Western Metropolitan Regional Council

Managing waste wisely

Agenda

AUDIT, RISK AND IMPROVEMENT COMMITTEE MEETING (AC 01/26)

10 September 2026
Commencing at 5:00 pm

To be held at: 2/317 Churchill Avenue, Subiaco

2/317 Churchill Avenue, Subiaco WA 6008
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1. DECLARATION OF OPENING

2. RECORD OF ATTENDANCE AND APOLOGIES

Committee Member

Mr. D. Ashton	Presiding Member	Independent Member
Mr. P. Zhou	Deputy Presiding Member	Independent Member
Cr. P. Kelly	Member	Town of Claremont
Cr. R. Jones	Member	City of Subiaco
Cr. P. Macintosh	Member	Shire of Peppermint Grove

Staff

S. Devenish	Chief Executive Officer	WMRC
B. McInnes	Chief Operating Officer	WMRC
J. Fenlon	Finance Lead	WMRC
L. Eustance	Strategy and Corporate Lead	WMRC
C. Francis	Finance & Customer Service Officer	WMRC

Apologies

3. CONFIRMATION OF PREVIOUS MINUTES

3.1 CONFIRMATION OF PREVIOUS MINUTES OF THE AUDIT AND RISK MANAGEMENT COMMITTEE MEETING

Responsible Officer: **CEO**

Date: **10 September 2026**

Attachment: **3.1A**

Minutes of the Audit and Risk Management Committee meeting which was held on 6 March 2025 were circulated previously under a separate cover and are to be found at this link.

RECOMMENDATION

3.1.1 The Audit and Risk Management Committee confirm the minutes of the WMRC Audit and Risk Management Committee meeting held on 6 March 2025 as a true and correct record.

4. REPORTS OF OFFICERS

4.1 2025 COMPLIANCE AUDIT RETURN

Responsible Officer: **CEO**

Date: **10 September 2026**

Attachment: **4.1A 2025 Compliance Audit Return**

PURPOSE

This report presents the 2025 Compliance Audit Return for consideration and referral to Council for adoption.

BACKGROUND

Each calendar year, local governments are required to undertake a compliance audit and submit a Council-approved Compliance Audit Return (CAR) to the Department of Local Government.

The Audit, Risk and Improvement Committee is required to review the completed 2025 CAR and, in doing so, consider any recommendations it considers appropriate in relation to the return. The Council must then consider both the CAR and any recommendations made by the Committee.

Following its consideration of the Committee's recommendations, the Council must determine whether any matters raised require further action and either adopt the CAR as presented or adopt it subject to amendments.

Ordinarily, the CAR must be submitted by 31 March each year. However, the Local Government Inspector extended the submission deadline for the 2025 return to 30 September 2026, in recognition of changes to the statutory requirements subject to compliance auditing.

The 2025 CAR comprises questions relating to the prescribed statutory requirements set out in Regulation 13 of the *Local Government (Audit) Regulations 1996*. The return covers the period from 1 January to 31 December 2025.

DETAILS

The proposed return is included at Attachment 4.1A. The on-line return pro-forma requires statements of compliance or otherwise in relation to obligations set out in Acts and Regulations as follows:

- *Local Government Act 1995*
- *Administration Regulations 1996*
- *Audit Regulations 1996*
- **Constitution Regulations 1998*
- **Elections Regulations 1997*
- *Financial Management Regulations 1996*
- *Functions and General Regulations 1996*

It should be noted that as a regional Council, provisions of those regulations with asterisks do not apply.

When considering the CAR, attention is drawn to the following points:

> *Local Government Act 1995* – s5.88 – Register of Financial Interests
> The return records compliance with the requirements on the basis of the established practice of recording interests within meeting minutes. It is noted there were no financial interests in the reporting period.
>
> *Local Government (Administration) Regulations 1996* – r19DA
> The regulation requires the plan to be reviewed each year. While the review was commenced in 2025, the actual adoption of an amended plan did not occur until May 2026.

Noting the above clarifications, the return submits all applicable requirements have been met.

RISK MANAGEMENT

The CAR is a self-assessment that aids in managing the following risks as set out in the WMRC Risk Register:

Governance;
- SG5 – failure to fulfill duty
- OG4 – compliance with regulations
- OG6 – compliance risk

Financial;
- OF5 – fraud and corruption

Reputational;
- SR2 – perception of poor executive leadership
- OR8 – public criticism

COMMUNICATION AND CONSULTATION

Nil

REPORT IMPLICATIONS

Legislation and Policy Alignment

Local Government (Audit) Regulation 14 and 15 requires each Local Government to conduct a Compliance Audit Return for the previous calendar year and to submit it to the DLGSC by 31 March of that year unless extension is otherwise provided.

Business and Strategic Alignment

Compliance with statutory requirements supports theme 6 of the Council Plan 2026 as follows:

> *Maintain a capable, adaptable and resilient organisation that can sustainably deliver services, manage risk and support long-term strategic objectives.*

Financial and Resource Implications

Nil

COMMENTS

The CAR return is recommended for adoption and forwarding to the Department of Creative Industries, Tourism and Sport.

VOTING REQUIREMENT

Simple majority

RESPONSIBLE OFFICER RECOMMENDATION

4.1.1 That the Audit, Risk and Improvement Committee recommend to Council that the draft Compliance Audit Return 2025 be adopted by Council pursuant to *Local Government (Audit) Regulations 1996* r14(6) and submitted to the Department of Creative Industries, Tourism and Sport by 30 September 2026.

4.2 INTEGRITY FRAMEWORK

Responsible Officer: **CEO**

Date: **10 September 2026**

Attachment: **4.2A WMRC Integrity Framework**

PURPOSE

To present the WMRC Integrity Framework to the Audit, Risk and Improvement Committee as a consolidated statement of the organisation's integrity management arrangements.

BACKGROUND

The WMRC is committed to maintaining high standards of integrity, accountability and ethical conduct in all aspects of its operations.

The Audit, Risk and Improvement Committee has an important role in overseeing governance, risk management, compliance and integrity matters. While WMRC has a range of policies, procedures and statutory obligations that support integrity, these arrangements have not previously been documented in a single framework.

The proposed Integrity Framework has been prepared to provide a consolidated overview of the governance structures, policies, reporting mechanisms, cultural expectations and monitoring activities that collectively support integrity across the organisation.

DETAILS

The Integrity Framework describes the instruments, structures and cultural factors that guide how WMRC practices, manages and accounts for integrity. It also sets out respective roles and responsibilities. The Framework is organised around six key elements:

- Governance and Leadership
- Risk and Audit Oversight
- Integrity Policies
- Reporting and Accountability
- Culture and Capability
- Monitoring and Continuous Improvement

The Framework draws together existing legislative obligations, governance arrangements, policies and operational practices including:

- Codes of Conduct for Council Members, employees, volunteers and contractors;
- conflict of interest management processes;
- risk management systems aligned with AS ISO 31000:2018;
- public interest disclosure and whistleblower protections;
- audit and assurance processes;
- financial and compliance reporting obligations; and
- organisational values and behavioural expectations.

The Framework does not create any new obligations. Rather, it provides a reference document that assists Council Members, Committee Members, employees and stakeholders to understand how integrity is supported and monitored across the organisation.
The Framework will be reviewed periodically to ensure it remains current and reflects any changes to legislation, governance arrangements or organisational practices.

RISK MANAGEMENT

The Integrity Framework supports management of the following risks contained within the WMRC Risk Register:

Governance;
- SG5 – failure to fulfill duty
- OG4 – compliance with regulations
- OG6 – compliance risk

Financial;
- OF5 – fraud and corruption

Reputational;
- SR2 – perception of poor executive leadership
- OR8 – public criticism

The Framework strengthens organisational integrity by clearly documenting controls, responsibilities and assurance mechanisms that mitigate governance, compliance and corruption-related risks

COMMUNICATION AND CONSULTATION

Nil

REPORT IMPLICATIONS

Legislation and Policy Alignment

The Framework supports compliance with relevant provisions of the *Local Government Act 1995*, *Public Interest Disclosure Act 2003*, *Corruption, Crime and Misconduct Act 2003* and associated regulations and policies relating to governance, ethics and accountability.

Business and Strategic Alignment

The Integrity Framework supports Council Plan 2026 theme 6 as follows:

> *Maintain a capable, adaptable and resilient organisation that can sustainably deliver services, manage risk and support long-term strategic objectives.*

Financial and Resource Implications

Nil

COMMENTS

The Integrity Framework provides a clear and accessible summary of the mechanisms through which WMRC promotes ethical behaviour, accountability and transparency. Adoption of the Framework will help strengthen governance oversight and provide a foundation for ongoing integrity monitoring and continuous improvement.

VOTING REQUIREMENT

Simple majority

RESPONSIBLE OFFICER RECOMMENDATION

4.2.1 That the Audit, Risk and Improvement Committee receive the WMRC Integrity Framework attached as Attachment 4.2A.

4.3 RISK MANAGEMENT FRAMEWORK

Responsible Officer: **CEO**

Date: **10 September 2026**

Attachment: **4.3A Council Policy – Risk Management**

4.3B Risk Management Plan

4.3C Corporate Risk Register

PURPOSE

To provide an overview of the WMRC Risk Management Framework and advise of the ongoing review of the Corporate Risk Register.

BACKGROUND

The WMRC has adopted a Risk Management Policy and Risk Management Plan that establish the organisation's approach to identifying, assessing, treating and monitoring risk. The framework is aligned with AS/NZS ISO 31000:2018 and is intended to ensure that risk management is embedded across strategic, operational and project decision-making.

The Risk Management Plan was adopted by Council on 30 January 2025 and provides the structure through which risks are identified, evaluated, managed and reported. The framework is supported by a Corporate Risk Register that records strategic, operational and project risks together with their controls, treatments, ownership and review requirements.

The Risk Management Framework forms a key component of WMRC's corporate governance arrangements and supports compliance with the requirements of the *Local Government (Audit) Regulations 1996* relating to the review of risk management systems and procedures.

DETAILS

Risk Framework

WMRC's Risk Management Framework comprises three interconnected components:

- Risk Management Policy;
- Risk Management Plan; and
- Corporate Risk Register.

The framework applies risk management principles across strategic, operational and project activities and requires risks to be identified, analysed, evaluated, treated, monitored and reviewed on an ongoing basis.

The Risk Management Plan establishes risk categories covering:

- strategic;
- governance;
- commercial and legal;
- financial;
- information technology;

- health and safety;
- operational;
- human resource management; and
- reputational risks.

The current Corporate Risk Register contains strategic and operational risks across each of these categories together with project-specific risk registers for major initiatives currently being undertaken by the organisation. The register identifies risk owners, existing controls, residual risk ratings and actions required to further reduce risk where appropriate.

Examples of strategic risks presently monitored include long-term planning for the Recycling Centre, governance effectiveness, financial sustainability, information security, workforce capability and organisational reputation. Current operational risks include regulatory compliance, procurement, workplace health and safety, operational continuity, cybersecurity and contractor management.

Consistent with Council policy, the organisation maintains a low appetite for risks relating to health and safety, legislative compliance and administration of finances and assets, while recognising that a higher risk appetite may be acceptable where innovation and strategic opportunities provide commensurate benefits.

Committee Oversight and Next Steps

The Risk Management Policy identifies the Audit, Risk and Improvement Committee as having an important oversight role in relation to the effectiveness and appropriateness of the organisation's systems and procedures for risk management, internal control and legislative compliance. Strategic risks are intended to be periodically reviewed through the Committee.

Since adoption of the Risk Management Plan, several significant organisational initiatives have progressed, including major Recycling Centre renewal activities, infrastructure projects, information technology improvements and governance reforms. As a result, management is currently undertaking a review and refresh of the Corporate Risk Register to ensure it remains contemporary, accurately reflects the organisation's current operating environment and appropriately captures emerging strategic and operational risks.

A revised Corporate Risk Register will be presented to the Audit, Risk and Improvement Committee at coming meetings for detailed review and discussion. This will provide the Committee with an opportunity to consider risk ratings, control effectiveness, risk ownership and any proposed changes to the organisation's risk profile.

RISK MANAGEMENT

This report relates directly to the management of organisational risk and supports the governance objectives established within the WMRC Risk Management Framework. Effective risk management assists the organisation to achieve its strategic objectives, maintain regulatory compliance, protect financial sustainability and safeguard organisational reputation.

The Framework strengthens organisational integrity by clearly documenting controls, responsibilities and assurance mechanisms that mitigate governance, compliance and corruption-related risks

COMMUNICATION AND CONSULTATION

Nil

REPORT IMPLICATIONS

Legislation and Policy Alignment

The report supports compliance with:

- *Local Government Act 1995*;
- *Local Government (Audit) Regulations 1996*; and
- WMRC Risk Management Policy.

Business and Strategic Alignment

The Integrity Framework supports Council Plan 2026 theme 6 as follows:

> *Maintain a capable, adaptable and resilient organisation that can sustainably deliver services, manage risk and support long-term strategic objectives.*

Financial and Resource Implications

Nil. Existing resources are being utilised to maintain and review the Risk Management Framework and Corporate Risk Register

COMMENTS

The WMRC has established a comprehensive risk management framework that aligns with contemporary risk management principles and legislative requirements. The ongoing review of the Corporate Risk Register provides an opportunity to ensure the organisation's risk profile remains current and continues to support informed decision-making and effective governance oversight.

VOTING REQUIREMENT

Simple majority

RESPONSIBLE OFFICER RECOMMENDATION

4.3.1 That the Audit, Risk and Improvement Committee receive the report on the WMRC Risk Management Framework; and note that an updated Corporate Risk Register will be presented to the Committee for progressive review in future meetings.

4.4 COMPLIANCE MANAGEMENT FRAMEWORK

Responsible Officer: **CEO**

Date: **10 September 2026**

Attachment: **Nil**

PURPOSE

To inform the Audit, Risk and Improvement Committee of the arrangements in place to manage statutory and regulatory compliance across the organisation.

BACKGROUND

Compliance with legislative and regulatory obligations is a fundamental component of good governance and an important element of the organisation's risk management and integrity frameworks. Effective compliance management assists WMRC to meet its statutory obligations, maintain public confidence and reduce exposure to governance, financial and reputational risks.

To support compliance activities, WMRC maintains a comprehensive Compliance Calendar that identifies key statutory, regulatory and governance obligations applicable to the organisation and schedules actions throughout the year. The calendar is based on a template prepared by the Western Australian Local Government Association (WALGA).

DETAILS

Compliance Calendar

The Compliance Calendar operates as a practical management tool that assists officers to identify, monitor and fulfil compliance obligations arising from legislation, regulations, policies and recognised governance practices.

The calendar allocates responsibilities to relevant officers and captures the timing and frequency of compliance activities, including monthly, quarterly, annual and periodic obligations. It also provides a mechanism for recording completion of compliance actions and identifying any corrective actions required where compliance issues arise.

The calendar incorporates obligations arising from a broad range of legislation and governance requirements, including:

- financial management and reporting;
- annual budget preparation and adoption;
- annual financial audit processes;
- compliance audit returns;
- risk management and internal control reviews;
- disclosures of interests and returns;
- public interest disclosure requirements;
- records management obligations;
- freedom of information requirements;
- publication of information on the organisation's website;

- procurement and tendering requirements; and
- governance and planning obligations under the Integrated Planning and Reporting Framework.

In addition to legislated obligations, the calendar includes a range of good governance and internal assurance activities such as internal audits, policy reviews, register reviews and compliance monitoring activities.

