TOWN OF VICTORIA PARK

Audit, Risk and Improvement Committee

Agenda – Monday 13 July 2026

WE'RE OPEN
VIC PARK

Please be advised that an **Audit, Risk and Improvement Committee** will be held at **5.30 PM** on **Monday 13 July 2026** in **Council Chambers**, Administration Centre at 99 Shepperton Road, Victoria Park.

Mr Carl Askew – Chief Executive Officer
10 July 2026

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1 Declaration of opening

Acknowledgement of Country

Ngany djerapiny Wadjak – Noongar boodja-k yaakiny, nidja bilya bardook.

I am honoured to be standing on Whadjuk - Nyungar country on the banks of the Swan River.

Ngany kaaditj Noongar moort keny kaadak nidja Wadjak Noongar boodja. Ngany kaaditj nidja Noongar birdiya – koora, ye-ye, boorda, baalapiny moorditj Noongar kaadijtin, moort, wer boodja ye-ye.

I acknowledge the traditional custodians of this land and respect past, present and emerging leaders, their continuing cultural heritage, beliefs and relationship with the land, which continues to be important today.

Ngany youngka baalapiny Noongar birdiya wer moort nidja boodja.

I thank them for the contribution made to life in the Town of Victoria Park and to this region.

2 Attendance

Presiding Member	Mr Jonathan Seth
Mayor	Mayor Karen Vernon
Banksia Ward	Cr Scott Ingram
Jarrah Ward	Cr Andra Biondi Cr Daniel Minson
Independent Committee Members	Ms Caroline Parry
Chief Executive Officer	Mr Carl Askew
Chief Financial Officer	Mr Duncan Olde
Chief Operations Officer	Ms Alison Luobikis
Manager Governance and Risk	Mr Brett Douglas
Manager Technology and Digital Strategy	Mr Ernie Prandl
Meeting Secretary	Ms Laine Cooke

2.1 Apologies

Audit, Risk and Assurance Advisor	Mr Mark Sully

2.2 Approved leave of absence

Nil.

3 Declarations of interest

3.1 Declarations of financial interest

A declaration under this section requires that the nature of the interest must be disclosed. Consequently, a member who has made a declaration must not preside, participate in, or be present during any discussion or decision-making procedure relating to the matter the subject of the declaration. An employee is required to disclose their financial interest and if required to do so by the Council must disclose the extent of the interest. Employees are required to disclose their financial interests where they are required to present verbal or written reports to the Council. Employees can continue to provide advice to the Council in the decision-making process if they have disclosed their interest.

3.2 Declarations of proximity interest

Elected members (in accordance with Regulation 11 of the Local Government [Rules of Conduct] Regulations 2007) and employees (in accordance with the Code of Conduct) are to declare an interest in a matter if the matter concerns: a) a proposed change to a planning scheme affecting land that adjoins the person's land; b) a proposed change to the zoning or use of land that adjoins the person's land; or c) a proposed development (as defined in section 5.63(5)) of land that adjoins the persons' land.

Land, the proposed land adjoins a person's land if: a) the proposal land, not being a thoroughfare, has a common boundary with the person's land; b) the proposal land, or any part of it, is directly across a thoroughfare from, the person's land; or c) the proposal land is that part of a thoroughfare that has a common boundary with the person's land. A person's land is a reference to any land owned by the person or in which the person has any estate or interest.

3.3 Declarations of interest affecting impartiality

Elected members (in accordance with Regulation 11 of the Local Government [Rules of Conduct] Regulations 2007) and employees (in accordance with the Code of Conduct) are required to declare any interest that may affect their impartiality in considering a matter. This declaration does not restrict any right to participate in or be present during the decision-making process. The Elected Member/employee is also encouraged to disclose the nature of the interest.

4 Confirmation of minutes

Recommendation
That the Audit, Risk and Improvement Committee confirms the minutes of the Special Audit, Risk and Improvement Committee meeting held on 25 May 2026 (adjourned to 2 June 2026).

5 Presentations

6 Method of dealing with agenda business

Recommendation
That Audit and Risk Committee in accordance with clause 58 of the *Meeting Procedures Local Law 2019* suspends clause 50 - Speaking twice of the *Meeting Procedures Local Law 2019* for the duration of the meeting.

7 Reports

7.1 Elizabeth Ballie Investigation Update

Location	**Operations**
Reporting officer	Chief Operations Officer
Responsible officer	Chief Operations Officer
Voting requirement	Simple Majority
Attachments	1. To VP Independent Review Briefing Note V 1 20260608 [**7.1.1** - 5 pages]

Summary

This report is to provide the Audit Risk and Improvement Committee with an overview of the improvement program arising from the Elizabeth Baillie Tree Removal Investigation

Recommendation
The Audit, Risk and Improvement Committee notes progress that has been made against Council Resolution 36/2026.

