Komiti o te Mōrearea me te Tūmaru | Risk & Assurance Committee

Kaupapataka Wātea | Open Agenda






Notice is hereby given that an ordinary meeting of Komiti o te Mōrearea me te Tūmaru | Risk & Assurance Committee will be held on:

Ko te rā | Date: **Tuesday 25 February 2025**
Wā | Time: **09:00**
Wāhi | Venue: **Council Chambers**
35 Kenrick Street
TE AROHA

Ngā Mema | Membership

Tiamana | Chairperson

Jaydene Kana

Independent Member

Joanne Aoake

Koromatua | Mayor

Adrienne Wilcock, JP

Koromatua Tautoko | Deputy Mayor

James Thomas

Kaunihera ā-Rohe | District Councillors

Bruce Dewhurst

Kevin Tappin

Gary Thompson

Waea | Phone: 07-884-0060
Wāhitau | Address: PO Box 266, Te Aroha 3342
Īmēra | Email: governance@mpdc.govt.nz
Kāinga Ipuranga | Website: www.mpdc.govt.nz

TAKE | ITEM NGĀ IHINGA | TABLE OF CONTENTS WHĀRANGI | PAGE

Ā-TIKANGA | PROCEDURAL

NGĀ PŪRONGO A NGĀ ĀPIHA | OFFICER REPORTS

1 Whakatūwheratanga o te hui | Meeting Opening

Chairperson to welcome members and open the meeting.

2 Karakia

The opening karakia is to be performed.

3 Ngā whakapāha/Tono whakawātea | Apologies/Leave of Absence

At the close of the agenda no apologies had been received.

4 Pānui i Ngā Take Ohorere Anō | Notification of Urgent/Additional Business

Section 46A(7) of the Local Government Official Information and Meetings Act 1987 (as amended) states:

"An item that is not on the agenda for a meeting may be dealt with at that meeting if-

(a) The local authority by resolution so decides; and

(b) The presiding member explains at the meeting, at a time when it is open to the public,-

  (i) The reason why the item is not on the agenda; and

  (ii) The reason why the discussion of the item cannot be delayed until a subsequent meeting."

Section 46A(7A) of the Local Government Official Information and Meetings Act 1987 (as amended) states:

"Where an item is not on the agenda for a meeting,-

(a) That item may be discussed at that meeting if-

  (i) That item is a minor matter relating to the general business of the local authority; and

  (ii) the presiding member explains at the beginning of the meeting, at a time when it is open to the public, that the item will be discussed at the meeting; but

  (b) no resolution, decision or recommendation may be made in respect of that item except to refer that item to a subsequent meeting of the local authority for further discussion."

5 Whākī pānga | Declaration of Interest

Members are reminded of their obligation to declare any conflicts of interest they might have in respect of the items on this Agenda.

6 Whakaaetanga mēneti | Confirmation of Minutes

Minutes, as circulated, of the Ordinary meeting of Komiti o te Mōrearea me te Tūmaru | Risk & Assurance Committee, held on 10 December 2024

7 Pūrongo me whakatau | Decision Reports

7.1 Chair's Update

CM No.: 2995227

Te Kaupapa | Purpose

The purpose of this report is for the Chairperson to update the Committee on activities following the last meeting.

Rāpopotonga Matua | Executive Summary

Risk and Assurance Committee Chairperson, Jaydene Kana, to present the Chair's Update report. The report to be circulated separately.

Tūtohunga | Recommendation

That:

1. The information be received.

Ngā Tāpiritanga | Attachments

A⇩. MPDC - Chair Report - 070225

Ngā waitohu | Signatories

Author(s)	Marsha McMillan **Kaitohu Kāwana | Governance Advisor**	

Approved by	Tamara Kingi **Kaiārahi Kāwana | Governance Team Leader**	

TE KAUNIHERA AA-ROHE O MATAMATA-PIAKO DISTRICT COUNCIL

KOMITI O TE MOOREAREA ME TE TUUMARU/RISK AND ASSURANCE COMMITTEE

FEBRUARY 2025 – CHAIR REPORT

Teenaa koutou,

Rau rangatira maa, ngaa mihi nui o te tau hou 2025.

2025 will be another busy year in local government and I'm looking forward to continued collaboration with Risk and Assurance Committee Members and the Matamata-Piako District Council Team, to carry out the responsibilities outlined in the Committee's Terms of Reference.

Alongside the other Chairs of Audit and Risk/Risk and Assurance Committee's for Waikato Region Councils, I have attended briefings/hui hosted by Co-Lab, to better understand the Coalition Government's plan, Local Water Done Well, to address Aotearoa New Zealand's water infrastructure challenges. These briefings have included discussion about Council Controlled Organisations, Waikato Water Done Well and associated risks to Councils. I expect Matamata-Piako District Council's approach to Local Water Done Well and risks, will feature prominently on our Committee's 2025 agenda.

The Office of the Auditor-General's first Forum for Chairs of Audit and Risk/Risk and Assurance Committees will be held in mid-February and cover Insights from the Treasury. Any reflections will be shared verbally at our February hui.

And finally, thanks to Don McLeod for his service to this Committee, Council and the Matamata-Piako community. Also, a warm welcome to new CEO Manaia Te Wiata with whom I look forward to continuing to collaborate with on matters pertaining to this Committee.

No reira rau rangatira maa, teenaa koutou, teenaa koutou, teenaa koutou katoa.

Recommendation
That the Risk and Assurance Committee receives the report.

Jaydene Kana
Chair, Risk and Assurance Committee
07 February 2025

8 Ngā Pūrongo Whakamārama | Information Reports

8.1 Chief Executive Update

CM No.: 2995205

Te Kaupapa | Purpose

The purpose of this report is for the Chief Executive to update the committee on activities following the last meeting.

Rāpopotonga Matua | Executive Summary

Chief Executive, Manaia Te Wiata, to present the Chief Executive Update report. The report will be circulated seperately.

Tūtohunga | Recommendation

That:

1. The information be received.

Ngā Tāpiritanga | Attachments

There are no attachments for this report.

Ngā waitohu | Signatories

Author(s)	Marsha McMillan **Kaitohu Kāwana | Governance Advisor**	

Approved by	Tamara Kingi **Kaiārahi Kāwana | Governance Team Leader**	

8 Ngā Pūrongo Whakamārama | Information Reports

8.2 Audit Management Report - Annual Report 2023/24 and Audit Recommendations Register

CM No.: 2991972

Te Kaupapa | Purpose

The purpose of this report is to:

1) Receive the Audit Management Report for the Annual Report 2023/24 and provide any feedback if desired (to be circulated separately).
2) Receive the Audit Recommendations Register and provide any feedback if desired (attached).

Rāpopotonga Matua | Executive Summary

Audit New Zealand (Audit) is Council's external auditor appointed by the Office of the Auditor General to conduct the auditing of Council's Annual Report and reporting process on their behalf.

Audit issue an Audit Management Report following each Annual Report with recommendations on processes and issues that can be fixed or improved for future auditing processes. This report for the 2024/25 Annual Report will be circulated separately with accompanying staff comments.

Staff maintain a register of all Audit recommendations from previous reports and how we are tracking against these. Staff have identified improvements in the way this report is produced and will be reviewed prior to the next scheduled reporting to Risk and Assurance meeting.

Tūtohunga | Recommendation

That:

1. **The Committee note the recommendations made by Audit New Zealand in the Audit Management Report on the Annual Report 2023/24.**

2. **The Committee provide any feedback on the Audit Management Report if desired *[feedback to be specified].***

3. **The Committee note the Audit Recommendations Register and note staff will be making improvements to this register.**

4. **The Committee provide any feedback on the Audit Recommendations Register if desired *[feedback to be specified].***

Horopaki | Background

Audit New Zealand provided an unmodified opinion for the Annual Report 2023/24 on 27 November 2024, meaning Audit NZ were satisfied with the financial and non-financial information and data in the report.

Audit Management Report

The Audit Management Report details areas where improvement is needed, this report including staff comment is circulated separately.

Six new recommendations were made, with two recommendations classed as 'urgent' and four are classed as 'necessary'. There are 18 open recommendations in total.

'Urgent' recommendations are expected to be addressed urgently, 'necessary' recommendations are expected to be addressed within six months so Council can meet best practice standards, and 'beneficial' recommendations are expected to be addressed between 6 to 12 months.

A summary of recommendations is as below:

Priority	Priority			
	Urgent	Necessary	Beneficial	Total
Open matters from 2023 report	1	10	1	**12**
Open matters from 2024 interim report	-	4	2	**6**
Implemented or closed during 2024 final audit	1	3	1	**5**
Total matters considered	**2**	**17**	**4**	**23**

Audit Recommendations Register
Staff maintain a register of all Audit recommendations from previous reports and how we are tracking against these. This register is attached for the Committees information. Staff have identified improvements in the way this report is produced and will be reviewed prior to the next scheduled reporting to Risk and Assurance meeting.

Mōrearea | Risk

There is a risk that actions undertaken to address internal control deficiencies may not be considered sufficient or appropriate to address Audit New Zealand's concerns.

In order to mitigate this risk, the internal teams have regular open discussions with Audit New Zealand to ensure that matters are being progressed to Audit New Zealand's satisfaction.

Ngā Pāpāhonga me ngā Whakawhitiwhitinga | Communications and engagement

No communications is planned. Council will continue to work on resolving and clearing the outstanding issues.

Ngā Tāpiritanga | Attachments

A⇩. Audit Recommendations Register as at 14 February 2025

Ngā waitohu | Signatories

Author(s)	Olivia Picard **Kaitohu Kaupapahere Paetahi | Graduate Policy Advisor**	

Approved by	Sandra Harris **Pou Kaupapahere, Rāngai Mahitahi me te Kāwana | Policy, Partnerships and Governance Manager**	

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
Assets under construction	2021/22	That Assets under construction should be reviewed at year end and be reflected within the appropriate Property, Plant and Equipment line item to the financial statements when it is available for use. There were a number of assets that should have been capitalised in the prior years held in work in progress at 30 June 2024. During the audit management evaluated work in progress and adjusted the financial statements.	Urgent	In progress	2022/23 comment: It is most efficient for asset staff to capitalise assets in the asset management systems when they are finally complete with all costs captured, which may come after the point at which the asset is actually in use. We reviewed any such projects for 30 June 2023 and capitalised these 'on the books' to ensure that they are accounted for in the correct line of the PPE note to the financial statements, and depreciated from the correct date. Their formal capitalisation is in progress. 2023/24 comment: Confirm that we will review assets that are under construction and ensure financial statements reflect when the assets are available for use. (Assets and Projects Manager)

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
Payroll Controls - Timely review of Masterfile changes	2022/23	Management should ensure that the Masterfile changes are reviewed on a regular basis or at least once every month to prevent any unauthorised changes to the Masterfile not being detected and corrected in a timely manner. This should be an independent review by someone who does not have access to make Masterfile changes.	Urgent	In progress	As set out in the management comments to the Audit Report, we have a differing opinion on the potential for risk in our existing procedures, and are comfortable that our processes are robust. We have however identified opportunities to further refine our process and will implement these going forward from now.

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
Quality and timeliness of information – PPE	2023/24	The quality of supporting listings and evidence in relation to property, plant and equipment needs significant improvement. We recommend that management implements quality control processes to ensure that listings provided to audit reconcile to the financial statements and relevant supporting information is available in a timely manner.	Urgent		<u>Bank reconciliations</u> The bank reconciliation module in our Authority software is excellent in terms of generating an automated daily bank reconciliation that give us assurance that all transactions in the bank account and cashbook are captured. Beyond that, the module provides insufficient transaction information to enable a smooth matching of items between the bank account and the cashbook. The system is also incapable of producing an automated reconciliation at a specified date, which therefore requires staff to manually produce the year end bank reconciliation. These issues have been raised with our software provider Civica on an individual basis, and in conjunction with other local authority users. Since Audit NZ's interim Report, staff have met with other users and the module expert from Civica, and have gained assurance that we are utilising the module to its current potential. As a result of the combined user issues raised, Civica have provided some enhancements in recent patches, however we have not found them to provide any benefit for the process of matching transactions. The module expert from Civica also noted that they have spent considerable time trying to develop an automated retrospective trial balance, but have found the process to be overly complex, and we were not given a strong indication that this enhancement would be forthcoming. As such, staff have recently spent significant time

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
					developing and testing their own tool outside of the Authority system that we have found to be significantly beneficial in the process of matching transactions. We expect that this will greatly improve the timeliness of the matching, although noting that there are always transactions that take longer to resolve as they may require further investigation. Staff are also trialling processes to help make the manual bank reconciliation process at year end more efficient. Property, plant and equipment There are many staff involved in the administration and development of the supporting information for property, plant and equipment. Going forward, we will assign responsibility to an individual to coordinate and ensure that the information provided to the Audit team reconciles to the financial statements and is provided in a timely manner.

