AGENDA.

City of South Perth

Audit, Risk and Improvement Committee Meeting

10 March 2026

Notice of Meeting

Mayor, Councillors and External Committee Members

The next Audit, Risk and Improvement Committee Meeting will be held on Tuesday 10 March 2026 in the City of South Perth Council Chamber, corner Sandgate Street and South Terrace, South Perth commencing at 6.00pm.

LIZ LEDGER
CHIEF EXECUTIVE OFFICER

5 March 2026

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Contents

Audit, Risk and Improvement Committee - Agenda

1.   DECLARATION OF OPENING / ANNOUNCEMENT OF VISITORS

2.   ATTENDANCE

   2.1   APOLOGIES

   2.2   APPROVED LEAVE OF ABSENCE
          Nil.

3.   DECLARATIONS OF INTEREST

4.   CONFIRMATION OF MINUTES

   4.1   AUDIT, RISK AND IMPROVEMENT COMMITTEE MEETING HELD: 10 November
          2025

   Officer Recommendation

   That the Minutes of the Audit, Risk and Improvement Committee Meeting held 10
   November 2025 be taken as read and confirmed as a true and correct record.

5.   PRESENTATIONS

6.   BUSINESS ARISING FROM PREVIOUS MEETING

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7. REPORTS

7.1 INTERNAL AUDIT REPORT - CUSTOMER SERVICE, SOCIAL MEDIA AND STAKEHOLDER ENGAGEMENT

File Ref: D-26-920
Reporting Officer(s):   Liz Ledger, Chief Executive Officer

Summary

This report tables the Internal Audit Report – Customer Service, Social Media and Stakeholder Engagement.

Officer Recommendation

That the Audit Risk and Improvement Committee notes the Customer Service, Social Media and Stakeholder Engagement audit report contained in Confidential Attachment (a)

Background

The City's Strategic Internal Audit Plan 2025 to 2027 outlines the areas within the business in which to review over the 3-year period.

Table 3. below provides the key areas for review and the year in which this is recommended. This report presents the findings for the Customer Service, Social Media and Stakeholder Engagement audit.

Table 3:

Audit Project	Last Reviewed	Hours			Reason for Inclusion / Comment
		FY/25	FY/26	FY/27	
Regulation 5 Financial Controls	2021	120			Scheduled for audit in 2023/2024 but not conducted. To be prioritised Dec 2024.
Regulation 17 CEO Review	2021	100			Scheduled for audit in 2023/2024 but not conducted. To be prioritised Dec 2024.
Procurement and Contract Management	2021		100		High risk areas
Records Management	-		80		No audit in the past 4 years
Customer service, Social-Media & Stakeholder Engagement	2020		80		Last audit was in 2020
Environmental Regulation	-			80	No audit in the past 4 years
Fraud and Misconduct including Conflict of Interest, Gifts and Hospitality	-			100	No audit in the past 4 years
Business Continuity and Disaster Recover	-			60	No audit in the past 4 years
Sub Total Hours		220	260	240	
Development of Strategic Internal Audit Plan	-	30	-	-	

The objectives of Internal Audits are to:

- Provide independent consideration of risks, controls and processes.

- Promote mechanisms that encourage a culture, which is conscious of risk, control and processes; and

- Assist and support the City in its drive for process improvement.

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Comment

An audit was undertaken in relation to Customer Service, Social Media and Stakeholder Engagement at the City and completed in November 2025. The objective of this audit was to determine whether the City's controls are adequate and effective for ensuring customer service, social media, and stakeholder engagement processes are appropriately managed. It is important to note that this audit does not specifically pertain to the level of engagement, content quality and timing for social media.

Effective customer service, social media, and stakeholder engagement are critical functions for the City in achieving its strategic directions of community, economy, environment (build and natural), and leadership. These functions play a key role in connecting the City with communities, businesses, and contribute significantly to the City's reputation, trust and ability to deliver value to the community.

The scope of this audit is outlined below.

1. The identification of risk factors and adequacy of controls in relation to social media activities across customer service, communications and stakeholder engagement.

2. Guidance provided to staff on personal and professional social media use.

3. Procedures for determining and assessing breaches of the Code of Conduct.

4. Implications for pre-employment screening and other recruitment processes.

5. Training and awareness.

6. How to integrate best practices guidelines such as the Social media: Guidance for Australian Public Service Employees and Agencies.

7. Assessment of lost opportunities of not utilising social media effectively.

8. Stakeholder Engagement risk – failure to appropriately plan and execute a communications strategy to develop and maintain an effective relationship with ratepayers and the community.

9. Consideration of any other risks apparent to the functions of customer service, communication and stakeholder engagement.

Overall, the report finds the City has instilled several good practices including a comprehensive Customer Service Plan, customer service benchmarking, a Digital Communications Plan, relevant Management Practices and Stakeholder Engagement processes aligned with best practice guidelines.

