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AUDIT AND RISK COMMITTEE

Open Agenda

Meeting Date: Thursday 6 December 2018

Time: 1.00pm

Venue: Ikatere Meeting Room
2nd Floor
Napier City Council
265 Marine Parade
Napier

Committee Members	John Palairet (In the Chair), Mayor Bill Dalton, Geoff Foster, Councillor Claire Hague and Councillor Kirsten Wise
Officer Responsible	Director Corporate Services
Administration	Governance Team

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ORDER OF BUSINESS

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Nil

Conflicts of interest

Public forum

Nil

Announcements by the Mayor

Announcements by the Chairperson

Announcements by the management

Confirmation of minutes

	at the Minutes of the Audit and Risk Committee meeting held on Thursday, 11 Octob 18 be taken as a true and accurate record of the meeting	
	genda items	
1	Audit New Zealand Management Letter	3
	Proposed Audit and Risk Committee 2019 Meeting Calendar	
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AGENDA ITEMS

1. AUDIT NEW ZEALAND MANAGEMENT LETTER

Type of Report:	Information
Legal Reference:	Local Government Act 2002
Document ID:	433397
Reporting Officer/s & Unit:	Caroline Thomson, Chief Financial Officer

1.1 Purpose of Report

To consider the Audit NZ management letter: Napier City Council Audit for the year ended 30 June 2018 (to be tabled at the meeting).

Officer's Recommendation

That the Audit and Risk Committee:

a. Receive the Audit New Zealand management letter: Napier City Council Audit for the year ended 30 June 2018.

Chairperson's Recommendation

That the Committee resolve that the officer's recommendation be adopted.

1.2 Attachments

Nil

2. PROPOSED AUDIT AND RISK COMMITTEE 2019 MEETING CALENDAR

Type of Report:	Operational
Legal Reference:	N/A
Document ID:	433409
Reporting Officer/s & Unit:	Caroline Thomson, Chief Financial Officer

2.1 Purpose of Report

To consider the proposed timetable of meetings for the Audit and Risk Committee in 2018, as detailed below.

Officer's Recommendation

That the Audit and Risk Committee:

a. Receive the proposed timetable of meetings for the Audit and Risk Committee for 2019.

Chairperson's Recommendation

That the Committee resolve that the officer's recommendation be adopted.

2.2 Background Summary

The following table sets out the meetings held during 2018 together with the proposed schedule for meetings for 2019:

Proposed Audit and Risk Committee meetings timetable 2019								
2018	Content	2019	Content					
15 March 2018	Insurance, Draft Long Term Plan	14 March 2019	Insurance, Draft Annual Plan					
14 June 2018	General	13 June 2019	General					
13 September 2018	Draft Annual Report	12 September 2019	Draft Annual Report					
6 December 2018	General	5 December 2019	General					

2.3 Issues

No issues

2.4 Significance and Consultation

N/A

2.5 Implications

Financial

N/A

Social & Policy

N/A

Risk

N/A

2.6 Attachments

Nil

3. HEALTH AND SAFETY REPORT

Type of Report:	Operational
Legal Reference:	N/A
Document ID:	433412
Reporting Officer/s & Unit:	Sue Matkin, Manager People & Capability

3.1 Purpose of Report

The purpose of the report is to provide the Audit and Risk Committee with an overview of the health and safety performance as at 31st October 2018.

Officer's Recommendation

That the Audit and Risk Committee:

a. Receive the Health and Safety report as at 31 October 2018.

Chairperson's Recommendation

That the Committee resolve that the officer's recommendation be adopted.

3.2 Attachments

A Health and Safety report as at 31st October 2018. J.

INFORMATION PAPER

TO: NCC Staff
REPORT DATE: 5 November 2018

PREPARED BY: Sue Matkin

SUBJECT: HEALTH & SAFETY STATISTICS
AGENDA ITEM OCTOBER 2018 H&S REPORTING

PURPOSE

The purpose of this report is to provide all NCC Staff with an overview of the health and safety performance as at **31 October 2018**.

