



Notice is given that a Meeting of Council will be held on:

Date: Tuesday, 23 January 2024
Time: 3.00pm
Location: Loddon Shire Council Chambers, Wedderburn

AGENDA

Council Meeting

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OPENING COMMENT

This meeting is being recorded and audio streamed via the Council website and Facebook.

1 OPENING AFFIRMATION

“We, the Councillors of the Loddon Shire, declare that we will carry out our duties in the best interests of the community, and through collective leadership will maintain the highest standards of good governance.”

2 ACKNOWLEDGEMENT OF COUNTRY

“The Loddon Shire Council acknowledges the Traditional Custodians of the land on which we are gathered and pays its respects to their Elders both past and present.”

3 APOLOGIES**4 DECLARATIONS OF CONFLICT OF INTEREST**

5 PREVIOUS MINUTES**5.1 CONFIRMATION OF MINUTES**

File Number: FOL/19/45615
Author: Tracy Hunt, Governance Coordinator
Authoriser: Lincoln Fitzgerald, Chief Executive Officer
Attachments: Nil

RECOMMENDATION

That Council confirm the Minutes of the following meetings as previously circulated to Councillors:

1. Council Briefing of 12 December 2023
2. Council Meeting of 12 December 2023.

REPORT

This report seeks Council confirmation of Minutes from the December 2023 Council Briefing and Council Meeting as previously circulated to Councillors.

6 COUNCIL AUSPICED MEETINGS**6.1 RECORD OF COUNCIL AUSPICED MEETINGS**

File Number: 02/01/001
Author: Tracy Hunt, Governance Coordinator
Authoriser: Lincoln Fitzgerald, Chief Executive Officer
Attachments: Nil

RECOMMENDATION

That Council confirm records of the following as detailed within this report:

1. Council Briefing 12 December 2023.

Rule 35 of Council's Governance Rules requires a record of meetings conducted under the auspices of Council to be presented to the next available scheduled Council meeting for confirmation that must include:

- a) a record of which Councillors and officers attended the meeting;
- b) a summary of the matters considered in the meeting; and
- c) a record of any conflicts of interest disclosed by Councillors and officers and any Councillors or officers that left the meeting whilst a matter that their conflict of interest related to was being discussed.

Section 3 of the Governance Rules defines meetings conducted under the auspices of Council to mean a meeting of the kind described in section 131(1) of the Local Government Act 2020 and includes a meeting which:

- a) is schedule or planned for the purpose of discussing the business of Council or briefing Councillors;
- b) is attended by a majority of Councillors;
- c) is attended by at least one member of Council staff; and
- d) is not a Council meeting or delegated committee meeting.

This report seeks confirmation of the following Council auspiced meeting as detailed within this report:

1. Council Briefing 12 December 2023.

Meeting details	Briefing
Date	12 December 2023
Councillor Attendees	Cr Holt (Mayor) Cr Jungwirth (virtual) Cr Beattie Cr Straub
Staff/ Stakeholder representatives	<ol style="list-style-type: none"> 1. Lincoln Fitzgerald, Chief Executive Officer 2. Wendy Gladman, Director Community Wellbeing 3. Steven Phillips, Director Operations 4. Daniel Hirth, Acting Director Corporate 5. Lisa Clue, Governance Manager 6. Tracy Hunt, Governance Coordinator 7. Paul Scullie, Manager Community Partnerships – Item 1 below 8. Deanne Caserta, Manager Financial Services – Item 4 below 9. David Stretch, Manager Tourism and Economic Development – Item 5 below
Item(s) discussed.	<ol style="list-style-type: none"> 1. 2023 Local Sports Infrastructure Fund Application – Boort Lawn Tennis Club 2. Privacy Policy (version 3) 3. Australia Day Celebrations 4. Review of the Financial Reserves Policy 5. S181 – 25 Main Street Bridgewater 6. Risk Management Document Review 7. Rural Councils Victoria Committee – Councillor Casual Vacancy 8. General Business: <ul style="list-style-type: none"> • Loddon Shire Council staff Christmas function
Conflict of Interest Disclosures – Councillor/officer making disclosure	n/a
Councillor/officer left room	n/a

7 REVIEW OF ACTIONS**7.1 REVIEW OF ACTIONS**

File Number: 02/01/002

Author: Lisa Clue, Manager Governance

Authoriser: Lincoln Fitzgerald, Chief Executive Officer

Attachments: 1. Resolutions acted upon since the December 2023 Council Meeting

RECOMMENDATION

That Council receive and note resolutions acted upon since the December 2023 Council meeting as attached to this report.

CONFLICT OF INTEREST

There is no conflict of interest for any Council staff member involved in the preparation of this report, or involved in the subject matter of the report.

REPORT

A document containing the status of actions from Council meeting resolutions is attached to this Agenda report.

There were no outstanding actions from Council meeting resolutions prior to December 2023.

Of the eight actions generated from December 2023 Council meeting resolutions, six have been completed and two are progressing.

Resolutions acted upon since the December 2023 Council Meeting

Meeting	Officer/Director	Section	Subject
Council 12/12/2023	Stretch, David Fitzgerald, Lincoln	Confidential Items	S181 - 25 MAIN STREET, BRIDGEWATER
RESOLUTION 2023/132			
Moved: Cr Linda Jungwirth Seconded: Cr Neil Beattie			
That Council			
<ol style="list-style-type: none"> 1. advise the ratepayer that finalisation of the S.181 action will occur and communicate dates for title transfer; 2. authorise the Chief Executive Officer to undertake the necessary administrative actions to purchase the property within the independent valuation price; and 3. approve the use of funds from the Land and Buildings Reserve for this purchase. 			
CARRIED			
Completed by Stretch, David (action officer) on 10 January 2024 at 12:51:56 PM - Sent notification to the property owner on the 09/01/2024. Proposed transfer date is mid-February 2024.			

Meeting	Officer/Director	Section	Subject
Council 12/12/2023	Arthur, Bruce Phillips, Steven	Confidential Items	Wedderburn Housing Estate - Stage 2
RESOLUTION 2023/131			
Moved: Cr Dan Straub Seconded: Cr Neil Beattie			
That Council:			
<ol style="list-style-type: none"> 1. Approve accessing up to \$250,000 funds from the Land & Buildings Reserve for the purposes of detailed design and costing of the Wedderburn Housing Estate – Stage 2; and 2. Request a further report be presented to Council following the design and costing stage of the project for Council to determine next steps. 			
CARRIED			
Completed by Arthur, Bruce (action officer) on 10 January 2024 at 1:07:51 PM - Report with completed design and costing due June 2024			

Resolutions acted upon since the December 2023 Council Meeting

Meeting	Officer/Director	Section	Subject
Council 12/12/2023	Cooper, Adam Phillips, Steven	Confidential Items	Contract 585 - Annual Reseal Program 2023-2024
RESOLUTION 2023/134			
Moved: Cr Neil Beattie			
Seconded: Cr Linda Jungwirth			
That Council:			
<ol style="list-style-type: none"> 1. Award Contract 585 – Annual Reseal Program 2023-2024 to VSA Roads Pty Ltd T/A Primal Surfacing Pty Ltd and InRoads Pty Ltd 2. Authorise the Chief Executive Officer to undertake the necessary administrative actions to complete the Contract documents 3. Authorise the Chief Executive Officer to approve expenditure associated with variations-within the total project budget approved by Council as listed in Attachment 2. 			
			CARRIED
Completed by Cooper, Adam (action officer) on 11 January 2024 at 10:14:30 AM - Council agreement sent to Tenderer for signing.			

Meeting	Officer/Director	Section	Subject
Council 12/12/2023	Southcombe, David Phillips, Steven	Confidential Items	Annual Infrastructure Program project allocations
RESOLUTION 2023/133			
Moved: Cr Neil Beattie			
Seconded: Cr Linda Jungwirth			
That Council:			
<ol style="list-style-type: none"> 1. Approve the updated allocations for the Caravan Park Improvement Project 2. Approve the updated allocation for the Serpentine Public Toilets Project 3. Approve the addition of project LRS1355 Blows Rd Resheet to the Annual Infrastructure Program. 			
			CARRIED
10 Jan 2024 1:01pm Southcombe, David			
10/01/2024 Action in progress.			

Resolutions acted upon since the December 2023 Council Meeting

Meeting	Officer/Director	Section	Subject
Council 12/12/2023	Scullie, Paul Gladman, Wendy	Decision Reports	2023 Local Sports Infrastructure Fund Application - Boort Lawn Tennis Club
RESOLUTION 2023/137			
Moved: Cr Neil Beattie			
Seconded: Cr Dan Straub			
That Council resolve			
<ol style="list-style-type: none"> to support an application to the 2023 Sport and Recreation Victoria Local Sports Infrastructure Fund to install LED lighting on two tennis courts at the Boort Lawn Tennis Club to approve access to Council funds as a co-contribution towards the project as per clause 4.2.4 of the Community Support policy that this support is subject to written confirmation of financial contribution to the project from the Boort Lawn Tennis Club. 			
CARRIED			
Completed by Scullie, Paul (action officer) on 03 January 2024 at 10:56:36 AM - An application has been submitted to Sport and Recreation Victoria's Local Sports Infrastructure Fund on 13 December 2023. Written confirmation of financial contribution was received from the Boort Lawn Tennis Club to support this submission and complete this action.			

Meeting	Officer/Director	Section	Subject
Council 12/12/2023	Cooper, Adam Phillips, Steven	Decision Reports	C579 - Canary Island culvert replacements
RESOLUTION 2023/136			
Moved: Cr Dan Straub			
Seconded: Cr Linda Jungwirth			
That Council			
<ol style="list-style-type: none"> Award Contract 579 – Canary Island Culvert Replacement with the alternative barrier rail option to Avarad Civil and reduce the project budget as detailed in Attachment 2. Authorise the Chief Executive Officer to undertake the necessary administrative actions to complete the contract documents 			
CARRIED			
11 Jan 2024 10:14am Cooper, Adam			
Going back to Council due to error in price calculation.			

Resolutions acted upon since the December 2023 Council Meeting

Meeting	Officer/Director	Section	Subject
Council 12/12/2023	Hargreaves, Michelle Hirth, Daniel	Compliance Reports	Community Asset Committees - CEO Annual Report to Council
RESOLUTION 2023/139			
Moved: Cr Dan Straub Seconded: Cr Linda Jungwirth			
That Council receive and note the CEO report on the 2022/23 Activities and Performance of Community Asset Committees.			
CARRIED			
Completed by Hargreaves, Michelle (action officer) on 03 January 2024 at 11:06:59 AM - all Community Asset Committees have been emailed 19 December 2023 with a list of the committee members appointed by Council			

Meeting	Officer/Director	Section	Subject
Council 12/12/2023	Caserta, Deanne Hirth, Daniel	Decision Reports	Review of the Financial Reserves Policy
RESOLUTION 2023/138			
Moved: Cr Linda Jungwirth Seconded: Cr Dan Straub			
That Council adopts the Financial Reserves Policy v11.			
CARRIED			
Completed by Caserta, Deanne (action officer) on 03 January 2024 at 10:47:36 AM - Policy finalised and published onto Councils' website.			

8 MAYORAL REPORT**8.1 MAYORAL REPORT**

File Number: 02/01/001
Author: Tracy Hunt, Governance Coordinator
Authoriser: Lincoln Fitzgerald, Chief Executive Officer
Attachments: Nil

RECOMMENDATION

That Council receive and note the Mayoral Report.

REPORT

Mayor Holt will present a verbal report at the meeting.

Loddon Campaspe Councils	
Municipal Association of Victoria	
Murray River Group of Councils	
Rural Councils Victoria	
Audit and Risk Committee	
Section 65 Community Asset Committees:	
Donaldson Park	
Hard Hill Tourist Reserve	
Wedderburn Community Centre	
Wedderburn Engine Park and Market Square Reserve	
Wedderburn Mechanics and Literary Institute Hall	
Other Council activities	
Date	Activity

9 COUNCILLORS' REPORT**9.1 COUNCILLORS' REPORTS**

File Number: 02/01/001
Author: Tracy Hunt, Governance Coordinator
Authoriser: Lincoln Fitzgerald, Chief Executive Officer
Attachments: Nil

RECOMMENDATION

That Council receive and note the Councillors' reports.

REPORT

Each Councillor will present a verbal report at the meeting.

Cr Beattie

Rail Freight Alliance	
Section 65 Community Asset Committees:	
Boort Aerodrome	
Boort Memorial Hall	
Boort Park	
Korong Vale Mechanics Hall	
Korong Vale Sports Centre	
Little Lake Boort	
Yando Public Hall	
Other Council activities	
Date	Activity

Cr Straub

North Central Local Learning and Employment Network	
Section 65 Community Asset Committees:	
East Loddon Community Centre	
Pyramid Hill Memorial Hall	
Other Council activities	
Date	Activity

Cr Jungwirth

Australia Day Committee	
Central Victorian Greenhouse Alliance	
Municipal Emergency Management Planning Committee	
North Central Goldfields Regional Library	
Other Council activities	
Date	Activity

Cr Murphy

Calder Highway Improvement Committee	
Local Government Women’s Charter	
Healthy Minds Network	
Section 65 Community Asset Committees:	
Campbells Forest Hall	
Inglewood Community Sports Centre	
Inglewood Community Elderly Persons Units	
Inglewood Town Hall Hub	
Other Council activities	
Date	Activity

10 DECISION REPORTS**10.1 DECISION REPORT 5934: USE AND DEVELOPMENT OF THE LAND FOR A DWELLING IN THE FARMING ZONE****File Number:** FOL/23/4555**Author:** Darcy Jackson, Statutory Planning Officer**Authoriser:** Louise Johnston, Statutory Planning Coordinator**Attachments:**

1. **Decision Report 5934**
2. **Objection - Confidential**

This attachment is designated as confidential in accordance with Section 3(1)(f) of the *Local Government Act 2020*. It contains personal information, being information which if released would result in the unreasonable disclosure of information about any person or their personal affairs.

Personal Information **(under separate cover)**

RECOMMENDATION

That the Responsible Authority having considered all matters which the Planning and Environment Act, 1987, requires it to consider, decides to issue a Notice of Decision to grant a planning permit 5934 for use and development of the land for a dwelling subject to the following conditions:

1. AMENDED PLANS REQUIRED

Before the use and/or development start(s), amended plans must be submitted to and approved by the Responsible Authority. When approved, the plans will be endorsed and will then form part of the permit. The plans must be drawn to scale with dimensions. The plans must be generally in accordance with the plans submitted with the application but modified to show:

a) Detailed floor and elevation plans for the proposed dwelling.

2. LAYOUT

The use and development as shown on the endorsed plans must not be altered or modified unless otherwise agreed in writing by the Responsible Authority.

3. MATERIALS

All external materials must be non-reflective and finished in natural colours or shades to the satisfaction of the Responsible Authority.

4. DRAINAGE

The development, including landscaped and paved areas, must be graded and drained to the satisfaction of the council as the responsible drainage authority so as to prevent the discharge of water from the subject land across any road or onto any adjoining land.

5. NATIVE VEGETATION

No native vegetation is to be removed without the prior written consent of the Responsible Authority.

6. WORKS IN A ROAD RESERVE

- a) Prior to commencement of any works on the road reserve the owner/applicant must submit a Works in a Road Reserve application and be issued a permit to occupy the road for minor works.
- b) The vehicle crossover must be constructed to the satisfaction and requirements of Council's Assets and Engineering Department.

7. ENVIRONMENTAL HEALTH OFFICER

- a) The applicant will be required to install an all-waste on-site waste water system. The system must be an Environment Protection Authority approved system installed, operated and maintained in accordance with the Environment Protection Authority's current edition of the Code of Practice – Onsite wastewater management and the Australia New Zealand Standard AS/NZS 1547:2012 – On-site wastewater management.
- b) Prior to any development the applicant will be required to apply for a Permit to Install a Septic Tank in accordance with Part IXB of the Environment Protection Act 1970.

8. EXPIRY

This permit will expire if the permitted development is not started within two years of the date of this permit, or is not completed within four years of that date, or the permitted use is not started within two years of the completion of the development, or is discontinued for a period of two years.

The responsible authority may extend these periods if a request is made in writing before the permit expires, or:

- Within six months afterwards if the development has not been started, or the development is complete but the use has not started, or the use has been discontinued for a period of two years.
- Within twelve months afterwards if the development started lawfully before the permit expired.

CONFLICT OF INTEREST

There is no conflict of interest for any Council staff member involved in the preparation of this report, or involved in the subject matter of the report.

PREVIOUS COUNCIL DISCUSSION

There have been no previous Council discussion on this matter.

BACKGROUND

The application was lodged on 2 November 2023 for use and development of the land for a dwelling.

The application was not required to be referred to any external authorities with internal consultation undertaken with the Assets & Infrastructure Department regarding access and the Public Health Officer regarding wastewater and septic, standard conditions were imposed.

One objection was received to the application. The objection raised issues regarding the impact on view, and the environment including the removal of vegetation and the habitat of kangaroos.

The officer recommendation is to issue a notice of decision to grant a permit.

ISSUES/DISCUSSION

Under the *Planning and Environment Act 1987* (the Act) the Minister of Planning delegates a municipal council power to become the planning authority for any planning scheme in force in its municipal district.

A municipal council is obligated to enforce and administer the relevant Planning Scheme and must use the scheme to determine applications. The Loddon Planning Scheme is the relevant Planning Scheme for Council. An application is referred to Council for determination, which:

- receive one or more objections, and/or
- are to be recommended for refusal by the Planning officer.

Pursuant to Section 52 of the *Planning and Environment Act 1987*, notices were sent to owners and occupiers of adjoining land. Council has received one objection as the result of the public notification and as such, the matter is being brought to Council for determination. A decision report detailing this application has been prepared and can be found in attachment 1, the objection is included in the decision report with the personal information removed. Attachment 2 is the same objection with the personal information intact.

The objection has been included twice, once without any personal information and a second time in confidential items including the personal information. This is to insure Council complies with its obligations for handling personal information under the *Privacy and Data Protections Act 2014*. A complete copy of the objection can be made available to the public via an appointment.

COST/BENEFITS

There are various costs associated with having a delegated Planning officer consider an application and make a recommendation as well as with the time of the Councillors to consider this recommendation.

The benefits associated with this report is the ability of Council to fulfil its requirement under law and provide the community with a statutory service that delivers well-managed and appropriate development.

RISK ANALYSIS

The risks of Council not fulfilling its statutory obligation under the Act include:

- inappropriate use and development which could endanger life and property
- Council's reputation as a Responsible Authority
- breaches of the *Planning & Environment Act 1987* requiring compliance action.

CONSULTATION AND ENGAGEMENT

Refer to the decision report (attachment 1) for further detail on the application.

LODDON SHIRE COUNCIL

DECISION REPORT 5934: Use and development of the land for a dwelling at Lot 24 Somerset Lane, Newbridge



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SUMMARY

Application Number:	5934
Applicant:	Esther and Ken Cross
Subject Land:	Lot 24 Somerset Lane, Newbridge
Owner:	Esther and Ken Cross
Zone:	Farming Zone
Overlay(s):	No overlays
Existing use:	Vacant Land
Proposal:	Use and development of the land for a dwelling

The following dot points provide a summary of the application:

- The application was lodged on the 2nd November, 2023 proposing to use and develop the land for a dwelling at Lot 24 Somerset Lane, Newbridge.
- The application was advertised to surrounding landowners, with one objection received.
- The application was also referred internally to the Councils Public Health Officer.
- The objection raises issues with loss of view and amenity, a dwelling in the Farming zone and impact on the environment.
- Officer recommendation is to issue a notice of decision to grant a planning permit.

1 RECOMMENDATION

That the Responsible Authority having considered all matters which the Planning and Environment Act, 1987, requires it to consider, decides to issue a Notice of Decision to grant a planning permit 5934 for use and development of the land for a dwelling subject to the following conditions:

1. AMENDED PLANS REQUIRED

Before the use and/or development start(s), amended plans must be submitted to and approved by the Responsible Authority. When approved, the plans will be endorsed and will then form part of the permit. The plans must be drawn to scale with dimensions. The plans must be generally in accordance with the plans submitted with the application but modified to show:

- a) Detailed floor plan and elevations for the proposed dwelling.

2. LAYOUT

The use and development as shown on the endorsed plans must not be altered or modified unless otherwise agreed in writing by the Responsible Authority.

3. MATERIALS

All external materials must be non-reflective and finished in natural colours or shades to the satisfaction of the Responsible Authority.

4. DRAINAGE

The development, including landscaped and paved areas, must be graded and drained to the satisfaction of the council as the responsible drainage authority so as to prevent the discharge of water from the subject land across any road or onto any adjoining land.

5. NATIVE VEGETATION

No native vegetation is to be removed without the prior written consent of the Responsible Authority.

6. WORKS IN A ROAD RESERVE

- a) Prior to commencement of any works on the road reserve the owner/applicant must submit a Works in a Road Reserve application and be issued a permit to occupy the road for minor works.
- b) The vehicle crossover must be constructed to the satisfaction and requirements of Council's Assets and Engineering Department.

7. ENVIRONMENTAL HEALTH OFFICER

- a) The applicant will be required to install an all-waste on-site waste water system. The system must be an Environment Protection Authority approved system installed, operated and maintained in accordance with the Environment Protection Authority's current edition of the Code of Practice – Onsite wastewater management and the Australia New Zealand Standard AS/NZS 1547:2012 – On-site wastewater management.

- b) Prior to any development the applicant will be required to apply for a Permit to Install a Septic Tank in accordance with Part IXB of the Environment Protection Act 1970.

8. Expiry

This permit will expire if the permitted development is not started within two years of the date of this permit, or is not completed within four years of that date, or the permitted use is not started within two years of the completion of the development, or is discontinued for a period of two years.

The responsible authority may extend these periods if a request is made in writing before the permit expires, or:

- Within six months afterwards if the development has not been started, or the development is complete but the use has not started, or the use has been discontinued for a period of two years.
- Within twelve months afterwards if the development started lawfully before the permit expired.

2 DISCUSSION

2.1 The Site & Locality

The site is Crown Allotment 24, located on Somerset Lane, on the edge of Newbridge Township. The site has a 183 metre frontage to Somerset Lane, the northern boundary is 243 metres and 341 metres on the southern boundary and the property is a total area of 4.46 hectares.

The topography of the site and surrounding area is generally flat. The land contains a new shed and an old half demolished structure, with the majority of the site covered by scattered vegetation, although there is some small clearings. The land has an existing informal crossover along its Somerset Lane frontage. Located on the south east side of the Newbridge Township within the Farming Zone there are existing dwelling's adjoining the site to the north and south both within the Farming Zone. Further dwellings to the west are within the Township Zone, while land to the east on the opposite side of Somerset Lane is cleared Farming Lane with no existing dwellings.

There are no easements, restrictions or agreements registered on the titles. There are no waterways over the land.



Figure 1: Aerial photo of subject site

2.2 Site History

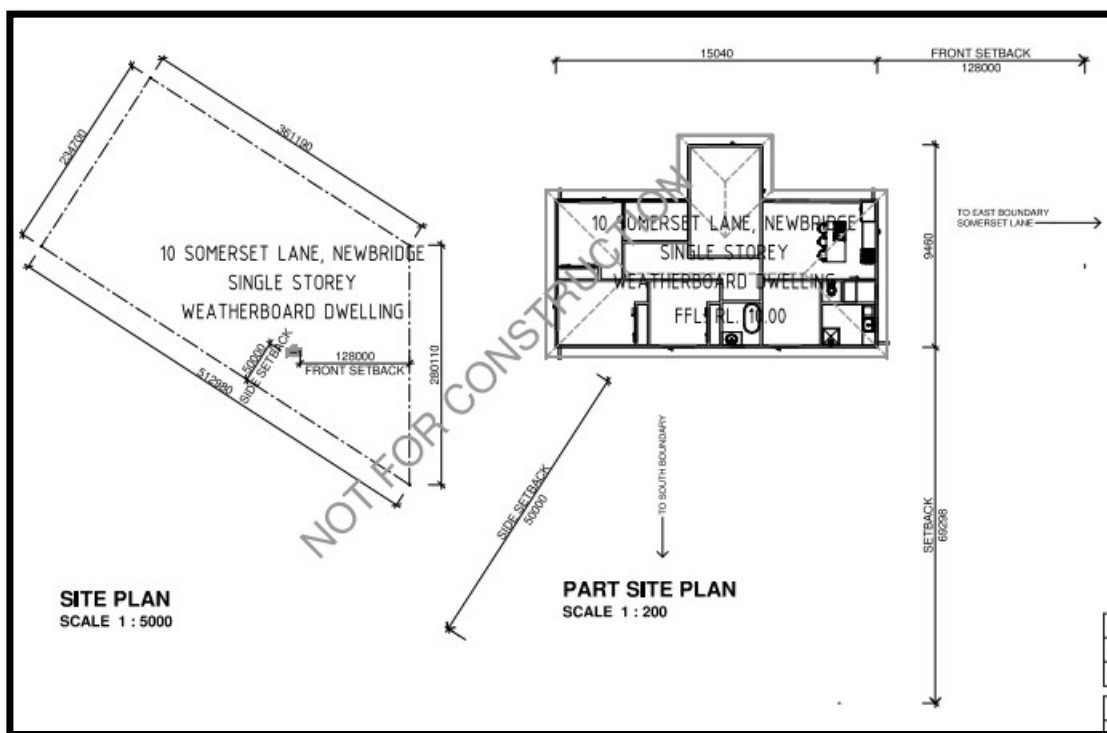
A planning permit 5801 was approved for a development of a storage shed on the 21 July 2022. The shed has been constructed.

2.3 Proposal

The proposal seeks to use and develop the land for a dwelling. The dwelling has a 145.60m² building footprint, comprising three bedrooms, living, dining and kitchen, two bathrooms, and a laundry. The proposed dwelling is an old weatherboard structure of single story form, that will be relocated from another location. Materials and finishes include white weatherboard, with olive green trim around windows and doors, as well as olive green corrugated tin roof.

The dwelling is proposed to have a 128 metre setback from Somerset Lane, and 50 metres from the south west boundary.

No vegetation is required to be removed to accommodate the dwelling and associated infrastructure on the land.



Site plan

Aboriginal Heritage Act 2006

This Act provides for the protection and management of Victoria’s Aboriginal heritage. It requires that Cultural Heritage Management Plan (CHMP) be prepared for large developments or high impact activities in culturally sensitive landscapes, amongst other matters.

The Aboriginal Heritage Regulations (2018) specify that a CHMP is required for an activity if all or part of the activity area for the activity is an area of cultural heritage sensitivity and all or part of the activity is a high impact activity (Regulation 6), unless exempt under Division 2.
Response

The subject site is not located in an area of cultural heritage sensitivity. Under Section 9 of the Aboriginal Heritage Regulations (2018) the development of one dwelling is also an ‘exempt activity’. Therefore, no Cultural Heritage Management Plan is required for the proposal.

2.4 Loddon Planning Scheme

2.4.1 Zone

The subject site is within the Farming Zone. Clause 35.07 of the scheme states that the purpose of the Farming Zone is:

- To implement the Municipal Planning Strategy and the Planning Policy Framework.
- To provide for the use of land for agriculture.
- To encourage the retention of productive agricultural land.
- To ensure that non-agricultural uses, including dwellings, do not adversely affect the use of land for agriculture.
- To encourage the retention of employment and population to support rural communities.

- *To encourage use and development of land based on comprehensive and sustainable land management practices and infrastructure provision.*
- *To provide for the use and development of land for the specific purposes identified in a schedule to this zone.*

Under Clause 35.07-1, a permit is required for dwelling on land less than 100 hectares and under Clause 35.07-4:

- Building and works associated with a Section 2 Use.

2.4.2 Overlay

There are no overlays affecting the subject site.

2.4.3 Relevant Particular Provisions

There are no relevant particular provisions.

2.4.4 Permit trigger

Under clause 35.07-1 of the Farming Zone, a permit is required to use land for a dwelling on lots less than 100 hectares.

Under Clause 35.07-4 of the Farming Zone, a permit is required to construct buildings and works associated with a section 2 use (dwelling).

2.4.5 Restrictive Covenant

No restrictive covenants exist on this site.

2.4.6 Planning Policy Framework

The following section considers the relevant sections of the Planning Policy Framework for this application.

Clause 14.01-1 Protection of Agricultural Land

This clause aims to protect productive farmland which is of significance in the local or regional context and also protect unplanned loss of agricultural land due to permanent changes in land use. Strategies include: Limit new housing development in rural areas by:

- Directing housing growth into existing settlements.
- Discouraging development of isolated small lots in the rural zones from use for dwellings or other incompatible uses.
- Encouraging consolidation of existing isolated small lots in rural zones.

Clause 16.01-3 Rural Residential Development

Planning should manage development in rural areas to protect agriculture and avoid inappropriate rural residential development. Strategies include:

- Discourage development of small lots in rural zones for residential use or other incompatible uses.
- Maintaining an adequate buffer distance between rural residential development and animal production.

2.4.7 Local Planning Policy Framework

The following section gives consideration to be the relevant sections of the Local Planning Policy Framework for this application.

Clause 02-.03-4 – Agriculture

Agricultural production is the major focus of the economy and community in the Shire. The facilitation of innovative, diverse and sustainable agriculture is a central aim of planning in the Shire. Quality agricultural land is a valuable and a non-renewable resource. Its protection and sustainable use is fundamental to the future economic health of the Shire.

Generally large lots are required for agricultural production, especially in the dryland areas. Farms are often made up of a collection of lots, which may be scattered across a district. The protection of quality agricultural land for agriculture rests both with maintenance of it in viable sized lots, deterring non-agricultural land use and the ability to restructure and develop it for agricultural purposes.

Council's strategic directions for agriculture are to:

- Maintain agricultural land in large lots to support the agricultural industry.
- Ensure that land use is matched to soil capability.
- Minimise dwellings in agricultural areas.
- Support excision where it provides for farm consolidation and the excision will not compromise agricultural activities on surrounding land or remove an unreasonable amount of land from agriculture.
- Support the effective restructure and redevelopment of farm holdings to maximise opportunities for diversification and intensification of agricultural land use.
- Discourage non-agricultural land use and development in areas of high quality and productive agricultural potential.

Clause 14.01-1L- Agriculture

This policy applies to applications for use and development in the farming zone. Strategies include:

- Support dwellings that are ancillary to the agricultural use of the land.
- Direct non soil based agricultural activity away from quality agricultural land.
- Support development (including subdivision) in agricultural areas that is directly related to ongoing agricultural use of the land.
- Site buildings and works to avoid or minimise loss of quality agricultural land.

In response to the state and local policies as they relate to agricultural land the following is provided:

- The land is not farmed and given its size and heavy vegetation, has limited potential for agricultural use.
- The use and development of a dwelling on this site is consistent with the existing development adjoining and adjacent to the land.
- The development of a dwelling on the land would not comprise any existing agriculture activity or have the potential to limit the operation or expansion of adjoining and nearby agricultural uses, with adjoining land containing existing dwellings.

2.5 Referrals

Table 7 Internal Referrals

Environmental Health Officer	Conditional consent
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2.6 Public Notification

The application is not exempt from the notice requirement. Pursuant to Section 52 of the Planning and Environment Act 1987, the following forms of advertising were undertaken:

- Notices were sent to owners and occupiers of adjoining land (including opposite and surrounding).

One objection was received in response to the application. The matters raised in the objection are summarised below and with Officers response in italics:

- Our understanding is that such a permit is outside the shires terms of reference for that particular address, plus the shed that has already been erected has destroyed part of the very reason we bought here 6 years ago.

The Farming Zone allows for the consideration of a dwelling on land less than 100ha, subject to a planning permit. The site is vegetated and not considered to be viable agricultural land. The area is already compromised by dwellings on adjoining sites, including the Objectors. Therefore a dwelling at this location is considered compatible with the surrounding uses.

- Instead of the beautiful bush scene at the back of our home, we are faced with a large triple sized garage. A permanent residence there too is going too far.

In relation to views, relevant case law has provided there are established principles used to guide decision making with applications which include:

- a) *There is no legal right to a view*
- b) *views form part of the existing amenity of a property and their loss is a relevant consideration to take into account;*
- c) *the availability of views must be considered in the light of what constitutes a reasonable sharing of those views;*
- d) *in addressing the concept of "reasonableness", it is relevant to consider*

*(i) the importance of the view to be lost within the overall panorama available; and
(ii) whether those objecting have taken all appropriate steps to optimise development of their own properties.*

(e) added emphasis will be placed on principles (b) and (c) above if the issue of views is specifically addressed in the planning scheme.

