



Meeting attachments

Audit and Risk Management Committee

Wednesday, 17 February 2021, 5.30 pm

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ARMC2102-1 ADOPTION OF THE 2020 COMPLIANCE AUDIT RETURN

ATTACHMENT 1 – 2020 Compliance Audit Return

Department of Local Government, Sport and Cultural Industries - Compliance Audit Return



Department of
Local Government, Sport
and Cultural Industries

Fremantle - Compliance Audit Return 2020

Commercial Enterprises by Local Governments

No	Reference	Question	Response	Comments	Respondent
1	s3.59(2)(a) F&G Regs 7,9,10	Has the local government prepared a business plan for each major trading undertaking that was not exempt in 2020?	N/A	No major trading undertakings in 2020	D Baker
2	s3.59(2)(b) F&G Regs 7,8,10	Has the local government prepared a business plan for each major land transaction that was not exempt in 2020?	N/A	No major land transactions in 2020	D Baker
3	s3.59(2)(c) F&G Regs 7,8,10	Has the local government prepared a business plan before entering into each land transaction that was preparatory to entry into a major land transaction in 2020?	N/A	See above	D Baker
4	s3.59(4)	Has the local government complied with public notice and publishing requirements for each proposal to commence a major trading undertaking or enter into a major land transaction or a land transaction that is preparatory to a major land transaction for 2020?	N/A	See above	D Baker
5	s3.59(5)	During 2020, did the council resolve to proceed with each major land transaction or trading undertaking by absolute majority?	N/A	See above	D Baker

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Delegation of Power/Duty

No	Reference	Question	Response	Comments	Respondent
1	s5.16	Were all delegations to committees resolved by absolute majority?	Yes	Refer item 2006-16 adopted at OCM 24 June 2020	D Baker
2	s5.16	Were all delegations to committees in writing?	Yes		D Baker
3	s5.17	Were all delegations to committees within the limits specified in section 5.17?	Yes		D Baker
4	s5.18	Were all delegations to committees recorded in a register of delegations?	Yes		D Baker
5	s5.18	Has council reviewed delegations to its committees in the 2019/2020 financial year?	Yes	See answer 1	D Baker
6	s5.42(1) & s5.43 Admin Reg 18G	Did the powers and duties delegated to the CEO exclude those listed in section 5.43 of the Act?	Yes		D Baker
7	s5.42(1)	Were all delegations to the CEO resolved by an absolute majority?	Yes	See answer 1	D Baker
8	s5.42(2)	Were all delegations to the CEO in writing?	Yes		D Baker
9	s5.44(2)	Were all delegations by the CEO to any employee in writing?	Yes		D Baker
10	s5.16(3)(b) & s5.45(1)(b)	Were all decisions by the council to amend or revoke a delegation made by absolute majority?	Yes	See answer 1	D Baker
11	s5.46(1)	Has the CEO kept a register of all delegations made under Division 4 of the Act to the CEO and to employees?	Yes		D Baker
12	s5.46(2)	Were all delegations made under Division 4 of the Act reviewed by the delegator at least once during the 2019/2020 financial year?	Yes	See answer 1	D Baker
13	s5.46(3) Admin Reg 19	Did all persons exercising a delegated power or duty under the Act keep, on all occasions, a written record in accordance with Admin Reg 19?	Yes	Sample checking of written records of exercise show compliance with r.19	D Baker

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Disclosure of Interest

No	Reference	Question	Response	Comments	Respondent
1	s5.67	Where a council member disclosed an interest in a matter and did not have participation approval under sections 5.68 or 5.69, did the council member ensure that they did not remain present to participate in discussion or decision making relating to the matter?	Yes		D Baker
2	s5.68(2) & s5.69(5) Admin Reg 21A	Were all decisions regarding participation approval, including the extent of participation allowed and, where relevant, the information required by Admin Reg 21A, recorded in the minutes of the relevant council or committee meeting?	N/A	No participation approvals in 2020	D Baker
3	s5.73	Were disclosures under section sections 5.65, 5.70 or 5.71A(3) recorded in the minutes of the meeting at which the disclosures were made?	Yes	Perusal of Council meeting minutes show regular disclosures by elected members	D Baker
4	s5.75 Admin Reg 22, Form 2	Was a primary return in the prescribed form lodged by all relevant persons within three months of their start day?	Yes		D Baker
5	s5.76 Admin Reg 23, Form 3	Was an annual return in the prescribed form lodged by all relevant persons by 31 August 2020?	Yes		D Baker
6	s5.77	On receipt of a primary or annual return, did the CEO, or the mayor/president, give written acknowledgment of having received the return?	Yes		D Baker
7	s5.88(1) & (2)(a)	Did the CEO keep a register of financial interests which contained the returns lodged under sections 5.75 and 5.76?	Yes		D Baker
8	s5.88(1) & (2)(b) Admin Reg 28	Did the CEO keep a register of financial interests which contained a record of disclosures made under sections 5.65, 5.70, 5.71 and 5.71A, in the form prescribed in Admin Reg 28?	Yes		D Baker
9	s5.88(3)	When a person ceased to be a person required to lodge a return under sections 5.75 and 5.76, did the CEO remove from the register all returns relating to that person?	Yes		D Baker
10	s5.88(4)	Have all returns removed from the register in accordance with section 5.88(3) been kept for a period of at least five years after the person who lodged the return(s) ceased to be a person required to lodge a return?	Yes		D Baker
11	s5.89A(1), (2) & (3) Admin Reg 28A	Did the CEO keep a register of gifts which contained a record of disclosures made under sections 5.87A and 5.87B, in the form prescribed in Admin Reg 28A?	Yes		D Baker
12	s5.89A(5) & (5A)	Did the CEO publish an up-to-date version of the gift register on the local government's website?	Yes		D Baker

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13	s5.89A(6)	When a person ceases to be a person who is required to make a disclosure under section 5.87A or 5.87B, did the CEO remove from the register all records relating to that person?	N/A	No circumstance of this nature arose in 2020	D Baker
14	s5.89A(7)	Have copies of all records removed from the register under section 5.89A(6) been kept for a period of at least five years after the person ceases to be a person required to make a disclosure?	Yes		D Baker
15	Rules of Conduct Reg 11(1), (2) & (4)	Where a council member had an interest that could, or could reasonably be perceived to, adversely affect the impartiality of the person, did they disclose the interest in accordance with Rules of Conduct Reg 11(2)?	Yes		D Baker
16	Rules of Conduct Reg 11(6)	Where a council member disclosed an interest under Rules of Conduct Reg 11(2) was the nature of the interest recorded in the minutes?	Yes	Perusal of council minutes shows regular disclosures by elected members	D Baker
17	s5.70(2) & (3)	Where an employee had an interest in any matter in respect of which the employee provided advice or a report directly to council or a committee, did that person disclose the nature and extent of that interest when giving the advice or report?	N/A	No circumstance of this nature arose in 2020. Internal policy is that employees with an interest in advice or reports are removed from dealing with the matter at the outset	D Baker
18	s5.71A & s5.71B(5)	Where council applied to the Minister to allow the CEO to provide advice or a report to which a disclosure under s5.71A(1) relates, did the application include details of the nature of the interest disclosed and any other information required by the Minister for the purposes of the application?	N/A	No circumstance of this nature arose in 2020	D Baker
19	s5.71B(6) & s5.71B(7)	Was any decision made by the Minister under subsection 5.71B(6) recorded in the minutes of the council meeting at which the decision was considered?	N/A		D Baker
20	s5.103 Admin Regs 34B & 34C	Has the local government adopted a code of conduct in accordance with Admin Regs 34B and 34C to be observed by council members, committee members and employees?	Yes		D Baker
21	Admin Reg 34B(5)	Has the CEO kept a register of notifiable gifts in accordance with Admin Reg 34B(5)?	Yes		D Baker

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Disposal of Property

No	Reference	Question	Response	Comments	Respondent
1	s3.58(3)	Where the local government disposed of property other than by public auction or tender, did it dispose of the property in accordance with section 3.58(3) (unless section 3.58(5) applies)?	Yes		D Baker
2	s3.58(4)	Where the local government disposed of property under section 3.58(3), did it provide details, as prescribed by section 3.58(4), in the required local public notice for each disposal of property?	Yes	Based on the samples examined, the City is compliant with this requirement	D Baker

Elections

No	Reference	Question	Response	Comments	Respondent
1	Elect Regs 30G(1) & (2)	Did the CEO establish and maintain an electoral gift register and ensure that all disclosure of gifts forms completed by candidates and donors and received by the CEO were placed on the electoral gift register at the time of receipt by the CEO and in a manner that clearly identifies and distinguishes the forms relating to each candidate?	N/A	No elections in 2020	D Baker
2	Elect Regs 30G(3) & (4)	Did the CEO remove any disclosure of gifts forms relating to an unsuccessful candidate, or a successful candidate that completed their term of office, from the electoral gift register, and retain those forms separately for a period of at least two years?	N/A		D Baker
3	Elect Regs 30G(5) & (6)	Did the CEO publish an up-to-date version of the electoral gift register on the local government's official website in accordance with Elect Reg 30G(6)?	N/A	See answer 1	D Baker

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Finance

No	Reference	Question	Response	Comments	Respondent
1	s7.1A	Has the local government established an audit committee and appointed members by absolute majority in accordance with section 7.1A of the Act?	Yes	Refer minutes of OCM 23 October 2019 item C1910-5	D Baker
2	s7.1B	Where the council delegated to its audit committee any powers or duties under Part 7 of the Act, did it do so by absolute majority?	N/A	No powers or duties delegated under Part 7 of the Act	D Baker
3	s7.3(1) & s7.6(3)	Was the person or persons appointed by the local government to be its auditor appointed by an absolute majority decision of council?	N/A	Auditor General conducted the City's audit in 2020	D Baker
4	s7.3(3)	Was the person(s) appointed by the local government under s7.3(1) to be its auditor a registered company auditor or an approved auditor?	N/A	No auditor appointed – OAG conducted the City's audit in 2020	D Baker
5	s7.9(1)	Was the auditor's report for the financial year ended 30 June 2020 received by the local government by 31 December 2020?	N/A	At the time of writing, the City was awaiting the audit report from OAG	D Baker
6	s7.12A(3)	Where the local government determined that matters raised in the auditor's report prepared under s7.9(1) of the Act required action to be taken, did the local government ensure that appropriate action was undertaken in respect of those matters?	N/A	See answer 5	D Baker
7	s7.12A(4)(a)	Where matters identified as significant were reported in the auditor's report, did the local government prepare a report that stated what action the local government had taken or intended to take with respect to each of those matters?	N/A	See answer 5	D Baker
8	s7.12A(4)(b)	Where the local government was required to prepare a report under s.7.12A(4)(a), was a copy of the report given to the Minister within three months of the audit report being received by the local government?	N/A	See answer 5	D Baker
9	s7.12A(5)	Within 14 days after the local government gave a report to the Minister under s7.12A(4)(b), did the CEO publish a copy of the report on the local government's official website?	N/A	See answer 5	D Baker
10	Audit Reg 7	Did the agreement between the local government and its auditor include the objectives and scope of the audit, a plan for the audit, details of the remuneration and expenses paid to the auditor, and the method to be used by the local government to communicate with the auditor?	N/A	OAG was the auditor in 2020	D Baker
11	Audit Reg 10(1)	Was the auditor's report for the financial year ending 30 June received by the local government within 30 days of completion of the audit?	N/A	See answer 5	D Baker

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Integrated Planning and Reporting

No	Reference	Question	Response	Comments	Respondent
1	Admin Reg 19C	Has the local government adopted by absolute majority a strategic community plan? If Yes, please provide the adoption date or the date of the most recent review in the Comments section?	Yes	Reviewed in 2019 and adopted by Council at its OCM on 26 June 2019 item FPOL1906-12	D Baker
2	Admin Reg 19DA(1) & (4)	Has the local government adopted by absolute majority a corporate business plan? If Yes, please provide the adoption date or the date of the most recent review in the Comments section?	Yes	Reviewed in 2019 and adopted by Council at its OCM on 26 June 2019 item FPOL1906-12	D Baker
3	Admin Reg 19DA(2) & (3)	Does the corporate business plan comply with the requirements of Admin Reg 19DA(2) & (3)?	Yes		D Baker

Local Government Employees

No	Reference	Question	Response	Comments	Respondent
1	Admin Reg 18C	Did the local government approve a process to be used for the selection and appointment of the CEO before the position of CEO was advertised?	N/A	No change of CEO in 2020	D Baker
2	s5.36(4) & s5.37(3) Admin Reg 18A	Were all CEO and/or senior employee vacancies advertised in accordance with Admin Reg 18A?	N/A	No senior employee vacancies in 2020	D Baker
3	Admin Reg 18E	Was all information provided in applications for the position of CEO true and accurate?	N/A	No change of CEO in 2020	D Baker
4	Admin Reg 18F	Was the remuneration and other benefits paid to a CEO on appointment the same remuneration and benefits advertised for the position under section 5.36(4)?	N/A	No change of CEO in 2020	D Baker
5	s5.37(2)	Did the CEO inform council of each proposal to employ or dismiss senior employee?	N/A	No senior employee vacancies in 2020	D Baker
6	s5.37(2)	Where council rejected a CEO's recommendation to employ or dismiss a senior employee, did it inform the CEO of the reasons for doing so?	N/A	No senior employee vacancies in 2020	D Baker

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Official Conduct

No	Reference	Question	Response	Comments	Respondent
1	s5.120	Has the local government designated a senior employee as defined by section 5.37 to be its complaints officer?	N/A	CEO is Complaints Officer	D Baker
2	s5.121(1)	Has the complaints officer for the local government maintained a register of complaints which records all complaints that resulted in a finding under section 5.110(2)(a)?	Yes	No findings of minor breach made in 2020	D Baker
3	s5.121(2)	Does the complaints register include all information required by section 5.121(2)?	Yes		D Baker
4	s5.121(3)	Has the CEO published an up-to-date version of the register of the complaints on the local government's official website?	Yes		D Baker

Optional Questions

No	Reference	Question	Response	Comments	Respondent
1	Financial Management Reg 5(2)(c)	Did the CEO review the appropriateness and effectiveness of the local government's financial management systems and procedures in accordance with Financial Management Reg 5(2)(c) within the three years prior to 31 December 2020? If yes, please provide the date of council's resolution to accept the report.	Yes	Presented to Council's Audit Committee on 11 August 2020 item ARMC2008-1	D Baker
2	Audit Reg 17	Did the CEO review the appropriateness and effectiveness of the local government's systems and procedures in relation to risk management, internal control and legislative compliance in accordance with Audit Reg 17 within the three years prior to 31 December 2020? If yes, please provide date of council's resolution to accept the report.	Yes	Presented to Council's Audit Committee on 10 November 2020 item ARMC2011-4	D Baker
3	s5.87C(2)	Where a disclosure was made under sections 5.87A or 5.87B, was the disclosure made within 10 days after receipt of the gift?	Yes		D Baker
4	s5.87C	Where a disclosure was made under sections 5.87A or 5.87B, did the disclosure include the information required by section 5.87C?	Yes		D Baker
5	s5.90A(2)	Did the local government prepare and adopt by absolute majority a policy dealing with the attendance of council members and the CEO at events?	Yes	Adopted OCM 23 September 2020 item FPOL2009-7	D Baker
6	s.5.90A(5)	Did the CEO publish an up-to-date version of the attendance at events policy on the local government's official website?	Yes		D Baker
7	s5.96A(1), (2), (3) & (4)	Did the CEO publish information on the local government's website in accordance with sections 5.96A(1),	Yes		D Baker

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		(2), (3), and (4)?			
8	s5.128(1)	Did the local government prepare and adopt (by absolute majority) a policy in relation to the continuing professional development of council members?	Yes	Adopted OCM 23 September 2020 item FPOL2009-8	D Baker
9	s5.127	Did the local government prepare a report on the training completed by council members in the 2019/2020 financial year and publish it on the local government's official website by 31 July 2020?	Yes		D Baker
10	s6.4(3)	By 30 September 2020, did the local government submit to its auditor the balanced accounts and annual financial report for the year ending 30 June 2020?	Yes	This was submitted to the OAG	D Baker

Tenders for Providing Goods and Services

No	Reference	Question	Response	Comments	Respondent
1	F&G Reg 11A(1) & (3)	Does the local government have a current purchasing policy that complies with F&G Reg 11A(3) in relation to contracts for other persons to supply goods or services where the consideration under the contract is, or is expected to be, \$250,000 or less or worth \$250,000 or less?	Yes		D Baker
2	F&G Reg 11A(1)	Did the local government comply with its current purchasing policy in relation to the supply of goods or services where the consideration under the contract was, or was expected to be, \$250,000 or less or worth \$250,000 or less?	Yes	Based on the samples examined, the City is compliant with this requirement and the City conducts random audits of procurement throughout the year	D Baker
3	s3.57 F&G Reg 11	Subject to F&G Reg 11(2), did the local government invite tenders for all contracts for the supply of goods or services where the consideration under the contract was, or was expected to be, worth more than the consideration stated in F&G Reg 11(1)?	Yes		K Porter
4	F&G Regs 11(1), 12(2), 13, & 14(1), (3), and (4)	When regulations 11(1), 12(2) or 13 required tenders to be publicly invited, did the local government invite tenders via Statewide public notice in accordance with F&G Reg 14(3) and (4)?	Yes	Based on the samples examined, the City is compliant with this requirement	K Porter
5	F&G Reg 12	Did the local government comply with F&G Reg 12 when deciding to enter into multiple contracts rather than a single contract?	Yes		K Porter
6	F&G Reg 14(5)	If the local government sought to vary the information supplied to tenderers, was every reasonable step taken to give each person who sought copies of the tender documents or each acceptable tenderer notice of the variation?	Yes	Information to tenderers is distributed via Tenderlink portal	K Porter

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7	F&G Regs 15 & 16	Did the local government's procedure for receiving and opening tenders comply with the requirements of F&G Regs 15 and 16?	Yes		D Baker
8	F&G Reg 17	Did the information recorded in the local government's tender register comply with the requirements of F&G Reg 17 and did the CEO make the tenders register available for public inspection and publish it on the local government's official website?	Yes		D Baker
9	F&G Reg 18(1)	Did the local government reject any tenders that were not submitted at the place, and within the time, specified in the invitation to tender?	N/A	No tenders were rejected – all managed through Tenderlink	K Porter
10	F&G Reg 18(4)	Were all tenders that were not rejected assessed by the local government via a written evaluation of the extent to which each tender satisfies the criteria for deciding which tender to accept?	Yes	Evaluation reports are compliant based on the samples examined	D Baker
11	F&G Reg 19	Did the CEO give each tenderer written notice containing particulars of the successful tender or advising that no tender was accepted?	Yes	Based on the samples examined, the City is compliant with this requirement	D Baker
12	F&G Regs 21 & 22	Did the local government's advertising and expression of interest processes comply with the requirements of F&G Regs 21 and 22?	Yes	Based on the samples examined, the City is compliant with this requirement	D Baker
13	F&G Reg 23(1) & (2)	Did the local government reject any expressions of interest that were not submitted at the place, and within the time, specified in the notice or that failed to comply with any other requirement specified in the notice?	N/A	None rejected	K Porter
14	F&G Reg 23(3)	Were all expressions of interest that were not rejected assessed by the local government?	Yes		K Porter
15	F&G Reg 23(4)	After the local government considered expressions of interest, did the CEO list each person considered capable of satisfactorily supplying goods or services as an acceptable tenderer?	Yes	The City conducted 1 EOI in 2020 and it is yet to be finalised	K Porter
16	F&G Reg 24	Did the CEO give each person who submitted an expression of interest a notice in writing of the outcome in accordance with F&G Reg 24?	N/A	See answer 15	D Baker
17	F&G Regs 24AD(2) & (4) and 24AE	Did the local government invite applicants for a panel of pre-qualified suppliers via Statewide public notice in accordance with F&G Reg 24AD(4) and 24AE?	N/A	No pre-qualified panels in 2020	K Porter
18	F&G Reg 24AD(6)	If the local government sought to vary the information supplied to the panel, was every reasonable step taken to give each person who sought detailed information about the proposed panel or each person who submitted an application notice of the variation?	N/A	See answer 17	K Porter
19	F&G Reg 24AF	Did the local government's procedure for receiving and opening applications to join a panel of pre-qualified suppliers comply with the requirements of F&G Reg 16, as if the reference in that regulation to a tender	N/A	See answer 17	K Porter

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		were a reference to a pre-qualified supplier panel application?			
20	F&G Reg 24AG	Did the information recorded in the local government's tender register about panels of pre-qualified suppliers comply with the requirements of F&G Reg 24AG?	N/A	See answer 17	K Porter
21	F&G Reg 24AH(1)	Did the local government reject any applications to join a panel of pre-qualified suppliers that were not submitted at the place, and within the time, specified in the invitation for applications?	N/A	See answer 17	K Porter
22	F&G Reg 24AH(3)	Were all applications that were not rejected assessed by the local government via a written evaluation of the extent to which each application satisfies the criteria for deciding which application to accept?	N/A	See answer 17	K Porter
23	F&G Reg 24AI	Did the CEO send each applicant written notice advising them of the outcome of their application?	N/A	See answer 17	K Porter
24	F&G Regs 24E & 24F	Where the local government gave regional price preference, did the local government comply with the requirements of F&G Regs 24E and 24F?	N/A	No regional price preference given in 2020	K Porter

ARMC2102-5 INFORMATION REPORT – FEBRUARY 2021

STATUS REPORT OF COUNCIL MOTIONS – 1 OCTOBER 2020 TO 31 DECEMBER 2020

ATTACHMENT 1 – Status Report of Council motions – 1 October 2020 to 31 December 2020

Status report of council motions - 1 October 2020 to 31 December 2020

Motions incomplete and ongoing in the reporting period

1 October 2020 to 31 December 2020

The motions included in this section are those decisions that have not yet been fully actioned. Progress comments or explanations provided.



