

INTERNAL AUDIT REPORT: POST AUDIT IMPLEMENTATION REVIEW

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February 2024



CITY OF
ADELAIDE

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1. EXECUTIVE SUMMARY

In accordance with the 2023/24 Internal Audit Plan for the City of Adelaide (CoA) an internal audit focussing on findings from previous audits was performed. The objective, scope, approach and findings are outlined below.

2. OBJECTIVES

The Post Audit Implementation Review for 2024 focused on the findings of previous audits and how effectively actions/controls have been managed and implemented. This review is included in the 2023/24 Internal Audit Plan to provide a level of comfort to the City of Adelaide Executive Team, the Executive Strategic Risk & Internal Audit Group (SRIA) and the CoA Audit & Risk Committee. The review also identified any gaps and/or delays in the implementation of associated actions. All audits completed in 2020/21 and 2021/22 financial years were included in this review with a focus on those findings rated high and moderate.

3. METHODOLOGY

From December 2023 to February 2024, discussions were held with the relevant stakeholders (ie. managers/team leaders) to discuss the findings and relevant actions (ie. management comments) from the audits completed on their areas in 2020/21 and 2021/22. Thirty-three (33) actions were reviewed independently by Annette Pianezzola, Risk and Audit Analyst. Action owners were asked to provide evidence, and examples of how the actions have been implemented.

A desktop review of each finding was conducted, with twenty-seven (27) of the actions deemed to be satisfactorily completed and implemented. Six (6) actions have been determined as incomplete and have now been registered in the Promapp software system for monitoring and review. These findings are listed below:

The following audits were reviewed	Provider	Year	Total	High	Moderate	Assessed incomplete
Project Management	KPMG	2020/21	8	2	6	2 (High)
Employee Gifts & Benefits	CoA	2020/21	2	-	2	
Training & Development	CoA	2020/21	4	1	3	
Software Asset Management	KPMG	2020/21	2	-	2	1 (Moderate)
Management of Leave Entitlements	CoA	2020/21	2	1	1	1 (High)
North Adelaide Golf Course Financial Processes	CoA	2021/22	2	-	2	
Planning, Development & Infrastructure Act 2016	KPMG	2021/22	2	1	1	
Fleet Management & Fuel Cards	CoA	2021/22	9	6	3	1 (High) 1 (Moderate)

Payroll Operations	KPMG	2021/22	2	2	-	
Total			33	13	20	6

4. CONSULTATION

The following CoA stakeholders were involved in meetings throughout this audit:

- Michelle Arbon, Acting Manager Strategy, Insights & Performance
- Geoffrey Jose, Team Leader Spatial Systems
- Caitlin Evans, Manager Infrastructure Planning
- Geoff Regester, Manager Infrastructure Delivery
- Sia Orman, Corporate Governance Advisor
- Davin Jaehne, Talent Acquisition Advisor
- Daniel Clisby, Centre Manager Aquatic Centre
- Jason Barnden, Coordinator Security & Emergency Management
- Kirsty Omenzetter, Business Partner Safety Compliance & Systems
- Michelle Donaldson, Coordinator Culture & Leadership
- David Carroll, Technology, Infrastructure & Platforms Lead
- Bec Aitken, Team Leader People Services
- Ali Anderson, Lead Payroll Services
- Craig Dykstra, Team Leader Service Desk
- Dominic Fitzsimons, Team Leader Golf Course
- Seb Grose, Manager City Development
- Aleta Gunn, Fleet Coordinator
- Jerome Munchenberg, Consultant Solution Architect
- Simon Cope, Team Leader Procurement & Contract Management

5. SUMMARY OF FINDINGS ASSESSED AS INCOMPLETE

The risk rating assigned has been re-assessed in context of the actions already completed and the actions outstanding.

