CITY OF WEST TORRENS



Notice of Committee Meeting

NOTICE IS HEREBY GIVEN in accordance with Sections 87 and 88 of the Local Government Act 1999, that a meeting of the

AUDIT GENERAL COMMITTEE

Members: Councillor J Woodward (Presiding Member), Councillor D Huggett Independent Members: E Moran, A Rushbrook

of the

CITY OF WEST TORRENS

will be held in the Civic Centre 165 Sir Donald Bradman Drive, Hilton

on

TUESDAY, 13 APRIL 2021 at 6.00pm

Public access to the meeting will be livestreamed audio only at the following internet address: <u>https://www.westtorrens.sa.gov.au/livestream</u>

Terry Buss PSM Chief Executive Officer

City of West Torrens Disclaimer

Please note that the contents of this Committee Agenda have yet to be considered by Council and Committee recommendations may be altered or changed by the Council in the process of making the <u>formal Council decision.</u>

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- 1 MEETING OPENED
- 1.1 Evacuation Procedures
- **1.2 Electronic Platform Meeting**
- 2 PRESENT
- 3 APOLOGIES

4 DISCLOSURE STATEMENTS

Committee Members are required to:

- 1. Consider Section 73 and 75 of the *Local Government Act 1999* and determine whether they have a conflict of interest in any matter to be considered in this Agenda; and
- 2. Disclose these interests in accordance with the requirements of Sections 74 and 75A of the *Local Government Act 1999*.

5 CONFIRMATION OF MINUTES

RECOMMENDATION

That the Minutes of the meeting of the Audit General Committee held on 9 February 2021 be confirmed as a true and correct record.

6 COMMUNICATION BY THE CHAIRPERSON

7 PRESENTATIONS

Nil

8 OUTSTANDING REPORTS/ACTIONS

8.1 Open Actions Update

Brief

This report presents an update on the current status of open actions from previous meetings of the Audit General Committee.

RECOMMENDATION

It is recommended to the Committee that it notes the eleven (11) open actions which are currently in progress or complete.

Introduction

A report is presented to each ordinary meeting of the Audit General Committee (Committee) detailing the status of open actions from previous Committee meetings.

Discussion

One (1) action arose from the August 2020 meeting. This action has been completed.

Seven (7) actions arose from the October 2020 meeting. Four of these (4) actions refer to amendments to the Comprehensive Strategic Risk Review process which is due, as per the *Enterprise Risk Management Framework*, to be presented to the Committee at its October 2021 meeting. The remaining three (3) actions have been completed.

An additional three (3) actions arose from the February 2021 meeting with all 3 of these actions being completed.

Further information regarding these actions is provided as an attachment to this report **(Attachment 1)**.

Climate Impact Considerations

(Assessment of likely positive or negative implications of this decision will assist Council and the West Torrens Community to build resilience and adapt to the challenges created by a changing climate.)

There is no direct environmental impact in relation to this report.

Conclusion

This report advises that there are eleven (11) open actions including seven (7) actions marked as complete.

Attachments

1. Open Actions as at 23 March 2021

EMT = Executive Management Team CEO = Chief Executive Officer GMB&CS = General Manager Business & Community Services GMCR = General Manager Corporate & Regulatory GMUS = General Manager Urban Services PLSR = Program Leader Strategic Resilience

April 2021

		Target	RO	Status		Meeting/s where item
		date	2	Actions taken	Status	raised/reported
OPEN ACTIONS						
Review the process of involving the Audit General Committee in the preparation of future budgets and annual business plans	i involving the tee in the udgets and	April 2021	GMCR	Involvement of the Audit General Committee in the preparation of future budgets and annual business plans has been reviewed. In addition to current access to the Budget and Business Plan process information, an overview of the 2021-2022 Budget and Annual Business Plan is being provided to the Committee at its 13 April 2021 meeting. The Committee is welcome to identify any further involvement that is congruent with the Committee's terms of reference.	Completed	August 2020
The inclusion of the inherent risk rating in the summary table contained in the Annual Strategic Risk Review report	herent risk rating contained in the Review report	October 2021	PLSR	Inherent Risk Rating will be added to the Mid-year and Annual Strategic Risk Review	In Progress	October 2020
Detailing in future Strategic Risk Reviews how the effectiveness of the strategic risk controls is determined and who assesses the effectiveness of controls	tegic Risk tiveness of the s determined effectiveness of	October 2021	PLSR	Information regarding how the effectiveness of the strategic risk controls is determined and who assesses the effectiveness of controls will be added to the Mid-year and Annual Strategic Risk Review	In Progress	October 2020

Meeting/s where item

Status

13 April 2021

EMT = Executive Management Team CEO = Chief Executive Officer GMB&CS = General Manager Business & Community Services GMCR = General Manager Corporate & Regulatory GMUS = General Manager Urban Services PLSR = Program Leader Strategic Resilience

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		Target	C	Status		Meeting/s where item
		date	D Y	Actions taken	Status	originaliy raised/reported
4	Include additional controls to mitigate the financial impact of an increasing waste levy in Strategic Risk Review Report Item 12 - Waste Management	October 2021	PLSR	Additional controls to mitigate the financial impact of an increasing waste levy in Strategic Risk Review Report Item 12 - Waste Management will be added as part of the Comprehensive Strategic Risk Review	In Progress	October 2020
2	Include additional controls to mitigate the impact of urban densification in Strategic Risk Review Report Item 11 - Urban Densification	October 2021	PLSR	Additional controls to mitigate the impact of urban densification in Strategic Risk Review Report Item 11 - Urban Densification will be added as part of the Comprehensive Strategic Risk Review	In Progress	October 2020
ບ	Consider the presentation of a report to the Committee, in addition to the WHS audit outcome reports currently presented to the Committee, detailing the organisation's WHS statistics	April 2021	GMCR	Information from the latest WHS and Injury Management quarterly dashboard report will be provided at the 13 April 2021 Committee meeting, subject to Executive approval. Some information may be redacted to avoid distribution of sensitive information.	Completed	October 2020
7	Present a pre-brief to Council on COVID-19 learnings and strategies	April 2021	GMB&CS	Pre-brief presentation held on 16 March 2021.	Completed	October 2020
œ	Present the COVID-19 Learnings from Strategies Implemented - September 2020 report directly to Council for its information following the pre-brief presentation.	April 2021	GMB&CS	Report presented in 16 March 2021 Council agenda.	Completed	October 2020

Page 4

Audit General Committee Open Actions

April 2021

EMT = Executive Management Team CEO = Chief Executive Officer GMB&CS = General Manager Business & Community Services GMCR = General Manager Corporate & Regulatory GMUS = General Manager Urban Services PLSR = Program Leader Strategic Resilience

Meeting/s where item	originaliy raised/reported	Eobrion, 2024	reblualy 202 I	Eahniany 2021				February 2021	
	Status			Completed				Completed	
Status	Actions taken	A presentation on the proposed	scheduled for the 13th April meeting.	Workolan provided in Anril 2021 adenda			Email sent to Committee 11 March 2021	regarding the Elected Member request	process
	D Y			as la				GMB&CS	
Target	date	FCUC Index	April 2021	Anril 2021				April 2021	Teor.
		Present a budget overview presentation to the 13 April 2021	meeting of the Audit General Committee.	Include an 'Audit Committee workplan'	to the Committee Agenda.	Provide an update to the Audit General	Committee on the actions taken to	improve the Elected Member request	process (in lieu of the cancelled internal audit).
		6		10	2				

8.2 Audit General Committee Work Plan

Brief

This report presents the April 2021 to October 2022 Annual Work Plan of the Audit General Committee.

RECOMMENDATION

It is recommended to the Committee that this report be received.

Introduction

At its 9 February 2021 meeting, the Audit General Committee (Committee) requested that a Work Plan for the Committee be included in future agendas.

Discussion

In response to this request, a Work Plan has been developed which identifies the actions and time lines of the Committee for the period April 2021 to October 2022, the conclusion of the current term of the Committee, being ten (10) scheduled meetings.

It is intended that the subsequent Work Plan will commence in February 2023 for a four year period, which will be congruent with the 2023-2027 Audit Plan and the term of the 2023-2027 Committee.

Identified actions are those contained within the Audit General Committee Terms of Reference, established by Council, and with regard to the UK Financial Reporting Council Corporate Governance Code (FRC Code).

The actions and timeframes are indicative only given personnel changes, personnel absences, legislative changes and unexpected events occur throughout each year.

Climate Impact Considerations

(Assessment of likely positive or negative implications of this decision will assist Council and the West Torrens Community to build resilience and adapt to the challenges created by a changing climate.)

There is no direct environmental impact in relation to this report.

Conclusion

This report presents an Audit General Committee Work Plan.

Attachments

1. Audit General Committee Work Plan

Audit General Committee Work Plan 2021 - 2022

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Annual Work Plan	Other											
	Review Committee's Annual Work Plan										Annually	NA
	Open Actions Update										Each meeting	NA

9 **REPORTS OF THE CHIEF EXECUTIVE OFFICER**

9.1 FINANCIAL REPORTING AND SUSTAINABILITY

9.1.1 Financial Reporting

Brief

This report lists those finance related reports which were considered by Council between 21 January 2021 and 17 March 2021.

RECOMMENDATION

It is recommended to the Committee that the Financial Reporting report be received.

Introduction

The Audit General Committee (Committee) is presented with a list, at each of its ordinary meetings, of those finance related reports considered by Council since the Committee's last ordinary meeting. These reports and associated minutes, which are detailed below, are available on Council's website at <u>www.westtorrens.sa.gov.au</u>.

Discussion

2 February 2021 - Council and Committee Meeting

• Fees and Charges 2021-22

16 February 2021 - Council and Committee Meeting

- Creditor Payments
- Credit Card Purchases October to December 2020
- Register of Allowances and Benefits 6 Months to 31 December 2020
- Council Budget Report SEVEN Months to 31 December 2020
- Budget Review December 2020

2 March 2021- Council and Committee Meeting

• Nil

16 March 2021 - Council and Committee Meeting

- Creditor Payments
- Credit Budget Report EIGHT months to 28 February 2021

Climate Impact Considerations

(Assessment of likely positive or negative implications of this decision will assist Council and the West Torrens Community to build resilience and adapt to the challenges created by a changing climate.)

There is no direct environmental impact in relation to this report.

Conclusion

This report lists those finance related reports which were considered by Council between 21 January 2021 and 17 March 2021

Attachments

Nil

9.2 INTERNAL CONTROLS AND RISK MANAGEMENT SYSTEMS

9.2.1 2020-2021 Mid-Year Strategic Risk Review

Brief

This report presents the results of the mid-year strategic risk review for 2020-2021.

RECOMMENDATION

It is recommended to the Committee that the 2020-2021 Mid-Year Strategic Risk Review report be noted.

Introduction

The approved City of West Torrens' Risk Management Framework (Framework), implemented in 2009, subjects its strategic risks register to both a comprehensive annual review as well as a midyear review. In accordance with the Framework, this report presents the mid-year strategic risk review for the Committee's information.

Discussion

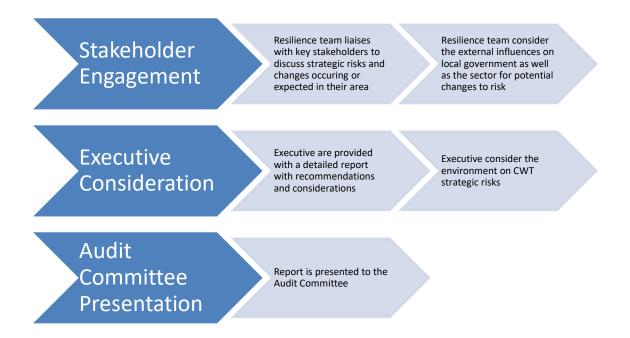
Strategic risks are those risks that impact on the whole organisation rather than an individual department. As such, they are directly managed by the Executive.

The Framework provides that strategic risk identification, analysis and valuation occur annually and reviewed six-monthly. The importance of six-monthly reviews is recognised as an important function in the identification, monitoring and controlling of current, new or emerging strategic risks.

Each of the two scheduled reviews produce different outputs. The first review, a comprehensive review, commences in July/August of each year to account for end of financial year changes such as the new budget, annual reports, strategic plans and any resultant risk profile changes etc. and reviews each strategic risk control. The second review commences in December/January and is a quick update which, while it ensures any changes to the risk ratings, wording/formatting updates etc. are captured, rarely results in any material change to the strategic risk profile.

Strategic Risk Review Process

The process undertaken for this mid-year review is mapped below:



Strategic Risks

As a result of the process above, the Executive has reviewed the organisation's strategic risks and minor amendments have been made. A Current Outlook and Summary of Proposed Changes is attached to this report **(Attachment 1)**. This attachment provides a summary of the key considerations and environmental impacts for each strategic risk, regardless of whether a change is proposed. A complete report including controls has also been prepared (**Attachment 2**).

	2020-2021 Strategic Risks	Proposed Amendments
1	Business Practices	No Change
2	Workforce Management	No Change
3	Stakeholder Relationships	No Change
4	Fraud, Corruption, Misconduct or Maladministration	 Minor descriptor amendment New Descriptor added
5	Information Technology Infrastructure, Threat Protection and Management of Services	No Change
6	Business Continuity and Community Resilience	No Change
7	Emergency Events	No Change
8	Infrastructure Management	No Change
9	Urban Densification	No Change
10	Waste Management	No Change
11	Financial Management, Sustainability and Cost Shifting	 Minor amendment to revised risk rating proposed

An overview of the proposed amendments is below:

Risk Framework

The approved risk analysis matrix (Matrix), which forms part of the AS/NZ ISO 31000 Risk Management (Standard), allocates a risk rating correlated against the likelihood (%) of a risk occurring and the potential subsequent consequence level **(Attachment 3)**.

To assist in the determination of the consequence level, risk consequence descriptors have been approved across a range of risk areas such as financial, reputation, people and WHS **(Attachment 4)**.

The review resulted in one minor change to the overall residual risk ratings of the strategic risks below and further information and discussion can be found in **Attachment 1**.

	2020-2021 Strategic Risk	Likelihood x Consequence	Inherent Risk Rating	Likelihood x Consequence	Revised Risk Rating
1	Business Practices	Likely x Moderate	High	Unlikely x Moderate	Moderate
2	Workforce Management	Likely x Major	Extreme	Unlikely x Major	Moderate
3	Stakeholder Relationships	Likely x Major	Extreme	Unlikely x Major	Moderate
4	Fraud, Corruption, Misconduct or Maladministration	Almost Certain x Catastrophic	Extreme	Unlikely x Moderate	Moderate

5	Information Technology Infrastructure, Threat Protection and Management of Services	Almost Certain x Major	Extreme	Unlikely x Major	Moderate
6	Business Continuity and Community Resilience	Likely x Major	Extreme	Moderate x Moderate	Moderate
7	Emergency Events	Rare x Catastrophic	Moderate	Rare x Catastrophic	Moderate
8	Infrastructure Management	Likely x Major	Extreme	Unlikely x Major	Moderate
9	Urban Densification	Likely x Major	Extreme	Moderate x Moderate	Moderate
10	Waste Management	Moderate x Major	High	Unlikely x Moderate	Moderate
11	Financial Management, Sustainability and Cost Shifting	Likely x Catastrophic	Extreme	Moderate x Major	High

Emerging Risks

As a result of the Mid-Year Strategic Risk Review, the Executive also considered 'emerging risks'. Emerging risks are issues or considerations which are currently on the horizon that may or may not have an impact on Council. Emerging risks may or may not be within the control of the CWT. These have not been risk assessed at this point as they are not concrete in nature, but continue to be monitored.

The emerging risk currently under consideration is:

	2020-2021 Emerging Strategic Risks
1	Significant Legislative reform

Legislative reform is a constant part of operational business at the CWT and is not normally considered to be a strategic risk on its own. However, 2021 brings reform to local government across a broad range of areas which may have significant impact on both the Administration and the Elected Body if the full extent of the proposed changes are realised. The *Statutes Amendment (Local Government Review) Bill 2020* is currently before Parliament with substantial amendments proposed to numerous aspects of council functions. These include, but are not limited to, Audit Committee roles, community engagement, Chief Executive remuneration, Elected Member representation and composition, Elected Member behavioural standards, conflicts of interest and the management of local government elections.

The extent of these amendments, as well as the impact they will have on the CWT is unknown as is if or when the amendments will commence. This emerging risk will be subjected to a substantial review as part of the Comprehensive Strategic Risk Review process in July/August 2021 so no significant amendments were made at this review.

Further the *Planning, Development and Infrastructure Act 2016* has had additional provisions commenced in March 2021. These sections lead to further ambiguity as to the operation of the legislation in a practical environment.

It is also recognised that COVID-19 is still having an impact on the City of West Torrens, the community and some service provision however, it is expected that the COVID-19 vaccination program will provide some relief.

Importantly, the Administration is well prepared in the event that a subsequent wave of infections is realised. This situation is continually monitored as to its impacts across all strategic risks but particular attention is given to the impact on Strategic Risk 2 - Workforce Management, Strategic Risk 6 - Business Continuity and Community Resilience, Strategic Risk 7 - Emergency Events and Strategic Risk 11 - Financial Management, Sustainability and Cost Shifting.

Risk Solutions/Actions

Revised risk ratings of High or Extreme are outside of the CWT's risk tolerance. In this situation, solutions will be identified that, when implemented, will assist to reduce the residual risk level to as low as reasonably practical.

There is currently one strategic risk Strategic Risk 11 - Financial Management, Sustainability and Cost Shifting which has been assessed as High with no risks assessed as Extreme.

Climate Impact Considerations

(Assessment of likely positive or negative implications of this decision will assist Council and the West Torrens Community to build resilience and adapt to the challenges created by a changing climate.)

While the report in and of itself does not contain any direct environmental impacts, Strategic Risks 6, 7, 8, 9 and 11 articulate some of the measures in place to build resilience and/or mitigate the likelihood and consequences of and/or adapt to the changing climate.

Conclusion

This report presents the 2020-2021 Mid-Year Strategic Risk Review. Minor changes resulted from this Review. The annual Comprehensive Strategic Risk Review will commence in July 2021 and a number of amendments are expected at this review.

Attachments

- 1. Mid Year Strategic Risk Review Summary, Status and Outlook
- 2. 2020-2021 Mid-Year Strategic Risk Review Report
- 3. Risk Analysis Matrix
- 4. Consequence Descriptors

2020	/21 Strategic Risk	Description of 2020-21 updates	Page
1	Business Practices	No Change	2
2	Workforce Management	No Change	3
3	Stakeholder Relationships	No Change	5
4	Fraud, Corruption, Misconduct or Maladministration	Minor descriptor amendmentsNew Descriptor added	6
5	Information Technology Infrastructure, Threat Protection and Management of Services	No Change	7
6	Business Continuity and Community Resilience	No Change	8
7	Emergency Events	No Change	9
8	Infrastructure Management	No Change	10
9	Urban Densification	No Change	11
10	Waste Management	No Change	12
11	Financial Management, Sustainability and Cost Shifting	 Minor amendment to revised risk rating proposed 	13

STRATEGIC RISK 1 - BUSINESS PRACTICES

NO CHANGE

Bu	siness Practices;	Strategic Risk Status and Outlook
a)	Inefficient/ineffective practices, procedures or processes that may lead to increased costs, missed opportunities and/or community dissatisfaction with Council, breaches of legislation and/or adverse external agency investigation findings	Current Environment Some uncertainty relating to changes associated with the COVID-19 Pandemic Outlook
b)	Inefficient/ineffective practices, procedures or processes including the failure to provide adequate, accurate and/or timely advice that allows for, contributes to or ultimately leads to poor decisions or outcomes from Administration or Council that do not consider approved or established plans, and/or do not consider service delivery or reputation , and/or are based on political expediency	 Further reviews by external agencies into Local Government sector (e,g Credit card Usage) are likely Legislative amendments causing significant changes to business practices are expected through the <i>Statutes Amendment (Local Government Review)</i> <i>Bill 2020</i> and the commencement of the PDI Act Many practices, processes and procedures have changed as a result of COVID (risk assessments, COVID Plans, controls etc) and these may continue to be amended as vaccines are rolled out and further outbreaks occur Significant changes have occurred to business practices and the underlying processes that support them. It is currently difficult to quantify how long these changes may continue to have an impact, or which of these new processes may continue in some form in the longer term (i.e working from home, electronic council meetings, etc)

Key Considerations

A suggestion has been made to consider amalgamating Risk 1: Business Practices with Risk 3: Stakeholder Relationships. This suggestion was also proposed as part of the 2020 Comprehensive Strategic Risk Review. It is proposed that this be considered at the July 2021 Comprehensive Strategic Risk Review given the significant discussion required regarding this amendment.

Changes

No change is currently proposed to this risk as part of this review.

STRATEGIC RISK 2 - WORKFORCE MANAGEMENT NO CHANGE

Workforce Management;		Strategic Risk Status and Outlook	
a) b)	Inadequate management of staff both on and off site, including working at home/remotely, leading to a reduced overall performance of the organisation. Inability to modify systems and processes for those whose roles are impacted by changes in work processes or not considering	 Current Environment Increasing stability following significant change associated with the COVID-19 Pandemic 	
	the impacted by changes in work processes of not considering processes	Outlook Increased staff interest in working from 	
c)	Inability to attract or retain appropriately skilled staff, and/or lack of succession planning actions or programs leading to a loss of and/or lack of continuity of corporate knowledge and reduced organisational capability and capacity to achieve effective service delivery.	 home beyond COVID and increased normalisation of this practice in the wider business world Potential impacts on workforce management resulting from ongoing Enterprise Bargaining processes 	
d)	Inadequate staff health, welfare or wellbeing programs that impact on staff satisfaction or performance and/or inhibit the successful creation and maintenance of a positive workplace culture.	 Workforce succession planning and stability as many acting appointments are in place Some staff concerns regarding the possibility of staff not being replaced due 	
e)	Resourcing limitations leading to current staff having the inability to undertake, continue or complete tasks as required	to a hiring freeze, internal and external secondments and resulting workloads for remaining staff	
f)	An act or omission by Council (or its contractors) that contributes to the serious injury or death of an employee, contractor, visitor, client of a service, or member of the public.	 Some workplace WHS practices (cleansing hygiene, sick leave provision) may remain following completion of emergency declaration 	
g)	Failure to plan for, or appropriately introduce measures to address/manage WHS issues associated with changes to work processes, including modification of currently performed tasks at current work locations, and/or issues and challenges and benefits experienced of increased use of electronic, remote and/or home based working environments either caused by emergency events or societal and workplace changes.		

The response to COVID-19 has meant that in the short term, and perhaps in some cases permanently, the way work is undertaken has changed (i.e. performing new ways of doing things); from working from home or meeting electronically or quickly innovating new methods of service delivery while ensuring a high level of productivity and retention of service levels.

Staff wellbeing, including mental health, is a significant issue as individuals, families and the wider community continue to deal with anxiety, uncertainty, isolation and limited face to face interaction with others at this time.

Through experience, and the necessity of having to find innovative methods of work, there may also be longer term changes to the how and where we perform work as well as how we interact with others electronically.

Changes

No change is currently proposed to this risk as part of this review.

STRATEGIC RISK 3 - STAKEHOLDER RELATIONSHIPS

NO CHANGE

 Stable - Some procedures and processes have changed (including meeting access and the inability to host larger face to face meetings) but currently effective relationships have been maintained.
 Outlook Stable Legislative amendments causing significant changes to stakeholder relationships are expected through the <i>Statutes Amendment (Local Government Review) Bill 2020</i> and the commencement of the PDI Act
ra

Changes

No change is currently proposed to this risk as part of this review.

STRATEGIC RISK 4 - FRAUD, CORRUPTION, MISCONDUCT OR MALADMINISTRATION

Descriptors have had minor amendments and a new descriptor has been included to reflect the reports and investigations by external agencies.

Fraud, Corruption, Misconduct or Maladministration;	Strategic Risk Status and Outlook	
 a) Inadequate systems, procedures and internal control frameworks that provide opportunities for fraud or corruption by Council staff, contractors, volunteers or Elected Members. b) Inadequate systems, procedures and internal control frameworks that provide opportunities for serious and systemic misconduct or maladministration by Council staff, contractors, volunteers or Elected Members. c) Inadequate systems, procedures and internal control frameworks that provide opportunities for or do not adequately respond, to changes in legislation, Compliance Reports, Audits, Ombudsman and other statutory reports leading to systemic maladministration. 	 Current Environment Stable Outlook Stable but expectation of increased focus on local government from external agencies Planning reform will introduce new systems and procedures which may result in adverse outcomes. e.g. all development assessment data will be held in state-wide, off-site cloud based system which is not controlled by council and may not have the same level of user access restrictions to prevent unauthorised access as Council's existing systems. 	

Key Considerations

With the increased focus from the Ombudsman on Credit Card usage (Burnside) and record keeping (Playford) amongst other reviews, it is proposed that considering is given to a descriptor that reflects the risks involved in the CWT not responding to or responding appropriately to external agency reports, investigations and legislative amendments leading to negative outcomes.

A minor additional amendment is proposed to further clarify the descriptors. It is proposed that one descriptor reflect fraud and corruption, another reflects misconduct and the last descriptor reflects maladministration inclusive of the additional descriptor related to external agency investigation.

Changes

It is proposed that an additional descriptor is added to this risk and minor amendments are made to an existing descriptor.

STRATEGIC RISK 5 - INFORMATION TECHNOLOGY INFRASTRUCTURE, THREAT PROTECTION AND MANAGEMENT OF SERVICES

NO CHANGE

Information Technology Infrastructure, Threat Protection and Management of Services;		Strategic Risk Status and Outlook	
a) b) d)	Damage, long term interruption, or loss of key business information systems and/or the data stored within them, leading to the Council's capacity to provide essential services being severely compromised, reduced in the long term or lost entirely. Inadequate protection from, response to, or management of, Cyber Security and associated threats to Council information, resources or assets Lack of preparation for or not capitalising on expected future technological capabilities or opportunities Failure to properly secure information leading to its misuse or to breaches of legislation	 Current Environment Stable Outlook Stable - all staff have returned to working in the office With the Planning Reform all development assessment data will be held in state-wide, off-site cloud based system which is not controlled by CWT and may not have the same level of user access restrictions to prevent unauthorised access as Council's existing systems. This means CWT has no control if the system fails. ITDR Plan is currently being reviewed 	
	y Considerations s risk will be continually monitored due to increased cyber-attacks.		
Ch	anges		
No	change is currently proposed to this risk as part of this review.		

