed (evidenced on site at Depot) with engineering controls being forefront to hamper/ slow down water flow.</p> <p>The Task Risk Assessment (TRA) for Grave Digging and Backfill was reviewed by Council on 3/5/18 however it did not identify that a hazardous manual task risk assessment may be required which may affect the selection of risk controls.</p> <p>Discussions held during the Depot site visit indicated the general line of 'thinking' is to 'fix things properly once in order to avoid 'band-aids' where possible. However, whilst this may demonstrate a practical application of the hierarchy, the WHS system requirements for hazard management, i.e. the recording of the hazards and the selected controls on the hazard register are not always being undertaken.</p> <p>There is a need to ensure the use of the hierarchy of controls is recorded and captured systematically, particularly when selecting a lower level control, through the risk assessment process or when conducting incident investigations therefore this has been deemed an Observation.</p>

		Recommendations / Considerations <ul style="list-style-type: none"> Consider using the TRA's to identify the need for Hazardous Manual Task Risk Assessments (as per Hazardous Manual Task Process). Consider ways to record and capture the rationale for accepting a lower level control where this occurs in the CAPA and Incident Reports (quality of reporting).
20	3.8.5	<p>The organisation must ensure program(s) are in place to ensure an appropriate WHS consideration is given at the time of purchase, hire or lease of plant, equipment and substances</p> <p>The following documents were reviewed and discussions held with the Co-ordinator Operations (Donna Gray) and Manager Operations (Amir Eskandari) and Manager Strategic Projects (Jo Wilson); CWM Co-ordinator- (Michael Clarke) and Project Officer & Contracts Superintendent/ proxy HSR – Operations (Shane Parks):</p> <ul style="list-style-type: none"> Barossa Council Plant Process (* out of date – due for review 6/3/16) TRIM Ref B1977 Barossa Council Procurement Policy (* out of date – due for review 30/6/18) Barossa Council Purchasing Process (in date) – TRIM Ref 14/19226 Barossa Council Procurement Planning, Sourcing & Selection Process (in date) Council Tender Evaluation Panel Report (internal working document) March 2018 – Tender No T0062/2018 Email – dated 16/8/18 Subject : Barossa Council Cemetery Trailer (dated 16/8/18) from Matt Elding (director) to Supplier Chemical Risk Assessment – Exfoliators Premium Perlite – product eliminated – 20/08/18 <p>The Council Procurement Policy notes a Static Risk Assessment for Plant must be undertaken prior to purchase and a Chemalet Review and Risk Assessment should be considered before purchase of Hazardous Chemicals.</p> <p>Council Procurement: Following the purchase of a trailer for cemetery works in August 2018 it was deemed faulty and an email was sent from Matt Elding (Director , Works and Engineering) to the service provider to address the faults raised, noting workers had been advised not to use the trailer based on perceived safety risks. This is a commendable example of addressing risks immediately post purchase but upon asking, a static risk assessment could not be provided for this trailer.</p> <p>The Barossa Council advised it has a de-centralised procurement process with departments being responsible for their own purchasing. There is a preferred and approved supplier list. Training was conducted in the process in 2014 with group mentoring however it was acknowledged further training refreshers are required to ensure all departments are aware of the process and understand WHS implications.</p> <p>Chemalet training was last held in 2014. A chemical stocktake has been recently undertaken and a variety of actions are anticipated, including review of chemical purchasing processes as documented Chemalet risk assessments could not be evidenced for current chemical purchases.</p> <p>WHS considerations when purchasing chemicals requires review and implementation in alignment with Councils procurement process. WHS considerations for plant purchase are not consistently applied through the Council's static risk assessment process.</p> <p>Gaps were noted in the application of procurement systems for pre-purchase/static risk assessments for plant and hazardous chemicals therefore this has been deemed a Non-Conformance.</p> <p>Recommendations / Considerations</p> <ul style="list-style-type: none"> Pre-purchase risk assessments to be consistently undertaken as part of procurement process for items of plant with documentation recorded. Chemical purchase requires review to align with Council's Procurement process. Further training in purchase processes.