Responsible Officer	Final decision maker	Item No	Title of Item	Officer update <i>Provide a brief update on the actions that are to be taken/or actions that have been undertaken.</i>	Status	Estimated completion date
Manager Field Services	OCM	FPOL1906-9	ENCROACHMENT OF A FRONT BOUNDARY WALL PIER AT 65 WRAY AVENUE, FREMANTLE	The Body Corporate gave conditional consent for the signing of the planning application. The signed documents will be forwarded to the owners of 65 Wray Avenue to make the required applications to the City.	Ongoing	26/02/2021
Manager Strategic Planning	OCM	SPT1909-6	FISHING BOAT HARBOUR - POSITION STATEMENT	Position statement used to inform input on workshop. Policy updates arising from their workshop proposed by Department of Transport 3/8/20. Meeting with Departments of Transport and Planning occurred 20/8/20. Masterplanning process proposed Jan-Jun 21	Ongoing	30/06/2021
Manager Infrastructure Engineering	OCM	FPOL1910-6	FREMANTLE PARK UPDATE	Officers reported back to Finance, Policy, Operations and Legislation (FPOL) Committee with further options for increased parking capacity of the proposed car park on Parry St and presents a business case including options for multistorey in November 2020. The item was deferred to the next appropriate FPOL by the Committee to allow additional time for consultation.	Ongoing	13/01/2021
Manager Infrastructure Engineering	OCM	Petition	Submitted 13 November 2019 (FPOL) The Acting Chief Executive Officer, Paul Garbett presented a petition that was submitted to Administration from Doug Fishwick of Tuart Place. The petition is signed by ** requesting the following: "For Fremantle Council to create designated disable parking spaces for paraplegics and anyone else who may need them outside 24 High Street Tuart Place."	Officer's are investigating the possibility of designating parking spaces for disability access outside 24 High Street, however needs to be thought of in context of Strategic Parking Plan for the City.	Ongoing	31/12/2021
Manager Economic Development and Marketing	OCM	FPOL1911-5	NEW LEASE AND SUB LEASE AT 123 BEACH STREET, FREMANTLE	All draft documents have been finalised. The tenant has requested until 30 June 2020 to assess the impact of COVID-19. Lease commencement could potentially be deferred to May 2021.	Ongoing	1/05/2021
Manager Facilities and Environmental Management	OCM	C1912-4	GREEN WASTE AND BULK WASTE VERGE COLLECTION TENDER REPORT	Variation to the contract to remove the spring green verge collection implemented. Review of verge collection service currently being undertaken	Ongoing	30/06/2021
Manager City Design and Projects	OCM	FPOL2002-4	KINGS SQUARE – WHADJUK NOONGAR NAMING	Project underway. Stage 1 "ideation" ends early November, then we go back out to the community with a list of potential names for feedback. A Key Stakeholder group has been established to help guide the process. Currently scheduled for the final decision to go before Council in April 2021.	Ongoing	1/05/2021
Manager City Design and Projects	OCM	SPT2003-3	KNUTSFORD STREET PUBLIC REALM:AN URBAN DESIGN PLAN TO SUPPORT THE EVOLUTION OF A PRECINCT	Actions on hold until (a) budget confirmed to undertake tree-planting and footpath programme, and (b) community engagement period is commenced on verge policy and urban art on roadway. Unfortunately recent RAC Funding was unsuccessful.	Not started	
Director City Business	OCM	C2006-9	FREMANTLE MARKETS ESSENTIAL WORKS AND LEASE EXTENSION PROPOSAL	Architects have been appointed for the scope and design of the works, and the works are expected to be completed in November. The City is in the process of finalising lease negotiations with Fremantle Markets Pty Ltd (FMPL) and is expected to conclude following the completion of the scope and design.	Ongoing	31/12/2020

Responsible Officer	Final decision maker	Item No	Title of Item	Officer update <i>Provide a brief update on the actions that are to be taken/or actions that have been undertaken.</i>	Status	Estimated completion date
Manager Customer Service and Visitor Information	OCM	C2006-10	FREMANTLE VISITOR CENTRE OPERATING MODEL 2020	Service standards have been amended and approved by Council. They will now form a part of the Service Agreement for the funding arrangements for the development and delivery of a Visitor Centre and associated visitor information services. The CEO is now authorised to negotiate and finalise a draft funding agreement with Siriona Capital in line with these service standards, with the final agreement to be brought back to council for approval.	Ongoing	24/02/2021
Manager Information Technology	OCM	FPOL2008-11	ELECTED MEMBER MOTION - NAMING OF THE LANEWAY THOROUGHFARE ADJOINING THE FREO SOCIAL CLUB 'RICHARD LANE' – MAYOR BRAD PETTITT	The City is awaiting a response from Property Owner for permission to name the accessway/thoroughfare. Followed by a Landgate application to naming the laneway thoroughfare adjoining the Fremantle Social Club, "Richard Lane" or similar. Owner's Response estimated - 31/12/2020	Ongoing	31/12/2020
Manager City Design and Projects	OCM	SPT2008-3	FREMANTLE OVAL UPDATE REPORT	Rec 1. Complete. Site meeting scheduled for 29/11/20. Rec 2. Complete. No further Action. Rec 3 and 4. Complete. Letter to WAPOL 28/08/20 and letter to Lands 2/10/20. Rec 5. Football 'masterplan' for facilities and infrastructure underway. Est completion Early 2021. Rec 6. Noted. A Draft Oval Masterplan is currently being prepared in collaboration with South Fremantle Football Club, WAFC, and Dept Sport and Rec. Anticipated this will be presented to Council in Feb/March 2021.	Ongoing	30/06/2021
Manager Strategic Planning	SPT	SPT2009-1	LOCAL HERITAGE SURVEY AND HERITAGE LIST - ANNUAL UPDATE 2020 – OUTCOMES OF CONSULTATION	Submitters notified of decision 30/9/20. Updates to databases x 3 in train. Delays due to heavy assessment workload	Ongoing	30/03/2021
Manager Strategic Planning	SPT	SPT2009-2	SCHEME REVIEW: REVIEW OF LAND USE DEFINITIONS: PROPOSED SCHEME AMENDMENT	Documents processed and referred to Environmental Protection Authority & Western Australian Planning Commission for approval to advertise 2/10/2020. Advertising commenced 11/12/20 continuing to 9/2/21.	Ongoing	30/06/2021
Manager Field Services	OCM	Petition	Submitted 23 September 2020 (OCM) Cr Doug Thompson presented a petition with 157 signatures requesting that the whole of the Rule Street Park be designated as a "dog off lead" area, in addition to the pathway along the top of the cliff that is already designated as a "dog off lead" area	Department of Planning, Lands and Heritage contacted and advised they can transfer the land to the City to then make it a designated dog off lead area. Strategic Planning to submit a report to Council regarding the transfer of the parcel off land, if approved consultation with the community will take place prior to a report being submitted to Council to either amend the Dog Policy or keep the parcel of land as is.	Ongoing	30/05/2021
Manager Strategic Planning	OCM	SPT2009-4	CENTRAL AREA TRANSIT (CAT) REVIEW – APPROACH & OBJECTIVES	Engagement with potential funding partners commenced 29/9/2020. Preliminary review nearing completion.	Ongoing	30/06/2021
Manager Community Development	FPOL	FPOL2010-6	COMMON GROUND HOUSING FIRST MODEL	Awaiting announcement from the State Government on the second site, either City of Fremantle, Mandurah or Stirling. Expected announcement by the end of the 2020 calendar	Ongoing	31/12/2020
Manager Governance	FPOL	FPOL2010-7	PROPOSED PROPERTY LOCAL LAW AMENDMENT 2020	The proposed Property Local Law Amendment 2020 was advertised in the Fremantle Herald on 24 October 2020, and on MySay Fremantle. It is currently out for consultation until 9 December 2020. A report for consideration for final adoption is planned to be presented at the February round of meetings	Ongoing	31/03/2021

Responsible Officer	Final decision maker	Item No	Title of Item	Officer update <i>Provide a brief update on the actions that are to be taken/or actions that have been undertaken.</i>	Status	Estimated completion date
Manager Governance	FPOL	FPOL2010-8	INTENTION TO MAKE A DETERMINATION – PERMIT REQUIRED TO USE MOTORISED MODEL AIRPLANES, HELICOPTERS, DRONES OR OTHER SIMILAR REMOTELY PILOTED DEVICES ON MONUMENT HILL RESERVE – LOCAL GOVERNMENT PROPERTY LOCAL LAW	The proposed determination was advertised in the Fremantle Herald on 24 October 2020, and on MySay Fremantle. Submissions have closed and are currently being reviewed. A report on the result of the submissions is being presented to Council in January. A report for final consideration of adoption is planned for the January round of meetings.	Ongoing	27/01/2021
Manager Economic Development and Marketing	OCM	FPOL2010-10	TENDER – WALYALUP CIVIC CENTRE HOSPITALITY SPACE	Negotiations continue with the rejected tenderer. Advertising of the space continues.	Ongoing	
People and Culture Director	OCM	C2010-5	CEO PERFORMANCE REVIEW COMMITTEE REPORT	KPIs 20/21 approved. RFQ for consultant to assist the Committee is underway.	Ongoing	31/01/2021
Manager Infrastructure Engineering	FPOL	FPOL2011-1	FREMANTLE AND SOUTH FREMANTLE SPEED ZONE PROPOSAL	Design of signage underway. Comms Strategy planned for early 2021. Implementation of speed reduction as per FPOL2011-1 resolution.	Ongoing	31/03/2021
Manager City Design and Projects	SPT	SPT2011-1	KINGS SQUARE INTERPRETATIVE ARTWORK	Letter sent to the South West Aboriginal Land and Sea Council (SWALSC) seeking guidance on how to progress with consultations. Promo video being developed to assist with explaining the artwork concept to the community.	Ongoing	1/01/2022
Manager Strategic Planning	SPT	SPT2011-2	HEART OF BEACONSFIELD MASTERPLAN – REVISED DRAFT FOR APPROVAL TO ADVERTISE	Website updated. Engagement planned to commence 19/1/21 -21/2/21.	Ongoing	30/04/2021
Manager Strategic Planning	OCM	FPOL2011-9	STRATEGIC DOCUMENTS AUDIT AND STRATEGIC COMMUNITY PLAN REVIEW	Strategic Community Plan Review brief definition commenced.	Ongoing	30/03/2021
Manager Communications and Events	OCM	FPOL2011-11	ADOPTION OF COMMUNITY STREET ACTIVATION POLICY	Policy published on the City's website as adopted. Development of promotional and support materials in progress.	Ongoing	25/11/2021
Manager Strategic Planning	OCM	SPT2011-3	WEST END HERITAGE AREA – DRAFT LOCAL PLANNING POLICY 3.21 & POTENTIAL PLANNING SCHEME AMENDMENT – OUTCOMES OF PUBLIC CONSULTATION	Submitters notified, final policy published (11/12/20). Scheme Amendment document processed and referred to Environmental Protection Authority.	Ongoing	30/06/2021
Manager Asset Management	OCM	C2012-1	FREMANTLE GOLF COURSE CLUBHOUSE AND COMMUNITY CENTRE	Officers are progressing through the detailed design process.	Ongoing	30/06/2021
Manager Community Development	OCM	C2012-2	COMMUNITY AND ECONOMIC SUPPORT FINANCIAL ASSISTANCE POLICY – ADOPTION OF GUIDING PRINCIPLES	11.11.20 Council endorsed the proposed Plan 2020-2030 for the purpose of community engagement. Currently working through the scope of the RFQ to engage Consultant to undertake the gap analysis on community needs around public open space and unstructured recreation	Ongoing	31/03/2021
Director Infrastructure	OCM	C2012-6	WASTE TO ENERGY (RESIDUAL WASTE)	Officers are now working with the Southern Metropolitan Regional Council (SMRC) and lawyers to incorporate the proposed amendments and attain final agreement with Kwinana Waste To Energy (WTE) Project Co PTY LTD.	Ongoing	28/02/2021
Manager Economic Development and Marketing	OCM	C2012-13	SALE OF 7-15 QUARRY STREET, FREMANTLE	Expression of Interest will be released 16/12/2020 with closure to occur 29/01/2021	Ongoing	29/01/2021

Development application motions completed in the reporting period

1 October 2020 to 31 December 2020

The motions included in this section are those decisions about Development Applications (DA's) that have been completed. They have been grouped for ease of reference only.

Responsible Officer	Final decision maker	Item No	Title of Item	Officer update <i>Provide a brief update on the actions that are to be taken/or actions that have been undertaken.</i>	Status	Completion date
Manager Development Approvals	PC	PC2010-3	TRAFFORD STREET, NO. 21 (SL 1), BEACONSFIELD - DEMOLITION OF EXISTING DWELLING AND CONSTRUCTION OF NEW SINGLE STOREY SINGLE HOUSE – (NB DA0257/20)	Determination Letter Issued	Complete	13/10/2020
Manager Development Approvals	PC	PC2010-2	PAKENHAM STREET NO. 15 (LOT 4), FREMANTLE - ROOFTOP TERRACE ADDITION TO EXISTING TOURIST ACCOMMODATION BUILDING - (JCL DA0508/19)	Applicant Advised of Deferral	Complete	16/10/2020
Manager Development Approvals	PC	PC2010-4	RULE STREET, NO. 27 (LOT 15), NORTH FREMANTLE – TWO STOREY SINGLE HOUSE - (JL DA0202/20)	Determination Letter Issued	Complete	13/10/2020
Manager Development Approvals	PC	PC2010-5	ALFRED ROAD, NO. 24 (LOT 3), NORTH FREMANTLE - DEMOLITION OF EXISTING DWELLING AND CONSTRUCTION OF A TWO STOREY SINGLE HOUSE – (NB DA0230/20)	Determination Letter Issued	Complete	12/10/2020
Manager Development Approvals	PC	PC2010-6	HALE STREET NO.44 (LOT 62) BEACONSFIELD – TWO STOREY ADDITIONS AND ALTERATIONS TO EXISTING SINGLE HOUSE (JL DA0252/20)	Determination Letter Issued	Complete	13/10/2020
Manager Development Approvals	PC	PC2010-7	COMMERCIAL STREET NO.6 (LOT 27), SOUTH FREMANTLE - DEMOLITION OF EXISTING DWELLING AND CONSTRUCTION OF A SINGLE STOREY SINGLE HOUSE – (JL DA0316/20)	Applicant advised of Deferral	Complete	16/10/2020
Manager Development Approvals	PC	PC2010-8	BEACH STREET NO.1, 1A AND 1B (LOTS 1, 170 AND 171), FREMANTLE – EXTENSION TO TERM OF APPROVAL FOR DAP011/15 (SIX- SEVEN STOREY MIXED USE DEVELOPMENT) (JL DAPV002/20)	Responsible Authority Report submitted to the Joint Development Assessment Panel (JDAP).	Complete	5/10/2020
Manager Development Approvals	SPT	SPT2010-1	SCOTT STREET, NO.28 (LOT 16), SOUTH FREMANTLE – DEMOLITION OF EXISTING SINGLE HOUSE AND CONSTRUCTION OF A TWO STOREY SINGLE HOUSE – (JL DA0266/20)	Determination Letter Issued	Complete	27/10/2020
Manager Development Approvals	OCM	PC2010-1	KNUTSFORD STREET, NO. 6 (STRATA LOT 2) FREMANTLE - TWO STOREY SINGLE HOUSE (TG DA0180/20)	Applicant advised of Referral	Complete	14/10/2020
Manager Development Approvals	PC	PC2011-1	WATKINS STREET, NO. 107A (STRATA LOT 1), WHITE GUM VALLEY - TWO STOREY SINGLE HOUSE (TG DA0160/20)	This item was not considered as the applicant withdrew the application before the Planning Committee Meeting.	Complete	2/11/2020
Manager Development Approvals	PC	PC2011-5	LEFROY ROAD, NO. 148 (LOT 21), BEACONSFIELD – THREE, TWO STOREY GROUPED DWELLINGS – (NB DA0334/20)	Determination Letter Issued	Complete	11/11/2020
Manager Development Approvals	PC	PC2011-6	ALMA STREET, NO. 15 (STRATA LOT 1) FREMANTLE - ADDITIONS AND ALTERATIONS TO EXISTING GROUPED DWELLING (JK DA0289/20)	Determination Letter Issued	Complete	17/11/2020
Manager Development Approvals	PC	PC2011-7	SHEPHERD STREET, NO. 67B (STRATA LOT 1), BEACONSFIELD – TWO STOREY SINGLE HOUSE (TG DA0207/20)	Determination Letter Issued	Complete	11/11/2020
Manager Development Approvals	PC	PC2011-8	DOURO ROAD, NO. 2/19 (STRATA LOT 2), SOUTH FREMANTLE - VARIATION TO OPERATING HOURS OF DA0099/19 (CHANGE OF USE TO RESTAURANT) – (JK VA0027/20)	Determination Letter Issued	Complete	11/11/2020
Manager Development Approvals	PC	PC2011-9	STACK STREET, NO. 16 (LOT 3) FREMANTLE – ADDITIONS (SEA CONTAINER AND DECKING) AND PARTIAL CHANGE OF USE TO RESTAURANT (TG DA0294/20)	Determination Letter Issued	Complete	11/11/2020
Manager Development Approvals	PC	PC2011-10	SAMSON STREET, NO. 95 (LOT 903) WHITE GUM VALLEY – DEMOLITION OF EXISTING OFFICE BUILDING (TG DA0395/20)	Determination Letter Issued	Complete	11/11/2020
Manager Development Approvals	PC	PC2011-2	KEEL PLACE, NO. 4 (LOT 51), NORTH FREMANTLE - THREE STOREY SINGLE HOUSE AND ANCILLARY DWELLING (TG DA0166/20)	Determination Letter Issued	Complete	11/11/2020
Manager Development Approvals	OCM	PC2011-3	COMMERCIAL STREET NO.6 (LOT 27), SOUTH FREMANTLE - DEMOLITION OF EXISTING DWELLING AND CONSTRUCTION OF A SINGLE STOREY SINGLE HOUSE – (JL DA0316/20)	Determination Letter Issued	Complete	1/12/2020
Manager Development Approvals	OCM	PC2011-4	SEAVIEW STREET, NO. 7A (STRATA LOT 2), BEACONSFIELD – TWO STOREY SINGLE HOUSE – (NB DA0297/20)	Determination Letter Issued	Complete	8/12/2020
Manager Development Approvals	PC	PC2012 - 2	KNUTSFORD STREET, NO.76 (LOT 2), FREMANTLE – FIVE STOREY MIXED USE DEVELOPMENT CONTAINING 39 MULTIPLE DWELLINGS AND A RESTAURANT	Responsible Authority Report submitted to the Joint Development Assessment Panel (JDAP).	Complete	10/12/2020
Manager Development Approvals	PC	PC2012 - 3	COLLICK STREET, NO. 84 (LOT 214), HILTON – MODIFICATIONS TO DAP003/20 (TWELVE MULTIPLE DWELLINGS (AGED AND DEPENDENT PERSONS DWELLINGS) AND HOSPITAL (TWO STOREY RESIDENTIAL AGED CARE - HIGH CARE FACILITY) - (TG VA0037/20)	Determination Letter Issued	Complete	8/12/2020
Manager Development Approvals	PC	PC2012 - 4	LONG STREET, NO. 12A (LOT 888), BEACONSFIELD – TWO STOREY SINGLE HOUSE – (NB DA0382/20)	Determination Letter Issued	Complete	8/12/2020

Motions other than Development Applications (DA's) completed in the reporting period 1 October 2020 to 31 December 2020

The motions included in this section are all other decisions made by Council except DA's that have been completed.