STRATEGIC RISK 6 - BUSINESS CONTINUITY AND COMMUNITY RESILIENCE NO CHANGE

 business continuity event resulting in damage, long term interruption, or loss of key service centres (Civic, Depot, Library, Thebarton Community Centre) and/or access/availability to/of key staff leading to the CWT's capacity to provide essential services, services being either severely compromised, reduced in the long term or lost entirely. b) The inability to develop concise, specific, robust emergency management plans, and/or to plan, prepare or take adequate and appropriate action to prevent impacts from an emergency event (including natural emergencies such as flooding, and-earthquake or pandemic, as well as deliberate attacks such as terrorism, hostile vehicle attack in crowded places, cyber-crime, etc.) resulting in loss of key infrastructure/ assets/staff, critical service levels and/or ongoing danger to staff or our community. c) Failure to adequately partner with the community and associated community services providers to build resilience programs resulting in delayed or missed opportunities for Council to prepare its community for disruptive events. d) Failure to meet the increasing legislative demands being placed on Local Government with regard to emergency management leading to increased dissatisfaction and not meeting the needs of the community e) Failure to plan for and monitor threats emerging as a result of climate change and other hazards identified via state or local zone emergency planning key Considerations A significant body of work has now commenced to update plans and documents to ensure lessons learnt are transferred into appropriate actions ensuring further stability if a third wave of COVID is experienced in South 	Bu	siness Continuity and Community Resilience;	Strategic Risk Status and Outlook	
 Recovery Plan for community dange of participation and places, cyber-crime, etc.) resulting in loss of key infrastructure/ assets/staff, critical service levels and/or ongoing danger to staff or our community. c) Failure to adequately partner with the community and associated community services providers to build resilience programs resulting in delayed or missed opportunities for Council to prepare its community for disruptive events. d) Failure to meet the increasing legislative demands being placed on Local Government with regard to emergency management leading to increased dissatisfaction and not meeting the needs of the community e) Failure to plan for and monitor threats emerging as a result of climate change and other hazards identified via state or local zone emergency planning Key Considerations A significant body of work has now commenced to update plans and documents to ensure lessons learnt are transferred into appropriate actions ensuring further stability if a third wave of COVID is experienced in South 		business continuity event resulting in damage, long term interruption, or loss of key service centres (Civic, Depot, Library, Thebarton Community Centre) and/or access/availability to/of key staff leading to the CWT's capacity to provide essential services, services being either severely compromised, reduced in the long term or lost entirely. The inability to develop concise, specific, robust emergency management plans, and/or to plan, prepare or take adequate and appropriate action to prevent impacts from an emergency event (including natural emergencies such as	Outlook Stable Strategic Resilience team is at full capacity Community Services are 	
 d) Failure to meet the increasing legislative demands being placed on Local Government with regard to emergency management leading to increased dissatisfaction and not meeting the needs of the community e) Failure to plan for and monitor threats emerging as a result of climate change and and plans 	c)	terrorism, hostile vehicle attack in crowded places, cyber-crime, etc.) resulting in loss of key infrastructure/ assets/staff, critical service levels and/or ongoing danger to staff or our community. Failure to adequately partner with the community and associated community services providers to build resilience programs resulting in delayed or missed	networks and communications with community leaders • Strategic Resilience is amending the Emergency Management suite of documentation	
Key Considerations A significant body of work has now commenced to update plans and documents to ensure lessons learnt are transferred into appropriate actions ensuring further stability if a third wave of COVID is experienced in South		Failure to meet the increasing legislative demands being placed on Local Government with regard to emergency management leading to increased dissatisfaction and not meeting the needs of the community Failure to plan for and monitor threats emerging as a result of climate change and		
transferred into appropriate actions ensuring further stability if a third wave of COVID is experienced in South	Ke			
	tra	nsferred into appropriate actions ensuring further stability if a third wave of COVID is		
Changes	Ch	anges		

No change is currently proposed to this risk as part of this review

STRATEGIC RISK 7 - EMERGENCY EVENTS

NO CHANGE

En	nergency Events	Strategic Risk Status and Outlook	
 a) Damage to privation infrastructure as a solution of the infective command and the infective commanded and the infective community support of the infective community service needs of its command) The inability to eff (including natural pandemic, as well attack in crowdece infrastructure/ as or equipment, and the infective command the infec	Damage to private property, council facilities and/or community infrastructure as a result of Emergency events that impact on the CWT. Ineffective communication with Emergency Control Agencies, Western Adelaide Emergency Management Committee member councils or Functional Support Group(s) resulting in inefficient response and recovery from an emergency hazard. Failure to adequately partner with the community and associated community services providers to respond to and meet the immediate needs of its community during, or responding to, an emergency incident. The inability to effectively respond or recover from an emergency event (including natural emergencies such as flooding, earthquake and pandemic, as well as deliberate attacks such as terrorism, hostile vehicle attack in crowded places, cyber-crime, etc.) resulting in loss of key infrastructure/ assets, loss of key staff, lack of access to council buildings or equipment , and/or the inability to offer critical services to the public	 Current Environment Increasing stability after a 2020 "annus horribilis" Majority of summer period has passed without significant ongoing heat or bushfire issues Outlook Stable with some apprehension regarding a further wave of COVID infections Current La Nina likely to have peaked but effects to continue into autumn (increased rainfall etc) with a return to neutral values following this 	
	and/or prevent/minimise/mitigate ongoing danger to staff or our community.	 Vaccine roll out expected to assist in return to stability across community and organisation 	
	y Considerations		

Changes

No change is currently proposed to this risk as part of this review

STRATEGIC RISK 8 - INFRASTRUCTURE MANAGEMENT

NO CHANGE

Infrastructure Management;	Strategic Risk Status and Outlook
a) Failure to adequately maintain assets (including facilities and property) and infrastructure leading to increased costs, increased damage caused by deterioration or emergency events and increased damage to reputation	 Current Environment Stable A number of developments complete or staged progress underway Outlook Stable although Climate change adaptation and monitoring of changes a concern Asset Management Plans are being reviewed with increased focus on risk management
Key Considerations	·
	nal descriptor as part of the July 2021 Comprehensive Strategi regarding the failure to plan and prepare for infrastructure
Changes	

No change has been made to this risk as part of this review.

RISK 9 - URBAN DENSIFICATION

NO CHANGE

Urban Densification;		Strategic Risk Status and Outlook	
a)	Failure to adequately plan for or implement appropriate systems, programs and process needed as a result of increased demand for and/or change in use of Council infrastructure and assets, services and resources caused by increased density of population and changing community landscape.	Current Environment Continuing volatility due to PDI Act implementation including new processes, systems and community/Council concern Outlook	
b)	Failure to plan for or mitigate the effects of the staged introduction and ongoing day to day management and operation of the Planning Development and Infrastructure Act (PDI) resulting in lack of information and poor service to residents and/or ineffective, inefficient management of planning controls or systems	 Continuing instability Planning reform will introduce new systems and procedures which may result in adverse outcomes. e.g. all development assessment data will be held in state-wide, off-site cloud based system which is not controlled by council and may not have the same level of 	
c)	Failure to facilitate an effective working relationship with the Department for Infrastructure and Transport resulting in lack of effective communication and missed opportunities to advocate on behalf of residents	user access restrictions to prevent unauthorised access as Council's existing systems.	

Key Considerations

The imminent implementation of the PDI Act has resulted in significant instability to this risk. As a result of the new requirements, systems and processes, there will be impacts on waste management, greening and amenity, internal procedures and system implementation as well as the community. There is a significant risk that the new PDI systems and processes will mean that the community is not aware of the impacts to them, their communities or to Council. There are numerous changes to systems and processes related to planning and as many of these are beyond the control of the CWT, there is often little the CWT can do to mitigate the risks.

The COVID-19 pandemic has also raised questions about how we interact with others in the built environment. How do best plan for variants such as appropriately socially distancing when living in very close quarters, and how do we make best use of available public space?

Although this is a realised risk and we have undertaken significant actions to minimise the impact there may be little we can do to mitigate further. CWT have seconded a policy planning officer to Department for Infrastructure and Transport to assist with the Code specifically relating to West Torrens, and we are working with our transition manager for the best outcome for CWT residents. The risk of increased density in significant parts of CWT is high and CWT will continue to educate and work with the Department for Infrastructure and Transport, and advocate on behalf of residents to ensure we are fully informed and Members are briefed.

The community have also been engaged with through a comprehensive communications strategy with communication regarding PDI changes through letters and Talking Points articles, amongst a wide range of communication methods utilised. Staff have also implemented new processes and procedures and completed additional training.

This risk will be reviewed comprehensively during the July 2021 Strategic Risk review with an increased examination of controls as well as the revised risk rating.

Changes

No change is currently proposed to this risk as part of this review

RISK 10 - WASTE MANAGEMENT

NO CHANGE

Waste Management;	Strategic Risk Status and Outlook
 a) Failure to manage the collection and processing of waste (including during emergency events) leading to a loss of control over waste management costs and increased resources going to landfill b) Failure to implement appropriate plans, processes and systems to appropriately manage challenges and/ or capitalise on opportunities presented as a result of changing market conditions including a loss of competitiveness regarding waste management in the local government sector and broader economy. c) Failure to meet community expectations with regard to waste management 	 Current Environment Some instability with changes occurring across the waste sector Outlook Somewhat volatile Waste levy increasing which may lead to consequences such as illegal dumping increases Bans of single use plastics may lead to increase in organics contamination in short term Increased costs in particular to recyclables A continuation of large multi-unit complexes coming on line over the next twelve months leading to increased costs
Key Considerations	
The fallout of limitations around recycling plastics continue. In addition, accelerate the need to promote food waste diversion. Further considera response to COVID-19 with increased take up of working from home opt This risk will also be reviewed comprehensively during the July 2021 Stra examination of controls.	tion is how has the sector changed in ions and increased use of local open spaces.
Changes	

No change is currently proposed to this risk as part of this review

RISK 11 - FINANCIAL MANAGEMENT, SUSTAINABILITY AND COST SHIFTING

Minor amendment to revised risk rating

Financial Management, Sustainability and Cost Shifting;	Strategic Risk Status and Outlook	
 a) Failure to adequately plan, prepare and develop strategies to deal with variations in income caused through emergency events, longer term societal/community trends or changes to State Government policy resulting in the inability to service short, medium or long term commitments leading to financial instability, the need to increase borrowings and ultimately lack of financial sustainability b) Failure to manage costs, or increasing expenditure caused through emergency events, longer term societal/community trends or changes to State Government policy leading to lowering of/loss of service provision the need to increase borrowings and ultimately lack of sustainability 	 Current Environment Some continuing instability Outlook Continuing instability Challenge to control costs will be ongoing with difficult choices sometimes having to be made COVID has presented economic challenges to the community as well as reprioritised costs internally 	

Key Considerations

In addition to the potential changes that are being considered at a State Government level, COVID-19 had led to the loss of income from multiple sources including rates and charges, and the increase in costs to maintain appropriate safety measures both for staff and the community. Considerable time and effort has been placed into ensuring that important services continue to function. This has meant, and means, that on an ongoing basis hard choices and tough decisions will continue to be needed to be made so that the organisation continues to be financially sound. There have also been significant discussion within the sector regarding rate capping, cost shifting (particularly through the waste levy) and impacts of COVID on Adelaide Airport which all contributed to such a high risk rating. There is also a current focus on capital works within the CWT which has put additional pressure on finances as projects commence.

However, the immediate financial impacts of COVID-19 are now settling with some level of financial recovery taking place. It is proposed that the revised risk rating is revisited as a result of the numerous financial related controls that have been put in place including, but not limited to, business vouchers, decreased overtime from staff and the Major Projects Group focusing on project management (including financial project management) to further tighten project expenditure. The impact of COVID on Adelaide Airport Limited (AAL) has also stabilised. Costings have been compiled with COVID related costs not exceeding \$1m as per our Enterprise Risk Framework and therefore, the major consequence descriptor is more fitting.

With uncertainly continuing, a likelihood of Moderate is suggested with ongoing monitoring to continue with possible further adjustment at the July 2021 comprehensive Strategic Risk Review.

Changes

The revised consequence rating is proposed to decrease from **Catastrophic** to **Major** resulting no change to the overall revised risk rating which remains at "High".





Strategic Risk Review Report

City of West Torrens - 2020/21 Mid-Year Review

Print Date: 18-Mar-2021

18-Mar-2021

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INTRODUCTION

The City of West Torrens (CWT) Administration Policy – Enterprise Risk Management Framework provides that risk identification, risk analysis and risk evaluation occur annually and reviewed six monthly. As a result, the Executive Management Team (EMT) review and reports on its strategic risks at six-monthly intervals.

Risk Framework

CWT has adopted the risk analysis matrix (Matrix) which forms part of the AS/NZ ISO 31000 Risk Management (Standard). Use of the matrix allocates a risk rating based on the likelihood (%) and consequence level of a risk occurring. To assist in the determination, consequence descriptors have been approved across a range of risk areas such as financial, reputation, people and WHS.

Revised risk ratings of 'High' or 'Extreme' are outside of the Council's risk tolerance, therefore solutions have been identified that, when implemented, will assist to reduce the residual risk level as low as reasonably practical.

Control Verification process

Controls are verified annually as part of the comprehensive strategic risk review. This review is due for completion by October each year. The comprehensive strategic risk review ensures that through assessment of the controls associated with each risk is undertaken, at least annually, to determine whether each asserted control is tangible or intangible dependent on whether evidence of each asserted control is available. Controls have been provided for each risk within this document including a reference to documented evidence. The evidence collected has been reviewed by desktop process, involving the management team where required.

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STR 1 BUSINESS PRACTICES

Primary Category:	Reputation/Relationships
Responsible Officer:	Pauline Koritsa

Initial		Revised		
Consequence	Moderate	Consequence	Moderate	
Likelihood	Likely	Likelihood	Unlikely	
Risk Rating	High	Risk Rating	Moderate	

Effectiveness of Controls: Satisfactory

Descriptor:

- a) Inefficient/ineffective practices, procedures or processes that may lead to increased costs, missed opportunities and/or community dissatisfaction with Council, breaches of legislation and/or adverse external agency investigation findings
- b) Inefficient/ineffective practices, procedures or processes including the failure to provide adequate, accurate and/or timely advice that allows for, contributes to or ultimately leads to poor decisions or outcomes from Administration or Council that do not consider approved or established plans, and/or do not consider service delivery or reputation, and/or are based on political expediency

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STR 2 WORKFORCE MANAGEMENT

Primary Category:	People
Responsible Officer:	Pauline Koritsa

Initial Revised Consequence Major Consequence Major Likelihood Likely Likelihood Unlikely Risk Rating Extreme Risk Rating Moderate

Effectiveness of Controls: Satisfactory

Descriptor:

- a) Inadequate management of staff both on and off site, including working at home/remotely, leading to a reduced overall performance of the organisation.
- b) Inability to modify systems and processes for those whose roles are impacted by changes in work processes or not considering the impact on staff of those accompanying changes in work processes
- c) Inability to attract or retain appropriately skilled staff, and/or lack of succession planning actions or programs leading to a loss of and/or lack of continuity of corporate knowledge and reduced organisational capability and capacity to achieve effective service delivery.
- d) Inadequate staff health, welfare or wellbeing programs that impact on staff satisfaction or performance and/or inhibit the successful creation and maintenance of a positive workplace culture.
- Resourcing limitations leading to current staff having the inability to undertake, continue or complete tasks as required
- f) An act or omission by Council (or its contractors) that contributes to the serious injury or death of an employee, contractor, visitor, client of a service, or member of the public.
- g) Failure to plan for, or appropriately introduce measures to address/manage WHS issues associated with changes to work processes, including modification of currently performed tasks at current work locations, and/or issues and challenges and benefits experienced of increased use of electronic, remote and/or home based working environments either caused by emergency events or societal and workplace changes.

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STR 3 STAKEHOLDER RELATIONSHIPS

Primary Category:	Reputation/Relationships	
Responsible Officer:	Pauline Koritsa	

Initial		Revised		
Consequence	Major	Consequence	Major	
Likelihood	Likely	Likelihood	Unlikely	
Risk Rating	Extreme	Risk Rating	Moderate	

Effectiveness of Controls: Satisfactory

Descriptor:

a) A breakdown in the effective working relationships between Council/Administration and relevant stakeholders leading to a loss of confidence in the CWT

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STR 4 FRAUD, CORRUPTION, MISCONDUCT OR MALADMINISTRATION

Primary Category:	Reputation/Relationships	
Responsible Officer:	Pauline Koritsa	

Initial		Revised		
Consequence	Catastrophic	Consequence	Moderate	
Likelihood	Almost certain	Likelihood	Unlikely	
Risk Rating	Extreme	Risk Rating	Moderate	

Effectiveness of Controls: Satisfactory

Descriptor:

- a) Inadequate systems, procedures and internal control frameworks that provide opportunities for fraud or corruption by Council staff, contractors, volunteers or Elected Members.
- b) Inadequate systems, procedures and internal control frameworks that provide opportunities for serious and systemic misconduct by Council staff, contractors, volunteers or Elected Members.
- Inadequate systems, procedures and internal control frameworks that provide opportunities for, or do not adequately respond, to changes in legislation, Compliance Reports, Audits, Ombudsman and other statutory reports leading to systemic maladministration.

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STR 5 INFORMATION TECHNOLOGY INFRASTRUCTURE, THREAT PROTECTION AND MANAGEMENT OF SERVICES

Primary Category:	Organisation/Customer Impact	
Responsible Officer:	Pauline Koritsa	

Initial		Revised		
Consequence	Major	Consequence	Major	
Likelihood	Almost certain	Likelihood	Unlikely	
Risk Rating	Extreme	Risk Rating	Moderate	

Effectiveness of Controls: Satisfactory

Descriptor:

- a) Damage, long term interruption, or loss of key business information systems and/or the data stored within them, leading to the Council's capacity to provide essential services being severely compromised, reduced in the long term, or lost entirely.
- b) Inadequate protection from, response to, or management of, Cyber Security and associated threats to Council information, resources, or assets.
- c) Lack of preparation for or not capitalising on expected future technological capabilities or opportunities.
- d) Failure to properly secure information leading to its misuse or to breaches of legislation

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STR 6 BUSINESS CONTINUITY AND COMMUNITY RESILIENCE

Primary Category:	Organisation/Customer Impact
Responsible Officer:	Pauline Koritsa

 Initial
 Revised

 Consequence
 Major
 Consequence
 Moderate

 Likelihood
 Likely
 Likelihood
 Moderate

Effectiveness of Controls: Some

Weaknesses

Descriptor:

- a) The inability to respond, recover, restore and resume business as usual during a business continuity event resulting in damage, long term interruption, or loss of key service centres (Civic, Depot, Library, Thebarton Community Centre) and/or access/availability to/of key staff leading to the CWT's capacity to provide essential services, services being either severely compromised, reduced in the long term or lost entirely
- b) The inability to develop concise, specific, robust emergency management plans, and/or to plan, prepare or take adequate and appropriate action to prevent impacts from an emergency event (including natural emergencies such as flooding, earthquake or pandemic, as well as deliberate attacks such as terrorism, hostile vehicle attack in crowded places, cyber-crime, etc.) resulting in loss of key infrastructure/ assets/staff, critical service levels and/or ongoing danger to staff or our community
- c) Failure to adequately partner with the community and associated community services providers to build resilience programs resulting in delayed or missed opportunities for Council to prepare its community for disruptive events
- d) Failure to meet the increasing legislative demands being placed on Local Government with regard to emergency management leading to increased dissatisfaction and not meeting the needs of the community
- e) Failure to plan for and monitor threats emerging as a result of climate change and other hazards identified via state or local zone emergency planning

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STR 7 EMERGENCY EVENTS

Primary Category:	Organisation/Customer Impact
Responsible Officer:	Pauline Koritsa

<u>Initial</u>		Revised		
Consequence Catastrophic		Consequence	Catastrophic	
Likelihood Rare		Likelihood	Rare	
Risk Rating	Moderate	Risk Rating	Moderate	

Effectiveness of Controls: Satisfactory

Descriptor:

- a) Damage to private property, council facilities and/or community infrastructure as a result of Emergency events that impact on the CWT.
- b) Ineffective communication with Emergency Control Agencies, Western Adelaide Emergency Management Committee member councils or Functional Support Group(s) resulting in inefficient response and recovery from an emergency hazard.
- c) Failure to adequately partner with the community and associated community services providers to respond to and meet the immediate needs of its community during, or responding to, an emergency incident.
- d) The inability to effectively respond or recover from an emergency event (including natural emergencies such as flooding, earthquake and pandemic, as well as deliberate attacks such as terrorism, hostile vehicle attack in crowded places, cyber-crime, etc.) resulting in loss of key infrastructure/ assets, loss of key staff, lack of access to council buildings or equipment, and/or the inability to offer critical services to the public and/or prevent/minimise/mitigate ongoing danger to staff or our community.

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STR 8 INFRASTRUCTURE MANAGEMENT

Primary Category:	Budget/Financia
Responsible Officer:	Pauline Koritsa

Initial		Revised		
Consequence	Major	Consequence	Major	
Likelihood	Likely	Likelihood	Unlikely	
Risk Rating	Extreme	Risk Rating	Moderate	

Effectiveness of Controls: Satisfactory

Descriptor:

a) Failure to adequately maintain assets (including facilities and property) and infrastructure leading to increased costs, increased damage caused by deterioration or emergency events and increased damage to reputation

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STR 9 URBAN DENSIFICATION

Primary Category:	Organisation/Customer Impact
Responsible Officer:	Pauline Koritsa

Major	Consequence	Moderate
ikely	Likelihood	Moderate
reme	Risk Rating	Moderate
	viajor Likely reme	Likely

Effectiveness of Controls: Some Weaknesses

Descriptor:

- a) Failure to adequately plan for or implement appropriate systems, programs and process needed as a result of
 increased demand for and/or change in use of Council infrastructure and assets, services and resources caused by
 increased density of population and changing community landscape.
- b) Failure to plan for or mitigate the effects of the staged introduction and ongoing day to day management and operation of the Planning Development and Infrastructure Act (PDI) resulting in lack of information and poor service to residents and/or ineffective, inefficient management of planning controls or systems
- c) Failure to facilitate an effective working relationship with the Department for Infrastructure and Transport resulting in lack of effective communication and missed opportunities to advocate on behalf of residents

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STR 10 WASTE MANAGEMENT

Primary Category:	Budget/Financial
Responsible Officer:	Pauline Koritsa

	Revised			
Major	Consequence	Moderate		
Moderate	Likelihood	Unlikely		
High	Risk Rating	Moderate		
		Major Consequence Likelihood	Major Consequence Moderate Moderate Likelihood Unlikely	

Effectiveness of Controls: Satisfactory

Descriptor:

- a) Failure to manage the collection and processing of waste (including during emergency events) leading to a loss of control over waste management costs and increased resources going to landfill
- b) Failure to implement appropriate plans, processes and systems to appropriately manage challenges and/ or capitalise on opportunities presented as a result of changing market conditions including a loss of competitiveness regarding waste management in the local government sector and broader economy
- c) Failure to meet community expectations with regard to waste management

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STR11 FINANCIAL MANAGEMENT, SUSTAINABILITY AND COST SHIFTING

Primary Category:	Budget/Financial
Responsible Officer:	Pauline Koritsa

Initial		<u>Revised</u>			
Consequence	Catastrophic	Consequence	Major		
Likelihood	Likely	Likelihood	Moderate		
Risk Rating	Extreme	Risk Rating	High		

Effectiveness of Controls: Satisfactory

Descriptor:

- a) Failure to adequately plan, prepare and develop strategies to deal with variations in income caused through emergency events, longer term societal/community trends or changes to State Government policy resulting in the inability to service short, medium or long term commitments leading to financial instability, the need to increase borrowings and ultimately lack of financial sustainability
- b) Failure to manage costs, or increasing expenditure caused through emergency events, longer term societal/community trends or changes to State Government policy leading to lowering of/loss of service provision the need to increase borrowings and ultimately lack of financial sustainability

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When assessing risk the likelihood and consequence must be correlated using the risk matrix detailed below for both negative or positive risks,

	ш	ш	I	I	Σ	gnibnst stuO
⁻ acilitate iences	ш	ш	т	Σ	Σ	Najor
Enhance/Promote/Facilitate Positive Consequences	т	т	Ð	Ð	4	Moderate
Enhance/ Positiv	Σ	Σ	Ð	L	-	Minor
	Ð		3	L	H	tnsoifingienl
ГІКЕГІНООД	Almost Certain > 95% chance of occurring	Likely 75% - 95% chance of occurring	Moderate 25% - 75% chance of occurring	Unlikely 5% - 25% chance of occurring	Rare < 5% chance of occurring	Scale
	Σ	Ţ.		э.	-	tnsoifingienl
lanage Jences	Σ	Σ	Σ	L	٦	Minor
Prevent/Reduce/Manage Negative Consequences	т	т	Μ	Μ		Moderate
Preven	ш	ш	н	M	×	Najor
	ш	ш	т	I	M	Catastrophic

Rating	Financial	Organisational/ Customer Impact	Reputation/ Relationships Damage	People	SHM
Insignificant	≤ 5% reduction in revenue Theft or loss of up to \$2,000	Lack of response to customer request 3 days later than deadline Inability to provide service/s for 1 day External enquiry agency request for information	Letters of complaint to general managers or managers	≥ 10% staff turnover per year ≤ 10% non- availability of staff at any one time	Bump, minor bruise, removal of splinters etc. requiring no treatment (report only) to staff members Or To members of the public due to the actions/omissions of work undertaken by CWT
Minor	Between 6 and 10% variation in expenditure/ revenue Theft or loss between \$2001 to \$30,000	Lack of response to customer request 5 week later than deadline Inability to provide a service for 2 working days Ombudsman/Ministerial investigation commenced.	Letters of complaint to CEO/Mayor or letters to Messenger/Advertiser	≥ 15% staff turnover per year ≥ 15% non- availability of staff at any one time	First aid treatment including; Hot cold treatment, removal of splinters, covering wounds, removal of foreign bodies in the eye using eye wash or cotton swab, administering non- prescription medication to staff members Or To members of the public due to the actions/omissions of work undertaken by CWT Or Or Or Incident where potential for minor injury may occur

Rating	Financial	Organisational/ Customer Impact	Reputation Relationships	People	SHW
Moderate	Between 11 and 15% variation in expenditure/revenue Theft or loss of between \$30,001 and \$100,000	Lack of response to customer request 10 working days later than deadline Inability to provide all services for more than 24 hours Inability to provide one service for ≥ 5 -days Ombudsman/Ministerial investigation finds systemic weaknesses in organisational processes ICAC investigation commenced	Negative article in Messenger/Advertiser.	≥ 20% permanent staff turnover per year ≥ 20% non- availability or capability of staff at any one time	Medically treated injury requiring clinic or hospital treatment less than 24 hours duration, installing a drip or iv, physiotherapy as a cure, applying a cast , surgery, prescription drugs, stitching a wound to staff members Or To members of the public due to the actions/omissions of work undertaken by CWT Incident where potential for moderate injury may occur Notifiable incident to SafeWork SA or Office of the Technical Regulator (OTR) Category 1 - Breach of Duty for reckless conduct
Major	Between 16 and 40% variation in expenditure/revenue Theft or loss of between \$100,001 and \$1m	Lack of response to customer request 20 working days later than deadline Inability to provide one service for ≥ 20 working days Inability to provide all services for ≥ 48 hours.	Negative front page story in Messenger/Advertiser.	≥ 40% permanent staff turnover per year ≥ 40% non- availability or capability of staff at any one time	Major injury resulting in limb loss, electrocution, permanently disability, blindness to staff members Or To members of the public due to the actions/omissions of work undertaken by CWT

Rating	Financial	Organisational/ Customer Impact	Reputation Relationships	People	SHW
		Ombudsman/Ministerial review results in termination of staff/major			Incident where potential for major injury may occur
		changes to systems and processes			Notifiable incident to SafeWork SA or Office of the
		Employee(s)/Elected Members charged with			Technical Regulator (OTR)
		corruption and referred to DPP for prosecution			Category 2 Breach of Duty
		Inability to provide critical Council services (Waste, HACC, St	Follow up stories in any media that extend the scope of concern.	≥ 50% permanent staff turnover per year	The work related death of an employee
Catastronhic	≥ 40% variation in expenditure/revenue.	Maruns, dog attack response) for ≥ 5 working days		≥ 50% non-	The death of a person due to CWT negligence
	Theft or loss of >\$1m.	Ministerial abolition of Council		availability or capability of staff at any one time	Notifiable incident to SafeWork SA or OTR)
		Employee(s)/Elected Member(s) found guilty of corruption			Category 3 Breach of Duty

9.3 INTERNAL AUDIT

9.3.1 2020-2021 Internal Audit Program Update

Brief

This report presents the 2020-2021 Internal Audit Program Update.

RECOMMENDATION

It is recommended to the Committee that 2020-2021 Internal Audit Program Update report be noted.

Introduction

At its April 2019 meeting, the Audit General Committee (Committee) noted the approved 2018-2022 Internal Audit Plan (Plan).

