

AGENDA

Audit and Risk Sub-committee Meeting

I hereby give notice that a Meeting of the Audit and Risk Subcommittee will be held on:

Date: Thursday, 20 May 2021

Time: 1.30pm

Location: Council Chamber

Ground Floor, 175 Rimu Road

Paraparaumu

Mark de Haast Group Manager Corporate Services

Kapiti Coast District Council

Notice is hereby given that a meeting of the Audit and Risk Subcommittee will be held in the Council Chamber, Ground Floor, 175 Rimu Road, Paraparaumu, on Thursday 20 May 2021, 1.30pm.

Audit and Risk Subcommittee Members

Mr Bryan Jackson Chair
Cr Angela Buswell Deputy
Mayor K Gurunathan Member
Deputy Mayor Janet Member

Holborow

Cr Gwynn Compton Member
Mr Gary Simpson Independent

Order Of Business

1	Welc	ome	5
2	Coun	cil Blessing	5
3	Apolo	ogies	5
4	Decla	rations of Interest Relating to Items on the Agenda	5
5	Publi	c Speaking Time for Items Relating to the Agenda	5
6	Meml	pers' Business	5
7	Upda	tes	5
	Nil		
8	Repo	rts	6
	8.1	Progress Update regarding Audit Control Findings 2019/20	6
	8.2	Quarterly Treasury Compliance Report	18
	8.3	Health and Safety Quarterly Report: 1 January 2021 - 31 March 2021	27
	8.4	Risk Management - Business Assurance Update	34
9	Confi	rmation of Minutes	59
	9.1	Confirmation of Minutes	59
10	Confi	rmation of Public Excluded Minutes	66
11	Publi	c Excluded Reports	67
Res	olution	to Exclude the Public	67
	10.1	Confirmation of Public Excluded Minutes	67
	11.1	Update on litigation status, statutory compliance issues, investigations	67

1 WELCOME

2 COUNCIL BLESSING

"As we deliberate on the issues before us, we trust that we will reflect positively on the communities we serve. Let us all seek to be effective and just, so that with courage, vision and energy, we provide positive leadership in a spirit of harmony and compassion."

I a mātou e whiriwhiri ana i ngā take kei mua i ō mātou aroaro, e pono ana mātou ka kaha tonu ki te whakapau mahara huapai mō ngā hapori e mahi nei mātou. Me kaha hoki mātou katoa kia whaihua, kia tōtika tā mātou mahi, ā, mā te māia, te tiro whakamua me te hihiri ka taea te arahi i roto i te kotahitanga me te aroha.

3 APOLOGIES

4 DECLARATIONS OF INTEREST RELATING TO ITEMS ON THE AGENDA

Notification from Elected Members of:

- 4.1 any interests that may create a conflict with their role as an elected member relating to the items of business for this meeting, and
- 4.2 any interests in items in which they have a direct or indirect pecuniary interest as provided for in the Local Authorities (Members' Interests) Act 1968

5 PUBLIC SPEAKING TIME FOR ITEMS RELATING TO THE AGENDA

6 MEMBERS' BUSINESS

- (a) Public Speaking Time Responses
- (b) Leave of Absence
- (c) Matters of an Urgent Nature (advice to be provided to the Chair prior to the commencement of the meeting)

7 UPDATES

Nil

8 REPORTS

8.1 PROGRESS UPDATE REGARDING AUDIT CONTROL FINDINGS 2019/20

Author: Anelise Horn, Manager Financial Accounting

Authoriser: Mark de Haast, Group Manager Corporate Services

PURPOSE OF REPORT

This report provides the Audit and Risk Subcommittee with a progress update regards Ernst & Young's Report on Control Findings for the year ended 30 June 2020.

DELEGATION

- The Audit and Risk Subcommittee has delegated authority to consider this report under the following delegation in the Governance Structure, Section C.1.
 - Reviewing and maintaining the internal control framework.
 - Obtaining from external auditors any information relevant to the Council's financial statements and assessing whether appropriate action has been taken by management in response to the above.

BACKGROUND

- In accordance with New Zealand Auditing Standards, Ernst & Young (Audit) performed a review of the design and operating effectiveness of the Council's significant financial reporting processes as part of their audit for the year ended 30 June 2020.
- 4 Control risk matters and/or issues are classified as high, moderate or low. Control risk definitions are as follows:
 - High Risk matters and/or issues are considered to be fundamental to the mitigation of material risk, maintenance of internal control or good corporate governance. Action should be taken either immediately or within three months.
 - Moderate Risk matters and/or issues are considered to be of major importance to maintenance of internal control, good corporate governance or best practice for processes. Action should normally be taken within six months.
 - Low Risk A weakness which does not seriously detract from the internal control framework. If required, action should be taken within 6 -12 months.
- Audit identified ten control risk issues for the year ended 30 June 2020, ranging from low to moderate risk rankings. The table at the end of the report, details the year to date progress against these control findings.
- In keeping with standard practice, Audit will consider whether these control findings can be closed-out, as part of their audit for the year ended 30 June 2021.

CONSIDERATIONS

Policy considerations

7 There are no policy implications arising from this report.

Legal considerations

8 There are no legal considerations arising from this report.

Financial considerations

9 Financial issues have been covered as part of this report.

Tāngata whenua considerations

10 There are no tangata whenua considerations arising from this report.

SIGNIFICANCE AND ENGAGEMENT

Significance policy

11 This matter has a low level of significance under the Council's Significance and Engagement Policy.

Publicity

12 There are no publicity considerations.

RECOMMENDATIONS

That the Audit and Risk Subcommittee notes the progress update in regards to Ernst & Young's Report on Control findings for the year ended 30 June 2020 and that Ernst & Young will re-assess these as part of their audit for the year ended 30 June 2021.

APPENDICES

Nil

Summary of Control Findings for the year ended 30 June 2020

1. Payroll review co	ontrols (Moderate)
Target date for completion and current status	30/06/21 Completed
Ernst & Young Audit Observation and Implication	Through our review of the controls in place for monitoring payroll expenses and changes to payroll static data we noted the controls functioned appropriately for most of the year. However; during the Covid-19 lockdown period, the review elements of the fortnightly payrun process function did not operate as they ordinarily would. For example, during this period whilst the Payrun reports such as the variance report and the reports identifying changes to payroll static data were produced, these were not reviewed.
	Implication - The absence of regular reviews of payroll masterfile data and changes to that data can increases the risk of errors going undetected.
EY Audit Recommendation	We recommend that management consider how payroll static data and changes to this could continue to be reviewed effectively in remote working scenarios.
Action Plan	We accept the findings and recommendation from audit. Covid-19 lock down restrictions presented a challenge for remote payroll operations due to the reliance on paper documentation. Variance reports and reports identifying changes made to static payroll data were reviewed and checked by Payroll Officers but not signed off by the Manager as an electronic approval process was not in place. Manager review and sign off re-commenced under restricted access (Level 3) and full return to the office (Level 2). A new electronic folder (with controlled access) has been set up which will, in the future, enable checking and sign off by the Manager without the reliance on paper reports.
	Responsibility: Organisational Development Manager
Progress Update	The electronic verification and approval process has been put in place and is used when the Manager is absent from the office. This process appears to be working effectively.

2. Service requests	- Accuracy of response and resolution times (Moderate)
Target date for completion and current status	30/06/2021 Ongoing
Ernst & Young Audit Observation and Implication	One of Council's key activities is managing, and responding to, requests for service that ratepayers make of Council. KCDC uses the MagiQ system to record and monitor these requests. When a member of the community makes a request the time of the request, actions taken to respond to and resolve the request, and the time these actions were taken are all recorded in the system. This data then forms the basis for reporting a number of performance measures which relate to how quickly Council have either responded to, or resolved, requests for service relating to a particular area of operations. In completing our testing of performance reporting information, we identified multiple instances where the response and resolution times used as a basis for calculating measures were inconsistent with the times indicated on job sheets that were completed for those jobs by the staff attending to the request. This was observed for water supply, waste water and stormwater when measuring response or resolution times to urgent and non-urgent requests. This is primarily the result of the resolution time captured in the system reflecting the time service was restored based on discussion with the staff that have completed the task. However; this was not supported by the information in the job sheets. This was most prevalent for the first nine months of the 2020 financial year. From March 2020 onwards management implement a new process whereby job sheets are stamped with the time service was restored or the issue was resolved. Implication - Since a number of performance measures require reporting of response or resolution times discrepancies in the time recorded will lead to incorrect metrics being reported. Whilst this has implications for Council's non-financial performance reporting it also impacts management's ability to understand the team's responsiveness to ratepayer requests and any resourcing or process issues that may need to be
EY Audit Recommendation	remedied to allow timely responses to requests. Council continue to follow the new process that provides greater clarity of resolution times. Once the new process has been operating for a notable period of time consideration should be given to the extent that it has remediated the original underlying issue.
Action Plan	We accept the findings and recommendation from audit. Mid-way through the 2020/21 financial year we will run reports and test a sample of service requests to assess the extent that the underlying issues have been remediated. Responsibility: Group Manager, Infrastructure
Progress Update	The new process for capturing resolution times on job sheets and in MagiQ has improved accuracy of the reported data and is continuing. An internal audit step is also part of the process, which involves a team leader checking the accuracy of the data after it is inputted to MagiQ from the job sheets. A report for the first six months of the 2020/21 year revealed only a small number of anomalies which appear to relate to keying errors resulting from the manual data collection and entry process. These anomalies are able to be identified through an additional check at month-end and at year-end to ensure the data is clean for the annual report. A more sustainable solution would require automation of the process (e.g. use of handheld devices on site to time-stamp actions) to reduce risk of human error and improve on-site efficiency.

s - Monitoring of roading requests for service (Moderate)
30/06/2021
On-going On-going
For the coord and transport recovery relation to the Coverille recovery time to require for some for read, and fortunate Coverille
For the access and transport measure relating to the Council's response time to requests for service for roads and footpaths Council were unable to accurately split the requests for roads and footpaths service that have been responded to within the target timeframes (urgent and non-urgent).
Implication - Because requests for service in MagiQ are unable to be split between those relating to roads and footpaths, Council is unable to report an outturn for the year against this target and instead an overall result is included in the Annual Report.
We recommend that a system based tagging process is set-up to record the needed information.
We will investigate whether it is possible for our road maintenance contractor to reconfigure their systems to allow us to report more accurately on the KPI for the 2020/21 financial year. If this proves difficult to do, our position will be to continue reporting overall performance against contracted timeframes, and then amend the KPI through the Long Term Plan process to ensure that it can be reported on accurately (whilst adhering to the DIA requirements).
Responsibility: Group Manager, Infrastructure
We are continuing to report the combined road and footpath measures, whilst altering our systems to allow us to report individually against roads and footpaths, as per the DIA measure. This new system will be in place by 30 June 2021.

4. Approval of expe	enditure (Low)
Target date for	31/06/2021
completion and	On-going Control of the control of t
current status	
Ernst & Young Audit Observation and Implication	KCDC's General Expenses policy states "one-up authorisation must be given to the person who will benefit or might be perceived to benefit from the expenditure." We noted six instances where an expense claim was either authorised by a person who was not one up from the individual that incurred the costs or not one up from the most senior individual that benefited or might be perceived to have benefited from the expenditure. In all of these instances we are satisfied that the expenditure was appropriate but improvements could be made regarding how the relevant controls were executed. Implication —This may increase the risk that inappropriate expenditure goes undetected. This policy also serves to safeguard staff in instances where they may be perceived to have benefited from Council expenditure and an independent member of staff has concurred with their judgement that the costs are appropriate.
EY Audit Recommendation	We recommend that expenses incurred are approved in a manner that is in line with KCDC's policies.
Action Plan	We accept the findings and recommendation from audit. Council recently upgraded our Electronic Purchase Order (EPO) module within our ERP system (MagiQ). The new module provides us with better reporting functionality and visibility into purchase orders (including initiators and authorisers). During the role-out of the EPO system upgrade in August 2020, we provided training to staff on the functionality of the new module, and at the same time re-emphasised financial delegation responsibilities and the "one-up" authorisation principle. We will continue communicating this principle to staff. As a long term solution, we will be investigating the system controls within MagiQ, and consider re-configuration of the EPO approval structure within the system to align with Council's financial delegation policy.
	Responsibility: Manager, Financial Accounting
Progress Update	We have considered the Office of the Auditor General (OAG) good practice guide on "Controlling sensitive expenditure" published in October 2020 and based on that changed the "one up" authoriser for certain officials. Finance continues to communicate the "one-up" authorisation principle to the business.

	ation of annual leave entitlement for an employee (Low)
Target date for	31/12/2021
completion and	Completed
current status	
Ernst & Young Audit Observation and Implication	Our review of the annual leave calculations for a sample employee have identified an instance where one employee's annual leave entitlement of five weeks was recorded as four weeks in the Chris21 payroll system. We understand this employee joined the Council during the year on a fixed contract basis and the discrepancy noted is due to a data entry error. At present we understand other than the review of the variance report identifying differences between pay periods, there is no control in place to check for the data inputted into the system are accurate.
	Implication - There is the risk that annual leave entitlements reflected in the system do not align with contractual leave entitlements which could lead to future disputes and underpay for affected employees.
EY Audit Recommendation	Employee details in Chris21 should be reviewed on a regular basis to ensure data input into the payroll system is consistent with underlying employment records. KCDC should ensure that personnel records reflect all key information such as date of hire, remuneration, annual leave and other benefits, and all employment arrangements are maintained under employment laws and regulations.
Action Plan	We accept the findings and recommendation from audit. This error was caused due to a one-off manual adjustment within the payroll system, as the leave groups set up within the system at that time did not cater for the particular employee scenario.
	As part of continuous improvement initiatives in our payroll system and to complement the enhancements we are making organisationally to our leave provisions, a new leave group has since been set up which will be able to manage this type of scenario in the future without the need for manual intervention.
	Responsibility:
	Organisational Development Manager
Progress Update	Leave fields have been updated and are in use within the payroll system. They appear to be working effectively and will be reviewed with the next payroll system upgrade in new financial year.

Target date for	lisation of expenditure (Low) 30/06/2021
completion and	On-going On-going
current status	
Ernst & Young Audit Observation and Implication	Our review of capital costs identified two transactions that were incorrectly capitalised. These transactions related to costs incurred for a storage unit rental to store items that were removed from a property when performing improvements and the cost for a prize draw as part of the project a Mahara Place in Waikanae. The capitalisation of these costs was not in accordance with PBE IPSAS 17 <i>Property, Plant and Equipment</i> however, we note that the dollar value of the identified costs was not material.
	Implication - Costs inappropriately capitalised carry the risk that asset values on the balance sheet may be overvalued. This will also further impact the corresponding expenditure and future depreciation values of these assets.
EY Audit Recommendation	We recommend that management ensure that all capitalised expenditure is appropriately reviewed so as to be consistent with KCDC's accounting policy and the accounting standards.
Action Plan	We accept the findings and recommendation from audit.
	Finance is currently working with the organisational development team to roll-out Finance specific training for new and existing employees. In addition to this, we are providing refresher training to Activity Managers regarding operational vs capital expenditure for projects.
	The Finance Business Analyst team will review capital project transactions on a timely basis, to further ensure operational expenditure has not been incorrectly coded and are meeting accounting standards. A final review for compliance will be done by the Finance Business Analyst – Fixed assets before capitalising costs to Property, Plant and Equipment.
	Responsibility:
	Manager, Financial Planning and Performance
Progress Update	The Finance team has worked closely with the organisational development team in rolling-out two rounds of Finance specific training to new and existing managers up to December 2020 that covered and explained the difference between operational and capital expenditure.

Target date for	used to calculate certain service request measures (Low) 30/06//2021
completion and	30/00//2021
current status	On-going
	When reviewing the coloulations supporting the reported results for a number of service request managing, we noted indecurate data such as
Ernst & Young Audit Observation and Implication	When reviewing the calculations supporting the reported results for a number of service request measures, we noted inaccurate data such as duplicate or negative requests being included in the calculations skewing the median or average response and resolution times reported. We also noted an instance where there was missing information that hadn't been included in the calculation. Below is summary of the measures affected: • Water: urgent – included 4 negative service restored times, meaning that the service was restored before the request was raised. • Water: non-urgent - included 12 negative response times and 2 private requests that do not relate to the KCDC water system. • Wastewater: dry weather overflows – there was 1 item missing from the overflow report, which have not been manually flagged as an overflow. We are also aware that service requests are going to be monitored on a quarterly basis going forward to identify issues earlier. This will involve a new duplicate request list being generated and sent to Activity Managers to resolve. Implication - The implications of the above findings are that the reported measures may not be accurate. Although in the current year these matters did not impact whether the targets were achieved or not there is the risk that inaccurate reporting occurs in future years that leads to an incorrect result.
EY Audit	We recommend that management continue to make improvements to cleanse the data and perform regular checks that the data is free of
Recommendation	duplicate requests and inaccurate entries
Action Plan	We accept the findings and recommendation from audit.
	Duplicate requests are now being reported and cleansed regularly and this will need to continue. There appears to be some instances where service requests were classified incorrectly. Mid-way through the 2020/21 financial year we will run reports and test a sample of service requests to identify and correct any inaccuracies.
	Responsibility:
	Group Manager, Infrastructure Services
Progress Update	We are altering our systems to allow us to report as per the DIA measure. This new system will be in place by 30 June 2021.

