



30 January 2023

Contact for apologies: admin@fleurieuaquaticcentre.com.au

Dear Member,

Notice of Meeting

Notice is hereby given pursuant to the Fleurieu Regional Aquatic Centre Authority Charter and Section 87(7) of the Local Government Act, 1999, as amended that a Meeting of the **Fleurieu Regional Aquatic Centre Authority** has been called for:

Date: Friday 3rd February 2023

Time: 9:30 am

Place: Large Meeting Room, Alexandrina Council

Please find enclosed a copy of the Agenda for the meeting.

Yours faithfully

Andrew Baker
Executive Officer

Date & Time: Friday 3 February 2023 at 09:30 am

Location: Alexandrina Council – Large Meeting Room

1. Attendance

- Steve Mathewson (Chairperson)
- Mark Easton (Independent Member)
- Vicki Tomlinson (Independent Member)
- Councillor Angela Schiller (City of Victor Harbor)
- Councillor Lou Nicholson (Deputy, Alexandrina Council)

2. Apologies

- Councillor Margaret Gardner (Alexandrina Council)

3. Conflict of Interest

4. Minutes of Previous Meeting

- 4.1. Adoption and Noting of Minutes

5. Business Arising

- 5.1. Board Annual Work Plan

6. Verbal Report

- 6.1. Executive Officer Update

7. Reports

- 7.1. A&RMC Annual Activity Report 2021-2022
- 7.2. RDA Public Transport Survey
- 7.3. Resolutions Register – A&RMC
- 7.4. Risk Management Framework

8. Confidential Reports

- 8.1. YMCA Quarterly Performance Report – Q2
- 8.2. Budget Review 2022-2023 – Q2
- 8.3. In Confidence Resolutions Register – A&RMC
- 8.4. Adoption and Noting of Confidential Minutes
- 8.5. A&RMC Self-Assessment Review
- 8.6. FRACA Resourcing

9. Meeting Close

10. Next Meeting – Friday 31 March 2023, City of Victor Harbor - Council Chamber

To: FRAC Authority Board

From: Andrew Baker - Executive Officer

Subject: 4.1 Adoption and Noting of Minutes

Date: 3 February 2023

References: Nil

Consultation: Nil

Attachments: 4.1a Unconfirmed Authority Board Minutes – 16 December 2022
4.1b Unconfirmed A&RMC Minutes – 20 January 2023

Purpose

The purpose of this report is to provide the Board with a copy of the public minutes of the meetings held on the following dates for review:

- 16 December 2022 – Ordinary Board Meeting
- 20 January 2023 – Ordinary Audit & Risk Management Committee Meeting

Discussion

The minutes of the Audit & Risk Management Committee meeting held on 20 January 2023 contain recommendations to the Authority Board relating to the following items:

- A&RMC Annual Work Plan 2022 – Risk Management Assistance provided by the A&RM Committee to be added to the Workplan.
- A&RMC Membership – Alexandrina Council Representative.
- Resolutions Register
- Risk Management Assistance
- External Audit Recommendations (update on progress)

Recommendation

The Authority Board:

- *adopt the public minutes of the Board meeting held on 16 December 2022; and*
- *note the public minutes of the Audit & Risk Management Committee meeting held 20 January 2023.*

Date & Time: Friday 16th December 2022, 9:30am
Location: Large Meeting Room, Alexandrina Council; Webex

Meeting Opened: 9.58 am

1. Present

Steve Mathewson	Independent Chairperson
Mark Easton	Independent Member
Vicki Tomlinson	Independent Member
Angela Schiller	Elected Member, City of Victor Harbor
Margaret Gardner	Elected Member, Alexandrina Council

In Attendance

Andrew Baker	Executive Officer, FRACA
Jacqui Clarke	Fleurieu Health & Wellbeing Pty Ltd
Steven Wright	Fleurieu Health & Wellbeing Pty Ltd
Ken Sawers	Fleurieu Health & Wellbeing Pty Ltd
James Lomax	Regional Manager, YMCA

2. Apologies

Stewart Burns	Elected Member, City of Victor Harbor
Lou Nicholson	Elected Member, Alexandrina Council

3. Conflicts of Interest

Nil

4. Verbal Report

New Board Members – Welcome

5. Minutes of Previous Meeting

5.1. Adoption of Minutes

Motion: FRACA00560
Moved: Cr Margaret Gardner
Seconded: Mark Easton

The Authority Board:

- *adopt the public minutes of the Board meetings held on 30 September and 17 November 2022; and*
- *note the public minutes of the Audit & Risk Management Committee meeting held 1 December 2022 (unconfirmed).*

CARRIED

6. Business Arising

6.1. Board Annual Work Plan

Motion: FRACA00561
Moved: Vicki Tomlinson
Seconded: Mark Easton

The Authority Board:

- *receive and note the updated and amended Annual Work Plan 2022 of the Board;*
- *note the amended timeframes of the listed Work Plan deliverables and that an updated plan will be presented after the completion of the review; and*
- *approve the extension of administrative services to 25 hours per week until outcomes of the workplan review are finalised and request the Executive Officer to undertake necessary communication with Alexandrina Council to procure the extra service hours.*

CARRIED

7. Reports

7.1. Policy Review – Unsolicited Proposals

Motion: FRACA00562
Moved: Cr Angela Schiller
Seconded: Vicki Tomlinson

The Authority Board adopts the policy Unsolicited Proposals v2.0 as presented at the meeting held 16 December 2022.

CARRIED

7.2. RDA Public Transport Study

Motion: FRACA00563
Moved: Cr Angela Schiller
Seconded: Cr Margaret Gardner

The Authority Board

- *receive and note the report;*
- *support the lodgement of a submission by the Executive Officer with the RDA (draft to be presented to the January Board meeting); and*
- *support further engagement with the RDA to advocate for improved community transport options for the Fleurieu Aquatic Centre in alignment with the Authority's Strategic Plan 2023-2032 and 3 Year Business Plan 2022-2025.*

CARRIED

7.3. Treasury Report

Motion: FRACA00564
Moved: Mark Easton
Seconded: Vicki Tomlinson

The Authority Board:

- *receive and note the report; and*
- *request the Executive Officer review future investment options for reconsideration of the Board once outcomes are known from the Long-Term Financial Plan and Asset Management Plan.*

CARRIED

7.4. Budget Review 2022-2023 – Q1

Motion: FRACA00565
Moved: Vicki Tomlinson
Seconded: Mark Easton

The Authority Board:

- *for the period ending 30 September 2022 adopt a Budget Review with an operating deficit of \$742,083 and estimated cash at end of reporting period of \$627,635; and*
- *recommend the Budget Review as at 30 September 2022 to Constituent Councils with no amendment to Council contributions at this stage, noting that an increase in electricity prices will be included in the mid-year budget review with the impact on contributions to be quantified.*

CARRIED

8. Confidential Reports

8.1. Unsolicited Proposal

Motion: FRACA00566
Moved: Cr Margaret Gardner
Seconded: Mark Easton

Pursuant to section 90(2) of the Local Government Act 1999, the Authority orders that all members of the public be excluded, with the exception of the Executive Officer, Jacqui Clarke, Steven Wright and Ken Sawers, on the basis that it will receive and consider item 8.1 Unsolicited Proposal.

The Authority is satisfied, pursuant to section 90(3)(d) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (i) *could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (ii) *would, on balance, be contrary to the public interest.*

Accordingly, the Authority is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential to prevent the disclosure of commercial information of a confidential nature (not being a trade secret).

CARRIED

8.2. Fleurieu Aquatic Centre Access Audit

Motion: FRACA00568
Moved: Vicki Tomlinson
Seconded: Cr Angela Schiller

Pursuant to Section 90(2) of the Local Government Act 1999, the Board orders that the public be excluded from the meeting, with the exception of the Executive Officer and James Lomax (YMCA), on the basis it will receive and consider item 8.2 Fleurieu Aquatic Centre Access Audit.

The Board is satisfied that, pursuant to Section 90(3)(d) of the Act, that the information to be received, discussed, or considered in relation this agenda item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (i) *could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (ii) *would, on balance, be contrary to the public interest.*

Accordingly, the Board is satisfied that the principle that the meeting be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential.

CARRIED

8.3. YMCA Quarterly Performance Report – Q1

Motion: FRACA00570
Moved: Cr Margaret Gardner
Seconded: Mark Easton

Pursuant to Section 90(2) of the Local Government Act 1999, the Board orders that the public be excluded from the meeting, with the exception of the Executive Officer and James Lomax (YMCA), on the basis it will receive and consider item 8.3. YMCA Quarterly Performance Report – Q1.

The Board is satisfied that, pursuant to Section 90(3)(d) of the Act, that the information to be received, discussed, or considered in relation this agenda item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (iii) could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (iv) would, on balance, be contrary to the public interest.*

Accordingly, the Board is satisfied that the principle that the meeting be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential.

CARRIED

8.4. Asset Purchases & Disposals

Motion: FRACA00572
Moved: Vicki Tomlinson
Seconded: Cr Margaret Gardner

Pursuant to Section 90(2) of the Local Government Act 1999, the Board orders that the public be excluded from the meeting, with the exception of the Executive Officer and James Lomax (YMCA), on the basis it will receive and consider item 8.4. Asset Purchases & Disposals.

The Board is satisfied that, pursuant to Section 90(3)(d) of the Act, that the information to be received, discussed, or considered in relation this agenda item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (v) could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (vi) would, on balance, be contrary to the public interest.*

Accordingly, the Board is satisfied that the principle that the meeting be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential.

CARRIED

8.5. Energy Efficiency

Motion: FRACA00574
Moved: Cr Margaret Gardner
Seconded: Mark Easton

Pursuant to Section 90(2) of the Local Government Act 1999, the Board orders that the public be excluded from the meeting, with the exception of the Executive Officer, on the basis it will receive and consider item 8.5. Energy Efficiency.

The Board is satisfied that, pursuant to Section 90(3)(d) of the Act, that the information to be received, discussed, or considered in relation this agenda item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (vii) could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (viii) would, on balance, be contrary to the public interest.*

Accordingly, the Board is satisfied that the principle that the meeting be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential.

CARRIED

Mark Easton left the meeting at 12:35pm

8.6. Adoption of Confidential Minutes

Motion: FRACA00576
Moved: Cr Margret Gardner
Seconded: Vicki Tomlinson

Pursuant to section 90(2) of the Local Government Act 1999, the Authority orders that all members of the public be excluded, with the exception of the Executive Officer, on the basis that it will receive and consider item 8.6. Adoption of Confidential Minutes.

The Board is satisfied, pursuant to section 90(3)(d) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (i) could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (ii) would, on balance, be contrary to the public interest.*

Accordingly, the Board is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential.

CARRIED

8.7. Asset Revaluation

Motion: FRACA00578
Moved: Cr Angela Schiller
Seconded: Vicki Tomlinson

Pursuant to section 90(2) of the Local Government Act 1999, the Authority orders that all members of the public be excluded, with the exception of the Executive Officer, on the basis that it will receive and consider item 8.7. Asset Revaluation.

The Board is satisfied, pursuant to section 90(3)(d) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (i) could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (ii) would, on balance, be contrary to the public interest.*

Accordingly, the Board is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential.

CARRIED

9. Next Meeting: 27 January 2023, City of Victor Harbor - Council Chambers.

10. Meeting Closed: 1.05pm

It should be noted that in accordance with the legal advice received by the Authority dated 26 August 2020, all reports, minutes, attachments, and associated documents from items deliberated by the Authority in confidence, will automatically remain in confidence in perpetuity, unless a resolution of the Board is made to release such items. Items may also be removed from confidence under delegation. At the conclusion of each agenda item that is considered by the Authority in confidence, the default position is for the return to open / public meeting, until such time as a further resolution is made to return to confidential meeting procedures.

Audit & Risk Management Committee

Date & Time: Friday 20 January 2023, 1.30pm
Location: Large Meeting Room, Alexandrina Council

Meeting Opened: 13:34 pm

1. Present

Peter van der Eijk	Independent Chairperson
Claudia Goldsmith	Independent Member
Vicki Tomlinson	Independent Member
Trish Kirkland	Acting General Manager Resources, Alexandrina Council

In Attendance

Andrew Baker	Executive Officer, FRACA
Danielle Leckie	Administration Officer, FRACA

2. Apologies

Kellie Knight-Stacey	Group Manager Governance and Finance, City of Victor Harbor
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3. Conflicts of Interest

Nil

4. Minutes of Previous meeting

4.1. A&RMC Minutes

Motion: ARMC0215
Moved: Vicki Tomlinson
Seconded: Claudia Goldsmith

The Audit & Risk Management Committee endorse the minutes of the meeting held 1 December 2022 as reviewed by the Committee on 20 January 2023.

CARRIED

5. Business Arising

5.1. A&RMC Annual Work Plan 2022

Motion: ARMC0216
Moved: Claudia Goldsmith
Seconded: Trish Kirkland

The Audit & Risk Management Committee:

- *receive and note the updated A&RMC Annual Work Plan 2023 as presented on 20 January 2023, and*
- *note the inclusion of Risk Management Assistance (ongoing) as an additional item under Governance and Strategy is to be added to the Workplan.*

CARRIED

6. Verbal Report – Executive Officer

The Audit and Risk Management Committee note the verbal updated provided by the Executive Officer regarding current work of the Authority.

Motion: ARMC0217
Moved: Vicki Tomlinson
Seconded: Claudia Goldsmith

CARRIED

7. Reports

7.1.A&RMC Membership – Alexandrina Council Representative

Motion: ARMC0218
Moved: Vicki Tomlinson
Seconded: Claudia Goldsmith

The Audit & Risk Management Committee:

- *receive and note the report; and*
- *welcome Trish Kirkland to the Audit and Risk Management Committee.*

CARRIED

7.2.Resolutions Register

Motion: ARMC0219
Moved: Trish Kirkland
Seconded: Claudia Goldsmith

The Audit & Risk Management Committee:

- *receive and note the Resolutions Register Report and attachments; and*
- *request that the register is updated with resolution 7.2 from the minutes of the meeting held 1 December 2022.*

CARRIED

7.3. Risk Management Assistance

Motion: ARMC0220
Moved: Trish Kirkland
Seconded: Vicki Tomlinson

The Audit & Risk Management Committee:

- *Receive and note the report;*
- *Acknowledge the scope of works as presented, including the requirements for a Strategic Risk Workshop involving the Committee and the Board to be held at a date to be determined;*
- *Request the draft templates be reviewed and make tracked changes to configure the template documentation to reflect the specific requirements of the Authority and provide a draft to the Committee for consideration prior to the*

Committee recommending the risk management documentation as a draft for feedback from the Authority Board; and

- *Recommend to the Authority Board that they note the risks to the Authority of not having a risk management framework in place and allocate the necessary resources to develop and implement within a reasonable timeframe the Authority's Risk Management Framework.*

CARRIED

7.4. External Audit Recommendations

Motion: ARMC0221
Moved: Trish Kirkland
Seconded: Claudia Goldsmith

The Audit & Risk Management Committee receive and note the report.

CARRIED

8. Confidential Reports

8.1. Adoption of Confidential Minutes

Motion: ARMC0222
Moved: Claudia Goldsmith
Seconded: Trish Kirkland

Pursuant to section 90(2) of the Local Government Act 1999, the Committee orders that all members of the public be excluded, with the exception of the Executive Officer and Administration Officer, on the basis that it will receive and consider item 8.1 Adoption of Confidential Minutes.

