QLDC Council
18 December 2014

Report for Agenda Item: 9

Department:

CEO Office

9: Risk Mitigation Schedule
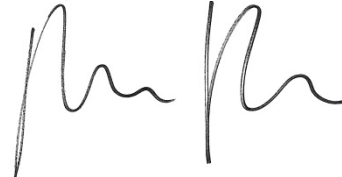
Purpose

1   To approve the QLDC Risk Mitigation and Management Schedule for inclusion in the 10 Year Plan as recommended by the Audit and Risk Committee.

Recommendation

2   *That Council:*

a. **Approve** the QLDC Risk Mitigation Schedule and Framework.

Prepared by: Katherine Davies

Reviewed and Authorised by: Meaghan Miller

Senior Advisor, Corporate Planning and Performance
3/12/2014

General Manager
Corporate Services

3/12/2014

Background

3   Completion of a QLDC Risk Mitigation and Management Schedule is a key organisational project identified in the 2014 Council Business Plan with a scheduled completion date of January 31 2015, to enable the schedule to be incorporated in the 2015 10 Year Plan.

4   A draft Risk Management Framework was presented to the Audit and Risk Committee at the meeting in March 2014. The Framework outlines the risk management process, objectives of risk management, risk identification, analysis and reporting (See attachment A).

5   A draft Operational Risk Register (see attachment C) was presented to the Audit and Risk Committee at its meeting in March 2014 and it was agreed that further work was required to highlight strategic risks to the organisation. In particular, the Committee requested a focus on risks in the areas of disaster recovery, asset management, legislative compliance, finance and capability. Subsequently, the risk registers were split into strategic risks and operational risks. The committee agreed that detailed risk mitigation schedules were required for all strategic risks.

6   The committee reviewed the progress of the headline strategic risks in June 2014 and agreed at its October 2014 meeting to recommend three (those completed to date as a priority, namely emergency management and management of critical assets – infrastructure and property) mitigation schedules to the full Council and sign off via email on the remaining five. The remaining schedule is recommended by the committee.

Comment

7   With the guidance of the Audit and Risk Committee, the Council has developed a strategic risk register to enable organisational prioritisation of risk.

8   The Strategic Risk Register is broken into the following seven risks, each with a risk mitigation schedule (see attachment B):

1. Current and future development needs of the community (including environmental protection) not met.

2. Business capability planning failure. Inadequate delegation, ownership and business continuity.

3. Management practice failure (failure to understand and work within legislation).

4. Inadequate comprehension / disclosure of conflict in decision-making processes (staff and elected members).

5. Inadequate business capacity (internally and contractually) to meet organisational needs.

6. Failure to manage assets critical to service delivery for infrastructure and property assets (*this risk is split into two mitigation schedules*).

7. Inadequate planning, training and capacity for emergency response.

9   Following completion of these mitigation schedules the risks have been analysed, using the methodology and tolerances (Risk Appetite) set out in the Risk Management Framework, and given a controlled risk score.

10 In order to maintain accountability for risk, a working group will be established to review progress against the mitigation schedules, particularly the enhancements

required to improve the risk score. A dashboard will be developed to manage this process.

11 The working group will be informed by the Health and Safety Committee and will consider any emerging risks. The working group will report quarterly to Councillors (through the monthly report) and the Audit and Risk Committee. Outside annual reporting, the committee will recommend to the Council any significant changes to the risk register or mitigation schedules.

Financial Implications

12 N/A

Local Government Act 2002 Purpose Provisions

Risk Mitigation and Management by Local Government gives effect to the purpose of Local Government under section 10 of the Local Government Act in that it enables the Council to meet the current and future needs of communities.

Council Policies

13 The following Council Policies were considered:
  • 10 Year Plan

Consultation

14 Risk will be included in the 10 Year Plan and signposted in the 10 Year Plan Consultation Document, which will be consulted with the community from March 2015.

Attachments

A Risk Management Framework
B Strategic Risk Register and Risk Mitigation Schedules
C Operational Risk Register

RISK MANAGEMENT FRAMEWORK

1 December 2014

Author: Chief Executive's Department

1. Risk Management Policy

1.1 Policy

QLDC wishes to manage its risks in a prudent manner to enable its business activities to be consistently delivered.

1.2 Purpose Statement

The purpose of this framework is to define QLDCs risk appetitie and the processes and practices that are in place to identify, communicate, and manage material risks across the organisation. The policy also clearly defines how the roles and responsibilities of Elected Members and management staff are appropriately delegated for risk management.

1.3 Scope

The scope of QLDC's risk management approach is to ensure that:

- Risks are identified and understood;
- Events and practices that could cause disruption to business objectives, financial loss, or injury to people are controlled as far as practicable; and
- Mitigating plans, insurance or other financial arrangements are made to protect the business interests should a loss, damaging to the finances of the business occur.

1.4 Objectives

The objectives of risk management at QLDC are to:

- Provide protection and continuity of the core business activities.
- Safeguard community and employee health.
- Fulfill legal and statutory obligations.
- Ensure long-term health of the environment.
- Ensure long-term integrity of assets at minimum cost.
- Provide contingency planning for foreseeable emergency situations.

1.5 Risk Management Responsibilities

| Position	Roles and Responsibilities
Council/Elected Members	• Adopt the Risk Management Framework. • Adopt the Risk Register.

Audit and Risk Committee	· Recommend the adoption of the risk register to Council. · Recommend the adoption of the Risk Management Framework to Council. · Assist with the development of the organisation's risk appetite and make recommendations to Council. · Obtain regular updates from the risk management working group and General Managers on current risks and any new risk not previously noted. · Monitor how risk is being controlled.
Chief Executive/Director, Chief Executive's Office	· Establish, implement and maintain sound risk management practices in the organisation through implementation of the risk management framework and risk management working group. · Administer the risk policy, issue any appropriate instructions, standards or guidelines and where appropriate co-ordinate companywide risk controls.
General Managers	· Ensure that the risk management processes as defined in the risk management framework are implemented effectively in their areas of responsibility.
All staff	· Identify, analyse and manage risks in their areas of activity in accordance with the risk management framework.

2. Risk Management Process

2.1 Introduction

The risk management process adopted by QLDC follows the 'Australian/New Zealand Standard AS/NZS ISO 31000:2009 Risk Management – Principles and guidelines'.

The main elements of the risk management process, as specified by the AS/NZS ISO 31000:2009, are shown in the following diagram:
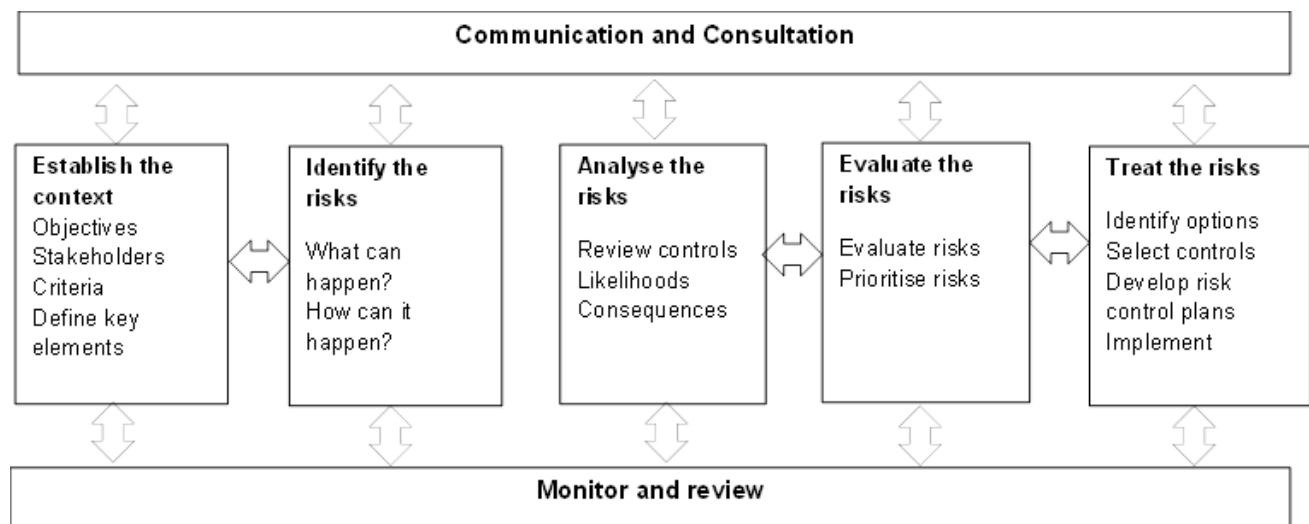
2.2   Establishing the Context

Organisational context can be viewed in two ways, internal and external context. Internal context is the internal environment in which the Council operates, including organisational structure, policies, roles and accountabilities, capabilities, information systems and culture. External context covers the external environment which can include community drivers, legal and regulatory models, technology, natural events, industry trends and impacts (i.e. rates of growth).

In establishing the context in which to manage risks the PESTLE tool can be utilised to determine the risk type:

- Political (reputation and image risks)
- Economic (external and internal financial risk)
- Social (community focused risks)
- Technological (systems risks)
- Legal (public health and compliance risks)
- Environmental risks (natural risks)

It is against these criteria that risks can be identified and assessed for consequence and likelihood.

2.3   Identify the Risks

This step identifies what, why and how things can happen as the basis for further analysis. This process can be facilitated by making a list of QLDCs key objectives and core services. The tools and techniques used to identify risks can include checklists, workshops, judgments based on experience and records, and systems analysis.

When identifying risks it is important to remember that **a risk is any event that prevents or inhibits QLDC achieving its key strategic objectives or delivering core services to the community.**

2.4   Analyse the Risks

To analyse the risks that have been identified four steps need to be worked through.

Step 1: How likely is it that the risk event will happen? *(Likelihood)*

Likelihoods are analysed in terms of annual occurrence on a five-point descriptive scale. The scale ranges from almost certain to rare. For each identified risk a likelihood rating should be applied.

Table 1: Likelihood Ratings

Likelihood	Rating	Description
Rare	1	May occur once in twenty to fifty years
Unlikely	2	May occur once in five to twenty years
Moderate	3	May occur once in five years
Likely	4	May occur once per year
Almost certain	5	Will occur more than once per year

Step 2: What is the consequence (the outcome) of the event? *(Consequence)*

A consequence is the potential deficit in performance arising from a risk occurring. This is analysed by taking the context in which the organisation is working (Political, Economic etc.) and identifying the consequence of the risk under each of those headings. The scale of consequence ranges from catastrophic to moderate and is scored from 1 to 5.

Table 2 - Risk Consequence Ratings Table

Rating	Extreme	Very Serious	Serious	Important	Moderate
Score	5	4	3	2	1
Political	· Parliamentary inquiry initiated.	· Adverse national media coverage.	· Adverse local media coverage.	· Intra-industry knowledge of incident, but no media attention.	· Reputation intact, internal knowledge only.
	· Widespread community outrage	· Significant number of Councillors resign	· Community complaints, minor rectification measures required.	· Some community complaints.	· Staff dissatisfaction.
	· Commissioners appointed to review Council operations.	· High-profile community concerns raised, requiring significant rectification measures.	· Widespread staff attitude problems.	· Some staff attitude problems, increase in staff resignations above industry norms.	
			· High number of staff resignations.		
Economic	· Loss > $5 M	· Loss < $5 M	· Loss < $1 M	· Loss < $ 0.5 M	· Loss < $0.25 M
Social	· Widespread serious impact on public health i.e. multiple people suffer notifiable or serious disease epidemiologically traceable to QLDC	· Localised serious impact on public health i.e. a single person suffers notifiable or serious disease epidemiologically traceable to QLDC.	· Serious health impact on multiple members of staff, agents or public.	· Serious disease potentially linked in the public's mind to QLDC.	· Minor injuries, no hospitalisation required (staff, agents or public).
	· Multiple fatalities of staff, agents or public, attributable to QLDC.	· Single fatality of staff, agents or public, attributable to QLDC.	· Some loss (>25%) of community support (includes business community).	· Localised public health scare potentially linked to QLDC.	· Minimal impact on community or support.
	· Significant loss (>50%) of community support (includes business community).	· Loss (>40%) of community support (includes business community).	· Serious injuries to one person (staff, agents or public).	· Marginal decrease (>5%) in community support (includes business community).	
Technical	· Successive failures in achieving service delivery standards.	· Failure to achieve some service delivery standards.	· Some reduction in service delivery standards.	· Minor breach of service delivery standards.	· Negligible impact on service delivery standards.
	· Major critical milestone or deadline missed > 12 months.	· Major critical milestone or deadline missed by 6-12 months.	· Major milestone or deadline missed by 3-6 months.	· Major milestone or deadline missed by 1-3 months.	· Major milestone or deadline missed by < 1 month.
Legal	· Potential large-scale class action	· High profile legal challenge	· Some legal constraints imposed, minimal fine.	· Technical legal challenge or breach.	· Moderate legal impact or breach.
	· Prosecution with maximum fine and imprisonment.	· Council prosecuted prosecution with heavy fine.	· Enforcement order served on Council	· Infringement notice served on Council	· Abatement notice served on Council;
Environment	· Catastrophic environmental harm traceable to QLDC.	· Multiple measurable environmental harm or medium term recovery traceable to QLDC.	· Long term but immaterial effect on environment or community traceable to QLDC (e.g. noise, odour).	· Medium term but immaterial effect on environment or community traceable to QLDC (e.g. noise, odour).	· Short term transient environmental or community impact traceable to QLDC, moderate action required.
	· Large natural disaster, most council buildings and facilities unusable	· Major environmental harm or long term recovery traceable to QLDC.	· Measurable environmental harm or medium term recovery traceable to QLDC.	· Natural disaster, some localised effects, some facilities damaged but repairable.	· Natural disaster, some localised effects
		· Natural disaster, some council buildings and facilities unusable	· Natural disaster, council buildings and facilities damaged but repairable		

Step 3: What is the level of risk to the organisation? (Inherent risk)

The estimated level of risk (or inherent risk) is determined by multiplying the likelihood and consequence ratings.

Level of risk (inherent level of risk) = Likelihood x Consequence

This gives the risk priority score from 1 (low risk) to 5 (high risk). The overall consequence of the risk is based on the impact of the risk on each of the six risk consequence rankings in Table 2. The numeric value of the consequence is calculated using the following formula:

$$C = \frac{\ddot{O}(Political^2 + Economic^2 + Environment^2 + Social^2 + Technical^2 + Legal^2 + Environment^2)}{2.45}$$

Note – the equation applies a squared factor to each consequence to ensure one high consequence is not 'masked' by a smaller consequence. The overall equation is divided by 2.45 to ensure the overall consequence is not greater than a value of five.