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
Timely capitalisations - PPE	2023/24	Management should tighten the procedures and controls around asset capitalisations to ensure that assets are correctly classified for inclusion in the financial statements	Urgent	In progress	Council has enhanced its processes and capitalisations over the past couple of years, particularly in Parks and Facilities and Roading. However, we acknowledge that some older projects, especially in the Three Waters sector, still need to be capitalised which we are currently working on this year to prevent any impact on our depreciation calculations.
Variances in PPE WIP and additions listings	2021/22	That management perform reconciliations of the PPE WIP and additions listings to the general ledgers on a regular basis. Variances should be investigated and resolved timeously.	Urgent	In progress	Reconciliations between the final listing of WIP and the general ledger were prepared for 30 June 2023. We are currently working on making the capital spreadsheets more comprehensive as a single source of information for the Finance, Strategy and Delivery teams, rather than each team relying on their own version for different purposes. Once this is bedded down we will ensure regular monthly reconciliations are undertaken between spending in capital work orders and the general ledger. We have planned to implement a detailed quarterly review of capital work orders for 2023/24 to improve the financial monitoring of capital projects and timeliness of

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
					capitalisations. This has been delayed at this point due largely to staff commitments with the LTP project but will be a focus for the six month reporting. We've also updated the process for employee exits to ensure that when an employee leaves that there is a formal process to ensure any capital work orders they have been managing are either capitalised or transferred to an appropriate person to take-over.
Accounting for financial instruments – LGFA borrower notes	2022/23	Ensure the LGFA borrower notes are measured at fair value and accounted for in line with the standard. This balance was not material for the financial year. As the District Council enters more loans going forward, this balance may become material. The District Council should still ensure that the accounting complies with the standards.	Necessary	In progress	Noted (Finance and Business Services Manager)

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
Broken Authority Reports (performance reporting)	2022/23	The District Council should resolve the issues within the system causing performance reports to be broken. The District Council's ability to generate the raw data deteriorated and processes were put in place to ensure that the data was available for audit in the form of pdf documents extracted throughout the year. We performed additional alternative audit work to confirm the completeness of data. However, the issues within the system remain unresolved.	Necessary	Not yet progressed	2023/24 comment: There has been some progress to address this. There has been delays due to the prioritisation of resolving critical system performance issues. In the meantime, we have implemented an ad-hoc process to address the most important Crystal Reports. The Digital Enablement team has been working diligently to fix these critical reports, but the process remains slow. In the short-term we will continue with the current ad-hoc process to ensure critical reports are addressed. For the long-term, we will focus on: Completing the upgrade to the latest release version of the system. Streamlining report generation processes, moving towards more automated, self-service reporting options, which will reduce reliance on ad-hoc fixes. (Information Technology Manager)

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
CRM Reliability for substantiating the response time (performance reporting)	2022/23	We recommend that Council introduce a job card where Trello is used. Based on the sample tested we noted, the majority of jobs had job cards with only a small portion not having job cards.	Necessary	In progress	2023/24 comment: Work has been done to establish integration between Council's corporate customer request system and the assets system which is to be accessible by staff in the field. This integration is critical to ensuring that the data being entered into the request system, from which reports are drawn, is accurate and complete and correctly formatted. This will lead to more reliable reports in the future. We are currently entering the testing phase of this integration so that we can iron out any wrinkles. (Digital Manager).
Depreciation not correctly backdated	2023/24	Management should investigate the reasons why the system is not calculating depreciation correctly using the install date (date when asset was actually completed) rather than the found date (when asset was capitalised) and take appropriate action.	Necessary	In progress	Unfortunately, AssetFinda cannot backdate depreciation for found assets. As a result, the end-of-year depreciation does not include any backdated amounts. However, staff can manually review this annually to ensure there are no significant impacts. As we work on reducing our backlog and WIP, fewer assets will be added with a found date. We conduct annual or bi-annual valuations, which trigger the asset to be correctly valued, providing a written-down value reflective of the asset's age. The asset will then continue to depreciate based on this updated value.

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
Expected credit loss assessment	2022/23	Ensure that the report for the aged trial balance is generated on balance date each year and consider whether updates to the system can be made to enable aged debtors reports to be generated at specific dates.	Necessary	In progress	2023/24 comment: We do not expect this to be an issue in the coming 2025 year as the 30 June will fall on a working day, so the aged trial balance can be run at the close of business. (Finance and Business Services Manager)
Fraud risk assessment	2022	That Council updates its fraud risk assessment, which was last reviewed in 2018, to gain a better understanding of the fraud risks that may impact the District Council.	Necessary	Not yet progressed	Some work has been undertaken during 2023 in the area of assessing the fraud risks associated with cash-handling in preparation for the internal audit that was completed over cash-handling in May 2023. It is unlikely that we will be able to complete a full review of the fraud risk assessment in 2023/24 due to other priorities. This will be placed on the schedule of corporate priorities to be timetabled.

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
Internal charges for NZTA claim	2023/24	We recommend the District Council reviews its processes for recording labour time for internal charges for workorders (which form part of the NZTA claim) to ensure that the labour time is captured in a timely manner for labour charges to be included as part of the NZTA claims.	Necessary	Not yet progressed	Internal Roading labour charges are generally claimed in a timely manner, and NZTA audits have not identified any issues with our process. While some charges are backdated, they are very minor. Due to overlapping work and budget changes with Transport Choices and General Roading subsidised work, some adjustments were necessary at the end of the year as NZTA changed the funding sources. We will follow up with departments charging to the roading work orders to ensure they stay on top of their timesheet charges and review these regularly.
Lapses in New User onboarding process	2022/23	Follow due process for all new staff appointed through the completion/approval of the "Computer User Form".	Necessary	Not yet progressed	2023/24 comment: We've adjusted the user on boarding process, but recent review/feedback shows that gaps still exist. Due to limited staff resources, long-term plans to streamline the process have been delayed. In the short-term we are planning to address immediate compliance gaps while transitioning to the new ITSM-based process. (Information Technology Manager)

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
Property, plant, and equipment – Depreciation	2020/21	We recommend management consult with other local authority users of AssetFinda, or the software company itself, to better understand the rationale for the AssetFinda approach to depreciation and confirm this remains appropriate. It is important that the Council's underlying accounting records are the basis of the depreciation used in the financial statements to align with the applicable accounting standards rather than the valuers' reports. In section 4.1.2 to this report, we noted several instances of the AssetFinda system not correctly backdating depreciation.	Necessary	Disagree	We do not agree that the current calculation would result in a material error in the financial statements.

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
Register of pecuniary interest	2022	All interests should be declared by elected members to ensure that the District Council complies with the Local Government Act pecuniary interests' requirements.	Necessary	In progress	Declarations of interest have been updated.
Segregation of duties – Journals	2021/22	Consider implementing an electronic system to allow for delegations to be incorporated into the journals system (Authority) and to implement a control to ensure journals are approved before they are posted.	Necessary	Not yet progressed	Due to the IT complexity of the matter, we have not had an opportunity to progress this.
Segregation of duties – Journals	2022/23	Consider implementing an electronic system to allow for delegations to be incorporated into the journals system (Authority) and to implement a control to ensure journals are approved before they are posted. 2023/24 Audit: Due to the IT complexity of the matter, the	Necessary	Not yet progressed	2023/24 comment: The Authority system as it stands does not have functionality to utilise delegations or a pre-approval process for journals. We will look at available options to improve electronic controls in this area. In the meantime, the risk that journals could be posted before approval remains, mitigated slightly by staff being aware of the expectation to seek approval before posting, and being motivated to ensure their journals are correct before posting to avoid additional re-work. In the absence of an electronic control, we note that our current process includes an independent review of journals subsequent to posting in which the

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
		District Council has not had an opportunity to progress this.			approval of the journal is checked and confirmed along with the details and supporting documentation for the journal. (Finance and Business Services Manager)
Sensitive expenditure policies	2020/21	We recommend management update sensitive expenditure policies to include recent guidance	Necessary	Not yet progressed	The review of the Sensitive Expenditure Policy has been delayed due to competing priorities. With the LTP and other projects currently underway, the most realistic timing for the work to undertake this review is April-May 2024, unless other resourcing options are identified.
Suspense account reconciliations not prepared and reviewed monthly	2018/19	Monthly reconciliations of suspense accounts should be prepared and independently reviewed. Reconciliations were prepared and reviewed on an ad hoc basis.	Necessary	In progress	Council has a number of suspense accounts that are used for a range of purposes, and across a range of activities of Council (eg unidentified receipts, allocation of costs, planning deposits, external rebates, inventory control, payroll etc). Some suspense accounts are used daily, and are dependent on manual intervention in order to clear the suspense balance. Other suspense accounts are used only occasionally and/or are largely self-clearing (eg rates rebates, payroll). Currently regular effort is focused mostly on reconciling the suspense accounts that require manual intervention.

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
					Extending the effort to cover regular review of all suspense accounts and the formalised independent review process has been a sticking point to date due to workloads. (Finance and Business Services Manager)
Test organisational business continuity and disaster recovery plans	2017/18	The District Council should document and test its organisational business continuity and IT disaster recovery plans. IT has developed an IT Disaster Recovery Plan (DRP) and we understand that Council has started work to develop a (BCP). Neither the BCP nor DRP have been tested fully. Management have indicated that this is a project that is to be finalised during the 2025 financial year	Necessary	In progress	We're undergoing a comprehensive review of our BCP/DRP for IT infrastructure. This includes considerations for cyberattacks, natural disasters, and hardware failures. As part of this process, we've identified both short-term and long-term action plans. One key initiative is aimed at enhancing the resilience of our network and IT systems. The BCP/DRP will be revised immediately after completing the short-term plan, and then further updated once the long-term plan has been fully implemented. (Information Technology Manager)
Useful lives disclosed for accounting policy	2023/24	The Council should review the accounting policy for useful lives included in the financial statements and ensures that it is consistent with the useful lives adopted.	Necessary	In progress	The useful lives of PPE are reviewed as part of a revaluation process, and following that the accounting policy is updated to reflect any changes made. Staff will review any updates required following the 30 June 2025 revaluation.

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
Valuation of property, plant, and equipment – valuers' recommendations for improvement	2018/19 & 2019/20	The District Council should: • Implement the external roading valuer's recommendations to improve the overall completeness and accuracy of data used for valuations. • Consider the recommendations included in the peer review of Three Waters infrastructure and implement an action plan to address these. Consider applying these recommendations to other asset classes held on a revaluation basis. There were no revaluations undertaken for 2024 therefore progress will be assessed in future audits. We understand the recommendations are being considered as part of the District Council's improvement plan. The status remains unchanged.	Necessary	In progress	No comments required

Focus area/issue	Year First raised	Recommendations	Priority	Status	Staff Comments
PE capitalisation - Internal costs	2022/23	A control should be put in place to independently review the spreadsheet that captures the time charged by staff to be capitalised to projects. The review should also consider whether the costs meet the requirements of PBE IPSAS 17: Property, plant and equipment to ensure that the costs are directly attributable to bringing the asset to the location and condition necessary for it to be capable of operating in the manner intended by management. Our work indicated that Three Waters assets is the only asset class that does not have its internal time charged hours independently reviewed.	Beneficial	In progress	Over the next year, an internal process will be set up to review internal charges for the 3 waters project team. This will not be independent but managed within the 3 waters team. (Assets and Projects Manager)
Policies to update	2017/18	• Capitalisation Policy (updated in 2012).	Beneficial	Not yet progressed	The review of the Capitalisation Policy has not progressed due to competing priorities. We have not yet earmarked a date for this review.

8.3 Six Month Report July - December 2024

CM No.: 2984048

Te Kaupapa | Purpose

To provide the Six Month Report July – December 2024 to the Committee for information and feedback.

Rāpopotonga Matua | Executive Summary

The Six Month Report provides an update on financial and non-financial performance from July to December 2024 and shows how we are tracking against our targets and measures set out in the 2024-34 Long Term Plan.

The Six Month Report will be circulated separately.

Tūtohunga | Recommendation

That:

1. **The Committee receives the Six Month Report 2024.**

2. **The Committee provides feedback if desired *[feedback to be specified].***

Horopaki | Background

Council is required to produce an Annual Report by 31 October each year under the Local Government Act 2002 (LGA) and report on its financial and non-financial performance. The Annual Report is externally audited each year.

The Six Month report is produced by staff each year to provide an indication on how Council has performed between July and December 2024. This report is not required to be produced under legislation, and is not externally audited. The report is produced to maintain good practice and a 'no surprises' approach.

Each year, Council's survey provider contacts residents in the district to gauge how well it is delivering a range of services, and what can be improved going forward.
Key Research is Council's provider as of 2024/25 and will conduct the customer survey until 2026/27. Key Research invite 100 residents to share their views each quarter (400 per year) via post, with each letter containing a link to the online survey and a unique code allowing residents to access the survey. Residents can also opt to fill out a hard copy survey.

Each survey question has a 10-point scale, with 1 being the lowest and 10 being the highest. Following the development of the Long Term Plan 2024-34, Council resolved to remove the 'neither/nor' option in the survey. Dissatisfaction is counted as 1 – 5 and satisfaction is counted as 6 – 10 and there is a separate 'don't know' option available for respondents which is excluded from the final results for accuracy. The satisfaction results will therefore differ from previous years Annual Reports.

Ngā Pāpāhonga me ngā Whakawhitiwhitinga | Communications and engagement

An Audit engagement plan for the 2024/25 Annual Report audit process is being developed. A draft plan is expected to be received by staff in February/March, and will be brought to the Committee at the next meeting. The plan will include the Annual Report work programme and the expected date of adoption for the 2024/25 Annual Report.

Ngā Tāpiritanga | Attachments

There are no attachments for this report.