8. Review of manua	al journals (Low)
Target date for	30/06/2021
completion and	Completed
current status	
Ernst & Young Audit Observation and Implication	Manual journals are predominantly used to record payroll related transactions to MagiQ as there is no automatic interface between MagiQ and the payroll system. Council also use manual journals to record month end accruals and prepayments. We note whilst manual journals have enough documentation to support the business reason for the transaction, there is currently no review or approvals of manual journals. Implication - Manual journals are inherently more risky than standardised transactions posted through Council's sub-ledgers. Without some form of review of manual journals, either individually or in aggregate, there is a higher risk of errors going undetected.
EY Audit Recommendation	While we did not identify any issues with journals posted during the period, we recommend that all manual journals are reviewed and signed off as approved by a person other than the preparer. This could be completed for individual journals or periodically for groups of journals.
Action Plan	We accept the findings and recommendation from audit. Council's current ERP system (MagiQ) does not have a journal approval workflow that allows electronic sign off or approval of manual journal entries before they are posted in the system. During the year, finance has developed a manual review process of monthly manual journal entries and has tested and refined the process during April and May 2020. On a sample basis, the review focus on the validity, accuracy and rational of journal entries as well as the appropriate support.
	This manual review process will be rolled out as part of our monthly reconciliation and review processes for the 2020/21 financial year.
	Responsibility:
	Manager, Financial Accounting
Progress Update	As part of the monthly reconciliation and review process a sample of journal entries are reviewed by the Financial Accountant – Financial reporting and Team leader Financial Analysis, Planning and Performance to ensure accuracy and completeness of the documentation supporting the business reason for the transaction. The completion of this review is signed off by the Manager, Financial Accounting.

9. Incorrect pay to	Elected Member (Low)
Target date for completion and current status	30/06/2021 Completed
Ernst & Young Audit Observation and Implication	We are required to assess whether the remuneration paid to elected members is in accordance with the Local Government Members determination. Through our review of a sample of elected members we noted a member who held a chair of a community board role stepped down during the year but continued to be paid the chairperson remuneration for a short period of time. At the same time the member who took on the role was underpaid for the same period. This matter was subsequently identified by Council staff and rectified appropriately. Implication - Timely identification of elected members role changes is important in order to make sure remuneration paid is in accordance with the remuneration determination.
EY Audit Recommendation	We recommend that KCDC monitor the status of all its Elected Members to ensure that it is consistent with approved remuneration thresholds in accordance with the Local Government remuneration requirements.
Action Plan	We accept the findings and recommendation from audit. The error occurred due to information not reaching the payroll team in time for the processing of the next pay-run. The overpayment and underpayment was identified shortly afterwards and has since been rectified in subsequent pay runs. Going forward, Democracy services will ensure that any changes in Elected Member positions will be received in writing (e-mail) and conveyed to payroll before the relevant payroll cut off dates. Responsibility: Manager, Democracy Services
Progress Update	Payroll cut off dates have been re-communicated to the democracy services team, as well as the importance of communicating any changes in elected members payments to payroll within the relevant pay-run period.

Target date for completion and current status	31/12/2020 Completed
Ernst & Young Audit Observation and Implication	We observed various employee manuals and policy documents were last updated over 4 years ago. Specifically, we noted the below policies are currently overdue for review and update: a. Receipt of gifts and hospitality b. Rewards and recognition policy c. Mitigation of fraud d. Employee code of conduct e. Elected member code of conduct We understand that KCDC are looking at implementing better monitoring framework of corporate policies to ensure they are updated in a timely manner. Currently there are updated policies in draft version. We expect this point to be closed in the next financial year. Implication - Policies and other guidance documents should be updated on a regular basis to ensure any changes in circumstances that require additional guidance are incorporated on a timely basis.
EY Audit Recommendation	We recommend that corporate policies be monitored and updated on a regular basis.
Action Plan	We accept the findings and recommendation from audit. The internal policy register has been re-established to support the monitoring, review and update of corporate policies. This includes regular reporting to SLT on progress. Of those previous out-of-date policies identified above, all five have been updated. Responsibility: Manager, Research and Policy
Progress Update	The review and update of the above policies was completed. Work will continue to support the ongoing review and update of internal policies.

8.2 QUARTERLY TREASURY COMPLIANCE REPORT

Author: Anelise Horn, Manager Financial Accounting

Authoriser: Mark de Haast, Group Manager Corporate Services

PURPOSE OF REPORT

This report provides confirmation to the Audit and Risk Subcommittee of the Council's compliance with its Treasury Management Policy (Policy) for the quarter ended 31 March 2021.

DELEGATION

The Audit and Risk Subcommittee has delegated authority to consider this report under the following delegation in the Governance Structure, Section C.1.

Ensuring that the Council has in place a current and comprehensive risk management framework and making recommendations to the Council on risk mitigation.

BACKGROUND

- The Policy sets out a framework for the Council to manage its borrowing and investment activities in accordance with the Council's objectives and incorporates legislative requirements.
- The Policy mandates regular treasury reporting to management and the Strategy and Operations Committee, as well as quarterly compliance reporting to the Audit and Risk Subcommittee.
- In order to assess the effectiveness of the Council's treasury management activities and compliance to the Policy, certain performance measures and parameters have been prescribed. These are:
 - cash/debt position;
 - liquidity/funding control limits;
 - interest rate risk control limits;
 - counterparty credit risk;
 - specific borrowing limits; and
 - risk management performance.

DISCUSSION

Cash/Debt Position

Table 1 below shows the Council's net debt position as at 31 March 2021 against the 2020/21 full year budget and the prior year closing balance.

Table 1	March YTD Actual	Full Year Budget	Full year 2019/20	
	\$000's	\$000's	\$000's	
External debt	230,000	207,028	210,000	
less borrower notes	(4,040)	(3,312)	(3,360)	
less cash and cash	(76,689)	(40,200)	(50,944)	
Net debt	149,271	163,516	155,696	

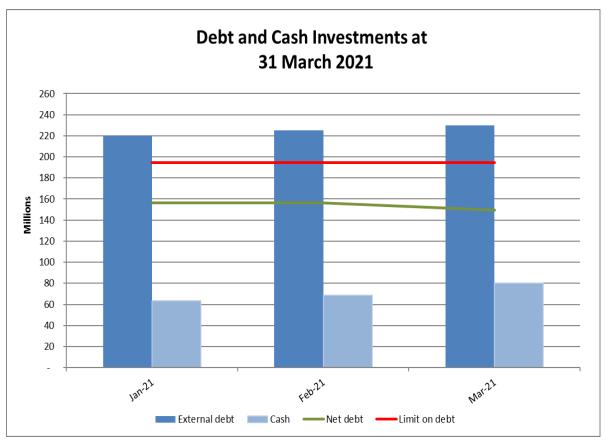
- During the past three months, the Council has issued \$10 million of new debt, bringing the total amount of debt drawn the past nine months to \$40 million.
- \$35 million was issued to pre-fund debt maturities (\$5 million of the May 2021, \$10 million of the October 2021 and \$20 million of the May 2022) and \$5 million to prefund the 20/21 Capex programme. As part of the Council's prefunding programme, all prefunding is placed on term deposit, at the most favourable market rates available at that time.
- 9 \$20 million of debt matured during October 2020 that was refinanced using term deposits.
- The table below shows (a) the movement in the Council's external debt balance and (b) the movement in the Council's pre-funding programme by debt maturity, for the nine months ended 31 March 2021.

Borrowings	Gross					
Donomings	borrowings	TD	TD	TD	TD	20/21 Capex
		Oct 2020	May 2021	Oct 2021	May 2022	programme
	\$000	\$000	\$000	\$000	\$000	\$000
Opening balance 1 July	210,000	20,000	15,000	10,000		
New Long term debt issued YTD	40,000	-	5,000	10,000	20,000	5,000
Matured Long term debt	(20,000)	(20,000)	-	-		
Total	230,000		20,000	20,000	20,000	5,000

11 As at 31 March 2021 the Council had \$80.73 million of cash, borrower notes and term deposits on hand. This is broken down as follows:

Term deposits, cash & borrower notes	Term deposits to prefund borrowings	Prefunding capex	Borrower notes	Cash	Total
	\$000	\$000	\$000	\$000	\$000
LGFA debt maturing May 2021	20,000	-	-	-	20,000
LGFA debt maturing Oct 2021	20,000	-	-	-	20,000
LGFA debt maturing May 2022	20,000				20,000
Prefund 20/21 CAPEX		5,000			5,000
Surplus cash	-	-	-	11,689	11,689
Borrower notes held	-	-	4,040	-	4,040
Total	60,000	5,000	4,040	11,689	80,729

For the three months ended 31 March 2021, the Council has not breached its net debt upper limit, as shown in the chart below:

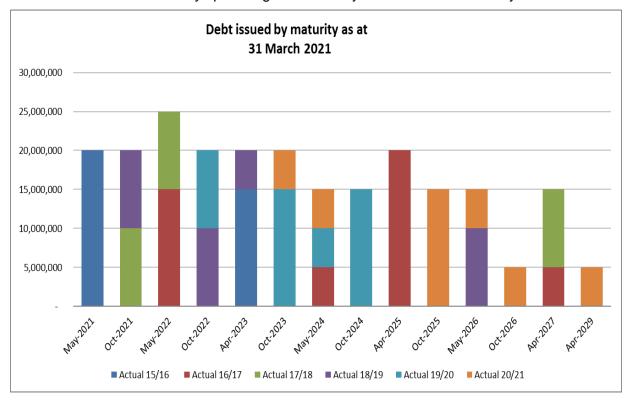


The Council is targeting through its current financial strategy, to keep net borrowings below 200% of total operating income of the current financial year. At 31 March 2021, the Council's net borrowings are forecast to be 178% of total operating income at the 30 June 2021.

Liquidity/Funding control limits

- 14 Liquidity and funding management focuses on reducing the concentration of risk at any point so that the overall borrowings cost is not increased unnecessarily and/or the desired maturity profile is not compromised due to market conditions. This risk is managed by spreading and smoothing debt maturities and establishing maturity compliance buckets.
- 15 Since October 2015 the Council's treasury strategy has included a debt pre-funding programme. The Policy allows pre-funding of the Council debt maturities up to 18 months in advance, including re-financing. Market conditions have been favourable for this approach, where the Council draws down debt early and is able to invest the funds on term deposit for a slight positive net return.
- The strength of the Council's debt pre-funding programme was again highlighted by the Council's independent Credit Rating Agency, Standard & Poor's (S&P), during their July 2020 review. This has resulted in the Council's credit rating remaining at AA with a stable outlook for the following year. S&P noted that the Council's liquidity coverage remains exceptional.

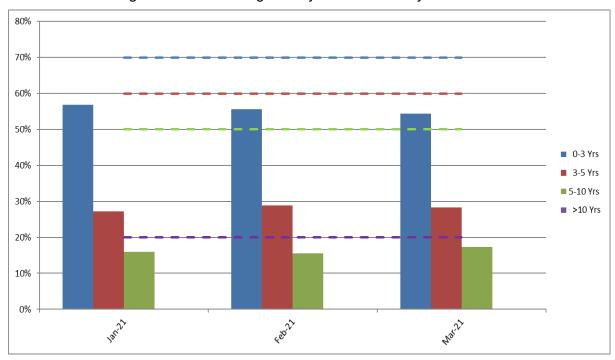
17 The following chart presents the Council's debt maturity dates in relation to the financial year in which the debt was issued. This demonstrates that since 2016/17, the Council has actively reduced risk concentration by spreading debt maturity dates and debt maturity values.



18 Debt maturities must fall within maturity compliance buckets. These maturity buckets are as follows:

Maturity Period	Minimum	Maximum
0 to 3 years	10%	70%
3 to 5 years	10%	60%
5 to 10 years	10%	50%
10 years plus	0%	20%

19 For the three months ended 31 March 2021, the Council has been fully compliant with its debt maturity limits, as shown by the chart below. The upper limits, as shown by dashed lines, relate to the bars of the same colour. For example, the 0 to 3 year upper limit of 70% is in blue. Actual maturities in the 0-3 year bucket are represented by the blue bars. The Council has no long term debt maturing in ten years' time or beyond.



Interest rate risk control limits

- The Council issues all debt on a floating rate basis, as lower interest rates are realised this way, and uses fixed interest rate swaps (hedges) to minimise exposure at any one time to interest rate fluctuations. This ensures more certainty of interest rate costs when setting our Annual Plan and Long Term Plan budgets.
- 21 Without such hedging, the Council would have difficulty absorbing adverse interest rate movements. A 1% increase in interest rates on \$230 million of external debt would equate to additional interest expense of \$2.3 million per annum. Conversely, fixing interest rates does however reduce the Council's ability to benefit from falling and/or more favourable interest rate movements.
- The objectives of any treasury strategy are therefore to smooth out the effects of interest rate movements, while being aware of the direction of the market, and to be able to respond accordingly.
- 23 The Policy sets out the following interest rate limits:

<u>Major control limit</u> where the total notional amount of all interest rate risk management instruments (i.e. interest rate swaps) must not exceed the Council's total actual debt, and;

<u>Fixed/Floating Risk Control limit</u>, that specifies that at least 55% of the Council's borrowings must be fixed, up to a maximum of 100%.

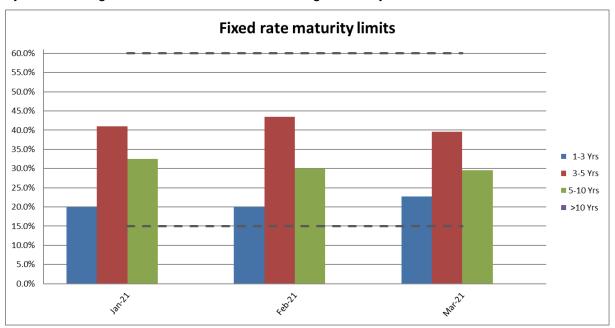
The Council has been fully compliant for the three months ended 31 March 2021, as shown by the table below.

\$000's	Jan-21	Feb-21	Mar-21
External debt	220,000	225,000	230,000
Swaps (fixed	200,000	200,000	220,000
Fixed %	90.9%	88.9%	95.7%
Unfixed debt	20,000	25,000	10,000

25 Similar to debt maturities, hedging instrument maturities must also fall within maturity compliance buckets. These maturity compliance buckets are as follows:

Period	Minimum	Maximum
1 to 3 years	15%	60%
3 to 5 years	15%	60%
5 to 10 years	15%	60%
10 years plus	0%	20%

The Council has been fully compliant for the three months ended 31 March 2021, as shown by the following chart. Note that maturities falling within 1 year are not included.



Counterparty Credit Risk

The policy sets maximum limits on transactions with counterparties. The purpose of this is to ensure the Council does not concentrate its investments or risk management instruments with a single party.

28 The policy sets the gross counterparty limits as follows:

Counterparty/Issuer	Minimum Standard and Poor's long term	Investments maximum per counterparty	Risk management instruments maximum per counterparty	Borrowing maximum per counterparty
NZ Government	N/A	Unlimited	None	Unlimited
LGFA	AA-/A-1	\$20m	None	Unlimited
NZ Registered Bank	A+/A-1	60% of total investments or \$25m; whichever is greater	50% of total instruments or \$80m; whichever is greater	\$50m

The Council was in full compliance with all counterparty credit limits for the three months ended 31 March 2021. The tables below show the Council's investments and risk management instruments holdings per counterparty for this period.