Responsible Officer	Final decision maker	Item No	Title of Item	Officer update <i>Provide a brief update on the actions that are to be taken/or actions that have been undertaken.</i>	Status	Estimated completion date	Completion date
Director City Business	OCM	Petition	Submitted 27 November 2019 (OCM) Cr Pemberton presented a petition with approximately 340 signatures requesting the council support a moratorium on the sale of publicly owned land to developers.	A report will be presented to the Finance, Policy, Operations and Legislation (FPOL) Committee meeting in November. This item was presented to the FPOL Committee dated 11 November, recommending this petition be noted and no further action required.	Complete	11/11/2020	11/11/2020
Manager Governance	OCM	ARMC2002-1	REVIEW OF CERTAIN SYSTEMS AND PROCEDURES - INTERNAL CONTROL BY THE CHIEF EXECUTIVE OFFICER REQUIRED BY REGULATION 17 OF THE LOCAL GOVERNMENT (AUDIT) REGULATIONS	The actions from the Review of Certain Systems and Procedures - Internal Control have been added to the Audit Actions Register. Officers will report on the progress of the actions in the Audit Actions report that is presented to the Audit and Risk Management Committee (ARMC) on a regular basis. The procedure to address actions from Audits was presented to the ARMC then Council on 25 November 2020 - refer to ARMC2011-2.	Complete	30/11/2020	31/11/2020
Manager Infrastructure Engineering	FPOL	FPOL2003-2	SOUTH TERRACE SPEED REDUCTION	Proposal for 40km/h zone in South Fremantle (including South Terrace) adopted by Committee (ITEM FPOL2011-1) on 11/11/2020. Officers will now progress with implementation in accordance with the resolution.	Complete	25/11/2020	11/11/2020
Manager Strategic Planning	SPT	SPT2003-1	WEST END CONSERVATION AREA POLICY REVIEW – REVISED DRAFT	Community engagement on draft policy delayed due to COVID-19: commenced 7/8/20 closing 7/9/20. Outcomes of consultation reported to Council 18/11/2020 (via Strategic Planning & Transport Committee)	Complete	30/12/2020	18/11/2020
Manager Economic Development and Marketing	OCM	FPOL2003-1	CRITERIA FOR KINGS SQUARE HOSPITALITY LEASE	Advertising for the space continues. Negotiating is occurring with two proponents.	Complete		12/01/2021
Manager Infrastructure Engineering	OCM	C2006-4	FREMANTLE LOW SPEED CENTRE	Proposal for 40km/h zone in Fremantle City Centre adopted by Committee (ITEM FPOL2011-1) on 11/11/2020. Officers will now progress with implementation in accordance with the resolution.	Complete	25/11/2020	11/11/2020
Manager Infrastructure Engineering	OCM	C2006-14	CONSIDERATION OF A MOTION CARRIED AT THE ANNUAL GENERAL MEETING OF ELECTORS REGARDING PARKING AT LEIGHTON & PORT BEACH	Presented options at Informal Elected Members meeting on 19/10/2020. Officers to finalise the design of a low-cost car park between Port and Leighton Beach and submit a budget request to Council. A budget request has now been submitted via the Corporate Project Management Framework for 2021/22 financial year. Officers have also identified some additional low-cost informal parking opportunities on Bracks St and are planning to finalise their installation before Christmas 2020.	Complete	30/10/2020	19/11/2020
Manager Strategic Planning	PC	PC2007-1	LOCAL HERITAGE SURVEY AND HERITAGE LIST - ANNUAL UPDATE 2020	Consultation with affected landowners commenced 10/8/20 closing 31/8/20. Outcomes of consultation reported to Council 16/9/2020 (via Strategic Planning & Transport Committee)	Complete	30/10/2020	23/10/2020
Manager Asset Management	FPOL	FPOL2008-3	FREMANTLE PUBLIC GOLF COURSE CLUBHOUSE, COMMUNITY BUILDING AND BOOYEEMBARA PARK	Officers have completed the schematic design of the building. Item C2012-1 provides the next update on this project.	Complete	1/02/2021	9/12/2020
Manager Parks and Landscapes	FPOL	FPOL2008-3	FREMANTLE PUBLIC GOLF COURSE CLUBHOUSE, COMMUNITY BUILDING AND BOOYEEMBARA PARK	The Booyeembara Park Concept Plan will be out for Community Consultation in November 2020.	Complete	30/06/2021	11/11/2020
Manager Strategic Planning	SPT	SPT2008-1	NOMINATIONS FOR THE REGISTER OF SIGNIFICANT TREES AND VEGETATION AREAS - 2020	Consultation undertaken 25/8/20-18/9/20 in accordance with policy procedure. Outcomes of consultation reported to Council 28/10/20	Complete	31/10/2020	28/10/2020

Responsible Officer	Final decision maker	Item No	Title of Item	Officer update <i>Provide a brief update on the actions that are to be taken/or actions that have been undertaken.</i>	Status	Estimated completion date	Completion date
Director of Strategic Planning and Projects	PC	PC2009-11	SPECIAL PLANNING PROVISIONS RELATING TO COVID-19 – DEVELOPMENT APPLICATIONS MADE UNDER PART 17 OF THE PLANNING AND DEVELOPMENT ACT 2005	Draft local planning policy advertised for public comment in accordance with Planning Committee motion – consultation completed. Report recommending final adoption of policy to be considered by Council on 25 November 2020 (Planning Committee supported officer recommendation for final adoption of policy at meeting on 4 November 2020 – item PC2011-12).	Complete	25/11/2020	25/11/2020
Manager Parks and Landscapes	FPOL	FPOL2009-6	REDEVELOPMENT OF THE FREMANTLE PUBLIC GOLF COURSE – FCC556/20	The contract has been awarded.	Complete	11/12/2020	29/10/2020
Manager Governance	OCM	FPOL2009-5	PROPOSED PROPERTY LOCAL LAW AMENDMENT 2020	The local law was amended and referred to October Finance, Policy, Operations and Legislation (FPOL) Committee by Council. Refer to FPOL2010-7 for progress on the Property Local Law amendment.	Complete	15/10/2020	15/10/2020
Manager Facilities and Environmental Management	OCM	FPOL2009-11	NOTICE OF MOTION - GREEN WASTE RECOVERY – SUBMITTED BY CR SAM WAINWRIGHT	Process finalised with the South Metropolitan Regional Council. Update to community comms currently being undertaken.	Complete	30/10/2020	15/11/2020
Manager Strategic Planning	OCM	SPT2009-3	PLANNING RECOVERY INITIATIVES – ADDITIONAL DEVELOPMENT APPROVAL EXEMPTIONS, AND STATE PLANNING REFORMS	Community consultation commenced 2/10/2020: closes 25/10/2020. No objections received. Updated policy published 7/11/2020.	Complete	31/12/2020	7/11/2020
People and Culture Director	OCM	C2009-4	CHIEF EXECUTIVE OFFICER PERFORMANCE REVIEW AUGUST 2020 - CONFIDENTIAL REPORT	The next CEO Performance Committee is on 7th October to finalise KPIs.	Complete	30/10/2020	7/10/2020
Manager Parks and Landscapes	FPOL	FPOL2010-1	PORT BEACH DETAILED INVESTIGATION ON SAND NOURISHMENT VIA DREDGE	The CEO has executed the Grant Agreement under delegation.	Complete	18/10/2020	3/12/2020
Manager Economic Development and Marketing	FPOL	FPOL2010-2	SALE OF 7-15 QUARRY STREET, FREMANTLE	Auction unsuccessful.	Complete	1/02/2021	6/12/2020
Manager Economic Development and Marketing	FPOL	FPOL2010-4	EXTENSION OF LEASE – 11 SOUTH TERRACE, FREMANTLE – COOLCHEST PTY LTD T/A BEN & JERRY'S	Complete	Complete		26/10/2020
Manager Strategic Planning	SPT	SPT2010-2	NOMINATIONS FOR THE REGISTER OF SIGNIFICANT TREES 2020 NO. 7/18 JOHN STREET, NORTH FREMANTLE – OUTCOMES OF CONSULTATION	Nominator and submitter notified of decision 27/10/2020. Updated Register published 28/10/2020	Complete	31/10/2020	28/10/2020
Manager Economic Development and Marketing	OCM	C2010-1	OPERATION OF SOUTH BEACH MARKETS 2020/2021	5 month Licence has been finalised	Complete	27/11/2020	27/11/2020
Director City Business	OCM	FPOL2010-9	RESERVE 37822 – 11-15 GROSVENOR STREET, BEACONSFIELD – FORMER CHALLENGER INSTITUTE OF TECHNOLOGY	Correspondence sent to the Department of Planning Lands and Heritage, providing the Council resolution of the 28 October 2020.	Complete		4/11/2020
Manager Infrastructure Engineering	OCM	FPOL2010-11	HILTON UNDERGROUNDING POWER PROJECT	Council adopted the resolution to support the Hilton project (ITEM FPOL2010-11) at OCM on 28th October 2020.	Complete	28/10/2020	28/10/2020
Manager Finance	OCM	FPOL2010-12	BUDGET AMENDMENTS - SEPTEMBER 2020	Budget updated in the system with the amendments reported and adopted	Complete	29/10/2020	29/10/2020
Manager Strategic Planning	OCM	SPT2010-3	LOCAL PLANNING POLICY REVOCATION – ENVIRONMENTAL HEALTH POLICIES DF1 AND DF 2	Revocation notice published 7/11/2020. Corporate website updated.	Complete	15/11/2020	7/11/2020
Manager Strategic Planning	OCM	SPT2010-4	WATER CONSERVATION STRATEGY REVIEW AND NEW ACTION PLAN	New documents published on corporate website 18/11/2020. Graphics edit in train.	Complete	30/11/2020	18/11/2020
Manager Strategic Planning	OCM	SPT2010-5	ONE PLANET STRATEGY – REVIEW & REVISED ACTION PLAN	Bioregional updated. New documents published on corporate website 5/11/2020. Graphics edit in train.	Complete	30/11/2020	5/11/2020
Manager Asset Management	FPOL	FPOL2011-2	FREMANTLE GOLF COURSE CLUBHOUSE AND COMMUNITY CENTRE	Officers have provided design options with associated costs. Item C2012-1 provides the next update on this project.	Complete	9/12/2020	9/12/2020
Director of Strategic Planning and Projects	OCM	PC2011-12	SPECIAL PLANNING PROVISIONS RELATING TO COVID-19 – DEVELOPMENT APPLICATIONS MADE UNDER PART 17 OF THE PLANNING AND DEVELOPMENT ACT 2005 - OUTCOME OF COMMUNITY ENGAGEMENT AND FINAL ADOPTION	Policy adopted by Council on 25 November 2020.	Complete	25/11/2020	25/11/2020
Manager Governance	OCM	ARMC2011-1	REVIEW OF THE AUDIT AND RISK MANAGEMENT COMMITTEE TERMS OF REFERENCE	The review of the Audit and Risk Management Committee terms of reference is complete. The updated terms of reference was adopted at the Ordinary Meeting of Council held on 25 November 2020, and the Council:Committees and Groups Register has been updated accordingly.	Complete	1/12/2020	1/12/2020
Manager Finance	OCM	ARMC2011-3	INTERIM AUDIT REPORT FOR THE AUDIT PERIOD 1 JULY 2019 - 30 JUNE 2020	Audit Actions Register has been updated with recommended audit findings, actions, estimated completion dates and responsible officers for future Audit and Risk Management Committee review and update.	Complete	30/09/2020	30/09/2020
Manager Governance	OCM	ARMC2011-4	REVIEW OF CERTAIN SYSTEMS AND PROCEDURES BY THE CHIEF EXECUTIVE OFFICER REQUIRED BY REGULATION 17 – RISK MANAGEMENT	Council adopted the actions it felt were necessary to undertake as a result of the findings of the Systems and Procedures review - Risk Management . These actions have been added to the Audit Actions Register and Officers will report on the progress of those actions in the Audit Actions report that is presented to the Audit and Risk Management Committee on a regular basis.	Complete	1/12/2020	1/12/2020
Director City Business	OCM	ARMC2011-5	REVIEW OF INVESTMENT POLICY (SG41)	Policy published on the City's website as adopted and key stakeholders notified.	Complete	10/12/2020	10/12/2020
Manager Finance	OCM	ARMC2011-6	PURCHASING POLICY AMENDMENTS	Policy published on the City's website as adopted and key stakeholders notified.	Complete	27/11/2020	27/11/2020

Responsible Officer	Final decision maker	Item No	Title of Item	Officer update <i>Provide a brief update on the actions that are to be taken/or actions that have been undertaken.</i>	Status	Estimated completion date	Completion date
Manager Governance	OCM	FPOL2011-4	ADOPTION OF THE RECORDING AND LIVE STREAMING OF MEETINGS POLICY	Policy has been published on the website and livestreaming will be implemented when the Administration relocate to the Walyup Civic Centre. No further action related to the policy is required.	Complete	30/11/2020	30/11/2020
Manager Finance	OCM	FPOL2011-5	BUDGET AMENDMENTS - OCTOBER 2020	Budget updated in the system with the amendments reported and adopted	Complete	26/11/2020	26/11/2020
Manager Community Development	OCM	FPOL2011-6	COMMUNITY, SPORT AND RECREATION FACILITIES PLAN - 2020 - 2030	Council endorsed the proposed Plan 2020-2030 for the purpose of community engagement.	Complete	25/11/2020	25/11/2020
Director City Business	OCM	FPOL2011-8	RATES CONCESSION – ITALIAN, CROATIAN AND PORTUGUESE CLUBS	Completed – concession processed against the rate record for all three entities.	Complete	11/12/2020	11/12/2020
Director of Strategic Planning and Projects	OCM	FPOL2011-10	STRATEGIC PLANNING AND TRANSPORT COMMITTEE – CHANGES TO MEETING SCHEDULE	The amended meeting schedule has been published on the city's website, as approved by Council.	Complete	30/11/2020	30/11/2020
Chief Executive Officer	OCM	FPOL2011-12	ELECTED MEMBER MOTION – SUPPORT FOR PERSECUTED MAYORS AND COUNCILLORS IN TURKEY – COUNCILLOR SAM WAINWRIGHT	Letters sent to 5103913 and 5103897	Complete	9/12/2020	9/12/2020
Chief Executive Officer	OCM	C2011-4	ELECTED MEMBER MOTION – FULL COUNCIL TO REVIEW METHOD TO SELL 7-15 QUARRY STREET FREMANTLE - COUNCILLOR MARIJA VUJCIC	This Motion was LOST. No further action needed.	Complete	25/11/2020	25/11/2020
Manager Strategic Planning	PC	PC2012 - 9	STATE PLANNING POLICY 4.2 'ACTIVITY CENTRES' – REVISED DRAFT	Submission lodged with Department of Planning Lands and Heritage	Complete	31/12/2021	17/12/2021
Manager Strategic Planning	OCM	C2012-3	FREMANTLE HARBOURS MASTERPLAN PROJECT	Position communicated to Department of Transport, Department of Jobs, Tourism, Science & Industry, and Tourism WA.	Complete	30/06/2021	23/12/2021
Manager Customer Service and Visitor Information	OCM	C2012-4	VISITOR CENTRE SERVICE STANDARDS	Service standards have been amended and approved by Council. They will now form a part of the Service Agreement for the funding arrangements for the development and delivery of a Visitor Centre and associated visitor information services.	Complete	9/12/2020	9/12/2020
Manager Governance	OCM	C2012-5	APPOINT MEMBER/S OF THE AUDIT AND RISK MANAGEMENT COMMITTEE	The following additional members have been appointed to the Audit and Risk Management Committee: Cr Su Groome Cr Jennifer Archibald Cr Marija Vujcic The Council: Committees and Groups Register 2019-2021 has been updated on the City's website accordingly and new members have been forwarded meeting invitations.	Complete	14/12/2020	14/12/2020
Manager Finance	OCM	C2012-8	BUDGET AMENDMENTS - NOVEMBER 2020	Amendments Made	Complete	10/12/2020	10/12/2020
Manager Asset Management	OCM	C2012-7	ACCEPTANCE OF TENDER - FCC921/20 FREMANTLE TOWN HALL FIRE SERVICE UPGRADE	Tender has been accepted and contractor engaged. Budget amendment completed.	Complete	20/12/2020	16/12/2020
Chief Executive Officer	OCM	C2012-12	ELECTED MEMBER MOTION – STAND-DOWNS AND THE COVID 19 PANDEMIC – COUNCILLOR SAM WAINWRIGHT	The CEO with the concurrence of the Mayor, recommended this motion be dismissed. Dismissal was carried – no further action required.	Complete	9/12/2020	9/12/2020

Responsible Officer	Final decision maker	Item No	Title of Item	Officer update <i>Provide a brief update on the actions that are to be taken/or actions that have been undertaken.</i>	Status	Completion date
Manager Development Approvals	PC	PC2012 - 6	SOUTH TERRACE, NO. 400 (LOT 501), SOUTH FREMANTLE – UNAUTHORISED SHADE STRUCTURE AND SEA CONTAINER ADDITIONS TO EXISTING SMALL BAR - (TG DA0394/20)	Determination Letter Issued	Complete	8/12/2020
Manager Development Approvals	PC	PC2012 - 5	HAMPTON ROAD, NO. 268 (LOT 181), BEACONSFIELD – DEMOLITION OF EXISTING SINGLE HOUSE AND TWO STOREY SINGLE HOUSE (TG DA0425/20)	Determination Letter Issued	Complete	8/12/2020
Manager Development Approvals	PC	PC2012 - 7	ADAMS STREET, NO. 10 (LOT 10) O'CONNOR – ADDITIONS TO EXISTING INDUSTRY GENERAL BUILDING (TG DA0359/20)	Determination Letter Issued	Complete	8/12/2020
Manager Development Approvals	OCM	PC2012 - 1	PAKENHAM STREET, NO. 15 (LOT 4), FREMANTLE - ROOFTOP TERRACE ADDITION TO EXISTING TOURIST ACCOMMODATION BUILDING - (JCL DA0508/19)	Determination Letter Issued	Complete	14/12/2020

Motions where no action was required in the reporting period 1 October 2020 to 31 December 2020

The motions included in this section are from those reports that were provided to Council for information only.

Responsible Officer	Final decision maker	Item No	Title of Item	Officer update <i>Provide a brief update on the actions that are to be taken/or actions that have been undertaken.</i>	Status	Completion date
Manager Development Approvals	PC	PC2010-9	INFORMATION REPORT – OCTOBER 2020 1. SCHEDULE OF APPLICATIONS DETERMINED UNDER DELEGATED AUTHORITY 2. UPDATE ON METRO INNER-SOUTH JDAP DETERMINATIONS AND RELEVANT STATE ADMINISTRATIVE TRIBUNAL APPLICATIONS FOR REVIEW	For information only – no action required	Complete	8/10/2020
Manager Community Development	FPOL	FPOL2010-5	FREMANTLE LIBRARY ANNUAL REPORT 2019 - 2020	For information only – no action required	Complete	15/10/2020
Manager Economic Development and Marketing	FPOL	FPOL2010-3	CORPORATE BUSINESS PLAN - QUARTERLY REPORT – JULY TO SEPTEMBER 2020	For information only – no action required	Complete	15/10/2020
Manager Finance	OCM	C2010-3	STATEMENT OF INVESTMENTS – SEPTEMBER 2020	For information only – no action required	Complete	29/10/2020
Manager Finance	OCM	C2010-4	SCHEDULE OF PAYMENTS SEPTEMBER 2020	For information only – no action required	Complete	29/10/2020
Manager Finance	OCM	C2010-2	MONTHLY FINANCIAL REPORT - SEPTEMBER 2020	For information only – no action required	Complete	29/10/2020
Manager Development Approvals	PC	PC2011-11	INFORMATION REPORT – NOVEMBER 2020 1. SCHEDULE OF APPLICATIONS DETERMINED UNDER DELEGATED AUTHORITY 2. UPDATE ON METRO INNER-SOUTH JDAP DETERMINATIONS AND RELEVANT STATE ADMINISTRATIVE TRIBUNAL APPLICATIONS FOR REVIEW	For information only - no action required	Complete	5/11/2020
Manager Governance	OCM	ARMC2011-2	ADDRESSING FINDINGS FROM AUDITS	For information only - no action required	Complete	26/11/2020
Manager Finance	OCM	ARMC2011-7	OVERDUE DEBTORS REPORT AS AT 30 JUNE 2020	For information only - no action required	Complete	26/11/2020
Manager Finance	OCM	ARMC2011-8	PURCHASING POLICY EXEMPTIONS AUGUST TO OCTOBER 2020	For information only - no action required	Complete	26/11/2020
Manager Governance	OCM	ARMC2011-9	INFORMATION REPORT – NOVEMBER 2020 - STATUS REPORT OF COUNCIL MOTIONS – 1 JULY 2020 TO 30 SEPTEMBER 2020 - STATUS REPORT OF AUDIT ACTIONS TO 30 SEPTEMBER 2020 - AUDITS AND REVIEWS – JULY 2018 - CURRENT	For information only - no action required	Complete	26/11/2020
Manager Finance	OCM	C2011-1	MONTHLY FINANCIAL REPORT - OCTOBER 2020	For information only - no action required	Complete	26/11/2020
Manager Finance	OCM	C2011-2	STATEMENT OF INVESTMENTS – OCTOBER 2020	For information only - no action required	Complete	26/11/2020
Manager Finance	OCM	C2011-3	SCHEDULE OF PAYMENTS OCTOBER 2020	For information only - no action required	Complete	26/11/2020
Director City Business	OCM	ARMC2011-10	CONFIDENTIAL REPORT – RISK (EMERGING OR SIGNIFICANT) REPORT NOVEMBER 2020	For information only - no action required	Complete	26/11/2020
Manager Development Approvals	PC	PC2012 – 8	INFORMATION REPORT – DECEMBER 2020 1. SCHEDULE OF APPLICATIONS DETERMINED UNDER DELEGATED AUTHORITY 2. UPDATE ON METRO INNER-SOUTH JDAP DETERMINATIONS AND RELEVANT STATE ADMINISTRATIVE TRIBUNAL APPLICATIONS FOR REVIEW	For information only - no action required	Complete	3/12/2020
Manager Finance	OCM	C2012-10	STATEMENT OF INVESTMENTS – NOVEMBER 2020	For information only - no action required	Complete	10/12/2020
Manager Finance	OCM	C2012-11	SCHEDULE OF PAYMENTS NOVEMBER 2020	For information only - no action required	Complete	10/12/2020
Manager Finance	OCM	C2012-9	MONTHLY FINANCIAL REPORT - NOVEMBER 2020	For information only - no action required	Complete	10/12/2020

STATUS REPORT OF AUDIT ACTIONS TO 31 DECEMBER 2020

ATTACHMENT 1 – Audit actions progress report 31 December 2020

Audit actions progress report 31 December 2020

Systems and Procedures Review - Internal Control (Commenced December 2019)