The list of risks and their numerical score can then be ranked to give an order of priority, which determines how important the risks are to the organisation.

The end result assigns a priority rating to each risk, taking into account any existing factors that operate to reduce or control the risk (this is often termed inherent risk – the risk that exists given current controls).

2.5   Evaluate the Risks

Once a list of risks have been identified and each has a likelihood, consequence and level of risk score, reference can be made back to the organisation's strategic objectives and core services. Any risks that appear to have been accorded too high or too low a priority rating may be adjusted, with a record of the adjustment being retained for tracking purposes. In addition, the risks may be divided into two broad categories, Corporate and Operational. Further analysis may be attributed to the risks and is known as the Nature of Risk e.g. financial, legal, environmental, capability, operational, strategic.

Step 4: How acceptable is the risk to the organisation? (*Risk classification*)

Once an identified risk has been scored, it must be represented in a form that readily portrays its significance in comparison to other risks identified. This will indicate how acceptable the risk is to the organisation. Firstly the risk classification is determined by mapping the likelihood score against the consequence score:

Table 3: Risk Classification

Likelihood	Consequence				
	Moderate (1)	Important (2)	Serious (3)	Very Serious (4)	Catastrophic (5)
Rare (1)	i	i	l	l	m
Unlikely (2)	i	l	m	m	h
Moderate (3)	l	m	m	h	vh
Likely (4)	l	m	h	h	vh
Almost certain (5)	m	m	h	vh	vh

The risk classification can then be aligned with a level of risk acceptability ranging from risks that are considered 'acceptable' to risks which are considered 'unacceptable'. The organisation determines the lines that form the boundaries between the levels of risk to reflect the appetite to risk.

Table 4: Risk Acceptability

Risk Class	Level of Risk Acceptability	Extent of Management Required (e.g. Prevention, Mitigation, Reporting, Auditing)
i Insignificant	Acceptable.	· Nil, or Low-cost prevention or mitigation where justified.
l Low	Tolerable if improvement is uneconomic.	· Low-cost prevention or mitigation where justified. · Should be periodically reviewed.
m Moderate	Most likely unacceptable; but may be tolerable if the cost of risk elimination or reduction is greater than the improvement gained.	· Preventive measures and mitigation measures required, where practicable. · Requires routine review.
h High	Unacceptable without further control or treatment; May be tolerable if the cost of elimination or reduction is significantly greater than the improvement gained.	· Preventive measures are required where practicable. · Mitigation measures required in all cases (included in formal Emergency Preparedness Planning); requires regular review.
vh Very High	Intolerable; Risk reduction must be investigated as a priority.	· Prevention and mitigation measures. · Reported immediately to the Chief Executive and to the elected members.

2.6   Controlling the Risk

Controlling the risk is about determining what will be done in response to reduce the likelihood and/or consequence of the risk event. There are four ways in which a risk can be controlled:

1. **Treat** – put measures in place which directly impact the risk
2. **Tolerate** – depending on the level of acceptability/risk class the organisation might be able to tolerate the risk
3. **Transfer** – some risks can be transferred through contracts or other agreements with external agencies
4. **Terminate** – there may be opportunities to terminate the risk altogether

For each risk a control measure must be assigned, which takes into account existing processes and procedures and whether new controls might be appropriate. The

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extent of management control should also be considered and forms part of the level of acceptable risk determined by the organisation (see Table 4). For example, some risks may be tolerated if the cost of control exceeds the improvement that would be gained.

2.7   Reporting, Monitoring and Review

Once the risk management process is complete the information is presented in the form of a risk register. The information maintained for each risk includes:

- A unique identifying reference or number;
- A brief description of the risk;
- The likelihood, consequence and derived inherent risk score;
- The risk priority (ranking of the inherent risk scores);
- The risk class (insignificant to critical);
- The controls in place to treat, tolerate, transfer or terminate the risk;
- The department or position with overall responsibility for the risk.

The risk register should also include tracking information such as:

- Date of entry for the risk;
- Latest revision date;
- Reasons for the revision;
- Who initiated the revision.

Beneath the risk register sits the mitigation (control) plans, which are facilitated by the Chief Executive's Office and appropriate organisation representatives. Meetings are held quarterly to monitor and review progress against the action plan. The purpose of the mitigation plans are to drive control measures and inform an annual review of the risk register.

Table 5 demonstrates how the organisation monitors and reports risks. An internal Health and Safety Committee is responsible for administration of the hazard register. The Committee meets quarterly and has a standing agenda item to identify any new or reoccurring hazards that could be considered a corporate risk. These risks are communicated to the Senior Corporate Planning and Performance Advisor and assessed against the parameters of the framework. If the risk is considered to meet the parameters then it is escalated to the Chief Executive/Management Team and Audit and Risk Committee. The Committee is then responsible for advising Council of any additions to the risk register. Diagram 1 demonstrates the flow of risk information through the organisation.

Table 5: Risk Management Reporting

Document	Risk Category	Reported to	Frequency	By Who
Risk register	Corporate Risks (classed as high or very high)	Council/Elected Members (adopted by)	Annually	Audit and Risk Committee (recommended by)
Summary of risk register and associated controls	Corporate Risks (classed as high or very high)	Audit and Risk Committee	Quarterly	Chief Executive/General Managers
Corporate Risk Management Action Plan	All Risks	Chief Executive/ Management Team	Quarterly	Risk Management Working Party (led by Senior Advisor, Corporate Planning and Performance)
Risk Action Plans and Hazard register	All risks plus specific project risks and hazards	General Managers/ Health and Safety Committee (internal)	Monthly/ Quarterly	Staff representative within business unit

Diagram1: Risk Management Reporting

10 Year Plan Outcomes

Organisational oversight

Management Team (quarterly)

Risk Management Working Group

Health and Safety Committee

Governance and decision making

Council (annually)
Audit and Risk Committee (quarterly)
Elected Members monthly workshop (quarterly)

Strategic risk register
and mitigation plans

Operational risk register

Departmental risk registers and action plans

Hazard register

Monthly report

Performance Framework

Project reviews

Strategic Risk Register - 1 December 2014

| | | STAGE 1 - RISK IDENTIFICATION | | | | | STAGE 2 - ANALYSIS OF UNCONTROLLED RISK | | | | | | | | | STAGE 3 - RISK CONTROLS AND ANALYSIS OF CONTROLLED RISK | | | | | | | | | | STAGE 4 - RISK CLASS |
| | | RISKS | | | | Risk Owner | Consequence Score | | | | | | Uncontrolled Risk Score | | | Current Controls | Consequence Score | | | | | | Controlled Risk | | | |
Risk ID	Cause ID	Description	Causal Factor	Nature of Risk	Justification/Context	Assigned to..	Political	Economic	Social	Technical	Legal	Environmental	Consequence	Likelihood	Level of risk 1(low) to 25 (high)	Control	Political	Economic	Social	Technical	Legal	Environmental	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class 1 (insignificant) to 5 (very high)
SR1		Current and future development needs of the community (including environmental protection)	10 Year Plan, District Plan and Asset Management Plans	Strategic	Economic, social, environmental, reputational risk	GM Planning GM Infrastructure GM Finance	4	4	4	5	3	4	4	5	20	See risk mitigation plan SR001 for risk components for current development needs and future development needs	4	3	4	5	4	4	4	3	12	High
SR2		Business capability planning - delegation ownership and business continuity	HR planning, systems planning and continuity planning to meet organisational needs	Strategic	Central Government Intervention (appointment of commissioners) and liability	Director CEO Office/HR Manager GM Planning GM Infrastructure	4	3	4	5	3	1	4	5	20	See risk mitigation plan SR002	3	2	1	3	2	1	2	3	6	moderate
SR3		Management Practise - working within legislation	Local Government Act, Resource Management Act, Building Act or Health and Safety Act e.g. failure to issue code of compliance certificates, work within statutory obligations, resource consent conditions (omissions)	Strategic	Death or Injury, Central Government Intervention (appointment of commissioners)	Director of CEO office/HR Manager GM Legal and Regulatory GM Planning	5	4	4	5	4	3	4	4	16	See risk mitigation plan SR003, which contains risk components related to legislative requirements	3	2	1	3	2	1	2	3	6	moderate
SR4		Comprehension/disclosure of conflict in decision making processes (elected members/staff)	Fraud, poor disclosure practices, information breach	Strategic	Judicial review, erosion of public confidence, liability, disciplinary proceedings, reputational issues	Director of CEO office/HR Manager GM Legal and Regulatory GM Planning GM Finance	3	1	3	4	4	1	3	5	15	See risk mitigation plan SR004	2	1	2	2	2	1	2	3	6	moderate
SR5		Business capacity (internally and contractually) to meet organisational needs	Performance data to support organisational needs, employment market and contractors within the market	Strategic	contractual liability, service failure, lack of business continuity	Director of CEO office/HR Manager GM Infrastructure GM Planning GM Finance	3	2	3	4	2	1	3	5	15	See risk mitigation plan SR005	2	1	2	2	1	1	2	3	6	moderate

Risk ID	Cause ID	Description	Causal Factor	Nature of Risk	Justification/Context	Assigned to.. (Risk Owner)	Consequence Score						Uncontrolled Risk Score			Current Controls (Control)	Consequence Score						Controlled Risk			Risk Class 1 (insignificant) to 5 (very high)
							Political	Economic	Social	Technical	Legal	Environmental	Consequence	Likelihood	Level of risk 1(low) to 25 (high)		Political	Economic	Social	Technical	Legal	Environmental	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	
SR6a		Assets critical to service delivery (infrastructure assets)	Third party damage, performance management, project and financial management capability, security and safety measures, data	Strategic	illness/death, reputational, financial, legal	GM Infrastructure	4	5	4	5	4	4	4	3	12	See risk mitigation plan SR006a for list of critical assets and associated management plans	3	3	2	3	2	2	3	2	6	moderate
SR6b		Assets critical to service delivery (property)	Third party damage, performance management, project and financial management capability, security and safety measures, data	Strategic	illness/death, reputational, financial, legal	GM Operations	3	3	4	4	4	1	3	4	12	See risk mitigation plan SR006b	3	3	4	4	4	1	3	4	12	High
SR7		Planning, training and capacity for emergency response	Response to earthquake, flood, fire, snow event, wind damage, pandemic	Strategic	social, recovery impact, liability, reputational, loss public confidence	CEO, Director of CEO office	5	1	5	4	5	5	4	1	4	See risk mitigation plan SR007	3	1	3	3	1	4	3	1	3	low

Strategic risk mitigation schedule   **(SR1) Current and future development needs of the community (including environmental protection)**

Owner	See reporting details for specific risk owners

Causes	10 Year Plan, District Plan and Asset Management Plans

Date updated   November 2014
Review date   May 2015

Risk analysis (*as detailed in the risk register*)

	Uncontrolled risk score			Controlled risk score			Risk Class
Date of evaluation	Consequence	Likelihood	Level of risk 1(low) to 25 (high)	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class 1 (insignificant) to 5 (very high)
1/12/2014	4	5	20	4	3	12	**High**

Risk mitigation plan

	Risk components	Recommended management plan	Existing management plan	Assessment of existing management plans	Enhancement required	Deadline (including milestones) for enhancement	KPIs (strategic performance framework) PI (departmental)	Reporting details
Current Needs								
1.	Asset data	Dedicated Infrastructure Analyst role and GIS resources. Well documented data management and storage processes. Regular review and programme of asset data components, complete and accurate recording and filing of as-built plans, static and variant data (flow, car movements, rainfall etc.) Robust data capture systems and processes for contracts, capital programmes and SCADA Systems. Regular audits of quality of asset records Robust processes and report to convert data into information to support decision making.	Dedicated GIS resources. Limited (if any) regular audits of quality of asset records. Approximately 80% of basic static data (depth, diameter, material, capacity, age etc.) is populated. Approximately 50% of condition data is populated. Legacy models held by consultants. Limited documentation / confidence in models accuracy and levels of calibration. Outsourced modelling skill sets. Outsourced SCADA communications (single point of failure).	Initial assessment completed in October 2014 showed over 70% of water services work (operations) was not attributed to an asset in the Hansen data storage system. Improvement Opportunities identified as part of AMP review (October 2014) and revised structure / resourcing of Infrastructure department coming into effect from December 2014. Recruitment for Data Manager underway (November 2014).	Dedicated Infrastructure Analyst role and GIS resources. Well documented data management and storage processes. Regular review and programme of asset data components, complete and accurate recording and filing of as-built plans, static and variant data (flow, car movements, rainfall etc.) Robust data capture systems and processes for contracts, capital programmes and SCADA Systems. Regular audits of quality of asset records Robust processes and report to convert data into information to support decision making.	Review – May 2015 Complete – December 2015	PIs: - No gaps in datasets. - Number of data audits completed. - Percentage of works orders attributed to an asset.	Officer: GM Infrastructure Report to: Council Internal risk reporting Audit and Risk Committee
2.	Natural hazards and Earthquake Prone Buildings legislation	Earthquake Prone Buildings Policy	Earthquake Prone Buildings Policy 2007 (meets current legislation).	Policy will need updating once changes to the legislation are known. Submissions have been made to proposed	Earthquake Prone Buildings Policy to be updated	By May 2015 (or sooner depending upon legislative requirements)	Council adoption of new policy	Officer: Building Services Manager Report to: Council