Ref #1 Project Management Review	Rating: High
<p>The objective of the internal audit was to focus on the governance, risks and controls in relation to the management of the CoA's projects for a sample of CoA projects, including the Gawler Place Upgrade and City Bikeways projects.</p>	
Internal Audit Year: 2020 - 2021	Program: Infrastructure
Original description of finding and management comments	Review Findings and Agreed Actions
<p>Finding: <i>Rigour in undertaking cost estimates prior to agreeing on funding and undertaking initial planning.</i></p> <p>Management Comments: <i>1. Under the ICDC Framework, authority to proceed during the commit phase requires concept designs of 30%. If costs estimates change at key points then options are presented to the CTG and PCG for a decision request on how to proceed. This could be to reduce scope, increase budget, revise timelines/staging or cancel the project. With referrals onto ELT or Council as required dependant on project type and delegation.</i></p> <p><i>2. Commenced: A Risk Based Governance approach has been adopted. This will form part of the revisions currently being made to add complexity and risk ratings to projects. These will inform the level of governance provided to the projects as part of the initiate phase and will be continually reviewed an updated as projects progress.</i></p> <p><i>3. Consideration will be given to whether budget can be allocated to engage an external cost consultant to build a cost estimating framework suitable to CoA projects. This Framework will reference the specific complexities of projects in the City of Adelaide. A proposal will be developed to scope out potential deliverables.</i></p>	<p>Review finding:</p> <p>1. The Project Management Framework (ICDC), describes the processes and the roles and responsibilities during the lifecycle of a project. The framework starts from its early planning, through to its delivery/implementation and then closure. It provides a consistent approach to managing projects in order to ensure CoA deliver on its strategic outcomes. There are five stages in the framework: Initiate, Commit/Concept, Design/Detail Planning, Deliver, and Close. Within each stage of the framework, there are number of critical steps that must be followed and it is identified at the Commit/Concept stage 'design to 30%'. In addition, the Project Governance Terms of Reference (ToR) was developed to support CoA staff involved with projects. The ToR outlines the roles of the Project Management Office (PMO), the governance structure, Change Triage Group (CTG) and Program Control Group (PCG) amongst other things.</p> <p>CTG's role is to review all changes and decisions that are submitted via the change request process, providing an internal controls function to measure compliance with the governance processes within the project management practice. CTG also reviews any information for completeness before it is issued to the PCG, including updates from Steering Committees and Major Projects. One of the</p>

<p>4. <i>The above consultant will assist in building a library of rates and assist in upskilling of identified CoA staff.</i></p> <p>5. <i>The CoA will review the suitability and function of the Design Manual, with a view to simplify and cost items within the manual. The Manager Design and Technical Services will develop a proposal with estimated time inputs for consideration.</i></p> <p><u>Summary</u> In summary the actions that have not been completed are:</p> <ul style="list-style-type: none"> • Address the gap in capabilities relating to costs estimations, the upskilling of internal staff or developing a panel of cost estimators. • Updating the Design Manual to factor in cost estimations of projects. 	<p>core functions of CTG is to discuss and consider the impacts to cost/budgets.</p> <p>PCG have carriage of projects in the adopted Annual Business Plan and Budget. PCG is provided with the relevant information to enable members to provide advice and give direction on the projects outlined in the CoA Long Term Financial Plan. A role of PCG is make decisions on change requests that impact costs, schedule or scope with the strategic program and budget or over the threshold of CTG for capital program and budget.</p> <p>2. The Project Management Framework has adopted a project status reporting tool for strategic and capital projects. The relevant projects are created in this tool with all relevant details. Risks, issues and opportunities are identified within the tool and rated. Any risks that are highlighted as high are highlighted and escalated. In addition, projects also undergo a risk workshop to undergo a full risk assessment which is retained in Content Manager and linked back to the project in the status reporting tool.</p> <p>3. In consultation with the Manager Infrastructure Delivery, it is standard practice for all major / new and upgrade projects to validate pricing using an external cost estimator. Currently CoA is using Rider Levett Bucknall as the preferred external cost advisor on recent works.</p> <p>4. In consultation with the Manager Infrastructure Planning, Assetic has been updated with the library of rates, however it has not yet upskilled CoA staff. Currently, the program has submitted a business bid for 2024-25 for an internal cost estimator.</p> <p>5. In consultation with the Manager Technical Services, this action has not been completed as the Design Manual will be reviewed and updated once the Asset Management Plans have been endorsed by Council by June 2024.</p>
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	<p>Recommendation:</p> <ol style="list-style-type: none"> 1. Progress with the submission of an in-house cost estimator to assist with cost estimations on projects. 2. Once the Asset Management Plans have been endorsed by the Council, review and update the Design Manual with a view to simplify and cost items within the manual.
<p>Management action:</p> <ol style="list-style-type: none"> 1. If business bid submission is approved, recruit for an in-house cost estimator. Target Date: 30 September 2024 2. In consultation with Technical Services team, review and update the Design Manual. This will be greatly aided by the introduction of the cost estimator role and will commence after the endorsement of the Asset Management Plans scheduled for mid-2024. Target Date: 30 June 2025 	
Position Responsible:	Associate Director Infrastructure
Target Date:	As above