SUMMARY – KEY PERFORMANCE INDICATORS October LTIs = 0

Reported Incidents (Total Company)	Aug 2017	Aug 2018	Sept 2017	Sept 2018	Oct 2017	Oct 2018	YTD 2018	YTD 2019	Targets FY18
Lost time injuries (LTIs):	0	1	2	0	1	0	3	1	<=10
Medically treated injuries (MTIs):	4	2	3	5	3	1	11	9	<=40
Total recordable injuries (MTIs + LTIs):	4	3	5	5	4	1	14	10	<=50
Near miss/hit & property damage reporting	23	15	19	10	22	11	75	50	>=180
Incidents Involving Public using our facilities	11	4	6	4	12	16	42	38	<=200
Significant Incidents or Accidents involving Contractors	2	1	0	1	0	0	2	3	<=10

LTIs July/Aug/Sept

LTIs and MTIs YTD as at 31 October 2018 (Comparison between FY18 and FY19)

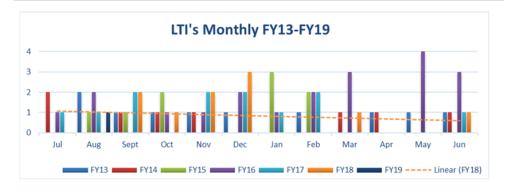
66.6% decrease in LTIs

64 days since last LTI

18.1 decrease to MTIs

• 28.5% decrease in TRIs

	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
FY13	0	2	1	1	1	1	0	1	0	1	1	1	10
FY14	2	0	1	1	1	0	0	0	1	1	0	1	8
FY15	0	1	1	2	0	0	3	2	0	0	0	0	9
FY16	1	2	0	1	1	2	1	2	3	0	4	3	20
FY17	1	1	2	0	2	2	1	2	0	0	0	1	12
FY18	0	0	2	1	2	3	0	0	1	0	0	1	10
FY19	0	1	0	0									1



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HEALTH AND SAFETY PERFORMANCE LEAD INDICATORS AS AT OCTOBER 2018

Lead Indicators	Detail	Aug 18	Sept 18	Oct 18	YTD 19	Full Year Target FY19
Body discomfort reporting (1 in 5 people)	An early intervention programme to resolve the cause of the discomfort in the workplace and/or medical treatment before developing into chronic pain and an injury. Online e-learning videos are part of the programme.	3	2	4	13	=<50
(* p p)	Resolutions:					
Work Station Assessments	New employees receive workstation assessments and e-learning videos. Re assessments completed as required or where new areas or equipment set up. New Employees Existing Employees in different BU/Area/New desks or chairs	8	3	10	34	100%
Near miss incident reporting	Incidents without an injury reported. 510/12 months = 42pm	15	10	11	50	180
Incident investigations	All LTIs and MTIs investigations commenced within seven days of the event.	1	0	0	1	100%
Health and Safety Meetings	Health and safety meetings at each workplace.	4	2	3	13	30
Internal Health and Safety Audits (1 per week)	Health and safety audit of health and safety management system at nominated workplaces. Drainage Painters Workshop	7	2	2	16	52
Contractor Health & Safety Audits and/or Safety Observations	Contractor Audits / Safety Observations N/A	2	1	0	11	26
Planned visible leadership - workplace health & safety observation &conversation	Workplace health and safety observations, including a conversation with staff during a workplace visit by a core management team member. Walk around chats HS safety observation 1 per quarter Attend HS mtgs e.g. toolbox 3 per year	25	29	13	87	240
Planned visible leadership – participating in a health and safety meeting	SLT team member participating in a workplace or work group health and safety meeting at the workplace or joining a conference call.	26	35	41	126	250
Inductions	New Staff inducted to Napier City Council or staff who have moved business unit and re-inducted	8	5	12	35	100%
Safety Alerts	Safety alerts published to educate and prevent the same or similar injury occurring again. • N/A	0	0	0	1	10

HEALTH AND SAFETY PERFORMANCE LAG INDICATORS AS AT OCTOBER 2018

Lag Indicators	Detail	Aug 18	Sept 18	Oct 18	YTD 18	Full Year Target FY19
Number of Total Recordable Injuries	Injuries requiring treatment by a professional health provider e.g. Doctor Injuries includes MTIs and LTIs	3	5	1	10	<=50
Lost Time Injuries	Total incapacity – unable to work any hours. • N/A	1	0	0	1	<=10
Medically Treated Injuries	Capacity to work normal duties or restricted duties.	2	5	1	10	<=40
Days Since Last LTI	Total number of days since the last lost time injury for employees.	3	33	64	64	>=200
ACC Work Injury Entitlement Claims	Entitlement claims are where the injured worker is off work for more than 7 calendar days on weekly compensation. • N/A	1	0	0	1	90%

HEALTH AND SAFETY OTHER REPORTING

Other	Detail	Aug 18	Sept 18	Oct 18	Result YTD 18/19
Significant incident	An event in a different circumstance may result in serious harm. • N/A	0	0	0	0
Significant Issues or Incidents Involving Contractors	An event involving a Contractors causing significant concern.	1	1	0	3
HSWA, Regulations, WorkSafe Updates and/or notifications	Any updates communicated to management.	0	0	0	0
Return To Work in Progress	Employees who are on a return to work programme. Depot – Long term injury work related to previous financial year – Full RTW planned for Nov 5th	0	0	0	0