#	Item							
				legislative change.				Internal risk reporting Audit and Risk Committee
3.	Land Information Memorandum	Revised planning for storage of information and comprehensive staff training on where to record items. Full implementation of Tech-one procedures / events.	Council files searched and various departments asked for information.	Review provision of information relating to land and buildings forms.	Better use of council records management by all departments feeding their information into central database, and attention to detail in responding to LIM information requests.	Review progress by May 2015 Complete by July 1 2015	KPI: - Percentage of consents processed within statutory timeframes (LIMs processing time and days)	Who: Building Services Manager Report to: Internal risk working group/Management Team/Audit and Risk Committee
4.	Resource consents requirements	Undertake continuous fine tuning of small matters in the District Plan that arise from implementation, as well as bigger issue plan changes.	Review the District Plan every ten years and undertake plan changes as required.	The 1st schedule process to change a District Plan is slow, costly and cumbersome meaning district plans become out of date.	Complete District Plan review	Stage 1 notification – May 2015 Stage 2 notification – mid/late 2016	Stage 1 notified Stage 2 notified	Officer: GM Planning Report to: Council
5.	Natural and / or urban environment quality makes Queenstown less desirable as a destination	Simplify and streamline the District Plan and associated resource consent requirements without compromising the urban or natural environmental quality.	The District Plan generally sets high standards in terms of urban design and natural environmental quality.	The District Plan achieves reasonable outcomes but is incomprehensible and expensive.	Complete District Plan review	Stage 1 notification – May 2015 Stage 2 notification – mid/late 2016	Stage 1 notified Stage 2 notified	Officer: GM Planning /District Plan Manager Report to: Council
6.	10 Year Plan financial strategy	2015 10 Year Plan, detailed capital programme schedules by activity. Aligned with the 30 Year Infrastructure Strategy and Asset Management Plans.	2012 10 Year Plan, detailed capital programme schedules by activity.	The 2015 10 Year Plan will see better alignment between infrastructure and financial planning. However, due to the uncertainties arising from growth assumptions and funding there will need to be regular review outside of the statutory requirements.	Regular monitoring of capital programmes to ensure they are still appropriate. This will occur as part of the Annual Plan process, but could be informally reviewed as part of internal risk management arrangements.	Ongoing Begin informal review as part of internal risk management working group – May 2015	Otago Regional Performance Framework measure: - Percentage of the Council's budgeted capital works programme, including renewals, completed annually.	Officer: GM Finance Monthly report Annual Plan and Annual Report
7.	Capital expenditure variations	Estimates for all capital projects based on detailed design.	Estimates are currently based upon the best information available.	Until design work is complete and projects tendered it is possible that the final cost will vary from that forecast in the 10 Year Plan. The estimates that appear in the Asset Management Plans include a 20% scope contingency.	Capital project design works need to be programmed ahead of time to ensure there is a handle on costs. This will be the responsibility of the new asset planning division of the Infrastructure department.	February 2015	KPI: - Percentage variance from original budget for capital expenditure	Officer: GM Finance Monthly report Annual Plan Annual Report
8.	Funding availability - Land Transport New Zealand Subsidies	10 Year Plan, Financial Strategy	10 Year Plan, Financial Strategy	The 10 Year Plan has been adjusted to match the level of funding expected from NZTA.	The Council will need to continually review its renewals programme from 2015/16 onwards, and consider options for changes in levels of service and timing of renewals.	Ongoing Begin informal review as part of internal risk management working group – May 2015	KPI: - Percentage variance from original budget for capital expenditure Otago Regional Performance Framework	Officer: GM Infrastructure Annual Plan Annual Report

						measure: - Percentage of the Council's budgeted capital works programme, including renewals, completed annually.	
				Increased asset monitoring and subsequent dialogue with NZTA to ensure they are aware of the impact of funding decisions.	Ongoing dialogue with NZTA.		
9.	Water demand management	Water Demand Management Plan (WDMP)	Water Demand Management Plan (WDMP)	Council is working towards managing demand in order to avoid the upgrades that would otherwise be required in Queenstown and Wanaka. As part of the WDMP the Council has a number initiatives including education and awareness, full or partial irrigation bans, flow restrictions and ultimately water metering. At the same time, the Council will continue to play its part by continuing the programme to locate and repair leaks.	To continue to deliver the actions in the WDMP. To consider water metering.	Review in February 2015 By June 2015.	KPI: - Annual cost per cubic metre of water supplied DIA mandatory measures: - Average consumption of water per person per day. - Percentage of water lost from each municipal water reticulation network.	Officer: GM Infrastructure Annual Plan Annual Report
Future Needs							
10.	Relevant District Plan	Continue to monitor and refine the existing management plan.	Dwelling capacity model, special housing areas, district plan review.	Generally work well as there is a lot of land zoned for development.	Complete District Plan review	Stage 1 notification – May 2015	Stage 1 notified	Officer: GM Planning Report to: Council
11.	District Plan review	Identification of key technical evidence base – review of dwelling capacity model, population projections.	Existing Dwelling Capacity Model.	The existing model has been reviewed.	Enhancement has occurred in 2014. Further review will be taken as required.	No further enhancement required	-	Officer: GM Planning
12.	District Plan policy and process	Develop enabling District Plan (short to long term), and establish SHAs (short term).	The Operative District Plan regulates development and in association with the RMA sets process.	The Operative District Plan is recognised as complex and in need of review.	The District Plan Review formally commenced in April 2014, and Stage 1 will be publicly notified in May 2015. In developing new policy a key goal has been to simplify and streamline the provisions, and for them to become more enabling.	Stage 1 notification – May 2015	Stage 1 notified	Officer: GM Planning Report to: Council
13.	District Plan objections / appeals	Develop efficient hearing programme with strongly defined Commissioner deliverables for District Plan Review to minimise time delays.	The timeliness of hearings should be reviewed.	The timeliness of hearings should be reviewed.	Well planned, urgent and ambitious (but achievable) District Plan hearing programme, with Commissioner expectations clearly set.		Hearings held for stage 1 in 2015	Officer: GM Planning Report to: Council
14.	Growth forecast	2015 10 Year Plan, Financial Strategy, growth assumptions, Development	2012 10 Year Plan, Financial Strategy, growth assumptions,	The financial strategy demonstrates where head-room has been built	No enhancement required.	Na.	KPI: Capex to depreciation ratio	Officer: GM Finance

		Contributions Policy.	Development Contributions Policy.	into financial forecasts to accommodate growth. The Council will review growth assumptions whenever updated information is available and prior to every Annual Plan and 10 Year Plan. If there are significant changes then the Development Contributions Policy will be amended accordingly.				Report to: Annual Plan Annual Report
15.	Utilisation and demand models	Population development and prediction system (resident and non-resident) Utilisation and demand projection system (road usage, water, wastes etc.) Tools which enable the robust comparison of infrastructure assets performance with Levels of Service to inform investment programmes. Annual audits of application of prediction systems. Accurate, calibrated, maintained and documented computer models of core infrastructure (roads, water supply, wastewater and storm water). Scheduled reviews of the underlying assumptions, methodologies and calculations within projection systems.	Population data provided by multiple external firms (based on Stats NZ). No current projection system in place for converting population into usage.	Improvement Opportunities identified as part of AMP review (October 2014)	Dedicated Infrastructure Analyst role. Creation and documentation of Council utilisation / demand Models (prediction systems) Ability to undertaken scenario modelling of utilisation / demand to inform opportunity for non-infrastructure solutions (education etc.) Audits of application of the models. Population development and prediction system (resident and non-resident) Accurate, calibrated, maintained and documented computer models of core infrastructure (roads, water supply, wastewater and storm water). Scheduled reviews (say 3 yearly) of the underlying assumptions, methodologies and calculations within projection systems.	Review progress – May 2015 Complete July 2016	Accuracy of population and usage projections Robustness (timeliness and quality) of investment proposals / decisions Accuracy of investment cost estimates.	Officer: GM Infrastructure Report to: Internal risk working group/Management Team/Audit and Risk Committee
16.	Infrastructure investment programming	Dedicated Financial Programmer / Controller. All projects a have standard/template business case. All investment is data / evidence based, and directly linked to levels of service and the organisations' risk appetite.	Legacy programmes held by consultants. Limited documentation / confidence / details in the justification of programmed investment. No in house financial controller (gate keeper) function. Tech 1 reporting in its	Improvement opportunities identified as part of AMP review (October 2014)	Dedicated Financial Controller role. Business case approach implemented and embedded through evidence based decisions. NZTA BCA implemented and embedded. Report on balance of risks versus level of service and	Review – May 2015 Complete – December 2015	KPI: - Percentage variance from original budget for both capital and operational expenditure Otago Regional Performance Framework: - Percentage of the	Officer: GM Infrastructure Report to: Internal risk working group/Management Team/Audit and Risk Committee

| | | Timely, accurate reporting of implementation progress (variance reporting) Standardised monthly accruals process. Standardised quarterly / half yearly reforecasting process. | infancy. | | investment. Accruals process (monthly) Reforecasting process (min 6 monthly). | | Council's budgeted capital works programme, including renewals, completed annually.

PIs:
- Percentage of projects with robust (corporate risk framework) business case; | |

Strategic risk mitigation schedule   **(SR2) Business capability planning - delegation ownership and business continuity**

Owner	Director, CEO Office/HR Manager GM Planning GM Infrastructure

Causes	HR planning, systems planning and continuity planning to meet organisational needs

Date updated	November 2014
Review date	May 2015

Risk analysis (as detailed in the risk register)

	Uncontrolled risk score			Controlled risk score			Risk Class
Date of evaluation	Consequence	Likelihood	Level of risk 1(low) to 25 (high)	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class 1 (insignificant) to 5 (very high)
1/12/2014	4	5	20	2	3	6	moderate

Definition:

Business capability planning is defined as the Council's ability to document and deliver the 10 Year Plan through the right *people* (staff, contractors and volunteers), *technology* and *plans*.

Risk mitigation plan

	Risk components	Recommended management plan	Existing management plan	Assessment of existing management plans	Enhancement required	Deadline (including milestones) for enhancement	KPIs (strategic performance framework) PI (departmental)	Reporting details
	People							
1.	Identify training requirements in line with organisational needs	Comprehensive training & professional development plan, based on core competencies, qualifications and skills requirement.	Organisational training needs are identified as requirements arise. Development for individuals set through performance agreements.	Somewhat adequate currently, but lacking structure and a suitable framework.	Conduct organisational and individual training needs analysis. Develop full training and professional development plan.	June 2015	PIs: - Staff turnover - Percentage of staff still in post after 12 months	Officer: HR Manager Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee
2.	Succession planning for key roles	Succession plan in place for all key roles and risk areas. Link to training & development plans and performance framework. Develop graduate programme to support succession plans.	Succession plans largely do not exist, and risk exists for key roles within the organisation.	Inadequate	Key/high risk roles identified, and succession plans are in place for all. Graduate programmes are in place for high risk areas.	June 2016 December 2015	PIs: - Staff turnover - Percentage of staff still in post after 12 months	Officer: HR Manager Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee
3.	Recruit capable staff	QLDC is an employer of choice – existing staff are engaged and do not leave.	Recruitment for all roles is planned and targets the right audience with the	Adequate with some room for improvement	Development of 'Employer of Choice' strategy	December 2015	PIs: - Staff turnover - Percentage of staff	Officer: HR Manager

No.	Objective	Controls	Controls (target)	Adequacy	Action/Further controls	Timescale	PIs	Responsibility
		High demand from strong, capable candidates for vacant roles. Succession plans are in place – key vacancies can be filled internally. Recruitment for all roles is planned and targets the right audience with the right information to attract strong, capable candidates.	right information to attract strong, capable candidates. Employee engagement is measured, and engagement action plan developed on annual basis to drive improvements, supporting employee retention.		Succession plans are in place for all key/high risk roles	June 2016	still in post after 12 months	Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee
4.	Retain capable staff	Policies and procedures are in place that enable QLDC to operate as a Good Employer. Employee engagement is measured, and engagement action plan developed on annual basis to drive improvements. Succession plans are in place. Success is recognised. Opportunities exist for staff to develop professionally.	Policies and procedures are in place that enables QLDC to operate as a 'good employer'. Employee engagement is measured, and engagement action plan developed on annual basis to drive improvements. Success is recognised. Opportunities exist for staff to develop professionally.		Training and development plan developed Succession plans for high-risk roles in place	June 2015 June 2016	PIs: - Staff turnover - Percentage of staff still in post after 12 months	Officer: HR Manager Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee
5.	Set and manage performance standards of staff (accountability)	Performance framework links individual to organisational performance. Individual performance is reviewed at least annually, and linked to remuneration. Achievement of performance standards is recognised. Failure to meet individual performance standards is addressed on an individual basis with employee's Manager.	Performance framework links individual to organisational performance. Individual performance is reviewed at least annually, and linked to remuneration . Achievement of performance standards is recognised. Failure to meet individual performance standards is addressed on an individual basis with employee's Manager.	Adequate	-	Review as part of risk management process	-	Officer: HR Manager Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee

Technology							
6.	IT systems to support organisational needs - Financial management system - Document management system - Request for service management system - Telephone system - E-communications (email, website, social media)	One integrated system for all Council document storage and data processing Accessible e-communications that enable the Council to deliver, and customers to access information, easily.	Move to Tech One for financial, request for service and project management data happened on 1 July 2014. New website was launched September 2014.	Corporate systems robust, and GIS works well for the organisation however some departmental improvement in data capture is required.	Robust data capture systems and processes for contracts, capital programmes and SCADA Systems (Infrastructure). Better use of council records management by all departments feeding their information into central database, and attention to detail in responding to LIM information requests. (Planning).	Review progress by May 2015 Complete – December 2015 Review progress by May 2015 Complete by July 1 2015	PIs: - Number of 'Null' values in datasets. - Number of data audits completed. - Percentage of works orders attributed to an asset. LIMs processing time and days	Officer: GM Infrastructure Report to: Council Internal risk reporting Audit and Risk Committee Officer: Building Services Manager Report to: Internal risk working group/Management Team/Audit and Risk Committee
Plans (business continuity planning)							
7.	Business continuity plans to ensure levels of service can be met at all times	Business continuity plan (current).	Overarching business continuity plans were in place for events such as millennium bug and bird flu. Business continuity within key departments, such as infrastructure, do exist including identification of key personnel.	Existing plans are need to reflect recent changes to Council operations.	Business Continuity Plans are required for frontline services.	July 2016	Operational business continuity plans adopted by the organisation.	Officer: Director, Chief's Executive Office Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee

Strategic risk mitigation schedule   **(SR3) Management practise - working within legislation**

Owner	Director, CEO Office and HR Manager GM, Planning
Causes	Local Government Act, Resource Management Act, Building Act, Health and Safety Act. Employment Relations Act or Local Government Official Information and Meetings Act.
Date updated	November 2014
Review date	May 2015

Risk analysis (*as detailed in the risk register*)

	Uncontrolled risk score			Controlled risk score			Risk Class
Date of evaluation	Consequence	Likelihood	Level of risk 1(low) to 25 (high)	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class 1 (insignificant) to 5 (very high)
1/12/2014	4	4	16	2	3	6	<mark>moderate</mark>

Risk mitigation plan

	Risk components	Recommended management plan	Existing management plan	Assessment of existing management plans	Enhancement required	Deadline (including milestones) for enhancement	KPIs (strategic performance framework) PI (departmental)	Reporting details
Local Government Act 2002								
1.	Governance arrangements	Appropriate team in place to manage governance arrangements including the administration of public meetings. Appropriate capture of decisions made at public meetings including reporting templates, agendas and minutes.	Appropriate team in place to manage governance arrangements including the administration of public meetings. Appropriate capture of decisions made at public meetings including reporting templates, agendas and minutes.	Works as intended.	Nil	Review as part of risk management process.	PIs: - Deadlines for meeting agendas and minutes met	Officer: Director, Chief Executive's Office Report to: Internal risk working group/Management Team/Audit and Risk Committee
2.	Legislative requirements for production of the 10 Year Plan, Annual Plan and Annual Report.	Experienced staff responsible for production of accountability documents. Corporate calendar for ensuring deadlines are met. Communications plans in place for public consultation. Processes and system in place for ensuring consultation and subsequent submissions are dealt with in a timely and appropriate manner.	Director of Chief Executive's Officer and GM of Finance are experienced in production of all plans. Corporate calendar and communications plans are in place to ensure deadlines are met. Submissions currently documented in excel.	Submissions need to be managed through a dedicated system as the volume is becoming unmanageable. Options are being investigated.	Improved IT system for dealing with submissions	July 2015	KPI: - Meet annual audit requirements	Officer: Director, Chief Executive's Office Report to: Internal risk working group/Management Team/Audit and Risk Committee

<table>

Local Government Official Information and Meetings Act (LGOIMA)

3.	Decision on information within 20days of request	Spreadsheet for requests and tracking timeframes. All requests are scanned into TRIM and attached an owner.	Spreadsheet for requests and tracking timeframes. All requests are scanned into TRIM and attached an owner.	Plans reviewed every 6 months.	Not required.	Not required.	KPI: Percentage of communication is responded to within specified timeframes: - Official Information Act Requests within 20 days	Officer: Records Advisor

Employment Relations Act and Holidays Act

| 4. | Employment Relations Act: Recognising that employment relationships must not only be built on the implied mutual obligations of trust & confidence, but also the legislative requirement for good faith behaviour | Policies and procedures are in place that ensure legislative requirements are adhered to. Policies are communicated and available to the organisation.