The report identified one area with a low risk finding:

Finding	Rating	Recommendation	Management response
Insufficient governance over the 2024 Digital Communications Plan	Low	Establish a centralise reporting framework that consolidates all updates and outcomes related to Digital Communications Plan, including progress tracking on each action of the four implementation states and ensuring that records are maintained.	The Digital Communication plan has been implemented over the last 18 months, and many actions are now complete. The document will be reviewed and updated in 2026 In progress.

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			Target Date: December 2026

The audit identified two areas as 'improvement opportunities.'

Finding	Rating	Recommendation	Management response
Opportunity to enhance guidance on personal and professional social media use following better practices	Improvement opportunity	Consider enhancing the M657 Social Media Management Practice by incorporating examples and guidance from public sector best practices (e.g. APS guidelines) particularly around passive engagement such as being tagged in external posts. Promote awareness and understanding of the social media guidelines through ongoing internal communications, such as email reminders, workshops, or periodic briefings	The City to review M657. In progress. Target Date: July 2026 Communicate social media guidelines in internal communications. In Progress/Ongoing
Opportunity to consider enhancing risk register with additional risks to improve Customer Service.	Improvement opportunity	Consider reviewing and update the risk registers to consider the inclusion of specific risks related to customer service operations and ensure all leadership team are aware of the risks relevant to their business units.	This will be actioned. In progress. Target Date: July 2026

The Auditor report on Customer Service, Social Media and Stakeholder Engagement in shown in Confidential Attachment (a).

Consultation

The audit involved discissions with relevant officers.

Policy and Legislative Implications

Nil.

Financial Implications

The cost of this audit was $10,010.00. Staff time was also required.

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Key Risks and Considerations

Risk Event Outcome	**Reputational Damage** Deals with adverse impact upon the professional reputation and integrity of the City and its representatives whether those persons be appointed or elected to represent the City. The outcome can range from a letter of complaint through to a sustained and co-ordinated representation against the City and or sustained adverse comment in the media. **Legislative Breach** Refers to failure to comply with statutory obligations in the manner in which the City, its officers and Elected Members conduct its business and make its decisions and determinations. This embraces the full gamut of legal, ethical and social obligations and responsibilities across all service areas and decision making bodies within the collective organisation.
Risk rating	Low
Mitigation and actions	Independent audits are a tool used by the City to identify risk. By implementing the recommendations or taking opportunities to improve, this reduces risk for the City and reduces chances of legislative breaches and/or reputational damage. Failure to regulate social media activities may increases reputational risk to the city. Inappropriate social media use has the potential to generate confusion or conflict in the community that may result in a loss of confidence in decision making. Audit findings are listed in an Audit log and provided to the ARIC for full transparency.

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Strategic Implications

This matter relates to the following Strategic Direction identified within Council's [Strategic Community Plan 2021-2031](#):

Strategic Direction:	Leadership
Aspiration:	A local government that is receptive and proactive in meeting the needs of our community
Outcome:	4.3 Good governance
Strategy:	4.3.4 Maintain a culture of continuous improvement

Attachments

7.1 (a):	Customer, Social Media and Stakeholder Engagement Audit Report *(Confidential)*

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7.2 INTERNAL AUDIT REPORT – RECORDS MANAGEMENT

File Ref: D-26-5766
Reporting Officer(s): Bree Websdale, Director Corporate Services
Liz Ledger, Chief Executive Officer

Summary

This report tables the Internal Audit Report – Records Management.

Officer Recommendation

That the Audit Risk and Improvement Committee notes the Records Management audit report contained in Confidential Attachment (a)

Background

The City's Strategic Internal Audit Plan 2025 to 2027 outlines the areas within the business in which to review over the 3-year period.

Table 3. below provides the key areas for review and the year in which this is recommended.

Table 3:

Audit Project	Last Reviewed	Hours			Reason for Inclusion / Comment
		FY/25	FY/26	FY/27	
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Environmental Regulation	-			80	No audit in the past 4 years
Fraud and Misconduct including Conflict of Interest, Gifts and Hospitality	-			100	No audit in the past 4 years
Business Continuity and Disaster Recover	-			60	No audit in the past 4 years
Sub Total Hours		220	260	240	
Development of Strategic Internal Audit Plan	-	30	-	-	

The objectives of Internal Audits are to:

- Provide independent consideration of risks, controls and processes.

- Promote mechanisms that encourage a culture, which is conscious of risk, control and processes; and

- Assist and support the City in its drive for process improvement.

Comment

An audit was undertaken in relation to the City's Records Management Processes. Effective records management processes are essential in ensuring that business processes are efficient and that the risks associated with incomplete or improper record storage are minimised. Regular reviews of records management practices are necessary to ensure that policies are being followed and that controls remain effective.

The Auditor report on Records Management is shown in **Confidential** Attachment (a).