Ngā waitohu | Signatories

Author(s)	Olivia Picard **Kaitohu Kaupapahere Paetahi | Graduate Policy Advisor**	
	Larnia Rushbrooke **Pou Pūtea, Ratonga Pakihi | Finance & Business Services Manager**	

Approved by	Sandra Harris **Pou Kaupapahere, Rāngai Mahitahi me te Kāwana | Policy, Partnerships and Governance Manager**	

8.4 Update on Policy Register

CM No.: 2992824

Te Kaupapa | Purpose

The purpose of this report is to:

- Update the Risk and Assurance Committee on the updated policy register.
- Discuss the particular policies proposed for inclusion on the Risk and Assurance Committee work programme for 2025.

Rāpopotonga Matua | Executive Summary

In 2024, the Risk and Assurance Committee (the Committee) identified the need for a comprehensive review of the policy register (the Register). As part of this initiative, the Register is currently undergoing a thorough validation process to ensure that all required fields are completed accurately. Additionally, work is underway to explore the potential automation of the Register, which would enable managers to receive workflow notifications when policies under their responsibility are approaching their review date.

By updating the Register, the Committee will receive accurate and up-to-date information on policies scheduled for review, facilitating their inclusion in the work programme for discussion at Committee meetings. This will help ensure that policies are reviewed within the appropriate timeframes.

The polices that are currently overdue for review are:

Policy Name	Due Date
Procurement Policy	01/12/2019
Managing Conflict of Interest	01/08/2021
Sensitive Expenditure 2019	01/07/2022

The policies that are due for review in 2025 are:

Policy Name	Due Date
Pre-Election Report	26/07/2025
Health and Safety Policy	08/08/2025
Transportation Procurement Strategy	01/09/2025
Code of Conduct	01/11/2025

Attached to this document are PDF version exports from the Register.
Attachment A is all of the active policies that have been indicated to go to the Committee. The orange highlight are policies that are overdue for review, and the green highlight are the policies that are due for review in 2025.
Attachment B is all of the active policies that have been indicated not to go to the Committee.

Tūtohunga | Recommendation

That:

1. **The information be received.**

2. **The Committee provide feedback on the policy register and policies to be incorporated into the Committee Work Programme [*feedback to be specified*].**

Ngā Take/Kōrerorero | Issues/Discussion

The Committee are invited to provide feedback to staff on the Register, including those policies to be included in future work programmes for the Committee.

Mōrearea | Risk

The Register has been developed to assist in oversight of policy reviews to ensure that regular review is undertaken and statutory timeframes for review are complied with. The risk of not reviewing the policies could result in policies not reflecting best practice and they may fail to comply with new legislation/regulations where relevant.

Te Tākoha ki ngā Hua mō te Hapori me te here ki te whakakitenga o te Kaunihera | Contribution to Community Outcomes

Matamata-Piako District Council's Community Outcomes are set out below:

MATAMATA-PIAKO TŌ MĀTOU WĀHI NOHO | OUR PLACE	MATAMATA-PIAKO DISTRICT COUNCIL TE ARA RAUTAKI | STRATEGIC DIRECTION		
TŌ MĀTOU WHAKAKITENGA | OUR VISION Matamata-Piako District is vibrant, passionate, progressive, where opportunity abounds. 'The heart of our community is our people, and the people are the heart of our community.			
TŌ MĀTOU WHĀINGA MATUA | OUR PRIORITIES (COMMUNITY OUTCOMES)			
			
He wāhi kaingākau ki te manawa | A place with people at its heart	He wāhi puawaitanga | A place to thrive	He wāhi e poipoi ai tō tātou taiao | A place that embraces our environment	He wāhi whakapapa, he wāhi hangahanga | A place to belong and create

The community outcomes relevant to this report are as follows:

- A place with people at its heart.
- A place to thrive.
- A place that embraces our environment.
- A place to belong and create.

Ngā Tāpiritanga | Attachments

A⇩. Final RAC Policy Register
B⇩. Final Non-RAC Policy Register

Ngā waitohu | Signatories

Author(s)	Charlotte Walker **Kaitohu Kaupapahere Paetahi | Graduate Policy Advisor**	

Approved by	Sandra Harris **Pou Kaupapahere, Rāngai Mahitahi me te Kāwana | Policy, Partnerships and Governance Manager**	

In Development
Overdue for Review
Upcoming for 2025 Review

Title	Officer Name	Adopted Date	Review Date	Document Description
Annual Plan	Sandra Harris			Annual Plan - The Annual Plan sets out our budget, any changes to service information and sources of funding for 12 months from 1 July to 30 June each year, along with other relevant financial and policy information from what is in the Long-Term Plan (i.e. it explains variances). The Annual Plan has historically been consulted upon but recent changes in legislation means that Council does not have to consult on the Annual Plan if there are no significant or material changes from the Long-Term Plan.
Annual Report	Sandra Harris			Annual Report - Each year we produce an Annual Report which compares what we did against what we said we were going to do in our Long Term Plan and distribute a summary to the community. This gives a formal report on the financial and non-financial performance of Council. For the non-financial performance, this includes reporting on annual customer survey, which is undertaken by an external research company who contacts a sample of approx. 400 residents to ask their views on council services and facilities. The results measure our performance and most of these are included in the annual report, as they are part of council's performance measures/targets.
Revenue and Financing Policy 24-34	Larnia Rushbrooke			Revenue and Financing Policy 24-34 - This Policy describes how we will fund operating expenses and capital expenditure from the funding sources specified in section 103 of the Local Government Act 2002.
Procurement Policy	Larnia Rushbrooke	13/12/2016	01/12/2019	Procurement Policy - Matamata-Piako District Council (MPDC) purchases a variety of goods and services ranging in scope from major contracts for civil works, large maintenance contracts, land, buildings and small items such as office supplies and minor equipment. The following policy must be to help assess the most appropriate method of procuring for such projects or purchases.
Managing Conflict of Interest	Catherine Stevens	14/08/2018	01/08/2021	Managing Conflict of Interest - This policy outlines MPDC's expectations for you to declare conflicts of interest and what is considered a potential or actual conflict of interest.
Sensitive Expenditure 2019	Larnia Rushbrooke	24/07/2019	01/07/2022	Sensitive Expenditure 2019 - Sensitive Expenditure is any expenditure where there may be a perceived personal benefit to an employee or elected member, or expenditure that could be considered unusual for Matamata-Piako District Council (Council). This policy applies to all employees and elected members of Council, as well as any other individuals who may incur expenditure on Council's behalf or seek reimbursement from Council for expenditure incurred.
Pre-Election Report	Sandra Harris	26/07/2022	26/07/2025	Pre-Election Report - This document is designed to draw attention to the key issues over the coming years, and to the Council's performance against the adopted financial strategy. It also covers the forecast financial position for the incoming Council.
Health and Safety Policy	Kelly Reith	08/08/2022	08/08/2025	Health and Safety Policy This policy outlines our commitment in respect of safety and wellness at MPDC.

Item 4.4

Attachment A

Transportation Procurement Strategy	Susanne Kampshof	12/09/2022	01/09/2025	Transportation Procurement Strategy - The TPS demonstrates Council's procurement of its transportation programme whilst continuing to meet the requirements of the Land Transport Management Act 2003 (LTMA). The LTMA requires approved organisations (AOs) as recipients of WK/NZTA funding to use procurement procedures designed to obtain best value for money; enable fair competition and encourage competitive and efficient markets. This document is the third review of what was earlier a Roading Procurement Strategy – first adopted by Council and endorsed by the NZ Transport Agency back in 2011. Council's earlier procurement strategies focussed on risk minimisation whereas this strategy continues to be more aligned to meeting the market – recognising a more balanced risk profile.
Code of Conduct	Sandra Harris	09/11/2022	01/11/2025	Code of Conduct - Sets out the values, understandings and expectations agreed on by the Mayor and Councillors about how they will conduct themselves while acting as Elected Members.
Fraud and Corruption Policy	Kelly Reith	07/02/2023	01/02/2026	Fraud and Corruption Policy - A policy setting out the Council's principles in respect of safeguarding the community's assets, and identifying specific areas/processes of identified risk and ways/processes in place to ensure these risks are mitigated to an acceptable level.
Gift Policy 2023	Kelly Reith	01/07/2023	01/07/2026	Gift Policy 2023 - The policy reinforces the expectations of you if you are offered a gift or win a prize due to your position at MPDC.
Significance and Engagement Policy	Sandra Harris	23/08/2023	01/08/2026	Significance and Engagement Policy - This policy helps Council to determine what the really important ('significant') issues are to the community, and how we will go about involving the community in making those decisions ('engagement').
Investment Policy 2024-34	Sandra Harris	24/01/2024	24/01/2027	Investment Policy 2024-34
Liability Management Policy 2024-34	Sandra Harris	24/01/2024	24/01/2027	Liability Management Policy 2024-34
Protected Disclosures-Whistle-Blower Policy	Kelly Reith	05/03/2024	05/03/2027	Protected Disclosures-Whistle-Blower Policy
Long Term Plan 2024-2034	Sandra Harris	03/07/2024	01/07/2027	Long Term Plan 2024-2034 - This plan outlines Council's activities and budget for the next ten years, providing a long-term focus for decision-making. It includes: Financial Strategy, Infrastructure Strategy, Revenue and Financing Policy and a summary of the Significance & Engagement policy.
Development Contribution Policy 2024-34	Susanne Kampshof	03/07/2024	03/07/2027	Development Contribution Policy 2024-34
Infrastructure Strategy 2024-34	Susanne Kampshof	03/07/2024	03/07/2027	Infrastructure Strategy 2024-34
Remission and Postponement of Rates 2024-34	Larnia Rushbrooke	03/07/2024	03/07/2027	Remission and Postponement of Rates 2024-34
Financial Strategy 2024-34	Larnia Rushbrooke	03/07/2024	03/07/2027	Financial Strategy 2024-34
Dangerous, Affected & Insanitary Buildings	Sandra Harris	22/05/2024	01/07/2029	Dangerous, Affected & Insanitary Buildings

In Development
Overdue for Review
Upcoming for 2025 Review

Title	Officer Name	Review Cycle	Adopted Date	Review Date	Document Description
Workplace Support Policy	Catherine Stevens	3 yearly	04/11/2024	04/11/2027	Workplace Support Policy
Leave Policy	Catherine Stevens	3 yearly	19/12/2024	19/12/2027	Leave Policy
Growth Projections	Sandra Harris	3 Yearly - LTP	03/07/2024	03/07/2027	Growth Projections
Immunisation Policy	Kelly Reith	3 yearly	02/04/2024	02/04/2027	Immunisation Policy
Drug and Alcohol Policy	Kelly Reith	3 yearly	01/03/2024	01/03/2027	Drug and Alcohol Policy
Health and Exposure Monitoring Policy	Kelly Reith	3 yearly	02/04/2024	02/04/2027	Health and Exposure Monitoring Policy
Safety and Wellness Policy	Kelly Reith	3 yearly	08/08/2022	08/08/2025	Safety and Wellness Policy
Psychoactive Substances Policy (Local Approved Products Policy) 2024	Sandra Harris	5 Yearly	22/05/2024	01/07/2029	Psychoactive Substances Policy (Local Approved Products Policy) 2024
Smoke Free Outdoor Spaces Policy	Sandra Harris	3 yearly	22/05/2024	01/07/2026	Smoke Free Outdoor Spaces Policy
Te Aroha Place Plan	Sandra Harris	As Required	13/12/2023		Te Aroha Place Plan - Place Plans are developed through Council's Pride of Place project. Working directly with the community to develop aspirational goals for their towns and then supports community-led initiatives and traditional Council projects to realise those goals.
Morrinsville Place Plan	Sandra Harris	As Required	26/04/2023		Morrinsville Place Plan - Place Plans are developed through Council's Pride of Place project. Working directly with the community to develop aspirational goals for their towns and then supports community-led initiatives and traditional Council projects to realise those goals.
Matamata Place Plan	Sandra Harris	As Required	10/08/2022		Matamata Place Plan - Place Plans are developed through Council's Pride of Place project. Working directly with the community to develop aspirational goals for their towns and then supports community-led initiatives and traditional Council projects to realise those goals.
Board Appointments and Remuneration Policy	Sandra Harris	5 Yearly	24/07/2024	24/07/2029	Board Appointments and Remuneration Policy - The Policy sets out the process for appointing board members to CCOs.
Mayoral Fund Policy	Sandra Harris	3 Yearly- Elections	27/09/2023	27/09/2026	Mayoral Fund Policy - This policy provides guidance on the management of the Mayoral Fund.
Pride of Place - Community-led Intiatives Grant Policy	Sandra Harris	Annually	24/01/2024	24/01/2025	Pride of Place - Community-led Intiatives Grant Policy - This policy supports Pride of Place Community-led initiatives allowing flexibility to support small scale, community-led initiatives as they emerge.
Elected Members' Remuneration, Allowances and Expenses Policy	Sandra Harris	3 Yearly- Elections	27/03/2024	01/10/2025	Elected Members' Remuneration, Allowances and Expenses Policy - To set out the provision of remuneration and allowances for elected members.
Solid Waste Management and Minimisation Bylaw	Sandra Harris	10 Yearly	14/02/2024	14/02/2034	Solid Waste Management and Minimisation Bylaw - Supports the promotion and delivery of effective and efficient waste management and minimisation as required under the Waste Minimisation Act 2008. Covers collection, transportation, processing and disposal of waste.
District Tree Strategy	Susanne Kampshof	As Required			District Tree Strategy - To ensure that existing trees are managed appropriately and to avoid the adverse effects of trees for new plantings. Contains policies on tree management, tree removal etc.
Fatigue Management Policy	Kelly Reith	3 yearly	02/04/2024	02/04/2027	Fatigue Management Policy - The purpose of this policy is to ensure that the risks associated with fatigue are recognised, understood and managed in order to minimise the risk of injury or harm to employees.
Multi-Year Community Grant	Sandra Harris	3 Yearly - LTP	24/06/2023	24/06/2026	Multi-Year Community Grant - MPDC'S Multi-Year Community Grant supports the operational management of community infrastructure and community gathering spaces, to deliver services, programmes and activities that benefit the social, cultural and environmental wellbeing of communities in Matamata-Piako. Events criteria from the District Events Grant will be combined into one grant which will remove the stand-alone District Events Grant.