The Committee is satisfied, pursuant to section 90(3)(d) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (i) *could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (ii) *would, on balance, be contrary to the public interest.*

Accordingly, the Committee is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential to prevent disclosure of commercial information of a confidential nature (not being a trade secret).

CARRIED

8.2. Resolutions Register – In Confidence

Motion: ARMC0224
Moved: Claudia Goldsmith
Seconded: Trish Kirkland

Pursuant to section 90(2) of the Local Government Act 1999, the Committee orders that all members of the public be excluded, with the exception of the Executive Officer and Administration Officer, on the basis that it will receive and consider item 8.2 Resolutions Register – In Confidence.

The Committee is satisfied, pursuant to section 90(3)(d) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (i) could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (ii) would, on balance, be contrary to the public interest.*

Accordingly, the Committee is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential to prevent disclosure of commercial information of a confidential nature (not being a trade secret).

CARRIED

8.3. YMCA Performance Report – Q2

Motion: ARMC0226
Moved: Vicki Tomlinson
Seconded: Claudia Goldsmith

Pursuant to section 90(2) of the Local Government Act 1999, the Committee orders that all members of the public be excluded, with the exception of the Executive Officer and Administration Officer, on the basis that it will receive and consider item 8.3 YMCA Performance Report – Q2.

The Committee is satisfied, pursuant to section 90(3)(d) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (i) could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (ii) would, on balance, be contrary to the public interest.*

Accordingly, the Committee is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential to prevent disclosure of commercial information of a confidential nature (not being a trade secret).

CARRIED

8.4. Budget Review 2022-2023 – Q2

Motion: ARMC0228
Moved: Trish Kirkland
Seconded: Claudia Goldsmith

Pursuant to section 90(2) of the Local Government Act 1999, the Committee orders that all members of the public be excluded, with the exception of the Executive Officer and Administration Officer, on the basis that it will receive and consider item 8.4 Budget Review 2022-2023 – Q2.

The Committee is satisfied, pursuant to section 90(3)(d) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (i) could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (ii) would, on balance, be contrary to the public interest.*

Accordingly, the Committee is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential to prevent disclosure of commercial information of a confidential nature (not being a trade secret).

CARRIED

Claudia Goldsmith left the meeting at 3.30pm

9. Next Meeting: Friday 24 March 2023, 1.30pm – Council Chamber, City of Victor Harbor

10. Meeting Closed: 3.45pm

It should be noted that in accordance with the legal advice received by the Authority dated 26 August 2020, all reports, minutes, attachments, and associated documents from items deliberated by the Authority in confidence, will automatically remain in confidence in perpetuity, unless a resolution of the Board is made to release such items. Items may also be removed from confidence under delegation. At the conclusion of each agenda item that is considered by the Authority in confidence, the default position is for the return to open / public meeting, until such time as a further resolution is made to return to confidential meeting procedures.

To: FRAC Authority Board
From: Andrew Baker – Executive Officer
Subject: 5.1 Board Annual Work Plan
Date: 3 February 2023
References: FRAC Authority Charter v2.0; Local Government Act 1999
Consultation: Nil
Attachments: 5.1a Board Annual Work Plan 2023

Purpose

The purpose of this report is to provide the Board with the Annual Work Plan for 2023.

Background

The Annual Work Plan provides an annual schedule for the Executive Officer and Board, documenting a plan for the delivery of key activities in each calendar year. The plan is continuously updated and presented at each Board meeting to track completion and document amendments.

Discussion

A review of the Board's workplan for the coming year has been developed in conjunction with the workplan for the Audit and Risk Management Committee. Consideration has been given to legislative and regulatory requirements and due dates, Constituent Council meeting dates to meet requirements, and known milestones of projects and initiatives. As projects and initiatives progress, these will be incorporated as applicable. This may include items related to the energy efficiency project, risk framework and unsolicited proposals.

The item relating to the Board Self-Assessment review for 2022 remains outstanding.

Recommendation

The Authority Board receive and note the updated Board Annual Work Plan 2023 as presented on 3 February 2023.

Fleurieu Regional Aquatic Centre Authority
Board Annual Work Plan 2023

Activity	Report	Frequency	Timing					
			3-Feb-23	31-Mar-23	28-Apr-23	28-Jul-23	29-Sep-23	24-Nov-23
Financial Management	Annual Budget 2023 - 2024 Recommendation	Annual		✓				
	Annual Budget 2023 - 2024 Adoption	Annual			✓			
	Asset Revaluation	Quinquennial			✓			
	Audited Financial Statements	Annual					✓	
	External Audit Results	Annual					✓	
	Internal Financial Controls Register Creation	As Required		✓				
	Review of Internal Financial Controls	TBD						
	Long Term Financial Plan	Annual					✓	
	Quarterly Budget Review	3 Annually	✓		✓			✓
	Report on Financial Results	Annual					✓	
	Treasury Report	Annual					✓	
	Financial Services Model	As Required		✓				
Governance &	Annual Report	Annual					✓	
	Annual Work Plan	Ongoing	✓	✓	✓	✓	✓	✓
	Asset Maintenance Plan	Annual		✓				
	Asset Management Plan	Annual			✓			
	Board Self-Assessment Review	Annual	✓			✓		
	Competitive Neutrality Review	Annual		✓				
	Marketing Plan	Annual		✓				
	Risk Management Framework	Annual	✓					
	Strategic Plan	Annual						
	Three Year Business Plan	Annual		✓				
	Recruitment - Board, ARMC, Authority	As Required	✓					
Compliance	Confidentiality Registers	Biannual		✓		✓		
	Resolutions Registers	Biannual		✓		✓		
	Full Legislative Compliance Review	Triennial			✓			
	YMCA Quarterly Performance Report	3 Annually	✓		✓			✓
	YMCA KPIs	Annual			✓			
Audit & Risk Management Committee	A&RMC Minutes	Per meeting	✓	✓	✓		✓	✓
	A&RMC Self-Assessment Review	Annual	✓					✓
	A&RMC Terms of Reference Review	Annual					✓	
	A&RMC Annual Activity Report	Annual	✓					✓
	Confidentiality Registers	Biennial	✓					✓
	Resolutions Registers	Biennial	✓					✓
Policy	Code of Conduct Board Members	Triennial			✓			
	Code of Practise Meeting Procedures	Triennial			✓			
	Asset Accounting	Triennial			✓			
	Risk Management	Triennial					✓	
	WHS Contractor Management	Triennial						✓
	Work Health & Safety & Return to Work	Triennial						✓
	Disposal of Land & Assets	Triennial		✓				
	Records Management	Triennial		✓				

To: FRAC Authority Board
From: Andrew Baker - Executive Officer
Subject: 7.1 Audit & Risk Management Committee Activity Report 2021-2022
Date: 3 February 2023
References: Nil
Consultation: Audit & Risk Management Committee
Attachments: 7.1a A&RMC Activity Report 2021-2022

Purpose

The purpose of this report is to submit a summary of the activity undertaken by the Audit & Risk Management Committee during the 2021-2022 financial year to the Authority Board.

Background

At a meeting of the Audit & Risk Management Committee on 22 October 2021, the Committee requested the Executive Officer prepare a summary report of Committee activity for the preceding financial year to be presented to the Authority Board annually. An annual report on Committee outcomes has been added to annual work plan.

The Activity Report was reviewed by the Committee at its meeting held 1 December 2022 with the following resolved:

The Audit & Risk Management Committee:

- *receive and note the A&RMC Annual Activity Report 2021-2022;*
- *request the revision of the document to include meeting dates as a column heading and that the item Risk Management Framework's title be amended to Risk Management Assistance; and*
- *request the Executive Officer present the amended report to the Authority Board at its next meeting.*

The noted amendments have now been updated in the Annual Activity Report and are now presented to the Board as requested by the Committee.

Recommendation

The Authority Board receive and note the Audit Committee Activity Report 2021-2022 and thank the Committee for its contribution and support of the Authority Board.

Audit & Risk Management Committee

Annual Activity Report 2021-2022



Meetings Held	Resolutions Made	Policies Reviewed	Quarterly Budgets
5	59	9	4

Governance & Risk	Meeting held
Strategic Plan	Jan 2022,
Competitive Neutrality Review	Mar 2022
YMCA Performance Reports	Oct 2021, Jan 2022, Jun 2022
Annual Report	Sep 2021
Risk Management Engagement Assistance	Oct 2021, Jan 2022, Jun 2022
Operational Management KPIs	Sep 2021,
Resolutions Registers	Oct 2021, Jun 2022
Policy	Meeting held
New – Unsolicited Proposals	Sep 2021
Review – Community Partnerships	Sep 2021
Review – Media and Communications	Sep 2021
Review – Public Consultation	Sep 2021
Review – Delegations	Oct 2021
Review – Internal Financial Controls	Oct 2021
Review – Treasury Management	Oct 2021
Review – Allowances and Reimbursement of Expenses	Mar 2022
Review – Informal Gatherings	Jun 2022

Finance	Meeting held
Review of Annual Financial Statements	Sep 2021
Annual Budget Development	Mar 2022
Facility Fees and Charges Review	Mar 2022
Quarterly Budget Review	Sep & Oct 2021, Jan & Jun 2022
Report on Financial Results 2020-2021	Sep 2021
Asset Revaluation	Jan, Mar, Jun 2022
Management	Meeting held
Welcomed new Chairperson and Independent Member	Oct 2021
Committee Self-Assessment	Jun 2022
Committee Terms of Reference Review	Sep 2021, Jun 2022

To: FRAC Authority Board

From: Andrew Baker – Executive Officer

Subject: 7.2 RDA Public Transport Study

Date: 3 February 2023

References: FRACA Strategic Plan 2023-2032, 3 Year Business Plan 2022-2025

Consultation: Stephen Shotton, Regional Development Manager, RDA

Attachments: 7.2a Transport Survey Submission - FRACA

Purpose

The purpose of this report is to provide the Board with the Authority's submission to the Regional Development Australia (Adelaide Hills, Fleurieu and Kangaroo Island) Public Transport Study.

Background

At the meeting held 16 December 2022, the Board was presented with a report regarding the Authority making a submission to the Regional Development Australia Public Transport Survey for the Fleurieu region. It was proposed that the Authority make a submission to the survey outlining the strategic intentions of the Authority to improve transport to and from the centre in line with the Strategic Plan 2023-2032 and highlighting the opportunity to collaborate on any initiatives to improve transport options. The following was resolved in relation to the report presented on 16 December 2022:

The Authority Board

- *receive and note the report;*
- *support the lodgement of a submission by the Executive Officer with the RDA (draft to be presented to the January Board meeting); and*
- *support further engagement with the RDA to advocate for improved community transport options for the Fleurieu Aquatic Centre in alignment with the Authority's Strategic Plan 2023-2032 and 3 Year Business Plan 2022-2025.*

Discussion

In line with the support noted by the Authority Board at the meeting held 16 December 2022, a submission was lodged with the RDA in response to the survey. This is now presented to the Board at Attachment 7.2a for their information. The Executive Officer is also currently making arrangements with the RDA to discuss this initiative further and follow up on our submission.

Recommendation

The Authority Board:

- *receive and note the report;*
- *acknowledge that a further update will be provided to the Board once known.*

23 December 2022

Stephen Shotton
Director of Regional Development
RDA – Adelaide Hills, Fleurieu and Kanagaroo Island
info@rdahc.com.au

Dear Mr Shotton,

Re: Adelaide Hills and Fleurieu Peninsula Regional Public Transport Study

I write to you today in response to the current Regional Public Transport Study for the Fleurieu region (Victor Harbor to Goolwa) with the potential for future collaboration and involvement in providing solutions to survey outcomes.

Background

The Fleurieu Aquatic Centre is located in Chiton on the Fleurieu Peninsula, nestled within Alexandrina Council but managed by a subsidiary of both the City of Victor Harbor and Alexandrina Council, the Fleurieu Regional Aquatic Centre Authority. The Authority is managed by a Board, with the Board Chairperson being Steve Mathewson. It is the role of the Board and the Executive Officer to maximise the value of the facility for the benefit of community health and wellbeing on behalf of constituent Councils. As Executive Officer of the Authority, I would like to provide you with some insight into the current strategies the Authority is pursuing to improve health and wellbeing outcomes for the community, which includes the need to improve transport to and from the centre in alignment with your survey request.

Strategic Planning

The Authority has a draft strategic plan set to be endorsed by its Constituent Councils which shows a clear intention to improve access to our facility. With the facility location being away from the main thoroughfare of traffic in the area, transport to and from the centre for many on the Fleurieu is a clear barrier to attendance. The aspiration of 'Social Inclusion' in our plan articulates the need for the Authority to *foster and maximise social inclusion and social activities*, and we intend to do this by *advocating to key stakeholders for improved community transport options to the facility*.

To support the aspirations in our Strategic Plan, the current 3 Year Business Plan of the Authority articulates the actions we intend to take to meet our aspirations. In respect to improve transport options, this includes:

- Undertake research in conjunction with centre management to determine current needs, gaps and opportunities for community transport (2023).
- Incorporate community transport solutions into access review as appropriate (2023).
- Advocate for improved community transport options to the centre (2024-25).

Accessibility Audit

The Authority is also currently undertaking an accessibility audit where we are seeking to improve external access to the centre for those living with a disability. An initial audit has been completed to review external pathways and identify areas of improvement, and the Board is set to further consider action required from this audit early in the new year. Aspects considered will be the location of car parking and how we may be able to reduce the journey to the front entryway, as well as improving the pathways from the carpark to the entry.

Fleurieu Aquatic Centre Social Impacts

As management of operations at the centre, the YMCA use the ActiveXchange business intelligence model to quantify the facilities return on investment in social value to the community. For the 2021-2022 financial year, this highlighted that the centre provided \$2.65 million in social value as a return on investment. This is measured based on positive health and wellbeing impacts from attendance, including improved education outcomes, increased productivity, mental health benefits, support with chronic illness (cancers, cardiovascular disease, Type 2 Diabetes), dementia, and general health system savings. Further to this, the learn to swim program also contributes to reducing the risk of drowning to members of our community.

Feedback received by the Authority indicates that we would also see an increase in attendance by both current members and new members with improved transport options, as this has been identified as a clear barrier for some members of the community to attend. With this increase in attendance, we hope to in turn then see an increase in positive social impacts for the Fleurieu community.

We see the opportunity for alignment with the RDA to work together on this important initiative and would appreciate an opportunity to speak with you further about this for the benefit of our region.

I look forward to speaking with you soon.

Kind regards

Andrew Baker

Executive Officer

To: FRAC Authority Board
From: Andrew Baker – Executive Officer
Subject: 7.3 Resolutions Register – Audit & Risk Management Committee
Date: 3 February 2023
References: Nil
Consultation: A&RMC
Attachments: 7.3a A&RMC Resolutions – In Progress

Purpose

The purpose of this report is to provide the Authority Board with a summary of the current public resolutions of the Audit & Risk Management Committee as a means to represent current outstanding activity of the Committee.

Background

At the meeting held 20 January 2023, the Audit & Risk Management Committee reviewed the public resolutions made by the Committee, with a summary of items noted as being completed and items still in progress. The following resolution was made:

The Audit & Risk Management Committee:

- *receive and note the Resolutions Register Report and attachments; and*
- *request that the register is updated with resolution 7.2 from the minutes of the meeting held 1 December 2022.*

Discussion

There are a total of nine (9) resolutions made by the Committee that are still noted as In Progress. These are included in attachment 7.3a and include resolution 7.2 from the minutes of the meeting held 1 December 2022 as per the resolution of the Committee.

Recommendation

The Authority Board receive and note the Resolutions Register – Audit & Risk Management Committee Report and attachments.