The scope of the audit considered the key controls in the following areas:

1.   Record Keeping Plan (RKP) is aligned with the State Records Act (SRA) 2000 and has been regularly reviewed and approved by the State Records Office (SRO);

2.   Record keeping processes and documents are in place to ensure compliance at a high level with the SRA including the Record Keeping Plan, Metadata Management Policy, Thesaurus and Retention and Disposal Plan and key requirements are complied with;

3.   Record Keeping Systems (RKS) are compliant with the SRA and Record Management Practices at the City;

4.   Staff are aware and adhering to record keeping responsibilities under the SRA and Record Management practices, including the security/confidentiality of these records, at the City;

5.   Consistent and systematic approach to record keeping requirements across the organisation;

6.   Access to records is appropriately controlled through a system or hard copy records;

7.   Disposal/destruction of both electronic and paper-based records are aligned to the General Disposal Authority for Local Government Records (GDA), by either staff or records;

8.   Appropriate back-up processes exist for hard and softcopy records; and

9.   Effectiveness of controls exist for a centralised process for all incoming and outgoing records (e.g. mail).

The objective of the audit was to determine whether controls are adequate controls in place in respect of Records Management, and compliance with the State Records Act 2000.

The audit has assessed the City as adequate for overall control effectiveness for records management.

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The report identified the following good practices by the City:

1.6 Positive Observations and Good Practices

Based on our review, we observed several instances of good practices as follow:

The City has an updated RKP supported by up-to-date policies, procedures, guidelines, and manuals. These framework documents incorporate the RKS used by the City, including RM8 and ECM.

Records classifications are automatically enforced by quick add profile (QAP) templates, and documents cannot be registered without having an assigned QAP. A system QAP is further monitored for any missing information and corrected by the System Administrator.

Internal communication programs are developed, including:
— A follow up from the Records Officer at the conclusion of one (1) month from the date of records training, to ensure recordkeeping procedures are understood and followed.
— Quarterly Recordkeeping Awareness Program to ensure all existing officers are aware of their roles and responsibilities.

Regular reviews and backups for both digital and physical records are noted. For physical records, regular checks are completed annually by the Records Coordinator to ensure storage is free from pests, dampness, mustiness, or mold. For digital records, incremental backups are completed daily, while full backups are completed once a month.

The City has completed an internal review and developed controls and improvement measures to ensure compliance with the SRA requirements. These improvements are documented in the City's RKP.

The report identified six recommendations/opportunities for improvement, as shown below:

Finding	Rating	Recommendation/ Opportunity for Improvement	Management Response
Limited controls to ensure records are captured in the approved record keeping system.	Moderate	Enhance monitoring controls such as implementing regular checks to ensure self-generated business records are not stored outside of the approved Record keeping system.	Perform audit of 1 or 2 high risk areas each quarter. This is undertaken in conjunction with ongoing training. Target date: 30/06/2026
		Develop and implement an Information asset register (IAR) to assist employees in understanding where specific records should be stored in.	Deliver an adopted IAR. This information is currently contained in other locations/documents and will be centralised in an IAR. Target date: 30/06/2026

Improvements for ongoing recordkeeping training and staff awareness.	Moderate	Strengthen monitoring mechanism by appropriately delegating and escalating to relevant Managers to ensure employees complete the training within required timeframes.	The City has a structured training program for all new employees which include comprehensive record keeping. Reminders are sent when the training has not been completed in the first 2 weeks and continue until the training has been completed. The City could look at escalating the reminders to the employee's manager and automating these in the ERP system. Target date: 30/12/2026
		Implement periodic refresher training to maintain staff awareness of recordkeeping obligations and ensure knowledge remains current.	The City will look at introducing a refresher records keeping training module. Target date: 30/06/2026
Timeliness of Records Disposal	Low	Continue to develop and implement disposal program and consider strengthening the monitoring mechanisms to ensure timely disposal activities in accordance with the GRDALG.	The City has a disposal program in its RKP which: • sets the minimum retention period that different categories of records must be held before their legal disposal • authorises the destruction of records that have reached their minimum retention period • identifies records that will be retained permanently as State archives. The City is currently behind on disposal of records that are due for destruction. The City will address this over the balance of 2026. Target date: 30/12/2026

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Delay in Adoption of the City-wide Business Continuity Plan (BCP).	Low	Continue development progress of the BCP and ensure record keeping requirements, including protection and disaster recovery of both digital and physical records, are clearly incorporated into the BCP.	The Information Systems Business Continuity Plan has been drafted. The Information Systems Disaster Recovery Management Practice is in draft and will be integrated with the Disaster Preparedness Plan for Physical Vital Target date: 30/06/2026

Consultation

Nil.

Policy and Legislative Implications

State Records Act 2000

The City has a Record Keeping Plan that has been reviewed and endorsed as per the *State Records Act 2000*.

Financial Implications

The cost of this audit was $14,300.