Each year the Plan is extrapolated into an annual Internal Audit Program (Program) with an update on the current status of the Program presented to each meeting of the Committee.

Discussion

Below is a summary of the current status of all planned audits contained in the 2020-2021 Program, as at 22 March 2021. However, the full Program update is attached for further information (Attachment 1).

Audit Status	Number
In Progress	3
Completed	2
Not yet commenced	3
Cancelled	1
New Audits Added	0
Total Audits Programmed (excluding staged audits)	9
Audit Status (Staged Audits)	Number
Staged Audits Complete	0
Staged Audits in Progress or Next Stage Not Started	0
Not yet commenced	2
Total Staged Audits	2
Total Audits	11

During the first half of this financial year, the impacts of the COVID-19 pandemic continued to impact the ability for Audit to coordinate and undertake audits given the audit function is also jointly responsible for business continuity and emergency management, with the ongoing need for significant resources to be directed to the ongoing response and associated recovery efforts of COVID-19 across the organisation.

The delay in the commencement of the *Planning and Design Code* has also delayed the start of the first stage of the *Planning, Design and Infrastructure Act 2016* legislative compliance audit. As such, this has been rescheduled to a later date when the Code has been 'bedded down'.

Audit Scopes

- 1. The *Flooding Mitigation Preventative and Corrective Controls* audit is currently underway. A scope has been approved and attached to this report for information (Attachment 2).
- 2. The *WHS Training and Education* audit is currently underway. A scope has been approved and attached to this report for information **(Attachment 3)**.
- 3. The Explations, Fines and Enforcements Local Nuisance and Litter Control Act 2016 (SA) audit is currently underway. A scope has been approved and attached to this report for information (Attachment 4). The scope has combined two audits over two separate audit programs in an effort to reduce the impact on budget and improve efficiency in the internal audit program. There were currently two Regulatory Services department focused audits scheduled for the next 12 months. The first was an explations, fines and enforcements audit, intended to focus on all areas of explation and enforcements across Regulatory Services, and the second was an audit on the Local Nuisance and Litter Control Act. This scope has been drafted to combine these two planned audits.

Climate Impact Considerations

(Assessment of likely positive or negative implications of this decision will assist Council and the West Torrens Community to build resilience and adapt to the challenges created by a changing climate.)

There is no direct environmental impact in relation to this report.

Conclusion

COVID-19 continued to have an impact on the implementation of the *Internal Audit Program 2020-21* particularly during the first half of the financial year. However, overall, five (5) of the eleven (11) planned audits (45%) are in progress or have been completed as at the conclusion of the second guarter of the 2020/21 financial year.

Attachments

- 1. Internal Audit Program Update as at 22 March 2021
- 2. Flooding Mitigation Preventative and Corrective Controls Internal Audit Scope
- 3. WHS Training and Education Internal Audit Scope
- 4. Expiations, Fines and Enforcements Local Nuisance and Litter Controls Act 2016 Internal Audit Scope

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Report as at 22 March 2021

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t and Regulations This audit will review the legislative June 2021 Not entation (Stage 2) compliance of the CWT development processes as well as provide an assurance audit on the supporting frameworks in place such as delegations, authorisation, policies, procedures and plans.	Statu	is of 2020/2021 Internal Au	dits			
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nts	2	This is stage 2 of the two stage audit process.		Audit Scope drafted and presented to the August 2020 Committee meeting. Opening Meeting held August 2020 Closing meeting held December 2020 Report presented as part of this Agenda	Audit Scope drafted and presented to the April 2021 Committee meeting.	Audit cancelled July 2020 due to budgetary constraints	
Comments		• This		Audi Com Com Coei Repc	• Com	• Audi	-
Status	018143			Complete	In Progress	Cancelled	Cancelled
Due Date	רמר המור			April 2021	June 2021	January 2021	Deferred
Audit Ohiectives				The objectives of the audit are to determine whether the current processes (both in design and operation), relating to the programming and follow up of swimming pool inspections by the CWT, are robust and comply with the State Coroner's recommendations as well as the <i>Development Act</i> 1993 and will meet the requirements of the <i>Planning, Development</i> and <i>Infrastructure Act</i> 2016 and associated Regulations.	This audit seeks to review the CWT Hazard Plan regarding flooding to assess the PPRR measures in place regarding flooding to ensure the city is appropriately prepared for flooding.	The Office of the CEO and Mayor receive numerous requests from Elected Members but it is acknowledged that requests are provided to numerous departments directly. This audit seeks to review the process for ensuring elected member requests are dealt with in a timely, correct and appropriate manner given the risks identified regarding advice provision.	In Progress Complete Defe
Internal Audit			Assurance Audits	Swimming Pool Inspections - Development Act 1993	Flooding controls and prevention	Elected member requests	Not Started
Audit	No.		Assura	2	m	4	

13 April 2021

2020/21 Internal Audit Program

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Audit General Committee Agenda

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highlighted in numerous WHS audits that this is an important factor in ensuring that WHS is an ongoing concern.		Education	overall WHS culture at the CWT. It has been			Committee meeting.
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an ongoing concern.			is an important factor in ensuring that WHS is			
			an ongoing concern.			

Cancelled	Deferred	Complete	In Progress	Not Started
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Internal Audit Scope

Flooding Mitigation - Preventative and Corrective Controls

Introduction

The City of West Torrens (CWT) is situated in a flood prone area and the risk of flooding is well understood and contained within the CWT's strategic risk register and asset management plans.

Given that floods are considered an inevitability rather than a possibility, the CWT seeks to ensure community safety by mitigating the likleihood or consequences of flooding at various projected severity levels.

The approved Audit Program 2019-22 provides for an assurance audit to be undertaken reviewing the measures in place to ensure the CWT is appropriately prepared for and/or minimising the impacts of flooding.

Audit Scope and Objectives

This audit seeks to review and evaluate the effectiveness of flooding mitigation strategies including preventitive and corrective controls in place for the CWT.

In particular the audit is to address whether:

- The flood mitigation strategies adopted by the CWT reduce exposure to flood damage
- The flood mitigation strategies minimise consequences of flood damage within the CWT
- The drainage infrastraure asset management practices adopted by the CWT optimise the useful life and service capabilities of the its' assets
- The climate mitigation and adaption initiatives specifically relate to flooding undertaken by the CWT and AdaptWest are effective at reducing the CWTs' exposure to flooding risk.

The documentation to be considered includes, but is not limited to:

- Emergency Management documentation as it relates to flood management and response including the Flood Hazard Plan.
- Strategic Risk documentation
- CWT Development Plan 2018
- Drainage network records
- Asset Management Plans
- AdaptWest Plan and Program
- Strategic Management Plans including but not limited to Brown Hill Keswick Creek Strategic Management Plans.

This audit specifically excludes:

• Review of and commentary on the general suite of CWT emegency management documents and plans unless agreed otherwise.

Approach

In performing this audit, the following will be undertaken:

- 1. An opening meeting will be held with relevant managers where the Auditor will discuss the scope and overview of work to be performed prior to the commencement of testing.
- 2. Interviews to be conducted by the Auditor with managers and staff responsible for flood mitigation, to establish any issues, concerns or opportunities for improvements.
- 3. Sampling and testing for compliance with policies, procedures, plans, and other relevant documentation to ensure the effectiveness of flood mitigation strategies and the associated controls.

The Audit is to be informed by relevant best industry documentation, better practice models and guidelines in relation to flood mitigation including but not limited to any relevant ISO's and Australian/New Zealand (ANZ) Standards.

The Audit is to be assessed by the Auditor and findings/issues must be risk assessed and rated pursuant to CWT's Enterprise Risk Management Framework and that recommendations are reported as:

- Extreme risk recommendations
- High risk recommendations
- Moderate risk recommendations
- Low risk recommendations
- Better practice or improvement recommendations

Risks

Potential risks associated with this internal audit include, but are not limited to:

Strategic Risk 6 - Business Continuity and Community Resilience	Strategic Risk 7 - Emergency Events
 a) The inability to respond, recover, restore and resume business as usual during a business continuity event resulting in damage, long term interruption, or loss of key service centres (Civic, Depot, Library, Thebarton Community Centre) and/or access/availability to/of key staff leading to the CWT's capacity to provide essential services, services being either severely compromised, reduced in the long term or lost entirely 	 a) Damage to private property, council facilities and/or community infrastructure as a result of Emergency events that impact on the CWT. b) Ineffective communication with Emergency Control Agencies, Western Adelaide Emergency Management Committee member councils or Functional Support Group(s) resulting in inefficient response and recovery from an emergency hazard.

d) Failure to meet the increasing

planning

legislative demands being placed on Local Government with regard to emergency management leading to increased dissatisfaction and not meeting the needs of the community

e) Failure to plan for and monitor threats emerging as a result of climate change and other hazards identified via state or local zone emergency

b) The inability to develop concise, c) Failure to adequately partner with the community and associated community specific, robust emergency management plans, and/or to plan. services providers to respond to and prepare or take adequate and meet the immediate needs of its appropriate action to prevent impacts community during, or responding to, an from an emergency event (including emergency incident. natural emergencies such as flooding, earthquake or pandemic, as d) The inability to effectively respond or well as deliberate attacks such as recover from an emergency event terrorism, hostile vehicle attack in (including natural emergencies such as crowded places, cyber-crime, etc.) flooding, earthquake and pandemic, as resulting in loss of key infrastructure/ well as deliberate attacks such as assets/staff, critical service levels terrorism, hostile vehicle attack in and/or ongoing danger to staff or our crowded places, cyber-crime, etc.) community resulting in loss of key infrastructure/ assets, loss of key staff, lack of access to c) Failure to adequately partner with the council buildings or equipment, and/or the inability to offer critical services to the community and associated community services providers to build public and/or prevent/ minimise/ mitigate resilience programs resulting in ongoing danger to staff or our delayed or missed opportunities for community. Council to prepare its community for disruptive events

General Administration

This audit will be performed by TBA.

Opening meeting	ТВА
Commence fieldwork	TBA
Draft report to Management	ТВА
Closing meeting and final report	TBA

Sign Off

I have read the above Internal Audit Assignment Plan and I am satisfied the objectives and scope meet the expectations for this audit.

Signed

PHA, -

General Manager Business and Community Services

Date 18 March 2021



Internal Audit Scope

WHS Training and Education

Introduction

The City of West Torrens (CWT) is committed to providing safe systems of work and a safe, healthy work environment for all workers, as well as members of the community who may be affected by our business operations.

To assist in facilitating these processes CWT has put in place policy and procedures that provide a consistent approach for work health and safety training that ensures workers are competent to perform their tasks and duties safely, and that legislative requirements are met across all worker occupied sites.

With a key driver for CWT being that "We put safety first in all we do", the approved 2019-2022 Internal Audit Program provides for an internal audit to review the adequacy and effectiveness of WHS training and education.

Section 19 (f) of the *South Australian Work Health and Safety Act 2012* states that a primary duty of care for a person conducting a business or undertaking (PCBU) is:

the provision of any information, training, instruction or supervision that is necessary to protect all persons from risks to their health and safety arising from work carried out as part of the conduct of the business or undertaking;

Amongst the challenges for any WHS training program is how to manage the occasional disconnect between what is learnt and the retention and application of that information, as well as the appropriateness of methods used in the training delivery.

Audit Scope and Objectives

The objective of this audit is to evaluate and report on whether the current processes (both in design and operation) which support the CWT WHS Training and Education Program are both appropriate and effective and if further opportunity exists for improvement.

The audit will consider adherence to policy and legislation with regard to the WHS Training and Education Program whilst examining the CWT approach to the development of training packages, completion of training, measurement of competency, record keeping/documentation and refreshers.

To assist in strengthening the strategic focus of the audit and allow for effective sample documentation and review, an area of focus will be agreed with the Work Health Safety Coordinator prior to the commencement of the audit. (i.e. outdoor workers, high risk plant etc.)

The review of WHS Training and Education processes may include, but is not limited to:

- Compliance with the appropriate sections *South Australian Work Health and Safety Act and Regulations 2012* and any other applicable legislation or statutory requirements
- Adequacy of the current Administration Policies relating to WHS Training and Education
- The adequacy and effectiveness of CWT processes relating to WHS Training and Education including ongoing monitoring review and continuous improvement,
- Identified opportunities for the introduction of better practices and process improvement

The Audit is to be informed by relevant legislation and best practice industry documentation, any better practice models and guidelines or relevant ISO's and Australian Standards as well as any relevant internal documents, policies and procedures including (but not limited to):

- WHS and Injury Management Lead Policy
- Strategic WHS and IM Improvement Plan 2020-2025
- Administration Policy: WHS Induction and Training
- WHS Organisational Identified Training Needs Register
- WHS Training Plan
- WHS Training Calendar
- WHS training attendance records
- WHS Organisational Calendar of Events
- WHS and IM Quarterly Performance Dashboard Reports.

This audit specifically excludes

- WHS Training and Education provided by contractors to their own staff
- All other training (e.g. Human Resources training etc.) which is not identified within the WHS Organisational Identified Training Register

Although this audit will be infomed by relevant legislation and applicable performance standards including *South Australian Work Health and Safety Act and Regulations 2012* and WHS PSSI (*Performance Standards for Self-Insurers*) it is not intended to be a full complaince review of WHS Training and Education against legislative requirements and sector/industry standards but rather a review of CWT Training and Education process and procedure.

Approach

In performing this audit, the following will be undertaken:

- 1. An opening meeting will be held with relevant managers and key stakeholders at which the Auditor will discuss the scope and overview of work to be performed prior to the commencement of testing.
- 2. A desktop audit of current documentation and relevant processes relating to the WHS Training and Education Program including a review of a selection of training course documentation and information
- Interviews will be conducted with managers and staff responsible for conduct of training as well as a selected sample of those that have completed training, to establish any issues, concerns or opportunities for improvements.
- Review for compliance with current legislation, policies, procedures, plans, and other relevant documentation to ensure the effectiveness of the WHS Training and Education process.

Given the current impacts and potential restrictions imposed as a result of the COVID 19 Pandemic it may be necessary for aspects of this audit to be conducted via nontraditional or electronic means, ZOOM is preferred.

The audit is to be assessed and findings/issues must be clarified in accordance with a risk rating consistent with Council's *Enterprise Risk Management Framework* so that recommendations are reported as:

- Extreme risk recommendations
- High risk recommendations
- Moderate risk recommendations
- Low risk recommendations
- Better practice or improvement recommendations

Risks

Potential risks associated with a failure to manage the risk effectively as identified by Internal Audit include, but are not limited to:

- Death or injury to a person, serious or otherwise
- Negligence litigation and subsequent financial and reputational risks
- Investigation by external inquiry agency re systemic maladministration or misconduct
- Non-compliance or adherence to legislative or governance requirements
- Failure to implement better practice

General Administration

The audit will be performed by a selected WHS Internal Audit Contractor.

Opening meeting	TBA
Commence fieldwork	TBA
Draft report to Management	TBA
Closing meeting and final report	TBA

Sign Off

I have read the above Internal Audit Assignment Plan and I am satisfied the objectives and scope meet the expectations for this audit.

DKA.

Pauline Koritsa General Manager Business and Community Services

Date: 5 March 2021



Internal Audit Scope

Expiations, Fines and Enforcements -Local Nuisance and Litter Control Act 2016 (SA)

Introduction

The effective management of explations, fines and enforcements plays a role in allowing the CWT to achieve objectives, maintain a strong reputation, and provide enhanced and supportive services to community. Thus, it is essential that this process is managed in a consistent, compliant and appropriate manner to ensure the most beneficial outcomes for the organisation and the customer.

The approved Audit Program 2019-22 provides for a legislative compliance audit to be undertaken by a legal auditor reviewing the City of West Torrens' compliance with fine and explation handling within the legislative framework of the *Local Nuisance and Litter Control Act 2016* (SA) and associated Regulations.

Audit Scope and Objectives

This audit is to review the processes for issuing, reviewing, monitoring and waiving of infringements by Regulatory Services pursuant to the *Local Nuisance and Litter Control Act 2016* (SA) and associated Regulations. Specifically, this audit seeks to review the expiations, fines and enforcement processes associated with local nuisance and litter control.

The objectives of this audit are:

- Determine conformance with relevant legislation in relation to expiations, fines and enforcement under the *Local Nuisance and Litter Control Act 2016* (SA) and associated Regulations;
- Determine conformance with relevant internal controls, processes, procedures and documentation in relation to explations, fines and enforcement under the *Local Nuisance and Litter Control Act 2016* (SA) and associated Regulations;
- Review internal controls, processes and procedures to ensure compliance with relevant legislation in relation to explations, fines and enforcement under the *Local Nuisance and Litter Control Act 2016* (SA) and associated Regulations;
- Evaluate whether existing controls exist to mitigate risk;
- Identify opportunities for better practice and process improvement,
- Where relevant, consider and assess governance objectives including roles, responsibilities, delegations and records management; and
- To specifically consider the expiation processes and procedures in relation to local nuisance and litter control.

The legislation and documentation to be considered includes, but is not limited to:

- Expiation of Offences Act 1996 (SA)
- Expiation of Offences Regulations 2011 (SA)
- Local Nuisance and Litter Control Act 2016 (SA)
- Local Nuisance and Litter Control Regulations 2017 (SA)
- Local Government Act 1999 (SA)
- Council by-laws
- Expiation Notice Decision Review Council Policy
- Any policies related to enforcement, which may be approved or draft policies.
- City of West Torrens Delegations Framework
- Standard Operating Guidelines and Procedures

This audit specifically excludes:

- Any explations, fines or enforements processes outside of Regulatory Services (i.e. City Development);
- Any fines, explations or enforcement processes related to parking;
- Any fines, explations or enforcement processes pursuant to the *Dog and Cat Management Act 1995* (SA) and associated Regulations or By-Laws.
- Any general fines, explations or enforcement processes pursuant to the *Local Government Act 1999* (SA) and associated Regulations or By-Laws.

Approach

In performing this audit, the following will be undertaken:

- 1. An opening meeting will be held with relevant managers where the Auditor will discuss the scope and overview of work to be performed prior to the commencement of testing.
- Interviews will be conducted with managers and staff responsible for expiations, fines and enforcements under the *Local Nuisance and Litter Control Act 2016* (SA) and associated Regulations, to establish any issues, concerns or opportunities for improvements.
- Sampling and testing for compliance with policies, procedures, plans, and other relevant documentation to ensure the effectiveness of the explations, fines and enforcements management process and the associated controls.

The Audit is to be informed by relevant best industry documentation, better practice models and guidelines in relation to explations, fines and enforcements including but not limited to the relevant ISO's and Standards.

The audit is to be assessed and findings/issues must be clarified in accordance with a risk rating consistent with Council's Enterprise Risk Management Framework so that recommendations are reported as:

- Extreme risk recommendations
- High risk recommendations
- Moderate risk recommendations
- Low risk recommendations
- Better practice or improvement recommendations

Risks

Potential risks associated with a failure to manage risk effectively as identified by Internal Audit include, but are not limited to:

- Non-compliance or adherence to legislative, or governance requirements
- Inadequate monitoring, follow-up, review and consultation
- Failure to implement better practice

General Administration

This audit will be performed by TBA.

Opening meeting	TBA
Commence fieldwork	TBA
Draft report to Management	TBA
Closing meeting and final report	TBA

Sign Off

I have read the above Internal Audit Assignment Plan and I am satisfied the objectives and scope meet the expectations for this audit.

Signed

PRA,

General Manager Business and Community Services

Date 29 March 2021

9.3.2 Work Zone Traffic Managment (2020) Internal Audit

Brief

This report presents the results of the Work Zone Traffic Management (2020) Internal Audit.

RECOMMENDATION

It is recommended to the Committee that the Work Zone Traffic Management (2020) Internal Audit Report be noted.

Introduction

Pursuant to the approved Internal Audit Plan 2018-2022, the Work Zone Traffic Management (2020) Internal Audit (Audit) was approved and commenced in February 2020. The Audit was undertaken in accordance with the approved Audit scope to evaluate and report on the adequacy and effectiveness of the organisation's approach to Work Zone Traffic Management. This included:

- The level of compliance with the *Work Health and Safety Act 2012 (SA)* and associated regulations, the *Road Traffic Act 1961 (SA)*, Australian Standard 1742.3-2009 and the SA Standards for Workzone Traffic Management.
- The level of compliance with the *City of West Torrens Administration Policy Work Zone Traffic Management.*
- Identified opportunities for the introduction of better practices and process improvement
- Field testing of the application of work zone traffic management practices conducted by work groups. This should include the placement of signage, accreditation of workers, and application of diagrams from the DPTI Field Guide.
- Field testing of the application of work zone traffic management practices conducted by contractors where the City of West Torrens remains the principal contractor and work zone traffic management is not the primary function of those contractors. This should include the placement of signage, accreditation of workers, and application of diagrams from the DPTI Field Guide.
- Documentation, training and record keeping processes undertaken by the City of West Torrens (CWT) in regards to work zone traffic management

Following completion of the Audit, a draft internal audit report (Report) was issued to the Executive, relevant managers and officers for comment and individual risk assessment with a closing meeting held to provide an opportunity to clarify Audit findings with the Auditor. The final Report was provided to the Executive in February 2021 (Attachment 1).

Discussion

The Audit found a thorough understanding of Work Zone Traffic Management (WZTM) across all CWT staff who are required to manage, implement and work within WZTM, including contactors, with a high level of compliance to the procedural and regulatory requirements. The Audit also noted the increasing use of technology to assist with the overall process of WZTM. In total, the auditors supplied fourteen (14) recommendations across fourteen (14) findings.

The progress of the *Work Zone Traffic Management (2020) Internal Audit* was significantly impacted by the COVID-19 pandemic i.e. the inability to conduct face to face meetings in the early part of the pandemic, as well as the need to divert Work Health Safety (WHS) resources to assist in the response to and mitigation of risk, which meant that the availability and opportunity to review the audit findings and provide a detailed response was limited for significant periods of time during the 2020 year.

Internal Audit Findings

The Audit was conducted by 'Choose Safety', following a thorough procurement process. As a result, the look and feel of the Audit report differs from those of other auditing firms.

The auditor has elected to use the names of staff throughout the report so, to protect the interests of staff, the Administration has redacted these names. In addition, some photos contained in the report are redacted given the details contained within them. However, the redaction throughout the report does not impact on, or affect, the readability of the report but a copy of the full report is available for viewing by Committee members.

The findings have been separated into non-conformances assessed using **Negative Risk Ratings/Consequences** contained within the CWT risk analysis matrix and, as per contemporary best practice for risk management, the auditor has also incorporated opportunities for improvement/ positive consequences assessed using the **Positive Opportunity/Consequences**, also contained in the CWT risk analysis matrix. The CWT Risk Matrix has been provided as an attachment to show the **Positive Risk Consequences (Attachment 3)**.

Please note that the rating colours in the Positive Matrix differ from those in the Negative Matrix for ease of reference.

The Administration has agreed to these findings and made comments regarding the associated recommendations. The non-conformances, opportunities and comments have been reviewed by the Administration and responses have been provided in the attached Report **(Attachment 2)**.

All but two risk audit findings are within CWT's risk tolerance levels, these two being rated as High.

Non Conformances - Negative Risk Ratings

There were four (4) findings identified and assessed using the CWT Negative risk ratings matrix. Two (2) of these findings were identified at a High Risk level with a further two (2) assessed as being of a Moderate Risk level, and within tolerance levels. Two of these findings have already been actioned with the remaining two in progress.

Opportunities for Improvement - Positive Risk Ratings

There were ten (10) *Opportunities for Improvement* (OFI) findings identified using the CWT **Positive** consequences matrix. Three (3) of these findings were noted as Exceptional (Extreme) Opportunities, three (3) of these findings were rated as High (Significant) Opportunities, three (3) were rated as Moderate Opportunities with one (1) rated a Low Opportunity.

It is important to note that were these opportunities for improvement rated using the traditional (negative) risk matrix they would show a Better Practice (not included in the matrix) rating. The use of the positive risk matrix in the recommendations therefore has heightened and focussed the significance, and suggested rating, of the opportunities available. These opportunities are being explored in the same way Better Practice recommendations are explored.

Climate Impact Considerations

(Assessment of likely positive or negative implications of this decision will assist Council and the West Torrens Community to build resilience and adapt to the challenges created by a changing climate.)

There is no direct environmental impact in relation to this report.

Conclusion

The *Work Zone Traffic Management Internal Audit*, undertaken by a specialist WHS contract auditor, has been completed. Two findings were identified as 'high risk' and progress will be reviewed and reported to the Executive and Committee. All other Audit findings are within risk tolerance levels and the recommendations minor in nature, therefore progress updates will be reported to the Committee bi-annually for its notation.

Attachments

- 1. Work Zone Traffic Management Audit Report
- 2. Work Zone Traffic Management Audit Report with Management Comments
- 3. CWT Risk Matrix



Internal Audit Report Work Zone Traffic Management

<u>City of West Torrens</u> 165 Sir Donald Bradman Drive, Hilton, SA, 5033 Date: February/March 2020



Report Prepared For:

Liz Johnson

Program Leader Strategic Resilience

Report Prepared By: Craig Schopp and Chris Ginever

Choose Safety Pty Ltd

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Richmond, SA, 5033, Australia

Phone: (08) 73244324 Mob: 0419 852 418



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Audit: Work Zone Traffic Management – Part B – Site Visits
Work Site Location: Wilkes Street, West Beach



Audit Executive Summary

The Internal Audit in relation to Work Zone Traffic Management (WZTM) at the City of West Torrens Council (CWT), was conducted throughout February and March 2020 by Craig Schopp and Chris Ginever of Choose Safety Pty Ltd.

The audit was conducted against the requirements of:

- City of West Torrens Work Zone Traffic Management Policy (Doc. No. 1620265, version 1.3, dated 8 October 2015)
- SA Standards for Workzone Traffic Management
- SA Road Traffic Management Act 1961 (where applicable)

The audit was conducted in 2 parts – a management system review involving in-house interviews with key personnel and review of records, and a series of on-site reviews where specific WZTM requirements were confirmed, as they applied to the specific work being conducted at the time.

Areas of conformance and positive findings:

- A thorough understanding of WZTM requirements across all CWT staff who are required to manage, implement and work within WZTM requirements, including contractors.
- Training of CWT personnel in relation to WZTM requirements.
- The increasing use of technology to assist with the overall process of WZTM, specifically: AssignIT and dash-cam footage to confirm site WZTM signage
- Use and application of correct and accurate WZTM in most scenarios
- Capturing and maintenance of records in relation to WZTM requirements, particularly in relation to training records and WZTM site layouts
- Positive approach by all auditees auditees interviewed were happy to ask questions and receive feedback on their "part" in the WZTM activities.

While there was a high level of compliance to the procedural and regulatory requirements, there were also four (4) non-conformances identified throughout this process. These issues relate primarily to functionality of the AssignIT system and application of WZTM requirements on site. The non-conformances are summarised below. In addition to the areas of conformance and non-conformance identified, ten (10) specific opportunities for improvement were also identified. These are also summarised in the audit report. Risk ratings applied to the listed non-conformances and opportunities for improvement are in accordance with CWT Enterprise Risk Management framework.