Item 4.4

Attachment B

Single-Year Community Grant	Sandra Harris	3 Yearly - LTP	24/06/2023	24/06/2026	Single-Year Community Grant - MPDC'S Single-Year Community Grant supports not-for-profit community organisations that deliver services, programmes and activities that benefit the social, cultural and environmental wellbeing of communities in Matamata-Piako.
Natural, Cultural and Built Heritage Grant Policy 2024	Sandra Harris	3 yearly	24/06/2023	24/06/2026	Natural, Cultural and Built Heritage Grant Policy 2024 - This fund provides grants for plans, reports and one-off projects that will protect, conserve and promote New Zealand's natural, cultural and physical heritage and also support community groups with resource consents costs.
Delegation Policy and Delegation Register 2023 -	Sandra Harris	3 Yearly- Elections	30/10/2024	31/12/2025	Delegation Policy and Delegation Register 2023 - This document sets out the policy for the Matamata-Piako District Council for delegations of responsibilities, powers and duties to a range of different parties as provided for in the Local Government Act 2002 (the Act) and other legislation.
Freedom Camping Bylaw	Sandra Harris	As Required	08/11/2023	22/11/2028	Freedom Camping Bylaw - The purpose of this Bylaw is to control Freedom Camping in the District in order to: protect Local Authority Areas; protect the health and safety of people who may visit Local Authority Areas; or protect access to Local Authority Areas.
Local Alcohol Policy 2023	Sandra Harris	6 Yearly	23/08/2023	01/08/2029	Local Alcohol Policy 2023 - Outlines Council's policy for on, off, club and special licences. Sets maximum trading hours, location restrictions, how many licences can be issued etc. Considered by the district licensing committee when making liquor licensing decisions.
Waste Minimisation Grants Policy 2021	Susanne Kampshof	3 yearly			Waste Minimisation Grants Policy 2021 - This Policy supports the Council's Community Outcomes and the well-being's (Environmental, Economic, Cultural and Social). It also gives effect to the requirements of the Waste Minimisation Act 2008 to allocate waste levy funding received from the Ministry for the Environment for waste minimisation projects.
Natural, Cultural and Built Heritage Grant Policy	Sandra Harris	3 yearly	24/06/2023	24/06/2026	Natural, Cultural and Built Heritage Grant Policy - This fund provides grants for plans, reports and one-off projects that will protect, conserve and promote New Zealand's natural, cultural and physical heritage and also support community groups with resource consents costs.
Creative Communities Funding	Sandra Harris	3 Yearly - LTP	24/06/2023	24/06/2026	Creative Communities Funding - Council administers the Creative Communities Scheme that provides funding for arts and cultural projects in our district. The funding comes from Creative NZ.
Single-Year Community Grants	Sandra Harris	3 Yearly - LTP	24/06/2023	24/06/2026	Single-Year Community Grants - MPDC'S Single-Year Community Grant supports not-for-profit community organisations that deliver services, programmes and activities that benefit the social, cultural and environmental wellbeing of communities in Matamata-Piako.
Multi-Year Community Grant	Ex Payroll Erin Bates	3 yearly	24/06/2023	24/06/2026	Multi-Year Community Grant - MPDC'S Multi-Year Community Grant supports the operational management of community infrastructure and community gathering spaces, to deliver services, programmes and activities that benefit the social, cultural and environmental wellbeing of communities in Matamata-Piako. Events criteria from the District Events Grant will be combined into one grant which will remove the stand-alone District Events Grant.
Signage Strategy	Susanne Kampshof	As Required	13/07/2016		Signage Strategy - Outlines Council's long term vision for signage at Council's parks, open spaces, community facilities and buildings. It includes objectives and key actions towards achieving the vision. Strategy is referenced in District Plan. A companion document, the Signage Manual, is under development. It
Numbering of Properties, Naming of Roads, Access Ways and Open Spaces	Ex Payroll Erin Bates	As Required	11/09/2019		Numbering of Properties, Naming of Roads, Access Ways and Open Spaces - The Council is responsible for the naming of roads and the numbering of land and buildings under the relevant sections of the Local Government Act.

General Policies Reserve Management Plan 2009	Susanne Kampshof	10 Yearly	15/05/2019		General Policies Reserve Management Plan 2009 - Guides the use and development of a Reserve. Statutory requirement under Reserves Act 1977 for several classes of Reserves. This particular RMP sets the 'default policies' for Reserves, specific RMPs may deviate from this where there is a specific reason e.g. due to the history, purpose of the site etc.
Easter Trading Policy	Ex Payroll Erin Bates	5 Yearly	11/05/2022	11/05/2027	Easter Trading Policy - Enable shops to trade on Easter Sunday if they wish to. The Policy neither requires shops to open, or individuals to shop on Easter Sunday.
Community Leisure Provision Strategy 2009	Susanne Kampshof	As Required			Community Leisure Provision Strategy 2009
Future Proof Strategy	Ex Payroll Erin Bates	As Required			Future Proof Strategy
District Sports Fcailities and Development Plan 2018-2028	Susanne Kampshof	3 yearly			District Sports Fcailities and Development Plan 2018-2028
Workplace Support Policy	Kelly Reith	3 yearly	30/04/2019	01/04/2022	Workplace Support Policy - This policy outlines how we will support employees to deal with issues affecting their wellbeing. This policy will form part of our broader mental health strategy.
Voicemail Policy	Kelly Reith	Not Applicable		01/10/2022	Voicemail Policy - To inform Staff of the correct way to answer their desk phone and mobile phone. This policy also covers the use of voicemail and the rules around this.
Visitors Policy	Kelly Reith	3 yearly			Visitors Policy - It is a requirement of Council and Section 15 of te Health and Safety in Employment Act (1992) that "all practicable steps" are taken with visitor and the general public to safeguard them from harm resulting from any hazards identified.
Training and Development	Kelly Reith	As Required			Training and Development - Employees shall be encouraged to undertake training to carry out the essential accountability as defined in their job description. On-going evaluation, based on the requirements of the organisation and the individual employee, shall occur through the Council's Performance Development and Training system.
Substandard Performance, Misconduct and Disciplinary Policy	Kelly Reith	3 yearly	10/03/2015	01/03/2018	Substandard Performance, Misconduct and Disciplinary Policy - The purpose of this policy is to ensure that Council has a staff disciplinary and performance management process that is fair and reasonable, and clear to everyone.
Storage of Employee Records Policy	Kelly Reith	3 yearly	20/03/2015	01/03/2018	Storage of Employee Records Policy - MPDC's storage of Employee Records Policy is as per Archives New Zealand- General Disposal Authority guide for Human Resources and Personnel Records.
Staff Making Subissions Policy	Kelly Reith	3 yearly	08/03/2016	01/03/2019	Staff Making Subissions Policy - The purpose of this policy is to provide guidance to employees wanting to make a submission to a public consultation process undertaken by MPDC.
Social Media Policy	Jennifer Cochrane	3 yearly	01/06/2019	01/06/2022	Social Media Policy - To inform staff of why we use social media and to inform them of the standards and expectations for employees when using social media.
Remuneration Policy	Kelly Reith	3 yearly	13/08/2021	01/08/2024	Remuneration Policy - This policy is to provide guidelines for remuneration setting for all staff that are covered by this policy as per their individual or collective employment agreement.
Relocation Expenses Policy	Kelly Reith	3 yearly	20/03/2015	01/03/2018	Relocation Expenses Policy - Council may assist new employees who are moving to the district to relocate as conveniently and economically as possible. This policy outlines how Council may assist a new employee.
Recruitment and Selection Policy	Kelly Reith	3 yearly	20/03/2015	01/03/2018	Recruitment and Selection Policy - It is Council's policy to recruit the most suitably qualified applicant to meet its business requirements.
Providing References for Staff Policy	Kelly Reith	3 yearly	20/03/2015	01/03/2018	Providing References for Staff Policy - The purpose of this policy is to provide clear guidelines around the issuing of references and certificates of service. Please contact the HR Manager for further advice or guidance.

Item 4.4

Attachment B

Payment of Professional Fees Policy	Kelly Reith	2 Yearly	20/03/2015	01/03/2017	Payment of Professional Fees Policy - The objective of this policy is to make it clear to you what the policy is when applying to become a member of a professional body.
Overtime Policy	Kelly Reith	3 yearly	20/03/2015	01/03/2018	Overtime Policy - Council is required to provide an effective and efficient service to our ratepayers and community. In order to deliver this service, this may require an employee to work more than the agreed hours of work from time to time. Council shall ensure that fair arrangements are available for employees who are required to work additional hours.
Mobile Phone Policy	Kelly Reith	3 yearly		01/11/2022	Mobile Phone Policy - This policy covers the use of council owned mobile phones
Media Policy	Jennifer Cochrane	3 yearly	30/06/2021	01/06/2024	Media Policy - It is important for Council to maintain a good relationship with local media to ensure we make the most of this communication channel. This means understanding that they want and the best wat to get our messages across. It is the role of the communications team to deal with the media on behalf of Council.
Leave Policy	Kelly Reith	3 yearly	13/08/2021	01/08/2024	Leave Policy - The purpose of this policy is to outline how we manage leave. MPDC recognises the importance of taking leave to promote physical and mental wellbeing in the workplace, and improve work life balance.
Hours of Work Policy	Kelly Reith	3 yearly	20/03/2015	01/03/2018	Hours of Work Policy - This policy outlines the hours of work for employees including how ordinary hours can be changed.
Harrasment (including bullying and discrimination) Policy	Kelly Reith	3 yearly	01/12/2020	01/12/2023	Harrasment (including bullying and discrimination) Policy - MPDC is committed to the provision of a healthy and safe working environment for all employees. ALL employees are expected to treat everyone fairly, with dignity and respect.
Flexible Ways of Working Policy	Kelly Reith	3 yearly	22/08/2022	01/08/2024	Flexible Ways of Working Policy - This policy outlines MPDC's approach to flexible ways of working and is based on striking a balance between your individual needs, the needs of your team and our needs (the organisation) and the community we serve.
Equal Opportunities Policy	Kelly Reith	3 yearly	20/03/2015	01/03/2018	Equal Opportunities Policy - It is Council's policy to encourage and accommodate difference in the workplace, not only as a means of ensuring compliance with the Human Rights Act 1993, but also as a means to attract a broad base of skills and talent from all sectors of society.
Ending of Employment Policy	Kelly Reith	3 yearly	20/03/2015	01/03/2018	Ending of Employment Policy - This policy applies to all staff and has been developed so staff are aware of the processes that may be undertaken at the end of their employment with Council.
Employment Relations Policy	Kelly Reith	3 yearly	20/03/2015	01/03/2018	Employment Relations Policy - This policy is to ensure employees are aware of their employment relationship, and how to resolve any employment relationship problems.
Electronic Recordings Policy	Ex Payroll Erin Bates	3 yearly	01/01/2020	01/01/2023	Electronic Recordings Policy - This Policy sets out the purpose for collecting video footage, other visual media and audio recordings by the Council. The Policy follows best practice to ensure that any media captured, collected and stored is handled in an appropriate manner and in accordance with the Privacy Act 1993 (the Act).
Domestic Violence Policy	Kelly Reith	3 yearly	30/04/2019	01/04/2022	Domestic Violence Policy - If an employee is affected by domestic violence, they will not be discriminated against or treated unfairly. We will protect the privacy of employees who are experiencing domestic violence unless extenuating circumstances prevent us from being able to do so.
Digital Strategy	Jennifer Cochrane	As Required	01/10/2018		Digital Strategy - The strategy sets out where technology heading, and how can we manage it in a way that means we continue to meet customers' expectations.

Customer Services Policy	Sheree O'Brien	Not Applicable			Customer Services Policy - Our aim is to effectively operate our One Stop Shop ensuring our customers receive professional and efficient service at all times. Delivering outstanding customer service ensures we continue to value our customers' needs and meet their expectations. As customer service advisors, we need to demonstrate appropriate behaviour to ensure the interaction with Matamata-Piako District Council and their customers internal and external is positive and satisfying experience.
Council Vehicle Policy	Kelly Reith	3 yearly	09/12/2022	01/12/2025	Council Vehicle Policy - This document outlines the policy use of Council vehicles. Council vehicles have a high profile in our community and it is important to ensure you use them appropriately. This policy applies to all staff and has been developed to ensure you are aware of your obligations when using a Council vehicle and to reinforce appropriate behaviour.
Attending Emergency Response Callouts	Kelly Reith	3 yearly	05/04/2016	01/04/2019	Attending Emergency Response Callouts
District Sports Facilities and Development Plan 2018-2028	Susanne Kampshof	3 yearly	01/07/2018		District Sports Facilities and Development Plan 2018-2028

8.5 Risk Report February 2025

CM No.: 2997415

Te Kaupapa | Purpose

The purpose of this report is to provide an update on risk management and the proposed work programme for 2025 reporting year.