Fleurieu Regional Aquatic Centre Authority - Audit & Risk Management Committee Resolutions (PUBLIC)

Meeting Date	Resolution Number	Agenda Item	Resolution	Status	Notes
22/10/2021	ARMC0117	5.1 A&RMC Annual Work Plan 2021	The Audit & Risk Management Committee: <ul style="list-style-type: none"> • Note the A&RMC Annual Work Plan 2021 as presented on 22 October 2021. • Note the requirement for the full legislative compliance review contained within the Workplan; • Recommend that Policy benchmarking be undertaken by the Executive Officer once all policy reviews have been completed by April 2022; and • Recommend the Executive Officer prepare a summary report of Committee activity to provide to the Authority Board highlighting outcomes for the Financial Year. 	In Progress	- full legislative compliance review not yet completed. - policy scheduling completed. - Committee Annual Activity Summary completed and presented to the Board.
22/10/2021	ARMC0119	7.2 Risk Management Framework	The Audit & Risk Management Committee recommend the Executive Officer seek a revised Risk Management Services proposal from MLS to provide an update to the Board, including any associated costs.	In Progress	Risk Management project in progress. Schedule presented to ARMC 20 January 2023
22/10/2021	ARMC0123	7.6 Policy Review - Internal Financial Controls	The Audit & Risk Management Committee: <ul style="list-style-type: none"> • Adopts the Internal Financial Controls Policy as reviewed and amended by the Committee on 22 October 2021; • Recommends that the Executive officer reviews the Better Practise Model Internal Financial Controls and provides a list of controls to the Committee for review; and • The annual review of Internal Financial Controls is added to the Authority Work Plan. 	In Progress	- better practise model to be presented - internal financial controls added to annual work plan.
6-Jun-22	ARMC00154	5.1 Audit & Risk Management Committee Annual Work Plan 2022	The Audit & Risk Management Committee: <ul style="list-style-type: none"> * Receive and note the updated A&RMC Annual Work Plan 2022 as presented on 6 June 2022. * Recommend a review of the policy register to ensure completeness. 	In Progress	In progress for completion with 2023 work plan
6-Jun-22	ARMC00155	7.1 A&RMC Self-Assessment Review	The Audit & Risk Management Committee requests the Executive Officer: <ul style="list-style-type: none"> * Distribute the Committee Self-Assessment survey as reviewed and agreed by the Committee on 6 June 2022; * Provide a report to the Committee on the results of the assessment at the next meeting. 	In Progress	Self-Assessment survey results to be presented to Board 3 February 2023.
6-Jun-22	ARMC00156	7.2 Asset Management Plan	The Audit & Risk Management Committee recommends to the Authority Board: <ul style="list-style-type: none"> * Note the review of the Asset Management Plan will be informed, in part, by the outcome of the Asset Revaluation due for completion by 30 June 2022; and * That a substantive review of the Asset Management Plan be undertaken subsequent to the Asset Revaluation and External Audit. 	In Progress	Linked to completion of Asset Revaluation.

Fleurieu Regional Aquatic Centre Authority - Audit & Risk Management Committee Resolutions (PUBLIC)

Meeting Date	Resolution Number	Agenda Item	Resolution	Status	Notes
23-Sep-22	ARMC00186	7.1.Audit Report 2021-2022	The Audit & Risk Management Committee: <ul style="list-style-type: none"> •receive and note the 2022 Audit Completion Report; •note the external Auditors list of matters to be addressed in future financial years, being the completion of an asset revaluation and an updated Asset Management Plan and Long Term Financial Plan; •recommend the progression of the asset revaluation as a high priority; and •recommends that the Authority Board adopts the actions listed as 'Matters to be addressed in Future Financial Years' in the 2022 Audit Completion Report. 	In Progress	Asset revaluation to be completed by 2022-2023 - in progress
1-Dec-22	ARMC00194	5.1 A&RMC Annual Work Plan 2022	The Audit & Risk Management Committee: <ul style="list-style-type: none"> - receive and note the updated A&RMC Annual Work Plan 2022 as presented on 1 December 2022; - recommends the Board allocate funds to source an external contractor to undertake a review of the operational legislative compliance framework, and facilitate the development of the Authority's Legislative Compliance framework; and - request a schedule for the review of outstanding strategic documents to inform the Committee, Board and Executive Officer's Workplan and to identify resources required to complete all activities in an agreed timeframe. 	In Progress	Commenced as part of 2023 Workplan presented at item 5.1 of 20 January 2023 meeting.
1-Dec-22	ARMC00196	7.2 A&RMC Annual Activity Report	The Audit & Risk Management Committee: <ul style="list-style-type: none"> - receive and note the A&RMC Annual Activity Report 2021-2022; - request the revision of the document to include meeting dates as a column heading and that the item Risk Management Framework's title be amended to Risk Management Assistance; and - request the Executive Officer present the amended report to the Authority Board at its next meeting. 	In Progress	For presentation to the Board 3 February 2023

To: FRAC Authority Board

From: Andrew Baker - Executive Officer

Subject: 7.4 Risk Management Framework

Date: 3 February 2023

References: Local Government Act 1999

Consultation: Nil

Attachments: 7.4a FRACA Agreed Scope of Works – Updated
7.4b Risk Management Policy and Framework – Draft
7.4c Risk Management Policy & Framework Drafting Notes

Purpose

The purpose of this report is to provide the Board with an updated scope of works developed by Local Government Risk Services for review.

Background

The Authority had engaged with Colleen Green at Local Government Risk Services (LGRS) since 2018 to develop an updated risk management proposal for implementation. This process had been delayed but has now recommenced, with an updated scope of works presented for review. The service provided will be fully funded and will therefore have no impact of the Authority's financial position.

Discussion

The revised timeline as attached at 7.4a sets out the process in the following stages:

January – March 2023	Planning and Document Review
April - July 2023	Risk Management Training and Information Strategic Risk Workshop
July – August 2023	Close Out and Next Steps

This scope of works has been confirmed with LGRS to allow for the prompt commencement of the process.

Planning and Document Review

A Risk Management Policy and Framework document has been provided by LGRS for the Authority to complete for the development of their risk management documentation. This is included as attachment 7.4b. The document was presented at the 20 January 2023 meeting of the Audit & Risk Management Committee. The Committee requested that the document be re-drafted to customise to the Authorities circumstances. The attached re-draft is presented for the Boards review. Attachment 7.4c details items identified for further consideration.

Risk Management Training and Information (including Strategic Risk Workshop)

In developing a Strategic Risk Register, the LGRS propose to facilitate a workshop with the Authority Administration, Board and Audit & Risk Management Committee to capture strategic risks for the risk register to then commence the assessment process and document appropriate controls. Subject to availability of the LGRS, it is proposed that the workshop be held in June or July with potential dates for the workshop be discussed by the Committee.

Recommendation

The Authority Board:

- *receive and note the report;*
- *acknowledge the scope of works as presented, including the requirement for a Strategic Risk Workshop involving the Board and Committee to be held at a date to be determined;*



Scope – Strategic Risk Services

Council:	Fleurieu Regional Aquatic Centre Authority
Date:	V1: 19/11/2018 V2: 12/01/2022
Key Contact:	Lauren McKee, Executive Officer

Scope: Strategic Risk Service Program

Background

In mid-2018, the Fleurieu Regional Aquatic Centre Authority (FRACA) contacted the LGA Mutual Liability Scheme (MLS) requesting some assistance in the development of their risk management framework. Since that time, a number of changes have occurred at the Authority, resulting in the initial scope of works being placed on hold. In late 2021, the Authority contacted the MLS to re-institute the scope of works.

FRACA has recognised the value to operationalise their risk management system by the review of their Risk Management Policy, development of a Framework and Strategic Risk Register in order to manage and monitor key risks. FRACA is also taking the opportunity to determine their monitoring and reporting mechanisms and providing training to their Board Members about their strategic risks.

FRACA has looked to partner with the MLS to facilitate this requirement and the Strategic Risk Consulting Team has been engaged to create a customised program to meet the FRACA's needs and structure the work as a partnership between FRACA and the Scheme to evolve FRACA's risk system to a point where the expectations of their Board and Audit and Risk Management Committee can be met.

Objectives:

- Support the development of a customised program for FRACA's risk framework development and implementation
- To support and mentor on an "as needs" basis as requested by FRACA and within the Scheme's resource capacity
- That FRACA's Executive Officer and the Board understand their Risk Management Framework, their role and responsibility and they can implement it across the organisation
- That a formal process is implemented within FRACA for risk management and risk escalation following the delivery of the services by the Scheme

Scope of Services:

- Provide support and guidance to FRACA and their Board to enable them to develop FRACA's Risk Management Framework
- Engage with the Parent Councils to gain input to the context and appetite from these organisations that will have relevance to the FRACA risk profile.
- Create training pack including tools and facilitate workshops to identify and assess FRACA's strategic risks
- Provide support and guidance to FRACA and the Board with the development of their Strategic Risk Register
- Provide training to FRACA and their Board on the Risk Management Framework including their roles and responsibilities
- Provide final deliverables such as FRACA's strategic risk register, training materials (needs to be agreed with FRACA), list of terminology and definitions

Out of Scope:

The Strategic Risk team will not be responsible for the design and implementation of controls for each risks identified. Testing and assessment of controls will not be performed. This work is the function of FRACA once their risk management system is implemented.

 <p>Mutual Liability Scheme Workers Compensation Scheme Local Government Association of South Australia</p>	Scope – Strategic Risk Services	Council: Fleurieu Regional Aquatic Centre Authority
		Date: V1: 19/11/2018 V2: 12/01/2022
		Key Contact: Lauren McKee, Executive Officer

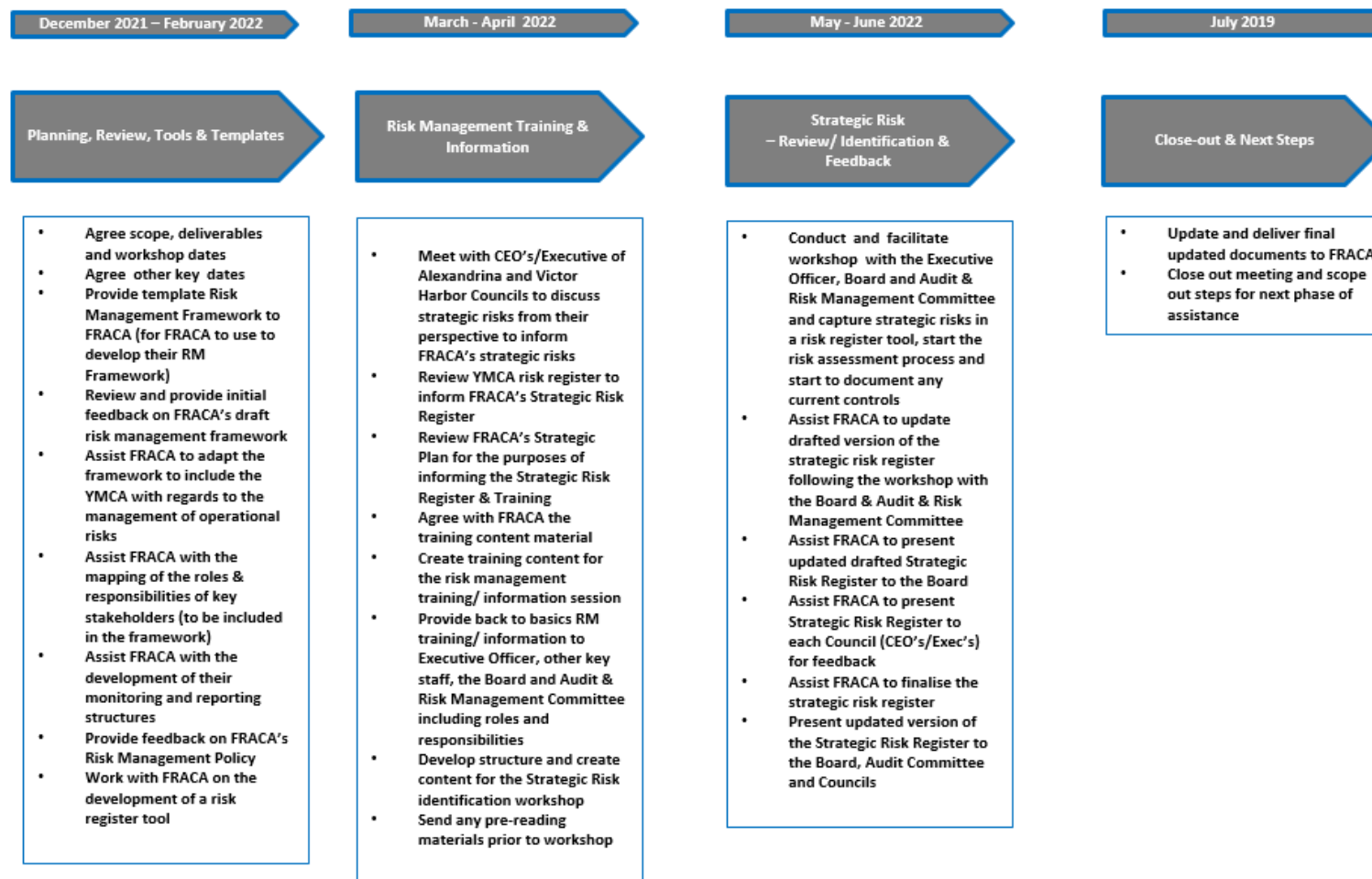
Timelines:	The project will be delivered in phases from December 2021 – July 2022. Key dates will be agreed with FRACA with the commencement of the project.
Sponsor:	Lauren McKee, Executive Officer



Scope – Strategic Risk Services

Council:	Fleurieu Regional Aquatic Centre Authority
Date:	V1: 19/11/2018 V2: 12/01/2022
Key Contact:	Lauren McKee, Executive Officer

Detailed Project timeline: December 2021 to July 2022



 <p>Mutual Liability Scheme Workers Compensation Scheme Local Government Association of South Australia</p>	Scope – Strategic Risk Services	Council: Fleurieu Regional Aquatic Centre Authority
		Date: V1: 19/11/2018 V2: 12/01/2022
		Key Contact: Lauren McKee, Executive Officer

Prepared by:	Colleen Green (Strategic Risk Consultant - LGAWCS)	Date:	V1: 16/11/2018 V2: 21/12/2021
Reviewed by:	Stevie Sanders (WHS & Risk Manager –LGAWCS)	Date:	V1: 19/11/2018 V2: 12/01/2022
Approved by:	Leonie Boothby, Executive Officer (V1) Lauren McKee, Executive Officer (V2)	Date:	V1: 05/12/2018 V2: x12/01/2022



Mutual Liability Scheme

Local Government Association
of South Australia

Risk Management Framework

10th September 2021

Instructions: (delete this text box after use)

Drafting notes have been provided throughout this template to assist Members in the customisation of its Risk Management Framework. These are highlighted in **green** and are to be deleted prior to presenting the draft document for endorsement.

Items where minor customisation is required by the member have been highlighted in **yellow**, (e.g. Member name, job titles); common language has been used throughout the template to allow “look up” and “replace” functions to be used.

Should the Member require assistance with customisation of its Risk Management Framework, please contact the Strategic Risk Team.