Signed:

Craig Schopp

Chris Ginever

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Summary of Non-conformances and Opportunities for Improvement

Non-Conformances Identified – Negative Consequences

NC #	Description of Non-Conformance	Risk Rating (LxC)
NC-1	The AssignIT WZTM program has the ability to enable a WZTM set-up to be developed and completed (saved) without confirmation or assurance that the minimum WZTM mandatory compliance elements have all been included as specified in section 6.7.1 and 6.7.2 of the WZTM procedure.	Mod x Maj High
NC-2	The WZTM Daily Record Sheet does not facilitate the recording of the minimum WZTM mandatory compliance elements having been included as specified in section 6.7.1 of the WZTM procedure. There is no place to record weather conditions (item 6.7.2h).	Likely x Min Medium
NC-3	The WZTM system does not ensure that all necessary supporting documentation (such as SWMS's, SOP's and DPTI reference guides) are present and available for "use" at all WZTM locations where work is being conducted. Site visits identified that information was not present at paving work on Henley Beach Road and mowing work on Sir Don Bradman Drive.	Mod x Mod <mark>Medium</mark>
NC-4	Site visit to inspect paving works being conducted on Henley Beach Road identified that there was no signage erected on side roads leading to Henley Beach road, even though indicated on the WZTM Plan.	Mod x Cat High

Opportunities for Improvement Identified – Positive Consequences

OFI #	Description of Opportunity for Improvement	Opportunity Rating (LxC)
OFI-1	Consider the requirement to formalise the process and provide additional resource/coverage for the update and review of WZTM training records, as this process is currently undertaken in an ad-hoc manner by 1 person at CWT.	Mod x Maj High
OFI-2	Update the WZTM procedure to include specific procedural requirements relating to expectations for contractors working with &/or providing CWT's WZTM activities	Likely x Maj Extreme
OFI-3	Confirm the roll-out and implementation of the AssignIT WZTM system, ensuring that requirements relating to contractors and all CWT workgroups are fully completed.	Likely x Maj Extreme
OFI-4	Review mobile plant pre-start checklists, to ensure that any vehicle-mounted WZTM signage present on vehicles is also formally inspected as part of the pre- start process	Mod x Mod Moderate
OFI-5	Consider the opportunity to enable relevant WZTM supporting documentation (e.g.: DPTI approvals, TMP's) to be attached to AssignIT WZTM files.	Mod x Maj High
OFI-6	Review and update the WZTM procedure to incorporate references to the use of AssignIT, updated references to external reference documentation and additional information relating to mobile works requiring WZTM	Likely x Maj Extreme
OFI-7	Review section 4.14 of the WZTM procedure to confirm the utilisation of a SWP as being equivalent to a SWMS.	Unlik x Min Low
OFI-8	Consider the use of the CWT job number as the WZTM identification number for the AssignIT program (in preference to the separate numbering system that currently used).	Unlik x Mod Moderate
OFI-9	Contractor records on file (provided through tendering processes) do not confirm or ensure that all contractors involved with WZTM are licensed.	Mod x Maj High
OFI- 10	Review requirements relating to "traffic management" positioned on footpaths (and impacting pedestrians) when work has not been fully completed.	Mod x Mod Moderate

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Audit: Work Zone Traffic Management – Part A – Desktop, Records review, Interviews with Management Audit Location: City of West Torrens Council

Audit General Committee Agenda

Date: Commenced 11 Feb 2020 Audit Conducted by: Craig Schopp

Auditees: HR/Risk/Safety personnel:

Operational personnel:

Item Reference	Requirement	Prompt / Question	Records / Findings / Comments	Compliant C / NC / OFI
A	Review corrective actions	Confirm action has been taken, is	The previous audit of WZTM commenced in	N/A
	resulting from NC's and OFI's	completed and has been effective	May 2018 and was finalised in Feb 2019. There	Comment
	raised in the last audit of this		was no indication of conformance or non-	only
	topic/area		conformance noted, but 14 recommendations	
			were identified, all designated as "High Risk".	
			Detailed responses to these issues are	
			documented in Section 2 of Version 2of the	
			Internal Audit Report dated 18/02/2019.	
			The main solutions identified to address the	
			previously noted issues are:	
			 The use of electronic system "AssignIT" to 	
			replace daily WZTM form/records	
			 Provision of training in new systems (e.g.: 	
			Take 5 replaced by OSSC)	
			Ensuring that Contractors are included in	
			relation to the roll-out of new systems	
8	Review of any changes in the	Confirm what changes have occurred	Despite opportunities identified in the previous	N/A
	specific procedure/process since	- if any	audit, there have not been any changes to the	
	the last audit (where necessary)	(this will help provide some focus	WZTM documented policy or procedure since	
		areas for this audit)	the previous audit.	
4.1	Training of Accredited Officers	How many WZTM "Accredited	At the time of the audit, CWT listed a total of 79	
7.1		Officers" does CWT have	staff who were WZTM Accredited Officers.	

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Who is the "approved" training Civil Train is the approved training provider for Who is the "approved" training Civil Train is the approved training provider for Company used by CWT WZTM training for CWT. Training may be Company used by CWT WZTM training for CWT. Training may be Does training register remind for WZTM training for CWT. Training may be Does training register remind for wajority of training occurring in-house at 3- Poes training (3 yearly) yearly intervals. Records on file show that the most recent series of in-house training was conducted between May and December 2018 for refresher training? The trainer used exclusively for in-house for refresher training? Next refresher training is not due until 2021. Next refresher training is not due until 2021. Next refresher training is not due until 2021. Raining is most due until 2021. Next refresher training is not due until 2021. Raining is most diatany new worker who does not have WZTM accreditation or whose accreditation expires before the next round of in-house training would be individually sent to Civil Train for WZTM training. This is conducted on an "as required" basis.
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Ine trainer used exclusively for in-house training is exclusively for in-house Next refresher training is not due until 2 It was stated that any new worker who have WZTM accreditation or whose accreditation expires before the next ro in-house training would be individually in-house training would be individually civil Train for WZTM training. This is con on an "as required" basis. Records of WZTM trained staff are main
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Records of WZTM trained staff are main
via the following documentation:
WHS Identified Training Needs spreadsheet
(doc no. A1940642) which identifies WZTM
training requirements by role
CWT Training Plan (doc no. A1926481)
which identifies WZTM training was
conducted in-house between May-Dec
2018.
 "City Op's License and Tickets Register"
spreadsheet which specifically lists all
workers and is available in the "Chris21"
payroll system

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		Audit Report		
Item Reference	Requirement	Prompt / Question	Records / Findings / Comments	Compliant C / NC / OFI
			Review of currency of WZTM training is an adhoc process, undertaken via the generation of a "Chris21" report by Chris21" vorkers are advised of their requirements to attend refresher training sessions by email. As there is only 1 person who administers this process von opportunity exists to ensure that there is coverage in the event that is not present/available.	OFI-1
			Review of the list identified that at the time of the audit there were 4 people who did not have current WZTM accreditation: Subsequent review by RE confirmed that PC completed re-training in 04/19 – updated records now on file.	
5.1c 6.1.4 7.2	Training of new staff	Induction – does it specifically include WZTM requirements? Partnering with experienced or	Requirements relating to WZTM are included in CWT induction. The duration of time that a new worker or	U
		accredited start member? How long	newly trained WZTIW varies depending on the exact role and the overall competence of the worker. This is gauged by the site supervisors. At a minimum, the new worker will be buddied up until they have completed formal WZTM training	

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8.2 Responsibilities - Managers/Supervisors Managers/Supervisors 8.3 Responsibilities - Workers 8.3 8.3 Responsibilities - Contractors	WZTM requirements Consulting Documentation completion 	Discussions with	
Responsibilities - Workers Responsibilities - Contractors	 Ensuring training WZTM site compliance Surveillance auditing of sites Records management 	 Confirmed that management have a clear understanding of WZTM responsibilities. These include: Regular site visits to confirm WZTM set-ups and adherence to WZTM plans (note: recent confirmation of these visits have been recorded using in-vehicle dash cams) Ensuring that WZTM documentation and plans have been developed Ensuring that WZTM documentation and plans have been developed Ensuring that their respective supervisors and licensed as necessary Ensuring that their respective supervisors and licensed as loc comply with WZTM requirements Following WZTM guidelines when on site ticket no. 178-782, exp 31/7/2021 Also refer to Site visit information 	U
Responsibilities - Contractors	What are the basic/general responsibilities WRT WZTM?	All CWT worker s interviewed were able to describe the CWT's procedures and requirements relating to WZTM. Refer to WZTM site visit reports	υ
	What are the basic/general responsibilities WRT WZTM for contractors engaged by CWT?	A number of different organisations are contracted to conduct work for and on behalf of CWT that required WZTM to be implemented. WZTM requirements for contractors are not	OFI-2

Audit General Committee Agenda

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nts Compliant C / NC / OFI	IT system cally filed 1e system	en fully ups and OFI-3 form item.	ed in the	s of work SA WHS C		s / JSA's	M	noletion	red to be C	- road		equired or	0		officer for C	the true of	
Records / Findings / Comments	to use the WZTM form. As the AssignIT system is on computer, records are automatically filed or uploaded and retained as part of the system functionality	As the AssignIT system has not yet been fully implemented, there are still small groups and some contractors who use the WZTM form process rather than the electronic system.	Also refer to additional details provided in the "Other Comments" section below.	High Risk Construction are those types of work activities that are defined within the SA WHS	Regulations.	ppectric ownors are developed and used where high risk work occurs. SWMS's / SOP's / JSA's	are able to be referenced on the WZTM	W7TM records are updated at the completion	of daily work. Where signage is required to be	left overnight, it is to be left to favour road	users.	No WZTM sites were inspected that required or	related to signage being left at the site overnight.	The WZTM signage required for the job is	determined by the designated WZIM officer for	une job. Information and guidance relating to the type of	adde out of Builder of and Builder of the transmission
Prompt / Question				What would be deemed HRC What additional information is	necessary	now is this confirmed or relerenced on WZTM documentation		Is there anything specific or additional	that must be done?					Who makes the decision on what	specific signage to use	what gulgance documentation is available	
Requirement				High Risk Construction (HRC) Work				W7TM left overnight						Determination of the type of	traffic control devices to be used		
ltem Reference				6.1.5				6.1.6						6.2.1			

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5		Audit Report		
Item Reference	Requirement	Prompt / Question	Records / Findings / Comments	Compliant C / NC / OFI
		What happens if a required sign/device is not available?	 Completion of WZTM accreditation (training) Signage types/styles provided in AssignIT SA Government Manual of Legal Responsibilities and Technical Responsibilities and Technical Requirements for Traffic Control Devices Part 2 - Code of Technical Requirements Figures and Guidance Material, version 3 (CD) – based on SA Government Manual of Legal Responsibilities and Technical Requirements for Traffic Control Devices Part 2 - Code of Technical Requirements 	
6.2.2	Record of signs and devices used	How/Where recorded? Is every individual item required/used listed or stated on the record sheet?	AssignIT enables a full record of WZTM signs and their locations to be recorded. It is the responsibility of the person setting up the WZTM (using AssignIT) to nominate and record the exact signage used and the location that the sign is positioned. This is usually the site/job supervisor. AssignIT uses Google Maps to show the exact WZTM site location and positioning of all signage identified for the job. The WZTM Daily Form is also still used. This requires to person setting up the WZTM to manually record signage and locations.	C Also refer to separate reports
6.2.4	Traffic Control Plans (TCP's)	When is a TCP used/required? How are TCP's documented (template?)	Traffic Control Plans, are primarily used when significant works are being conducted on major (DPTI) roads.	υ
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Item Reference	Requirement	Prompt / Question	Records / Findings / Comments	Compliant C / NC / OFI
			It was stated that TCP's are developed by WZTM contracting companies and not by CWT personnel. As these are developed external to CWT, there is standard template or style used as this is at the discretion of the company developing the TCP.	
	Works impacting main roads	Is there additional approval required (and by who) How is this approval requested and received, and how long does it take What is approval is not granted?	DPTI Approval is also required for works impacting main roads. This is obtained as/when required by the crew conducting the work. Also refer to Part B – Site visit Audit report information where DPTI approval was sighted for works being performed on Henley Beach Road at Torrensville (DPTI Approval no. P1642901) and South Road Mile End (DPTI Approval no. P1633806)	υ
	Partial or complete road closure	What advance notification is required? Who needs to be notified? Sight evidence of advance notification (mail-out or advertising media)	Where/When required, advance notification is provided to local residents and businesses through letterbox drops of the local area impacted by the road closure. Notification is provided by the contractor performing the works. Examples of notification sighted: • end the contractor performing the Marion and Richmond Roads, commencing 10 Feb 2020. • Street Plympton, commencing on 16 Dec 2019.	υ
	Checking of warning signage (Static signage)	Who checks the signage? When is it checked?	All workers are able to check the (condition of) WZTM signage.	

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	Compliant C / NC / OFI	U
	Records / Findings / Comments	 Regular visual checks are made: When signage is set out at the work site by the person designing &/or setting out the WZTM for the work being performed. Daily by the workers who work on/with the various trucks and equipment from CWT that also require WZTM. It was stated that that also require WZTM. It was stated that that also require WZTM. It was stated that that also require WZTM for regular "set" of signs part of the overall pre-start checking part of the overall pre-start checking process. When signage is taken down at the completion of works of checking maintained through the WZTM form or AssignIT, there is no formal records of checking maintained. Where an issue/problem is found, then corrections are made, or signs are replaced as necessary. Spare or additional signage is available from the sign storage location in the depot main shed when necessary. Visual checking of (the condition of) signage is also involves generation of dash-cam footage of the supervisor driving through a work zone. This footage is used for confirming correct WZTM is is est-up and has also started to be used for
Audit Report	Prompt / Question	How frequently are checks conducted What is checked (what do you look at/for) How can you confirm that EVERY individual item has been checked? What happens if you find a problem?
1	Requirement	
J	Item Reference	

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Item	Requirement	Prompt / Question	Records / Findings / Comments	Compliant
			training and awareness purposes for CWT staff involved in WZTM (for both good and not-so- good WZTM set-ups). This initiative should be encouraged. WZTM site inspections by supervisors or managers are also able to be formally recorded using the WZTM Site Inspection form which is available on the "Formsite" platform. Document no's 5664583, 5647873 & 5633997 were sighted.	
	Checking of warning signage (moving signage)	What specific checks are conducted for vehicle mounted hazard warning devices? Who checks this? When is it done? What records are maintained?	All CWT mobile plant is required to have a pre- start check completed prior to daily use. Other than basic pre-start operational checks for lights or signals, there are no specific additional checks conducted for WZTM signage that is mounted onto CWT vehicles. Pre-start documentation for CWT Water trucks #'s 6036 and 6041 that have illuminated WZTM arrow boards were checked and confirmed that pre-starts are completed, but there are no specific or additional checks provided for the WZTM signage. An opportunity exists to include checking of attached signage on mobile plant.	Y OFI-4
	WZTM set-up	This is confirmed through Part B – specific work site visits	As part of the audit process a number of CWT sites where WZTM was/is required were formally inspected. A total of 7 sites were reviewed. Results of these inspections are provided in Part B of this audit report.	Refer to separate reports below
	WZTM Records	How many WZTM forms were generated in 2019?	AssignIT records are saved and uploaded to the cloud for storage and retention. At the time of	

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	Compliant C / NC / OFI	NC-1	OFI-5	OFI-2	NC-2
	Records / Findings / Comments	the audit, records on file indicate that there have been 1089 plans/reports developed. Review of recorded information captured through the AssignIT system highlighted that it is possible to complete a WZTM record without all of the minimum mandatory information being provided	Further opportunities also exist to be able to attach TCP's with WZTM files and records through the AssignIT system	As AssignIT has not been rolled out to all contractors and does not accurately align with WZTM expectations for mobile works or horticultural works, it is recommended that any update of the procedures/processes still allow for the use of the "old" forms.	 Review of WZTM Daily Record Form against minimum information requirements as stated in WZTM procedure: Date = YES Date = YES Time of Operation = YES Location = YES Location = YES Identified hazards = YES Signage layout reference = YES Type of plant used = YES Type of plant used = YES Type of work performed = YES Meather Conditions = NO Accredited Officer name/signature = YES
Audit Report	Prompt / Question	Where are active WZTM records kept? Where are completed WZTM records kept? How long are WZTM records kept?			Confirm that all items listed are present on the sheet/form
	Requirement				WZTM Daily Record sheet "contents"
J	Item Reference				6.7.2

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	Reference	Prompt / Question	Records / Findings / Comments	Compliant C / NC / OFI
			Not all of the minimum information as listed in the WZTM procedure are captured on the WZTM Daily Record form.	
			AssignIT is able to capture all of the minimum WZTM "contents" information as is required on the WZTM Daily Record sheet, but as there are no system checks or confirmation that this	NC-1
			minimum detail has been recorded, there is the potential for WZTM information to be omitted. Review of records and data stored for AssignIT	
			WZTM jobs confirmed that not all of the minimum WZTM information had been specified in all jobs created and stored.	
ona	Additional Audit Comments / Findings With regard to the current CWT Policy and Proce	dure for WZTM (Doc Set 1620265), the	Additional Audit Comments / Findings With regard to the current CWT Policy and Procedure for WZTM (Doc Set 1620265), the following opportunities for improvement are noted:	
ntracrticu	Contractor Management – there are no references to the specific requireme horticultural or WZTM works to CWT. Specific requirements may include such confirmation of WZTM accreditation (and CWT maintenance of same). – OFI-2	erences to the specific requirements ic requirements may include such thin /T maintenance of same). – OFI-2	Contractor Management – there are no references to the specific requirements that are to be followed by external organisations who contract Civil, horticultural or WZTM works to CWT. Specific requirements may include such things as: use of AssignIT or their own WZTM documentation, contractor confirmation of WZTM accreditation (and CWT maintenance of same). – OFI-2	contract Civi on, contracto
e of poced	Use of the new AssignIT system for WZTM – a procedure and there does not appear to be requirements. OFI-6	although this system has been in place any draft procedure that is being w	Use of the new AssignIT system for WZTM – although this system has been in place for over 12 months, it is not currently mentioned or referenced in the procedure and there does not appear to be any draft procedure that is being worked on to incorporate this new system into the WZTM procedural requirements. OFI-6	erenced in th TM procedur
datii 2019	Updating other applicable documentation ref vs 2019). – OFI-6	ferenced in the procedure to ensure th	Updating other applicable documentation referenced in the procedure to ensure that the latest versions are referenced (eg: SA Standards for WZTM 2012 vs 2019). – OFI-6	or WZTM 201
ction	Section 4.14 – Sections states that "CWT's SW	IP is equivalent to a SWMS". It is advisa	Section 4.14 – Sections states that "CWT's SWP is equivalent to a SWMS". It is advisable that formal confirmation is obtained and/or maintained to confirm	ned to confirm

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Item 9.3.2 - Attachment 1

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al committee Age	filla			Refit 9.5.2 - Attachment T
s that involve mobile works in section 6.6.6 (eg: weed	hen the WZTM record is created. It is currently possible information provided. An opportunity exists to upgrade I has been provided before filing/saving/completing the ithout a minimum level of detail or information having	. and horticultural activities. – OFI-3 s include: Traffic Management Plans, DPTI road closure	g completed. An opportunity exists to use the CWT job	Last Updated: 11 Dec. 20
tion in relation to the application of WZTM for activities or median strips). – OFI-7	he following Opportunities for Improvement are noted: at the minimum information and details are completed w this system that does not have all of the minimum WZTM of checks that confirm that the minimum allowable detail WZTM plan should not be able to be filed/completed wi	stem to all WZTM parties, including contractors. – OFI-3 include/reference requirements relating to mobile works eference documentation to the AssignIT record. Examples eos of actual WZTM sites. – OFI-5	IT record created and the specific CWT "job" that is bein ce number. – OFI-8	Page 17 of 40
 Provide additional details and informal spraying, line painting, mowing verges of 	 Use and function of the AssignIT system – T The AssignIT system does not ensure th to develop a WZTM file/record through the AssignIT system to include a series WZTM electronic process. The AssignIT been included. – NC-3 	 Complete and confirm roll-out of the sy Update drop-down selections to better Provide the ability to attach relevant re confirmations, SWMS's and photos/vide 	 There is no linkage between the Assign number as the AssignIT record/referencencencencencencencencencencencencence	Audit Report - WZTM 2020 final.docx
	 Provide additional details and information in relation to the application of WZTM for activities that involve mobile works in section 6.6.6 (eg: weed spraying, line painting, mowing verges or median strips). – OFI-7 		 Provide additional details and information in relation to the application of WZTM for activities that involve mobile works in section 6.6.6 (eg: weed spraying, line painting, mowing verges or median strips). – OFI-7 Use and function of the AssignIT system – The following Opportunities for Improvement are noted: The AssignIT system does not ensure that the minimum information and details are completed when the WZTM record is created. It is currently possible to develop a WZTM file/record through this system that does not have all of the minimum WZTM information provided. An opportunity exists to upgrade the AssignIT system to include a series of checks that confirm that the minimum allowable detail has been provided before filing/saving/completing the WZTM electronic process. The AssignIT WZTM plan should not be able to be filed/completed without a minimum level of detail or information having been included. – NC-3 Complete and confirm roll-out of the system to all WZTM parties, including contractors. – OFI-3 Update drop-down selections to better include/reference requirements relating to mobile works and hortsultural activities. – OFI-3 Provide the ability to attach relevant reference documentation to the AssignIT record. Examples include: Traffic Management Plans, DPIT road cloure confirmations. SWWS and bhotos/videos of actual WZTM sets. – OFI-3 	 Provide additional details and information in relation to the application of WZIM for activities that involve mobile works in section 66.6 (eg: weed spraying, line painting, mowing verges or median strips), – OFI-7 Use and function of the AsignIT system – The following Opportunities for Improvement are noted: The AssignIT system does not ensure that the minimum information and details are completed when the WZIM record is created. It is currently possible to develop a WZIM file/record through this system that does not have all of the minimum WZIM linformation provided. An opportunity exists to upgrade the tectaolic process. The AssignIT without a minimum linformation by MZIM file/record through this system that does not have all of the minimum WZIM linformation provided. An opportunity exists to upgrade the AssignIT WZIM plan should not be able to be filed/completed when the WZIM record is created. It is currently possible been included. – NC-3 Complete and confirm to include a series of checks that confirm that the minimum allowable detail has been provided before filing/saving/completing the WZIM electronic process. The AsignIT WZIM plan should not be able to be filed/completed when the antinuum level of detail or information having been included. – NC-3 Complete and confirm to include a series of checks and a soludin to the AsignIT record. Saving Saving/completing the transition to the AsignIT record. Examples includes. Traffic Management Plans, DPIT road closure confirmations, SWMS's and photocy/ideos of actual WZTM sites. – OFI-3 Provide the ability to attach relevant reference documentation to the system. There is no linkage between the AsignIT record/reference number. – OFI-3 There is no linkage between the AsignIT record related and the specific CWT "job" that is being completed. An opportunity exists to use the CWT job" number as the AsignIT record/reference number. – OFI-3

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Audit General Committee Agenda

Audit: Work Zone Traffic Management – Part B – Site Visits

Work Site Location: Alice St. South Plympton

Date:20/02/2020 Job (ref) No.11034

Site Supervisor:

Requirement	Prompt / Question	Records / Findings / Comments	Compliant Y / N / OFI
WZTM at/on site Assign It Tablet/ Cloud based	Confirm presence of WZTM Daily record sheet	Site supervisor was aware of "Assign it" and was able to show the auditor the WZTM plan in detail on the iPad.	¥
	Confirm TCP (if required)		
	Confirm that the nominated Accredited Officer has their WZTM ticket available and that it is in date	Confirmed WZTM ticket is in date (No. 177-079, expiry 08/03/2021)	¥
	Confirm presence of WZTM guidance documentation	Guide available in hard copy and on the Tablet	٢
	Confirm presence of any associated SWMS's, JSA's, SWP's	Auditor sighted and reviewed SWMS for paving rectification SWMS and SOP for Skid Steer in use.	۶
	Confirm that adequate advance warning has been provided to road	WZTM signage was in place in and warning devices were distributed and replicated as	٨
	users? (how many metres ahead of work)	required WZTM signage "roadwork on side road"	٨
	WZTM enables road users to safely navigate through the area	Auditor drove through the WZTM site and parked in the back streets. Zone was able to be easily navigated. (See pictures)	۶
DPTI Road Impacts	Confirm approval has been obtained	N/A	N/A
(where applicable)	from DPTI for any works on or adjacent to a DPTI controlled road		

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ents Compliant Y/N/OFI		k was Y otorist to	٨	luplicated as Y	۶			λ		itep"	X
Records / Findings / Comments		The site plan was clear, and the truck was parked with traffic cones to assist motorist to pavisate the Work Zone.	Yes	Signage sequence was correct and duplicated as required with return to speed	Signs were clearly visible		Yes	Yes essential to ensure traffic flows.	No	Yes, Daily - "Pedestrian watch your step"	warning sign in place.
Prompt / Question	"Notification of Works Impacting on DPTI Roads" form has been used and is present of referenced	Confirm set-up as per approved WZTM and/or TCP	Are all listed signs/devices present?	Confirm the sequence of sign installation (outer to inner)	Signage and devices are easily visible and not obscured	Signage and devices do not create other hazards	Was this done?	Was this required/necessary?	Any potential for signage to move?	hecks been conducted	and recorded?
Requirement		Positioning of signs and devices					Site "drive-through"		Sign "Operation"		
Item Reference		6.6.2 6.6.4					6.6.3		6.6.5		

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	Compliant Y / N / OFI	N/A	×	٨	
	Records / Findings / Comments	N/A	Crew understood this requirement when questioned.	Short term work zone	
Audit Report	Prompt / Question	Confirm that all necessary signage is displayed on moving vehicles	Confirm the sequence of sign removal (inner to outer – reverse of installation)	How often does this occur? (Is this the same as 6.6.5(b)?)	
SAFETY SAFETY	Requirement	Mobile works (where relevant)	Sign Removal	WZTM Compliance and Inspections	Pictures from work site observations:
сноозе	Item Reference	6.6.6	6.6.7	6.6.8	Pictures from

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Audit: Work Zone Traffic Management – Part B – Site Visits Work Site Location: Halsey Road, Fulham

Audit Report

Audit General Committee Agenda

Site Supervisor: Date:05/03/2020 not provided Job (ref) No.

and assisted living facility.