Rāpopotonga Matua | Executive Summary

David Robson, a Risk and Insurance Specialist working for AON New Zealand, is engaged by MPDC to provide risk management advice and support.

David developed a risk management report that outlines the work programme for 2025 and is in attendance.

Tūtohunga | Recommendation

That:

1. the report is received.

Horopaki | Background

David Robson, a Risk and Insurance Specialist working for AON New Zealand, has been engaged by MPDC to provide risk management advice and support for the next two years. He provides this service to four other rural Councils as well.

David has developed the attached report as a brief update on risk management at MPDC, and to outline a proposed risk management work programme for 2025.

David will be in attendance to meet the Risk and Assurance committee, present the report and answer any questions. Feedback from committee members will also be sought on the report format.

Ngā Tāpiritanga | Attachments

A⇩. Risk and Assurance Report February 2025 pdf

Ngā waitohu | Signatories

Author(s)	Kelly Reith **Hautū Tāngata, Kāwana me ngā Hononga | Group Manager People, Governance & Relationships**	

Approved by	Manaia Te Wiata **Tumu Whakarae | Chief Executive Officer**	

te kaunihera ā-rohe o
matamata-piako
district council

Item 4.5

Attachment A






Risk Management Report

February 2025

Risk Management Plan 2025

A road map has been developed for MPDC's Risk Management Programme.

The 2025 Plan that has been developed to identify the key deliverables for the 2025 reporting year. This plan will be further informed by the findings of the risk maturity exercise against an industry standard matrix.

Deliverable	Summary
Risk Maturity Assessment	Gauge current levels of risk maturity to inform the 2025 Risk Management Plan
Organisational and Strategic Risk Register Review	Review format and current content. This will include a review of the top risks and their mitigations
Risk Management Framework (RMF)	Evaluate current policy level documentation and consider if a RMF would be a suitable alternative to standard management policy
Business Continuity Management (BCM) Review	Desk-top review and evaluation of current business continuity arrangement.

Item 4.5

Attachment A

Emerging Risk Update

The following table provides an illustrative example of the key emerging risks across the sector via professional networks, the local environment and from a national/global perspective. There may not be sufficient knowledge around the following risks for their formal addition to the organisational risk register, due to the emerging state, as may not yet be fully understood and/or be under current discussion.

Risk	Rating	Commentary
Low voter turnout	Medium	The national rate of voters is now predicted at ~36%. A low turnout rate could negatively affect democracy and result in underrepresentation and lack of influence in the plans and actions of MPDC.
The Treaty Principles Bill	Medium	A draft submission on the Bill adopted in an 8-5 vote which calls for its abandonment because it fails to uphold the principle of partnership derived from Treaty settlements. MPDC operational success relies on building partnerships with iwi and hapū, including those established under Treaty settlement legislation. These relationships underpin co-governance arrangements and collaborative initiatives. This risk continues to be monitored.
Self-certified buildings	Medium	Government has proposed building reforms, which will see building professionals able to self-certify their own work for low-risk, basic residential dwellings. This will streamline the building consent process, but MPDC needs to understand what constitutes as 'low risk' and will need some assurance that appropriate checks and what quality controls will be put in place. Issues can take a long time to manifest, and there is a risk that councils are the 'last man standing' (repeat of leaky homes scenario). There is no indication of how this will be managed/reduce the risk as yet, and continues to be monitored.

Organisational Risk Update

The purpose of this slide is to provide this committee with a summary of the top risks from the organisational risk register. A heat map is provided on the following page to give a summary overview of risk placement. The top 9 risks of the organisational risk register are part of an ongoing deep-dive review with this committee (see the separate deep dive reports).

Risk	Rating	Narrative
Loss of data	Extreme	A SAM audit has been commissioned. Existing response plans are currently under review
Inadequate financial strategy	Extreme	Operational risk management linkage to Strategic risks Improved financial reporting
Legislative compliance	Very High	A work programme is in place which includes monitoring for emerging changes, internal audit
Failure of essential services	Very High	Business continuity plans are in place for identified key services. A review of these plans and a test programme is in place for 2025
Failure to maintain iwi relationships	Very High	Strong partnerships and engagement continues to be created/maintained with local iwi/community groups
Inadequate response to local level natural disasters, extreme weather events and pandemics	Very High	Community Response Plans and Hubs
Failure to effectively plan for and proactively respond to climate impacts	High	Regular reporting, development of strategy, workshops to improve understanding
Failure to communicate and/or engage effectively with stakeholders	High	Development of Communications and Engagement strategy, Governance oversight
Inadequate response to political changes	High	Communications and Engagement Strategy, horizon scanning.

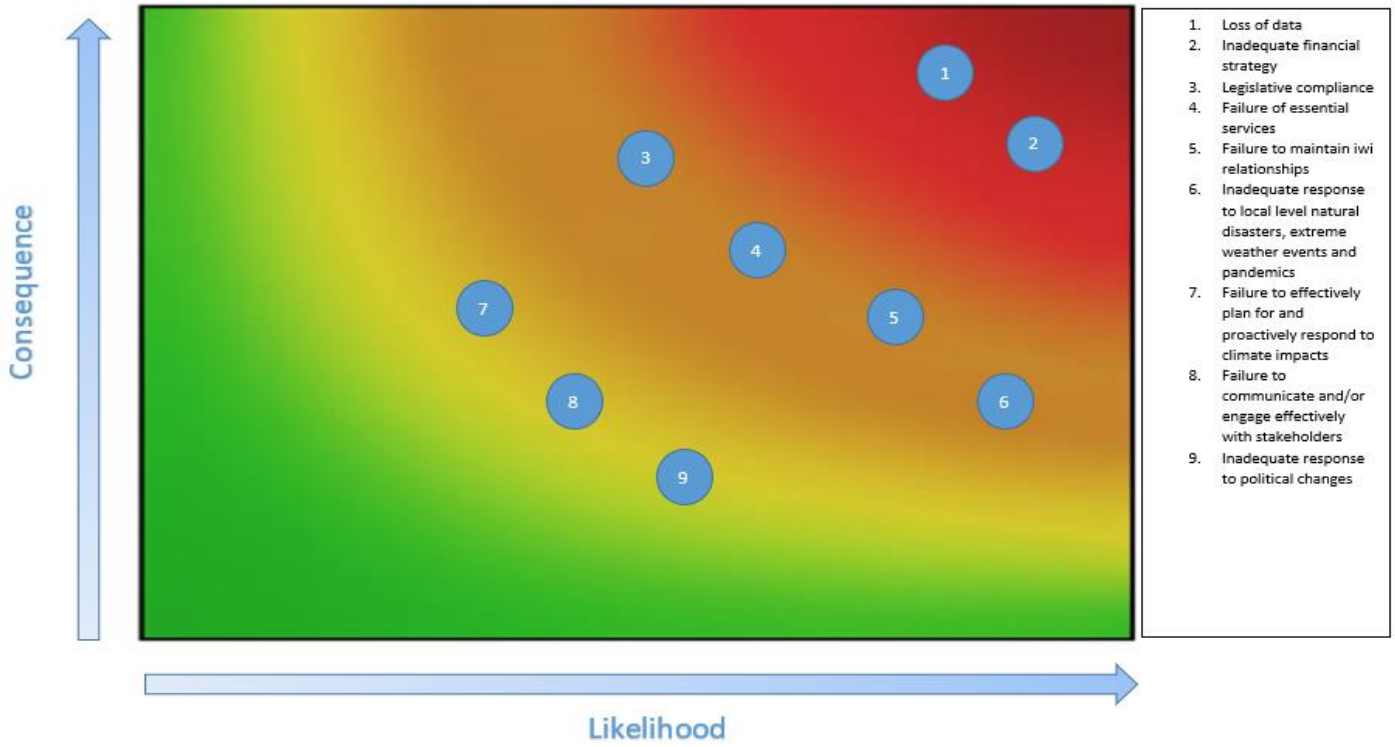
Item 4.5

Attachment A

Organisational Risk Update

te kaunihera ā-rohe o matamata-piako district council

This slide is a new feature of reporting to this committee and will provide a graphical summary of all risks within the organisational risk register. The purpose of the heatmap is to present categorised risk assessment results in an easy to understand and concise format which will also allow tracking of any movement in risk rating.



8.6 Safety and Wellness Reports

CM No.: 2989974

Te Kaupapa | Purpose

The purpose of this report is to provide the Committee with safety and wellness reporting.

Rāpopotonga Matua | Executive Summary

The October to December 2024 Quarterly Safety & Wellness Report, and January 2025 Safety & Wellness Update are provided. Kate Stevens, People, Safety & Wellness Manager, and Lucy Longstaff, Safety and Wellness Team Leader in attendance to discuss the reports with the committee.

Tūtohunga | Recommendation

That:

1. The information be received.

Ngā Tāpiritanga | Attachments

A⇩. Quarterly Safety Wellness Report October - December 2024

B⇩. January 2025 Safety Wellness Update

Ngā waitohu | Signatories

Author(s)	Kate Stevens **Pou Tāngata, Haumaru me te Oranga | People, Safety & Wellness Manager**	

Approved by	Kelly Reith **Hautū Tāngata, Kāwana me ngā Hononga | Group Manager People, Governance & Relationships**	

Safety & Wellness

Quarterly report:

October-December 2024

Together we create a healthy, safe workplace where we thrive.

Executive summary

This quarter we farewelled George Konusi, our Site Safety Coordinator, and welcomed a new S&W Team Leader, Lucy Longstaff.

We were fortunate to have Lance Vervoort from Hamilton City Council present a session at the Managers and Team Leaders' workshop in October about their learnings from the Hamilton Zoo fatality in 2015. This was an excellent prompt for leaders to consider how they could build psychological safety. It also prompted further work on our processes for crisis management.

The Executive Team included a shortlist of high priority corrective actions on their regular meeting agenda this quarter, resulting in a number of long-standing issues being actioned or timeframes for completion amended.

Performance

Strategic priorities

We identified three safety and wellness strategic priorities for the 2024/2025 year: strengthen safety & wellness leadership, engage and empower our Health and Safety Representatives and sustain our focus on critical risk. Further detail and progress on the planned tasks for these priorities is provided at the end of this report.

Events

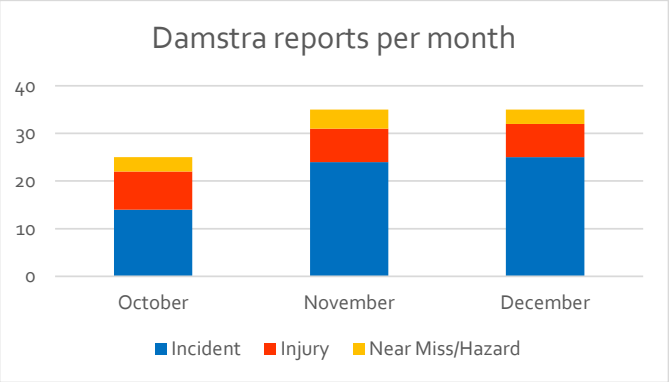
There was one notifiable event this quarter: a customer fell at one of our facilities and was admitted to hospital. There was a handrail and non-slip floor in place.

There was one lost time injury (i.e. injury requiring more than a full shift of time off work) and three medical treatment injuries (including the lost time injury) this quarter.

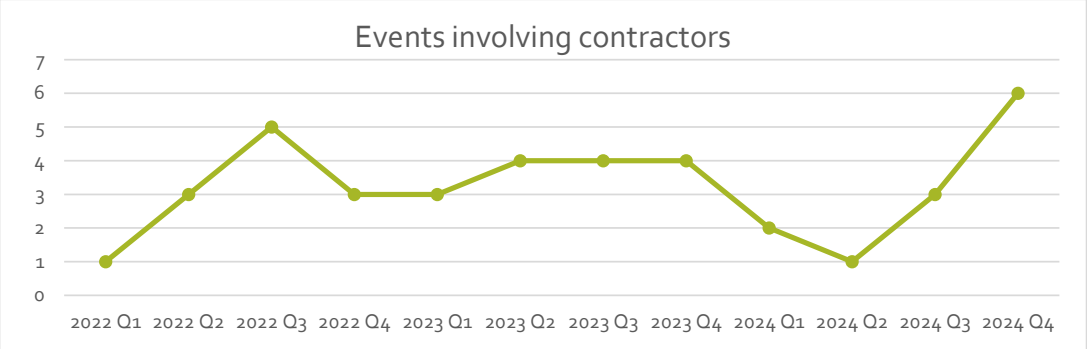
The graphs and tables below provide summary data from Damstra reports.

Number of events and observations this quarter:				
Incidents	Injuries/illness	Near Miss/ Hazard	Notifiable Events	Lost Time Injuries*
63	22	10	1	1

*Lost time injury: resulting in more than one shift off work



This quarter six of the events reported involved contractors. These were near misses, hazards and incidents, of which two were contractors reporting hazards that impacted their work.