The location of the dwelling will have an impact on the views currently available to the adjoining neighbour as the land is not developed. What needs to be considered is the impact of the development proposed in the sharing of these views and whether the impact is reasonable in the context. The adjoining dwelling will still retain views to the south west beyond the proposed development on the land, to the west and to the north. In addition, the land does not have any overlays or specific policy pertaining to the protection of views. Therefore the proposed development is considered reasonable in the current context.

- I did try to speak to the owner when we noticed the shed slab going in. She informed me that it was just a very small shed to store things in. They have been living there for at least 6 months, have cut down a large number of trees, and destroyed the path our local Kangaroos follow

A planning permit was issued for a shed in 2022 to be used as storage, vegetation removal was not included as part of this assessment as no vegetation was to be removed. Council has no evidence of non-compliance at this property. The dwelling will only take up a small area of the property, would not remove vegetation and is not expected to significantly impact on the movement of local fauna.

3 ASSESSMENT

3.1 Planner assessment

Is the proposed dwelling acceptable on the subject land taking into consideration planning policies for the protection of agricultural land in the Planning Scheme?

Does the proposed dwelling meet the purpose and applicable decision guidelines of the FZ in the Loddon Planning Scheme?

It is relevant to consider the purpose and decision guidelines of the Farming Zone (FZ) and the planning policy framework of the Loddon Planning Scheme within the context of the location of the site, its surroundings and the nature of the predominant land uses in the area.

The Farming Zone seeks to provide for the use of land for agriculture and the retention of productive agricultural land. In relation to non-agricultural uses that include dwellings, the FZ seeks to ensure that the use of land for agriculture is not adversely affected.

The decision guidelines of the Farming Zone (Clause 35.07-6) provide useful questions in considering both state and local policy directions regarding the protection of agricultural land including:

- *Whether the dwelling will result in the loss or fragmentation of productive agricultural land.*
- *Whether the dwelling will be adversely affected by agricultural activities on adjacent and nearby land due to dust, noise, odour, use of chemicals and farm machinery, traffic and hours of operation.*
- *Whether the dwelling will adversely affect the operation and expansion of adjoining and nearby agricultural uses.*
- *The potential for the proposal to lead to a concentration or proliferation of dwellings in the area and the impact of this on the use of the land for agriculture.*

State Planning Policy at Clause 14.01-1 refers to the protection of agricultural land. The policy seeks to protect productive farmland which is of significance in the local or regional context and also protect unplanned loss of agricultural land due to permanent changes in land use. It seeks to limit new housing development in rural areas by:

- *Directing housing growth into existing settlements.*

· *Discouraging development of isolated small lots in the rural zones from use for dwellings or other incompatible uses.*

· *Encouraging consolidation of existing isolated small lots in rural zones.*

Clause 35.07-2 applies to the Use of land for a dwelling in the Farming Zone.

A lot used for a dwelling must meet the following requirements:

- Access to the dwelling must be provided via an all-weather road with dimensions adequate to accommodate emergency vehicles.
- The dwelling must be connected to a reticulated sewerage system or if not available, the waste water must be treated and retained on-site in accordance with the State Environment Protection Policy (Waters of Victoria) under the Environment Protection Act 1970.
- The dwelling must be connected to a reticulated potable water supply or have an alternative potable water supply with adequate storage for domestic use as well as for firefighting purposes.
- The dwelling must be connected to a reticulated electricity supply or have an alternative energy source.

The dwelling would be able to comply with these requirements.

In response to the policy as outlined above, the application for a dwelling would not conflict with the policy outcomes at this location as:

- The context of the site is on the edge of an area of similarly sized lots, generally developed with dwellings, comprising both Farming zone and Township zone lots
- The development of a dwelling at this location will not lead to a proliferation of dwellings in this precinct as dwellings already exist.
- The dwelling will not result in further fragmentation of productive agricultural land.
- The dwelling would not remove a significant area of the land from agricultural production;
- The dwelling would not have any significant impact on the agricultural activities of adjacent or nearby land nor should it affect the expansion of any adjoining or nearby agricultural uses given the location of the dwelling on the land and its setbacks to nearby agricultural uses.
- The limited agricultural capability of the land given its location and size.
- The land has no physical abuttal to any active farm land and cannot be consolidated with any adjoining land used for agriculture.

The planning scheme's provisions recognise that not all land in the Farming Zone is productive farmland. The discretionary provisions of the Farming Zone enable consideration to be given to proposals for dwellings in the zone. The decision guidelines in the FZ in relation to dwelling issues requires consideration of, among other things, whether the dwelling will result in the loss or fragmentation of productive agricultural land. In this case, the use of the land for a dwelling will not result in the loss of productive agricultural land. Due to the location of the lot and the vegetation present, the land is not considered viable for agriculture.

The locality of the site comprises the presence of small rural lots with existing dwellings presenting a context within which the proposal for a dwelling is not out of place. Adjoining and adjacent land that is located within the Farming Zone contains existing dwellings. Land to the west of the subject site falls within the Township Zone and contains several dwellings. Somerset Lane forms undefined border between productive and non-productive agricultural land in this area.

The addition of a new dwelling located in the general vicinity of other nearby dwellings would not result in land use conflict given the presence of these other dwellings and the existing character and nature of this section of Newbridge.

This application has similar characteristics and context to VCAT decision, *Ellis v Macedon* 2017, where a permit was issued on a 2.3ha Farming zone lot based on the context and location of the lot, being close to other rural residential lots and lots within the Township Zone.

In deciding to issue a permit, the Member concluded:

“the context and location of the lot to be the main considerations in relation to this application. The subject site is close to other rural residential lots in the immediate vicinity to the west and north-west and is only separated by Pultney Street from the Township zoned properties to the south. The property has no physical abuttal to any actively farmed land and cannot be incorporated into adjacent land used for farming purposes, due to part of the site being subject to regular flooding.

I consider although the site is not within the town boundary, development of this block for residential purposes and associated revegetation would have economic benefits for the township under the Council policy to endeavour to grow the economic viability of its existing small townships. Given the site-specific features of this land, as discussed above I consider this proposal does not form a precedent for similar applications in the future, and does not have any impact on the adjacent farming activities on the larger lots, and has very limited agricultural capability itself.”

Another VCAT decision, *Redl v Wangaratta*, 2011, considered a dwelling in the farming zone on a 5.9ha parcel with no agricultural activity proposed. This application was recommended to be issued based on the land not having any agricultural value or capability and not impacting agricultural activities on nearby land.

In recommending a permit, Senior Member Rickards concluded:

“The proposed dwelling is not intended to be used to support an agricultural activity on the land. Based on the evidence provided by Mr Forbes I conclude that the land has minimal agricultural value and a dwelling on the land will not result in productive agricultural land being removed from production. Nor is the land being fragmented from agricultural production. The condition of the subject land is at odds with the policies within the planning scheme that seek to protect agricultural land but do not say anything about land that is not usable for agricultural activities. There will be no impact on the abutting property which contains a dwelling and having a similar area to the subject land is used in a similar way with little or no agricultural activity occurring.”

This decision has similar characteristics and context to the current application.

The site appears to be heavily vegetated from an aerial view due to shadowing, however a site visit on the 14 November 2024 shows the vegetation as being relatively sparse. There is a cleared area where the dwelling can be constructed and the access way is wide enough for the house sections and vehicles to enter the site. Figure 2 and 3 below show the proposed house location and access to the site. No native vegetation will need to be removed to accommodate the house or to gain access to the property.



Figure 2- Proposed House Location



Figure 3- Access to the property

3 CONCLUSION

The Farming Zone allows consideration for the use and development of a dwelling on land less than 100ha. Given the context and location of the subject site, the proposed use and development is consistent with the existing use and development adjoining and adjacent to the land. Its development would not adversely impact any agricultural activities on nearby land and is therefore considered appropriate in this setting.

5 Appendix 1:

5.1 Objection 1

Dear Sir/Madam,

My wife and I write to lodge our objection for a permit to place a dwelling on Lot CA24 Somerset Lane, Newbridge 3551. Our understanding is that such a permit is outside the shires terms of reference for that particular address, plus the shed that has already been erected has destroyed part of the very reason we bought here 6 years ago. Instead of the beautiful bush scene at the back of our home, we are faced with a large triple sized garage. a permanent residence there too is going too far. I did try to speak to [REDACTED] when we noticed the shed slab going in. She informed me that it was just a very small shed to store things in. They have been living there for at least 6 months, have cut down a large number of trees, and destroyed the path our local Kangaroos follow. I guess you're not going to worry about our views, but we are extremely upset by what is happening, and by the shires seemingly "anything goes" bi-laws

Yours sincerely

10.2 PRIVACY POLICY (VERSION 3)**File Number:****Author:** Tracy Hunt, Governance Coordinator**Authoriser:** Lisa Clue, Manager Governance**Attachments:**

1. POL Privacy Policy v3
2. POL Privacy Policy - Summary of Changes (v2 to v3)

RECOMMENDATION

That Council adopts Privacy Policy v3.

CONFLICT OF INTEREST

There is no conflict of interest for any Council staff member involved in the preparation of this report, or involved in the subject matter of the report.

PREVIOUS COUNCIL DISCUSSION

The Privacy Policy (Version 2) was adopted by Council at the November 2019 Council Meeting. Privacy Policy (Version 3), including proposed changes was discussed at the December 2023 Council Briefing.

BACKGROUND

Under the *Privacy and Data Protection Act 2014* (PDP Act) and the *Health Records Act 2001* (HR Act) Council must set out in a document, clearly expressed policies on the management of personal and health information.

The PDP Act contains 10 Information Privacy Principles (IPPs) that outline how Victorian public sector organisations must handle personal information. The HR Act regulates the collection and handling of health information and establishes Health Privacy Principles (HPPs) that outline how this information should be collected and handled by the Victorian public sector and private sector.

ISSUES/DISCUSSION

The Privacy Policy outlines how Council will collect, hold, use and disclose the personal and health information of individuals, how individuals can gain access to their information and correct inaccuracies, and how an individual may complain about possible breaches of privacy.

The purpose of the policy is to:

- help individuals understand how Council handles their information
- help employees understand how personal information should be handled
- prevent the unnecessary collection and unlawful use or disclosure of information, and
- promote greater public confidence in Council's handling of personal information.

There have been no material changes to the PDP Act or the HR Act since this policy was last considered by Council.

Updates to the policy include, clarification of content to better reflect the purpose of the policy, removal of information that is out of scope, and general grammatical and formatting corrections. A summary of the changes is attached to this Agenda report.

Following its adoption, the reviewed policy will be accessible from Council's website.

COST/BENEFITS

There is no cost involved in the adoption of this policy. The benefit of adopting the policy is the setting of clear expectations for the management of personal and health information.

RISK ANALYSIS

The Privacy Policy supports compliance with relevant legislation and minimises risks associated with the management of personal and health information.

CONSULTATION AND ENGAGEMENT

The Privacy Policy was presented to the Management Executive Group for endorsement prior to it being presented to Council.



PRIVACY POLICY

DOCUMENT TYPE:	Council policy
DOCUMENT STATUS:	Draft
POLICY OWNER POSITION:	Director Corporate
INTERNAL COMMITTEE ENDORSEMENT:	Management Executive Group
APPROVED BY:	Council
DATE ADOPTED:	
VERSION NUMBER:	3
REVIEW DATE:	
DATE RESCINDED:	
RELATED STRATEGIC DOCUMENTS, POLICIES OR PROCEDURES:	Cloud Computing Policy Records Management Policy Website Privacy Statement Complaint Handling Framework
RELATED LEGISLATION:	<i>Victoria</i> Privacy and Data Protection Act 2014 Health Records Act 2001 Local Government Act 2020 Freedom of Information Act 1982 Public Records Act 1973 <i>Commonwealth</i> Privacy Act 1988
EVIDENCE OF APPROVAL:	

Signed by Chief Executive Officer

FILE LOCATION:	K:\EXECUTIVE\Strategies policies and procedures\Policies - adopted PDF and Word\POL Privacy Policy v3.docx
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Policy documents are amended from time to time, therefore you should not rely on a printed copy being the current version. Please consult the policies on the Loddon Shire website (Council Policies) or Intranet (Organisational Policies) to ensure that the version you are using is up to date.

This document is available in alternative formats (e.g. larger font) if requested.



PRIVACY POLICY

1 PURPOSE

This policy explains how the Loddon Shire Council (Council) will collect, hold, use and disclose the personal and health information of individuals, how individuals can gain access to their information and correct inaccuracies, and how an individual may complain about possible breaches of privacy.

The purpose of this policy is to:

- help individuals understand how Council handles their information
- help employees understand how personal information should be handled
- prevent the unnecessary collection or unlawful use or disclosure of information, and
- promote greater public confidence in Council's handling of personal information.

2 SCOPE

This policy covers all personal and/or health information held by Council, including information that Council has collected:

- from an individual, as well as information sourced from or provided by third parties
- about an individual in any format including correspondence, in person, over the phone, over the internet, or from third parties.

3 POLICY

Council is committed to protecting individuals' right to privacy and to the responsible and fair handling of personal and/or health information, consistent with the *Privacy and Data Protection Act 2014* (PDP Act), and the *Health Records Act 2014* (HR Act).

Accordingly, Council will adhere to the Information Privacy Principles (IPP) and Health Privacy Principles (HPP) when undertaking its statutory functions and activities, so that the privacy of individuals can be protected (for further information on the IPP and HPP see Attachment 1 – Information Privacy Principles, and Attachment 2 – Health Privacy Principles respectively).

3.1 What are privacy rights?

It is important that individuals are aware of their privacy rights under the PDP Act and the HR Act and the *Privacy Act 1988* and know what to do if there is a problem.

Individuals have the right to:

- know why an organisation is asking for their information and what they are going to do with it
- ask to see their own information and request corrections if necessary, and
- make a complaint if they believe their personal information has been mishandled.

3.2 What types of information does Council collect?

The types of personal, sensitive and health information that Council may collect includes but is not limited to name, address, email address, telephone number, date of birth, motor vehicle registration, photograph or video footage, disabilities, pension card numbers, bank account and other financial details of residents, ratepayers and staff.

Council will only collect personal information (including sensitive and health information) that is necessary for its functions and activities.



PRIVACY POLICY

3.3 How does Council manage information?

3.3.1 Collection (IPP 1/HPP 1)

Council will collect personal and/or health information, lawfully and fairly, that is necessary for carrying out its functions and activities:

- directly from the individual via an application form or correspondence or in response to a request from Council
- from third parties, such as contracted service providers, health service providers or the individual's authorised representatives or legal advisers
- from publicly available sources of information
- when legally required to do so.

When collecting personal or health information Council will endeavour to:

- take reasonable steps to advise what and why the information is being collected
- disclose to whom the information may be disclosed and why
- disclose any law that requires Council to collect the information
- advise the consequences for the individual if all or part of the information is not collected
- advise the individual that they are able to gain access to the information.

Where possible and appropriate, this will be achieved by a Collection Notice which will also let individuals know how they can access their information. Prior to commencing collection, a Privacy Impact Assessment¹ may be undertaken by staff.

Council will maintain a Website Privacy Statement on its website which will outline how privacy is managed for users who access the website.

Council will not collect sensitive or health related information unless the individual has consented or it is required by law.

Council will take reasonable steps to retain confidentiality of any personal information about an individual, given by another person or a health service provider, in relation to the provision of care or health services to the individual.

If Council collects personal and/or health information about an individual from someone else, it will take reasonable steps (such as calling the individual to confirm personal information) to ensure that the individual is made aware of it.

Council will collect personal and/or health information about a child under the age of 18, only with the consent of the child's parent or guardian. However in certain circumstances Council may exercise discretion in obtaining parental/guardian consent for the collection of young persons' information where parental/guardian involvement may hinder the delivery of services to a young person.

¹ Refer to the Office of the Victorian Information Commission for further information on how to conduct a Privacy Impact Assessment (<https://ovic.vic.gov.au/privacy/resources-for-organisations/privacy-officer-toolkit/privacy-impact-assessments/>)



PRIVACY POLICY

Council may collect personal and/or health information for purposes including, but not limited to, the following:

- to contact an individual where it is necessary in order to provide services requested by them, such as obtaining a permit
- as part of our commitment to customer service, we may periodically invite individuals to provide feedback about their experience via a survey, any survey is voluntary and you do not have to participate
- for Council or our contracted service providers to contact you where it is necessary to resolve issues relating to Council services or functions which the individual has brought to our attention, for instance, contacting an individual in response to their report of a fallen tree branch
- to contact an individual prior to a Council or Committee meeting to confirm attendance and/or advise of any changes to the meeting details where the individual has made a submission for consideration
- to supply material concerning Council initiatives and programs where personal information has been supplied to Council for this purpose, for instance, where an individual has opted to be included on a mailing list for a Council publication via our public interfaces
- to facilitate the collection of Council fees and charges, for instance, we will use name and address details to forward rate notices
- to enable payment for Council provided goods and services
- to enable Council to undertake its law enforcement functions
- to aid community safety
- to record/receive ideas, questions, complaints, and compliments from members of the public.

3.3.2 Use and Disclosure (IPP 2/HPP 2)

Council will take all necessary measures to prevent unauthorised access to, or disclosure of, an individual's personal information.

Council will only use personal and/or health information within Council, or disclose it outside Council for the purpose for which it was collected and in accordance with legislation (e.g. where the individual has consented or where the individual would reasonably expect this to occur).

Use includes:

- searching records for any reason
- using personal and/or health information in a record to make a decision
- inserting personal and/or health information into a database.

Disclosure includes:

- providing personal and/or health information to a third party (such as a contractor)
- providing a record containing personal and/or health information to a member of the public
- providing access to public registers Council is required to maintain.

External organisations to which personal information is disclosed include Council's contracted service providers who perform various services for and on behalf of Council. These contractors have agreed to be bound by the provisions of the PDP Act. Information provided to these contractors is limited to contact details.

Council will not disclose personal or health information to a third party without consent, unless Council is required or authorised to do so by law. In the event of an investigation into suspected unlawful or improper activity, a law enforcement agency or government agency may exercise its legal authority to request information and inspect records.



PRIVACY POLICY

Council may be required to forward contact details to government departments and agencies, utility companies, and other agencies and businesses including but not limited to:

- Powercor
- Coliban Water
- Goulburn Murray Water
- GWM Water
- State Government departments
- Neighbouring Councils
- Public Records Office Victoria
- Victoria Police
- VicRoads/Regional Roads Victoria

All above mentioned departments, agencies and Councils are required to comply with privacy legislation.

As far as is reasonably practicable, disclosures of personal information will be made in writing and recorded in Council's records management system.

3.3.3 Data Quality (IPP 3/HPP 3)

Prior to the use and disclosure of personal and/or health information, reasonable steps will be taken to ensure that the information is relevant and to the extent necessary, accurate, complete and up-to-date for the purpose for which it is to be used.

3.3.4 Data Security (IPP 4) and Data Security and Data Retention (HPP 4)

Council will endeavour to maintain a secure system for storing personal and/or health information and will utilise appropriate technologies, security methods, operational policies and procedures to protect the information from:

- unauthorised access
- improper use
- alteration
- unlawful or accidental destruction
- accidental loss.

All personal and/or health information will be managed in accordance with the HR Act and the *Public Records Act 1973*.

The Victorian Protective Data Security Framework (VPDSF), and accompanying Victorian Protective Data Security Standards (VPDSS), provide direction to Victorian public sector agencies or bodies on their data security obligations. The VPDSS establish 12 high level mandatory requirements to protect public sector information across all security areas including governance, information, personnel, information communications technology and physical security.

3.3.5 Openness (IPP 5/ HPP 5)

Council will take reasonable steps to ensure a person knows what personal and health information it holds, for what purposes and how it is managed.

3.3.6 Access and Correction (IPP 6/HPP 6)

Following the collection of personal information, the individual whose information has been collected may contact Council for access to that information.

Access will be provided except in the circumstances outlined in the PDP Act, for example, where the information relates to legal proceedings or where the *Freedom of Information Act 1982* applies.



PRIVACY POLICY

If it is established that information held by Council is inaccurate, incomplete, misleading or not up to date, Council will take reasonable steps to correct the information.

Council will provide written reasons for refusal of access to, or refusal to correct health information.

3.3.7 Identifiers (IPP 7/HPP 7)

Council will only assign identifiers to records if it is necessary to enable Council to carry out a function efficiently.

Council will not adopt as its own identifier for an individual any unique identifier that has been assigned by another government agency.

Council will not use or disclose the identifier assigned to an individual by another government agency, unless the consent of the individual has been obtained or it is required by law to do so.

3.3.8 Anonymity (IPP 8/HPP 8)

Whenever it is lawful and practicable, individuals may exercise the option of not identifying themselves when supplying information or entering into transactions with Council.

Some Council services can only be provided if the person accessing the service is prepared to be identified due to practical and legal requirements

3.3.9 Transborder Data Flows (IPP 9/HPP 9)

Council may transfer personal and/or health information about an individual to someone (other than Council or the individual) who is outside Victoria when the data transfer conforms with the PDP Act and/or the HR Act.

Council will take all reasonable steps to ensure that the information which it transfers will not be held, used or disclosed by the host of the information in a manner inconsistent with Commonwealth or Victorian privacy legislation.

3.3.10 Sensitive Information (IPP 10)

Council will not collect sensitive information about you except in circumstances prescribed in the PDP Act.

3.3.11 Transfer or closure of the practice of a health service provider (HPP 10)

If Council sells or closes down a health service it will publish a notice of its intent to do so and take steps to notify any individual of whom it holds health information. Council will transfer records as required under the HR Act.

3.3.12 Making information available to another health service provider (HPP 11)

Council will make information available to another health service provider if requested to do so by an individual. Fees may be applicable.



PRIVACY POLICY

3.4 Privacy Complaints

An individual may lodge a complaint in writing with Council's Privacy Officer regarding the handling of personal and/or health information. Council will investigate and deal with the complaint in accordance with Council's Complaint Handling Framework.

Council's Privacy Officer contact details:

Privacy Officer
Loddon Shire Council
PO Box 21,
WEDDERBURN VIC 3518
Telephone: (03) 5494 1200
Email: loddon@loddon.vic.gov.au

Alternatively an individual can make a complaint to an independent regulator of privacy which may conciliate privacy complaints between aggrieved parties:

Office of the Victorian Information Commissioner
PO Box 24274
MELBOURNE VIC 3001

Telephone: 1300 006 842

Email: enquiries@ovic.vic.gov.au

Website: www.ovic.vic.gov.au

or

Health Complaints Commissioner
Level 26, 570 Bourke Street
MELBOURNE VIC 3000

Telephone: 1300 582 113

Email: hcc@hcc.vic.gov.au

Website www.hcc.vic.gov.au

The Commissioners may decline to action the complaint if the complainant has not first complained to Council.

3.5 Further information

Copies of this policy will be readily available from the Council website and office.

Further information with respect to the Loddon Shire Council's Privacy Policy and its handling of personal and/or health information can be obtained from Council's Privacy Officer.



PRIVACY POLICY

4 DEFINITIONS OF TERMS OR ABBREVIATIONS USED

Term	Definition
Collection notice	a statement that is provided to an individual at or before the time Council collects personal information (or if that is not practical, as soon as possible after the information is collected). A collection notice explains to individuals the purpose for which the information is collected, and how the organisation will use and handle the information.
Health information	<p>Health information means—</p> <ul style="list-style-type: none"> (a) information or an opinion about— <ul style="list-style-type: none"> (i) the physical, mental or psychological health (at any time) of an individual; or (ii) a disability (at any time) of an individual; or (iii) an individual's expressed wishes about the future provision of health services to him or her; or (iv) a health service provided, or to be provided, to an individual— that is also personal information; or (b) other personal information collected to provide, or in providing, a health service; or (c) other personal information about an individual collected in connection with the donation, or intended donation, by the individual of his or her body parts, organs or body substances; or (d) other personal information that is genetic information about an individual in a form which is or could be predictive of the health (at any time) of the individual or of any of his or her descendants— <p>but does not include health information, or a class of health information or health information contained in a class of documents, that is prescribed as exempt health information for the purposes of this Act generally or for the purposes of specified provisions of this Act;</p> <p>Health information is legislated under the HR Act, and administered by the Health Complaints Commissioner.</p>
HPPs	Health Privacy Principles, found in the <i>Health Records Act 2001</i>
Identifier	a number, letter or symbol or a combination of any or all of those things, that may be used to identify an individual or to verify the identity of an individual.
IPPs	Information Privacy Principles found in the <i>Privacy and Data Protection Act 2014 (Vic)</i>



PRIVACY POLICY

Term	Definition
<p>Personal information</p>	<p>Personal information is defined in the PDP Act as:</p> <p>information or an opinion (including information or an opinion forming part of a database), that is recorded in any form and whether true or not, about an individual whose identity is apparent, or can reasonably be ascertained, from the information or opinion, but does not include information of a kind to which the Health Records Act 2001 applies;</p> <p>Personal information is information or an opinion (including information or an opinion forming part of a database), that is recorded in any form and whether true or not, about an individual whose identity is apparent, or can reasonably be ascertained from the information or opinion but does not include information of a kind to which the HR Act applies.</p> <p>Personal information may include:</p> <ul style="list-style-type: none"> • name, age, height, weight • income, purchases and spending habits • bank account details and credit card information • photographs • blood type • fingerprints • marital status • religious belief • education • home address and phone number • employee details • information about an individual opinion and what an individual likes • Medicare number • motor vehicle registration number <p>Personal information is and administered by the Victorian Information Commissioner.</p>
<p>Privacy Impact Assessment</p>	<p>a process that helps identify, assess, and mitigate the impact a program may have on the privacy of individuals. It helps organisations consider the different elements of the proposed program, how it may involve the handling of personal information, and any inherent privacy risks.</p>
<p>Public registers</p>	<p>documents that Councils are required to make publically available pursuant to State Government legislation</p>



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Term	Definition
Sensitive information	<p>Sensitive is a subset of personal information, it is defined in the PDP Act as information or an opinion about an individual's—</p> <ul style="list-style-type: none"> (a) racial or ethnic origin; or (b) political opinions; or (c) membership of a political association; or (d) religious beliefs or affiliations; or (e) philosophical beliefs; or (f) membership of a professional or trade association; or (g) membership of a trade union; or (h) sexual preferences or practices; or (i) criminal record— <p>that is also personal information</p>
Unique identifier	<p>means an identifier (usually a number) assigned by an organisation to an individual uniquely to identify that individual for the purposes of the operations of the organisation but does not include an identifier that consists only of the individual's name but does not include an identifier within the meaning of the Health Records Act 2001.</p>
Office of the Victorian Information Commissioner	<p>the primary regulator and source of independent advice to the community and Victorian government about how the public sector collects, uses and discloses information.</p>

5 HUMAN RIGHTS STATEMENT

It is considered that this policy does not impact negatively on any rights identified in the Charter of Human Rights Act. Loddon Shire Council is committed to consultation and cooperation between management and employees. The Council will formally involve elected employee Health and Safety Representatives in any workplace change that may affect the health and safety of any of its employees.

6 REVIEW

The Director Corporate will review this policy for any necessary amendments no later than 2 years after adoption of this current version. The Director Corporate may approve updates to the appendices of this policy at any time.

7 APPENDICES

- 1) Information Privacy Principles
- 2) Health Privacy Principles



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8 APPENDIX 1 THE INFORMATION PRIVACY PRINCIPLES (IPP)

Privacy and Data Protection Act 2014

Schedule 1—The Information Privacy Principles

In these Principles—

sensitive information means information or an opinion about an individual's—

- (a) racial or ethnic origin; or
- (b) political opinions; or
- (c) membership of a political association; or
- (d) religious beliefs or affiliations; or
- (e) philosophical beliefs; or
- (f) membership of a professional or trade association; or
- (g) membership of a trade union; or
- (h) sexual preferences or practices; or
- (i) criminal record—

that is also personal information;

unique identifier means an identifier (usually a number) assigned by an organisation to an individual uniquely to identify that individual for the purposes of the operations of the organisation but does not include an identifier that consists only of the individual's name and does not include an identifier within the meaning of the **Health Records Act 2001**.

1 Principle 1—Collection

- 1.1 An organisation must not collect personal information unless the information is necessary for one or more of its functions or activities.
- 1.2 An organisation must collect personal information only by lawful and fair means and not in an unreasonably intrusive way.
- 1.3 At or before the time (or, if that is not practicable, as soon as practicable after) an organisation collects personal information about an individual from the individual, the organisation must take reasonable steps to ensure that the individual is aware of—
 - (a) the identity of the organisation and how to contact it; and
 - (b) the fact that the individual is able to gain access to the information; and
 - (c) the purposes for which the information is collected; and
 - (d) to whom (or the types of individuals or organisations to which) the organisation usually discloses information of that kind; and
 - (e) any law that requires the particular information to be collected; and
 - (f) the main consequences (if any) for the individual if all or part of the information is not provided.
- 1.4 If it is reasonable and practicable to do so, an organisation must collect personal information about an individual only from that individual.



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- 1.5 If an organisation collects personal information about an individual from someone else, it must take reasonable steps to ensure that the individual is or has been made aware of the matters listed in IPP 1.3 except to the extent that making the individual aware of the matters would pose a serious threat to the life or health of any individual.

2 Principle 2—Use and Disclosure

- 2.1 An organisation must not use or disclose personal information about an individual for a purpose (the secondary purpose) other than the primary purpose of collection unless—
- (a) both of the following apply—
 - (i) the secondary purpose is related to the primary purpose of collection and, if the personal information is sensitive information, directly related to the primary purpose of collection;
 - (ii) the individual would reasonably expect the organisation to use or disclose the information for the secondary purpose; or
 - (b) the individual has consented to the use or disclosure; or
 - (c) if the use or disclosure is necessary for research, or the compilation or analysis of statistics, in the public interest, other than for publication in a form that identifies any particular individual—
 - (i) it is impracticable for the organisation to seek the individual's consent before the use or disclosure; and
 - (ii) in the case of disclosure—the organisation reasonably believes that the recipient of the information will not disclose the information; or
 - (d) the organisation reasonably believes that the use or disclosure is necessary to lessen or prevent—
 - (i) a serious threat to an individual's life, health, safety or welfare; or
 - (ii) a serious threat to public health, public safety or public welfare; or
 - (e) the organisation has reason to suspect that unlawful activity has been, is being or may be engaged in, and uses or discloses the personal information as a necessary part of its investigation of the matter or in reporting its concerns to relevant persons or authorities; or
 - (f) the use or disclosure is required or authorised by or under law; or
 - (g) the organisation reasonably believes that the use or disclosure is reasonably necessary for one or more of the following by or on behalf of a law enforcement agency—
 - (i) the prevention, detection, investigation, prosecution or punishment of criminal offences or breaches of a law imposing a penalty or sanction;
 - (ii) the enforcement of laws relating to the confiscation of the proceeds of crime;
 - (iii) the protection of the public revenue;
 - (iv) the prevention, detection, investigation or remedying of seriously improper conduct;
 - (v) the preparation for, or conduct of, proceedings before any court or tribunal, or implementation of the orders of a court or tribunal; or



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- (h) the Australian Security Intelligence Organisation (ASIO) or the Australian Secret Intelligence Service (ASIS), in connection with its functions, has requested the organisation to disclose the personal information and—
 - (i) the disclosure is made to an officer or employee of ASIO or ASIS (as the case requires) authorised in writing by the Director-General of ASIO or ASIS (as the case requires) to receive the disclosure; and
 - (ii) an officer or employee of ASIO or ASIS (as the case requires) authorised in writing by the Director-General of ASIO or ASIS (as the case requires) for the purposes of this paragraph has certified that the disclosure would be connected with the performance by ASIO or ASIS (as the case requires) of its functions.

2.2 If an organisation uses or discloses personal information under IPP 2.1(g), it must make a written note of the use or disclosure.

3 Principle 3—Data Quality

3.1 An organisation must take reasonable steps to make sure that the personal information it collects, uses or discloses is accurate, complete and up to date.

4 Principle 4—Data Security

4.1 An organisation must take reasonable steps to protect the personal information it holds from misuse and loss and from unauthorised access, modification or disclosure.

4.2 An organisation must take reasonable steps to destroy or permanently de-identify personal information if it is no longer needed for any purpose.

5 Principle 5—Openness

5.1 An organisation must set out in a document clearly expressed policies on its management of personal information. The organisation must make the document available to anyone who asks for it.

5.2 On request by a person, an organisation must take reasonable steps to let the person know, generally, what sort of personal information it holds, for what purposes, and how it collects, holds, uses and discloses that information.