Background

1. The outcome of the Elizabeth Baillie Tree Removal Investigation report was presented to Council for it's consideration at the 17 March 2026 OCM
2. Council moved an alternate motion to the Officer's recommendation which resulted in a number of actions (resolution 36/2026). Of relevance to this Committee are the following:

    1. *Directs the Chief Executive Officer to report to Council at the May 2026 meeting with his Executive Response to the Investigation Report addressing the following:*
        (d) the options for the Town to engage an independent consultant to review the findings and recommendations in the report

    2. *Directs the CEO to conduct a review of Policy 255 – Tree Management based on the policy gaps identified in the Report and present a revised Policy 255 for consideration at a Policy workshop by 30 June 2026.*

    4. *Directs the CEO to develop and commence implementation of a Project Management Improvement Program (Program) by no later than December 2026 to raise the maturity, consistency, and performance of project management across the Town, including but not limited to:*

        a. conducting a maturity assessment of the Town's current project management framework, governance and processes;
        b. development of a new Project Management Governance Framework that defines stages of a project, the core processes and project management activities, roles and responsibilities, project

management tools and governance and decision-making and that is practical and adaptable to scale and complexity of projects delivered across the Town;

c. *development of a Project Management Policy for adoption by Council;*
d. *a review of the resourcing of the Town's Project Management Office with recommendations for future resourcing;*
e. *professional development training for all employees undertaking project management activities;*
f. *incorporation of standard terms governing tree protection and tree removal management into all Town contracts involving capital construction, redevelopment and upgrade projects on Town land and appropriate remedies;*
g. *assessment of the need for suitable project management tools or software for procurement by the Town.*

5. *Directs the CEO to engage an external consultant by no later than 30 June 2026 to assist the Town in developing the Program, and to bring a report to Council by the June OCM if a budget allocation is required for this purpose.*

7. *Refers the Program to the Audit, Risk and Improvement Committee for:*
   a. *ongoing monitoring of the progress of the development and implementation of the Program;*
   b. *a review of the Program to be conducted within 2 years of implementation.*

8. *Directs the CEO to provide regular updates to the Audit Risk and Improvement Committee (beginning from July 2026) on the Program including identified actions and deliverables, and how the CEO will be overseeing and supporting the rollout of the Program, including identified milestones and indicators of success.*

9. *Requests the CEO to include project management for consideration as part of the Town's next Internal Audit Plan.*

10. *Requests the CEO to develop a tree planting program in collaboration with the Urban Forest Strategy Working Group to provide replacement trees at the Elizabeth Baillie Precinct as soon as possible, following delivery of the final arborist report, and with endorsement by Department of Planning Lands and Heritage.*

3. Whilst it is recognized that only the progress of the Project Management Framework was to be referred, for completeness, the actions from the resolution with dates of 30 June or later have been reported here.

Discussion

4. Encore 5.0 was engaged to review the investigation report. The review scope encompassed:
   a) Assessment of ICAM investigation process, team qualifications and procedural fairness
   b) Evaluation of evidence quality, data validity, and information completeness
   c) Review of key findings and causal analysis
   d) Assessment of remediation recommendations for feasibility and appropriateness

5. The Review concluded that:

the ICAM Investigation meets expected standards of procedural fairness, evidence quality, and governance assurance in line with Australian Local Government practices. Notwithstanding the Materially Inadequate rating for the Town's underlying data and record-keeping practices, the ICAM investigation

process itself was conducted rigorously and fairly. The ICAM Investigation team was appropriately qualified and experienced, procedural fairness was observed, and the adopted recommendations provide a credible and comprehensive framework to prevent recurrence.

6. Following completion of the investigation, a cross-functional team was established to review Policy 255: Tree Management. This work culminated in a policy workshop with Elected Members on 23 June 2026, providing an opportunity to consider a range of practical scenarios to help clarify expectations and align the intent of the policy with the accompanying management practices. Prior to the workshop, Elected Members were provided with a draft version of the proposed revised policy and invited to submit feedback for consideration. The feedback and outcomes of the workshop are currently being incorporated into further refinements of the policy. Once this process is complete, the revised policy is expected to be presented to Council for formal consideration through the Town's standard policy review and approval process.

7. An RFQ is currently in the market to procure a landscape architect who will undertake an assessment of the landscape – as currently planted, the features highlighted in the heritage listing and the trees and location where the trees were removed. This will then feed into a planting program that contemplates not only replacement trees following removal but also succession planting to preserve and enhance the heritage landscape values of the site over the long term. The proposed planting program will be developed in consultation with, and shared with, the Department of Planning, Lands and Heritage (DPLH) to ensure alignment with relevant heritage management objectives and requirements.