Staff time was also required.

Key Risks and Considerations

Risk Event Outcome	Legislative Breach
	Refers to failure to comply with statutory obligations in the way the City, its officers and Elected Members conduct its business and make its decisions and determinations. This embraces the full gamut of legal, ethical and social obligations and responsibilities across all service areas and decision-making bodies within the collective organisation.
Risk rating	Low
Mitigation and actions	Independent audits are a tool used by the City to identify risk. By implementing the recommendations or taking opportunities to improve, this reduces risk for the City and reduces chances of legislative breaches and/or reputational damage. Audit findings are listed in an Audit log and provided to the ARIC for full transparency.

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Strategic Implications

This matter relates to the following Strategic Direction identified within Council's [Strategic Community Plan 2021-2031](#):

Strategic Direction:	Leadership
Aspiration:	A local government that is receptive and proactive in meeting the needs of our community
Outcome:	4.3 Good governance
Strategy:	4.3.4 Maintain a culture of continuous improvement

Attachments

7.2 (a):	Internal Audit Report - Records Management *(Confidential)*

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7.3   AUDIT REGISTER - QUARTERLY REPORT

File Ref: D-26-2051
Reporting Officer(s):   Bree Websdale, Director Corporate Services
                             Liz Ledger, Chief Executive Officer

Summary

This report provides an update on the progress of actions included in the Audit Register since last presented to the ARIC at the meeting on 10 November 2025.

Officer Recommendation

That the Audit, Risk and Improvement Committee Notes the progress recorded against each item within the Audit Register in Confidential Attachment (a).

Background

The confidential Audit Register as contained in Confidential Attachment (a) is presented at each ARIC meeting. The Register:

- lists every open external and internal audit finding.

- describes the progress of implementing audit recommendations and tracks that as a percentage of completion.

The Audit Register is formatted to ensure clarity as detailed below:

1. The Audit Register presents audit outcomes by 'Finding' numbers. Any given Finding may have more than one 'Recommendation' and associated 'Agreed Management Action.'

2. Where a Finding has more than one Agreed Management Action, it is represented with double lines around that entire Finding.

3. Updates in relation to each Finding are displayed in chronological order i.e. latest update appears at the bottom of each Finding.

4. Each Finding that is to be closed (i.e. 100% complete for all Agreed Management Actions) is represented by a purple 'Closed Tally' column on the right.

5. All Findings that are being recommended for closure by the ARIC are filtered to the end of the register.

Only when all Agreed Management Actions related to a Finding are marked as 100% complete, will the Audit Register report recommend that the Finding be closed.

All closed items will not form part of the Audit Register report for future meetings.

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Comment

The Audit Register is shown in **Confidential** Attachment (a).

The following findings will be closed as they are complete:

Finding	Comment
208	Network access management.
214	Project management framework.
236	Payroll staff

Consultation

The recommendations are thoroughly reviewed prior to presentation.

Policy and Legislative Implications

Local Government Act 1995
Local Government (Financial Management) Regulation 1996
Local Government (Audit) Regulations 1996

Financial Implications

The cost of OAG Audit for 2024/2025 was $111,554 plus GST.

The Internal Audit function has a budget of approximately $60,000 for the 2025/2026 financial year.

Officers time to undertake recommendations and report on progress has not been estimated.

Key Risks and Considerations

Risk Event Outcome	Legislative Breach
	Refers to failure to comply with statutory obligations in the manner in which the City, its officers and Elected Members conduct its business and make its decisions and determinations. This embraces the full gamut of legal, ethical and social obligations and responsibilities across all service areas and decision-making bodies within the collective organisation
Risk rating	Low
Mitigation and actions	The City is subject to a comprehensive OAG Audit each year.

The City has a Council endorsed 3-Year Strategic Internal Audit Plan which runs from 2024/2025 to 2026/2027.

The City prepares a compliance audit return and undertakes Regulation 5 and 17 audits as pre legislation.

The recommendations from those reports are reported on Quarterly reporting to ARIC and Council for transparency. |

Strategic Implications

This matter relates to the following Strategic Direction identified within Council's Strategic Community Plan 2021-2031:

Strategic Direction:	Leadership
Aspiration:	A local government that is receptive and proactive in meeting the needs of our community
Outcome:	4.3 Good governance
Strategy:	4.3.1 Foster effective governance with honesty and integrity and quality decision making to deliver community priorities

Attachments

7.3 (a):   Audit Register *(Confidential)*

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7.4   CORPORATE BUSINESS PLAN - QUARTERLY REPORT

File Ref: D-26-3357
Reporting Officer(s):   Liz Ledger, Chief Executive Officer

Summary

This report provides an update on the objectives in the Corporate Business Plan 2025/2026 - 2028/2029.

