

**Shire of Broome
Risk Dashboard Report**

<u>Asset Sustainability practices</u>		Risk	Control
		Moderate	Adequate
Actions / Treatments	Due Date	Responsibility	Status of Actions / Treatments
<i>All Improvement Plan actions have been completed for this risk profile. Actions will be populated from the Risk Profile Register</i>			
<u>Business & Community disruption</u>		Risk	Control
		High	Adequate
Actions / Treatments	Due Date	Responsibility	Status of Actions / Treatments
<i>RM 2.2 Insurance Strategy or Policy be developed to provide clarity on issues such as the level of self-insurance, the adequacy of cover and the basis of the valuation of the insured assets.</i>	<i>Nov-18</i>	<i>Manager Governance</i>	<i>Draft document to be developed for presentation to the Audit and Risk Committee November 2018.</i>
<i>RM 3.3 Finalise & communicate Business Continuity policy, procedures & plans</i>	<i>Nov-18</i>	<i>DCS</i>	<i>Under review - to be presented to Audit Committee in November.</i>

<p><i>RM 3.6 Local Emergency Management Arrangements & recovery plans</i></p>	<p><i>Nov-18</i></p>	<p><i>MHER</i></p>	<p><i>Following training provided on Managing Recovery Activities the Local Emergency Management Plan is being reviewed and will be tested once finalised. The current plan is compliant with the legislation. It is however considered inadequate by officers. Grant funding requests have been made to obtain a fixed term officer to assist in this project.</i></p>
<p><i>RM 3.12 Emergency Response Procedures – Shire Buildings</i></p>	<p><i>Nov-18</i></p>	<p><i>MCED/WC</i></p>	<p><i>Update required for procedures at the Admin Centre, Depot and Waste Management Facility. Procedures have been drafted for Admin building however require reviewing following administration office refurbishment Civic Centre – emergency response and evacuation plan in existence – to be updated to reflect cyclone procedures.</i></p>
<p><i>RM 3.14 Information Systems Plans</i></p>	<p><i>Nov-18</i></p>	<p><i>MIS</i></p>	<p><i>No IT Disaster Recovery Plan or IT Security Plan are in place. Interim protection by relocating a replica of our current system to the civic centre. The backup is then copied offsite on a continuous basis. The replica is working and we also now have a GenSet to maintain power. This has been tested and passed</i></p>

<p><i>RM 3.3 BCP - That, as high priority, an effective documented Business Continuity Plan be developed including relevant disaster recovery plans. That, once adopted, the Plan's effectiveness be tested</i></p>	<p><i>April-18 for doc. Nov-18 for exercise</i></p>	<p><i>DCS</i></p>	<p><i>Draft document still requires final review and amendment to ensure suitability and effectiveness. Presented to Audit and Risk Committee May 2018. Mock Exercise undertaken 16 June 2016. Further procedures required to ensure detailed operational testing is undertaken annually by responsible departments i.e. ICT, Health etc.</i></p>
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<u>Failure to fulfil Compliance requirements (statutory, regulatory)</u>		Risk	Control
		Moderate	Adequate
Actions / Treatments	Due Date	Responsibility	Status of Actions / Treatments
LC 1.1 Code of Conduct	Apr-18	MG	Code of Conduct reviewed and adopted by Council at the OMC held 26 April 2018. Volunteers and contractors are not bound by a Code of Conduct when performing functions on behalf of the Shire. Separate documents to be developed for Volunteers and business and service providers. These have been identified as separate actions on this register.
LC 1.1 Code of Conduct or similar to be developed for Volunteers	Nov-18	MPC	Being developed with MPC.
LC 2.1 Purchasing Policy	Apr-18	SPRGO	No action required based on WALGA email advice dated 2 May 2017, however policy under review in line with release of revised WALGA Purchasing Policy Template.
LC 3.1 Communications - ensure staff, contractors and regular volunteers are aware of their obligation to report breaches of legislation to the appropriate Officer.	May-17	MPC	The Shire's current process is undertaken through OSH reporting and the onsite induction process. Staff Survey conducted in Dec 17 confirms employees are aware of OSH reporting and induction process. Further works to be Included in the Shire's corporate contractor

			<i>induction process pending finalisation.</i>
<i>IC 2.1 Management Policy - internal control framework be developed reflecting a risk based approach to internal controls and providing the monitoring and reporting systems.</i>	<i>Nov-18</i>	<i>Risk TAG</i>	<i>Internal Control Framework developed and in operation however leaving open until process is firmly established and embedded across organisation. Framework to be presented to Audit and Risk Committee November 2018.</i>
<i>IC 2.3 Internal audit - as the level of documented procedures increases, an expanded internal audit function to confirm adherence to documented policies and procedures may be required.</i>	<i>Dec-18</i>	<i>DCS</i>	<i>Currently, no internal auditors have been appointed, and limited internal audit functions have been undertaken. The Senior Procurement, Risk and Governance Officer will coordinate an internal audit.</i>