Audit area	Responsible Officer	Description	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated Completion Date	Status	Actual Completion Date
Separating roles and functions in relation to monetary transactions	Manager Finance	Various financial processes involve checks from multiple employees. This includes payroll, accounts payable runs and petty cash reconciliation. Although the plurality of checks is consistent practice, they are not required in written procedures. We understand the financial team intends to develop a 'knowledge base' by recording the various procedures involved in the City's financial systems in written documents.	Develop written procedures for financial functions including requirements for two or more employees to check off on final documents and outcomes.	Finance will prepare written procedures on the process, checks and authorisation requirements for payments made. The new procedure will be included in the team's knowledge base.	The written payroll processing checklist documents the check reports to be run for each payment run. These reports are sent to 2 authorising officers for review. Once approved the 2 authorising officers approve the EFT file at the bank account. The completed checklist and approvals are saved in the City's document management system for each pay. Written cheque and EFT payment run processes have been completed. These include reports to be prepared for checking before authorisation of the EFT file for loading into the bank account and the process requirement for 2 authorised approvers. The implementation of a knowledge base will be progressed next financial year.	Commencing knowledge base in 20/21 FY	Ongoing	
Reviewing financial control accounts and trial balances	Manager Finance	Reviews of financial control accounts and trial balances are conducted at the end of each month. Reconciliation is completed by designated teams. The budgeting officers will review team budgets with the relevant manager each month. Calendar reminders trigger the monthly reviews. The relevant procedures are not captured in formal documents.	Capture procedures relating to financial control accounts and trial balances in a formal document. This may be included in the 'knowledge base' that the finance team intends to develop.	Finance will prepare written procedures on all end of month processes, control and balance sheet accounts reconciliations and trial balance reconciliation. The new procedures will be included in the team's knowledge base.	Written procedures are in place for end of month financial reporting. Included in this procedure are the following tasks to be completed each month: • reconciliation of balance sheet accounts – procedure includes a full list of each account with the responsible officer and approver • reconciliation of the trial balance • accrual journals to be prepared at end of month • monthly financial reports check list • variance analysis requirements for reporting The implementation of a knowledge base will be progressed next financial year.	Commencing knowledge base in 20/21 FY	Ongoing	
Recording the use of delegations	Manager Governance	Directors are responsible for recording their own use of delegations. Use of delegations is currently recorded in various locations, namely • the CEO's register (for the use of delegations by the CEO); • reports to the council or audit committee; or • miscellaneous locations within the records management system. All delegations instruct relevant employees to record the use of the delegation in the City's record keeping system, in accordance with legislative requirements. No specific registers or documents are identified within these instructions, nor are the mentioned legislative requirements described or cited. The record keeping of exercised delegations is not regularly or formally checked/audited throughout the City.	Conduct an internal review to ensure the use of delegations is being correctly recorded. Include the following in all delegations: - instructions of the required recording process (as per the Act and associated regulations); - the location for recording the use of the delegation.	Agreed, training for delegated officers is being considered for development and following its implementation, an internal review on how different areas are capturing the use of delegation will be undertaken.	A training package for delegated officers is currently being developed. On hold due to staffing availability issues.	31/1/2021	Ongoing	
Review of council and administration Policies	Manager Governance	There is currently no formal periodic review for policies. Instead, policies are expected to be reviewed when issues are identified. It is the responsibility of individual departments to ensure their relevant policies are up to date. The reviewing officer/responsible officer is identified on each policy. Policies are written with the assistance of standardised templates. Some policies had not been correctly completed with some adoption and amendment dates not filled in and template instructions remaining, e.g. Breakout Areas Policy. Although the current system does not involve scheduled reviews, many policies contain review deadlines. Some council policies may have been amended or removed without the approval of council. The new City Document Management Administration Policy (adopted 18 September 2019) describes the requirement for council policies to be approved by Council.	Introduce a periodic City-wide policy review to: - minimise the risk of policies becoming outdated; - ensure consistency of formatting between policies; and - promote culture where employees bring all proposed policy amendments to the attention of council.	The Governance Team, are planning a city-wide review of policy to be undertaken within the next 12 – 18 months.	The policy review has commenced, and is currently in the first stage. Initial meetings with managers have been completed and the manager responsibility for each of the policies has been re-allocated where required. The governance team have grouped the policies into business unit, and the next stage is to review each group of policies, one business unit at a time. On hold due to staffing availability issues.	1/10/2021	Ongoing	
ARMC Terms of Reference review	Manager Governance	The Council Committees and Groups Register is reviewed every two years. The Governance Team is responsible for this review. Consideration is given to the relevant guidelines provided by the Department of Local Government Sport and Cultural Industries.	Update the ARMC Terms of Reference to include a clause identifying that the Terms of Reference will be reviewed at least once every two years.	Agreed, Governance will update the Terms of Reference.	The Governance team have reviewed the Terms of Reference(TOR) for the Audit and Risk Management Committee(ARMC) and the updated TOR was adopted at the Ordinary Meeting of Council held on 25 November 2020.	26/11/2020	Complete	26/11/2020
Liaising with external auditors	Manager Governance	The Office of the Auditor General (OAG) is responsible for external audits at the City. The external auditors conduct entrance and exit meetings with the Chair of the Audit Committee, the Mayor, the CEO and a representative from the City's financial auditors. No other formal contact is generally made with the external auditor. The City's employees have been given the impression by the OAG that OAG staff are contactable if required.	Update the ARMC Terms of Reference to ensure it is consistent with any contemporary requirements of the OAG, including entrance and exit meetings.	Agreed, Governance will update the Terms of Reference.	The Governance team have reviewed the Terms of Reference(TOR) for the Audit and Risk Management Committee(ARMC) and the updated TOR was adopted at the Ordinary Meeting of Council held on 25 November 2020.	26/11/2020	Complete	26/11/2020

Audit area	Responsible Officer	Description	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated Completion Date	Status	Actual Completion Date
Liaising with legal advisers	Manager Governance	The City conducted a tendering process with the WALGA preferred suppliers to select a panel of three law firms. The City regularly liaises with its legal service providers as there are often various legal matters in progress at any one time. Employees must seek authorisation from their relevant director before contacting legal advisers. This process has not been formally captured in a written document. There is currently no formal document providing guidance in regard to when and how employees should contact legal advisers and which service provider to contact for particular types of matters.	Introduce a policy or procedure providing guidance to employees in regard to when to contact legal advisers and which legal service provider to contact, according to the type of matter.	Agreed, the Governance Team are considering the development of a procedure in regard to when to contact legal advisers and which legal service provider to contact, according to the type of matter. The City currently has a register that captures legal advice received to avoid duplication and extra costs.	The development of a procedure on seeking legal advice has commenced	31/3/2021	Ongoing	
Records management training	Manager Information Technology	All employees are required to undergo records management system training within a week of their initial induction. Refresher training for the document management system is offered to employees. Employees are made aware of the Records Management Plan and where to find it.	Conduct internal records management audits to monitor the effectiveness of record management training.	Audits for internal records management will be put in place once the new system has gone live, results will be published to managers for analysis and improvement developments. Records will be kept	Training is agile and ongoing. Compulsory training is provided to new staff, refresher courses provided to existing staff with training materials being targeted to the role being performed. M-Files training is being added to the City's Learning Management System so that this can be better tracked and reported on.	30/6/2021	Ongoing	
Checking employee qualifications	Director People and Culture	Integrity checks during the recruitment process include sighting all required qualifications. A copy of each required qualification is kept in the employee's electronic file. Licences and other qualifications which expire are routinely checked. This process is completed manually. There are currently no electronic reminders to manage such checks. We understand that a new system will be implemented in early 2020. This system will send electronic reminders when licences are about to expire.	Monitor the new system, once in place, to ensure that electronic reminders for licence expiry dates are properly implemented.	This is a feature of the new HRIS system. This will be monitored once in place.	The new HRIS is in testing phase and is yet to be finalised – expecting this to be early in 2021.	31/3/2021	Ongoing	
Inductions and On-Boarding	Director People and Culture	All new employees complete an online induction programme prior to their first day at the City. The online induction requires employees to sign an electronic-form to acknowledge they have read and understood the information provided. The electronic-forms are saved in the relevant employee's electronic file. All new employees complete a site-specific induction on their first day at the City. Each site has its own induction checklist. The checklist is not checked by the HR team after completion. Council and administrative policies, including purchasing policies are included in inductions. Delegations are not included in the induction or handover processes unless the role specifically requires actions under delegated authority.	Review the new online induction programme annually to ensure it remains contemporary and effective. Introduce a requirement for forms to be signed following site specific inductions acknowledging that the employee has received and understood the information provided.	Accepted	The new HRIS is in testing phase and is yet to be finalised – expecting this to be early in 2021. These functions are all part of that system. The online induction parts of the process are signed off when completed via an e form saved in the employee e file.	31/3/2021	Ongoing	
Acquisition and disposal of assets	Procurement Team Leader	Acquisition and disposal of assets is considered in the annual budget. Follows a similar process as procurement. One-on-one purchasing training is available to employees. Relevant policies and delegations are available on the intranet. Capital expenditure is carefully monitored and checked by the finance team. Elected members receive training relating to asset management and ratios.	Develop a written procedure for acquisition and disposal of assets.	This is underway and is anticipated to be complete by the end of quarter 1, 2020. Manager Finance: Finance will prepare written procedures on the financial process for acquisition (capitalisation) and disposal of assets. An e-form will be developed to simplify the request and authorisation of asset disposal. The new procedure will be included in the team's knowledge base.	The COVID-19 impact and the audits by the Office of Auditor General and Regulation 17 review have delayed this implementation. This should be complete by end Q4, 2020. Requires input from Manager Finance - revised completion date 31/03/2021 due to current absence	31/12/2020	Ongoing	
Quality and compliance control of tenders released by the City.	Procurement Team Leader	The Purchasing Policy (adopted February 2019) was based on the WALGA model policy. The policy is often reviewed, although not on a regular basis. During reviews, legislative obligations are considered. The procurement practices are decentralised, with all employees completing their procurements in line with their department and role. However, all RFTs and RFQs are checked by the Procurement team before being released to the market. This check involves providing evidence that all requirements of the process have been correctly completed. There is no written procedure for this internal auditing procedure.	Introduce a written procedure or checklist for the Procurement team to follow when checking tenders before they are released to the market.	The procurement team is to formalise a pre-release checklist for RFT and RFQ. Note the majority of items checked before release to market are on the 'Authority to Tender' eForm, which is required to be completed before the tender is released to market.	The eForm checklist for RFQ and RFT that was due to be implemented in June/July 2020 has been delayed due to COVID-19 impacts. As there is a process in place to check RFQs and RFTs before being released to market, we will continue to follow that process until the eForm is created, which will formalise the process. 4 Jan 2021 Internal form/checklist in place for use by Procurement Team	31/12/2020	Complete	7/12/2020
Risk assessments	Procurement Team Leader	The City has both a risk management policy and risk management framework. Risks assessments are mostly conducted for major projects and events. The risk management policy/procedure is not widely known by officers and not consistently used between teams/departments. The Events Management team has developed their own Risk Management Policy with the assistance of the Community Safety and Risk Officer. All events must have a comprehensive risk management plan and emergency management plan to be approved by the Events Management team. This policy is in line with and references the Council Risk Management Policy.	Implement processes to reinforce awareness of risk management procedures with relevant employees. Ensure all teams are managing risk in a manner which is consistent with the risk management policy and risk management framework.	We will work with Management Team to identify employees who require knowledge of Risk Policy and Procedure. We will implement workshops to improve awareness and understanding of the Framework and Policy	A risk management group has commenced meeting to determine the best way of implementing the risk assessment process in the City. Remains ongoing	30/6/2021	Ongoing	

Audit area	Responsible Officer	Description	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated Completion Date	Status	Actual Completion Date
Maintaining risk registers	Procurement Team Leader	The City maintains a corporate risk register. Other risk registers are captured within individual project management documents. The risk registers are therefore not standardised or centralised.	Develop a framework which enables cross referencing between risk registers to ensure all risks are adequately recorded, e.g. a list of all registers.	Will work with Management Team to identify all Risk registers across the City and put together a list of all Registers (Consider storing them all in the same location in the DMS). Risks identified across a number of Registers will be brought to ELT attention for action.	Risks are regularly discussed at ELT. Emerging risks are reported to Audit and Risk Committee on a quarterly basis. Risk Registers are being brought together in the Corporate Risk register and discussed by the Risk Management Group. Remains ongoing	31/3/2021	Ongoing	
Risk management training	Procurement Team Leader	Risk management is not included in standard induction programmes. Risk management training is offered to employees involved in events and project management.	Review the risk assessment training programme to ensure all employees are aware of risk management processes. Include risk management training as part of the induction process where appropriate.	Will review and advise Management Team on best way to implement this.	Remains ongoing .This item is still being considered by the Risk Management Group	30/6/2021	Ongoing	

**Systems and Procedures Review - Risk Management
(Commenced September 2020)**

Audit area	Responsible Officer	Description	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated Completion Date	Status	Actual Completion Date
Risk Management Framework	Procurement Team Leader	<p>The City's Risk Management Framework is often based on relevant Australian standards (ISO 31000:2009 Risk Management – Principles and Guidelines). The City has a Risk Management Policy (September 2017) and Risk Management Guidelines (September 2017). The Risk Management Policy was due to be reviewed in September 2019. This review is therefore overdue. The Risk Management Guidelines contain information regarding risk reporting including relevant procedures and templates. Minimal responsibility has been assigned to officers in regard to risk management. This responsibility is managed by the team managers instead.</p> <p>Risks (from risk reports) are reviewed at a management level annually as a part of the business planning process. All managers are responsible for including assessments of risks within their team's environment in the Business Plan. The City's Risk Register and guidelines assist in this process. Managers are reminded of this process during Management Team meetings. The Executive Team also contribute to and/or review the Business Plan.</p> <p>The Business Plan is referred to during the budgeting process. This includes considering the costs required to mitigate risk, according to the risk register. Risk is a key part of the Project Prioritisation Framework, which is used to determine priorities in relation to funding through the City's budget. There are currently some risks identified in the register that have not been allocated suitable (or any) budgetary funds to remediate.</p> <p>Reviews and audits relating to risk management are presented to the Audit and Risk Committee. The recommendation from the committee is then sent to Council for adoption.</p>	Review the Risk Management Policy and Guidelines.	<p>City reviewed current Policy and Guidelines in August and September 2020. The responsibilities and reporting process was clarified. Risk is now a monthly topic at Management Team meetings and Executive Leadership Team meetings.</p> <p>Training with Managers and ELT took place in August 2020 to further clarify and understand the risk process and responsibilities.</p> <p>Reviews of risk remain on-going.</p>	<p>4 Jan 2021 Review Complete.</p>	30/09/2020	Complete	NA
Risk reporting	Procurement Team Leader	<p>The Team Leader of Procurement maintains a central Risk Register. Officers are expected to notify their relevant manager of any risks or potential risks they are aware of, so the risk can be formally dealt with. Managers are responsible for formally reporting risks and adding them to the Risk Register.</p> <p>A report regarding the risk register is prepared for the Executive Leadership Team every month. This includes all risk reports received within the past month.</p> <p>Managers receive annual training. Other employees are advised during inductions to notify managers of potential risk management issues, incidents and near misses. In addition, all employees are encouraged during inductions to report occupational safety and health hazards through OHS Incident Reporting Forms (2019). This form is also used for incident reporting. All reported hazards/incidents are investigated.</p> <p>Potential hazards may also be posted onto the coffee page (the City's intranet), as a way to notify all employees of a current hazard.</p>	<p>Ensure managers receive risk management training (including risk reporting) as a part of their regular training regime.</p> <p>Conduct basic risk reporting training for relevant officers.</p> <p>Maintain employee awareness of the risk reporting process through regular reminders at team meetings.</p>	<p>Training with Managers and ELT took place in August 2020 to further clarify and understand the risk process and responsibilities.</p> <p>City aims to roll out basic training across all levels in early 2021.</p>	<p>Training for remaining employees under review by Risk Management Group</p> <p>Remains ongoing</p>	30/6/2021	Ongoing	
Incident Reports	Procurement Team Leader	<p>Community Safety Incident Forms are available on the City's website and the front office. Customer Service officers use the Incident Reports to complete Customer Request Management forms (CRMs). The CRM is then sent to the relevant employees or team to rectify and/or deal with the incident. For example, if the incident involves a potential claim or insurance matter, the report is directed to the Insurance Team. Written procedures for this process can be found in the Customer Service Knowledge Base, including the Insurance Handling Procedure.</p> <p>If necessary, the employee responding to the CRM will contact the individual who completed the incident report for further information. For example the insurance team will often contact the individual to request photographs. These conversations are guided by experience rather than an internal procedure or form.</p> <p>Incidents may be discussed within relevant teams for the purpose of improvement at the discretion of the team manager.</p>	<p>Create a form for the Insurance Team to complete when gathering information for a potential claim or insurance matter. This will assist employees in ensuring all necessary information is collected.</p> <p>Formalise the procedure of discussing incidents within relevant teams in order to establish learnings. For instance, this may be included as a heading/topic in team meeting agenda templates.</p> <p>Include adoption and review dates in the Insurance Handling Process document. Ensure regular reviews are conducted, include relevant contact details.</p>	<p>E-form for registering possible insurance incidents being developed. This will then be raised with ELT and Managers and then raised at team meetings.</p> <p>Process to be undertaken in Q1, 2021. Estimated completion – 30/3/2021</p>	<p>Remains ongoing .Eform currently being developed</p>	30/3/2021	Ongoing	
Insurance coverage	Procurement Team Leader	<p>The City meets with its insurance provider (LGIS) annually. There are no formal agendas for these meetings. Generally, the meeting addresses the City's current insurance coverage, anticipated events, recent learnings from other local governments, any additional coverage the City may like and an insurance coverage recommendation for the next 12 months.</p> <p>The recommendation is reviewed and decided upon by an internal team (Manager of Finance, Director of City Business, Procurement Team Leader and Procurement Officer Assets and Insurance).</p> <p>The City does not have a council policy on managing the City's insurances. Although it is a reasonably centralised process, other departments may not be aware of the formal processes.</p>	<p>Conduct an internal meeting prior to meeting with LGIS to identify questions or concerns to discuss at the meeting with LGIS. Prepare a simple agenda or list of questions/concerns to discuss for the meeting with LGIS.</p> <p>Develop an insurance management policy or procedure to guide employees when conducting the annual insurance meeting and deciding on an appropriate insurance cover. This policy would also be beneficial for ensuring all departments are aware of the formal process and act accordingly.</p>	<p>This remains a work in progress. Aiming for completion Q2, 2021 Estimated completion – 30/6/2021</p>	<p>Remains ongoing</p>	30/6/2021	Ongoing	

Audit area	Responsible Officer	Description	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated Completion Date	Status	Actual Completion Date
Management of hazardous substances and dangerous goods	Manager People and Culture	<p>The Chemical Management Procedure (August 2019) describes the process for managing hazardous chemicals in order to minimise the risk of potential exposure to the City's employees and contractors. This procedure is applicable for all of the City's sites and premises. The Occupational Safety and Health Representatives are trained to undertake Chemical Risk Assessments for hazardous chemicals, which are reviewed and approved by the Senior Safety Officer. The Chemical Management Procedure includes details regarding Chemical Registers. Chemical Registers are kept for all sites that contain hazardous chemicals. Details of chemicals used by the City are managed by ChemWatch, a web based chemical information database.</p> <p>The Chemical Management Procedure is due to be reviewed in January 2021 in order to transition to the Globally Harmonized System of Classification and Labelling of Chemicals (GHS) Revision 7.</p> <p>We understand from the City's employees that the City undertakes audits on dangerous goods and hazardous chemicals as a part of the Hazard Inspection Program. The frequency of inspections is based on the risks associated with the individual sites and recorded in an annual schedule. The Hazard Inspection Check List is used to guide employees conducting hazard inspections.</p> <p>The City has an Operational Hazard Identification and Risk Management Procedure (September 2019) which intends to describe hazard identification and risk management processes for City's operational sites.</p> <p>Dangerous goods and hazardous substances are addressed during safety inductions for the Operation Centre.</p> <p>The Parks Team has a data base of Standard Operational Procedures to assist employees. These procedures should be reviewed annually or as incidents occur. However, some Standard Operational Procedures are overdue to be reviewed. Where relevant, employees must complete their Chemical Handling Certifications. A Site Management Plan for the chemical storage space has been completed.</p> <p>Material Safety Datasheets for all chemical substances used by the City are kept on file and/or ChemWatch. The Material Safety Datasheet is assessed prior to ordering new chemical substances. Over the past two years the Parks team has been in the process of reviewing all chemicals used by the City with the intention of reducing the use of toxic chemicals and potential risk to operators.</p> <p>When using chemicals, employees are directed to use public awareness signage. Where practical or necessary, the community is notified of chemical usage in public areas. However, it can be challenging to notify the community of correct timing etc. when the use of chemicals is depended on uncontrollable factors such as weather.</p>	Ensure all Standard Operational Procedures are reviewed annually.	Management of hazardous substances and dangerous goods is a corporate document that is reviewed bi-annually.	SOP's are reviewed on a continual basis. Each business unit within Infrastructure Directorate reviews an SOP at every fortnightly tool-box meeting. As an additional measure, SOP's are reviewed when equipment is changed and also in response to any incident, should there be one.	NA	Complete	NA
Information technology (IT) security protocols	Manager Information Technology	<p>The City has an Information Security Risk Management Plan (October 2018) which governs how information at the City is secured against unauthorised access, loss, and theft. The Information Security Risk Management Plan should be reviewed annually and is currently overdue for a review.</p> <p>The City uses "next gen" cloud based firewalls. The security data base is continuously updated from the cloud system. Security software is also installed on all of the City's devices. Security updates for devices have been automated.</p> <p>The City subscribes to IT maintenance support on an annual basis.</p> <p>Software applications are utilised by the City to conduct basic audits of IT systems and hardware. Emails are sent by the software to notify the City of potential issues.</p> <p>The City undergoes a 'penetration test' annually, in which a third party attempts to hack into the City's IT system. This test is intended to identify any weak points in the City's IT security mechanisms which can then be rectified.</p> <p>A learning engine that identifies the safety of particular emails/links has been built into the City's email system. Suspicious emails are held before going to the user. Artificial intelligence technology has also been built into the email system which learns and considers writing styles of employees. The system is able to detect fraudulent emails.</p> <p>The IT Team does not maintain a compliance calendar or checklist system to ensure all IT security protocols are addressed on a regular basis. The knowledge and experience of the IT Team ensures correct protocols are undertaken at the correct times.</p> <p>The above protocols and the Information Security Risk Management Plan (October 2018) apply to all of the City's external sites as well as the main office. The external sites are connected to the main office via fibre optic cabling.</p>	<p>Introduce a checklist or compliance calendar to assist the IT Team (and future team members) in ensuring all IT security protocols are undertaken at the correct times.</p> <p>Ensure the Information Security Risk Management Plan is reviewed annually.</p>	<p>The City's IT team will review the introduction of a compliance calendar.</p> <p>The Information Security Risk Management Plan is currently being reviewed and updated. Completion scheduled for November 2020.</p> <p>Estimated completion – 30/11/2020</p>	The City's IT Team are currently scheduling the various reviews as a result of this audit. The information security risk management plan has an updated estimated completion date of March 2021.	30/11/2020	Ongoing	
IT security policy and standards	Manager Information Technology	The City does not have a Security Policy. Instead, the IT team refers to ISO27001 to ensure IT security protocols meet an objective standard.	Develop an IT Security Policy (and accompanying procedural documents) to capture relevant IT security practices.	The City's IT team are currently working to develop an IT Security policy as part of a project to review all Cybersecurity and Disaster Recovery documentation. To be completed within the 20/21 FY. Estimated completion – 30/6/2021		30/6/2021		
IT Disaster Recovery Plan	Manager Information Technology	The City has an IT Disaster Recovery Plan (October 2018) which provides direction on how the City's systems will be recovered in the event of an IT disaster. The IT Disaster Recovery Plan should be reviewed annually and is currently overdue for a review. Three copies of the City's data exists at any one time. Data backups are undertaken daily. If there is an issue in completing backups, the City will be notified. The backup system is used occasionally to retrieve lost files upon request from the City's employees. Undertaking these data recovery tasks provides regular checks that the data protection protocols are effective.	Ensure the IT Disaster Recovery Plan is reviewed annually. Consider cross referencing the IT Disaster Recovery Plan and the Business Continuity Plan.	The City's IT team are currently reviewing the IT DRP as part of a project to review all Cybersecurity and Disaster Recovery documentation. To be completed within the 20/21 FY. Estimated completion – 30/6/2021		30/6/2021		
Communicating IT changes to employees	Manager Information Technology	The IT Change Advisory Board is comprised of one representative member from each of the City's team. The board is consulted on all software changes.	Ensure there is a formal procedure in place to guide employees on the method of considering and safely introducing new software.	The City's IT Team will review its existing change procedure for selecting and implementing new software.				
Occupational safety and health framework	Manager People and Culture	The City has an Occupational Health and Safety Management Direction (October 2015). This management direction was due to be reviewed in 2017. An independent Occupational safety and health audit is completed every two years. We understand from conversations with the City's employees that the Occupational Health and Safety Management Direction is used alongside the City's Occupational Safety and Health Plan. The City uses the Local Government Insurance Scheme Provisions (as recommended by LGIS) as a baseline for Occupational Safety and health standards.	Review the Occupational Health and Safety Management Direction. (We understand from the City's employees that the City intends to replace the Management Direction with a new policy once the Work Health and Safety Act 2020 (WA) comes into effect)	Agreed. Estimated completion – 31/12/2020	The new Act has not been formally proclaimed as yet. As a consequence The City cannot update its OHS policy until that takes place. Formal proclamation date unknown but not expected before June 2021. Estimated completion - July 2021	31/12/2020	Ongoing	

