



The Council of the City of Cockburn

City of Cockburn
Audit Risk and Compliance Committee
Minutes

For Tuesday, 21 May 2024

These Minutes are confirmed

Presiding Member's signature

P. Lake

Date: 16 July 2024

Minutes

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Minutes

Attendance

Elected Members

Cr P Corke (Presiding Member)
Mayor L Howlett
Deputy Mayor C Stone
Cr C Reeve-Fowkes
Mr W Gately
Mr A Kandie

In Attendance

Mr D Simms	Chief Executive Officer
Mr M Foley	A/Director Infrastructure Services
Mr A Lees	A/Director Community and Place
Mr N Mauricio	A/Director Corporate and System Services
Mr L Santoriello	A/Director Planning and Sustainability
Ms C Hanrahan	Head of People, Culture and Safety
Ms M Todd	Manager Legal and Compliance
Mr J Fiori	Risk Coordinator
Mr M Lee	System Support Officer (IT Support)
Mrs D Sanders	Governance Officer
Ms S D'Agnone	Council Minute Officer

Observer

Cr T Dewan

1. Declaration of Meeting

The Presiding Member declared the meeting open at 6:00pm.

“Kaya, Wanju Wadjuk Budjar” which means “Hello, Welcome to Wadjuk Land”

The Presiding Member acknowledged the Wadjuk Peoples of the Nyungar Nation who are the traditional custodians of the land on which the meeting was being held and paid respect to the Elders both past and present and extended that respect to First Nations Peoples present.

2. Appointment of Presiding Member (If required)

N/A

3. Disclaimer

The Presiding Member read the Disclaimer:

Members of the public, who attend Council Meetings, should not act immediately on anything they hear at the Meetings, without first seeking clarification of Council's position.

Persons are advised to wait for written advice from the Council prior to taking action on any matter that they may have before Council.

4. Acknowledgement of Receipt of Written Declarations of Financial Interests and Conflict of Interest (by Presiding Member)

Nil

5. Apologies & Leave of Absence

Apology Mr D Arndt, Director Planning and Sustainability
Absent Cr Allen

6. Public Question Time

Nil

7. Confirmation of Minutes

7.1 (2024/MINUTE NO 0008) Minutes of the Audit Risk and Compliance Meeting - 19/03/2024

Committee Recommendation

MOVED Mayor L Howlett SECONDED Independent Member W Gately

That Committee confirms the Minutes of the Audit Risk and Compliance Meeting held on Tuesday, 19 March 2024 as a true and accurate record.

CARRIED 8/0



8. Deputations

N/A

9. Business Left Over from Previous Meeting (if adjourned)

Nil

10. Declaration by Members who have Not Given Due Consideration to Matters Contained in the Business Paper Presented before the Meeting

Nil

En Block Resolution

6.05pm The following items were carried En Bloc items were carried by Council:

11.1.1
11.1.2
11.2.1



11 Reports - CEO (and Delegates)

11.1 Legal and Compliance

11.1.1 (2024/MINUTE NO 0009) Quarterly Risk Register Update

Executive	Chief Executive Officer
Author	Risk Advisor
Attachments	<div><div>1.</div><div>City of Cockburn Enterprise Risk Management - Risk Assessment and Acceptance Criteria ↓</div></div> <div><div>2.</div><div>Status of Strategic Risks ↓</div></div> <div><div>3.</div><div>Status of Operational Risks Rated Substantial and Higher ↓</div></div>

Officer Recommendation/Committee Recommendation
MOVED Independent Member A Kandie SECONDED Deputy Mayor C Stone
That Council:

(1) RECEIVES the Quarterly Strategic and Operational Risk Report.

CARRIED 6/0

Background

This report provides an update to the Audit, Risk and Compliance Committee (ARC) on the City of Cockburn (the City) Risk Register, for the period December 2023 to May 2024.

A previous report was considered by the ARC on 07 December 2023.

The City’s risk register is recorded in RMSS, the City’s cloud-based online Enterprise Risk Management (ERM) solution, the licence for which was extended on 23 February 2024 for the period 01 July 2024 to 30 June 2025.

This report links to the Corporate Business Plan 2023-24:

Outcome 5	Community, Lifestyle and Security
Objective 5.1	Best practice governance, partnerships and value for money
Strategy 5.1.1	Ensure good governance through transparent and countable planning, processes, reporting, policy and decision-making
Item 5.1.1F	Deliver risk maturity improvement program delivery

Submission

N/A

Report

Risk register

The risk level cited in this report to the ARC is the Residual Risk, which is the risk remaining after management has taken action to alter its severity by implementing risk treatment measures.

Table 1 below summarises the changes to the City's risk register during the Period, which increased 3.8%, from 230 to 239.

Table 1: Changes to the City's risk register: December 2023 – May 2024

Residual Risk Level	December 2023	May 2024	Change
Low	101	109	+8
Moderate	120	120	0
Substantial	6	9	+3
High	1	1	0
Extreme	2	0	-2
Total	230	239	+9

The City's ERM policy and framework are aligned with the requirements of the Australian Standard AS ISO 31000: 2018 *Risk management-Guidelines* (AS ISO 3100). One of the pillars of AS ISO 31000 is improvement. The City's risk register is a dynamic environment and is subject to continual review to ensure that the risk information gathered reflects the credibility of the risk. Continual review has resulted in a change in rating of these risks:

- RMSS Risk ID 8 *Community infrastructure damage from climate change impacts* – previously rated Extreme, now rated Substantial
- RMSS Risk ID 9 *Public health decline from climate change* - previously rated Extreme, now rated Substantial
- RMSS Risk ID 15 *Landfill capping* – previously rated Moderate, now rated Substantial.

Organisational risks assessments have identified 9 additional risks which have been registered in RMSS.

The City's risk register currently contains 10 risks rated Substantial and higher, including one (1) risk rated High - all are operational risks.

The City's highest rank risk is ranked High and is climate change related. The elevated ranking of climate related risks is replicated across Australian local governments, with Disaster, Catastrophic Events and Climate Change and Adaptation ranked in the top 10 risks [JLT Public Sector Risk Report, JLT Risk Solutions Pty Ltd].



Attachment 1 to this report is the current City of Cockburn Enterprise Risk Management - risk assessment and acceptance criteria.

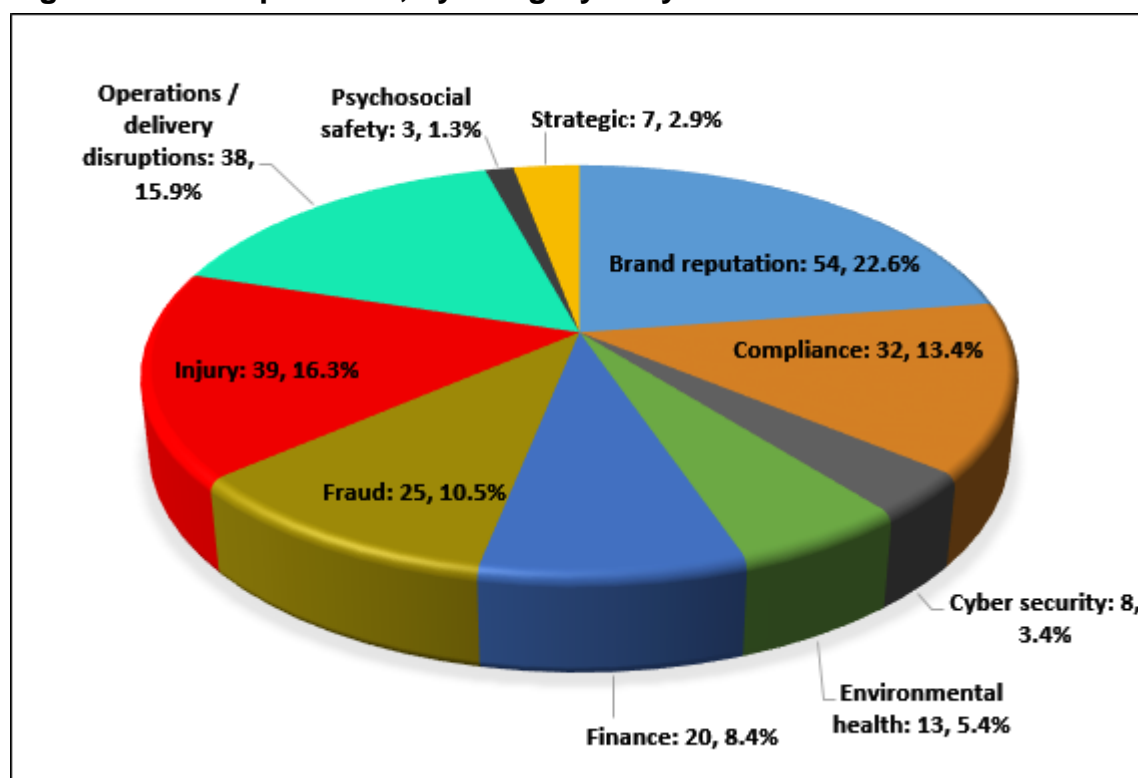
The Risk Assessment Matrix is used for risk analysis and evaluation, comprehending the nature of the risk, and determining the level of risk exposure (likelihood and consequence). It was used for re-evaluating the above risks.

There has been no adjustment to the risk assessment and acceptance criteria since the last report to the ARC.

Risk Register Categories

Figure 1 below illustrates the composition of the open risks in the City's risk register during the Period.

Figure 1: Total open risks, by category: May 2024



The City's risk register comprises:

- Seven (7) Strategic Risks, whose owners are members of Executive Leadership Team
- 222 Operational Risks, whose owners are Heads of Business / Service Units.



Risk Register Heat Map

Figure 2 below illustrates the City's risk register superimposed on a heat map.

		Likelihood				
		Rare 1	Unlikely 2	Possible 3	Likely 4	Almost Certain 5
Consequence	Insignificant 1	Low 1 6 Risks	Low 2	Low 3 1 Risk	Low 4	Moderate 5
	Minor 2	Low 2 9 Risks	Low 4 68 Risks	Moderate 6 9 Risks	Moderate 8 2 Risks	Substantial 10 2 Risks
	Major 3	Low 3 18 Risks	Moderate 6 65 Risks	Moderate 9 29 Risks	Substantial 12 1 Risk	High 15
	Critical 4	Low 4 7 Risks	Moderate 8 15 Risks	Substantial 12 3 Risks	High 16	Extreme 20
	Catastrophic 5	Moderate 5	Substantial 10 3 Risks	High 15 1 Risk	Extreme 20	Extreme 25

The following attachments summarise updates to the above risks.

Attachment 2 to this report detail the City's Strategic Risks as of 01 May 2024.

Strategic risks reflect the internal and external forces capable of threatening the City's ability to achieve its strategic objectives or affect its long-term positioning and performance.