 Human Resources staff are conversant and up to date with legislative requirements, including relevant case law, and provide advice and guidance accordingly.

 Managers are up to date and conversant with legislative requirements.

 Employment Law specialist is in place, and contacted for advice as required.

 Effective working relationships are built with Union. | Policies and procedures are in place that ensure legislative requirements are adhered to. Policies are communicated and available to the organisation.

 Human Resources staff are conversant and up to date with legislative requirements, including relevant case law. Human Resources staff are contacted for advice by Managers as required.

 External Employment Law specialist is in place, and contacted for advice as required

 Effective working relationships are built with Union. | Adequate | Further education to ensure Managers are up to date and conversant with legislative requirements | July 2015 | PIs:
 - Nil complaints | Officer: HR Manager

 Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee |
| 5. | Employees minimum entitlement to annual leave, public holidays, sick leave or bereavement leave (as per the Holidays Act 2003) | Policies & procedures are in place that ensure legislative requirements are adhered to Employment Agreement confirm minimum entitlements.

 HR and Payroll staff are conversant with legislative requirements and their application, and provide advice and guidance accordingly.

 Payroll system calculates entitlements accurately, | Policies & procedures are in place that ensure legislative requirements are adhered to Employment Agreement confirm minimum entitlements.

 HR and Payroll staff are conversant with legislative requirements and their application, and provide advice and guidance accordingly.

 Payroll system calculates entitlements accurately, | Adequate | No enhancement required | Review as part of risk management process. | PIs: Nil complaints | Officer: HR Manager

 Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee |

		at least in line with minimum legislative requirements.	at least in line with minimum legislative requirements.					

Health and Safety Act

6.	Health & Safety Requirements. This includes both current requirements, and requirements under new Health and Safety legislation expected to take effect in 2015.	Policies & procedures are in place that ensure legislative requirements are adhered to. Policies are communicated and available to the organisation. CEO, Managers and Health & Safety committee are aware of current and future requirements. Regular review of current practice by Management and Health & Safety Committee. Independent audit conducted to assess current practice against requirements of new legislation. Action plan developed to meet new legislative requirements. Suitable dedicated resource available to deliver action plan and ensure compliance.	Policies & procedures are in place that ensure legislative requirements are adhered to. Policies are communicated and available to the organisation. Monthly and annual review of current Health & Safety practice by Health & Safety Committee. CEO, Managers and Health & Safety committee are aware of current requirements. CEO and Managers are aware of future requirements. Action plan in place to ensure compliance with current requirements. Built from internal assessment in preparation for external audit.	Adequate for current requirements. Further management required for expected changes to new legislation.	Independent audit conducted to assess current practice against requirements of new legislation. Action plan developed to meet new legislative requirements. Suitable dedicated resource available to deliver action plan and ensure compliance. Training provided for CEO, Managers, H&S Committee and staff to ensure understanding of requirements of new legislation.	October 2015	PI: Compliance with health and safety legislation	Officer: HR Manager Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee

Building Act

7.	Building Consent Authority (BCA) Accreditation	Quality management system continuously updated and tested through internal audit and external regulated IANZ audit.	Quality management system continuously updated and tested through internal audit and external regulated IANZ audit.	Accreditation maintained this year.	Not required.	Not required.	-	Officer: Building Services Manager
8.	Quality Management System for resource consent processing	Ensure all staff use and refer to the Quality management system on a regular basis and that it is constantly refined.	Quality management system available on U drive.	Continued reference to the QMS especially for new staff is required.	Build QMS into induction programme.	Ongoing	QMS forms part of induction programme for all new staff	Officer: GM Planning /HR Manager
9.	Delegations for decision making	Work with legal and regulatory team to ensure delegations register is clear and consistent for both council officers and commissioners.	Contact legal and regulatory when there is a query or question over delegations.	Reactionary.	Continued refinement of RMA and related legislation delegations. Finalise the delegations register changes	May 2015	Delegations register adopted	Officer: GM Planning /GM Legal Report to: Council

10.	Knowledge within QLDC of resource consents held by the organisation and requirements for compliance with consent conditions.	QLDC maintains records of all resource consents held that require ongoing compliance with consent conditions.	Each department that obtains land use consents is responsible for complying with their own consent conditions.	Council in its regulatory function potentially has to prosecute itself for not complying with consent conditions.	List of all QLDC consent holders with details of how and when conditions are being monitored.	May 2015	Register of QLDC consent holders complete. Compliance with resource consent conditions for all QLDC resource & building consents.	Officer: GM Ops & GM Infrastructure Report to: Internal risk working group/Management Team/Audit and Risk Committee
Resource Management Act								
11.	Environmental effects	Continued professional development for all staff. Support staff in their professional decision making.	Quality management system, get input from appropriate specialists, Ensure staff are being allocated the type of resource consent appropriate for their level of experience and capability.	Works reasonably well.	Ad hoc internal audit by GM to ensure risk is appropriately mitigated.	Ongoing	No significant environmental effects as a result of failures in the planning process are reported	Officer: GM Planning Report to: Internal risk working group/Management Team/Audit and Risk Committee
12.	Application of the Resource Management Act (RMA)	Ensure the best legal advice possible is provided.	Ensure staff are being allocated the type of resource consent appropriate for their level of experience and capability. Get legal advice. Appoint suitable commissioners. Be prepared to mediate.	Good at present.	Further auditing and assessment of Commissioner decisions.	Ongoing review and management.	No action taken due to incorrect application of the RMA	Officer: GM Planning Report to: Internal risk working group/Management Team/Audit and Risk Committee
13.	Capacity to process resource consents on time	Continue existing management plan. Broaden panel of providers for resource management services to ensure adequate capacity.	Ensure adequate resourcing to meet consent numbers. Outsource where necessary to approved panel providers.	Works well as timeframes are being met.	Not required.	Continue to monitor through the performance framework and benchmarking activity.	KPI: Percentage of consents processed within statutory timeframes	Officer: GM Planning Report to: Monthly report to Council Annual Report

Strategic risk mitigation schedule **(SR4) Comprehension/disclosure of conflict in decision making processes (elected members/staff)**

Owner

GM, Legal and Regulatory
GM, Finance
GM Planning
HR Manager

Causes

Fraud, disclosure practices, information breach

Date updated
Review date

November 2014
May 2015

Risk analysis (*as detailed in the risk register*)

| Date of evaluation | Uncontrolled risk score | | | Controlled risk score | | | Risk Class |
	Consequence	Likelihood	Level of risk 1(low) to 25 (high)	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class 1 (insignificant) to 5 (very high)
1/12/2014	3	5	15	2	3	6	moderate

Risk mitigation plan

	Risk components	Recommended management plan	Existing management plan	Assessment of existing management plans	Enhancement required	Deadline (including milestones) for enhancement	KPIs (strategic performance framework) PI (departmental)	Reporting details
1.	Conflict of interest register for staff and elected members	Conflict of interest policy requires staff to register conflict on discovery, agree a management plan for managing the conflict, and evaluate exposure to risk of litigation. Elected members are required to disclose any financial association (e.g. director of a company) which are then assessed as above.	Conflict of interest policy requires staff to register conflict on discovery, agree a management plan for managing the conflict, and evaluate exposure to risk of litigation. Elected members are required to disclose any financial association (e.g. director of a company) which are then assessed as above.	Register is reviewed every six months.	Nil – new policy adopted on the 27 November 2014.	Nil	Achieve unqualified opinion on audit.	Officer: GM, Legal and Regulatory Reporting: Audit and Risk Committee reporting.
2.	Employee commits fraud	Business processes actively monitored and reviewed by a key individual. Controls built into financial systems.	Controls have been built into Tech One.	Although controls have been built into the TechOne system, the Council is relying on the process to be the control without further monitoring outside of the system.	Financial Controller role to assume responsibility for internal audit (part of review of financial services)	February 2015	No incidences of fraud committed.	Officer: GM Finance Reporting: Audit and Risk Committee reporting. Annual Audit/Annual Report.
3.	Conflict of interest in consent processing	Organisational wide policy in place and specific	Organisational wide policy in place and specific	Good policy and procedure known by staff	Ensure conflict of interest awareness is built into	Review progress – May 2015	No conflict of interest issues arise	Who: HR Manager

		procedure under the Building Consent Authority management procedures.	procedure under the Building Consent Authority management procedures.	– concentrate on advice to new staff being inducted.	induction process for new staff	Complete July 1 2015		Report to: Internal risk working group/Management Team/Audit and Risk Committee
4.	Conflict of interest in resource consent decision making	Remind staff on a regular basis about the policy and need to disclose actual, potential or perceived conflicts of interest.	QLDC has a 'Conflicts of Interest' policy. Staff are reminded of this policy on a regular basis and actual, potential or perceived conflicts of interest are declared.	Works well – a number of actual, potential and perceived conflicts have been declared and managed.	Continue to monitor	Review risk status – May 2015	No conflict of interest issues arise	Who: GM Planning Report to: Internal risk working group/Management Team/Audit and Risk Committee
5.	Complainant details	Better training on TRIM.	Complaints are saved on the property file but with a 'staff only' notation.	Generally works well.	Continue to monitor	Review risk status – May 2015	No incidents occur	Who: GM Planning Report to: Internal risk working group/Management Team/Audit and Risk Committee

Strategic risk mitigation schedule   **(SR5) Business capacity (internally and contractually) to meet organisational needs**

Owner	Director, CEO Office and HR manager GM Planning GM Infrastructure
Causes	Performance data to support organisational needs, employment market and contractors within the market
Date updated	November 2014
Review date	May 2015

Risk analysis (*as detailed in the risk register*)

	Uncontrolled risk score			Controlled risk score			Risk Class
Date of evaluation	Consequence	Likelihood	Level of risk 1(low) to 25 (high)	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class 1 (insignificant) to 5 (very high)
1/12/2014	3	5	15	2	3	6	moderate

Risk mitigation plan

	Risk components	Recommended management plan	Existing management plan	Assessment of existing management plans	Enhancement required	Deadline (including milestones) for enhancement	KPIs (strategic performance framework) PI (departmental)	Reporting details
General capacity risks								
1.	Number of staff to meet organisational needs	Headcount and FTE requirements, current and future, for each department are identified and met. Required skills and competencies developed internally – training & development plan is in place. QLDC is an employer of choice – existing staff are engaged and do not leave. High demand from strong, capable candidates, which will enable fast placement to vacant roles. Recruitment processes commenced in timely manner as vacancies arise.	Headcount and FTE requirements, current and future, for each department are identified and met. Recruitment processes commenced in timely manner as vacancies arise.	Suitable for current employment market, however enhancement required to mitigate future risk.	Develop training and development plan across the organisation. Develop 'Employer of Choice' strategy.	Review – May 2015 Complete - December 2015	FTE count	Officer: HR Manager Report: Monthly report, Quarterly organisational health report, Internal Risk working group, management team, Audit and Risk Committee
2.	Professional consultants to meet increased workload or complex issues	Organisational requirements are met by existing permanent staff. Skills and capabilities are developed internally	Organisational requirements are met by existing permanent staff Skills and capabilities are developed internally	Adequate	Not required.	Review as part of internal risk management processes.	KPI: - Percentage of consents processed within statutory timeframes - Percentage of very	Officer: HR Manager Report: Monthly report,

		.through a comprehensive training & development plan. Strong relationships are in place with a range of professional consultants to enable support where required. Need for professional consultants is identified well in advance and planning occurs accordingly.	through a comprehensive training & development plan. Strong relationships are in place with a range of professional consultants to enable support where required. Need for professional consultants are identified well in advance and planning occurs accordingly.				high and high risk liquor premises inspected at least quarterly - Percentage of registered food premises that are grading inspected at least annually	Quarterly organisational health report, Internal Risk working group, management team, Audit and Risk Committee
3.	Employment market shortage of temporary staff	Organisational requirements are met by existing permanent staff. Relationships are in place with temporary staff agencies to enable suitable and efficient placement of temporary staff as required. Recruitment processes commenced in timely manner as vacancies arise. Relationships exist with other Local Authorities to enable secondment opportunities where required or appropriate.	Organisational requirements are met by existing permanent staff. Relationships are in place with temporary staff agencies to enable suitable and efficient placement of temporary staff as required. Recruitment processes commenced in timely manner as vacancies arise. Relationships exist with other Local Authorities to enable secondment opportunities where required or appropriate.	Adequate	Not required.	Review as part of internal risk management processes.	FTE count Staff vacancies	Officer: HR Manager Report: Monthly report, Quarterly organisational health report, Internal Risk working group, management team, Audit and Risk Committee
Specific, departmental capacity risks								
4.	Capacity to issue building consents and undertake related inspections	Requirement to have systems in place is mandated by Building Consent Authority Quality Management Systems. Physically use additional external contractors and other BCAs where available for resource sharing.	System is in place as mandated by Building Consent Authority Quality Management Systems. Physically use additional external contractors and other BCAs where available for resource sharing.	Adequate process in place to identify need and deliver service levels.	Not required.	Continue to monitor through the performance framework and benchmarking activity.	KPI: Percentage of consents processed within statutory timeframes	Who: GM Planning Report to: Monthly report to Council Annual Report
5.	Consent processing or inspection of building work	As above.	Quality Management systems as above.	Adequate process in place to identify need and deliver service levels.	Not required.	Continue to monitor through the performance framework and benchmarking activity.	KPI: Percentage of consents processed within statutory timeframes	Who: GM Planning Report to: Monthly report to Council Annual Report
6.	Capacity to process resource consents	Continue existing management plan. Broaden panel of	Ensure adequate resourcing to meet consent numbers.	Works well as timeframes are being met.	Not required.	Continue to monitor through the performance framework and	KPI: Percentage of consents processed within statutory	Who: GM Planning