8. Drawing from the insights from the independent review of the ICAM investigation, Encore 5.0 assisted in defining the scope for Project Management Framework consultant engagement. In all, eleven packages of work have been included in this scope:

Work Package	Key Deliverables / Outcomes
WP1 — Diagnostic & Discovery	Current-state assessment, gap analysis, stakeholder interviews, baseline report
WP2 — PM Framework Design	Methodology, lifecycle templates, stage-gate model, documentation standards
WP3 — Governance Framework	Governance structure, oversight committees, escalation paths, delegated financial authorities
WP4 — Roles, Responsibilities & RACI	Role definitions, RACI matrices for program management and governance activities
WP5 — Policy & Procedure Suite	Revised policies, SOPs, document register, environmental and compliance obligations
WP6 — Environmental & Compliance	Environmental requirements, Australian Standards compliance, KPI framework
WP7 — Delegated Financial Authorities	DFA matrix, approval thresholds, financial controls, audit trail requirements
WP8 — Executive & Council Dashboards	Program management and governance dashboards for executive and council reporting
WP9 — Supplier Performance Management	SPM framework, scorecards, specialist adviser panels, contract performance requirements
WP10 — Quality Assurance & Compliance	QA plan, regulatory and environmental compliance framework, including independent and specialist technical assurance reviews

WP11 — Capability & Training	Training needs analysis, training delivery, and knowledge transfer plan

9. Following a high value RFQ process, the decision was taken to appoint KPMG for this piece of work. KPMG will deliver the Project Management Framework using an agile approach, building and iterating on current project use cases, employing AI-enabled tools to ensure that the PMF processes can be sustained. The current work program estimates delivery within a 24-week window:
    a. Discovery: Weeks 1-6 (4 sprints)
    b. Build and Test: Weeks 7-18 (4 sprints)
    c. Transfer: Weeks 19-24 (4 sprints)

10. Work is anticipated to commence during July/August 2026.

11. The CFO and the COO will form a Steering Committee to direct this work and to ensure the timely availability of resources. Through the sprint process, showcases to C-Suite will be delivered ahead of acceptance of deliverables.

Relevant documents

Independent Consultant Report (attached)

Legal and policy compliance

Not applicable

Financial implications

Current budget impact	Sufficient funds exist within the annual budget to address this recommendation.
Future budget impact	Not applicable.

Risk management consideration

Risk impact category	Risk event description	Risk rating	Risk appetite	Risk Mitigation
Financial	Rework requires an hourly rate to refine the product	Low	Low	Treat: regular project meetings to understand burn rate of budget
Environmental			Medium	
Health and safety			Low	
Data, Information Technology and Cyber	Application of Copilot is beyond the current use case for the Town – may	Low	Medium	Treat: inclusion of Technology and Digital Strategy on project SME group

	surface data that is unexpected	
Assets		Medium
Compliance Breach		Low
Reputation		Low
Service delivery interruption		Medium

Engagement

Internal engagement	
Stakeholder	Comments
	Will occur in the next phase of Project Management Framework delivery

Strategic alignment

Civic Leadership	
Community Priority	Intended public value outcome or impact
CL1 – Effectively managing resources and performance.	Timely decision making and escalation to ensure that project risks are well managed Improved visibility of project delivery performance
CL3 - Accountability and good governance.	Improved and consistent governance in the delivery of projects

7.2 IT Systems Audit Report

Location	**Town-Wide**
Reporting officer	Manager Technology and Digital Strategy
Responsible officer	Chief Financial Officer
Voting requirement	Simple Majority
Attachments	1. ARIC Response July 2026 [**7.2.1** - 8 pages]

Summary

The 2024/25 Information System Audit identified some areas of improvement for the Town's Information Technology team to consider. Due to the timing and content of the response to the Audit, Risk and Improvement Committee, it was unclear as to what aspects of the recommendations had been actioned. The committee requested an update on the status of the findings. The attachment to this report details the status of these items.

Recommendation
That the Audit & Risk Committee recommends that Council receives these updates concerning the actions taken in response to the auditor's findings.

Background

1. Each year, as part of the annual financial audit conducted on behalf of the OAG, the Town's system access, data security and cybersecurity protocols are reviewed. This was conducted by RSM Australia for the year ending 30 June 2025.
2. The findings received from RSM were assessed by management and appropriate actions were either undertaken or planned to be addressed as required. A report detailing the management responses and actions were tabled at the ARIC meeting in April 2026.
3. The committee was not satisfied with the responses and requested a comprehensive update on the proposed actions to clarify the Town's responses to the findings.

Discussion

4. The attached document outlines the findings of the RSM Audit and details the actions that have been undertaken, or are in the process of being undertaken, by the Town's IT team. The table also shows the approximate dates of when the various actions were completed.
5. As a result of the detailed review that took place to fully document the Town's responses to the audit findings, some new requirements were identified and added to the list of tasks to fully address the findings.
6. Some cross-functional findings are still in progress due to the complex nature of the solution to the finding and the knock-on effect on other processes.
7. Due to a number of projects currently in progress, such as the implementation of a new HelpDesk application and the re-negotiation of the Town's Managed Security Services contract, a number of

the solutions that have been implemented will require re-implementation once these projects have been completed.

Relevant documents

Not applicable.

Legal and policy compliance

Not applicable.

Financial implications

Current budget impact	Sufficient funds exist within the annual budget to address this recommendation.
Future budget impact	Not applicable.