Risk Management Framework

First Issue/ Approved	
Classification	
Framework Owner	Fleurieu Regional Aquatic Centre Authority
Last Reviewed	
Next Review	
File Reference	
Responsible Officer	Andrew Baker
Relevant Legislation	<p>Local Government Act 1999</p> <p>Local Government (Financial Management Regulations) 2011</p> <p>Work Health and Safety Act 2012</p> <p>Civil Liabilities Act 1936</p> <p>State Records Act 1997</p> <p>Commonwealth Privacy Act 1988</p> <p>Freedom of Information Act 1991</p>
Related Documents	<p>AS ISO 31000:2018 - Risk Management Guidelines</p> <p>SA HB:436.1:2020 Risk Management Guidelines – companion to AS ISO 31000:2018, Part 1: Boards and executives</p> <p>Fleurieu Regional Aquatic Centre Authority Risk Management Policy</p> <p>Return to Work SA Code of Conduct for Self-Insured Employers Work Health Safety and Return to Work Policy</p> <p>Risk Appetite Statements [if completed]</p> <p>[drafting note: The above documents are referred to within this template; if the Member adds any references to other documents, those documents should be listed here]</p>

Risk Management Framework

Review History

Version No:	Issue Date:	Description of Change
1.0	Sept 2016	New Document
2.0	Apr 2018	Updated references, included references to ISO 31000:2018
3.0	May 2018	Final document for member centre
3.1	July 2018	Updated risk categories in 6.3.1; Updated consequence & likelihood table and risk matrix in line with the WHS One System Hazard Management Procedure for consistency; included example consequence table for project risks & table of detailed risk areas in appendix
4.0	June 2020	Updated logo, Updated as per scheduled review and reflects the AS ISO 31000:2018, Updated consequence table in appendix, included example risk tolerance statements and risk priorities.
4.1	June 2020	Included updated control information, minor formatting
5.0	September 2021	Addition of drafting notes & common language; Updated relevant legislation & related documents; Remove duplications; Council/board responsibilities aligned with SA HB 436.1:2020; Added reference to internal controls audit at 5.2.25; Updated risk categories; Amendments to appetite and tolerance sections at 6.2.2; move risk treatment prioritisation to 6.3; include treatment options for positive risk; update control effectiveness table at 6.4.3; appendix A - deleted definitions not used elsewhere in document or already defined within document; Appendix B – update project risk consequence table; Appendix E – addition of communicable disease to detailed risk areas

[drafting note: this table should reflect the Member's version numbers and amendments, e.g. if preparing a framework for the first time, it should be Version 1.0 and description of change should be "New document"]

Signed: _____

Executive Officer

Date: ____/____/____

[drafting note: Member to update / remove signatures required in line with their internal process / requirements. There is no requirement to have a "physical" sign off as long as there is evidence of approval (e.g. minutes of meeting)]



Risk Management Framework

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Risk Management Framework

1 Introduction

Fleurieu Regional Aquatic Centre Authority is committed to an integrated approach to risk management to assist in setting appropriate strategies, achieving objectives and making informed decisions, in the best interests of our community.

Fleurieu Regional Aquatic Centre Authority recognises that managing risk is part of governance and leadership, is fundamental to how the organisation is managed at all levels and will contribute to continuous improvement of its management systems.

Fleurieu Regional Aquatic Centre Authority's Vision states:

"A vibrant, contemporary and inclusive facility, embraced by our communities"

The risk management process is not an isolated function and should be applied to all activities, including decision making, at all levels. Effective identification, analysis, evaluation and treatment of risks is critical to Fleurieu Regional Aquatic Centre Authority achieving its objectives and meeting stakeholder expectations.

2 Purpose

This Framework outlines the requirements and processes supporting Fleurieu Regional Aquatic Centre Authority's Risk Management Policy to create and protect value by improving performance, encouraging innovation and supporting the achievement of strategic objectives.

This Framework:

- Aligns with the objectives of the Risk Management Policy;
- Establishes roles and responsibilities for managing risk;
- Documents a standardised, formal and structured process for assessment, evaluation, treatment and monitoring of identified risks;
- Encourages innovation by integrating risk management into the strategic and operational processes throughout the organisation;
- Will assist Fleurieu Regional Aquatic Centre Authority in maximising its opportunities, whilst minimising negative impacts identified during the risk management process;
- Establishes the process for all risks outside the defined risk appetite (when defined), to be escalated to the appropriate level and for additional treatment options to be implemented;
- Sets out reporting protocols for relevant risk information to be provided to the Board, Audit & Risk Management Committee, Executive Officer and throughout the organisation; and
- Will support the development of a continuous improvement culture by integrating risk management processes throughout the organisation.

3 Local Government Risk Services (LGRS)

From the perspective of the Local Government sector in South Australia, certain insurable risks have been transferred to a number of self-managed Schemes managed by Local Government Risk Services (LGRS), via payment of an annual contribution. The Schemes are:

- Local Government Association Mutual Liability Scheme (LGAMLS) for the purposes of Civil Liability coverage & claims management;
- Local Government Association Workers Compensation Scheme (LGAWCS) for the purposes of workers compensation coverage & claims management; and
- Local Government Association Asset Mutual Fund (LGAAMF) for the purposes of asset and fleet coverage and claims management.

Risk Management Framework

As a Member of the above Schemes and Fund, **Fleurieu Regional Aquatic Centre Authority** must ensure that it has developed, endorsed and implemented WHS, asset and risk management protocols.

LGRS provides a range of fully funded and subsidised programs and support services to assist in managing risk across the organisation.

4 Risk Management Principles

The Australian standard for Risk Management Guidelines (AS ISO 31000:2018) describes risk as:

“...the effect of uncertainty (either positive, negative or both) on objectives...”

The goal is not to eliminate all risks, but rather to manage risks involved in delivering **Fleurieu Regional Aquatic Centre Authority**'s functions and services and to create and protect value for stakeholders and community.

AS ISO 31000:2018 is based on the following eight principles, which underpin this Framework and guide how risk is managed across the organisation:

Integrated	An integral part of all organisational processes
Part of decision-making	Aids decision-makers in making informed choices and identifying the most effective course of action
Structured and comprehensive	Contributes to efficiency and to consistent and comparable results
Best available information	Based on historical and current information, as well as on future expectations, taking into account any limitations associated with such information and expectations.
Customised	Aligns with the internal and external context related to our objectives
Human and cultural factors	Recognises that the behaviour and culture can significantly influence the achievement of objectives
Inclusive	Requires appropriate and timely involvement of stakeholders to enable their knowledge, views and perceptions to be considered
Dynamic	Anticipates, detects, acknowledges and responds to changes in Member's internal and external contexts that result in new risks emerging and others changing or disappearing
Continual improvement	Learning and experience drives continuous improvement

Risk Management Framework

5 Risk Management Framework



5.1 Leadership and commitment

Fleurieu Regional Aquatic Centre Authority and its Executive Officer will demonstrate a clear commitment to managing risks throughout the organisation by:

- Developing and implementing a risk management policy, framework and supporting tools and processes;
- Allocating appropriate resources to implement, monitor and improve the effectiveness of risk management;
- Ensuring that staff, contractors, volunteers and other relevant stakeholders have the appropriate skills and knowledge to deal with risk;
- Allocating and upholding accountability with respect to risk management and ensuring it is understood; and

Ensuring compliance with legislative and contractual obligations and policy requirements.

5.2 Integration

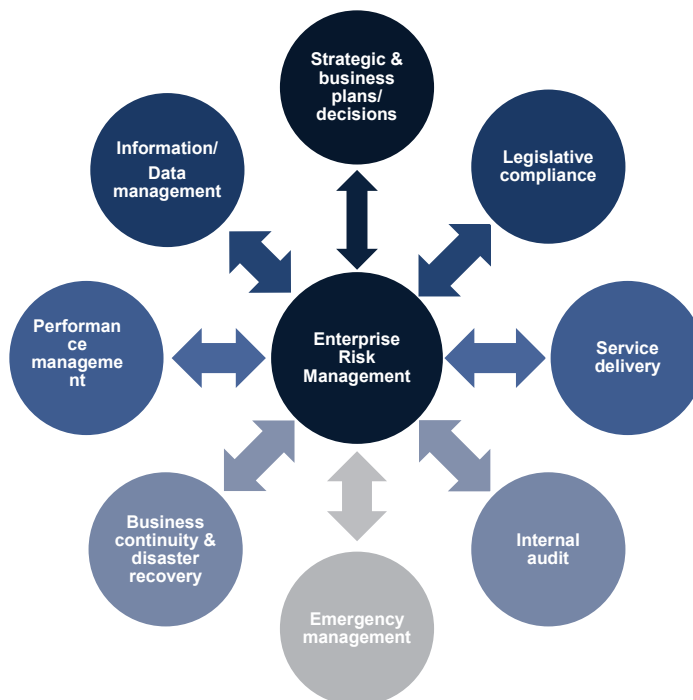
This Framework provides the methods and processes Fleurieu Regional Aquatic Centre Authority use to manage risks and identify opportunities throughout the organisation.

Governance guides the direction of the organisation and provides the rules, processes and practices necessary to achieve objectives. Management structures that define risk management accountability and oversight roles across the organisation are critical to achieving sustainable performance and long-term viability.

Risk Management Framework

Risk Management is not just about the risk assessment process nor is it a stand-alone discipline. In order to maximise benefits and opportunities, it requires integration throughout the organisation, as follows:

[drafting note: Diagram below is an example only – Member can update as required, noting, however that this may require amendment to sections 5.2.1 to 5.2.9]



5.2.1 Enterprise Risk Management

Enterprise risk management encompasses strategic, operational and project risk management.

Strategic risks are identified by reference to both the external environment and strategic objectives. Strategic risks are monitored by the **Executive Officer**, **Audit & Risk Management Committee** and **the Board**, with all risk assessments captured in the Risk Register and recorded within the record management system. [drafting note: this may require customisation, depending on where risks are recorded, e.g. within risk register only, Skytrust or other proprietary system]

Operational Risks arise from day-to-day functions and operations to deliver core services. Operational risks are monitored by the **Executive Officer**.

Project Risks are the uncertain events or conditions that have potential to impact either positively or negatively on project objectives. Project risks are monitored by the project manager and reported to the **Executive Officer** and the **Board**, (where the project is of strategic significance.)

5.2.2 Strategic planning and decision making

Strategic and business planning, (which includes long-term financial planning and annual budgeting,) must adequately consider the risks inherent in setting and pursuing objectives and the effectiveness of systems that are in place to manage and communicate those risks.



Risk Management Framework

Risk management is integrated into governance structures, including decision making, which is supported by incorporating risk analysis into **Board** and committee reports, where there is a potential impact on the achievement of strategic objectives or on the wider community.

[drafting note: if this is not already in place, incorporate into implementation plan]

5.2.3 Legislative compliance

The Local Government Act (SA) 1999 applies to the functions of Councils and Prescribed Bodies in South Australia, however, due to the diversity of functions provided, a range of other Acts, Regulations and Codes of Practice and Standards also apply.

Fleurieu Regional Aquatic Centre Authority has implemented a Work Health and Safety (WHS) management system to manage hazards and risks to workers and members of the public, in accordance with the WHS Act (SA) 2012 and Return to Work SA's Performance Standards for Self Insurers.

5.2.4 Service delivery

Risk exposures vary according to the functions, facilities and services provided and these will inevitably change over time. **Fleurieu Regional Aquatic Centre Authority's** planning processes address both the risks associated with provision of functions, facilities and services, (such as capacity and resources,) and risks arising from their delivery, (such as public safety and community reaction).

5.2.5 Internal audit

Internal audit is an independent, objective assurance activity designed to add value and improve the organisation's operations. It provides a systematic, disciplined approach to evaluating and improving the effectiveness of risk management, control and governance processes. The process of internal audit may result in the identification of new risks or more effective treatments for existing risks.

In addition to its own internal audit program, **Fleurieu Regional Aquatic Centre Authority** engages an independent auditor to undertake an audit of internal controls as required by Section 125 of the Local Government Act (SA) 1999 and Part 6, Regulation 19 of the Local Government (Financial Management Regulations) 2011

[drafting note: If there isn't an internal audit function that covers all organisational risks, Member may update this section and the diagram above to reflect the internal controls audit only, by amending the title to "Internal Controls Audit" and deleting the first paragraph and "In addition to its own internal audit program," in the second paragraph. Alternatively, if it is Council's intention to establish an internal audit program, amend the first paragraph to reflect this]

5.2.6 Emergency Management

Fleurieu Regional Aquatic Centre Authority plans for, and undertakes, prevention, preparedness, response and recovery activities to support its community in the event of emergencies and natural disasters. This process includes alignment and co-operation with lead agencies and other Councils in the state as well as providing information and training for workers to protect them from harm whilst responding to emergencies and natural disasters.

[drafting note: if workers are not engaged in responding to community emergencies and natural disasters, this section can be amended to reflect response to workplace emergencies only]



Risk Management Framework

5.2.7 Business Continuity Plan & Information Technology Disaster Recovery Plan

Fleurieu Regional Aquatic Centre Authority is committed to ensuring that critical business functions continue after a business interruption and has/will develop the following plans, taking into consideration reasonably foreseeable risks and their potential impact on achievement of objectives:

- The Business Continuity Plan (BCP), which is designed to manage risk by limiting or reducing the impact of a disruption, (such as severe weather event or loss of key personnel), and enable the resumption of critical business functions/services following a disruption; and
- The Information Technology Disaster Recovery Plan (DRP), which is intended to protect and recover information technology infrastructure and data in the case of a disruptive event, (such as cyberattack or damage to/loss of infrastructure,) by defining actions to be taken before, during and after an event.

[drafting note: terminology used in this section should reflect the name of the Member's documentation. If the plan(s) have not been developed, indicate whether/when there is an intention to develop them.]

5.2.8 Performance Management

Both risk management and performance management start with the establishment and communication of corporate goals and objectives and development of strategies which are then cascaded throughout the organisation. Appropriate measures and reporting structures will be/have been put in place to monitor the effectiveness of risk management processes, (at an individual and organisational level), which will in turn assist in identifying gaps and emerging risks.

The performance of Fleurieu Regional Aquatic Centre Authority's risk management program will be measured through three distinct categories:

Measure	Frequency
Compliance with the policy and related documentation	Annual
Foreseeable risks are identified and controlled within risk appetite (and tolerances), where reasonably practicable	Biannual
Tangible improvement in risk evaluation outcomes and risk maturity modelling	Biennial

[drafting note: delete reference to tolerances if these have yet to be defined. These categories are provided as examples only and the Member may amend to reflect a particular focus area]



Risk Management Framework

5.2.9 Information/Data Management

Not only is it critical to the achievement of objectives that data and corporate knowledge is retained, there are regulatory requirements to do so, (e.g. compliance with the State Records Act 1997, Commonwealth Privacy Act 1988 and Freedom of Information Act 1991.)

Fleurieu Regional Aquatic Centre Authority's records may be vulnerable to cyberattack, malicious intent or unauthorised release, should appropriate risk mitigation strategies not be in place.

5.3 Design

5.3.1 Understanding the organisation and its context

Establishing the context requires those involved in risk management and decision making processes to understand factors internal and external to the organisation that may influence **Fleurieu Regional Aquatic Centre Authority's** ability to achieve its objectives.

Risk management culture, organisational structure, strategy and objectives are examples of factors that define internal context.

The external environment may include a range of factors such including (but not limited to):

- increased legislative and compliance requirements;
- reduced funding from State Government;
- community expectations; and
- social, cultural, political, technological, economic, natural and built environment.