This attachment outlines each strategic risk and provides progress and notes on the management of each risk.

There are currently 7 identified strategic risks, all ranked Moderate Risks, and there has been no change in this number the last report to the ARC.

Attachment 3 to this report details the City's Substantial and Higher Risks as of 01 May 2024.

This attachment outlines each risk rated Substantial and higher and provides progress and notes on the management of each risk.

The City's risk register currently contains 10 risks rated Substantial and higher, including one (1) risk rated High - all are operational risks

Strategic Plans/Policy ImplicationsListening and Leading

A community focused, sustainable, accountable, and progressive organisation.

- Best practice Governance, partnerships and value for money.
- Employer of choice focusing on equity, innovation and technology.

Budget/Financial Implications

N/A

Legal Implications

Local Government (Audit) Regulations 1996 r17 CEO to review certain systems and procedures.

Community Consultation

N/A

Risk Management Implications

Risk management oversight and review is a function of the ARC.

The ARC is required to review the City's Strategic and Operational Risk as part of the City's risk management practices.

The ARCs oversight of the risk register review report supports continuous improvement of risk management processes.

Failure to adopt this report will result in a Substantial risk to the City in its inability to support an integrated and effective approach to risk management and continually improve its risk management processes.

Advice to Proponent(s)/Submitters

N/A.


Implications of Section 3.18(3) *Local Government Act 1995*

Nil



City of Cockburn Enterprise Risk Management - risk assessment and acceptance criteria

Risk Assessment Matrix													
Risk Category										Likelihood / Probability			
Existing Control Ratings										Rare 1	Unlikely 2	Possible 3	Likely 4
Physical safety										1	2	3	4
Theoretically such an event is possible but not expected to occur during an operation / asset life / project.										Such an event may occur more than once during an operation / asset life / project.	Such an event may occur more than once during an operation / asset life / project.	Such events may occur frequently during an operation / asset life / project.	Such events are expected to occur frequently during an operation / asset life / project.
Brand Reputation										Low 1	Low 2	Low 3	Low 4
Compliance										Low 1	Low 2	Low 3	Low 4
Cyber Security										Low 1	Low 2	Low 3	Low 4
Environmental health										Low 1	Low 2	Low 3	Low 4
Finance										Low 1	Low 2	Low 3	Low 4
Fraud										Low 1	Low 2	Low 3	Low 4
Injury										Low 1	Low 2	Low 3	Low 4
Operational Disruptions										Low 1	Low 2	Low 3	Low 4
Quality										Low 1	Low 2	Low 3	Low 4
Cost										Low 1	Low 2	Low 3	Low 4
Time										Low 1	Low 2	Low 3	Low 4
Minor 1										Low 1	Low 2	Low 3	Low 4
Minor 2										Low 1	Low 2	Low 3	Low 4
Major 3										Low 1	Low 2	Low 3	Low 4
Critical 4										Low 1	Low 2	Low 3	Low 4
Catastrophic 5										Low 1	Low 2	Low 3	Low 4
Risk Acceptance Criteria										Existing Control Ratings			
Risk Level										Rating			
Others										Description			
Low										Effective			
Moderate										Adequate			
Substantial										Inadequate			
High										Inadequate			
Extreme										Inadequate			
WHS / Injury / Wellbeing Hierarchy of Control										Elimination			
100% Effective										Substitution			
Increasing Effectiveness										Isolation			
50% Effective										Engineering			
20% Effective										Administrative			
Personal Protective Equipment										Personal Protective Equipment			
Not doing some or all things reasonable under the circumstances.										1. Existing controls do not provide confidence that they meet current legislated, regulatory and compliance requirements, and may not be aligned with relevant and current standards, codes of practice, guidelines and industry benchmarks expected of this organisation;			
Inadequate										2. Controls not operating as intended and have not been reviewed and tested; and			
										3. Existing controls need to be improved.			

WHS / Injury / Wellbeing Hierarchy of Control		
Effectiveness	Control methodology	Impact on unwanted event (hazard), and examples
 <p>100% Effective</p>	Elimination	Remove the hazard, or unwanted event, completely or discontinue the process or practice. <i>For example, if the electric cable from a stage microphone is a trip hazard, use a wireless microphone instead.</i>
	Substitution	Replace a hazardous or vulnerable system, material, practice or process with one that presents a lower risk. <i>For example, if an outdoors event is conducted during a summer day, use of market umbrellas could be substituted by providing marquees or shade sails.</i>
	Isolation	Use lockable barriers to restrict unauthorised access and separate people from hazard, practice or process. <i>For example, install guards on machines where there is a risk of a person being trapped in a machine.</i>
	Engineering	Change the physical characteristics of the practice or process through engineering redesign. <i>For example, provide ramps if patrons in wheelchairs will be attending an event.</i>
	Administrative	Establish appropriate policies, practices, procedures, guidelines and operating instructions to control exposures to unwanted events. <i>For example, if an event requires serving of alcohol, ensure that bar employees have been trained in 'Responsible Service of Alcohol'.</i>
≤ 20% Effective	Personal Protective Equipment	Provide appropriate safety equipment. <i>For example, traffic controllers need to be provided with long sleeves, long trousers, wide brimmed sunhats and high visibility safety vests.</i>



Attachment 2: Status of Strategic risks

RMSS Risk ID	Risk name	Risk description	Consequence	Likelihood	Residual risk	Risk owner
1	Business continuity and crisis management	Failure to provide business continuity of the City's core services in the event of a major crisis / emergency.	Major 3	Possible 3	Moderate 9	Manager Legal and Compliance
Progress and Notes <ol style="list-style-type: none"> 1. The draft document <i>City of Cockburn Business Continuity Response Plan</i> [ECM Doc Set ID 11538591] is currently being reviewed by the Legal and Compliance Service Unit. 2. Once this document is approved by the Executive Leadership Team, a business continuity exercise is proposed to test the plan. The exercise is planned to be a cyber related issue during the second half of the 2023-2024. 						
2	Strategic direction	Lack of clear and aligned strategic vision, direction and implementation.	Critical 4	Unlikely 2	Moderate 8	A/Director Corporate and System Services
Progress and Notes <ol style="list-style-type: none"> 1. The State Government's Integrated Planning and Reporting Framework is in place. The Corporate Business Plan content aligns with the framework and quarterly tracking and reporting are undertaken. The Strategic Community Plan content is in place and measures are tracked annually. 2. A detailed audit of informing strategies has been completed and will inform the development of a strategic framework which will be developed as part of the upcoming SCP major review. 3. An Elected Member and Executive Leadership Team strategy day is scheduled for September 2024 as a starting point for the upcoming corporate planning process. 						

RMSS Risk ID	Risk name	Risk description	Consequence	Likelihood	Residual risk	Risk owner
3	Project management planning	Failure to consistently plan for capital works projects	Critical 4	Unlikely 2	Moderate 8	A/Director Community and Place
Progress and Notes <ol style="list-style-type: none"> Existing controls are appropriate. Introduction of the Investment Prioritisation and Optimisation Process (year 2 24/25) is strengthening the City's approach to Infrastructure Investment. Ensuring that ideas are thoroughly planned, documented, assessed and approved by relevant Business, Asset and Portfolio Managers prior to submission into the various draft Capital programs. 						
4	Stakeholder relationships	Failure to develop and maintain strategic partnerships and relationships with government agencies and other key stakeholders.	Major 3	Possible 3	Moderate 9	A/Director Community and Place
Progress and Notes <ol style="list-style-type: none"> Regular meetings with Local MPs and relevant ministers continue to occur. Maintaining contact details and records of interactions with Stakeholders through Advoc8. New CEO has been meeting with key stakeholders, identified by the City officers, to introduce himself and understand their concerns. Rapid interception of local political issues by Advocacy team to mitigate misinformation and build trust in stakeholder relationships. 						
5	Built and natural environment	Failure to maintain the City's built and natural environment and resources in a sustainable manner.	Major 3	Possible 3	Moderate 9	Director Planning and Sustainability
Progress and Notes <p>There are a range of asset management plans, strategies and actions that ensure adequate resources are allocated to City of Cockburn buildings and infrastructure to ensure these are managed in a sustainable manner.</p> <ol style="list-style-type: none"> Fringing reef has been installed, rock revetments are being assessed, yearly coastal monitoring continues, sand bypassing and backpacking occurs as required; 						

RMSS Risk ID	Risk name	Risk description	Consequence	Likelihood	Residual risk	Risk owner
<p>2. Asset management team organise the CoC Marina and Coastal Asset Management Plan 2020 - 2024. A maintenance inspection was conducted by M P Rogers & Associates, and the 'City of Cockburn Marina and Coastal Assets Report' was provided in July 2022. This helped decision-making for projects in the next financial year;</p> <p>3. A number of the actions from the Recommended Implementation Plan of the 'Coogee Beach Foreshore Management Plan 2020' have been completed - including sand bypassing, benefit distribution analysis, Coogee Beach Jetty upgrade, swimming enclosure lease renewed, disabled accessway completed, Surf Lifesaving Club tower been installed;</p> <p>4. Identified actions from the 'City of Cockburn Climate Change Strategy 2020-2030' and Natural Area Management Strategy continue to be implemented. Regular inspections, maintenance and repairs continue to be undertaken on City facilities.</p>						
6	Technology use and change	Failure to identify, manage and capitalise on the effective and efficient use of changing technology.	Critical 4	Unlikely 2	Moderate 8	A/Director Corporate and System Services
Progress and Notes <p>1. The City is continuing the move the City's ERP to the cloud, and is still on track to be completed by the end of 2024;</p> <p>2. The City continues to improve its cyber security posture, with a focus specifically on ASD E8;</p> <p>3. The City's Executive Leadership Team has endorsed IT to proceed with the planned project to refresh staff IT requirements. An RFQ has been released which is expected to close by 15 May 2024.</p>						
7	Financial sustainability	Erosion of Council's financial sustainability.	Critical 4	Unlikely 2	Moderate 8	A/Director Corporate and System Services
Progress and Notes <p>1. The Long Term Financial Plan is being updated to reflect current economic factors and updated strategic planning outcome. It is waiting for the FY25 budget to be adopted for it to be inputted into the LTFP.</p>						

Attachment 3: Status of Operational risks rated \geq Substantial

RMSS Risk ID	Risk name	Risk description	Consequence	Likelihood	Residual risk	Risk owner
9	Public health decline from climate change [Environmental Health risk]	Reduced public safety, health and wellbeing caused by climate change impacts (changes to rainfall and increased bushfires, temperatures, and extreme weather events).	Catastrophic 5	Possible 3	High 15	Head of Development and Compliance [ELT Member Director Planning and Sustainability]
Progress and Notes <ol style="list-style-type: none"> 1. Mapping of vulnerable residents and areas is not feasible, however protocols to contact customers vulnerable to heat stress and other climate emergencies has been incorporated into the Bushfire Risk Management Plan and Local Emergency Risk Management Plan; 2. Review of existing warning systems, identify potential gaps and opportunities for improvement is ongoing; 3. The update of the Local Public Health Plan is underway and ongoing implementation of those action items from the 2013-2018 Local Public Health Plan is ongoing; 4. Engagement with partners and other government agencies in relation to emergency and recovery climate change responses is ongoing. 						
8	Community infrastructure damage from climate change impacts [Environmental Health risk]	Reduced public safety, health and wellbeing caused by climate change impacts (changes to rainfall and increased bushfires, temperatures and extreme weather events).	Critical 4	Possible 3	Substantial 12	Head of Sustainability and Environment [ELT Member Director Planning and Sustainability]
Progress and Notes <ol style="list-style-type: none"> 1. The City has developed a Climate Change Strategy 2020-30 which identifies actions to mitigate and adapt to changes associated with climate change. The actions address a range of factors including reduced public safety, health and wellbeing caused by climate change impacts (changes to rainfall and increased bushfires, temperatures and extreme weather events); 2. The progress against the actions contained with the Climate Change Strategy are a Corporate KPI and reported on each quarter. 						