<u>Document Management processes</u>		Risk	Control
		Moderate	Adequate
Actions / Treatments	Due Date	Responsibility	Status of Actions / Treatments
<i>IC 3.3 Opportunity exists to improve and document standard operating procedures with key controls clearly identified. Once these procedures are developed and implemented, they require constant monitoring for adherence and efficiency.</i>	<i>November 17 - Ongoing</i>	<i>DCS</i>	<i>Standard operating procedures exist for selected, but not all, financial procedures. Procedure documentation is being developed by officers where it does not currently exist.</i>
<i>IC 3.9 workflow diagrams - In conjunction with the development of documented procedures and checklists, development of workflow process diagrams may assist in clearly identifying controls and processes to be followed.</i>	<i>Apr-19</i>	<i>DCS</i>	<i>Workflow diagrams have not been compiled.</i>

<u>Employment practices</u>		Risk	Control
		High	Not Rated
Actions / Treatments	Due Date	Responsibility	Status of Actions / Treatments
<i>RM 2.3 Staff Housing Policy</i>	<i>Apr-18</i>	<i>DCS > MPC</i>	<i>Policy requires rework and will be reviewed and presented to MCG, EMG and Council at the April OMC. BOP has been reviewed and issues surrounding Staff Housing Bonds have been addressed.</i>
<i>RM 3.8 Workforce Plan</i>	<i>Nov-18</i>	<i>MPC</i>	<i>The Workforce Plan is under review and will incorporate feedback. Please note organisational risks have been identified in the external analysis section 2.1.1-2.1.15 and internal analysis section 3.3.1 -3.3.14 and again in Workforce Planning 4.1.1 page 47. In order to satisfy the auditors, the risk section will itemise the known risks under 4.5.9 organisational risk management. CBP adopted December 2017; Organisational survey completed and will be used to form the basis of the next review.</i>
<i>RM 5.2 Risk management training be available to elected members and all senior staff undergo relevant risk management training.</i>	<i>November - Annually</i>	<i>DCS</i>	<i>Risk Management Training funds assigned through annual budget process for 17/18 however may be deferred due to vacancies in HR department.</i>

<u>Engagement practices</u>		Risk	Control
		Moderate	Adequate
Actions / Treatments	Due Date	Responsibility	Status of Actions / Treatments
<i>All Improvement Plan actions have been completed for this risk profile. Actions will be populated from the Risk Profile Register</i>			
<u>Environment management</u>		Risk	Control
		Moderate	Adequate
Actions / Treatments	Due Date	Responsibility	Status of Actions / Treatments
<i>All Improvement Plan actions have been completed for this risk profile. Actions will be populated from the Risk Profile Register</i>			
<u>Errors, omissions & delays</u>		Risk	Control
		Moderate	Adequate
Actions / Treatments	Due Date	Responsibility	Status of Actions / Treatments
<i>All Improvement Plan actions have been completed for this risk profile. Actions will be populated from the Risk Profile Register</i>			

<u>External theft & fraud (Inc. Cyber Crime)</u>		Risk	Control
		Moderate	Adequate
Actions / Treatments	Due Date	Responsibility	Status of Actions / Treatments
<i>All Improvement Plan actions have been completed for this risk profile. Actions will be populated from the Risk Profile Register</i>			
<u>Management of Facilities / Venues / Events</u>		Risk	Control
		Moderate	Adequate
Actions / Treatments	Due Date	Responsibility	Status of Actions / Treatments
<i>All Improvement Plan actions have been completed for this risk profile. Actions will be populated from the Risk Profile Register</i>			
<u>IT or communication systems and infrastructure</u>		Risk	Control
		Moderate	Adequate
Actions / Treatments	Due Date	Responsibility	Status of Actions / Treatments
<i>RM 3.14 Information Systems Plans</i>	<i>Nov-18</i>	<i>MIS</i>	<i>No IT Disaster Recovery Plan or IT Security Plan are in place. Interim protection by relocating a replica of our current system to the civic centre. The backup is then copied offsite on a continuous basis. The replica is working and we also now have a GenSet to maintain power. This has been tested and passed</i>

<u>Misconduct</u>		Risk	Control	
		Moderate	Adequate	
Actions / Treatments	Due Date	Responsibility		Status of Actions / Treatments
<i>All Improvement Plan actions have been completed for this risk profile. Actions will be populated from the Risk Profile Register</i>				
<u>Project / Change management</u>		Risk	Control	
		Moderate	Adequate	
Actions / Treatments	Due Date	Responsibility		Status of Actions / Treatments
<i>All Improvement Plan actions have been completed for this risk profile. Actions will be populated from the Risk Profile Register</i>				
<u>Safety and Security practices</u>		Risk	Control	
		High	Adequate	
Actions / Treatments	Due Date	Responsibility		Status of Actions / Treatments
<i>RM 3.15 - Volunteer and Contractor Inductions</i>	<i>Nov-18</i>	<i>MPC</i>		<i>LGIS contractor inductions complete. Will be conducted as required. Volunteer inductions to be developed.</i>

<u>Supplier / Contract management</u>		Risk	Control
		Moderate	Adequate
Actions / Treatments	Due Date	Responsibility	Status of Actions / Treatments
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