21	3.8.6	<p>The organisation must ensure program(s) are in place to meet the organisation's duty of care for all persons in the workplace</p> <p>The following documents were reviewed and discussions held with the Manager Strategic Projects (Jo Wilson); CWM Co-ordinator- (Michael Clarke) and Project Officer and Co-ordinator Volunteering Services (Karen McDonald):</p> <ul style="list-style-type: none"> • Barossa Council Volunteer Management Process (<i>* not in date –due for review 17/12/16</i>) • Barossa Council Volunteer Management Policy (<i>* not in date –due for review 17/12/16</i>) • Barossa Council – Volunteer Position Description (PD) – Youth Project Coordinator • Barossa Council Volunteer Program Orientation and Induction (presentation) • Volunteer Induction Checklist (Kate Taylor – Youth Services – 27/06/18) • Record verification of induction training: Kate Taylor: certificate 29753791251 • On-the-Job Volunteer Training Sign-Off Sheet (Jayne Pfeiffer May – June 2017) • Volunteer Mutual Review - (Jayne Pfeiffer – Nov 2017) • SafeWork Instruction - Task: External Activities Including Events (<i>* out of date – due for review 19/08/16</i>) • Barossa Council Contract and Contractor Management Process – (in date) TRIM Ref 14/26082 • Contactor Induction Checklist (entry date 17/5/18) Tungkillo road Mount Pleasant – Shoulder Repairs – Barossa Earthworks • Contractor Monitoring Checklist (<i>* form out of date – due for review July 2015</i>) conducted on Urban Environs (Simon Marschall – Barossa Contractor Superintendent) for Tree Work – Vic Creek Car Park opposite Bakery – undertaken 13/09/18. • Email of confirmation for on-line Contractor Induction completed: Thomas Antonello: Butterfields Services -Certificate : 433674999 (<i>date not supplied</i>) • Procurement Framework (2 pages) outlining structure (includes Contract and Contractor Management) and refers to the Contract and Contractor Management Process document. • CAPA Extreme and High (excel) as presented to the CMT on 05/09/18. <p><u>Volunteers</u></p> <p>There are currently 385 volunteers (50 within the active Bush Gardens group), with a job share arrangement for resourcing volunteer management.</p> <p>Council has a Volunteer Management Policy and Volunteer Management Process both of which were due for review in 2016. At the time of evaluation both documents are being reviewed. The Volunteer Management Process has some content gaps including Section 2 – Core Components. The council has a Volunteer Program Orientation and Induction and various sign off processes were sighted. There is good awareness of the need for WHS and safety at the volunteer level with regular forums being held (minutes provided for the Youth Advisory Committee). A TNA has recently been developed for volunteers. It does not include licences and competencies at this point in time.</p> <p>All volunteer training is currently recorded in the Better Impact System. Evidence was sighted of recent snake bite training for the Bush Gardens group. SWI's for volunteers are in place however those viewed were out of date by several years and require review.</p> <p>The Volunteer Management Policy and Process documents are both under major review and currently noted as draft with the TNA still to be fully implemented, therefore this has been deemed a Non-Conformance.</p> <p><u>Contractors</u></p> <p>Barossa Council's management of Contractors is underpinned by the Contracts and Contractor Management framework and the process documents that support this. This area comes under the</p>
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		<p>responsibility of Strategic Projects.</p> <p>Contractor induction is covered under Section 4.5 (page 20) and evidence was provided to demonstrate completion of the online induction (Thomas Antonello – Butterfields Services – undertaken 25/09/18) and Induction Checklist (for Barossa Earthworks Contactor). It was noted the checklist does not actually state the company, only the key contact person (Richard O'Driscoll) and it is recommended this oversight be corrected on the checklist template.</p> <p>Anecdotal evidence indicated there could be outstanding inductions as a result of timing and resourcing pressures. It was acknowledged inductions to site do not always occur as per Council process.</p> <p>WHS Compliance Monitoring and Performance Monitoring (Section 4.6 pages 11-12) sets out the level of monitoring expected, the methods that can be undertaken to complete and how this should be recorded. CAPA ID2354 – 16/85520 – Review Contract and Contractor Management - notes contractor gaps identified with the required action being a review of the Contract and Contractor Management Process by 22/12/17. This review has still not been completed.</p> <p>A recent contractor monitoring checklist was undertaken with UrbanVirons on 13/09/18. It was not signed by either the contractor or contractor superintendent and a signed copy could not be evidenced.</p> <p>Anecdotal discussion noted contract monitoring discussions are recorded in the HPE Container for a particular project but many may be on email only and most likely not filed in the container. Whilst contractor induction and monitoring discussions occur, consistency with formalised documentation as per Councils process for contract monitoring is yet to be fully implemented therefore this been deemed a Non-Conformance.</p> <p>Recommendations / Considerations</p> <p><u>Volunteers</u></p> <ul style="list-style-type: none"> • Finalise drafts of both the Volunteer Management Policy and Process documents, endorse and implement. • Complete the Volunteer Induction Manual • Provide the necessary training to support the Volunteer Management Policy and Process • Consider integration Volunteers into the organisational TNA for Volunteers. • Consider WHS as an item on the Agenda for all Volunteer Groups • Consider any actions required being referred to the CAPA where necessary. <p><u>Contractors</u></p> <ul style="list-style-type: none"> • Schedule Contractor Monitoring Reviews (for WHS compliance) • Consider reporting mechanism i.e. CMT and Safety Committee via Quarterly Risk Reports • Update Contract and Contractor Management Process to reflect current terminology (E.g. RTWSA instead of WorkCover). • Update the Contactor Induction Checklist – Document Number: TBCCHE3603 to include the Contractor's Company Name. • Review the Contractor Monitoring Checklist (out of date – due for review 5 July 2015) • Consider integrated systems to encourage scheduled contractor monitoring reviews.
23	3.9.1	<p>The organisation must ensure that the implementation of relevant inspection and testing procedures are conducted by the relevant, competent person(s)</p> <p>The following documents were reviewed and discussions held with the Risk Advisor – Derek Jones, Administration Officer (Jayne Glover), Co-ordinator Operations (Donna Gray) and Leading Worker – Operations/ HSR (Chris Hunter):</p> <ul style="list-style-type: none"> • Barossa Council Work Health and Safety – Inspection Schedule (2018 –back to 2016) • Safety Inspection Checklist - Tanunda Depot – conducted 11/10/18 • Safety Inspection Checklist – Emergency Stop Buttons – Tanunda Depot – 5 October 2018