Ref #2 Project Management Review	Rating: Moderate
<p>The objective of the internal audit was to focus on the governance, risks and controls in relation to the management of the CoA's projects for a sample of CoA projects, including the Gawler Place Upgrade and City Bikeways projects.</p>	
Internal Audit Year: 2020-2021	Program: Strategy, Insights & Performance
Original description of finding and management comments	Review Findings and Agreed Actions
<p>Finding: <i>Amendments to governance structures to increase alignment with risk and complexity of projects.</i></p> <p>Management Comments: <i>1. A zero-tolerance approach was taken to rolling out the ICDC Framework in a one size fits all concept, which was a strategic decision. It was implemented to enable the CoA to change behaviours across multiple teams and embed the new process into BAU. It was identified that there was a need for strict enforcement and repetition to facilitate a cultural shift in attitude to change management and to enable sufficient training to take place.</i></p> <p><i>The next phase of focused risk-based governance was to be rolled out once there was a comprehensive understanding of variation and change controls were embedded. This change was delayed by COVID delegation changes and is now being implemented.</i></p> <p><i>A Complexity Matrix has been recently implemented that will be used to categorise projects into different governance process streams. Risk Based Governance (Project Management team and Governance) are currently rewriting the guidelines and Terms of Reference for Infrastructure Governance to align with that concept.</i></p> <p><i>2. A tailored governance process will be established for grant funded projects. This will include completing initiate documentation and approval workflows before the application is submitted.</i></p>	<p>Review:</p> <p>1. The Project Management Framework, describes the processes and the roles and responsibilities during the lifecycle of a project. The framework starts from its early planning, through to its delivery/implementation and then closure. It provides a consistent approach to managing projects in order to ensure CoA deliver on its strategic outcomes.</p> <p>A governance model is the overarching set of tools, processes, guidelines, procedures, policies, templates and systems that are used to support and oversee the management of a project. A complexity matrix has been embedded into the system that supports the strategic and major projects. This matrix assists in the classification of projects when resourcing and balancing the workload of staff between more complex projects and minor projects.</p> <p>2. In consultation with the Manager Strategy, Insights & Performance, it was noted that a grant funding working group was to commence to assist with any grant funded opportunities for PCG and SLT. The framework of this working group is still in development and is yet to be finalised.</p> <p>3. Outlined in the Project Governance Terms of Reference (ToR), there are a number of Steering Committees that meet on regular basis. The ToR outlines the roles and responsibilities of each group, complexity of projects they oversee, membership of the committees and purpose of the group. The ToR provides the guidance to support each group / committee.</p>