6 Principle 6—Access and Correction

6.1 If an organisation holds personal information about an individual, it must provide the individual with access to the information on request by the individual, except to the extent that—

- (a) providing access would pose a serious threat to the life or health of any individual; or
- (b) providing access would have an unreasonable impact on the privacy of other individuals; or
- (c) the request for access is frivolous or vexatious; or
- (d) the information relates to existing legal proceedings between the organisation and the individual, and the information would not be accessible by the process of discovery or subpoena in those proceedings; or
- (e) providing access would reveal the intentions of the organisation in relation to negotiations with the individual in such a way as to prejudice those negotiations; or
- (f) providing access would be unlawful; or



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- (g) denying access is required or authorised by or under law; or
 - (h) providing access would be likely to prejudice an investigation of possible unlawful activity; or
 - (i) providing access would be likely to prejudice—
 - (i) the prevention, detection, investigation, prosecution or punishment of criminal offences or breaches of a law imposing a penalty or sanction; or
 - (ii) the enforcement of laws relating to the confiscation of the proceeds of crime; or
 - (iii) the protection of public revenue; or
 - (iv) the prevention, detection, investigation or remedying of seriously improper conduct; or
 - (v) the preparation for, or conduct of, proceedings before any court or tribunal, or implementation of its orders—by or on behalf of a law enforcement agency; or
 - (j) ASIO, ASIS or a law enforcement agency performing a lawful security function asks the organisation not to provide access to the information on the basis that providing access would be likely to cause damage to the security of Australia.
- 6.2 However, where providing access would reveal evaluative information generated within the organisation in connection with a commercially sensitive decision-making process, the organisation may give the individual an explanation for the commercially sensitive decision rather than direct access to the information.
- 6.3 If the organisation is not required to provide the individual with access to the information because of one or more of IPP 6.1(a) to (j) (inclusive), the organisation must, if reasonable, consider whether the use of mutually agreed intermediaries would allow sufficient access to meet the needs of both parties.
- 6.4 If an organisation charges for providing access to personal information, the organisation—
- (a) must advise an individual who requests access to personal information that the organisation will provide access on the payment of the prescribed fee; and
 - (b) may refuse access to the personal information until the fee is paid.
- 6.5 If an organisation holds personal information about an individual and the individual is able to establish that the information is not accurate, complete and up to date, the organisation must take reasonable steps to correct the information so that it is accurate, complete and up to date.
- 6.6 If the individual and the organisation disagree about whether the information is accurate, complete and up to date, and the individual asks the organisation to associate with the information a statement claiming that the information is not accurate, complete or up to date, the organisation must take reasonable steps to do so.
- 6.7 An organisation must provide reasons for denial of access or a refusal to correct personal information.
- 6.8 If an individual requests access to, or the correction of, personal information held by an organisation, the organisation must—
- (a) provide access, or reasons for the denial of access; or



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- (b) correct the personal information, or provide reasons for the refusal to correct the personal information; or
 - (c) provide reasons for the delay in responding to the request for access to or for the correction of personal information—
- as soon as practicable, but no later than 45 days after receiving the request.

7 Principle 7—Unique Identifiers

- 7.1 An organisation must not assign unique identifiers to individuals unless the assignment of unique identifiers is necessary to enable the organisation to carry out any of its functions efficiently.
- 7.2 An organisation must not adopt as its own unique identifier of an individual a unique identifier of the individual that has been assigned by another organisation unless—
 - (a) it is necessary to enable the organisation to carry out any of its functions efficiently; or
 - (b) it has obtained the consent of the individual to the use of the unique identifier; or
 - (c) it is an outsourcing organisation adopting the unique identifier created by a contracted service provider in the performance of its obligations to the organisation under a State contract.
- 7.3 An organisation must not use or disclose a unique identifier assigned to an individual by another organisation unless—
 - (a) the use or disclosure is necessary for the organisation to fulfil its obligations to the other organisation; or
 - (b) one or more of IPP 2.1(d) to (g) applies to the use or disclosure; or
 - (c) it has obtained the consent of the individual to the use or disclosure.
- 7.4 An organisation must not require an individual to provide a unique identifier in order to obtain a service unless the provision of the unique identifier is required or authorised by law or the provision is in connection with the purpose (or a directly related purpose) for which the unique identifier was assigned.

8 Principle 8—Anonymity

- 8.1 Wherever it is lawful and practicable, individuals must have the option of not identifying themselves when entering into transactions with an organisation.

9 Principle 9—Transborder Data Flows

- 9.1 An organisation may transfer personal information about an individual to someone (other than the organisation or the individual) who is outside Victoria only if—
 - (a) the organisation reasonably believes that the recipient of the information is subject to a law, binding scheme or contract which effectively upholds principles for fair handling of the information that are substantially similar to the Information Privacy Principles; or
 - (b) the individual consents to the transfer; or
 - (c) the transfer is necessary for the performance of a contract between the individual and the organisation, or for the implementation of precontractual measures taken in response to the individual's request; or



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- (d) the transfer is necessary for the conclusion or performance of a contract concluded in the interest of the individual between the organisation and a third party; or
- (e) all of the following apply—
 - (i) the transfer is for the benefit of the individual;
 - (ii) it is impracticable to obtain the consent of the individual to that transfer;
 - (iii) if it were practicable to obtain that consent, the individual would be likely to give it; or
- (f) the organisation has taken reasonable steps to ensure that the information which it has transferred will not be held, used or disclosed by the recipient of the information inconsistently with the Information Privacy Principles.

10 Principle 10—Sensitive Information

10.1 An organisation must not collect sensitive information about an individual unless—

- (a) the individual has consented; or
- (b) the collection is required or authorised under law; or
- (c) the collection is necessary to prevent or lessen a serious threat to the life or health of any individual, where the individual whom the information concerns—
 - (i) is physically or legally incapable of giving consent to the collection; or
 - (ii) physically cannot communicate consent to the collection; or
- (d) the collection is necessary for the establishment, exercise or defence of a legal or equitable claim.

10.2 Despite IPP 10.1, an organisation may collect sensitive information about an individual if—

- (a) the collection—
 - (i) is necessary for research, or the compilation or analysis of statistics, relevant to government funded targeted welfare or educational services; or
 - (ii) is of information relating to an individual's racial or ethnic origin and is collected for the purpose of providing government funded targeted welfare or educational services; and
- (b) there is no reasonably practicable alternative to collecting the information for that purpose; and
- (c) it is impracticable for the organisation to seek the individual's consent to the collection.



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9 APPENDIX 2 THE HEALTH PRIVACY PRINCIPLES

Health Records Act 2001

Schedule 1—The Health Privacy Principles

1 Principle 1—Collection

When health information may be collected

- 1.1 An organisation must not collect health information about an individual unless the information is necessary for one or more of its functions or activities and at least one of the following applies—
- (a) the individual has consented;
 - (b) the collection is required, authorised or permitted, whether expressly or impliedly, by or under law (other than a prescribed law);
 - (c) the information is necessary to provide a health service to the individual and the individual is incapable of giving consent within the meaning of section 85(3) and—
 - (i) it is not reasonably practicable to obtain the consent of an authorised representative of the individual within the meaning of section 85; or
 - (ii) the individual does not have such an authorised representative;
 - (d) the information is disclosed to the organisation in accordance with HPP 2.2(a), (f), (i) or (l) or HPP 2.5;
 - (e) if the collection is necessary for research, or the compilation or analysis of statistics, in the public interest—
 - (i) that purpose cannot be served by the collection of information that does not identify the individual or from which the individual's identity cannot reasonably be ascertained; and
 - (ii) it is impracticable for the organisation to seek the individual's consent to the collection; and
 - (iii) the information is collected in accordance with guidelines issued or approved by the Health Complaints Commissioner under section 22 for the purposes of this subparagraph;
 - (f) the collection is necessary to prevent or lessen—
 - (i) a serious threat to the life, health, safety or welfare of any individual; or
 - (ii) a serious threat to public health, public safety or public welfare—
 and the information is collected in accordance with guidelines, if any, issued or approved by the Health Complaints Commissioner under section 22 for the purposes of this paragraph;
 - (g) the collection is by or on behalf of a law enforcement agency and the organisation reasonably believes that the collection is necessary for a law enforcement function;
 - (h) the collection is necessary for the establishment, exercise or defence of a legal or equitable claim;



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- (i) the collection is in the prescribed circumstances.

How health information is to be collected

- 1.2 An organisation must collect health information only by lawful and fair means and not in an unreasonably intrusive way.
- 1.3 If it is reasonable and practicable to do so, an organisation must collect health information about an individual only from that individual.
- 1.4 At or before the time (or, if that is not practicable, as soon as practicable thereafter) an organisation collects health information about an individual from the individual, the organisation must take steps that are reasonable in the circumstances to ensure that the individual is generally aware of—
 - (a) the identity of the organisation and how to contact it; and
 - (b) the fact that he or she is able to gain access to the information; and
 - (c) the purposes for which the information is collected; and
 - (d) to whom (or the types of individuals or organisations to which) the organisation usually discloses information of that kind; and
 - (e) any law that requires the particular information to be collected; and
 - (f) the main consequences (if any) for the individual if all or part of the information is not provided.
- 1.5 If an organisation collects health information about an individual from someone else, it must take any steps that are reasonable in the circumstances to ensure that the individual is or has been made aware of the matters listed in HPP 1.4 except to the extent that making the individual aware of the matters would pose a serious threat to the life or health of any individual or would involve the disclosure of information given in confidence.
- 1.6 An organisation is not required to notify the individual of the identity of persons, or classes of persons, to whom health information may be disclosed in accordance with HPP 2.2(f).

Information given in confidence

- 1.7 If personal information is given in confidence to a health service provider about an individual by a person other than—
 - (a) the individual; or
 - (b) a health service provider in the course of, or otherwise in relation to, the provision of health services to the individual—
 with a request that the information not be communicated to the individual to whom it relates, the provider must—
 - (c) confirm with the person that the information is to remain confidential; and
 - (d) if the information remains confidential—
 - (i) record the information only if it is relevant to the provision of health services to, or the care of, the individual; and
 - (ii) take reasonable steps to ensure that the information is accurate and not misleading; and
 - (e) take reasonable steps to record that the information is given in confidence and is to remain confidential.



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2 Principle 2—Use and Disclosure

2.1 An organisation may use or disclose health information about an individual for the primary purpose for which the information was collected in accordance with HPP 1.1.

2.2 An organisation must not use or disclose health information about an individual for a purpose (the **secondary purpose**) other than the primary purpose for which the information was collected unless at least one of the following paragraphs applies —

- (a) both of the following apply—
 - (i) the secondary purpose is directly related to the primary purpose; and
 - (ii) the individual would reasonably expect the organisation to use or disclose the information for the secondary purpose; or
- (b) the individual has consented to the use or disclosure; or
- (c) the use or disclosure is required, authorised or permitted, whether expressly or impliedly, by or under law (other than a prescribed law); or
- (d) all of the following apply—
 - (i) the organisation is a health service provider providing a health service to the individual; and
 - (ii) the use or disclosure for the secondary purpose is reasonably necessary for the provision of the health service; and
 - (iii) the individual is incapable of giving consent within the meaning of section 85(3) and—
 - (A) it is not reasonably practicable to obtain the consent of an authorised representative of the individual within the meaning of section 85; or
 - (B) the individual does not have such an authorised representative; or
- (e) all of the following apply—
 - (i) the organisation is a health service provider providing a health service to the individual; and
 - (ii) the use is for the purpose of the provision of further health services to the individual by the organisation; and
 - (iii) the organisation reasonably believes that the use is necessary to ensure that the further health services are provided safely and effectively; and
 - (iv) the information is used in accordance with guidelines, if any, issued or approved by the Health Complaints Commissioner under section 22 for the purposes of this paragraph; or
- (f) the use or disclosure is for the purpose of—
 - (i) funding, management, planning, monitoring, improvement or evaluation of health services; or
 - (ii) training provided by a health service provider to employees or persons working with the organisation—

and—

 - (iii) that purpose cannot be served by the use or disclosure of information that does not identify the individual or from which the individual's identity cannot reasonably be ascertained and it is impracticable for the organisation to seek the individual's consent to the use or disclosure; or



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- (iv) reasonable steps are taken to de-identify the information—
and—
- (v) if the information is in a form that could reasonably be expected to identify individuals, the information is not published in a generally available publication; and
- (vi) the information is used or disclosed in accordance with guidelines, if any, issued or approved by the Health Complaints Commissioner under section 22 for the purposes of this subparagraph; or
- (g) if the use or disclosure is necessary for research, or the compilation or analysis of statistics, in the public interest—
 - (i) it is impracticable for the organisation to seek the individual's consent before the use or disclosure; and
 - (ii) that purpose cannot be served by the use or disclosure of information that does not identify the individual or from which the individual's identity cannot reasonably be ascertained; and
 - (iii) the use or disclosure is in accordance with guidelines issued or approved by the Health Complaints Commissioner under section 22 for the purposes of this subparagraph; and
 - (iv) in the case of disclosure—
 - (A) the organisation reasonably believes that the recipient of the health information will not disclose the health information; and
 - (B) the disclosure will not be published in a form that identifies particular individuals or from which an individual's identity can reasonably be ascertained; or
- (h) the organisation reasonably believes that the use or disclosure is necessary to lessen or prevent—
 - (i) a serious threat to an individual's life, health, safety or welfare; or
 - (ii) a serious threat to public health, public safety or public welfare—
 and the information is used or disclosed in accordance with guidelines, if any, issued or approved by the Health Complaints Commissioner under section 22 for the purposes of this paragraph; or
 - (i) the organisation has reason to suspect that unlawful activity has been, is being or may be engaged in, and uses or discloses the health information as a necessary part of its investigation of the matter or in reporting its concerns to relevant persons or authorities and, if the organisation is a registered health practitioner, the use or disclosure would not be a breach of confidence; or
 - (j) the organisation reasonably believes that the use or disclosure is reasonably necessary for a law enforcement function by or on behalf of a law enforcement agency and, if the organisation is a registered health practitioner, the use or disclosure would not be a breach of confidence; or
- (k) the use or disclosure is necessary for the establishment, exercise or defence of a legal or equitable claim; or
- (l) the use or disclosure is in the prescribed circumstances.



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Note

Nothing in HPP 2 requires an organisation to disclose health information about an individual. An organisation is always entitled not to disclose health information in the absence of a legal obligation to disclose it.

- 2.3 If an organisation discloses health information under paragraph (i) or (j) of HPP 2.2, it must make a written note of the disclosure.
- 2.4 Despite HPP 2.2, a health service provider may disclose health information about an individual to an immediate family member of the individual if—
- (a) either—
 - (i) the disclosure is necessary to provide appropriate health services to or care of the individual; or
 - (ii) the disclosure is made for compassionate reasons; and
 - (b) the disclosure is limited to the extent reasonable and necessary for the purposes mentioned in paragraph (a); and
 - (c) the individual is incapable of giving consent to the disclosure within the meaning of section 85(3); and
 - (d) the disclosure is not contrary to any wish—
 - (i) expressed by the individual before the individual became incapable of giving consent and not changed or withdrawn by the individual before then; and
 - (ii) of which the organisation is aware or could be made aware by taking reasonable steps; and
 - (e) in the case of an immediate family member who is under the age of 18 years, considering the circumstances of the disclosure, the immediate family member has sufficient maturity to receive the information.
- 2.5 Despite HPP 2.2, an organisation may use or disclose health information about an individual where—
- (a) it is known or suspected that the individual is dead; or
 - (b) it is known or suspected that the individual is missing; or
 - (c) the individual has been involved in an accident or other misadventure and is incapable of consenting to the use or disclosure—
- and the use or disclosure is to the extent reasonably necessary—
- (d) to identify the individual; or
 - (e) to ascertain the identity and location of an immediate family member or other relative of the individual for the purpose of—
 - (i) enabling a police officer, a coroner or other prescribed organisation to contact the immediate family member or other relative for compassionate reasons; or
 - (ii) to assist in the identification of the individual—
- and, in the circumstances referred to in paragraph (b) or (c)—
- (f) the use or disclosure is not contrary to any wish—



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- (i) expressed by the individual before he or she went missing or became incapable of consenting and not withdrawn by the individual; and
- (ii) of which the organisation is aware or could have become aware by taking reasonable steps; and
- (g) the information is used or disclosed in accordance with guidelines, if any, issued or approved by the Health Complaints Commissioner under section 22 for the purposes of this paragraph.

3 Principle 3—Data Quality

- 3.1 An organisation must take steps that are reasonable in the circumstances to make sure that, having regard to the purpose for which the information is to be used, the health information it collects, uses, holds or discloses is accurate, complete, up to date and relevant to its functions or activities.

4 Principle 4—Data Security and Data Retention

- 4.1 An organisation must take reasonable steps to protect the health information it holds from misuse and loss and from unauthorised access, modification or disclosure.
- 4.2 A health service provider must not delete health information relating to an individual, even if it is later found or claimed to be inaccurate, unless—
 - (a) the deletion is permitted, authorised or required by the regulations or any other law; or
 - (b) the deletion is not contrary to the regulations or any other law and occurs—
 - (i) in the case of health information collected while the individual was a child, after the individual attains the age of 25 years; or
 - (ii) in any case, more than 7 years after the last occasion on which a health service was provided to the individual by the provider—

whichever is the later.
- 4.3 A health service provider who deletes health information in accordance with HPP 4.2 must make a written note of the name of the individual to whom the health information related, the period covered by it and the date on which it was deleted.
- 4.4 A health service provider who transfers health information to another individual or organisation and does not continue to hold a record of that information must make a written note of the name and address of the individual or organisation to whom it was transferred.
- 4.5 An organisation other than a health service provider must take reasonable steps to destroy or permanently de-identify health information if it is no longer needed for the purpose for which it was collected or any other purpose authorised by this Act, the regulations made under this Act or any other law.

5 Principle 5—Openness

- 5.1 An organisation must set out in a document—
 - (a) clearly expressed policies on its management of health information; and
 - (b) the steps that an individual must take in order to obtain access to their health information.

The organisation must make the document available to anyone who asks for it.

- 5.2 On request by an individual, an organisation must take reasonable steps—



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- (a) to let the individual know—
 - (i) whether the organisation holds health information relating to the individual; and
 - (ii) the steps that the individual should take if the individual wishes to obtain access to the information; and
- (b) if the organisation holds health information relating to the individual, to let the individual know in general terms—
 - (i) the nature of the information; and
 - (ii) the purposes for which the information is used; and
 - (iii) how the organisation collects, holds, uses and discloses the information.

6 Principle 6—Access and Correction

Access

- 6.1 If an organisation holds health information about an individual, it must provide the individual with access to the information on request by the individual in accordance with Part 5, unless—
- (a) providing access would pose a serious threat to the life or health of any person under section 26 and refusing access is in accordance with guidelines, if any, issued or approved by the Health Complaints Commissioner under section 22 for the purposes of this paragraph; or
 - (b) providing access would have an unreasonable impact on the privacy of other individuals and refusing access is in accordance with guidelines, if any, issued or approved by the Health Complaints Commissioner under section 22 for the purposes of this paragraph; or
 - (c) the information relates to existing legal proceedings between the organisation and the individual and the information would not be accessible by the process of discovery in those proceedings or is subject to legal professional privilege or client legal privilege; or
 - (d) providing access would reveal the intentions of the organisation in relation to negotiations, other than about the provision of a health service, with the individual in such a way as to expose the organisation unreasonably to disadvantage; or
 - (e) the information is subject to confidentiality under section 27; or
 - (f) providing access would be unlawful; or
 - (g) denying access is required or authorised by or under law; or
 - (h) providing access would be likely to prejudice an investigation of possible unlawful activity; or
 - (i) providing access would be likely to prejudice a law enforcement function by or on behalf of a law enforcement agency; or
 - (j) a law enforcement agency performing a lawful security function asks the organisation not to provide access to the information on the basis that providing access would be likely to cause damage to the security of Australia; or
 - (k) the request for access is of a kind that has been made unsuccessfully on at least one previous occasion and there are no reasonable grounds for making the request again; or



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(l) the individual has been provided with access to the health information in accordance with Part 5 and is making an unreasonable, repeated request for access to the same information in the same way.

6.2 However, where providing access would reveal evaluative information generated within the organisation in connection with a commercially sensitive decision-making process, the organisation may give the individual an explanation for the commercially sensitive decision rather than access to the information.

Note

An organisation breaches HPP 6.1 if it relies on HPP 6.2 to give an individual an explanation for a commercially sensitive decision in circumstances where HPP 6.2 does not apply.

6.3 If access is refused on the ground that it would pose a serious threat to the life or health of the individual, the procedure in Division 3 of Part 5 applies.

6.4 Without limiting sections 26 and 27, nothing in this Principle compels an organisation to refuse to provide an individual with access to his or her health information.

Correction

6.5 If an organisation holds health information about an individual and the individual is able to establish that the information is inaccurate, incomplete, misleading or not up to date, the organisation must take reasonable steps to correct the information so that it is accurate, complete and up to date but must not delete the information otherwise than in accordance with HPP 4.2.

6.6 If—

- (a) the organisation is not willing to correct the health information in accordance with a request by the individual; and
- (b) no decision or recommendation to the effect that the information should be corrected wholly or partly in accordance with the request, is pending or has been made under this Act or any other law; and
- (c) the individual gives to the organisation a written statement concerning the requested correction—

the organisation must take reasonable steps to associate the statement with the information.

6.7 If the organisation accepts the need to correct the health information but—

- (a) the organisation considers it likely that leaving incorrect information, even if corrected, could cause harm to the individual or result in inappropriate health services or care being provided; or
- (b) the form in which the health information is held makes correction impossible; or
- (c) the corrections required are sufficiently complex or numerous for a real possibility of confusion or error to arise in relation to interpreting or reading the record if it were to be so corrected—

the organisation must place the incorrect information on a record which is not generally available to anyone involved in providing health services to the individual, and to which access is restricted, and take reasonable steps to ensure that only the corrected information is generally available to anyone who may provide health services to the individual.



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- 6.8 If an organisation corrects health information about an individual, it must—
- (a) if practicable, record with the correction the name of the person who made the correction and the date on which the correction is made; and
 - (b) take reasonable steps to notify any health service providers to whom the organisation disclosed the health information before its correction and who may reasonably be expected to rely on that information in the future.
- 6.9 If an individual requests an organisation to correct health information about the individual, the organisation must take reasonable steps to notify the individual of a decision on the request as soon as practicable but in any case not later than 30 days after the request is received by the organisation.

Written reasons

- 6.10 An organisation must provide written reasons for refusal of access or a refusal to correct health information.

7 Principle 7—Identifiers

- 7.1 An organisation may only assign identifiers to individuals if the assignment of identifiers is reasonably necessary to enable the organisation to carry out any of its functions efficiently.
- 7.2 Subject to HPP 7.4, a private sector organisation may only adopt as its own identifier of an individual an identifier of an individual that has been assigned by a public sector organisation (or by an agent of, or contractor to, a public sector organisation acting in its capacity as agent or contractor) if—
- (a) the individual has consented to the adoption of the same identifier; or
 - (b) the use or disclosure of the identifier is required or authorised by or under law.
- 7.3 Subject to HPP 7.4, a private sector organisation may only use or disclose an identifier assigned to an individual by a public sector organisation (or by an agent of, or contractor to, a public sector organisation acting in its capacity as agent or contractor) if—
- (a) the use or disclosure is required for the purpose for which it was assigned or for a secondary purpose referred to in one or more of paragraphs (c) to (l) of HPP 2.2; or
 - (b) the individual has consented to the use or disclosure; or
 - (c) the disclosure is to the public sector organisation which assigned the identifier to enable the public sector organisation to identify the individual for its own purposes.
- 7.4 If the use or disclosure of an identifier assigned to an individual by a public sector organisation is necessary for a private sector organisation to fulfil its obligations to, or requirements of, the public sector organisation, a private sector organisation may either—
- (a) adopt as its own identifier of an individual an identifier of the individual that has been assigned by the public sector organisation; or
 - (b) use or disclose an identifier of the individual that has been assigned by the public sector organisation.

8 Principle 8—Anonymity

- 8.1 Wherever it is lawful and practicable, individuals must have the option of not identifying themselves when entering transactions with an organisation.



PRIVACY POLICY

9 Principle 9—Transborder Data Flows

- 9.1 An organisation may transfer health information about an individual to someone (other than the organisation or the individual) who is outside Victoria only if—
- (a) the organisation reasonably believes that the recipient of the information is subject to a law, binding scheme or contract which effectively upholds principles for fair handling of the information that are substantially similar to the Health Privacy Principles; or
 - (b) the individual consents to the transfer; or
 - (c) the transfer is necessary for the performance of a contract between the individual and the organisation, or for the implementation of pre-contractual measures taken in response to the individual's request; or
 - (d) the transfer is necessary for the conclusion or performance of a contract concluded in the interest of the individual between the organisation and a third party; or
 - (e) all of the following apply—
 - (i) the transfer is for the benefit of the individual;
 - (ii) it is impracticable to obtain the consent of the individual to that transfer;
 - (iii) if it were practicable to obtain that consent, the individual would be likely to give it; or
 - (f) the organisation has taken reasonable steps to ensure that the information which it has transferred will not be held, used or disclosed by the recipient of the information inconsistently with the Health Privacy Principles; or
 - (g) the transfer is authorised or required by any other law.

10 Principle 10—Transfer or closure of the practice of a health service provider

- 10.1 This Principle applies if the practice or business of a health service provider (***the provider***) is to be—
- (a) sold or otherwise transferred and the provider will not be providing health services in the new practice or business; or
 - (b) closed down.
- 10.2 The provider or, if the provider is deceased, the legal representatives of the provider, must—
- (a) publish a notice in a newspaper circulating in the locality of the practice or business stating—
 - (i) that the practice or business has been, or is about to be, sold, transferred or closed down, as the case may be; and
 - (ii) the manner in which the provider proposes to deal with the health information held by the practice or business about individuals who have received health services from the provider, including whether the provider proposes to retain the information or make it available for transfer to those individuals or their health service providers; and
 - (b) take any other steps to notify individuals who have received a health service from the provider in accordance with guidelines issued or approved by the Health Complaints Commissioner under section 22 for the purposes of this paragraph.



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- 10.3 Not earlier than 21 days after giving notice in accordance with HPP 10.2, the person giving the notice must, in relation to health information about an individual held by, or on behalf of, the practice or business, elect to retain that information or transfer it to—
- (a) the health service provider, if any, who takes over the practice or business; or
 - (b) the individual or a health service provider nominated by him or her.
- 10.4 A person who elects to retain health information must continue to hold it or transfer it to a competent organisation for safe storage in Victoria, until the time, if any, when the health information is destroyed in accordance with HPP 4.
- 10.5 Subject to HPP 10.2, a person must comply with the requirements of this Principle as soon as practicable.
- 10.6 Despite any other provision of the Health Privacy Principles, a person who transfers health information in accordance with this Principle does not, by so doing, contravene the Health Privacy Principles.
- 10.7 If—
- (a) an individual, in response to a notice published under HPP 10.2, requests that health information be transferred to him or her or to a health service provider nominated by him or her; and
 - (b) the person who published the notice elects to retain the health information—
- the request must be taken to be—
- (c) in the case of a request that the health information be transferred to him or her, a request for access to that health information in accordance with Part 5 or HPP 6; and
 - (d) in the case of a request that the health information be transferred to a health service provider nominated by him or her, a request for the transfer of that health information in accordance with HPP 11—
- and it must be dealt with in accordance with this Act.
- 10.8 This Principle operates subject to any other law, including the **Public Records Act 1973**.
- 10.9 For the purposes of HPP 10.1(a), a business or practice of a provider is transferred if—
- (a) it is amalgamated with another organisation; and
 - (b) the successor organisation which is the result of the amalgamation is a private sector organisation.
- 11 Principle 11—Making information available to another health service provider**
- 11.1 If an individual—
- (a) requests a health service provider to make health information relating to the individual held by the provider available to another health service provider; or
 - (b) authorises another health service provider to request a health service provider to make health information relating to the individual held by that provider available to the requesting health service provider—
- a health service provider to whom the request is made and who holds health information about the individual must, on payment of a fee not exceeding the



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prescribed maximum fee and subject to the regulations, provide a copy or written summary of that health information to that other health service provider.

- 11.2 A health service provider must comply with the requirements of this Principle as soon as practicable.
- 11.3 Nothing in Part 5 or HPP 6 limits the operation of this Principle.
- 11.4 For the purposes of HPP 10.7, this Principle applies to a legal representative of a deceased health service provider in the same way that it applies to a health service provider.

Privacy Policy V3 – Summary of Changes

Section	Change
1 PURPOSE	The purpose has been updated to better reflect the intent of the policy
2 SCOPE	Refined the scope.
3 POLICY	Refined and developed a more concise introduction to the 3 POLICY section focussing on the relevant act and principles.
3.1 Why have a policy? (V2)	This section was removed as it was considered a duplication of 1 PURPOSE.
3.3 What is personal information? (V2)	These sections have been relocated to the 4 DEFINITIONS OF TERMS OR ABBREVIATIONS used section, and replaced with a section with practical examples of the types of personal, health and sensitive info Council collect
3.4 What is health information? (V2)	
3.5 What is sensitive information? (V2)	
3.3 How does Council manage information? (V3)	This section provides a summary of the <i>Information Privacy Principles</i> , and <i>Health Privacy Principles</i> . General updates have been made throughout to clarify the information presented, and conflicting principles have been separated (that were previously consolidated) for clarity.
3.8 Training (V2)	This section has been removed as it was considered not appropriate for inclusion with this policy and sits with Councillor and staff training policies and procedures
3.9 Public Registers (V2)	This section has been removed as it was considered a process that sits outside this policy. A definition remains in 4 DEFINITIONS OF TERMS OR ABBREVIATIONS.
3.10 Provision of Privacy Statements (V2)	This section has been removed and with key information incorporated into 3.3.1 <i>Collection (IPP 1/HPP 1) (V3)</i> and the <i>Website privacy statement</i> has been removed as it is considered a separate policy (and replaced with a statement outlining that Council will maintain a Website Privacy Statement on it's website)
4 DEFINITIONS OF TERMS OR ABBREVIATIONS USED	General update and inclusion of items relocated from the body of the policy.
acronyms	Updated and made the acronyms consistent throughout.
general	Minor formatting updates and grammatical and spelling corrections made throughout

10.3 REVIEW OF RISK MANAGEMENT DOCUMENTS

File Number:

Author: Lisa Clue, Manager Governance

Authoriser: Daniel Hirth, Acting Director Corporate

Attachments:

1. Risk Management Policy v7
2. Risk Management Framework v4
3. Risk Appetite Statement v2
4. Risk Management Implementation Plan v2
5. Summary of proposed changes

RECOMMENDATION

That Council:

1. adopts the following reviewed documents:
 - (a) Risk Management Policy v7
 - (b) Risk Management Framework v4
 - (c) Risk Appetite Statement v2
2. notes the reviewed and updated actions in the Risk Management Implementation Plan v2.

CONFLICT OF INTEREST

There is no conflict of interest for any Council staff member involved in the preparation of this report, or involved in the subject matter of the report.

PREVIOUS COUNCIL DISCUSSION

The documents presented within this report were last adopted by Council in May 2022.

Councillors most recently discussed the review of these documents at the December Council Briefing.

BACKGROUND

In response to a 2020 'Review of Risk Management Framework ISO 31000:2018' internal audit report, four key risk management documents were developed and approved by Council in May 2022.

The documents have been recently been reviewed and aligned to Council's current organisation structure and reporting forums.

The reviewed documents were presented to Council's Audit and Risk Committee (ARC) at its November meeting where they were endorsed for presentation to Council.

This report seeks Council adoption of the reviewed Risk Management Policy, Framework and Appetite Statement.

ISSUES/DISCUSSION

The Risk Management Policy outlines Council's commitment to risk management, the Risk Management Framework outlines the roles and responsibilities of those involved in risk management within Council, and the Risk Appetite Statement documents the amount of risk Council is willing to take in achieving its strategic objectives. The Risk Management

Implementation Plan compliments these documents and outlines a roadmap to risk management maturity within Council. The Plan consists four pillars, each containing several actions:

1. Risk management framework (nine actions, four of which have been completed)
2. Risk management process (seven actions, two of which has been completed)
3. Risk management culture (three actions)
4. Other strategies to improve risk (three actions, one of which has been completed).

Proposed changes to the documents presented are predominately administrative amendments, and realignment to Council's current organisation structure in terms of risk management responsibilities and reporting forums. A summary of proposed changes is attached to this Agenda report.