	<ul style="list-style-type: none"> • Safety Inspection Checklist – Air Compressor – Tanunda Depot – 5 October 2018 • Quarterly Risk Management Report – Quarter 4 – 1 April 2018 to 30 June 2018 • Safety Inspection Checklist – Working from home – Kirsty Hage – 15/08/18) – HPE Content Record No. 18/57976 (* notes has been entered into the Incident Register but there is no ID # - has been left blank) • Nobles – Tax Invoice SIN210903 – Invoice Date 14/6/18 – for inspection of Tanunda Depot Slings (tagging items & updating register). • Training Attendance Form – Emergency Warden Training (conducted 10/4/18) – services provided by Australasian Fire and Safety) – certified provider. • Barossa Council – First Aid Kit Checklist – completion of inspection by Industrial First Aid Services (December 2017 but completed fully & signed off in February 2018.) • General Repairs and Building Maintenance panel – Signed Contract – Sparky's A Class Electrical : reference 15.3802 • Mens Shed Test and Tag Log – 20 April 2018 (excel spreadsheet) <p>Council has a schedule for Workplace Inspections and a review of the 2016-2018 schedule confirmed inspections have been occurring as scheduled by the relevant, competent person(s).</p> <p>Scheduling and actual completion is recorded for all sites and reported in the quarterly Risk Management Reports to CMT. The 4th Quarter Report for 2018 notes while Workplace Inspections are being recorded and reported, the specific date the Inspection is carried out needs to be recorded and included.</p> <p>Other inspections being conducted include Air Compressor and Emergency Stop Button tests which are undertaken by personnel with experience and competency in these areas.</p> <p>The Tanunda Depot Workplace Inspection Checklist from 11/10/18 matched the inspection schedule however the checklist had a number of areas for concern including: WHS Representative not present and several sections had not been completed e.g. SOP's current and in place. An extinguisher was noted with an expired tag (Sep) however there was no comment next to it for action and the CAPA ID section did not have this recorded.</p> <p>Anecdotal discussions at the Tanunda Depot confirmed deficiencies identified during inspections are not always recorded or referred to the CAPA (i.e. Depot -out of date electrical items which can be referred directly for testing and tagging to save time). This does not allow for system deficiencies to be recognised and addressed and is not in line with CAPA process requirements.</p> <p>Slings are inspected by competent personnel – outsourced to Nobles Complete Solutions (most recent Tax Invoice for Inspection that occurred on 14/06/18 was sighted). Invoice noted sling testing undertaken, sling tags and sling register updated.</p> <p>Evidence was provided for the provision of services by competent persons for Emergency Warden Training and Fire Panel Testing (Australasian Fire Safety Services); First Aid Kit check and replenishment (Industrial First Aid Services) and Electrical Testing & Tagging (Sparky's A Class Electrical).</p> <p>Whilst there are processes implemented with relevant, competent person(s) undertaking checks, there can be improvements made with the quality of Workplace Inspection Checklist completion therefore this has been deemed an Observation.</p> <p>Recommendations / Considerations</p> <ul style="list-style-type: none"> • Review the Workplace Inspection Checklist (review due Aug 2016) and check relevancy of some items (refer Tanunda checklist provided as evidence). • Provide refresher training for Workplace Inspection Checklists where required and confirm CAPA process required. • Consider noting number of Workplace Inspections completed out of those scheduled (i.e. 12/16 completed) for ease of those reading Quarterly Risk Report. • Consider capturing other areas of testing required by competent persons (i.e. testing & tagging, slings & chains, mechanical repairs) on a centralised compliance calendar that could be included in the Quarterly Risk Management report (for example: under internal/ external