	Compliant Y / N / OFI			Y					7			
	Records / Findings / Comments	N/A		٨	γ	Y	Y	No, good use of cones for delineation of tree lopping work area	No walked through, no light vehicle available.		N/A	
Audit Nepol	Prompt / Question	Confirm approval has been obtained from DPTI for any works on or adjacent to a DPTI controlled road.	"Notification of Works Impacting on DPTI Roads" form has been used and is present of referenced	Confirm set-up as per approved WZTM and/or TCP	Are all listed signs/devices present	Confirm the sequence of sign installation (outer to inner)	Signage and devices are easily visible and not obscured	Signage and devices do not create other hazards	Was this done?	Was this required/necessary?	Any potential for signage to move?	Have regular checks been conducted and recorded?
	Requirement	DPTI Road Impacts (where applicable)		Positioning of signs and devices					Site "drive-through"		Sign "Operation"	
	ltem Reference	6.3		6.6.2 6.6.4					6.6.3		6.6.5	

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	Compliant Y / N / OFI			٨			
	Records / Findings / Comments	No	N/A	Х	N/A		
Audit Report	Prompt / Question	Have any changes to signage been made, and were they recorded?	Confirm that all necessary signage is displayed on moving vehicles	Confirm the sequence of sign removal (inner to outer – reverse of installation)	How often does this occur? (Is this the same as 6.6.5(b)?)		
SAFETY SAFETY	Requirement		Mobile works (where relevant)	Sign Removal	WZTM Compliance and Inspections	Pictures from work site observations:	
CHOOSE	Item Reference		6.6.6	6.6.7	6.6.8	Pictures from	

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Audit General Committee Agenda

Audit: Work Zone Traffic Management – Part B – Site Visits

Work Site Location: Henley Beach Road, Torrensville

Item Reference	Requirement	Prompt / Question	Records / Findings / Comments	Compliant Y / N / OFI
6.6	WZTM at/on site	Confirm presence of WZTM Daily record sheet	Supervisor was not aware of "Assign it" and was able to show me a rough pencilled in plan on a	7
	Assign It Tablet/ Cloud based system in Use?	Confirm TCP (if required)	google map on the back of the WZTM plan in detail on note pad. (See Photographs)	
		Confirm that the nominated Accredited Officer has their WZTM	Confirmed WZTM ticket is in date	۲
		ticket available and that it is in date	(no. 175-052, expiry 19/01/2021) Records on file confirm WZTM training and	٢
		Confirm presence of WZTM guidance	expiry date None available	NC-3
		documentation	No SWMS available (auditee claimed it was "in	NC-3
		Confirm presence of any associated SWMS's, JSA's, SWP's	the office") - SWMS was requested but was not sent via email as requested.	
6.6.1	WZTM Set-up	Confirm that adequate advance	WZTM signage was in place in and warning	٢
		warning has been provided to road	devices were distributed and replicated as	
		users? (how many metres ahead of	required	
		work)	No signage on side roads leading to Henley Beach road even though indicated on the Plan.	NC-4
		WZTM enables road users to safely		
		navigate through the area	The auditor drove through the site and found it	٢
			was easy to navigate.	
6.3	DPTI Road Impacts	Confirm approval has been obtained	DPTI Approval no. P1642901 - provided verbally	٢
	(where applicable)	from DPTI for any works on or		
		adiacent to a NDTI controlled road		

Audit General Committee Agenda

Item Reference	Requirement	Prompt / Question	Records / Findings / Comments	Compliant Y / N / OFI
		"Notification of Works Impacting on DPTI Roads" form has been used and is present of referenced	Not available - Supervisor was of the opinion that the council was responsible for this, commented that he thought the WTC was responsible.	
6.6.2 6.6.4	Positioning of signs and devices	Confirm set-up as per approved WZTM and/or TCP	The site plan was clear, and the truck was parked with traffic cones to assist motorist to navigate the Work Zone.	٢
		Are all listed signs/devices present?	Yes	٢
		Confirm the sequence of sign installation (outer to inner)	Signage sequence was correct and duplicated as required with return to speed	٢
		Signage and devices are easily visible and not obscured	Signs were clearly visible	٨
		Signage and devices do not create other hazards	No other hazards noted	
6.6.3	Site "drive-through"	Was this done?	Yes	
		Was this required/necessary?	Yes, essential to ensure traffic flows.	۲
6.6.5	Sign "Operation"	Any potential for signage to move?	No Even though there was some non-compliance	
		Have regular checks been conducted and recorded?	with documented requirements, the work zone was well set up with vehicles parked in the closed lane offering collision protection for the	٨
		Have any changes to signage been	workers conducting the paving.	
		made, and were they recorded?	No	

Item 9.3.2 - Attachment 1

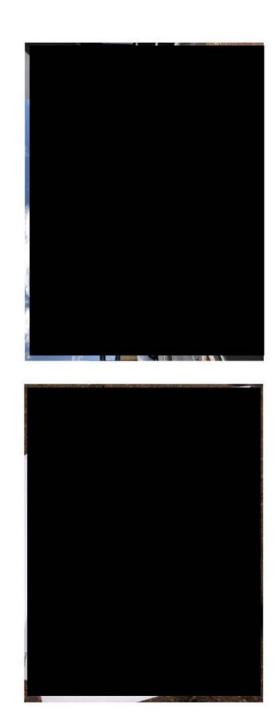
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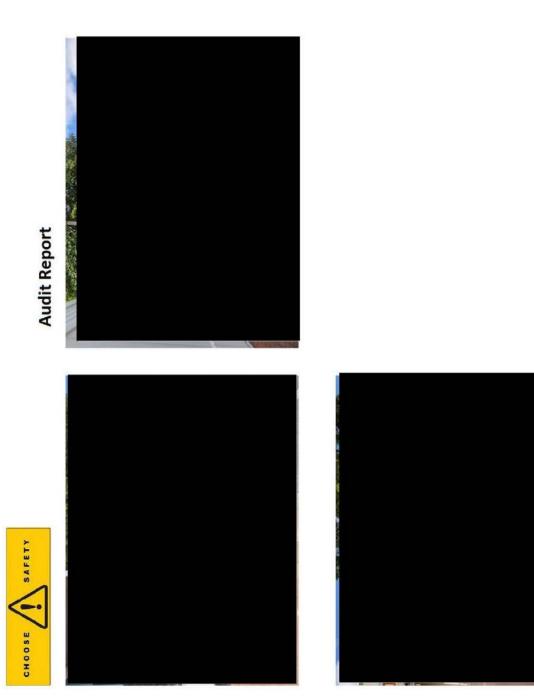
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Confirm that all necessary signage is displayed on moving vehicles
Confirm the sequence of sign removal (inner to outer – reverse of installation)
How often does this occur? (Is this the same as 6.6.5(b)?)

Pictures from work site observations:





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Records / Findings / Comments Site Supervisor: Audit: Work Zone Traffic Management – Part B – Site Visits Prompt / Question Work Site Location: Sir Donald Bradman Drive, West Beach Date:04/03/2020 Requirement Job (ref) No. Not provided

Item Reference	Requirement	Prompt / Question	Records / Findings / Comments	Compliant Y / N / OFI
6.6	WZTM at/on site	Confirm presence of WZTM Daily record sheet	n/a - Mobile Workzone	٨
		Confirm TCP (if required)	n/a	
		Confirm that the nominated Accredited Officer has their WZTM ticket available and that it is in date	All personnel had tickets (no.182-139, expiry 16/4/2022)	٨
		Confirm presence of WZTM guidance documentation	WZTM guide available.	٢
		Confirm presence of any associated SWMS's, JSA's, SWP's	SWMS not available with work crew at the time of the site audit available (emailed to auditor after the on-site review)	NC-3
6.6.1	WZTM Set-up	Confirm that adequate advance warning has been provided to road users? (how many metres ahead of work)	Symbolic worker and Mowing ahead next 1Km (See pictures)	>
		WZTM enables road users to safely navigate through the area	Drive through illustrated that the Workzone keeps the traffic flowing and maintains safety for work crew.	۶
6.3	DPTI Road Impacts (where applicable)	Confirm approval has been obtained from DPTI for any works on or adjacent to a DPTI controlled road.	N/A	

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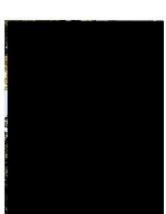
	ents Compliant Y/N/OFI		was clear Y	er and the rning lights	flashing on Y sxt lane.			٨		٨			,
	Records / Findings / Comments		Signage gave advanced warning and was clear and duplicated	Lead Truck and following truck, mower and the mini road sweeper all had amber warning lights	flashing and lane change advice sign flashing on the rear truck to divert traffic into next lane.	٨	٨	N/A	z	N/A			Yes apod practice as described above
Audit Report	Prompt / Question	"Notification of Works Impacting on DPTI Roads" form has been used and is present of referenced	Confirm set-up as per approved WZTM and/or TCP	Are all listed signs/devices present	Confirm the sequence of sign installation (outer to inner)	Signage and devices are easily visible and not obscured	Signage and devices do not create other hazards	Was this done?	Was this required/necessary?	Any potential for signage to move?	Have regular checks been conducted and recorded?	Have any changes to signage been made, and were they recorded?	Confirm that all necessary signage is
	Requirement		Positioning of signs and devices					Site "drive-through"		Sign "Operation"			Mohile works (where relevant)
7	Item Reference		6.6.2 6.6.4					6.6.3		6.6.5			6.6.6

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	ant OFI			
	Compliant Y / N / OFI	7		
	Records / Findings / Comments	N/A	N/A	
Audit Report	Prompt / Question	Confirm the sequence of sign removal (inner to outer – reverse of installation)	How often does this occur? (Is this the same as 6.6.5(b)?)	
SAFETY	Requirement	Sign Removal	WZTM Compliance and Inspections	Pictures from work site observations:
Сноозе	ltem Reference	6.6.7	6.6.8	Pictures from



Duplicated signage present at both ends of Workzone.

Mower on Median two trucks and mini sweeper

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Audit Report

Audit: Work Zone Traffic Management – Part B – Site Visits

Work Site Location: Sir Donald Bradman Drive, Brooklyn Park

ltem Reference	Requirement	Prompt / Question	Records / Findings / Comments	Compliant Y / N / OFI
6.6	WZTM at/on site	Confirm presence of WZTM Daily record sheet	AssignIT not in use as the WZTM was a mobile site	٢
	Assign it labiet/ Cloud based system in Use?	Confirm TCP (if required)	Confirmed W/TTM Hickore are in date	
		Confirm that the nominated Accredited Officer has their WZTM ticket available and that it is in date	All crew members had these. (no.182-139, expiry 16/4/2022)	٢
		Confirm presence of WZTM guidance documentation	Available – WZTM guide present.	>
		Confirm presence of any associated SWMS's, JSA's, SWP's	swiwis/sur not available – requested copy to be sent via email, supplied after the on-site review	NC-3
6.6.1	WZTM Set-up	Confirm that adequate advance warning has been provided to road users? (how many metres ahead of work)	Symbolic worker sign set up before the work zone and the truck had the flashing Arrow activated.	۶
		WZTM enables road users to safely navigate through the area		7
6.3	DPTI Road Impacts (where applicable)	Confirm approval has been obtained from DPTI for any works on or adjacent to a DPTI controlled road.	Not in use as the work is deemed short term.	N/A

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	Compliant Y / N / OFI		7	٢		۲	۶		۲	>		٨
	Records / Findings / Comments		The plan was clear, as the truck was following the ride on edger with and this kept the traffic	riowing through the work zone with no congestion.	N/A	Signs were clearly visible	No other hazards noted	Yes	Yes, essential to ensure traffic flows.	No The ride-on edger was well protected by the truck, offering collision protection for the workers conducting the edging.	N/A	Yes, signage was appropriate
Audit Report	Prompt / Question	"Notification of Works Impacting on DPTI Roads" form has been used and is present of referenced	Confirm set-up as per approved WZTM and/or TCP	Are all listed signs/devices present?	Confirm the sequence of sign installation (outer to inner)	Signage and devices are easily visible and not obscured	Signage and devices do not create other hazards	Was this done?	Was this required/necessary?	Any potential for signage to move? Have regular checks been conducted and recorded?	Have any changes to signage been made, and were they recorded?	Confirm that all necessary signage is displayed on moving vehicles
1	Requirement		Positioning of signs and devices					Site "drive-through"		Sign "Operation"		Mobile works (where relevant)
J	Item Reference		6.6.2 6.6.4					6.6.3		6.6.5		6.6.6

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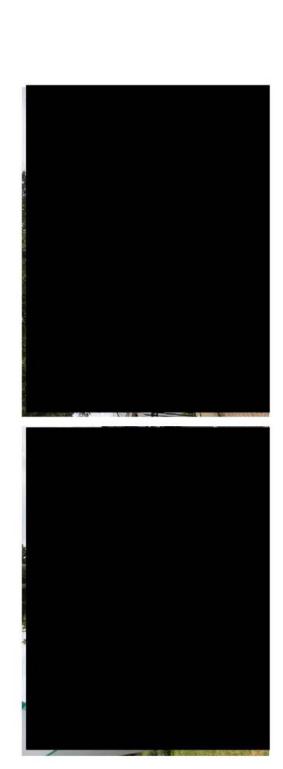
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ltem Reference	Requirement	Prompt / Question	Records / Findings / Comments	Compliant Y / N / OFI
6.6.7	Sign Removal	Confirm the sequence of sign removal (inner to outer – reverse of installation)	Confirm the sequence of sign removal Crew understood this requirement when (inner to outer – reverse of questioned.	*
6.6.8	WZTM Compliance and Inspections	How often does this occur? (Is this the same as 6.6.5(b)?)	At the completion of edging.	*

Pictures from work site observations:



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Job (ref) N	Job (ref) No. 556820 WTPA Date:2	Date:20/02/2020 Site Supervisor:	ï	
Item Reference	Requirement	Prompt / Question	Records / Findings / Comments	Compliant Y / N / OFI
6.6	WZTM at/on site Assign It Tablet/ Cloud based system in Use?	Confirm presence of WZTM Daily record sheet Confirm TCP (if required)	Supervisor was not aware of "Assign it" Had paper based WZTM Plan. n/a	OFI-3
		Confirm that the nominated Accredited Officer has their WZTM ticket available and that it is in date Confirm presence of WZTM guidance documentation	Confirmed WZTM ticket sighted for Confirmed WZTM takes in date. Records on file do not include or confirm WZTM license number or expiry date. Comprehensive documentation available	۲ 06-1-9 ۲
		Confirm presence of any associated SWMS's, JSA's, SWP's	Auditor sighted and reviewed SWMS for paving and. SOP's for a variety of hand tools.	۲
6.6.1	WZTM Set-up	Confirm that adequate advance warning has been provided to road users? (how many metres ahead of work) WZTM enables road users to safely navigate through the area	WZTM signage was in place in and warning devices were distributed and replicated as required Auditor drove through the site and parked in the back streets. Zone was able to be easily navigated (See pictures)	× ×
6.3	DPTI Road Impacts (where applicable)	Confirm approval has been obtained from DPTI for any works on or adjacent to a DPTI controlled road.	DPTI Approval No. P1633806	٨

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Audit: Work Zone Traffic Management – Part B – Site Visits

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Compliant Y / N / OFI	٨	٨	٨	٨	OFI			>		٨	
Records / Findings / Comments	Supervisor was very clear on the timeframe for working on the major arterial road was 9am – 3pm	A clear site map was in the folder in the truck which was parked in a dead end side street to minimise traffic disruption.	Yes	Signage sequence was correct and duplicated as required with return to speed	Signs at the entrance to the work zone were directly underneath posted 60Km signage (Recommended that the 60Km signs be covered	in future to avoid motorist confusion and/or complaints).	Yes	Yes, essential to ensure traffic flows (Major arterial road).	No	Yes, Daily - "Pedestrian watch your step" warning sign in place.	No
Prompt / Question	"Notification of Works Impacting on DPTI Roads" form has been used and is present of referenced	Confirm set-up as per approved WZTM and/or TCP	Are all listed signs/devices present?	Confirm the sequence of sign installation (outer to inner)	Signage and devices are easily visible and not obscured	Signage and devices do not create other hazards	Was this done?	Was this required/necessary?	Any potential for signage to move?	Have regular checks been conducted and recorded?	Have any changes to signage been made, and were they recorded?
Requirement		Positioning of signs and devices					Site "drive-through"		Sign "Operation"		
Item Reference		6.6.2 6.6.4					6.6.3		6.6.5		

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em Requirement Prompt / Question Records / Findings / Comments Compliant 6.6 Mobile works (where relevant) Confirm that all necessary signage is N/A Y/N/OFI 6.7 Sign Removal Confirm that all necessary signage is N/A Y/N/OFI 6.7 Sign Removal Confirm the sequence of sign removal Signage was packed up in reverse of Y 6.7 Sign Removal Confirm the sequence of sign removal Signage was packed up in reverse of Y 6.8 WZTM Compliance and How often does this occur? Installation. Y Y 6.8 WZTM Compliance and Is this the same as 6.6.5(b)?) How often does this occur? Y Y	Prompt / Question Records / Findings / Comments levant) Confirm that all necessary signage is displayed on moving vehicles N/A Confirm the sequence of sign removal (inner to outer - reverse of installation) N/A How often does this occur? Signage was packed up in reverse of installation. How often does this occur? Installation. How often does this occur? Is this the same as 6.6.5(b)?)	Prompt / Question Records / Findings / Comments levant) Confirm that all necessary signage is N/A displayed on moving vehicles N/A displayed on moving vehicles Signage was packed up in reverse of installation. Inner to outer - reverse of installation. Installation. How often does this occur? Installation. Is this the same as 6.6.5(b)?) Is this the same as 6.6.5(b)?	Prompt / Question Records / Findings / Comments Ievant) Confirm that all necessary signage is displayed on moving vehicles N/A Confirm the sequence of sign removal (inner to outer - reverse of installation) N/A How often does this occur? installation. (Is this the same as 6.6.5(b)?) Is this the same as 6.6.5(b)?)			Audit Report		
Ievant) Confirm that all necessary signage is N/A displayed on moving vehicles N/A Confirm the sequence of sign removal (inner to outer - reverse of installation) Signage was packed up in reverse of installation. How often does this occur? How often does this occur? (Is this the same as 6.6.5(b)?) Is this the same as 6.6.5(b)?)	Ievant) Confirm that all necessary signage is N/A displayed on moving vehicles N/A Confirm the sequence of sign removal (inner to outer - reverse of installation) Signage was packed up in reverse of installation. How often does this occur? Installation. Is this the same as 6.6.5(b)?) How often does this occur?	Ievant) Confirm that all necessary signage is N/A displayed on moving vehicles N/A displayed on moving vehicles Signage was packed up in reverse of installation. Immer to outer - reverse of installation. Installation. How often does this occur? Installation. Is this the same as 6.6.5(b)?) Installation.	Ievant) Confirm that all necessary signage is N/A displayed on moving vehicles M/A displayed on moving vehicles Signage was packed up in reverse of (inner to outer – reverse of installation) Installation. How often does this occur? Is this the same as 6.6.5(b)?)	Item Reference		Prompt / Question	Records / Findings / Comments	Compliant Y / N / OFI
Confirm the sequence of sign removal (inner to outer - reverse of installation) Signage was packed up in reverse of installation. How often does this occur? Installation. Is this the same as 6.6.5(b)?) Is this the same as 6.6.5(b)?)	Confirm the sequence of sign removal (inner to outer - reverse of installation) Signage was packed up in reverse of installation. How often does this occur? (Is this the same as 6.6.5(b)?) How often does this occur? (Is this the same as 6.6.5(b)?)	Confirm the sequence of sign removal (inner to outer - reverse of installation. Signage was packed up in reverse of installation. How often does this occur? (Is this the same as 6.6.5(b)?) How often does this occur?	Confirm the sequence of sign removal (inner to outer - reverse of installation) Signage was packed up in reverse of installation. How often does this occur? Is this the same as 6.6.5(b)?)	6.6.6	Mobile works (where relevant)	Confirm that all necessary signage is displayed on moving vehicles	N/A	
				.6.7	Sign Removal	Confirm the sequence of sign removal (inner to outer – reverse of installation)	Signage was packed up in reverse of installation.	>
res from work site observations:	res from work site observations:	res from work site observations:	res from work site observations:	.6.8	WZTM Compliance and Inspections	How often does this occur? (Is this the same as 6.6.5(b)?)		
				ures tro	m work site observations:			

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Audit: Work Zone Traffic Management – Part B – Site Visits Work Site Location: Wilkes Street, West Beach

Audit Report

Date: 20/02/2020 Site Supervisor: N/A - no one on site at time of review Job (ref) No. n/a

Item Reference	Requirement	Prompt / Question	Records / Findings / Comments	Compliant Y / N / OFI
6.6	WZTM at/on site	Confirm presence of WZTM Daily record sheet	Unattended site	
		Confirm TCP (if required)	No Workzone traffic management in place, evidence of work on footpath, concerns that there are trip hazards for members of the	OFI-10
		Confirm that the nominated Accredited Officer has their WZTM ticket available and that it is in date	public.	
		Confirm presence of WZTM guidance documentation		
		Confirm presence of any associated SWMS's, JSA's, SWP's		
6.6.1	WZTM Set-up	Confirm that adequate advance warning has been provided to road users? (how many metres ahead of	Traffic bollards as warning devices (See pictures)	0FI-10
		work) WZTM enables road users to safely navigate through the area	As can be seen in the pictures there are many tripping hazards, and this would be inconvenient for elderly pedestrians.	OFI-10
6.3	DPTI Road Impacts (where applicable)	Confirm approval has been obtained from DPTI for any works on or adjacent to a DPTI controlled road.	N/A	

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	Compliant Y / N / OFI													Last Updated: 11 Dec. 20
	Records / Findings / Comments		N/A					N/A		N/A			N/A	Last Upd
Ninday June	Prompt / Question	"Notification of Works Impacting on DPTI Roads" form has been used and is present of referenced	Confirm set-up as per approved WZTM and/or TCP	Are all listed signs/devices present	Confirm the sequence of sign installation (outer to inner)	Signage and devices are easily visible and not obscured	Signage and devices do not create other hazards	Was this done?	Was this required/necessary?	Any potential for signage to move?	Have regular checks been conducted and recorded?	Have any changes to signage been made, and were they recorded?	Confirm that all necessary signage is displayed on moving vehicles	Page 39 of 40
	Requirement		Positioning of signs and devices					Site "drive-through"		Sign "Operation"			Mobile works (where relevant)	Audit Report - WZTM 2020 final.docx
	Item Reference		6.6.2 6.6.4					6.6.3		6.6.5			6.6.6	Audit Report

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Last Updated: 11 Dec. 20

13 April 2021



Internal Audit Report Work

Zone Traffic Management

City of West Torrens

165 Sir Donald Bradman Drive, Hilton,

SA, 5033

Date: February/March 2020



Report Prepared For:

Liz Johnson

Program Leader Strategic Resilience

Report Prepared By: Craig Schopp and Chris Ginever Choose

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Audit Executive Summary

Summary of Non-conformances and Opportunities for Improvement

Non-Conformances Identified – Negative Consequences

NC #	Description of Non-Conformance	Risk Rating (LxC)
NC-1	The AssignIT WZTM program has the ability to enable a WZTM set-up to be developed and completed (saved) without confirmation or assurance that the minimum WZTM mandatory compliance elements have all been included as specified in section 6.7.1 and 6.7.2 of the WZTM procedure.	Mod x Maj High
NC-2	The WZTM Daily Record Sheet does not facilitate the recording of the minimum WZTM mandatory compliance elements having been included as specified in section 6.7.1 of the WZTM procedure. There is no place to record weather conditions (item 6.7.2h).	Likely x Min Moderate
NC-3	The WZTM system does not ensure that all necessary supporting documentation (such as SWMS's, SOP's and DPTI reference guides) are present and available for "use" at all WZTM locations where work is being conducted. Site visits identified that information was not present at paving work on Henley Beach Road and mowing work on Sir Donald Bradman Drive.	Mod x Mod Moderate
NC-4	Site visit to inspect paving works being conducted on Henley Beach Road identified that there was no signage erected on side roads leading to Henley Beach road, even though indicated on the WZTM Plan.	Mod x Cat High



Opportunities for Improvement Identified – Positive Consequences

OFI #	Description of Opportunity for Improvement	Opportunity Rating (LxC)
OFI-1	Consider the requirement to formalise the process and provide additional resource/coverage for the update and review of WZTM training records, as this process is currently undertaken in an ad-hoc manner by 1 person at CWT.	Mod x Maj High
OFI-2	Update the WZTM procedure to include specific procedural requirements relating to expectations for contractors working with &/or providing CWT's WZTM activities	Likely x Maj Extreme
OFI-3	Confirm the roll-out and implementation of the AssignIT WZTM system, ensuring that requirements relating to contractors and all CWT workgroups are fully completed.	Likely x Maj Extreme
OFI-4	Review mobile plant pre-start checklists, to ensure that any vehicle-mounted WZTM signage present on vehicles is also formally inspected as part of the pre-start process	Mod x Mod Moderate
OFI-5	Consider the opportunity to enable relevant WZTM supporting documentation (e.g.: DPTI approvals, TMP's) to be attached to AssignIT WZTM files.	Mod x Maj High
OFI-6	Review and update the WZTM procedure to incorporate references to the use of AssignIT, updated references to external reference documentation and additional information relating to mobile works requiring WZTM	Likely x Maj Extreme
OFI-7	Review section 4.14 of the WZTM procedure to confirm the utilisation of a SWP as being equivalent to a SWMS.	Unlik x Min Low
OFI-8	Consider the use of the CWT job number as the WZTM identification number for the AssignIT program (in preference to the separate numbering system that currently used).	Unlik x Mod Moderate
OFI-9	Contractor records on file (provided through tendering processes) do not confirm or ensure that all contractors involved with WZTM are licensed.	Mod x Maj High
OFI- 10	Review requirements relating to "traffic management" positioned on footpaths (and impacting pedestrians) when work has not been fully completed.	Mod x Mod Moderate



Non Conformances

Non Co	Non Conformance NC-1	Risk Rating High Risk			
The Assig	The AssignIT WZTM program has the ability to enable a WZTM set-up to be	Auditor	Descriptor WHS	<mark>Consequence</mark> Major	Likelihood Moderate
develope the minir as specifi	developed and completed (saved) without confirmation or assurance that the minimum WZTM mandatory compliance elements have all been included as specified in section 6.7.1 and 6.7.2 of the WZTM procedure.	Manager	WHS	Major	Moderate
Section	Issues and Impact	Management Response			Target Date
6.7.1	WZTM Records	The Manager City Operations has confirmed that the AssignIT system is able to capture the WZTM compliance elements noted including date, time of	confirmed that elements note	the AssignIT system is able dincluding date, time of	Complete
	AssignIT records are saved and uploaded to the cloud for storage and retention. At the time of the audit, records on file indicate that there have been 1089 plans/reports developed.	operation, location, identified hazards, signage layout reference, type of plant used, type of work performed, weather conditions and details and signature of Accredited Officer. However, it is not a program that assess WZTM set up for compliance with legislative or mandatory requirements. It	ards, signage lå ed, weather con owever, it is no legislative or n	ayout reference, type of nditions and details and t a program that assess nandatory requirements. It	
	Review of recorded information captured through the AssignIT system highlighted that it is possible to complete a WZTM record without all of the minimum mandatory information being provided.	is simply a notation tool for WZTM and directly replaces a paper based plan. Appropriate WZTM set up diagrams and plans are available digitally (via iPad but outside AssignIT) for every worker with easy search capabilities for each location. Should AssignIT develop a compliance module, the CWT will consider implementing this additional component.	A and directly r ns and plans ar orker with easy a compliance r onal componer	eplaces a paper based plan. e available digitally (via iPad search capabilities for each module, the CWT will nt.	
	Further opportunities also exist to be able to attach TCP's with WZTM files and records through the AssignIT system	Manager City Operations as well as supervisors highlight issues regarding non-conformance with the relevant officer/s as soon as possible after a non-	as supervisors h nt officer/s as s	ighlight issues regarding coon as possible after a non-	
	As AssignIT has not been rolled out to all contractors and does not accurately align with WZTM expectations for mobile works or horticultural works, it is recommended that any update of the	conformance is identified. Worksite inspection sheets of CWT and Contractor managed sites are completed regularly.	te inspection sl ularly.	heets of CWT and Contractor	
	procedures/processes still allow for the use of the "old" forms.	Training and reviews will continue with Coordinators and the Manager City Operations to visit sites, record video of non-compliant sites and discuss in team meetings.	e with Coordina deo of non-con	ttors and the Manager City npliant sites and discuss in	

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		Complete	
	It should be noted further that the CWT does not require contractors to use AssignIT. The only requirement is that they have an appropriate and compliant WZTM processes in place.	Manager City Operations and Supervisors regularly review Assign IT to ensure WZTM is set up appropriately and according to mandatory	requirements. Manager City Operations as well as supervisors highlight issues regarding non-conformance with the relevant officer/s as soon as possible after a non- conformance is identified. Worksite inspection sheets of CWT and Contractor managed sites are completed regularly. Training and reviews will continue with Coordinators and the Manager City Operations to visit sites, record video of non-compliant sites and discuss in team meetings.
Audit Report			AssignIT is able to capture all of the minimum WZTM "contents" information as is required on the WZTM Daily Record sheet, but as there are no system checks or confirmation that this minimum detail has been recorded, there is the potential for WZTM information to be omitted. Review of records and data stored for AssignIT WZTM jobs confirmed that not all of the minimum WZTM information had been specified in all jobs created and stored.
ŝ		6.7.2	

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Non Co	Non Conformance NC-2	Risk Rating Moderate Risk			
The WZ	The WZTM Daily Record Sheet does not facilitate the recording of the	Auditor	Descriptor WHS	Consequence Minor	<mark>Likelihood</mark> Likely
minimu as speci to recor		Manager	WHS	Minor	Likely
Section	Section Issues and Impact	Management Response			Target Date
6.7.2	WZTM Daily Record sheet "contents"	The WHS Unit considered amending the form however decided to revoke the form altogether due to all CWT staff who are responsible for setting up	ig the form ho ff who are res	wever decided to revoke the ponsible for setting up	Complete
	Review of WZTM Daily Record Form against minimum information	WZTM sites, now having access to AssignIT. The onus will be on the	AssignIT. The	onus will be on the	
		build account to provide evidence (prior to engagement) demonstrating the have their own WZTM processes if, as part of their terms of engagement,	, as part of the	ir terms of engagement,	
	 Time of Operation = YES 	they are required to set up WZTM. The WZTM Policy will capture these	The WZTM Pc	licy will capture these	
	 Location = YES 	amendments and be updated accordingly.	rdingly.		
	 Identified hazards = YES 				
	 Signage layout reference = YES 				
	 Type of plant used = YES 				
	 Type of work performed = YES 				
	 Weather Conditions = NO 				
	 Accredited Officer name/signature = YES 				
	Not all of the minimum information as listed in the WZTM procedure are captured on the WZTM Daily Record form.				