As further progress is made on the Risk Management Implementation Plan, the effectiveness of the Risk Management Framework and the Risk Appetite Statement's degree of alignment with Council's risk profile will become evident and trigger further reviews of those documents.

COST/BENEFITS

The benefits of the Risk Management Framework and related documents are the guidance they provide to manage risk across Council.

There are no costs related to the adoption of the reviewed documents.

RISK ANALYSIS

The documents presented form part of a suite of core risk management documents for Council designed to promote best practice risk management.

CONSULTATION AND ENGAGEMENT

The reviewed documents were presented to, and subsequently endorsed by the Audit and Risk Committee at its November meeting.



RISK MANAGEMENT POLICY

DOCUMENT TYPE:	Council policy
DOCUMENT STATUS:	Draft
POLICY OWNER POSITION:	Director Corporate
INTERNAL COMMITTEE ENDORSEMENT:	Audit and Risk Committee
APPROVED BY:	Council
DATE ADOPTED:	
VERSION NUMBER:	7
REVIEW DATE:	
DATE RESCINDED:	
RELATED STRATEGIC DOCUMENTS, POLICIES OR PROCEDURES:	Risk Management Framework Risk Management Implementation Plan Risk Management Procedure Risk Appetite Statement Occupational Health and Safety Policy ISO 31000:2018 Risk Management Guidelines
RELATED LEGISLATION:	Local Government Act 2020 Occupational Health and Safety Act 2004 Occupational Health and Safety Regulations 2017
EVIDENCE OF APPROVAL:	

Signed by Chief Executive Officer

FILE LOCATION: K:\EXECUTIVE\Strategies policies and procedures\Policies - adopted PDF and Word\POL Risk Management Policy v7.docx

Policy documents are amended from time to time, therefore you should not rely on a printed copy being the current version. Please consult the policies on the Loddon Shire website (Council Policies) or Intranet (Organisational Policies) to ensure that the version you are using is up to date.

This document is available in alternative formats (e.g. larger font) if requested.



RISK MANAGEMENT POLICY

1 PURPOSE

The purpose of this policy is to define Loddon Shire Council's commitment to risk management, and to help understand and proactively manage the effects of uncertainty on achievement of Council's objectives.

"The purpose of risk management is the creation and protection of value. It improves performance, encourages innovation and supports the achievement of objectives."¹

Risk management is an important element in supporting the Community Vision of "Creating a community where everyone is welcome and has the opportunity to live, work and thrive", and Council's Vision of "Loddon will be a resilient, sustainable and prosperous community of communities".

2 SCOPE

This policy applies to the Councillors and employees (including full time, part time and casual, agency staff and students). The policy is also applied in the management of contractors, volunteer groups and consultants of Council. The Audit and Risk Committee is a key stakeholder of this policy.

3 POLICY

ISO 31000:2018 defines risk as "the effect of uncertainty on objectives. An effect is a deviation from the expected. It can be positive, negative, or both, and can address, create or result in opportunities or threats."

Council is committed to enterprise wide risk management and will proactively manage risk in accordance with the *Australian Standard AS ISO 31000:2018: Risk management - guidelines* which documents the principles, framework, and process for achieving best practice in risk management.

To support this commitment we will:

- review strategic risks that can cause a shift in the strategic objectives documented in the Council Plan
- integrate risk management into decision making about core business operations and potential changes to services or programs by communicating Council's appetite for risk in the Risk Appetite Statement
- assign authority, responsibility and accountability for managing risk at appropriate levels within the organisation and document this in the Risk Management Framework which outlines how risk management aligns to ISO31000:2018
- ensure the necessary resources are allocated to managing risk for the whole organisation and to support officers responsible for managing risks relevant to their roles
- communicate this policy through the organisation by providing it on Council's website and discussing it at leadership group meetings
- consider whether the policy should be reviewed before its scheduled date should the internal and/or external environment change

¹ Standards Australia Limited/Standards New Zealand, ISO 31000:2018 Australian Standard Risk Management Guidelines, p2



RISK MANAGEMENT POLICY

- identify and report a suite of key risk indicators that monitor our progress and maturity in risk management as per Recording and Reporting section of the Risk Management Framework

4 RISK MATRICES CALCULATIONS

The methodology for calculating risk ratings is not documented in *ISO 31000:2018*. Therefore, the *Standards Australia, HB266:2010 Guide for managing risk in not-for-profit organisations*² has been referenced in developing Council's risk matrix.

The risk calculation matrices are in:

- Appendix A: the nature and magnitude of consequences of threat risk
- Appendix B: the likelihood of events or consequences occurring
- Appendix C: the threat risk matrix

The threat risk matrix represents the inherent risk; this can be modified through risk controls and treatments which are applied through the risk assessment process, which is documented in the Risk Management Framework.

5 DEFINITIONS OF TERMS OR ABBREVIATIONS USED

Term	Definition
Consequence	The outcome of an event affecting objectives. A consequence can be certain or uncertain and can have positive or negative direct or indirect effect on objectives. ³
Control	A measure that maintains and/or modifies risk. ⁴
Inherent risk	Represents the amount of risk that exists in the absence of controls. ⁵
Likelihood	The chance of something happening. ⁶
Residual risk	Is the amount of risk that remains after controls are accounted for. ⁷
Risk	The effect of uncertainty on objectives. An effect is a deviation from the expected. It can be positive, negative, or both, and can address, create or result in opportunities or threats. ⁸

6 HUMAN RIGHTS STATEMENT

It is considered that this policy does not impact negatively on any rights identified in the Charter of Human Rights Act. Loddon Shire Council is committed to consultation and cooperation between management and employees. The Council will formally involve elected employee Health and Safety Representatives in any workplace change that may affect the health and safety of any of its employees.

² Standards Australia Limited/ Standards New Zealand, HB266:2010: Guide for managing risk in not-for-profit organizations

³ Standards Australia Limited/ Standards New Zealand, ISO 31000:2018 Australian Standard Risk Management Guidelines, p2

⁴ Standards Australia Limited/ Standards New Zealand, ISO 31000:2018 Australian Standard Risk Management Guidelines, p2

⁵ <https://www.fairinstitute.org/blog/inherent-risk-vs.-residual-risk-explained-in-90-seconds>, Accessed: 1 March 2022

⁶ Standards Australia Limited/ Standards New Zealand, ISO 31000:2018 Australian Standard Risk Management Guidelines, p2

⁷ <https://www.fairinstitute.org/blog/inherent-risk-vs.-residual-risk-explained-in-90-seconds>, Accessed: 1 March 2022

⁸ Standards Australia Limited/ Standards New Zealand, ISO 31000:2018 Australian Standard Risk Management Guidelines, p1



RISK MANAGEMENT POLICY

7 REVIEW

The Director Corporate will review this policy for any necessary amendments no later than 4 years after adoption of this current version.



RISK MANAGEMENT POLICY

APPENDIX A: CONSEQUENCE CRITERIA

1. Insignificant	2. Minor	3. Moderate	4. Major	5. Extreme
Financial impact⁹				
<\$25K loss	\$25K to <\$100K loss	\$100K to <\$250K loss	\$250K to <\$1M loss	>\$1M loss
People Impact (Councillors, employees, volunteers, contractors, community, clients)⁹				
No lost time injury	Lost time injury <1 week	Lost time injury >1 week and <2 weeks	Lost time injury >2 weeks and <4 weeks	Lost time injury >4 weeks
First-aid treatment not requiring medical treatment	Medical treatment required at hospital or doctor's surgery	Short-term hospitalisation to one or more persons	Extensive injury or impairment to one or more people	Fatality and/or severe irreversible disability to one or more people
Reputation impact⁹				
Results in local gossip: complaint to employee	Results in regional gossip: Complaint to management	Results in regional media coverage; Senior manager departs	Results in state media coverage; or CEO departs	Results in national media coverage: or CEO departs and Councillors are removed
No negative impact on staff turnover	Reputation damage as an employer of choice within the Shire	Reputation damage as an employer of choice within Central Victoria	Reputation damage as an employer of choice within Victorian local government	Reputation damage as an employer of choice outside local government
Service output impact⁹				
Negligible disruption in standard or breadth or service	Short term disruption in standard or breadth or services (less than six months)	Medium term disruption in standard or breadth of services (six months to less than one year)	Long term disruption in standard or breadth of services (over one year and less than two years)	Sustained significant disruption in standard or breadth of service (over two years or ongoing)
Management impact⁹				
Requires some management attention over several days	Requires some senior management attention over many days up to a few weeks	Requires senior management time over several weeks	Requires considerable senior management time over several weeks to a few months	Requires significant senior management time over several months

⁹ Based on Standards Australia/Standards New Zealand, HBB266:2010 Guide for managing risk in not-for-profit organizations, p49



RISK MANAGEMENT POLICY

1. Insignificant	2. Minor	3. Moderate	4. Major	5. Extreme
Legal and compliance impact⁹				
Minor legal issues or minor breach of regulations	Breach of regulations with minor fine or legal costs, or minor litigation	Breach of regulations with investigation by regulator and possible moderate fine. Litigation and costs up to \$500K	Major breach of regulations with significant fines. Litigation involving many weeks of senior management time and costs up to \$1M	Major litigation costing over \$1M. Investigation by regulator resulting in long-term interruption of operations. Possibility of custodial sentence.
Insignificant negative impact on compliance with legislation, regulation, accreditation, standards, and policy	Short term and/or minor compliance breach with legislation, regulation, accreditation, standards, and policy	Medium term and/or moderate breach of compliance with legislation, regulation, accreditation, standards, and policy	Long term and/or major breach of compliance with legislation, regulation, accreditation, standards, and policy	Extreme breach of compliance with legislation, regulation, accreditation, standards, and policy
Environment impact				
Insignificant negative environmental impact	Minor environmental harm with no ongoing damage	Moderate environmental damage requiring short term remediation	Major environmental damage requiring medium term remediation	Extreme environmental damage requiring long term remediation



RISK MANAGEMENT POLICY

APPENDIX B: LIKELIHOOD CRITERIA

Level	Description	Example, detailed description		
5	Almost certain	There is greater than 90% chance of the consequence occurring within the next year.	Consequence is expected to occur in most times during normal operations.	Consequence could occur within days or weeks.
4	Likely	There is 60% to 90% chance of the consequences occurring within the next year.	Consequence will probably occur in most circumstances.	Consequence could occur within weeks or months.
3	Possible	There is 40% to 60% chance of the consequences occurring within the next year.	Consequence may occur under specific circumstances but there is a distinct possibility it won't occur.	Consequence could occur within months to years. No evidence of previous incidents.
2	Unlikely	There is 10% to 40% chance of the consequences occurring within the next year.	Consequence may occur but it is not anticipated.	Consequence could occur within years to decades.
1	Rare	There is less than 10% chance of the consequences occurring in the very long term.	Consequence would only occur under exceptional circumstances.	Consequence is considered a one-in-100 year event.



RISK MANAGEMENT POLICY

APPENDIX C: RISK MATRIX

Likelihood criteria	Consequence criteria				
	1 Insignificant	2 Minor	3 Moderate	4 Major	5 Extreme
5 Almost certain	5 Medium (1C5L)	10 High (2C5L)	15 High (3C5L)	20 Very High (4C5L)	25 Very High (5C5L)
4 Likely	4 Low (1C4L)	8 Medium (2C4L)	12 High (3C4L)	16 High (4C4L)	20 Very High (5C4L)
3 Possible	3 Low (1C3L)	6 Medium (2C3L)	9 Medium (3C3L)	12 High (4C3L)	15 High (5C3L)
2 Unlikely	2 Low (1C2L)	4 Low (2C2L)	6 Medium (3C2L)	8 Medium (4C2L)	10 High (5C2L)
1 Rare	1 Low (1C1L)	2 Low (2C1L)	3 Low (3C1L)	4 Low (4C1L)	5 Medium (5C1L)

LODDON SHIRE COUNCIL

RISK MANAGEMENT FRAMEWORK



DOCUMENT INFORMATION

DOCUMENT TYPE:	Strategic document
DOCUMENT STATUS:	Approved
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INTERNAL COMMITTEE ENDORSEMENT:	Audit and Risk Committee
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RELATED STRATEGIC DOCUMENTS, POLICIES OR PROCEDURES:	Risk Management Policy Risk Appetite Statement Risk Management Procedure Risk Management Implementation Plan Occupational Health and Safety Policy Fraud and Corruption Prevention Policy Fraud and Corruption Control Plan ISO31000:2018 Risk Management - Guidelines Occupational Health and Safety Plan
RELATED LEGISLATION:	Local Government Act 2020 Occupational Health and Safety Act 2004 Occupational Health and Safety Regulations 2017
EVIDENCE OF APPROVAL:	

Signed by Chief Executive Officer

FILE LOCATION: K:\EXECUTIVE\Strategies policies and procedures\Strategies - adopted PDF and Word\STR Risk Management Framework v4.docx

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1 PURPOSE

The purpose of this framework is to document:

- the principles of Loddon Shire Council's risk management system, commitment to risk management and how that operates internally
- the roles and responsibilities of risk management within Council
- the reporting structures that provide the Council with the appropriate oversight of risk management within the organisation.

Council's Risk Management Policy includes a commitment to: "Assign authority, responsibility and accountability for managing risk at appropriate levels within the organisation and document this in the Risk Management Framework which outlines how risk management aligns to ISO31000:2018."

2 INTRODUCTION

Loddon Shire Council has developed a risk management system that includes:

- Risk Management Policy
- Risk Management Framework (this document)
- Risk Management Implementation Plan
- Risk Appetite Statement
- Risk Management Procedure.¹

The framework has been developed in line with *ISO 31000:2018*, the Australian Standard for risk management. Council's approach to risk management and how that links to the Standard have been addressed in the framework.

The definition of risk in *ISO 31000:2018* is "effect of uncertainty on objectives."² The Standard further notes "An effect is a deviation from the expected. It can be positive, negative or both, and can address, create or result in opportunities and threats."³

As Council's risk maturity increases, the opportunity side of risk will be incorporated into the Risk Management Policy and this framework. For now, this framework is focussed on progressing risk management maturity on the threat side of risk.

3 SCOPE

The Risk Management Framework incorporates all risks faced by Council in achieving its strategic objectives during normal operations. They are categorised as strategic, operational and project risks.

Monitoring and reporting activities that are captured under the Road Management Act 2004 have been excluded from this framework, as they have their own monitoring and reporting requirements embedded in Council's Road Management Plan.

4 RISK MANAGEMENT OBJECTIVES

Effective risk management promotes an environment where everyone can make informed decisions that support achievement of Council's vision and strategic objectives.

¹ Risk Management Procedure development in progress

² Standards Australia Limited, *ISO Australian Standard 31000:2018 Risk Management – Guidelines*, p1

³ Standards Australia Limited, *ISO Australian Standard 31000:2018 Risk Management – Guidelines*, p1

The objectives for risk management include:

- identifying and preparing for uncertain events to reduce their impact should they arise
- supporting achievement of strategic objectives
- ensuring responsibilities and accountabilities are clearly defined
- making the necessary resources and training is available to promote a risk aware organisation
- embedding risk management into everything we do so that it becomes second nature
- promoting a risk culture across the organisation.

If we can achieve these objectives, good risk management will lead to increased performance.

5 TYPES OF RISK

Council is a complex business with a variety of services, programs, and projects. The following risk categories and types are those prevalent to Council.



This framework identifies Strategic Risk, Operational Risk, and Project Risk as the three key categories of risks. The risk management approach for each risk group is identified in this framework.

5.1 Strategic risks

Strategic risks:

- are those risks that can cause a shift in Council’s strategic objectives
- can have a long-term impact or be ongoing
- are those impacted in the most part by external events.

5.2 Operational Risks

Operational risks:

- relate to the delivery of services and programs
- can have short-term or long-term impact, or be ongoing
- are those impacted by internal or external events.

5.3 Project risks

Project risks:

- relate to the delivery of specific projects, and are the risk of an uncertain event or condition having an effect on project outcomes
- impact the project itself, and the life of the risk is limited to project delivery
- are those impacted by internal or external events.

6 ISO31000:2018 RISK MANAGEMENT – GUIDELINES

Council's Risk Management Policy and Risk Management Framework are the foundation documents that outline Council's commitment to risk management. The policy and framework are aligned to the *ISO 31000:2018*, which articulates the principles, framework, and processes for achieving best practice in risk management, as per Figure 1⁴.

The Standards are considered best practice documents, and used widely to provide a consistent guide on a particular topic.⁵

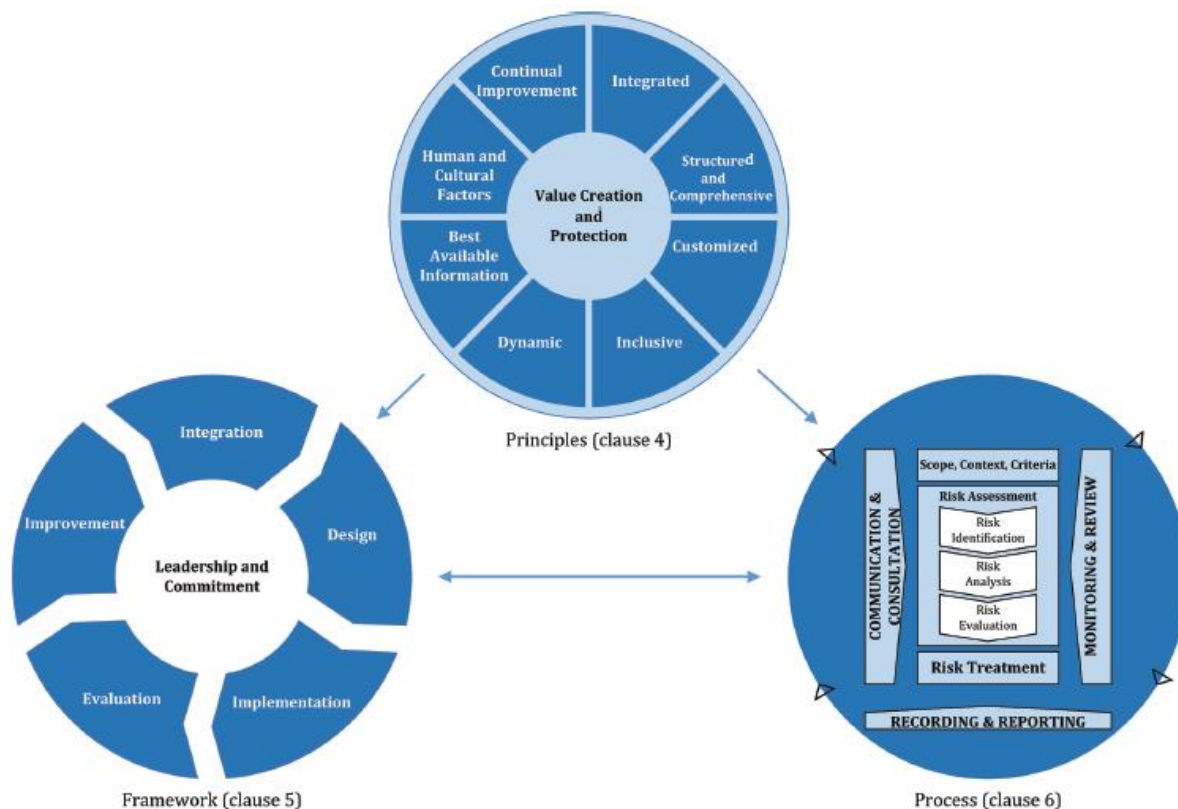


Figure 1 — Principles, framework and process

⁴ Standards Australia Limited, *ISO Australian Standard 31000:2018 Risk Management – Guidelines*, pv

⁵ ISO (International Organisation for Standardization) is an independent, non-governmental international organisation with membership from national standard bodies. It brings together experts to share knowledge and develop International Standards that support innovation and provide solutions to global challenges (<https://www.iso.org/about-us.html>, Accessed: 9 March 2022)

7 PRINCIPLES

The principles outlined in Figure 2 provide guidance on the characteristics of effective and efficient risk management, communicating its value and explaining its intention and purpose. The principles are the foundation for managing risk⁶.

Each of the principles must be evidenced for Council to be implementing effective and enterprise-wide risk management and will serve as points of reference for periodically reviewing the maturity of risk management at Council. The principles are:

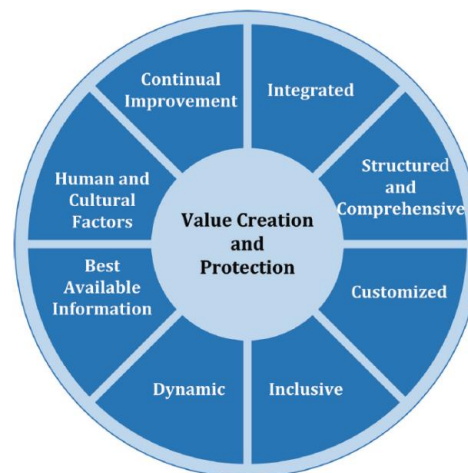


Figure 2 — Principles

- a) **Integrated:** Risk management is an integral part of all activities.
- b) **Structured and comprehensive:** A structured and comprehensive approach to risk management contributes to consistent and comparable results.
- c) **Customised:** The risk management framework and process are customised and proportionate to the external and internal context related to Council's objectives.
- d) **Inclusive:** Appropriate and timely involvement of stakeholders enables their knowledge, views and perceptions to be considered. This results in improved awareness and informed risk management.
- e) **Dynamic:** Risks can emerge, change or disappear as the external and internal context changes. Risk management anticipates, detects, acknowledges and responds to those changes and events in an appropriate and timely manner.
- f) **Best available information:** The inputs to risk management are based on historical and current information, as well as on future expectations. Risk management explicitly takes into account any limitations and uncertainties associated with such information and expectations. Information is timely, clear and available to relevant stakeholders.
- g) **Human and cultural factors:** Human behaviour and culture significantly influence all aspects of risk management at each level and stage.
- h) **Continual improvement:** Risk management is continually improved through learning and experience⁷.

When these attributes are evidenced in the organisation, Council will have a high level of risk maturity. The Risk Management Implementation Plan will assist in developing and monitoring this maturity over time.

⁶ Standards Australia Limited, *ISO Australian Standard 31000:2018 Risk Management – Guidelines*, p3

⁷ Standards Australia Limited, *ISO Australian Standard 31000:2018 Risk Management – Guidelines*, p3

8 FRAMEWORK

The purpose of the risk management framework is to assist Council in integrating risk management into significant activities and functions.

The effectiveness of risk management will depend on its Implementation into the governance of Council, including decision-making.⁸ The framework elements are:



Figure 3 — Framework

8.1 Leadership and commitment

8.1.1 Governing body

Council is ultimately responsible for risk management, and discharges the day-to-day responsibility for risk to management.

Under the Local Government Act 2020 (The Act), Section 53 mandates establishment of an Audit and Risk Committee by Council. This Council has an active Audit and Risk Committee, which has oversight responsibility for risk management on behalf of the Council.

Council evidences its commitment to risk management through the reporting structure that ensures a summary of all Audit and Risk Committee Meetings are reported to the Council. It also ensures that risk related documents, such as the Risk Management Policy, this framework, Risk Appetite Statement and Risk Management Implementation Plan, are endorsed by the Audit and Risk Committee before approval by Council.

8.1.2 Operations

Risk management is fully supported and endorsed by Council’s Management Executive Team (MEG) and Loddon Leaders (management). These groups play an integral leadership role in the organisation.

8.2 Integration

It is stated in *ISO 31000:2018* that **everyone in an organisation has responsibility for managing risk**.

Council’s approach provides an integrated model for risk management with responsibilities, with Council as the highest authority, through the layers of the organisation to individual teams who operate in a risk-focused environment.

The meeting structure for the various reporting lines for risk management has been coordinated to ensure that information flows from the ground roots of the organisation all the way to the Council. Its implementation is as follows:



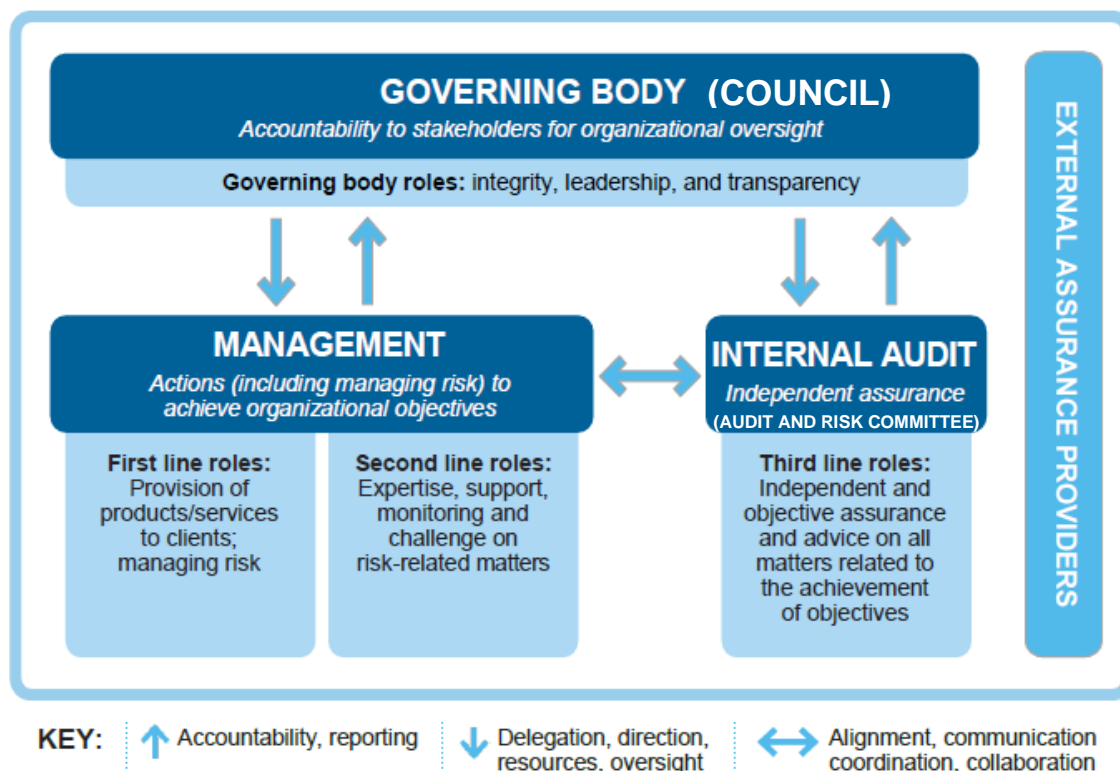
⁸ Standards Australia Limited, *ISO Australian Standard 31000:2018 Risk Management – Guidelines*, p4

Integration is further achieved through Council's internal control environment, which is based on the three lines model in managing risk.

The three lines model incorporates:

1. Management controls and internal control measures (own and manage the risks).
2. Financial controls, risk management processes, quality controls, security (such as delegations), inspection and compliance (oversee risks).
3. Assurance oversight (internal and external audit).

This diagram⁹ models Council's governance framework through the three lines model, which ensures Council is included in the reporting and awareness structure through the Audit and Risk Committee.



⁹ <https://www.iaa.org.au/technical-resources/professionalGuidance/the-iaa's-three-lines-model> Accessed: 11 May 2022.

8.2.1 The first line: operational management

As the first line, managers own and manage risks and are responsible for implementing mitigating actions to address process and control deficiencies.

They are accountable for the maintenance of effective internal controls and for executing risk and control procedures on a day-to-day basis.

Management identifies, assesses, controls, and mitigates risks, guiding the development and implementation of internal policies and procedures and ensuring that activities are consistent with goals and objectives.

This information is reported through Loddon Leaders quarterly compliance meetings.

8.2.2 The second line: oversee risks

The second line comprises various risk management and compliance functions to help build, maintain and monitor the first line controls.

Functions include:

- risk management functions by management that assist risk owners in identifying and analysing risks in their areas of the organisation, ensuring they are monitored and acted upon when they are outside tolerance, and reported in accordance with documented procedures
- compliance functions to monitor various specific risks such as noncompliance with applicable laws and regulations, finance, governance, procurement, occupational health and safety and project management.

Specific responsibilities of these functions include:

- identifying and recording emerging risks
- monitoring existing risks
- following the risk management framework protocols
- adhering to policies and procedures
- identifying shifts in Council's internal and external environment
- responding to emerging issues and changing regulatory risks
- undertaking training on risk management processes
- assisting in the development of processes and controls to manage risks.

This information is reported through Loddon Leaders and the Audit and Risk Committee.

8.2.3 The third line: internal audit

The internal audit function provides Council and management with comprehensive assurance based on the highest level of independence and objectivity.

This function is overseen by the Audit and Risk Committee and provides assurance on the effectiveness of governance, risk management, compliance, and internal controls, including the manner in which the first and second lines achieve risk management and control objectives.

The function actively contributes to effective organisational governance providing best practice conditions are met, such as:

- the function is independent (external contractor)
- it performs its role in accordance with recognised international standards for the practice of internal auditing
- it reports and is able to perform its duties independently, reporting through to the Audit and Risk Committee, which has independent membership
- it has an active link to Council via Councillor membership on the Audit and Risk Committee and biannual reporting to Council.

In addition to the internal audit function, the Audit and Risk Committee reviews the annual Financial Statements and Performance Statement, which are audited by the Auditor-General Victoria's contractor; sometimes referred to as the fourth line.

This information is reported to the Audit and Risk Committee and the Council.

8.3 Design

8.3.1 Understanding the organisation and its context

Council is a complex business, and has significant external contexts under which it operates. This was prevalent with the global spread and impact of COVID-19 across the world, and at a very local level.

ISO31000:2018 includes "social, cultural, political, legal, regulatory, financial, technological, economic and environmental factors, whether international, national, regional or local"¹⁰ and each of these are relevant to Council's business.

Internally, Council operates in a highly regulated environment, and that is reflected in many of the internal contexts identified below. In many ways, a regulated environment can be easier to implement frameworks such as this Risk Management Framework because roles, responsibilities, accountabilities and delegated authorities are very clear, and easy to communicate.

"Internal context may include, but is not limited to:

- Council's vision, mission and values;
- governance, organisational structure, roles and accountabilities;
- strategy, objectives and policies; culture;
- standards and guidelines adopted by the organisation;
- capabilities, understood in terms of resources and knowledge (e.g. capital, time, people, intellectual property, processes, systems and technologies);
- data, information systems and information flows;
- relationships with internal stakeholders, taking into account their perceptions and values; contractual relationships; and
- commitments."¹¹

The consequence table in the Risk Management Policy has various consequence types associated with Council's operations which address many of the contextual items listed.

8.3.2 Articulating risk management commitment

Council's commitment to risk management is articulated in the governance structure whereby Council is the approval authority for all key risk documents such as the Risk Management Policy, this framework, Risk Management Implementation Plan, and Risk Appetite Statement. Review and approval of these documents provides Council with the appropriate oversight of risk within the organisation.

8.3.3 Assigning organisational roles, authorities, responsibilities and accountabilities

The roles and responsibilities for risk management are provided in the Local Government Act 2020, Council's committee charters and terms of reference, and positions descriptions for staff. They are fully documented in Section 9: Roles and Responsibilities within this framework.

¹⁰ Standards Australia Limited, *ISO Australian Standard 31000:2018 Risk Management – Guidelines*, p6

¹¹ Standards Australia Limited, *ISO Australian Standard 31000:2018 Risk Management – Guidelines*, p6

8.3.4 Allocating resources

The Director Corporate is the key resource for risk management, supported by the Governance Team. This team oversees risks under the “governance-risk-compliance” spectrum, which includes broad corporate risks and regulatory risk.

Council’s Manager Governance is responsible for facilitating a culture of best practice in safety risk management (OH&S) across the organisation.

However, risk management is everybody’s responsibility at Council and this requires an ongoing awareness of the environment. The Director Corporate, supported by the Governance Team, assists teams with identification and assessment of their risks and development of risk registers. Managers are available to support their teams to increase their awareness and knowledge of risk management relevant to their area of operations.

8.3.5 Establishing communication and consultation

The importance of communication and consultation around risk management cannot be underestimated. It serves as a preventative tool, and a response tool as a learning activity where incidents are reported back to the organisation.

To ensure risk management is communicated broadly across the organisation:

- there are online learning and development modules targeted at specific risk areas (such as fraud and corruption, privacy, etc.)
- risk management documents are available from the intranet and communicated to staff periodically, including during and following their review
- Governance team submits items for the staff newsletter to increase awareness
- there are safety conversations at team levels
- there is an Occupational Health and Safety Plan, an Occupational Health and Safety webpage, and an annual learning and development calendar that captures safety compliance training
- there is a Health and Wellbeing webpage on the intranet, and an annual calendar promoting health and wellbeing initiatives.