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		audits).
27	4.1.1	<p>The organisation ensures planned objectives, targets and performance indicators for key elements of program(s) are maintained and monitored</p> <p>The following documents were reviewed and discussions held with the Administration Officer – Risk (Jayne Glover):</p> <ul style="list-style-type: none"> • Barossa Council – Quarterly Performance Report – Quarter 4 2017-2018 (page 36) • Quarterly Risk Management Report – Quarter 2 2017-2018 • Quarterly Risk Management Report – Quarter 4 – 1 April to 30 June 2018 • Work Health & Safety Committee – Minutes from 11/4/18 • Barossa Council Work Health Safety Plan 2015-2017 • Barossa Council Risk Plan 2019-2021 - TBCPLA3202 – DRAFT • Close out comments for Work Health Safety Plan 2015 - 2017 <p>Barossa Council – Quarterly Performance Report – Quarter 4- 2017-2018 (page 36) under the Section titled 'How We Work – Good Governance' covers the LGA KPI Audit Action Plan with information being very succinct on tracking rates of actions completed compared to previous years. This particular report is provided to elected members.</p> <p>Quarterly Risk Management Reports are provided to the CMT for review and progress was noted in the Quarter 4 report (2017-2018) on page 4 outlining actions completed to date and those under consultation with the LGRS. It was also reported briefly on the 2nd Quarter Report.</p> <p>The Work Health & Safety Committee minutes from 4 April 2018 – Item 8 -outlines the KPI Action Plan and makes reference to the new Risk Plan (which incorporates WHS). It states the current status as progressing.</p> <p>The Barossa Council Work Health Safety Plan 2015-2017 contained 3 Programs and 4 Projects with nominated owners and contained objectives, outcomes, measures, performance indicators and targets.</p> <p>This plan was extended into 2017-2018 as actions were still ongoing however reporting was not consistent or very limited, as evidenced in the 4th Quarterly Report (page 4). This was due to changeover of staff and limited resourcing. A close out commentary report has been completed for CMT in preparation for the 2019-2021 Draft Risk Plan.</p> <p>The Draft Risk Plan 2019-2021 incorporates Work Health & Safety and has several Programs and Projects as per the previous 2015-2017 Plan. It has objectives, targets and measures. The measures (performance indicators) may be hard to quantify so need to be considered before finalising, as this could affect robust measuring.</p> <p>Reporting mechanisms are in place to both CMT and the WHS Committee however the current Work Health & Safety Plan is outdated and reporting has been limited therefore this has been deemed an Observation.</p> <p>Recommendations / Considerations</p> <ul style="list-style-type: none"> • Consider Risk Plan targets and measures to ensure consistency with PSSI requirements of 4.1.1 to enable clear monitoring and measuring. • Ensure monitoring reports provided to WHS Committee (and all sub-committees under newly revised structure) • Consider relevant level of detail is provided to CMT to enable ownership and commitment of plan progress.
28	5.3.1	<p>The organisation ensures the system is reviewed and revised, if required, in line with current legislation, the workplace and work practices</p> <p>The following documents were reviewed and discussions held with the Administration Officer – Risk (Jayne Glover):</p> <ul style="list-style-type: none"> • Barossa Council Risk Plan 2019-2021 - TBCPLA3202 – DRAFT (* note this was provided as extra evidence for 4.1.1) but then further evidence supplied for 5.3.1 had a signed 2019-2021