Training	No Staff
First Aid	3
Confined Spaces	1
Hazardous Substances	140
Growsafe	5
Aggressive Customer Training	3
Site Safe Civil	11
Working at Heights	4
Permit to Work: Issuer & Receiver	6
Total trainings for October	173

4. RISK MANAGEMENT REPORT

Type of Report:	Information
Legal Reference:	N/A
Document ID:	433414
Reporting Officer/s & Unit:	Ross Franklin, Consultant

4.1 Purpose of Report

To provide the Audit and Risk Committee (Committee) with an update on progress with risk management work and to report on the highest rated risks.

Officer's Recommendation

That the Audit and Risk Committee:

- Note the risk management work being undertaken by the NCC Risk Committee.
- b. Receive the report titled: Highest rated risks report 24 September 2018.
- c. Receive the report titled; NCC Risk Maturity Roadmap: 5 Year Plan

Chairperson's Recommendation

That the Committee resolve that the officer's recommendations be adopted.

4.2 Background Summary

Napier City Council (NCC) has a programme of work to develop and mature its enterprise risk capability. A risk maturity roadmap has been developed to guide this work.

The Committee supports this work by acting in a monitoring and advisory role. This report provides an update to the Committee on progress against the roadmap and reports the highest rated risks to ensure they are being actively managed.

NCC has a Risk Management Framework document together with a Risk Management Strategy. These document set out the NCC risk appetite and the risk management roles, responsibilities and reporting requirements.

NCC risks are recorded in a risk management software solution known as "Sycle". Each risk is assigned a risk owner and the risk is rated based on an assessment against the NCC risk matrix and based on the level of residual risk once any control measures and actions (or work programmes) designed to prevent or mitigate the risk have been identified and implemented.

NCC has an internal Risk Committee made up of officers from different areas of the organisation. The role of the risk committee is to coordinate the risk management process; monitor the risk profile, risk appetite and effectiveness of controls; monitor & review high and extreme risks and report extreme and high risks to Council's senior leadership team. The committee is chaired by the Manager Business Excellence & Transformation.

The Risk Management Strategy requires high and extreme risks to be reported to the Audit & Risk Committee. Recognising the level or NCC risk maturity all high\extreme

strategic risks and extreme operational risks are reported to each Audit & Risk Committee meeting.

4.3 Issues

Since our last report to the Committee progress has continued to be made in the following areas:

- Further development of the Sycle Projects module
- Commencement of a Business Continuity Management programme of work
- · Review risk processes, systems and of the risk register

Sycle Projects Module

As reported to the last meeting work is progressing on the implementation of the projects module in Sycle.

Once implemented, all small and large projects undertaken by NCC will be maintained in the Projects module and the risks for each project will be entered against the project.

As small and large project risks will be monitored within Sycle it has been recognised that to include all project risks within the formal risk management processes could result in an unnecessary volume of low level project risks clogging up the register. Prior to 'going live" with the sycle projects module a further review will take place on the best mechanism of reporting on any significant project risks. Until we have confidence that only relevant risks on major projects would roll up into the main register reporting to the Committee will continue to focus only on risks in the Strategic and Operational risk registers.

Full implementation of the Projects module is now expected to be achieved by the end of March 2019.

Business Continuity Management

As reported to the last meeting we have commenced our Business Continuity Management (BCM) work in early 2018. The aim of BCM is to achieve a framework for resilience and response capability in order to safeguard people and operations as well as to uphold confidence in NCC. An initial draft of a BCM policy has been prepared as the first part of the framework and work has commenced on the next stage which is a business impact analysis.

The BCM framework responds to the strategic risk SR5 – 'Event causing disruption or destruction of critical business functions and/or production and delivery of council services'.

Review of the Risk Register

As set out in the risk roadmap, regular review of risk, risk controls and risk treatments are critical to effective risk management. Sycle allows us to set review dates for each of these risk components.

The bulk load of risks into Sycle took place in July 2017. As most risks in the register were part of the bulk load they have all been scheduled for review.

We have identified some areas we the data and risk reporting needs refinement. This includes taking the opportunity, now that we have improved our knowledge of risk management, to progressively review and refine what we have in the register. This requires others, as well as the risk owner, to review each risk to determine whether:-

- The risk description adequately describes the risk
- The correct officer has been assigned to be responsible for the risk
- The risk rating is still correct

The intended risk management process is for the individual risk owners to review their risks on an ongoing basis, however this time we believe we should take a little more time to ensure we are comfortable with all the base data in the register. This means additional support needs to be provided and the process to complete the review of all overdue risks will take a little longer. The benefit should be an improvement in the quality of data within the risk registers.