The Compliance Calendar is reviewed and updated periodically to reflect legislative amendments, changing organisational responsibilities and emerging compliance requirements. Progress against the calendar is monitored by the Leadership Group as part of normal business operations at monthly meetings.

Committee Oversight and Next Steps

The Audit, Risk and Improvement Committee has a key oversight role in relation to legislative compliance and the effectiveness of the systems and procedures established to support compliance management. Regular reports provided to the Committee, including compliance audit returns, relevant policy reviews, risk management reviews and audit reports, provide assurance regarding the effectiveness of these arrangements.

The Compliance Calendar forms one of the operational tools used by management to support this assurance framework by promoting timely completion of compliance obligations and supporting effective monitoring of compliance performance.

RISK MANAGEMENT

The Compliance Framework supports management of the following risks contained within the WMRC Risk Register:

Governance;
- SG5 – failure to fulfill duty
- OG4 – compliance with regulations
- OG6 – compliance risk

Financial;
- OF5 – fraud and corruption

Reputational;
- SR2 – perception of poor executive leadership
- OR8 – public criticism

The calendar provides a structured mechanism for identifying and managing statutory compliance obligations and reducing the likelihood of inadvertent non-compliance

COMMUNICATION AND CONSULTATION

The Compliance Calendar is maintained by management and incorporates guidance from relevant legislation, government agencies and local government sector resources. Responsibility for individual compliance tasks is allocated to officers according to their functional responsibilities.

REPORT IMPLICATIONS

Legislation and Policy Alignment

The Compliance Calendar supports compliance with obligations arising under the *Local Government Act 1995*, associated regulations and other legislation applicable to the operations of WMRC.

Business and Strategic Alignment

The Integrity Framework supports Council Plan 2026 theme 6 as follows:

> *Maintain a capable, adaptable and resilient organisation that can sustainably deliver services, manage risk and support long-term strategic objectives.*

Financial and Resource Implications

Nil.

COMMENTS

WMRC has implemented a structured and proactive approach to compliance management through the use of a comprehensive Compliance Calendar. The calendar provides a practical mechanism for coordinating compliance activities, assigning accountability and monitoring performance across a broad range of statutory and governance obligations. The calendar supports the organisation's commitment to sound governance, transparency and continuous improvement.

VOTING REQUIREMENT

Simple majority

RESPONSIBLE OFFICER RECOMMENDATION

4.4.1 That the Audit, Risk and Improvement Committee receive the report on the WMRC compliance management arrangements and note the use of a Compliance Calendar to support the organisation’s legislative and governance obligations.

5. CONFIDENTIAL REPORTS

6. GENERAL BUSINESS

7. CLOSURE OF MEETING

8. NEXT MEETING

To be determined.

2025 Compliance Audit Return

Local Government Authority: The Western Metropolitan Regional Council

Local Government Act 1995

s. 2.29

Has every person elected or appointed to a mayor, president, deputy, or councillor role made the required declaration in the prescribed form before a prescribed person, prior to acting in the office?

Response: Yes

Comments: Declarations made in each instance prior to acting in office.

s. 3.16

Has the local government reviewed local laws, which have not been reviewed in the previous 8 years, to ensure compliance with Schedule 9.3, Clause 65?

Response: N/A

Comments: The WMRC has one local law being the Local Law Standing Orders. This was published in the Government Gazette on 18 October 2019, being less than 8 years prior.

s.3.57

Subject to Local Government (Functions and General) Regulations 1996, regulation 11(2), did the local government invite tenders for all contracts for the supply of goods or services where the consideration under the contract was, or was expected to be, worth more than the consideration stated in regulation 11(1) of the Regulations?

Response: Yes

s. 3.58(3)

Where the local government disposed of property other than by public auction or tender, did it dispose of the property in accordance with section 3.58(3) of the Local Government Act 1995 (unless section 3.58(5) applies)?

Response: N/A

s. 3.58(4)

Where the local government disposed of property under section 3.58(3) of the Local Government Act 1995, did it provide details, as prescribed by section 3.58(4) of the Act, in the required local public notice for each disposal of property?

Response: N/A

s. 3.59(2)(a)

Has the local government prepared a business plan for each major trading undertaking that was not exempt in 2025?

Response: N/A

s. 3.59(2)(b)

Has the local government prepared a business plan for each major land transaction that was not exempt in 2025?

Response: N/A

s. 3.59(2)(c)

Has the local government prepared a business plan before entering into each land transaction that was preparatory to entry into a major land transaction in 2025?

Response: N/A

s. 3.59(4)

Has the local government complied with public notice and publishing requirements for each proposal to commence a major trading undertaking or enter into a major land transaction or a land transaction that is preparatory to a major land transaction for 2024?

Response: N/A

s. 3.59(5)

During 2025, did the council resolve to proceed with each major land transaction or trading undertaking by absolute majority?

Response: N/A

s. 5.16 (1)

Were all delegations to committees resolved by absolute majority?

Response: Yes

Comments: Resolution 10.7.1 of 27 March 2025 refers.

s. 5.16 (2)

Were all delegations to committees in writing?

Response: Yes

s. 5.17

Were all delegations to committees within the limits specified in section 5.17 of the Local Government Act 1995?

Response: Yes

s. 5.18

Were all delegations to committees recorded in a register of delegations?

Response: Yes

s. 5.36(4) and s. 5.37(3)

Were all CEO and/or senior employee vacancies advertised in accordance with Local Government (Administration) Regulations 1996, regulation 18A?

Response: N/A

s. 5.37(2)

Did the CEO inform council of each proposal to employ or dismiss senior employee?

Response: N/A

Where council rejected a CEO's recommendation to employ or dismiss a senior employee, did it inform the CEO of the reasons for doing so?

Response: N/A

s. 5.39B

Has the local government adopted and maintained model standards that incorporate the prescribed model standards within required timeframes (including amendments), ensured adoption by absolute majority, published an up-to-date version on its official website, and avoided including any inconsistent additional provisions?

Response: Yes

s. 5.42

Were all delegations to the CEO resolved by an absolute majority?

Response: Yes

Comments: Resolution 10.7.1 of 27 March 2025 refers.

Were all delegations to the CEO in writing?

Response: Yes

s. 5.43

Did the powers and duties delegated to the CEO exclude those listed in section 5.43 of the Local Government Act 1995?

Response: Yes

s. 5.44(2)

Were all employees delegated authority by the CEO under Section 5.44(1), issued with a written instrument of delegation?

Response: Yes

s. 5.45(1)(b)

Were all decisions by the Council to amend or revoke a delegation made by absolute majority?

Response: N/A

s. 5.46

Has the CEO kept a register of all delegations made under Division 4 of the Act to the CEO and to employees?

Response: Yes

Comments: Item 10.7 of 27 March 2025 records the review.

Were all delegations made under Division 4 of the Act reviewed by the delegator at least once during the 2024/2025 financial year?

Response: Yes

Did all persons exercising a delegated power or duty under the Act keep, on all occasions, a written record in accordance with Local Government (Administration) Regulations 1996, regulation 19?

Response: Yes

s. 5.50

If the local government paid a finishing employee an amount in addition to their entitlement, did the local government follow a policy it had adopted and published on its website outlining the circumstances in relation to payments made to terminated employees?

Response: N/A

If the local government made a payment to a finishing employee that is more than the amount set out in the policy, was local public notice given?

Response: N/A

s. 5.51A

Has the CEO prepared and implemented a code of conduct to be observed by employees of the local government?

Response: Yes

Has the CEO published an up-to-date version of the code of conduct for employees on the local government's website?

Response: Yes

s. 5.67

Where a council member disclosed an interest in a matter and did not have participation approval under sections 5.68 or 5.69 of the Local Government Act 1995, did the council member ensure that they did not remain present to participate in discussion or decision making relating to the matter?

Response: N/A

Comments: A declaration of impartiality only was declared at meeting of 22 May 2025.

s. 5.68(2)

Were all decisions regarding participation approval in relation to Section 5.68(2), including the extent of participation allowed and, where relevant, the information required by the Local Government

(Administration) Regulations 1996 regulation 21A, recorded in the minutes of the relevant council or committee meeting?

Response: N/A

s. 5.69(5)

Were all decisions regarding participation approval in relation to Section 5.69(5), including the extent of participation allowed recorded in the minutes of the relevant council or committee meeting?

Response: N/A

s. 5.70

Where an employee had an interest in any matter in respect of which the employee provided advice or a report directly to council or a committee, did that person disclose the nature and extent of that interest when giving the advice or report?

Response: Yes

s. 5.71B(5) and (7)

Where council applied to the Minister to allow the CEO to provide advice or a report to which a disclosure under section 5.71A(1) of the Local Government Act 1995 relates, did the application include details of the nature of the interest disclosed and any other information required by the Minister for the purposes of the application?

Response: N/A

Was any decision made by the Minister under section 5.71B(6) of the Local Government Act 1995, recorded in the minutes of the council meeting at which the decision was considered?

Response: N/A

s. 5.73

Were disclosures under sections 5.65, 5.70 or 5.71A(3) of the Local Government Act 1995 recorded in the minutes of the meeting at which the disclosures were made?

Response: Yes

Comments: Minutes of 31 July 2025 refer.

s. 5.75

Was a primary return in the prescribed form lodged by all relevant persons within three months of their start day?

Response: Yes

s. 5.76

Was an annual return in the prescribed form lodged by all relevant persons by 31 August 2025?

Response: Yes

s. 5.77

On receipt of a primary or annual return, did the CEO, or the Mayor/President, as the case may be, give written acknowledgment of having received the return?

Response: Yes

s. 5.88

Did the CEO keep a register of financial interests which contained the returns lodged under sections 5.75 and 5.76 of the Local Government Act 1995?

Response: Yes

Comments: Recorded through Council minutes.

Did the CEO keep a register of financial interests which contained a record of disclosures made under sections 5.65, 5.70, 5.71 and 5.71A of the Local Government Act 1995, in the form prescribed in the Local Government (Administration) Regulations 1996, regulation 28?

Response: Yes

Comments: As per method above.

After a person ceased to be a person required to lodge a return under sections 5.75 and 5.76 of the Local Government Act 1995, did the CEO remove from the register all returns relating to that person?

Response: N/A

Have all returns removed from the register in accordance with section 5.88(3) of the Local Government Act 1995 been kept for a period of at least five years after the person who lodged the return(s) ceased to be a person required to lodge a return?

Response: Yes

s. 5.89A

Did the CEO keep a register of gifts which contained a record of disclosures made under sections 5.87A and 5.87B of the Local Government Act 1995, in the form prescribed in the Local Government (Administration) Regulations 1996, regulation 28A?

Response: Yes

Did the CEO publish an up-to-date version of the gift register on the local government's website?

Response: Yes

s. 5.90A

Did the local government prepare, adopt by absolute majority and publish an up-to-date version on the local government's website, a policy dealing with the attendance of council members and the CEO at events?

Response: Yes

s. 5.94

Does the local government have information available for members of the public to inspect, free of charge as prescribed under section 5.94 and Admin Reg 29, except where restricted under this section?

Response: Yes

s. 5.96

Where a person is entitled to inspect information under this Division, can the local government confirm that copies are available and that the price at which it sells copies does not exceed the cost of providing them, (unless prescribed otherwise)?

Response: Yes

s. 5.96A

Did the CEO publish information on the local government's website in accordance with sections 5.96A(1), (2), (3), and (4) of the Local Government Act 1995?

Response: Yes

s. 5.104

Did the local government prepare and adopt, by absolute majority, a code of conduct to be observed by council members, committee members and candidates that incorporates the model code of conduct?

Response: Yes

Did the local government adopt additional requirements in addition to the model code of conduct?

Response: No

Comments: The Code is consistent with the model set out in Regulations.

Has the CEO published an up-to-date version of the code of conduct for council members, committee members and candidates on the local government's website?

Response: Yes

s. 5.128

Did the local government prepare and adopt (by absolute majority) a policy in relation to the continuing professional development of council members?

Response: Yes

s. 7.12A(3), (4) and (5)

Where the local government determined that matters raised in the auditor's report prepared under section 7.9(1) of the Local Government Act 1995 required action to be taken, did the local government ensure that appropriate action was undertaken in respect of those matters?

Response: Yes

Where matters identified as significant were reported in the auditor's report, did the local government prepare a report that stated what action the local government had taken or intended to take with respect to each of those matters?

Response: Yes

Was a copy of the report given to the Minister within three months of the audit report being received by the local government?

Response: Yes

Within 14 days after the local government gave a report to the Minister under section 7.12A(4)(b) of the Local Government Act 1995, did the CEO publish a copy of the report on the local government's official website?

Response: Yes

Local Government (Administration) Regulations 1996

r. 18F

Were the remuneration and other benefits paid to a CEO on appointment the same remuneration and benefits advertised for the position under section 5.36(4) of the Local Government Act 1995?

Response: N/A

r. 19AB

Does the code of conduct contain the requirement that a local government employee (not including the CEO) must not accept a prohibited gift from an associated person?

Response: Yes

r. 19AC

Does the local government's code of conduct include requirements for the recording, storing, disclosure, and use of information relating to gifts accepted by local government employees (excluding the CEO) from associated persons, in accordance with regulatory requirements?

Response: Yes

r. 19AE

Does the local government's code of conduct include requirements addressing employee behaviour in the performance of duties, interactions with others, use and disclosure of information, use of local government resources and finances, the keeping of records, and the reporting and management of suspected breaches and misconduct, in accordance with regulatory requirements?

Response: Yes

r. 19B

Did the local government include in its annual report all information required under section 5.53(2)(g) and (i) and regulation 3A(2), including number of employee's in salary bands over $130,000, remuneration and allowances paid, ordered payments, CEO remuneration, council member meeting attendance, available demographic information about council members, and details of any modifications to the strategic community plan or significant modifications to the corporate business plan?

Response: Yes

r. 19C

Has the local government adopted by absolute majority a strategic community plan?

Response: Yes

Comments: A major review was undertaken during the reporting period, with an amended Plan adopted on 28 May 2026 (resolution 10.3.1 refers). The date below reflects the date of the preceding Plan adoption. The on-line system does not allow entry of the 2026 date.

Adoption date or the date of the most recent review: 30/11/2023

r. 19DA

Has the local government reviewed its corporate business plan in accordance with Admin Regulation 19DA(4)?

Response: No

Comments: A major review was undertaken during the reporting period, with an amended Plan adopted by Council resolution on 28 May 2026 (resolution 10.3.2 refers).

Does the corporate business plan comply with the requirements of Local Government (Administration) Regulations 1996 19DA(2) & (3)?

Response: Yes

r. 22

No response required. This is covered by s5.75.

r. 23

No response required. This is covered by s5.76.

r. 28

No response required. This is covered by s5.88(1).

r. 28A

No response required. This is covered by s5.89A(1).

r. 29

No response required. This is covered by s5.94.

r. 29C

Does the local government publish all prescribed information on its official website— including up-to-date policies, required details of council member and employee returns, council member fees and allowances, and relevant public notices—within the specified timeframes and in accordance with legislative requirements?

Response: Yes

r. 35

Has every local government council member completed and passed the Council Member Essentials course, consisting of the five required modules and delivered by an approved provider, within 12 months of being elected?

Response: N/A

Comments: This requirement is overseen by Member Council administrations.

r. 36

Does the local government appropriately identify and document council members who are exempt from the training requirements under section 5.126(1), including verifying that the member:

- has completed an approved course within the specified 5-year period prior to election, or
- completed the LGASS00002 Elected Member Skill Set before 1 July 2019 within the relevant timeframe, or
- qualifies for the transitional exemption applicable to council members in office at the commencement of the 2019 regulatory amendments?