		<p><i>Risk Plan attached – signed on 31/10/18 just prior to audit).</i></p> <ul style="list-style-type: none"> Meeting Invite – Electrical Certificate of Compliance for Events (following changes) 10/09/18 Quarterly Risk Management Reports (various x 3). <p>The Quarterly Risk Management Reports include in their the following sections:</p> <ul style="list-style-type: none"> - Legislative Changes - CAPA - Policy and Process – Development Review - Internal and / or External audits <p>It was noted that the information contained within the Quarterly Risk Management report sections should have a flow on effect throughout the organisation's Policies and Processes and associated documentation, such as a compliance register (still being developed).</p> <p>The capture of legislated or workplace changes has not been consistently documented and it is anticipated new document control processes (refer 1.2.1) will assist in ensuring this is captured in future.</p> <p>A draft unsigned Risk Plan was provided as evidence for 4.1.1 and a signed version of this plan was provided prior to evaluation close. The review process was unclear through conversation with the WHS team, although the team alluded to an annual review requirement, which had not been conducted due to resourcing / staff changes.</p> <p>Application of the organisation's review procedures to develop the plan were unclear, therefore this has been deemed a Non-Conformance.</p> <p>Recommendations / Considerations</p> <ul style="list-style-type: none"> Ensure all key templates are updated to enable documented evidence of changes undertaken for SOP's, SWI's and TRA's. Consider how system review process is aligned to Barossa Council's Planning & Program Development Process document. Schedule and Plan and Program Review (potential assistance from LGAWCS RRC can be gained).
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3.2.1 IM System Evaluation Findings