Risk management consideration

Risk impact category	Risk event description	Risk rating	Risk appetite	Risk Mitigation
Financial	Potential financial loss from data corruption/data loss/information loss due to incident or attack.	Extreme	Low	TREAT risk by having back-ups, disaster recovery planning, cybersecurity frameworks.
Environmental	Not applicable.			
Health and safety	Not applicable.			
Data, Information Technology and Cyber	Loss of ICT or disruption to ICT from data corruption/data loss/information loss due to incident or attack.	Extreme	Medium	TREAT risk by having back-ups, disaster recovery planning, cybersecurity frameworks.
Assets	Not applicable.			
Compliance Breach	Not applicable.			
Reputation	Negative perception from data corruption/data loss/information loss due to incident or attack.	Extreme	Low	TREAT risk by having back-ups, disaster recovery planning, cybersecurity frameworks.

Service delivery interruption	Impact on service delivery from data corruption/data loss/information loss due to incident or attack.	Extreme	Medium	TREAT risk by having back-ups, disaster recovery planning, cybersecurity frameworks.

Engagement

Internal engagement	
Stakeholder	Comments
IT Team	Worked through findings and suggested solutions and timeframes
Finance Team	Reviewed proposed solutions and timeframes

Strategic alignment

Civic Leadership	
Community Priority	Intended public value outcome or impact
CL3 - Accountability and good governance.	

7.3 Operational Risk Register Update

Location	**Town-wide**
Reporting officer	Manager Governance and Risk
Responsible officer	Chief Executive Officer Manager Governance and Risk
Voting requirement	Simple majority
Attachments	1. Town of Victoria Park - Assessment of Operational Risk - Final Internal Audit Report 2025 (1) [**7.3.1** - 17 pages] 2. Strategy Corporate Performance Solution Proposal 2025-09-25 (1) [**7.3.2** - 16 pages]

Summary

This report is being presented in accordance with Council Resolution 247/2025, which, inter alia, required the CEO to bring a report to the Audit, Risk and Improvement Committee by 30 June 2026, which:

a. outlines the process for the Town to redevelop its operational risk register including processes for implementation, monitoring and regular review;
b. proposes a timeline for the completion of the work identified in point 1.a above and in the Assessment of Operation Risks Audit that was presented to council on 18 November 2025.
c. proposed budget for any further resources required to complete those recommendations.

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

Background

1. Council endorsed the Internal Audit Plan 2023/2026. As an outcome of the various audits undertaken, there are several different recommendations that typically made, some of which are accepted as necessary. Typically, they are those that are associated with an issue that has been identified as carrying a moderate risk rating.
2. On 18 November 2025, the Assessment of Operational Risks Audit was presented to Council and the following recommendations were made:
   a. develop and implement a formal bottom-up risk identification process by requiring each business unit to develop individual operational risk registers at business unit level to enable them to assess and record risks in alignment with their specific objectives, deliverables, and KPIs;
   b. revise the new Operational Risk register (consolidated Operational Risk register) to incorporate all high and medium level business unit process-level risks identified by each business units and link them to relevant business unit objectives, deliverables;
   c. reassign operational risk ownership to operational-level staff with business unit managers having the appropriate oversight and accountability over such risks.

d. ensure that each operational risk has a clear mitigation action(s) with achievable commencement and completion dates for each mitigation action to address each risk both at the business unit level and within the higher level consolidated Operational Risk register; and
e. introduce a risk management system or tool to facilitate functional-level risk recording, tracking, monitoring and reporting.

3. These are now the subject of the work being performed to the operational risk register including processes for implementation, monitoring and regular review in the Cascade System, that form the bases of the Resolution 247/2025.

Discussion

Process for Development of Operational Risk Register

4. The Town has substantially progressed the redevelopment of its operational risk registers through a consistent Town wide approach. This process has included:
   a. the identification, assessment and validation of operational risks across all business units;
   b. the allocation of accountable Risk Owners and Control Owners; and
   c. the progressive build-out of the Town's online Operational Risk Register within Cascade, supported by GFW Frameworks who assist with training and the operationalisation of the risk registers within the Cascade system.
5. This process has included significant discussion between the various business units to ensure that the risk and appropriate treatment is identified and applied.
6. Implementation remains ongoing and includes business unit validation, migration of validated risks into Cascade, and the development of treatment actions for risks that exceed the Town's approved risk appetite. This process is intended to strengthen accountability, clarify ownership responsibilities, and support informed risk-based decision-making across the organisation.
7. Consistent with the audit recommendation, treatment actions will include defined commencement and target completion dates. Following implementation, operational risks will be subject to ongoing monitoring, periodic review and reporting through the Town's enterprise risk management framework.
8. Engagement across business units continues to vary due to competing operational priorities; however, ongoing support, consultation and follow-up activities will continue into the next quarter to complete implementation and embed consistent operational risk management practices across the organisation.