RMSS Risk ID	Risk name	Risk description	Consequence	Likelihood	Residual risk	Risk owner
10	Biodiversity loss from climate change impacts [Compliance risk]	Damage to or loss of biodiversity and natural habitat, caused by climate change impacts (decreased rainfall and increased bushfires, temperatures, and extreme weather events).	Critical 4	Possible 3	Substantial 12	Head of Sustainability and Environment [ELT Member Director Planning and Sustainability]
Progress and Notes <ol style="list-style-type: none"> 1. Natural Area Management Plan (NAMS) has been developed with a number of actions that address biodiversity loss due to the impacts of climate change. All bushland and wetland reserves within the City are managed according to the NAMS; 2. Revegetation and habitat creation is undertaken to increase and enhance flora and fauna. fauna refuges, bird, bat and possum boxes and fauna over and under passes have been installed in numerous reserves. Flora and fauna surveys are undertaken in all reserves on a 5 year rotation bases. Information contained in these surveys is used to address perceived threats and risk; 3. Bushfire risk assessments are undertaken and measures implemented to reduce fire risk. Watering stations are installed in some reserves to provide a water source for fauna; 4. Landowner biodiversity grants and training is offered to private landowners to assist promote bushland conservation. 						
11	Coastal impacts from sea level rise [Environmental Health risk]	Legal liability and damage to or loss of natural environment, infrastructure, and coastal land, caused by sea level rise.	Major 3	Likely 4	Substantial 12	Head of Sustainability and Environment [ELT Member Director Planning and Sustainability]
Progress and Notes <ol style="list-style-type: none"> 1. Tender recently advertised and consultant appointed to prepare updated Coastal Hazard Risk Management Adaptation Plan. The plan will be updated using latest climate change data. It will identify areas at risk and adaptation measures to address risk to property and infrastructure; 2. Coogee Beach Foreshore Management Plan identifies actions to adapt and address risk along Coogee Beach. Sand nourishment works are undertaken as required at CY 						

RMSS Risk ID	Risk name	Risk description	Consequence	Likelihood	Residual risk	Risk owner
O'Connor Beach and Coogee. Geotech sandbags installed as well as Engineered Fringing Reef at C. Y. O'Connor. Stage 2 of reef to be installed in October 2024						
3. Coastal Adaptation Grants supplement coastal erosion prevention measures.						
12	Community support [Financial risk]	Failure to obtain community support for strategic planning functions.	Critical 4	Possible 3	Substantial 12	Head of Planning [ELT Member Director Planning and Sustainability]
Progress and Notes <ol style="list-style-type: none"> Most strategic planning projects have advertising processes (controlled by State Government) rather than specific community engagement. Planners can only undertake community engagement for specific and occasional projects. These are carried out in line with an approved community engagement plan (approved by the City's engagement team); It is not realistic to expect complete support for all strategic planning functions, however, the City having recently reviewed its local planning strategy has the benefit of recent community input into high level strategic land use planning guidance for the City of Cockburn; The subsequent steps of implementing the updated strategy will include planning at the local area or 'place' level where community aspirations will be better articulated at the scale which is often of greater community interest. Knowing those aspirations at a City and local area level helps to realise those visions in practice - but also builds understanding of what City strategic planning functions are (and their limitations). 						
15	Landfill capping [Financial risk]	Failure to fund the capping of existing exposed landfill cells.	Catastrophic 5	Unlikely 2	Substantial 10	Head of Property and Assets [ELT Member Director Infrastructure Services]
Progress and Notes <ol style="list-style-type: none"> Budget \$15.729m (\$15.813m - \$84k spent in 23-24 on design and documentation) in 24-25 FY to ensure the southern landfill is capped prior to May 2025 to cover the Southern Landfill capping costs, which includes the Financial Model allocation \$14.024m and an additional \$1.79m to cover the additional CPI construction costs, the cost of soil supply and a 5% contingency; 						

RMSS Risk ID	Risk name	Risk description	Consequence	Likelihood	Residual risk	Risk owner
2. Cell 7 and the entire Southern Landfill is planned to be capped between October 2024 and March 2025; 3. Cells 4 and 5 are still to be capped, once the available airspace is consumed in the next 2-7 years.						
16	Reduced water availability from decreased rainfall [Compliance risk]	Decreased liveability, reduced water availability, loss of urban vegetation and biodiversity caused by climate change impacts (decreased rainfall).	Minor 2	Almost certain 5	Substantial 10	Head of Sustainability and Environment [ELT Member Director Planning and Sustainability]
Progress and Notes 1. Action within the Urban Forest Plan are being implemented.; 2. Waterwise Action Plan actions implemented to minimise water use; 3. Waterwise Gold accreditation retained in 2024; 4. Water Sensitive Urban Design initiatives supported through development approvals; 5. Water audits undertaken annually on selected Council facilities; 6. Watering contractors engaged and made aware of need to minimise water use while maximising plant survival; 7. Options investigated to maintain wetland water levels; 8. Hydrozoning undertaken in Parks to reduce water consumption.						
17	Urban forest decline from climate change [Compliance risk]	Urban forest decline caused by climate change impacts (increased temperatures and decreased rainfall).	Minor 2	Almost certain 5	Substantial 10	Head of Sustainability and Environment [ELT Member Director Planning and Sustainability]
Progress and Notes 1. Action within the Urban Forest Plan being undertaken;						

RMSS Risk ID	Risk name	Risk description	Consequence	Likelihood	Residual risk	Risk owner
2. Waterwise Action Plan actions implemented; 3. Waterwise Gold accreditation retained in 2024; 4. Revegetation of 2.5 hectares annually; 5. Tree protection measures being considered; 6. Promotion of urban forest; 7. Bushfire risk assessments undertaken and action to mitigate fires implemented; 8. Urban Forest Officers employed.						
288	Child safe organisation [Injury risk]	Failure by the City of Cockburn to resource for, and anticipate legislative requirements, to comply with the National Principles for Child Safe Organisations	Catastrophic 5	Unlikely 2	Substantial 10	Head of Library and Cultural Services [ELT Member A/Director Community and Place]
Progress and Notes 1. Workshop held to capture active policy, procedures to address the national principles and sector meetings continued to be attended and draft policy in development. 2. Next meeting scheduled for early June. 3. No further update due to no dedicated resource.						
289	Workplace psychosocial hazards [Psychosocial Safety risk]	Inability to provide for workers a safe work place free from exposure to bullying and harassment	Catastrophic 5	Unlikely 2	Substantial 10	Head of People, Culture and Safety
Progress and Notes 1. The City of Cockburn Bullying and Harassment Administration Policy was adopted on 14 February 2023. Training has been undertaken by all members of SLT;						

RMSS Risk ID	Risk name	Risk description	Consequence	Likelihood	Residual risk	Risk owner
<p>2. The City of Cockburn Code of Conduct – The Cockburn Way is now available as a CiAnywhere online induction;</p> <p>3. The City's Work Health and Safety Policy reiterates the expectation that psychological hazards are mitigated and managed;</p> <p>4. The City has undertaken a gap analysis of mitigation against psychological workplace hazards with the current management framework being deemed fit for purpose;</p> <p>5. The City has finalised the process of implementing the new WHS Induction for all Employees and People Leaders.</p>						

11.1.2 (2024/MINUTE NO 0010) Family Day Care Services - Review

Executive	A/Director Corporate and System Services
Author	Strategic Business Analyst
Attachments	1. Family Day Care Service Current Operational Risks ↓

Officer Recommendation/Committee Recommendation
MOVED Independent Member A Kandie SECONDED Deputy Mayor C Stone
That Council:

(1) ENDORSES the Family Day Care Service Review findings.

CARRIED 6/0

Background

On the 12 of March 2024, Council considered the legal implications of the contractor model of the Family Day Care Service and endorsed the continuation of the service.

Subsequently, on 9 April 2024 Council resolved to:

- (1) *ENDORSE the City’s adoption of the Service Review Methodology for review of its services; and*
- (2) *APPROVE the three-year timeline to implement the Service Review Program for the City, promoting a cycle of continuous improvement in service delivery and review.*

In line with that resolution the Strategy and Integrated Planning Service Unit undertook a review of the Family Day Care Service to support a broader review of the service, following the limited legal structure review earlier this year.

This was the first service review undertaken in line with the adopted methodology.

This paper provides the outcomes of the service review undertaken by the Strategy and Integrated Planning Service Unit and presents two options for Council consideration.

The service review did not identify any changes or recommendations outside of the contract changes recommended by the 12 March legal review.

The service is delivered at a high quality and is well received by the community.

Submission

N/A



Report

FDCS Background and History

Childcare services are provided through the City of Cockburn FDCS and comprises support and administration in delivering early childhood education and care.

The City has provided family day care services since August 1978 and is an approved service provider in compliance with Commonwealth legislation.

The FDC Service does not directly deliver childhood education and care but recruits, assesses, and supports service delivery via Educators, who operate as contractors/sole traders and deliver education and care in their homes.

The Service also undertakes the registration and contract management of educators. Educators enter into an agreement with the Service under the *FDC Service Educator Registration Agreement*.

There are five staff employed by the City delivering the FDCS, comprising 4.4 FTE, and there are currently 42 Educators registered with the Service.

The City is not legislatively required to provide a FDCS.

Industry Standard/Regulations

The FDCS has legal responsibilities as per specific Commonwealth legislation, which includes the National Quality Framework, the Family Assistance Law and the Taxation Laws.

The Commonwealth has legislated specific policies and procedures that the FDC Service must implement, including processes for Educator registration, induction and mentoring.