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<p>3. <i>The current Framework enables for a Steering Committee to be formed, this is decided on a project by project basis. The requirement to form a Steering Committee will be reviewed in accordance with the new governance guidelines and Terms of Reference, with processes developed to support this.</i></p> <p>4. <i>Commenced: A workflow will be developed to facilitate change request for low risk and renewals projects (which will enable approval outside of CTG/PCG meetings when appropriate). Delegations are being written into the Terms of Reference to be approved by the Associate Director and Director.</i></p> <p><u>Summary</u> In summary the action that has not been completed is:</p> <ul style="list-style-type: none"> • Ensuring that an approach in the initial phase of project management in which grant funding is requested to prior to Council approval being received and concept designs are developed. 	<p>4. All change requests go through Program Control Group (PCG) and Change Triage Group (CTG). The process for a change request is located on the Project Management Office sharepoint site which is available to all Project Managers. This details what is required as part of the change request and the timeframe of reviewing and approving the request. The change request form is located on the sharepoint site and it is workflowed to the relevant areas for review and approval.</p> <p>Recommendation: Finalise the framework for the grant funding working group and implement this working group to assist council in identifying opportunities for grant funding to assist strategic and capital projects.</p>
<p>Management action: The Grants and External Funding function aims to create enduring funding partnerships that support the growth and success of the City of Adelaide (CoA). Grant centralisation provides a consistent, governed approach to managing grants across the City of Adelaide (CoA) to ensure we deliver on our strategic outcomes aligned to the various strategies. A coordinated working group will review and improve the existing Governance Framework and policies to centralise the grant function across CoA.</p>	
<p>Position Responsible:</p>	<p>Manager Strategy, Insights & Performance</p>
<p>Target Date:</p>	<p>30 June 2024</p>

<p>Ref #3 Software Asset Management</p>	<p>Rating: Moderate</p>
<p>The objective of this engagement was to consider the effectiveness of the CoA’s software asset management processes and controls and identify opportunities for improvement</p>	
<p>Internal Audit Year: 2020-2021</p>	<p>Program: Finance & Procurement</p>
<p>Original description of finding and management comments</p>	<p>Review Findings and Agreed Actions</p>
<p>Finding: <i>Lack of adequate oversight in contract monitoring.</i></p> <p>Management Comments:</p> <ol style="list-style-type: none"> 1. Management agreed to run a risk assessment as per corporate standards to identify any critical projects carrying high risk. 2. Management agreed to arrange monthly catch ups between Procurement and IM to review contract management activities. 3. Management agreed that regular check-ins will be formalised with Procurement and will be included in the monthly check-ins. <p><u>Summary</u> In summary the action that has not been completed is:</p> <ul style="list-style-type: none"> • Monthly meetings between Procurement and Information Managements team have not continued. 	<p>Review:</p> <ol style="list-style-type: none"> 1. A tiering tool is being used when developing the Procurement Plan to identify the Procurement Tier, which utilises the existing risk assessment criteria to identify top critical contracts carrying high risks. Any high risk contracts will be reported to SRIA, this is a standing agenda item for the Committee. 2. & 3. Monthly meetings were set up between Procurement and Information Management (IM) to discuss software management contracts and this moved to bi-monthly as the meetings became more mature. The discussions not only included software contracts that were managed by IM but also software contracts managed by other programs. Both programs found the meetings to be valuable and beneficial, all information was then uploaded into the Procurement and Contract Management System (PCMS). If any actions were identified in the meetings, these were recorded and actioned appropriately. Through discussions with Information Management, it was identified that the last meeting held was in June 2022. <p>Recommendation:</p> <p>Reinstate the regular monthly meetings between Procurement and Information Management as both programs identified that the meetings were beneficial and valuable for information sharing.</p>

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Management action: Procurement and IM have agreed to reinstate meetings on a monthly basis from March 2024	
Position Responsible:	Manager Finance & Procurement
Target Date:	Completed