Timeline for to finalisation

9. The anticipated timeline for the completion of this work is as follows:
   a. **August–September 2026:** Complete migration of validated risks into the Cascade Operational Risk Register.
   b. **September–October 2026:** Business Unit Managers undertake residual risk assessments within Cascade and confirm treatment actions, responsibilities and target dates. This process also serves a familiarisation with the Cascade system
   c. **October–November 2026:** Deliver Cascade Operational Risk Register awareness and training sessions for Business Unit Managers and Risk Owners, focusing on completing risk assessments, monitoring residual risks, maintaining treatment actions, and managing risks that remain outside the Town's approved risk appetite. Commence business-as-usual monitoring and reporting through the Cascade platform.

d. **November rollout and operationalise:** Following implementation, operational risk management will transition to business units as usual with risk owners responsible for monitoring risks and treatment actions with Governance providing oversight and reporting to the Audit, Risk and Improvement Committee.

Budget

10. The budget has been realised for this already and is captured in the latest contract between the Town and Government Frameworks, being the owner of the Cascade software.

Relevant documents

Assessment of Operational Risks Audit

Legal and policy compliance

Nil.

Financial implications

Current budget impact	Sufficient funds exist within the annual budget to address this recommendation.
Future budget impact	Not applicable.

Risk management consideration

Risk impact category	Risk event description	Risk rating	Risk appetite	Risk Mitigation
Financial	Failure to properly identify, capture and treat risk increases the likelihood of a negative risk event occurring.	High	Low	Failure to properly identify, capture and treat risk increases the likelihood of a risk event occurring.
Environmental	Failure to properly identify, capture and treat risk increases the likelihood of a negative risk event occurring.		Medium	Failure to properly identify, capture and treat risk increases the likelihood of a risk event occurring.
Health and safety	Failure to properly identify, capture and treat risk increases the likelihood of a relevant negative risk event occurring.		Low	Failure to properly identify, capture and treat risk increases the likelihood of a risk event occurring.

Data, Information Technology and Cyber	Failure to properly identify, capture and treat risk increases the likelihood of a negative risk event occurring.	Medium	Failure to properly identify, capture and treat risk increases the likelihood of a risk event occurring.
Assets	Failure to properly identify, capture and treat risk increases the likelihood of a negative risk event occurring.	Medium	Failure to properly identify, capture and treat risk increases the likelihood of a risk event occurring.
Compliance Breach	Failure to properly identify, capture and treat risk increases the likelihood of a compliance breach	Low	Failure to properly identify, capture and treat risk increases the likelihood of a risk event occurring.
Reputation	Failure to properly identify, capture and treat risk increases the likelihood of a compliance breach or other negative risk event that will lead to reputational risks	Low	Failure to properly identify, capture and treat risk increases the likelihood of a risk event occurring.
Service delivery interruption	Failure to properly identify, capture and treat risk increases the likelihood of service interruption	Medium	Failure to properly identify, capture and treat risk increases the likelihood of a risk event occurring.

Engagement

Internal engagement	
Managers across all Business Units	General engagement
C – Suite	General engagement

External engagement	
Stakeholders	Governance Frameworks – Cascade owner
Period of engagement	Ongoing

Level of engagement	Contract bases
Methods of engagement	Training and implementation

Strategic alignment

Civic Leadership	
Community Priority	Intended public value outcome or impact
CL3 - Accountability and good governance.	Appropriate control of risks across the Town is essential to service delivery and accountability

7.4 Audit Update Report July 2026

Location	**Town-wide**
Reporting officer	Audit, Risk and Assurance Advisor
Responsible officer	Chief Executive Officer
Voting requirement	Simple majority
Attachments	**Reason for Confidentiality** These attachments are confidential in accordance with Section 5.23(4) of the *Local Government Act 1995*, as the business to be considered relates to the following: (e) Information the release of which would likely endanger the security (including cyber security) of local government property or operations. 1. CONFIDENTIAL REDACTED - Quarter 4, Open Audit Actions (April- June 2026)-2026-07-03 [**7.4.1** - 6 pages] 2. CONFIDENTIAL REDACTED - Audit Function Dashboard as at 3-07-2026 [**7.4.2** - 1 page] 3. Internal Audit Program 26 29 [**7.4.3** - 4 pages]

Summary

The Audit, Risk and Improvement Committee recommends that Council receives the Audit Update Report for July 2026. This report provides an overview of internal audit activities and the status of current open audit actions.

Open audit actions will be incorporated into the audit action register following ARIC and Council consideration. Ongoing monitoring supports continuous improvement in governance, risk management, and internal controls.

Recommendation
That the Audit Risk and Improvement Committee receives the Audit Update Report for July 2026, as contained in Attachment 7.4.1 and recommends that it be brought to Council for noting.

Background

1. The 2023–2026 Internal Audit Program, adopted by Council on 19 June 2023, provides structured oversight of key governance, risk, and control processes across the Town.

Discussion

2. **Audits scheduled for 2025/26:**
   a. **Talent Management and Wellbeing**

The final Internal Audit Report for the Talent Management and Wellbeing audit was received on 30 March 2026 and is presented to the Audit, Risk and Improvement Committee for consideration.