Performance/Public Perception

Both parents and Educators are regularly surveyed by the FDCS. Satisfaction levels are generally high, with a recognition that the Service provides good quality education and support to Educators and parents.

Themes from verbatim parent feedback include “*more services for day care*”, “*more before-and-afterschool care facilities for working parents*”, and “*longer hours for day care services*”.

Alternate Providers of the Service

The Family Day Care service is a fully accredited service and undergoes quality review every three years to maintain its accreditation. This ensures optimum levels of quality service provision.

A review of alternate family day care services available to the Cockburn Community has shown there are six privately owned facilities providing early childhood education and care under the Contractor/Sole-Trader model.

These facilities operate as third-party regulators and have service Agreements with Educators residing within the City's catchment.

As demand within this sector is high, it is expected that (as in the City's FDCS) waiting lists exist for access to these day-care services.

Identified Benefits and Disadvantages of the Service

Benefits

- Community expectations and stated need are met
- Community reputation is maintained
- Formal acceptance for continuation of the Service will enable active recruitment of additional Educators
- Provides Educator employment and training opportunities
- Provides support for parents to return to work, attend education or have some respite care
- Children with additional needs are supported through community inclusion, and access to school holiday and respite care.

Disadvantages

- Risk to the City regarding potential payment of Educator Superannuation has been minimised to the extent possible, and residual risk is considered negligible
- Recruitment of additional Educators is reliant on availability of appropriately skilled contractors.

Strategic Plans/Policy Implications

Local Economy

A sustainable and diverse local economy that attracts increased investment and provides local employment.

- Increased Investment, economic growth and local employment.

Community, Lifestyle and Security

A vibrant healthy, safe, inclusive and connected community.

- A safe and healthy community that is socially connected.

Listening and Leading

A community focused, sustainable, accountable, and progressive organisation.

- Best practice Governance, partnerships and value for money.

Budget/Financial Implications

The FDCS is funded through Educator fees and a per-child service fee to parents. Normally, these fees provide the total operational budget for the Service.

The FDCS maintains a critical mass of Educators to offset service administration and support costs.



While the impact of the ATO decision on the FDCS has been under review, the Service has not recruited additional Educators. This will result in a small budget shortfall in the FY24 year (~\$80K).

Re-establishing the critical mass of educators will take approximately six (6) months, a budget shortfall in FY25 is likely. FY25 budget implications will be identified through the FY25 budget process.

Legal Implications

Following the 12 March 2024 resolution of Council, the City is implementing agreement changes recommended in the report.

Community Consultation

NA

Risk Management Implications

The current operational risks and their residual risk scores are:

Risk	Residual Risk Score
Failure to identify and address foreseeable hazards within the Educator's residence or Childcare Services venue/ indoors and outdoors.	Low
Failure to provide quality outcomes for children in Childcare Services	Moderate
Wording within the City's Childcare Services Privacy Policy is not definitive and well understood and may not be enforceable	Low
Inability to maintain financial sustainability for Childcare Services	Moderate

For full detail on the current operational risks, including management actions, refer Attachment 1.

Advice to Proponent(s)/Submitters

N/A

Implications of Section 3.18(3) *Local Government Act 1995*

Nil

Attachment 1: Family Day Care Service Operational Risks

Risk	Likelihood	Consequence	Risk Score	Control Measures in Place	Progress	Residual Risk
Failure to identify and address foreseeable hazards within the Educator's residence or Childcare Services venue/ indoors and outdoors.	Possible	Major	Moderate (9)	<p>The 'pre-approval FDC Educator's Residence Audit' and the 'FDC Educator's Residence Annual Audit' are legislated, these include a documented extensive assessment of all areas. Each domain must be examined and signed off as compliant by qualified Staff.</p> <p>Legislation requires the FDC Service to ensure all requirements are in place within all areas of the home to be approved for family day care. Therefore, this Audit is carried out before the formal offer of the FDC Service Educator Registration Agreement and annually thereafter.</p> <p>FDC KPI is to have monthly contact with Educators, meting this KPI includes regular visits to educator residence throughout the year.</p> <p>FDC Educators are also required to evidence in date evacuation procedure practices.</p>	<p>Service staff are aware to note any hazards on a daily basis, rectify immediately or refer to the Manager to manage.</p> <p>The formal Safety Checklist for the Childcare Services Co-ordination Unit (inside and children's outdoor play area) is carried out bi-monthly.</p>	Low (4)

Risk	Likelihood	Consequence	Risk Score	Control Measures in Place	Progress	Residual Risk
Failure to identify and address foreseeable hazards within the Educator's residence or Childcare Services venue/indoors and outdoors (cont.)				<p>The indoor and outdoor children's areas are inspected before the Educators and children arrive for Play Sessions.</p> <p>Bi-monthly OS&H inspections are carried out in a thorough manner by different staff members of each occasion.</p> <p>Child Care Services staff and FDC and IHC Educators maintain an awareness of safety of the environment to protect children in care.</p>		
Failure to provide quality outcomes for children in Childcare Services	Unlikely	Major	Moderate (9)	<p>Qualified experienced staff</p> <p>Educators selection process</p> <p>Service educator agreements</p> <p>Service Policies & Procedures</p> <p>Training</p>	<p>Adequate controls are in place and effective in the service being identified as a high performing compliant service.</p> <p>Regular audits and inspections ensure quality and safe services.</p>	Moderate (6)
Inability to maintain financial sustainability for Childcare Services	Unlikely	Major	Moderate (8)	<p>Maintain promotion/advertising.</p> <p>Utilise specialist software programs and ensure specialist staff managing finances.</p>	<p>Review of risks and service is consistently reviewed. Controls are effective.</p> <p>Monthly budget meetings have been ongoing.</p> <p>Increased recruitment has taken place reducing financial risk.</p>	Moderate (6)

Risk	Likelihood	Consequence	Risk Score	Control Measures in Place	Progress	Residual Risk
Wording within the City's Childcare Services Privacy Policy is not definitive and well understood and may not be enforceable	Unlikely	Minor	Substantial (12)	Directive controls: Existing Childcare Services Policy is in place.	Existing Childcare Services Policy is in place.	Low (4)



11.2 Office of the CEO

11.2.1 (2024/MINUTE NO 0011) High-Risk Safety Audit Program - Henderson Waste Recovery Park

Executive	Chief Executive Officer
Author	Head of People, Culture and Safety
Attachments	1. Safety Audit Report - Henderson Waste Recovery Park ↓ 2. Safety Improvement Plan - Henderson Waste Recovery Park ↓

Officer Recommendation/Committee Recommendation
MOVED Independent Member A Kandie SECONDED Deputy Mayor C Stone
That Council:

(1) RECEIVES the High-Risk Safety Audit Report for Henderson Waste Recovery Park; and

(2) NOTES the deliverables and actions in the associated Safety Improvement Plan.

CARRIED 6/0

Background

The City is committed to undertaking a continuous improvement program across all facets of workplace, health, and safety.

A report was submitted to the Audit and Risk Committee (ARC) on 19 March 2024 that detailed the initiatives that the City would put in place to ensure our ongoing commitment, including:

1. Completing the implementation of the Safety Improvement Action Plan that had been developed in response to the audit, undertaken by LGIS, in August 2022 and ensuring that these outcomes were embedded as business-as-usual work practices.
2. Development and implementation of Safety and Wellbeing Key Performance Indicators (KPIs) for all members of staff to ensure that safety was an important element of their daily role.
3. Commencement of a High-Risk Auditing Program to ensure that the Safety Management System (the System) was in place and was known and understood and that behaviours and interactions aligned to the expectations set out within the System and Organisational Values.
4. Delivery of a Safety Leadership Program to ensure that there was an embedded understanding of the role of a leader in fostering and driving a positive safety culture, in addition to the development of tangible safety skills for the field.



The purpose of this report is to provide an update to the ARC regarding completion of a High-Risk Safety Audit that was completed at Henderson Waste Recovery Park in March 2024.

Submission

N/A

Report

The City engaged an independent consultant, being Safety Australia, to undertake a High-Risk Safety Audit of Henderson Waste Recovery Park (refer Attachment 1).

The audit commenced in January 2024 and concluded in March 2024 and consisted of the following actions and analysis:

- 1. Undertook a high-level gap analysis of the Safety Management System to identify shortcomings on a corporate level and/or identify deployment issues for the specific service area.
- 2. Undertook interviews with employees within the service area to ascertain the level of understanding of the Safety Management System, their role in safety and the overall safety leadership of the service area.
- 3. Undertook a site inspection to ensure physical safety risks have been identified and controls implemented.
- 4. Observed behaviours and interactions on site to ensure psychological risks have been identified and controls implemented, including the observing of safety conversations, team meetings and/or toolbox meetings and consultation processes.

The outcome of the audit has been broken into six key themes. It must be noted that the above methodology and below themes will be applied to all future High Risk Safety Audits to ensure consistency of process.

Table one: Key themes identified as opportunities for improvement:

Theme	Description
Corporate Shortcoming	The audit outcome does not relate specifically to workplace health and safety but needs to be addressed at a corporate level.
Culture	Barriers that were identified which indicated that there was no shared sense of purpose or understanding in relation to workplace health and safety on the site.
Leadership and Accountability	The audit was unable to ascertain, to an acceptable level, that there is effective leadership being demonstrated in relation to workplace health and safety on site and that strategies needed to be implemented to build capability.
Safety Shortcoming – Site Specific	The audit identified that whilst there was a safety system element in place, that was compliant and fit for purpose, and that this had been effectively deployed, it was not being implemented to an effective level on the site.



Safety System – Deployment Issue	The audit identified that whilst there was a safety system element in place, that was compliance and fit for purpose, the deployment of this element may not have been effective which had led to a knowledge and/or skill gap on site.
Safety System – Shortcoming	The audit was unable to ascertain, to an acceptable level, that the safety system element existed and had been deployed effectively to mitigate risk.

To ensure that shortcomings are identified and mitigated as soon as reasonably practicable, a Safety Improvement Plan has been developed (refer Attachment 2).

In summary, twenty-four (24) overarching actions have been identified with forty-nine (49) sub actions.

Status of agreed action plan items

At the date of this report, the City has made progress in relation to the actions detailed in the agreed Action Plan.

Several action items, including ongoing internal audit of the effectiveness of safety system elements, are embedded as a business-as-usual practice, and therefore will not be marked as completed.

Table 2: Status of agreed action plan

Audit Theme	Total Action Items	Not Commenced	In Progress	Business as Usual	Completed
Corporate Shortcoming	3	2	1	0	0
Culture	4	1	2	1	0
Leadership and Accountability	4	3	1	0	0
Safety Shortcoming – Site Specific	20	7	9	1	3
Safety System – Deployment Issue	9	0	3	1	5
Safety System – Shortcoming	9	0	5	1	3
Total	49	13	21	4	11

The City committed to ensuring that these actions are delivered as soon as practicable, noting that the delivery of some elements are dependent on budget endorsement for Financial Year 2025.