Audit area	Responsible Officer	Description	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated Completion Date	Status	Actual Completion Date
Occupational safety and health management	Manager People and Culture	Risk assessments are completed at various stages of works and projects. For example, prior to making purchases, prior to commencing works and post incidents. Occupational safety and health incidents are reported and attended to as described in the 'risk reporting' column. During Toolbox Meetings, incidents are described and the City's responses to the incidents are identified. A monthly report is presented to the Executive Leadership Team. This collates all accidents and/or incidents over the relevant month including medical incidents/appointments, first aid and property damage. Relevant incidents are identified in team meetings. Monthly team meetings may also include reminders of occupational safety and health obligations from time to time. Significant incidents are reported to the CEO. New occupational safety and health issues are posted onto the City's coffee page (intranet) to increase employee awareness. A HSE Qualitative Risk Analysis (Level 2) (April 2018) has been completed for the Community Safety Team functions. The risk analysis aims to identify all potential hazards associated with the Community Safety officer position and ensure adequate controls are implemented to reduce all risks to be as low as reasonably possible. The HSE Qualitative Risk Analysis (Level 2) for the Community Safety Team should be reviewed annually.	Formalise the procedure of discussing incidents within relevant teams in order to establish learnings. For instance, this may be included as a heading/topic in team meeting agenda templates.	Mechanism for this is the City's Safety Committee.	Committee meets on a monthly basis. The Committee discusses incidents as they arise and risk management learnings. Such learnings are shared back at the local level by the relevant Committee member. Risk management also forms a key part of daily pre-start meetings in high-risk areas, eg depot employees.	NA	Complete	NA
Project reviews and physical inspections	Manager Asset Management	On a monthly basis, project management officers meet with Business Unit Managers and Project Managers to review each project. Project Managers are responsible for physical inspections of all projects. The frequency of inspections varies for individual projects and is determined by the Project Manager. Once a project is complete, the expectations of the project are reviewed and a handover to the Asset Team occurs.	Consider formalising the inspection process to ensure all projects are regularly visited. This could mean defining the frequency of inspections in the Project Management Plan at the commencement of each project.	The City will review the Project Management Framework and include guidance on project inspection frequency. Estimated completion - 30/6/2021	No progress, still scheduled for later this year.	30/6/2021	Ongoing	
Identifying and minimising misconduct, fraud and theft	Procurement Team Leader	All employees are trained on and must abide by the Code of Conduct. Employees must sign off on completing the training session. We understand from interviews with the City's employees that the Code of Conduct is due for review, which will likely result in refresher training. Where an employee breaches the Code of Conduct, the Grievance Policy (March 2018) provides relevant internal procedures, including an escalation process. The Transaction Card Policy and Procedure (Civic Legal sighted a version marked 'draft') and the Use of Corporate and Purchasing Cards Procedure (February 2012) identifies acceptable use of cards. The City's internal audits do not specifically address the issues of misconduct, fraud and theft. Instead, the City relies on employees reporting suspicious activities. As addressed in employee inductions and through the principles of the Code of Conduct, all employees are encouraged to report suspicious, unusual and/or inappropriate behaviour. The procedure for reporting serious misconduct is dictated by the Corruption and Crime Commission (CCC) and Public Sector Commission, rather than an internal procedural document. Links to the CCC and Public Sector Commission are provided on the City's Coffee page (the City's intranet). The City highlighted an intention to introduce 'mini audits' to address specific or localised topics.	Civic Legal understands the City intends to introduce 'mini audits' to address specific or localised topics. Ensure misconduct, fraud and theft are addressed in these 'mini audits'. Provide training sessions on misconduct, fraud and theft to relevant employees on an annual basis. These sessions could include the relevant sections of the Code of Conduct, the Grievance Policy and making a report to the CCC or Public Information Commissioner. Review the Use of Corporate and Purchasing Cards Procedure. If not done already, finalise and adopt the Transaction Card Policy and Procedure. Ensure the adoption date (and review dates) is recorded on the document.	Transaction Card Policy and Procedure with ELT for adoption / discussion. Fraud and misconduct is covered in a number of policies and procedures organisation wide. Further reminders and training is required in this area. Estimated completion – 31/12/2020	Transaction Card Procedure and Policy adopted by ELT in November 20. Fraud and Misconduct Training under review – estimated completion 30 June 2021	30/6/2021	Ongoing	
Contract management	Procurement Team Leader	Team leaders and Supervisors help to manage contracts which do not fall under the definition of a project. These contracts are managed in accordance with relevant KPIs rather than in accordance with a management plan. There are no written procedures to provide guidance to those employees who are managing contracts. Regular meetings are held to measure contractor's achievements against KPIs. Formal records are not always kept from these meetings. There are no procedural requirements to record physical contract inspections. City employees are not specifically trained to undertake contract performance management assessments. The City maintains a contract register which is reviewed on a monthly basis. We understand from discussions with the City's employees that the City maintains a Register for Continued Improvement which captures 'lessons learnt' and is referred to in order to improve contracts.	Consider adopting a Contract Management Plan template document to assist employees who are managing contracts. This should include formalising the contract inspection process to ensure contractual terms are being performed, and KPI review meetings. Consider offering specific training to relevant employees undertaking contract performance/assessment reviews.	A Contract Management Plan template is under development to be available alongside the recently adopted Contract Procedures. Estimated completion - 31/12/2020	Contract Management Plan under review – draft issued in November 20 with review taking place early Jan 21. Contract Procedures adopted August 20 and available on CoFI. Training with relevant users under way since mid-December 20. Estimated completion June 21	30/6/2021	Ongoing	
Communicating risk to employees	Procurement Team Leader	There is currently no meeting agenda template for internal meetings. Meetings are managed by the relevant manager. Risk management issues are therefore brought to team meetings at the discretion of the manager. An internal meeting agenda template is currently being developed.	Ensure 'risk management' is included as a heading in the new internal meeting agenda template.	The City considered developing an internal template for meetings, however this is no longer a consideration as teams may manage their own meetings. Should this position be reconsidered, the proposal to include 'risk management' will also be considered.	Remains ongoing	30/6/2021	Ongoing	
Communicating risk to councillors	Manager Governance	'Risk management implications' are currently not included in meeting agenda templates. Risk management issues can be raised by the reporting officer in other sections of the report including 'legal implications' and 'financial implications'.	Amend the meeting agenda template to include 'Risk Management Implications' as a heading.	Risk management is being assessed in a broader context for the City and this suggested action may be applied as part of that process	This action is not considered a priority and may be undertaken in a broader context of review in this area.		Complete	16/12/2020
Councillor risk management training	Procurement Team Leader	General training is offered to all councillors. Each councillor is allocated a budget for training each year. Risk management training, including corporate risk, is not mandatory for councillors.	Include training for 'understanding risk' in a Councillor Training Policy.	Risk management is being assessed in a broader context for the City and councillor training will be implemented as part of that process	A Risk Management workshop is scheduled for Elected Members to attend in February/March 2021, where ongoing consideration of training will also be reviewed.	31/3/2021	Ongoing	
Communicating risk to stakeholders	Procurement Team Leader	The events team are developing a Risk Management Policy for all events and functions. The City's employees meet with lessees of the City's properties for annual (or twice annual) inspections. This addresses risk management factors including maintenance, fire management and building requirements.	Complete and implement a Risk Management Policy that encompasses communicating risk to stakeholders for all events and functions.	Events Teams working on this.	Remains ongoing	30/6/2021	Ongoing	

Audit area	Responsible Officer	Description	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated Completion Date	Status	Actual Completion Date
Inductions and on-boarding	Manager People and Culture	Inductions are tailored for individual roles by the relevant recruitment officer. All inductions address occupational safety and health. All mandatory training must be completed within three months at the City. Mandatory training sessions include the Code of Conduct, m-files, and the Staff Supervision and Achievement (SSA) process. Forms must be completed to acknowledge the completion of the mandatory training sessions. The People and Culture Team will follow up with those employees who have not completed the relevant sessions. Organisation inductions, in which the executive team meet with all new employees, are conducted quarterly.	Ensure managers sign off on tailor made inductions for their team members.	P&C to develop an eForm checklist. Estimated completion – 31/12/2020	This action has been delayed. New Recruitment Officer commenced 6 Jan 2021. Estimated completion - March 2021	31/12/2020	Ongoing	
Claims and litigation	Manager Governance	The City has comprehensive delegations for dealing with matters that require the City to take action against a party not complying with legislation (e.g. parking, building or planning). However, there are no written procedures in place for dealing with claims or potential litigious matters against the City. When the City receives a threat of potential litigation, the City seeks advice from its insurer. If necessary, legal advice is sought from the relevant law firm via the City's panel of law firms. A policy is currently under development for seeking legal advice. We understand from discussions with the City's employees that the customer service team has procedures in place to assist the customer service employees in ensuring all claims or potential litigious matters are sent to the relevant manager (e.g. The Insurance Handling Process and Customer Service Guidelines). Officers are generally encouraged to consult their supervisor in regard to any contentious communications.	Ensure employees are regularly reminded about how to deal with potential litigious matters during team meetings, e.g. do not respond to contentious communications and instead bring the matter to the attention of their supervisor.	This is actioned within the customer service training	NA	NA	Complete	NA
Role descriptions	Manager People and Culture	Role descriptions include required qualifications and occupational safety and health requirements of each role. Specific risk management requirements are not included in all management role descriptions. Previously, role descriptions were reviewed when a role became available for recruitment. This meant the roles held by long serving employees could be outdated. All role descriptions are currently being reviewed by the People and Culture Team.	Specify risk management requirements in manager/ supervisor role descriptions, and others where warranted.	Agreed where applicable. Estimated completion – 31/12/2020	This action has been delayed. All position descriptions being reviewed as vacancies arise. Standard wording for manager/supervisor role descriptions has been agreed. Estimated completion - March 2021.	31/12/2020	Ongoing	
Performance reviews	Manager People and Culture	The SSA program includes goal setting. The agreed goals/objectives are individualised for each employee and may refer to risk management strategies for relevant roles (e.g. managers).	Encourage relevant employees to include goals/objectives in their SSA program which relates to risk management strategy.	Agreed. Estimated completion – 31/12/2020	Risk management goal setting now part of SSA training.	31/12/2020	Complete	31/12/2020
Business Continuity Plan		The City's Business Continuity Plan (August 2018) focuses on the City's most critical services and can be found in the document management system. The City's Business Continuity Plan should be reviewed annually, as specified in the document. The Business Continuity Plan was released in August 2018 and has not since been updated. The document currently contains names of employees who no longer work for the City. The Business Incident Management Plan (August 2018) is used in conjunction with the Local Emergency Management Plan and the Business Continuity Plan. The Business Incident Management Plan should be reviewed annually. It was last updated in August 2018. We understand from interviews with the City's employees that a review of the City's business continuity management was conducted in 2018 by an external consultant. This review is summarised in the Business Impact Analysis. The Business Impact Analysis should be reviewed and updated annually. There have recently been restructures to teams whose work relates to business continuity management. It is not currently clear which employee or team is now responsible for the Business Continuity Plan. The Business Continuity Plan is rarely required to be used. The document is therefore, rarely tested. COVID-19 provided the City with an opportunity to test and update the Plan. The Disaster Recovery Plan is an Appendix to the Record Keeping Plan. The document does not contain the relevant adoption/approval dates or review dates.	Set a calendar reminder to trigger an annual review of the Business Continuity Plan, the Business Incident Management Plan and the Business Impact Analysis. Ensure all personnel mentioned in the documents are up to date during the annual review. Identify in the Business Continuity Plan who is responsible for the document. Ensure the City completes formal handovers of key documents during team restructures. Include the adoption/approval and review dates in the Disaster Recovery Plan (Appendix to the Record Keeping Plan).	The BCP will be included in the Risk function of the organisation. The City is currently reviewing how risk will be managed and structured in the organisation. The current plan is to implement a new Risk approach within the organisation structure in January 2021. Estimated completion – 31/1/2021		31/1/2021		
Building access and security	Manager Facilities and Environmental Management	Most operational buildings have card access mechanisms. Others have reception employees at the entrances. Access cards are provided to employees during their induction. Cards provided during inductions contain basic/standard access permissions. In order to have access to specialist areas or late/after-hours access to buildings, the relevant manager must submit a request. The Facilities Manager then has to approve the request and apply additional/higher level access permissions to the card. This procedure has not been captured in a formal document. Alarm systems are in place for the City's buildings. The Administration building's alarm is set on a timer while others are key pad operated. The Central Monitoring Team will contact the relevant managers when alarms are not set on time. This requirement is specified in the contract for the Central Monitoring Team. Duress alarms are checked internally on a monthly basis and security alarms are checked every six months.	Introduce a written procedure for requesting and accepting changes to security access cards.	An e-form is currently being prepared to control changes to security access cards. Changes will only be undertaken when the relevant manager has given approval on the form.	The eform has been prepared and is due to be hosted on the City's intranet.	1/3/2021	Ongoing	
Emergency Evacuation procedures	Manager Facilities and Environmental Management	The City has Emergency Evacuation Plans for all of its occupiable buildings. The Emergency Evacuation Plans are generally tested once every six months. A review is undertaken after each emergency evacuation exercise. The review notes observations including the time achieved and general understanding of participating employees. Facility managers meet to discuss the emergency evacuation exercise review. Evacuation maps are found on the walls next to relevant exits in the City's buildings. The maps are checked periodically to ensure they have not been removed. Maps are updated when building works are completed. The City works with tenants of their leased properties to ensure they are compliant with relevant emergency and safety standards.	Develop a procedure to ensure emergency evacuation exercises are regularly conducted at occupied City buildings. Formalise the procedure for working with tenants to ensure leased buildings meet relevant standards for evacuation protocols.	Emergency evacuation plans will be put in place to all buildings occupied by council staff. The Asset and Property officer will check tenants are undertaking their own procedures in leased buildings.	One remaining evacuation plan to complete for the Meeting Place and then all occupied buildings will have an evacuation plan. The Asset Property Officer visits leased annually to undertake checks which includes evacuation procedures. (the 2 higher risk buildings – Fremantle Markets and the Backpackers are visited 6 monthly)	1/3/2021	Ongoing	

Audit area	Responsible Officer	Description	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated Completion Date	Status	Actual Completion Date
COVID-19 management	Manager Strategic Planning	<p>The COVID-19 response was driven by state and national government guidelines, rather than the City's internal procedures or frameworks.</p> <p>The Community Consultation Team has been carefully managing external meetings by communicating the City's requirements before the meeting is held (e.g. maintaining 1.5m physical distance, provision of hand sanitiser). Where possible, external meetings have been postponed or conducted via Microsoft Teams.</p> <p>All buildings that were closed during the early phases of COVID-19 have been re-opened with COVID-19 Management Plans, including additional training requirements and safety controls.</p>	Continue regular monitoring of introduced COVID-19 protocols until community safety can be confirmed (e.g. global inoculation of vaccine).	<p>City requirements for City-organised meetings communicated by responsible officer.</p> <p>Public Health Emergency Operation Centre (PHEOC) Bulletins monitored & circulated to:</p> <ul style="list-style-type: none"> •All Health Officers, •Executive Leadership, •Management Team •Events Coordinator, •Leisure Centre Manager, •Facilities Manager, •Senior People & Culture Project Officer (Workforce Services) 	<p>Safe WA registration protocol and infrastructure rolled out 2/12/20.</p> <p>Venue restrictions & management maintained as per Guidelines.</p> <p>Covid Event Plans requested where required.</p> <p>Internal etiquette reminders periodically circulated.</p> <p>Vaccines being rolled out in UK and USA.</p>	Unknown	Ongoing	

Regulation of Consumer Food Safety by Local Government Entities (Office of the Auditor General)
(Commenced June 2020)