3. **Progress on the Assessment of Operational Risk Audit Actions:**
   a. Progress has continued in identifying and validating operational risks across business units, while further developing the Town's Cascade Online Risk Management Plan with support from Governance Frameworks Training Consultants.
   b. A C-Suite Risk Management Workshop was held on 20 April 2026, with all invited C-Suite members and two Managers attending. The workshop was facilitated by Australian Audit and focused on strengthening executive understanding of risk management principles, promoting a risk-aware culture, and supporting effective organisational risk oversight.
   c. Planning is underway to deliver risk management and governance training for the C-Suite and managers in 2026/27 to support the ongoing uplift of the Town's risk management capability and culture. This initiative will support the continued implementation of the Town's Risk Management Framework and reinforce leadership accountability for effective risk management.
   d. Further details in relation to this Operation Risk is provided in Report number 7.3 Operational Risk Register Update.

4. **Regulation 17 Review:**
   a. As part of the Regulation 17 Review procurement process, three quotations have been received from prospective providers for the Financial Management, Risk Management and Legislative Compliance components. A fourth quotation, covering the Risk Management and Legislative Compliance components only, has also been received and is currently under consideration.
   b. Assessment of the submissions is underway, with the preferred provider(s) to be determined following the evaluation process.

5. **Internal Audit Actions 26-29**
   a. Council endorsed the Internal Audit Schedule for 2026/29 on 19 May 2026 in accordance with Resolution - 80/2026. See attached.

6. **Open Audit Actions**
   a. The following table reflects the status of open audit actions, including progress against agreed timeframes and associated risk ratings. The details of these are in attachment 7.4.1.

Area	Open	Overdue	Behind	On Track	Extreme Risk	Moderate Risk	Low Risk
Governance	2	0	0	2	0	2	0

Finance	1	0	0	1	0	0	1
Totals	**3**	**0**	**0**	**3**	**0**	**2**	**1**

Relevant Documents

Not applicable.

Legal and Policy Compliance

Part 7 of the Local Government Act 1995

Local Government Regulations 1996

Financial Implications

Current budget impact	Existing allocations will accommodate recommended process improvements.
Future budget impact	Not applicable.

Risk Management Considerations

Risk Impact Category	Risk Event Description	Risk Rating	Risk Appetite	Risk Mitigation
Financial	Poorly scoped internal audit may expose the Town misstatements, inefficiencies, fraud, or corruption. Senior Leadership Team determines timing of Regulation 17 review.	High	Low	Maintain risk-based Internal Audit Program aligned with legislative requirements. Monitor outcomes and timely implementation of actions.
Environmental	Not applicable.			
Health and Safety	Not applicable.			
Data, Information Technology and Cyber	Not applicable.			
Assets	Not applicable.			

Compliance Breach	Incomplete internal audit coverage may increase non-compliance risk, including Regulation 17.	High	Low	Ensure audit program addresses all mandatory and key risk areas and monitor implementation of audit actions.
Reputation	Ineffective audits or unresolved findings may reduce stakeholder confidence.	Moderate	Low	Support timely completion of audits, resolution of findings, and transparent reporting to ARIC and Council.
Service Delivery Interruption	Not applicable.			
Governance	Shift in strategy from endorsing 2026-2029 to an early kick of the Regulation 17 Review.	Low	Low	Ensure Audits align with Regulation 17, and maintain risk-based audit planning.

Engagement

Internal engagement	
Stakeholder	Comments
Business Units	Managers provided timely responses and supporting documentation to internal auditors.
C-suite	C-Suite were provided with the final Talent Management & Wellbeing audit findings and recommendations.

Strategic Alignment

Civic Leadership	
Community Priority	Intended public value outcome or impact
CL1 – Effectively managing resources and performance.	Internal audits support integrity and identify areas for improvement.
CL3 - Accountability and good governance.	Internal audits provide a disciplined approach to improving risk management, internal controls, and governance processes, adding value to Town operations.

7.5 The Privacy and Responsible Information Sharing Act 2024

Location	**Town-wide**
Reporting officer	Manager Governance and Risk
Responsible officer	Manager Governance and Risk
Voting requirement	Simple majority
Attachments	Nil

Summary

This report has been prepared to provide a brief summary of the work performed by the Town in order to ensure compliance with *Privacy and Responsible Information Sharing Act 2024* (**PRIS**). A further more comprehensive report will be provided at the next ARIC meeting. However, this report serves to notify and inform ARIC that the Town is aware of its responsibilities under the PRIS and is taking active and appropriate steps to ensure compliance now and into the future.

Recommendation
That Audit, Risk and Improvement Committee note the actions undertaken so far to prepare for the introduction of the *Privacy and Responsible Information Sharing Act 2024*.

Background

1. From 1 July 2026, local governments have been required to comply with the 11 Information Privacy Principles (**IPPs**) in Schedule 1 of the PRIS Act.
2. The Town as appropriate has been engaging with external legal advisors to ensure compliance. This has been necessary given there has been very little information or guidance notes from State agencies to support compliance.