8.4 Implementation

Everyone within Council has a role within the risk management program, and is encouraged to identify risks and have them registered and reported through the appropriate channels.

Specifically, the Council, through the Local Government Performance Reporting Framework, is responsible for identifying its strategic risks to Council’s operations, their likelihood and consequences of occurring and risk minimisation strategies for those risks.

The Audit and Risk Committee has oversight of the governance, compliance and risk environment, and ensuring that the internal control environment is sufficient, and where it needs improving, recommending inclusion of internal audit reviews in the Strategic Internal Audit Plan.

Loddon Leaders has the responsibility to promote a culture of risk management throughout the Council by:

- actively identifying and assessing current and emerging risks and ensuring they are accurately reflected in the Operational Risk Register
- embedding a risk management culture across the organisation through their actions and advocacy for the risk management program
- providing advice on continual improvement of the management of risk.

The Director Corporate has the ultimate organisational responsibility for the risk management program ensuring:

- all risk management documents are reviewed and updated through the authorising environment
- any risks outside appetite are escalated, as per Section 9.5: Monitoring and Review of this framework
- reporting is provided to Loddon Leaders, the Audit and Risk Committee, and Council.

The Manager Governance is responsible for occupational health and safety risk and promoting a safety culture.

Project managers and project officers are responsible for managing risks related to their specific projects.

8.5 Evaluation

The core risk management documents are subject to regular review to ensure they remain relevant for Council's operations. The Risk Management Implementation Plan, which is the plan to drive continuous improvement in risk management, is subject to annual review to ensure completion of current actions and develop new actions to increase risk maturity at Council. During its review, the effectiveness of the risk management program is evaluated to ensure activities are adding value, and risk management maturity is increasing.

8.6 Improvement

8.6.1 Adapting

Council reviews strategic risks every six months to understand any changes to the internal or external context.

The Audit and Risk Committee annually reviews the Strategic Internal Audit Plan, a risk based plan that identifies internal audit reviews that address the most significant risks and/or add the best value to Council's operations.

Loddon Leaders assesses emerging operational risks from changes to the external and internal environment, and ensures that risk assessments are undertaken for newly identified risks.

Project managers and project officers have an ongoing role throughout the life of projects to ensure that the internal and external context is reviewed and risks assessed accordingly.

8.6.2 Continually improving

The Risk Management Implementation Plan identifies actions to increase Council's risk management maturity under the headings of:

- Risk management framework
- Risk management process
- Risk culture.

The actions in the plan will progressively be completed, and progress will be reported back to Council via the Audit and Risk Committee.

The plan will be reviewed periodically to ensure new actions are captured and monitored. In the same way, the core risk management documents are subject to regular review to ensure they remain relevant for the Council.

9 PROCESS

“The risk management process should be an integral part of management and decision-making and integrated into the structure, operations and processes of the organisation. It can be applied at strategic, operational, programme or project levels.”¹² The elements of the process are:

9.1 Communication and consultation

Communication of the risk management process is a fundamental part of best practice risk management and of an enterprise risk management framework.

Section 8.3.5 identifies the communication and consultation mechanisms.

9.2 Scope, context and criteria

9.2.1 Defining the scope

The Council, through the Local Government Performance Reporting Framework, is responsible for identifying its strategic risks to Council’s operations, their likelihood and consequences of occurring and risk minimisation strategies for those risks.

In accordance with the Act, the Council has provided the Audit and Risk Committee with responsibility for overseeing risk management. Specifically, the Committee is responsible for overseeing strategic risks and operating risks.

Loddon Leaders is responsible for assessing operating risks.

Council officers are also responsible for identifying and assessing operational and project risks in their area of Council operations.

Project managers and project officers are responsible for assessing project risks.

The Manager Governance is responsible for ensuring relevant corporate frameworks exist to support Council’s compliance with Occupational Health and Safety related legislation and regulations and provide advice and support to staff on health and safety related matters.

The Health and Wellbeing Committee is responsible for promoting wellbeing activities across the organisation that support the work of the Occupational Health and Safety Committee in emotional or mental health safety.

9.2.2 External and internal context

As risk identification, assessment, and analysis is undertaken at officer level, it is undertaken from knowledge about the internal and external context for that officer’s role and team’s operations.

9.2.3 Defining risk criteria

The Standard states: “the organisation should specify the amount and type of risk that it may or may not take, relative to objectives.”¹³

Council’s Risk Management Policy documents likelihood and consequence criteria for assessing Council’s risks. The consequence criteria are set with consideration of Council’s not-for-profit environment, and have been informed by *Standards Australia Limited/Standards New Zealand*,

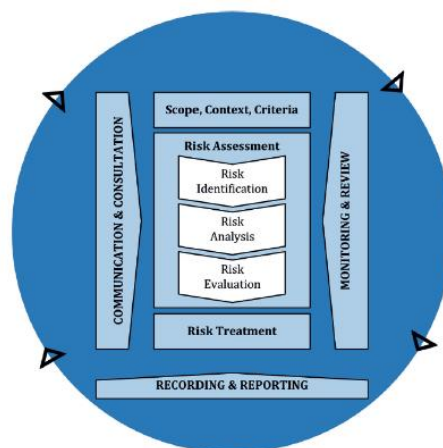


Figure 4 – Process

¹² Standards Australia Limited, *ISO Australian Standard 31000:2018 Risk Management – Guidelines*, p9

¹³ Standards Australia Limited, *ISO Australian Standard 31000:2018 Risk Management – Guidelines*, p10

HB266:2010 Guide for managing risk in not-for-profit organizations and includes a number of consequence types that Council must consider.

9.3 Risk assessment

Risk assessment is the overall process of risk identification, risk analysis and risk evaluation, each of which are detailed below.

Risk assessments are conducted systematically and collaboratively, with input from key stakeholders and using the best available information and further investigation as required.

9.3.1 Risk identification

The purpose of risk identification is to find and describe risks that may prevent Council achieving its objectives, and should consider:

- what events could prevent achievement of objectives and how impactful they are on this
- vulnerabilities in systems and processes that need to be addressed
- changes in the external and internal context that may be creating emerging risks.

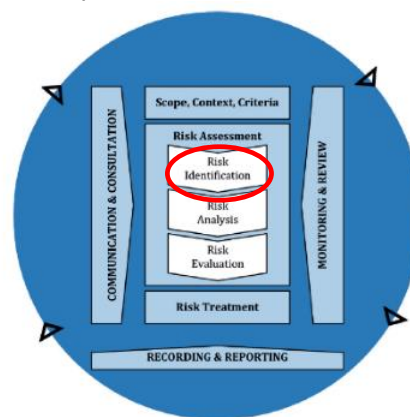


Figure 4 — Process

Council has a number of forums and processes for identifying risks, which include:

Forum	Details
Communication and awareness	Notification by staff to their manager or the Manager Governance of a potential or actual risk which results, or may result in an incident report
	Notification by community members to Council of a potential or actual risk which results, or may result in an incident report
Meeting structure	Department based team meetings, including tool box meetings for outdoor staff
	Maternal and child health staff in-service meetings
	Occupational Health and Safety Committee meetings
	Health and Wellbeing Committee meetings
	Management Executive Group and Loddon Leaders meetings
	Audit and Risk Committee meetings
Event	All staff meetings
Audits	Incidents, accidents and near misses that happen in the workplace or in the community environment that are reported to Council and investigated for root cause
	Internal audit program, which is a risk based program focusing on new or emerging risks, identified on an annual basis, with scope to change priorities if needed
	Insurance audits
	WorkSafe audits
Processes	External (financial) audits
	Requirement for contractors to meet minimum compliance standards prior to being engaged
	Workplace inspections which are undertaken twice per year
	Business impact analysis from the Business Continuity Plan which are undertaken; one directorate per quarter
Documentation	Registers for hazardous substances which are reviewed periodically

The product from risk identification is a risk statement. A good risk statement incorporates the following elements:



Example:

The requirement by Council to limit annual rates increases under the Fair Go Rates System parameters (Cause) limits Council’s ability to raise rating revenue annually (Risk) which may result in Council becoming financial unsustainability over time (Impact).

Consideration of each element above will ensure risk statements are sufficiently clear for others to understand.

9.3.2 Risk analysis

The purpose of risk analysis is to understand the nature of the risk, the likelihood of it happening, the consequence of it happening, and whether we have any mitigating controls in place to reduce the risk.

This process enables each of the identified risks to be consistently rated so that the relative priority of risk treatments can be determined.

Informal risk analysis is undertaken daily by officers during their work, much of the time without even thinking of it. An example of this is wiping water off the kitchen floor so no one slips on it.

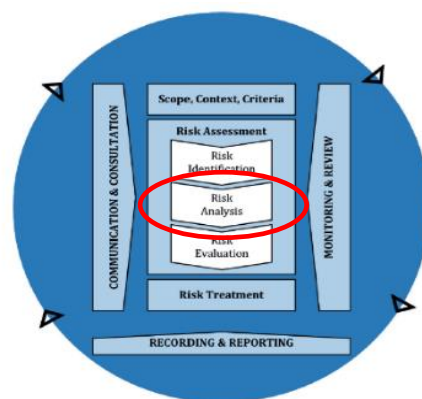
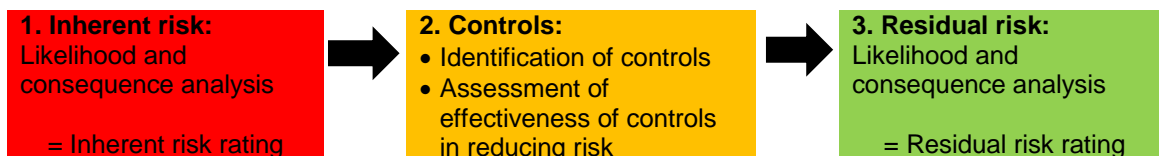


Figure 4 – Process

Formal risk analysis is undertaken with a software program (Reliansys Risk Module) that records the risk, and where analysis of the risk is undertaken. It is a three step approach (as per below), and inputs into this program create risk registers.



9.3.2.1 Inherent risk

Inherent risk is the risk assessment undertaken without considering any controls. It is an important first step in analysing the risk to understand the whole impact of the risk should controls not be effective, or fail. This is an analysis of worst-case scenario.

9.3.2.2 Current controls

A control is a measure or action that modifies or regulates risk. The goal is to modify the risk down to a lower rating. Controls include policies, procedures, work practices and processes, technology, just to name a few.

Controls can be:

1. Preventive: a control that prevents a risk from occurring
2. Detective: a control that detects risks prior to them occurring or while they are in motion
3. Corrective: controls that are put in place after a risk event occurs to reduce the impact of the risk.
4. Reactive: a control that is put in place after an risk event

The effectiveness of controls is an important consideration when analysing risk, and Council’s software program provides guidance on how to assess controls.

9.3.2.3 *Residual risk*

The residual risk is the amount of risk that remains after controls are documented, and represents the risk in its current state. It is important that the risk analysis is undertaken over time on each risk to understand whether the residual risk remains, and whether it sits within risk appetite.

In order to undertake risk analysis the Risk Management Policy must be referenced, as it has the Consequence Criteria (in Appendix A) and the Likelihood Criteria (in Appendix B).

In addition to this, the Risk Management Procedure will assist risk owners in the analysis and use of RelianSys Risk Module.

9.3.3 Risk evaluation

The purpose of risk evaluation is to compare the risk analysis results against Council’s risk appetite to determine where additional action is needed. The ideal scenario is to implement controls to a risk level that is acceptable to Council (i.e. within the risk appetite) with surety that the controls are effective.

If this does not happen, possible decisions include:

- do nothing
- further investigate to better understand the risk
- maintain existing controls
- increase controls
- reconsider strategic objectives
- consider risk treatment options.

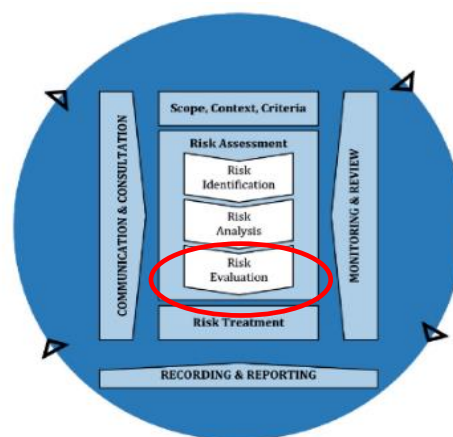


Figure 4 — Process

Any risks that have a residual risk rating of Very High (unconditional) and High (conditional) must have treatments identified and implemented with the objective of improving the control environment and reducing the likelihood, consequence, or both.

9.4 Risk treatment

9.4.1 Selection of risk treatment options

Risk treatments are designed to minimise the risk. Deciding on the most appropriate risk treatment will be undertaken by “balancing the potential benefits derived in relation to the achievement of the objectives against costs, effort or disadvantages of implementation.”¹⁴

Risk treatment involves an iterative process of:

- formulating and selecting risk treatments
- planning and implementing risk treatments
- assessing effectiveness of risk treatments
- deciding whether the resulting residual risk is acceptable
- taking further treatment actions if the residual risk is not acceptable.

¹⁴ Standards Australia Limited, *ISO Australian Standard 31000:2018 Risk Management – Guidelines*, p10
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Examples of risk treatments are:

Risk treatment	Application of risk treatment
Take risk	Pursue an opportunity that falls within Council's risk appetite
Remove risk source	Remove whatever is creating the risk for Council
Change likelihood or consequence	<ul style="list-style-type: none"> • Train staff in procedures • Test procedures to ensure they are sound • Implement monitoring and control program, e.g. Fraud and Corruption Control Plan • Implement a strong governance framework for policies and procedures • Corrective actions resulting from incident reports • Implement Business Continuity Plan • Implement Disaster Recovery Plan (for IT) • Regularly review instruments of delegation of powers, duties and function • Risk-based internal audit program
Share the risk	Transfer part or all of the risk through insurance contracts, outsourcing the risk through commercial contracts, partnerships, etc.
Avoid the risk	Decide not to start or continue with the activity that gives rise to the risk
Retain the risk	Accept the risk by choice as the risk falls within the Council's risk appetite

9.4.2 Preparing and implementing risk treatment plans

Risk treatment plans provide documentation of corporate assumptions and actions, which helps during reassessment of risks in identifying the rationale for why a risk treatment was selected.

A risk mature organisation will implement risk treatment plans where required following risk evaluation. Council has not previously implemented risk treatment plans, but this will be a continuous improvement activity embedded through the work of Loddon Leaders.

9.5 Monitoring and review

In addition to being an important continuous improvement activity, monitoring and review of the risk registers ensures that risk assessments and risk treatments are current for the objectives of the Council.

Monitoring will be incorporated into reporting cycles as follows:

- Council will monitor strategic risks every six months.
- The Audit and Risk Committee will monitor strategic and operational risks every quarter, with strategic risks provided in quarter 1 and 3 and operational risks provided in quarter 2 and 4.
- Loddon Leaders will monitor operational risks.
- The Occupational Health and Safety Committee will monitor safety risks, which includes assessment of near misses, hazards, and safety incidents.
- The Management Executive Group, project managers and project officers will monitor project risks throughout the life of a project.
- All risk owners will monitor their specific risks, and escalate them through the appropriate channels when they are outside of risk appetite.

Reporting of risks is covered in the next section of this framework; however, between reporting cycles, risks should be monitored and must be escalated where a risk rating is increased through the review.

Strategic risks and project risks are subject to specific monitoring and review outside this framework.

The following are the monitoring and review parameters for escalation of **operational risks**:

Residual risk level	Risk acceptance	Recommended management response	Timeframe	Responsibility
Very high	Unacceptable region: Action required: Risk can only be allowed to continue under exceptional circumstances and with the approval of CEO.	Immediate notification to the CEO	Immediate	Relevant director
		Risk activity is to cease unless the CEO agrees that it can continue; however, risk treatment plans must be implemented as a priority	Interim action within 7 days	Risk owner with support from relevant manager
			Detailed risk treatment plan within 14 days	Risk owner with support from relevant manager
		Reported to Audit and Risk Committee at next meeting	Weekly monitoring, or more if directed by CEO	Risk owner
High	Tolerable region: Monitoring required: Risk mitigation efforts must increase to reduce the risk as far as reasonably practicable, unless cost significantly outweighs the benefit or reduction is impracticable.	Immediate notification to relevant director	Immediate	Relevant manager
		Risk monitored, and if the threat remains after 14 days, a risk treatment plan must be developed and implemented	Interim action within 14 days	Risk owner with support from relevant manager
			Detailed risk treatment plan within 30 days	Risk owner with support from relevant manager
		Reported to Audit and Risk Committee at next meeting	Fortnightly monitoring, or more if directed by relevant director	Risk owner
Medium	Tolerable region: Monitoring required: Confirm risk mitigation efforts are effective in reducing the risk as far as reasonably practicable.	Risk monitored	Quarterly	Risk owner
		Continue to manage as part of ongoing operations		Risk owner
		Review quarterly, or if anything changes within the quarter		Risk owner

Residual risk level	Risk acceptance	Recommended management response	Timeframe	Responsibility
Low	Acceptable region: No action required: No further risk reduction actions are required	Risk monitored	Annually	Risk owner
		Continue to manage as part of ongoing operations		Risk owner
		Review annually, or if anything changes within the year		Risk owner

9.6 Recording and reporting

The risk management process and its outcomes are recorded in a strategic risk register, project risk registers, a fraud risk register and various operational risk registers.

The purpose of recording and reporting is to:

- provide an enterprise-wide risk profile to the Management Executive Group, Audit and Risk Committee and Council
- understand whether the risk profile is within Council’s risk appetite
- drive best practice in risk management which will improve performance management
- provide good information to inform decision-making.

The governance framework for risk management ensures that reporting is provided to Council through the committee structure that includes the Health and Safety Committee, Loddon Leaders and the Audit and Risk Committee, and this has been documented earlier in this framework. The following is the reporting cycle for risk management:

Reporting to	Minimum review frequency	Reporting by	Authorising and reporting mechanism
Strategic risk			
Council	Six-monthly, as per Local Government Act 2020 and Local Government Performance Reporting Framework	Audit and Risk Committee (through the Director Corporate)	<i>For approval:</i> Detailed report of “strategic risks to Council’s operations, their likelihood and consequences of occurring and risk minimisation strategies“
	As required if Council changes strategic direction	Audit and Risk Committee (through the Director Corporate)	<i>For approval:</i> Detailed report around change in strategic direction and the impact on the current Strategic Risk Register
Audit and Risk Committee	Six-monthly, as per Local Government Act 2020 and Local Government Performance Reporting Framework	Director Corporate	<i>For endorsing:</i> Detailed report of “strategic risks to Council’s operations, their likelihood and consequences of occurring and risk minimisation strategies“

Reporting to	Minimum review frequency	Reporting by	Authorising and reporting mechanism
	As required if Council changes strategic direction	Director Corporate	<i>For endorsing:</i> Detailed report around change in strategic direction and the impact on the current Strategic Risk Register
Project risk			
Management Executive Group	Report following completion of each project phase	Project managers	<i>For monitoring:</i> Detailed report about key projects and their risk status: financial, time, stakeholder, etc.
Operational risk			
Council	Six monthly, as per the Local Government Act 2020	Audit and Risk Committee (through the Director Corporate)	<i>For approval:</i> Summary report through Audit and Risk Committee Biannual Report of Activities of the Committee
	As required if internal or external context changes significantly or Council changes programs or services	Audit and Risk Committee (through the Director Corporate)	<i>For approval:</i> Detailed report around change in context or services or programs and the impact on Operational Risk Registers
Audit and Risk Committee	Six-monthly (in the quarters that Strategic Risk is not provided to the Committee)	Director Corporate	<i>For endorsing:</i> <ul style="list-style-type: none"> • Overall risk profile • Detail of very high and high risks and any risk treatment plans in place • New and emerging risks • Detailed report of operational risks • Summary of Loddon Leaders compliance meeting
	As required if internal or external context changes significantly or Council changes programs or services	Director Corporate	<i>For endorsing:</i> Detailed report around change in context or services or programs and the impact on Operational Risk Registers

Reporting to	Minimum review frequency	Reporting by	Authorising and reporting mechanism
Loddon Leaders (Compliance meeting)	Quarterly report	Manager Governance	<i>For monitoring:</i> <ul style="list-style-type: none"> New and emerging risks Detail of very high and high risks and any risk treatment plans in place Sample assessment of risks across directorates Summary of OH&S Committee Meeting
Occupational Health and Safety (OH&S) Committee	Quarterly Report	Manager Governance	<i>For monitoring and action:</i> <ul style="list-style-type: none"> Details of hazards, near misses, and incidents Details of risk mitigation activities
Management Executive Group	Quarterly report	Director Corporate	<i>For monitoring:</i> <ul style="list-style-type: none"> New and emerging risks Risk profile and changes to the profile from the previous quarter Detail of very high and high risks and any risk treatment plans in place

10 ROLES AND RESPONSIBILITIES

Risk management is an integral part of an organisation’s governance structure, and exists to ensure that the organisation achieves its objectives. It is therefore, aligned to performance management. ***Every member of the organisation has a responsibility to manage risk.***

10.1 Council

Although risk management is a day-to-day responsibility of management, as the most senior authority, risk management is the ultimate responsibility of Council. Council delegates via the Act oversight responsibility for risk management to the Audit and Risk Committee.

The reporting structure ensures that Council is provided with regular reports on risk management via the Audit and Risk Committee Report, presented to Council following each Audit and Risk Committee Meeting.

Under Section 9(2)(c) of the Act, Council must give effect to the overarching governance principles in the performance of its role, which includes: “the economic, social and environmental sustainability of the municipal district, including mitigation and planning for climate change risks, is to be promoted”.

The Council also considers a six-monthly report on the Committee’s activities in accordance with Section 54(5) of the Act.

Under the Local Government Performance Reporting Framework, Council has the responsibility of producing six-monthly reports on strategic risks to Council’s operations, their likelihood and consequence of occurring, and risk minimisation strategies.

In addition to the above, Council's responsibilities are to:

- perform its role as a Council and makes decisions in the context of risk
- review and approve the Risk Management Policy, Risk Management Framework, and Risk Appetite Statement
- review and approve the Risk Management Implementation Plan ensuring that actions are completed and new actions identified to progress risk management maturity.

10.2 Audit and Risk Committee

Council has established an Audit and Risk Committee pursuant to section 53 of the Local Government Act 2020 to support it in discharging its oversight responsibilities, including those related to risk management, reflected in the Audit and Risk Committee Charter.

The Committee meeting agendas include some aspect of risk management, including outstanding audit actions that have been identified through internal audits to mitigate risks, half yearly updates on the actions in Risk Management Implementation Plan, and sector reports from Local Government Inspectorate, Auditor-General Victoria, Ombudsman Victoria and the Independent Broad-Based Anti-Corruption Commission.

Section 54(5) of the Act states the committee must:

- a) prepare a biannual audit and risk report that describes the activities of the Audit and Risk Committee and includes its findings and recommendations; and
- b) provide a copy of the biannual audit and risk report to the Chief Executive Officer for tabling at the next Council meeting.

In addition to this report, a summary of Audit and Risk Committee meetings is provided to the Council at the Council Meeting following the Audit and Risk Committee Meeting.

The Audit and Risk Committee reviews and endorses risk management documents before they are presented to Council for approval.

10.3 Loddon Leaders

The Loddon Leaders Terms of Reference outlines the relevant risk management responsibilities, and as risk maturity increases, it is expected the Terms of Reference will evolve over time.

10.4 Management Executive Group

The Management Executive Group, comprising the Chief Executive Officer and three directors, are advocates of best practice risk management for the organisation. To provide them with oversight of the risk management environment, they are provided with quarterly reports around Council's risks. This ensures that they are aware of new and emerging risks and understand the status of the risk profile.

10.5 Managers

As well as having risk management responsibilities in their own right and responsibilities associated with Loddon Leaders, managers have the added responsibility of ensuring that their staff are aware of their risk management responsibilities, that they act in a safe and responsible manner, and are reporting new and emerging risks in their area of the organisation.

10.6 Director Corporate

The overarching coordination of risk management for Council lies with the Director Corporate, who has a key role in developing and reviewing risk management documentation, facilitating the Audit and Risk Committee, managing outstanding actions resulting from internal audit reviews

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that identify risk mitigation activities, providing advice to staff, and monitoring the effectiveness of Council's risk management software.

10.7 Manager Governance

The Manager Governance has responsibility for ensuring relevant corporate frameworks exist to support workplace safety, including management of safety hazards, near misses and incidents.

10.8 Staff, contractors and volunteers

10.8.1 Staff

The induction process for staff articulates Council's commitment to provide a safe environment for staff, the community, and travelling public. To support this commitment, every position description developed for Council staff includes a standard OH&S clause.

An induction module around general risk management is being developed to provide staff with the knowledge and expectations around risk management while working with Council.

10.8.2 Contractors

Council will not engage contractors unless they have been verified through a process that includes providing certificates of currency for insurances, and depending on the level of risk associated with their activities, evidence of safety systems.

This provides some certainty that contractors being engaged by Council have the same level of commitment to a safe working environment, particularly as many of Council's contractors work in the open around community and the travelling public.

10.8.3 Volunteers

Council engages volunteers for the delivery of a range of services to the community. Council's Volunteers' Code of Conduct, which is being developed, will contain minimum standards expected of volunteers around safe operating practices.

In addition to this, there will be a dedicated volunteer induction portal that will require new volunteers to adhere to compliance such as Working with Children Checks, Police Checks, etc.

11 DEFINITIONS OF TERMS OR ABBREVIATIONS USED

Term	Definition
Consequence	The outcome of an event affecting objectives. Objectives can be strategic objectives outlined in the Council Plan, specific project objectives, or objectives relating to standard Council operations and activities. A consequence can be certain or uncertain and can have positive or negative direct or indirect effect on objectives. ¹⁵
Control	A measure that maintains and/or modifies risk. ¹⁶
Inherent risk	Represents the amount of risk that exists in the absence of controls. ¹⁷
Likelihood	The chance of something happening. ¹⁸
Residual risk	Is the amount of risk that remains after controls are accounted for. ¹⁹

¹⁵ Standards Australia Limited/ Standards New Zealand, ISO 31000:2018 Australian Standard Risk Management Guidelines, p2

¹⁶ Standards Australia Limited/ Standards New Zealand, ISO 31000:2018 Australian Standard Risk Management Guidelines, p2

¹⁷ <https://www.fairinstitute.org/blog/inherent-risk-vs.-residual-risk-explained-in-90-seconds>, Accessed: 1 March 2022

¹⁸ Standards Australia Limited/ Standards New Zealand, ISO 31000:2018 Australian Standard Risk Management Guidelines, p2

¹⁹ <https://www.fairinstitute.org/blog/inherent-risk-vs.-residual-risk-explained-in-90-seconds>, Accessed: 1 March 2022

Term	Definition
Risk	The effect of uncertainty on objectives. An effect is a deviation from the expected. It can be positive, negative, or both, and can address, create or result in opportunities or threats. ²⁰
Risk appetite	The amount of risk the Council is willing to accept in pursuit of strategic objectives.
Risk assessment	The overall process of risk identification, analysis, and evaluation. ²¹
Risk management	Coordinated activities to direct and control an organisation regarding risk. ²²

12 TRAINING

Training in risk management concepts and the risk management process will be provided for staff upon induction and refresher training. To support a commitment to this, training has been identified on the Risk Management Implementation Plan as an ongoing action.

13 REVIEW

All risk management documentation is reviewed periodically to ensure it remains current for Council activities. This framework, having had its first review, will now be reviewed as required, but no later than four years from the adoption of this version.

²⁰ Standards Australia Limited/ Standards New Zealand, ISO 31000:2018 Australian Standard Risk Management Guidelines, p1

²¹ ²¹ Standards Australia Limited/ Standards New Zealand, ISO 31000:2018 Australian Standard Risk Management Guidelines, p11

²² ²² Standards Australia Limited/ Standards New Zealand, ISO 31000:2018 Australian Standard Risk Management Guidelines, p1

LODDON SHIRE COUNCIL

RISK APPETITE STATEMENT



DOCUMENT INFORMATION

DOCUMENT TYPE:	Strategic document
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EVIDENCE OF APPROVAL:	

Signed by Chief Executive Officer

FILE LOCATION: K:\EXECUTIVE\Strategies policies and procedures\Strategies - adopted PDF and Word\STR Risk Appetite Statement v2.docx

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1 PURPOSE

The Risk Appetite Statement has been developed to document the amount of risk Council is willing to take in achieving its strategic objectives. The document will guide Council decision making and provide management with guidance around Council's appetite for risk which will give management the freedom to operate within Council's parameters.

It is one of the key risk management documents within Loddon Shire Council's risk management system; the others include a Risk Management Policy, Risk Management Framework, Risk Management Procedure and Risk Management Implementation Plan. It has been developed in line with *ISO 31000:2018*, the International Standard for risk management, which applies a best practice approach. The documents articulate:

- Council's commitment to managing risk
- the objectives of the risk management system
- roles and responsibilities in risk management within the organisation
- a plan to increase the focus on risk management and ensure that Council's governance framework provides risk reporting to the appropriate audiences.

2 SCOPE

This policy applies to the Councillors and employees (including full time, part time and casual, agency staff and students). The policy is also applied in the management of contractors, volunteer groups and consultants of Council. The Audit and Risk Committee is a key stakeholder of this document.

3 BUDGET IMPLICATIONS

It is not anticipated that additional budget will be required to implement the actions in this plan.

4 RISK ANALYSIS

The introduction of a Risk Appetite Statement into Council's suite of documents helps to minimise a disconnect between the risk that Council is willing to take in achieving its strategic objectives and the actions that management takes in delivering them.

5 INTRODUCTION

"Risk appetite is the amount of risk you are willing to take in pursuit of your strategic objectives. Defining risk appetite establishes boundaries for prudent decision making and risk taking."¹

This is the first time Council has documented a Risk Appetite Statement, and it is timely, given the Council Plan 2021-2025 is reasonably new, and will be in effect until 30 June 2025.

"The risk appetite may consist of high-level statements in only one or two paragraphs that in turn drive a more detailed listing of risk tolerances. The two parts work together and in their entirety constitute the risk appetite statement. In documenting the risk appetite statement, organisations should consider that:

¹ Risk-appetite-overview---iia-presentation.pdf, EY, Data unknown

Risk appetite is:

- strategic, aspirational and directly related to the achievement of business objectives
- part of whole-of-organisation governance
- the broad pursuit of risk

while risk tolerance:

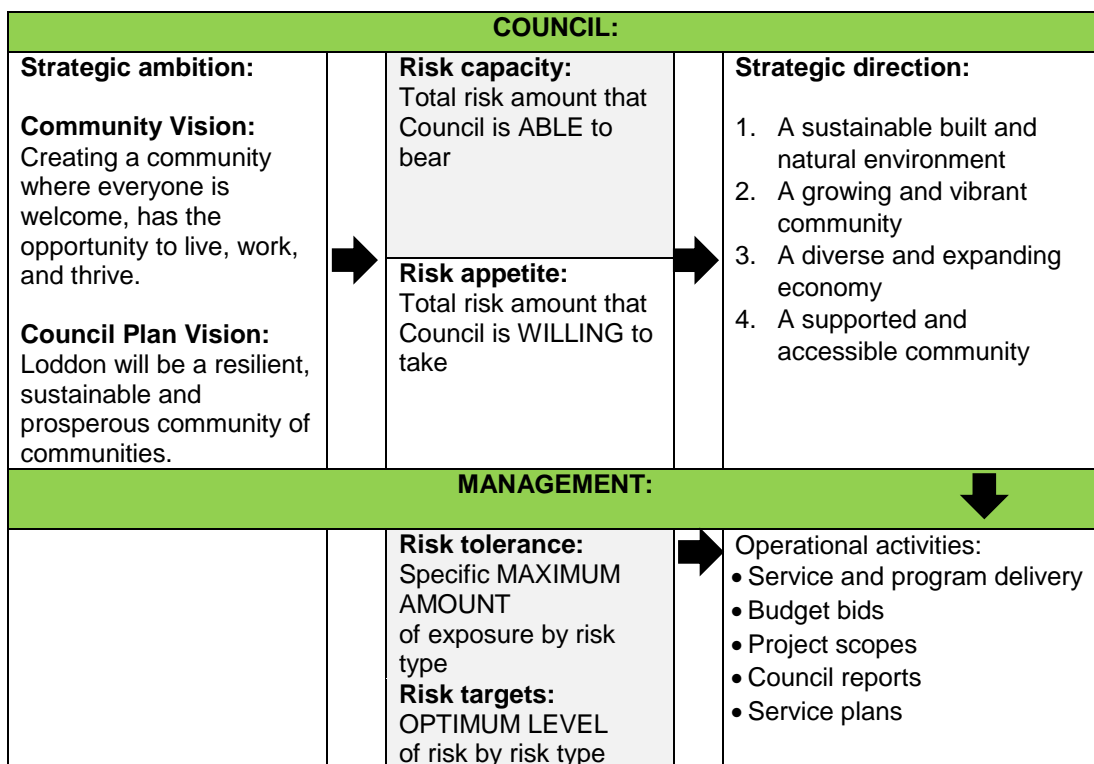
- is tactical and operational
- enables an organisation to control its appetite for risk in line with organisational, strategic objectives
- is the level of risk that can be borne in the context of specific transactions or activities.”²

It is important that the risk appetite is approved by Council as it is the formally accepted “degree of risk that the Council is prepared to accept in pursuit of its strategic objectives”³. It is also important that the Audit and Risk Committee has influence over the document, and endorses it for Council’s approval, given its legislated functions and responsibilities relating to risk management in Council.