Response: N/A

Comments: This requirement is overseen by Member Council administrations.

Local Government (Audit) Regulations 1996

r. 10

Was the auditor's report for the financial year ending 30 June 2025 received by the local government within 30 days of completion of the audit?

Response: Yes

r. 17

Did the CEO review the appropriateness and effectiveness of the local government's systems and procedures in relation to risk management, internal control and legislative compliance in accordance with Local Government (Audit) Regulations 1996 regulation 17 within the three financial years prior to 31 December 2025?

Response: Yes

Comments: Resolution 15.2.1 of 21 March 2024, not 2025 as stated below. The on-line field would not accept the 2024 date entry, even though this is a compliant date.

Date of council's resolution to accept the report: 21/03/2025

r. 11FA

Did the CEO provide the Minister a report as to the result of the election within 14 days of the declaration and in the form of Form 20 of the Local Government (Elections) Regulations 1997, modified as necessary?

Response: N/A

r. 13

Were all required oaths, affirmations and declarations under section 2.42 (in relation to Commissioners) made in the correct form (Form 8), before the appropriate authorised person?

Response: N/A

Local Government (Elections) Regulations 1997

r. 30G

Did the CEO establish and maintain an electoral gift register and ensure that all disclosure of gifts forms completed by candidates and donors and received by the CEO were placed on the electoral gift register at the time of receipt by the CEO and in a manner that clearly identifies and distinguishes the forms relating to each candidate in accordance with regulations 30G(1) and 30G(2) of the Local Government (Elections) Regulations 1997?

Response: N/A

Did the CEO remove any disclosure of gifts forms relating to an unsuccessful candidate, or a successful candidate that completed their term of office, from the electoral gift register, and retain those forms separately for a period of at least two years in accordance with regulation 30G(4) of the Local Government (Elections) Regulations 1997?

Response: N/A

Did the CEO publish an up-to-date version of the electoral gift register on the local government's official website in accordance with regulation 30G(5) of the Local Government (Elections) Regulations 1997?

Response: N/A

Local Government (Financial Management) Regulations 1996

r. 5

Has the CEO ensured efficient systems and procedures are established under provisions set out in Financial Management Regulations 5(1)(a) to (g)?

Response: Yes

r. 6

Has the local government ensured that any employee delegated responsibility for day-to-day accounting or financial management operations is not also delegated the responsibility for conducting internal audits, reviewing their own duties, or for managing, directing or supervising someone who carries out these functions?

Response: Yes

r. 7

Did the local government ensure it has regard to the needs of the inhabitants of the district as a whole and not keep separate ward accounts or determine expenditure on the basis of revenue from a ward?

Response: N/A

r. 8

Does the local government maintain separate accounts with a bank or other financial institution for money to be held in the municipal fund, trust fund and for reserve account purposes?

Response: Yes

r. 9

Did the local government keep separate financial records for each trading undertaking and each major land transaction?

Response: N/A

r. 11

Has the local government developed procedures for the authorisation of, and the payment of, accounts in accordance with Local Government (Financial Management) Regulations 11(1), (2) and (3)?

Response: Yes

r. 12

Were payments made from the municipal fund or trust fund made by the CEO under a delegated authority or authorised, in accordance with regulation 13(2), in advance by a council resolution?

Response: Yes

r. 13

Can the local government confirm that, where the CEO has been delegated authority to make payments from the municipal or trust fund, the CEO prepared accurate monthly lists that are presented at the next ordinary council meeting and recorded in the minutes?

- includes the payee's name, payment amount, payment date, and sufficient information to identify each transaction where payments have already been made; or
- includes the payee's name, payment amount, sufficient information to identify each transaction, and the date of the council meeting (to which the list will be presented) for accounts requiring council approval.

Response: Yes

r. 13A

Did the local government prepare a list each month of all payments made using employee-authorised credit, debit or other purchasing cards, and include the payee’s name, the amount of the payment, the date of the payment, sufficient information to identify the payment, and present the list at the next ordinary council meeting (and record in the minutes)?

Response: Yes

r. 19

Has the local government established and documented internal control procedures to enable identification of the nature and location of all investments and any related transactions?

Response: Yes

r. 19C

Has the local government ensured that all investments made under section 6.14(1) comply with statutory restrictions set out in Financial Management Reg. 19C?

Response: Yes

r. 7

No response required. This is covered by s3.59(2).

r. 9

No response required. This is covered by s3.59(2).

r. 10

No response required. This is covered by s3.59(2).

r. 11A

Did the local government comply with its current purchasing policy, adopted under the Local Government (Functions and General) Regulations 1996, regulations 11A(1) and (3) in relation to the supply of goods or services where the consideration under the contract was, or was expected to be, $250,000 or less or worth $250,000 or less?

Response: Yes

r. 11

No response required. This is covered by s3.57.

r. 12

Did the local government consider the implications of Local Government (Functions and General) Regulations 1996, Regulation 12 when deciding to enter into multiple contracts rather than a single contract?

Response: Yes

r. 14(1), (3) and (5)

If the local government sought to vary the information supplied to tenderers, was every reasonable step taken to give each person who sought copies of the tender documents, or each acceptable tenderer notice of the variation?

Response: Yes

r. 15

Did the local government's procedure for receiving and opening tenders comply with the requirements of Local Government (Functions and General) Regulations 1996, Regulation 15 and 16?

Response: Yes

r. 16

No response required. This is covered by r. 15.

r. 17

Did the information recorded in the local government's tender register comply with the requirements of the Local Government (Functions and General) Regulations 1996, Regulation 17 and did the CEO make the tenders register available for public inspection and publish it on the local government's official website?

Response: Yes

r. 18(1) and (4)

Did the local government reject any tenders that were not submitted at the place, and within the time, specified in the invitation to tender?

Response: Yes

Were all tenders that were not rejected assessed by the local government via a written evaluation of the extent to which each tender satisfies the criteria for deciding which tender to accept?

Response: Yes

r. 19

Did the CEO give each tenderer written notice containing particulars of the successful tender or advising that no tender was accepted?

Response: Yes

r. 21

Does the local government’s advertising and expression of interest processes for limiting who can tender comply with the requirements of the Local Government (Functions and General) Regulations 1996, Regulations 21 and 22?

Response: N/A

r. 22

No response required. This is covered by r. 21.

r. 23

Did the local government reject any expressions of interest that were not submitted at the place, and within the time, specified in the notice or that failed to comply with any other requirement specified in the notice?

Response: N/A

Were all expressions of interest that were not rejected under the Local Government (Functions and General) Regulations 1996, Regulation 23(1) & (2) assessed by the local government? Did the CEO list each person as an acceptable tenderer?

Response: N/A

r. 24

Did the CEO give each person who submitted an expression of interest a notice in writing of the outcome in accordance with Local Government (Functions and General) Regulations 1996, Regulation 24?

Response: N/A

r. 24AD(2), (4) and (6)

Did the local government invite applicants for a panel of pre-qualified suppliers via Statewide public notice in accordance with Local Government (Functions & General) Regulations 1996 regulations 24AD(4) and 24AE?

Response: No

Comments: No invitations were extended during the reporting period.

If the local government sought to vary the information supplied to the panel, was every reasonable step taken to give each person who sought detailed information about the proposed panel or each person who submitted an application notice of the variation?

Response: N/A

r. 24AE

No response required. This is covered by r. 24AD(2), (4) and (6).

r. 24AF

No response required. This is covered by r. 24AD(2), (4) and (6).

r. 24AG

Did the information recorded in the local government's tender register about panels of pre-qualified suppliers comply with the requirements of Local Government (Functions and General) Regulations 1996, Regulation 24AG?

Response: N/A

r. 24AH(1) and (3)

Did the local government reject any applications to join a panel of prequalified suppliers that were not submitted at the place, and within the time, specified in the invitation for applications?

Response: N/A

Were all applications that were not rejected assessed by the local government via a written evaluation of the extent to which each application satisfies the criteria for deciding which application to accept?

Response: N/A

r. 24AI

Did the CEO send each applicant written notice advising them of the outcome of their application?

Response: N/A

r. 24E

Where the local government gave regional price preference, did the local government comply with the requirements of Local Government (Functions and General) Regulations 1996, Regulation 24E and 24F?

Response: N/A

r. 24F

No response required. This is covered by r. 24E.

I certify this is a true and accurate copy of the 2025 Compliance Audit Return, as adopted by Council at the meeting of _____ 2026.

CEO	Date
Mayor or President	Date

Suite 2/317 Churchill Avenue, Subiaco WA 6008
T 08 9384 4003 **E** admin@wmrc.wa.gov.au
www.wmrc.wa.gov.au

Western Metropolitan Regional Council

ATTACHMENT 4.2A

WMRC Integrity Framework

WMRC is committed to acting with integrity, accountability, impartiality and transparency. This framework describes the systems, responsibilities and assurance mechanisms through which integrity is promoted, monitored and continuously improved.

Governance & Leadership	Risk & Audit Oversight	Integrity Policies	Reporting & Accountability	Culture & Capability	Monitoring & Continuous Improvement
• *Local Government Act 1995* obligations addressing disclosure of interests, gifts, financial interests, conduct, use of office, electoral integrity and transparency. • Separate Codes of Conduct for Councillors and employees, volunteers and contractors addressing behaviours, conduct, impartiality, conflict of interest, gifts and other matters. • Primary and annual returns. • Local Law meeting procedures (standing orders). • Audit, Risk and Improvement Committee terms of reference.	• Audit, Risk and Improvement Committee oversight of financial reporting, risk management and integrity issues. • *Local Government (Financial Management) 1996*, regulation 5 audit of financial systems and procedures. • *Local Government (Audit) 1996*, regulation 17 audit of administrative systems and procedures. • Risk management (policy, framework and register) aligned to AS31000:2018.	• Customer service charter. • Internal controls policy including organisational controls and accounting controls. • Stakeholder engagement policy. • Risk management policy. • Conflict of interest policy. • Public interest disclosure policy. • Whistleblower policy. • Workplace expectations policy. • Privacy policy. • Standards for recruitment, performance and termination. • Employee position descriptions.	• Annual compliance audit return (CAR) overseen by Audit, Risk and Improvement Committee, Council and the Department of Local Government. • Annual financial audit. • Schedule of delegated authorities. • Registers of delegated decisions. • Register of gifts. • Annual report publication. • *Public Interest Disclosure Act 2003* obligations. • Corruption & Crime Commission reporting protocol.	• Performance reviews of the CEO and staff that include integrity measures. • A values framework embedded within the Council Plan 2026, Corporate Plan 2026 and Code of Conduct requiring honesty, respect, accountability and teamwork. • Encouragement of a speak-up culture. • Promotion of continuous improvement – encouraging innovation, problem solving, learning from experiences, benchmarking, staff development and other.	• Audit, Risk and Improvement Committee oversight. • Annual interim and end of year financial audits. • Independent reviews of financial systems and administrative systems and procedures undertaken each 3 years. • Ongoing review of risk register and associated controls. • Whistleblower protection through Public Interest Disclosure Act and internal policy. • Pro-active management of employee, volunteer and contractor behaviour. • Employee onboarding processes.

Updated August 2026

Roles and Responsibilities

Council

The Council is responsible for establishing the ethical tone and governance expectations of the organisation. Council Members are required to act in accordance with their statutory obligations and Code of Conduct, disclose interests as required by legislation, promote accountability and transparency, and ensure appropriate governance, risk management and integrity frameworks are maintained.

Audit, Risk and Improvement Committee

The Audit, Risk and Improvement Committee is a key element of WMRC's integrity framework, providing independent oversight and assurance in relation to governance, risk management, internal controls, compliance and ethical conduct. The Committee monitors the effectiveness of integrity-related policies, systems and controls, reviews audit findings and management responses, oversees significant governance and compliance risks, and monitors actions arising from audits, reviews and investigations. The Committee's oversight supports continuous improvement and assists Council in maintaining a culture of accountability, transparency and integrity throughout the organisation.

Chief Executive Officer

The Chief Executive Officer is responsible for implementing Council's governance and integrity requirements, maintaining effective systems of internal control, fostering an organisational culture consistent with WMRC's values, ensuring compliance with legislative obligations, and reporting significant integrity, control and compliance matters to Council and the Audit, Risk and Improvement Committee.

Leadership Team

Leaders are responsible for demonstrating ethical leadership, ensuring compliance with policies and procedures, managing integrity risks within their areas of responsibility, supporting staff to raise concerns, and implementing actions arising from audits, reviews and continuous improvement initiatives.

Employees, Volunteers and Contractors

Employees, volunteers and contractors are responsible for acting honestly, ethically and in accordance with the applicable Code of Conduct, policies and procedures. They are expected to identify and appropriately manage conflicts of interest, report suspected misconduct or wrongdoing, and contribute to a culture of accountability, respect and continuous improvement.

Western Metropolitan Regional Council

ATTACHMENT 4.3A

Council Policy: Risk Management

Purpose

The purpose of this policy is to establish organisation-wide risk management principles, systems and processes that ensure consistent, efficient and effective assessment of risk in all planning, decision-making and operational processes.

Strategic Objectives

- SCP 5 – Maintain a strong and capable organisation

Relevant Legislation

- *Local Government Act 1995*
- *Local Government (Audit) Regulations 1996*

Policy

Statement

The Western Metropolitan Regional Council (WMRC) is committed to ensuring that risk is managed in accordance with AS/NZS/ISO 31000:2018. Risk Management is embedded in all aspects of management ensuring that the principles of risk management are applied to all relevant levels and functions of the organisation, thereby enabling strategic, operational and project objectives to be achieved.

Detail

The WMRC manages its risks using a process that involves the identification, analysis, evaluation, treatment, monitoring and review of risks. It will be applied to decision making through all levels of the organisation in relation to planning or executing any function, service or activity. Risk management applies at strategic, operational and project levels.

The Council has a low appetite for risks that relate to:

- Health, safety and the wellbeing of staff and the community.
- Administration of finances and assets.
- Legislative compliance.

The organisation has medium and higher risk appetites where benefits created by innovation or new initiatives outweigh the risks.

Risk Management is embedded in all aspects of management and is a vital element of the governance framework. The benefits of risk management embedded in all aspects of management are:

a) Effective management of adverse events or opportunities that impact on our purpose and objectives.

b) Ability to make informed decisions regarding management of potential negative effects of risk and take potential advantage of opportunities.

c) Improved planning and performance management processes enabling a strong focus on core business service delivery and implementation of business improvements.

d) Ability to direct resources to risks of greatest significance or impact.

e) Improvement in culture of the organisation enhancing staff capacity to understand their role in contributing to the achievement of objectives.

Risk management is given effect through the Council's Risk Management Plan which incorporates a risk appetite statement and a risk assessment matrix. Individual risks are scheduled in a Corporate Risk Register. These documents should be read in conjunction with this policy.

Governance

The organisations Risk Management Plan is established in accordance with AS/NZS/ISO 31000:2018.

The Audit and Risk Committee has a key role governed by the *Local Government Act 1995* and *Local Government (Audit) Regulations 1996*. This role is to provide guidance and assistance to the local government as to the carrying out of its functions in relation to audits, the appointment of external auditors, review of reports given to it by the CEO, review the Annual Compliance Return and consider the CEO biennial reviews of the appropriateness and effectiveness of the local government's systems and procedures in regard to risk management, internal control and legislative compliance.