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Non Co	Non Conformance NC-3	Risk Rating Moderate Risk			
The WZ	The WZTM system does not ensure that all necessary supporting	Auditor	Descriptor WHS	Consequence Minor	<mark>Likelihood</mark> Likely
documer present (conducte work on l	documentation (such as SWMS's, SOP's and DPTI reference guides) are present and available for "use" at all WZTM locations where work is being conducted. Site visits identified that information was not present at paving work on Henley Beach Road and mowing work on Sir Don Bradman Drive.	Manager	ЯНМ	Minor	Likely
Section	Issues and Impact	Management Response			Target Date
6.6	No WZTM guidance documentation available on site.	This non-conformance relates to a contractor. It should be noted that the CWT does not require contractors to use AssignIT. The only requirement is	contractor. It to use Assign[should be noted that the T. The only requirement is	Complete
	Supervisor was not aware of "Assign it" and was able to show me a rough pencilled in plan on a google map on the back of the	that they have an appropriate and compliant WZTM processes in place.	compliant WZ	.TM processes in place.	
	WZTM plan in detail on note pad.	Regarding this specific non-conformance, a Contractor Site Inspection was completed by CWT on 26 February 2020 which showed compliance with all required aspects of contractor management including WZTM. If further action is warranted, it will be considered as part of the contractor management process.	mance, a Conti 2020 which sl nagement incl idered as part	ractor Site Inspection was howed compliance with all uding WZTM. If further of the contractor	
9. 9	No SWMS available (auditee claimed it was "in the office") - SWMS was requested but was not sent via email as requested.	As this work is considered high risk construction work, SWMS were required. A Contractor Site Inspection was completed by CWT on 26 February 2020 which showed compliance with all required aspects of contractor management including having SWMS available. If further action is warranted, it will be considered as part of the contractor management process.	construction ompleted by C required aspe MS available. I contractor ma	work, SWMS were required. WT on 26 February 2020 cts of contractor f further action is warranted, nagement process.	Complete

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	May 2021				
	The Manager City Operations has confirmed that the AssignIT system is able to capture the WZTM compliance elements noted including date, time of operation, location, identified hazards, signage layout reference, type of plant used, type of work performed, weather conditions and details and signature of Accredited Officer. However, it is not a program that assess WZTM set up for compliance with legislative or mandatory requirements. It is simply a notation tool for WZTM and directly replaces a paper based plan. Appropriate WZTM set up diagrams and plans are available digitally (via iPad but outside AssignIT develop a compliance module, the CWT will consider implementing this additional component.	Manager City Operations as well as supervisors highlight issues regarding non-conformance with the relevant officer/s as soon as possible after a non- conformance is identified. Worksite inspection sheets of CWT and Contractor managed sites are completed regularly.	Training and reviews will continue with Coordinators and the Manager City Operations to visit sites, record video of non-compliant sites and discuss in team meetings.	Additionally WHS are working with the Digital Services Team Leader online access capability to be developed to ensure all necessary supporting documentation (such as SWMS's, SOP's and DIT reference figure guides) are available for "use" at all WZTM locations where work is being conducted	This item has been captured in the 2020-2021 WHS and IM Annual Action Plan
Audit Report	Page 17 The AssignIT system does not ensure that the minimum information and details are completed when the WZTM record is created. It is currently possible to develop a WZTM file/record through this system that does not have all of the minimum WZTM information provided. An opportunity exists to upgrade the AssignIT system to include a series of checks that confirm that the minimum allowable detail has been provided before filing/saving/completing the WZTM electronic process. The AssignIT WZTM plan should not be able to be filed/completed without a minimum level of detail or information having been included.				

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Non Co	Non Conformance NC-4	Risk Rating High Risk			
Cito vicit	to increat ravine ruaric haine conducted on Uanlay Boach Dood	Auditor	Descriptor WHS	Descriptor Consequence WHS Maior	Likelihood Moderate
Henley B	dentified that there was no signage erected on side roads leading to Henley Beach road, even though indicated on the WZTM Plan.	Manager	WHS	Major	Moderate
Section	Section Issues and Impact	Management Response			Target Date
6.6.1	No signage on side roads leading to Henley Beach road even though indicated on the Plan.	A Contractor Site Inspection was completed by CWT on 26 February 2020 which showed compliance with all required aspects of contractor management including WZTM. If further action is warranted in regards to this contractor, it will be considered as part of the contractor management process. However, WHS will review and update the existing online contractor monitoring tool ensuring the contractor (engaged by CWT) responsible for the setting up of the WZTM for each job, has the documentation in accordance with DIT requirements. This item has been captured within the 2020-2021 WHS and IM Annual Action Plan	ompleted by C required aspe urther action is urther action is ad as part of th ate the existir actor (engage ch job, has the ch job, has the the 2020-202	WT on 26 February 2020 cts of contractor s warranted in regards to e contractor management ng online contractor d by CWT) responsible for documentation in 21 WHS and IM Annual	May 2021

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Opportunities for Improvement

Oppor	Opportunity 1	Risk Rating High Opportunity			
Consider	Consider the requirement to formalise the process and provide additional	Auditor	Descriptor WHS	Consequence Major	Likelihood Moderate
resource, this proce CWT.	resource/coverage for the update and review of WZTM training records, as this process is currently undertaken in an ad-hoc manner by 1 person at CWT.	Manager	WHS	Major	Moderate
Section	Issues and Impact	Management Response			Target Date
7.3	<u>Training of Accredited Officers</u>	These improvements to the training process have been captured in the 2020-2021 WHS and IM Annual Action Plan	ng process hav	e been captured in the 2020-	April 2021
	Review of currency of WZTM training is an ad-hoc process, undertaken via the generation of a "Chris21" report by				
	As there is only 1 person who administers this process administers , on opportunity exists to ensure that there is coverage in the event that administer is not present/available.				
	Review of the list identified that at the time of the audit there were 4 people who did not have current WZTM accreditation:				
	 Isted as expired (18/8/2018). Subsequent review by RE confirmed that PC completed re-training in 04/19 – updated records now on file. 				
	• cxpired 24/9/2018,				

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Opport	Opportunity 2	Risk Rating Extreme Opportunity	ity		
		Auditor	Descriptor	Consequence	Likelihood
Update th	Update the WZTM procedure to include specific procedural requirements		WHS	Major	Likely
relating to exped WZTM activities	tations for contractors working with &/or providing CWT's	Manager	WHS	Major	Likely
Section	Issues and Impact	Management Response			Target Date
8.3	<u>Responsibilities - Contractors</u> A number of different organisations are contracted to conduct work for and on behalf of CWT that required WZTM to be implemented. WZTM requirements for contractors are not specifically identified in the CWT Work Zone Traffic Management policy and procedure	The WZTM procedure will be updated to include specific procedural requirements relating to expectations for contractors working with &/or providing CWT's WZTM activities	ated to include ions for contra	e specific procedural actors working with &/or	April 2021
	While it is acknowledged that Contractor is also a Worker under WHS obligations, to remove any potential ambiguity between WZTM responsibilities and expectations between CWT personnel and contractors to CWT, it is recommended that appropriate references are added to the CWT WZTM policy and procedure.				
Page 16	Current CWT Policy and Procedure for WZTM - Contractor <u>Management</u> There are no references to the specific requirements that are to be followed by external organisations who contract Civil, horticultural or WZTM works to CWT. Specific requirements may include such things as: use of AssignIT or their own WZTM documentation, contractor confirmation of WZTM accreditation	The WZTM procedure will be updated to include specific procedural requirements relating to expectations for contractors working with &/or providing CWT's WZTM activities	ated to include ions for contra	e specific procedural actors working with &/or	April 2021
6.7.1	As AssignIT has not been rolled out to all contractors and does not accurately align with WZTM expectations for mobile works or horticultural works, it is recommended that any update of the procedures/processes still allow for the use of the "old" forms.	The WZTM procedure will be updated to include specific procedural requirements relating to expectations for contractors working with &/or providing CWT's WZTM activities	ated to include ions for contra	e specific procedural actors working with &/or	April 2021

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Onnor	Opportunity 3	Risk Rating Extreme Opportunity	nitv		
0220		Auditor	scriptor	Consequence	Likelihood
Confirm t	Confirm the roll-out and implementation of the AssignIT WZTM system,		WHS	Major	Likely
ensuring are fully c	ensuring that requirements relating to contractors and all CWT workgroups are fully completed.	Manager	WHS	Major	Likely
Section	Issues and Impact	Management Response			Target Date
8.3	<u>Responsibilities - Contractors</u> It was stated during the audit that the AssignIT system is available for all personnel including contractors. During the site visits it was	The Manager City Operations will confirm with the relevant supervisors that all workgroups have been trained in and are using AssignIT for WZTM. This confirmation will also include that AssignIT is included in the Induction process for new started.	l confirm with t d in and are us hat AssignIT is	the relevant supervisors that sing AssignIT for WZTM. This s included in the Induction	May 2021
		AssignIT is discussed informally between the CWT and contractors and so they are often aware of the system and its capabilities. However, the functionality is not suitable for all business models. Further, the CWT cannot require contractors use CWT forms or systems. Therefore, no action will be taken on this opportunity in relation to contractors.	etween the CW ⁻ d its capabilitie models. Furthe stems. Therefor ntractors.	T and contractors and so they s. However, the functionality er, the CWT cannot require e, no action will be taken on	
6.1.2	WZTM Daily Record Sheet	The Manager City Operations will confirm with the relevant supervisors that all workgroups have been trained in and are using AssignIT for WZTM. This	l confirm with 1 d in and are us	the relevant supervisors that sing AssignIT for WZTM. This	May 2021
	As the AssignIT system has not yet been fully implemented, there are still small groups and some contractors who use the WZTM form process rather than the electronic system.	confirmation will also include that AssignIT is included in the Induction process for new started.	hat AssignIT is	s included in the Induction	
		AssignIT is discussed informally between the CWT and contractors and so they are often aware of the system and its capabilities. However, the functionality is not suitable for all business models. Further, the CWT cannot require contractors use CWT forms or systems. Therefore, no action will be taken on this opportunity in relation to contractors.	stween the CW d its capabilitie models. Furthe stems. Therefor ntractors.	T and contractors and so they s. However, the functionality er, the CWT cannot require re, no action will be taken on	
Page 17	Complete and confirm roll-out of the system to all WZTM parties, including contractors.	The Manager City Operations will confirm with the relevant supervisors that all workgroups have been trained in and are using AssignIT for WZTM. This confirmation will also include that AssignIT is included in the Induction process for new started.	l confirm with t d in and are us hat AssignIT is	the relevant supervisors that sing AssignIT for WZTM. This included in the Induction	May 2021

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ney liity on	ng May 2021 es.	S Te
AssignIT is discussed informally between the CWT and contractors and so they are often aware of the system and its capabilities. However, the functionality is not suitable for all business models. Further, the CWT cannot require contractors use CWT forms or systems. Therefore, no action will be taken on this opportunity in relation to contractors.	Manager City Operations will approach AssignIT and consider implementing reference requirements relating to mobile works and horticultural activities.	This specific instance relates to a contractor. It should be noted that the CWT does not require contractors to use AssignIT. The only requirement is that they have an appropriate and compliant WZTM processes in place. The CWT cannot require contractors use CWT forms or systems. Therefore, no action will be taken on this opportunity in relation to contractors.
	Update drop-down selections to better include/reference requirements relating to mobile works and horticultural activities	<u>WZTM at/on site</u> Supervisor was not aware of "Assign it". Had paper based WZTM Plan.
	Page 17	6.6



Audit Report

Oppor	Opportunity 4	Risk Rating Moderate Opportunity	nity		
Review n	t pre-start checklists, to ensure that any vehicle-	Auditor	Descriptor WHS	Consequence Moderate	Likelihood Moderate
mounted part of th	ed as	Manager	WHS	Moderate	Moderate
Section	Section Issues and Impact	Management Response			Target Date
6.5	Checking of warning signage (moving signage) Pre-start documentation for CWT Water trucks #'s and and that have illuminated WZTM arrow boards were checked and confirmed that pre-starts are completed, but there are no specific or additional checks provided for the WZTM signage. An opportunity exists to include checking of attached signage on mobile plant.	WHS worked with the IT Applications Support Analyst the online mobile plant pre-start checklists will be reviewed, to ensure that any vehicle- mounted WZTM signage present on vehicles is also formally inspected as part of the pre-start process. Action completed January 2021.	ons Support Ar viewed, to ens in vehicles is a in completed J in completed J	alyst the online mobile ure that any vehicle- so formally inspected as anuary 2021.	Complete

Audit Report

Oppor	Opportunity 5	Risk Rating High Opportunity			
Consider	Consider the opportunity to enable relevant WZTM supporting	Auditor	Descriptor WHS	Consequence Major	Likelihood Moderate
documentat WZTM files.	documentation (e.g.: DPTI approvals, TMP's) to be attached to AssignIT WZTM files.	Manager	WHS	Major	Moderate
Section	Issues and Impact	Management Response			Target Date
6.7.1	<u>WZTM Records</u> AssignIT records are saved and uploaded to the cloud for storage and retention. At the time of the audit, records on file indicate that there have been 1089 plans/reports developed. Further opportunities also exist to be able to attach TCP's with WZTM files and records through the AssignIT system	As noted in for Non Conformance 1 (NC-1) the Manager City Operations has confirmed that AssignIT program has the capability to add additional information noted in the audit including the ability to enable attachment of supporting documentation. However, it is noted that the process for attaching this documentation is somewhat cumbersome. The Manager City Operations will approach AssignIT to develop a simpler method of attaching this documentation programs to work groups will be completed.	1 (NC-1) the M nas the capabil luding the abili ver, it is noted mewhat cumb approach Assig attion and if a ion programs t	lanager City Operations has ity to add additional ity to enable attachment of that the process for persome. gnlT to develop a simpler more suitable process is to work groups will be	February 2022
Page 17	Provide the ability to attach relevant reference documentation to the AssignIT record. Examples include: Traffic Management Plans, DPTI road closure confirmations, SWMS's and photos/videos of actual WZTM sites	As noted in for Non Conformance 1 (NC-1) the Manager City Operations has confirmed that AssignIT program has the capability to add additional information noted in the audit including the ability to enable attachment of supporting documentation. However, it is noted that the process for attaching this documentation is somewhat cumbersome. The Manager City Operations will approach AssignIT to develop a simpler method of attaching this documentation programs to work groups will be completed.	1 (NC-1) the M nas the capabil luding the abili ver, it is noted mewhat cumb approach Assig approach and if a ion programs t	lanager City Operations has ity to add additional ity to enable attachment of that the process for persome. snlT to develop a simpler more suitable process is to work groups will be	February 2022

Audit Report

Oppor	Opportunity 6	Risk Rating Extreme Opportunity	ity		
Review a	Review and update the WZTM procedure to incorporate references to the	Auditor	Descriptor WHS	Consequence Major	Likelihood Likely
use of As and addit	use of AssignIT, updated references to external reference documentation and additional information relating to mobile works requiring WZTM	Manager	WHS	Majar	Likely
Section	Section Issues and Impact	Management Response			Target Date
Page 16	Use of the new AssignIT system for WZTM – although this system has been in place for over 12 months, it is not currently mentioned or referenced in the procedure and there does not appear to be any draft procedure that is being worked on to incorporate this new system into the WZTM procedural	The WZTM procedure will be reviewed and updated to incorporate references to the use of AssignIT, updated references to external reference documentation and additional information relating to mobile works requiring WZTM.	wed and upda updated refere ormation relati	ted to incorporate :nces to external reference ng to mobile works requiring	April 2021
	requirements	The 2020-2021 WHS and IM Annual Action Plan includes review of the CWT WHS Workzone Traffic Policy to capture the new systems and processes introduced during the previous 12 months	al Action Plan i apture the new months	ncludes review of the CWT systems and processes	
Page 16	Updating other applicable documentation referenced in the procedure to ensure that the latest versions are referenced (eg: SA Standards for WZTM 2012 vs 2019).	The WZTM procedure will be reviewed and updated to incorporate references to the use of AssignIT, updated references to external reference documentation and additional information relating to mobile works requiring WZTM.	wed and upda updated refere ormation relati	ted to incorporate inces to external reference ng to mobile works requiring	April 2021
		The 2020-2021 WHS and IM Annual Action Plan includes review of the CWT WHS Workzone Traffic Policy to capture the new systems and processes introduced during the previous 12 months	al Action Plan i apture the new months	ncludes review of the CWT systems and processes	

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Oppor	Opportunity 7	Risk Rating Low Opportunity			
Baview S	Baviaw santion 1 11 of the W7TM procedure to confirm the utilication of a	Auditor	Descriptor WHS	Consequence Minor	Likelihood Unlikelv
SWP as b	SWP as being equivalent to a SWMS.	Manager	WHS	Minor	Unlikely
Section	Section Issues and Impact	Management Response			Target Date
Page 16	Section 4.14 – Sections states that " <i>CWT's SWP is equivalent to a SWMS</i> ". It is advisable that formal confirmation is obtained and/or maintained to confirm that this statement is correct.	The 2020-2021 WHS and IM Annual Action Plan includes review of the CWT WHS Workzone Traffic Policy to capture the new systems and processes introduced during the previous 12 months	al Action Plan i ipture the new months	ncludes review of the CWT systems and processes	April 2021
Page 16	Provide additional details and information in relation to the application of WZTM for activities that involve mobile works in section 6.6.6 (eg: weed spraying, line painting, mowing verges or median strips)	The 2020-2021 WHS and IM Annual Action Plan includes review of the CWT WHS Workzone Traffic Policy to capture the new systems and processes introduced during the previous 12 months	al Action Plan i ipture the new months	ncludes review of the CWT systems and processes	April 2021

Audit Report

Oppor	Opportunity 8	Risk Rating Moderate Opportunity	nity		
Consider	Consider the use of the CWT job number as the WZTM identification	Auditor	Descriptor WHS	Descriptor Consequence WHS Moderate	Likelihood Unlikely
number i system tl	number for the AssignIT program (in preference to the separate numbering system that currently used).	Manager	WHS	Moderate	Unlikely
Section	Section Issues and Impact	Management Response			Target Date
Page 17	There is no linkage between the AssignIT record created and the specific CWT "job" that is being completed. An opportunity exists to use the CWT job number as the AssignIT record/reference number	Job numbers should be used as AssignIT record/reference numbers where they exist. There may be occasions such as general maintenance to reserves, where a job number is not applicable. Where job numbers exist and should be included in AssignIT but this has not	AssignIT recor s such as gene ble. uld be include	d/reference numbers where ral maintenance to reserves, d in AssignIT but this has not	Completed
		been completed, supervisors are responsible for nigningruing the issue with the relevant employee/s. Training and reviews will continue with Coordinators and the Manager City Operations to visit sites and discuss in team meetings.	responsible to and reviews wi o visit sites an	r nignignung the issue with Il continue with Coordinators d discuss in team meetings.	

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Auditor Auditor Descriptor on file (provided through tendering processes) do not at all contractors involved with WZTM are licensed. Manager WHS and Impact WHS WHS WHS and Impact Management Response WHS bilities - Contractors WHS will work with the Procurement team to en thation is obtained during the tendering process, but this at specifically require provision of actual WZTM ions. WHS will work with the Procurement team to en thation is obtained during the tendering process for works. If it is identified tha incudes work Zone Traffic Management (WZTM) process which involves the WHS will contract or WTM plannin incudes. att specifically require provision of actual WZTM ions. WHS will avoid the Procurement team to en thation is obtained during the contractors WZTM plannin incudes Work Zone Traffic Management (WZTM) process for works if it is identified tha onfor evaluating the contractors WZTM plannin will also include a process for currency of tickets an file do not include or confirm WZTM license number tendering process for works. If it is identified tha incudes work Zone Traffic Management team to en tendering process for works. If it is identified tha incude a process for works. If it is identified tha incude a process for currency of tickets	Opport	Opportunity 9	Risk Rating High Opportunity			
e licensed. hat contractors accreditation. rocess, but this actual WZTM icense number			Auditor	-	Consequence	Likelihood
e licensed. hat contractors accreditation. rocess, but this actual WZTM icense number	Contracto	sr records on file (provided through tendering processes) do not		WHS	Major	Moderate
tion Issues and Impact Responsibilities - Contractors Responsibilities - Contractors There is currently no system in place for ensuring that contractors performing WZTM activities have current accreditation. Documentation is obtained during the tendering process, but this does not specifically require provision of actual WZTM qualifications. Records on file do not include or confirm WZTM license number or expiry date.	confirm a	or ensure that all contractors involved with WZTM are licensed.	Manager	WHS	Major	Moderate
Responsibilities - Contractors There is currently no system in place for ensuring that contractors performing WZTM activities have current accreditation. Documentation is obtained during the tendering process, but this does not specifically require provision of actual WZTM qualifications. Records on file do not include or confirm WZTM license number or expiry date.	Section	Issues and Impact	Management Response			Target
Responsibilities - Contractors There is currently no system in place for ensuring that contractors performing WZTM activities have current accreditation. Documentation is obtained during the tendering process, but this does not specifically require provision of actual WZTM qualifications. Records on file do not include or confirm WZTM license number or expiry date.						Date
There is currently no system in place for ensuring that contractors performing WZTM activities have current accreditation. Documentation is obtained during the tendering process, but this does not specifically require provision of actual WZTM qualifications. Records on file do not include or confirm WZTM license number or expiry date.	8.3	<u>Responsibilities - Contractors</u>	It is acknowledged that this forms Checklist and is a component of or	part of the Cor ngoing contract	ntractor Site Inspection tor management processes.	March 2021
Documentation is obtained during the tendering process, but this does not specifically require provision of actual WZTM qualifications.		There is currently no system in place for ensuring that contractors performing WZTM activities have current accreditation.	WHS will work with the Procureme	ent team to en	sure that as part of the	
qualifications. Records on file do not include or confirm WZTM license number or expiry date.		Documentation is obtained during the tendering process, but this does not specifically require provision of actual W7TM	tendering process for works, if it is includes Work Zone Traffic Manage	s identified that ement (WZTM)	t the contracted works that there is a verification	
Records on file do not include or confirm WZTM license number or expiry date.			process which involves the WHS ur	nit certifying th	he contractors qualifications	
Records on file do not include or confirm WZTM license number or expiry date.			and/or evaluating the contractors	WZTM plannin	g process or procedure. This	
Records on file do not include or confirm WZTM license number or expiry date.			will also include a process for curre	ency or tickets	and licenses	
Records on file do not include or confirm WZTM license number or expiry date.			This item is captured in the 2020-2	2021 WHS and	IM Annual Plan.	
Records on file do not include or confirm WZTM license number or expiry date.			The CWT will also consider the imp	olementation o	of contractor management	
Records on file do not include or confirm WZTM license number or expiry date.			אטונאפרפ אטאונכפנוסווא נט מכונפו ווופ	anage uns proc	ebb.	
	6.6		It is acknowledged that this forms Checklist and is a component of or	part of the Cor ngoing contract	tractor Site Inspection tor management processes.	March 2021
WHS will work with the Procurement team to ensure that a tendering process for works, if it is identified that the contrincudes Work Zone Traffic Management (WZTM), that ther process which involves the WHS unit certifying the contract and/or evaluating the contractors WZTM planning process will also include a process for currency of tickets and licens				, ,	- - - -	
incudes Work Zone Traffic Management (WZTM), that ther process which involves the WHS unit certifying the contrac and/or evaluating the contractors WZTM planning process will also include a process for currency of tickets and licens			WHS will work with the Procureme tendering process for works, if it is	ent team to en: s identified that	sure that as part of the t the contracted works	
and/or evaluating the contractors WZTM planning process will also include a process for currency of tickets and licens			incudes Work Zone Traffic Manage process which involves the WHS ur	ement (WZTM) nit certifving th	, that there is a verification ne contractors qualifications	
will also include a process for currency of fickets and licens			and/or evaluating the contractors	WZTM plannin	ig process or procedure. This	
			will also include a process for curre	ency of tickets	and licenses	

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The CWT will also consider the implementation of contractor management software applications to better manage this process.

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Oppor	Opportunity 10	Risk Rating Moderate Opportunity	nity		
Review re	Review requirements relating to "traffic management" positioned on	Auditor	Descriptor WHS	Consequence Moderate	Likelihood Moderate
footpaths (a completed.	footpaths (and impacting pedestrians) when work has not been fully completed.	Manager	WHS	Moderate	Moderate
Section	Issues and Impact	Management Response			Target Date
6.6	<u>WZTM at/on site</u> Unattended site No Workzone traffic management in place, evidence of work on footpath, concerns that there are trip hazards for members of the public.	CWT workers are to install WZTM in accordance with the DIT figures for pedestrians- directing pedestrians on to road. Signs should be installed in the event that a pedestrian is forced away from the usual path for example - Pedestrian watch your step or footpath closed or use other footpath. Manager City Operations will work with the Operations leadership group to educate and confirm staff are aware of the requirements involved. Manager City Operations will also consider additional processes in relation to this issue and implement if the value or benefit exceeds the cost.	in accordance on to road. Sig way from the u tpath closed or with the Open re of the requi re or the requi consider additi ue or benefit e	with the DIT figures for ins should be installed in the usual path for example - use other footpath. ations leadership group to rements involved. onal processes in relation to xceeds the cost.	August 2021
6.6.1	WZTM Set-up Traffic bollards as warning devices (See pictures) As can be seen in the pictures there are many tripping hazards, and this would be inconvenient for elderly pedestrians.	CWT workers are to install WZTM in accordance with the DIT figures for pedestrians- directing pedestrians on to road. Signs should be installed in the event that a pedestrian is forced away from the usual path for example - Pedestrian watch your step or footpath closed or use other footpath. Manager City Operations will work with the Operations leadership group to educate and confirm staff are aware of the requirements involved. Manager City Operations will also consider additional processes in relation to this issue and implement if the value or benefit exceeds the cost.	in accordance on to road. Sig way from the t path closed or with the Oper i with the Oper re of the requi re or the rediti consider additi	with the DIT figures for ins should be installed in the usual path for example - use other footpath. ations leadership group to rements involved. onal processes in relation to xceeds the cost.	August 2021

When assessing risk the likelihood and consequence must be correlated using the risk matrix detailed below for both negative or positive risks,

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⁻ acilitate Jences	ш	ш	I	Σ	Σ	Major
Enhance/Promote/Facilitate Positive Consequences	т	т	Μ	Μ		Anderate
Enhance Positiv	۶	Þ	M	L		Minor
	۶	_	H	-	-	jnsɔifingienl
ГІКЕГІНООД	Almost Certain > 95% chance of occurring	Likely 75% - 95% chance of occurring	Moderate 25% - 75% chance of occurring	Unlikely 5% - 25% chance of occurring	Rare < 5% chance of occurring	Scale
	M		2			tnsoitingianl
lanage Jences	¥	×	М	L	ġ.	Minor
Prevent/Reduce/Manage Negative Consequences	I	т	M	Μ		Moderate
Preven Negativ	ш	ш	т	Μ	M	Najor
	ш	ш	I	т	¥	Catastrophic

9.3.3 Swimming Pool Inspection Internal Audit

Brief

This report presents the results of the Swimming Pool Inspection Internal Audit.