Discussion

3. The Towns administration staff have taken a number of actions over the past few months to prepare for the PRIS introduction. This includes:

Governance and Policy Framework

a. A Privacy Policy has been drafted and is currently undergoing legal review to confirm compliance with legislative requirements.
b. A Privacy Statement has also been drafted and is currently with the Town's legal advisers for review and confirmation of compliance.

Collection Notices

c. Preparing appropriate collection notices, including:

i. The Customer Service Contact Centre pre-recorded telephone message and on-hold collection notice has been finalised and implemented.
ii. The Rates Notice Collection Notice has been finalised and will be incorporated into the Town's 2026/2027 rates notices.
iii. The Website Privacy Acknowledgement, Email Footer Privacy Notice and Email Auto-reply Privacy Notice have been finalised and are awaiting endorsement of the Privacy Policy prior to implementation.
iv. Collection notices for prescribed Building and Energy forms are awaiting the publication of revised forms by the relevant State Government agency.

Information Asset Register

d. development of the Town's Information Asset Register (IAR). The IAR will provide a comprehensive catalogue of information assets held by the Town, including those containing personal and sensitive information. The Information Asset Register is a key component of the Town's privacy and information governance framework and will support ongoing compliance with the PRIS Act. The register will assist the Town in identifying:
    i. what information is held;
    ii. the purpose for which it is collected and used;
    iii. where it is stored;
    iv. who is responsible for it; and
    v. any privacy and information management risks.

Privacy Improvements

e. Traditional visitor sign-in logs have been removed and replaced with single-use visitor registration forms, eliminating the visibility of previous visitors personal details.
f. Procurement of a digital visitor management system is underway to replace the current paper-based process and further strengthen privacy protections.
g. A PRIS Awareness Resource Hub has been developed and finalised for publication on the Town's intranet. The intranet resource provides staff with information about the PRIS Act, privacy obligations, collection notices, handling personal information, information breaches, and individual responsibilities under the Act.

Training and Awareness

h. A PRIS Awareness Resource Hub has been developed and finalised for publication on the Town's intranet. The intranet resource provides staff with information about the PRIS Act, privacy obligations, collection notices, handling personal information, information breaches, and individual responsibilities under the Act. Publication of the resource is currently awaiting final approval and endorsement of the Town's privacy framework documentation. The intranet site will provide staff with a central point of reference for PRIS guidance, resources and updates and will support ongoing privacy awareness across the organisation.

Next Steps

4. Importantly, the changes to ensure compliance are not based around a set and forget approach. Rather constant monitoring, updating, education is necessary to ensure compliance. That said,

given PRIS requires harmonisation with existing records keeping and freedom of information Finalisation, which the Town complies with, there is no wholesale structural changes that the Town needs to undertake to ensure compliance. For the most part, the steps that have been taken and will be taken are about strengthening existing system.

5. Moving forward the Town will:
   a. adopt Privacy Policy and Privacy Statement;
   b. implement remaining collection notices across Town functions;
   c. continue to develop the Information Asset Register;
   d. implement a digital visitor management solution; and
   e. review and adoption of updated WALGA procurement templates once released. WALGA has advised that it is currently reviewing and updating its procurement templates, including requests for quotation, requests for tender and contract documentation, to incorporate the requirements of the PRIS Act. A timeframe for the release of updated templates has not yet been provided. The Town will continue to monitor these developments and adopt the updated templates once available.
   f. Ongoing assessment of additional policies, procedures and business processes.

Relevant documents

Not applicable.

Legal and policy compliance

Privacy and Responsible Information Sharing Act 2024

Financial implications

Current budget impact	Sufficient funds exist within the annual budget to address this recommendation.
Future budget impact	As the administrative workload and costs are known with more clarity, budget requests will be made as needed.

Risk management consideration

Risk impact category	Risk event description	Risk rating	Risk appetite	Risk Mitigation
Financial	*A breach of the PRIS resulting in litigation could pose and undetermined financial risk*	High	Low	*Undertaken revision of existing systems and processes and take necessary steps to ensure compliance*
Environmental	Nil		Medium	

Health and safety	Nil	Low	
Data, Information Technology and Cyber	A failure to ensure appropriate systems could result in breach of the PRIS	Medium	Continue to revise and update systems as necessary
Assets	Nil	Medium	Nil
Compliance Breach	As above	Low	As above
Reputation	A breach of the PRIS, could result in reputational risks regarding the how the Town treats personal information	Low	Continue to revise and update systems, policies and procedures as necessary
Service delivery interruption	Nil	Medium	Nil

Engagement

Internal engagement	
Stakeholder	Engagement with Town staff to ensure a deeper understanding on how we collect and use personal information

External engagement	
Stakeholders	Minter Ellison Lawyers

Strategic alignment

Civic Leadership	
Community Priority	Intended public value outcome or impact
CL3 - Accountability and good governance.	Appropriate action is necessary to demonstrate that the Town takes its responsibilities with respect to the use and collection of personal information is necessary not just from a compliance perspective, also from a reputational standpoint.