5.3.2 Roles and responsibilities

The following roles and responsibilities ensure a transparent approach to managing risk within **Fleurieu Regional Aquatic Centre Authority**:

[drafting note: member should update this section where relevant to ensure it reflects the actual roles and responsibilities. Suggested responsibilities are from LG Act, AS ISO 31000:2018 & SA HB 436.1:2020]

Roles	Responsibilities
Board	<ul style="list-style-type: none"> Set the organisation's risk appetite and policy for managing risk; Give adequate consideration to risks when setting objectives and making decisions; Foster a culture that is consistent with the organisation's appetite for risk; Ensure the organisation has the structures and processes in place to support decision making and management of risk; Set an appropriate governance structure for risk and risk management including Audit & Risk Management Committee and delegations; Require the EO to demonstrate that the framework for managing risk is effective and appropriate; and



Risk Management Framework

Roles	Responsibilities
	<ul style="list-style-type: none"> Require the EO to provide information to allow the Board to understand the risks that may have material impacts on achievement of the organisation's objectives. Consider recommendations from the Audit & Risk Management Committee relating to strategic risks or any other risk matter
Audit & Risk Management Committee	<ul style="list-style-type: none"> Review and endorse the criteria contained within the Risk Management Framework [drafting note: if this is done at CEO/Senior Management Team level, amend as appropriate] Review reports from Executive Officer and auditors to ascertain the adequacy of controls that have been implemented Monitor strategic risks on a quarterly basis [drafting note: amend to reflect agreed frequency]
Executive Officer (EO)	<ul style="list-style-type: none"> Promote a strong risk management culture by providing firm and visible commitment to risk management including ensuring appropriate accountability for the management of risk Review and endorse the Risk Management Framework [drafting note: framework is an operational document, however if it is intended that it be endorsed by Audit Committee or Council, amend as appropriate.] Develop and implement a framework that delivers a consistent approach to risk management by allocating resources and assigning authority, responsibility & accountability at appropriate levels within the organisation Allocate and uphold accountability for managing risk Ensure (Executive Management Team) have the necessary knowledge and skills to effectively fulfil their risk management responsibilities Regularly review strategic and operational risks and maintain an understanding of the environment in which the organisation operates, the risks it faces and the effectiveness of its controls Ensure compliance with legislative and contractual obligations and policy requirements Provide reliable information about risks, controls and their effectiveness to the Board Escalate all strategic risks that exceed the organisation's risk appetite to the Audit & Risk Management Committee or Board, as required
(Executive Management Team)	<ul style="list-style-type: none"> Commitment to, and promotion of, the risk management policy and framework Monitor the organisation's overall risk profile and mitigation strategies

Risk Management Framework

Roles	Responsibilities
	<ul style="list-style-type: none"> Ensure that risk management is embedded into all functions and activities, including decision making Ensure that risks that cannot be treated immediately are recorded on the risk register and that there is ongoing and regular review of the risk register, (including follow up and close out of overdue risk treatments) Incorporate risk treatments into (departmental/divisional/business unit) plans Ensure that staff, contractors, volunteers and other relevant stakeholders have the appropriate skills to be actively be involved in managing risk Provide incentives and performance management arrangements that support the desired approach to managing risk Promote a proactive risk culture in accordance with business management initiatives Collectively review strategic risks and consider emerging risks, (prior to Audit & Risk Management Committee) Ensure compliance with legislative and contractual obligations and policy requirements
(Risk Manager) [drafting note: amend to reflect the job title of the person who has responsibility for coordinating and maintaining the risk management system elements]	<ul style="list-style-type: none"> Provide guidance and assistance to (Executive Management Team) and staff in relation to the application of this framework Ensure relevant risk information is recorded in the Risk Register and reported and escalated to the (Executive Management Team) or cascaded to staff, as relevant Maintain the Risk Management Policy and Framework to ensure its currency and relevance Maintain the Risk Register and reporting timeframes as required
Employees, Volunteers & Contractors	<ul style="list-style-type: none"> Understand the risk management processes that apply to their area of work Identify, evaluate, report and manage, (or escalate,) risks relating to daily activities and projects

5.3.3 Implementation

This risk management framework is/will be supported by an implementation plan that includes timeframes and resource requirements and processes for engagement with, and provision of information to, relevant stakeholders.

5.4 Evaluation

Fleurieu Regional Aquatic Centre Authority will undertake periodic reviews of this risk management framework and the implementation plan to evaluate their effectiveness and determine whether they remain suitable in supporting the achievement of strategic and operational objectives.

Risk Management Framework

5.5 Improvement

To maintain and improve the value of risk management to the organisation, **Fleurieu Regional Aquatic Centre Authority** will monitor and adapt this risk management framework, with a view to continually improve the suitability, adequacy and effectiveness of its risk management process.

Risk Management Framework

6 Risk Management Process

Having good risk management practices in place provides **Fleurieu Regional Aquatic Centre Authority** with assurance that measures are in place to maximise the benefits and minimise the negative effect of uncertainties in pursuit of its strategic objectives. Risk management involves both the management of potentially adverse effects as well as the fulfilment of potential opportunities. The risk management process is an integral part of management and decision-making and **will be/is** integrated into the organisation's structure, operations and processes.

The dynamic and variable nature of human behaviour and culture should be considered throughout the risk management process.

Although the risk management process is often presented as sequential, in practice it is iterative as illustrated in the AS ISO 31000:2018 Risk management – guidelines:

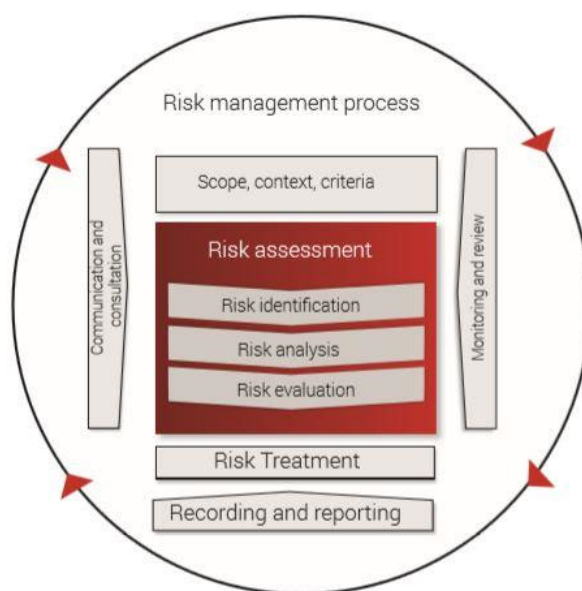


Diagram source: Standards Australia Limited, AS ISO 31000:2018 Risk management – guidelines, SAI Global Limited, Sydney, 2018. © Standards Australia Limited. Copied by JLT Risk Solutions Pty Ltd with permission of Standards Australia and Standards New Zealand under Licence 1811-c079.

6.1 Communication and Consultation

Establishing a communication and consultation plan with internal and external stakeholders is critical to the success of the risk management process. Effective communication and consultation throughout the process is essential to ensure that those responsible for implementing risk management, and those with a vested interest, understand the basis on which risk management decisions are made and why particular actions are required.

Fleurieu Regional Aquatic Centre Authority will engage with stakeholders throughout the risk management process to:

- Correctly identify risks and understand context;
- Gain a better understanding of the views and interests of stakeholders and how their expectations may be managed;
- Capitalise on the diversity of knowledge, opinions and experience to enhance identification and management of risks and opportunities; and
- Build a sense of inclusiveness and ownership amongst stakeholders.



Risk Management Framework

[drafting note: If the Member has specific policy or requirements in place for this and/or a template/process that must be used, it should be captured/referenced in this section – also remember to update the “related documents” section at the beginning]

6.1. Scope, context and criteria

6.1.1 Defining the scope

Because the risk management process is applied at different levels throughout the organisation, it is important to define the scope and it's alignment with the organisation's objectives. This should include consideration of:

- Goals and objectives of risk management activities;
- Proposed outcomes and timing;
- Responsibilities and accountabilities for the risk management process;
- Risk management methodologies;
- Processes, activities and projects and how they may interact with other processes, activities and projects;
- How effectiveness and/or value will be measured and monitored; and
- Availability of resources to manage risk.

6.1.2 Defining the context

Defining the context is important because

- Risk management takes place in the context of achieving objectives and undertaking activities; and
- Organisational factors can be a source of risk.

The context should reflect the specific environment of the activity to which the risk management process is to be applied, and consider the factors outlined in 5.3.1.

6.1.3 Defining risk criteria

Risk criteria are used to evaluate the significance of risk and are reflective of Fleurieu Regional Aquatic Centre Authority's values, objectives and resources and the views of its stakeholders. Agreed risk criteria have been established through consultation with EO, Audit & Risk Management Committee and the Board. [drafting note: amend to reflect process undertaken]

It should be noted that, whilst risk criteria have been are documented in this framework and its appendices., they are dynamic and should be reviewed and amended to reflect the organisation's attitude to risk and risk appetite, as necessary.

6.2 Risk Assessment

6.2.1 Risk Identification

The aim of risk identification is to develop an inclusive list of reasonably foreseeable events that may occur that - if they do - are likely to have an impact on achievement of objectives.

Fleurieu Regional Aquatic Centre Authority identifies, assesses and treats risk in the following three risk types:



Risk Management Framework

Strategic	Risks associated with high-level strategic objectives that are articulated in Strategic, Annual Business and Asset Management Plans. Strategic risks may affect the achievement of Member's corporate objectives. They are key issues for the Board and Executive Officer and impact the whole organisation rather than a (department/division/business unit) . These risks can originate from within the organisation or externally. In other words, they may prevent the organisation from achieving its strategic objectives.
Operational	Risks associated with (departmental/divisional/business unit) functions and daily operations to deliver core services. Often the risks relate to cost overruns, supply chain/logistic issues, employee issues, fraud, WHS, non-compliance to policies and procedures.
Project	Risks associated with Project Management that will affect milestones or outcomes connected to delivering a specific project.

Risk identification naturally flows on from the context discussion and is a process of formally documenting the effects of uncertainty on objectives. An effective approach is to engage as many stakeholders as possible in a structured identification process.

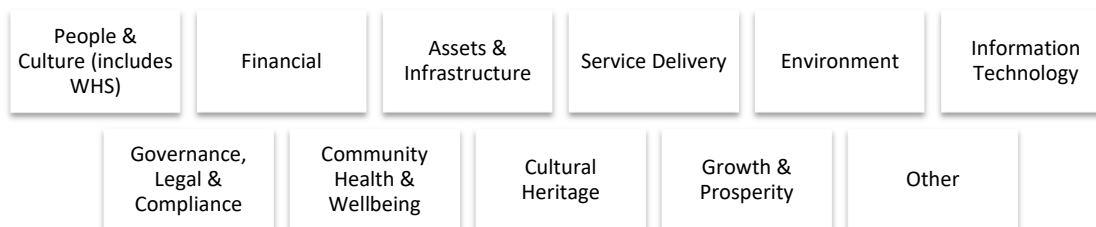
[drafting note: It is recommended that the Executive Management Team undertake a regular review of current and emerging strategic risks, giving consideration to political, economic, social, technological, legal & environmental factors. If there is a structured approach to this process, it should be outlined here, or reference made to the relevant procedure/template – which should be referenced in related documents]

The aim is to generate a list of risks based on those impacts or events. During the identification process, there are a number of questions that need to be asked to capture the information required:

- What might happen/ what could go wrong?
- What is the cause?
- How does this affect the objective?

After a risk is identified, it may be categorised and captured in the Risk Register in accordance with the following categories:

[drafting note: Categories help in reporting in a structured way so if Member wants to report differently, other categories may be used to suit your business needs. If Member already has a specific list of risk categories, this section should be updated accordingly. For example; Some Members will separate the Governance, Legal & Compliance, others may have additional/different categories such as Political or Clinical. There is no defined right or wrong way to categorise, however Member should be mindful to not include risk types e.g. strategic, operational, project as categories]



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The process of risk identification must be comprehensive as risks not identified are by nature excluded from further analysis. Care must be taken to identify and define risks, rather than causes or consequences.

Capturing an additional level of detail with regards to risk areas assists in reporting and analysing trends. An example of this can be found in appendix E.

6.2.2 Risk Analysis

Risk analysis involves developing an understanding of a risk. It provides an input to risk evaluation and to decisions on whether risks need to be treated, and the most appropriate risk treatment strategies and methods. The tables included in the appendices are Fleurieu Regional Aquatic Centre Authority's tools for expressing the consequence, likelihood and level of risk.

6.2.2.1 Risk ratings

A "risk rating" can be determined by combining the estimates of effect (consequence rating) and cause (likelihood rating). The risks are to be assessed against all consequence categories; and the highest consequence rating will be used. The following risk ratings are used:

- Inherent risk rating, being the level of risk at time of risk assessment with no controls;
- Current risk rating, being the level of risk with the controls that are currently in place, operating as they are; and
- Residual risk rating, being the level of risk once further and additional controls are added to reduce the consequence and/or likelihood, (i.e. the forecast level of risk remaining after risk treatment).

[drafting note: Not all Members will want to assess inherent and current risk and instead may choose one or the other. If that is the case, delete that which is not applicable from the paragraphs above]

6.2.2.2 Risk appetite

The Board Members, (with support from the Executive Officer) are responsible for defining Fleurieu Regional Aquatic Centre Authority's risk appetite, taking into consideration the nature and extent of the risks the organisation is willing to take in order to achieve its strategic objectives.

In arriving at its risk appetite, Board Members will give consideration to:

- The degree to which decision makers are permitted to expose Fleurieu Regional Aquatic Centre Authority to the consequences of an event or situation;
- Aggregated and interlinked risks to determine whether the cumulative level of risk is acceptable or not;
- Allowing for flexibility to adapt, given changing environment and circumstances to be built in; and
- Whether decisions are made with full consideration of potential risk and reward.

Fleurieu Regional Aquatic Centre Authority's risk appetite will be included in regular monitoring and review of strategic risks and will be updated in line with its risk management policy, framework and supporting documentation.

6.2.2.3 Risk tolerance

Not all risk types for Fleurieu Regional Aquatic Centre Authority are the same in terms of their acceptability. Once a risk appetite has been set, it is useful to define tolerance levels for each category. Risk tolerance can be described as the boundaries of risk taking outside of

Risk Management Framework

which the organisation is not willing accept in order to achieve its objectives. While risk appetite is usually expressed in qualitative terms, tolerance is expressed quantitatively, (i.e. a variance).

If the assessed risk level is outside of the risk appetite but within the tolerable level for that category of risk then treatment will be required. If it is equal to, or below, the tolerable level for that category of risk then the risk may be accepted, (provided the controls are implemented).

6.2.3 Risk Evaluation

Risk Evaluation is the process used to assist in making decisions, based on the outcomes of risk analysis, about which risks need treatment and the priority for implementation of controls. Decisions should take account of the wider context of the risk and include consideration of the risks borne by other parties. There are also circumstances whereby, despite the risk level, risks cannot be prevented or reduced and the focus will instead be on recovery and resilience.

[drafting note: Member to update this table to ensure it reflects their processes. The WHS information contained within this table aligns with the One System WHS Hazard Management Procedure; if Council has made changes to the model procedure, this should be reflected here.]