Strategic Plans/Policy ImplicationsListening and Leading

A community focused, sustainable, accountable, and progressive organisation.

- Employer of choice focusing on equity, innovation and technology.
- Best practice Governance, partnerships and value for money.

Budget/Financial Implications

A budget provision exists in the Workplace Health and Safety Service Unit Budget for Financial Year 2024, for the delivery of some actions items and programs associated with the Safety Improvement Plan.

A budget provision for Financial Year 2025 has also been sought to ensure the ongoing delivery of the safety program, including delivery of the High-Risk Audit Program.

Legal Implications

Work Health and Safety Act 2020

Work Health and Safety (General Regulations 2022

Community Consultation

N/A

Risk Management Implications

There is a risk to the City if we do not execute all our due diligence obligations provided for in the relevant legislation.

The risk of this is mitigated through the delivery of agreed action items from the Audit.

It is important that the City undertakes both internal and independent audits to ensure continuing compliance and continuous improvement.

In addition to the legislation obligations at the City, there is also a moral obligation to ensure our people and community members are in an environment that is free of harm.

Advice to Proponent(s)/Submitters

N/A

Implications of Section 3.18(3) *Local Government Act 1995*

Nil



Work Health & Safety Gap Analysis



Site: 920 Rockingham Rd, Henderson WA

Date: 06/03/24

Consultant: Joseph Cameron

Report Date: 23/2/24

Ref: 2023/5575



Safety Australia Group

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Acknowledgement

Safety Australia Group would like to thank City of Cockburn, management and employees for their cooperation and participation throughout this project.

This report is based on the best information available to Safety Australia Group within the time constraints, budget and terms of reference of the National Work Health and Safety Audit and Inspection process.

The material in the report reflects Safety Australia Group's best judgment in light of the information available to it at the time of preparation. Specifically, it is based on the review of documentation made available, visual observation and inspection of the property and work environment, and management and employee interviews.

Safety Australia Group prepared this report using information understood to be factual and correct and information verified and shall not be responsible for conditions arising from information or facts which were not fully disclosed to Safety Australia Group by site representatives. It is not a definitive guide to government regulations and does not relieve persons using this publication from their responsibilities under applicable legislation.

This report is prepared by Safety Australia Group for the sole and exclusive use by The City of Cockburn. Any use of, or reliance or decision based on this report by any third party is the sole and exclusive responsibility of such third party. Safety Australia Group accepts no responsibility for damages, if any suffered by any third party as a result of the use of or reliance or decision based on this report.

Safety Australia Group is pleased to submit this report to your organisation.

Together we are making Australian workplaces safer places to work.

Robert Keft
Managing Director
(On behalf of Senior Consultant, Joseph Cameron)
Safety Australia Group

Executive Summary

Safety Australia Group (SAG) was engaged to by City of Cockburn to conduct an WHS gap analysis of its operations and WHS documents. The purpose of the WHS review was to identify any gaps in regard to The City of Cockburn current management of WHS, specific to the Henderson Waste Recovery Park in order to assist with continual improvement and compliance with WA WHS Legislative requirements.

The following activities were conducted in order to review The City of Cockburn management of OHS:

- **Detailed safety management systems review of all available documentation with relation to relevant legislative standards.**
- **On site audit against management systems and industry standards to ensure appropriate practice and implementation**
- **Development of key recommended actions to meet requirements and improve safety performance**

The key findings of the document review and discussions include the following:

- **Annual Management Review:** A lack of documented evidence demonstrating that the annual management review, as outlined in the ISO 45001 requirements and the organization's HS manual, has taken place.
- **Aligning Site Operations with Head Office Leadership:** Site level operation occurs in silo to head office leadership, there is significant communication breakdown.
- **Cultural Issues:** Significant cultural breakdown was evident including culture of fear, non-reporting and avoidance of responsibility.
- **Documentation Review:** Evidence suggests that documentation within the system is not reviewed within the timeframes set.

The key recommendations as a result of the key findings from the discussions and the document review include the following:

Standardized Management Review: Ensure process covers performance metrics, compliance status, incident reports, and improvement initiatives. Implement clear reporting mechanisms for tracking outcomes and decisions.

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Enhanced Internal Audits: Improve the audit process to provide leadership insights. Develop specific criteria for identifying improvement areas aligned with strategic goals.

Integrated Communication Strategies: Implement strategies to break down organizational silos. Integrate communication efforts into change processes, ensuring effective issue escalation and resolution.

Prioritized Documentation Review: Focus on high-risk areas like confined spaces and vehicle interaction. Conduct timely reviews to mitigate risks effectively.

Leadership Empowerment for Safety: Address leadership skills, maturity, and safety perception gaps to support successful process implementation and safety initiatives.

Introduction

City of Cockburn and Henderson review

A safety system and operational review was conducted by Safety Australia Group for the City of Cockburn over a six-week period. The review was aimed at identifying gaps within the system and practices of City of Cockburn to help move towards best practice in the safety space.

Methodology

Process

This review was conducted through detailed mapping of the current safety management system and comparison against current legislative standards. This enabled us to see what was missing from an overarching system stand point so we could then follow the processes down the line to a site level.

We measured City of Cockburn against legislative standards first, and then against its own procedures and defined practices. This occurred through multiple site visits, observations of operational activities and interviews with staff members.

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Limiting factors

In the initial stages, substantial challenges were encountered in accessing documents and certain site areas, which partially improved within the first two weeks but still posed hindrances to the process. While no ill intent was presumed, these difficulties highlighted problematic behaviours contributing to a breakdown in organizational culture.

Findings

Safety management system

While significant efforts are being made to enhance safety practices at the City of Cockburn, the existing safety management system has areas that need attention. A considerable portion of documentation is outdated, redundant, or inaccessible to team members. Although the current management system serves as a solid foundation, further improvement is essential to fully leverage its potential, especially in areas such as Performance Evaluation, Operation and Planning.

An Occupational Health and Safety (OHS) management system under ISO 45001 follows a systematic approach aimed at ensuring the organization effectively manages its OHS risks and continually improves its performance. This is aligned to the Plan, Do, Check and Act cycle, below is a high-level summary of its elements.

1. **Context of the Organization:** Understand the internal and external factors that may affect the organization's OHS management system, including its scope, objectives, and compliance obligations.
2. **Leadership and Worker Participation:** Demonstrate leadership commitment to OHS by establishing OHS policies, defining roles and responsibilities, and promoting worker participation in decision-making processes.
3. **Planning:** Establish OHS objectives and develop plans to achieve them, considering the organization's context, risks, opportunities, and legal and other requirements.
4. **Support:** Provide the necessary resources, competencies, awareness, communication, and documentation to support the effective implementation and maintenance of the OHS management system.

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5. **Operation:** Implement the planned actions, including hazard identification, risk assessment, and the implementation of controls to mitigate OHS risks. This also involves establishing emergency preparedness and response procedures.
6. **Performance Evaluation:** Monitor, measure, analyse, and evaluate the organization's OHS performance against its objectives and targets. This includes conducting internal audits and management reviews to assess the effectiveness of the OHS management system.
7. **Improvement:** Take corrective actions to address nonconformities and continually improve the effectiveness of the OHS management system. This involves identifying opportunities for improvement, implementing preventive actions, and updating processes as necessary.

The City of Cockburn's Management System aligns with the framework of an ISO 45001 Management System, however a lack of document and system reviews over time has resulted in a somewhat disconnected system. This is not uncommon for organizations as they progress in their safety maturity journey. Ensuring a structured annual management review and internal audit program occurs will be crucial to prioritize, plan and implement improvements, ensuring the system remains relevant and up-to-date.

Additionally, significant departmental and operational silos complicate matters further. The lack of effective communication between head office and site-level leaders has caused confusion regarding processes and responsibilities. There is a noticeable absence of clear communication closure in both bottom-up and top-down channels, with the process appearing ad hoc. This ambiguity increases the risk of actions being lost over time.

Site level observations

At a site level little was understood about the safety management system and where to find the information required for this review and operations in general. This manifested as an inability to comply with City of Cockburn's own procedures. This also extended to front line staff who were not able to articulate current process at times or where to find information should they need it.

It should be noted that staff were knowledgeable with regards to their own work and diligent with reporting when they knew there was an issue. However, there was no continuity of this reporting process, we were unable to follow through from initial reports to action. There appeared a culture of non-reporting and inaction at a manager level. This was reinforced when a significant concern around excavator work was raised from myself to the manager

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directly and they made many excuses before shrugging it off- this was followed up by a phone conversations and emails to his superior.

Contracting out responsibility was a common theme appearing at site level across all staff and leaders. It appeared that if an injury occurred with a work process the control moving forward would be to subcontract the work out, with an assumption that it removed the responsibility from the City of Cockburn. Responsibility for safety can never be contracted out, there must always still be standards and oversight of practice.

Recommendations

- **Management Review Agenda and Reporting:** Ensure a standardized agenda for management review meetings, covering key topics such as performance metrics, compliance status, incident reports, and improvement initiatives. Develop clear reporting mechanisms to document the outcomes of these meetings and track actions and decisions.
- **Elevating Internal Audits - Driving Insights for Leadership and Strategic Alignment:** Improve the internal audit process to include a focus on providing insights for leadership. This can involve developing specific audit criteria aimed at identifying improvement areas and aligning audit findings with strategic goals and objectives.
- **Breaking Silos - Integrated Communication Strategies:** Implement communication strategies aimed at dismantling existing silos within the organization. These strategies should be integrated into the company's consultative change process, ensuring effective escalation of concerns and thorough follow-up actions to resolve issues.
- **Prioritized Documentation Review for High-Risk Areas:** Prioritize documentation reviews, particularly focusing on high-risk areas such as confined spaces, vehicle interaction, and manual handling. Ensure that reviews are conducted within the designated timeframes to mitigate potential risks effectively.
- **Empowering Leadership for Safety Success:** The current deficiency in leadership skills, maturity, and safety perception poses a barrier to the successful implementation

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of identified processes. Without adequate upskilling, the organization risks hindering progress in safety initiatives.

Implementation

For successful implementation, it's essential to pair this process with:

- A robust management review, planning, and post-implementation review program that aligns with the company's consultative process and communication channels to dismantle existing silos. This involves both top-down and bottom-up communication, along with tracking actions to completion.
- Cultural enhancement for leaders to foster a positive attitude towards safety processes, promoting adherence. This can be complemented by providing due diligence training for senior leaders.
- Dispel negative ideologies and reinforce the understanding that safety responsibility cannot be subcontracted out by leaders.

Conclusion

Both the safety systems and culture require attention. To achieve effective and sustainable improvement, efforts must be fully embraced by the senior leadership of the organization, both in task and purpose. Merely altering the system will not suffice, it is imperative to cultivate safety maturity within the business and foster a positive attitude towards safety among its leaders to ensure success.