Audit area	Responsible Team	Risk rating (if applicable)	Finding	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated completion date	Status	Actual completion date
Consumer Food Safety	Compliance and Health	NA	<p>Nearly 30% of high and medium risk food business inspections were overdue. The 2 LG entities had not completed many required inspections. We found 214 of 741 high and medium risk food business inspections were overdue as at November 2019. When inspections are not completed according to risk, the LG entities are not checking that businesses comply with the Standards.</p> <p>As LG entities did not have their own documented policy or approach to inspection frequency, we assessed inspections against the ANZFA starting point, the inspection frequency after a business is classified. Our analysis of high and medium risk business inspections (Figure 2) found:</p> <ul style="list-style-type: none"> - LG entity 1 had 48% of high and 33% of medium risk businesses overdue for inspection. On average, they were overdue by around 270 days - LG entity 2 had 44% of high and 21% of medium risk businesses overdue for inspection. <p>On average, they were overdue by more than 400 days. LG entities have deviated from the better practice inspection frequencies and have not documented why. Therefore, they have less information about whether businesses are meeting food safety standards, increasing the risk that inadequate food practices are undetected. Additionally, businesses are paying annual fees for inspections not performed and they may miss out on receiving information and advice on their food safety practices. Since being made aware of the findings, the LG entities advised that they were completing the overdue inspections. Both LG entities told us recently that some inspections could not be completed because businesses had cancelled their registration or were closed. One LG entity found some incorrect business risk classifications, which meant that an inspection was not due.</p>	<p>Local government entities should:</p> <ul style="list-style-type: none"> - ensure food business inspections are prioritised and carried out according to their risk classification - ensure changes to inspection frequencies are only made based on a documented assessment of compliance history or other urgent requirement - work with the Department of Health in the development and implementation of new electronic food safety inspection and recordkeeping systems. <p>Under section 7.12A of the Local Government Act 1995, all audited entities are required to prepare an action plan addressing significant matters relevant to their entity for submission to the Minister for Local Government within 3 months of this report being tabled in Parliament and for publication on the entity's website. This action plan should address the points above, to the extent that they are relevant to their entity, as indicated in this report.</p>	<p>Local government entities in our sample generally accepted the recommendations and confirmed that, where relevant, they will improve inspection and enforcement practices, recordkeeping and compliance reporting for regulating food businesses.</p>	<p>Plan to address the Audit recommendations provided to the Minister for Local Government on time.</p> <p>Procedure drafted to:</p> <ul style="list-style-type: none"> - ensure food business inspections are prioritised and carried out according to their risk classification - ensure changes to inspection frequencies are only made based on a documented assessment of compliance history or other urgent requirement. <p>Food business inspections are on target to be carried out in the current financial year but half of the high risk businesses are minimally overdue as they have not been inspected in six months. They need to be inspected this half of the financial year. A few medium risk businesses are also minimally overdue for inspection as the vast majority of businesses were last inspected by contractors in the winter of 2019 and have all fallen due over winter.</p> <p>3/02/21 – The majority of inspections due have been completed however inspectors are still working through the list to complete the remaining inspection due. All inspections due at the time of audit have been completed barring those businesses that have closed or are not presently operating. Inspections will continue as an ongoing action as food business inspection become due over time.</p>	2020-2021 FY	Ongoing	
Consumer Food Safety	Compliance and Health	NA	<p>Record management shortcomings have reduced LG entities' ability to effectively regulate food businesses. Inspection and enforcement data was not well documented in the records systems at the 2 LG entities. We found instances where both LG entities had incomplete records of inspections and inaccurate business register data. We also found limited system functionality and compliance reporting. Quality records and reporting support good decision-making and help LG entities effectively and efficiently allocate limited resources.</p> <p>In our sample of 35 Australian Food Safety Assessment (AFSA) paper inspection forms, we found examples where forms were difficult to read, missing details or an assessment against each standard was not recorded (Figure 3). EHOs need to complete these forms so non-compliance and inspection outcomes are clear to businesses and LG entities have correct records. Both LG entities acknowledged that there were issues with recording information and scanning the form. They advised us that they are developing an electronic form to improve the quality and completeness of inspection information. We note that there is an electronic version of the AFSA inspection form available. We found that business information stored in registers was not always accurate or complete. In particular:</p> <ul style="list-style-type: none"> - 47 of 1,204 businesses across both LG entities had no record of inspection in the registers - 1 LG entity had 15 businesses in which the next inspection pre-dates the last inspection - through a limited internet search by the OAG of 20 local businesses, 1 business was found to be operating but not known or registered by the LG entity. After we made the entity aware of this finding, they requested and received a registration application. <p>Incomplete or inaccurate information can result in missed inspections, and businesses not being inspected according to an appropriate risk classification. Both LG entities had weaknesses in their risk assessment processes. One LG entity did not have supporting documentation for their business risk assessments, and advised that there were 24 high and medium risk businesses which had incorrect risk classifications. At the other entity, we found an instance where risk was not reassessed for a business after multiple items of serious non-compliance were identified. One of which was feeding cats in the kitchen. Inaccurate risk assessments can lead to businesses not being inspected appropriately or paying for more inspections than required.</p> <p>The LG entities can also improve the way they manage and track inspections. Due to a system error at 1 LG entity, EHOs have to rely on setting reminders for follow-up inspections in their calendars to check non-compliance was resolved. We note 1 LG entity reports quarterly on inspections completed, while the other stopped similar reporting in November 2018, while they wait for a new system. Neither LG entity reported on inspections that were due or overdue. Compliance reporting provides management with oversight of inspections required and completed, and EHO workload.</p> <p>Compliance information and data can also help identify systemic food safety issues, make decisions on education and support services, and determine appropriate enforcement options. Both LG entities have advised they are either conducting a review of their registers to identify other shortcomings or improving the accuracy and effectiveness of their register and compliance reporting.</p>	<p>Local government entities should:</p> <ul style="list-style-type: none"> - improve recordkeeping for food business inspections and compliance reporting to: <ul style="list-style-type: none"> a. better understand inspection and compliance history b. identify compliance issues and follow-up activities c. respond to emerging food safety issues - work with the Department of Health in the development and implementation of new electronic food safety inspection and recordkeeping systems. <p>Under section 7.12A of the Local Government Act 1995, all audited entities are required to prepare an action plan addressing significant matters relevant to their entity for submission to the Minister for Local Government within 3 months of this report being tabled in Parliament and for publication on the entity's website. This action plan should address the points above, to the extent that they are relevant to their entity, as indicated in this report.</p>	<p>Local government entities in our sample generally accepted the recommendations and confirmed that, where relevant, they will improve inspection and enforcement practices, recordkeeping and compliance reporting for regulating food businesses.</p>	<p>Record keeping is being improved by:</p> <ul style="list-style-type: none"> - New procedures setting out standard practice for record keeping; - *All reinspections completed on new form; - *Spreadsheets created to track outstanding non-compliances (Improvement Notice Spreadsheet) - Development of new electronic inspections module 	2020-2021 FY	Ongoing	
Consumer Food Safety	Compliance and Health	NA	<p>LG entities did not always follow-up food safety issues consistently and enforce compliance. We found that the LG entities did not have adequate procedures to help EHOs determine which types of non-compliance require enforcement and follow-up, and when this should occur. While some compliance decisions may require the professional judgement and discretion of individual EHOs, it is important to have documented guidance to support consistent, risk based compliance actions.</p> <p>Both LG entities were not following up instances of identified non-compliance in a consistent way, to ensure food safety issues were fixed. In our review of 41 inspections across both LG entities, there were 30 inspections that identified non-compliance in areas such as food skills and knowledge, cleanliness, maintenance, handwashing facilities and protecting food from contamination. We found:</p> <ul style="list-style-type: none"> - EHOs only recommended an improvement notice for 2 businesses, but these were never issued. One business had a follow-up inspection, while the other was later fined \$250 for hazardous foods that were being thawed with no temperature control. - Five inspections completed by 1 LG entity identified between 11 and 20 separate items of non-compliance at each business but were enforced differently. Three of the inspections required no further action, 1 resulted in a follow-up inspection, and the other was marked as requiring an improvement notice, but only had a follow-up inspection. - Six businesses had follow-up inspections, but it was unclear if all items of non-compliance were fixed. One LG entity advised that non-compliance with a lower risk are often rectified at the time of inspection, but this wasn't always documented. <p>It is important for LG entities and other regulators to take consistent compliance actions for similar non-compliance. Clear and consistent enforcement processes and actions are equitable and make it easier for businesses to understand how LG entities assess and enforce compliance with the Standards.</p> <p>We expected to see more formal enforcement processes used, based on the types of non-compliance found, but these were rarely used. According to Department records, in 2018-19, only 2.6% of 734 inspections across both LG entities resulted in formal enforcement. Less than 1% of all inspections resulted in an improvement notice, the first enforcement option for non-compliance. Under appropriate circumstances, formal enforcement actions send a clear and important message to businesses that their food safety practices need to be strengthened and is consistent with the Department's compliance and enforcement guidelines.</p>	<p>Local government entities should:</p> <ul style="list-style-type: none"> - develop procedures and staff guidance to ensure non-compliant food businesses are followed up and Standards enforced in a consistent and timely manner - work with the Department of Health in the development and implementation of new electronic food safety inspection and recordkeeping systems. <p>Under section 7.12A of the Local Government Act 1995, all audited entities are required to prepare an action plan addressing significant matters relevant to their entity for submission to the Minister for Local Government within 3 months of this report being tabled in Parliament and for publication on the entity's website. This action plan should address the points above, to the extent that they are relevant to their entity, as indicated in this report.</p>	<p>Local government entities in our sample generally accepted the recommendations and confirmed that, where relevant, they will improve inspection and enforcement practices, recordkeeping and compliance reporting for regulating food businesses.</p>	<p>Compliance and recording procedures have been drafted and spreadsheets provided, as stated above, to track outstanding compliance issues and ensure rectification.</p> <p>Follow-ups of non-compliant inspections are occurring and necessary compliance actions taken in accordance with the draft policies and procedures.</p>	2020-2021 FY	Ongoing	

**Financial Management Review
(Commenced May 2020)**

Audit area	Responsible team	Risk rating (if applicable)	Finding	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated completion date	Status	Actual completion date
Procurement (RFT and RFQ Process)	Procurement team	Medium	The City's procurement policy allows the establishment of a formal tender Evaluation Panel to be formed only for the assessment of tender submissions (RFT's > \$250,000). However no formal Evaluation Panel is required for Request for Quote submissions (RFQ's \$50,000 to \$249,999). We noted a number of instances where RFQ submissions were assessed solely by the relevant Manager who requested the supply of goods and services. Under the City's financial delegation, Managers can approve procurement of goods and services up to \$249,999. One instance related to RFQ 265 – Consumer Brand Launch Campaign, which was awarded for an amount of \$135,750. According to City procurement policy, this procurement was not required to undergo an evaluation assessment via a formal panel as the total of the procurement was less than \$250,000.	The City give consideration to also establish the formation of a formal Evaluation Panel for larger \$ value RFQ's (say > \$100,000) in similar line to that which is required for RFT's.	The suggested recommendation would be an improvement on the current process through greater control, improved transparency and approval. Management will conduct an internal review of recent RFQ's awarded to determine an appropriate upper value limit to introduce greater control. Current RFQ procedures will be amended to include an evaluation panel for larger value RFQ contracts. Currently regular checks on how much is being spent for each supplier on a monthly basis is being performed and reported to Executive and Management Teams.	It has been agreed evaluation of all RFQ with an estimated contract value over \$150,000 will be evaluated by a panel and approved by the Major Procurement Approvals Panel. New procedure and documents being updated. To commence mid-November 2020 Complete	30/06/2021	Complete	30/11/2020
Procurement (RFT and RFQ Process)	Procurement team	Medium	We further noted that in addition to RFQ 265 (refer Finding No 2), a further 3 RFQ's were awarded to the provider between January and March 2019 being RFQ263/19 for an amount of \$65,000 (Video Production Destination Marketing), RFQ 202/18 for an amount of \$34,100 (Brand Logo Design) and RFQ 249/18 for an amount of \$10,80 (Website Redevelopment). A total of \$245,080 was awarded to the same provider within a space of 3 months without the need to go to formal tender. Although the various services may have been considered to be separate services and therefore not requiring a formal tender process, no evidence was found from information provided to us during the review that would indicate that some form of assessment was made and a formal decision reached to seek separate RFQ's. As such, the evaluation, the approval to award the contact and the letter of award were all undertaken by the Manager Economic Development and Marketing.	The City give consideration to also establish the formation of a formal Evaluation Panel for larger \$ value RFQ's (say > \$100,000) in similar line to that which is required for RFT's. This will ensure that proper segregation of duties controls is exercised for large \$ value procurements and also ensure that any potential conflicts of interest are identified and actioned.	The suggested recommendation would be an improvement on the current process through greater control and improved transparency and accountability. Current RFQ procedures will be amended for larger value RFQ contracts to include the following: • An independent approving officer through an evaluation panel for larger value RFQ contracts and • Completing a conflict of interest declaration where appropriate.	Ongoing. It has been agreed evaluation of all RFQ with an estimated contract value over \$150,000 will be evaluated by a panel and approved by the Major Procurement Approvals Panel. New procedure and documents being updated. To commence mid-November 2020 Complete	30/06/2021	Complete	30/11/2020
Procurement (RFT and RFQ Process)	Procurement team	Low	Although some form of conflict of interest needs to be declared and recorded on the evaluation assessment report by all panel members, no such requirement is provided nor needed for RFQ's (\$50,000 - \$249,999) as no formal evaluation panel is required. As per our testing we did not sight any RFQ evaluations which included a conflict of interest declaration statement. Further, we found that the City's evaluation voting panel members who are required to provide conflict of interest declarations for RFT's are signing the evaluation report which has a standard clause of no conflict of interest being declared. However, they do not provide a separate individual signed and dated "Conflict of Interest Declaration" form	We recommend that: • Conflict of interest declarations also be applied to RFQ's even though the evaluations are undertaken solely by the requesting manager • the City give consideration to ensure each voting member assigned to an evaluation panel sign and date an individual "Conflict of Interest Declaration" form.	The suggested recommendation would be an improvement on the current process through greater control and improved transparency and accountability. Current RFQ procedures will be amended for larger value RFQ contracts to include the requirement to complete conflict of interest declarations where appropriate.	New procedure including the requirement to sign Declaration of Conflict and Confidentiality for RFQ's as above Complete	30/06/2021	Complete	30/11/2020
Procurement (contract management)	Procurement team	Medium	The City has in place a number of contract management policies, however the policies have yet to be formally endorsed. As part of our testing we noted 4 instances out of 17 contracts tested where we were not provided with a copy of the supplier contract and a further 4 instances where we were not provided with a copy of the signed letter of acceptance or letter of intent when awarding a contract.	•the City, as a matter of priority, endorse the draft contract management policies and ensure that all appointed contract managers fully understand their contract manager responsibly. •to assist compliance that the City develop a formal quality assurance checklist which should be signed off by the contract manager's supervisor/Director as evidence that a contract prior to ending has been contract managed and post contract supplier performance evaluations have been conducted and recorded.	Draft contract management policies, procedures, forms and checklists have been submitted to Management for approval before implementation. Once endorsed by the Director training will be conducted across the organisation for relevant officers. It is anticipated to be finalised by September 2020. Training will include supplier evaluation measured against the KPI's within contracts. All policies and procedures will be made available to the organisation through CoFi.	Procedures and Forms endorsed in August 2020 and distributed internally. Training to commence November 2020. Contract Procedures adopted August 20 and available on CoFi. Training with relevant users under way since mid-December 20. Estimated completion June 21	30/06/2021	Ongoing	
Accounts Payable/Procurement (Purchase Orders)	Revenue team	Medium	Purchase orders form a vital control to ensure that the City has approved future expenditure commitments prior to awarding a contract for the supply of goods and services. The proper use of purchase orders also serves as a control mechanism to ensure supplier invoices received by the City for payment are valid, the fee charged on the invoice agrees to the approved fee for goods and services committed and also a properly approved purchase order can serve as formal evidence that proper procurement process has been followed in regards to RFT, RFQ and written quote process. However, the use of purchase orders as a control mechanism is only effective if the purchase order is created prior to the awarding of a contract or prior to placing an order for goods and services. The City's procurement policy clearly states the use of purchase orders. As part of our review testing, we found that 8 out of 15 purchase orders tested were created and approved either at the time a supplier invoice was received or after the date of invoice. The following 8 purchase orders were created for approval after invoice date and have been detailed for your further investigation: PO 237536, PO 236570, PO 235172, PO 242195, PO 240755, PO 235576, PO 237222, PO 235666	• the City clarify its policy and guidelines in regards to the proper use and approval of purchase orders to ensure that all purchase orders are initiated and approved at the date a supplier quote is accepted and/or a supplier contract for the supply of goods and services is enacted. • A copy of the approved purchase order should be issued to the supplier at the date of accepting their quote clearly stating that the supplier is required to state the purchase order number on their invoices.	In an attempt to reduce the instances of purchase orders being raised after the receipt of invoices the following actions have been initiated over the last couple of years: •Training across the organisation is conducted with purchasing officers to remind them of the need to ensure purchase orders are raised prior to the time of authorising works/services or ordering goods. •All invoices received without quoting a valid purchase order are returned to the supplier unpaid. This requirement was advised to all suppliers in writing in November 2018. From this review one-on-one training will be conducted with officers who raised the 8 purchase orders identified. Refresher training and update on the policy and procedures for purchase orders will be distributed to the organisation.	A training programme has been discussed whilst further evidence of the number of transgressions and incidents has been acquired. A report has been submitted to ELT to inform them of the size of the issue. The 8 identified have been spoken to about the process.	31/12/2021	Ongoing	

Audit area	Responsible team	Risk rating (if applicable)	Finding	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated completion date	Status	Actual completion date
Revenue (Cash Receipting and Handling)	Finance team	Low	The City currently has in place procedures for receipting of cash at each location where a point of sale system exists. However, the procedures are considered to be very basic and we do not believe they are detailed sufficiently to assist the POS operators to ensure they are all consistently undertaking a proper cash count, properly reconciling their daily cash receipts and ensuring that unbanked monies are adequately safeguarded. The cash receipting procedures also do not provide adequately cover all essential control processes. The Leisure Centre cash receipting procedure was found to be reasonably detailed and did support some of the above matters.	<ul style="list-style-type: none"> •The City review the existing procedure documents for the administration and each out centre and establish a more detailed and comprehensive cash receipting and handling processes incorporating: <ul style="list-style-type: none"> •Supervisor sign off of the daily reconciliation; •Investigation and approval of cash variances; •Supervisor signoff and approval process for cash refunds and POS adjustments •Threat of theft - staff safety instructions 	Management agree with the recommendation and have taken steps to implement a standard cash handling process across all business units. This would be an improvement to current practice and would ensure consistency across the organisation.	Actions are ongoing.	30/06/2021	Ongoing	
Human Resources/Payroll (Policies)	Finance team	Low	We found that the City's staff recruitment and payroll processes to be satisfactory. However, we noted that 7 of the existing Human Resources policies have not been subjected to a review or update since 2016. These consist of: <ul style="list-style-type: none"> •Awards Higher Duties - 2 May 2017 •Designation of Senior Employees – 13 September 2017 •Computer/Portable Device and Internet Usage Policy – 19 September 2017 •Recruitment Selection Appointment & Remuneration Policy – 28 November 2017 •Reward & Recognition Policy –November 2016 •Supervision, support & Achievement Policy - 11 October 2016 •Working from home Policy - 29 November 2016 We also noted that the City does not yet have in place a Whistle Blower policy.	the City review its Human Resources policies regularly every 2 years and give consideration to formulating a Whistle Blower policy.	People and Culture will: <ul style="list-style-type: none"> •Review all the policies that were adopted over 2 years ago and propose to have this completed by end July. •Prepare a Whistle Blower Policy for adoption. 	This action has been delayed due to flow on impact of 8-10 week City 'closure', high workloads and P&C staff shortages. The policy review and introduction of the new policy to now be completed by December 2020	31/12/2020	Ongoing	
Investments (Policies)	Finance team	Low	Based on our review we found that the City is undertaking its investments in accordance with Council approved Investment Policy SG41. However, the policy was last reviewed and amended on the 27 August 2014 and according to the policy was due to be updated in 2018. The City's Investment Policy has yet to be updated.	The City's investment policy be reviewed in line with current investment down turn and seek Council endorsement in regards to whether existing investment strategy, as outlined in SG41 Investment Policy is still appropriate and warranted in regards to levels of revenue and risk that can be achieved under current environment.	A review of the current Investment Policy has recently been undertaken. The review has analysed the limits placed on financial institutions and overall credit ratings in consideration of the options for the City's investment in 'Green Investments', whilst taking into account risk. This review with outcomes and recommendations will be presented at an Elected Members workshop for their consideration and direction on the Council's risk appetite on investing funds. This will inform the final Investment Policy for adoption by Council.	On-going review	31/03/2021	Ongoing	
Financial Systems and Procedures (Internal Audit Function)	Finance team	Medium	The City does not have in place a dedicated Internal Audit Activity which is able to undertake routine financial management, risk management, internal control and legislative compliance audits. Such an activity, should it be established, would be responsible for reporting their findings and recommendations directly to the Audit and Risk Management Committee via the CEO assisting the CEO and the Audit and Risk Management Committee in meeting their governance responsibilities. The Internal Audit Activity can be established either as an inhouse function or outsourced to a reputable accounting/audit firms who specialise in providing Internal Audit services.	<ul style="list-style-type: none"> •The City CEO, through the Governance unit and the Audit and Risk Management Committee give consideration to the establishment of an Internal Audit Activity for the City. • Consideration be given to establishing a 3 year internal audit program, endorsed by the Audit and Risk Management Committee, made up of potential high risk area audits to be carried out based on the City's identified strategic and operational risks. 	The City's current audit program includes: <ul style="list-style-type: none"> •Financial audit conducted by OAG for Interim and Final audit of annual financial statements. •Audit Reg. 17 audits conducted on Legislative Compliance, Internal Control and Risk Management. • Performance Audits conducted by OAG within Procurement and Environmental Health. •Financial Management Review undertaken by CEO every 3 years. Additional audits through an internal audit function will be considered by the City with Audit and Risk Management Committee. 	On-going review	31/03/2021	Ongoing	
Bonds and Trusts Accounts (Bond Account Reconciliation)	Finance team	Low	Our review of the trust account found that the trust account is required to be regularly reconciled and was found to be satisfactorily managed. In regards to the bonds account, currently the City has \$1.2m in its bonds account that have not yet been refunded. \$973,000 relates to Verge Bonds which are collected from relevant building applications. In January 2020, some \$425,000 was cleared from the bonds account to the City's Municipal bank account. These related to bond monies that had not been refunded and were held in the bonds account for over 10 years. Under the Local Government Act and Regulations Councils can clear uncollected bonds that have remained unclaimed for over 10 years to the Councils Municipal bank account. We noted that there is a further \$35,824 of other related bonds, hall and venue hire bonds, in the bonds account that are also over 10 years but have yet to be cleared to the Municipal bank account. We also noted that the bond account is required to be reconciled each month to the general ledger account, however no reconciliation was undertaken for the September 2019 and November 2019 months.	The City ensure that bond account reconciliations are undertaken consistently on a monthly basis and that the City investigate why it has not yet transferred the additional \$35,824 of unfunded bonds which have been outstanding for over 10 years to the Municipal account.	The City performs monthly reconciliations of all bond and trust fund accounts. During 2019-20 a considerable amount of bonds that were held for over 10 years were identified as eligible for transfer to the City's Municipal account. This was actioned on 3 March 2020 with all bonds up greater than 10 years as at 31 January 2020 being transferred to Municipal account. It is intended that all bonds from 1 February to 30 June 2020 will be actioned this financial year with a further transfer to be processed to the Municipal account in the amount of \$35,824. Further during next financial year finance will investigate and liaise with business units to work on a process to ensure bonds are returned in a timely manner and ensure that bonds held are current.	Actions are ongoing.	30/06/2021	Ongoing	
Asset management (Asset Capital Thresholds)	Finance team	Low	Changes recently introduced in 2017 requires that asset capitalisation thresholds should not be below \$5,000 per asset item. The City's Capital Threshold guidelines still shows certain types of assets to be capitalised over \$2,000. This relates to Furniture & Equipment, Plant & Equipment, Office & IT equipment and Software.	The asset capitalised threshold guidelines be updated to reflect new asset capitalisation threshold levels.	Since the change asset capitalisation has been in accordance with the revised Financial Management Regulations. The asset capitalised threshold guidelines will be updated to reflect this change in legalisation and internal process.	On-going review	31/03/2021	Ongoing	

Interim Audit - Finance
(Year ending 30 June 2020)