The Risk Appetite Statement provides management with guidance on the level of risk permitted and the boundaries under which it must operate, while encouraging a consistent approach across the organisation.

“A well-articulated risk appetite statement provides a baseline for comparing risk ratings calculated on a risk register, with the tolerance for risk in that category, to determine what controls or actions are required to bring individual risks within the organisation’s risk appetite.”⁴

In terms of the strategic context, the following diagram shows where risk appetite (and its supporting terms) fits within Council:



² Governance Institute of Australia, *Good Governance Guide: Risk appetite statement*, 2019, p1-2

³ Protecht, *Risk Management Presentation*, July 2019

⁴ Governance Institute of Australia, *Good Governance Guide: Risk appetite statement*, 2019, p2

As this is the first Risk Appetite Statement for Council, risk capacity, risk tolerance and risk targets will not be addressed. They will be developed over time as the concept becomes embedded into practice, and knowledge grows around risk management.

6 RISK APPETITE FRAMEWORK

A traffic light system has been applied to identify the level of risk the Council is willing to accept for each risk type, as follows:

Very high appetite	High appetite	Moderate appetite	Low appetite	No appetite
Strategic objective – negative impact balance⁵				
Council is willing to accept a negative impact in order to pursue strategic objective	Council is willing to accept some negative impact in order to pursue strategic objective	Council is willing to accept potential negative impact for pursuit of strategic objective, given equal considerations	Council is only willing to accept a small negative impact in order to pursue strategic objective	Council is not willing to accept any negative impact in order to pursue strategic objective
Risk – reward balance⁶				
Council is willing to accept a very high level of risk, justified by potential reward	Council is willing to accept some risk to justify potential reward	Council takes a balanced approach to risk taking to pursue potential reward	Council takes a cautious approach to risk taking to pursue potential reward	Council takes as little risk as possible to pursue potential reward

7 RISK APPETITE STATEMENT

7.1 Legislative context

There are Local Government Act 2020 requirements for Council in governing the Loddon Shire, which are outlined in the Overarching Governance Principles (Section 9 of the Act), as follows:

- (1) *A Council must in the performance of its role give effect to the overarching governance principles.*
- (2) *The following are the overarching governance principles—*
 - (a) *Council decisions are to be made and actions taken in accordance with the relevant law;*
 - (b) *priority is to be given to achieving the best outcomes for the municipal community, including future generations;*
 - (c) *the economic, social and environmental sustainability of the municipal district, including mitigation and planning for climate change risks, is to be promoted;*
 - (d) *the municipal community is to be engaged in strategic planning and strategic decision making;*
 - (e) *innovation and continuous improvement is to be pursued;*
 - (f) *collaboration with other Councils and Governments and statutory bodies is to be sought;*

⁵ <https://deloitte.wsj.com/riskandcompliance/2017/05/25/five-steps-to-developing-a-comprehensive-risk-appetite-framework/>, Accessed 20 April 2020

⁶ <https://deloitte.wsj.com/riskandcompliance/2017/05/25/five-steps-to-developing-a-comprehensive-risk-appetite-framework/>, Accessed 20 April 2020

- (g) *the ongoing financial viability of the Council is to be ensured;*
- (h) *regional, state and national plans and policies are to be taken into account in strategic planning and decision making;*
- (i) *the transparency of Council decisions, actions and information is to be ensured.*

7.2 Risk Appetite Statement

The overarching governance principles have been referenced in determining an overarching Risk Appetite Statement to capture the holistic approach to risk. This statement will be supported by individual risk appetite statements associated with the various risk types so it is clear to all stakeholders the risk level that Council is willing to take.

Council's overarching Risk Appetite Statement is:

In creating a community where "everyone is welcome and has the opportunity to live, work and thrive", Council will explore opportunities associated with collaboration, particularly in leveraging national, state, and regional strategic opportunities that plan for the whole region.

To ensure we are operating most effectively, we will implement continuous improvement initiatives and explore innovative activities in seeking to provide positive economic and social outcomes for our communities, while protecting our environment and managing the impacts of climate change.

We will manage our financial position for long-term sustainability, and promote our reputation through transparent and open transactions with our communities, government, staff, and other stakeholders.

We will protect the information we collect and hold, and uphold our requirement to operate within a regulated environment. We do not accept behaviours around fraud and corruption, or unsafe activities that can harm our people.

8 RISK APPETITE STATEMENTS BY RISK TYPE

To support Council’s overarching Risk Appetite Statement, the following specific statements have been developed that identify more specifically Council’s risk appetite around the different risk types. They should assist management when assessing Council’s risk appetite when developing budget bids, project scopes, etc.

Ordinarily, the strategic link would be embedded in this table; however, the strategic links (identified in the Council Plan 2021-2025) are inherent across all of the risk types.

Appetite	Appetite by risk type	Risk appetite details
No appetite	Health and safety	<p>Council has no appetite for practices or behaviours that may lead to our staff, volunteers, contractors, property owners, customers or community members being harmed while interacting with us.</p> <p>Council has no appetite for non-compliance with accepted occupational health and safety practices that may lead to staff being harmed while at work.</p> <p>Council aims to create a safe environment where people are protected from physical or psychological harm, and has safety systems and processes to promote positive health and wellbeing outcomes.</p>
	Fraud and corruption	<p>Council has no appetite for fraud and corruption perpetrated by Councillors, staff, volunteers, contractors or suppliers, and will respond to allegations of fraud and corruption with an appropriate response.</p> <p>Council will promote an ethical environment through the Fraud and Corruption Prevention Policy and Fraud and Corruption Control Plan that outlines actions to prevent, detect, and respond to fraud and corruption activities.</p>
Low appetite	Compliance risk	<p>Council has a low appetite for non-compliance with regulatory and other obligations.</p> <p>Council is committed to a high level of compliance with relevant legislation, regulation, industry codes and standards and has no appetite for deliberate violation of laws or regulatory requirements.</p> <p>Minor breaches are expected from time to time, but it is expected they will be reported to the Audit and Risk Committee and responded to by management.</p> <p>Council will seek to mitigate compliance risks through adherence to internal policies and good corporate governance.</p>
Low appetite	Reputation	<p>Council has a low appetite for the actions of internal or external parties that compromise our credibility with our community, staff, government at all levels, and other stakeholders.</p> <p>Council will seek to be transparent in decision-making and provide clear communication in order to mitigate this risk.</p>
Low appetite	Information security	<p>Council has a low appetite for loss or misuse of the information it holds, or inability to access core operating systems.</p>

Appetite	Appetite by risk type	Risk appetite details
		<p>Council collects and produces personal, commercial, and sensitive information from staff, property owners, the community, suppliers, and customers, and understands the reputational risks and privacy obligations that accompany the collection, use, disclosure, storage and transfer of such information.</p> <p>Council provides a secure environment for this information and places a high standard on protecting physical and electronic information. Council has implemented security protocols that are designed to protect the information it collects and holds, and the operating systems used throughout the organisation</p>
Moderate appetite	Financial	<p>Council has a moderate appetite for risks associated with ongoing financial sustainability.</p> <p>Council plans for long-term sustainability through the ten-year Financial Plan and Annual Budget, and has implemented financial management policies to ensure that the financial position is managed to an acceptable level.</p> <p>Council acknowledges that opportunities will arise outside of long-term plans, and will explore the merits of those opportunities when they occur.</p>
High appetite	Economic and social sustainability	<p>Council has a high appetite for pursuing activities that promote economic and social sustainability of our communities.</p> <p>Council understands the strength of our communities is through social connections and economic success of our businesses and conducts activities and implements services and programs to support the community.</p>
High appetite	Environmental sustainability	<p>Council has a high appetite for pursuing activities that protect the environment and address climate change risk.</p> <p>Council acknowledges its legislative requirement to plan for and mitigate climate change risks, and considers these impacts through the asset management plans developed for our major infrastructure asset classes.</p> <p>Council acknowledges our natural environment is important to our Shire's success and participates in regional groups to promote environmental assets.</p>
Very high appetite	Continuous improvement and innovation	<p>Council has a very high appetite for continuous improvement, innovative practices, and exploring what new technologies, services and products can offer our organisation in driving efficiency and improved customer experience.</p> <p>Council acknowledges that not all innovative ideas will be successful, and is willing to accept this.</p>
Very high appetite	Shared services, joint ventures, and strategic partnerships	<p>Council has a very high appetite for opportunities to participate in joint ventures and strategic partnerships that support efficiencies in current services and support additional services and programs for the benefit of the community.</p> <p>Council is involved in strategic partnerships across the region at local government and state government level.</p>

9 REVIEW

The Risk Appetite Statement will be reviewed annually to progress Council's risk management maturity. At an appropriate time, the review will include the addition of risk tolerance, risk capacity, and risk targets, in addition to confirming Council's current risk ratings are still relevant.

APPENDIX 1: RISK APPETITE STATEMENT SUMMARY

The following summary has been developed as a resource for management to refer to when assessing programs, services, and projects around Council’s risk appetite.

Very high appetite	High appetite	Moderate appetite	Low appetite	No appetite
Strategic objective – negative impact balance ⁷				
Council is willing to accept a negative impact in order to pursue strategic objective	Council is willing to accept some negative impact in order to pursue strategic objective	Council is willing to accept potential negative impact for pursuit of strategic objective, given equal considerations	Council is only willing to accept a small negative impact in order to pursue strategic objective	Council is not willing to accept any negative impact in order to pursue strategic objective
Risk – reward balance ⁸				
Council is willing to accept a very high level of risk, justified by potential reward	Council is willing to accept some risk to justify potential reward	Council takes a balanced approach to risk taking to pursue potential reward	Council takes a cautious approach to risk taking to pursue potential reward	Council takes as little risk as possible to pursue potential reward

⁷ <https://deloitte.wsj.com/riskandcompliance/2017/05/25/five-steps-to-developing-a-comprehensive-risk-appetite-framework/>, Accessed 20 April 2020

⁸ <https://deloitte.wsj.com/riskandcompliance/2017/05/25/five-steps-to-developing-a-comprehensive-risk-appetite-framework/>, Accessed 20 April 2020

LODDON SHIRE COUNCIL

RISK MANAGEMENT IMPLEMENTATION PLAN



DOCUMENT INFORMATION

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RELATED LEGISLATION:	Local Government Act 2020 Occupational Health and Safety Act 2004 Occupational Health and Safety Regulations 2017
EVIDENCE OF APPROVAL:	

Signed by Chief Executive Officer

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1 PURPOSE

The purpose of this Risk Management Implementation Plan is to document a path to transition Council into enterprise risk management¹. It should be acknowledged that the first iteration of this plan will be focussed on implementing the foundations to build on risk management maturity over time. For this reason, this plan will be reviewed annually to monitor completion of actions and to add new actions to further mature Council in risk management.

2 BUDGET IMPLICATIONS

It is not anticipated that additional budget will be required to implement the actions in this plan.

3 RISK ANALYSIS

This plan has been documented to provide a roadmap to increase risk management maturity within Council. The achievement of this will help the organisation in managing its current risks, understanding when risks are emerging, and improving risk maturity to a level where risk management increases performance.

4 INTRODUCTION

In trying to achieve best practice in overall governance (which comprises governance-compliance-risk), Council, the Management Executive Group and Loddon Leaders must demonstrate a commitment to a culture of risk management in the organisation.

Council has developed a risk management system that includes a Risk Management Policy, Risk Management Framework, Risk Appetite Statement, Risk Management Procedure and this Risk Management Implementation Plan.

It has been developed in line with *ISO 31000:2018*, the International Standard for risk management, which applies a best practice approach.

The five documents articulate:

- the objectives of the risk management system
- Council's commitment to managing risk
- roles and responsibilities in risk management within the organisation
- a plan to increase the focus on risk management and ensure that Council's governance framework provides risk reporting to the appropriate audiences.

¹ "ERM provides a framework for [risk management](#), which typically involves identifying particular events or circumstances relevant to the organization's objectives (threats and opportunities), assessing them in terms of likelihood and magnitude of impact, determining a response strategy, and monitoring process. By identifying and proactively addressing risks and opportunities, business enterprises protect and create value for their stakeholders, including owners, employees, customers, regulators, and society overall", https://en.wikipedia.org/wiki/Enterprise_risk_management, accessed 09/05/2022.

It is acknowledged that risk management is being undertaken already in the organisation and that Council already has a focus on risk management through:

- general awareness and constant discussion across the organisation
- assessment of risk when prioritising projects and capital works
- an active Audit and Risk Committee
- embedded incident management practices.

However, it is also acknowledged Council currently does not operate under an enterprise risk management model as:

- there are individual risk registers across the business that are not communicated across the organisation
- there are areas of the business without risk registers
- there appears to be a knowledge gap in formal risk management practices
- there is low awareness of the formal risk management tool available.

This Risk Management Implementation Plan should support overcoming the risk management deficiencies that exist, and start to increase the focus on risk management across the organisation.

5 DESIRED STATE

In order to identify the actions required to deliver best practice risk management, it is important to articulate and acknowledge what we are aiming to achieve, which for Council should include, but will not be limited to:

- a business intelligence tool that consolidates all risk registers into an enterprise risk register and provides the Audit and Risk Committee with consolidated reporting, such as an enterprise risk profile
- high level strategic reporting of key performance indicators and key risk indicators that provide trend analyses to identify any “red flags” related to trends of indicators
- active and engaged senior managers and other key stakeholders that monitor risks across the organisation, regardless of their area of expertise and knowledge
- an agreed reporting structure that provides the Audit and Risk Committee with the right information at the right time to provide comfort that risk is being managed across the organisation
- assessment of emerging risks by Loddon Leaders that are reported to the Audit and Risk Committee before being reported to the Council
- a culture where every decision is made from a risk-reward perspective assessing how each decision impacts delivery of the strategic objectives
- a fully integrated governance-risk-compliance (GRC) model where work in one area complements the other areas
- an environment where risk management becomes a seamless part of everyone’s work.

6 ACTION PLAN

The actions in the following table have been identified as important to start the process of transitioning Council into an enterprise risk management environment. The initial actions are broken into the areas of:

- Risk management framework
- Risk management process
- Risk culture.

It is expected that best practice at the framework and process level will support a maturity in risk culture throughout the organisation.

In addition to risk specific actions, other actions that will facilitate better risk management, but are not specifically risk actions, have been included as “Other strategies to improve risk”.

6.1 Risk management framework

1F	Review the Risk Management Policy to ensure it aligns with ISO31000:2018 and recent risk management internal audit report	Policy approved by Council, after endorsement by the Audit and Risk Committee (A&R)	Director Corporate	Completed and reported to committee: A&R: May 2022 Council: May 2022
2F	Review the Risk Management Framework to ensure it aligns with ISO31000:2018 and recommendations from the risk management internal audit report	Framework approved by Council, after endorsement by the Audit and Risk Committee	Director Corporate	Completed and reported to committee: A&R: May 2022 Council: May 2022
3F	Develop a Risk Management Procedure to assist risk owners in how to log and manage risks	Procedure developed and approved by Management Executive Group	Director Corporate	Commenced: Revised target February 2024
4F	Review the Terms of Reference of the Risk Management Committee to ensure the Committee's work is focussed correctly.	Reviewed Terms of Reference approved by the Management Executive Group (MEG)	Director Corporate, in consultation with Loddon Leaders	Commenced: Revised target December 2023

5F	Develop a Risk Appetite Statement	Risk Appetite Statement approved by Council, after endorsement by the Audit and Risk Committee	Director Corporate	Completed and reported to committee: A&R: May 2022 Council: May 2022
6F	Provide Audit and Risk Committee with quarterly reports of the status of outstanding actions	Standing agenda item on Audit and Risk Committee of Outstanding Action Report	Director Corporate	Completed and reported to committee: May 2022
7F	Develop a reporting framework for risk management that is provided to the Management Executive Group	Standing agenda item on Management Executive Group agenda each quarter – incorporated into Risk Management Procedure	Director Corporate	Revised target: March 2024
8F	Develop a reporting framework for risk management that is provided to the Audit and Risk Committee	Standing agenda item on the Audit and Risk Committee agenda each quarter – incorporated into Risk Management Procedure	Director Corporate	Revised target: February 2024
9F	Develop a compliance management framework in accordance with ISO 19600:2014 Compliance Management – Guidelines	Framework approved by Council, after endorsement by the Audit and Risk Committee	Director Corporate	Revised target: A&R: August 2024 Council: September 2024

6.2 Risk management process

1P	Corporate documentation review to incorporate risk management (Council Report Template, Budget Bids, etc.)	Review undertaken and recommendations provided to the Management Executive Group	Director Corporate	Completed: December 2022
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2P	Facilitate training sessions for key stakeholders in Risk Management Software	Training undertaken – following development of Risk Management Procedure	Governance Coordinator	Commenced Revised target: June 2024
3P	Review the current risk register to confirm strategic risks, ensuring they are documented as true risk statements, and have been assessed and controls documented	Register reviewed and provided to Audit and Risk Committee prior to presentation to Council	Director Corporate	Completed and reported to committee. Further review of five strategic risks by ARC and Councillors is currently in progress
4P	Review the current risk register to confirm current operational risk, ensuring they are documented as true risk statements, and have been assessed and controls documented	Register reviewed and provided to Audit and Risk Committee	Director Corporate	Commenced: Revised target: May 2024
5P	Assess the current risk management software to understand whether it is fit for purpose, and if not, investigate other risk management software for consideration	Report presented to the Loddon Leaders Compliance Meeting recommending current or new risk management software	Director Corporate	Revised target: August 2024
6P	Assess the safety management system against <i>ISO 45001:2018 Occupational health and safety management systems</i> to identify gaps in safety risk governance and implement an action plan from identified gaps	Gap analysis reported to Management Executive Group Action plan developed and reported to Management Executive Group	Director Corporate Director Corporate	Revised target: September 2024 Revised target: December 2024
7P	Identify new and emerging risks for all areas of the business	Standing agenda Item for Loddon Leaders Compliance Meeting	Loddon Leaders	Target date: June 2024

6.3 Risk management culture

1C	Source a risk management culture tool, and undertake a risk maturity assessment to measure the progress towards an enterprise risk management environment Note: This may not be achievable due to previous attempts to find a tool; however, further attempts will be made.	Report provided to the Loddon Leaders Compliance Meeting Report provided to the Audit and Risk Committee	Director Corporate	Revised target: September 2024
2C	Undertake a risk maturity assessment to measure the progress towards an enterprise risk management environment	Report provided to the Loddon Leaders Compliance Meeting Report provided to the Audit and Risk Committee	Director Corporate	One year after initial assessment
3C	Develop Key Risk Indicators, taking into consideration risk and reward for the business	Key Risk Indicators embedded into Audit and Risk Committee Reporting – incorporated into Risk Management Procedure	Director Corporate	Revised target: February 2024

6.4 Other strategies to improve risk

10	Review the Strategic Document, Policy and Procedure Framework in accordance with AS/NZS ISO 9001: 2016 Quality Management Systems – Requirements to ensure that all corporate documentation has strong document control and review processes	Framework approved by the Management Executive Group	Director Corporate	Commenced Revised target: May 2024
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20	Review the list of overdue documents, as per the Strategic Document, Policy and Procedure Framework, and progressively review all documents until they are up to date and current	Number of overdue items reduces monthly	Director Corporate	Completed December 2022
30	Review and implement project management framework	Revised framework approved by Management Executive Group	Chief Executive Officer	Progressing: Revised target June 2024

7 REVIEW

This plan will be reviewed six monthly to monitor progress with current actions and to record any new actions that have been identified throughout the period.

Risk Management Document Review – Summary of proposed changes

Risk Management Policy:

Page	Section	Proposed change
1		Updated dates and version number
2	Purpose	Removed reference to the Council Plan as the ISO purpose statement does not include such a reference
	Scope	Minor administrative change
2-3	Policy	Removal of reference to the Risk Management Committee (now incorporated into Loddon Leaders)

Risk Appetite Statement:

Page	Section	Proposed change
1		Minor administrative change
2		Minor administrative change
7	Review	Minor administrative change

Risk Management Framework:

Page	Section	Proposed change
	Document Information	Updated dates and version number
1	Introduction	Added footnote that Risk Management Procedure development is in progress
2	Types of risk	Minor administrative changes
4	Principles	Minor administrative change
7	8.2.1	Replace references to Risk Management Committee with Loddon Leaders quarterly compliance meeting
8	8.3	Minor administrative changes
9	8.3.4	Changed references to Governance team reflecting current organisation responsibilities
	8.4	Replace reference to Risk Management Committee with Loddon Leaders
10	8.4 and 8.6	- Changed reference to Governance team and Risk Management Committee to Loddon Leaders - Minor administrative changes
11	9.2	- Replace reference to Risk Management Committee with Loddon Leaders - Amended responsibility regarding OHS for clarity (ie the Manager Governance is responsible for ensuring relevant frameworks exist) given safety risk in the organisation is the responsibility of all staff. - Corrected Achievement Program Committee to Health and Wellbeing Committee
12	9.3	Minor administrative changes to the table of forums and processes
15		Replace references to Risk Management Committee with Loddon Leaders

Page	Section	Proposed change
17	9.6	- Include reference to Fraud Risk Register - Replace references to Risk Management Committee with Loddon Leaders
18		- Replace reference to Risk Management Committee with Loddon Leaders quarterly compliance meeting - Minor administrative change
19	9.6 10.1	- Replace reference to Risk Management Committee with Loddon Leaders quarterly compliance meeting and reporting to Loddon Leaders and OHS Committee be by the Manager Governance rather than the Director Corporate. - Minor administrative changes. - Removal of reference to ARC Minutes being provided to Council.
20	10.2	- Amended description of the Audit and Risk Committee aligned to the wording in the Audit and Risk Committee Charter. - Removal of reference to Audit and Risk Committee Minutes being provided to Council. - Replace references to Risk Management Committee with Loddon Leaders - Minor administrative changes
21	10.7 10.8 10.9	- Updated to Manager Governance role - Amended Manager Governance responsibilities relating workplace safety for clarity, consistent with amendment made to point 9.2 - Remove – outside scope of the Framework
22	13	Amended to require the Framework to now be reviewed no later than four years from the adoption of this reviewed version.

Risk Management Implementation Plan:

Page	Section	Proposed change
2	5	Replace references to Risk Management Committee with Loddon Leaders
5-6		Replace references to Risk Management Committee with Loddon Leaders
3-7	6.1	Updated status and revised completion dates

10.4 NORTH CENTRAL GOLDFIELDS REGIONAL LIBRARY AGREEMENT 2024**File Number:****Author:** Renae Colls, Executive Assistant**Authoriser:** Lincoln Fitzgerald, Chief Executive Officer**Attachments:** 1. North Central Goldfields Regional Library Agreement 2024**RECOMMENDATION**

That Council authorise the Chief Executive Officer to affix the Loddon Shire Council seal and undertake all necessary administrative actions to enter into the North Central Goldfields Regional Library Agreement 2024

CONFLICT OF INTEREST

There is no conflict of interest for any Council staff member involved in the preparation of this report, or involved in the subject matter of the report.

PREVIOUS DISCUSSION

Councillors discussed the North Central Goldfields Regional Library Agreement 2024 at the Council Briefing held 23 January 2024.

BACKGROUND

The North Central Goldfields Regional Library Corporation has included four Councils since its inception in 1996. The Corporation consists of members from the City of Greater Bendigo, and the Shires of Loddon, Macedon Ranges and Mount Alexander. The Corporation provides library services to the member municipalities.

The Regional Library Corporation was created in 1996 and is designated a body corporate with perpetual succession under the Local Government Act, insofar as the Corporation remains in place for perpetuity and until such time as there is a voluntary winding up of the Regional Library Corporation. Under the *Local Government Act 2020* (the Act) the Corporation must be wound up by 2030.

The Regional Library Agreement, approved by the Minister for Local Government, provides the terms under which the Corporation and member Councils act and contribute to the library services.

The last Goldfields Library Corporation Regional Library Agreement was approved by the Minister for Local Government in 2019 and this report relates to a review of that current agreement.

It should be noted that the agreement proposed for Ministerial approval in 2024 is expected to be the final agreement before the voluntary winding up of the Corporation as per requirements of the Act which states that all Regional Library Corporations must either be voluntarily wound up before 2030 or they will be wound up by the Minister for Local Government in 2030.

Cr Jungwirth and CEO Fitzgerald are members of the library board, CEO Fitzgerald is also on the board's Finance Committee.

ISSUES/DISCUSSION

The current Goldfields Regional Library Agreement approved by the Minister in 2019 has been reviewed by the Chief Executive Officer (CEO) and Board of Goldfields Library Corporation (GLC) and there are no proposed changes to the Agreement. The Agreement outlines:

- The role of the Corporation,
- Membership of the Corporation,

- Meeting procedures,
- Requirements for strategic planning, budgeting and financial contributions, and
- Entry, exit and dissolution provisions as per section 196 and 197 of the *Local Government Act 1989*.

With no amendments proposed to the conditions of the current agreement, the GLC CEO and Board believe clarity for all member councils will be provided by signing and sealing a 2024 Agreement that effectively provides a continuation of the arrangement for shared library services for the four member councils that will remain as councils move toward the voluntary winding up of the Corporation.

The North Central Goldfields Regional Library Agreement 2024 is attached to this Agenda report. There are no changes to the agreement other than the change of dates to 2024, given the expectation of approval of the new agreement by the Minister in 2024.

COST/BENEFITS

Funding for the Regional Library Corporation is provided for in the current budget, and each year an agreement is reached on an equal per capita contribution based on an annual budget and 10-year financial plan developed by the Regional Library Corporation.

While the service was traditionally funded equally between the State and Local Governments, the 2022/23 funding split was local government 72.9% and State Government 27.1%.

Loddon Shire Council's contribution in 2022/23 was \$205,410 as part of a combined local government contribution of \$5,454,093. This contribution has traditionally increased in line with the Local Government Rate Cap.

The Victorian Government also provides Public Library funding. In 2023/24 the Public Library funding is \$1,478,364. This amount increased 1.47% between the 2021/22 financial year and the 2022/23 financial year. This funding has not increased in the 2023/24 financial year. Considering inflation of 11% over that 2 year period against a 1.47% State Government increase, the board will need to consider service levels or seek local government funding increases

16% of the Loddon Shire population are members of the Library and there are 6 agencies, Boort, Dingee, Inglewood, Pyramid Hill, Tarnagulla and Wedderburn. Assessments and statistics outlined within the annual report indicate that the Corporation is amongst the best performing services in Victoria.

RISK ANALYSIS

The 2024 Regional Library Agreement aligns with the current practice of the Regional Library Corporation and represents good governance through the provision of an Agreement that clearly specifies the responsibilities of all parties.

The current Agreement has been reviewed and no conditions have been changed in any way.

This process represents a continuation of current services utilising the same arrangements as currently exist.

CONSULTATION AND ENGAGEMENT

Section 197 of the Local Government Act requires that Council advertise its intention to sign and seal a Regional Library Agreement. Council published the Regional Library Agreement 2024 on Council's website and the Loddon Herald newspaper (Thursday, 15 November 2023 edition). The purpose of this publication was to seek feedback from community members on the proposed agreement. An exhibition period of 28 days was provided, commencing on Thursday, 16 November 2023 concluding on Thursday, 14 December 2023. No public submissions were received during this period.

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Continuation of Agreement For
North Central Goldfields Regional Library
Corporation

Trading as

Goldfields Library Corporation

2024

Regional Library Agreement



North Central Goldfields Regional Library Corporation trading as Goldfields Library Corporation
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This AGREEMENT is made on the.....

BETWEEN :

Greater Bendigo City Council, a Body Corporate established under an Order-in- Council made pursuant to the *Local Government Act 1989*, of Lyttleton Terrace, Bendigo:

Mount Alexander Shire Council, a Body Corporate established under an Order-in-Council made pursuant to the *Local Government Act 1989*, of 25 Lyttleton Street, Castlemaine:

Macedon Ranges Shire Council, a Body Corporate established under an Order-in-Council made pursuant to the *Local Government Act 1989*, of 129 Mollison Street, Kyneton:

Loddon Shire Council, a Body Corporate established under an Order-in-Council made pursuant to the *Local Government Act 1989*, of 41 High Street, Wedderburn.

RECITALS

- a. The Councils have entered into an agreement to operate a Regional Library, under section 196 of the *Local Government Act, 1989*, to service the area comprising their municipal districts.
- b. The Councils have agreed on the assets they will provide for the use of, or, transfer to the ownership of, the Regional Library.
- c. The Councils have agreed to contribute certain sums of money annually for the purposes of the Regional Library.
- d. This Agreement should be read in conjunction with the NCGRL’s Service and Funding Agreement, 2023-2025.
- e. The- Revised Agreement dated 2019 is amended by this Agreement.

AGREEMENT

1. DEFINITIONS

In the interpretation of this Agreement, including the Recitals, except where the context otherwise requires -

- a. the following words shall have the following meaning -

"Act" means the *Local Government Act 1989*;

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"Asset" means defined resources made available to the Corporation by member Councils to assist in the provision of library services and consisting of such items as real property, machinery, furniture, fittings and equipment.

"Board" means the governing body of the Regional Library established under clause 3.1;

"Chief Executive Officer" means the person appointed in accordance with the Act;

"Council" means a party to this Agreement;

"Local Law" means a Local Law made in accordance with Part 5 of the Act;

"Minister" means the Victorian Government Minister responsible for administering *Local Government Act 1989*;

"Regional Library" means the regional library corporation established under this Agreement;

- b. words denoting the singular shall include the plural and vice versa;
- c. words denoting any gender include all genders;
- d. headings are for convenience only and shall not affect the interpretation of this Agreement.

2. CREATION OF THE REGIONAL LIBRARY

The North Central Goldfields Regional Library Corporation (Trading as Goldfields Library Corporation) has been constituted as a regional library corporation for the purposes of section 196 of the Act to -

- a. provide, subject to any conditions attached to any State government library subsidies and grants to the Regional Library or the Councils, a regional library service for Councils' municipal districts as determined by the Board;
- b. make Local Laws relating to the Regional Library;
- c. perform any other functions which are conferred on the Regional Library under this Agreement or the Act, including defining overall policy objectives, developing strategic policy and approving a Library Plan and an Annual Operating Plan; and
- d. to do all things necessary or expedient in accordance with this Agreement and the Act for the carrying out of its functions.

3. MEMBERSHIP OF THE BOARD

- 3.1 The Board of the Regional Library shall consist of the following members –
- (a) One (1) Councillor appointed by each Council
 - (b) One (1) other person appointed by each Council
- 3.2 A Council may appoint a councillor, or other person to act as deputy in place of its appointed members.
- 3.3 A member and deputy shall hold office until the term of his/her appointment expires, until removed or the person resigns or ceases to be a councillor or member of council staff, whichever occurs first.
- 3.4 A Council may remove from office its appointed member or deputy.
- 3.5 A Council must fill a vacancy in its members as soon as possible and notify the Board in writing of the new member.
- 3.6 The office of a member automatically becomes vacant if he/she is absent for three consecutive meetings without the leave of the Board.