#	Description							
		providers for resource management services to ensure adequate capacity.	Outsource where necessary to approved panel providers.			benchmarking activity.	timeframes	Report to: Monthly report to Council Annual Report
7.	Levels of service for infrastructure services (water, waste water, storm water, roading, waste and recycling)	Dedicated Infrastructure Analyst role. Dedicated Asset Policy and Standards Role. Strong understanding of customer needs and expectations including defined levels of service linked to performance and risk (this includes links to NZTA's ONRC framework for the roading network) Effective working relations with NZTA. Strong understanding of legislation requirements.	Dedicated Asset Policy and Standards Role. Limited measureable levels of service for infrastructure assets. No explicit levels of service framework with measures. Scoping transition to ONRC Framework. Improving relations with NZTA.	Improvement Opportunities identified as part of Asset Management Plan review (October 2014).	Dedicated Infrastructure Analyst role. Documentation of Council Levels of Service Framework. Ability to undertake scenario modelling (cost / benefits) of varying levels of service to inform investment decisions. Audits of application of the framework. Effective working relationships (NZTA) ORNC Implemented Embedded legislation requirements & tracking of legislation changes.	Review – May 2015 Complete - December 2015	KPI: All KPIs for infrastructure	Officer: GM Infrastructure Report to: Monthly report to Council Annual Report

Strategic risk mitigation schedule   **(SR6a) Assets critical to service delivery**

Owner   GM Infrastructure

Causes   Third party damage, performance management, project and financial management capability, security and safety measures, data

Last updated   September 2014
Review date   February 2015

Risk analysis (as detailed in the risk register)

	Uncontrolled risk score			Controlled risk score			Risk Class
Date of evaluation	Consequence	Likelihood	Level of risk 1(low) to 25 (high)	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class 1 (insignificant) to 5 (very high)
29/09/2014	4	3	12	3	2	6	moderate

Definitions

The LGA definition of strategic assets is as follows:

'.....an asset or group of assets that the local authority needs to retain if the local authority is to maintain the local authority's capacity to achieve or promote any outcome that the local authority determines to be important to the current or future well-being of the community....'

For risk management purposes 'critical assets' are identified:

'Assets with a high consequence of failure, which are found as part of a network, in which, for example, their failure would compromise network delivery to a significant proportion of the population'.

Risk mitigation plan

	Risk components (critical assets)	Recommended management plan	Existing management plan	Assessment of existing management plans	Enhancements required	Deadline (including milestones) for enhancement	KPIs (strategic performance framework) PI (departmental)	Reporting details
1.	Water Supply Intakes 1. Two Mile 2. Beacon Point 3. Kelvin Heights 4. Western	· Risk-based inspection and maintenance programmes · Standard operating and escalation procedures and manuals · As-Built Plans and other records · Calibrated Computer Models of Network · Experienced and qualified staff · Robust 24 monitoring (SCADA) · Water Supply Risk Register · Performance based supplier contracts.	· Scheduled inspection and maintenance programmes · Standard operating and escalation procedures and manuals · Experienced and qualified staff · Third-party supplied monitoring (SCADA) · I&A Risk Register · Performance Based Supplier Contracts.	· Initial assessment completed as part of supplier contract review (March 2014) · Improvement Opportunities identified as part of AMP review (June 2014)	· Improved accuracy of record keeping on site, at contractor office and at QLDC office · Records to include details of risk based inspections · Project management tool linked to risk assessments · Stand-alone Council SCADA monitoring system · District Water Metering	Review - February 2015 Deadline – July 2016	**KPIs** - Annual cost per cubic metre of water supplied - Percentage variance from original budget for both capital and operational expenditure - Percentage of Requests for Service (RFS) resolved within specified timeframe - DIA measures for water (see attached schedule) · No functional loss of intakes during scheduled operation periods · Meet Drinking Water Standards · Meet average day and peak day demands	Officer: GM Infrastructure Chief Engineer Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee

#	Asset					Review / Deadline	Measures	Officer / Report
							· Accuracy of plan records and asset condition/performance · Currency of risk register and mitigations	
2.	Water Supply Treatment Plants 1. Two Mile 2. Beacon Point 3. Kelvin Heights 4. Western 5. Hawea	· Risk-based inspection and maintenance programmes · Standard operating and escalation procedures and manuals · As-Built Plans & other records · Calibrated Computer Models of Treatment Processes · Experienced and qualified staff · Robust 24 monitoring (SCADA) · Water Treatment Plant Risk Register · Performance based supplier contracts.	· Scheduled inspection and maintenance programmes · Standard operating and escalation procedures and manuals · Experienced and qualified staff · Third-party supplied monitoring (SCADA) · I&A Risk Register · Performance Based Supplier Contracts · Relationship between Chief Engineer and Drinking Water Regulator.	· Initial assessment completed as part of supplier contract review (March 2014) · Improvement Opportunities identified as part of Asset Management Plan review (June 2014)	· Improved accuracy of record keeping on site, at contractor office and at QLDC office · Records to include details of risk based inspections · Project management tool linked to risk assessments · Stand-alone Council SCADA monitoring system · Standard Operating Procedures held electronically by Council · As plants upgraded, calibrated treatment process models developed and maintained.	Review - February 2015 Deadline – July 2016	· KPIs and DIA measures as above · No functional loss of treatment plants during scheduled operation periods · Meet Drinking Water Standards · Meet average day and peak day demands · Accuracy of plan records and asset condition/performance · Currency of risk register and mitigations.	Officer: GM Infrastructure Chief Engineer Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee
3.	Water Supply Transmission (Pumps and Mains) 1. Frankton Road Water Main 2. Kawarau Bridge Water Main 3. Frankton Road PS 4. Fernhill PS 5. Glenda Drive PS	· Risk-based inspection and maintenance programmes · Standard operating and escalation procedures and manuals · As-Built Plans & other records · Calibrated Computer Models of Network · Experienced and qualified staff · Robust 24 monitoring (SCADA) · Water Supply Risk Register · Performance based supplier contracts · Large pipe spares store (temporary repair materials)	· Scheduled inspection and maintenance programmes · Standard operating and escalation procedures and manuals · Experienced and qualified staff · Third-party supplied monitoring (SCADA) · I&A Risk Register · Performance Based Supplier Contracts	· Initial assessment completed as part of supplier contract review (March 2014) · Improvement Opportunities identified as part of AMP review (June 2014)	· Improved accuracy of record keeping on site, at contractor office and at QLDC office · Records to include details of risk based inspections · Project management tool linked to risk assessments · Stand-alone Council SCADA monitoring system · Calibrated, in-house network models · Records to capture asset condition and performance data	Review - February 2015 Deadline – July 2016	· KPIs and DIA measures as above · No functional loss of networks exceeding 8 hours during scheduled operation periods · Meet Drinking Water Standards · Meet average day and peak day demands · Accuracy of plan records and asset condition/performance · Currency of risk register and mitigations · Zero transmission main failures.	Officer: GM Infrastructure Chief Engineer Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee
4.	Water Supply Reservoirs 1. Fernhill 2. Kelvin Heights 3. Beacon Point	· Risk-based inspection and maintenance programmes · Standard operating and escalation procedures and manuals · As-Built Plans & other records · Experienced and qualified staff	· Scheduled visual inspection and maintenance programmes · Regular seismic and ground stability inspections · Standard operating and escalation procedures and manuals · Experienced and qualified	· Initial assessment completed as part of supplier contract review (March 2014) · Improvement Opportunities identified as part of AMP review	· Improved accuracy of record keeping on site, at contractor office and at QLDC office · Records to include details of risk based inspections · Project management	Review - February 2015 Deadline – July 2016	· KPIs and DIA measures as above · No functional loss or catastrophic failure of reservoirs · Meet Drinking Water Standards (retention times) · Meet average day demands · Accuracy of plan records	Officer: GM Infrastructure Chief Engineer Report: Report to: Internal risk working group/Management

#	Asset	Controls	Controls	Status	Improvement	Review/Deadline	KPIs	Responsibility
		· Robust 24 monitoring (SCADA) · Water Supply Risk Register\ · Performance based supplier contracts.	staff · Third-party supplied monitoring (SCADA) · I&A Risk Register · Performance Based Supplier Contracts.	(June 2014)	tool linked to risk assessments · Stand-alone Council SCADA monitoring system.		and asset condition/performance · Currency of risk register and mitigations.	Team/Audit and Risk Committee
5.	Wastewater Transmission (Pump Stations and Mains) 1. Frankton Beach PS 2. Marine Parade PS 3. Dungarvon Street PS 4. Project Pure Main PS 5. Riverbank Road PS 6. Lake Hayes Road PS 7. Frankton Road Sewer 8. Kelvin Heights Sewer 9. Project Pure Rising Main	· Risk-based inspection and maintenance programmes · Standard operating and escalation procedures and manual · As-Built Plans & other records · Calibrated Computer Models of Network · Experienced and qualified staff · Robust 24 monitoring (SCADA) · Wastewater Risk Register · Performance based supplier contracts · Large pipe spares store (temporary repair materials)	· Scheduled inspection and maintenance programmes · Standard operating and escalation procedures and manuals · Experienced and qualified staff · Third-party supplied monitoring (SCADA) · I&A Risk Register · Performance Based Supplier Contracts.	· Initial assessment completed as part of supplier contract review (March 2014) · Improvement Opportunities identified as part of AMP review (June 2014)	· Improved accuracy of record keeping on site, at contractor office and at QLDC office · Records to include details of risk based inspections · Project management tool linked to risk assessments · Stand-alone Council SCADA monitoring system · Calibrated in-house computer models · Records to capture asset condition and performance data	Review - February 2015 Deadline – July 2016	**KPIs** - Average response time to sewer overflows due to blockages (also a DIA measure) - Annual cost per cubic metre of wastewater collected and treated - Percentage variance from original budget for both capital and operational expenditure - Percentage of Requests for Service (RFS) resolved within specified timeframe - DIA measures for wastewater (see attached schedule) · No functional loss of networks (unconsented discharges to environment or contamination of drinking water supplies) · No regulator issued abatement notices · Accuracy of plan records and asset condition/performance · Currency of risk register and mitigations · Zero transmission main failures.	Officer: GM Infrastructure Chief Engineer Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee
6.	Wastewater Treatment Plants 1. Shotover WWTP 2. Wanaka WWTP 3. Hawea WWTP	· Risk-based inspection and maintenance programmes · Standard operating and escalation procedures and manuals · As-Built Plans & other records · Calibrated Computer Models of Treatment Processes · Experienced and qualified staff · Robust 24 monitoring (SCADA) · Wastewater Treatment Plant Risk Register · Performance based supplier	· Scheduled inspection and maintenance programmes · Standard operating and escalation procedures and manuals · Experienced and qualified staff · Third-party supplied monitoring (SCADA) · I&A Risk Register · Performance Based Supplier Contracts · Relationship between Chief Engineer and Drinking Water Regulator.	· Initial assessment completed as part of supplier contract review (March 2014) · Improvement Opportunities identified as part of AMP review (June 2014)	· Improved accuracy of record keeping on site, at contractor office and at QLDC office · Records to include details of risk based inspections · Project management tool linked to risk assessments · Stand-alone Council SCADA monitoring system · Standard Operating Procedures held	Review - February 2015 Deadline – July 2016	· KPIs and DIA measures as above · No functional loss of treatment plant (unconsented discharges to environment) · No regulator issued abatement notices · Accuracy of plan records and asset condition/performance · Currency of risk register and mitigations.	Officer: GM Infrastructure Chief Engineer Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee

							KPIs	Officer
		contracts			electronically by Council · As plants upgraded, calibrated treatment process models developed and maintained.			
7.	Landfills 1. Victoria Flats	· Standard operating and escalation procedures and manuals · Experienced and qualified staff / third-party site operator	· Standard operating and escalation procedures and manuals · Experienced and qualified staff / 3rd-party site operator	· Operating procedures and landfill assets need to be reviewed as increasing number (gaining reputation for) adverse odour events	· Review of site operations which identifies where greater oversight can be achieved. · Identification of the causes of odour complaints and how they can be improved · Detailed risk register and mitigations for the asset	Review - February 2015 Deadline – July 2016	**KPIs** - Kilograms of residential waste to landfill per head of population - Percentage variance from original budget for both capital and operational expenditure - Percentage of Requests for Service (RFS) resolved within specified timeframe · No unconsented discharges to the environment (to air, land or water) · No regulator issued abatement notices.	Officer: GM Infrastructure Chief Engineer Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee
8.	Bridges 1. Rees River 2. Dart River	· Performance based infrastructure maintenance contracts · Experienced and qualified contractors · Set maintenance schedules · Recognition of codes · Assigned responsibilities to staff · Production of Asset Management Plans · Signage · Restricted access · Implementation of codes · RFS system · Downer contract for managing roads · Traffic management plans · NZTA H&S Audits.	· Performance based infrastructure maintenance contracts · Experienced and qualified contractors · Set maintenance schedules · Recognition of codes · Assigned responsibilities to staff · Production of Asset Management Plans · Signage · Restricted access · Implementation of codes · RFS system · Downer contract for managing roads · Traffic management plans · NZTA H&S Audits	Adequate.	Not required.	Review - February 2015	-	Officer: GM Infrastructure Chief Engineer Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee
9.	Roads 1. Queenstown – Glenorchy 2. Arrow Junction - Crown Range (The Zig Zag)	· Performance based infrastructure maintenance contracts · Experienced and qualified contractors · Set maintenance schedules · Recognition of codes · Assigned responsibilities to staff · Production of Asset Management Plans · Signage · Restricted access	· Performance based infrastructure maintenance contracts · Experienced and qualified contractors · Set maintenance schedules · Recognition of codes · Assigned responsibilities to staff · Production of AMP · Signage · Restricted access · Implementation of codes	Adequate.	Not required.	Review - February 2015	**KPIs** - - Sealed road closures (planned and unplanned) that exceed the Council's service standard (one per month, no longer than 8 hours and not during peak demand times) - Annual cost per km to maintain and operate a. sealed roads and b. unsealed roads - Percentage variance from	Officer: GM Infrastructure Chief Engineer Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee

		• Implementation of codes • RFS system. • Downer contract for managing roads • Traffic management plans • NZTA H&S Audits.	• RFS system • Downer contract for managing roads • Traffic management plans • NZTA H&S Audits				original budget for both capital and operational expenditure - Percentage of Requests for Service (RFS) resolved within specified timeframe - DIA measures for roads and footpaths (see attached)	

Department of Internal Affairs (DIA) mandatory performance measures

To be reported in 2015/16 Annual Reports. Highlighted measures for stormwater and sewerage are being reported monthly as part of QLDC's performance framework.