When a risk has been identified or reassessed, the following table provides guidance on the action to be taken for each risk rating level:

Risk level	Managing risk – priority rating
Extreme	<p>Add risk to Risk Register</p> <p>Escalate risk issue immediately to EO</p> <p>EO to:</p> <ul style="list-style-type: none"> Refer risk to risk owner Identify and develop treatment strategies for immediate action Monitor and review actions/strategies Provide direction and information to relevant stakeholders Inform the next meeting of the Board or Audit & Risk Management Committee of the risk issue, the actions taken to mitigate the risk and the outcome (or current status) Consider cessation/suspension of the activity giving rise to the risk until such time as EO authorises its continuation and/or whilst other risk treatment strategies are being developed/implemented <p>For WHS related risks, the following applies:</p> <ul style="list-style-type: none"> Operation of item or activity shall not be allowed to continue until the risk level has been reduced Will commonly be an unacceptable level of risk May include both short and long term control measures
High	<p>Add risk to Risk Register</p> <p>Escalate risk issue to EO to:</p> <ul style="list-style-type: none"> Refer to relevant risk owner Identify and develop treatment strategies with appropriate timeframes Monitor and review actions/strategies to manage risk to an acceptable level Provide direction and information to relevant stakeholders

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Risk level	Managing risk – priority rating
	<ul style="list-style-type: none"> Inform the next meeting of the Audit & Risk Management Committee the actions taken to mitigate the risk and the outcome (or current status) <p>For WHS related risks, the following applies:</p> <ul style="list-style-type: none"> Reduce the risk rating so far as is reasonably practicable Should only be an acceptable level of risk for 'Major' or 'Catastrophic' consequences
Moderate	<p>Add risk to Risk Register</p> <p>Escalate risk to EO to coordinate with relevant work group to:</p> <ul style="list-style-type: none"> Identify and develop treatment strategies with appropriate timeframes Monitor and review actions/strategies to manage risk to an acceptable level <p>For WHS related risks, the following applies:</p> <ul style="list-style-type: none"> Reduce the risk rating so far as is reasonably practicable. May be an acceptable level of risk
Low	<p>Add to Risk Register</p> <p>Undertake localised risk management & actions (if required)</p> <p>Review within the department parameters and routine procedures</p> <p>For WHS related risks, the following applies:</p> <ul style="list-style-type: none"> Reduce the risk rating so far as is reasonably practicable. Commonly is an acceptable level of risk

6.3 Risk Treatment

Risk treatment can be conducted using a variety of methods. When looking at negative risks, treatments are aimed at reducing or removing the potential for consequences occurring. However, when looking at positive risks, (opportunities,) treatments look at ensuring that consequences are realised.

Risk treatment involves selecting one or more options for modifying the likelihood and/or consequence of risks and implementing those options. Once implemented, treatments provide or modify the controls. An action should be implemented to treat certain risks.

Justification for risk treatment is broader than solely economic considerations and should take into account all of **Fleurieu Regional Aquatic Centre Authority**'s obligations, voluntary commitments and stakeholder expectations. Appropriate risk treatment options should have regard to the organisation's objectives, risk appetite, risk criteria and available resources.

6.3.1 Risk treatment priorities

Recognising that not all risks can, or should, be managed, **Fleurieu Regional Aquatic Centre Authority** has determined that it will prioritise treatment of risks in the following order:

- Strategic risks that exceed risk appetite
- Strategic risks that exceed risk tolerance
- Operational risks that are rated Extreme or High
- Operational risks that are rated either Moderate or High that exceed risk appetite.

The **EO** may make exceptions to this prioritisation where there is an immediate or foreseeable risk to the health or safety of any person.



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[drafting note: This section should be customized to reflect Council's priorities. If risk appetite and/or tolerances have not yet been set, Council may choose to prioritise according to risk rating, e.g. Extreme or High]

6.3.2 Risk treatment options

Risk treatment options are not necessarily mutually exclusive or appropriate in all circumstances. Options for negative risks may include:

- | | |
|-----------|--|
| Eliminate | Remove an asset or discontinue an activity or service completely so as to eliminate the risk altogether |
| Share | Allocate risk to a third party, such as through appropriate contactor management, (noting however that S272 of the WHS Act voids any agreement or contract that purports to transfer any duty owed under the Act.) |
| Mitigate | Implement a type of treatment control to reduce or remove the risk. This may include but is not limited to options such as substitution (swapping), isolation (barricade), engineering (modify by design) or administration (policy/process) |
| Accept | Risk can be accepted for a number of reasons including: <ul style="list-style-type: none"> – no extra treatments being available; – meets the stated target risk appetite for the type of risk; – informed decision has been made about that risk; and – the cost of risk treatment significantly outweighs the potential risk exposure. |

For positive risks, options may include:

- | | |
|---------|---|
| Exploit | Implement strategies to capitalise on the likelihood of the risk eventuating and ensure that the organisation is able to respond quickly to the opportunities as they arise |
| Share | Partnering with another organisation that is able to add skills or value not currently available within Fleurieu Regional Aquatic Centre Authority |
| Enhance | Influence the factors that will improve the likelihood of the opportunity arising |
| Accept | Maintain status quo by informed decision |

In selecting any risk treatment, consideration must be given to new risks that may arise from implementing it and the processes outlined in this framework applied to those new risks.

6.3.3 Control characteristics

Risk treatments need to be designed in a manner to ensure they are sufficient to mitigate that risk, and have some of the following characteristics if they are to become an adequate control:

- a) Documented (e.g. Policies, procedures, task lists, checklists)
- b) Systems-oriented (e.g. integrated and/or automated)
- c) Preventative (e.g. system controls) or detective
- d) Consistent and regular (including during staff absence)

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- e) Performed by competent and trained individuals
- f) Clear responsibility and accountability
- g) Create value (i.e. benefits outweigh costs)
- h) Achievable for the organisation (based on available resources)
- i) Evidenced (i.e. documented or electronic audit trail)
- j) Confirmed independently

6.3.4 Preparing and implementing risk treatment plans

Risk treatment plans specify how the risk treatment options will be implemented, so that those involved understand what arrangements are in place and to allow progress against the plan to be monitored. Risk treatment plans are documented within the (risk register) and project management plans and provide the following information:

- a) Rationale for selection of treatment options;
- b) Responsibilities and accountability for approving and implementing the plan;
- c) Proposed actions and timeframes;
- d) Resourcing requirements;
- e) Constraints and contingencies; and
- f) Required reporting and monitoring.

6.4 Monitoring and Review

6.4.1 Review of risks and controls

Monitoring and review involves regular checking or surveillance of the effectiveness and efficiency of the risk management processes implemented.

A monitoring and review process will:

- a) Ensure that implemented controls are effective and adequate;
- b) Provide further information to improve risk assessment and treatment plans;
- c) Allow for the identification of emerging risks;
- d) Identify any new factors that may influence established strategies to mitigate risks.

It is essential to monitor all activities and processes in order to capture new or emerging risks arising from the changing environment, (both internal and external) and the activities undertaken by Fleurieu Regional Aquatic Centre Authority's employees, contractors and volunteers.

Monitoring and review guidelines and timeframes are captured in the Risk Reporting structure, (see section 7.)

6.4.2 Project risks

Due to the dynamic nature of most projects, a risk may change over the project lifecycle, triggering the need for reassessment. The monitoring and scheduled review process allows for both validation of risks to ensure that they remain relevant and adaptation of project plans as necessary.

Any changes in risks throughout the project and following completion should be recorded and used for future project planning.

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6.4.3 Internal audit

[Drafting note: if there is no internal audit function, this section needs to either be deleted or reworded to reflect Council's intent to implement internal auditing systems at a later stage]

The audit process plays an important role in evaluating the internal controls (and risk management processes) currently employed by Fleurieu Regional Aquatic Centre Authority. Our internal audit program is 'risk based' and provides assurance that we are managing our risks appropriately. In developing the Internal Audit Plan, consideration is given to the extreme, high and moderate risks identified by the risk assessment process. Internal audits assess the adequacy of selected controls identified.

The internal audit process will measure risk by:

- Measuring compliance** – has the organisation met its Policy objectives
- Measuring maturity** – measuring against best practice and sector benchmarking
- Measuring value add** – has the framework and risk culture added to the achievement of Fleurieu Regional Aquatic Centre Authority's strategic objectives

Information is shared between the risk management and internal audit functions. Changes in our risk profile are reflected in our Internal Audit Plan. Similarly, control issues identified through internal audit will inform our Risk Management Framework. The internal audits are conducted to provide assurance that key risks have been identified and the controls in place are adequate and effective, as per the following table.

Rating	Definition
Design adequacy	
Adequate	The control is designed in a manner that it can give reasonable assurance that the risk will be mitigated. In other words, existing systems and procedures cover known circumstances and provide reasonable assurance for majority of risks.
Partially adequate	The control is designed in a way that will partially mitigate the risk and designed in a way to partially meet the design objectives.
Inadequate	The design of the control is not sufficient enough to give reasonable assurance that the risk will be mitigated. There may be no systems and procedures in place, or existing systems and procedures are obsolete and require review.
Operating effectiveness	
Effective	The control operates in a manner that is effective in terms of being consistent, complete, reliable and timely.
Partially effective	The control partially operates in a manner that is effective in terms of being consistent, complete, reliable and timely.
Ineffective	The control does not operate in a manner that is effective in terms of being consistent, complete, reliable and timely.

It is to be noted that the overall combination of the results of design adequacy and operating effectiveness will provide the overall rating of the control based on the table for overall rating. This assists in identifying improvements to existing controls.

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	Effective	Partially effective	Ineffective
Adequate	Effective	Partially Effective	Ineffective
Partially adequate	Partially Effective	Partially Effective	Ineffective
Inadequate	Ineffective	Ineffective	Ineffective

7 Recording and reporting

7.1 General

The risk management process and its outcomes **are/will be** documented and reported, in order to:

- Communicate risk management activities and outcomes;
- Provide information for decision making;
- Provide opportunities for continuous improvement;
- Assist interaction with stakeholders, including those with responsibility and accountability for risk management activities.

Records will be managed and retained in accordance with State Records General Disposal Schedule for Local Government.

7.2 (Risk register)

[drafting note: if Member uses a software platform for its risk register, this should be captured here]

The **(risk register)** enables the organisation to document, manage, monitor and review strategic, operational and project risk information in order to build a risk profile and provide direction on how to improve risk management processes. The **(risk register)** can be used to monitor whether, using the approach outlined in this framework, the risk management process is resulting in an increasing trend towards potential for success and less risk with negative consequences.

7.2.1 Strategic risks

Strategic level risks are identified by the **Executive Officer** and the **Board** as part of an annual review at a minimum and will be recorded in the **(risk register)**. Any risks identified at the strategic level may be reflected in other corporate documents e.g. Strategic Plan, Annual Business Plan, and Asset Management Plans and mitigated through actions detailed within these documents; however should still be collated in the **(risk register)** for ease of monitoring and review.

Recording and reporting of strategic level risks is the responsibility of the **Executive Officer** and **Audit & Risk Management Committee**. [drafting note: Member may wish to change review frequency, e.g. quarterly to align with Audit Committee]

7.2.2 Operational risks

Operational risks will be recorded in the **(risk register)**, and be reviewed at least bi-annually by **EO**. Recording operational risks in the **(risk register)** and reporting of implementation and effectiveness of controls is the responsibility of **EO and workers**.



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[drafting note: if write access to the register is restricted, nominate which roles are responsible for entering risks & treatment information. Member may also wish to increase frequency of reviews]

7.2.3 Project risks

[drafting note: amend this paragraph as necessary to reflect Member's project management process]

Project level risks may be identified by the (project management team) at any time prior to, and during, the project management cycle and are initially recorded in the (project management plan) and consolidated in the (risk register). Recording and reporting of project risks rest with the (project owner).

7.3 Risk reporting

[drafting note: Sometimes it's useful to have a diagram of the risk reporting/escalation structure. This could be either included in this section of the framework or made mention of and referred to a diagram captured as part of the appendix (if wanted)]

7.3.1 Purpose

Risk based reports will draw data from the (risk register) and provide monitoring and profile information to the Board, via the Audit & Risk Management Committee and Executive Officer to assist with:

- Understanding Fleurieu Regional Aquatic Centre Authority's risk exposure;
- Identifying risks that require increased attention and action;
- Providing relevant information to the Board about risks likely to impact upon achievement of strategic objectives;
- Dissemination of information to workers at all levels to support them in making risk informed decisions; and
- Improving the risk culture and awareness throughout the organisation.

7.3.2 Content

[Drafting note: this should reflect Member's reporting &/or organisational structure & should correspond with other reporting requirements in this document]

Risk reporting will include:

Report content	Reported to	Frequency
Board and Committee reports to include discussion of potential risks, based on completed risk assessment and treatments, (with the exception of routine administrative matters)	Board and Committee members	All Board and Committee meetings
Review and update of the (risk register) by (Department Manager)s	(Executive Management Team)	Bi-monthly to (Executive Management Team), (or as otherwise required, e.g. organisational structure change/ process change/ new project)

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Report content	Reported to	Frequency
Report by EO on extreme and high strategic and/or operational risks, including actions taken to mitigate the risk and outcomes or current status [drafting note: customise to Member requirement; not all Members report operational risks to Audit Committee, or only report those likely to escalate to strategic risks]	Audit & Risk Management Committee	Each meeting, (as required)
Report of strategic risks (to verify that current risks are controlled within Board's risk appetite & tolerances & that there are strategies to address or monitor any emerging risks that have been identified) [drafting note: amend as required; not all Members are at a level of risk maturity &/or data collation to define/ report on tolerances]	Audit & Risk Management Committee	Biannual
Report on compliance with policy and related documents	Audit & Risk Management Committee	Annual
Risk evaluation outcomes and risk maturity modelling progress/ summary report	Executive Officer – detail Audit & Risk Management Committee - summary	Biennial

8 Training

8.1 Workers

The risk management policy and framework, together with supporting tools will be made available to all workers through (the intranet). [drafting note: customise according to where these documents are stored on the intranet/staff portal/records management system. Also include arrangements for workers who do not have electronic access]

Risk management is an overarching skill that sits across all functions and, as such, Fleurieu Regional Aquatic Centre Authority considers it to be a necessary competency that workers need in order to perform their day to day activities effectively. Risk Management awareness training will be provided to workers and will take into consideration the worker's role and level of past risk management experience and knowledge.

Risk management awareness training is captured on the training needs analysis (TNA), to ensure the effective implementation of this Framework.

8.2 Board Members

Board members are key strategic decision makers and it is therefore imperative that they have an understanding of Fleurieu Regional Aquatic Centre Authority's Risk Management Policy and Framework and their role in informed planning and decision making, based on sound risk management principles.



Risk Management Framework

Risk management awareness training will be scheduled within 12 months of Local Government elections. [drafting note: Member to set timeframe; this is not currently mandated by the Local Government Act.]

8.3 Audit & Risk Management Committee

Audit & Risk Management Committee members should, at a minimum, have an understanding of their roles and responsibilities as outlined in Fleurieu Regional Aquatic Centre Authority's Risk Management Policy and Framework, including the monitoring and review of reports and outcomes from management reviews and external audits.

9 Review of Risk Management Framework

This risk management framework and processes will be scheduled for review within 3 years from endorsement.