<p>Ref #4 Management of Leave Entitlements</p>	<p>Rating: High</p>
<p>The objective of this audit assessed the current leave entitlements, such as leave records and flexi time records, management leave status and the financial impact on Council.</p>	
<p>Internal Audit Year: 2020-2021</p>	<p>Program: People Services</p>
<p>Original description of finding and management comments</p>	<p>Review Findings and Agreed Actions</p>
<p>Finding: <i>Timesheets not completed or approved.</i></p> <p>Management Comments:</p> <ol style="list-style-type: none"> 1. <i>Determine the ramifications for not completing or approving timesheets.</i> 2. <i>Determine who will generate and monitor the relevant report on a regular basis and inform the relevant employee/leader of their responsibility. In addition, identify an escalation process if the behaviour continues.</i> 3. <i>Provide awareness training to all salaried employees regarding the necessity of completing accurate timesheets.</i> 4. <i>Provide awareness training to all leaders who manage salaried employees regarding the necessity of approving timesheets within the relevant timeframe.</i> 5. <i>In consultation with Information Management, review and amend the reports to reflect accurate information.</i> <p><u>Summary</u> In summary the actions that have not been completed are:</p> <ul style="list-style-type: none"> • Timesheets are not completed by employees or approved by leaders within the relevant cycles. • Regular reporting to management to inform leaders when timesheets have not been completed. 	<p>Review:</p> <p>Leave entitlements and leave taken reports are accessible to Executive, Associate Directors, and Managers via the People Metrics Dashboard (introduced in 2023), with People Services Business Partners also continuing to have discussions with leaders regarding the taking of leave and appropriate management of leave balances. Guidance on flexitime processes and procedures is available via the Leader Resources page on the intranet. However, in discussions with various leaders and employees the awareness of the necessity to complete and approve accurate timesheets varies and training is not delivered in a consistent manner. It is noted that some employees were not aware that they had to complete a timesheet, and some leaders were unaware they had to approve timesheets. The current FlexiTime system has significant functionality and reporting limitations, however a review of flexitime was undertaken in May 2023, and any identified concerns regarding the non-completion of timesheets was addressed with individuals at that time.</p> <p>An organisation wide workforce management project is currently underway in which a fully integrated Human Resource Information System (HRIS) will be implemented including a time and attendance solution to be deployed across the whole of City of Adelaide. This system will replace the current FlexiTime system which has significant functionality and reporting limitations. The new time and attendance solution will result in new ways of working for all employees and leaders, and training will be rolled out once the system is implemented; scheduled for Q2 2024/25</p>

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<ul style="list-style-type: none"> • Training staff and leaders of their responsibilities in completing timesheets. 	<p>Recommendation:</p> <ol style="list-style-type: none"> 1. Implement the Workforce Management Solution. 2. Ensure online training and awareness is provided to all employees and leaders to ensure they are aware of their responsibilities when completing and approving timesheets.
<p>Management action:</p> <ol style="list-style-type: none"> 1. Implement the Workforce Management Solution system across CoA. 2. Train employees and leaders in how to use the system, including approving timesheets / flexi time. 	
<p>Position Responsible:</p>	<p>Manager People</p>
<p>Target Date:</p>	<p>31 December 2024</p>