Once round of reviews is complete we can again focus on embedding the practice, of regular reviews of all risks into the normal business practices and move NCC along the risk maturity scale in the roadmap.

Review of the Corporate Risk Management Framework and NCC Risk Management Strategy

As reported to the last meeting work is underway to review these key risk documents. We expect to be able to present a new Risk Management Policy (to replace the current Risk Management Framework document) and updated risk management strategy to the committee in early 2019. The Framework was first adopted in 2015 and an updated Framework document was adopted in April 2017. In April 2017 the Risk Management Strategy was approved as the underlying document for the Sycle risk management module. The framework is a higher-level policy document while the Strategy is a more detailed "how to" strategy document to guide staff when they are recording and managing risks in the Sycle module.

The current documents were prepared\reviewed at the time staff were identifying the initial organisational risks to be loaded into the Sycle module. Now that the system has been in operation for a year it is a good time to have a closer look at the documents and identify any improvements that can be made.

Risk Maturity Roadmap

The NCC Risk maturity Roadmap has been updated and is attached. New comments to show recent progress have been added in red text.

Regional Collaboration

A regional risk management forum has been set up where risk managers for a range of organisations within Hawkes' Bay can meet and share information. A meeting was held on 15th November and this included representations form other non-council organisations. This meeting was followed by a meeting of Council representatives facilitated by H B LASS to explore opportunities for collaboration between the councils. While it is early days with these forums any opportunities to enhance the knowledge

base within NCC through shared learning can only be beneficial for risk management at NCC going forward.

1.4 Highest rated risks

There are currently 5 strategic and 177 operational risks in the risk register. (Project risks have been excluded from reporting). In addition there are approximately 650 control measures that have been identified to prevent or mitigate the risks that have been identified in the registers. In addition there are 80 actions or programmes of work that have been identified to help manage and mitigate risks in the register. 4 of these actions or programs of work have been completed and the rest of these are still in varying stages of completion.

No risks have been added to or removed from the registers since the last meeting of the Committee.

There are seven risks to report to the Committee as the highest rated risks; three are operational risks rated Extreme (OR155, OR164 and OR 178) and four are strategic risks rated High (SR2, SR3, SR5 and SR6).

These risks are reported in the attached spreadsheet and they are the same as reported to the last meeting (Attachment A).

All seven risks have treatment actions to further manage the causes or consequences of each risk.

Extreme Risks

The Extreme risks in the operational risk register are:

- OR155 Pandora Pond customer drowning
- OR164 Bluff Hill fall from cliff top
- OR178 Reliance on monopoly contractors for waste management

These risks were previously reported to you on 19 July and they have not changed. The Pandora Pond facility is currently closed for the winter season and measures will be put in place to mitigate some of the risk prior to the Summer opening, and a project to replace the fence around the cliff top is currently being commissioned.

Work is underway to identify effective control measures to mitigate the waste management risk.

High Risks

The four high risks in the strategic register are:

- SR2 Removal of three waters delivery and management
- SR3 Increased number and/or severity of major/natural disaster events
- SR5 Event causing disruption or destruction of critical business functions and/or production and delivery of council services.
- SR 6 Risk management practices

These risks were previously reported to you on 11 October and have not changed. The risks are outside the control of NCC. The risks treatments listed against these risks are ongoing.

4.4 Significance and Consultation

There are no significance or consultation requirements associated with this report.

4.5 Implications

Financial

There are no financial implications

Social & Policy

There are no social and policy implications apart from the management of the Councils risk management framework and strategy.

Risk

This report focuses on organisational risk. The purpose is to advise the committee on NCC risk management practices and on high strategic and high and extreme operational risks.

4.6 Options

The options available to the committee are as follows:

- a. Receive the report and attachments
- b. Receive the report and attachments and request additional information