While some issues can be promptly addressed, I strongly advise the City of Cockburn to scope this process, taking into account all mentioned factors. As this concerns your culture and safety management system, it is essential to comprehensively understand and control all aspects of it.



Action Plan

Element	Comments
Safety Policy	Update the Policy to include a commitment and framework for how the organisation establishes OH&S objectives at relevant functions and levels in order to maintain and continually improve the OH&S management system and OH&S performance.
Consultation and Communication	<p>The organization has a clearly defined procedure outlining how consultation regarding HSE should occur. This includes avenues for employees to voice concerns, provide feedback, and participate in decision-making processes related to HSE management. While the consultation procedure exists on paper, there is a deficiency in documented evidence to evaluate its effectiveness. There are no records or reports detailing the outcomes of consultations, actions taken based on employee input, or any improvements made as a result of the consultation process.</p> <p>We recommend the business Implement systems to monitor and evaluate adherence to consultation procedures, including compliance audits, surveys, and performance metrics. Use the findings to identify areas for improvement and implement corrective actions as necessary.</p>
Contractor Management	<p>Conduct a thorough review of contractor management procedures to ensure they are up to date and meet the organizational needs.</p> <p>Establish internal assessments to verify contractor management practices align with defined processes. Include findings from assurance activities in the annual management review to ensure procedures remain effective and support continuous improvement.</p>



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Element	Comments
First Aid	<p>Your first aid procedures align well with the intent of the First Aid Code of Practice. It's evident that there's a commitment to ensuring adequate provisions for health and safety within the workplace.</p> <p>Two areas for potential improvement are Risk assessment and Workplace inspections.</p>
Emergency Management	<p>Your emergency response plan demonstrates a strong foundation and alignment with the requirements of the WHS Regulations. It is evident that there has been careful consideration given to preparing for and responding to potential emergencies within the workplace. One area for improvement is to ensure regular drills and exercises to test the effectiveness of the emergency response plan in various scenarios is scheduled and completed</p>
Hazard Management	<p>Develop a consolidated operational risk register that captures risk scenarios, consequences, controls and leader sign off. currently this information is stored across a large number of SWMS.</p> <p>This register should have reasonable action based on risk rankings and levels of sign off based on the same. This register should be reviewed annually to determine control effectiveness, ensure all significant risks are captured, controlled and correctly implemented in practice.</p>
Incident Management	<p>Update OSH 4.9 to reflect current legislation, include the requirement to report dangerous incidents.</p> <p>Dangerous incident means an incident in relation to a workplace that exposes a worker or any other person to a serious risk to a person's health or safety emanating from an immediate or imminent exposure to</p>
Induction for Employees, Contractors and Visitors	<p>Review current induction process to ensure fit for purpose and current for site.</p>
Manual Handling	<p>Ensure all high-risk manual handling tasks are captured, appropriate controls are implemented and reviewed periodically for effectiveness.</p>



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Element	Comments
Noise Management	Review existing noise surveys to identify any gaps in known “designated noise sources”, establish a register of personnel exposed to these sources to ensure that regular audiometric testing is conducted. Lastly update training material and process to ensure that personnel are using PPE correctly.
Plant and Equipment Management	In line with the below traffic management plan implementation ensure good operational practices, do not leave people in the line of fire of any vehicle. It would be advisable to engage a qualified SME for this process.
Traffic Management	<p>based on known risks develop, implement, and communicate traffic management plans and ensure the appropriate controls are in place for each operational area.</p> <p>Specific to the recent heavy vehicle vs light vehicle interaction on sight this plan should pay specific attention to the permanency of designated parking zones and the reduction down to one radio channel per controlled area. The presence of control in each area must be confirmed.</p>
Lock Out/Tag Out	Conduct a thorough review of Lock out / tag out procedures to ensure they are up to date and align with the current organizational needs.
Chemical Management	Adopt the steps / requirements defined by the model Code of Practice.
Training	A detailed review of the training needs analysis against known risks is required, additionally once this is in place ensure that the 12 monthly audit is performed, and findings are shared with the leadership team. Best practice would be to ensure a verification of competency process for all machinery operated.
Workplace Inspections	During the assessment, it was observed that workplace inspections have been conducted; however, the tools utilized lacked specificity and did not offer clear guidance to the individuals responsible for inspecting the work areas. As a result, there is a deficiency in identifying what constitutes good practice during inspections, which could lead to inconsistent assessments and potentially overlooking critical safety hazards.



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Element	Comments
	<p>Additionally, while evidence of corrective actions was identified, there was a lack of tracking for actions that could not be immediately rectified. This absence of follow-up on unresolved issues over time may result in recurring safety deficiencies and a failure to address underlying root causes.</p> <p>Areas for improvement include updating the inspection tools used and implementing a tracking mechanism for corrective actions.</p>
Working at Heights	Develop, test and train personnel in emergency response and rescue procedures related to the use of fall arrest systems. This system will apply to contractors also.
Hot Works	Ensure there is adequate implementation and adherence to hot work processes by both staff and contractors.
Confined Space	Develop a confined space procedure that defines the steps required for identification, risk assessment, entry, atmosphere testing, use of permits, emergency response and training.
Safe Driving Procedure	Update the current procedure to ensure it is up to date and meets the current organisational needs. Reference relevant fatigue controls specified within OSH4.26.
WHS Procedure Description	develop an overarching document describing the purpose of the procedures and their related documents.
Implementation Plan	develop an implementation plan, including an annual management review to ensure suitable resources and management oversight of the effectiveness of the plan.
Internal Auditing	<p>No evidence provided of an established internal auditing programme or an active annual management review of the Safety and Health Management plan.</p> <p>Implementing an internal audit program allows your organization to systematically assess the effectiveness of the health and safety management systems, identify areas for improvement, and ensure compliance with regulatory requirements.</p>



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Element	Comments
	We recommend you Implement an internal audit program for your Safety and Health Management system.
Psychosocial Risk	Conduct a review of the Model Code of Practice and adopt its recommended processes . Build the identification and management of risks and controls into the organisations risk management rituals and routines.
Asbestos	Ensure a register and management plan is in place as required, review SWMS to ensure controls align to the Code of Practice and Work Health and Safety (General) Regulations 2022. Conduct general hygiene monitoring including for asbestos.





Recommended WHS Management System

The table below describes the recommended contents of City of Cockburn WHS Management based on the type of work and activities conducted by City of Cockburn employees and contractors.

Workplace Health Safety Management System Documents and their Purpose

Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
Safety Policy	Describes the City of Cockburn’s commitment to WHS		<p>1. Health and Safety Policy</p> <p>Notes – Policy does not provide a framework for setting OH&S objectives. No evidence of who / when the policy was approved.</p> <p>Recommendations – Update the Policy to include a commitment and framework for how the organisation establishes OH&S objectives at relevant functions and levels in order to maintain and continually improve the OH&S management system and OH&S performance.</p>
Consultation and Communication	Describes the processes in place to consult and communicate with employees and contractors in regard to WHS.		<p>1. OSH 3.3 Resolution of OSH Issues</p> <p>2. Management of change (minor and major) consultation FAQ</p> <p>3. WHS 5.1 Consultation and Communication Procedure</p> <p>Notes – The organization has a clearly defined procedure outlining how consultation regarding HSE should occur. This includes avenues for employees to voice concerns, provide feedback, and participate in decision-making</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
			<p>processes related to HSE management. While the consultation procedure exists on paper, there is a deficiency in documented evidence to evaluate its effectiveness. There are no records or reports detailing the outcomes of consultations, actions taken based on employee input, or any improvements made as a result of the consultation process.</p> <p>Recommendations- Implement systems to monitor and evaluate adherence to consultation procedures, including compliance audits, surveys, and performance metrics. Use the findings to identify areas for improvement and implement corrective actions as necessary.</p>
Contractor Management	Describes the process to select, engage and monitor contractors.	Contractor Risk Classification Calculator Low Risk Contractor Process Contractor Induction High Risk Contractor Process Contractor WHSMS Prequalification	<p>1. OSH 5.5 Contractor Safety Management Guideline 2. OSH 5.4 Inductions for Contractors 3. Contractor induction signature register</p> <p>Notes – OSH 5.4 out of date, references OS&H Act 1984, does not reference OSH 5.5. OSH 5.5 overdue for review, approval date 2020. Contractor induction signature reference last recorded entry in 2018.</p> <p>Recommendations –</p> <p>Conduct a thorough review of contractor management procedures to ensure they are up to date and meet the organizational needs.</p> <p>Establish internal assessments to verify contractor management practices align with defined processes. Include findings from assurance activities in the annual management review to ensure procedures remain effective and support continuous improvement.</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
		Contractor Terms of Engagement	Note- Common language identified, that risk was being subcontracted out however this is not possible under current legislation.
First Aid	Describes the process for managing first aid at City of Cockburn office and on client sites.	First Aid Kit Contents	1. The Safety and Health Management Plan 2. First aid in the workplace Code of Practice 3. WHS 7.3 Designated First Aider Notes – Your first aid procedures align well with the intent of the First Aid Code of Practice. It's evident that there's a commitment to ensuring adequate provisions for health and safety within the workplace. Two areas for potential improvement are Risk assessment and Workplace inspections. Risk Assessment: While the procedures meet the Code of Practice, there's a notable absence of documented evidence regarding a risk assessment to inform the requirements. Conducting a thorough risk assessment is crucial to identify potential hazards and determine the necessary first aid provisions accordingly. Improve Workplace Inspections: The workplace inspections currently lack clear guidance for inspectors on what to look for to meet the requirements. Providing detailed guidance or checklists can help ensure that inspections are comprehensive and cover all relevant aspects of first aid provisions as per the Code of Practice. Recommendations –