Term deposits

Counter party	Jan-2	2021	Feb-2	021	Mar-2	2021	Comply
	\$000	%	\$000	%	\$000	%	
NZ Registerd Bank 1	15,000	27.27%	15,000	25.00%	15,000	23.08%	√
NZ Registerd Bank 2	20,000	36.36%	20,000	33.33%	20,000	30.77%	✓
NZ Registerd Bank 3	20,000	36.36%	20,000	33.33%	20,000	30.77%	✓
NZ Registerd Bank 4	-	0.00%	5,000	8.33%	10,000	15.38%	✓
_	55,000	100%	60,000	100%	65,000	100%	

^{*}Policy Limit: 60% of total investments or \$25 million; whichever is greater

Interest rate swaps

Counter party	Jan-20	21	Feb-20	21	Mar-20	21	Comply
	\$000	%	\$000	%	\$000	%	
NZ Registerd Bank 1	50,000	25.00%	50,000	25.00%	55,000	25.00%	V
NZ Registerd Bank 2	86,000	43.00%	86,000	43.00%	96,000	43.64%	✓
NZ Registerd Bank 3	64,000	32.00%	64,000	32.00%	69,000	31.36%	✓
	200,000	100%	200,000	100%	220,000	100%	

^{*}Policy Limit: 50% of total instruments or \$80 million; whichever is greater

Specific Borrowing Limits

- In managing debt, the Council is required to adhere to the specific borrowing limits. The Net External debt/Total operating Income limit was updated during the Policy review in August 2020 to align with the new interim LGFA borrowing covenants in response to COVID-19.
- 31 Excluding economic stimulus initiatives driven by central government, the Council remains committed to complying with its financial strategy limit of not exceeding 200% of total operating income for 2020/21.

The Council fully complied with these limits for the three months ended 31 March 2021 (or a period as otherwise specified) and the results are shown below:

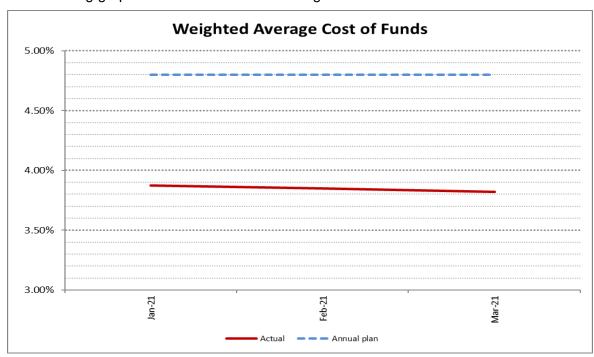
Borrowing limit	Policy limit	2020/21	Comply
Net interest expense/Total Operating			
Income	< 20%	8.3%	•
Liquidity ((total debt +total			
committed facilities +cash on			✓
hand)/total debt))	> 110%	142.0%	
Net External Debt/Total Operating			
Income (forecast)	< 300%	178.0%	~

Risk Management Performance

The following table shows the Council's interest income and expense for the period ended 31 March 2021 together with the weighted average cost of borrowing (WACB), compared to year to date budget and full year forecast.

	March YTD Actual \$000	YTD Budget \$000	Variance (Fav/UnFav) \$000	Full year Forecast \$000
Interest Expense	6,285	6,522	237	8,357
Income	(857)	(1,010)	(153)	(1,049)
Net Interest Cost	5,428	5,511	84	7,308
Weighted Average Cost of Borrowings	3.86%	4.80%	0.94%	3.77%

- The Council has been effective in its treasury management with its weighted average cost of funds being 0.94% lower than planned as at the 31 March 2021.
- 35 The following graph shows the cost of borrowing each month.



CONSIDERATIONS

Policy considerations

There are no policy considerations in addition to those already noted in this report.

Legal considerations

37 There are no legal considerations arising from this report.

Financial considerations

There are no financial considerations in addition to those already noted in this report.

Tāngata whenua considerations

39 There are no tangata whenua considerations arising directly from this report.

SIGNIFICANCE AND ENGAGEMENT

Significance policy

This matter has a low level of significance under the Council's Significance and Engagement Policy.

Publicity

41 There are no publicity considerations arising from this report.

RECOMMENDATIONS

That the Audit and Risk Subcommittee notes the Council's full compliance with its Treasury Management Policy for the three months ended 31 March 2021.

APPENDICES

Nil

8.3 HEALTH AND SAFETY QUARTERLY REPORT: 1 JANUARY 2021 - 31 MARCH 2021

Author: Dianne Andrew, Organisational Development Manager

Authoriser: Wayne Maxwell, Chief Executive

PURPOSE OF REPORT

1 This report presents a Health and Safety report for the period 1 January – 31 March 2021.

DELEGATION

- The Audit and Risk Sub Committee has delegated authority to consider this report under the following delegation in the Governance Structure, Section C.1:
 - Ensuring that the Council has in place a current and comprehensive risk management framework and making recommendations to the Council on risk mitigation;
 - Assisting elected members in the discharge of their responsibilities by ensuring compliance procedures are in place for all statutory requirements relating to their role;
 - Governance role in regards to the Health and Safety Leadership Charter and Health and Safety Plan.

BACKGROUND

- The quarterly Health & Safety Performance Report is intended to provide the Council with insight into initiatives and activities, and their progress, as part of our Council's commitment to providing a safe and healthy place to work. The contents and any subsequent discussions arising from this report can support Officers to meet their due diligence obligations under the Health & Safety at Work Act (HSWA) 2015.
- Between July and September 2017 the Simpson Grierson Health and Safety team were engaged to review how the Council was progressing with changes and planned initiatives following the introduction of the Health and Safety at Work Act (HSWA) 2015. The findings were presented back to the Audit and Risk Committee in November 2017. This review identified areas for improvement, in particular some process improvements to further strengthen Council's ability to more effectively monitor and verify.
- 5 The draft Health and Safety Plan 2018 2020 adopted by the Senior Leadership Team has been updated and extended to cover the period 2020 2023 to enable Covid-19 lockdown delays and interruptions to be included.
- A draft of the Health and Safety Plan 2020-2023 will be provided to this Sub Committee following adoption by the Senior Leadership Team.
- Progress on the 2020 2023 Health and Safety Plan will be incorporated into quarterly reports going forward.

ISSUES AND OPTIONS

Issues

- Progress on the initial Health and Safety 2018-2020 Plan initiatives continue to progress however the alert level 4 and alert level 3 restrictions severely disrupted planned health and safety related initiatives and training. Several time lines continue to require extensions and this will be updated through the regular reporting cycle.
- 9 Disruptions as a result of previous and future Covid-19 alert level resurgence and/or restrictions will be factored into the draft 2020 2023 Health and Safety Plan.

CONSIDERATIONS

Policy considerations

10 There are no Policy considerations arising from this report.

Legal considerations

11 There are no legal considerations arising from this report.

Financial considerations

Budget has been provided for implementation of the action plan initiatives as part of the 2018-38 Long Term Plan.

Tāngata whenua considerations

13 There are no Tangata whenua considerations arising from this report.

SIGNIFICANCE AND ENGAGEMENT

Significance policy

14 This report does not trigger the Council's Significance and Engagement Policy.

Publicity

15 There are no publicity considerations.

RECOMMENDATIONS

That the Audit and Risk Sub Committee notes the Health and Safety Quarterly Report for the period 1 January 2021 – 31 March 2021 attached as Appendix One to this Report.

APPENDICES

KĀPITI COAST DISTRICT COUNCIL Health and Safety Quarterly Report to the Audit and Risk Sub Committee 1 January 2021 – 31 March 2021

The 2020 – 2023 Health and Safety Plan is drafted and awaiting formal signoff following consultation. Time frame for being submitted to Audit and Risk Sub Committee is planned to coincide with the April – June Quarterly Report. The draft plan retains alignment to the recently introduced WorkSafe NZ SafePlus model of 'what good looks like', the framework of which sets out ten performance requirements, under the three themes of Leadership, Worker Engagement, and Risk Management. The plan will continue to build on the three current high-level areas of Leadership; Health and Safety Management Systems, and Contractor Management, with the underlying focus on:

- o skill and capability of our people
- o managing our critical risks, and
- o leadership and engagement

Lag performance indicators are a measure of adverse events that have occurred and been reported. Compared to the same period last year, the total number of health and safety incidents reported this quarter are very similar (53 compared to 54) however it should be noted that for the period 3 December 2020 – 19 March 2021 the Finance, ICT and Organisational Development teams were primarily working from home due to the delay in moving into the new Takiri South building and this may have impacted on incident frequency and/or reporting.

LEAD INDICATORS

CORPORATE HEALTH AND SAFETY TRAINING SUMMARY

Training Type	Training Course Name	Scheduled	Status
Task Related	 Breathing Apparatus Chlorine Maintenance Dangerous Goods Confined Spaces Chemical Awareness Approved Chemical Handler 	Nil this quarter	Historically these courses have been delivered on an 'as needs' basis. Going forward, dates will be scheduled and delivered in bulk to provide consolidated renewal dates for each key area.
Role Related	Electrical Competency GrowSafe	March 2021 Deferred to 15 April 2021	
Critical Risk Related	AA Safe Driving Assessment – Phase 1: Regular Drivers of Council vehicles	Phase 1 – on line assessments commenced September 2020 Phase 1 – practical assessments	Phase 1- on line assessments completed by December 2020 Phase 1- practical assessments completed by end April 2021

	AA Safe Driving Assessment - Phase 2: other staff	commenced November 2020 Phase 2 – on line assessments commenced November 2020	Ongoing with requirement to complete within 2 months of notification
General - Health and Safety Related	 Comprehensive First Aid (add in dates for full and half days) Noise Monitoring (water Treatment Plants and Operations) 	5 yearly cycle commenced October – December 2020	February 2021 Completed December 2020
	Hearing Tests	Annual cycle October - December	Completed December 2020

2. EMERGENCY EVACUATIONS AND DRILLS

- The Council has 12 buildings which all have emergency evacuation plans in place. Ten of
 these buildings have their evacuation plans approved and lodged with Fire and Emergency NZ
 as required by the nature of their operation. All ten* buildings are required to carry out six
 monthly emergency evacuation drills.
- One* six monthly emergency evacuation drill is overdue as at 31 March 2021 and this relates
 to the Otaki Civic Theatre which is closed for refurbishment until April 2021. No emergency
 evacuation drills will be happening until after the building has re-opened.
- The emergency evacuation drill scheduled for the Civic Building* in February required rescheduling.
- The Council has two buildings which do not require six monthly evacuation drills and instead
 require procedures to be in place, checked and reviewed which is occurring.

3. EMPLOYEE HEALTH AND SAFETY INDUCTIONS

- 25 new employees commenced this quarter. Documentation returns appear slow this quarter with several outstanding returns despite inductions being completed.
- Finance, ICT and Organisational Development teams (approximately 56 staff) moved into the new Takiri South building during this quarter and all staff have completed building health and safety inductions.

4. WELLNESS INITIATIVES

Wellness Initiative	Staff recipients
Eye Examinations	15
Ergonomic Work Assessments	9
EAP Services hours utilized	31
Flu vaccinations were scheduled to be completed by May 2021 but now on hold until further notice due to national Covid-19 vaccination rollout program.	

5. DRUG AND ALCOHOL MANAGEMENT

- Drug and Alcohol Tests pre-employment continue to be undertaken by all preferred applicants.
- Reasonable cause testing continues to be undertaken as a mandatory requirement where any
 incident involves the use of machinery or vehicles and a worker's actions or lack of action may
 have contributed
- No Reasonable Cause tests were conducted during this quarter.

6. STANDARD OPERATING PROCEDURES (SOPS)

 Operational activity SOPs continue to be maintained as work in progress/continuous improvement,

7. CONTRACTOR MANAGEMENT - MAJOR WORKS*

- As at 31 March 2021 a total of 190 Contractors were listed as 'current approved' on the Contractor Register.
- 8 contractors were newly added and 24 had their approval renewed this quarter.

 Major Works refers to contractors undertaking work other than effice/administrative based was
- *Major Works refers to contractors undertaking work other than office/administrative based work.

RISK MANAGEMENT

- The 2018-2020 work program identified three organizational critical risk priority areas: Asbestos Management, Hazardous Substance Management, and Driving. Work on each area has progressed to the point where processes, procedures and plans to mitigate and more effectively manage these risks are now in place. This does not mean they should be 'removed' as organizational critical risks as these areas will still remain critical risks for our organization.
- Driving: Job specific training for specialist vehicle drivers (pump trucks, bulldozers etc.)
 remains in place. 35 drivers identified as higher risk due to their roles regular requirement to
 drive a Council vehicle have now completed both the on line assessment and the on-road
 assessment
- As at 31 March there were 50 Care Register entries, with no new additions this quarter.
 Although no new entries this quarter, work continues on managing/reviewing high risk existing entries.
- A project to complete an overall review of all risk assessments and safety plans for Council
 Operations staff working at parks and reserves has been deferred due to Operations resource
 unavailability. Rescheduling for the overall project is yet to be confirmed however ongoing risk
 assessments and safety plans are monitored and updated on a case by case basis.
- Occupational noise monitoring across Infrastructure Operations and Water Treatment Plants staff has been completed and will now become part of the 5 yearly cycle. Where circumstances change and different equipment / new machinery is introduced to these areas, assessments may be done within the 5 yearly cycle as required.

9. HEALTH AND SAFETY COMMITTEE (HSC)

- Monthly meetings were held in February and March 2021. No meeting was scheduled in January 2021 due to the Christmas holiday period.
- . A voting process was completed in March for a new Aquatics Health & Safety Representative.
- The committee is currently working on the key focus areas for the 3-year Health and Safety Plan (2020-2023).

10. SLT INITIATIVES

- SLT undertook a site Visit to Otaki Library 5 February 20921. Further health and safety site
 visits have been scheduled for 2021 and include the Operations Depot, Coastlands Aquatic
 Centre, Animal Management/EOC and Otaki Pool.
- SLT continues to maintain a focus on wellbeing, including psychological wellbeing as a result
 of previous lockdowns and future planning for Covid related contingencies and potential
 impacts amongst our staff.
- SLT continues to monitor and review leave usage which has resulted in the implementation of a new leave provision to enable staff to care for their dependants.

11. HEALTH AND SAFETY POLICY REVIEW

- An updated Health and Safety Risk Management Policy and an Accidents and Incidents Management Policy is awaiting formal sign off/approval. Emergency Preparedness and Business Continuity policies remain under constant review and monitoring.
- The wider health and safety policy related review work program continues to be a work in progress using a continuous improvement approach to enable best opportunities for checking fit for purpose post covid-19 lockdowns.

The Health and Safety Toolkit on HubKap continues to be maintained under business-asusual continuous improvement.

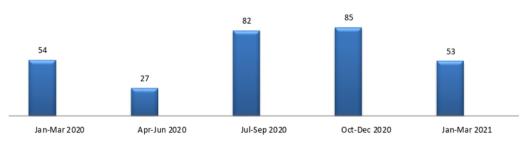
LAG INDICATORS

12. INCIDENTS, INJURIES, ILLNESSES AND NEAR MISSES 1 JANUARY - 31 MARCH 2021

Group	Incident/Injury or Illness	Notifiable* Incident/Injury or Illness	Near Miss	Total
Chief Executive including	0	0	0	0
Org Dev			•	
Corporate Services	0	0	0	0
Infrastructure Services	8	0	0	8
People and Partnerships	2	0	0	2
Place and Space	7	0	0	7
Regulatory Services	1	0	1	2
Strategy, Growth &	0	0	0	0
Recovery	0	U	U	0
Third Party	31	0	3	34
Contractor	0	0	0	0
Total	49	0	4	53

^{*} Notifiable Incident: an unplanned or uncontrolled incident in relation to a workplace that exposes the health and

Total Council Reported Incidents



- Of the 53 total incidents:
 - 6 worker injuries: including sprain/strain (4), cuts/abrasion (2).
 - 13 worker non -injuries including near miss (1), 3rd party behaviour / mental stress (5), vehicle and mobile plant events (5), other (2)
 - 34 third party incidents
 - 0 contractor events

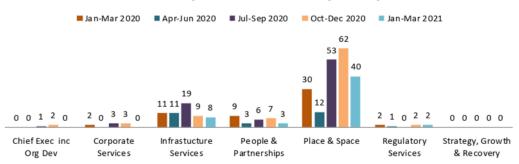
safety of workers or others to a serious risk, arising from immediate or imminent exposure.

* Notifiable Injury or illness: suffers a serious injury or illness as a result of work or workplace, for example requires immediate qualified medical assistance or admittance to hospital, or treatment from a registered medical practitioner within 48 hours of exposure to a substance.

Total Third Party Reported Incidents 44 26 7 Jan-Mar 2020 Apr-Jun 2020 Jul-Sep 2020 Oct-Dec 2020 Jan-Mar 2021

- Third Party is defined as a person who does not hold employee status or contractor worker status
- Third Party events are associated primarily with Council's recreational public buildings i.e. Aquatics centres and Libraries.

Total Reported Incidents by Group



8.4 RISK MANAGEMENT - BUSINESS ASSURANCE UPDATE

Author: Sharon Foss, Business Improvement Manager

Authoriser: Mark de Haast, Group Manager Corporate Services

PURPOSE OF REPORT

This report updates the Audit and Risk Subcommittee on the on-going implementation of the Enterprise Risk Management (ERM) framework.

DELEGATION

The Audit and Risk Subcommittee has delegated authority to consider this report under the following delegation in the Governance Structure, Section C.1.