[drafting note: Member needs to update in line with organisation's document review requirements]

Risk Management Framework

10 Appendices

Appendix A: Definitions

Assurance	A process that provides a level of confidence that objectives will be achieved within an acceptable level of risk
Consequence	The outcome of an event expressed qualitatively or quantitatively, being a loss, injury, disadvantage or gain. There may be a range of possible outcomes associated with an event.
Control	An action that modifies risks and increases the likelihood that objectives and goals of an organisation will be achieved.
Enterprise Risk Management	The process that is applied in strategy setting and decision making throughout the organisation to identify, evaluate and manage potential risks that are likely to impact on achievement of objectives, set risk appetite and tolerance and manage risk within those parameters, and to provide reasonable assurance regarding the achievement of the organisation's objectives.
Event	Occurrence of a particular set of circumstances
Exposure/Rating	The risk exposure (also referred to as risk rating) is a qualitative value of the sum of the consequence of an event multiplied by the likelihood of that event occurring
External Context	External environment in which the organisation seeks to achieve its objectives
Frequency	A measure of the rate of occurrence of an event expressed as the number of occurrences of their event in a given time.
Internal Audit	An independent, objective assurance activity that uses a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.
Internal Context	Internal environment in which the organisation seeks to achieve its objectives
Likelihood	Chance of something happening
Monitor	To check, supervise, observe critically or record the progress of an activity, action or system on a regular basis in order to identify change.
Reasonable assurance	The concept that enterprise risk management, no matter how well designed and operated, cannot guarantee that an entity's objectives will be met. This is because of inherent limitations in all Risk Management Frameworks.
Risk Analysis	A systematic use of available information to determine how often specified events may occur and the magnitude of their consequences.
Risk Appetite	Is the amount of risk an organisation is prepared to accept in pursuit of its objectives
Risk Assessment	An overall process of risk identification, risk analysis and risk evaluation
Risk Culture	Risk culture refers to the behaviours that lead to how every person thinks about and manages risks,
Risk Evaluation	The process used to determine risk management priorities by comparing the level of risk against predetermined standards, target risk levels or other criteria.



Risk Management Framework

Risk Management	Coordinated activities to direct and control an organisation with regard to risk.
Risk Management Framework	Set of components that provide the foundations and organisational arrangements for designing, implementing, monitoring, reviewing and continually improving risk management throughout the organisation.
Risk Owner	Staff member with the accountability and authority to manage a risk
Risk Tolerance	The acceptable variation in outcomes related to specific performance measures linked to objectives the organisation seeks to achieve
Risk	The effect of uncertainty on objectives
Stakeholder	Person or organisation that can affect, be affected by, or perceive themselves to be affected by, a decision or activity

Risk Management Framework

Appendix B: Consequence Tables

Qualitative Measures of Consequence (excluding Project Risks)

[Drafting note: the consequence table must be tailored to reflect Council's circumstances – requires input from senior management. Note: People, financial losses & legal penalties require most customisation]

Rank	People	Financial/ Infrastructure	Service Delivery	Reputation	Environmental/ Cultural site disturbance	Legal/ Regulatory/ Policy
Insignificant	No or minor injuries not requiring first aid treatment, or near miss Annual staff turnover of <10%	Financial – low financial loss <\$100,000 impact on operating result Minor failure of infrastructure – no inconvenience to stakeholders	Insignificant interruption to a service – no impact to customers/business	Little community interest, low profile, no media items	Minor instance of environmental (e.g. soil, vegetation, coastal) damage. can be reversed immediately Minimal (but discernible) disruption to Aboriginal site. Minimal spill or litter able to be removed immediately	[drafting note: fines align with WHS Act – have left in the individual fines because they reflect seriousness of offence & may have a knock-on effect on Council's reputation but can be changed if Council does not have capacity to absorb] No noticeable statutory or regulatory impact Fines < \$10,000



Risk Management Framework

Rank	People	Financial/ Infrastructure	Service Delivery	Reputation	Environmental/ Cultural site disturbance	Legal/ Regulatory/ Policy
Minor	First aid treatment. Negligible impact on morale Annual staff turnover of <20%	Financial – medium financial loss >\$100,000 and <\$1,000,000 or 1% of rate revenue Minor failure that cannot be rectified immediately – minor inconvenience to stakeholders	Minor interruption to a service with minimal impact to customers/business	Low impact, some passing interest, low media profile	Minor impact to environment, e.g. on-site chemical release, spill or sand/soil movement that can be immediately contained. Can be reversed in the short term Minor disruption to Aboriginal site Litter able to be removed in a short time frame, (e.g. same day)	Minor/temporary non-compliance with statutory requirements Fines less than \$250,000 for the organisation



Risk Management Framework

Rank	People	Financial/ Infrastructure	Service Delivery	Reputation	Environmental/ Cultural site disturbance	Legal/ Regulatory/ Policy
Moderate	<p>Medical attention required. Short Term effect on morale and business</p> <p>Annual staff turnover of >20% of entire workforce or 30% of a work group</p> <p>Loss of member of Executive Management Team</p> <p>Loss of up to 4 Board members more than 12 months out from LG Elections [drafting note: this number would be the total number of members minus number required for quorum]</p>	<p>Financial – high financial loss >\$1,000,000 and <\$2,500,000 or 2.5% of rate revenue</p> <p>Significant failure of infrastructure that will require work-arounds - moderate inconvenience to stakeholders</p>	<p>Moderate Interruption to service delivery. Customer impact up to 48 hrs. Partial BCP action may be needed</p>	<p>Moderate impact, moderate public interest, public embarrassment, moderate media profile</p>	<p>Moderate impact to environment. Localised damage or chemical release that has potential to spread but can be contained or reversed with intensive efforts or outside assistance</p> <p>Noticeable disruption to Aboriginal site</p> <p>Litter removal requires outside assistance, (e.g. contractor or government agency)</p>	<p>Short-term non-compliance with moderate statutory requirements</p> <p>Fines < \$50,000 for an individual or < \$500,000 for the organisation</p>



Risk Management Framework

Rank	People	Financial/ Infrastructure	Service Delivery	Reputation	Environmental/ Cultural site disturbance	Legal/ Regulatory/ Policy
Major	<p>Extensive injuries - serious long term injury. Temporary disablement.</p> <p>Annual staff turnover of 30% - <75%</p> <p>Significant impact on morale and business</p> <p>Loss of 2 members of Executive Management Team</p> <p>Temporary loss of 6 or more (Council/Board) Members [drafting note: this should be the number that will prevent a quorum being formed]</p>	<p>Financial – major financial loss >\$2,500,000 and <\$5,000,000 or 5% of rate revenue</p> <p>Major failure of infrastructure that severely limits functionality – significant inconvenience to stakeholders</p>	<p>Major interruption to service delivery or production capability, Customer impact > 7 days. Component of BCP action may be needed.</p>	<p>Sustained public interest, high negative media profile, Premier/Cabinet publicly involved, third party action</p>	<p>Off-site chemical release, severe loss of environmental amenity or danger of continuing environmental damage.</p> <p>Significant disruption to Aboriginal site(s)</p>	<p>Significant non-compliance with essential statutory requirements</p> <p>Fines <\$300,000 for an individual or < \$1,500,000 for the organisation</p>



Risk Management Framework

Rank	People	Financial/ Infrastructure	Service Delivery	Reputation	Environmental/ Cultural site disturbance	Legal/ Regulatory/ Policy
Catastrophic	<p>Death. Long term effect on morale and performance of business Annual staff turnover of > 75%</p> <p>Loss of entire/majority of Executive Management Team</p> <p>Permanent loss of 6 or more (Council/Board) Members [drafting note: this should be the number that will prevent a quorum being formed]</p>	<p>Financial –</p> <p>huge/ catastrophic financial loss/exposure >\$5,000,000 or 5% of rate revenue</p> <p>Total failure of infrastructure</p>	<p>Major interruption to delivery of all or most services for more than 14 days. Full BCP action required.</p>	<p>Widespread public agitation, Government censure, high multiple impacts, widespread negative media profile</p>	<p>Toxic off-site chemical release with detrimental effect, major loss of environmental amenity or irrecoverable environmental damage</p> <p>Irreversible disruption to Aboriginal site</p>	<p>Long term or indefinite non-compliance with essential statutory requirements and may result in criminal charges</p> <p>Fines > \$300,000 for an individual or > \$1,500,000 for the organisation</p>

Risk Management Framework

Consequence Table for Project Risks

[drafting note: may be customised]

Rank	Cost	Schedule	Performance	Reputation	Safety
Insignificant	< 2.5% of total Project Budget	< 2.5% of total Project Schedule	Would cause the delivered capability to be functionally fit for all desired missions or tasks, but there may be some qualification to the level to which it would perform non-critical elements of the mission or task. Few such qualifications would exist.	Little community interest, low profile, no media items	Minor injuries not requiring first aid treatment, or near miss
Minor	2.5-10% of total Project Budget	2.5-10% of total Project Schedule	Would cause the delivered capability to be functionally fit for all desired missions or tasks, but there would be some qualification to the level to which it would perform non-critical elements of the mission or task. Several such qualifications would exist.	Low impact, some passing interest, low media profile	Minor Medical attention. Negligible impact on morale
Moderate	10-14% of total Project Budget	10-14% of total Project Schedule	Would cause the delivered capability to be partly functionally fit for purpose (i.e. degraded ability to perform all desired missions or tasks; however, there are known workarounds). There would be some qualification to the level to which it would perform (e.g. due to issues of relationships, concurrency, etc.). Several such qualifications would exist.	Moderate impact, moderate public interest, public embarrassment, moderate media profile	Medical attention required. Short Term effect on morale and project outcome.
Major	15-19% of total Project Budget	15-19% of total Project Schedule	Would cause the delivered capability to be only partly functionally fit for purpose (i.e. degraded ability to perform some core missions or essential tasks or unable to perform non-core missions or tasks, and there are no known workarounds).	Sustained public interest, high negative media profile, Premier/Cabinet publicly involved, third party action	Serious Long Term Injury. Temporary disablement. Significant impact on morale and project outcome.



Risk Management Framework

Rank	Cost	Schedule	Performance	Reputation	Safety
Catastrophic	>20% of total Project Budget	>20% of total Project Schedule	Would cause the delivered capability to be functionally unfit for its intended purpose (i.e. unable to perform core missions or essential tasks).	Widespread public agitation, Government censure, high multiple impacts, widespread negative media profile	Death. Long term effect on morale and project outcome.

Appendix C: Likelihood Table

[drafting note: may be customised]

Likelihood	Explanation – Operations [drafting note: Member to assess and amend time frames]	Explanation – Projects/ Business Case	Probability
Certain to occur	It is expected to occur in most circumstances, immediately or within a short period – at least once a year	Could be expected to occur more than once during the study or project delivery	Expected to occur in most circumstances
Very likely	Will probably occur in most circumstances – Around 1 – 5 years	Could easily be incurred and has generally occurred in similar studies or projects.	Probably will occur
Possible	Might occur at some time - within a 5 - 10 year period.	Incurred in a minority of similar studies or projects	Moderate probability of an incident
Unlikely	Could occur at some time - in a 10 – 20 year time frame.	Known to happen, but only rarely.	Low probability of an incident
Rare	May occur only in exceptional circumstances. Could be incurred in a greater than 20 year timeframe.	Has not occurred in similar studies or projects. Conceivable but in extreme circumstances.	Extremely low probability. Will only occur in exceptional circumstances

Appendix D: Risk matrix

[Drafting Note: This matrix should correspond to any existing risk management policies, procedures and templates, i.e. use one risk matrix throughout the organisation for consistency]

Consequence Likelihood	Insignificant	Minor	Moderate	Major	Catastrophic
Certain to occur	High	High	Extreme	Extreme	Extreme
Very likely	Medium	High	High	Extreme	Extreme
Possible	Low	Medium	High	Extreme	Extreme
Unlikely	Low	Low	Medium	High	Extreme
Rare	Low	Low	Medium	High	High



Risk Management Framework

Appendix E: Detailed Risk Areas

[Drafting note: This is a suggested breakdown of risk areas as mentioned in section 6.3.1.]

This would assist the Member to further breakdown their risks and determine any trend areas when undertaking their analysis (particularly their operational risks) across the organisation.

Member to determine if they want to break their risks down to this level and if so, determine if this list is appropriate (if not, update the list accordingly)

Aerodromes	
Aged Care	Does not include independent living support – refer HACC
Animal Management	Dog and cat management, control of feral/pest animals
Arts & Culture	May include performing arts, (e.g. theatre productions) but does not include events – refer Event Management
Caravan Parks / RV Facilities	
Cemeteries/Crematoria	
Child Care	
Coastal & Inland Waterways	Includes: Beachfront, Boat Ramps; Jetties
Community Development	
Land & Buildings	Includes: Building Safety; Hire of Facilities; Leasing Arrangements
Economic Development	
Emergency Management	Includes BCP, workplace emergencies, community emergencies
Event Management	Includes events organised by Fleurieu Regional Aquatic Centre Authority and third party events on Fleurieu Regional Aquatic Centre Authority land
Financial Management	Borrowings and other financial arrangements, debtors, creditors, rates and other revenue
Governance	Includes: special committees; Board members
HACC (Home And Community Care)	Includes: Home Maintenance and independent living support
Health – Communicable disease	Including pandemic
Health - Inspections	Food and other health inspections (proactive and reactive)
Health - Provision of clinical services	e.g. Immunisation
Human Resources	Includes recruitment and retention
Information Technology	Including IT infrastructure, cyber security and data protection
Library Services	Including home library, mobile library etc.
Planning & Development	Includes: Planning Development & Infrastructure Act, issues arising from past development approvals, certification & inspections



Risk Management Framework

Playgrounds/Outdoor Gym Equipment	includes nature play
Procurement, Contracts, Tenders	also covers contract/contractor management
Rail Interfaces	Includes: agreements, risk assessments
Regulatory	Includes: parking enforcement and fire prevention
Roads & Footpaths	Roads & footpath management
Smart Technology	Includes: Drones; driverless vehicles; CCTV; electric vehicle charging stations
Sport/Recreation/Leisure	Includes Leisure facilities/services; recreational reserves - sport & non-sport
Swimming Pools	Does not include jetty pools or swimming enclosures – refer coastal and inland waterways
Tree Management	
Tourism	Tourism - visitor centre, information bays
Volunteers	
Waste Management	Includes: rubbish collection, recycling and waste transfer stations
Water Management	Includes: CWMS, drainage, stormwater management and recycled water



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Risk Management Policy

20th January 2022



Risk Management Policy

First issue/ approved	
Classification	
Policy owner	
Last reviewed	
Next review	
Council file reference	
Responsible officer	
Relevant legislation	Local Government Act 1999 Work Health and Safety Act 2012 Civil Liabilities Act 1936 State Records Act 1997
Related documents	AS ISO 31000:2018 Risk Management - Guidelines Fleurieu Regional Aquatic Centre Authority Risk Management Framework Risk Appetite Statements if completed LGAMLS Scheme Rules as gazetted July 2020

Instructions: (delete this text box after use)

Drafting notes have been provided throughout this template to assist Members in the customisation of their Risk Management Policy. These are highlighted in **green** and are to be deleted prior to presenting the draft document for endorsement.

Items where minor customisation is required by the Member have been highlighted in **yellow**, (e.g. Member name, job titles); common language has been used throughout the template to allow “look up” and “replace” functions to be used.

1. Purpose

- 1.1. Fleurieu Regional Aquatic Centre Authority recognises that effective management of risk will support successful achievement of its vision and strategic objectives.
- 1.2. The purpose of the Risk Management Policy (the Policy) is to enable an integrated and systematic approach to risk management by:
 - Articulating Fleurieu Regional Aquatic Centre Authority's commitment to core risk management principles;
 - Supporting the implementation and maintenance of a Risk Management Framework (“the Framework”) that comprises the tools and processes that underpin the organisation's risk management approach.

2. Policy statement

- 2.1. The management of risk will be integrated into governance and leadership structures, including decision-making at all levels.
- 2.2. Fleurieu Regional Aquatic Centre Authority is committed to developing and maintaining structured and comprehensive risk management processes that are dynamic and based on best available information.