Officer Recommendation

That the Audit, Risk and Improvement Committee notes:

1.   the progress of listed project/activities from the Corporate Business Plan as shown in **Attachment (a).**

2.   the results recorded against each Measure of Success within the Corporate Business Plan as described in the Key Performance Indicator report contained within **Attachment (b)**.

Background

The Corporate Business Plan 2025 to 2029 (**CBP**) was endorsed by Council at its meeting held 24 June 2025. The CBP outlines in detail the services and projects required to ensure delivery of the Strategic Community Plan 2021-2031 (**SCP**).

At each ARIC meeting, a report is presented on progress against projects/activities in the CBP for the prior quarter. This report presents on the period 1 October – 31 December 2025.

It should be noted that Council is currently going through the planning process for a new Council Plan (formerly the Strategic Community Plan). This will result in a new Annual Plan and key performance indicators. The anticipated completion date for this document is August 2026.

Comment

Corporate Actions

The following table provides an overview of the progress of the 36 Corporate Actions scheduled for delivery in the CBP for 2025/2026:

On Track	Complete
32 (89%)	4 (11%)

The CBP Report (**Attachment (a)**) is presented for information, with comments in the 'Quarterly Updates' column.

Measures (KPIs)

The following table provides an overview of the progress of those 35 Key Performance Indicators (KPI's / Measures):

Achieved	Not Achieved/ In progress
30 (86%)	5 (14%)

The KPI Report (**Attachment (b)**) is presented for information, with a description in the 'Result Comment' column when a KPI is not achieved.

The following table extracts information from this Report in relation to KPIs that were below the targets set or not yet completed:

KPI	Measure	Result	Status Update
Library Attendee Targets The number of people visiting or attending the City's two Library branches (Manning and South Perth).	= 5 visits per capita annually (ALIA minimum benchmark) (235,000 visits p.a. for 25/26) Target for Q1 and Q2- 117,500	112,712	Attendee numbers were 4,788 less than the target and this may have been affected by library closures due to renovations.
Event Attendee Targets The number of people attending the City's community events and partnership events.	Obtain the targeted number of 10,000 people per annum at community events delivered by the City and partnering organisations. Target for Q1 and Q2- 5,000	Estimated at 4,819	Event numbers were estimated as 181 less than the target. Attendance for Q2 events includes Sept Citizenship, Emerging Artist, Remembrance Day, Carols at Sunset & Christmas Markets.
Recreation Facility Condition Satisfaction The percentage satisfaction rate of facility user survey respondents reporting satisfaction with the condition of the facility they have booked.	Maintain satisfaction rate above 70%	59	This rating was derived from the recent MARKYT Community Scorecard that rated sport / recreation services and facilities at 59%.
Parking Revenue The percentage increase in parking revenue.	Increase the City's revenue from parking by 10% each year	0	The cost of parking was not increased by 10% and the City did not add any additional parking bays. There is a drop of 19% between October - December 2024 when compared to October - December 2025.

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Internal Audit Completion - The number of internal audits completed relative to the number of audits planned in the strategic internal audit plan (SIAP). (Complete/Planned).	Maintain completion rate above 75%	66	3 internal audits were scheduled for this financial year. 2 have been finalized. **The third is on track for completion by end of FY.**

Consultation

Nil.

Policy and Legislative Implications

Local Government (Administration) Regulations 1996.

Financial Implications

All projects and activities listed in the CBP that require funding, have budget allocations in 2025/26.

Key Risks and Considerations

Risk Event Outcome	**Reputational Damage**
	Deals with adverse impact upon the professional reputation and integrity of the City and its representatives whether those persons be appointed or elected to represent the City. The outcome can range from a letter of complaint through to a sustained and co-ordinated representation against the City and or sustained adverse comment in the media.
	Project Cost
	This relates to any project exceeding the project budget. Ranging and exceeding the budget by up to 10% to 30% and over.
	Project Time
	This relates to any project exceeding the project deadline. Ranging from exceeding the deadline by up to 10% to 30% and over.
Risk rating	Low
Mitigation and actions	The City has the following measures in place to mitigate the risk of non-completion and delayed completion of items in the CBP:
	1. Annual Budget allocation for projects (staffing and financial).
	2. Midyear budget review.
	3. Annual business planning.
	4. Regular communications.
	5. Setting KPIs for staff.
	6. EMT tracking of CBP projects/activities.
	7. Quarterly reporting to ARIC and then Council.
	8. OAG Audits and internal auditing.

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Strategic Implications

This matter relates to the following Strategic Direction identified within Council's [Strategic Community Plan 2021-2031](#):

Strategic Direction:	Leadership
Aspiration:	A local government that is receptive and proactive in meeting the needs of our community
Outcome:	4.3 Good governance
Strategy:	4.3.4 Maintain a culture of continuous improvement

Attachments

7.4 (a):   Project Status Update

7.4 (b):   KPI Status Updates

7.5   INTEGRITY FRAMEWORK

File Ref: D-26-3704
Reporting Officer(s):   Bree Websdale, Director Corporate Services
                             Liz Ledger, Chief Executive Officer

Summary

A review of the City of South Perth Integrity Framework is presented to the Audit, Risk and Improvement Committee for review.