Ensuring that Council has in place a current and comprehensive risk management framework and making recommendations to the Council on risk mitigation.

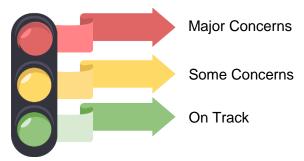
BACKGROUND

- The key elements of the Enterprise Risk Management Framework include risk management; corporate business continuity management, procurement improvement programme; and business risk and assurance.
- 4 The main work streams are:
 - regular risk discussions with staff and managers and embed the day-to-day management of risks in work streams such as: projects, activity delivery, and asset management;
 - communicate and report risk up to Council/Committees;
 - have a Business Continuity Management System for effective response to a range of potential business disruptions;
 - provide fraud awareness training;
 - provide business assurance oversight and complete business assurance work; and
 - improve the understanding and tools to support good procurement practices.
- Risk is defined as the effect of uncertainty on expected results and is managed on a continual basis. The intended outcomes from performing this risk management programme well will assure:
 - stakeholders, external auditors, the Council and management that the real risks are being identified and managed effectively. Risks can be negative or positive:
 - a negative risk is a threat and/or potential problem. It creates concern or uncertainty around our delivery of overall programmes, projects, strategies, or other expectations that can result in major health and safety, financial, fraud, operational and reputational impacts. Identifying negative risks before they occur means that we can take measures to mitigate or remove the threat, so that it does not materialise.
 - a positive risk is an opportunity which has a positive impact on our objectives. When these are identified the appropriate action is to make use of the opportunity and leverage them to cause them to occur. For example, ensuring that everything is looked at and actions are put in place to make risks as small as possible might highlight the value of using new technology to increase quality assurance and improve service delivery.
 - better decision making throughout the business through greater awareness of the real risks and how these are going to be addressed; and
 - clarification and socialisation of the Council's risk appetite and tolerance.

Enterprise Risk Management Progress Update

Corporate Risk Profile - Summary Update

The corporate risk profile is managed by a risk register and presented in the associated Corporate Risk Summary attached as Appendix 1 to this report. This Summary lists the risk controls along with the additional treatments planned to reach the target risk level. The risk action status is categorised as follows:



- 7 Engagement on the corporate risk profile is through quarterly conversations with managers. The focus is on identifying, managing and communicating the very highest strategic and operational risks that the Council faces. Our approach to how we assess risk is illustrated in every risk and also in the diagrams in Appendix 2 to this report. Important matters to note when reading the diagrams are that:
 - 7.1 Likelihood is how likely the risk is to materialise and is rated as rare, unlikely, possible, likely and almost certain.
 - 7.2 Consequence is the impact on Council not just financial, but also health and safety, fraud, operational and reputational.
 - 7.3 This assessment tool is subjective and is used as a prompt for a risk comparison and ranking mechanism.
- The overall risk management culture and practice continues to improve and the risk conversations widen. The concept of risk acceptance is being further embedded across the organisation, i.e. certain moderate level risks may be tolerated by the business in the context of the costs or impracticalities to further mitigate the risk.
- In summary our Corporate Risk Status is healthy. Of the 20 risks presented in Appendix One to this report, only one has some concern. The other 19 are on track. Matters for your particular attention in the Corporate Risk Summary attached at Appendix 1 to this report are noted below:

Action Status	Risk Status	Risk Reference and Comment	
Major Concerns		There are no risks with major concerns.	
Some Concerns		One risk is recorded with the status of some concerns.	
		Risk 9 Paraparaumu Wastewater Treatment Plant – difficulties with consent process.	
		Due to the lack of availability for lwi to engage we were unable to progress the original consent process and had to develop an alternative consenting strategy. Progress is now underway. GWRC has confirmed acceptance of a shortened application period. We have commissioned lwi's preferred consultant to work on the consent and agreed support with	

Action Status	Risk Status	Risk Reference and Comment	
		Iwi for alternative consenting approach. Further work with GWRC is underway on their application.	
		The comments for and/or presentation of four risks in this report have been refreshed as noted below:	
		Risk 3 - Asset investment decisions are less than desirable resulting in poor management of council owned assets. This Risk differs from that presented to the 12 November 2020 Audit and Risk Sub-Committee meeting. The refreshed wording reflects a merge of two asset related risks previously reported separately: Asset investments are less than desirable, and Poor management of council owned assets.	
On Track		Risk 6 - Central Government changes to 3-waters services (drinking water, wastewater and stormwater) creates uncertainty. This Risk is a new entry. This follows the 12 November 2020 audit and Risk Sub- Committee decision to treat the Government changes to regulation and supply arrangements for what is known as the 3-waters services as a separate risk.	
		Risk 12 - LGA wellbeing policies: expectations not met. The wording of this risk has been changed to match previous entries in the 13 August 2020 Audit and Risk Sub-Committee agendas.	
		Risk 17 - Customer Focus. Customer needs not fully met in the absence of a coordinated approach to increasing customer focus in Council's everyday work. This Risk has been changed to remove the reference to Open for Business.	

Procurement Improvement Programme

10 With the Council-wide Procurement Strategy as the foundation, progress towards better procurement maturity is well in hand. Work has continued to uplift procurement capability and provide procurement support across the organisation.

Risk and Assurance

- Initial planning for a Council-wide six-month assurance work programme is underway. This, and the associated priorities, will be developed for approval by the Senior Leadership Team by Quarter One of the 2021/22 financial year.
- There are two critical components of this assurance programme that will be key to the success of implementing this approach and "bringing to life" the elements of risk management:
 - 12.1 Embed a continuous control approach of:

Prevent	•	Detect	•	Respond	•	Recover

12.2 Apply the PriceWaterhouseCoopers (PWC) "four lines of defence" model to how staff think about and manage organisational risks.

1 st line of Defence	Internal Controls built into Core Business Processes
2 nd line of Defence	Management Self-checking / Compliance Monitoring
3 rd line of Defence	Internal Audit (assurance wok programme)
4 th line of Defence	External Audit

Considerations

Policy considerations

13 There are no further policy implications arising from this report.

Legal considerations

14 There are no further legal considerations arising from this report.

Financial considerations

The work described above is planned to be funded from the 2020/21 Annual Plan budget by way of prioritised spending.

Tāngata whenua considerations

16 There has been no direct engagement with tangata whenua regarding this report.

Strategic considerations

17 This enterprise risk management framework contributes to ensuring that the Council is continuing to improve its financial position against financial constraints.

SIGNIFICANCE AND ENGAGEMENT

18 This matter has a low level of significance under the Council Policy.

RECOMMENDATIONS

19 That the Audit and Risk Subcommittee receives and notes this report, including Appendices 1 and 2 to this report.

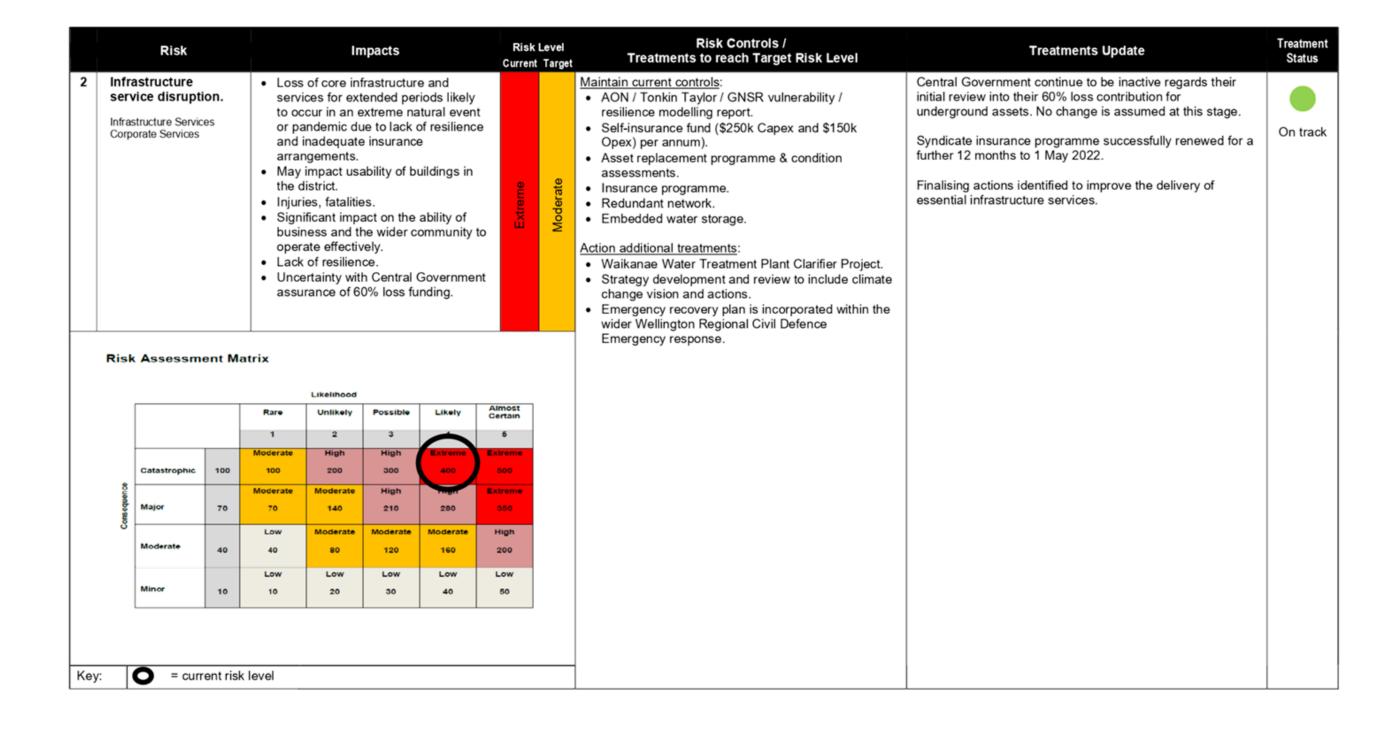
APPENDICES

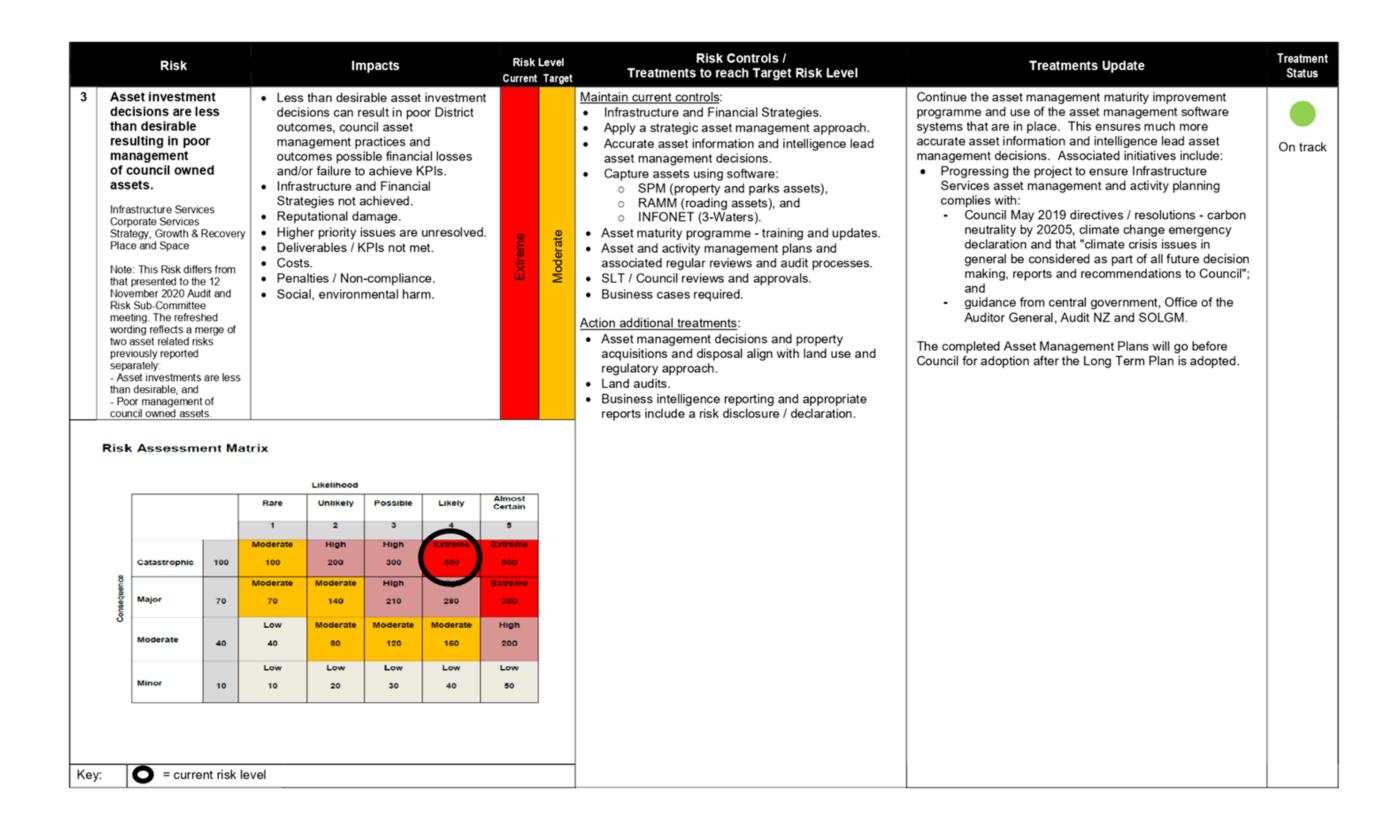
- 1. Corporate Risk Summary \downarrow
- 2. Risk Matrix J

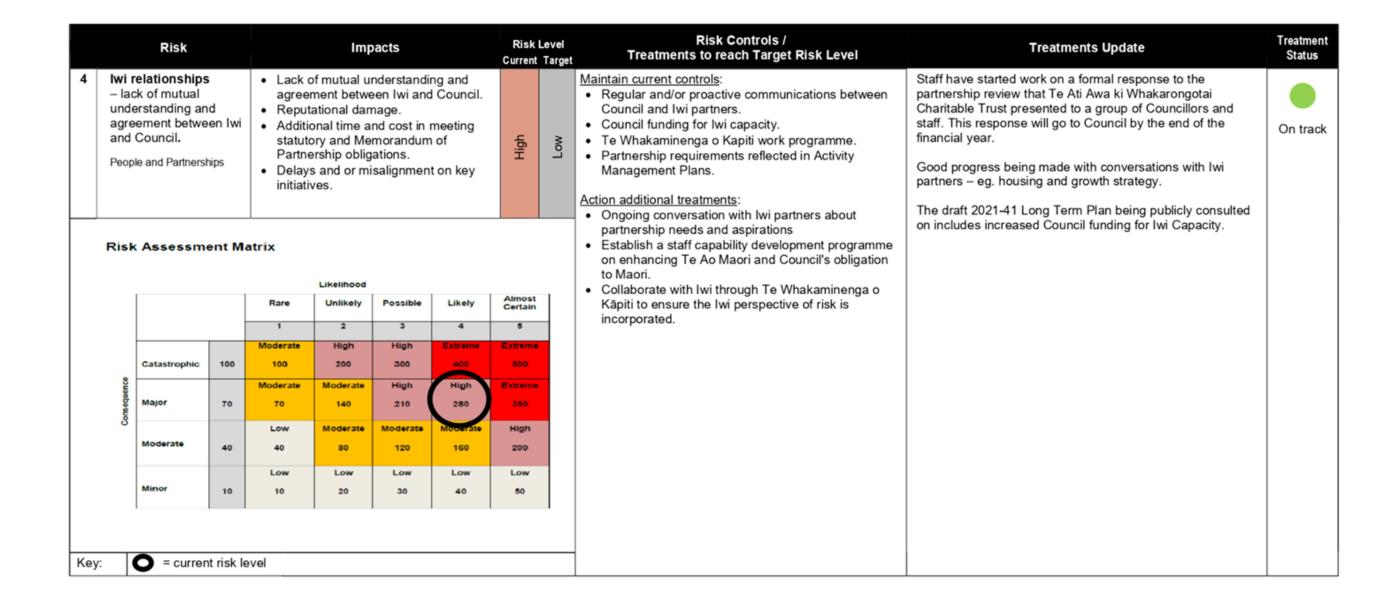
Item 8.4 Page 37

Corporate Risk Summary as at May 2021

		Risk			Impac	ets		Risk Level Tent Targe	Risk Controls / Treatments to reach Target Risk Level	Treatments Update	Treatment Status
Risk	Natural exacerb - global sea leve change; Earthqua SLT	ated d warm I rise and akes.	lue to ing: / climate	abando Early s replace Higher assets Greate Buildin Enviror compli during weathe Increas overflo Econor other li and/or Massix	rties are flooned. stormwater ements. capital contents or costs. o	r asset ests for resi liabilities. on- e to dischar uent extrer ewater ts. opment and local busin	lient rges me	High	 Maintain current controls: 30-year asset management plans include risk and targeted asset upgrades, seawall and other protective measures. Proactive coastal hazards and climate change planning. Stormwater Plan. Ensure future development takes into account expected sea level rise. Wellington Region Climate Change Working Group (Note: the name will change to Wellington Region Climate Change Forum from 1 July 2021). Regional Growth Fund Strategy. Self-insurance fund (\$250k Capex and \$150k Opex per annum). Action additional treatments: Establish sufficient resource to lead strategy development. Ensure that key data that informs regulatory work and the District Plan is updated. Include risk assessments for natural hazards in the District Plan to support land use planning. Ensure appropriate recognition of the risk across key Council strategies and activity management plans and the impact on the business and wider community. Resilience work and community engagement. Establish a community-led coastal adaptation 	Proactively engaging with key community groups such as Low Carbon Kapiti and Kapiti Climate Change Group. Council appointed Former NZ Prime Minister and current Waikanae resident, Rt. Hon James Bolger ONZ PC, as Chair of the Community Assessment Panel (CAP) set up to support Takutai Kāpiti, a community-led coastal adaption project. The CAP's role is to gather information and advice from the community, technical experts and iwi and report back to Council with recommendations on the best options for our response to climate change Progressing development of a project plan for a community led coastal adaptation programme — scheduled to be complete by June 2021. Continued to explore projects necessary to reach targeted CO2 emissions reduction by 2021/22. Continued, using our 3-Waters funding allocation, the work programme to update the flood maps that inform regulatory work and District Plan.	On track
			Rare	Unlikely	Possible	Likely	Almost]	programme.		
			1	2	3	4	5				
	Catastrophic	100	Moderate 100	High 200	High 300	Extreme 400	Extreme 500				
Consequence	Major	70	Moderate 70	Moderate 140	High 210	High 280	Extreme 350				
3	Moderate	40	Low 40	Moderate 80	Moderate 120	Moderate 160	High 200				
	Minor	10	Low 10	Low 20	Low 30	Low 40	Low 50				
Key:	O = cui	rrent ri	sk level								