Q #	Sub-Element	Sub-Element Details and Findings Summary
1	1.2.1	<p>Documented job descriptions for all injury management / RTW personnel and where relevant management, supervisors and employees.</p> <p>Position Descriptions (PD's) evidenced for Internal Claims Coordinator (ICC) and Internal Return to Work Coordinator (IRC) – <i>Kimberley Rohan – Human Resource Advisor</i> and ICC contingency role – <i>Alex Prior – Human Resource Assistant</i>.</p> <p>Job Descriptions also evidenced for relevant depot supervisory role – <i>Donna Gray – Co-ordinator Operations</i> and Payroll Officer – <i>Maryanne Pfitner</i>.</p> <p>Based on the above this has been deemed a Conformance</p> <p>Consideration: when PD's next reviewed consider placing the specific LGAWCS training in skills/ training including the Payroll Officer (as specific course now available).</p>
1	1.2.2	<p>Ensuring injury management personnel are competent to administer their role in a reasonable manner.</p> <p>Certifications evidenced for the following LGAWCS scheme RTW Training for Internal RTW/ Claims Coordinators (valid to 25/11/18) as per the positions noted above in 1.2.1: Kimberley Rohan, Alex Prior and Maryanne Pfitner.</p>

		<p>Relevant training certificate valid to 13/02/21 for Donna Gray.</p> <p>Based on the above this has been deemed a Conformance</p>
1	1.2.3	<p>Ensuring the allocation of resources is appropriate for the organisations type, volume and complexity of the case load.</p> <p>Resourcing appears adequate for the organisation. Injury Management statistics were evidenced and the number of claims support this (currently 1 long term claim and 2 active claims). The Co-ordinator of Operations (Donna Gray) is RTW trained and is the main contact for the depot and the Human Resource Advisor (Kimberley Rohan), also RTW and ICC trained is the main contact for the Civic Centre. Duties are shared between the 2 personnel however heavily supports the Depot for RTW. Contingency back up assistance is provided by several parties including the Human Resources Assistant and the Payroll Officer. Additionally, the new Risk Advisor (Derek Jones) is also booked in for training late November.</p> <p>It was noted the Nuriootpa Centennial Park Authority (NCPA) – Caravan Park - which is a subsidiary of Council where staff are employed under NCPA but covered by the Scheme. Kimberley Rohan currently provides RTW support but it would be prudent to consider some RTW for the manager or supervisor of this area.</p> <p>Based on the above this has been deemed a Conformance</p> <p>Consideration: it may be prudent to consider some RTW training for the Manager or Supervisor of NCPA for awareness and support in this area.</p>
1	1.2.4	<p>Suitability of facilities and accommodation to ensure restricted access to information, including maintaining confidentiality during interaction with injured workers and service providers.</p> <p>As referred to in Section 7.1 and 7.2 of The Barossa Council Workplace Return to Work Process files are kept secure under the HPE- TRIM record system. The hard copy files are kept in a secured (locked) cabinet and this was evidenced during the evaluation. Meeting rooms are booked for confidential discussions and / or phone calls.</p> <p>Based on the above this has been deemed a Conformance</p>
1	1.2.5	<p>A Scheme Member is required to appoint a Return to Work Coordinator (IRC) and ensure the person appointed to this role has successfully completed relevant LGAWCS training. Where this role becomes vacant, the Scheme Member is required to re-appoint an employee within 3 months and ensure the employee(s) appointed have received relevant LGAWCS training within 3 months of the appointment being made.</p> <p>Appointed and evidenced in 1.2.1. Current appointments have been made and the training received as per evidence in 1.2.2.</p> <p>Based on the above this has been deemed a Conformance.</p>
1	1.6.1	<p>How to report a work related injury</p> <p>Page 7 (Section 4) of the Barossa Councils Induction Checklist outlines the process for reporting a work-related injury (Incident Reporting) and this is done via Skylearn. Electronic forms are available in addition to hard copy if required.</p> <p>Based on the above this has been deemed a Conformance.</p>
1	1.6.2	<p>The process for lodging a claim for compensation</p> <p>Following 1.6.1 above (initial process) and then covered under The Barossa Council Workplace Return to Work Process in Sections 4.1.5, 4.1.8 and 4.2. This process is also available via the Council's intranet to workers and supported by the ICC and RTW Co-ordinators.</p>



		Based on the above this has been deemed a Conformance .
3	2.8.5	<p>Where a worker has not returned to pre-injury employment within 6 months from date of first incapacity and is not working to their full capacity, new or other employment options are considered for the worker by the Scheme Member in conjunction with the LGAWCS.</p> <p>Outlined in The Barossa Council Suitable Employment Process under Section 4.1. This has not yet occurred for Barossa Council.</p> <p>Based on the above this has been deemed a Conformance.</p>
3	2.8.6	<p>Where a Scheme Member does not provide suitable employment to a former work injured employee the Scheme Member notifies and consults with LGAWCS.</p> <p>Outlined in The Barossa Council Re-employment Process (Work Injury). This has not yet occurred for Barossa Council.</p> <p>Based on the above this has been deemed a Conformance.</p>
4	4.1.1	<p>Processes are in place that monitor, measure and review the effective implementation of the injury management system and where relevant, strategies to improve performance of the injury management system are identified.</p> <p>Injury management statistics are reported in the HR Quarterly report which goes to the Corporate Management Team and they monitor indicators such as Claims reported to LGAWCS within 24 hours of receipt (Target is 80%). Evidenced in The Barossa Council – Human Resources Statistics Report 2017-2018 (spreadsheet).</p> <p>Based on the above this has been deemed a Conformance.</p>
4	4.1.3	<p>The Service Standards set out in Schedule 5, Part 2 of the Return to Work Act 2014 are in place.</p> <p>Evidenced on site at Civic Centre and Depot (noticeboards).</p> <p>Based on the above this has been deemed a Conformance.</p>