Officer Recommendation

That the Audit, Risk and Improvement Committee notes City of South Perth Integrity Framework as contained in **Attachment (c)** and recommends adoption by Council.

Background

Part of the Public Sector Commissioner's (**PSC**) role is to promote and maintain integrity, conduct and ethics in the government sector. In 2020, the PSC released the Integrity Strategy for WA Public Authorities 2020-2023. Integrity Frameworks are mandatory for public sector bodies (departments, ministerial offices etc) and encouraged for all other public authorities such as local governments.

A comprehensive, well-coordinated and implemented framework helps an authority:

- manage identified integrity risks;
- prevent misconduct and corruption;
- develop a culture built on integrity;
- have leadership oversight;
- build robust planning, performance, monitoring and review processes;
- continuously improve its approach to integrity;
- inform stakeholders, including integrity bodies, about its approach to integrity.

In October 2024, the PSC published a new Integrity Strategy for WA Public Authorities 2024-28 (**Attachment (b)**) with an Integrity Framework Maturity Self-Assessment.   The PSC Self-Assessment Tool contains 4 indicators that provide an overarching description of what the approach to integrity looks like at each level – Emerging, Developing, Embedded and Excelling.

Emerging	• Authorities at this maturity level have an unclear approach to integrity, meaning it is partially or not documented and not fully compliant. • Integrity is not defined or well understood by staff. • Integrity actions and initiatives tend to be unplanned, inconsistent and reactive. • Accounting for integrity only relates to meeting compliance obligations.
Developing	• Authorities at this maturity level are documenting their approach to integrity and it is mostly compliant. • What integrity means is becoming clearer to staff as the tone from the top is being communicated. • Integrity actions and initiatives are being planned for and coordinated but not yet integrated. • Accounting for integrity is moving beyond compliance obligations and more towards improvement initiatives.
Embedded	• Authorities at this maturity level have a clear approach to integrity, meaning it is fully documented and compliant. • Integrity is well communicated by leaders, understood by staff and integrated into business practices. • Integrity actions and initiatives are planned, fit-for-purpose, implemented and continuously refined. • Accounting for integrity is based on improvements being made from periodic assessments and supported by leadership commitment.
Excelling	• Authorities at this maturity level have an approach to integrity that is fully integrated into all decision making and planning. • Integrity is modelled and reinforced by leaders and practiced by staff who understand their obligations. • Integrity actions and initiatives are flexible enough to meet integrity challenges and respond to new and emerging risks. • Accounting for integrity is based on improvements being made from ongoing assessment. Improvements are prioritised and implementation is monitored as part of a continuous improvement approach.

Comment

The City's existing Integrity Framework is provided at **Attachment (a)**. The Framework outlines the City's approach to integrity and how it endeavours to prevent and addresses improper conduct.

The PSC Self-Assessment Tool has been completed by the City to provide an overview of the state of integrity across the City as at December 2025 (**Attachment (d)**).

The City has assessed itself at the "Developing" maturity level for most elements. The assessment has found that although integrity is part of staff training and is referred to in corporate documents it is not embedded in day-to-day culture across all levels of the City.

Integrity is essential for creating a sustainable, respectful, and effective culture. It ensures transparency, accountability, ethical behaviour.

Improving the City's risk maturity and commitment to integrity will need to be an area of focus for the City. This key role will be for the City's leaders (Council and Senior Staff), as they set the ethical tone, and foster a culture where integrity is embedded in decision-making and behaviours.

Training is also important to ensure all staff possess the knowledge and skills to adhere to ethical obligations expected of them.

A review of the Framework has also been undertaken against the new Integrity Strategy and the PSC's Integrity Framework Template. The revised Framework is provided at **Attachment (c)**. The following changes are proposed to the document:

- Revision of the Framework's structure and content to ensure consistency with the PSC Integrity Framework and the Integrity Model for Western Australian public authorities.

- Incorporation of the four improvement areas identified in the Integrity Model:
  - Plan and act to improve integrity
  - Model and embody a culture of integrity
  - Learn and develop integrity knowledge and skills
  - Be accountable for Integrity

- Update of roles and responsibilities to reflect requirements under the Integrity Framework.

- Replacement of the Integrity Snapshot Tool with the PSC Self-Assessment Tool.

Consultation

The PSC recommends public sector bodies reassess their approach using the Self-Assessment Tool no less than every three years.

In light of the City's developing status, it is recommended that the framework will be reviewed annually and presented to the Committee and then Council for adoption.