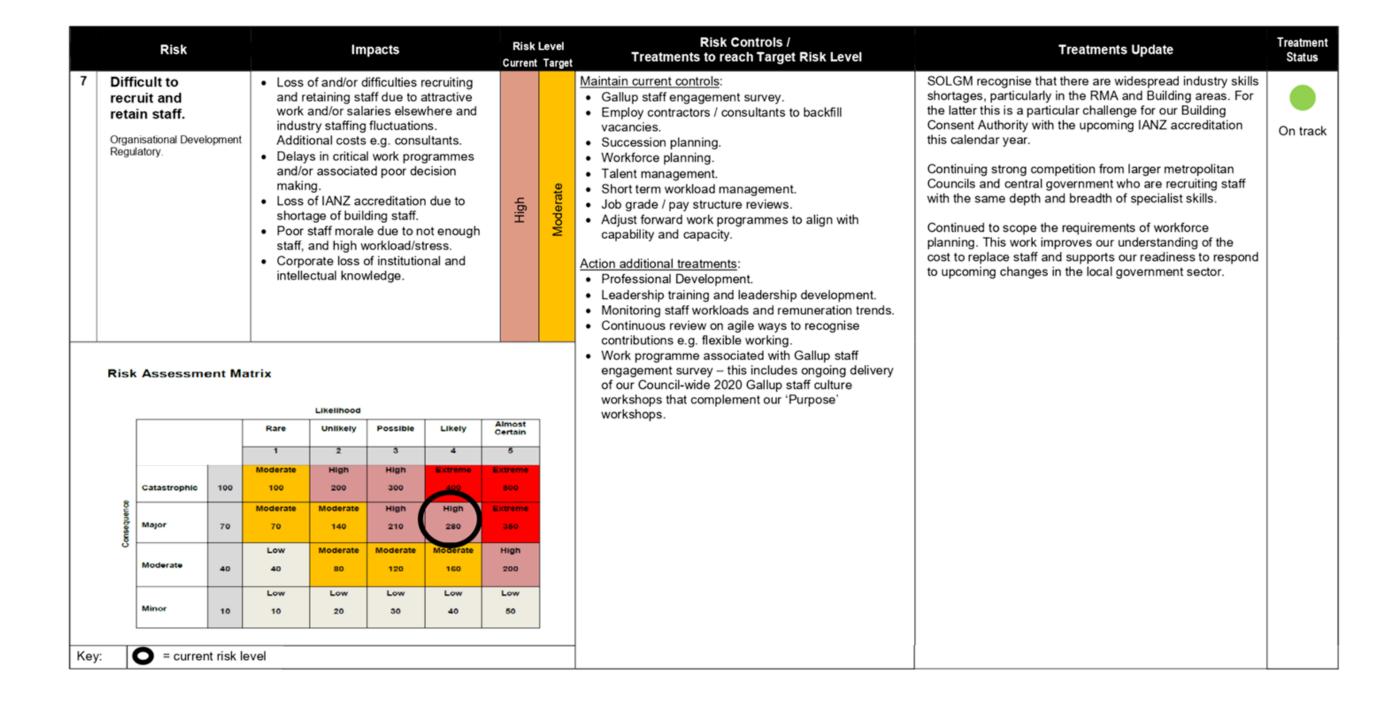


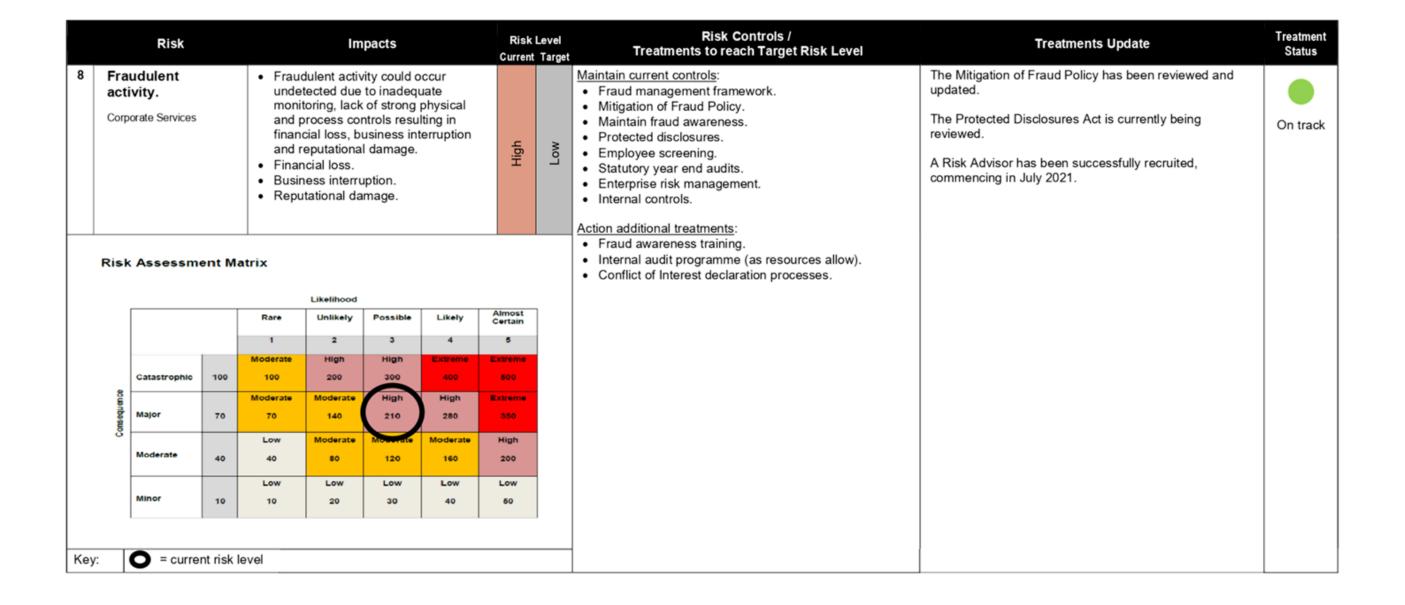


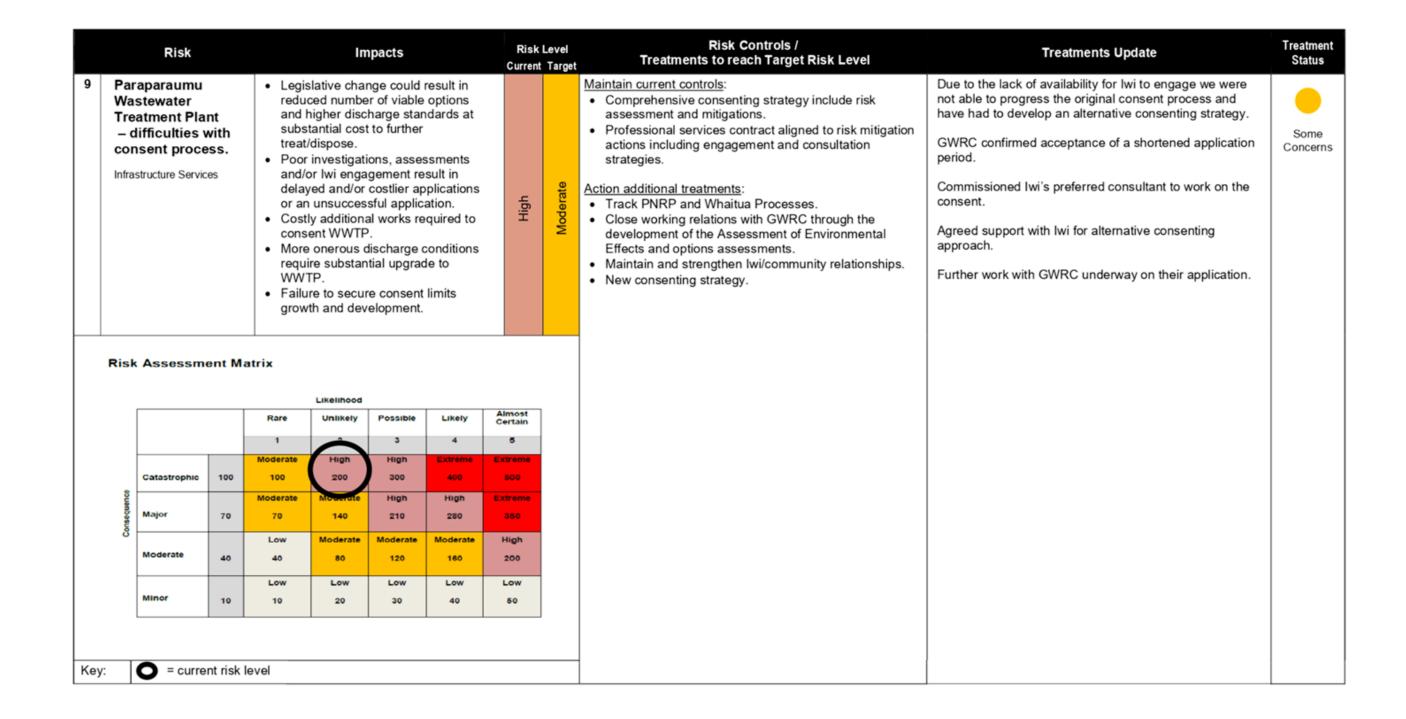


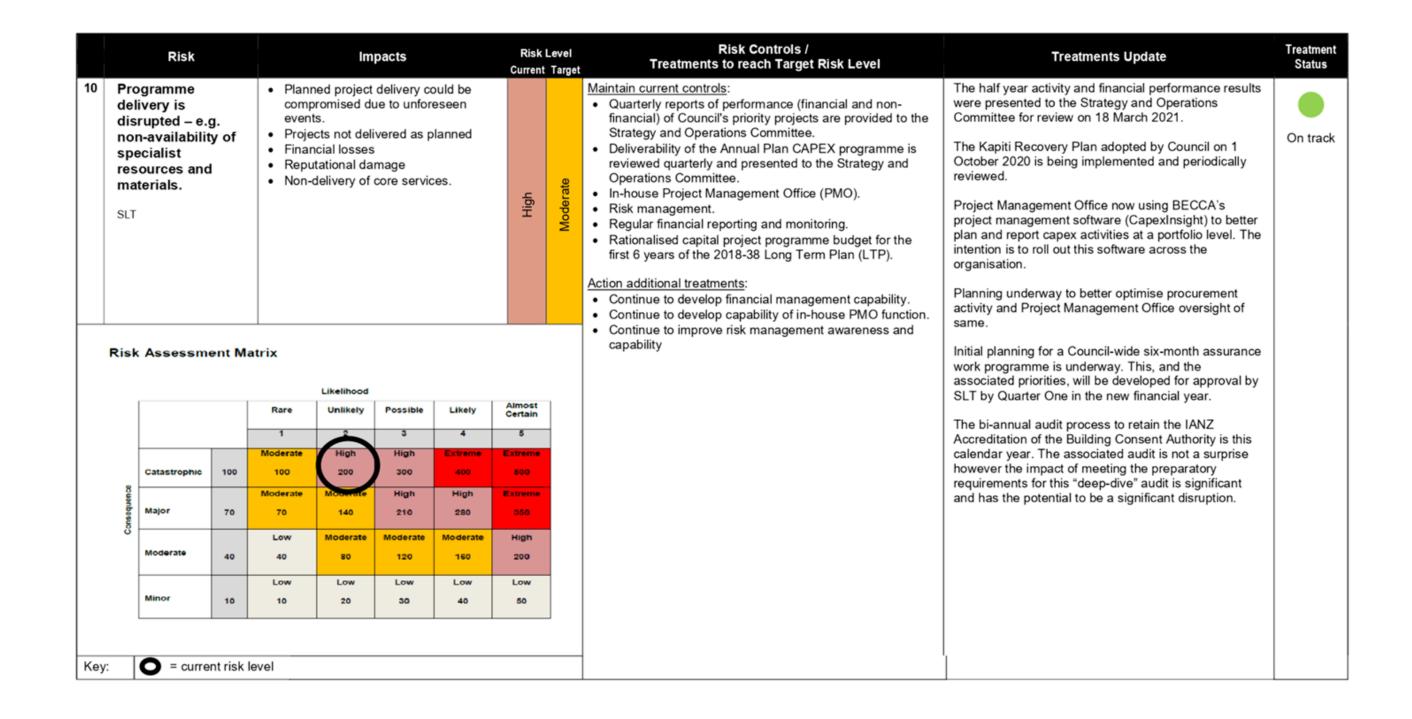
entral and gional vernment po d legislation eates certainty.	licy	opport Gover Finance Gover Delays Redes Priority Resou	tunities bo mment pol cial impact mment inte s in project sign.		t by new egislation.			Maintain current controls: Monitor policy / legislative announcements. Prepare submissions to advocate on behalf of the community.	We are actively monitoring and following Central Government policy / legislative announcements. At present there are a range of policy reforms that are likely to affect traditional Council roles and functions.	
		effects	urcing. tisfaction. (s on stakel tainty for d	Council bla holders sud evelopmer	ch as e.g.	High	Moderate	Clear communication across the organisation. Action additional treatments: Advocacy to be presented and approved by Council and/or Committee. Form and strengthen good relationships, and actively collaborate, with Central and Regional Government to influence decisions.	Earthquake-prone Buildings: MBIE changed their methodology guidance to establish whether a building or part of a building was likely to be earthquake-prone part way through the process of Council identifying potentially earthquake prone buildings. The 3-Waters Reforms: Refer to Risk 6 below for further discussion. Review into the Future for Local Government: This	On track
sk Assøssme	ent Ma	atrix	Likelihood						government and how councils can maintain and improve the wellbeing the communities they serve. Resource Management Act (RMA) 1991 reform: The RMA	
		Rare	Unlikely	Possible	Likely	Almost Certain	7		parliamentary term.	
		1	2	3	4	5				
		Moderate	High	High	Extreme	Extreme			stronger national direction and replacing council district	
Catastrophic	100	100	200	300	400	500				
		Moderate	Moderate	High	High	Extreme			and facilitate decision making across the resource	
Major	70				280					
Moderate		Low			Moderate	High			g	
moderate	40	40	80	120	160	200				
		Low	Low	Low	Low	Low				
Minor	10	10	20	30	40	50				
		Catastrophic 100 Major 70 Moderate 40	Catastrophic 100 Moderate Major 70 Moderate Low Moderate 40 Low	Catastrophic 100 100 200 Major 70 Moderate Moderate Moderate Moderate Moderate Moderate Low Moderate Moderate 40 40 80 Low Low	Rare	Rare Unlikely Possible Likely	Rare	Rare	Rare Unlikely Possible Likely Almost Gertain 1 2 3 4 5 Moderate High High Extreme Extreme Catastrophic 100 100 200 300 400 500 Major 70 70 140 210 280 350 Low Moderate Moderate High High Extreme 280 350 Low Moderate Moderate High High 280 350 Low Low Low Low Low Low Low	independent review will look into the future for local government and how councils can maintain and improve the wellbeing the communities they serve. Resource Management Act (RMA) 1991 reform: The RMA will be repealed and replaced with two new laws this parliamentary term. A Natural and Built Environments Act to provide for land use and environmental regulation, his will include stronger national direction and replacing council district plans with a single combined plan for each region. A Strategic Planning Act to set long-term strategic goals and facilitate decision making across the resource management system. This will include long-term regional spatial plans developed at a regional level.