Conclusion

I would like to thank all those involved in the Barossa Council's Risk Evaluation, especially Derek Jones and Jayne Glover for the work collating and uploading the documentation prior to the evaluation as well as coordinating and providing information during the evaluation.

The risk evaluation process gave Council the opportunity to showcase a number of risk management, work health and safety and injury management/return to work systems that you have in place.

Please note that evaluation findings can only be provided against the evidence presented at the time and within the evaluation scope. As part of the evaluation scope, we conducted a desktop review of evidence provided and requested additional records and information based on the initial evidence provided, followed by some testing of implementation via staff and management interviews. The timeframe provided for on-site and document review was only three days and hence this can only be a sampling process. We did extend the document review timeframe by another day to review the evidence provided, prior to our evaluation visit and there was some additional follow up of documentation following the evaluation.

As indicated in the Executive summary and the evaluation findings contained herein, Council has some areas of focus identified for the next two years and should develop an appropriate action plan to review, monitor and complete the actions. Completion of the actions will further improve the overall effectiveness of the risk, WHS, IM/RTW systems.

In relation to the Risk Management Systems, it is suggested that Council consider the suggestions provided in relation to the development and subsequent implementation of their Risk Management System across the businesses. There has also been some commentary provided in the Roads and Footpaths management area which Council should consider and this should form part of the basis for Councils risk action plan over the coming two years.

The Barossa Council's Injury Management system is well controlled and processes appear to be well known with respect to notifying Council of injuries and progression through the claims process. There is consistency and reliability with all the sub-elements that were evaluated.

Continuous improvement is occurring with the WHS Management System areas of note include; reporting mechanisms being available and significant work undertaken in order to progress areas in the last several years for emergency management, document control, health and well-being initiatives and hazard management in general. These have required a level of resource intensity to administrate and Barossa Council has effectively used technological innovation to assist administration and effectiveness (as evidenced by utilising Skytrust capabilities for the training area).

There have been system gaps due to some resourcing and staff changeover which was recognised and currently being addressed. It was acknowledged Barossa Council is implementing some new structures (safety sub-committees) and has a new WHS Plan 2019-2021 which provides direction moving forward. The consideration of further IT systems (i.e. Skytrust Incident and Hazard Module) should further reduce manual, person centric knowledge and workarounds and enable strong systematic management in the work health and safety space.

The effective implementation of the Council WHS, IM and RTW systems will allow Council to be compliant with the legislative requirements, the PSSSI and their policies and procedures; managers to be aware of their accountabilities to ensure the systems are implemented, reviewed and continuously improved and regular reporting to and monitoring by the executive and leadership team to occur.

I would recommend that you work closely with Rob Castle (your RRC) going forward to ensure that a planned and prioritised approach is undertaken, in addressing the corrective actions required. Rob can provide guidance to the Barossa Council on how you might move forward in a way that will provide the best approach for building and maintaining a system in line with your resources and assist with the setting of a programmed body of work for the next 2 years that is achievable, addresses the issues in a systematic way and enables you to achieve the best possible rebate return in line with corrective actions completed.

Please note that action plans need to be submitted for review to address the issues identified in the evaluation (in a systemic way). If you are unclear on how this is to be undertaken or need examples of formats and structures, Rob will be available to assist in drafting your action plan in order to meet the criteria that is required for approval of these plans and to ensure that the action plans are appropriate for closing out the identified issues in a prioritised, structured and systemic way.

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