Flood Protection and Control	Roads and Footpaths	Stormwater	Sewerage	Drinking Water
CRITERIA TO SELECT 'MAJOR' FLOOD PROTECTION AND CONTROL WORKS: 'Major flood protection and control works' should be those works that meet two or more of the following four criteria: a) Operating expenditure of more than $250,000 in any one year; b) Capital expenditure of more than $1 million in any one year; c) Scheme asset replacement value of more than $10 million; and d) Directly benefitting a population of 5,000 or over.	*PROPOSED PERFORMANCE MEASURE ONE (ROAD SAFETY):* The annual change in the number of fatalities and serious injury crashes on the local road network.	*PROPOSED PERFORMANCE MEASURE ONE (SYSTEM AND ADEQUACY):* Number of flooding events each year to habitable floors per 1000 properties resulting from overflows from a municipal stormwater system.	*PROPOSED PERFORMANCE MEASURE ONE (SYSTEM AND ADEQUACY):* Annual number of dry weather overflows from a municipal sewerage system per 1000 sewerage connections.	*PROPOSED PERFORMANCE MEASURE ONE (SAFETY OF DRINKING WATER):* Compliance of each municipal water supply with the New Zealand Drinking Water Standards for protecting public health, specifically: a) bacteriological compliance; and b) protozoal compliance.
PROPOSED PERFORMANCE MEASURE ONE (MAINTENANCE OF WORKS): Existing major flood protection and control works are maintained, repaired and renewed to the key standards defined in activity management plans, asset management plans or annual works programmes.	*PROPOSED PERFORMANCE MEASURE TWO (CONDITION OF THE SEALED ROAD NETWORK):* The average quality of ride on a sealed local road network, as measured by the Smooth Travel Exposure Index.	*PROPOSED PERFORMANCE MEASURE TWO (MANAGEMENT OF ENVIRONMENTAL IMPACTS):* Compliance with resource consents for discharge from a municipal stormwater system, measured by the number of: a) abatement notices; and b) infringement notices; and c) enforcement orders; and d) successful prosecutions.	*PROPOSED PERFORMANCE MEASURE TWO (MANAGEMENT OF ENVIRONMENTAL IMPACTS):* Compliance with resource consents for discharge to air, land, or water from a municipal sewerage system, measured by the number of: a) abatement notices; and b) infringement notices; and c) enforcement orders; and d) successful prosecutions.	*PROPOSED PERFORMANCE MEASURE TWO (MAINTENANCE OF A WATER RETICULATION NETWORK):* Percentage of water lost from each municipal water reticulation network.
	PROPOSED PERFORMANCE MEASURE THREE (MAINTENANCE OF A SEALED LOCAL ROAD NETWORK): Percentage of a sealed local road network that is resurfaced annually,	*PROPOSED PERFORMANCE MEASURE THREE (RESPONSE TO STORMWATER SYSTEM ISSUES):* Median response time between the time of notification and the time when service personnel reach the site when habitable floors are affected by flooding resulting from faults in a municipal stormwater system.	*PROPOSED PERFORMANCE MEASURE THREE (RESPONSE TO SEWERAGE SYSTEM FAULTS):* Median response time to attend to sewage overflows resulting from blockages or other faults of a municipal sewerage system: a) between the time of notification and the time when service personnel reach the site; and b) between the time of notification and resolution of the blockage or other fault.	*PROPOSED PERFORMANCE MEASURE THREE (RESPONSE TO WATER SUPPLY FAULTS):* Median response time to attend to urgent issues resulting from municipal water reticulation network faults and unplanned interruptions: a) between the time of notification and the time when service personnel reach the site; and b) between the time of notification and resolution of the fault or interruption
	PROPOSED PERFORMANCE MEASURE FOUR (CONDITION OF FOOTPATHS WITHIN THE LOCAL ROAD NETWORK): Percentage of a local footpath network that is part of a local road network that falls within a local government organisation's level of service or service standard for the condition of footpaths.	*PROPOSED PERFORMANCE MEASURE FOUR (CUSTOMER SATISFACTION):* Number of complaints per 1000 properties connected to a municipal stormwater system about: a) faults (including blockages) with a municipal stormwater system.	PROPOSED PERFORMANCE MEASURE FOUR (CUSTOMER SATISFACTION): Number of complaints per 1000 properties connected to a municipal sewerage system about: a) odour; and b) faults (including blockages).	*PROPOSED PERFORMANCE MEASURE FOUR (CUSTOMER SATISFACTION):* Number of complaints per 1000 connections to a public water reticulation network about: a) the clarity of drinking water; and b) the taste of drinking water; and c) the odour of drinking water; and d) the pressure or flow of drinking water; and e) the continuity of supply of drinking water; and f) the way in which a local government organisation responds to issues with a water supply.
	PROPOSED PERFORMANCE MEASURE FIVE (RESPONSE TO SERVICE REQUESTS): Percentage of customer service requests responded to within a specified time frame.			PROPOSED PERFORMANCE MEASURE FIVE (DEMAND MANAGEMENT): Average consumption of water per person per day.

Strategic risk mitigation schedule   **(SR6b) Assets critical to service delivery - Property**

Owner	GM Operations
Causes	Third party damage, performance management, project and financial management capability, security and safety measures, data
Date updated	September 2014
Review date	February 2015

Risk analysis (as detailed in the risk register)

	Uncontrolled risk score			Controlled risk score			Risk Class
Date of evaluation	Consequence	Likelihood	Level of risk 1(low) to 25 (high)	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class 1 (insignificant) to 5 (very high)
29/09/2014	3	4	12	3	4	12	High

Definitions

The LGA definition of strategic assets is as follows:

'.....an asset or group of assets that the local authority needs to retain if the local authority is to maintain the local authority's capacity to achieve or promote any outcome that the local authority determines to be important to the current or future well-being of the community....'

For risk management purposes 'critical assets' are identified:

'Assets with a high consequence of failure, which are found as part of a network, in which, for example, their failure would compromise network delivery to a significant proportion of the population'.

Risk mitigation plan

	Risk components	Recommended management plan	Existing management plan	Assessment of existing management plans	Enhancements required	Deadline (including milestones) for enhancement	KPIs (strategic performance framework) PI (departmental)	Reporting details
1.	Compliance with regulations	• Single staff responsibility for property compliance • Single corporate filing system for compliance management and reporting. • Effective and maintained knowledge of the Building Act and Code. • Detailed understanding of compliance (including the new building standard for earthquake strength design).	• Shared staff responsibility for property compliance. • Multiple corporate filing systems for compliance management and reporting. • Knowledge of regulation obligations • Prioritised programme of inspections for compliance (including NBS status).	• Risk controls have been progressively increased over the past 12 months. • Staff responsibilities and filing systems are being rationalised and consolidated. • Prioritised programme of inspections for compliance (requires additional funding to complete in timely manner and to better inform	• Reallocation of funding for priority mitigation activities. • Address knowledge areas with regards to the new building standard for earthquake strength design. • Resourcing to complete building code compliance. • Improved access/reporting on status of building compliance.	Review – February 2015 Deadline – December 2015	• Zero non compliances with building code within 24 months. • NBS investigation for all priority buildings complete within 12 months. • NBS investigations for all buildings complete within 24 months.	Officer: Property Manager Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee

#	Area							
				operations and asset management plans).				
2.	Maintenance (affecting public safety and life of the asset)	• Single staff responsibility for property maintenance plans. • Single corporate filing system for maintenance management and reporting. • Proactive / planned medium term maintenance schedules.	• Shared staff responsibility for property maintenance. • Multiple filing systems for compliance management and reporting. • Annual / reactive maintenance schedules.	• Risk controls have been progressively increased over the past 12 months. • Staff responsibilities and filing systems are being rationalised and consolidated. • 2 Stage prioritised programme of maintenance over medium term under development.	• Completion of maintenance plans • Property asset management plans held in Tech 1 system	Review – February 2015 Deadline – December 2015	**KPIs** - Variance from budget on property - Number of serious incidents per 10,000 pool admissions (Alpine Aqualand and Wanaka Pool) expenditure • Robust 10 year maintenance programmes • Robust 15 year asset management plans outlining necessary capital upgrades	Officer: Property Manager Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee
3.	Insurance cover (larger event)	• Regular full replacement valuations of properties, buildings and other site improvements (i.e. retaining walls). • Clear understanding of role of council responsibility for non-council buildings on council land.	• Use of legacy valuation information	• Good opportunity for improvement and better understand asset values, risks and adequacy of insurance cover.	• Programme for full replacement valuations of properties, buildings and other site improvements (i.e. retaining walls. • New policy on the role of council supporting non-council buildings on council land.	Review – February 2015 Deadline – December 2015	• 100% of property insurance values accurate (3 yearly review) • Council policy for non-council buildings • Clearer reporting on ownership of buildings on council land	Officer: GM Finance Report: Annual Report
4.	Holdings of property	• Clear principles of ownership. • Clear rules on sale and acquisition. • Clear reporting of costs and other factors to assess appropriateness of holding.	• Clear principles of ownership. • Clear rules on sale and acquisition. • Clear reporting of costs and other factors to assess appropriateness of holding.	• Principles established and adopted but need to be applied and reported on.	• Improved financial reporting of costs and utilisation / public demand on a property unit basis.	Review – February 2015 Deadline – December 2015	**KPIs** - Variance from budget on property (including detailed commentary on expenditure against income) • Accurate and timely financial reporting on unit basis • Accurate and timely utilisation reporting on a unit basis	Officer: Property Manager Report: Report to: Internal risk working group/Management Team/Audit and Risk Committee

Strategic risk mitigation schedule   **(SR7) Planning, training and capacity for emergency response**

Owner	Director, Chief Executive's Office
Causes	Response to earthquake, flood, fire, snow event, wind damage, pandemic, man-made hazard (e.g. chemical spill)
Date updated	August 2014
Review date	February 2015

Risk analysis (as detailed in the strategic risk register and Risk Management Framework vh)

	Uncontrolled risk score			Controlled risk score			Risk Class
Date of evaluation	Consequence	Likelihood	Level of risk 1(low) to 25 (high)	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class (insignificant) to (very high)
27/08/2014	4	1	4	3	1	3	low

Risk mitigation plan

	Risk components	Recommended management plan	Existing management plan	Assessment of existing management plans	Enhancements required	Deadline (including milestones) for enhancement	KPIs (strategic performance framework) PI (departmental)	Reporting details
1.	Resources and technical capability	QLDC EOC Standard Operating Procedures October 2013.	QLDC EOC Standard Operating Procedures October 2013	Under way (August 2014) including all radios, sat phones, Broadband Global Area Network (BGAN), handsets, manuals and users.	New and additional sat phone users required for Queenstown and Wanaka, fully trained. Complete Schedule of Technology - Internal as a priority. External – local hire pool for generators and gas heating, independent sat phone pool.	Training to be complete by July 2015. Complete. Complete.	All technology is kept in a state of readiness (charged and accessible) That a minimum of two users test the equipment on a monthly basis. Generator at Gorge Road checked six monthly and diesel circulated annually.	Officer: Manager, Strategic Projects and Support Report to: Internal risk working group/Management Team/Audit and Risk Committee
2.	Hazard Identification **Catastrophic:** Alpine Fault Earthquake Distal Tsunami Major Accident Air/Transport/Marine Terrorism **Major:** Human Pandemic Landslide Severe Snow Storm Fuel Supply Disruption Heavy Rain Event **Moderate:** Rural Fire Sewerage Failure Potable Water Failure	QLDC EOC Standard Operating Procedures 2013. Emergency Management Plan 2013-2016 Risk Profile and Risk Reduction chapters 2-3 Otago Civil Defence Emergency Management Group Plan 2012-17 (see Risk Priorities). QLDC Welfare Centre Guide 2010. QLDC Pandemic Guide 2008. Business Continuity Individual Group and Contractor Plans 2009.	Emergency Management Plan 2013-2016 Risk Profile and Risk Reduction chapters 2-3 Otago Civil Defence Emergency Management Group Plan 2012-17 (see Risk Priorities) Critical Infrastructure Issues Report 2013 (Draft) Rural Fire Red Zone First Hour Response for Sudden Onset Emergency QLDC EM Training Plan Note: Revised contact list (inclusive of fuel, food, accommodation,	Critical Infrastructure Issues Report 2013 (developmental)	Critical Infrastructure Issues Report 2013 (developmental) Complete Community Plans Human Pandemic Continuity Plans Review QLDC EM Training Plan Review Enhanced Staff Resilience **Review:** QLDC Welfare Centre Guide 2010	Complete all by July 2016	Flood Awareness (October/November Winter Campaign Fire Education Campaign Annual Review of Education Plan (submitted to Otago Group Plan. Participation in "Get Ready Week" and national initiatives such as "Exercise Shakeout" Annual Review of Operating Procedures Set of Supporting Material for all Controllers and CE updated annually All staff and public (welfare) undertake CIMS training IN 2014. A minimum of two exercises per	Officer: Director of CEO Office - Manager, Strategic Projects and Support - Emergency Management Officer - Communications Manager - Principal Rural Fire Officer - Infrastructure GM

			transport, contractors, schools, smaller community EM contacts etc. completed August 2014).		QLDC Pandemic Guide 2008 Business Continuity Individual Group and Contractor Plans 2009			annum (inclusive of associated agencies: fire, police, ambulance, hospital, airport, utility (power) contractors. Annual Review of Contact Schedule.	Report to: Internal risk working group/Management Team/Audit and Risk Committee
3.	Community groups informed and prepared	Community EM Plans. QLDC EM Education Plan	Wanaka Community Plan Arrowtown Community Plan Glenorchy Community Plan			Develop Plans for Makarora, Hawea, Kingston	July 2016	Annual meeting with Smaller Community Associations to review content of plan. Support Smaller Community's to undertake one table top exercise per annum	Officer: Manager, Strategic Projects and Support/Emergency Management Officer /Communications Manager Report to: Internal risk working group/Management Team/Audit and Risk Committee
4.	Location of the Emergency Operations Centre	Emergency Management Plan 2013-2016		Current until 2016 – review annually and revise in 2016		Confirm revised location EOC	Priority. February 2015.	EOC is reviewed and in a ready state for deployment, reviewed annually and utilised for a minimum of two exercises per annum.	Officer: Manager, Strategic Projects and Support/Emergency Management Officer Report to: Internal risk working group/Management Team/Audit and Risk Committee
5.	Staff trained for emergency response	Emergency Management Plan 2013-2016		Current until 2016 – review annually and revise in 2016		Continued training of critical staff	Ongoing.	All critical positions are filled with at least three trained personnel. This is not limited to EOC staff	Officer: Manager, Strategic Projects and Support/Emergency Management Officer Report to: Internal risk working group/Management Team/Audit

							and Risk Committee
6.	Volunteers trained for emergency response	Emergency Management Plan 2013-2016		Current until 2016 – review annually and revise in 2016	Continued recruitment and training of volunteers	Ongoing.	QLDC recruits, maintains and trains a pool of trained volunteers to support its emergency response.	Officer: Manager, Strategic Projects and Support/Emergency Management Officer Report to: Internal risk working group/Management Team/Audit and Risk Committee