Strategic risks will be periodically reviewed and reported through the Audit and Risk Committee.

Adopted / Modified

Responsibility for the implementation of this policy rest with the Chair, Councillors and Chief Executive Officer. This policy is scheduled to be reviewed every 3 years.

	Meeting Date	Resolution #	Implementation Responsibility
Council Adoption	30 January 2025	10.6.1	
Council Review			

Western Metropolitan Regional Council

Managing waste wisely

ATTACHMENT 4.3B

Risk Management **Plan**

January 2025

CONTENTS

This Plan was adopted by resolution of Council on 30 January 2025.

INTRODUCTION

Intent

Risk Management is a core component of corporate governance and an integral part of contemporary management practices. The aim of the plan is to ensure that the Council makes informed decisions in terms of its strategies and operations ensuring that risks and opportunities are appropriately considered.

Purpose

This Risk Management Plan identifies the way risk is identified, rated and managed within the Western Metropolitan Regional Council (WMRC) to ensure that strategic, operational and project objectives are met. The Risk Management Plan is structured around AS/NZS/ISO 31000:2018 Risk management – Guidelines and the requirements of the *Local Government (Audit) Regulations 1996*.

What is risk management?

A risk is defined as the effect of uncertainty (either positive or negative) on business objectives.

Risk management is the coordination of activities that directs and controls the organisation with regard to risks. It is commonly accepted that risk management involves both the management of potentially adverse effects as well as the realisation of potential opportunities.

In performing daily activities, risk management can be described as the collection of deliberate actions and activities carried out at all levels to identify, understand and manage risk in order to achieve the objectives of the Council.

Benefits of risk management

The benefits of risk management embedded in all aspects of management are:

a) Effective management of adverse events or opportunities that impact on our purpose and objectives.

b) Ability to make informed decisions regarding management of potential negative effects of risk and take potential advantage of opportunities.

c) Improved planning and performance management processes enabling a strong focus on core business service delivery and implementation of business improvements, minimising the negative impacts of risks.

d) Ability to direct resources to risks of greatest significance or impact.

e) Improvement in culture of the organisation enhancing staff capacity to understand their role in contributing to the achievement of objectives.

Goals of the Plan

The Plan aims to:

- Give effect to the Council's policy and approach to risk management
- Communicate the benefits of risk management
- Outline recognised industry best practices for managing risk
- Support an organisational culture that effectively manages risk
- Set the scope and application of risk management
- Identify roles and responsibilities for managing risk
- Set out a consistent approach for managing risk across the organisation
- Detail the process for escalating and reporting risk
- Ensure the Council meets its risk reporting obligations

These aims are actioned through this plan which sets out management *principles*, a *framework* to implement measures and *practices* to be undertaken.

CONTEXT

Legislation

Section 5.56(1) and (2) of the Local Government Act 1995 – Planning for the Future; Regulation 17(1)(a) of the Local Government (Audit) Regulations: "The CEO is to review the appropriateness and effectiveness of a local government's system and procedures in relation to risk management."

Under regulation 17(1) of the Local Government (Audit) Regulations 1996 the CEO is to review the appropriateness and effectiveness of al local government's system and procedures in relation to –

(a) risk management; and
(b) internal controls; and
(c) legislative compliance.

Regulation 17(2) requires the review may relate to any or all of the matters referred to in sub regulation (1) (a), (b) and (c), but each of those matters is to be the subject of at least once every 3 financial years.

Further, regulation 17(3) requires the CEO to report to the audit committee the results of the review.

Australian Standard

Definition of Risk:

AS/NZS ISO 31000:2018 Risk management – Guidelines defines risk as “the effect of uncertainty on objectives.”

- A risk is often specified in terms of an event or circumstance and the consequences that may flow from it. An effect may be positive, negative, or a deviation from the expected. An objective may be financial, related to health and safety, or defined in other terms.
- Definition of Risk Management: the application of coordinated activities to direct and control an organisation with regard to risk.

In simplest terms, a risk can be defined as “If this happens, this is the impact on the organisation”. It requires both an action (or inaction) and an assessment of the impact of this upon the WMRC. Undertaking this process then allows proper Risk Mitigation to be developed.

Council Policy

The Western Metropolitan Regional Council is committed to ensuring that risk is managed in accordance with AS/NZS/ISO 31000:2018. This is expressed with adopted Policy of Council which commits to using a process that involves the identification, analysis, evaluation, treatment, monitoring and review of risks. This is applied to decision making through all levels of the organisation in relation to planning or executing any function, service or activity.

Council policy identifies a low appetite for risks that relate to:

- Health, safety and the wellbeing of staff and the community.
- Administration of finances and assets.
- Legislative compliance.

The policy also indicates a potential higher risk appetite where benefits created by innovation or new initiatives outweigh the risks.

The WMRC’s appetite for risk across 9 risk categories is set out at Attachment 1.

This Risk Management Plan serves to give effect to the commitments within Council Policy and provides for the ongoing management practices, including maintenance of a corporate risk register.

RISK PRINCIPLES

Risk management is given effect through influences ranging from structured practices through to organisational culture. The principles underlying these influences are illustrated in Figure 1.

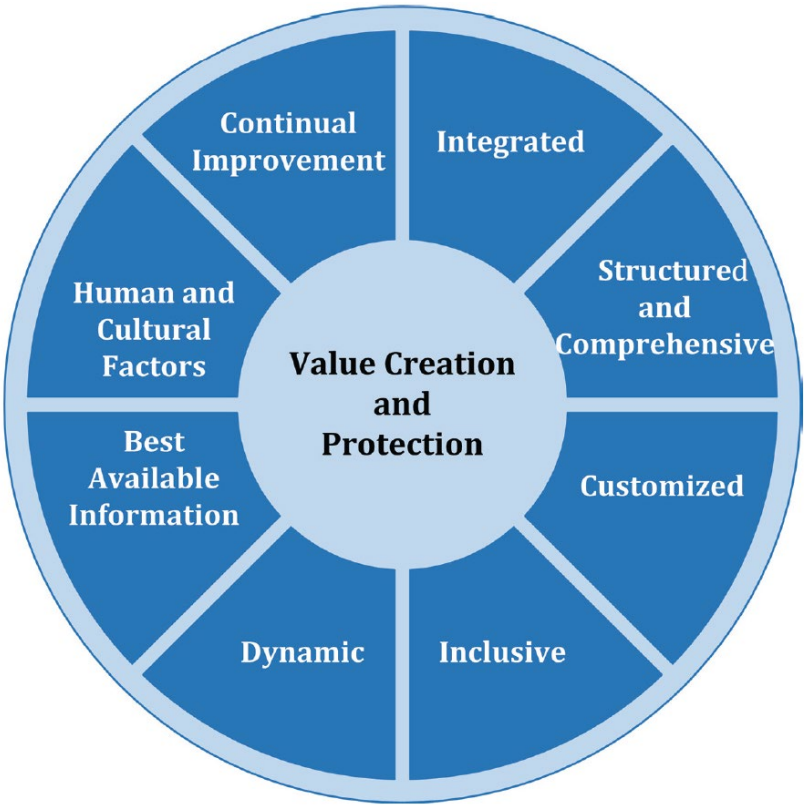


Figure 1 – Framework

Reprinted from AS/NZS ISO 31000:2018

The Australian Standard for Risk Management – Principles and guidelines (AS/NZ/ISO 31000:2018) is based on 11 best practice principles. These principles underpin the Plan and guide how to effectively and efficiently manage risk at all levels.

1. *Creating and protecting value* – risk management contributes to the achievement of the Council's objectives and improves performance in areas such as corporate governance, program and project management, and employee health and safety.
2. *An integral part of all organisational processes* – risk management is not a stand-alone activity performed in isolation. Rather, it is an integral part of our governance and accountability framework, performance management, planning and reporting processes.

3. *Part of decision-making* - risk management aids decision-makers to make informed choices, prioritise activities and identify the most effective and efficient course of action.
4. *Explicitly addressing uncertainty* – risk management identifies the nature of uncertainty and how it can be addressed through a range of mechanisms, such as sourcing risk assessment information and implementing risk controls.
5. *Systemic, structural and well timed* – risk management contributes to efficiency and to consistent, comparable and reliable results.
6. *Based on the best available information* – risk management should draw on diverse resources of historic data, expert judgement and stakeholder feedback to make evidence-based decisions. As decision-makers, we should be cognizant of the limitations of data, modelling and divergence amongst experts.
7. *Tailored* – risk management aligns with the internal and external environment within which the Council operates, and in the context of its risk profile.
8. *Human and cultural factors* – risk management recognizes that the capabilities, perceptions and aims of people (internal and external) can aid or hinder the achievement of objectives.
9. *Transparent and inclusive* – risk management requires appropriate and timely involvement of stakeholders to ensure that it stays relevant and up to date. Involving stakeholders in decision making processes enables diverse views to be taken into account when determining risk criteria.
10. *Dynamic, interactive and responsive to change* – risk management responds swiftly to both internal and external events, changes int eh environmental context and knowledge, results of monitoring and reviewing activities, new risks that emerge and others that change or disappear.
11. *Continual improvement of the organisation* – risk management facilitates continuous improvement of our operation by developing and implementing strategies to improve risk management maturity.

RISK FRAMEWORK

The framework for risk mitigation is illustrated at Figure 2 addressing structures, risk levels and practices.

Structures

Council – under legislation, Council governs the local government's affairs and is responsible for the performance of its functions.

The Chief Executive Officer (CEO) - under legislation, the CEO is required to review the appropriateness and effectiveness of a local governments systems and procedures in relation to risk management, internal control and legislative compliance at least once in every three financial years and report to the Audit and Risk Committee the results of that review.

Audit and Risk Committee – the WMRC has established an Audit and Risk Committee who has oversight on all matters that relate to audits including the appointment of the external auditor and review of reports from the CEO, external auditor and internal auditor. The Committee supports the Council in its endeavors to provide effective corporate governance and fulfil its responsibilities in relation to controlling and direction the affairs of the City.

External Auditor – is appointed by the WMRC under the *Local Government Act 1995* to undertake the audit of the accounts and financial report for each financial year. An audit report is then issued to the Audit and Risk Committee.

Internal Auditor - is appointed by a local government to undertake an audit of the adequacy and effectiveness of the internal control, legislative compliance, accounting systems and procedures, review of policies, procedures and risk management in accordance with an audit plan. The internal auditor is to report findings to the CEO, and as directed by the CEO, to the Audit and Risk Committee.

Figure 2: WMRC Risk Management Framework

Risk Levels

The levels of risk can be identified at different levels depending on what activity is being assessed. The strategic, operational and project level risks are incorporated in the 9 risk categories of the Corporate Risk Register.

Strategic Level Risks

Strategic Level risks are associated with achieving the long-term objectives of the organisation. These risks can be of an internal or external nature and they are usually controlled by Council and/or the leadership team.

These risks may include:

- Risks associated with achieving the objectives of the Strategic Community Plan:
    - Effective engagement with the community
    - Equity in involvement
    - Transparency of process
    - Integration of informing strategies
    - Organisational acceptance of Strategic Community Plan
- Risks associated with delivering the Corporate Business Plan:
    - Impact of new assets on changes to services
    - Aligning service delivery to meet organisational objectives
    - Resourcing and sustainability
    - Alignment of local government structures and operations to support achievement of objectives.

Strategic level risks will be regularly report to Council (via the Audit and Risk Committee) for review.

Operational Level Risks

Operational Level risks are associated with operational plans, functions or activities of the organisation. These risks have day to day impacts and are owned and managed by the person who has operational responsibility for the activity to the level of delegated authority or capability.

These risks may include:

- Risks associated with delivery of the Long-Term Financial Plan
- Risks associated with the development or delivery of the Asset Management Plan
- Risks associated with the delivery of the Workforce Plan

Project Level Risks

Project level risks are associated with developing or delivering projects or discreet activities. Project risks should be managed at each stage of the project by the person who has responsibility for them.

Responsibilities

Effective risk management is modelled by:

- Leadership demonstrated by the Chief Executive Officer and the executive management team
- Staff in all work contexts through their identification, analysis, evaluation, treatment, monitoring and review of risks that may impact in achieving the organisations objectives.

This is given effect through:

- Senior staff who have the responsibility and accountability for ensuring that all staff are managing the risks within their own work areas. In each of these areas, risks should be anticipated and reasonable protective measures taken.
- The CEO and managers who encourage openness and honesty in the reporting and escalation of risks.
- All staff who are encouraged to alert management to the risks that exist within their area, without fear of recrimination.
- All staff who, after appropriate training, adopt the principles of risk management and comply with all policies, procedures and practices relating to risk management.
- All staff and employees who conduct risk assessments on an as-required basis during the performance of their daily duties. The level of sophistication of the risk assessment will be commensurate with the scope of the task and the associated level of risk identified.

Failure by staff to observe lawful directions from supervisors regarding the management of risks and/or failure of staff to take reasonable care in identifying and treating risks in the workplace may result in disciplinary action.

The scope of responsibility and accountability for risk management is the business of everyone. Specific responsibilities however apply where risks escalate as illustrated:

Risk Level	Level accountable for mitigating the risk	Level accountable for oversight (review)
Low	Supervisor	Manager
Medium	Manager	CEO
High	CEO and Leadership Team	Council – strategic risks CEO – operational and project risks
Extreme	CEO and Leadership Team	Council

The success of the organisation's strategy relies on all staff enacting the risk management approach outlined in this framework. To assist, the Corporate Risk Register has been prepared which allows specific risk owners to be identified.

RISK PRACTICES

Corporate Risk Register

The WMRC will manage risks continuously using a process involving the identification, analysis, evaluation, treatment, monitoring and review of risks. It will be applied to decision making through all levels of the organisation in relation to planning or executing any function, service or activity. The Corporate Risk Register is intended to record risks according to the level; strategic (S), operational (O) or project (P) based. These levels are identified within the risk code in the register. Further, the register records the activities, namely identification, analysis, evaluation and treatments.

Strategic level risks are intended to be periodically reviewed by the Audit and Risk Committee and subsequently Council. This allows reports to Council and decision-making to reference a recognised risk and associated treatments. Operational and project-based risks are identified and assessed on a project needs basis, with the register updated accordingly.

Activities

The risk management process involves the systematic application of policies, procedures and practices. These activities are illustrated in Figure 3 as reprinted from the Australian Standard and further described in this Plan.

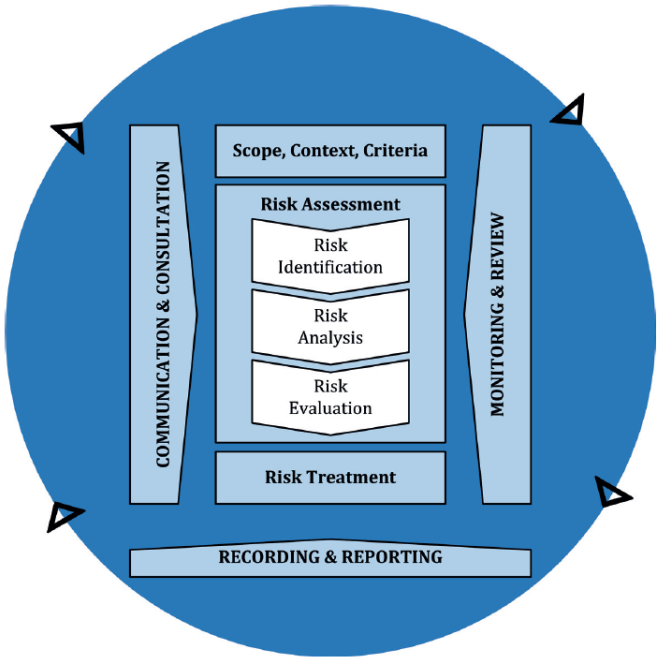


Figure 3 – Process

Reprinted from AS/NZS ISO 31000:2018

Risk Identification

The following risk categories along with their associated level codes are identified within the Corporate Risk Register for the organisation:

Category		Code		
		Strategic	Operational	Project
1	Reputational	SR#	OR#	PR#
2	Governance	SG#	OG#	PG#
3	Strategic	SS#	OS#	PS#
4	Commercial and legal	SC#	OC#	PC#
5	Financial	SF#	OF#	PF#
6	Information Technology	SIT#	OIT#	PIT#
7	Health & Safety	SHS#	OHS#	PHS#
8	Operational	SO#	OO#	PO#
9	HR Management	SHR#	OHR#	PHR#

#: denotes risk number as listed in the Corporate Risk Register

It is intended that the codes and numbers for each relevant risk is listed within decision-making reports to Council for the purposes of cross-referencing.