RECOMMENDATION

It is recommended to the Committee that the *Swimming Pool Inspection Internal Audit* report be noted.

Introduction

Although not on the current 2019-2022 Audit Program, a recent judgement, and associated recommendations, by the State Coroner, involving the death of a small child provided the opportunity for a legislative assurance audit to be undertaken of Council's practices and processes with regard to swimming pool inspections pursuant to the *Development Act 1993* and the *Planning, Development and Infrastructure Act 2016.*

The Swimming Pool Inspection Internal Audit (Audit) was approved and commenced in August 2020. The Audit was undertaken by Galpins (Auditor) in accordance with the approved Audit scope to determine and report on whether the current processes (both in design and operation) relating to the programming and follow up of swimming pool inspections by the City of West Torrens (CWT), are robust and comply with the State Coroner's recommendations as well as with the Development Act 1993 and will meet the requirements of the Planning, Development and Infrastructure Act 2016 and associated regulations.

This scope of the audit included:

- Compliance with the appropriate sections *Development Act 1993* and any other applicable legislation or statutory requirements including appropriate record keeping and reporting.
- Guidance on any changes to the current processes to meet the requirements of the *Planning, Development and Infrastructure Act 2016* and associated Regulations.
- The adequacy and effectiveness of CWT processes including record keeping and management of follow up (or the lack thereof) of swimming pool inspections
- CWT processes regarding notification to applicants and those who have had inspections conducted around compliance with AS 1926.1 - 2012 Safety Barriers for swimming pools and the relevant requirements of the Building Code of Australia
- Adequacy of the current *Council Policy: Building and Swimming Pool Inspection* in relation to swimming pool inspection and follow up
- Adequacy of the current *Administration Policy Building and Swimming Pool Inspection* in relation to swimming pool inspection and follow up

Due to constraints imposed as a result of the COVID-19 pandemic in person meeting availability was severely restricted and, as a result, the *Swimming Pool Inspection Internal Audit* was conducted entirely via electronic methods, including all meetings and information provision.

Following completion of the Audit, a draft internal audit report (Report) was issued to the Executive and relevant managers and officers for comment and individual risk assessment with a closing meeting held to provide an opportunity to clarify Audit findings with the Auditor. The final Report was provided to the Executive in March 2021 (Attachment 1).

Discussion

The Audit found that the CWT demonstrated compliance with regulations relevant to swimming pool inspections with proactive work underway to prepare for the new Planning and Development Act and associated systems and processes. However, the Audit identified a need to strengthen record keeping in relation to swimming pool inspections with the associated recommendations being easily implemented through better documented processes.

Many of the recommendations have already been actioned and completed although the full impact of the *Planning, Development and Infrastructure Act* is yet to be realised and, therefore, some recommendations may no longer be relevant in their original form. However, all efforts will be taken to implement the intention of each recommendation in order to improve efficiency, compliance and business practices.

Seven (7) Audit findings were made by the Auditor of which six (6) attracted a moderate level of risk and one (1) attracted a low level of risk. The Administration has agreed to these findings and made comments regarding the associated recommendations. These opportunities and comments have been reviewed by the Administration and responses have been provided in the attached Report **(Attachment 1)**. All Audit findings are within the organisation's risk tolerance levels and are minor in nature, therefore progress updates will not be reported to the Committee.

Climate Impact Considerations

(Assessment of likely positive or negative implications of this decision will assist Council and the West Torrens Community to build resilience and adapt to the challenges created by a changing climate.)

There is no direct environmental impact in relation to this report.

Conclusion

The *Swimming Pool Inspection Internal Audit*, undertaken by Council's contract auditor, has been completed. All Audit recommendations are within risk tolerance levels and the recommendations minor in nature.

Attachments

1. Swimming Pool Inspection Audit Report



City of West Torrens Swimming Pool Inspection Audit

Internal Audit Report

Audited By: Galpins

Draft Report v1.0 Issued: 29/10/2020

Revised Draft v2.0 Issued: 30/11/2020

Final Report Executive Management Approval: 5/3/2021

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1. EXECUTIVE SUMMARY

1.1 Background

Council takes its responsibilities under the Development Act 1993 to monitor the installation of swimming pool and associated safety measures (including fencing) very seriously with regard to life and safety.

Although it is not on the current Audit Program 2019-22, a recent judgement by the State Coroner involving the death of a small child in a backyard pool in another SA council area has provided considerable learning opportunities for all councils. This judgement, and associated recommendations, provided the opportunity for a legislative and assurance audit to be undertaken of Council's practices and processes with regard to swimming pool inspections pursuant to the Development Act 1993 and the Planning, Development and Infrastructure (PDI) Act 2016 and associated Regulations, to identify, develop and implement improvement opportunities.

While most of the PDI Act is not yet in effect for the City of West Torrens as a Phase 3 Council, CWT is currently operating in the following legislative environment for swimming pools inspections and compliance:

- assessment of development applications for new swimming pools under the <u>Development Act;</u>
- inspections of swimming pools as per the regime set out in the Practice Direction 8 under the <u>PDI Act</u> and <u>PDI (Swimming Pool Safety) Regulations 2019</u>
- undertake any enforcement action for swimming pool non-compliance under the <u>Development Act</u> and <u>PDI Act</u>, depending on the specific circumstances
- act as authorised officers as defined under the <u>Development Act</u> and <u>PDI Act</u> Council have received conflicting advice on which act is applicable, so to be prudent Development Officers have been appointed as Authorised Officers under both acts.

During the 2 year audit period the following legislative changes occurred:

- swimming pool inspection requirements under Section 71AA the Development Act were repealed on 1 July 2019
- the Planning, Development and Infrastructure (Swimming Pool Safety) Regulations 2019 were introduced on 1 July 2019
- *State Planning Commission Practice Direction 8* was introduced in September 2019.

1.2 Objectives and Scope

The objective of the audit was to determine whether the current processes (both in design and operation) relating to the programming and follow up of swimming pool inspections by the CWT are robust, and comply with the State Coroner's recommendations as well as the Development Act 1993, and meet the requirements of the PDI Act and associated Regulations.

This included consideration of:

- compliance with the appropriate sections Development Act 1993 and any other applicable legislation or statutory requirements including appropriate record keeping and reporting
- guidance on any changes to the current processes to meet the requirements of the Planning, Development and Infrastructure Act 2016 and associated Regulations
- the adequacy and effectiveness of CWT processes including record keeping and management of follow up (or the lack thereof) of swimming pool inspections
- CWT processes regarding notification to applicants and those who have had inspections conducted around compliance with AS 1926.1 - 2012 Safety Barriers for swimming pools and the relevant requirements of the Building Code of Australia
- adequacy of the current Council Policy: Building and Swimming Pool Inspection in relation to swimming pool inspection and follow up
- adequacy of the current Administration Policy: Building and Swimming Pool Inspection in relation to swimming pool inspection and follow up.

This audit specifically excluded:

 swimming pool inspections undertaken by environmental health officers pursuant to the Public Health Act 2011.

1.3 Methodology

In performing this audit, the following was undertaken:

- A desktop audit of current documentation and relevant processes relating to swimming pool inspections and their associated follow up, including a review of an agreed number of inspections and their associated follow up over the last two years (July 2018 to June 2020)
- 2. An opening meeting was held with relevant managers at which the Auditor discussed the scope and overview of work to be performed prior to the commencement of testing.
- 3. On-line interviews were conducted with managers and staff responsible for swimming pool inspections, to establish any issues, concerns or opportunities for improvements.
- 4. Testing for compliance with current and incoming legislation, State Coroner's recommendations, policies, procedures, plans, and other relevant documentation to ensure the effectiveness of the swimming pools inspection process.

1.4 Associated Risks

Potential risks associated with a failure to manage the risk effectively as identified by Internal Audit include, but are not limited to:

- Death or injury to a person, serious or otherwise
- Negligence litigation and subsequent financial and reputational risks
- Investigation by external inquiry agency regarding systemic maladministration or misconduct
- Non-compliance or non-adherence to legislative or governance requirements
- Failure to implement better practice.

1.5 Examples of Good Practice

- CWT demonstrated compliance with regulations relevant to swimming pool inspections.
- The Building Team bring copies of the relevant standards and an internal checklist to the inspection site.
- If non-compliance is identified, pool owners are formally notified via an email that outlines areas of non-compliance and the required completion date for the rectification of non-compliance.
- Proactive work is underway by the Building and IT Teams to prepare for the new Planning and Development system.
- ✓ The Building Team proactively review approved development applications where notification of the completion of pool have not been received by CWT. They then initiate follow-up to identify if pools have been installed and require inspection.
- The Information Technology (IT) Team are working on enhancing the Pathways system by automating manual pool inspection-related processes for the Building Team.
- Changes to legislation/ procedures are discussed at team meetings.
- The team reported feeling comfortable to have informal 'chats' with other team members to clarify potential issues/ non-compliance.

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1.6 Overall roles and responsibilities

<u>Pool Owners:</u> Pool owners are obligated to inform CWT when the construction of their swimming pool is completed and again when permanent fencing is installed. If non-compliance is identified, the owners are required to rectify the non-compliance and communicate the progress of the implementation of the rectification to CWT.

<u>Cadet Development Officer (Cadet)</u>: The Cadet is required to monitor the receipt of notifications by pool owners, allocate inspections to Development Officers on a rotational basis and schedule the inspection with the pool owner. The Cadet maintains a spreadsheet of all inspections performed and updates the spreadsheet based on the results of the inspection. This spreadsheet is used to monitor the status of each inspection.

<u>Development Officers</u>: After the Cadet schedules the inspection, Development Officers perform the relevant inspections. When the inspection is complete the Development Officers are required to communicate the result of the inspection to the owners and continuously follow up on the progress of the rectification, if non-compliance is identified.

1.7 Key Findings and Recommendations

Audit identified a need to strengthen recordkeeping in relation to swimming pool inspections.

Audit reviewed an evidence trail that demonstrated inspections are being conducted. However, there was difficulty proving that CWT was meeting the timeliness requirements for performing and following up on inspections, as per the legislation.

The Building Team has drafted a guide to outline strengthened recordkeeping requirements, however audit testing identified some gaps in records for non-compliant pool inspections. To create more consistent recordkeeping, there is a need to clarify mandatory recordkeeping requirements and provide guidance on the level of detail to include in inspection notes. Regular Team Leader review of a sample of inspection notes and records, and offering constructive feedback to Development Officers can assist the team to meet recordkeeping expectations.

There is opportunity to explore the consistent use of enforcement action if non-compliance is not rectified in a timely manner, and explore training options to build Development Officer's confidence to perform swimming pool inspections. It may be valuable at times for two Development Officers to attend inspections to cross-check the inspection and enhance workplace health and safety to minimise isolation of Development Officers in unsafe locations.

CWT can update CWT's *Building and Swimming Pool Inspection Council and Administration Policies*, with:

- the mandatory inspections and the recordkeeping elements based on the changes to the PDI Act
- the mandatory record keeping requirements at CWT
- principles included in peer councils' policies
- definition of 'minor non-compliance' and identification of criteria for owners to meet prior to submitting photographs of the rectified non-compliance.

A guide with suggested timeframes for rectification for different non-compliance types may assist in creating a standardised approach. There is opportunity to regularly monitor the timeliness of swimming pool and dangerous structure inspections using statistics generated from the Pathways system. There is opportunity to automate manual processes for the Building Team, to increase efficiency and reduce the risk of human error. The IT Team are currently working on automating some pool related manual processes in the Pathways system.

Findings Summary Table

A summary of the internal audit findings is provided in the table below.

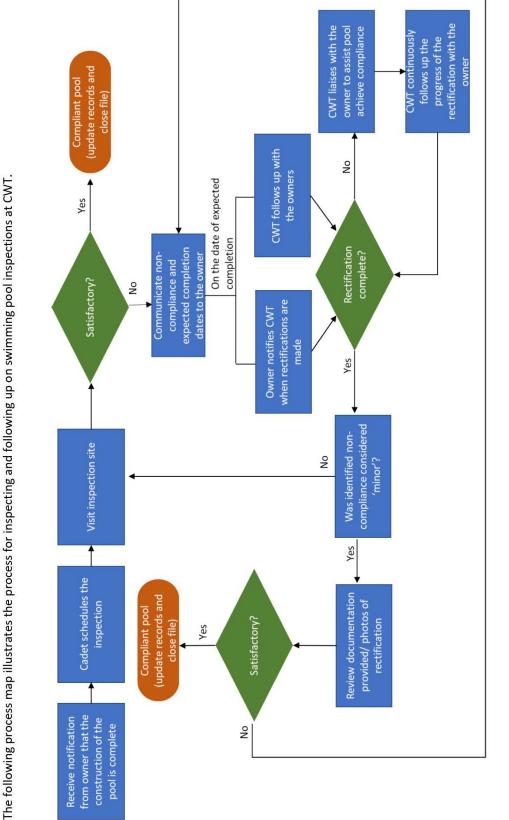
Finding and Recommendation/s - Risk Table	Risk Rating ¹
2.1 Compliance of CWT processes with legislation and regulations	Rating
Recommendation 2.1.1Develop a clear understanding of when Council will initiate enforcement action in relation to non-compliance in remedying swimming pool defects.Recommendation 2.1.2Clearly outline all records that must be kept by CWT Development Officers for each	Moderate
inspection in CWT's <i>Building Team Procedures</i> This should also differentiate between mandatory recordkeeping requirements and optional records.	
Recommendation 2.1.3 Finalise the <i>Building Team Procedures.</i>	
2.2 Guidance on changes to the Planning, Development and Infrastructure Act 2016.	
Recommendation 2.2.1 Confirm CWT's capacity/approach to ensure that 100% of swimming pools are inspected within two weeks of receiving notification that the pool is ready for inspection.	
Recommendation 2.2.2 Update CWT Building Team Procedures inspection requirements in line with the changes to the PDI Act to reflect the requirements that: - "councils must inspect 100% of swimming pools and swimming pool safety features constructed over the course of the relevant reporting year within 2 weeks of the notification of the completion of the construction of the swimming pool and safety features."	Moderate
2.3 Opportunity to improve recordkeeping	
Recommendation 2.3.1 Consider providing guidance on the level of detail to be included in the notes of the inspection result for swimming pool and dangerous structure inspections, including for compliant and non-compliant pools.	
Recommendation 2.3.2 Conduct team training sessions to ensure the team understand what is required to consistently complete the new inspection checklist by clarifying the intent and meaning behind the questions.	Moderate
Recommendation 2.3.3 Perform ongoing sample-based spot checks of the records maintained by the team. This will help ensure records of inspections are meeting CWT's record keeping expectations, and identify opportunities for training/ clarification and improvement.	
2.4 A need to standardise completion dates for rectification of non-compliance and defining minor non-compliance.	
Recommendation 2.4.1 Clarify and document appropriate timeframes for rectification of different types of non- compliance.	Moderate

¹ Refer to Appendix 1.

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Finding and Recommendation/s - Risk Table	Risk Rating ¹
Recommendation 2.4.2	
Define what constitutes a minor non-compliance in the CWT draft Building Team procedure.	
Note: Audit understand that a variety of non-compliances exist, and an exhaustive list is impractical to achieve; this guidance may provide common examples of minor non- compliance.	Moderate
Recommendation 2.4.3	
Determine and communicate requirements for owners to meet when providing photographic evidence of rectifications to CWT.	
2.5 Timeliness of inspections	
Recommendation 2.5.1 Implement a process to regularly review statistics that show timeliness of inspections to	
ensure CWT are meeting the timeframe requirements for inspecting swimming pools.	
Recommendation 2.5.2	
To enable accurate monitoring and reporting of pool inspection timeliness, investigate	Moderate
audit-identified errors in the Monthly Inspection Reports.	
Recommendation 2.5.3	
Assess the practicality and confirm the required timeline for performing dangerous structure	
inspections.	
We note that the timeframes for inspecting dangerous structures are not legislated.	
2.6 Need to automate some of the processes performed by the Buildings Team	
Recommendation 2.6.1	
Council continue building and implementing the enhanced Pathways system, particularly in relation to:	
- follow-up reminders	Moderate
- owner reminders for inspection actions	
- dashboards for team members to track their pool-related action items.	
2.7 Opportunity to offer additional training	
Recommendation 2.7.1	
Develop an approach to ongoing team training and knowledge-sharing in relation to	
swimming pool inspections. Examples include: - developing internal training material	(Martal)
- formalising team discussions to share knowledge/approaches in relation to inspections,	Low
record keeping and approaches to managing and following up on non-compliance (time	
periods allowed, use of enforcement)	
- assigning two inspectors to jointly perform pool inspections on a regular/periodic basis.	

Section 2 details the key findings and recommended actions proposed to be undertaken by management.



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1.8 Swimming Pool Inspections: Process Overview

Audit General Committee Agenda

2. INTERNAL AUDIT FINDINGS ANI	AND RECOMMENDATIONS	SNOI		
	Risk Rating - Moderate			
	Auditor De	Descriptor	Consequence	Likelihood
2.1 Compliance of CWT processes with legislation and regulations	Galpins	Reputational Relationships	Moderate	Moderate
	Manager Re	Reputational Relationships	Moderate	Moderate
Issues and Impact	Recommendation/s		Management Response	Target Date
 Testing indicated close alignment between CWT's policy and practices, State Coroner's recommendations and legislative requirements. Audit identified opportunities for further improving policy and practices in line with State Coroner's recommendations and legislation: Section 9.1.4 of the State Coroner's report states '<i>liff Council had activated enforcement if necessary, it is likely that the non-compliant features would have been</i> 			As a result of the incoming PDI Act, recommendations may no longer be relevant. All efforts will be taken to implement the intention of each recommendation in order to improve efficiency and business practices.	
 rectified'. Audit acknowledge that CWT have drafted an Enforcement Policy, which is awaiting Executive approval. There is opportunity for CWT to implement a clearer approach and triggers for 'activation of enforcement.' Audit tested eleven swimming pool inspections. Of these there was: One inspection for which no follow up was 	Recommendation 2.1.1 Develop a clear understanding of when Council will initiate enforcement action in relation to non-compliance in remedying swimming pool defects.	nding of when ement action in e in remedying	Recommendation 2.1.1 There is a draft Enforcement Policy under development. This policy will provide a clear understanding of when Council will initiate enforcement action.	Recommendation 2.1.1 January 2022
Two instances where the inspectors could Two instances where the inspectors could gain access to inspect the pool, and for w there is no evidence of subsequent follow u inspection by CWT (see Section 2.6). Eight instances for which Development Offi	Recommendation 2.1.2 Clearly outline all records t by CWT Development O inspection in CWT's <i>Procedures</i> This should also differentiat	hat must be kept fficers for each Building Team e	Recommendation 2.1.2 More specific record keeping information will be added to building procedures.	Recommendation 2.1.2 July 2021
		and optional		

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3 Recommendation drafted 2.1.3 to be July 2021 of this	
Recommendation 2.1.3 Document has been drafted with amendments to be included as a result of this Audit before finalizing.	
Recommendation 2.1.3 Finalise the Building Team Procedures.	
eight instances, Development Officers followed up owners for over 6 months. ² There is opportunity for CWT to determine a consistent approach to initiating enforcement action if the non- compliance is not rectified within specified timeframes. See Recommendation 2.1.1. This is also linked to Recommendation 2.5.1. This is also linked to Recommendation 2.5.1. This is also linked to <i>Recommendation 2.5.1.</i> Schedule 5 (6) of the PDI Act requires 'the keeping of records, statistics and other information by any person or body that performs a function under or pursuant to this Act'. There is opportunity to strengthen recordkeeping requirements in CWT's Building Team Procedure (the Procedure) See Recommendation 2.1.2. Section 210(1) of the PDI Act, states that 'the <i>Minister or</i> a council must appoint a person who holds the qualifications prescribed by the regulations to be an authorised officer for the purposes of this Act if required to do so by the regulations'. There is no specific accreditation for swimming pools, however all Development Officers are accredited Building Surveyors.	To demonstrate ongoing commitment to the intent of the Act in having qualified staff perform inspections, there is opportunity to formalise/offer more training to staff in relation to swimming pool inspections. See Section 2.7.

² In 2/3 of these instances, owners were granted 4 weeks to rectify the non-compliance and in 1/3 items, audit could not be provided with evidence to show that rectification dates were communicated to the pool owner.

	Dick Dating Moderate			
	NISK NAULING - INIOUERALE			
2.2 Guidance on changes to the Planning,	Auditor	Descriptor	Consequence	Likelihood
Development and Infrastructure Act 2016	Galpins	People	Minor	Moderate
	Manager	People	Minor	Moderate
Issues and Impact	Recommendation/s		Management Response	Target Date
On 1 July 2019, Section 156 of the PDI Act commenced, and section 71AA of the Development Act 1993 was repealed. The commencement of s156 of the PDI Act affected the regulation of swimming pool safety across the state.			As a result of the incoming PDI Act, recommendations may no longer be relevant. All efforts will be taken to implement the intention of each	
The timeline for the final phase of the new planning system roll out across large regional towns and metropolitan areas has been postponed, and more information will be released before Christmas 2020.			ndation in orde efficiency oractices.	
animanda etta onta ai baititachi za teo DNI Ast et azanda etta.	Recommendation 2.2.1	to contract	Recommendation 2.2.1	Recommendation
The changes to the FDI Act, as lacitumed in the state Flamming Commission's Practice Direction ³ affect two of the current	that 100% of swimming nools are inspected	proden to ensure	he recruited to increase	1.11v 2021
practices at CWT, relating to:	within two weeks of receiving notification	eiving notification	capacity for inspections within	TZOZ VIDL
100% of swimming pools have to be inspected within	that the pool is ready for inspection.	spection.	appropriate time frames.	
2 weeks of receiving notification that the pool is				
ready for inspection. See Recommendation 2.2.1.	C C anitabara manage			
Councils must keep records of inspections carried out	Ubdate CWT Building Team Procedures	eam Procedures	Document has been drafted	
in accordance with the practice direction, 4 and keep	inspection requirements in line with the	in line with the	with amendments to be	July 2021
those records in a register that is available for	changes to the PDI Act to reflect the	t to reflect the	t of 1	
inspection by the Commission upon 5 business days'	requirements that:		Audit before finalizing. PDI	
notice. See Recommendation 2.1.2.	- "councils must inspect 100% of swimming	00% of swimming	practice directions may impact	
Audit note that the Building and IT Teams are undertaking	pools and swimming pool safety features constructed over the course of the relevant	I safety features se of the relevant	on this recommendation but the effects are unknown	
proactive work to improve recordkeeping in line with these	reporting year within 2 weeks of the	weeks of the		
strengthened legislative requirements. Audit acknowledges	notification of the completion of the	npletion of the		
that a 'Monthly Inspection Report' is aiming to identify the	construction of the swimming pool and safety	ng pool and safety		
	icatules.			

³ State Planning Commission, Practice Direction 8 Council Swimming Pool Inspections 2019, Version 2: 12 March 2020. ⁴ State Planning Commission, Practice Direction 8 Council Swimming Pool Inspections 2019, Version 2: 12 March 2020.

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percentage of notified inspections that meet inspection targets. However, audit identified some inaccuracies in this report. See Section 2.5.	There is also opportunity for CWT to update the Procedure to reflect the changes to the PDI Act. See Recommendation 2.2.2.	

Descriptor Consequence Reputation Moderate Reputation Moderate Reputation Moderate Reputationships Moderate Relationships Moderate Relationships Moderate Management Response The second s		Bick Bating – Moderate			
Auditor Descriptor Consequence Galpins Reputation Moderate Relationships Reputation Manager Reputation Recommendation/s Moderate Recommendation/s Management Response PDI Act, recommendations PDI Act, recommendations PDI Act, recommendations PDI Act, recommendation of each recommendation in order to improve efficiency Active to implement the intention of each recommendation in order to improve efficiency Active to implement the intention of each recommendation in order to improve efficiency Active to implement the intention of each recommendation in order to improve efficiency Active to providing guidance on the level of Building procedures and dangerous structure inspections, including to prompt building for compliant and non-compliant pools. Active to ensure Active to en					
Galpins Reputation Relationships Moderate Manager Reputation Recommendation/s Moderate Recommendation/s As a result of the incoming PDI Act, recommendations may no longer be relevant. All efforts will be taken to implement the intention of each recommendation in order to improve efficiency and business practices. Recommendation 2.3.1 Recommendation 2.3.1 Consider providing guidance on the level of inspection result for swimming pool and detail to be included in the notes of the inspection result for swimming pool and for compliant and non-compliant pools. Consider providing guidance on the level of the clifter in filling out detail to be included in the notes of the inspection result for swimming pool and for compliant and non-compliant pools. Consider providing guidance on the level of the clifter in filling out detail to be included in the notes of the inspection result for swimming pool and for compliant and non-compliant pools. Appropriate details. Further work will continue to ensure Checklist is available in Pathway.		Auditor	Descriptor	Consequence	Likelihood
Relationships Relationships Manager Reputation Reputation/s Moderate Recommendation/s Management Response Intention of the incoming PDI Act, recommendations may no longer be relevant. All efforts will be taken to implement the intention of each recommendation in order to improve efficiency and business practices. Recommendation 2.3.1 Recommendation 2.3.1 Consider providing guidance on the level of detail to be included in the notes of the inspection result for swimming pool and dangerous structure inspections, including for compliant and non-compliant pools. for compliant and non-compliant pools. Drompt building officer in filling out documentation with appropriate details. Further work will continue to ensure Checklist is available in Pathway.	2.2 Annorthinity to immedia vocard focuing	Galpins	Reputation	Moderate	Moderate
Manager Reputation Relationships Moderate Recommendation/s Management Response Intention of the incoming PDI Act, recommendations may no longer be relevant. All efforts will be taken to implement the intention of each recommendation in order to improve efficiency and business practices. Recommendation 2.3.1 Recommendation si may no longer be relevant. All efforts will be taken to implement the intention of each recommendation in order to improve efficiency and business practices. Recommendation 2.3.1 Recommendation 2.3.1 Consider providing guidance on the level of detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the inspection structure inspections, including for compliant and non-compliant pools. Further work will continue to ensure Checklist is available in Pathway.			Relationships		
Recommendation/s Relationsis Recommendation/s Management Response PI Act, recommendations PAs a result of the incoming PDI Act, recommendations PDI Act, recommendations PDI Act, recommendations PDI Act, recommendations PDI Act, recommendation of each recommendation in order to improve efficiency Recommendation 2.3.1 Recommendation 2.3.1 Recommendation 2.3.1 Recommendation 2.3.1 Consider providing guidance on the level of each recommendation in order to improve efficiency and business practices. Recommendation 2.3.1 Recommendation 2.3.1 Consider providing guidance on the level of the included in the notes of the inspection result for swimming pool and detail to be included in the notes of the recklist have been inspections, including to prompt building out decommentation with appropriate details. Further work will continue to ensure checklist is available in Pathway.		Manager	Reputation	Moderate	Moderate
Recommendation/s Management Response Recommendation/s As a result of the incoming PDI Act, recommendations may no longer be relevant. All efforts will be taken to implement the intention of each recommendation in order to improve efficiency and business practices. Recommendation 2.3.1 Consider providing guidance on the level of detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the inspection result for swimming pool and dor compliant and non-compliant pools. Further work will continue to ensure Checklist is available in Pathway.			Relationships		
As a result of the incoming PDI Act, recommendations may no longer be relevant. All efforts will be taken to implement the intention of each recommendation in order to improve efficiency and business practices. Recommendation 2.3.1 Consider providing guidance on the level of detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the inspection result for swimming pool and detail to be included in the notes of the checklist have been dangerous structure inspections, including for compliant and non-compliant pools. Further work will continue to ensure Checklist is available in Pathway.	Issues and Impact	Recommendation/s		Management Response	Target Date
	The Procedure outlines documentation requirements for swimming pool and dangerous structure inspections (see Appendix 5 for details). Testing identified opportunities to: • Confirm CWT's expectations around mandatory and optional records to be maintained for each inspection, including for inspections with a satisfactory result. See Recommendation 2.1.2. • Provide guidance on the level of detail to be included in inspection notes (for example, creating a template or formalising a guideline). See Recommendation 2.3.1. The Team Leader reported an expectation that Development Officers take photos in only 1/11 swimming pool inspections and in 2/3 dangerous structure inspections tested. It is also mandatory to complete and maintain records of inspection checklists, however in 8 ⁵ /11 tested inspections there were no checklists saved in the Objective system. See Appendix 7 for the results of testing, and additional guidance from legislation. It was reported that a new inspection checklist rolled out in July 2020 may be open to interpretation, which may result in July 2020 may be open to interpretation, which may result in	Recommendation 2.3.1 Recommendation 2.3.1 Consider providing guidance detail to be included in the inspection result for swimn dangerous structure inspect for compliant and non-compli	on the level of e notes of the ming pool and tions, including iant pools.	As a result of the incoming PDI Act, recommendations may no longer be relevant. All efforts will be taken to implement the intention of each recommendation in order to improve efficiency and business practices. Recommendation 2.3.1 Building procedures and checklist have been reviewed and amended to prompt building officer in filling out documentation with appropriate details. Further work will continue to ensure Checklist is available in Pathway.	Recommendation 2.3.1 July 2021

⁵ Of the 8 inspections where no checklists were saved in the Objective folder, 3 occurred before the procedure was implemented and 5 occurred after the procedure was implemented.