4.7 Development of Preferred Option

The preferred option is for the committee to receive the report and attachments

4.8 Attachments

- A Report on Highest Rated Risks J.
- B Risk Maturity Roadmap B

Napier City Council Risk Register

21-Sep-2018

		Causes				Inherent			Rev	rised	
Risk Code	Risk Issue	Inherent	Treatment Actions	Primary Category / Sub Category	Consequence	Likelihood	Risk Rating	Consequence	Effectiveness of Controls	Likelihood	Risk Rating
OR178	management and recycling and therefore if one terminates or defaults on contract with little notice/warning, this could lead	solid waste management services to a significant portion of the City, due to	- Contingency measures are in place in the event of a default on contract, termination with little notice or breakdown - Ensure that contracts have set agreed KPIs which are reviewed with the contractor frequently	Service Delivery	Severe	Possible	Extreme		Partially Effective	Possible	Extreme
	1	parental supervision Insufficient lifeguards Lifeguards slow to respond Dangerous customer behaviour	- Adopt a human-centred design approach to addressing collective whanau responsibility for toddlers at the pond - External review of lifeguarding model performed by NZRA - Improve communications (signage, briefings) to parents to advise of their responsibilities for supervising children while swimming Investigate the possibility of providing a safe space for toddlers (e.g. paddling pool) at the pond to keep them away from the waters edge	Health and Safety	Severe	Possible	Extreme	Severe	Substantially Effective	Unlikely	Extreme
OR164	Bluff Hill - fall from cliff top	Easy access to cliff top	 Construct a more suitable fence to significantly deter people crossing fence and accessing the clifftop. 	Health and Safety	Severe	Possible	Extreme	Severe	Partially Effective	Unlikely	Extreme
	Event causing disruption or destruction of critical business functions and/or production and delivery of council services.		- Business Continuity Framework developed for NCC - Each Directorate must develop business continuity plans for its operations Information Services have a disaster recovery plan	Service Delivery	Severe	Possible	Extreme	Major	Partially Effective	Possible	High

Napier City Council Risk Register

21-Sep-2018

		Causes				Inherent			Rev	ised	
Risk Code	Risk Issue	Inherent	Treatment Actions	Primary Category / Sub Category	Consequence	Likelihood	Risk Rating	Consequence	Effectiveness of Controls	Likelihood	Risk Rating
		Risk delegates lack		Service Delivery	Major	Likely	Extreme	Major	,	Possible	High
	,		network models for infrastructure						Effective		
		Operational tempo.	networks								
	Services	Process gaps around	- Improve asset condition and								
			performance data through								
		assurance, and follow	deployment of maintenance								
			management transformation								
			programme.								
		fully implemented.	- Risk management and control								
			training to be deployed to								
			directorate risk owners.								
			- Set up risk reviews as standing								
			agenda item in 1:1 meetings with								
			reports.						0 11 11		
	Increased number and/or	Earthquake.		Service Delivery	Severe	Rare	High		,	Rare	High
	severity of major/natural	Tsunami.	cover						Effective		
	disaster events	Volcanic ash.	- Review and test Business								
		-	Continuity Plans and procedures								
		Epidemic or pandemic.									
SR2	Removal of 3 waters delivery	Central government	- Guide change with the objective	Service Delivery	Moderate	Possible	High	Moderate	Partially	Likely	High
	and management	water enquiry.	of delivering a regional solution						Effective		
		Repeated non-	- Improving 3 waters asset								
		compliance with water	management practices								
		quality standards.	- Improving 3 waters operations								
		Public health issues.	- Planning for additional resources								
		Public outcry.	- Submission to the Water Enquiry								

NCC Risk Maturity Roadmap: 5 year plan 2018 2022 **Initial Application** Advanced Application Mature Awareness Risk Management communication plan Risk Communication Plan being Risk Communication Plan performance Communication of roles and responsibilities of governance developed that identifies objectives, key implemented. against objectives evaluated. stakeholders (Risk and Audit communication roles and Defined risk management branding High level of staff recognition of the **Risk Communication** Committee, Senior Leadership Team, responsibilities, key actions and and messaging in the workplace. risk management program. NCC Risk Committee, Champions) timeframes. identified and documented. October 2018 October 2019 October 2020 Target: Bisk Strategy/Framework developed Communication plan yet to be and endorsed by SLT in March 2017, developed with current efforts on Evidence: identifies key communication roles refinement of risk register. and responsibilities. Risk Champion role developed. Senior Leadership Team (SLT) SLT undertake strategic risk SLT actively monitor and review SLT peformance reviews include demonstrate leadership of risk identification and assessment. strategic and operational risks as evaluation of risk management management in the organisation. SLT members support and participate in scheduled. responsibilities. operational risk identification and Directors job specifications include SLT lead the evaluation of their assessment in their Directorates. key responsibilities from the Strategy. business unit managers risk Senior Management Support SLT ensure their business unit management responsibilities. managers job specifications include key responsibilities from Risk Strategy. Target: December 2018 July 2019 Director Infrastructure Services **SLT** completed strategic risk Regular item on SLT agenda to appointed to NCC Risk Committee as identification and assessment in June consider NCC risks and keep Evidence: Executive Sponsor. 2017. onganisational focus on Risk **B**LT support the appointment of Risk **SLT** participation in operational risk Management. Champions. workshops in June 2017.