4. PROCEEDINGS OF THE BOARD

- 4.1 The Board shall hold an ordinary meeting at least once in every three months.
- 4.2 If a special meeting is called, it must be called by the Chief Executive Officer on the request of the Chairperson or three members of the Board.
- 4.3 The Board shall elect a member to be Chairperson and a member to be Deputy Chairperson of the Board and they shall hold office for twelve months, unless they go out of office earlier in accordance with Clause 3.3 of this Agreement.
- 4.4 a. The election for the Chairperson and Deputy Chairperson of the Board shall be held by the Board at its first meeting after the general election of councillors for a Council and will be for a period of one year.
- b. Where there is no general election of Council, the election for the Chairperson and Deputy Chairperson of the Board shall be held by the Board at its first meeting after the Statutory Meetings of the Councils each year and will be for a period of one year.

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- 4.5 The Chairperson or, in the absence of the Chairperson, the Deputy Chairperson shall preside at a meeting of the Board.
- 4.6 In the absence of the Chairperson and Deputy Chairperson from a Board meeting, the remaining members of the Board may elect one of their number to preside at that meeting.
- 4.7 If a Member is unable to attend a Board meeting, he or she may delegate a proxy for that Member. The proxy is entitled to vote on behalf of that Member.
- 4.8 An item of business may not be transacted at a general meeting unless a quorum is present when the meeting proceeds to consider it.
- 4.9 Any five members of the Board constitute a quorum to allow the transaction of business at a meeting of the committee.
- 4.10 If a quorum is present at the beginning of a meeting it is taken to be present throughout the meeting unless the Chairperson of the meeting on their own motion or at the request of a Member, proxy who is present, declares otherwise.
- 4.11 If within thirty minutes after the time appointed for a general meeting a quorum is not present, the meeting:
- a. if convened by, or on requisition of, Members is dissolved; and
 - b. in any other case stands adjourned to the next meeting, or to such other day, time and place as the Chairperson appoints by notice to the Members and others entitled to notice of the meeting.
- 4.12 Notice of motion to recommend amendment of this Agreement and notice of motion for the adoption or amendment of Local Laws by the Board shall be given in writing to Councils at least one month before the meeting of the Board at which the motion is to be discussed.
- 4.13 Each Council agrees to indemnify the Regional Library in respect of any liability incurred as a consequence of the operation of section 76 of the Act in relation to each of its appointed members.

5. CHIEF EXECUTIVE OFFICER

- 5.1 The Board shall appoint a Chief Executive Officer of the Regional Library.
- 5.2 In addition to any responsibilities imposed on a Chief Executive Officer in the Act, the Chief Executive Officer shall be responsible to the Board for the finances and administration of the Regional Library including the implementation of the Library Plan, delivery of the service and administrative

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support for the Board, employment and management of staff and any other duties specified by the Board subject to CEO delegation.

6. EQUITY AND OPERATING COSTS

- 6.1 The Chief Executive Officer shall maintain a register of the assets provided for the use of the Regional Library by Councils. This register must indicate which Council owns each asset.
- 6.2 The Chief Executive Officer shall maintain a register of assets owned by the Regional Library.
- 6.3 Respective Asset Registers must be updated by 1 March each year.
- 6.4 A Council must, unless otherwise agreed by Councils, give one clear financial year's notice in writing to the Chief Executive Officer of its intention to withdraw assets from the use of the Regional Library.
- 6.5 The Regional Library shall, unless otherwise agreed by Councils, be responsible for the maintenance, repair, replacement and operating costs of assets owned by the Regional Library.
- 6.6 Each Council shall, unless otherwise agreed by Councils, be responsible for the maintenance, repair, replacement and operating costs of assets owned by it but provided for the use of the Regional Library.
- 6.7 The Regional Library shall, unless otherwise agreed by Councils and subject to clauses 6.5 and 6.6, be responsible for its own operating costs.

7. STRATEGIC PLANNING

- 7.1 The Chief Executive Officer shall be responsible for preparing a Library Plan for approval by the Board within six months of each general election at member Councils in accordance with section 125 of the Local Government Act.
- 7.2 The Chief Executive Officer shall by 1 June each year prepare and provide each Council with a proposed Annual Operating Plan for the financial year commencing 1 July.
- 7.3 The Annual Operating Plan shall include a program for the delivery of services by the Regional Library which identifies the nature and extent of proposed services and an estimate of the costs of the provision of those services.
- 7.4 The Regional Library must adopt a Library Plan and an Annual Operating Plan by the date specified in the Act for the adoption of its annual Budget.

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- 7.5 The Corporation must consider whether the Library Plan requires any adjustment at least once a year.

8. ANNUAL BUDGET

- 8.1 The Chief Executive officer shall by 1 June each year provide each Council with a copy of the Regional Library's proposed annual Budget prepared in accordance with section 127 of the Act.
- 8.2 The proposed annual Budget shall include -
- a. the amount of funds currently held by the Regional Library;
 - b. the amount of each Council's proposed financial contribution to the Regional Library for the financial year commencing 1 July;
 - c. the amount of funds to be received from any other source by the Regional Library in the financial year commencing 1 July;
 - d. standard statements and description of activities and initiatives to be funded in the budget;
 - e. a statement as to how activities and initiatives will contribute to the achievement of strategic objectives in the Library Plan; and
 - f. key strategic activities and performance targets and measures.

9. ANNUAL FINANCIAL CONTRIBUTIONS

- 9.1 The amount to be contributed to the Regional Library by each Council during each financial year shall be the sum of -
- a. the amount specified in the Regional Library's adopted annual budget;
 - b. all State Government library subsidies and grants received by the Council for the library services; and
 - c. funds received by the Council from any other source for library services.
- 9.2 The Councils must agree on a funding formula for the purpose of making annual financial contributions to the Regional Library under clause 9.1 (a).
- 9.3 Each Council's financial contribution to the Regional Library shall be paid in quarterly instalments on the first day in July, October, January and April of each year.
- 9.4 All instalments shall be paid in equal instalments.

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- 9.5 All other Council contributions under clause 9.1 shall be paid within one month of receipt of a tax invoice from the Regional Library.
- 9.6 In addition to the contributions payable under this clause, a Council shall be responsible for the Regional Library's costs in providing any additional service or resources requested by the Council and such costs are to be paid within 30 days of the Council receiving an invoice from the Regional Library.
- 9.7 Interest shall be paid on any amount payable under clause 9 which is not received by the Chief Executive Officer within 14 days of the due date at the rate fixed by the Governor in Council for the purposes of section 172 of the Act and calculated monthly from the date the amount became due until the date it is received by the Chief Executive Officer.

10. ANNUAL REPORTING AND ACCOUNTS

- 10.1 The Chief Executive Officer shall, within three months of the end of the financial year, provide each Council with a copy of the Regional Library's Annual Report prepared in accordance with section 131 of the Act.
- 10.2 The books of accounts and all other financial records of the Regional Library shall be available for inspection at all reasonable times by any councillor, or person authorised by a Council, or, by any person authorised by the Secretary of the Department responsible for administering State Government library subsidies and grants from which the Regional Library or Councils receive funds.

11. ENTRY AND EXIT OF PARTIES

- 11.1 A Council which is not a party to this Agreement may, by supplementary agreement with the Councils, be admitted as a party to this Agreement and subject to the provisions of the supplementary agreement, shall have the same rights, duties and obligations of the Councils under this Agreement.
- 11.2 A Council may withdraw from this Agreement having given not less than one clear financial year's notice in writing to the Chief Executive Officer of its intention to do so.
- 11.3 A Council which has given notice under clause 11.2 must, unless otherwise agreed by the Councils, withdraw from this agreement on 30 June in any year.
- 11.4 A Council which withdraws from this Agreement shall be entitled to a portion of the net assets of the Regional Library as at the date of its withdrawal from the Agreement, less an amount which represents the full costs to the Regional Library of the withdrawal.
- 11.5 The portion of net assets to which a Council is entitled under clause 11.4 -

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- a. shall be calculated according to the value of the assets as disclosed by the relevant audited financial statements;
 - b. shall be in the same proportion as its financial contribution to the Regional Library bears to all the member Councils' financial contributions to the Regional Library over the duration of this Agreement;
 - c. may be taken in such combination of property and cash as agreed between the Council and the Board, and if it is agreed that a Council is entitled to library materials, the cost of removing them shall be paid for by the Council.
- 11.6 A Council which withdraws from this Agreement shall be liable for a portion of the liabilities, including contingent liabilities, of the Regional Library as at the date of its withdrawal from the Agreement.
- 11.7 The portion of the liabilities and contingent liabilities to which a Council is liable under clause 11.6 -
- a. shall be calculated according to the liabilities and contingent liabilities as disclosed by the relevant audited financial statements and reports, and any notes attached to them;
 - b. shall be in the same proportion as its financial contribution to the Regional Library bears to all the member Council's financial contributions to the Regional Library over the duration of this Agreement; and
 - c. in the event of the withdrawal resulting in staff redundancies the cost of such redundancies will be paid for by the withdrawing Council or Councils.

12. DISSOLUTION OF REGIONAL LIBRARY

- 12.1 Subject to section 197G of the Act, the Regional Library may be dissolved by agreement of at least three quarters of the parties to this Agreement including those admitted as a party by supplementary agreement.
- 12.2 If the Regional Library is dissolved under this clause -
- a. each Council shall be entitled to a portion of the Regional Library's assets in the same proportion as its financial contribution to the Regional Library bears to all the member Councils' financial contributions to the Regional Library over the duration of this Agreement; and
 - b. each Council shall be liable for a proportion of the liabilities and contingent liabilities of the Regional Library in the same proportion as

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its financial contribution to the Regional Library bears to all member Councils' financial contributions to the Regional Library over the duration of this agreement.

13. DISPUTE RESOLUTION

- 13.1 If there is any dispute or difference between a Council and the Regional Library or between any of the Councils which arises out of this Agreement or concerns the Regional Library; the matter shall be determined as a dispute under the *Commercial Arbitration Act 1984* and the arbitrator's decision shall be final and binding on the parties to the dispute.
- 13.2 The parties to the arbitration shall -
- a. be responsible for their own arbitration costs; and
 - b. unless otherwise determined by the arbitrator, share the arbitrator's costs equally.

14. AGREEMENT AMENDMENT

An amendment to this Agreement has no effect unless it is -

- a. in writing and signed by all parties to the Agreement; and
- b. approved by the Minister by notice published in the Government Gazette.

15. AGREEMENT REVIEW

The parties shall, together with the Board, review the operation of this Agreement at least once every four years.

16. CONDITIONS PRECEDENT

This Agreement has no effect as between the parties unless it is approved by the Minister in accordance with section 196(2) of the Act.

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EXECUTED AS AN AGREEMENT

IN WITNESS WHEREOF

THE COMMON SEAL of the Greater Bendigo City Council

was hereunto affixed on this

.....day of in the presence of -

Councillor :

Councillor :

Chief Executive Officer:

Date:

In accordance with a resolution of the Council made on.....

THE COMMON SEAL of the Mount Alexander Shire Council

was hereunto affixed on this

.....day of in the presence of -

Councillor :

Councillor :

Chief Executive Officer:

Date:

In accordance with a resolution of the Council made on.....

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THE COMMON SEAL of the Macedon Ranges Shire Council

was hereunto affixed on this

.....day of in the presence of -

Councillor :

Councillor :

Chief Executive Officer:

Date:

In accordance with a resolution of the Council made on.....

THE COMMON SEAL of the Loddon Shire Council

was hereunto affixed on this

.....day of in the presence of -

Councillor :

Councillor :

Chief Executive Officer:

Date:

In accordance with a resolution of the Council made on.....

10.5 INTENTION TO SUBDIVIDE AND SELL A PORTION OF LAND AT 24-32 WILSON STREET, WEDDERBURN

File Number: GF/19/19534

Author: Christine Coombes, Executive Services Officer

Authoriser: Lincoln Fitzgerald, Chief Executive Officer

- Attachments:**
1. **Ambulance Victoria proposed concept plan for Wedderburn Branch - 32 Wilson Street Wedderburn**
 2. **Ambulance Victoria proposal**
 3. **Lions - Letter to Council re new Ambulance Station**
 4. **Proposed land size requirements for Ambulance Station and assisted living facility**
 5. **Valuation report: 24-32 Wilson Street Wedderburn - Confidential**

This attachment is designated as confidential in accordance with Section 3(1)(a) and (g(ii)) of the *Local Government Act 2020*. It contains Council business information, being information that would prejudice the Council's position in commercial negotiations if prematurely released; AND private commercial information, being information provided by a business, commercial or financial undertaking that if released, would unreasonably expose the business, commercial or financial undertaking to disadvantage.

Pursuant to section 66(5)(b) of the *Local Government Act 2020*, if released the information to be received, discussed or considered in relation to this agenda item, may prejudice the commercial position of Council, as various negotiations remain pending.
(under separate cover)

RECOMMENDATION

That Council:

1. Provide public notice of Council's intention to sell part of the vacant land at 24 – 32 Wilson Street, Wedderburn to Ambulance Victoria,
2. Undertake community engagement in accordance with Council's Community Engagement Policy and the *Local Government Act 2020*;
3. If no objections are raised during community engagement, authorise the Chief Executive Officer to sell part of the vacant land at 24 – 32 Wilson Street, Wedderburn to Ambulance Victoria, within 10% of the independent valuation price as attached to this report; and
4. Authorise the Chief Executive Officer to undertake the necessary administrative actions to complete the sale.

CONFLICT OF INTEREST

There is no conflict of interest for any Council staff member involved in the preparation of this report, or involved in the subject matter of the report.

PREVIOUS COUNCIL DISCUSSION

Ambulance Victoria (AV) met with Councillors and Executive Officers at the June Council Forum to discuss a proposal for use of vacant land at the Wedderburn Community Centre site for the development of an Ambulance Branch.

BACKGROUND


AV submitted a proposal (attached) to acquire a portion of Council owned land, for the delivery of a Branch in Wedderburn. A number of sites were inspected in Wedderburn and the portion of vacant land at the Community Centre site was found to be the optimal location.

The proposed site forms a portion of the land made available to the Wedderburn Lions (Lions) in 2016, with a review of the decision in 2020, for a proposed Aged Care Facility.

Council’s offer to the Lions:

In 2016 the Lions wrote to Council seeking support for land to be made available for the purpose of an Aged Care Facility. The request was discussed at the Ordinary Meeting of 13 September 2016, with the following motion discussed and resolved:

Extract from the minutes of Ordinary Meeting 13 September 2016:



ORDINARY MEETING MINUTES **13 September 2016**

5. INFORMATION REPORTS

5.1 INWARDS CORRESPONDENCE

SUMMARY

Relevant correspondence received by Council since previous meeting.

Author: Phil Pinyon, Chief Executive Officer

Council Plan ref: Strategic enabler: Transparent communication

File No: various

Attachment: Copies of inwards correspondence

RECOMMENDATION

That Council receives and notes the Inwards Correspondence.

Date	From	Subject
12/8/2016	Wedderburn Lions Club	Several letters regarding Aged Care Facility Land – adjacent to Wedderburn Community Centre
29/08/2016	Keren Chapman	Enclosing letter sent to Peter Walsh regarding Boort Primary School site.

MOTION

Moved: Cr Holt Seconded: Cr McKinnon

1. That Council receives and notes the Inwards Correspondence.
2. That advice be given to the Wedderburn Lions Club that Council is prepared to make Council owned land at 32 Wilson Street Wedderburn available to the Wedderburn Lions Club at no cost for the purpose of building an aged care facility.

This offer is subject to all costs associated with the establishment and operation of the aged care facility being met by parties other than the Loddon Shire Council.

This offer from the Loddon Shire Council expires on 30 June 2020 if the project has not been substantially commenced by that date.

It should also be noted that the Wedderburn Community Centre Committee of Management is the Council’s delegated operator of this site, and it should be informed of Council’s offer to the Wedderburn Lions Club.

Carried

The Lions sought support, funding and feasibility following Council’s agreement to make the land at 32 Wilson Street available. In 2020, works had not been commenced, with the Lions seeking an extension to the timing of the land availability.

This request for extension was presented at the Ordinary Council Meeting 25 August 2020. Councillors at the time discussed and resolved to extend the expiration date for the project to be substantially commenced.

Extract from the minutes of Ordinary Meeting 25 August 2020, Urgent Business:

13.4 WEDDERBURN AGED CARE FACILITY

RESOLUTION 2020/1

Moved: Cr Gavan Holt

Seconded: Cr Geoff Curnow

10. That advice be given to the Wedderburn Lions Club that Council is prepared to make Council owned land at 32 Wilson Street Wedderburn available to the Wedderburn Lions Club at no cost for the purpose of building an aged care facility.

11. This offer is subject to all costs associated with the establishment and operation of the aged care facility being met by parties other than the Loddon Shire Council.

12. This offer from the Loddon Shire Council expires on 31 August 2024 if the project has not been substantially commenced by that date.

It should also be noted that the Wedderburn Community Centre Committee of Management is the Council's delegated operator of this site, and it should be informed of Council's offer to the Wedderburn Lions Club.

CARRIED

The Lions continue to seek funding and support for a proposed Aged Care Facility.

Council Officers, Lions and AV representatives have met on site to inspect the requirements of land size sought to develop a branch.

ISSUES/DISCUSSION

The proposed land size, to be subdivided from title, as drawn up on the concept plan attached, is an area of 1,849 square metres, all that piece of land being Lot 1 on Title Plan 555062 and Crown Allotments 3 and 7 Section. V, Parish of Wedderburne. The lot is situated on the western side of Wilson Street and located approximately 120 metres north of the intersection of Wilson and Chapel Streets.

The vacant land is zoned Township, (TZ) under the Loddon Shire Planning Scheme. The property is subject to a Heritage Overlay (HO230). The property is located within a designated bush fire prone area. This is a common designation for properties in the immediate and surrounding area and it does not adversely impact on marketability or value. Utility services available to the property include electricity, telephone, town water and sewerage. Vehicular access to the property is via Wilson Street which is a bitumen sealed road. Access to the property is considered easy and direct.

Sub division would be undertaken by contracted land surveyors. The land to be sub divided is per the concept plans attached.

Council Officers have obtained a valuation report, 27 December 2023, as required under section 114 (2c) of the Local Government Act 2020, to determine the current market value of the parcel of land to undergo sub division, as per the dimension requested by AV. The valuation, as attached, will determine the sale price of the land to AV.

COST/BENEFITS

Cost to date is for the completion of the valuation report. Request for quotation is currently being sought for the plan of sub division. Costs for the valuation, sub division and legal fees, will be expended from Land and Buildings with proceeds of sale to be returned to the Land and Buildings Reserve.

RISK ANALYSIS

It is a risk to the community if AV were unsuccessful in gaining land suitable for a proposed branch.

CONSULTATION AND ENGAGEMENT

Council officers have met with AV and Lions members to discuss the proposed use of the land at the Community Centre site.

Lions have provided a letter of support, attached, for the co-location of a new assisted living facility and an Ambulance Station for Wedderburn.

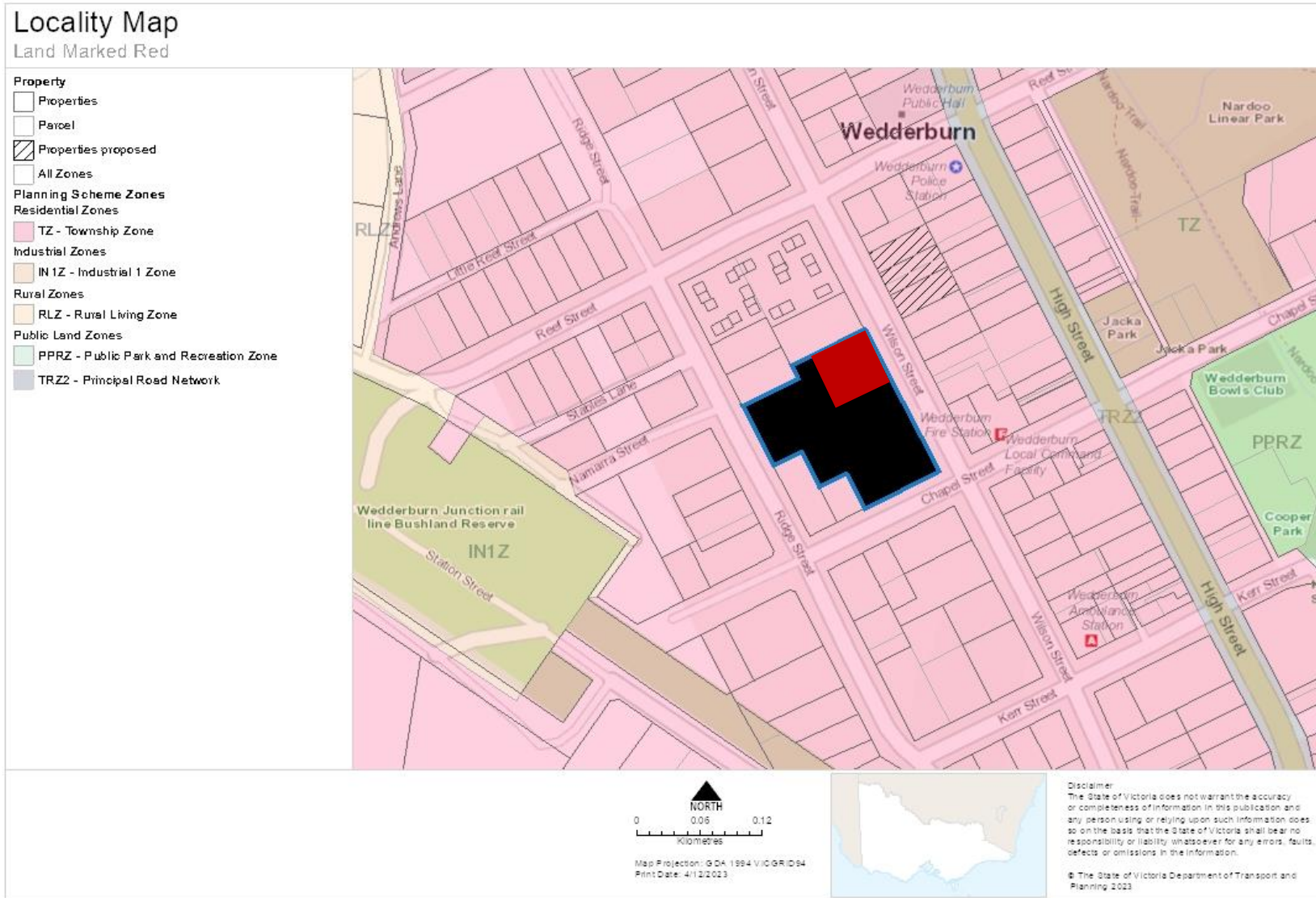
In accordance with Section 114 (2b) of the Local Government Act 2020, any sale of land by a Council under this section must be undertaken in accordance with the Council's Community Engagement Policy.

Council will publish notice of intention to sell land on Council's website and by public notice in the Loddon Herald newspaper for a period of four weeks. Council's Community Reference Group will be notified of the intention to sale.

If no submissions are received in regard to the intent to sell, the property sale and transfer will be undertaken by Council's legal representative. If submissions were received and to be heard, follow up detail would be provided to Council

Ambulance Victoria - Proposed Branch - 32 Wilson Street, Wedderburn - Concept Plan





Site Photographs













Mains Water – Sewerage



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Coliban Water makes no representation or warranty regarding the accuracy or completeness of the information in this document. Coliban Water further accepts no responsibility for any omissions or inaccuracies that may exist, and disclaims all liability for any loss or damage which may arise directly or indirectly from reliance on the information in this document, whether or not that loss is caused by any negligence on the part of Coliban Water or its employees.

Coliban Region Water Corporation

26-32 Wilson Street, Wedderburn



Scale: 1: 800 (A4)

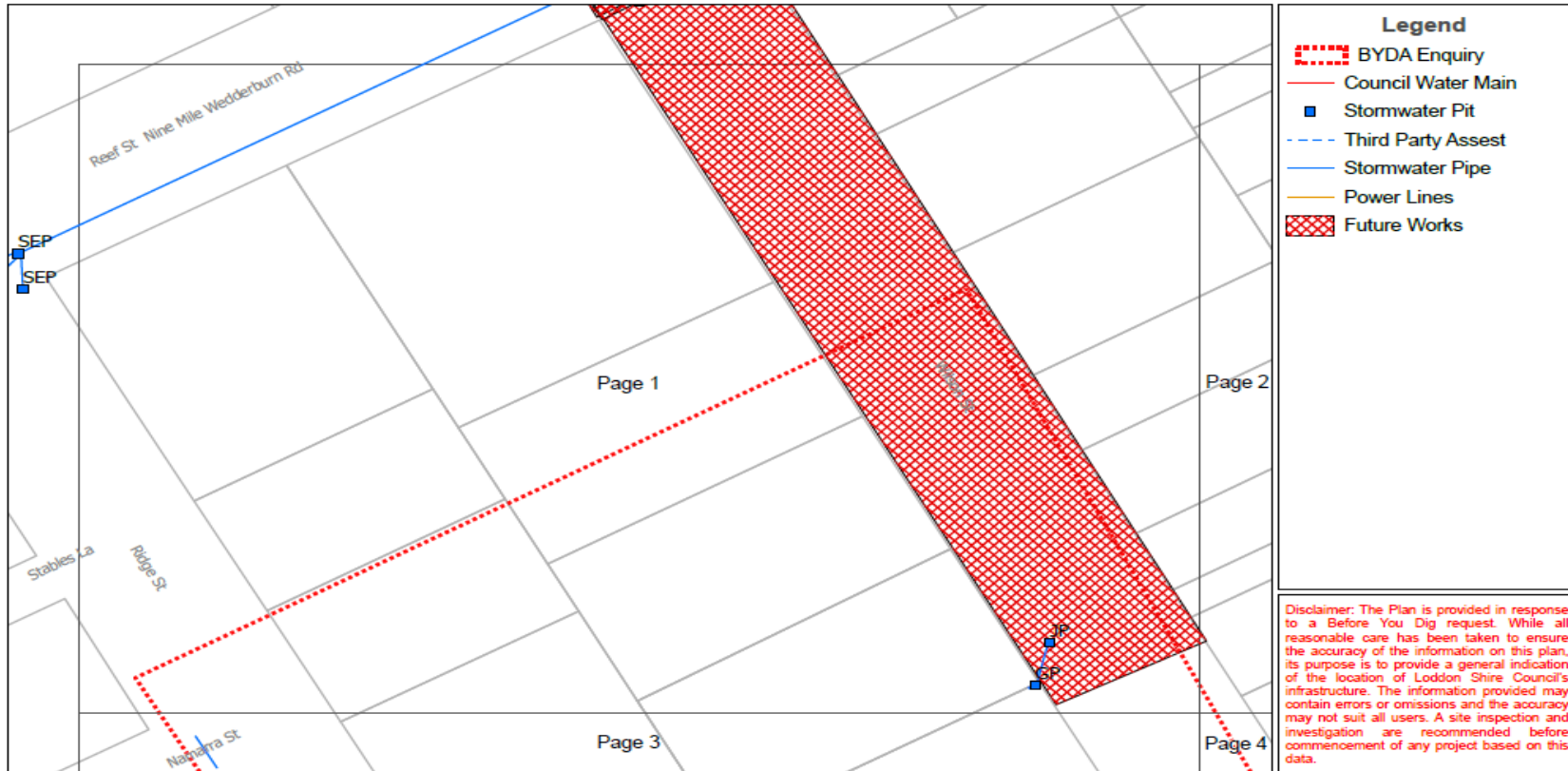


Date: 21/03/2023

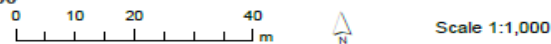
Stormwater



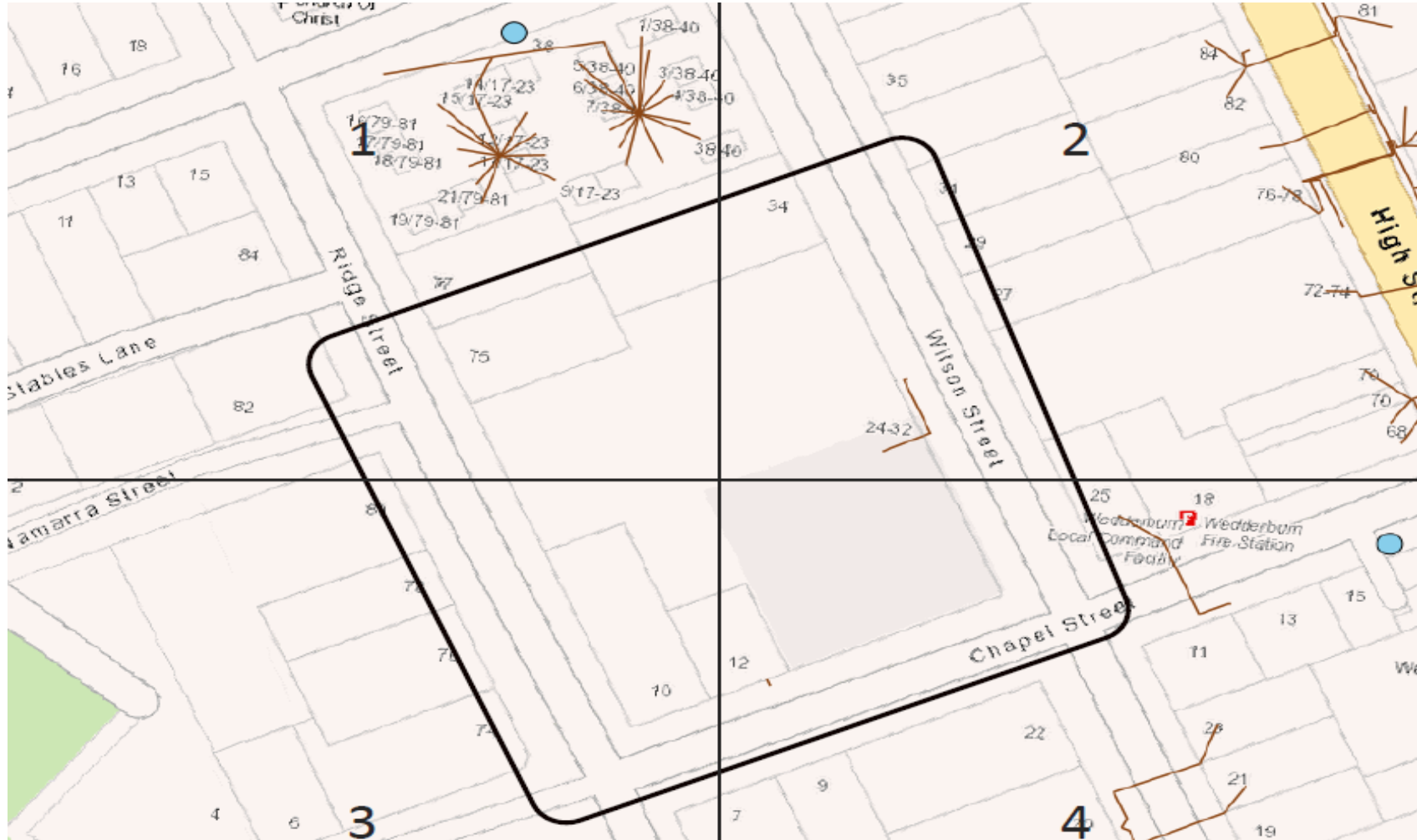
Job # 33779158
Seq # 222125780
Provided by Loddon Shire Council