Risk Analysis

Risk analysis is about understanding the nature of risk and its characteristics including the impact of the risk. The analysis involves consideration of uncertainties, risk sources, consequences, likelihood, events, scenarios, controls and their effectiveness.

To allow a structured analysis, a risk matrix is included at Attachment 2. This allows rating of a particular risk according to consequence and likelihood. A numerical rating can then be applied to indicate whether the risk is low, medium, high or extreme. The rating can be compared against a desired rating, having regard for risk appetite as guided by Attachment 1.

Both the risk appetite statement and the risk matrix reflect the 9 risk categories listed above as relevant to the WMRC.

Risk Evaluation

Evaluation involves comparing the results of the risk analysis with the criteria to determine where additional action is required. The risk matrix at Attachment 2 establishes the thresholds for level of impact (or consequence) or risk, and provides a scaling for likelihood. Together, these metrics are used to create risk scores. An initial evaluation will yield a risk score. This can be compared against a target risk score as determined according to risk appetite.

Risk Treatment

Where the score is exceeded, controls (or actions) to reduce the risk are identified with the residual remaining risk recalculated.

The evaluation process described above allows decisions to be made as to whether to:

- Do nothing further
- Consider risk treatment options
- Undertake further analysis to better understand the risk
- Maintain existing controls
- Reconsider objectives

Collectively, the methods set out in this plan will serve to optimise the strategic, operational and project objectives for the WMRC.

ATTACHMENT 1 – RISK APPETITE

Risk Appetite Range	Low Appetite	Moderate Appetite	High Appetite
			
Approach to Risk	Accept as little risk as possible and take a cautious approach towards risk	Balanced and informed approach to risk taking	A more aggressive approach for increased benefit or to achieve a key Strategic Outcome
Risk Category			
Reputational	Activities that impact a large part of the community or many member Councils	Activities that impact a small number of the community or member Councils and are for the greater good	Activities that impact one small group or member Council with overall benefits that far outweigh the confined impact
Governance	Arrangements that do not comply with regulatory requirements	Deployment of innovative governance solutions, ensuring they are aligned with organisational needs	Decision-making that has potential adverse outcomes but is urgent for business continuity
Strategic	Activities that will compromise delivery of core services or the sustainability of the organisation	Initiatives that will benefit Member Councils with limited financial risk or reputational risk	Activities with confined impact that can provide environmental or economic benefit
Commercial & Legal	Activities that will lead to loss of business or revenue or induce legal action	Settling disputes through negotiation and mediation is prioritised over legal action	Preparedness to engage in litigation for high-value disputes or to protect strategic interests
Financial	Activities that impact financial liquidity	Activities with low value	Activities with a low value that are likely to provide economic benefits or revenue growth

Information Technology	The organisation has low appetite for: • cybersecurity risk • downtime in mission-critical systems • data privacy and compliance risk • overspend on IT projects	Willingness to accept untested or experimental technologies where it does not compromise other low appetite risk matters	There is no appetite for high-risk IT activities
Health & Safety	The organisation has a low appetite for physical or psychological harm or injuries which may impact people	The organisation may consider increased exposure for short-term or temporary activities that address emergency, capability gaps or capacity gaps in delivering the services or operating facilities.	The organisation does note have an appetite for uncontrolled high-risk activities in relation to worker health and safety
Operational	Activities that result in ongoing disruption to core services	Activities that result in minor disruption to a small number of services	Minor service disruption that will enable improved delivery of services to Member Councils and community
HR Management	Low appetite for workforce instability, prioritising long-term workforce sustainability and minimal disruption	Moderate risks are accepted in learning and development initiatives that balance employee needs with organisational objectives	Willingness to accept cultural shifts to transform into a more agile and innovative workplace

ATTACHMENT 2 – RISK MATRIX

WMRC RISK MATRIX

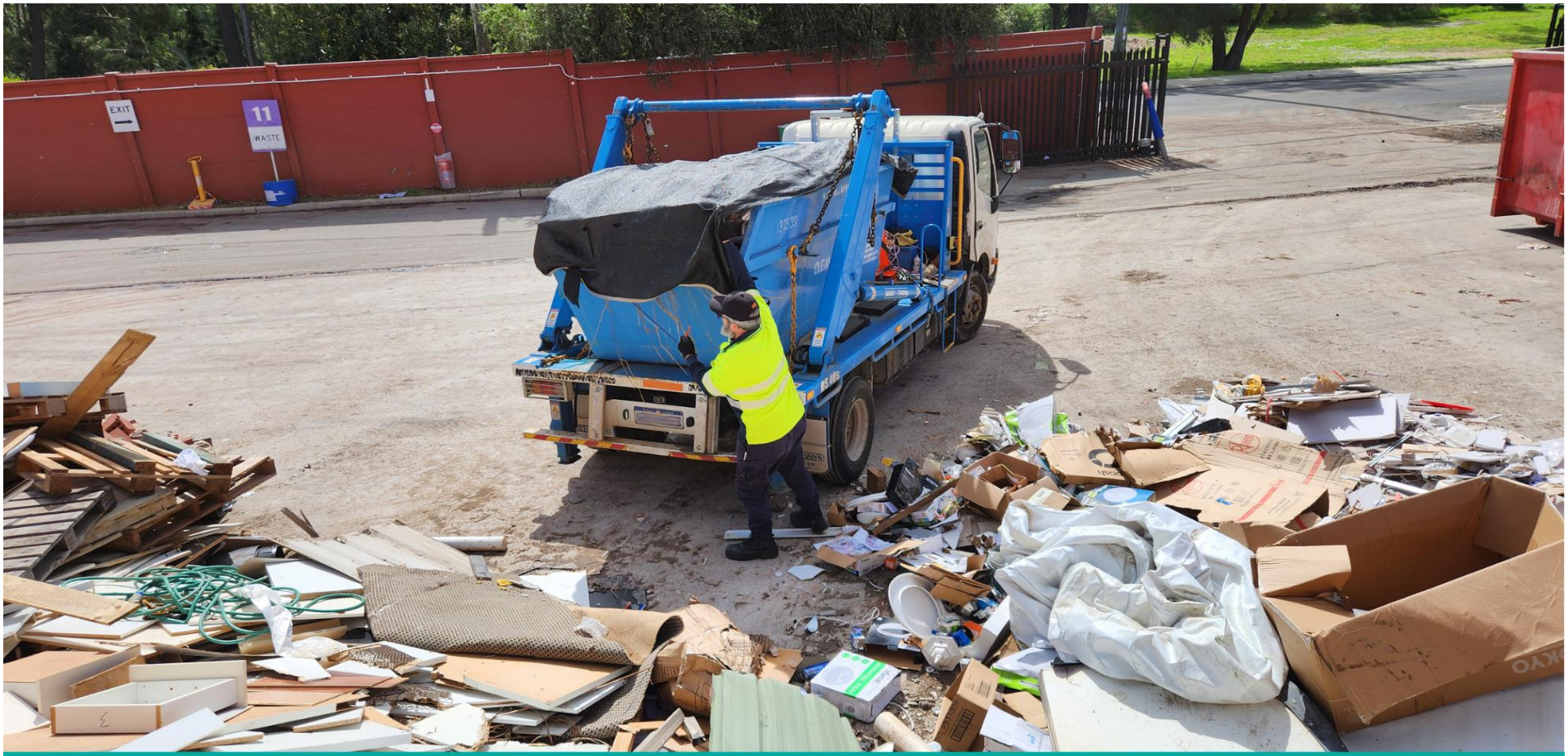
CONSEQUENCES										LIKELIHOOD				
										< once in 15 years	At least once in 10 years	At least once in 3 years	At least once per year	More than once per year
										May occur, only in exceptional circumstance	Could occur at some time	Likely to occur at some time	Will probably occur in most circumstance	Expected to occur in most circumstance
Reputational	**Governance**	**Strategic**	**Commercial & Legal**	**Financial**	**Information Technology**	**Health & Safety**	**Operational**	**HR Management**	**SEVERITY**	Rare 1	Unlikely 2	Possible 3	Likely 4	Almost Certain 5
Severe, widespread reputational damage threatening the organisation's survival or long-term credibility	Systemic governance failure leading to legal penalties, sanctions or significant financial loss	Critical failure of strategic objectives, posing existential threats to the organisation's existence	Critical legal or commercial failure threatening the organisation's survival or strategic objectives	>$1M	Critical IT failures posing existential threats to the organisation	Fatality or permanent disabling injuries or illness	Critical operational failure, threatening the organisation's ability to function	Critical failure of HR functions, severely harming the organisation's workforce, compliance, or reputation	**CRITICAL 5**	5 Medium	10 High	15 High	20 Extreme	25 Extreme
Significant reputational damage with broad consequences for stakeholder relationships and organisational value	Significant policy or regulatory breaches leading to stakeholder dissatisfaction or legal consequence	Significant disruption to strategic initiatives or the organisation's ability to achieve long-term goals	Substantial commercial or legal consequences, potentially harming the organisation's objectives and reputation	$500K - $1M	Significant IT disruptions with severe operational, financial, or compliance consequences	Serious irreversible injuries or illness	Significant disruption to critical operations, with adverse financial, operational and reputational consequences	Significant impact on workforce satisfaction, HR compliance, or organisational objectives, requiring substantial corrective measures	**MAJOR 4**	4 Low	8 Medium	12 High	16 Extreme	20 Extreme
Noticeable reputational damage that affects stakeholder trust and requires active management	Partial non-compliance with regulatory requirements drawing external scrutiny	Noticeable disruption to one or more strategic objectives, requiring focused intervention	Noticeable impact on commercial arrangements or compliance, requiring intervention to mitigate risks	$100K - $500K	Noticeable disruptions to IT systems or services that require focused efforts to resolve	Injuries or illness that result in Lost Time injury	Noticeable disruptions to key operations, requiring intervention but with manageable consequences	Noticeable issues affecting HR operations, employee morale, or compliance, requiring intervention	**SIGNIFICANT 3**	3 Low	6 Medium	9 High	12 High	15 High

Limited reputational impact confined to a specific stakeholder group or area	Isolated instances of policy deviation with minimal external implications	Limited effect on specific strategic initiatives but does not derail overall goals	Limited, localized impact on commercial contracts or legal compliance, easily contained and managed	$10K - $100K	Limited disruptions to IT systems or services, easily managed and contained	Medical treatment injury or illness	Limited impact on specific operations, with manageable and short-term disruptions	Limited disruptions to HR functions or localized employee dissatisfaction, with no long-term consequences	**MODERATE 2**	2 Low	4 Low	6 Medium	8 Medium	10 High
Negligible effect on reputation with no noticeable consequences for stakeholders or public perception	Minor non-compliance with internal policies with no regulatory or stakeholder impact	Minimal effect on strategic objectives, with no noticeable impact on the organization's overall direction or performance	Minimal or no impact on commercial operations or legal compliance	<$10K	Minimal impact on IT systems or operations; does not disrupt business activities	First aid treatment or illness	Negligible disruption to operations, with no impact on performance or objectives	Minimal impact on employees, HR processes, or overall organisational culture; easily managed within routine operations	**INSIGNIFICANT 1**	Low	Low	Low	Low	Medium

ATTACHMENT 4.3C

Corporate Risk Register

Western Metropolitan Regional Council



Strategic level risks adopted by Council: **27/03/2025**

Western Metropolitan Regional Council

WMRC Corporate Risk Register

Categories:

1 Strategic
2 Governance
3 Commercial and legal
4 Financial
5 Workplace Health & Safety
6 HR Management
7 Operational
8 Information Technology
9 Reputational
Project 1 RC Renewal Plan

Levels:

Strategic

Operational

Project

Risk Matrix:

Consequences on 1 to 5 scale
Likelihood on 1 to 5 scale
Severity on 1 to 25 scale with 4 classes:
- Low (1 to 4)
- Medium (6 to 8)
- High (10 to 15)
- Extreme (16 to 20)

1 STRATEGIC RISK

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
Risk code	**Risk**	**Likelihood (1–5)**	**Impact (1–5)**	**Initial risk score**	**Target risk score**	**Current controls**	**Likelihood after controls (1–5)**	**Impact after controls (1–5)**	**Residual risk score**	**Actions required**	**Risk owner**	**Review (timeframe and process)**
STRATEGIC LEVEL RISKS												
SS1	Long-term planning for the use of the Recycling Centre not capable of: 1. responding to new technologies; 2. accommodating future regulatory requirements to separate, store/aggregate, transfer and report on material types; 3. facilitating operational cost efficiencies; 4. meeting future needs for additional waste streams; 5. responding to community expectations for activities such as re-use shops.	4	5	**20**	4	Employ Investment Logic Mapping methodology to establish Recycling Centre: 1. long-term functionality; 2. spatial arrangements of functions, allowing for adaptability to future opportunities; and 3. forecast technologies to be employed.	2	2	**4**		Council and CEO	To be undertaken through Concept Planning process for the Recycling Centre.
SS2	Circular economy opportunities are not optimised, compromising environmental and economic outcomes.	2	4	**8**	4	Active management of input contamination. Continued monitoring of emerging opportunities for re-processing material, and maintaning capacity to adopt to opportunities. Maintain capacity within contract structures and operational arrangments to transition to new opportunities.	2	2	**4**		CEO	Ongoing monitoring.
SS3	Demand for improved environmental outcomes are not able to be satisfied.	2	4	**8**	4	Monitor community expectations for best-practice waste management. Monitor standards review by regulators. Continue community education role, demonstrating WMRC practices.	2	2	**4**		CEO	Ongoing monitoring.
SS4	Inability to access Recycling Centre land area to optimise waste stream receival, aggregation and haulage.	4	4	**16**	4	Continued negotiations with interest holders and legal actions as necessary to facilitate deconstruction and site remediation for WMRC use.	2	3	**6**	Ongoing monitoring of progress by Council, and instigations of progressive actions as required to achieve resolution.	CEO	Ongoing issue management.
SS5	Unproven technologies / unsuccessful commercial ventures impeding operational services and creating legal and cost exposure.	3	4	**12**	4	Application of due diligence. Any contractual arrangement adopting a heavily risk adverse position.	1	2	**2**		Council and CEO	Ongoing management.
SS6	Inability to service member Council disposal requirements in disaster recovery scenarios	1	3	**3**	4	Liaison with emergency management team to coordinate removal and disposal through contracted services.	1	2	**2**		CEO	Ongoing management.
SS7	Competitors not adequately understood, creating potential loss of custom and revenue, leading to reduced economy of scale.	2	3	**6**	4	Continued monitoring of market developments and opportunities for improved waste handling practices.	2	2	**4**		CEO	Ongoing monitoring.
SS8	Emerging technologies not understood or harnessed, compromising environmental and economic outcomes.	3	3	**9**	4	Maintained industry best-practice awareness and assessment of application to the WMRC.	2	2	**4**		CEO	Ongoing management.
SS9	Strategy misaligned with member council strategies or state / federal government requirements or legislation	3	4	**12**	6	Ongoing interaction with and advocacy to State Government bodies and with Member Councils through CEOAC. Close relationship with WALGA and MWAC. Strategic Community Plan submitted to relevant authorities.	1	4	**4**		CEO	In conjunction with Corporate Business Plan review