7.6 Final Audit Report - Talent Management and Wellbeing

Location	**Town-wide**
Reporting officer	Audit, Risk and Assurance Advisor
Responsible officer	Chief Executive Officer
Voting requirement	Simple majority
Attachments	1. Final Audit Report - Talent Management and Wellbeing [**7.6.1** - 12 pages]

Summary

Paxon delivered the ***Final Audit Report – Talent Management and Wellbeing*** on 30 March 2026 as part of the 2023-2026 Internal Audit Program. The audit concluded that the Town has a number of sound talent management and wellbeing practices in place and identified opportunities to improve workforce planning, monitoring and reporting, professional development processes, succession planning and psychosocial wellbeing. Management has accepted all audit recommendations.

Recommendation

That the Audit, Risk and Improvement Committee recommends that Council:

1. Notes the *Town of Victoria Park – Talent Management and Wellbeing – Final Internal Audit Report* as contained in Attachment 7.6.1; and
2. Notes the four Medium risk and one Low risk audit findings and that the associated management actions will be incorporated into the Audit Action Register.

Background

1. The Talent Management and Wellbeing audit was included in the Town's 2023-2026 Internal Audit Program to provide independent assurance over the effectiveness of the Town's talent management, workforce planning and employee wellbeing practices.
2. The audit examined the design and effectiveness of controls supporting:
   a. Workforce planning and future capability requirements;
   b. Monitoring and reporting of workforce initiatives;
   c. Professional development processes;
   d. Succession planning; and
   e. Psychosocial hazards and employee wellbeing.
3. The final report was provided by Paxon on 30 March 2026.

Discussion

4. The audit identified five findings comprising four Medium risk findings and one Low risk finding relating to:
   a. Workforce Planning;
   b. Monitoring and Reporting of Plans;

c. Professional Development Processes;
d. Succession Planning; and
e. Psychosocial Hazards and Wellbeing

5. Management has accepted all audit recommendations and agreed to implement the associated management actions.
6. Agreed management actions include:
   a. Reviewing and updating the Workforce Plan;
   b. Strengthening monitoring and reporting of workforce initiatives;
   c. Improving professional development processes;
   d. Developing a formal succession planning framework; and
   e. Enhancing the management of psychosocial hazards and wellbeing through the Town's Operational Risk Register.
7. Following consideration by the Audit, Risk and Improvement Committee, the agreed management actions will be incorporated into the Audit Action Register and progress will be monitored and reported quarterly until all actions have been completed.

Relevant Documents

Attachment 7.6.1 - Final Audit Report – Talent Management and Wellbeing.

Legal and Policy Compliance

Not applicable.

Financial Implications

Current budget impact	Existing budget allocations can accommodate the recommended process improvements.
Future budget impact	Future budget consideration may be required should Council approve the procurement and implementation of a Learning Management System.

Risk Management Considerations

Risk impact category	Risk event description	Risk rating	Risk appetite	Risk Mitigation
Financial	Not applicable.			
Environmental	Not applicable.			
Health and Safety	Failure to strengthen psychosocial hazard management and employee wellbeing practices may adversely	Medium	Low	Implement agreed audit recommendations and monitor progress through the Audit Action

	impact employee health, safety and wellbeing.			Register.
Data, Information Technology and Cyber	Not applicable.			
Assets	Not applicable.			
Compliance Breach	Failure to implement the audit recommendations may reduce the effectiveness of workforce planning, succession planning and governance processes.	Medium	Low	Implement agreed management actions and monitor progress through quarterly reporting to ARIC.
Reputation	Failure to strengthen talent management and wellbeing practices may reduce organisational capability and stakeholder confidence in the Town's governance arrangements.	Medium	Low	Ongoing oversight of implementation through the Audit Action Register and quarterly reporting to ARIC.
Service Delivery Interruption	Inadequate workforce planning and succession planning may affect the Town's ability to maintain service delivery and organisational capability.	Medium	Low	Implement workforce planning and succession plannig improvements identified through the audit.

Engagement

Internal Engagement	Comments
People and Culture	Participated in the audit, reviewed the findings and provided management responses to all recommendations.
Business Units	Relevant managers and staff were consulted during the audit process.
Information Management	Supplied requested records and supporting documentation.
C-Suite	Reviewed audit findings and endorsed the proposed management actions.

Strategic Alignment

Civic Leadership	
Community Priority	Intended Outcome/ Impact
CL1 – Effectively managing resources and performance	Strengthening workforce planning, employee capability and wellbeing support the effective management of the Town's people's resources and organisational performance.
CL3 - Accountability and good governance	Independent internal audits strengthen governance, internal controls, and continuous improvement across the organisation.

8 Motion of which previous notice has been given

9 Meeting closed to the public

9.1 Matters for which the meeting may be closed

9.2 Public reading of resolutions which may be made public

10 Closure