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Recommendation 2.3.2 July 2021	Recommendation 2.3.3 Complete
Recommendation 2.3.2 Checklist used in process is still being finalised. Training will take place once checklist is implemented in Pathway	Recommendation 2.3.3 This recommendation will be implemented by the Team Leader Building completing regular 'spot checks' of records and inspections. This will be diarised and undertaken quarterly.
Recommendation 2.3.2Conduct team training sessions to ensure the Building Team understand what is required to consistently complete the new inspection checklist. This can include clarifying the intent and meaning behind the questions.Recommendation 2.3.2 Building Team understand what is required to consistently complete the new inspection checklist. This can include clarifying the intent and meaning behind the questions.	Recommendation 2.3.3 Perform ongoing sample-based spot checks of the records maintained by the team. This will help ensure records of inspections are meeting CWT's record keeping expectations, and identify opportunities for training/ clarification and improvement. This will be diarised and undertaken quarterly.
an inconsistent approach amongst Development Officers. See Recommendation 2.3.2. Recommendation 2.3.2. The quality of recordkeeping may be strengthened if the Team Leader conducts sample-based reviews of inspection notes/records and provides constructive feedback to Development Officers to promote compliance and consistency. See Recommendation 2.3.3.	

	D. 1 D. 1.			
	Kisk Kating – Moderate	derate		
2.4 A need to standardise completion dates	Auditor	Descriptor	Consequence	Likelihood
for rectification of non-compliance and to	Galpins	Reputation	Moderate	Moderate
define 'minor non-compliance'		Relationships		
	Manager	Reputation	Moderate	Moderate
Issues and Impact	Recommendation/s	n/s	Management Response	Target Date
Determining appropriate completion dates for rectification of non-compliance Following inspections, the completion dates for rectifying and identifying non-compliance is determined at the discretion of the Development Officer based on their experience and professional judgement. Interviewees indicated some ambiguity in determining rectification dates for non- compliance. A recommendation from the State Coroner's report related to 'specifying a completion date' for the rectification of non- compliance. There is opportunity to develop a guide with suggested timeframes for rectifying different types of non- compliance. See Recommendation 2.4.1. Opportunity to define 'minor non-compliance' The CWT draft Building Team Procedure states: "where it is a minor non-compliance, it may be appropriate to accept receipt of photos and written evidence (not verbal) that the non-compliance has been suitability resolved." Audit notes that the Procedure, does not define 'minor non- compliance,' which creates a risk of inconsistencies in the		Recommendation 2.4.1 Clarify and document appropriate timeframes for rectification of different types of non-compliance.	As a result of the incoming PDI Act, recommendations may no longer be relevant. All efforts will be taken to implement the intention of each recommendation in order to improve efficiency and business practices. Recommendation 2.4.1 It is difficult to codify requirements and timeframes. The Building Procedures document states that non- compliances requiring rectification are completed in 2 weeks. This has been set as a standard unless the Building Officer deems it a higher priority situation. Discussions are undertaken regularly in team meetings. To ensure consistency	Recommendation 2.4.1 Complete
approach used among Development Officers. See Recommendation 2.4.2.			decisions. No further action at this time.	
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Recommendation 2.4.2 July 2021	Recommendation 2.4.3 July 2021
Recommendation 2.4.2 Building procedures document will have 'minor' removed to ensure all non- compliances are captured. Issues are discussed in team meetings.	Recommendation 2.4.3 Building procedures will be amended to state requirements.
Recommendation 2.4.2Recommendation 2.4.3Define what constitutes a minor non- compliance in the CWT draft Building Team procedure.Building procedures document will have 'm removed to ensure all removed to ensure all 	Recommendation 2.4.3 Determine and communicate requirements for owners to meet when providing photographic evidence of rectifications to CWT.
There is also opportunity to strengthen requirements of photographs sent by pool owners as evidence that an issue is addressed. For example, photographic measurement of a deressed. For example, photographic measurement of a compliance in the CWT draft Building Team 	

	Kisk Kating - Moderate			
	Auditor D	Descriptor	Consequence	Likelihood
	Galpins 0	<mark>Organisati</mark>	Minor	Moderate
	10	onal/		
2.5 Timeliness of inspections	Ū	Customer		
	IJ	Impact		
	Manager 0	Organisati	Minor	Moderate
		onary Cristomer		
		Impact		
lssues and Impact	Recommendation/s		Management Response	Target Date
Inspectina swimmina pools			As a result of the incoming PDI	
5			Act, recommendations may no	
As per the PDI Act, Councils are required to inspect 80% of			longer be relevant. All efforts	
swimming pools within 2 weeks and 20% of swimming pools			will be taken to implement the	
within 2 months of receiving notification from the owner. ⁶			intention of each	
Audit tested eleven swimming pool inspections and in eight			recommendation in order to	
instances, pool owners notified CWT of the construction of their			improve efficiency and business	
swimming pool. In four of these eight instances, inspections were			practices.	
not completed within 2 weeks of receiving this notification.7 It				
was reported that the Team Leader has access to statistics that			Recommendation 2.5.1	
show the number of days between notification and inspections,			A process is already in place to	
however, generates these statistics only if investigating a specific	Recommendation 2.5.1		show timeliness of inspections.	Recommendation 2.5.1
issue. ⁸ See Recommendation 2.5.1.	Implement a process to regularly	o regularly	Practice directions changed	Complete
Audit testing identified two of eleven instances where the	review statistics that show	at show	within the audit period to	
inspection notes state "could not gain access to inspect -	CWT are meeting the timeframe	timeframe	timeframes.	
recommend a letter to the be sent out requesting an inspection."	requirements for	inspecting		
	swimming pools.			

⁶ Note: this requirement will change when the changes to the PDI Act are rolled out, however was current at the time of the audit.

⁷ Audit notes that in three of the eleven instances, owners did not notify CWT when the construction of their pool was complete; however the 6 monthly audit prompted Development Officers to follow this up with pool owners.

⁸ Note that audit was not able to analyse the timeliness of inspections for the entire population of inspections, because the notification date and inspection date show as 10 being the same in the source data provided. However, we were able to test timeliness via detailed testing and found four inspections that were not performed within 2 weeks of being notified. These were inspected 19, 44, 194 and 295 days after receiving notification.

Recommendation 2.5.1. The management of a subsequently followed up or inspected by CWT. See Recommendation 2.5.1. It was reported that if reminders for follow up audits are missed by the Development Officers, the inspections get picked up in an internal and pro-active 6-monthly audit. However, this may affect the timeliness of the inspection. In addition, a Monthly Inspection Report has been developed to track timeliness of inspections. Audit testing identified errors in this report (reported 100% timely however this was not the case) that require investigation, to ensure that clear and accurate reporting is in place. See Recommendation 2.5.2 .	Recommendation 2.5.2 To enable accurate monitoring and reporting of pool inspection timeliness, investigate audit- identified errors in the Monthly Inspection Reports.	Recommendation 2.5.2 Review complete. Errors identified during this audit were caused by a previously implemented change to reporting. This meant some inspections were incorrectly categorised which in turn affected the timeframes of these inspections. This issue has been resolved.	Recommendation 2.5.2 Complete
Inspecting dangerous structures CWT procedure states that, "potential dangerous structures should be inspected on the same business day that the Building Team is notified of the matter". Audit identified that in 2/3 instances, inspections were not performed on the same day as the notification was received. ¹⁰ See Recommendation 2.5.3.	Recommendation 2.5.3 Assess the practicality and confirm the required timeline for performing dangerous structure inspections. We note that the timeframes for inspecting dangerous structures are not legislated.	Recommendation 2.5.3 This recommendation requires further clarification that it is only related to swimming pool dangerous structures. Processes are in place in the building procedures to assess the practicality for performing such inspections. Inspections identified by the auditors as having non confirming timeframes were assessed by the Team Leader Building as having sufficient evidence as per the building procedures to warrant an amended timeline for inspections.	Recommendation 2.5.3 Complete

⁹ The 6-monthly audit identified one of these two inspections: however, it was not followed up or re-inspected by CWT. ¹⁰ Note in one instance the 'date responded' was the day after the 'date received', and in the other instance the 'date responded' was two days after the 'date received'.

	Risk Rating - Moderate	erate		
2.6 Need to automate some of the processes performed by the Buildings Team	Auditor Galpins	Descriptor Organisation al/Customer Impact	<mark>Consequence</mark> Moderate	Likelihood Unlikely
	Manager	Organisation al/ Customer Impact	Moderate	Unlikely
Issues and Impact	Recommendation/s	ı/s	Management Response	Target Date
As a result of the State Coroner's report and the changes to the PDI Act, the IT Team are working on enhancing the Pathways system to automate some of the Building Team's manual processes. Enhancements will include: • Development Officers being reminded to follow up on non- compliance when completion dates for rectification are approaching • owners being reminded to notify CWT when the construction of the pool is completed and due for inspection • dashboards that can be accessed by the team that outline each Development Officer's inspections, outstanding items and the status of the inspections • reminders when pools with temporary fencing that should be replaced with permanent fencing are due to be inspected. ¹¹ Please see Appendix 7 for a full list of planned capabilities for the enhanced Pathways system. The planned changes will minimise the need for Development Officers to consciously and manually track outstanding items and will reduce the risk that items are missed/not actioned. See Recommendation 2.6.1.	Recommendation 2.6.1 Recommendation 2.6.1 Council continue building and implementing the enhanced Pathways system, particularly in relation to: follow-up reminders for inspection actions dashboards for team members to track their pool-related action items.	ommendation 2.6.1 ncil continue building and lementing the enhanced aways system, particularly in tion to: follow-up reminders owner reminders for inspection actions dashboards for team members to track their pool-related action items.	As a result of the incoming PDI Act, recommendations may no longer be relevant. All efforts will be taken to implement the intention of each recommendation in order to improve efficiency and business practices. Recommendation 2.6.1 Since this audit was undertaken, the State Government, as part of its planning reform, announced that an inspection module will be built into the e-planning portal which is a key element of the PDI Act. This module expected to go live in March 2021. This Pathway project will be placed on hold until this inspection module is launched to ensure that no duplication occurs.	Recommendation 2.6.1 April 2021

 $^{^{11}\,\}mathrm{This}$ may not be applicable after the changes to the PDI Act are implemented.

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2.7 Opportunity to offer additional training Auditor Descriptor 2.7 Opportunity to offer additional training Auditor People/ WHS Issues and Impact People/ WHS People/ WHS Issues and Impact People/ WHS People/ WHS In addition to the qualifications to become a Builder Surveyor, there are no other formal qualifications specific to swimming pool inspections. ¹² The pre-requisites to become a Development Officer include a university degree, registering as building surveyor with AlBS and levels of accreditation. Development Officers then receive on-the-job training when they commence work with CWT. Audit testing found inconsistencies in inspection records and rectification of non-compliances. This indicates that there is opportunity for hon-compliances. This indicates that there is opportunity for
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Manager Recommendation/s
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rectification dates provided to owners for the rectification of non-compliances. This indicates that there is opportunity for
non-compliances. This indicates that there is opportunity for
CWT to offer training to the Building Team on, but not limited Recommendation 2.7.1
to: Develop an approach to ongoing team
record keeping
CWT policies and procedures Examples
incl
- developing internal training material
Mild to look for when conducting an inspection - formalising team discussions to share
 the expectations of the team knowledge/approaches in relation to
g rectification dates for rectifying non-
compliance approaches to managing and following
how to communicate with owners. up on non-compliance (time periods
To further encourage consistency among team member's allowed, use of enforcement)
inspection approach, CWT can consider if there is value in two
Development Officers attending swimming pool inspections

¹² Audit notes that all Development Officers in the Building Team, who perform swimming pool inspections are accredited Building Surveyors.

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assigning two inspectors to jointly external trainers. Training	perform pool inspections on a will continue to be	organized by the Team	Leader Building. Multiple	officers attend complex	inspections if required	and these are specifically	considered in team	meetings.
jointly	on a							
to	s							
inspectors	inspection	basis.						
two	pood	eriodic						
assigning	perform	regular/periodic basis.						
1								_
periodically as a way to knowledge-share/ learn from each -	other when on site.							

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Appendix 1 CWT Risk Matrix

This section outlines the CWT's risk assessment matrix.

Likelihood Descriptors

RATING	% Chance of Occurring	DESCRIPTION OF LIKELIHOOD
Almost Certain	>95%	Will almost certainly occur
Likely	75 - 95%	Very likely to occur
Moderate	25-75%	Medium chance of occurring
Unlikely	5-25%	Possible, though unlikely, to occur
Rare	<5%	Remote possibility of occurring

Consequences Descriptors Matrix

Rating	Financial	Organisational/ Customer Impact	Reputation/ Relationships Damage	People	WHS
Insignificant	≤ 5% reduction in revenue Theft or loss of up to \$2,000	Lack of response to customer request 3 days later than deadline Inability to provide service/s for 1 day External enquiry agency request for information	Letters of complaint to general managers or managers	≥ 10% staff turnover per year ≤ 10% non- availability or capability of staff at any one time	Bump, minor bruise, removal of splinters etc. requiring no treatment (report only) to staff members Or To members of the public due to the actions/omissions of work undertaken by CWT
Minor	Between 6 and 10% variation in expenditure/ revenue Theft or loss between \$2001 to \$30,000	Lack of response to customer request 5 week later than deadline Inability to provide a service for 2 working days Ombudsman/Ministerial investigation commenced.	Letters of complaint to CEO/Mayor or letters to Messenger/Advertiser	 ≥ 15% staff turnover per year ≥ 15% non- availability or capability of staff at any one time 	First aid treatment including; Hot cold treatment, removal of splinters, covering wounds, removal of foreign bodies in the eye using eye wash or cotton swab, administering non- prescription medication to staff members Or To members of the public due to the actions/omissions of work undertaken by CWT Or Incident where potential for minor injury may occur

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Rating	Financial	Organisational/ Customer Impact	Reputation Relationships	People	WHS
Moderate	Between 11 and 15% variation in expenditure/revenue Theft or loss of between \$30,001 and \$100,000	Lack of response to customer request 10 working days later than deadline Inability to provide all services for more than 24 hours Inability to provide one service for ≥ 5 -days Ombudsman/Ministerial investigation finds systemic weaknesses in organisational processes ICAC investigation commenced	Negative article in Messenger/Advertiser.	 ≥ 20% permanent staff turnover per year ≥ 20% non- availability or capability of staff at any one time 	Medically treated injury requiring clinic or hospital treatment less than 24 hours duration, installing a drip or iv, physiotherapy as a cure, applying a cast, surgery, prescription drugs, stitching a wound to staff members Or To members of the public due to the actions/omissions of work undertaken by CWT Incident where potential for moderate injury may occur Notifiable incident to SafeWork SA or Office of the Technical Regulator (OTR) Category 1 - Breach of Duty for reckless conduct
Major	Between 16 and 40% variation in expenditure/revenue Theft or loss of between \$100,001 and \$1m	Lack of response to customer request 20 working days later than deadline Inability to provide one service for ≥ 20 working days Inability to provide all services for ≥ 48 hours. Ombudsman/Ministerial	Negative front page story in Messenger/Advertiser.	≥ 40% permanent staff turnover per year ≥ 40% non- availability or capability of staff at any one time	Major injury resulting in limb loss, electrocution, permanently disability, blindness to staff members Or To members of the public due to the actions/omissions of work undertaken by CWT Incident where potential for
		review results in review results in changes to systems and processes Employee(s)/Elected Members charged with corruption and referred to DPP for prosecution			major injury may occur Notifiable incident to SafeWork SA or Office of the Technical Regulator (OTR) Category 2 Breach of Duty
Catastrophic	≥ 40% variation in expenditure/revenue. Theft or loss of >\$1m.	Inability to provide critical Council services (Waste, HACC, St Martins, dog attack response) for ≥ 5 working days Ministerial abolition of Council Employee(s)/Elected Member(s) found guilty of corruption	Follow up stories in any media that extend the scope of concern.	≥ 50% permanent staff turnover per year ≥ 50% non- availability or capability of staff at any one time	The work related death of an employee The death of a person due to CWT negligence Notifiable incident to SafeWork SA or OTR) Category 3 Breach of Duty

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Risk Analysis Matrix – Level of Risk

When assessing risk, the likelihood and consequence are correlated using the risk matrix detailed below.

		t/Reduce/l ve Conseq			LIKELIHOOD			/Promote/ /e Conseq		
Е	E	н	м	м	Almost Certain > 95% chance of occurring	м	м	н	Ē	E
E	E	н	м	L	Likely 75% - 95% chance of occurring	L	м	н	E	Е
н	н	м	м	L	Moderate 25% - 75% chance of occurring	L	м	м	н	н
н	м	м	L	L	Unlikely 5% - 25% chance of occurring	L	L.	м	м	н
м	м	L	L	L	Rare < 5% chance of occurring	J	L	L	м	м
Catastrophic	Major	Moderate	Mnor	Insignificant	Scale	Insignificant	Mnor	Moderate	Major	Outstanding

Appendix 2 CWT Documents Reviewed

The list below identifies key documentation reviewed as a part of this internal audit:

- Building and Swimming Pool Inspection Council Policy
- Building and Swimming Pool Inspection Administration Policy
- Building Cadet Handbook V3.4
- Draft CWT Building Team Procedures V0.3
- CWT Pool Inspection reporting using Pathways
- Swimming Pools Outstanding
- Swimming Pool Inspections report Jan-June 2020
- Draft Swimming Pool Inspections planned for implementation
- Swimming Pool inspection checklist, July 2020

Appendix 3 Interviewees

- o Team Leader Building
- o Senior Development Officer Building
- Development Officer Building
- Cadet Development Officer Building

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Appendix 4 Sample of inspections tested

Swimming pool inspections (Development application numbers)

- 211/769/2018
- 211/394/2019
- 211/763/2017/A
- 211/991/2018
- 211/1196/2017
- 211/1079/2017
- 211/350/2018
- 211/99/2017
- 211/315/2018
- 211/511/2017
- 211/203/2018

Dangerous structure inspections

- 221624
- 230035
- 234490

Appendix 5 Extract from CWT's Building Procedure V0.3 outlining recordkeeping requirements

Summary of inspection documentation to be recorded:

Documentation type	Record	location		
	General Inspection	Dangerous Structure Inspection		
Summary of conversations held on site, including names, roles, company, contact details (where applicable) and outcome of conversation	Pathway Inspection record Additional records in DA Objective file (reference Objective ID in Pathway)	Pathway Inspection record Additional records in inspection Objective file (reference Objective ID in Pathway)		
Photos, including photos identifying breaches, matters requiring further action, evidence of safety issues. Photos of buildings/structures should be undertaken prior to any person dismantles or moves work. Photo evidence of each identified breach must be recorded.	DA Objective file	Inspection Objective file		
Notes and sketches	Pathway Inspection record Additional records in DA Objective file (reference Objective ID in Pathway)	Pathway Inspection record Additional records in inspection Objective file (reference Objective ID in Pathway)		
Sketches	DA Objective file (reference Objective ID in Pathway)	Inspection Objective file (reference Objective ID in Pathway)		
Summary of discussions with colleagues, legal providers, etc.	Pathway Inspection record Additional records in DA Objective file (reference Objective ID in Pathway)	Pathway Inspection record Additional records in inspection Objective file (reference Objective ID in Pathway)		
Completed checklist	Pathway Inspection record (electronic inspection) DA Objective file (reference Objective ID in Pathway) (paper inspection, only when electronic inspection is not available)	Pathway Inspection record (electronic inspection) Inspection Objective file (reference Objective ID in Pathway) (paper inspection, only when electronic inspection is not available) ¹³		

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¹³ Note: It was reported that checklists are not required to be maintained for dangerous structure inspections

Appendix 6 Results of the testing of pool inspections and dangerous structures

Note: The Practice Direction that is issued in relation to the changes to the PDI Act¹⁴ states that the records of inspections should include, without limitation, the following details

"date and time of an inspection, type of inspection, who undertook the inspection, elements inspected, breaches, issues, or faults found, rectification required, requirements for re-inspections (including timing) and enforcement action, as is appropriate in the circumstances."

This can be used as a guide for CWT to make decisions on the level of detail that should be maintained by Development Officers.

The following table summarises the results of the recordkeeping testing

Note: the draft procedure was implemented on 3 June 2019, and therefore the inspections that occurred prior to that date were not guided by the record keeping requirements stated in the procedure.

Prior to theAfter thePrior to theAfter theimplementation ofimplementation ofimplementation ofimplementationthe procedurethe procedurethe procedurethe procedure	
	e e
the procedure the procedure the procedure the procedure	OT
	2
Summary of conversations There were no There were no In 2/2 inspections, In 1/1 inspections	,
held on site. records summary of records summary of there was records there was records	;
conversation's held conversation's held summary of summary of	
on site for any on site for any conversation's held conversation's he	ld
inspection. inspection. on site for any on site for any	
inspection. inspection.	
Photos, including photos In 1/7 inspections, a In 0/3 relevant ¹⁵ In 1/2 inspections, a In 1/1 inspections	, a
identifying breaches, matters photo of the breaches inspections, a photo of the breaches photo of the breaches	ches
requiring further action, identified was of the breaches identified was identified was	
evidence of safety issues. recorded in the identified was recorded in the recorded in the	
objective system. recorded in the objective system. objective system.	
objective system.	
Notes In 5/7 inspections, In 3/4 inspections, In 1/2 inspections, In 1/1 inspections	,
notes were included notes were included notes were included notes were included	ed
in the Pathways in the Pathways in the Pathways in the Pathways	
system, however system, however system, however system, however	
additional file notes additional file notes additional file notes additional file notes	es
were not in the were not in the were not in the were not in the	
Objective system. Objective system. Objective system. Objective system.	
In 2/7 inspections In 1/1 inspection,	
notes were included there were no notes	
in the Pathways in the Pathways and	
system, and Objective systems,	
additional file notes however this	
were in the Objective inspection did not	
system. identify any non- compliance.	
Sketches In 1/7 inspections, a There were no In 1/2 inspections, There were no	
diagram was included instances where there were sketches sketches perform	ed,

¹⁴ State Planning Commission, Practice Direction 8 Council Swimming Pool Inspections 2019, Version 2: 12 March 2020.

¹⁵ One inspection did not identify any non-compliance, and therefore this requirement was not applicable.

Record keeping requirements	Swimming Pool Inspections		Dangerous Structures inspections	
	Prior to the implementation of the procedure	After the implementation of the procedure	Prior to the implementation of the procedure	After the implementation of the procedure
	in an email to an owner for illustration purposes.	sketches were included in the Pathways and Objective systems.	included in the Objective file.	however may not be required as photos were attached.
Summary of discussions with colleagues, legal providers, etc.	In 1/7 inspections, a summary of discussions with colleagues, legal providers, etc. was included in the Objective system.	In 2/4 inspections, a summary of discussions with colleagues, legal providers, etc. was included in the Objective system.	In 1/2 inspections, a summary of discussions with colleagues, legal providers, etc. was included in the Objective system.	In 1/1 inspections, a summary of discussions with colleagues, legal providers, etc. was included in the Objective system.
Completed checklist	In 2/7 inspections, a completed checklist was in the Objective system.	In 1/4 inspections, a completed checklist was in the Objective system.	N/A	N/A
Photos from owners showing that non-compliance was rectified ¹⁶	In 2/3 inspections, owners sent photos of the rectification of their non-compliance.	In 2/2 relevant ¹⁷ inspections, owners sent photos of the rectification of their non-compliance.	N/A	N/A
Were letters detailing the non-compliance was sent to the owners? ¹⁸	In 6/7 ¹⁹ inspections, letter detailing the non-compliance was sent to the owners.	In 2 ²⁰ /3 relevant ²¹ inspections, letter detailing the non- compliance was sent to the owners.	N/A	N/A
Was the complainant informed of the outcome of the inspection? ²²	N/A	N/A	In 1/2 inspections, the complainant was advised of the outcome of the inspection.	In 1/1 inspections, the complainant was advised of the outcome of the inspection.

¹⁶ This was an additional requirement in the policy that CWT recordkeeping was assessed against.

¹⁷ One inspection did not identify any non-compliance, and therefore this requirement was not applicable.

¹⁸ This was an additional requirement in the policy that CWT recordkeeping was assessed against.

¹⁹ There was no letter for DA 211/350/2018.

²⁰ There was no letter for DA 211/99/2017.

²¹ One inspection did not identify any non-compliance, and therefore this requirement was not applicable.

²² This was an additional requirement in the policy that CWT recordkeeping was assessed against.

Appendix 7 Capability of the enhanced Pathways system

The enhanced Pathways system will:

- flag when follow up inspections are due
- indicate when permanent pool fences should be re-inspected after temporary fence is replaced
- implement a Dashboards per team members (with all individual team member's action items that can be viewed by the whole time if the responsible Development Officer is not available)
 - o to monitor temporary fence notifications for follow up in 2 months
 - \circ to list swimming pool consents for inspections 6 months after DA has been issued
 - \circ to list of swimming pool notifications which have been inspected and non-compliant building work has been observed during inspection
 - o for swimming pool which have been inspected with non-compliant building work still outstanding
 - to include a 'my assessments' chart that includes all properties inspected, the outcome of the inspection and if follow up action is required - can this be accessed by all staff and then be followed up by other staff is the responsible team member is not available.

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9.4 EXTERNAL AUDIT

Nil

9.5 COMMITTEE PERFORMANCE AND REPORTING

Nil

10 OTHER BUSINESS

11 CONFIDENTIAL

Nil

12 NEXT MEETING

8 June 2021, 6.00pm in the Civic Centre.

13 MEETING CLOSE