Audit area	Responsible team	Risk rating (if applicable)	Finding	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated completion date	Status	Actual completion date
Assessment of new Accounting Standard AASB16	Finance team	Moderate	New accounting standard AASB 16 Leases came into effect for the City on 1 July 2019. During our interim audit we noted the City had not performed a detailed assessment of leases to ensure compliance with the new standard.	The City should measure the impact of the application of AASB 16 as at 1 July 2019 and process appropriate adjustments in the accounts, as well as considering the required disclosures and amended accounting policies that will need to be disclosed in the 30 June 2020 financial report in advance of year-end.	Since the interim audit the City has measured the impact of the application of AASB 16. All existing leases have been assessed and the appropriate adjustments for budget 20-21 were processed in the accounts. The adjustments were adopted by Council with the Annual Budget for 2020-21 and were reflected in the Rate Setting Statements, Note 2(a) Net Current Assets and Note 7 Leases Liabilities. The City has amended its accounting policy to reflect the application of the new accounting standard AASB 16 Leases in preparation for year ending 30 June 2020. The appropriate adjustments as at 1 July 2019 will be processed in the accounts with necessary disclosures reported in the financial report to ensure compliance with AASB 16.		30/09/2020		
Manual journals	Finance team	Significant	We noted several instances of journal entries were prepared and posted by the same officer, without independent review by a second officer. We also noted from the TechOne users reports that divisions outside of finance have access to approving manual journals.	We recommend the city implements appropriate levels of user access within TechOne and review segregation of duties so that manual journals are approved by authorised independent officers.	The City acknowledges there were a few instances where journal entries were prepared and posted by the same officer. Some of these were posted on verbal approval. From March 2020 the TechOne system has been re-configured to prohibit journals being prepared and approved by the same officer. This was demonstrated to the auditors at the time of the interim audit. The one exception is a system created journal to upload daily purchase card transactions from the City's banking software into the TechOne system where one officer is the preparer and approver. However, in this case the file is locked as "accepted" and the officer doesn't have permission to edit the file therefore the City does not consider this as a risk. With regards to the access to approve manual journals the City agrees this should be limited to finance officers only. Even though divisions outside of finance have access to approve journals, it has been determined no journals have been posted by staff outside of the Finance team. The City accepts the current TechOne system access is a potential risk and will conduct a review of the current access and limit to appropriate finance officers.		30/09/2020		
Supplier master files	Procurement team	Significant	During our audit we noted that although the City has a formal procedure to support the periodical review to changes to the supplier master file we noted: 1.) 15 instances where changes to supplier master files did not have evidence to support an independent review was performed for these changes; 2.) 16 finance officers have access to changing supplier master file details; and 3.) 48 active suppliers that have duplicated records in the supplier Masterfile.	Management should ensure changes made to the vendor Masterfile are appropriately reviewed and approved by an independent officer, including retaining evidence of this process. System access privileges to the master file should be reviewed to ensure that only appropriate, approved staff have access. The City should also perform periodical reviews to remove/deactivate duplicated supplier records.	The City has a procedure in place since November 2017 in relation to changing supplier bank account details to ensure proper controls and segregation of duties. In addition, the Procurement Team Leader runs and checks a report of all supplier bank account changes that have been made in the system before approving each payment run. Based on these audit findings a refresher of the procedure will be undertaken with the Procurement Officers. The refresher will include revisiting the documentation required and completing checks section of the form for audit trail purposes. A further action will be added to this procedure to undertake an internal audit function. This will be a random check of supplier change of bank account forms and documentation to ensure compliance with the procedure. The City will undertake a review of officers having access to change supplier master files details and update security settings as required. A review of duplicate supplier records was undertaken in July 2019 where it was noted that some suppliers have more than one record due to different address or payment methods. To ensure this remains current this task will be added to the end of financial year procedure and checklist to be completed on an annual basis.	Audit of change of bank accounts in place. Procurement Team Leader reviews changes made before releasing payment run. Procedure updated. Review of Officers having ability to amend Supplier Master File, completed. With regard some suppliers having more than one record due to different address or payment methods. This task has been added to the end of financial year procedure and checklist to be reviewed and completed on an annual basis.	31/3/2021	Ongoing	

Audit area	Responsible team	Risk rating (if applicable)	Finding	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated completion date	Status	Actual completion date
Asset stocktake procedures	Finance team	Moderate	Our review of fixed assets identified that there is currently no periodic stocktake process in place.	Management should ensure that periodic stocktakes are carried out to confirm the existence of assets and adequate policies and procedures are in place.	A complete physical stocktake of all furniture, art, plant and equipment assets across the organisation (both financial assets and minor assets) is planned to be undertaken in conjunction with the asset revaluation in the 2020-21 financial year. Currently there are some asset physical checks undertaken within business units such as at the Arts Centre on the City's Art Collection and at the Works Depot for various items of plant and equipment. It is acknowledged these are sporadic and that an organisational documented procedure does not exist. The City will develop new process and procedure to put more rigour and consistency across organisation on the control of financial assets and minor assets.		30/06/2021		
Fixed asset reconciliation	Finance team	Moderate	We noted that no monthly fixed asset reconciliations were performed from July 2019 to January 2020 and the monthly reconciliation for February 2020 had no evidence of review.	Management should perform a monthly reconciliation between the fixed assets register and the general ledger and ensure it is prepared and independently reviewed in a timely manner.	Currently a formal monthly reconciliation between the fixed asset register and the general ledger is in existence at the City. Processing of monthly capitalisation of assets for the new financial year hadn't commenced at the time of the interim audit therefore no reconciliations were required. The processing for the new year was held off until finalisation of year ending 30 June 2019 to ensure the transactions posted in the new year are based on the final audited asset register balances. This practice will be reviewed to determine possible end of year and start of new year improvements.		30/09/2020		
Purchase card acquittals	Procurement team	Moderate	The City's purchasing card policy is out dated and does not reflect the current purchase card acquittal process. Through our testing we have noted that there is no acquittal of a monthly credit card statement which is required per the current policy. All acquittals are now done through the NAB online purchasing card portal, however the policy does not provide a specific timeframe guideline for approval of purchasing card transactions in the portal. We note the purchasing card policy has not been updated since 2012.	Management should review their purchasing card policy to ensure that it reflects the current processes.	The purchasing card policy has been reviewed and a supporting procedure has been developed to reflect the current processes. These are awaiting Executive approval. Once adopted a session will be held with all users to inform them of their obligations and reporting requirements.	Transaction Card Procedure and Policy adopted by ELT in November 20. Training with users of cards pencilled in for February 21	31/03/2021	Ongoing	
Cancellation of purchase cards	Procurement team	Moderate	The City's purchasing card policy requires evidence to be retained for the cancellation of purchasing cards relating to lost cards and terminated employees. We tested 3 purchase card cancellations and were not able to obtain sufficient evidence or reasons for cancellations and when cancellations were requested.	Management should review their policy regarding the cancellation of cards due to lost cards and terminated employees. There should be regular communication between payroll and finance to ensure purchases cards are retrieved and cancelled on or before termination.	The current purchase card policy requires the cancellation of cards in a timely manner when an employee terminates employment with the City. The purchasing card policy has been reviewed and a supporting procedure has been developed to strengthen the process of card cancellation due to lost cards and terminated employees. These are awaiting Executive approval. Once adopted a session will be held with all users to inform them of their obligations and reporting requirements.	Transaction Card Procedure and Policy adopted by ELT in November 20. Training with users of cards pencilled in for February 21	31/03/2021	Ongoing	
TechOne delegations	Procurement team	Moderate	Audit identified 33 positions that no longer exist which are still on the TechOne delegations. However, we note that none of these 33 positions were used to approve expenditure in our sample testing. In addition we note that the CEO has a TechOne delegation of \$100 million where the delegations only stipulate \$500,000.	The City should perform a periodic review of the delegations within the TechOne system.	The City has reviewed and agrees with the list of 33 positions that no longer exist which were still on the TechOne delegations. There positions have since been deleted from TechOne. Going forward a review of the delegations within TechOne will be undertaken on a quarterly basis to ensure all are current as per the approve expenditure register. The position of CEO which has a TechOne delegation of \$100 million is established in the system for occasions where the CEO authorises contracts over \$500k on behalf on Council in accordance with the Local Government Act. The limit of \$100 million was established for approval of the Kings Square Project contracts. To improve controls this position's delegation value will be reduced to a more appropriate spending pattern of the Council approved tenders.	Periodic Reviews underway	30/09/2020	Complete	30/09/2020

Audit area	Responsible team	Risk rating (if applicable)	Finding	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated completion date	Status	Actual completion date
Discounts raised without approval	Revenue team	Minor	From our review of 21 fees and charges, we noted 3 items that had discounts applied without proper approval in the current year. From our discussion with management this is a result of discounts from previous years being carried forward incorrectly.	Management should implement a process and control to monitor the application of discounts applied to fees and charges.	In response to these findings, an internal E-Form will be created to capture the request and approval (subject to relevant criteria) of discounts and subsequent recording of delegation exercised. Criteria and limits to be determined and approved by the relevant business unit Manager through the review process for the annual fees and charges prior to adoption by Council. Approved criteria to be recorded in the City's record management system and where possible, included in Technology One at the point of calculation or alternatively through a fees calculator template.		31/12/2020		
Daily banking summary	Revenue team	Minor	We noted daily banking summaries were not always reviewed. All samples however were traced through to the bank statements to evidence receipt.	The City should ensure that the daily banking summary sheets are reviewed and evidence of this should be retained.	Management have taken steps to implement a standard cash handling process across all business units. This would be an improvement to current practice and would ensure consistency across the organisation. Once endorsed by Executive training of the revised process will be conducted with relevant officers.		31/12/2020		
Matter outstanding from previous audit Purchase orders	Procurement team	Moderate	During our sample testing of payments made throughout the year, we identified instances where the authorised purchase orders were raised after the dates of the corresponding supplier invoices.	All authorised officers should be reminded of the need to ensure purchase orders are raised prior to ordering goods. This will help ensure good/services have been appropriately ordered and authorised.	In an attempt to reduce the instances of purchase orders being raised after the receipt of invoices the following actions have been initiated over the last couple of years: <ul style="list-style-type: none"> • Training across the organisation is conducted with purchasing officers to remind them of the need to ensure purchase orders are raised prior to the time of authorising works/services or ordering goods. • All invoices received without quoting a valid purchase order are returned to the supplier unpaid. This requirement was advised to all suppliers in writing in November 2018. From this review one-on-one training will be conducted with officers who raised purchase orders identified were raised after the dates of the corresponding supplier invoices. Refresher training and update on the policy and procedures for purchase orders will be distributed to the organisation.	Monthly report now issued with Invoice Date to PO Date variances, to Management and ELT. Pressure being applied to Managers to improve performance. ELT discussing if this becomes a management and team KPI.	31/12/2020	Complete	1/10/2020

**Interim Audit - Information Systems
(Year ending 30 June 2020)**

Audit area	Responsible Team	Risk rating (if applicable)	Finding	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated completion date	Status	Actual completion date
Management of technical vulnerabilities	Information Technology	Significant	We reviewed the process to manage technical vulnerabilities and identified the following issues: <ul style="list-style-type: none"> Software security updates (server/workstation patching) do not follow the change management process. Software security updates are not tested before they are deployed into the live production environment. Although a testing environment is in place, there is no responsible team/person to test security updates. Decisions to not deploy security updates are not recorded. The software management system (SCCM) has not been configured to alert staff when security updates on servers have failed to install. The City does not perform internal vulnerability assessments to identify known technical vulnerabilities. From a sample of 10 critical servers and 4 workstations we found critical and high severity known vulnerabilities on various IT systems. These vulnerabilities relate to unsupported systems, missing patches and security configurations. Some of these vulnerabilities have exploits available. 17 active devices running on unsupported operating systems. Over 40 devices that have already been decommissioned but have not been appropriately removed from AD. 	The City should: <ul style="list-style-type: none"> develop and implement an effective vulnerability management process to make sure all relevant known security vulnerabilities are identified. Following successful testing, relevant updates should be applied in a timely manner appropriately record decisions along with any mitigations, to not address any known vulnerabilities configure the software management system to send out notifications to relevant staff, when security updates fail to deploy migrate or upgrade any unsupported IT systems onto up-to-date platforms that are fully supported by the vendor remove decommissioned devices from AD in a timely manner 	The Security Update Software (SCCM) is still being configured and optimised to meet requirements as it is a relatively new platform for the City. Alerts will be enabled as per the recommendation. During this audit, the City was migrating to a new Server Operating Environment (SOE) for our production environment which will allow the removal of all unsupported operating systems. Legacy environments that require the older operating systems to function will be powered down and accessed securely only when required.		2021-2022 FY		
Management of the Finance system	Information Technology	Moderate	We reviewed the process for managing user accounts within the finance system and identified: <ul style="list-style-type: none"> the Employee action form does not specify the access privileges the user requires. Privileges assigned to new users are copied from existing users (e.g. employee's predecessor) or granted based on the employee's position title, which may result in excessive privileges being assigned the system owner's authorisation is not required to grant access to the system. City's Information Security Risk Management Plan requires privileged access within core applications to be authorised by the responsible manager of that system from a sample of 10 new user accounts, we identified the expiry date was not set up correctly on 5 user accounts within the finance system. We acknowledge their network access was appropriately set to expire there is no process to review user access privileges to confirm they are still required and appropriate. We identified: <ul style="list-style-type: none"> 5 terminated staff who still had active accounts in the finance system. We acknowledge these accounts had their network access disabled 1 privileged account that did not require this level of access 92 active accounts that have not accessed the system in over a year (last login before May 2019) 54 active accounts that have never accessed the system including system/generic accounts. there is no process to review administrator accounts activity nor system configuration changes to identify any possible anomalies. We identified 1 terminated employee who retained his administrator account with full access to all roles within the finance system (profile COF.HELPEDESKADM) active. We acknowledge this account had its network access disabled the City has not developed a user matrix to guide the management of profiles and roles. As a result, the process to assign user roles is based on individual's knowledge instead of a formalised process. We identified an excessive number of profiles (174) and roles (221) in the system of which only 10 are currently in use by core system users (finance staff) there is no process to proactively monitor user activity within the system to try and identify suspicious behaviour. <p>We were informed that the City has not reviewed the system configuration (i.e. roles and functions assigned to profiles) in over 10 years to ascertain if it is still appropriate.</p>	The City should review and enhance its current process to manage finance user accounts. The process should make sure that: <ul style="list-style-type: none"> specific access privileges are requested and recorded based on an up-to-date system profile matrix system owner approval is sought before granting access to the finance system user access privileges are reviewed on a regular basis, including the review of accounts that have not used the system for an extended period. The review should include highly privileged accounts, generic/service accounts and changes to system configuration user accounts are configured correctly (e.g. set up expiry date) and disabled within the finance system in a timely manner profiles' configuration is regularly reviewed, including roles and functions to enforce appropriate segregation of duties based on an assessment of risk, delegation authority is individually approved proactively monitor user activity in the system. 	The City will review its current processes around management of the finance system focussing around user accounts and privileges. This will also rely on the software provider (Technology One) to assist with the security access and providing a way to report and audit on this.		2020-2021 FY		
Management of the HR payroll system	Information Technology	Moderate	We reviewed the process for managing user accounts within the HR payroll system and identified: <ul style="list-style-type: none"> 1 terminated employee who still had 2 active accounts. We acknowledge these accounts had their network access disabled all 8 core users of the HR payroll system have been assigned the same system access, which may result in excessive privileges. We identified 2 user profiles currently in use (COF.HRADADMINISTRATOR, COF.HROFFICER). However, both profiles have the same privileges granted via assigned roles (P1 CRMHRPAYROLL, P1.CRMSTAFF). <p>We acknowledge that there is a procedure to validate changes to key information regularly as part of the pay run process.</p>	The City should review and enhance its current process to manage HR payroll user accounts. The process should make sure that: <ul style="list-style-type: none"> user access privileges are reviewed on a regular basis. Accounts that are no longer required must be disabled in all systems in a timely manner profile's configuration is regularly reviewed, including roles and functions to enforce appropriate segregation of duties. 	The HR Payroll system is a part of the Finance system. Those who have access within this system have the same access as they complete the same functions. A limitation within the HR Payroll module is that it is not very granular with system access. The City will review its current processes around management of the HR System.		2020-2021 FY		
Information security policies	Information Technology	Moderate	The City has not developed its information security policy. The Cyber Security Incident Response Plan in conjunction with the Information Security Risk Management Plan partially cover the purpose of the information security policy. Such plans also provide details on how to manage and respond to information security incidents. However, we identified the following issues: <ul style="list-style-type: none"> plans do not include the following critical information: <ul style="list-style-type: none"> definition of information security, objectives and compliance requirements the process for granting/revoking access to computer systems the process for monitoring computer system accounts connection of unauthorised devices the process to manage, dispose and reuse IT assets plans are in draft, and have never been endorsed. They were last reviewed in October 2018, and were due for review in October 2019. <p>In addition, we noted that a recent information security incident (e.g. phishing email incident, May 2020) was not appropriately recorded. The following information was missing: <ul style="list-style-type: none"> original phishing email detailed remediation actions. Only the account's password reset was recorded appropriate incident category/subcategory. The incident was recorded under user management category, email mode, subcategory not assigned. </p>	The City should: <ul style="list-style-type: none"> review and update its existing policies or develop new ones to ensure all relevant areas of information security are appropriately addressed. Policies should be communicated to all employees and any other relevant stakeholders once they have been formally approved by management establish an effective policy review process. As part of this process all policies must be reviewed regularly or following any significant changes. This will help ensure their continuing suitability, adequacy and effectiveness. review and endorse its Cyber Security Incident Response Plan and Information Security Risk Management Plan. These plans should include relevant procedures to ensure the effective response and management of all information security related incidents ensure that all information security related incidents are appropriately categorised and recorded. 	The City acknowledges that the Cyber Security Incident Response Plan in conjunction with the Information Security Risk Management Plan are currently in draft. The City will plan to have these plans updated, endorsed and adopted in conjunction with the City's audit and risk		2020-2021 FY		
Risk management	Senior Management Team (??)	Moderate	We reviewed the City's risk management process and identified the following issues: <ul style="list-style-type: none"> The City's Risk Management Policy and Risk Management Guidelines have not been reviewed in a timely manner. They were last reviewed in September 2017 and due for review in September 2019. ICT risks are not recorded. <p>In 2019, the City engaged a third party to undertake a review of the City's systems and procedures including risk management. The initial report identified the following issues, which have not been addressed: <ul style="list-style-type: none"> the risk management policy/guidelines are not widely known by officers and not consistently used between team/departments risk registers are captured within individual project management documents, therefore are not standardised risk management is not included in standard induction programmes. Risk management training is offered to employees involved in events and project management. <p>We acknowledge that work is in progress to address these issues</p> </p>	The City should continue to: <ul style="list-style-type: none"> review and endorse its Risk Management Policy and Risk Management Guidelines effectively communicate risk management policy/guidelines to relevant staff and monitor their implementation to make sure process are standardised across departments review and enhance its risk management training, based on an assessment of risk. <p>In addition, the City should develop and maintain an appropriate ICT risk register. Reporting of ICT risks should be aligned with the City's risk management policy/guidelines.</p>	The City confirms that work is in progress to review risk management. Training to senior managers around risk management is currently being scheduled as a result of the review conducted by the City.		NA		