Policy and Legislative Implications

Corruption, Crime and Misconduct Act 2003

Public Interest Disclosure Act 2003

Public Sector Management Act 1994

Policy P694 Fraud & Corruption Control

Financial Implications

Implementation of the Framework requires ongoing staff resources and training expenses. Budget may be required in 2026-2027 to enable sufficient resourcing.

Key Risks and Considerations

Risk Event Outcome	**Legislative Breach** Refers to failure to comply with statutory obligations in the manner in which the City, its officers and Elected Members conduct its business and make its decisions and determinations. This embraces the full gamut of legal, ethical and social obligations and responsibilities across all service areas and decision-making bodies within the collective organisation. **Financial Loss** An adverse monetary impact on the City as a consequence of a risk event occurring. A grading is assigned to different levels of potential loss relative to the significance of the impact on the City's ongoing operations and its ability to deliver expected services. **Reputational Damage** Deals with adverse impact upon the professional reputation and integrity of the City and its representatives whether those persons be appointed or elected to represent the City. The outcome can range from a letter of complaint through to a sustained and co-ordinated representation against the City and or sustained adverse comment in the media.
Risk rating	Medium
Mitigation and actions	The Integrity Framework is part of the City approach to integrity. It helps to reduce misconduct risk and subsequent legislative breach (and financial and reputation loss) by: • Reinforcing a culture built on integrity. • Establishing coordinated risk-based integrity systems. • Requiring development of integrity knowledge and skills. • Promoting consistent expectations of behaviour.

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Strategic Implications

This matter relates to the following Strategic Direction identified within Council's [Strategic Community Plan 2021-2031](#):

Strategic Direction:	Leadership
Aspiration:	A local government that is receptive and proactive in meeting the needs of our community
Outcome:	4.3 Good governance
Strategy:	4.3.1 Foster effective governance with honesty and integrity and quality decision making to deliver community priorities

Attachments

7.5 (a):	City of South Perth Integrity Framework 2020
7.5 (b):	PSC Integrity Strategy for WA Public Authorities 2024-2028
7.5 (c):	Proposed City of South Perth Integrity Framework
7.5 (d):	City of South Perth Self Assessment

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7.6   RISK MANAGEMENT - QUARTERLY REPORT

File Ref: D-26-2045
Reporting Officer(s):   Bree Websdale, Director Corporate Services
                             Liz Ledger, Chief Executive Officer

Summary

This report outlines activities undertaken by the City of South Perth relating to Risk Management, Business Continuity and Workplace Health and Safety.

Officer Recommendation

That the Audit, Risk and Improvement Committee notes the details of the activities contained in the body of this report.

Background

The City's Audit, Risk and Improvement Committee (**ARIC**) is a Committee of Council in accordance with the *Local Government Act 1995* (**the Act**).

Pursuant to regulation 16 of the *Local Government (Audit) Regulations 1996,* a function of the Committee is to receive and review reports on the appropriateness and effectiveness of the City's systems and procedures in relation to risk management.

This activity report provides an update on the City's risk management practices undertaken for the previous quarter in relation to Strategic Risks, Business Continuity and Workplace Health and Safety.

Comment

Strategic Risk

On 23 February 2026, a Strategic Risk Workshop was facilitated by an external consultant. The workshop was attended by Council Members and Independent Members of the ARIC.

The quarterly review of the current Strategic Risk Registers has been deferred to enable the outcomes of the workshop to inform a review and amendment to the Strategic Risk Register.

An updated Strategic Risk Register will be finalised in the next quarter.

Operational Risk

In line with the Risk Management Framework 2024, all operational risks assessed with a residual risk rating of High or Extreme are reported to the ARIC.

There are no Operational risks rated as High or Extreme.

<u>Business Continuity Plan</u>

The City's Business Continuity Management Framework establishes the City's Business Continuity Management capability through four key components and further documentation:

1. Emergency Management Procedures (Emergency evacuation) – the immediate response to an event or critical incident with a focus on ensuring the safety of people followed by the protection of assets.

2. Critical Incident Management – the management of critical incident related issues including the management of stakeholders.

3. Business Continuity Plans – the process of restoring critical elements of City services and functions within the City's service model. This includes the recovery of IT systems by invoking the IT disaster recovery plan.

4. Business Recovery – the process of long-term recovery of all operational and functional capability and performance.

The City's Business Continuity Management Framework was presented to the ARIC at its 12 September 2023 meeting.

The City's business continuity plan is under review and anticipated to be provided to the ARIC at the next meeting for noting.

The purpose of a BCP is to enable the City to respond effectively to incidents, safeguard people and assets and recover normal operations in a timely and coordinated manner. Aligned with the City's Risk Management Framework, policies and practices, the BCP provides structured guidance and information to support informed decision-making in the event of a business interruption.

<u>Work Health and Safety</u>

During the last quarter, the following key Work Health and Safety (**WHS**) the following activities and initiatives were undertaken:

1. The annual ISO 45001 surveillance audit was successfully completed, and the City's ISO 45001 accreditation has been maintained.