Damstra tasks*	Completed this quarter	Overdue end of this quarter	Trend for overdue actions
Corrective actions	82	34	⬇ from 45 last quarter
Risk reviews	189	73	⬆ from 67 last quarter
Event Investigations	85	22	⬆ from 19 last quarter

*This data is as of 15/1/2025

Risks

Council has identified its "Top 10" critical risks as follows:

Critical risk updates:

Confined space entry:

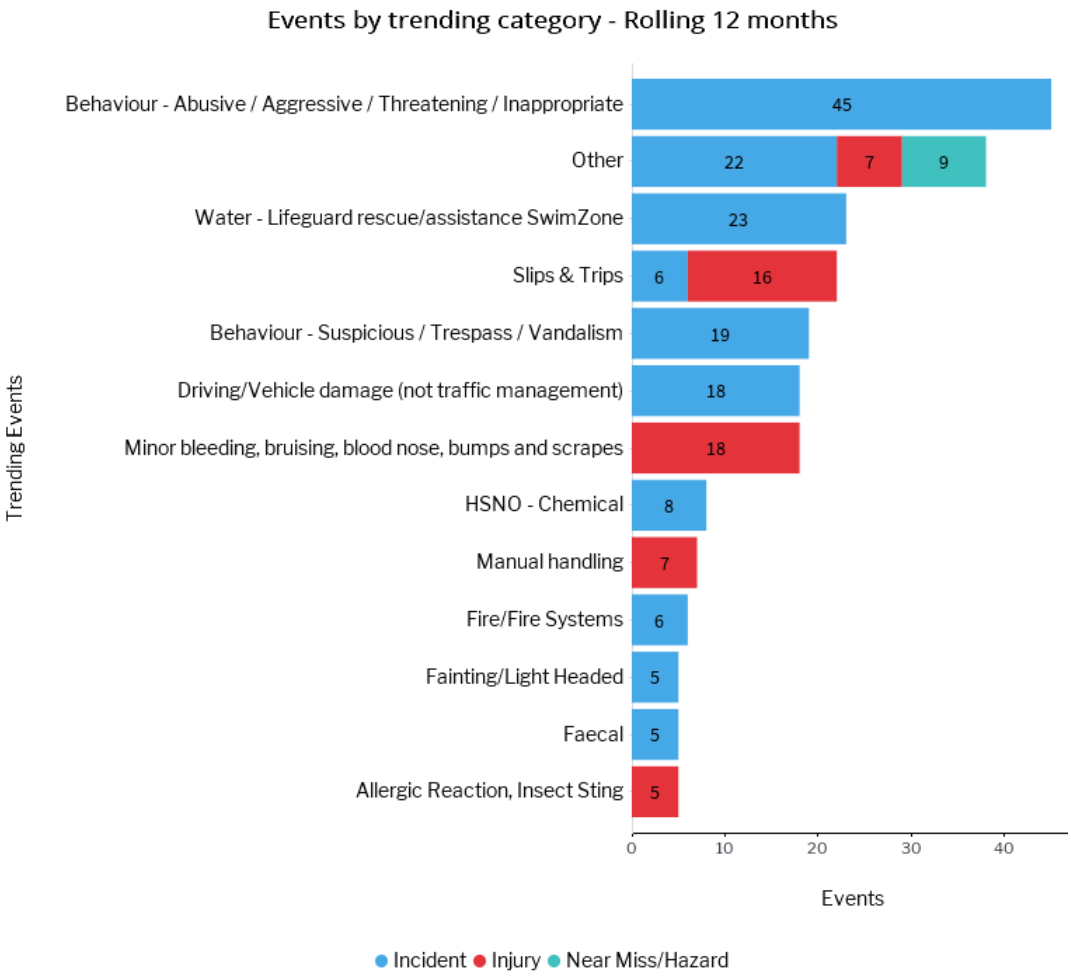
- Confined space entry critical risk review completed (see November 2024 report for further information)

Work at height:

- A platform was installed at Tills Road Water Treatment Plant to provide contractors with safe access to aerials on the roof.

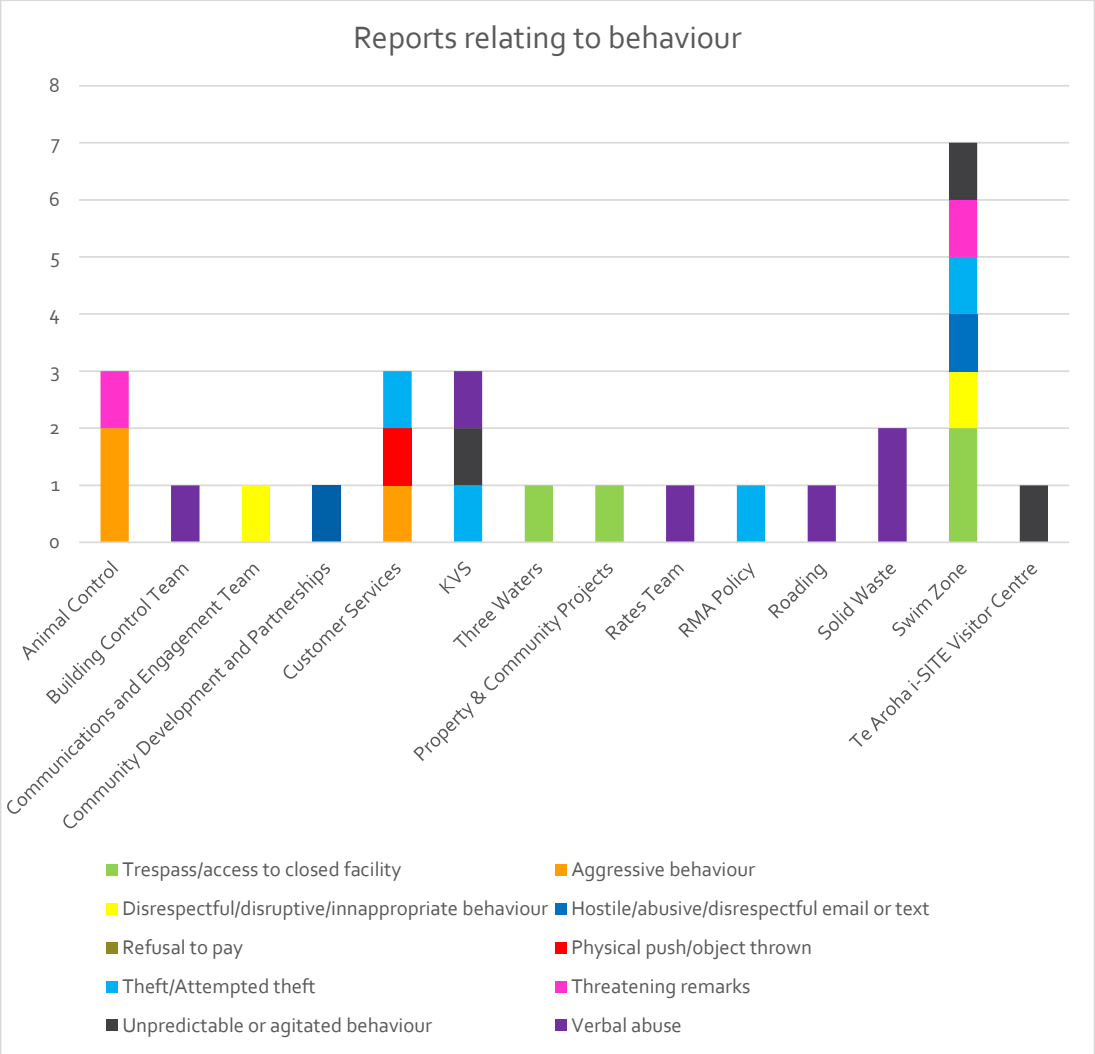
Abusive/aggressive customers:

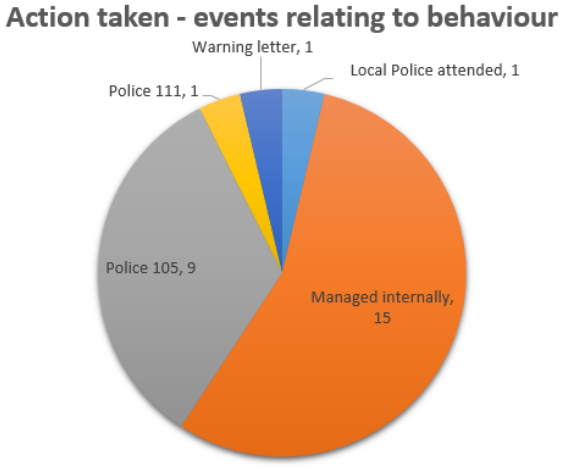
- A group of staff across different teams met to review the controls we have in place and plan for further improvements. This includes ensuring that processes are shared between teams and investigating options for flagging properties of concern on our GIS system.
- Thriving under fire training provided to 66 staff



Events relating to public behaviour continue to be the most common type of event reported. The graphs below provide a more detailed breakdown of these.

There were three events reported this quarter relating to hazardous substances: one relating to infectious substances (effluent spray), aerosol cleaner igniting when sprayed, and a small sodium hypochlorite leak at SwimZone Te Aroha. The leak due to a split assy tube was detected early due to the warning system in place and staff dealt with it safely. A switch has since been installed to turn off the pump automatically if a leak is detected. The Aquatics team are looking at alternative ways of managing water chlorination as there have been ongoing issues with leaks of this nature.


Reports relating to behaviour
8
7
6
5
4
3
2
1
0
Animal Control
Building Control Team
Communications and Engagement Team
Community Development and Partnerships
Customer Services
KVS
Three Waters
Property & Community Projects
Rates Team
RMA Policy
Roading
Solid Waste
Swim Zone
Te Aroha i-SITE Visitor Centre
Trespass/access to closed facility
Aggressive behaviour
Disrespectful/disruptive/innappropriate behaviour
Hostile/abusive/disrespectful email or text
Refusal to pay
Physical push/object thrown
Theft/Attempted theft
Threatening remarks
Unpredictable or agitated behaviour
Verbal abuse

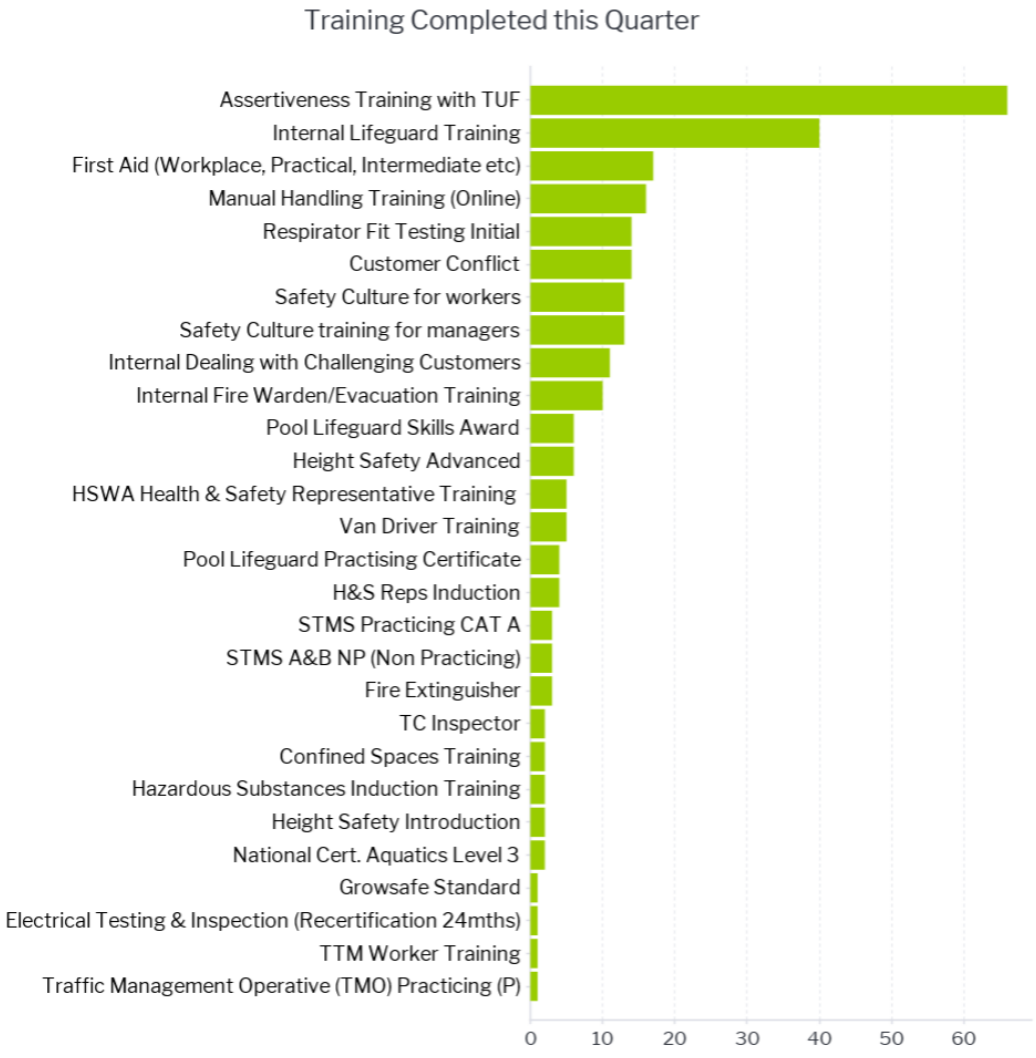

Action taken - events relating to behaviour
Warning letter, 1
Local Police attended, 1
Police 111, 1
Police 105, 9
Managed internally, 15

The majority of behaviour events were managed internally by the staff involved. Staff called 111 for one incident: a member of public became aggressive and abusive towards staff and was tagging council property. Local Police assisted with another situation where a member of public pushed a member of staff and then refused to leave the building.