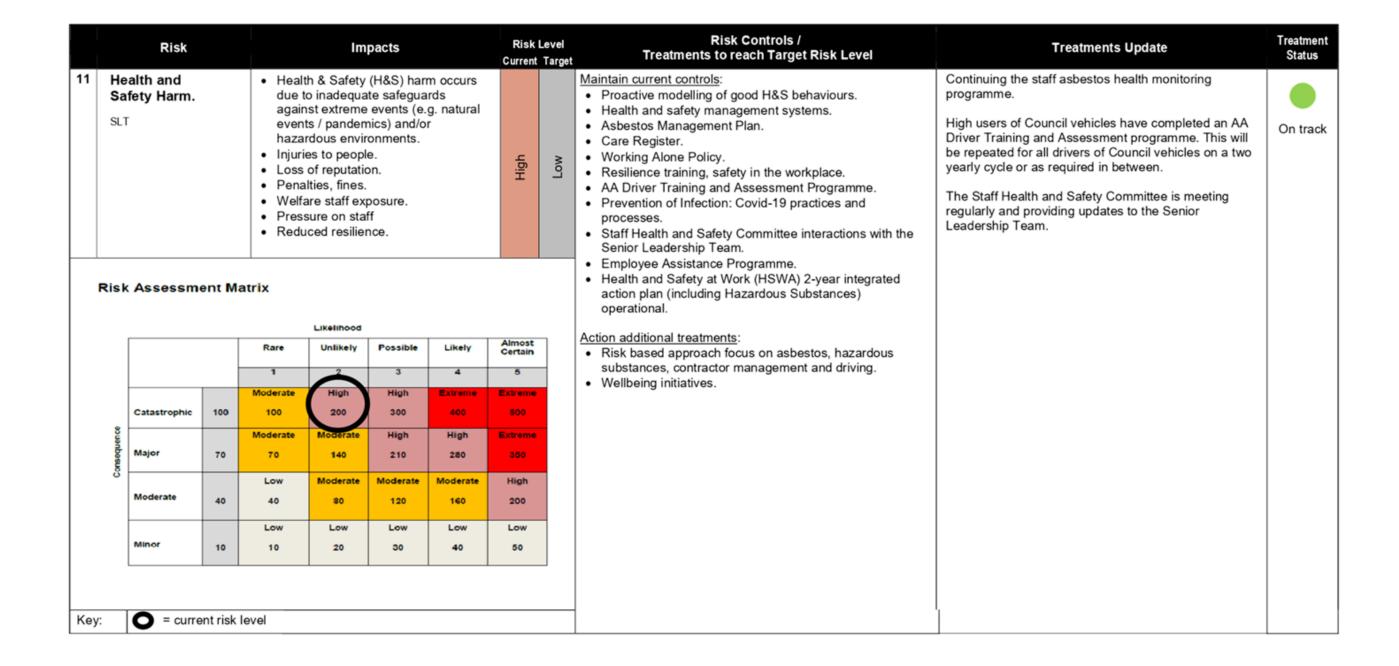
		Risk			Im	pacts		Risk Current		Risk Controls / Treatments to reach Target Risk Level	Treatments Update	Treatment Status
6	char 3-wa (drir was storn crea unce SLT Note: entry. Nover Risk S decisi Gover regula arrang known service	ernment nges to aters servic nking water tewater and mwater)	ew e 12 and to at is e risk.	oppor new le Finan Govel Delay Redes Priorit Resou Dissa effects uncer comm	ty change. urcing. tisfaction. s on stakel tainty for d	ught about is. ervention. ts and prod Council bla holders sue	grammes. amed for ch as e.g.	High	Moderate	Maintain current controls: Monitor policy / legislative announcements. Prepare submissions to advocate on behalf of the community. Clear communication across the organisation. Action additional treatments: Monitor policy and legislative announcements. Advocacy to be presented and approved by Council and/or Committee. Form and strengthen good relationships, and actively collaborate, with Central and Regional Government to influence decisions.	Actions related to the central government report on the 3-waters regulatory review are progressing. The regulator has been established and the first reading of the proposed new regulations has been held. Council is participating in the initial stage of the Government's 3-Waters Services Reforms programme. This means we can explore the local impacts of a proposal to amalgamate water, wastewater and possibly stormwater assets and services. We have received \$3.1million of a \$6.2million grant to further strengthen water, wastewater and stormwater infrastructure and services across the district. A percentage of that funding will be allocated against the delivery of the water safety and resilience works programme. Our current programme is to set up a 3-Waters Transition Plan based on the Government timeframes and commitments which will include drinking water, wastewater and stormwater* (*final confirmation pending). Potential to seek stimulus funding for external assistance.	On track
					Likelihood						The Transition Plan will include a more detailed risk	
				Rare	Unlikely	Possible	Likely	Almost Certain]		assessment that looks at all those parameters.	
				1	2	3	4	5			Further information from Department of Internal Affairs and potential structure to be released in mid-June 2021.	
		and the state of the		Moderate	High	High	Extreme	Extreme			potential structure to be released in mid-surie 2021.	
	8	Catastrophic	100	100 Moderate	200 Moderate	300 High	400 High	500 Extreme				
	usedneu	Major	70	70	140	210	280	350				
	ပိ			Low	Moderate	Moderate	Moderate	High				
		Moderate	40	40	80	120	160	200				
				Low	Low	Low	Low	Low]			
		Minor	10	10	20	30	40	50				
Key:		= curren	t risk l	level								