as at 22 February 2018

Audit and Risk Committee - 6 December 2018 - Attachments

NCC Risk Maturity Roadmap: 5 year plan 2018 2022 **Initial Application** Advanced Application Mature Awareness Training needs identified for key risk Training delivered for key risk Risk management training provided to Risk management training program new employees in key risk supporting different levels of need management roles. management roles. management roles. implemented at all levels of risk **Training** Risk Management awareness training management responsibility in the to all new employees as part of organisation. induction. June 2021 Target: June 2020 **B**isk foundation training for NCC Risk **B**isk foundation training for Risk Work commenced on practical NCC Committee, Risk Champions and Risk Committee and Champions completed "How to" guides. Owners identified. 13 and 15 February 2018. "Hands-on" training taking place as Second stage of risk training for Risk part of Risk reviews Evidence: Champions and Committee scheduled for 3rd quarter 2018. Bisk foundation training for Risk Owners scheduled for 4th Quarter 2018. Risk Management Policy developed and Risk Management Policy reviewed Risk Stratety/Framework developed Risk Management Policy, and endorsed. endorsed. and updated. Strategy/Framework reviewed and Risk Committee Charter developed Risk Strategy/Framework reviewed updated on cyclical basis. **Risk Documents** and endorsed. and updated. Risk Management documents are cross referenced in the development and review of all relevant Council plans and strategies. June 2019 June 2020 June 2022 Target: Risk Strategy/Framework developed New risk policy developed, for and endorsed by SLT in March 2017. approval, to replace Risk framework **Evidence:** Risk Committee Charter finalised. Update to Risk Strategy to align with new policy and level of risk maturity at

as at 22 February 2018

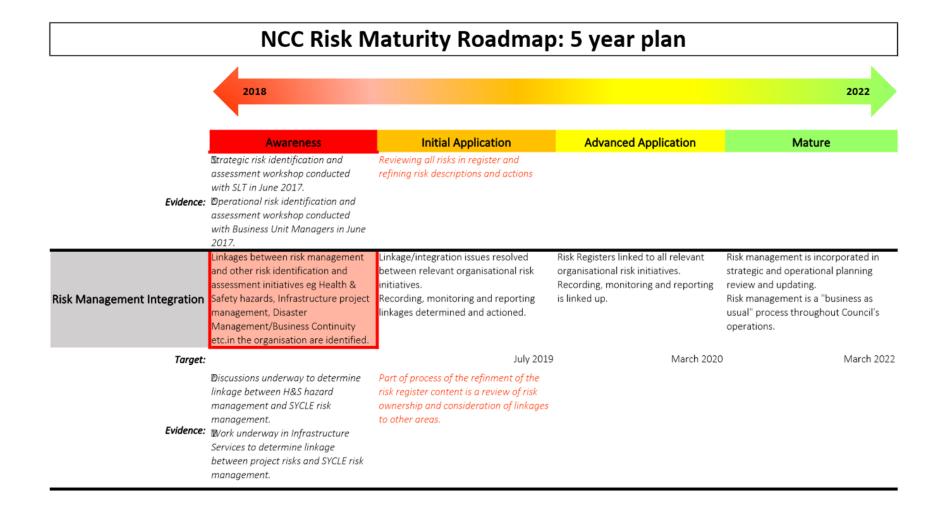
Audit and Risk Committee - 6 December 2018 - Attachments

NCC Risk Maturity Roadmap: 5 year plan 2018 2022 **Initial Application** Advanced Application Mature Awareness Risk identification and assessment Strategic Risk Register developed. Strategic, Operational and Project All risks and risk controls in the Operational Risk Register developed. Strategic, Operational and Project Risk workshops conducted as the basis for Risk Registers reviewed and updated. development of Strategic and Risk Registers linked to all relevant Registers fully reviewed and updated Project Risk Register developed. Operational Risk Registers. organisational risk initiatives eg annually. **Risk Registers** Health & Safety hazards, Individual risks reviewed in the Risk Infrastructure Project Management, Registers in response to significant risk Disaster Management/Business events/incidents. Continuity etc June 2019 June 2021 Target: Strategic risk identification and Strategic and Operational Risk Registers assessment workshop conducted compiled and uploaded into SYCLE. with SLT in June 2017. Further work ongoing to review and Operational risk identification and refine content of risk register as part of assessment workshop conducted full review as all risks are due for review with Business Unit Managers in June as we are now 12months on from initial 2017. system upload. Preliminary work commenced on Project Risk Register. Risk treatment actions identified in Risk treatment actions reviewed and All strategic risk treatment actions are All risk treatment actions are included risk identification and assessment responsibilities, start/end dates revised actively monitored and their progress in Council's operational/business workshops. for monitoring and reporting. reported to SLT meetings. planning process. **Risk Treatment Action Plans** All operational risk treatment actions All off-track risk treatment actions and their progress reported on have timely corrective action taken. through Directorate and Business Unit Manager's meetings. Target: July 2018 July 2019 July 2019 20 December 2019-2020