Operational Risk Register - 1 December 2014

		STAGE 1 - RISK IDENTIFICATION					STAGE 2 - ANALYSIS OF UNCONTROLLED RISK									STAGE 3 - RISK CONTROLS AND ANALYSIS OF CONTROLLED RISK										STAGE 4 - RISK CLASS
		RISKS				Risk Owner	Consequence Score						Uncontrolled Risk Score			Current Controls	Consequence Score							Controlled Risk			
Risk ID	Cause ID	Description	Causal Factor	Nature of Risk	Justification/Context	Assigned to..	Political	Economic	Social	Technical	Legal	Environmental	Consequence	Likelihood	Level of risk 1(low) to 25 (high)	Control	Political	Economic	Social	Technical	Legal	Environmental	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class 1 (insignificant) to 5 (very high)
OR001	OR001a	Decrease in revenue	Billing system/payment processing failure or error	Financial		GM Finance	3	5	1	2	1	1	3	4	12	Trained staff, operating procedures and standard process, new TechOne system will integrate systems with built in controls.	3	5	1	2	1	1	3	2	5	Low to Moderate
OR001	OR001b	Decrease in revenue	Default by debtor	Financial		GM Finance	2	2	1	1	1	1	1	4	4	Training, process to identify early and escalation procedure, ultimately legal action, new TechOne system will integrate systems with built in controls.	2	1	1	1	1	1	1	4	4	Low
OR001	OR001c	Decrease in revenue	New Zealand Transport Authority procurement policy/changes in New Zealand Transport Authority funding policy	Financial	Over 50% of our roading funding comes from New Zealand Transport Authority	GM Infrastructure	2	5	2	5	1	2	3	3	9	Designated staff responsibility for relationship with New Zealand Transport Authority and awareness/communication of New Zealand Transport Authority policy. Council makes submissions on proposed policy changes, lobby New Zealand Transport Authority. Attend regular New Zealand Transport Authority regional meetings. Ability to reprioritise projects based on risk, mitigating any small decrease in New Zealand Transport Authority funding.	2	4	2	4	1	2	3	2	6	Moderate
OR002	OR002a	Increase in expenditure	Judicial review of Council processes/objection to Council decision (resource consents and plan changes)	Legal		GM Planning	3	2	1	2	3	1	2	5	10	Delegations policy, trained/accredited staff making decisions, Council approved independent commissioners, Quality Management System (under review), IANZ accreditation for Building Quality Management System which is audited every 2 years.	3	2	1	2	2	1	2	5	10	Moderate
OR002	OR002b	Increase in expenditure	Liquidity to cover debt	Financial		GM Finance	3	5	1	2	1	1	3	5	15	Local Government Funding Authority, GM Finance oversees all transactions, annual external audit, Cash Flow Management processes including daily monitoring, maintaining open funding streams.	3	3	1	2	1	1	2	2	4	Low
OR002	OR002c	Increase in expenditure	Insurance cover	Financial		GM Finance	3	5	1	2	2	1	3	5	15	Overseen by GM Finance. (As was the process following the flood of 1999) Process of planned capex being placed on hold and budgets adjusted to allow Council to react.	3	3	1	2	2	1	2	2	4	Low

Risk ID	Cause ID	Description	Causal Factor	Nature of Risk	Justification/Context	Assigned to.. (Risk Owner)	Political	Economic	Social	Technical	Legal	Environmental	Consequence	Likelihood	Level of risk 1(low) to 25 (high)	Control	Political	Economic	Social	Technical	Legal	Environmental	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class 1 (insignificant) to 5 (very high)
		STAGE 1 - RISK IDENTIFICATION					**STAGE 2 - ANALYSIS OF UNCONTROLLED RISK**									**STAGE 3 - RISK CONTROLS AND ANALYSIS OF CONTROLLED RISK**										**STAGE 4 - RISK CLASS**
OR003		Deliver infrastructure services	Extreme Event (Drought / long-lead time infrastructure failure)	Operational		GM Infrastructure	4	2	2	3	2	1	3	2	6	Demand Management Plans, Water restrictions provision under the Bylaw, Chief Engineer key accountability, Asset Management Plans documenting predicting long lead infrastructure. Ability to reprioritise internal resources.	4	2	2	3	2	1	3	2	6	Low to Moderate
OR004	OR004a	Serious injury to member of community	Building (incl roads, footpaths) maintenance/ Council construction or works site	Operational		GM Infrastructure	4	1	3	2	4	1	3	5	15	Performance based infrastructure maintenance contracts, experienced and qualified contractors, set maintenance schedules, recognition of codes, assigned responsibilities to staff, production of Asset Management Plan, signage, restricted access, implementation of codes, request for service (request for service (RFS)) system. Downer contract for managing roads, traffic management plans. New Zealand Transport Authority Health and Safety Audits.	4	1	3	2	4	1	3	3	9	Moderate
OR004	OR004b	Serious injury to member of community	Asset Management Playgrounds/conveniences/play equipment	Operational		GM Operations	3	1	3	2	4	1	3	5	15	Annual audit on equipment, scheduled maintenance, recognition of building code obligations, Contract auditing, regular inspections, tree register, Downer contract for managing roads, traffic management plan can be implemented.	3	1	3	2	4	1	3	3	9	Moderate
OR004	OR004c	Serious injury to member of community	Accident caused by council vehicle	Operational		GM Human Resources	3	1	3	2	3	1	2	5	10	Warrant of Fitness for fleet, winter driving condition training, vehicle policy.	3	1	3	2	3	1	2	4	8	Moderate
OR004	OR004d	Serious injury to member of community	Waterways hazard including jetties and request for service (request for service (RFS))	Operational		GM Infrastructure	3	1	3	2	4	1	3	5	15	Two yearly structural review of jetties (latest was Oct 2013), Asset Management Plan under development, improving understanding of condition, monitoring and prioritised response to maintenance matters. Relationship with Maritime NZ and Bylaw which outlines risks and identifies the Harbour Master's responsibility. Warning / hazard signs on council jetties. Risk based installation of slip resistance surfaces. Strong/direct relationship with Harbourmaster for reporting and resolution of potential issues. Blocked vehicle access to key jetties.	2	1	2	2	3	1	2	4	8	Moderate
OR004	OR004e	Serious injury to member of community	Fallen tree	Operational		GM Operations, GM Infrastructure	3	1	3	1	3	1	2	4	8	Tree register (2002) - Parks & Reserves Manager to address. Roading team as a register of high risk trees in the road reserve that are actively monitored.	3	1	3	1	3	1	2	3	6	Moderate

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	RISKS				Risk Owner	Consequence Score		Uncontrolled Risk Score			Current Controls	Consequence Score		Controlled Risk		
Risk ID / Cause ID	Description	Causal Factor	Nature of Risk	Justification/Context	Assigned to..	Political / Economic / Social / Technical / Legal / Environmental		Consequence / Likelihood		Level of risk 1(low) to 25 (high)	Control	Political / Economic / Social / Technical / Legal / Environmental		Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class 1 (insignificant) to 5 (very high)
OR004 / OR004f	Serious injury to member of community	Regulatory licences (food premises, sale of alcohol, animal control)	Operational	Increase in complaints	GM Legal and Regulatory	3 1 3 1 3 1		2 / 4		8	Regular inspections of food and liquor premises. The ability to close premises that don't comply. Bylaws for dog control, ability to impound and destroy dangerous dogs.	2 1 2 1 2 1		2	3	6	Moderate
OR005 / OR005a	Death of a member of the community	Asset Management Playgrounds/conveniences/play equipment	Operational		GM Operations	5 2 4 4 5 1		4 / 5		20	Annual audit on equipment, scheduled maintenance, recognition of building code obligations, Contract auditing, regular inspections, tree register.	5 2 4 4 3 1		3	2	6	Moderate
OR005 / OR005b	Death of a member of the community	Fallen tree	Operational		GM Operations, GM Infrastructure	4 2 4 4 4 1		3 / 4		12	Tree register (2002) - Parks & Reserves Manager to address. Roading team as a register of high risk trees in the road reserve that are actively monitored.	4 2 4 4 3 1		3	2	6	Moderate
OR005 / OR005c	Death of a member of the community	Waterways hazard including jetties and request for service (RFS)	Operational		GM Operations, GM Legal	5 2 4 4 5 1		4 / 5		20	Two yearly structural review of jetties, Asset Management Plan under development, Relationship with Maritime NZ and Bylaw which outlines risks and identifies the Harbour Master's responsibility. Warning / hazard signs on council jetties.	5 2 4 4 3 1		3	2	6	Moderate
OR005 / OR005d	Death of a member of the community	Accident caused by council vehicle	Operational		GM Human Resources	5 2 4 4 4 1		4 / 5		20	Warrant of Fitness for fleet, winter driving condition training, vehicle policy.	5 2 4 4 3 1		3	3	9	Moderate
OR006 / OR006a	Child goes missing from council holiday programme	Security	Operational		GM Operations	5 2 4 4 4 1		4 / 5		20	Sign in/out sheets, supervision ratios maintained, audits for WINZ e.g. no public to use upstairs toilets during holiday programme.	5 2 4 4 4 1		4	2	7	Moderate
OR006 / OR006b	Child goes missing from council holiday programme	Processes and procedures	Operational		GM Operations	5 2 4 4 4 1		4 / 5		20	Sign in/out sheets, supervision ratios maintained, audits for WINZ e.g. no public to use upstairs toilets during holiday programme.	5 2 4 4 4 1		4	2	8	Moderate

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RISKS					Risk Owner	Consequence Score						Uncontrolled Risk Score			Current Controls	Consequence Score						Controlled Risk			
Risk ID	Cause ID	Description	Causal Factor	Nature of Risk	Justification/Context	Assigned to..	Political	Economic	Social	Technical	Legal	Environmental	Consequence	Likelihood	Level of risk 1(low) to 25 (high)	Control	Political	Economic	Social	Technical	Legal	Environmental	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)	Risk Class 1 (insignificant) to 5 (very high)
OR007	OR007a	Loss of infrastructure asset(s)	Third party damage / vehicle collision / fallen tree (pump station, treatment plant etc.)	Operational		GM Infrastructure	1	5	4	4	1	4	4	4	16	Cordon off building. Property insurance, tree risk register, chartered engineers panel out for tender / reopen with engineers approval. Veolia contract - continuity plan and can pull resources from other areas. Understanding of critical assets for prioritising efforts. Upgrade to treatment plants (including front end screenings facilities).	1	4	4	4	1	4	3	2	6	Moderate
OR007	OR007b	Loss of infrastructure asset(s)	Fire	Operational		GM Infrastructure	1	4	3	4	1	1	3	2	6	Fire alarms to minimise damage / losses. Veolia contract - continuity plan and can pull resources from other areas. (business continuity). Property insurance.	1	4	3	4	1	1	3	2	6	Moderate
OR008	OR008a	Loss of core support/essential services e.g. fuel and power	Fuel shortage	Operational		GM Infrastructure	1	1	1	3	1	1	2	2	4	Fleet usage policy requires tanks to be kept half full, some access to Contractor (private) bowsers for diesel.	1	1	1	3	1	1	2	2	4	Low
OR008	OR008b	Loss of core support/essential services e.g. fuel and power	Power failure	Operational		GM Infrastructure, GM Knowledge Management	1	3	3	3	1	2	2	3	6	Back up generators at offices and community facilities, mobile generators at Shotover waste water treatment plant, key water and wastewater pump stations and contractor offices. Water supplies with 24hours (typical) capacity serviced by gravity (local reservoirs) .	1	3	3	3	1	2	2	2	4	Low
OR009		Loss of lifeline infrastructure (Kawarau Bridge, Glenorchy Road)	Third party damage / vehicle collision/ Fire	Operational		Office of CEO	1	3	2	3	1	2	2	3	6	QLDC lead agency for overall response, including when New Zealand Transport Authority leads restoration of highway assets; Crisis management training + exercises - senior elected official and management team; civil defence emergency management act risk management provisions; Regular quarterly table-top exercises. Annual Emergency Management exercises. New Zealand Transport Authority planned double lane of Kawarau Bridge in next 5 years.	1	3	2	3	1	2	2	3	6	Moderate
OR010	OR010a	Damage or loss to third party asset or property	Water reservoir/Landslide	Operational		GM Infrastructure	4	5	5	5	5	2	4	3	12	Regular visual site inspections, engineering services panel out to tender. Geotechnical inspections. Regular seismic and ground stability inspections. Asset management plan - understanding of condition and expected operational life for renewal / upgrade.	4	5	5	5	4	2	4	1	4	Low