SS10	Loss of service utilisation by non-member Council, reducing volumes and economies of scale.	3	2	**6**	4	Ensure services align with best practice waste management, supporting strategic objectives for environmental outcomes, community needs and financial sustainability.	2	2	**4**		CEO	In conjunction with Strategic Community Plan and Corporate Business Plan reviews.
SS11	Risks are not identified and consequently not managed.	2	4	**8**	4	Diligent risk assessment processes incorporated into business practices.	1	2	**2**		CEO	Ongoing
OPERATIONAL LEVEL RISKS													
OS1	Allocation of resources, and service delivery poorly aligned with strategy, leading to failure to delivery agreed services at competitive rates.	4	4	**16**	4	Preparation and annual review of Corporate Business Plan that aligns planned business activity with the Strategic Community Plan. Annual budget formulation and mid-year review aligned with Corporate Business Plan and WMRC Waste Plan.	1	3	**3**		CEO	In conjunction with Corporate Business Plan review
OS2	Operational inefficiencies increase costs, causing the WMRC to be uncompetitive.	3	3	**9**	4	Effective operational planning and competitive contract structures.	1	3	**3**		CEO	Ongoing management.
OS3	Exposure to sole supplier for provision of service with no redundancy.	3	3	**9**	4	Assessment of market capabilities. Managed contract durations to enable regular market testing and transitioning if required.	2	3	**6**	Monitoring of market capacity and redundancy options	CEO	Ongoing management.
OS4	Operational infrastructure not capable of scaling-up to serve additional customers or waste streams.	3	3	**9**	4	Concept planning and technology selection decisions to ensure scalability.	1	2	**2**		CEO	Ongoing management.
OS5	Orgnisational structures, capacities and capabilities not suitable to deliver SCP and CBP.	3	3	**9**	4	Preparation of a Workforce Plan that aligns organisational capacity and capabilities with the service requires of the SCP and CBP.	1	2	**2**		CEO	Ongoing management.
OS6	Penalties applied or directions to cease activity due to breach of regulatory requirements	3	4	**12**	4	Observance of operational licence obligations.	2	2	**4**		CEO	Ongoing management.

2 GOVERNANCE RISK

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
Risk code	**Risk**	**Likelihood (1–5)**	**Impact (1–5)**	**Initial risk score**	**Target risk score**	**Current controls**	**Likelihood after controls (1–5)**	**Impact after controls (1–5)**	**Residual risk score**	**Actions required**	**Risk owner**	**Review (timeframe and process)**
STRATEGIC LEVEL RISKS												
SG1	Priorities and programs do not reflect the needs of member councils and stakeholders	3	3	**9**	3	Strategic Community Plan developed and reviewed in consultation with stakeholders. Corporate Business Plan developed and reviewed annually directed at delivering on the SCP objectives and priorities. Annual budget setting, approval and mid-year review process.	1	2	**2**		Chair and CEO	Annually in conjunction with Strategic Community Plan and Corporate Business Plan reviews and annual budget setting.
SG2	Withdrawal of members from the regional council.	1	3	**3**	3	Maintenance of strategic priorities and corporate actions aligning with Member Council service requirements. Maintenance of cost efficient service delivery.	1	3	**3**		Chair and CEO	Annually in conjunction with Strategic Community Plan and Corporate Business Plan reviews and annual budget setting.
SG3	Breakdown in relationship between elected members and the administration.	2	4	**8**	3	Adherence to roles and functions of elected members and CEO as prescribed by the Local Government Act. Adherence to Codes of Conduct. Provision of timely and accurate advice by the administration.	1	2	**2**		Chair and CEO	Ongoing monitoring
SG4	Breakdown in realtionship between member Council administrations and the WMRC.	2	4	**8**	3	Maintenance of effective communications, transparency and accountability between organisations	1	2	**2**		CEO	Ongoing monitoring
SG5	Failure to fulfill governance duty by elected members.	1	3	**3**	3	Elected member training on roles, responsibilities. Compliance with Code of Conduct.	1	2	**2**		Chair and CEO	Ongoing monitoring
OPERATIONAL LEVEL RISKS												
OG1	Unmanaged conflicts of interest	2	4	**8**	7	Declaration of interest declared by elected members and officers.	1	3	**3**		Chair	Annually in conjunction with Corporate Business Plan review.
OG2	Records not adequately managed, preventing access to information as required by law and for decision-making.	2	4	**8**	4	Observation of information recording protocols. Maintain access to files and communications of former staff.	1	2	**2**		Manager Corporate Services	Ongoing monitoring and IT system management.
OG3	Inadequate reporting to facilitate properly informed decision-making.	1	4	**4**	2	Adherence to reporting templates. Draft report review processes and staff training	1	2	**2**		CEO	Ongoing monitoring.
OG4	Council meetings do not conform with regulations and standards	3	3	**9**	4	Observance of meeting Local Law meeting procedures.	2	2	**4**		Chair and Ceo	Annually in conjunction with Corporate Business Plan review.
OG5	WMRC service delivery falls short of efficiency and quality expectations	3	3	**9**	4	Regular reports to Council made in respect of financial and operational performance. Chief Executive Officers of member Councils are briefed bi-monthly with opportunity for any issues to be raised and addressed.	2	2	**4**		CEO	Annually in conjunction with Corporate Business Plan review.
OG6	Compliance risk, leading to reputational risk or non-compliance with legislated requirements	4	3	**12**	4	Compliance register maintained; reviews of operational systems and organisational efficiency and effectiveness; reports to Audit and Risk Committee.	2	2	**4**		Manager Corporate Services	Annually in conjunction with Reg 17 review and report to A&RM Committee
OG7	Poor compliance with procurement processes	3	3	**9**	4	Compliance with procurement policy, ensuring competitive procurement. Monitoring of contract expiry to ensure market testing.	2	2	**4**		CEO	Ongoing monitoring

3 COMMERCIAL AND LEGAL RISK

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
Risk code	**Risk**	**Likelihood (1–5)**	**Impact (1–5)**	**Initial risk score**	**Target risk score**	**Current controls**	**Likelihood after controls (1–5)**	**Impact after controls (1–5)**	**Residual risk score**	**Actions required**	**Risk owner**	**Review (timeframe and process)**
STRATEGIC LEVEL RISKS												
SC1	Economic conditions increase costs or reduce revenue.	4	3	**12**	6	Regular review of costs, fees/charges. Evaluate opportunities to improve efficiency. Achieve economies through servicing non-member Council customers.	3	2	**6**	Ongoing monitoring of economic conditions	CEO	Annually in conjunction with Corporate Business Plan review.
SC2	Compromised value-for-money through contracted services.	2	3	**6**	4	Review of service delivery models to ensure cost effectiveness. Contract specifications which fall in capability of as large number of providers as achievable.	2	2	**4**		CEO	Ongoing review.
SC3	Competition erodes customer numbers, reducing economies of scale.	4	4	**16**	8	Use of efficient operational practices, including technologies. Comparative review of fees and charges and scope of services provided by competing facilities. Business development activities.	1	2	**2**		CEO	Annually in conjunction with Corporate Business Plan review.
SC4	Poorly constructed contracts exposing the organisation to liabilities and litigation.	4	5	**20**	4	Risk assessment undertaken on proposed arrangements. Utilisation of Australian Standard based contracts.	1	3	**3**		Manager Corporate Services	Ongoing management.
OPERATIONAL LEVEL RISKS												
OC1	Legal risk - WMRC incur expenses and losses owing to legal disputes	4	5	**20**	4	Ensure sound legal advice is sought, obtained and acted upon in relation to all substantial commercial dealings.	2	2	**4**		CEO	Ongoing management.
OC2	Intellectual property risk	2	3	**6**	4	Verge Valet logo is trademarked. Intellectual property associated with Verge Valet retained in-house.	1	2	**2**		CEO	Annually in conjunction with Corporate Business Plan review.
OC3	Contract terms are not managed/implemented.	2	4	**8**	4	Assign of responsibilities for contract management. Regular reporting on performance.	1	3	**3**		CEO	Ongoing management.
OC4	Breach of confidentiality	3	4	**12**	4	Secure storage of confidential records. Ongoing staff performance management.	1	3	**3**		CEO	Ongoing management.
OC5	Environmental legal liabilities	3	4	**12**	4	Compliance with terms of operational licences. Hazardous waste control practices. Emergency response procedures.	2	2	**4**		CEO	Ongoing management.
OC6	Amendments to legislation not recognised.	3	4	**12**	4	Effective operation management oversight.	1	3	**3**		CEO	Ongoing management.
OC7	Non-performance of contractor.	3	4	**12**	4	Internal assignment of responsibility for effective contract management.	1	3	**3**		CEO	Ongoing management.

4 FINANCIAL RISK

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
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STRATEGIC LEVEL RISKS												
SF1	Declining financial health - expenditure exceeding revenue, deficit budgets and reserve draw down. Leading to inability to maintain assets and sustain services.	3	5	**15**	4	Sound strategic financial management, supported by accurate revenue/expenditure forecasts, modelling assumptions and budget preparation.	2	2	**4**		CEO	Bi-annually at Budget setting; and Mid Year Budget Review.
SF2	Member Councils cross-subsidising other communities.	4	3	**12**	4	Accurate cost modelling to ensure cost recovery for services provided to non-member Council residents.	2	2	**4**		CEO	Annual budget processes.
OPERATIONAL LEVEL RISKS												
OF1	Revenue not realised through loss of business	3	4	**12**	4	Maintenance of service standards and costings that remain competitive.	2	2	**4**		CEO	Ongoing management.
OF2	Revenue not received through failure to pay	3	2	**6**	4	Limit extension of credit to low risk account holders. Maintain short accounts. Retain cash payment for low volume customers. Utilise debt collection services where required.	1	1	**1**		Manager Corporate Services	Ongoing management.
OF3	Undefined liabilities such as: - employee beneifts exceeding available funding; - site remediation requirements; - plant replacement through failure.	4	4	**16**	4	Ensuring reserve accounts provide for calculable liabilities. Maintenance of reserve balances to cover contingent liabilities. Sound asset management planning that foresees renewal and replacement requirements.	2	2	**4**		Manager Corporate Services	Bi-annually at Budget setting; and Mid Year Budget Review.
OF4	Investment loss	3	4	**12**	4	Investments restricted to interest bearing term deposits with major banks.	1	2	**2**		Manager Corporate Services	Ongoing management.
OF5	Fraud and corruption	2	5	**10**	3	Two approvals are required for all transactions. All procurement must follow WMRC Procurement and Purchasing Policy. Strict guidelines apply to the use of credit cards in use. Regular reviews and audits.	1	3	**3**		CEO	Ongoing management.
OF6	Cashflow Risk	3	2	**12**	4	Tight monitoring of cash on a weekly basis and the ability to source reserve funds if required.	1	2	**2**		CEO	Ongoing management.

5 WORKPLACE HEALTH AND SAFETY RISK

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
Risk code	**Risk**	**Likelihood (1–5)**	**Impact (1–5)**	**Initial risk score**	**Target risk score**	**Current controls**	**Likelihood after controls (1–5)**	**Impact after controls (1–5)**	**Residual risk score**	**Actions required**	**Risk owner**	**Review (timeframe and process)**
STRATEGIC LEVEL RISKS												
WHSS1	**Failure to maintain a safe workplace**	4	5	**20**	4	Application of: 1. Management commitment to workplace health and safety; 2. Awareness and understanding of health and safety legislation, standards, codes of practices, agreements and guidelines; 3. Documented responsibilities; 4.Accountability practices established; 5. Safety practices; 6. Training programs; 7. Verification of competencies; 8. Contractor inductiion and application of safe practices; 9. Emergency response procedures; 10. Hazard management practices; 11. Safe work method statements; 12. Job safety analysis processes.	2	4	**8**	Re-establish Workplace health and safety committee to ensure adherence to controls. Progress initiatives to eliminate risks associated with the NCH silo system.	CEO	Ongoing
OPERATIONAL LEVEL RISKS												
	Failure to maintain a safe workplace											
WHSO1	**Unsafe work practices undertaken**	4	5	**20**	4	Application of WMRC Workplace health and safety management plan.	2	2	**4**		All executive.	Daily observance of practices.
WHSO2	**Uncontrolled silo movement, including tipping, falling and rolling**	3	5	**15**	4	Adherence to approved operating procedures by inducted, trained and qualified operators.	2	4	**8**	Progress elimination of the risk by transitioning from the NCH silo system to static compaction and rear blade ejection trailers.	Manager Operations	Daily observance of practices.
WHSO3	**Equipment Failure** - Silos - Operating equipment - Hydraulics - pneumatics - structural - electrical	3	5	**15**	5	Scheduled inspection and maintenance regimes. Repairs and renewals undertaken. Inspections undertaken in accordance with safe work procedures.	1	4	**4**		Manager Operations	Weekly at management meetings. Fortnightly at Toolbox Meetings. Quarterly at Safety Committee meetings
WHSO4	**Plant and Pedestrian Interaction** - Pedestrian/cyclist v mobile equipment/vehicle - light vehicle v heavy vehicle movement - customer vehicle v operating plant - children and pets moving into hazardous areas and being injured - Customer injured by WMRC plant - Customer truck interface while skip bins are being loaded / unloaded - Truck tipping whilsts reversing down to silo loading area - Staff hit by falling debris while attaching cables to silo - Staff injured when silo cable snaps - Customers inadvertaently using the wrong entrance	3	5	**20**	5	Safety Procedures: SP7-5 Traffic Management Procedure SP7-6 Transfer Station Building Traffic Control Procedure	1	5	**5**	Review the need to reverse down a slip road - if reversing is permitted the driver must ensure the silo is not elevated.	Manager Operations	Ongoing application.
WHSO5	**Hand power tool injury**	3	4	**12**	4	Safety Procedures: SP1-1 Risk Management Procedure SP2-2 Personal Protective Equipment Procedure SP2-5 Fatigue Management Procedures SP7-3 Plant and tool inspection Procedure SP7-4 Electrical Safety Procedure	1	4	**4**		Manager Operations	Ongoing application.
WHSO6	**Unauthorised behaviours by public** - injury from scavenging from waste storage areas - unsafe loads arriving - loads leaving site in an unsafe manner - trespass - smoking onsite - speed/hooning in vehicles - illegal/unauthorised dumping	3	4	**12**	4	Safety Procedures: SP3-8 Civil Disturbance Procedure SP3-9 Criminal Act Procedures	1	3	**3**		Manager Operations	Ongoing application.
WHSO7	**Contractor Practices** - Contractors not following appropriate WHS procedures	3	4	**12**	4	Safety Procedure SP8-3 Contractor Management Procedures	2	2	**4**		Manager Operations	Ongoing application.
WHSO8	**Psycho-social health** adversely impacted by: - bullying and harrassment - stress - work control - sexual harassment - discriminatory behaviour	3	4	**12**		Safety procedure SP2-4 Anti-harassment and Bullying Procedure Application of 'People at Work' psychological safety management methodology.	2	2	**4**		CEO	Ongoing application.