as at 22 February 2018

Audit and Risk Committee - 6 December 2018 - Attachments

Item 4 Attachments B



5. INTERNAL AUDIT PROGRAMME 2018/19

Type of Report:	Operational
Legal Reference:	Local Government Act 2002
Document ID:	671251
Reporting Officer/s & Unit:	Caroline Thomson, Chief Financial Officer

5.1 Purpose of Report

To table to the Committee the internal audit programme for 2017/18 and 2018/19 from Crowe Horwath. Recommendations, feedback and any other review priorities the Committee deems relevant, is sought.

Officer's Recommendation

That the Audit and Risk Committee:

a. Resolve that the internal audit programme for 2017/18 and 2018/19 from Crowe Horwath is received.

Chairperson's Recommendation

That the Committee resolve that the officer's recommendation be adopted.

5.2 Background Summary

In June 2017 Council engaged Crowe Horwath for the provision of internal audit services for an initial contract term of three years. The following table sets out the internal audit programme for 2017/18 and 2018/19:

Internal audit	Status
Cash handling – i-Site, Kennedy park, MTG	Completed September 2017
Cash handling – Transfer Station	Completed September 2017
Data analytics	Completed November 2017
Fraud workshop	Completed November 2017
Enforcement and inspection review	Completed July 2018
Fraud workshop	Completed September 2018
Accounts receivable and credit control	Draft report received – November 2018
Sensitive expenditure	In progress – November 2018
Contract management	Planned for February 2019
Data analytics	Planned for April 2019
Follow up activities	Planned for May 2019

5.3 Issues

No Issues

5.4 Significance and Engagement

N/A

5.5 Implications

Financial

N/A

Social & Policy

N/A

Risk

N/A

5.6 Attachments

Nil

PUBLIC EXCLUDED ITEMS

That the public be excluded from the following parts of the proceedings of this meeting, namely:

AGENDA ITEMS

1. Independent Audit Member Appointment

The general subject of each matter to be considered while the public was excluded, the reasons for passing this resolution in relation to each matter, and the specific grounds under Section 48(1) of the Local Government Official Information and Meetings Act 1987 for the passing of this resolution were as follows:

General subject of each matter to be considered.	Reason for passing this resolution in relation to each matter.	Ground(s) under section 48(1) to the passing of this resolution.
Independent Audit Member Appointment	7(2)(a) Protect the privacy of natural persons, including that of a deceased person	48(1)A That the public conduct of the whole or the relevant part of the proceedings of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist: (i) Where the local authority is named or specified in Schedule 1 of this Act, under Section 6 or 7 (except 7(2)(f)(i)) of the Local Government Official Information and Meetings Act 1987.

AUDIT AND RISK COMMITTEE

Open Minutes

Meeting Date:	Thursday 11 October 2018
Time:	1.00pm – 1.33pm
Venue	Council Chamber Hawke's Bay Regional Council 159 Dalton Street Napier
Present	John Palairet (In the Chair), Mayor Bill Dalton, Geoff Foster, Councillor Claire Hague, and Councillor Kirsten Wise
In Attendance	Stephen Lucy – Audit New Zealand Director Corporate Services, Director Infrastructure Services, Director City Strategy [from 1.14pm], Chief Financial Officer, Manager Property [from 1.14pm], Accounting Consultant/ Acting Risk Manager
Administration	Governance Team

Apole	ogies
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Nil

Conflicts of interest

Nil

Public forum

Nil

Announcements by the Mayor

Nil

Announcements by the Chairperson

Nil

Announcements by the management

Nil

Confirmation of minutes

Councillors Wise / Hague

That the Minutes of the meeting held on 19 July 2018 were taken as a true and accurate record of the meeting.

Carried

AGENDA ITEMS

HEALTH AND SAFETY REPORT

Type of Report:	Operational
Legal Reference:	Health and Safety at Work Act 2015
Document ID:	433376
Reporting Officer/s & Unit:	Sue Matkin, Manager People & Capability

1.1 Purpose of Report

The purpose of this report is to provide Audit and Risk with an overview of the health and safety performance as at 31st August 2018.