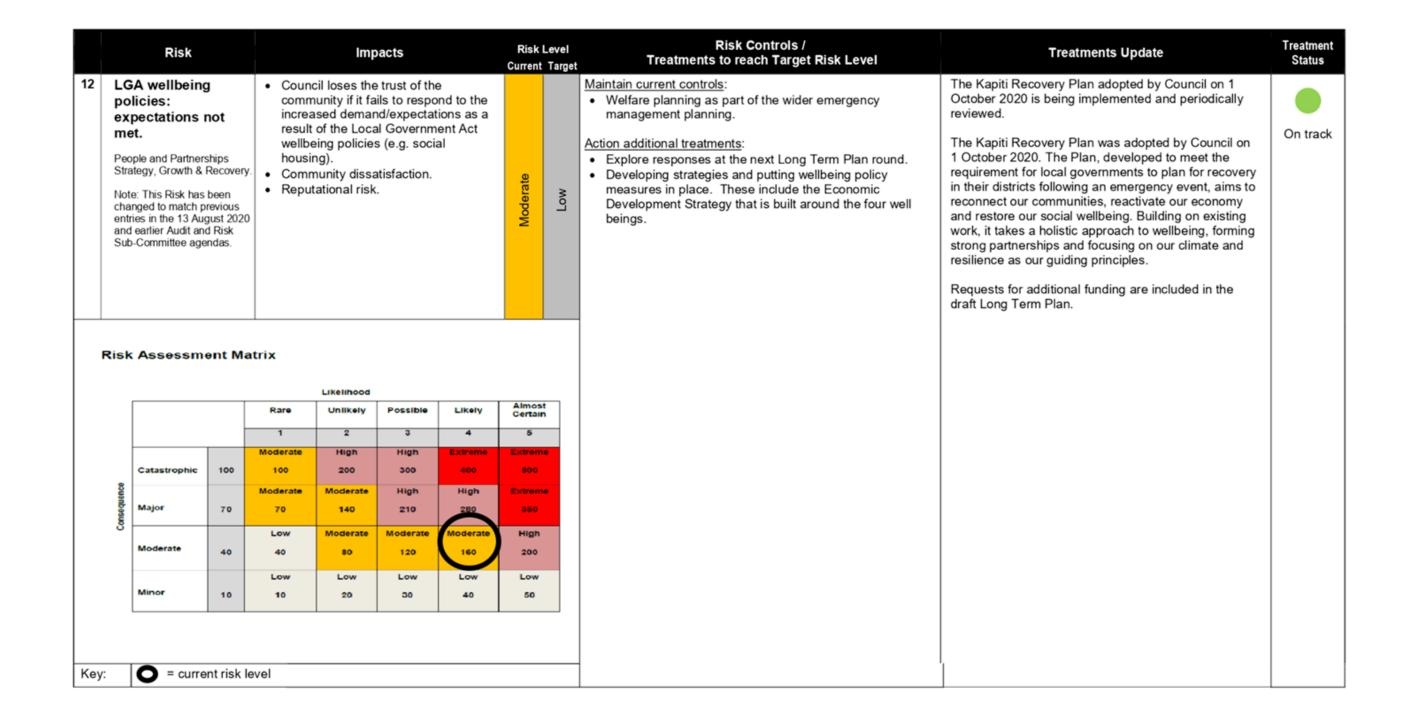


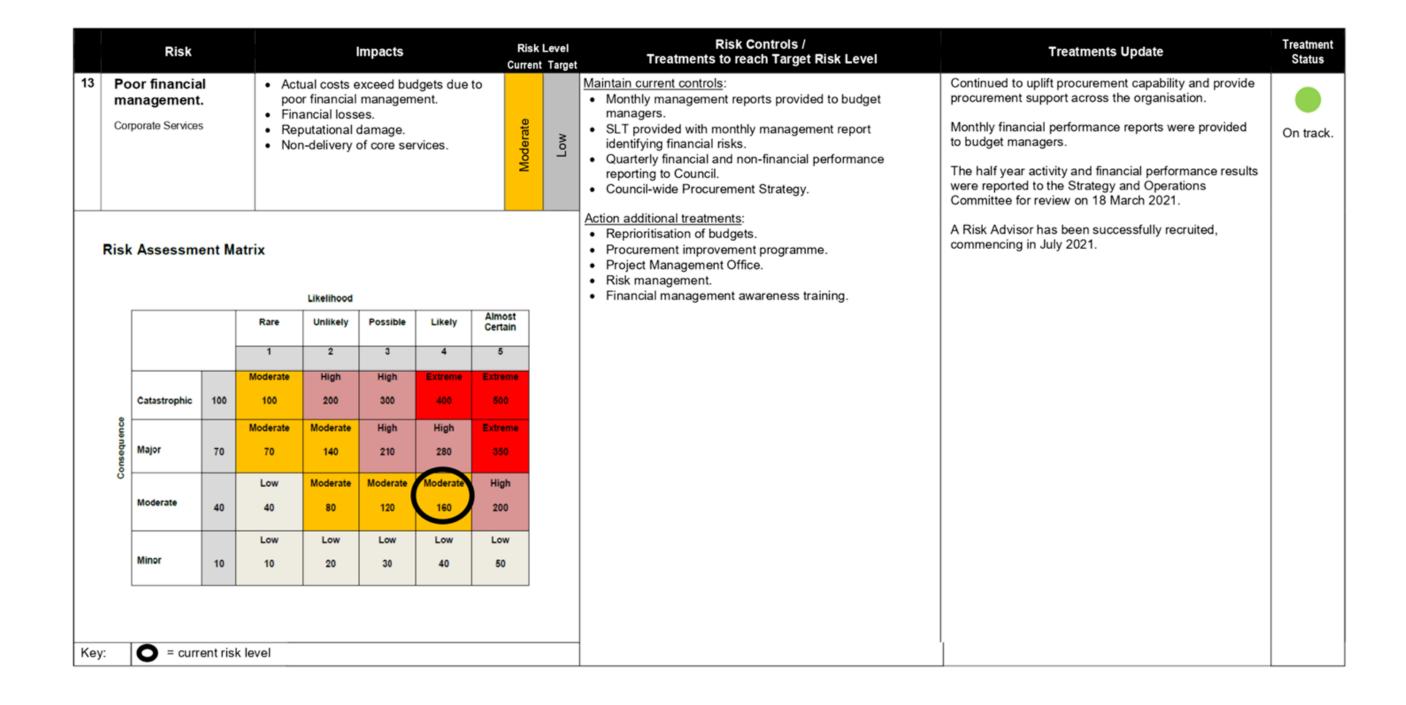


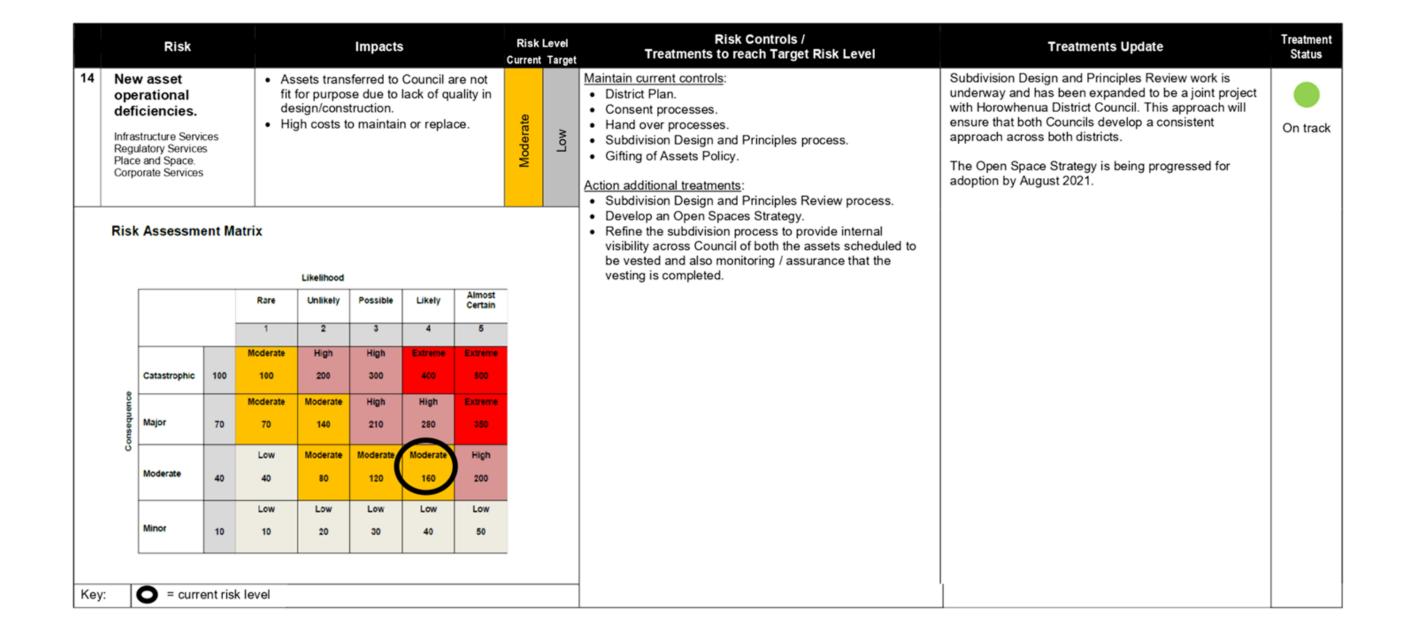


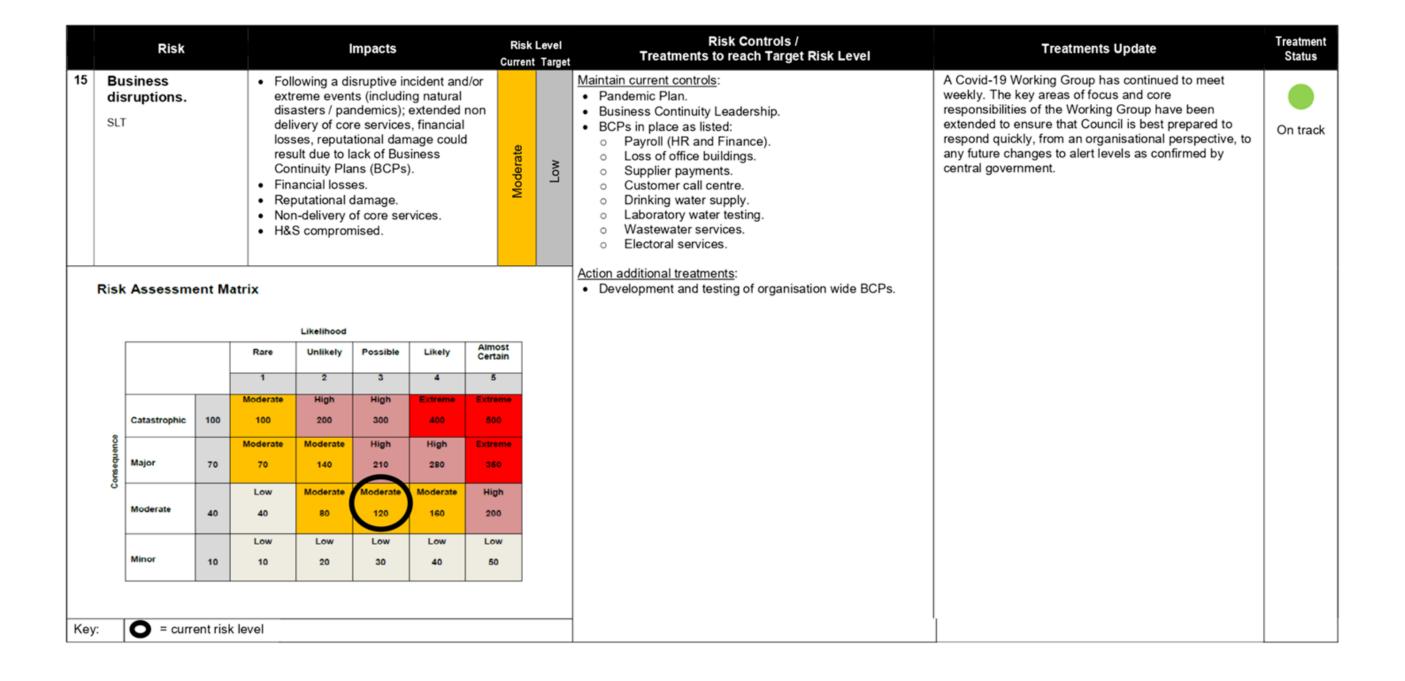


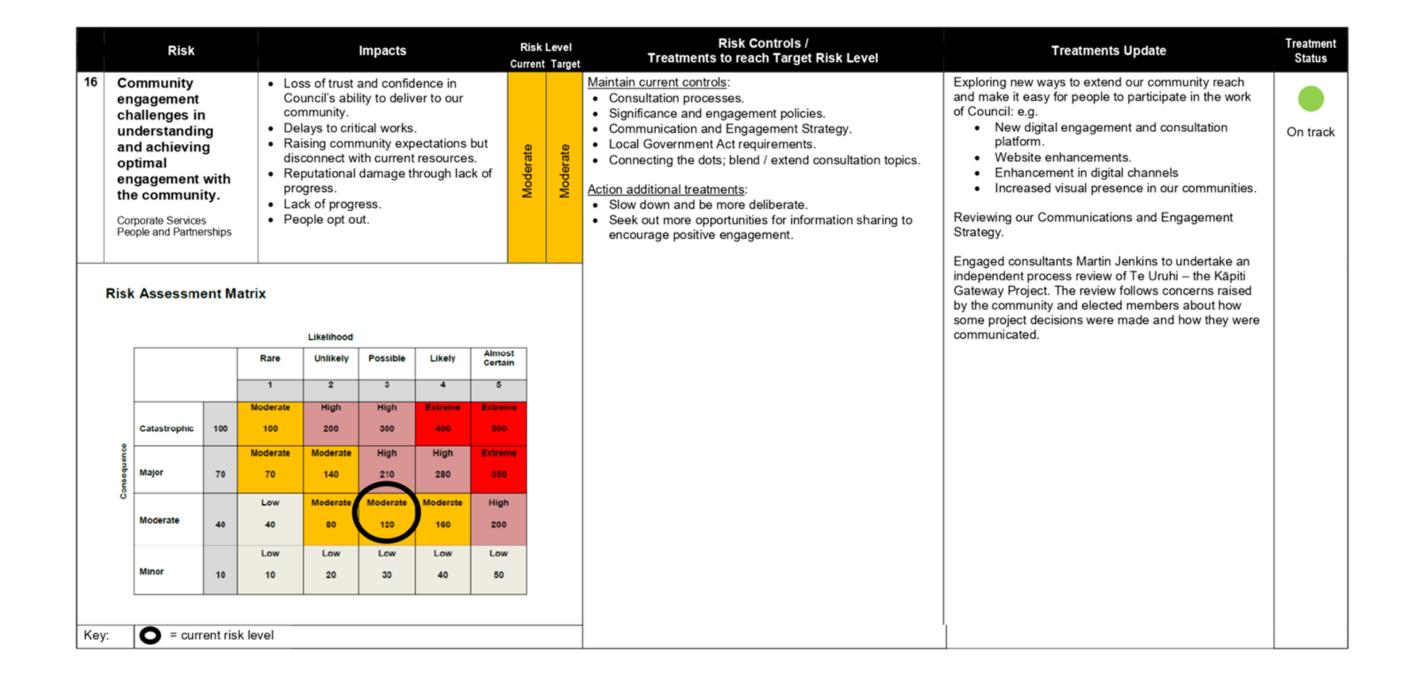


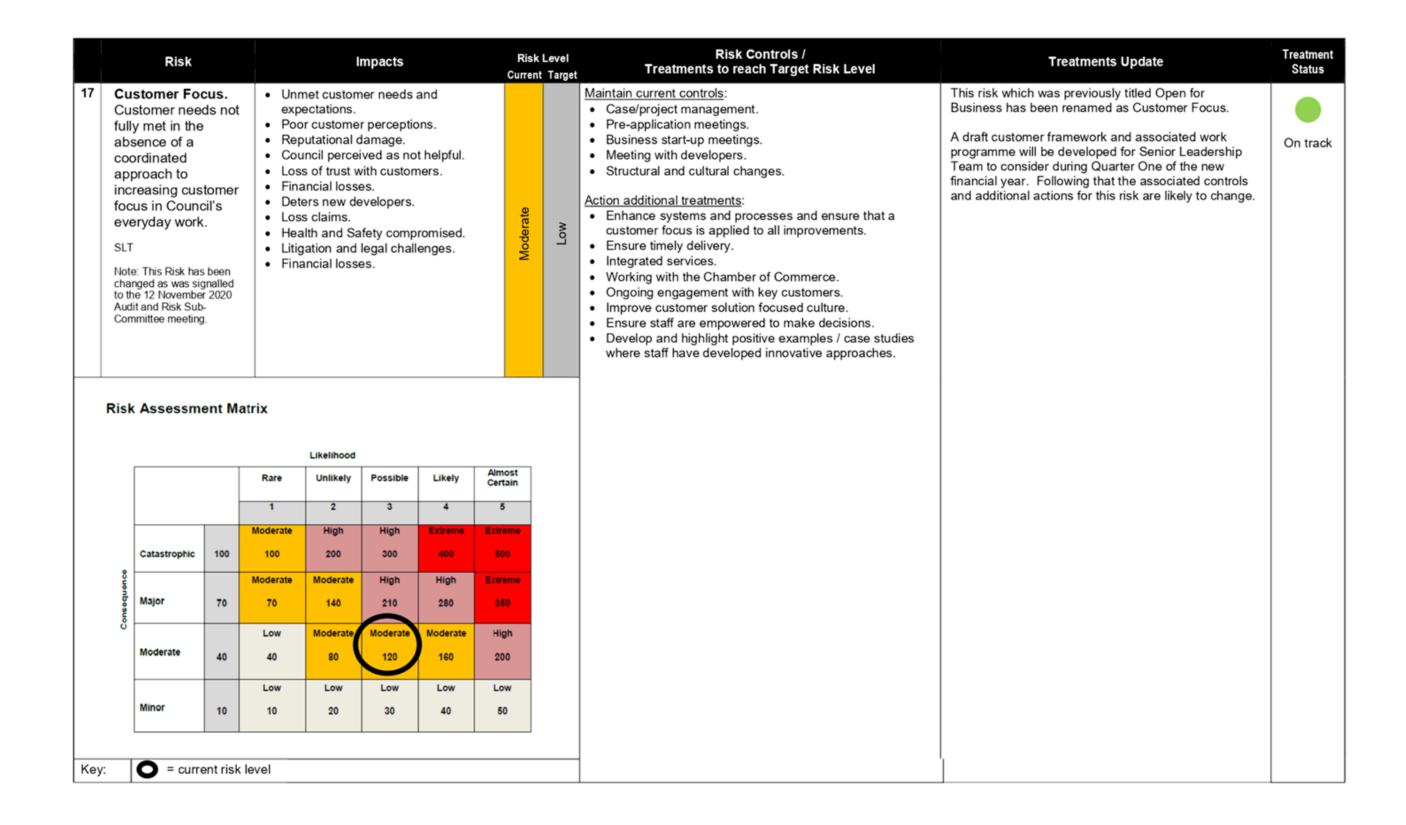


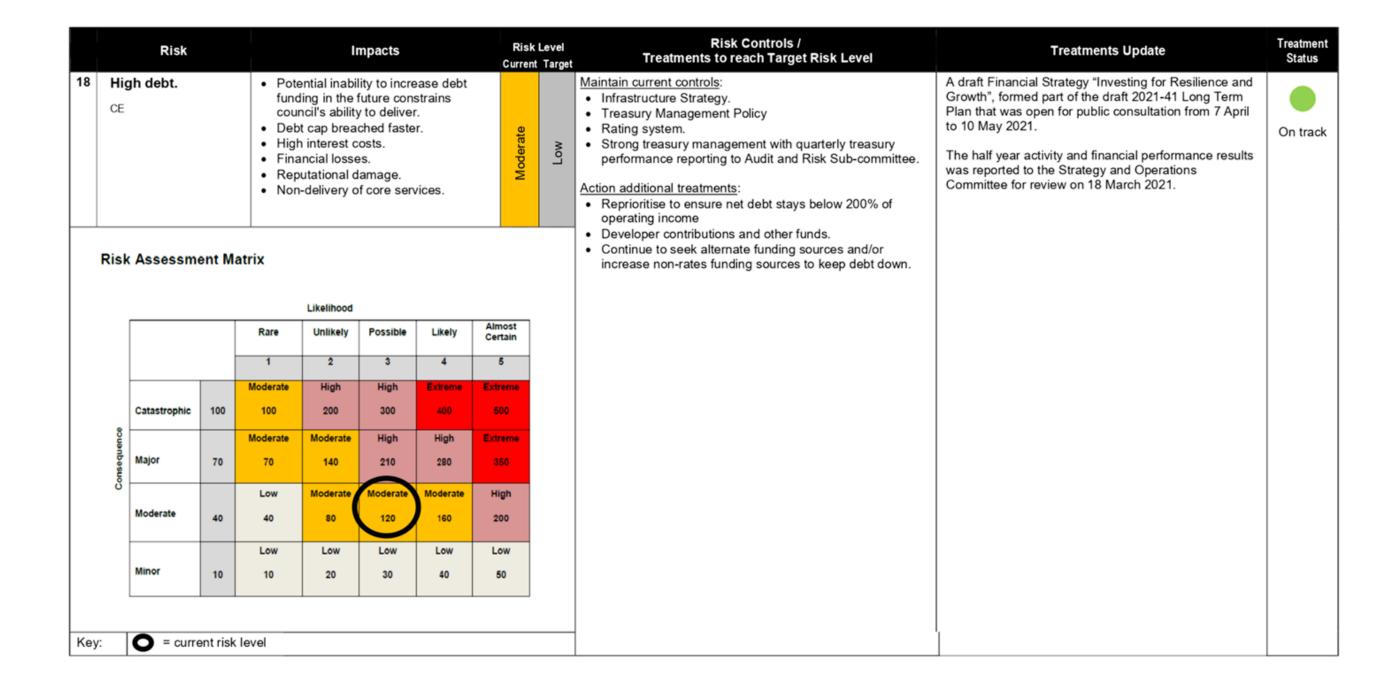


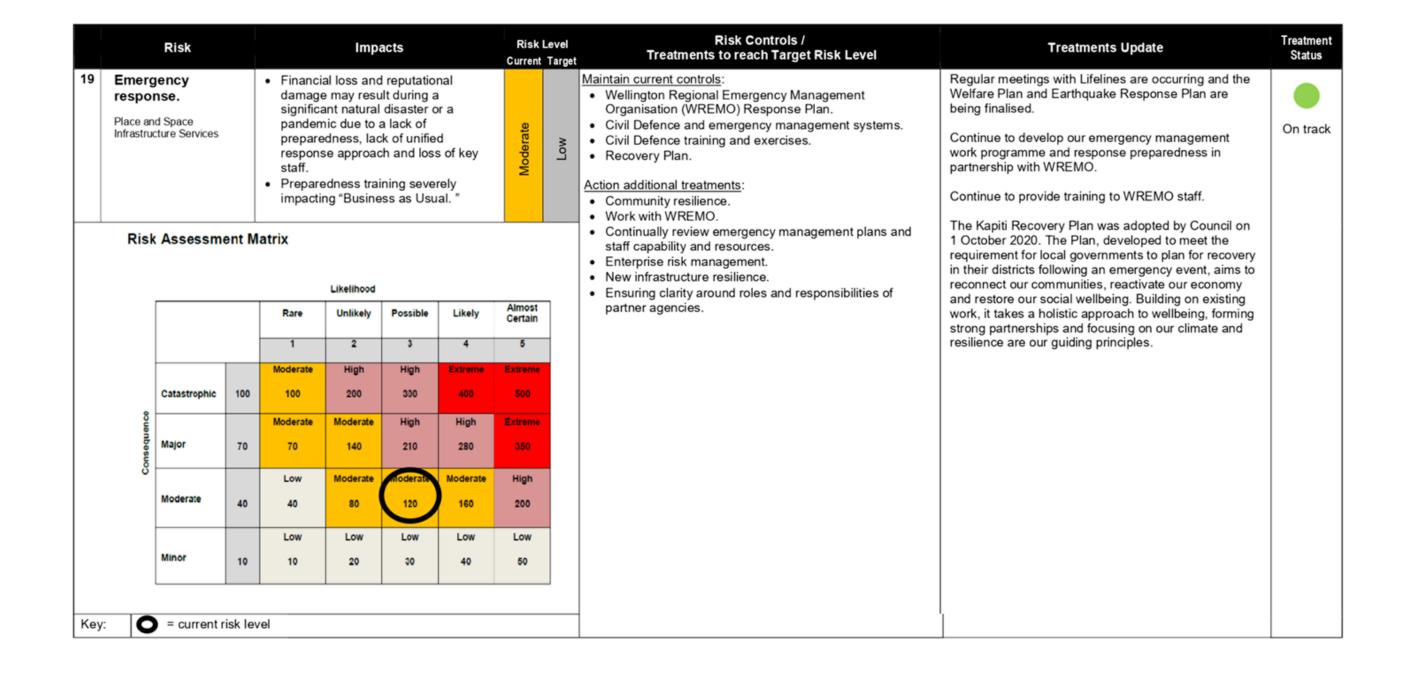


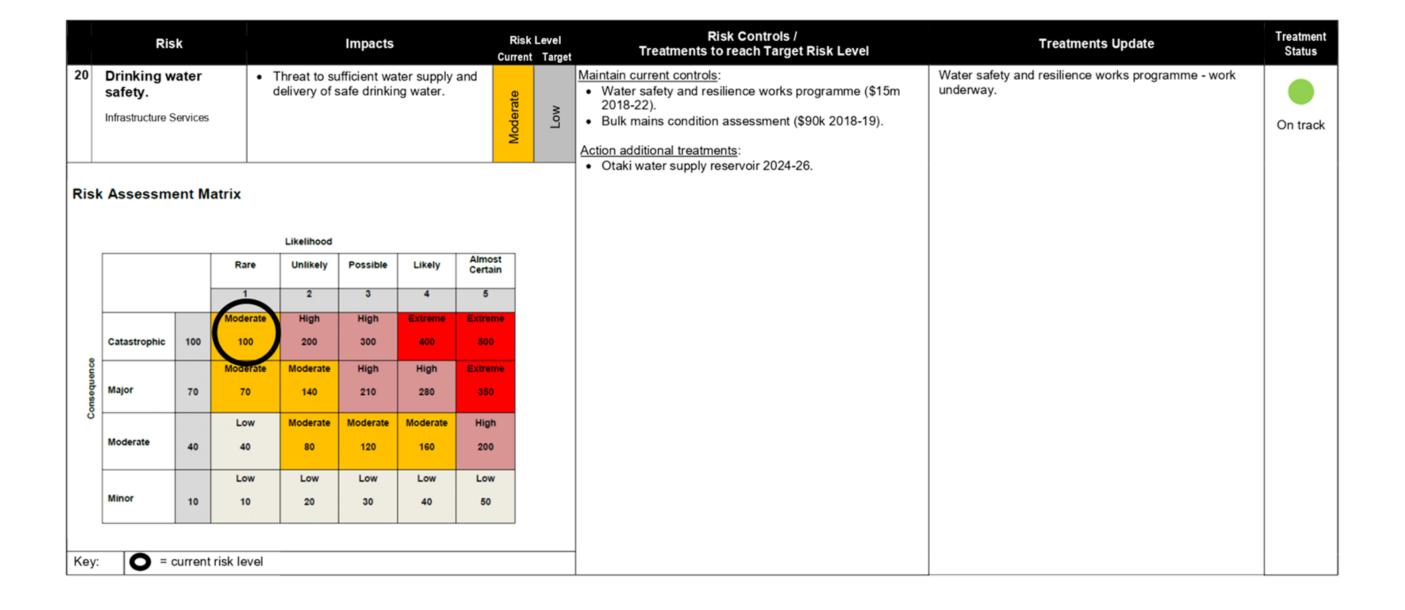












.≏
_
₽
æ
~
_
_
Ф
Ö
\simeq
_
Ф
$\overline{}$
_
ᄝ
ed
sed
sed
nsed
onsed
Conseq
Conseq
c Conseq
k Conseq
sk Conseq
isk Conseq
Risk Conseq