WHSO9	**Risk from sharps of any kind:** - scissors - knives - blades/box knives - broken glass - metal edges - nails/screws	3	4	**12**	6	Safety Procedures: SP1-4 Hazard Inspection Procedure SP2-2 Personal Protective Equipment Procedures	2	4	**8**	Further controls not considered reasonable or practicable: review if situation changes	Manager Operations	Weekly at management meetings. Fortnightly at Toolbox Meetings. Quarterly at Safety Committee meetings
WHSO10	**Preparedness for adverse events:** - lack of emergency readiness to respond to event: training, equipment, communications - suspension of operations - availability of medical assistance	1	3	**3**	4	Integration with member Councils Local Emergency Management Arrangements Safety Procedures: SP3-1 Emergency Preparedness Procedure SP3-4 Accidents and Incidents Procedure SP3-5 First Aid Procedure SP3-6 Armed Hold-Up Procedure SP3-7 Bomb Threat Procedure SP3-8 Civil Disturbance Procedure SP3-10 Explosive Device Procedure	1	2	**2**		CEO	Ongoing application.
WHSO11	**Manual Task handling and Ergonomics** - Any action involving a manual task - RSI from repetitive actions - Poor ergonomic design	4	4	**16**	4	Safety Procedure SP2-7 Manual Handling Procedure. Regular ergonomic assessment of workplaces.	1	4	**4**		Manager Operations	Weekly at management meetings. Fortnightly at Toolbox Meetings. Quarterly at Safety Committee meetings
	Hazardous substances											
WHSO12	**HHW incident** - spill/leak - chemicals incorrectly stored - battery fire	3	4	**12**	6	Safety Procedures: SP1-2 Hazard Identification and Control Procedures SP1-4 Hazard Inspections Procedure SP3-4 Accidents and Incidents Procedure SP4-1A Portable Fire Extinguishers	2	3	**6**	Further controls not considered reasonable or practicable: review if situation changes	Manager Operations	Ongoing application.
WHSO13	**Chemical exposure** - Spill/Inhalation/Explosion risk from HHW/gas bottles/flares/fuel/CFLs - Chemical dropped by customer on ground out of car in acceptance area - Spill of particularly dangerous material e.g. mercury	3	4	**12**	4	Safety Procedures: SP4-1A Portable Fire Extinguishers SP6-3 HHW Facility Requirements SP6-4 HHW Receival and Handling SP6-4C HHW Handling and Storage of gas cylinders SP6-5 HHW Incident and Spill Response Procedure SP6-6 HHW Records Procedures SP6-6C Spilled Chemical Form SP6-7 Hazardous Substances	1	4	**4**	Further controls not considered reasonable or practicable: review if situation changes	Manager Operations	Ongoing application.
WHSO14	**Chemical Identification** - MSDSs not easily accessed in case of incident. - Incorrect identification of Dangerous Goods Classes may cause energy hazards - Particularly volatile materials: Some materials require extra segregation which staff will not be aware of unless the MSDS is referred to	3	5	**15**	4	Safety Procedures: SP6-4 HHW Receival and Handling SP6-6 HHW Records Procedures SP6-7 Hazardous Substances	1	4	**4**	Further controls not considered reasonable or practicable: review if situation changes	Manager Operations	Ongoing application.
WHSO15	**Biological hazards** - viruses (e.g. HIV AIDS, Ross River, COVID) - bacteria (e.g. Hepatitis A, B & C); - Animal bites and stings	3	5	**15**	5	Workplace hygiene, sanitation and infection control practices. Training programs on biohazards safety. Personal protective equipment - gloves, masks, respirators as required. Safety Procedure SP3-5 First Aid Procedure	1	4	**4**		Manager Operations	Ongoing application.
WHSO16	**Asbestos exposure** - inadequately wrapped/contained friable pieces - illegally dumped/concealed material - failure to identify asbestos	2	4	**8**	4	Asbestos Management Plan. Safety procedures: SP6-1 Asbestos Acceptance and transfer Procedure SP6-2 Loose asbestos containment Procedure	1	4	**4**		Manager Operations	Ongoing application.
	Energy Hazards											
WHSO17	**Fire Hazards** - Fire in silo - Fire in Transfer Station Building - Fire in bin truck - Greenwaste Area - Bushfire - Explosion of oxy acetelene welding tank - Work activity: grinding, welding, striking	4	5	**20**	5	Safety Procedures: SP4-1 Fire Prevention Procedure SP4-2 Fire at Transfer Station Procedure SP4-3 Fire at Greenwaste Area SP4-4 Fire in Silo Onsite Procedure SP4-5 Fire in Customer Load Procedure SP4-6 Fire Adjacent to Site Procedure	1	5	**5**		Manager Operations	Weekly at management meetings. Fortnightly at Toolbox Meetings. Quarterly at Safety Committee meetings
WHSO18	**Electrical hazards (Operational)** - Injury via electrical arc from high voltage powerlines - appliance connections fail - water ingress - underground works interfering with cabling	3	4	**12**	4	Safety Procedure SP7-4 Electrical Safety Procedure	1	4	**4**		Manager Operations	Weekly at management meetings. Fortnightly at Toolbox Meetings. Quarterly at Safety Committee meetings
	Height Risks											
WHSO19	**Slips and Trips** (Operational) on wet or dry transfer Station floor	3	3	**9**	4	Routine cleaning done throughout the day.	1	3	**3**		Manager Operations	Ongoing application.

WHSO20	**Fall by personnel** - into silo, static compactor chute, silo placement area, push-up wall edge - down steps	3	5	**15**	5	Safety Procedures: SP5-1 Working at Heights Procedure SP5-2 Fall Rescure Plan	1	5	**5**	Further controls not considered reasonable or practicable: review if situation changes	Manager Operations	Ongoing application.
WHSO21	**Drop from Height** - equipment fall from elevation - hand tools dropped	3	3	**9**	4	Safe work practices to be observed.	2	2	**4**		Manager Operations	Ongoing application.
WHSO22	**Lifting materials** - material dropped from material handling equipment injuring person or property.	3	5	**15**	5	Observance of safe work procedure.	1	5	**5**	Further controls not considered reasonable or practicable: review if situation changes	Manager Operations	Ongoing application
	Environmental Hazards											
WHSO23	**Airborne Particles** - dusty environment, particularly in transfer station building when trucks tip, causing health risk to staff due to continued exposure - airborne pathogens through airconditioning	3	4	**12**	4	Safety Procedure SP2-2 Personal Protective Equipment	1	4	**4**	Further controls not considered reasonable or practicable: review if situation changes	Manager Operations	Ongoing application.
WHSO24	**Confined spaces work** - unidentified confined spaces being accessed - weighbridge maintenance - silo bin repair	3	5	**15**	5	Specialist contractor performs the works on the weighbridge. JSA completed before any work takes place. Confirmed space permit completed. Training records of contractors reviewed. Silo / Skip bin repairs carried out by experience contrcators and / or staff. Permit to work completed prior to work beginning.	1	5	**5**	Further controls not considered reasonable or practicable: review if situation changes	Manager Operations	Ongoing application.
WHSO25	**Adverse weather conditions impacting health and safety** - Working in hot environments - Thermal discomfort and dehydration - Sunburn, heatstroke - Skin cancer risk - lightning strikes - uncontrolled movement of structures (wind)	3	4	**12**	4	Safety Procedures: SP2-1 Workplace Amenities Procedure SP2-2 Personal Protective Equipment SP2-5 Fatigue Management Procedure	1	4	**4**	Further controls not considered reasonable or practicable: review if situation changes	Manager Operations	Ongoing application.

6 HUMAN RESOURCE MANAGEMENT

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
Risk code	**Risk**	**Likelihood (1–5)**	**Impact (1–5)**	**Initial risk score**	**Target risk score**	**Current controls**	**Likelihood after controls (1–5)**	**Impact after controls (1–5)**	**Residual risk score**	**Actions required**	**Risk owner**	**Review (timeframe and process)**
STRATEGIC LEVEL RISKS												
SHR1	Inability to attract suitably skilled staff due to: - insufficient remuneration packages; - poor reputation/culture; - competitive employment market; - nature of activity; - limited professional development opportunity.	3	3	**9**	4	Market based review of wages and salaries. Adherance to recruitment and selection procedures. Use of WALGA HR advice.	2	2	**4**		CEO	Continuously
SHR2	Inability to retain staff / high turnover due to: - limited professional development opportunity; - poor culture; - poor recognition of achievement; - payroll and other entitlement discrepancies; - inconsistent management practices; - mismatch between expectation of employee and opportunities available; - competitive alternative employment opportunities.	3	4	**12**	4	Implementation of best-practice leadership and management. Observance of Codes of Conduct. Application of workplace management safety procedures. Availability of Employee Assistance Program.	1	3	**3**		CEO	Continuously
SHR3	Inefficient or inability to delivery services effectively due to lack of organisational knowledge.	3	3	**9**	4	Application of staff retention controls. Diligent recording and record keeping practices. IT systems maintenance.	1	2	**2**		CEO	Continuously
SHR4	Lack of critical thinking that challenges norms, leading to missed opportunities or threats.	2	3	**6**	4	Engage with industry associations and undertake literature reviews.	1	2	**2**		CEO and Managers	Continuously
SHR5	Gaps in capacity and capability to fulfill the full scope of functional obligations.	3	3	**9**	4	Workforce Plan to identify skill requirements and provide resource capacity as affordable to meet requirements. Draw on industry associations, member Council advice and external assistance to offset gaps.	2	2	**4**		CEO	Annual review of Workforce Plan
OPERATIONAL LEVEL RISKS												
OHR1	Inconsistent interpretation and application of entitlements or outdated knowledge of industrial relations provisions, leading to dissatisfaction and exposure to Industrial Relations Commission interventions.	3	2	**6**	4	Maintain industry awareness through WALGA circulars, LGIS advice and peer relationships.	2	2	**4**		CEO	Ongoing
OHR2	Industrial relations arrangements changing, leading to uncertainty or inadvertent non-compliance and unbudgeted cost exposure.	3	2	**6**	4	Maintain industry awareness through WALGA circulars, LGIS advice and peer relationships.	2	2	**4**		CEO	Ongoing
OHR3	Inability to provide adequate advisory and advocacy services due to failure to maintain currency of industry knowledge.	3	3	**9**	4	Maintain membership with professional associations. Monitoring legislative amendments. Monitor industry trends.	2	2	**4**		CEO and Directors	Ongoing
OHR4	Inconsistent application of performance management and exposure to Industrial Relations Commission interventions.	3	3	**9**	4	Maintain consistent management standards. Adherence to industrial relations guidelines. Adherence to Code of Conduct	1	2	**2**		CEO	Ongoing
OHR6	Inconsistent process and controls in payroll	4	4	**16**	4	Application of internal payroll process and controls consistent with Financial Management Regulation.	2	2	**4**		CEO	Annually

OHR7	Lack of clarity in roles and responsibilities	4	4	**16**	4	Position descriptions are in place for all roles. Position descriptions are reviewed before vacant positions are advertised. Position descriptions are included in job application packs.	2	2	**4**		CEO	Ongoing
OHR8	Skills and abilities of staff not harnessed and optimised for organisational productivity.	3	2	**6**	4	Encourage a collaborative leadership style that provides optimal engagement of staff.	1	2	**2**		CEO	Ongoing
OHR9	Over-reliance in single individuals to undertake critical functions, compromising business continuity.	3	3	**9**	4	Ensure procedure manual thoroughly documents work functions. Effective record keeping and filing.	2	2	**4**		CEO	Ongoing
OHR10	Disruptive Union interventions due to staff dissatisfaction.	3	3	**9**	4	Effective communications with staff. Consistent application of management practices across organisation. Adherence to industrial relations requirements. Effective complaint management and resolution processes.	1	2	**2**		CEO	Ongoing
OHR11	Induction processes not adequately undertaken, compromising staff ability to observe standards and performance roles.	2	3	**6**	4	Documented induction processes applied to staff and contractor inductions to organisation and site respectively.	1	2	**2**		CEO	Ongoing
OHR12	Staff exit processes not capturing value-add understandings to reinforce good practice and address poor practice.	2	2	**4**	4	Undertake interviews of employees leaving the organisation utilising structured interview proforma	1	2	**2**		CEO	Ongoing

7 OPERATIONAL RISK

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
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STRATEGIC LEVEL RISKS												
SO1	Inability to provide operational services at the Recycling Centre due to: - cease work order issued by regulator; - inadequate preventative maintenance causing failure; - plant and equipment not fit for purpose and failing; - external environmental factors such as offsite bush fire; - onsite fire or hazardous material exposure; - unavailability of staff resource; - other catastrophic event	3	5	**15**	4	Long Term Asset Management Plan reviewed annually. Due allowance in budget for maintenance and asset replacement. Regular inspection and maintenance of critical plant and equipment. Maintenance of a stock of crtitical spare parts. Replacement of assets upon reaching the end of their useable life. Alternative waste receival sites managed by third parties.	2	2	**4**		CEO	Ongoing managements.
SO2	Operational risks are not identified due to lack of application of resources to risk management.	3	5	**15**	4	Diligent risk assessment processes incorporated into business practices.	2	2	**4**		CEO	Ongoing structured risk managements.
OPERATIONAL LEVEL RISKS												
OO1	Inadequate oversight of statutory obligations leading to non-compliance with operational approvals, including DWER site licence.	2	4	**8**	4	Regular site inspections; monitoring of waste throughput; compliance inspections by DWER.	1	3	**3**		CEO	Ongoing management.
OO2	Inability to handle waste due to single points of plant failure, namely: - NCH silo system - weighbridge and associated data management - mobile plant - compactors	4	4	**16**	4	Regular (weekly) inspection and preventative maintenance; renewal or replacement. **260127 Likelihood proposed to be increased due to reliance on single compactor. Change from target of 2 to actual of 3?**	2	3	**6**		Manager Operations	Weekly
OO3	Risks associated with project (non-recurring) activities occuring simultaneously with ongoing operational activities.	3	3	**9**	4	Dedicated project management personnel to coordinate activities, including access exclusion areas and traffic management.	2	2	**4**		Manager Operations	Ongoing management.
OO4	Electricity outage - leading to loss of services	2	3	**6**	4	Maintain a emergency generator on site.	2	2	**4**		Manager Operations	Annually
OO5	Critical contracted service provider failure, leading to: - unavailable waste processing capacity - inability to haul waste off-site - inability to undertake verge side collections	2	4	**8**	4	Monitoring of contractor performance. Transition to partial self-haul capability to maintain business continuity. Advance market testing for service provision.	2	2	**4**		CEO and Manager Operations	Ongoing management.
OO6	Unauthorised and/or malicious access to site during and after hours causing damage to infrastructure, interuption to opeations and incurring cost.	5	1	**5**		Modern security fencing and gates. Remote control operation of gates installed. Close circuit televsion coverage of the whole site installed. Alarm system installed. Removal of attractive e-waste and other items.	5	1	**5**	Further review of perimeter barriers and security monitoring.	CEO and Manager Operations	Ongoing management.
OO7	Offsite greenwaste handling site not available for use, constraining activity at Recycling Centre.	4	3	**12**	4	Ongoing investigations of alternative site options pending DiCOM plant removal.	3	3	**9**	Preparatory work on Recycling Centre site to accommodate greenwaste handling at short notice.	Manager Operations	Within 6-months.