At the Meeting

The Manager People and Capability spoke to the report, noting that in the period to 31 August 2018 there had been one Lost Time Injury (LTI) – the lost time being a couple of days – and an incident involving a contractor at the MTG. Both matters had been followed up with appropriate actions. It was also noted that in the month of September there had been another LTI involving as cleaner, and an incident involving a contractor digging around power cables without the correct permit. The Contractor was issued with a notice and retrained. It is believed that the current lag indicator for LTIs is set at an appropriate level for the organisation.

A strong focus is currently being placed on employee health and wellbeing with a number of events being arranged in the months leading up to the December break that will be made available to attend.

Other current actions underway include the creation of a central log for all chemicals and their safety information, including the appropriate personal protection equipment to use if handling.

Council has performed well in the recent Health and Safety related audits undertaken.

Specific attention is not currently given to supporting Local Government staff through difficult interactions with the public; however this may be addressed indirectly through some of the wellness programmes underway.

Although all new staff are drug tested prior to beginning work, this is not a requirement for Elected Members. Council would have to resolve that they wished to undertake the same testing as staff for this to be implemented.

Committee's Recommendation

Councillors Wise / Hague

a. That the committee receive the report.

Carried

2. RISK MANAGEMENT REPORT

Type of Report:	Information
Legal Reference:	N/A
Document ID:	433390
Reporting Officer/s & Unit:	Ross Franklin, Consultant
	Rachael Horton, Manager Business Excellence & Transformation

2.1 Purpose of Report

To provide the Audit and Risk Committee (Committee) with an update on progress with risk management work and to report on the highest rated risks.

At the Meeting

The acting risk manager spoke to the report, noting that there are two new risks for the last period: reliance on a sole contractor for waste management, and the strategic risk that in the time that the organisation is moving to full maturity in its risk management that not all risks may be covered despite all best efforts. A review of existing risks and mitigations is underway to ensure that all are still relevant.

It was noted that Pandora Pond remains an extreme risk due to the serious nature of the possible consequences. Further signage has been erected as part of the mitigating actions. It is only a risk as it is a recreational space that Council provides equipment for.

The Committee requested that an update on the risk roadmap be brought to its next meeting.

Committee's Recommendation

Councillors Taylor / Wise

That the Committee:

- a. Note the risk management work being undertaken by the NCC Risk Committee.
- b. Receive the report titled: Highest rated risks report 24 September 2018.

Carried	
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PUBLIC EXCLUDED ITEMS

Councillors Wise / Hague

That the public be excluded from the following parts of the proceedings of this meeting, namely:

- 1. Draft Annual Report 2017/18
- 2. Freeholding
- 3. Legal update as at 30 June 2018

Carried

The general subject of each matter to be considered while the public was excluded, the reasons for passing this resolution in relation to each matter, and the specific grounds under Section 48(1) of the Local Government Official Information and Meetings Act 1987 for the passing of this resolution were as follows:

General subject of each matter to be considered.	Reason for passing this resolution in relation to each matter.	Ground(s) under section 48(1) to the passing of this resolution.
1. Draft Annual Report 2017/18	7(2)(f)(ii) Maintain the effective conduct of public affairs through the protection of such members, officers, employees and persons from improper pressure or harassment	48(1)A That the public conduct of the whole or the relevant part of the proceedings of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist: (i) Where the local authority is named or specified in Schedule 1 of this Act, under Section 6 or 7 (except 7(2)(f)(i)) of the Local Government Official Information and Meetings Act 1987.
2. Freeholding	7(2)(i) Enable the local authority to carry on, without prejudice or disadvantage, negotiations (including	48(1)A That the public conduct of the whole or the relevant part of the proceedings of the meeting would be likely to result in the disclosure of information for

	commercial and industrial negotiations)	which good reason for withholding would exist: (i) Where the local authority is named or specified in Schedule 1 of this Act, under Section 6 or 7 (except 7(2)(f)(i)) of the Local Government Official Information and Meetings Act 1987.
3. Legal update as at 30 June 2018	7(2)(i) Enable the local authority to carry on, without prejudice or disadvantage, negotiations (including commercial and industrial negotiations)	48(1)A That the public conduct of the whole or the relevant part of the proceedings of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist: (i) Where the local authority is named or specified in Schedule 1 of this Act, under Section 6 or 7 (except 7(2)(f)(i)) of the Local Government Official Information and Meetings Act 1987.

The meeting moved into committee at 1.33pm

Approved and adopted as a true and accurate record of the meeting.
Chairperson
Date of approval