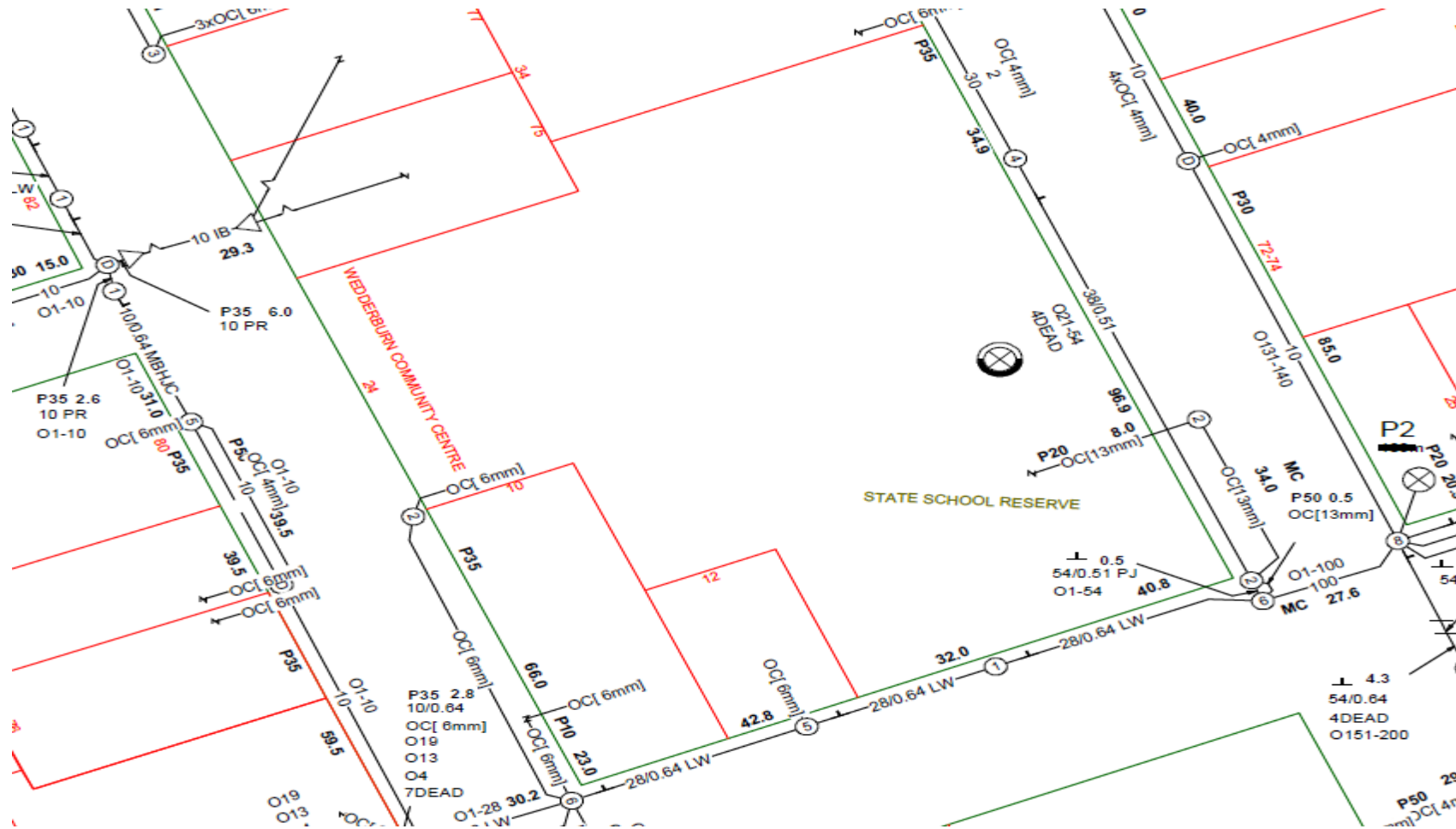
In an emergency contact Loddon Shire Council on 0354941200
09/03/23 (valid for 30 days)
Plans generated by SmarterWX™ Automate



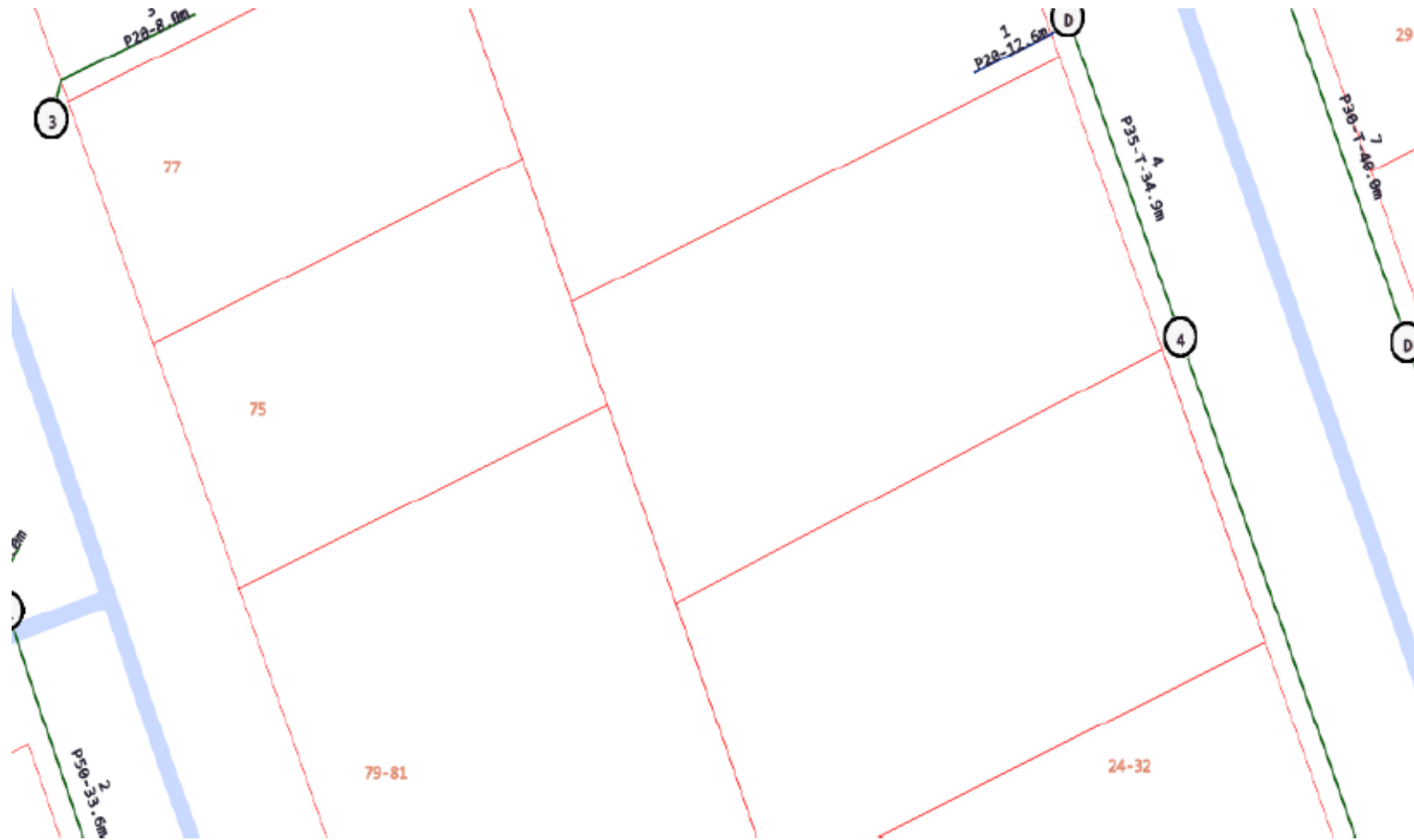
Electricity – Cable – Brown – Over Head Powerlines to Wilson and Ridge Streets



Communications – Telstra



Communications – NBN



From: Sanders, Travis <Travis.Sanders@ambulance.vic.gov.au>
Sent: Friday, 14 April 2023 1:55 PM
To: Loddon Shire
Subject: Ambulance Victoria - Freehold Council Land Purchase Submission - To Be Known As 32 Wilson Street, Wedderburn
Attachments: Wedderburn - Branch - Proposed - 32 Wilson Street, Wedderburn - Concept Plan.pdf

With regard to the above, Ambulance Victoria (AV) submit the following proposal to Loddon Mallee Council to purchase a portion of council freehold land, for the future AV Wedderburn Branch.

The land is required for AVs delivery of a self-funded initiative to protect lives and our community. Funding has been approved to acquire land, which will then lead to funding approvals for future branch project development. It is important to secure a suitable site within AVs identified Target Zone to meet service delivery for a projected 50-year lifecycle.

An optimal location has been identified within the former Wedderburn Primary School site on land adjacent to the Community Centre and Medical Centre. Strategically, this site is also within in a central precinct to all emergency services. AV's view is that the site will enable community connectivity and deliver exceptional emergency callout for the best possible care.

Please refer to the attached concept plans that identify the land to be known as 32 Wilson Street, Wedderburn. The preferred land size will be 43 metres by 43 metres, with a total area of 1849 m2. AV propose title realignment of the 2 existing freehold titles to enable the land transaction.

AV respects Loddon Mallee Councils commitment to the community and the Lions Clubs proposal for a Nursing Home on the former Wedderburn Primary School site. AV believes that we can work together for both proposals to complement each other, while providing all mutually beneficial outcomes for our community. AV only require a small portion of the land which still leaves a substantial area for future development of the nursing home.

We submit that Councils reserved land for the future nursing home development remains, but request consultation with Lions Club to ascertain whether they will agree to releasing the demised portion of the land, for AVs proposed Wedderburn Branch. A positive outcome could then provide council an opportunity to negotiate purchase to AV, without jeopardising commitments or community benefit initiatives.

We value transparency while welcoming an opportunity to present our case to the Lions Club, council, and community.

Also, thank you for our meeting on 4 April 2023 and submitting potential alternative sites. Unfortunately, both sites do not meet AVs site suitability guidelines at the level of the AV proposed site.

We look forward to your response.

Should you have any further queries, please do not hesitate to contact by mobile phone or email.

Travis Sanders
Project Manager – Property
Corporate Services – Property Services

Ambulance Victoria
31 Joseph St, Blackburn North
PO Box 2000, Doncaster 3108



Wedderburn Lions Club

Cnr. High & Reef Streets, Wedderburn, Victoria 3518

Post Office Box 45, Wedderburn, Victoria 3518

<http://wedderburn.vic.lions.org.au>

A.B.N. 99 630 826 536

Mr. Lincoln Fitzgerald
Chief Executive Officer
Loddon Shire Council
Via email: loddon@loddon.vic.gov.au

14th September 2023

Dear Sir

Re: Proposed New Ambulance Station

Following the meeting between representatives from Council, Ambulance Victoria and the Wedderburn Lions Club held on August 15, our Club discussed the possibility of co-locating with the proposed new ambulance station at its meeting held last week.

It is advised that the Club resolved as follows:

That subject to clarification of the details shown on the plan, the Club resolves to approve the construction of an Ambulance Station and provide a letter to Council indicating support for the co-location of a new assisted living facility and an Ambulance Station for Wedderburn.

The Lions Club are continuing to work with Martha Haylett, Inglewood and District Health Service and other key stakeholders to establish an SRS Facility in Wedderburn. We thank Council for providing the necessary land dimensions for the SRS and look forward to working cooperatively to ensure that this vital facility is provided for the Wedderburn community.

Thank you,

Jon Chandler

Secretary

Wedderburn Lions Club

President: Jude Raftis 0428155389
Email: smashingmosaics@gmail.com

Secretary: Jon Chandler 0409198205
Email: weddlions3518@gmail.com



10.6 SALE OF LAND - BROOKE STREET, INGLEWOOD

File Number: GF/19/19534

Author: Christine Coombes, Executive and Commercial Services Officer

Authoriser: Lincoln Fitzgerald, Chief Executive Officer

Attachments: 1. **Brooke Street Inglewood - Valuation report - Confidential**

This attachment is designated as confidential in accordance with Section 3(1)(a) and (g(ii)) of the *Local Government Act 2020*. It contains Council business information, being information that would prejudice the Council's position in commercial negotiations if prematurely released; AND private commercial information, being information provided by a business, commercial or financial undertaking that if released, would unreasonably expose the business, commercial or financial undertaking to disadvantage.

Pursuant to section 66(5)(b) of the *Local Government Act 2020*, if released the information to be received, discussed or considered in relation to this agenda item, may prejudice the commercial position of Council, as various negotiations remain pending **(under separate cover)**

RECOMMENDATION

That Council:

1. Provide public notice of Council's intention to sell Allotments 11, 12 and 13 Sec.4 township of Inglewood;
2. Undertake community engagement in accordance with Council's Community Engagement Policy and the *Local Government Act 2020*;
3. If no objections are raised during community engagement, authorise the Chief Executive Officer to sell Allotments 11, 12 and 13 Sec.4 township of Inglewood, within 10% of the independent valuation price as attached to this report; and
4. Authorise the Chief Executive Officer to undertake the necessary administrative actions to complete the sale.

CONFLICT OF INTEREST

There is no conflict of interest for any Council staff member involved in the preparation of this report, or involved in the subject matter of the report.

PREVIOUS COUNCIL DISCUSSION

Properties which were identified as being surplus to Council and community needs were discussed at the September 2023 Council Forum.

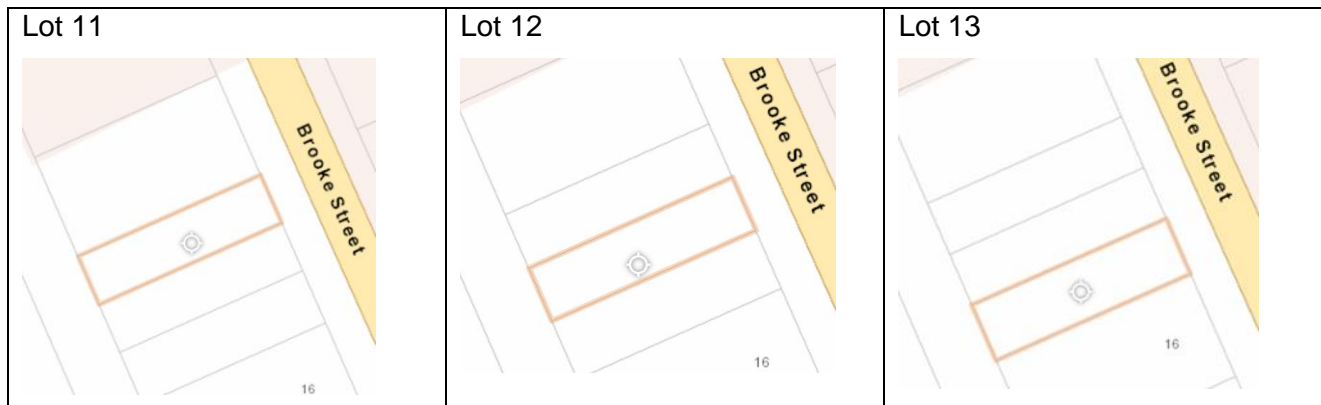
BACKGROUND

The property currently owned by Council is excess to its needs for future public use.

The allotments that form the parcel to be sold and consolidated are:

- All that piece of land being Crown Allotment 11 Section 4 Township of Inglewood, being land more particularly described as Certificate of Title Volume 7709 Folio 012.
- All that piece of land being Crown Allotment 12 Section 4 Township of Inglewood, being land more particularly described as Certificate of Title Volume 11042 Folio 098.
- All that piece of land being Crown Allotment 13 Section 4 Township of Inglewood, being land more particularly described as Certificate of Title Volume 10476 Folio 913.

The property has been valued in accordance with the Local Government Act 2020, and the market value of the property has been assessed at the value contained within the attached report (LG Valuation Services, 5 January 2024).



ISSUES/DISCUSSION

The following points outline the issues with this particular parcel of land.

- Access from the highway may not be feasible.
- There is an unused road easement at the back of the adjacent properties which may be required to be used as a driveway.
- Offering lots to be sold as one parcel of land, to enable allotment size scope for the building of a residential home or units with enabled access.
- The purchaser would be required to consolidate titles upon purchase.

General remarks by the valuer state:

- The property comprises 3 vacant rectangular shaped allotments of a total area of 1,138 square metres situated on the western side of Brooke Street. The site is level in contour with sealed road access. The property is located approximately 100 metres north of the intersection of Brooke and Houston Streets

COST/BENEFITS

Council is currently paying Fire Services Levy on these parcels, there would be a financial benefit to Council in eliminating this ongoing cost.

Cost of sale will include valuation, licenced real estate agent and legal fees. Cost will be expended from the Land and Buildings Reserve, with proceeds of sale to be returned to that Reserve.

RISK ANALYSIS

There are no risks associated with this report.

CONSULTATION AND ENGAGEMENT

In accordance with Section 114 (2b) of the Local Government Act 2020, any sale of land by a Council under this section must be undertaken in accordance with the Council's Community Engagement Policy.

Council will publish notice of intention to sell land on Council's website and by public notice in the Loddon Herald newspaper for a period of four weeks. Council's Community Reference Group will be notified of the intention to sell.

If no submissions are received in regard to the intent to sell, the property will be listed with a licenced real estate agent. If submissions are received and are to be heard, follow up detail will be provided to Council.

10.7 SALE OF LAND - BELL STREET, BORUNG

File Number: GF/19/19534

Author: Christine Coombes, Executive Services Officer

Authoriser: Lincoln Fitzgerald, Chief Executive Officer

Attachments: 1. **Bell Street Borung - Valuation report - Confidential**

This attachment is designated as confidential in accordance with Section 3(1)(a) and (g(ii)) of the *Local Government Act 2020*. It contains Council business information, being information that would prejudice the Council's position in commercial negotiations if prematurely released; AND private commercial information, being information provided by a business, commercial or financial undertaking that if released, would unreasonably expose the business, commercial or financial undertaking to disadvantage.

Pursuant to section 66(5)(b) of the *Local Government Act 2020*, if released the information to be received, discussed or considered in relation to this agenda item, may prejudice the commercial position of Council, as various negotiations remain pending **(under separate cover)**

RECOMMENDATION

That Council:

1. Provide public notice of Council's intention to sell Lot 1 TP 220272 and Lot 1 516558 Borung Rec. Reserve T/ship Borung Parish Kinypaniel KP;
2. Undertake community engagement in accordance with Council's Community Engagement Policy and the *Local Government Act 2020*;
3. If no objections are raised during community engagement, authorise the Chief Executive Officer to sell, Lot 1 TP 220272 and Lot 1 516558 Borung Rec. Reserve T/ship Borung Parish Kinypaniel KP, within 10% of the independent valuation price as attached to this report; and
4. Authorise the Chief Executive Officer to undertake the necessary administrative actions to complete the sale.

CONFLICT OF INTEREST

There is no conflict of interest for any Council staff member involved in the preparation of this report, or involved in the subject matter of the report.

PREVIOUS COUNCIL DISCUSSION

Properties which were identified as being surplus to Council and community needs were discussed at the September 2023 Council Forum.

BACKGROUND

The property currently owned by Council is excess to its needs for future public use.

The parcels that make up the property to be sold are:

- All that piece of land being Lot 1 on Title Plan 516558G, being land more particularly described as Certificate of Title Volume 2357 Folio 392.
- All that piece of land being Lot 1 on Title Plan 220272A, being land more particularly described as Certificate of Title Volume 8070 Folio 213.

The property has been valued in accordance with the Local Government Act 2020, and the market value of the property has been assessed at the value contained within the attached report (LG Valuation Services, 5 January 2024).



ISSUES/DISCUSSION

General remarks by the valuer state:

- The property comprises a vacant 3,065 square metre rectangular shaped allotment situated on the southern side of Bell Street in Borung. The site is level in contour with sealed road access and channelling. The property is located approximately 125 metres west of the intersection of Bell and Perryman Streets.
- The property is situated on the southern side of Bell Street in Borung. The site is level in contour with sealed road access and channelling. The property is located approximately 125 metres west of the intersection of Bell and Perryman Streets.
- The land is zoned Township Zone, (TZ) under the Loddon Shire Planning Scheme.
- The property is located within a designated bush fire prone area. This is a common designation for properties in the immediate and surrounding area and it does not adversely impact on marketability or value.
- Utility services available to the property include electricity, telephone and town water for connection at the property boundary.
- Primary vehicular access to the property is via the Bell Street which is a bitumen sealed road. Access to the property is considered easy and direct.

COST/BENEFITS

Council is currently paying Fire Services Levy on these parcels, there would be a financial benefit to Council in eliminating this ongoing cost.

Cost of sale will include valuation, licenced real estate agent and legal fees. Cost will be expended from the Land and Buildings Reserve, with proceeds of sale to be returned to that Reserve.

RISK ANALYSIS

There are no risks associated with this report.

CONSULTATION AND ENGAGEMENT

In accordance with Section 114 (2b) of the Local Government Act 2020, any sale of land by a Council under this section must be undertaken in accordance with the Council's Community Engagement Policy.

Council will publish notice of intention to sell land on Council's website and by public notice in the Loddon Herald newspaper for a period of four weeks. Council's Community Reference Group will be notified of the intention to sell.

If no submissions are received in regard to the intent to sell, the property will be listed with a licenced real estate agent. If submissions are received and are to be heard, follow up detail will be provided to Council.

10.8 SALE OF LAND - BOORT CHARLTON ROAD, BOORT**File Number:** GF/19/19534**Author:** Christine Coombes, Executive Services Officer**Authoriser:** Lincoln Fitzgerald, Chief Executive Officer**Attachments:** 1. **Boort-Charlton Road - Valuation report - Confidential**

This attachment is designated as confidential in accordance with Section 3(1)(a) and (g(ii)) of the *Local Government Act 2020*. It contains Council business information, being information that would prejudice the Council's position in commercial negotiations if prematurely released; AND private commercial information, being information provided by a business, commercial or financial undertaking that if released, would unreasonably expose the business, commercial or financial undertaking to disadvantage.

Pursuant to section 66(5)(b) of the *Local Government Act 2020*, if released the information to be received, discussed or considered in relation to this agenda item, may prejudice the commercial position of Council, as various negotiations remain pending **(under separate cover)**

RECOMMENDATION

That Council:

1. Provide public notice of Council's intention to sell Lot 1 PS612125S PO Boort, Boort – Charlton Road, Boort;
2. Undertake community engagement in accordance with Council's Community Engagement Policy and the *Local Government Act 2020*;
3. If no objections are raised during community engagement, authorise the Chief Executive Officer to sell Lot 1 PS612125S PO Boort, Boort – Charlton Road, Boort, within 10% of the independent valuation price as attached to this report; and
4. Authorise the Chief Executive Officer to undertake the necessary administrative actions to complete the sale.

CONFLICT OF INTEREST

There is no conflict of interest for any Council staff member involved in the preparation of this report, or involved in the subject matter of the report.

PREVIOUS COUNCIL DISCUSSION

Properties which were identified as being surplus to Council and community needs were discussed at the September 2023 Council Forum.

BACKGROUND

All that piece of land being Lot 1 on Plan of Subdivision 612125S, being land more particularly described as Certificate of Title Volume 11109 Folio 979, the property, currently owned by Council is excess to its needs for future public use.

The property has been valued in accordance with the Local Government Act 2020, and the market value of the property has been assessed at the value contained within the attached report (LG Valuation Services, 5 January 2024).



ISSUES/DISCUSSION

The following points outline the issues with this particular parcel of land.

- The property is visibly being used by the adjoining land owner, with no land use agreement or lease in place.
 - The property was initially purchased as future potential industrial land. The land zoned farming, is not suitable for non-farming related industrial land use purposes.
 - The property is fenced on the western, southern and eastern boundaries, there is no fencing on the northern boundary with the neighbour.
- 1.
 2. General remarks by the valuer state:
 - The property comprises a vacant 20.71 hectares rectangular shaped allotment situated on the northern side of the Boort-Charlton Road, Boort. The site is currently being used for agricultural purposes - cereal cropping. The property is located approximately 2.5 kilometres west of Boort with its south western boundary located at the intersection of the Boort-Charlton Road and Whitaker Lane.
 - Utility services available to the property include electricity, telephone and town water for connection at the property boundary.
 - Primary vehicular access to the property is via the Boort-Charlton Road which is a bitumen sealed road. Secondary access is via Whitaker Lane an unsealed road.

COST/BENEFITS

Council is currently paying a Fire Services Levy on this parcel, there would be a financial benefit to Council in eliminating this ongoing cost.

Cost of sale will include valuation, licenced real estate agent and legal fees. Cost will be expended from the Land and Buildings Reserve, with proceeds of sale to be returned to that Reserve.

RISK ANALYSIS

The boundary may require to be land levelled in a number of places and fenced to separate ownership.

CONSULTATION AND ENGAGEMENT

In accordance with Section 114 (2b) of the Local Government Act 2020, any sale of land by a Council under this section must be undertaken in accordance with the Council's Community Engagement Policy.

Council will publish notice of intention to sell land on Council's website and by public notice in the Loddon Herald newspaper for a period of four weeks. Council's Community Reference Group will be notified of the intention to sell.

Notification will be provided to the adjoining land owners.

If no submissions are received in regard to the intent to sell, the property will be listed with a licenced real estate agent. If submissions are received and are to be heard, follow up detail will be provided to Council.

10.9 SALE OF LAND - GODFREY STREET, BOORT**File Number:** GF/19/19534**Author:** Christine Coombes, Executive Services Officer**Authoriser:** Lincoln Fitzgerald, Chief Executive Officer**Attachments:** 1. **Godfrey Street Boort - Valuation report - Confidential**

This attachment is designated as confidential in accordance with Section 3(1)(a) and (g(ii)) of the *Local Government Act 2020*. It contains Council business information, being information that would prejudice the Council's position in commercial negotiations if prematurely released; AND private commercial information, being information provided by a business, commercial or financial undertaking that if released, would unreasonably expose the business, commercial or financial undertaking to disadvantage.

Pursuant to section 66(5)(b) of the *Local Government Act 2020*, if released the information to be received, discussed or considered in relation to this agenda item, may prejudice the commercial position of Council, as various negotiations remain pending **(under separate cover)**

RECOMMENDATION

That Council:

1. Provide public notice of Council's intention to sell Godfrey Street Boort, Allot.20 Sec.1 Township of Boort,
2. Undertake community engagement in accordance with Council's Community Engagement Policy and the *Local Government Act 2020*;
3. If no objections are raised during community engagement, authorise the Chief Executive Officer to sell Godfrey Street Boort, Allot.20 Sec.1 Township of Boort, within 10% of the independent valuation price as attached to this report; and
4. Authorise the Chief Executive Officer to undertake the necessary administrative actions to complete the sale.

CONFLICT OF INTEREST

There is no conflict of interest for any Council staff member involved in the preparation of this report, or involved in the subject matter of the report.

PREVIOUS COUNCIL DISCUSSION

Properties which were identified as being surplus to Council and community needs were discussed at the September 2023 Council Forum.

BACKGROUND

The property currently owned by Council is excess to its needs for future public use.

The property to be sold is that piece of land being Crown Allotments 20 Section 1, Township of Boort and Parish of Boort, being land more particularly described as Certificate of Title Volume 10294 Folio 369.

The property has been valued in accordance with the Local Government Act 2020, and the market value of the property has been assessed at the value contained within the attached report (LG Valuation Services, 5 January 2024).



ISSUES/DISCUSSION

General remarks by the valuer state:

- The land is zoned Township, (TZ) under the Loddon Shire Planning Scheme. The property is subject to Specific Controls Overlay Schedule 2 (SCO2).
- The property is located within a designated bush fire prone area. This is a common designation for properties in the immediate and surrounding area and it does not adversely impact on marketability or value.
- Utility services available to the property include electricity, telephone, town water and sewerage.

Access to the property would be preferred via King Street West. Access via Godfrey Street would require a permit.

COST/BENEFITSGODFREY STREET WHICH IS A BITUMEN SEALED ROAD

Council is currently paying Fire Services Levy on this parcel, there would be a financial benefit to Council in eliminating this ongoing cost.

Cost of sale will include valuation, licenced real estate agent and legal fees. Cost will be expended from the Land and Buildings Reserve, with proceeds of sale to be returned to that Reserve.

RISK ANALYSIS

There are no risks associated with this report.

CONSULTATION AND ENGAGEMENT

In accordance with Section 114 (2b) of the Local Government Act 2020, any sale of land by a Council under this section must be undertaken in accordance with the Council's Community Engagement Policy.

Council will publish notice of intention to sell land on Council's website and by public notice in the Loddon Herald newspaper for a period of four weeks. Council's Community Reference Group will be notified of the intention to sell.

If no submissions are received in regard to the intent to sell, the property will be listed with a licenced real estate agent. If submissions are received and are to be heard, follow up detail will be provided to Council.

10.10 C579- CANARY ISLAND CULVERT REPLACEMENT - AMENDMENT

File Number:

Author: Kalyan Khanal, Project Engineer

Authoriser: David Southcombe, Manager Assets and Infrastructure

Attachments: 1. **C579 - Tender Evaluation Report (Updated) - Confidential**

This attachment is designated as confidential in accordance with Section 3(1)(g(ii)) of the *Local Government Act 2020*. It contains private commercial information, being information provided by a business, commercial or financial undertaking that if released, would unreasonably expose the business, commercial or financial undertaking to disadvantage.

Updated Tender Evaluation Report **(under separate cover)**

2. **Budget Adjustment - Confidential**

This attachment is designated as confidential in accordance with Section 3(1)(g(ii)) of the *Local Government Act 2020*. It contains private commercial information, being information provided by a business, commercial or financial undertaking that if released, would unreasonably expose the business, commercial or financial undertaking to disadvantage.

(under separate cover)

RECOMMENDATION

That Council:

1. rescind Council resolution 2023/136 made at its December 2023 meeting
2. award Contract 579 – Canary Island Culvert Replacement with the alternative barrier rail option to Avard Civil and amend the project budget as detailed in Attachment 2
3. authorise the Chief Executive Officer to undertake the necessary administrative actions to complete the contract documents.

CONFLICT OF INTEREST

There is no conflict of interest for any Council staff member involved in the preparation of this paper, or involved in the subject matter of the paper.

PREVIOUS COUNCIL DISCUSSION

The Canary Island culvert replacement forms part of the Annual Infrastructure Program 2023-2024. The Annual Infrastructure Program was adopted at the June 2023 Council meeting.

At its meeting held 12 December 2023 Council resolved (resolution 2023/136) to award C579 – Canary Island culvert replacement with the alternative barrier rail option to Avard Civil including a budget adjustment as per Attachment 2.

BACKGROUND

In October 2023, Loddon Shire Council advertised a tender for the replacement of three culverts on Canary Island Road. An allocation for this project was made within the Annual Infrastructure Program 2023-2024.

At the December 2023 Council meeting, the recommendation was to award the contract to Avard Civil with the alternative barrier rail option.

ISSUES/DISCUSSION

While completing the contract documents to engage Avard Civil, an administrative error with the budget amendment was identified. The value of the project and subsequent budget adjustment adopted at the December 2023 Council meeting is incorrect and requires correction to allow the Council to proceed with Contract C579.

The tender evaluation report has been revised with the corrected values. The preferred tenderer remains Avard Civil and the preferred scope still includes delivering the project with the alternative barrier rail installed. Attachment 2 outlines the amended budget according to the updated evaluation report and costings.

While the revised cost is within the original budget allocation and could have been delivered within the budget allocated at the December Council meeting, this additional cost would have reduced the contingency for the project. It is also good governance to ensure that officers are transparent in providing accurate financial information to Council for decision and acknowledging that administrative errors occur from time-to-time requiring timely correction. This error will not have a material impact on the overall capital works program.

COST/BENEFITS

The budget allocation required to deliver the project is still below the original allocation adopted at the June 2023 Council meeting.

Council requested that the tenderers supply a provisional sum for an alternative barrier rail (Crocguard) over the structure, but not attached to the structure. Crocguard provides the additional benefit of not damaging the structure if vehicles hit the barrier rail by ripping out pins or cracking the concrete slab or crown unit. The preferred tenderer submission with the inclusion of the Crocguard is the best priced option.

All submitted tenders are lower than the budget allocated within the 2023-24 Annual Infrastructure Program for the three culverts. The Local Roads Community Infrastructure Program (LRCIP) – Phase 4, funds this project. It is proposed to reduce the funding for this project as detailed in Attachment 2.

All tenderers are based outside of the Shire. Two tenderers indicated that they had staff or sub-contractors that reside with the Municipality. All tenders also indicated that some materials would be sourced from Loddon Shire Council. Other local benefits as indicated in the tender submissions will largely be through accommodation, fuel and meals for the works crew.

RISK ANALYSIS

Avard Civil has successfully completed a number of projects for Loddon Shire Council previously.

There is the potential for project variations that increase the total cost of works. However, the estimated cost of the works and any variations should be accommodated within the project budget.

Risk emanating from this project and company is expected to be minimal.

CONSULTATION AND ENGAGEMENT

The development of this contract C579 – Canary Island Culvert replacement has been prepared with consultation with the Assets and Infrastructure and Finance Departments.

11 INFORMATION REPORTS

Nil

12 COMPLIANCE REPORTS

Nil

13 URGENT BUSINESS

In accordance with Council's Governance Rules, Clause 53 provides that at a scheduled or special meeting of Council, business that is not included in the agenda notice must only be considered if no more than one Councillor is absent and the Council resolves that the matter is urgent.

Despite this requirement, a matter that is not included in the agenda notice must not be considered at a Council meeting if it will:

- (a) directly and significantly affect the exercise of a person's rights;
- (b) alter the Council Plan or the budget; or
- (c) commit the Council to expenditure exceeding \$20,000.

14 CONFIDENTIAL ITEMS

Nil

NEXT MEETING

The next Meeting of Council will be held 27 February 2024 at Wedderburn commencing at 3.00pm.

There being no further business the meeting was closed at .

Confirmed this.....day of..... 2024