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OR010	OR010b	**Damage or loss to third party asset or property**	Stormwater / flooding event/water main burst	Operational		GM Infrastructure	3	3	2	2	3	1	2	4	8	Insurance, partial modelling of the system , request for service (RFS) system. Prioritised cleaning programme of culverts etc. ahead of forecast heavy rain. Designated secondary overland flow paths.	3	3	2	2	3	1	2	3	6	Moderate
OR010	OR010c	**Damage or loss to third party asset or property**	Fallen tree	Operational		GM Operations	3	4	2	1	1	1	2	5	10	Tree register not been updated since 2002 - Parks Manager to address.	3	4	2	1	1	1	2	3	6	Moderate
OR010	OR010d	**Damage or loss to third party asset or property**	Member of staff in Council vehicle	Operational		GM Human Resources	3	2	2	1	1	1	2	5	10	Policy regarding vehicle use, safe winter driving training course, will offer ACC safe driving qualification.	3	2	2	1	1	1	2	4	8	Moderate
OR010	OR010e	**Damage or loss to third party asset or property**	Waste water system discharge/odour	Operational		GM Infrastructure	3	2	3	2	3	1	2	5	10	Insurance, Resource consent permitting discharges. request for service (RFS) system and experienced contractors to respond to events to minimise damage.	2	2	3	2	2	1	2	3	6	Moderate
OR011	OR011a	**Decision making**	Non-financial data or records	Operational	e.g. LIMs processing, request for service (RFS) recording	GM Knowledge Management	3	5	1	1	2	1	3	5	15	TechOne will reduce duplication between systems, monthly report to Council provides complete data, new contracts aligned with performance framework.	3	5	1	1	2	1	3	3	9	Moderate
OR011	OR011b	**Decision making**	Financial data, records or reporting e.g. rates calculations	Financial		GM Finance	4	5	1	5	3	1	4	5	20	Trained and experienced staff are able to highlight problems, peer review, annual audit.	4	4	1	4	3	1	3	3	9	Moderate
OR011	OR011c	**Decision making**	Staff delegations	Legal		GM Finance	3	3	1	2	2	1	2	4	8	new delegations policy, new TechOne system with integrated controls.	3	3	1	2	2	1	2	3	6	Moderate
OR012	OR012a	**Payment obligations**	Council financial system (NCS and or payroll)	Financial		GM Finance	4	2	1	1	1	1	2	5	10	Trained staff, operating procedures and standard process, new TechOne system will integrate systems with built in controls.	3	2	1	1	1	1	2	3	6	Moderate
OR012	OR012b	**Payment obligations**	Staff not appropriately trained / staff error	Financial		GM Finance	3	2	1	1	1	1	2	5	10	HR service plan identifies training requirements as do individuals performance agreements, operating procedures and standard process, new TechOne system will integrate systems with built in controls.	3	2	1	1	1	1	2	2	4	Moderate

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OR013		Breach of legislation	Employ someone illegally	Legal		GM Human Resources	3	1	1	2	2	1	2	5	10	Trust Partnership with Immigration New Zealand enables us to have work visas turned around quickly, standard work permit check for all new employs. Expiry dates logged and staff stood down if they fail to renew. Criminal history and previous/pending charges to be disclosed.	3	1	1	2	2	1	2	1	2	Low
OR014	OR014a	Theft/fraud or misuse of council property (assets, data, funds etc.)	Breach of building security	Operational		GM Infrastructure	3	1	1	1	1	1	2	4	8	Installed security systems at some key sites. Contractors sign in register at most sites.	3	1	1	1	1	1	2	2	4	Low
OR014	OR014b	Theft/fraud or misuse of council property (assets, data, funds etc.)	Lack of processing control/gaps in systems	Operational		GM Knowledge Management, GM Finance	3	1	1	1	1	1	2	5	10	Delegations policy, Annual audit, purchasing processes require authorisation from second officer, new TechOne system will integrate systems with built in controls, No local admin rights, Asset register.	3	1	1	1	1	1	2	3	6	Low to moderate
OR014	OR014c	Theft/fraud or misuse of council property (assets, data, funds etc.)	Dissatisfied staff	Operational		GM Human Resources	3	1	1	1	1	1	2	5	10	Criminal checks for some roles, delegations policy (currently under review), TechOne will automate a number of controls around payments.	3	1	1	1	1	1	2	3	6	Low to moderate
OR015	OR015	Staff not fit for work	Impaired by alcohol or drugs	Operational		GM Human Resources	3	1	5	2	4	1	3	5	15	Drug and Alcohol Policy in development.	3	1	5	2	4	1	3	2	6	Moderate
OR015	OR015b	Staff not fit for work	Impaired by illness (physical, mental, human pandemic) or fatigue	Operational		GM Human Resources	3	1	5	2	4	1	3	5	15	Performance reviews with all individuals. Employee Assistance Programme.	3	1	5	2	4	1	3	3	9	Moderate
OR016	OR016a	Staff not appropriately resourced	Resources required and not provided	Operational		GM Human Resources	2	1	3	2	4	1	2	5	10	PPE for certain roles, Health and Safety committee.	2	1	3	2	4	1	2	2	4	Low
OR016	OR016b	Staff not appropriately resourced	Resources required are misused or not used	Operational		GM Human Resources	2	1	3	2	3	1	2	5	10	Health and Safety code of conduct.	2	1	3	2	3	1	2	3	6	Moderate
OR017	OR017a	Sufficient qualified or capable staff	Strike	Operational		GM Human Resources	3	1	1	1	2	1	2	1	2	Meetings with the Union Rep, at present there are limited numbers of staff who belong to the Union, legislation will enable money to be deducted for loss of work days.	2	1	1	1	1	1	1	1	1	Insignificant

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	RISKS				Risk Owner		Consequence Score	Uncontrolled Risk Score	Level of risk 1(low) to 25 (high)	Current Controls	Consequence Score	Controlled Risk		
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OR017 / OR017e	Sufficient qualified or capable staff	Lack of accredited / chartered staff / Lack of succession planning	Operational		GM Human Resources	P3 E2 S1 T4 L3 Env1	Consequence 3 / Likelihood 4		12	HR service plans with each department - identify requirements for training etc. Staff resignation notice period of four weeks. HR service plans with each department.	P3 E2 S1 T4 L3 Env1 → 3	3		9	Moderate
OR018 / OR018a	Serious injury to member of staff whist performing contracted duties	Assault or animal attack	Operational		GM Human Resources	P4 E1 S3 T2 L3 Env1	Consequence 3 / Likelihood 5		15	Training for customer facing roles, ACC Workplace Safety Management Practice Audit - working to achieve Tertiary status, Health and Safety committee review any incidences for learning opportunities.	P3 E1 S3 T2 L2 Env1 → 2	2		8	Moderate
OR018 / OR018b	Serious injury to member of staff whist performing contracted duties	Plant or equipment/working environment and practices	Operational	Asset Management Plan	GM Infrastructure, GM Operations, GM Knowledge Management	P4 E2 S3 T2 L4 Env1	Consequence 3 / Likelihood 5		15	Watershed and Pool Safe Audits, maintenance schedules, licensed and serviced fleet, only trained staff allowed in the plant room (QEC) or using certain equipment, Health and Safety training and briefings, operations and maintenance manuals for I&A, hazard identification and signage, PPE supplied, Health and Safety Training , Warrant of Fitness on fleet, access and fencing restrictions to high hazard sites. Access to infrastructure sites requires specialist keys, controlled through key register.	P4 E2 S3 T2 L4 Env1 → 3	3		9	Moderate
OR018 / OR018c	Serious injury to member of staff whist performing contracted duties	Fire	Operational		GM Human Resources	P4 E1 S3 T1 L3 Env1	Consequence 2 / Likelihood 5		10	Fire marshals and training for staff, routine fire drills, ACC Workplace Safety Management Practice Audit - working to achieve Tertiary status, Health and Safety committee review any incidences for learning opportunities.	P4 E1 S3 T1 L3 Env1 → 2	2		4	Low to moderate
OR019	Serious injury to a contractor	Plant or equipment/working environment and practices	Operational	Asset Management Plan	GM Infrastructure, GM Operations	P4 E2 S3 T2 L4 Env1	Consequence 3 / Likelihood 5		15	Regular site inspections by Council staff of contractor work sites. Health and Safety training for council staff, contractor register, insurance, contractors required to sign in and wear PPE, an id badge. Performance based contracts where possible, contractors must have their own Health and Safety plans.	P4 E4 S3 T2 L4 Env1 → 3	3		9	Moderate
OR020	Serious injury to a volunteer	Plant or equipment/working environment and practices	Operational		GM Operations	P4 E2 S3 T2 L4 Env1	Consequence 3 / Likelihood 5		15	Volunteer training and briefings	P4 E4 S3 T2 L4 Env1 → 3	3		9	Moderate

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		RISKS					Risk Owner	Consequence Score								Uncontrolled Risk Score		Current Controls	Consequence Score							Controlled Risk			
Risk ID	Cause ID	Description	Causal Factor	Nature of Risk	Justification/Context	Assigned to..		Political	Economic	Social	Technical	Legal	Environmental	Consequence	Likelihood	Level of risk 1(low) to 25 (high)		Control	Political	Economic	Social	Technical	Legal	Environmental	Consequence Score	Likelihood	Level of risk 1(low) to 25 (high)		Risk Class 1 (insignificant) to 5 (very high)
OR021	OR021a	Member of staff breaks the law or a breach of code of ethics	Lack of discretion/information leak	Operational			Office of CEO	3	1	1	1	1	1	2	4	8		Media Policy/Social Media Policy	3	1	1	1	1	1	2	3	6		Low to moderate
OR021	OR021b	Member of staff breaks the law or a breach of code of ethics	Staff associated with or has a financial interest with persons or businesses working against Council outcomes	Operational			Office of CEO	3	3	1	5	1	1	3	4	12		Conflict of Interest register, disciplinary process, information management.	3	3	1	5	1	1	3	3	9		Moderate
OR021	OR021c	Member of staff breaks the law or a breach of code of ethics	Serious crime leading to reputation loss	Operational			Office of CEO	3	1	1	1	1	1	2	2	4		Information Management	3	1	1	1	1	1	2	2	4		Low
OR022	OR022a	Death of member of staff whilst performing contracted duties	Assault by member of the public	Operational			GM Human Resources	4	2	3	4	4	1	3	5	15		Qualified and trained staff	4	2	3	4	3	1	3	2	6		Moderate

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OR025	Decision making risk	Quorum not reached or disruption to the meeting	Legal		Office of CEO			4	1	1	4	1	1	2	2	4	Quorum for any meeting is six. Deputy Mayor is able to act in Mayoral capacity (Local Government Act 2002 Schedule 7 Section 17). Local Electoral Act 2001 Sections 117-120: If it is greater than 12 months before the triennial election, an election can be held to fill any vacancy(s) (must be within 82 days from date notice of vacancy is received). If it is 12 months or less before the triennial election vacancies can be filled by appointment or election.	4	1	1	4	1	1	2	2	4	Low
OR026	Council polices and plans	Legal challenge to District Plan	Legal		GM Planning			3	3	1	5	2	1	3	3	9	Requirement to commence a review every 10 years, seeking to streamline the review process, peer review as required to combat private self interest/commercial objections, robust evidence basis.	3	3	1	4	2	1	3	3	9	Moderate
OR027	Deliver levels of service	Elected members are given insufficient information to make a decision	Operational		Office of CEO			4	2	2	4	2	2	3	4	12	Monthly report to Council. Reports must be signed off by General Manager and CE before they are put on Council agenda. Items not on the agenda can not be considered by council (committee) and must come to another meeting for a decision (if an amendment is put by a member where the information is not provided for in the report).	4	2	2	4	2	2	3	2	6	Moderate
OR028 / OR028a	Significant change in national legislation or local policy direction	New government elected/Local Government/National Policy Statement	Capability		GM Planning / GM Legal			3	1	1	1	1	1	2	3	6	Make submissions, run Council workshops	3	1	1	1	1	1	2	3	6	Low to moderate
OR029 / OR028b	Significant change in national legislation or local policy direction	Unanticipated global economic event	Capability		GM Finance			4	4	1	5	1	1	3	2	6	External lines of communication with professional bodies so impacts are understand and adjustments made early and quickly, Annual Plan process.	4	4	1	5	1	1	3	2	6	Moderate

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OR029 / OR028c	Significant change in national legislation or local policy direction	Societal event leading to public pressure	Capability		Office of CEO	4 3 1 5 1 1	3	3	9	Annual Planning process, Submissions to Central Government regarding issue.	4 3 1 5 1 1	3	3	9	Moderate
OR030 / OR030a	Pollution or destruction of the environment	Contaminant spill into the lake or water supply source	Environmental		GM Infrastructure	4 3 2 3 3 4	3	3	9	Public Health media release through Comms Manager. SCADA to alert of event. Experience contractor to minimise breach. GM and CE relationship with Otago Regional Council (regulator) and Public Health South. Agreed procedures with public health following a contamination event. request for service (RFS) system. Monitoring of eColi and Chlorine dosing systems. Deep / isolated water supply intakes (minimise surface pollution into intake). Otago Regional Council has responsibility (staff and resources) to manage lake contamination event.	4 3 2 3 3 4	3	3	9	Moderate
OR030 / OR030b	Pollution or destruction of the environment	Building or Rural Fire runoff into the lake or water source	Environmental		GM Operations	3 2 1 1 2 1	2	3	6	Good relationship with DOC, Rural Fire Policy.	3 2 1 1 2 1	2	3	6	Moderate
OR031	Loss of infrastructure asset(s)	Natural disaster - earthquake, extreme snow event, flood, landslide	Operational	Disaster recovery	GM Infrastructure	1 5 4 5 1 4	4	1	4	Understanding of critical assets for prioritising efforts, risk register. Veolia contract - continuity plan and can pull resources from other areas. (business continuity). Property insurance, chartered engineers panel out for tender. I&A Business continuity plan under development.	1 4 4 4 1 4	3	1	3	Low
OR032	Loss of lifeline infrastructure (Kawarau Bridge, Glenorchy Road)	Natural disaster - earthquake, extreme snow, flood	Operational	Disaster recovery	Office of CEO	1 4 2 4 1 3	3	1	3	QLDC lead agency for overall response, including when New Zealand Transport Authority leads restoration of highway assets; Crisis management training + exercises - senior elected official and management team; civil defence emergency management act risk management provisions; Regular quarterly table-top exercises. Annual Emergency Management exercises.	1 4 2 4 1 3	3	1	3	Low
OR033	Obtain the correct licenses	Resource consents, liquor licences for QLDC events, Warrant of Fitness for Council buildings	Operational		Office of CEO	4 4 1 5 1 1	3	3	9	APL hold register of Council properties and ensure Warrant of Fitness are complete annually. Events team follows procedures for ensuring events have correct licences in place.	2 1 2 3 2 1 2		3	6	Moderate
OR034	Release of information	Member of staff releases information without authority	Legal		GM Legal and Regulatory	3 3 1 3 1 1	2	3	5	Unable to mitigate the risk of staff releasing information, however the Council could take steps to limit its use by taking prompt legal action.	3 3 1 3 1 1 2		3	5	Moderate