LGAMLS Risk Management Policy Template	Electronic version on the Intranet is the controlled version. Printed copies are considered uncontrolled. Before using a printed copy, verify that it is the current version.	Page 2 of 7
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Risk Management Policy

- 2.3. Engagement with **Fleurieu Regional Aquatic Centre Authority** employees and stakeholders is integral to the success of risk management processes and, as such, structures to facilitate consultation and communication will be **developed and** maintained.
- 2.4. **Fleurieu Regional Aquatic Centre Authority** will monitor and review its strategic, operational and project risks and apply learnings to continually improve efficiency and effectiveness.

3. Performance measures

The performance of the risk management program will be measured through the following performance indicators: [drafting note: these should be measured and monitored, so choose the 3 or 4 most applicable; delete those not applicable or currently measurable. Note that performance measures are also included in the model Risk Management Framework, so you should check these are aligned or alternatively delete from either the Policy or Framework. You may also want to include targets to measure against.]

- a) Number of strategic objectives achieved, (as a percentage of total)
- b) Year on year reduction in strategic risks rated “extreme” and “high”
- c) Percentage of strategic risks within risk appetite
- d) Number of **Board** Members and employees trained in risk management, (as a percentage of total)
- e) Tangible improvement in risk maturity modelling [drafting note: Strategic Risk Consultants can assist with conduct of risk maturity self-assessment]
- f) Percentage achievement of risk evaluation action plan actions

4. Legislative requirement and policy context

- 4.1. Section 48 of the Local Government Act 1999 (‘LG Act’) requires Councils to identify risks associated with a project and take steps to manage, reduce or eliminate those risks, (including by provision of periodic reports to the **EO** and to the **Board**)
- 4.2. Section 125 of the LG Act requires **Fleurieu Regional Aquatic Centre Authority** to ensure that appropriate policies, practices and procedures of internal control are implemented and maintained in order to assist the organisation to carry out its activities in an efficient and orderly manner to achieve its objectives.
- 4.3. Section 132A of the LG Act requires **Fleurieu Regional Aquatic Centre Authority** to ensure that appropriate policies, practices and procedures are implemented and maintained in order to ensure compliance with statutory requirements and achieve and maintain standards of good public administration.
- 4.4. Section 134(4) (b) of the LG Act requires **Fleurieu Regional Aquatic Centre Authority** to adopt risk management policies, controls and systems by a resolution passed by at least a two thirds majority of the **Board** Members prior to entering into financial arrangements for the purpose of managing, hedging or protecting against interest rates or other costs of borrowing money.
- 4.5. As a member of the Local Government Association Mutual Liability Scheme, **Fleurieu Regional Aquatic Centre Authority** is bound by the Scheme Rules, which include an obligation to ensure that adequate risk management and prevention strategies are put in place so as to absolutely minimise the risk of any incident, circumstance or matter that may give rise to a claim.



Risk Management Policy

5. Definitions

Definitions are outlined within the Framework.

6. Roles & responsibilities [drafting note: these should correspond to the Framework]

6.1. Board

The Board is responsible for:

- a) Setting the organisation's risk appetite and policy for managing risk;
- b) Giving adequate consideration to risks when setting objectives and making decisions;
- c) Fostering a culture that is consistent with the organisation's appetite for risk;
- d) Ensuring the organisation has the structures and processes in place to support decision making and management of risk;
- e) Setting an appropriate governance structure for risk and risk management including Audit & Risk Management Committee and delegations;
- f) Requiring the EO to demonstrate that the framework for managing risk is effective and appropriate; and
- g) Requiring the EO to provide information to allow the Board to understand the risks that may have material impacts on achievement of the organisation's objectives; and
- h) Considering recommendations from the Audit & Risk Management Committee relating to strategic risks or any other risk matter.

6.2. Audit & Risk Management Committee

The Audit & Risk Management Committee is responsible for:

- a) Reviewing and endorsing the criteria contained within the Risk Management Framework; [drafting note: if this is done at CEO/Management Team level, amend as appropriate]
- b) Reviewing reports from the Executive Officer and auditors to ascertain the adequacy of controls that have been implemented; and
- c) Monitoring strategic risks on a quarterly basis. [drafting note: amend to reflect agreed frequency]

6.3. Executive Officer (EO)

The EO has the responsibility for:

- a) Promoting a strong risk management culture by providing firm and visible commitment to risk management including ensuring appropriate accountability for the management of risk;
- b) Reviewing and endorsing the Risk Management Framework; [drafting note: framework is an operational document, however if it is intended that it be endorsed by Audit Committee or Council, amend as appropriate.]



Risk Management Policy

- c) Developing and implementing a framework that delivers a consistent approach to risk management by allocating resources and assigning authority, responsibility & accountability at appropriate levels within the organisation;
- d) Allocating and upholding accountability for managing risk;
- e) Ensuring the **Management Team** have the necessary knowledge and skills to effectively fulfil their risk management responsibilities;
- f) Regularly reviewing strategic and operational risks and maintaining an understanding of the environment in which the organisation operates, the risks it faces and the effectiveness of its controls;
- g) Ensuring compliance with legislative and contractual obligations and policy requirements;
- h) Providing reliable information about risks, controls and their effectiveness to the **Board**; and
- i) Escalating all strategic risks that exceed the organisation's risk appetite to the **Audit & Risk Management Committee** or **Board**, as required

6.4. Management Team

Members of the **Management Team** are responsible for:

- a) Commitment to, and promotion of, this Policy and the Framework;
- b) Monitoring the organisation's overall risk profile and mitigation strategies;
- c) Ensuring that risk management is embedded into all functions and activities, including decision making;
- d) Ensuring that risks that cannot be treated immediately are recorded on the risk register and that there is ongoing and regular review of the risk register, (including follow up and close out of overdue risk treatments);
- e) Incorporating risk treatments into **departmental/divisional/business unit** plans;
- f) Ensuring that staff, contractors, volunteers and other relevant stakeholders have the appropriate skills to be actively be involved in managing risk;
- g) Providing incentives and performance management arrangements that support the desired approach to managing risk;
- h) Promoting a proactive risk culture in accordance with business management initiatives;
- i) Collectively reviewing strategic risks and considering emerging risks, (prior to **Audit Committee**)
- j) Ensuring compliance with legislative and contractual obligations and policy requirements

6.5. Risk Manager [drafting note: amend to reflect the job title of the person who has responsibility for coordinating and maintaining the risk management system elements]

The **Risk Manager** is responsible for:

- a) Providing guidance and assistance to the **Management Team** and employees in relation to the application of this framework;
- b) Ensuring relevant risk information is recorded in the Risk Register and reported and escalated to the **Management Team** or cascaded to employees, as relevant;



Risk Management Policy

- c) Maintaining this Risk Management Policy and the Framework to ensure their currency and relevance; and
- d) Maintaining the Risk Register and reporting timeframes as required.

6.6. Employees, Volunteers and Contractors (Workers):

All Workers are responsible for:

- a) Understanding the risk management processes that apply to their area of work; and
- b) Identifying, evaluating, reporting and managing, (or escalating,) risks relating to daily activities and projects .

7. Review

This policy will be reviewed every 2 years, or more frequently if legislation, relevant standards or organisational needs change.

8. Availability

- 8.1. This Policy will be available on the Fleurieu Regional Aquatic Centre Authority's website with hard copies supplied on request.
- 8.2. The Framework is available to all employees via the intranet.

Approved:

Date:

Review history

Document History		
Version	Issue Date:	Description of Change
1.0	Sept 2016	New Document
2.0	April 2018	Revised to reflect ISO31000:2018 updates
3.0	May 2018	Updated for member centre
4.0	June 2020	Updated logo, Updated as per scheduled review and reflects the AS ISO 31000:2018
4.1	June 2020	Updated reference to Australian standard AS ISO 31000: 2018 – Risk management Guidelines, minor formatting
5.0	January 2022	Addition of State Records Act, removed reference to "Council", inclusion of measurable performance measures, addition of Scheme rules reference at 4.5, alignment of roles & responsibilities with Framework, addition of drafting notes, formatting



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FLEURIEU REGIONAL AQUATIC CENTRE AUTHORITY - RISK MANAGEMENT POLICY & FRAMEWORK REVIEW				
POLICY REVIEW				
Page	Section	Item	Description	Comment
3	Performance Measures	3	Selection of appropriate measures	Review for relevant measures
4	Audit & Risk Management Committee	6.2a	Review of Framework	EO or ARMC?
		6.2c	Monitoring	Quarterly? - nominate frequency
4	Executive Officer	6.3b	Reviewing and endorsing Risk Framework	EO or ARMC?
5	Executive Officer	6.3e	Management Team	No Management Team
5	Management Team	6.4	Management Team Responsibilities	No Management Team
5	Risk Manager	6.5	Risk Manager Responsibilities	No Risk Manager
FRAMEWORK REVIEW				
Page	Section	Item	Description	Comment
2	Purpose	2.0	Risk Appetite Statements	Currently not in place
3	Review History		Sign - Off on Framework Document	E.O. to sign or recorded in minutes
6	Local Govt. Risk Services	3 c)	Requirement for WHS, Asset & Risk Management Protocols	WHS Policy implemented 2016 - may require review
8	Integration	5.2	Framework Diagram	Requires review
8	Enterprise Risk Management	5.2.1	Risk Register	Decision on appropriate recording format
9	Strategic Planning & Decision Making	5.2.2	Integration into Board & Committee Reporting	Currently not in place
				WHS Policy implemented 2016 - may require review
9	Legislative Compliance	5.2.3	Requirement for WHS Management System	
9	Internal Audit	5.2.5	Requirement for internal audit program	
9	Emergency Management	5.2.6		Review for relevance
10	Plans	5.2.7	Business Continuity Plan	Currently not in place
10	Plans	5.2.7	Information Technology Disaster Recovery Plan	Currently not in place
10	Performance Management	5.2.8	Requires inclusion of Risk Management	Currently not in place
11-13	Roles & Responsibilities	5.3.2	Roles to be confirmed	N.B. No Executive Management Team, Business Units or Risk Manager
19-20	Risk Evaluation	6.2.3	WHS content requires review	To be consistent with WHS Policy
23-24	Internal Audit	6.4.3	Internal Audit function	Consider deleting
25	Project Risks	7.3	Project Team	Should this be changed to EO?
25	Reporting	7.3.2	Review & update of risk register	Requires EO to report to EO?
26-27	Board Members	8.2	Training	Consider timing
31-34	Consequence Table	App B	People Risks	Requires change to descriptions
33	Consequence Table	App B	Financial Risks	Requires review of \$ amounts
39-40	Detailed Risk Areas	App E	Detailed Risks	Requires identification of appropriate risks

To: FRAC Authority Board
From: Andrew Baker - Executive Officer
Subject: 8.1 YMCA Performance Report – Q2
Date: 3 February 2023
References: Nil
Consultation: James Lomax, YMCA
Confidential
Attachments:

Recommendation

Pursuant to section 90(2) of the Local Government Act 1999, the Authority orders that all members of the public be excluded, with the exception of the Executive Officer, Administration Officer and James Lomax (YMCA), on the basis that it will receive and consider item 8.1 YMCA Performance Report – Q2.

The Authority is satisfied, pursuant to section 90(3)(d) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (i) could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (ii) would, on balance, be contrary to the public interest.*

Accordingly, the Authority is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential to prevent the disclosure of commercial information of a confidential nature (not being a trade secret) as it includes information that may prejudice the commercial position of the Authority.

To: FRAC Authority Board
From: Andrew Baker - Executive Officer
Subject: 8.2 Budget Review 2022-2023 – Q2
Date: 3 February 2023
References: Nil
Consultation: James Lomax, YMCA
Confidential
Attachments:

Recommendation

Pursuant to section 90(2) of the Local Government Act 1999, the Authority orders that all members of the public be excluded, with the exception of the Executive Officer, Administration Officer and James Lomax (YMCA), on the basis that it will receive and consider item 8.2 Budget Review 2022-2023 – Q2.

The Authority is satisfied, pursuant to section 90(3)(d) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (i) could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (ii) would, on balance, be contrary to the public interest.*

Accordingly, the Authority is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential to prevent the disclosure of commercial information of a confidential nature (not being a trade secret) as it includes information that may prejudice the commercial position of the Authority.

To: FRAC Authority Board
From: Andrew Baker - Executive Officer
Subject: 8.3 Confidential Resolutions Register – Audit & Risk Management Committee
Date: 3 February 2023
References: Nil
Consultation: A&RMC
Confidential
Attachments:

Recommendation

Pursuant to section 90(2) of the Local Government Act 1999, the Authority orders that all members of the public be excluded, with the exception of the Executive Officer and Administration Officer, on the basis that it will receive and consider item 8.3 Confidential Resolutions Register – Audit & Risk Management Committee.

The Authority is satisfied, pursuant to section 90(3)(d) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (i) could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (ii) would, on balance, be contrary to the public interest.*

Accordingly, the Authority is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential to prevent the disclosure of commercial information of a confidential nature (not being a trade secret) as it includes information that may prejudice the commercial position of the Authority.

To: FRAC Authority Board
From: Andrew Baker - Executive Officer
Subject: 8.4 Adoption and Noting of Confidential Minutes
Date: 3 February 2023
References: Nil
Consultation: Nil
Confidential
Attachments:

Recommendation

Pursuant to section 90(2) of the Local Government Act 1999, the Authority orders that all members of the public be excluded, with the exception of the Executive Officer and Administration Officer, on the basis that it will receive and consider item 8.4 Adoption and Noting of Confidential Minutes.

The Authority is satisfied, pursuant to section 90(3)(d) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

commercial information of a confidential nature (not being a trade secret) the disclosure of which –

- (i) could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and*
- (ii) would, on balance, be contrary to the public interest.*

Accordingly, the Authority is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential to prevent the disclosure of commercial information of a confidential nature (not being a trade secret) as it includes information that may prejudice the commercial position of the Authority.

To: FRAC Authority Board
From: Andrew Baker - Executive Officer
Subject: 8.5 A&RMC Self-Assessment Review
Date: 3 February 2023
References: Nil
Consultation: Nil
Confidential
Attachments:

Recommendation

Pursuant to section 90(2) of the Local Government Act 1999, the Authority orders that all members of the public be excluded, with the exception of the Executive Officer and Administration Officer, on the basis that it will receive and consider item 8.5 Annual Self-Assessment Survey – Audit & Risk Management Committee 2022.

The Authority is satisfied, pursuant to section 90(3)(a) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

Information the disclosure of which would involve the unreasonable disclosure of information concerning the personal affairs of any person (living or dead)

personal affairs of a person includes—

(a) that person's—

- (i) financial affairs;
- (ii) criminal records;
- (iii) marital or other personal relationships;
- (iv) personal qualities, attributes or health status;

(b) that person's employment records, employment performance or suitability for a particular position, or other personnel matters relating to the person, but does not include the personal affairs of a body corporate.

Accordingly, the Authority is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential to prevent the unreasonable disclosure of information relating to the personal affairs for a particular person or persons, relating to performance of duties.

To: FRAC Authority Board
From: Andrew Baker - Executive Officer
Subject: 8.6 FRACA Resourcing
Date: 3 February 2023
References: Authority Charter
Consultation: Nil
Confidential
Attachments:

Recommendation

Pursuant to section 90(2) of the Local Government Act 1999, the Authority orders that all members of the public be excluded on the basis that it will receive and consider item 8.6 FRACA Resourcing.

The Authority is satisfied, pursuant to section 90(3)(a) of the Act, that the information to be received, discussed or considered in relation to this Agenda Item is:

Information of which would involve the unreasonable disclosure of information concerning the personal affairs of any person (living or dead).

Accordingly, the Authority is satisfied that the principle that the meeting should be conducted in a place open to the public has been outweighed by the need to keep the information and discussion confidential because it relates to a selection process yet to be finalised.