8 INFORMATION TECHNOLOGY

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
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STRATEGIC LEVEL RISKS												
SIT1	Loss of access to Digital Information (through hardware or connectivity failure, malicious actors, human error, software error etc)	5	4	**20**	6	Reputable and experienced IT provider. All digital information is cloud based. Technical controls in place (firewalls, monitoring, access controls, MFA) Backups/multiple copies made regularly to govt standards. Internet links through FTTP with mobile phone signal / remote working as backups. E8 assessment underway. Staff training (risks, IT governance, monitoring, testing).	3	2	**6**	Update Cyber Security/ DRP and relevant policies plan. Achieve E8 Maturity Level 1.	CEO	1 year
SIT2	Unauthorised access to WMRC data/ software (through malicious actors, human error, data corruption etc) resulting in corruption, breach of confidentiality and misuse of information.	5	4	**20**	6	All digital information cloud-based. Reputable and experienced IT provider's technical controls (firewalls, access controls, backups) are regularly updated and tested. E8 assessment underway. Staff training (risks, IT governance, monitoring, testing). Cyber security plan /DRP in place.	2	3	**6**	Update Cyber Security/ DRP and relevant policies plan. Achieve E8 Maturity Level 1. Procurement activities to include Cyber Security requirements	CEO	1 year
OPERATIONAL LEVEL RISKS												
OIT1	Hardware and/or software failure/ incompatability	3	3	**9**	4	Hardware replaced on an as needed basis. Hardware purchased through IT provider for quality assurance. Software installation controls.	2	3	**6**	Hardware replacement policy	Manager Corporate Services	2 years
OIT2	Financial/ business continuity risks arising from loss of access to IS or unaurthorised access to IS.	3	3	**9**	4	Cyber Security/ disaster recovery plans and policies. Site procedures. Insurance policy.	2	3	**6**	Update Cyber Security/ DRP and relevant policies plan.	Manager Corporate Services	2 years
OIT3	Legal non compliance (eg with State Records Act, Privacy Act etc)	4	2	**10**	4	Recordkeeping plan E8 assessment.	2	2	**4**	Update Recordkeeping plan	Manager Corporate Services	2 years

9 REPUTATIONAL

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
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STRATEGIC LEVEL RISKS												
SR1	Poor decision-making leading to adverse publicity	3	5	**15**	4	Thorough briefings, reports and recommendations made to Council; good planning and consultation with stakeholders; and rigorous budget management and cost control; rigerous due diligence assessments. External advice sought where appropriate.	2	2	**4**		CEO	Ongoing.
SR2	Perception of poor executive leadership	3	3	**9**	4	Governance of the Council, performance management, communication structures and working relationships.	1	3	**3**		Chair and CEO	Ongoing.
SR3	Public statements misaligned with adopted strategic position of the organisation, or misuse of information	2	3	**6**	3	Consistent communications through all platforms (website, presentations, written material) aligning with corporate strategy. Public communications approved by Chair or CEO.	1	3	**3**		Chair and CEO	Ongoing.
SR4	Systemic failure of resource recovery	1	4	**4**	4	Waste separation practices and contracted processing services to optimise resource recovery. Corporate communications backed by data/science/research.	1	3	**3**		CEO	Ongoing.
SR5	Public scepticism over effectiveness of resource recovery.	3	3	**9**	6	Timely and evidence based communications that align with strategic position of the organisation. Communications and education initiatives.	2	2	**4**		Chair	Ongoing.
SR6	Perception of excessive cost escalation.	3	4	**12**	6	Advance preparation of contracted service capacity. Adjust positioning to reduce exposure: 1. alternative haulage or processing suppliers; and/or 2. increase in-house service provision reducing exposure to contract market.	2	3	**6**	Ongoing monitoring of market conditions.	CEO	Ongoing.
SR7	Perceived unreasonable ongoing excessive impact on local road network	1	4	**4**	3	Relationship management with City of Nedlands. Advocacy to maintain road classifications and associated design standards to accommodate heavy vehicle movements	1	3	**3**		CEO	Ongoing.
OPERATIONAL LEVEL RISKS												
OR1	Poor quality service by staff leading to adverse publicity.	3	4	**12**	4	Products and services aligned to customer needs and the objectives set out in the Strategic Community Plan. Emphasis on maintaining a WMRC customer service culture. Customer service charter and customer feedback processes in place	1	3	**3**		CEO	Ongoing.
OR2	Poor service standards and contractor behaviours by contractors.	3	4	**12**	4	Specification of performance standards within contracts. Performance management of contractors against obligations.	2	2	**4**		CEO	Ongoing.

OR3	Public amenity at Recycling Centre compromised due to noise, litter, odour, vermin and the like.	3	3	**9**	4	Daily and weekly work programs at the Recycling Centre structured to manage litter. Ongoing vermin control including baiting and litter containment. Hours of operation of noise generating activities complying with Noise Abatement Regulations.	1	2	**2**		CEO	Ongoing.
OR4	Adverse health and safety outcome.	1	5	**5**	3	Workplace Health and Safety risk controls applied.	1	3	**3**		CEO	Ongoing.
OR5	Downstream processors with perceived non-ethical practices.	1	3	**3**	2	Thorough due diligence assessment of prospective contractors before appointment.	1	2	**2**		CEO	Ongoing.
OR6	Public scepticism over validity of resource recovery and consequential implications for the organisations efforts.	2	3	**6**	4	Education programs delivered by the Communications and Education team including currency of website information.	2	2	**4**		CEO	Ongoing.
OR7	Organisational activities either support or are contrary to non-government organisation ambitions	1	3	**3**	3	Currency and completeness of website information. Evidence-based information provided.	1	2	**2**		CEO	Ongoing.
OR8	Public criticism by stakeholders (eg Member Council staff/elected members)	4	2	**8**	4	Regular communications on several levels including bulletin, CEOAC and OCM minutes, presentations, meetings, joint projects	1	2	**2**		CEO	Ongoing.
OR9	Creating unnecessary controversy	2	4	**8**	4	All public communications through CEO and Chair with expert advice where appropriate.	1	4	**4**		CEO	Ongoing.
OR10	Operations or operational incident leads to adverse publicity including complaints or injury, environmental damage, noise, pollution etc	3	3	**9**	4	WHS protocols followed strictly, license conditions adhered to, incident control measures in place, access to PR professionals maintained	2	2	**4**		CEO	Ongoing.

PROJECT - RC Renewal Plan

PRECIS - Development of a new Layout Plan for Renewal of the Recycling Centre capturing intended service offerings, location of these offerings and possible staging options

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P1	The indicative staging of new developments within the Renewal Plan causes unacceptable disruption to services	3	4	**12**	Low Risk appetite for this matter (Operational), hence target risk score would be **LOW** (4 or less)	Nil at this stage	3	4	**12**	Project Steering Group to specifically review staging options during development of the Renewal Plan to test this risk	Manager Operations	Prior to adoption of Renewal Plan - Project Steeting Group
P2	Adopted Renewal Plan preserves land allocation for new activities which are unlikely to achieve Regulatory Approval leading to inefficiences	2	4	**8**	Low Risk appetite for this matter (Governance), hence target risk score would be **LOW** (4 or less)	Nil at this stage	2	4	**8**	Project Steering Group to specifically test Regulatory Approval likelihood of new activities during development of the Renewal Plan	Manager Operations	Prior to adoption of Renewal Plan - Project Steeting Group
P3	WMRC adopts new Renewal Plan however fails to undertake timely Business Plan requirements in line with s3.59 of Local Government Act	2	2	**4**	Low Risk appetite for this matter (Governance), hence target risk score would be **LOW** (4 or less)	Nil at this stage	2	2	**4**	Development of Business Plan to be undertaken during Renewal Plan project, advertised and adopted	CEO	Prior to adoption of Renewal Plan - Project Steeting Group
P4	Adopted Renewal Plan is contrary to ourcomes set out in either Strategic Community Plan, Corporate Business Plan or Waste Plan due to lack of Leadership oversight	3	4	**12**	Low Risk appetite for this matter (Strategic), hence target risk score would be **LOW** (4 or less)	Nil at this stage	3	4	**12**	Project Steering Group to test Renewal Plan as it evolves against relevant Strategic Planning Framework and consider revising SCP, CBP or Waste Plan as necessary	CEO	Prior to adoption of Renewal Plan - Project Steeting Group
P5	Expenditure in developing the Renewal Plan exceeds allocated budget by >20%	3	2	**6**	Given the relatively low value of this Expenditure, there is a Moderate Risk Appetite (Financial) and as such target risk score would be **MEDIUM** (between 6 & 8)	Nil at this stage	3	2	**6**	Project Manager monitors budget, reporting variances to Project Steering Group	Project Manager	Ongoing
P6	Developing a Renewal Plan generates localised community and landowner criticism fearful of increased activation of the RC site	4	3	**12**	The Risk appetite assessment would be that Council has a High Appetite (Reputational) for this sort of risk given the benefits however would prefer lower risk if possible. As such a target risk score of **MEDIUM** (between 6 & 8)	Nil at this stage	4	3	**12**	Development and implement Community Engagement Plan	Manager Community and Education	At commencement of design team being engaged - reviewed by Project Steering Group
P7	Aspects of adopted Renewal Plan require new staff working arrangements or skill sets leading to concerns from existing workforce	3	3	**9**	The Risk appetite assessment would be that Council has a High Appetite (HR Management) for this sort of risk given the benefits. As such a target risk score of **HIGH** (between 9 & 15)	Nil at this stage	3	3	**9**	Engagement with staff during the design process to keep them informed and aware	Project Manager	Ongoing

PROJECT - RC Bunker Works

PRECIS - Installation of walls within RC Bunker and procurement of waste trailers to allow decommisioning of NCH Silo system for residual waste

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
Risk code	**Risk**	**Likelihood (1–5)**	**Impact (1–5)**	**Initial risk score**	**Target risk score**	**Current controls**	**Likelihood after controls (1–5)**	**Impact after controls (1–5)**	**Residual risk score**	**Actions required**	**Risk owner**	**Review (timeframe and process)**
P1	The appointed civil works contractor fails to complete the works in a timely fashion extending the costs and risks of the NCH silo process	2	4	**8**	Low Risk appetite for this matter (Operational), hence target risk score would be **LOW** (4 or less)	Contractor works program provided, monitoring of progress by Project Manager	2	4	**8**	Continue to drive program such that Likelihood becomes rare	Project Manager	Weekly with Manager Operations
P2	The new waste trailers are late in delivery extending the costs and risks of the NCH silo process	2	4	**8**	Low Risk appetite for this matter (Operational), hence target risk score would be **LOW** (4 or less)	Contractor works program provided, monitoring of progress by Project Manager	1	4	**4**	Nil	Project Manager	Weekly with Manager Operations
P3	Procurment of the necessary prime mover is delayaed extending the costs and risks of the NCH silo process	2	2	**4**	Low Risk appetite for this matter (Operational), hence target risk score would be **LOW** (4 or less)	Prime Mover delivered. Risk Mitigated	1	1	**1**	Nil	Manager Operations	Risk Closed
P4	Lack of WMRC drivers to use new prime mover and trailer to deliver waste extends the costs and risks of the NCH process	1	4	**4**	Low Risk appetite for this matter (Operational), hence target risk score would be **LOW** (4 or less)	Adequaete staff resources in place	1	4	**4**	Nil	Manager Operations	Risk Closed
P5	Actual project expenditure exceeds approved budget by >10%	2	3	**6**	There is a Moderate Risk Appetite (Financial) and as such target risk score would be **MEDIUM** (between 6 & 8)	Council approvals include contgingency amounts. Variations monitored by Project Manager and approved by Manager	1	3	**3**	Project Manager monitors budget, reporting variances to Manager, Operations	Project Manager	Ongoing
P6	WMRC staff, other contractors, visitors or public injurred during bunker works due to unsafe work practices of works contractor	2	5	**10**	Low Risk appetite for this matter (Reputational and Governance), hence target risk score would be **LOW** (4 or less)	Contractor to develop Work Method Statements and JSA for approval prior to works	1	4	**4**	Review plans, discyss with RC staff	Project Manager	Daiily during works phase

PROJECT - DiCOM Deconstruction Works

PRECIS - Co-ordination of works with DiCOM and their contractors for removal of DiCOM facilities from Recycling Centre

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
Risk code	**Risk**	**Likelihood (1–5)**	**Impact (1–5)**	**Initial risk score**	**Target risk score**	**Current controls**	**Likelihood after controls (1–5)**	**Impact after controls (1–5)**	**Residual risk score**	**Actions required**	**Risk owner**	**Review (timeframe and process)**

PROJECT - MSW and FOGO: Second Waste Compactor

PRECIS - Installation of a second compactor at the Waste Bunker to provide necessary capability for loading an despatch of MSW & FOGO waste and final retirement of NCH Silo System. Project in line with Business Case end

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
Risk code	**Risk**	**Likelihood (1–5)**	**Impact (1–5)**	**Initial risk score**	**Target risk score**	**Current controls**	**Likelihood after controls (1–5)**	**Impact after controls (1–5)**	**Residual risk score**	**Actions required**	**Risk owner**	**Review (timeframe and process)**
P1	Council do not endorse Business Case effectively ceasing the Project	1	5	**5**	Inaction will perpuate an Operational Risk of which Council has **LOW** tolerance for.	Robust analysis of the problem, solutions , anticpated costs and funding pathway	1	1	**1**	Business Case approved April 2026 OCM	Projects Lead	Closed
P2	Tender pricing outcomes are above Budget	3	4	**12**	Low Risk appetite for this matter (Financial), hence target risk score would be **LOW** (4 or less)	Consultation with potential suppliers prior to preparing Budget, allocation of suitable Contingency	2	2	**4**	Nil	Projects Lead	At tender outcome
P3	Construction Activites significantly disrupt RC Operations	2	4	**8**	Low Risk appetite for this matter (Operational), hence target risk score would be **LOW** (4 or less)	Nil at this stage	2	4	**8**	Develop clear construction managemnent expectations during tender and assess tenders based on response	Projects Lead	At tender outcome
P4	Project fails to provide operational capacity for waste management	2	5	**10**	Low Risk appetite for this matter (Operational), hence target risk score would be **LOW** (4 or less)	Review of total capacity with two compactors and outloading patterns support premise that this Project will meet expectations	1	4	**4**	No further action at this stage	Manager Operations	Upon Commissioning

PROJECT - X

Give each risk a code. This makes it easy to refer to it with others (eg in a meeting).	Identify your risks.	Analyse your risks by scoring the likelihood of them happening and the potential impact.			Think about your appetite for these risks. Give each one a target risk score that reflects the level of risk you'd be happy to accept.	List the controls that you **currently have in place** to reduce and control each risk.	Rescore the likelihood and potential impact of each risk **with the controls in place**.			If residual risk score is higher than target risk score, list the additional actions needed to reduce the risk further.	For ongoing assurance that risks are being controlled effectively, record who is responsible for each risk and when/how they should review it.	
Risk code	**Risk**	**Likelihood (1–5)**	**Impact (1–5)**	**Initial risk score**	**Target risk score**	**Current controls**	**Likelihood after controls (1–5)**	**Impact after controls (1–5)**	**Residual risk score**	**Actions required**	**Risk owner**	**Review (timeframe and process)**
P1				0					0			
P2				0					0			