In October 66 of our staff from customer-facing roles attended Thriving under Fire training, a course aimed at giving staff tools to deal with challenging interactions with the public that can lead to stress and difficulty maintaining a high level of service. It included strategies to cope and skills to maintain their own emotional wellbeing.

Learning and Development

The graph below shows safety and wellness related training (both internal and external) completed this quarter.



Health Monitoring

Data for health monitoring and respirator fit testing for this quarter is shown below.

Annual health monitoring completed	32	Exit health monitoring completed	0
Overdue health monitoring	2	Respirator Fit Testing completed	32
Pre-employment health monitoring	15	Respirator Fit Testing Overdue	1

*Many exiting staff decline health monitoring.

Relationships

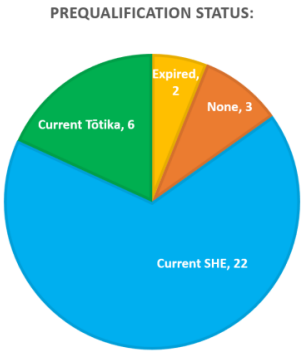
Engagement and Participation

This quarter we reviewed the H&S Rep work groups to align these with the new organisational structure, held elections to fill the vacant and new roles, and re-elections for groups where the representative has been in the role for more than three years. Five new H&S Reps were elected and attended external training for Health and Safety Representatives. We are also working with the new reps to provide internal induction training.

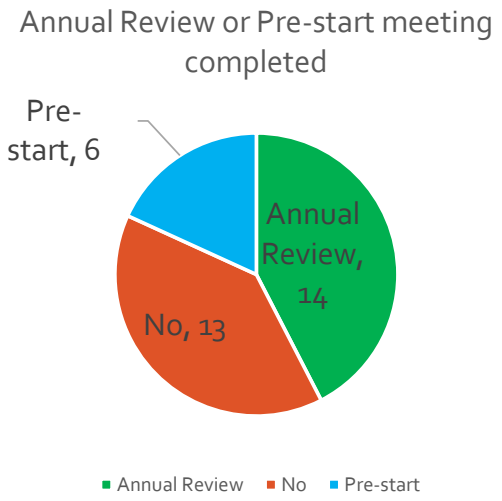
There were 21 attendees at the H&S Committee meeting in November and we welcomed the new H&S Reps. The KVS Property Maintenance Team presented some information about how they manage the risk of asbestos exposure, and Barry Reid (H&S Rep for the Assets and Projects Team) talked about the risks associated with his team's work. It was good to hear the reps sharing successes, including the SwimZone training day, handrails installed at the Te Aroha Mineral Spas, KVS yard clean-up, Reticulation Team purchasing gas detectors and headlamps purchased for the waste water team. We discussed some recent incidents and issues including abusive behaviour by customers, designated areas for smoking (KVS are reviewing their area), and temperature and ventilation issues at the Te Aroha office.

Contractors

We completed an internal audit of contractor S&W management. In order to provide a snapshot we reviewed payments made in the month of July 2024 and narrowed the list down to 33 contractors who do critical risk work. The following graphs show the status of prequalification and completion of the key step identified for S&W: pre-start meeting or annual review.



Of the three non-prequalified contractors, one was engaged according to the process for non-prequalified contractors. The S&W Team are working with contract managers to follow up on the other non-prequalified contractors.



The S&W Team are following up with the contract managers for contractors who did not have a pre-start or annual review meeting, to provide additional support and training as needed. Six annual contractor reviews (with Graffiti Busters, Turf Works, Epic, Ron Johnston, Allied Security and Camex) were completed after this audit and we will continue with this work in 2025.

Resources

We said farewell to George Konusi, Site Safety Coordinator, who finished at the end of 2024. Lucy Longstaff was appointed to the Safety and Wellness Team Leader and we were very pleased to welcome her to the team at the end of November. Lucy is an experienced H&S professional with experience in the dairy industry.

Due Diligence

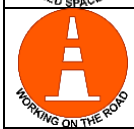
Council attended two safety and wellness due diligence workshops, focussing on asbestos and silica dust risks with the KVS Property Maintenance Team, and KVS Waihou Depot yard risks with the KVS Manager.

Our new Group Managers continue to build their knowledge of the risks faced by our organisation, completing three leader walk through visits this quarter at SwimZone Matamata, Morrinsville Refuse Transfer Stations and Matamata Waste Water Treatment Plant.

Assurance

Critical risk audits

We completed twelve audits relating to critical risk this quarter. Controls were generally good, and the issues identified were either resolved on site or forwarded to the contract manager.

Risk	Audits	Work site
	2	• Matamata Waste Water Pond desludging and platform construction • Sewer repair
	2	• Pond sampling from a boat • SwimZone Morrinsville
	1	• Caustic washing of filter at Morrinsville Water Treatment Plant
	2	• Sealed road pavement rehabilitation • Reticulation work
	3	• Weed spraying • Waste Water sampling • Decontaminate sodium hypochlorite tank
	2	• Tills Road Water Treatment Plant: installation of platform for roof access. • Tree work at Firth Tower

Safety and Wellness Objectives

Below is a summary of progress on our key projects relating to our objectives for this year.

1. Strengthen Safety & Wellness Leadership			
Action	**Update**	**Status**	**Target Quarter**
Visible leadership and building relationships: S&W team member works at key areas at least one day per month (Matamata, Morrinsville, KVS, Three Waters). Executive Team complete Leader Walk Through visits and engage with staff on site.	S&W Team regularly work at other sites. Exec Team completed 8 Leader Walk Through site visits this year.	Underway	1-4

Provide training for managers to access information in Damstra. Configure Damstra to align with the new organisational structure and set up appropriate escalations. Transition reporting in Damstra to new reporting software (Insights).	Damstra has been re-configured to align with new organisational structure and escalations set. Damstra training provided to six new managers and team leaders. S&W team are familiarising themselves with Insights. We removed the Observations category to allow for better reporting and escalation to E-team.	Underway	1-2
Review S&W induction programme for managers and team leaders.	Review of induction programme is planned for quarter 3 and 4.	Not started	2-3
Clarify S&W accountabilities for Managers and Team Leaders.	S&W accountabilities for managers and team leaders drafted. Further work to be done to integrate these into Mariner 7.	Underway	1-3
Trial a process for leaders to celebrate good S&W practice	To commence in Quarter 3.	Not started	2-3
2. Engage and Empower our Health and Safety Representatives			
Review work groups to align with new organisational structure and elect new reps where needed.	Work groups reviewed and new reps elected.	Completed	1-2
Review induction and training programme for H&S reps.	To commence in Quarter 3.	Not started	2-3
Plan a training programme for H&S Reps. Each rep completes at least one learning activity.	Four reps attended SafeSkills conference. Further work to commence in Quarter 3 to formalise a training programme for all reps.	Underway	2-3
Build relationships between reps and third tier managers: each third tier manager has a plan for engaging with their H&S Reps.	To commence in Quarter 3.	Not started	3
Cross site auditing or risk reviews: each rep is involved in a site audit or risk review outside of their usual area of work.	To commence in Quarter 3.	Not started	3-4
Health and Safety Policy is reviewed with input from H&S reps.	Review due in April 2025.	Not started	3-4

3. Sustain our focus on critical risk			
Critical risk audits: minimum 8 critical risk audits completed per quarter by the S&W Team.	Quarter 1: nine audits completed. Quarter 2: twelve audits completed	Underway	1-4
Critical risk reviews completed for confined space entry, excavation and energy risks.	Confined Space Entry critical risk review undertaken in Q2.	Underway	1-4
Provide ongoing support for MPDC staff who manage contracts where critical risk-related work is undertaken. Audit completed of compliance with pre-start and annual contractor meetings.	Audit completed (see Relationships section above). Ongoing support is provided.	Underway	1-4
High risk teams are completing at least one practical refresher (e.g. training scenario) relating to a critical risk per quarter with their teams.	To commence in Quarter 3.	Not started	3-4

Safety & Wellness Update January 2025

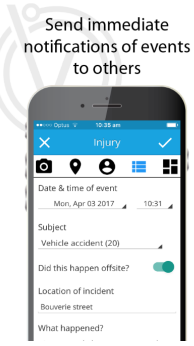
It's great to see the ongoing commitment to reporting events!

Near misses play a crucial role in our safety culture and provide us with valuable insights, allowing us to identify potential hazards and implement the necessary controls to prevent future incidents.

The key message is to make the most of the lessons we can learn from reporting, so we can create a safer work-place. By looking out for each other and making sure no one gets hurt, we can keep improving and stay ahead when it comes to safety.

REMINDER TO STAFF

You can enter an event into MPDC's incident management system from your mobile phone by downloading "Vault Notify" from the app store. Check out the guides with some tips within Promapp.



The HAZMAT team ensure all personnel, equipment, and surfaces that may have been exposed to hazard-ous materials are decontaminated. This often involves setting up a decontamination zone or using a shower to wash off any contaminants from PPE or individuals.

A great example of reporting this month involved a suspected gas leak at Morrinsville SwimZone. In response, the facility was promptly evacuated, and the fire brigade along with the HAZMAT team were called to assist.

The fire brigade reviewed the site map and Safety Data Sheets before en-tering the facility and utilised gas detectors to check gas levels. Once a thorough check was completed the facility was given the all-clear and safe-ly re-opened.

While the source of the gas smell remained unknown to the fire brigade at the time, an engineer later visited the facility and identified two small pin-hole leaks in the LPG gas mains, which supply the boilers that heat the pool. These have since been repaired.

This incident provided a valuable opportunity for the team to familiarise themselves with the evacuation process, and the investigation has now been concluded. **Thanks to the Morrinsville SwimZone team for being pro-active and taking swift action!**

Kaimai Valley Services commit to safety for the year ahead

KVS's well-attended back to work meeting emphasised the importance of workers speaking up. It set a strong tone for the year ahead, with a clear focus on creating a safe environment where everyone can return home safe-ly to their whānau. Let's keep working together to ensure safety remains our top priority!

WE CREATE.
A healthy, safe workplace together, where we thrive.
We are. Matamata-Piako.

te kaunihera ā-rohe o matamata-piako district council

8.7 Insurance Renewals

CM No.: 2932459

Te Kaupapa | Purpose

The purpose of this report is to advise the Risk and Assurance Committee of the Matamata-Piako District Council Insurance Premiums for the 12 months commencing 1st November 2024. It also advises of changes made to policy conditions.

Rāpopotonga Matua | Executive Summary

Matamata-Piako District Council currently carries 11 different insurance policies. The insurance year runs from 1st November to 31st October of the following year.
Allowing for changes and additions during the 2023/24 year the total premium for 12 months was $1,318,000.

For the year commencing 1 November 2024 this has risen to $1,554,395.

Changes to Professional Indemnity (PI) and Material Damage/Business Interruption (MDBI) cover have been key drivers of this increase.

Changes to Loss Limits have been successfully secured without increase to premium.

Tūtohunga | Recommendation

That:

1. The information be received.

Horopaki | Background

Asset values increase most years particularly from an insurance valuation point of view. Council's infrastructure Insurance Policy have sub-limits. Since 2018 these sub-limits have remained static however the Total Declared Value (TDV) has increased from $211,400,000 to $395,156,666 by 2024/25 year.

The current claim limit for council on any one event is $50,000,000 and for the Waikato Colab a combined limit of $300,000,000.

Council have single assets that insurance valuation exceed $50,000,000 e.g. Morrinsville Wastewater Treatment Plant and once Matamata Wastewater Plant has been upgraded that will also.

It was agreed last year by the Waikato Insurance Advisory Group (IAG) that the AON Team negotiating new policies during September would discuss costs involved in increasing these limits. This did not commit council but any agreed changes would be from 1 November 2024.

Ngā Take/Kōrerorero | Issues/Discussion

During the course of negotiation council was able to secure a Loss Limit* increase from $50,000,000 to $70,000,000 without any increased in premium.

*A Loss Limit is a cap on the maximum pay-out an insurer is prepared to pay for any one event.

A more formal Loss Modelling Exercise is planned to be undertaken over the next year to fully understand and document exposure of Waikato Councils to a major event.

The Insurance Policies that council hold are to cover:

- Material Damage and Business Interruption
- Infrastructure
- Commercial Motor
- Employers Liability
- Statutory Liability
- Fidelity/Crime
- Cyber Liability
- Aviation Hull
- Airport Owners and Operators Liability (New Policy)
- Professional Indemnity
- Public Liability

Mōrearea | Risk

With the change in Loss Limit there is minimal risk of under insurance.

The general Public Liability policy that council holds does not include airports.
A separate Airport Owners and Operators Liability policy was taken out 1 July 2024 when the brokerage was changed from Marsh to AON.

Ngā Whiringa | Options

The option to insure or not has previously been considered by this committee and the status quo was agreed.

Recommended option

No options are being recommended. Report for information only

Ngā take ā-ture, ā-Kaupapahere hoki | Legal and policy considerations

None

Timeframes

Key Task	Dates
N/A	N/A

Ngā take ā-Ihinga | Consent issues

None

Pānga ki te pūtea, me te puna pūtea | Financial Cost and Funding Source

The premiums are recorded as prepayment insurance costs and journaled across all departments on a monthly cycle.