	Rating	Health & Safety	Financial	Fraud	Operational	Reputational
Severe	100	Loss of life	Direct loss or increased cost of over \$1M	\$20k+	Serious loss of critical operational capability for over 4 weeks and serious disruptions to service levels.	Major loss in community confidence. Negative multi- media nation-wide coverage for 2+ weeks. Negative international coverage Significant national political criticism
Major	70	Injury with 3+ months' time off	Direct loss or increased cost of \$100k - \$1M	\$5k - \$20k	Serious loss of critical operational capability for over 2 weeks and major disruption to service levels.	Some loss in community confidence that will take significant time to remedy. Negative multi-media nation-wide coverage for up to 2 weeks Some national political criticism
Moderate	40	Injury with 2 weeks to 3 months' time off	Direct loss or increased cost of \$10k - \$100k	\$1k - \$5k	Serious loss of critical operational capability for up to 2 weeks and disruption to service levels.	Manageable loss in community confidence. Negative multi-media nation-wide coverage for several days. Local adverse media coverage for a week
Minor	10	Injury with less than 2 weeks' time off	Direct loss or increased cost of \$2k - \$10k	\$1k - \$5k	Loss of critical operational capability in some areas and limited disruption to service levels.	Loss of confidence amongst sections of the community. Negative multi-media nation-wide coverage for up to 1 day. Local adverse media coverage for several days

Risk Likelihood

	Rating	Frequency	Probability
Rare	1	The event is only expected to occur in exceptional circumstances, perhaps once every 10 years	< 1%
Unlikely	2	Could occur only very occasionally, perhaps 2-3 times every 10 years	1% - 9%
Possible	3	Might occur from time to time, perhaps, 5 out of every 10 years	10% - 19%
Likely	4	Will probably occur often, perhaps 7 times in every 10 years	20% - 50%
Almost Certain	5	Expected to occur almost every year, perhaps 9 out of 10 years	>50%

Likelihood

		Rare	Unlikely	Possible		Almost
			•	rossible	Likely	Certain
		1	2	3	4	5
		Moderate	High	High	Extreme	Extreme
Severe	100	100	200	300	400	500
		Moderate	Moderate	High	High	Extreme
Major	70	70	140	210	280	350
		Low	Moderate	Moderate	Moderate	High
loderate	40	40	80	120	160	200
		Low	Low	Low	Low	Low
Minor	10	10	20	30	40	50
	Major oderate	Major 70 oderate 40	Severe 100 100 Moderate Major 70 70 Low oderate 40 40 Low	Moderate High Severe 100 100 200 Moderate Moderate Moderate Major 70 70 140 Low Moderate oderate 40 40 80 Low Low Low	Moderate High High Severe 100 100 200 300 Moderate Moderate High Major 70 70 140 210 Low Moderate Moderate oderate 40 40 80 120 Low Low Low Low	Moderate High Extreme Severe 100 200 300 400 Moderate Moderate High High High Major 70 70 140 210 280 Low Moderate Moderate Moderate oderate 40 80 120 160 Low Low Low Low Low

Moderate Risks – can be considered tolerable but only if further risk reduction is impracticable (or if an opportunity may pursue)

Low Risks – are usually tolerable and will not require further treatment (If an opportunity would not pursue) Extreme Risks – considered to be an unacceptable level of risk (or if an opportunity then must pursue)

High Risks - generally considered to be an unacceptable level of risk but of lower priority to the Extreme Risk (or if an opportunity should pursue)

7820929

Item 8.4 - Appendix 2 Page 58

9 CONFIRMATION OF MINUTES

9.1 CONFIRMATION OF MINUTES

Author: Jayne Nock, Executive Secretary to Group Manager Corporate Services

Authoriser: Mark de Haast, Group Manager Corporate Services

RECOMMENDATIONS

That the minutes of the Audit and Risk Subcommittee meeting on 25 February 2021 be accepted as a true and accurate record of the meeting

APPENDICES

1. Draft Minutes of the Audit and Risk Subcommittee 25 February 2021 &

Item 9.1 Page 59

25 FEBRUARY 2021

MINUTES OF KAPITI COAST DISTRICT COUNCIL
AUDIT AND RISK SUB-COMMITTEE MEETING
HELD AT THE COUNCIL CHAMBER, GROUND FLOOR, 175 RIMU ROAD, PARAPARAUMU
ON THURSDAY, 25 FEBRUARY 2021 AT 1.30PM

(RESUMED 10.30AM THURSDAY 11 MARCH 2021)

PRESENT: Bryan Jackson (Chair), Cr Angela Buswell (Deputy Chair), Mayor K Gurunathan,

Cr Gwynn Compton.

IN ATTENDANCE: Cr Martin Halliday, Community Board Member Christine Papps, Wayne Maxwell,

Mark de Haast, Dianne Andrew, Anelise Horn, Ian Georgeson, Javne Nock,

David Borrie, Ahmed Sofe, Tim Power, Grayson Rowse.

APOLOGIES: Deputy Mayor Janet Holborow, Gary Simpson

LEAVE OF There were none

ABSENCE:

1 WELCOME

The Chair welcomed everyone to the meeting

MOTION

The Chair advised that as a Council meeting was about to resume and required the attendance of Elected Members of this meeting, the meeting would be adjourned to a later date.

COMMITTEE RESOLUTION AAR2021/1

Moved: Mr Bryan Jackson

Seconder: Deputy Mayor Janet Holborow

That the Audit and Risk Subcommittee meeting be adjourned until 10.30am Thursday 11 March

2021.

CARRIED

The meeting adjourned at 1:33 pm Thursday 25 February 2021 and resumed at 10.30am on Thursday, 11 March 2021.

2 COUNCIL BLESSING

The Chair read the Council Blessing.

3 APOLOGIES

APOLOGY

COMMITTEE RESOLUTION AAR2021/2

Moved: Cr Angela Buswell Seconder: Cr Gwynn Compton

That apologies received from Cr Janet Holborow and Gary Simpson be accepted.

CARRIED

Page 1

25 FEBRUARY 2021

4 DECLARATIONS OF INTEREST RELATING TO ITEMS ON THE AGENDA

There were none

5 PUBLIC SPEAKING TIME FOR ITEMS RELATING TO THE AGENDA

There were none

6 MEMBERS' BUSINESS

(a) Public Speaking Time Responses

There were none

(b) Leave of Absence

There were none

(c) Matters of an Urgent Nature (advice to be provided to the Chair prior to the commencement of the meeting)

There were none

7 UPDATES

There were none

8 REPORTS

8.1 HEALTH AND SAFETY QUARTERLY REPORT: 1 OCTOBER 2020 - 31 DECEMBER 2020

The report was taken as read and Dianne Andrew, Organisational Development Manager responded to Members' questions and advised:

- the Council's new Group, 'Strategy, Growth and Recovery', had now been added and will be included in the next Health and Safety Quarterly Report;
- health and safety plan dates had now been extended to 3 years (the plan usually covered 2 years), to provide a more realistic account of disruptions the Council had encountered during COVID-19 and also any future interruptions we may come across (next one to cover 2020-2023);
- there will be a few changes to the format of the lead indicators in the next quarterly report i.e. staff training will be more of an overview of what was planned and what was delivered rather than a focus on attendance numbers; and
- Third Party Events primarily relate to activities in libraries and pools and by continuing to
 encourage staff reporting it will show an increase in numbers and this would be a good sign.

Members suggested a more detailed breakdown of 'types of incidents' would be useful.

COMMITTEE RESOLUTION AAR2021/3

Moved: Cr Gwynn Compton Seconder: Cr Angela Buswell

That the Audit and Risk Sub Committee notes the Health and Safety Quarterly Report for the period 1 October 2020 – 31 December 2020 attached as Appendix One to this Report.

CARRIED

Page 2

25 FEBRUARY 2021

8.2 ERNST AND YOUNG AUDIT PLAN FOR THE YEAR ENDED 30 JUNE 2021

David Borrie and Ahmed Sofe, from Ernst and Young, joined the meeting, gave a summary of changes within their report from previous years and responded to Members' questions.

COMMITTEE RESOLUTION AAR2021/4

Moved: Cr Angela Buswell Seconder: Mayor K Gurunathan

That the Audit and Risk Subcommittee receives and notes the Ernst and Young Audit Plan for the

year ended 30 June 2021 attached as Appendix 1 to this report.

CARRIED

8.3 TIMETABLE FOR THE AUDIT PLAN FOR THE YEAR ENDED 30 JUNE 2021

The report was taken as read.

COMMITTEE RESOLUTION AAR2021/5

Moved: Cr Gwynn Compton Seconder: Cr Angela Buswell

That the Audit and Risk Subcommittee notes the timetable for the audit of the Council's Annual

Report and Debenture Trust Deed for the year ended 30 June 2021.

CARRIED

8.4 PROGRESS UPDATE REGARDING AUDIT CONTROL FINDINGS 2019/20

The report was taken as read and Anelise Horn, Manager Financial Accounting responded to Members' questions.

COMMITTEE RESOLUTION AAR2021/6

Moved: Mayor K Gurunathan Seconder: Cr Angela Buswell

That the Audit and Risk Subcommittee notes the progress update in regards to Ernst & Young's Report on Control findings for the year ended 30 June 2020 and that Ernst & Young will re-assess these as part of their audit for the year ended 30 June 2021.

CARRIED

8.5 QUARTERLY TREASURY COMPLIANCE REPORT

The report was taken as read and Ms Horn responded to Members' questions.

COMMITTEE RESOLUTION AAR2021/7

Moved: Cr Gwynn Compton Seconder: Cr Angela Buswell

That the Audit and Risk Subcommittee notes the Council's full compliance with its Treasury Management Policy for the three months ended 31 December 2020.

CARRIED

Page 3

25 FEBRUARY 2021

9 CONFIRMATION OF MINUTES

9.1 CONFIRMATION OF MINUTES

COMMITTEE RESOLUTION AAR2021/8

Moved: Cr Gwynn Compton Seconder: Cr Angela Buswell

That the minutes of the Audit and Risk Subcommittee meeting on 12 November 2020 be

accepted as a true and accurate record of the meeting

CARRIED

10 CONFIRMATION OF PUBLIC EXCLUDED MINUTES

11 PUBLIC EXCLUDED REPORTS

RESOLUTION TO EXCLUDE THE PUBLIC

PUBLIC EXCLUDED RESOLUTION AAR2021/9

Moved: Mayor K Gurunathan Seconder: Cr Gwynn Compton

That, pursuant to Section 48 of the Local Government Official Information and Meetings Act 1987, the public now be excluded from the meeting (with the exception of Ōtaki Community Board Member Christine Papps) for the reasons given below, while the following matters are considered.

The general subject matter of each matter to be considered while the public is excluded, the reason 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 are 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 for the passing of this resolution
10.1 - Confirmation of Public Excluded Minutes	Section 7(2)(a) - the withholding of the information is necessary to protect the privacy of natural persons, including that of deceased natural persons Section 7(2)(b)(ii) - the withholding of the information is necessary to protect information where the making available of the information would be likely unreasonably to prejudice the commercial position of the person who supplied or who is the subject of the information	Section 48(1)(a)(i) - the public conduct of 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 under section 6 or section 7

Page 4

25 FEBRUARY 2021

General subject of each matter to be considered	Reason for passing this resolution in relation to each matter	Ground(s) under section 48 for the passing of this resolution
11.1 - Update on litigation status, statutory compliance issues, investigations	Section 7(2)(a) - the withholding of the information is necessary to protect the privacy of natural persons, including that of deceased natural persons	Section 48(1)(a)(i) - the public conduct of the relevant part of the proceedings of the meeting would be likely to result in the disclosure of information
	Section 7(2)(b)(ii) - the withholding of the information is necessary to protect information where the making available of the information would be likely unreasonably to prejudice the commercial position of the person who supplied or who is the subject of the information	for which good reason for withholding would exist under section 6 or section 7
	Section 7(2)(g) - the withholding of the information is necessary to maintain legal professional privilege	
	Section 7(2)(h) - the withholding of the information is necessary to enable Council to carry out, without prejudice or disadvantage, commercial activities	

COMMITTEE RESOLUTION AAR2021/10

Moved: Mayor K Gurunathan Seconder: Cr Gwynn Compton

That the Audit and Risk Subcommittee moves out of a public excluded meeting.

CARRIED

The Audit and Risk Subcommittee meeting went into a public excluded session at 11.05am.

The Audit and Risk Subcommittee came out of a public excluded session at 11.12am.

Page 5

25 FEBRUARY 2021

The Audit and Risk Subcommittee resolved their approval to release report 'Update On Litigation Status, Statutory Compliance Issues, Investigations' (excluding appendices) and the resolutions from the public excluded session.

COMMITTEE RESOLUTION AAR2021/11

Moved: Cr Angela Buswell Seconder: Cr Gwynn Compton

That the Audit and Risk Subcommittee:

note that there were minor compliance issues associated with discharge into the Mazengarb Stream. The Greater Wellington Regional Council was advised of the breaches;

note the current status of Ombudsman and Privacy Commissioner investigations and litigation;

agree that this report and resolutions only be released from public excluded business; and **agree** that Appendices [A] and [B] of this report, be excluded from public release.

CARRIED

Appendices

1 Update on Litigation Status, Statutory Compliance Issues and Investigations Report

The Audit and Risk Subcommittee meeting closed at 11.12am.

	_
CHAIDDEDCON	
CHAIRPERSON	

Item 9.1 - Appendix 1 Page 65

Page 6

10 CONFIRMATION OF PUBLIC EXCLUDED MINUTES

11 PUBLIC EXCLUDED REPORTS

RESOLUTION TO EXCLUDE THE PUBLIC

PUBLIC EXCLUDED RESOLUTION

That, pursuant to Section 48 of the Local Government Official Information and Meetings Act 1987, the public now be excluded from the meeting for the reasons given below, while the following matters are considered.

The general subject matter of each matter to be considered while the public is excluded, the reason 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 are 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 for the passing of this resolution
10.1 - Confirmation of Public Excluded Minutes	Section 7(2)(a) - the withholding of the information is necessary to protect the privacy of natural persons, including that of deceased natural persons	of the information by to protect the latural persons, at of deceased sons (a)(b)(ii) - the latural persons (b)(b)(ii) - the latural persons (b)(b)(ii) - the latural persons (b)(b)(ii) - the latural person (b)(b)(b)(ii) - the latural person (b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(
	Section 7(2)(b)(ii) - the withholding of the information is necessary to protect information where the making available of the information would be likely unreasonably to prejudice the commercial position of the person who supplied or who is the subject of the information	
	Section 7(2)(g) - the withholding of the information is necessary to maintain legal professional privilege	
	Section 7(2)(h) - the withholding of the information is necessary to enable Council to carry out, without prejudice or disadvantage, commercial activities	
11.1 - Update on litigation status, statutory compliance issues, investigations	Section 7(2)(a) - the withholding of the information is necessary to protect the privacy of natural persons, including that of deceased natural persons	Section 48(1)(a)(i) - the public conduct of 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 under section 6 or section 7
	Section 7(2)(b)(ii) - the withholding of the information is necessary to protect information where the making	

available of the information
would be likely unreasonably
to prejudice the commercial
position of the person who
supplied or who is the subject
of the information

Section 7(2)(g) - the
withholding of the information
is necessary to maintain legal
professional privilege

Section 7(2)(h) - the
withholding of the information
is necessary to enable Council
to carry out, without prejudice

or disadvantage, commercial

activities