<p>Ref #5 Fleet Management & Fuel Cards</p>	<p>Rating: High</p>
<p>The objective of this audit considered CoA’s policies and / or operating guideline, processes and practices of fleet management including the management of fuel cards. This review assessed the adequacy of systems and controls with respect to fleet assigned to employees. The review also audited the process for monitoring the use of vehicles and ongoing maintenance checks.</p>	
<p>Internal Audit Year: 2021-2022</p>	<p>Program: City Operations</p>
<p>Original description of finding and management comments</p>	<p>Review Findings and Agreed Actions</p>
<p>Finding: <i>No formal induction provided to designated drivers or cardholders</i></p> <p>Management Comments:</p> <ol style="list-style-type: none"> 1. <i>Create a formal induction process that is documented and provided to the relevant teams when vehicles are assigned to them.</i> 2. <i>Each time a new designated driver is assigned a fuel card, ensure they complete an Acknowledgement and Acceptance of Conditions of Use of Council Fuel Card.</i> 3. <i>Provide on an annual basis the current Light Motor Vehicle Allocation & Use Operating Guideline and Fuel Card Operating Guideline to all programs/teams that have vehicles assigned to them. Leaders are to share the information to all relevant team members.</i> 4. <i>Liaise with People Experience team on how to make the induction/refresher training beneficial and look at hosting it an online module.</i> <p><u>Summary</u> In summary the action that has not been completed is:</p> <ul style="list-style-type: none"> • No formal induction process created to be provided to designated drivers and/or cardholders of their roles and responsibilities with CoA vehicles 	<p>Review:</p> <ol style="list-style-type: none"> 1. In discussion with the Fleet Coordinator, there is no formal induction process documented to provide to the relevant teams when vehicles are assigned to them. An online module regarding fleet is included in the City Operations induction, however this is limited to this program only. 2. Each new employee given a fuel card is given an Acknowledgement and Acceptance of Conditions of Use of Council Fuel Card form for them to complete and a copy is retained in the relevant folder in Content Manager. 3. Operating Guidelines are provided to the relevant programs/teams on an annual basis. 4. As part of the City Operations induction training (online), there is a section regarding the use of fleet at CoA. However as the majority of fleet sits within the City Operations program, the online module has only been rolled out to this program and not across the CoA. <p>Recommendation:</p> <p>Create a formal induction process, document this and roll this out to all relevant teams that are assigned vehicles. This induction should be provided to all designated drivers and cardholders to ensure that they are informed and aware of their responsibilities.</p>

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Management action:

New Starter Checklist notes a Week 1 requirement for new starters to read Fleet-related Operating Guidelines, as well as to sign Fleet Induction Checklist. Light Motor Vehicle Allocation and Operating Guideline is currently under review and awaiting final approval. Fleet Induction Checklist link to be updated with updated form (now called Acknowledgement and acceptance of Conditions of Use of City of Adelaide Council Fleet Vehicles

Ensure the new starter reads the following guidelines prior to use of a pool vehicle or commuter use vehicle (if applicable):

- [Light Motor Vehicle Allocation and Operating Guideline](#)
- [Fuel Card Operating Guideline](#)
- [In-Vehicle Monitoring System Operating Guideline](#)
- [Fleet Induction Checklist](#)

Anyone driving a CoA vehicle must complete and sign the Fleet Induction checklist, and provide to the relevant Team Leader for entering into Learn and Perform.

Complete

N/A

Ask the new starter if they would like to submit a 'What's Your Notebook' submission for The Next Edition to help their

Position Responsible:	Associate Director City Operations
Target Date:	30 June 2024

<p>Ref #6 Fleet Management & Fuel Cards</p>	<p>Rating: Moderate</p>
<p>The objective of this audit considered CoA’s policies and / or operating guideline, processes and practices of fleet management including the management of fuel cards. This review assessed the adequacy of systems and controls with respect to fleet assigned to employees. The review also audited the process for monitoring the use of vehicles and ongoing maintenance checks.</p>	
<p>Internal Audit Year: 2021-2022</p>	<p>Program: City Operations</p>
<p>Original description of finding and management comments</p>	<p>Review Findings and Agreed Actions</p>
<p>Finding: <i>No formal safety checklist available for designated drivers</i></p> <p>Management Comments: <i>1. Create a formal checklist to be provided to the relevant teams or designated drivers. The checklist should entail the relevant requirements (but not limited to) such as:</i></p> <ul style="list-style-type: none"> • <i>Cleanliness and roadworthy</i> • <i>Checking for faults</i> • <i>Oil, water and tyres</i> • <i>Frequency of the inspections</i> <p><i>All completed checklists should be filed in the Council’s records management system.</i></p> <p><i>2. Inform all relevant teams the requirements of the safety checklists, provide them a template they can use.</i></p> <p><u>Summary</u> In summary the action that has not been completed is:</p> <ul style="list-style-type: none"> • No formal checklist created to be placed in CoA vehicles so visual inspections can be performed 	<p>Review:</p> <ol style="list-style-type: none"> 1. In consultation with the Fleet Coordinator, it has been confirmed that a formal checklist has been created to cover all aspects identified. However, the fleet management office does not have any oversight as to whether the checklists are being completed. 2. During investigations, it was difficult to confirm if relevant teams were informed that a checklist must be completed for each vehicle. <p>Recommendation:</p> <p>Confirm with relevant teams, if the checklist is being completed and where the records are being stored.</p> <p>If not completed, provide the relevant teams, the template of the checklist.</p>