Audit area	Responsible Team	Risk rating (if applicable)	Finding	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated completion date	Status	Actual completion date
Human resources - Staff lifecycle management	Director People and Culture	Moderate	We reviewed the City's staff lifecycle management process and identified the following issues: <ul style="list-style-type: none"> The integrity checklist for HR related positions has not been developed. The integrity checklist outlines the basic mandatory checks to complete prior to employment commencement (e.g. police, reference and qualification checks, 100 point ID). Integrity checks are not required for ICT Staff who have full access to the City's systems and information. From a sample of 10 new starters we found: <ul style="list-style-type: none"> 3 did not go under police clearance as required 1 did not retain records of qualification checks as required 3 did not complete mandatory induction training 1 did not sign the City's computer, portable device and internet usage policy 2 did not sign the acknowledgement to the Code of Conduct which includes the non-disclosure agreement. 	The City should: <ul style="list-style-type: none"> review and enhance its integrity checking guidelines. The integrity baseline for all high risk positions should be documented comply with its HR on-boarding processes and make sure that all new employees: <ul style="list-style-type: none"> complete mandatory induction training sign-off the acknowledgement to the Code of Conduct sign-off the acknowledgement to the City's computer, portable device and internet usage policy under go pre-employment screening as per position specific integrity checklist. 	The City is currently in the process of deploying a new Human Resources system which includes onboarding, Learning Management and Performance Management. The recommendations provided will be delivered as part of the deployment of this system.		2021-2022 FY		
Database security	Information Technology	Moderate	The City does not have an adequate process to manage its databases. We performed high-level security checks on the Finance/HR payroll system database and identified the following issues: <ul style="list-style-type: none"> Sensitive information is not encrypted. The databases are not configured to provide adequate audit trails. The databases have not been securely hardened, as excessive privileges have been assigned to all users through the 'public' role. The database server has not been appropriately segregated to restrict direct access. 	The City should: <ul style="list-style-type: none"> encrypt sensitive information at rest, based on an assessment of risk improve database hardening and implement audit trails. 	The City will review its database security and recognises that the security hardening of the Finance/HR payroll system database is governed by the provider of this system. The City will contact the system provider for assistance in this matter.		2021-2022 FY		
Anti-malware controls	Information Technology	Moderate	We reviewed the controls in place to protect the City's IT systems against malware and identified the following issues: <ul style="list-style-type: none"> The corporate workstation system policy within the new anti-malware system (Trend Micro Apex Central) is not appropriately configured. The weekly workstation schedule scan is not configured to enable virus/malware scan. We understand that the real-time workstation scans are appropriately configured to identify virus/malware Servers, including critical production servers, have not been fully migrated to the new anti-malware system for protection. The City was unable to provide anti-malware compliance report for servers. Our scans indicated that 2 servers were running outdated versions of virus signatures. 	The City should review and enhance its controls to manage malware. This should include that: <ul style="list-style-type: none"> all system policies (e.g. real-time scan, schedule scan) are appropriately configured to enable virus/malware scan all critical servers are protected against malware. Compliance rates must be monitored regularly for servers and workstations 	The City commissioned a new malware system during the time of this audit, as such the scheduled scans were still being configured. This is now being completed on all critical servers with external facing network access also. The City's firewall remains the primary malware prevention tool for the server environment. The firewall is cloud connected and receives live updates. This has been in place for over three years. Weekly reporting as well as live incident reporting to the IT Operations team provides clear visibility of threats.	No further action required	2021-2022 FY	Complete	8/09/2020
Management of removable media	Information Technology	Moderate	The City does not have appropriate controls to manage the use of removable media devices. Contrary to City's Information Security Risk Management Plan which requires staff not to use removable media such as USB memory sticks or disk drives unless absolutely necessary, we found that: <ul style="list-style-type: none"> data loss prevention system policies, including the logging and monitoring of USB usage have not been implemented. All users have full permissions on workstation's to use removable media devices we were able to download/upload sensitive City's information to/from a non-City owned device. There were no records or alerts regarding these activities there is no central register of removable media devices. Business units purchase and manage USB and storage devices themselves. 	The City should assess the risks associated with the use of removable media devices. Where appropriate, the City should: <ul style="list-style-type: none"> prevent the use of any unauthorised removable media devices use only USB devices that incorporate encryption to help protect the information log and monitor information copied to or from removable media devices maintain a register of all authorised and in use removable media devices. 	The City will take this recommendation under advisement and assess the risks where appropriate. All removable media devices are scanned by the City's antivirus/antimalware software.		2021-2022 FY		
Remote access management	Information Technology	Moderate	We reviewed the process to manage remote access to the City's IT systems and information, and identified the following issues: <ul style="list-style-type: none"> the City has not developed guidelines to manage remote access. City's Information Security Risk Management Plan requires the implementation of Virtual Private Network (VPN) software with traffic encryption and password authentication. These guidelines are insufficient for managing day to day remote access. by default, all network user accounts are granted VPN remote access. This is contrary to best practise multifactor authentication (MFA) is not required for remote access. This includes highly privileged accounts connecting remotely to manage core network devices and IT systems (e.g. firewalls, routers, domain controllers, servers, databases). We acknowledge that MFA is in place for administrator users within Office 365. In addition, our testing identified that a password lockout policy is not implemented. personal owned devices are allowed to connect remotely to the City's IT systems. However, security baseline requirements for their use have not been developed, and their use is not being monitored. E.g. The City's anti-malware software will not scan personal owned devices for compliance, it will only scan City owned devices there is no process to regularly review remote access logs to identify possible anomalies. We note that the lack of MFA for remote access was also identified in July 2019 by the City's Business Email Compromise Investigation. The Australian Cyber Security Centre also recommends to implement MFA as part of the essential eight strategies to mitigate cyber security incidents.	The City should: <ul style="list-style-type: none"> document and implement an appropriate remote access management process and clearly communicate the process to relevant stakeholders based on an assessment of risk, restrict remote access. Subsequently, the City should <ul style="list-style-type: none"> enforce and retain records of remote access requests and approvals perform regular reviews of remote user accounts to verify that access and privileges are appropriate. Accounts that are no longer required should be removed in a timely manner implement multifactor authentication for remote access develop and implement an appropriate security baseline for personal devices that remotely access the City's IT systems and information based on an assessment of risk, develop and implement a security event logging and monitoring framework. The framework should include regular review or remote access logs. 	The City takes this recommendation under advisement and will review the existing remote access management procedures. The City also acknowledges that this audit was conducted during the COVID-19 pandemic while the majority of the City's workforce were working, very successfully, remotely due to the restrictions put in place by the state government. All remote connections were, and continue to be, logged and reported on. The City will investigate the impact of MFA to its staff and assess this requirement.		2021-2022 FY		
Network access management	Information Technology	Moderate	The City does not have an effective process to manage access to the network. We identified the following issues: <ul style="list-style-type: none"> New user accounts are created based on existing user profiles, which could result in excessive privileges being granted. From a sample of 13 new user accounts (10 employees, 3 contractors): <ul style="list-style-type: none"> 1 contractor account (GIS consultant) was created without formal access request and approval. This account was disabled during audit as it was no longer required 1 contractor account was not set up to expire as requested From a sample of 5 new generic accounts created during the audit period: <ul style="list-style-type: none"> none of the accounts were formally requested/approved 2 accounts (T1 Test Mailbox, Council Chambers) do not have use description There is no process to review user access privileges to validate access is still required and appropriate. We found: <ul style="list-style-type: none"> 9 terminated employees who still had active network accounts 6 terminated agency employees still had active network accounts 1 active user account assigned to an employee who's start date (1st July 2020) is 3 months ahead from the account's creation date (1st April 2020) 162 dormant accounts (34 individual user, 128 generic/service/system accounts) that have not been used for over 6 months (last logon before November 2019) 100 accounts that appear to have never been used (16 user, 84 generic/service/system accounts). Last logon date is in blank We reviewed the implemented controls to manage network account passwords and identified the following issues: <ul style="list-style-type: none"> An account lockout policy is not enforced. A network account will not be locked out regardless of the number of failed access attempts due to the use of incorrect passwords Passwords are stored using reversible encryption. This is contrary to best practise 4 network user accounts (Elected Members) are not required to change passwords (passwords never expire). One of these hasn't change its password since January 2012. We were informed that the user's identity will not be verified before resetting the password to their network user account.	The City should review and enhance its current process to manage access to its network. The process should make sure that: <ul style="list-style-type: none"> individuals are assigned the privileges they require to perform their roles based on the principle of 'least privilege' all network accounts, including generic accounts, are formally requested, authorised and configured. The use description of generic accounts should be appropriately recorded user access is regularly reviewed including accounts that have not accessed the network for an extended period. Accounts that are no longer required should be disabled in a timely manner password requirements include the implementation of: <ul style="list-style-type: none"> an account lockout policy passwords should not be stored using reversible encryption all user accounts comply with the City's password policy user identity is verified before a password reset. 	The City will review its existing network management procedures and assess the recommendations provided.		NA		

Audit area	Responsible Team	Risk rating (if applicable)	Finding	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated completion date	Status	Actual completion date
Management of network privileged access		Moderate	We found that the City does not appropriately manage privileged access to its network as: <ul style="list-style-type: none"> the default administrator account is enabled and has not been renamed. This is contrary to best practise. The password for the administrator account has not been changed in over 21 years. Last password change was in November 1998. In addition, the password to the built-in administrator account is not securely managed within the City's password management system four out of 8 highly privileged network users do not require this level of access seven highly privileged network users do not have a non-privileged account for day to day access (e.g. email, web browsing). 	The City should: <ul style="list-style-type: none"> manage the default administrator account in line with good practise regularly review highly privileged network accounts and timely disable those no longer required ensure that individual highly privileged accounts are used to manage network devices, and non-privileged accounts are used to perform day-to-day activities. 	The City is currently modifying the way it manages the default administrator account and will be implementing a more secure procedure around this. The City will determine who requires highly privileged accounts based on their job role and review how privileged and non-privileged accounts are managed.		2021-2022 FY		
Network logging and monitoring	Information Technology	Moderate	We found that the network logging and monitoring process is not effective. We identified the following issues: <ul style="list-style-type: none"> The default domain policy is not configured to log critical user activity and security events. Adequate event log history is not maintained. There is no proactive review of log file information or correlation of security logs to identify any unauthorised access or malicious activity. Log file information is not appropriately protected to prevent unauthorised changes 	Based on an assessment of risk, the City should establish an effective logging and monitoring process. This process should incorporate the following: <ul style="list-style-type: none"> logging all high-risk activities within the system maintaining sufficient auditing event history reviewing log file information on a regular basis appropriately securing log file information. The City may wish to implement a security information and event management tool (SIEM). Further guidance on appropriate levels of logging and monitoring may be sought from the Australian Standard AS/ANZ 27002:2015.	The City will review its current network logging and monitoring measures.		NA		
Network device secure administration	Information Technology	Moderate	We reviewed the City's process to manage its network and ICT infrastructure and identified the following issues: <ul style="list-style-type: none"> From a sample of 2 security groups which had 9 users with privileges to manage core network devices, we found 1 user who did not require this level of access. Access to network devices is not restricted to specific workstations. Since there are not controls to prevent unauthorised computers from the network, these can be used to sniff credentials on the network to logon to network devices. It is good practice to limit management of critical network devices to certain workstations or network segments. Changes to core network devices (e.g. firewall configuration, server patching) do not consistently follow the change management process. We review the change management software (ServiceDeks Plus) and only found 1 record of software updates (firewall patching). The City uses a shared/generic account (admin) to manage the firewall appliance. Description of firewall rules is not clearly documented. There is no process to regularly review firewall rules to make sure they are still appropriate. Additional Audit Comment Review of firewall console found that purpose or description of rules is not documented, the field is left blank. It is unclear from management comment how the finding and recommendation will be addressed.	The City should: <ul style="list-style-type: none"> restrict access to network devices, based on an assessment or risk consistently follow the change management process for all IT changes make sure the use of the shared generic administrator account is restricted for only those tasks that specifically require this level of access. For all other tasks, IT staff should use their individual privileged user account ensure firewall rules are appropriately documented implement a regular process to review the firewall rules. 	The City will investigate restricting access to non-City network devices based on risk. Change management procedures and policies have been implemented and the City continues to mature in this space. Firewall rules are clearly documented within the firewall's administration console. The City will investigate a scheduled review of these rules.	No further action required	2021-2022 FY	Complete	8/09/2020
Network segregation and unauthorised network device	Information Technology	Moderate	The City does not have adequate controls to detect or prevent the use of unauthorised devices In addition, the City's network has not been appropriately segregated to control and filter internal traffic between segments.	The City should: <ul style="list-style-type: none"> review the risks to its network and implement appropriate controls to prevent and/or detect the use of any unauthorised IT devices appropriately segregate internal network traffic between critical systems and different end user groups based on a risk assessment. 	The City is currently configuring software to prevent unauthorised network devices from being able to connect to the City's physical network. This is already in place for the City's wireless network.		2021-2022 FY		
Change management	Information Technology	Moderate	The City does not have an effective change management process to make sure all changes to IT systems and network configurations are controlled and managed. We found that: <ul style="list-style-type: none"> the City's Information Security Risk Management Plan does not provide guidance for assessing changes (i.e. change risk, change priority, change type) the process to manage emergency changes is not documented roles and responsibilities to manage ICT changes are not defined Change Advisory Board's (CAB) terms of reference (ToR) have not been defined critical change information is not mandatory to record (e.g. change impact, urgency) the change management software (ServiceDesk Plus) allows the same user to plan, approve, implement and review ICT changes From a sample of 10 critical ICT changes, we identified: - 7 changes did not have a rollback plan - 6 changes did not have an implementation plan - 3 changes did not have an urgency assessment - 2 changes did not have an impact/risk assessment.	The City should: <ul style="list-style-type: none"> review and enhance its change management procedures and documentation. The procedure should include: - the criteria to assess IT changes (i.e. change risk, change priority, change type) - emergency changes - roles and responsibilities to manage ICT changes - CAB's ToR - Mandatory ICT change information make sure that segregations of duties are appropriately enforced within its change management system consistently follow its change management procedure for all ICT changes. 	The City has recently implemented and configured change management software, put in place a Change Advisory Board (CAB) and assigned change approver, implementer and designer roles. The City will continue to mature in this area and will monitor the change management process.	No further action required	NA	Complete	8/09/2020
Backup testing	Information Technology	Moderate	We reviewed the City's information backup procedures and identified the following issues: <ul style="list-style-type: none"> The Information Security Risk Management Plan does not provide appropriate guidelines for the testing of backups. The scope and frequency of testing, system owners' responsibilities and testing reporting requirements (i.e. deliverables) have not been defined. Recovery procedures are performed on an ad-hoc basis and do not cover the recovery of key applications or databases. Requests for recovery procedures are mainly file restorations. 	The City should: <ul style="list-style-type: none"> review and enhance its Information Security Risk Management Plan and develop detailed and suitable supporting guidelines for the testing of backups (i.e. scope of backup testing, backup testing plans, successful/failed assessment criteria) test backups in-line with its updated practice and maintain suitable records of the testing results plan the recovery testing for critical IT systems, databases, configurations of core network devices, and file servers, based on an assessment of risk. 	The City will review and enhance its backup testing processes.		2021-2022 FY		
ICT disaster recovery planning	Information Technology	Moderate	We found that the City does not have an adequate ICT disaster recovery plan (DRP). The plan, which was last reviewed in October 2018, is in draft and has not been appropriately communicated to relevant IT staff. In addition, there are no guidelines to test the ICT DRP (e.g. roles and responsibilities, testing frequency, scope). We were informed that the plan has not been tested.	The City should review and endorse its ICT DRP, and regularly test it to confirm that systems can be recovered in accordance with business expectations, and that key staff are familiar with the plan and their specific roles and responsibilities. The results of testing should be recorded and any relevant actions taken to improve the plan	The City will review and endorse its ICT DRP as recommended		2021-2022 FY		
Management of software licencing	Information Technology	Moderate	The City does not perform asset audits and due to lack of monitoring the software license management process is not fully effective. This is particularly important as all staff in the City has administrative privileges to install software. We were informed by the City that ServiceDesk Plus is used to monitor installed software, but due to lack of review the numbers reported by this systems are incorrect. We understand that Microsoft, Office 365 and Adobe licencing is managed separately and is up-to-date Additional Audit Comment It is unclear how management will address the finding.	The City should establish an appropriate process to manage software installations and licencing. This should include: <ul style="list-style-type: none"> regular scans of all software installed to ensure it has been appropriately authorised and licenced. Where any unauthorised or potentially unlicensed software is identified appropriate action must be taken regular review of installed and licenced software to confirm it is still required and being used. Any software no longer required should be removed and if there is an ongoing software licencing agreement this should be appropriately terminated. 	The City's Service Desk Plus software is not a licencing system but does monitor the software installed on devices and can provide indicative software licencing information. The system identifying 68% of software under licenses is not an accurate measure, thus why this system is not used to monitor all software. The Technology One license is charged per rateable property and has no bearing on the number of installations of the product. Trend Micro and Microsoft licenses are managed via their respective, cloud based, license management systems. The City conducts licence True-Ups once a year prior to license renewal	No further action required	2021-2022 FY	Complete	8/09/2020

Audit area	Responsible Team	Risk rating (if applicable)	Finding	Auditors recommended actions	Officer response to recommended action	Progress comments	Estimated completion date	Status	Actual completion date
Management of IT assets	Information Technology	Moderate	We reviewed the process to manage IT assets and identified the following issues: <ul style="list-style-type: none"> The policy/procedures for managing IT assets have not been developed (e.g. guidelines for the re-use or disposal of IT assets that have stored the City's information). We were informed that assets are securely wiped before returning to the lessor, however, the City couldn't provide any records or evidence (e.g. documentation, certificate). The printer inventory (managed independently in a spreadsheet) has not been reviewed since August 2018. 90% of workstations (314 out of 349) managed within the IT asset inventory, do not have asset owner details. We acknowledge asset location details and the Department using the asset are recorded. 	The City should: <ul style="list-style-type: none"> develop and implement appropriate guidelines for the management of IT assets, including their re-use and disposal maintain records of in-house data sanitisation or independent certificates of sanitization, before asset disposals review and migrate printer inventory into its asset management system review and enhance the details of its IT asset inventory, including asset owner. 	The City acknowledges that a review is required for the guidelines in place for the re-use or disposal of assets. The City also acknowledges that most IT assets are leased and returned to the lessor at the end of the lease period. Printers are leased and not identified as City assets, they do have the providers asset stickers affixed.		2021-2022 FY		
Management of users with local administration privileges	Information Technology	Moderate	The City does not have an effective process to manage local administrator accounts. By default, all employees are granted local administrator privileges to their workstations (except on shared devices). These privileges allow individuals to install software and make changes to the system configuration. These privileges also increase the risk of malicious processes being executed. Limiting and restricting administrative privileges is one of the most important control to secure systems. This is also recommended by the Australian Cyber Security Centre as one of the essential 8 controls. The City's corporate risk register does not include any record of this risk or treatment action plan. In addition, the software management system (Microsoft System Centre Configuration Manager) is not appropriately configured to: <ul style="list-style-type: none"> monitor compliance with secure workstation configuration. The following has not been defined: - configuration items - configuration baseline(s) - compliance policies detect and alert if any unauthorised changes to a workstations are made. 	The City should establish an effective process to manage the allocation of local administrator privileges to individuals. This process should make sure that: <ul style="list-style-type: none"> these privileges are formally requested and appropriately approved. Records of requests and approvals must be maintained all users who have been assigned these privileges are regularly reviewed to verify this level of access is appropriate and still required. In addition, the software management system should be appropriately configured to enforce and monitor compliance with secure workstation configuration.	The City allows their valued staff to use their City provided device for personal use. As such, a business decision was made, after considering the risks, to provide local administration accounts to users so they could install software. The City's next generation firewalls will greatly assist the detection of foreign software if it tries to connect to the internet, the City's asset management software will also report on all software installed on any device which can be audited as required. The City will investigate scheduled reporting on software outside of the Standard Operating Environment (SOE), along with updating the corporate risk register with any identified risks, for review by the City's audit and risk committee.		2021-2022 FY		
Information and communications technology (ICT) governance	Information Technology	Minor	We found that there is no appropriate committee or management group to govern and direct the City's ICT and security requirements. We understand that Council reviews and approves ICT projects, however, the City was not able to demonstrate which committee or group is responsible for the City's ICT strategy and security requirements. IT team leaders meet with IT Manager on a monthly basis to review ICT operations and progress of the IT business annual plan. However, other business units' representatives do not attend these meetings.	The City should establish and endorse an appropriate ICT governance committee or assign the responsibilities to another existing suitable group to oversee and direct ICT and security requirements. The committee should consist of senior business and ICT management and convene regularly. In addition, the City should establish an effective ICT governance framework which ensures: <ul style="list-style-type: none"> evaluation of current and future use of ICT preparation and implementation of plans and policies to meet business objectives monitoring conformance to policies, and performance against the plans. 	The City will review the need for an ICT governance framework.		2021-2022 FY		
Information security awareness program	Information Technology	Minor	The City does not have an ongoing information security awareness program for staff and relevant stakeholders. The corporate induction program does not cover information security awareness. IT related training is limited to: <ul style="list-style-type: none"> IT helpdesk services device and supporting tools. We acknowledge that the City's email system randomly reminds users of the potentially harmful content embedded in email, and malicious links found in attachments. Relevant IT staff monitors the automated weekly URL-clicking report and actions accordingly. We were informed that the former e-learning system was turned off in February 2020 and work is in progress to implement a new one.	The City should implement an ongoing information security awareness program, and it should be part of the corporate induction program. The City should also implement procedures to ensure that staff and relevant individuals successfully complete the training. The information security awareness program should be regularly updated to consider changes in policies and any emerging threats. It should also incorporate any lessons learned from information security incidents along with relevant details from information security standards and good practices.	The City is confident that the staff awareness measures in place for malicious links/websites, phishing attempts and impersonation attempts are adequate. The new Learning Management System will provide structured cyber security training to staff when it is implemented in Q3 2020.		2021-2022 FY		
Management of the contract register	Finance	Minor	The City uses an excel spreadsheet to manage its contract register. We identified the following issues: <ul style="list-style-type: none"> access to files is not to secure (e.g. password protection) 2 employees have inappropriate full access to the register logging and monitoring of key transactions and user activity is not in place due to limitations in spreadsheets the contract register does not include final contract dollar value nor total value of approved variations. 	The City should: <ul style="list-style-type: none"> continue to review the use of excel spreadsheet to manage its contract register and implement appropriate controls to protect it complete regular user access reviews for validation based on an assessment of risk, log and monitor critical changes to the contract register review and enhance the structure of its contract register (e.g. record final contract dollar value and contract variations). 	The City will review the management of the contract register.				
Server room management	Information Technology	Minor	We reviewed the process to manage the City's server rooms and identified the following issues: <ul style="list-style-type: none"> There is no generator to maintain power to the primary datacentre (DC) if the primary power source fails. We were informed that a UPS has been installed to provide temporary power following a short term power disruption and will last for up to 5 hours. There is no fire suppression system or fire alarms (e.g. smoke detectors) in place to provide an early warning of a fire breaking out. We acknowledge that temperature sensors/alarms are in place. The one fire extinguisher located inside the primary DC has not been appropriately maintained. Last service maintenance in January 2017. We were informed that the location of the primary DC is temporary due to the undergoing remodelling of the administration centre. The primary DC was temporarily re-located from last quarter of 2018, and it is expected to be relocated back to the remodelled administration centre in December 2020.	The City should: <ul style="list-style-type: none"> review and enhance its mitigation controls to address the risks due to the lack of a power generator and a fire suppression system within its temporary DC regularly maintain fire extinguishers, including the ones located at datacentres. 	The City accepts that there is no fire suppression or generator backup in its temporary data centre, this will be reviewed with the build of the new data centre in Q3 2020. The physical IT systems are well protected from unauthorised access, accidental or deliberate damage with the use of multiple levels of security including CCTV, multiple doors requiring logged user access swipe cards, monitored alarm system, data centre management system and physical infrastructure rack locks.				
Service desk management	Information Technology	Minor	We reviewed service desk management procedures and identified that the City: <ul style="list-style-type: none"> has not developed guidelines to manage, record and report its service desk function (e.g. service requests, incidents, problems) has not implemented service level agreement(s) for the resolution of ICT incidents/problems does not monitor ICT incidents to identify trends and recurring incidents. We reviewed the City's service desk management system (ServiceDesk Plus) and identified that the system does not validate user's assessments against the priority matrix. E.g. the system inappropriately allows the user to assign a low priority rate to a high impact and high urgency rated incident/problem. According to the priority matrix, high impact, high urgency incident/problem must be rated as urgent priority.	The City should develop an appropriate service desk management process. This process should ensure: <ul style="list-style-type: none"> ICT incidents/problems are appropriately and consistently assessed and documented service level agreement(s) for the resolution of ICT incidents are agreed and monitored ICT problems are appropriately identified and investigated. Once the root cause has been identified, appropriate action should be taken to address the problem and prevent the reoccurrence of incidents. 	The City will review the need for an appropriate service desk management process. The City is currently implementing SLA's within its service desk system, Service Desk Plus.				