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
			<ol style="list-style-type: none">1. Conduct a comprehensive risk assessment to identify workplace hazards and determine appropriate first aid requirements.2. Develop and implement clear guidance or checklists for workplace inspections, outlining specific criteria and requirements as per the First Aid Code of Practice.3. Ensure that findings from risk assessments and inspections are documented and used to inform updates and improvements to the first aid procedures.
Emergency Management	Describes the Emergency Management process at City of Cockburn's Henderson site	Include annual drill and a template to document detailing the outcome of the drill	<p>1. The Safety and Health Management Plan 2. OSH 4.8 Personal Emergency Evacuation Plan (PEEP) 3. Workplace Facility Emergency Response Plan</p> <p>Notes – Your emergency response plan demonstrates a strong foundation and alignment with the requirements of the WHS Regulations. It is evident that there has been careful consideration given to preparing for and responding to potential emergencies within the workplace.</p> <p>One area for potential improvement is:</p> <p>Testing and Continuous Improvement:</p> <p>While the emergency response plan is comprehensive, there's a need to ensure that it is periodically tested to assess its effectiveness in real-world scenarios. Regular testing helps validate response procedures, identify areas for improvement, and enhance overall preparedness for emergencies.</p> <p>Recommendation – Schedule regular drills and exercises to test the effectiveness of the emergency response plan in various scenarios.</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
Hazard Management	Describes the process for identifying hazards, conducting a risk assessment and determining the controls to minimise the risk.	Safe Work Method Statement template (use City of Cockburn SWMS Review Checklist Risk Assessment Factors	<p>1. OSH 4.3 hazard & risk management guidelines</p> <p>2. Risk assessment legend and table.</p> <p>3. Landfill gas risk management risk register.</p> <p>4. SWMS Working Around Mobile Plant.</p> <p>Notes – there are several opportunities to improve the organisations risk management process. There is variability in the tools provided to assess risks, indications of under classified risks, a reliance on administrative controls for known high consequence scenarios and no consolidated register of identified risks or the controls implemented to manage them. Under the Work Health and Safety (general) Regulation 2022 section 3.1 – Managing risks to health and safety, clause 38 Review of control measures;</p> <p>(1) A duty holder must review and as necessary revise control measures implemented under these regulations so as to maintain, so far as is reasonably practicable, a work environment that is without risks to health or safety.</p> <p>Recommendations – Develop a consolidated operational risk register that captures risk scenarios, consequences, controls and leader sign off. currently this information is stored across a large number of SWMS.</p> <p>This register should have reasonable action based on risk rankings and levels of sign of based on the same. This register should be reviewed annually to ensure all significant risks are captured, controlled and correctly implemented in practice.</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
Incident Management	Describes the process for reporting and investigating an incident.	Incident Management Register Form Incident Report Form	<p>1. OSH 4.9 Notifiable Incidents to be reported WorkSafe 2. Osh 4.5 Incident Reporting</p> <p>Notes – OSH 4.5 is out of date, references WA Occupational Safety and Health Act 1984. OSH 4.9 does not include the requirement to report dangerous incidents.</p> <p>Recommendations – Update OSH 4.9 to reflect current legislation, include the requirement to report dangerous incidents.</p> <p>Dangerous incident means an incident in relation to a workplace that exposes a worker or any other person to a serious risk to a person's health or safety emanating from an immediate or imminent exposure to.</p>
Induction for Employees, Contractors and visitors	Describes the process for inducting new employees, contractors, and visitors.	Induction for New Employees and Contractors	<p>Note- Moderate concerns were identified with regards to training of new staff and access to documentation as well as giving appropriate time to read and understand the material.</p> <p>Recommendations- Review current induction process to ensure fit for purpose and current for site.</p>
Manual Handling	Describes the process for identifying hazards and managing the risks associated with tasks that require manual handling.		<p>1. OSH 2.13 Manual Handling Safe Work Procedures and Guidelines 2. JSA - Correct Manual Handling (Henderson Waste Recovery Park)</p> <p>Part 4.2 — Hazardous manual tasks</p> <p>Notes – out of date, references 1984 act, last review 2019. Describes the identification, assessment and control of manual handling risks, no evidence of this in risk registers provided.</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
			<p>Notes – multiple high-risk tasks identified, not reflected in risk register provided, no sign off / review, document out of date, no residual risk rating provided. Out of date, last review 2015.</p> <p>Recommendations- Ensure all high risk manual handling tasks are captured, appropriate controls are implemented and reviewed periodically for effectiveness.</p>
Noise Management	Describes the process for managing the risks associated with working in a noisy environment.		<p>1. OSH 2.9 Noise Control and Hearing Protection Guidelines 2. The Safety and Management Plan</p> <p>Notes – OSH 2.9 document is out of date referencing OS&H Act 1984, last review was scheduled for December 2022. Interviews indicate that the organisation is not conducting regular noise surveys or audio metric testing. No evidence was provided to demonstrate how training is provided on the safe use of PPE.</p> <p>Recommendations – Review existing noise surveys to identify any gaps in known “designated noise sources”, establish a register of personnel exposed to these sources to ensure that regular audiometric testing is conducted. Lastly update training material and process to ensure that personnel are using PPE correctly.</p> <p>OSH 2.9 Noise Control and Hearing Protection Guidelines</p> <p>3.1.1 All employees likely to be exposed to noise levels in excess of the safe limits shall undertake a pre-employment base line hearing test to determine any pre-existing hearing loss.</p>



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Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
			<p>3.1.2 Regular Noise Surveys shall be undertaken of relevant plant, machinery and or equipment to identify which items are deemed to be “Designated Noise Sources” and controls implemented to eliminate or reduce these noise sources.</p> <p>3.1.3 Information and Training shall be given to all relevant staff that may be expected to operate or work in the proximity of these “Noise sources”.</p> <p>3.1.4 The City shall supply and provide training in adequate Hearing Protection Devices e.g. Ear plugs and earmuffs.</p> <p>3.1.5 The City shall ensure there is regular audiometric testing of all designated employees who may be required to use or be exposed to “Designated Plant/Equipment”.</p>
Plant and Equipment Management	Describes the process for identifying hazards and managing the risks associated with plant and equipment, including mobile plant and equipment and electrical tag and testing.	Pre start for Forklift, lifts, scaffold	<p>1. OSH 2.21 Safe Operation of Council Plant, Machinery and Vehicles – <u>not provided.</u></p> <p>2. JSA Conduct Pre-Start Inspections (Trucks And Plant)</p> <p>Note- significant risk was identified on site with regards to excavator operations; slewing over an occupied heavy vehicle cab. This was discussed at length with site leaders however action was not taken.</p> <p>Recommendations- In line with the below traffic management plan implementation ensure good operational practices, do not leave people in the line of fire of any vehicle. It would be advisable to engage a qualified SME for this process.</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
			Notes – JSA out of date, last review 2008.
Traffic Management	Describes the process for managing the segregation of people, forklifts and trucks.	Traffic Management checklist	<p>1. OSH 2.19 Traffic Management Guidelines</p> <p>Notes - No evidence of TMPs provided.</p> <p>Recommendations – based on known risks develop, implement, and communicate traffic management plans and ensure the appropriate controls are in place for each operational area.</p> <p>Specific to the recent heavy vehicle vs light vehicle interaction on sight this plan should pay specific attention to the permanency of designated parking zones and the reduction down to one radio channel per controlled area. The presence of control in each area must be confirmed.</p>
Lock Out/Tag Out	Describes the process for locking and tagging out equipment.		<p>1. OSH 2.8 Lock out / tag out</p> <p>2. JSA Using 'Danger' And 'Out Of Service' Tags</p> <p>Notes – JSA out of date, last review 2008, OSH 2.8 due for review in 2022 (not completed)</p> <p>Recommendations –</p> <p>Review and update the documents: Conduct a thorough review of Lock out / tag out procedures to ensure they are up to date with the current organizational needs.</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
Chemical Management	Describes the process for managing chemicals in the workplace. This includes cleaning and other types of chemicals used in the kitchen and toilets.	Chemical Register	<p>1. Model Code of Practice – Managing Risks of Hazardous Chemicals in the Workplace</p> <ul style="list-style-type: none"> • Maintaining a register and manifest (where relevant) of hazardous chemicals and providing notification to the regulator of manifest quantities if required. • ensuring that exposure standards are not exceeded. • provision of health monitoring to workers. • provision of information, training, instruction and supervision to workers. <p>Notes – No evidence was provided to demonstrate the organisation is meeting the (4) requirements outlined above.</p> <p>Recommendations – Adopt the steps / requirements defined by the model Code of Practice.</p>
Training	Describes the process for determining employee's WHS training requirements and maintaining training records.	WHS Training Matrix Training Register	<p>1. LD 2.0 Verification of Competency 2. The Safety and Health Management Plan</p> <p>Notes – LD 2.0 is out of date, references WA Occupational Safety and Health Act 1984. Last reviewed in 2018. Section 3.7 of the Safety and Health Management Plan states that Regular audits of competencies for currency will be undertaken on a 12 monthly basis, no evidence was provided that this is occurring.</p> <p>Recommendations – A detailed review of the training needs analysis against known risks is required, additionally once this is in place ensure that the 12 monthly audit is performed, and findings are shared with the leadership team.</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
			Best practice would be to ensure a verification of competency process for all machinery operated.
Workplace Inspection	Describes the process for conducting workplace inspections in the office, kitchen, warehouse, manufacturing, dispatch other relevant areas.	Workplace inspection checklists for relevant areas	<p>Notes - During the assessment, it was observed that workplace inspections have been conducted; however, the tools utilized lacked specificity and did not offer clear guidance to the individuals responsible for inspecting the work areas. As a result, there is a deficiency in identifying what constitutes good practice during inspections, which could lead to inconsistent assessments and potentially overlooking critical safety hazards.</p> <p>Additionally, while evidence of corrective actions was identified, there was a lack of tracking for actions that could not be immediately rectified. This absence of follow-up on unresolved issues over time may result in recurring safety deficiencies and a failure to address underlying root causes.</p> <p>Recommendations –</p> <p>Improve Inspection Tools:</p> <p>Develop improved inspection checklists or tools that provide clear guidance to inspectors on what constitutes good practice and identifies specific safety requirements relevant to each work area. This will ensure consistent and thorough assessments across all inspections.</p> <p>Implement Tracking Mechanism for Corrective Actions:</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
			<p>Establish a systematic process for tracking corrective actions, particularly for issues that cannot be immediately addressed.</p> <p>Provide Training and Support:</p> <p>Offer training sessions or workshops for personnel responsible for conducting workplace inspections, emphasizing the importance of thorough assessments and effective follow-up on corrective actions. Provide ongoing support and guidance to ensure inspectors understand their roles and responsibilities in maintaining a safe work environment.</p> <p>Conduct Regular Reviews:</p> <p>Schedule regular reviews of inspection processes and corrective action tracking mechanisms to assess their effectiveness and identify opportunities for improvement. Use findings from these reviews as an input to the annual Management Review process.</p> <p>Note- Significant clutter was found in the shed/storeroom areas. Consider creating a racking system and designated storage so that items aren't kept on the floor.</p>
Working at Heights	Describes the process for working at heights in accordance with WA WHS legislative requirements.	Refer to lifts, ladders, scaffolds	<p>1. OSH 2.2 Height and Fall Protection Safety Guidelines</p> <p>2. Work Health and Safety (General) Regulations 2022 – Falls</p> <p>3. Working at heights permit – <u>not provided</u></p> <p>Notes – No evidence was provided that emergency rescue procedures have been developed, tested or that personnel have been provided with suitable training in relation to emergency rescue procedures. The referenced working at heights permit was not provided.</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
			<p>Recommendations – Develop, test and train personnel in emergency response and rescue procedures related to the use of fall arrest systems. This system will apply to contractors also.</p> <p>80. Emergency and rescue procedures</p> <p>(2) Without limiting regulation 79, the person must establish emergency procedures, including rescue procedures, in relation to the use of the fall arrest system.</p> <p>(3) The person must ensure that the emergency procedures are tested so that they are effective.</p> <p>(4) The person must provide relevant workers with suitable and adequate information, training and instruction in relation to the emergency procedures.</p>
Hot Work	Describes the process for conducting Hot Work on client sites. This should link to the Confined Space Access Procedure. This should apply to both employees and contractors.		<p>1. Hot Work Permit 2. Safety and Health management plan</p> <p>Notes – No hot work permit identified with hot works subcontracted out. Again this does not remove responsibility for this process from City of Cockburn.</p> <p>Recommendations – Ensure there is adequate implementation and adherence to hot work processes by both staff and contractors.</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
Confined Space Access	Describes the process for accessing confined spaces on client sites, training required. This should be applicable to both employees and contractors.		<p>1. Confined Space Entry Procedure (2015) 2. Confined Space CHECKLIST 3. OSH 4.12 Confined Space Entry - <u>not provided</u>. 4. AS 2865 – 1995 – Safe working in a confined space</p> <p>Notes – The confined space checklist is detailed but does not provide guidance on what is expected when a “yes” is selected. The procedure is out of date and only covers the testing of methane without defining how the other specific controls defined in the Work Health and Safety (General) Regulations 2022 are met.</p> <p>Recommendations – Develop a confined space procedure that defines the steps required for identification, risk assessment, entry, atmosphere testing, use of permits, emergency response and training.</p> <p>Hazard identification - Risk assessment</p> <p>(a) the nature of the confined space;</p> <p>(b) the work required to be done, including whether it is necessary to enter the confined space;</p> <p>(c) the range of methods by which the work can be done; (d) the hazards involved and associated risks;</p> <p>(e) the actual method selected and plant proposed; and</p> <p>(f) emergency and rescue procedures.</p> <p>Safety of the atmosphere</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
			<p>12.1 The employer shall ensure that no person enters a confined space without an entry permit.</p> <p>12.2 The employer shall ensure, before a person enters a confined space, that where practicable:</p> <ul style="list-style-type: none">(a) the confined space contains a safe oxygen level;(b) the atmospheric contaminants in the confined space are reduced to below the relevant exposure standards;(c) the confined space is free from extremes of temperature; and shall ensure(d) the concentration of flammable contaminant in the atmosphere of the confined space is below 5 percent of its LEL. <p>12.3 The employer shall ensure that atmospheric testing and monitoring is carried out consistent with the hazards identified and the risk assessment.</p> <p>12.4 The employer shall ensure that where it is not practicable to provide a safe oxygen level, or atmospheric contaminants cannot be reduced to safe levels, no person enters the confined space unless they are equipped with suitable personal protective equipment including air supplied respiratory protective equipment.</p> <p>Education and training</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
			<p>14.1 The employer shall provide training for all persons required to work within or on a confined space in all relevant activities related to entering and working in or on confined spaces.</p> <p>14.2 The training program shall include at least the following: (a) the hazards of confined spaces;</p> <ul style="list-style-type: none">(b) assessment procedures;(c) control measures;(d) emergency procedures; and(e) the selection, use, fit and maintenance of safety equipment. <p>Work Health and Safety (General) Regulations 2022</p> <p>66. Managing risks to health and safety</p> <p>67. Confined space entry permit</p> <p>69. Communication and safety monitoring</p> <p>70. Specific control: connected plant and services</p> <p>71. Specific control: atmosphere</p> <p>72. Specific control: flammable gases and vapours</p> <p>73. Specific control: fire and explosion</p> <p>75. Personal protective equipment in emergencies</p> <p>74. Emergency procedures</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
			76. Information, training and instruction for workers 77. Confined space entry permit and risk assessment must be kept
Working Interstate	Describes the process for working interstate		Notes – not relevant
Safe Driving Procedure	Describes the process for safe driving including fatigue management, mobile phone use etc.		1. Site & Driver Induction 2. OSH 4.26 Fatigue Notes – No date of approval, who has authorised the document or when it is due for review. Recommendations – Update the current procedure and reference relevant fatigue controls specified within OSH4.26.
WHS Procedure Description	An overarching document describing the purpose of the procedures and their related documents		Notes – No evidence provided. Recommendations – Develop an overarching document describing the purpose of the procedures and their related documents
Implementation Plan	To assist with the implementation of the WHS management system.	WHS Implementation schedule	Notes – No evidence provided. Recommendations – Develop an implementation plan, including an annual management review to ensure suitable resources and management oversight of the effectiveness of the plan.