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Management action: Rather than be conducted in isolation, Fleet Services to connect with WHS to incorporate Vehicle Safety Inspections as part of biannual Site Inspections.	
Position Responsible:	Associate Director City Operations
Target Date:	30 June 2024



APPENDIX 1: RISK MATRIX OF INTERNAL AUDIT FINDINGS

The following framework for the internal audit ratings is consistent with the CoA Risk Management Operating Guidelines and the Risk Management International Standard ISO31000:2018. The descriptions have been tailored to illustrate risk to the business operations.

5.1 CoA Risk Matrix

CoA Risk Matrix		CONSEQUENCE				
		Insignificant	Minor	Moderate	Major	Catastrophic
LIKELIHOOD	Almost Certain	Medium	High	Extreme	Extreme	Extreme
	Likely	Medium	High	High	Extreme	Extreme
	Possible	Low	Medium	High	High	Extreme
	Unlikely	Low	Low	Medium	Medium	High
	Rare	Low	Low	Low	Medium	Medium

8.3 Risk & Finding Descriptions

Rating	Definition	Action	Indicative Timeframe (variations to be agreed by SRIA)
Extreme	<p>The finding represents a control weakness which could have or is having an extreme adverse impact on the business and the ability to meet objectives.</p> <ul style="list-style-type: none"> • Extreme decline in quality and customer service leading to a decrease in community’s confidence in Council • Extreme breakdown in process that leads to illegal activity • Breach of legislation or contractual non-compliance that will result in litigation, prosecution and/or penalty 	<p>Finding reported to Director immediately and response plan developed with appropriate Associate Director. Implementation updates and status reporting managed through Promapp.</p>	<p>Actions managed in Promapp with a timeframe of no more than 3 months for completion.</p>
High	<p>The finding represents a control weakness which could have or is having a high adverse impact on the business and the ability to meet objectives.</p> <ul style="list-style-type: none"> • Major decline in quality and customer services leading to a decrease in community’s confidence in Council • Serious breakdown in process that may lead to increased and unacceptable risk • Breach of legislation or contractual non-compliance that will result in litigation, prosecution and/or penalty 	<p>Finding reported to the appropriate Associate Director immediately and response plan developed with appropriate Manager. Managed through Promapp.</p>	<p>Actions managed in Promapp with a timeframe of no more than 6 months for completion.</p>
Medium	<p>The finding represents a control weakness which could have or is having a medium adverse impact on the business and the ability to meet objectives.</p> <ul style="list-style-type: none"> • Medium decline in quality and customer services leading to a decrease in community’s confidence in Council • Medium operational breakdown in process that may lead to increased and unacceptable risk • Minor breach of legislation or contractual non-compliance that will <u>not likely</u> result in litigation, prosecution and/or penalty 	<p>Finding reported to appropriate Manager through Internal Audit Report and managed through Promapp.</p>	<p>Actions managed in Promapp with a timeframe of no more than 9 months for completion.</p>
Low	<p>The finding represents a minor control weakness which could have or is having a low/ minimal but reportable adverse impact on the business and the ability to meet process objectives.</p> <ul style="list-style-type: none"> • Minimal decline in quality and customer services • Minor breakdown in process that is not likely to affect risk • Minor breach of legislation or contractual non-compliance that will <u>not likely</u> result in litigation, prosecution and/or penalty 	<p>Finding reported to appropriate Manager through Internal Audit Report and managed through Promapp.</p>	<p>Actions managed in Promapp with a timeframe of no more than 12 months for completion.</p>