2. Review of Management of Volunteers and creation of new documentation.

3. Emergency protocols and evacuation maps were reviewed and updated.

4. As part of the City's commitment to continuous improvement and employee wellbeing, the City has taken steps to become a menopause-friendly workplace, including the development of a Menopause Friendly Guidelines document.

Consultation

Nil.

Policy and Legislative Implications

Local Government Act 1995
Local Government (Audit) Regulations 1996
Work Health and Safety Act 2020

Financial Implications

All activities listed have been completed within allocated budget.

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Key Risks and Considerations

Risk Event Outcome	**Legislative Breach**
	Refers to failure to comply with statutory obligations in the manner in which the City, its officers and Elected Members conduct its business and make its decisions and determinations. This embraces the full gamut of legal, ethical and social obligations and responsibilities across all service areas and decision making bodies within the collective organisation.
Risk rating	Low
Mitigation and actions	Setting and quantifying risk appetite.
	Ensuring risk management functions are resourced.
	Regular risk reviews and identifying potential risks before they occur so that impacts can be minimised and opportunities realised.
	Embedding risk practices into City operations.

Strategic Implications

This matter relates to the following Strategic Direction identified within Council's [Strategic Community Plan 2021-2031](#):

Strategic Direction:	Leadership
Aspiration:	A local government that is receptive and proactive in meeting the needs of our community
Outcome:	4.3 Good governance
Strategy:	4.3.4 Maintain a culture of continuous improvement

Attachments

Nil.

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7.7   COUNCIL RESOLUTION TRACKING

File Ref: D-26-928
Reporting Officer(s):   Liz Ledger, Chief Executive Officer

Summary

This report provides the Audit, Risk and Improvement Committee with an update on the status of Council Resolutions made in 2025.

Officer Recommendation

That the Audit, Risk and Improvement Committee notes the contents of this report.

Background

A Status Report on Council Resolutions is maintained and available on the City's website for the period 2021 to 2025.

Commencing from this Audit, Risk and Improvement Committee (**ARIC**) meeting, a report will be provided to each ARIC meeting detailing Council resolutions and their status.

The Council Resolutions Register is managed as follows:

- After a Council Meeting, each resolution is entered on the Register.

- Each resolution is assigned to the relevant Manager/Director.

- The resolution is marked as in progress or completed.

- Items that have been completed are shown in green.

- Items that are not completed or in progress are shown in red.

Comment

In 2025, the City held 11 Ordinary Council Meetings and 1 Special Council Meeting.

The table below details the number of Council Resolutions that were made at each meeting and their status:

Meeting Date	Number of Resolutions	Status
25 February 2025	19	All completed
25 March 2025	28	All completed
22 April 2025	13	All completed
27 May 2025	10	All completed

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24 June 2025	17	16 completed
		1 on hold
22 July 2025	8	7 completed
		1 in progress
12 August 2025 (Special)	1	All completed
26 August 2025	18	15 completed
		3 in progress
23 September 2025	4	All completed
28 October 2025	21	19 completed
		2 in progress
18 November 2025	5	All completed
16 December 2025	25	23 completed
		2 in progress
January 2026	No meeting	-
February 2026	Meeting had not concluded at the time of release of the ARIC Agenda.	-

The 2025 Register is presented as **Attachment (a)**.

Consultation

The Register will be reviewed at every Executive Management Team meeting. Previously it was reviewed quarterly by the Executive Management Team.

Policy and Legislative Implications

Local Government Act 1995

Financial Implications

Nil.

Key Risks and Considerations

Risk Event Outcome	**Legislative Breach**
	Refers to failure to comply with statutory obligations in the manner in which the City, its officers and Elected Members conduct its business and make its decisions and determinations. This embraces the full gamut of legal, ethical and social obligations and responsibilities across all service areas and decision making bodies within the collective organisation.
	Reputational Damage
	Deals with adverse impact upon the professional reputation and integrity of the City and its representatives whether those persons be appointed or elected to represent the City. The outcome can range from a letter of complaint through to a sustained and co-ordinated representation against the City and or sustained adverse comment in the media.
Risk rating	Low
Mitigation and actions	Council Resolutions are maintained in a register and there is visibility and accountability of the Register through the ARIC, Council and on the website.
	They are reviewed regularly by the Executive Management Team.

Strategic Implications

This matter relates to the following Strategic Direction identified within Council's [Strategic Community Plan 2021-2031](#):

Strategic Direction:	Leadership
Aspiration:	A local government that is receptive and proactive in meeting the needs of our community
Outcome:	4.3 Good governance
Strategy:	4.3.1 Foster effective governance with honesty and integrity and quality decision making to deliver community priorities

Attachments

7.7 (a):   2025 Council Resolutions Register

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8. MEETING CLOSED TO THE PUBLIC

9. OTHER RELATED BUSINESS

10. CLOSURE

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