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
Internal Auditing	To assist with reviewing the implementation of the WHS management system.		<p>Notes – No evidence provided of an established internal auditing programme or an active annual management review of the Safety and Health Management plan.</p> <p>Implementing an internal audit program for ISO 45001 allows your organization to systematically assess the effectiveness of their health and safety management systems, identify areas for improvement, and ensure compliance with regulatory requirements.</p> <p>Recommendations – Implement an internal audit program for your Safety and Health Management system following the elements.</p> <ol style="list-style-type: none"> 1. Define audit procedures, criteria, and objectives. 2. Conduct regular audits across all aspects of the health and safety management system. 3. Document audit findings and recommendations. 4. Implement corrective actions to address identified deficiencies. 5. Integrate audit findings into the annual management review process to drive continuous improvement.
Psychosocial risks	To identify and manage Psychosocial risks and associated controls		<p>Notes - No evidence provided of a process to identify psychosocial risk and the controls implemented to manage them.</p> <p>Recommendations – Conduct a review of the Model Code of Practice and adopt its recommended processes (below). Build the identification and management of risks and controls into the organisations risk management rituals and routines.</p> <p>Under the WHS Regulations, to manage psychosocial risks, a duty holder must:</p>



WHS Gap Analysis Report



Procedure Name	Purpose	Related Forms	Documents reviewed and identified gaps
			<ul style="list-style-type: none"> identify foreseeable hazards that could give rise to psychosocial risks - eliminate risks, so far as is reasonably practicable. if it is not reasonably practicable to eliminate the risks minimise the risks so far as is reasonably practicable - maintain implemented control measures so they remain effective, and review, and if necessary, revise, control measures so as to maintain, so far as is reasonably practicable, a work environment that is without risks to health and safety.
Asbestos	Describes the process for managing the risks associated with Asbestos.		<p>1. SWMS Procedure For Handling or Recovering Asbestos on Site. 2. OSH 2.14 Asbestos Management 3. Code of Practice – How to manage and control asbestos in the workplace.</p> <p>Notes – No evidence provided of an up to date register or asbestos management plan as stated in the OSH 2.14 Asbestos Management procedure. The SWMS Procedure for Handling or Recovering Asbestos on Site has all scenarios with a residual risk of Low, this is achieved with predominantly administrative and PPE controls. No evidence of testing exposure to asbestos.</p> <p>Recommendations – Ensure a register and management plan is in place as required, review SWMS to ensure controls align to the Code of Practice and Work Health and Safety (General) Regulations 2022.</p> <p>Conduct general hygiene monitoring including for asbestos.</p> <p>OSH 2.14 Asbestos Management</p> <ul style="list-style-type: none"> Facilities and Plant Manager – to create, and maintain, an Asbestos Products Register and to ensure it is available to those undertaking work in the areas identified in the register.



			20.3 Ensure that corrective actions are proactively discussed within the leadership group to ensure that there is accountability in relation to the close off of actions and mitigation of risk.	WHS / Leaders	In Progress	Corrective actions being discussed at monthly ExCo meeting and intention is that these are then cascaded down to other leaders.
21	Safety Shortcoming - Site Specific	Ensure that there is adequate implementation and adherence to hot work processes by both staff and contractors.	21.1 Undertake a review of the current hot works process (including SWMS and permit system) to ensure that this is compliant with legislation and update as required.	HWRP Manager	In Progress	Hot works process being reviewed by Head of P&A currently
22	Safety System - Shortcoming	Ensure that the Safe Driving Procedure is compliant and also makes reference to Fatigue Management procedures.	22.1 Undertake a review of the current safe driving procedure and update as required in consultation with the workers.	WHS	In Progress	
23	Safety System - Deployment	The auditor was not provided with evidence that the City has processed in place that were in line with Code of Practice around psychological risks.	23.1 Undertake gap analysis to ensure that all required documentation and processes have been developed.	WHS	Completed	Gap analysis undertake and framework in development. Several new procedures have been developed for deployment.
			23.2 Develop a deployment strategy to ensure that workers are aware of the framework, associated documentation and processes that are in place in relation to psychological risks in the workplace.	WHS	In Progress	Should be incorporated into toolbox meeting template
24	Safety Shortcoming - Site Specific	Ensure that there is an asbestos register, management plan and SWMS in place that is compliant with the Code of Practice and WHS Regulations	24.1 Undertake a gap analysis of the current documentation and processes against the Code of Practice and Regulations and where required, update documentation and processes in consultation with workers.	HWRP Manager	Not commenced	



12. Motions of Which Previous Notice Has Been Given

Nil

13. Notices Of Motion Given At The Meeting For Consideration At Next Meeting

Nil

14. New Business of an Urgent Nature Introduced by Members or Officers

Nil

15. Matters to be Noted for Investigation, Without Debate

Nil



16. Confidential Business

(2024/MINUTE NO 0012) Meeting to Proceed Behind Closed Doors

Committee Recommendation

MOVED Cr C Reeve-Fowkes SECONDED Deputy Mayor C Stone

That, pursuant to Section 5.23(2)(a) of the Local Government Act 1995, the Council meeting proceeds behind closed doors to consider Confidential Item 16.1, the time being 6.05pm

CARRIED 6/0

16.1 (2024/MINUTE NO 0013) Internal Review of Procurement Services - Malabar BMX Contract C100950, RFT03/2023

This report and its attachments are **CONFIDENTIAL** in accordance with Section 5.23(2) (c) of the *Local Government Act 1995*, which permits the meeting to be closed to the public for business relating to the following:

- (c) *a contract entered into, or which may be entered into, by the local government and which relates to a matter to be discussed at the meeting.*

Officer Recommendation/Committee Recommendation

MOVED Cr C Reeve-Fowkes SECONDED Deputy Mayor C Stone

That Council:

- (1) ADOPTS the actions agreed as specified in the Confidential Resolution made behind closed doors.

CARRIED 6/0

(2024/MINUTE NO 0014) Reopen Meeting to Public

Committee Recommendation

MOVED Mayor L Howlett SECONDED Cr C Reeve-Fowkes

That Council reopen the meeting to the public, the time being 6.09pm.

CARRIED 6/0

17. Closure of Meeting

There being no further business, the Presiding Member closed the meeting at 6.09pm.