The total cost for the year commencing 1 November 2024 is $1,554,395.63 inc. GST is recoverable in part dependant on country of placement.

Ngā Tāpiritanga | Attachments

A⇩. 2024 MPDC Renewal Premium Summary - Waikato LASS

Ngā waitohu | Signatories

Author(s)	Roger Lamberth **Pou Papanoho me ngā Kaupapa ā-Hapori | Property & Community Projects Manager**	

Approved by	Fiona Vessey **Hautū Whakahaere | Group Manager Operations**	

Matamata-Piako District Council - 2024 Premium Summary

Policy	Company Premium	Natural Disaster Premium	EQC Levy	FENZ Levy	Aon Admin Fee	Sub-Total (excl GST)	GST (no formula)	Total	PO Number	Notes
Material & Business Interruption (Combined)	$ 659,553.95		$ 32,478.55	$ 43,498.00	$ 9.00	$ 735,539.50	$ 110,330.92	$ 845,870.42		
Infrastructure Cover	$ 85,181.00				$ 9.00	$ 85,190.00	$ 1.35	$ 85,191.35		
Commercial Motor	$ 78,096.12	$ -	$ -	$ 3,179.47	$ 9.00	$ 81,284.59	$ 12,192.69	$ 93,477.28		
Employers Liability	$ 1,345.00	$ -	$ -	$ -	$ 90.00	$ 1,435.00	$ 215.25	$ 1,650.25		
Statutory Liability	$ 7,809.00	$ -	$ -	$ -	$ 90.00	$ 7,899.00	$ 1,184.85	$ 9,083.85		
Fidelity/Crime	$ 25,583.00	$ -	$ -	$ -	$ 9.00	$ 25,592.00	$ 3,838.80	$ 29,430.80		
Cyber Liability	$ 25,000.00	$ -	$ -	$ -	$ 90.00	$ 25,090.00	$ 3,763.50	$ 28,853.50		
Aviation Hull	$ 1,627.66	$ -	$ -	$ -	$ 90.00	$ 1,717.66	$ 13.50	$ 1,731.16		
Airport Owners & Operatos Liability	$ 2,500.00				$ 90.00	$ 2,590.00	$ 13.50	$ 2,603.50		
Totals	**$ 886,695.73**	**$ -**	**$ 32,478.55**	**$ 46,677.47**	**$ 486.00**	**$ 966,337.75**	**$ 131,554.36**	**$ 1,097,892.12**		
Professional Indemnity	$ 380,053.00				$ 90.00	$ 380,143.00	$ 57,021.45	$ 437,164.45		
Public Liability	$ 16,746.58				$ 70.00	$ 16,816.58	$ 2,522.49	$ 19,339.07		
Annualised Totals 12 months	$ 1,283,495.31				$ 646.00	$ 1,363,297.33		$ 1,554,395.63		

8.8 Procurement Report Six Monthly FY2024/25

CM No.: 2996967

Te Kaupapa | Purpose

The purpose of this report is to provide an update to the committee on procurement performance for the period one and two of the financial year 2024/25.

Rāpopotonga Matua | Executive Summary

The effectiveness of the Procurement Policy (Policy) is measured by auditing the procurement activities to ensure they comply with Council's policy and standard operating procedures for procurement, the Office of the Auditor General's 'Good Practice Guide and NZTA's Procurement Policy.

The internal procurement audit for procurement activities for the quarter one and quarter two of 2024/25 reveals:

- Significant improvement to compliance to procurement framework –97 % of the orders audited met all procurement requirements. The remaining was minor non-compliance where the quotations were not attached to the purchase on the system (Authority). The pass rate recorded for the same period last financial year was 59%.
- Top ten suppliers by value – met all the procurement requirements. All the suppliers have valid contracts in place.
- MPDC awarded ten tenders for the reporting period. All tenders were done in compliance to the policy requirements and recorded good response, and price competition. 80% of the tenders awarded were with suppliers within the Waikato region.
- 110 active contracts have been recorded on the contracts register in authority. There has been improvement around contracts administration on Authority.
- Continuous improvement with procurement manual – Executive Team (E-team) approved changes to be implemented to the procurement manual to enhance procurement efficiency. The changes were consulted with All Staff.
- Matamata-Piako District Council (MPDC) joined two shared contracts – second generation Professional Services Panel and All of Government External Services Panel.

Tūtohunga | Recommendation

That:

1. The committee receives the Procurement Report.

Ngā Tāpiritanga | Attachments

A⇩. Procurement Report_Six Monthly_2024/25

Ngā waitohu | Signatories

Author(s)	Sangeeta Singh **Mātanga Hokohoko | Procurement Specialist**	

Approved by	Larnia Rushbrooke **Pou Pūtea, Ratonga Pakihi | Finance & Business Services Manager**	

Procurement Report Quarter 1 and 2

FINANCIAL YEAR 2024/25

35 Kenrick Street - PO Box 266 - Te Aroha 3342 - www.mpdc.govt.nz
Morrinsville & Te Aroha 07 884 0060 - Matamata 07 881 9050 - Fax 07 884 8865

Table of Contents

Executive Summary

The effectiveness of the Procurement Policy (Policy) is measured by auditing the procurement activities to ensure they comply with Council's policy and standard operating procedures for procurement, the Office of the Auditor General's 'Good Practice Guide and NZTA's Procurement Policy.

The internal procurement audit for procurement activities for the quarter one and quarter two of 2024/25 reveals:

- Significant improvement to compliance to procurement framework –97 % of the orders audited met all procurement requirements. The remaining was minor non-compliance where the quotations were not attached to the purchase on the system (Authority). The pass rate recorded for the same period last financial year was 59%.

- Top ten suppliers by value – met all the procurement requirements. All the suppliers have valid contracts in place.

- MPDC awarded ten tenders for the reporting period. All tenders were done in compliance to the policy requirements and recorded good response, and price competition. 80% of the tenders awarded were with suppliers within the Waikato region.

- 110 active contracts have been recorded on the contracts register in authority. There has been improvement around contracts administration on Authority.

- Continuous improvement with procurement manual – Executive Team (E-team) approved changes to be implemented to the procurement manual to enhance procurement efficiency. The changes were consulted with All Staff.

- Matamata-Piako District Council (MPDC) joined two shared contracts – second generation Professional Services Panel and All of Government External Services Panel.

Section 1.0 – Procurement Policy

The Procurement Policy was reviewed in 2022 and due for review in 2025. This is documented to take place after each triennial election. The policy and the associated policies are to be reviewed and approved by the Council.

The Procurement Manual was reviewed in 2019 and was due for review in 2022. The Manual is an operational guide to staff conducting procurement. It is regularly updated to comply with the latest changes resulting from any legislative environment or for continuous process improvement.

Any changes to the Manual are approved by the E-Team.

The following has been approved (4 February 2025) to be updated in the Manual:

- Update of thresholds
- Define emergency situation to suit Councils operations
- Update the procurement risks on risk register to help staff identify when an external probity officer is required.
- Regroup the existing contracts as an appendix to the manual – easier to manage and update new/expiring contracts.

The above is anticipated to be updated by end of March 2025.

Section 2.0 - Procurement Compliance

Any procurement activity is compliant when undertaken in accordance with:

- the ***Procurement Policy***,
- the ***Procurement Manual*** – provides processes and guidance on how to undertake procurement,
- MPDC ***delegations***,
- ***Approved budgets*** for goods and services.

These establish the criteria for procurement audits. Any deviation from the requirement is marked non-compliant, exposing the council to possible risks. Currently, audits are conducted monthly for purchase orders exceeding a spend value of $5,000. Fifteen purchase orders are randomly sampled from each threshold category over $5,000. Non-compliance issues identified during the audit are brought to the attention of the approvers, who are expected to address these with their teams and enforce compliance by enhancing due diligence in the approval process.

2.1 Compliance – Purchase Orders

The Policy requires purchase orders for all low value and low risk transactions.

A total of 97 purchase orders were audited for quarter 1 and 2, financial year 2024/25.

The findings indicate great improvement in compliance compared to the quarter 1 and 2 last financial year.

The table below provides a summary of the audit results.

Table 1 - Audit results for the financial year 2024/25:

Classification	Number of orders	%	Q1&Q2 FY23/2024
Pass - procurement meets all the requirements	94	97%	59%
Minor Issues - procurement has moderate areas of non-compliance	3	3%	14%
Concerns - procurement has multiple areas of non-compliance or recurring non-compliance	0	0%	27%
	97	**100%**	**100%**

Source: Authority

97% of the purchase orders met MPDC procurement policy requirements.

When undertaking the activity, the quotation process was fulfilled, but when raising the requisition, staff missed attaching the quotation, hence resulting in 3% minor issues.

Non-Compliance by value (threshold)

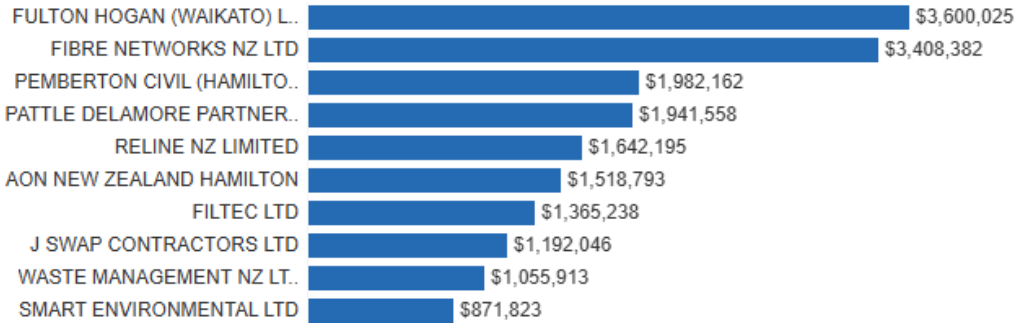
Non-compliance occurred mostly within the $5000 to $20,000 threshold. There were three cases where staff did seek quotation to finalise the award but did not attach the quotation to Authority when raising the purchase order. This is more of a housekeeping issue and does not imply risk to the Council.

This has been directly addressed with the staff raising and approving the transactions. One staff was provided a refresher on attaching quotes.

Section 3.0 - Suppliers Review

Top 10 Suppliers by highest value

Graph 1 illustrates top 10 suppliers by highest value within the reporting period.



***Source: Arcblue**, figures are inclusive of GST*

MPDC holds valid contracts with all the ten suppliers.

Payments

Arcblue reported total payments of $33.9 million for the period quarter 1 and 2, FY24/2025.

Table 2: Breakdown of payments by procurement type:

Purchase Order ($000)	Contract ($000)	Electricity ($000)	Others ($000)
9,812	18,831	1,093	4,205

***Source: Arcblue**, Figures include GST*

MPDC through All of Government has contracts with Meridian and Genesis for electricity supply.

“Others” include all legislated payments, staff reimbursements and refunds (rates/dogs and events bookings, etc).

Section 4.0 - Tenders

Ten tenders were awarded in Quarter 1 and 2 of the financial year 2024/25.

Table 3: Breakdown of tenders awarded

Department	No. of Tenders	Amount ($000)
Water and Wastewater	4	9,370
Roading	4	3,575
Kaimai Valley Services	2	548
Total	**10**	**13,493**

Figures GST exclusive

MPDC confirmed procurement of $13m using the tendering method. The services will be governed by contracts in place and will be managed by respective contract managers.

These were all open tenders through the Government Electronic Tenders portal.

The tender processes were conducted:

- In compliance to the Policy,
- In compliance to NZTA procurement requirements,
- Used appropriate templates in place, and
- Proper records management.

Every tender recorded good responses and price competition.

Ten tenders were awarded within the reporting period.

- 3 out of 10 suppliers – based within the Matamata-Piako District
- 5 out of 10 suppliers – based within the Waikato Region
- 2 out of 10 suppliers – based outside of Waikato Region

Table 4: Details the contracts, successful supplier and responses recorded

Reference Number	Title	Suucessful Supplier	No. of Response
3/23/2353	Design and Construction of the Te Aroha Wastewater Treatment Plant Screen	Brickhouse Technologies Limited	6
3/23/2360	Request for Quote - District Wide Mechanical Street Cleaning 2024-27	InterGroup Ltd	4
3/23/2361	Request for Quote - District Wide Catchpit and Sump Cleaning 2024-27	CST Group Limited	8
3/23/2364	Matamata Wastewater Treatment Plant: Stage 1	Pemberton Group	4
3/23/2368	Matamata WWTP Upgrade: Supply of Membrane System Equipment & Peripherals	Veolia Water Technologies & Solutions Australia PTY Ltd	2
3/23/2370	Contract No. 2370 Maintenance and Renewal of	Horizon Netwroks	7
3/23/2374	Contract No. 2374 Works Programme 2024/2025	J Swap Contractors Limited	11
3/23/2376	Contract No. 2376 Morrinsville Wastewater Treatment Plant Decant Balance Pond Liner	Odlum Group	3
3/23/2377	Contract No. 2377 Renewal of Footpaths 2024/2025 and 2025/2026	MS Civil Construction Ltd	12
3/23/2379	Contract No. 2379 Works Programme 2024/2025	J Swap Contractors Ltd	8

Section 5.0 - Supplier Contracts

Contracts Register

It is mandatory for all contracts, regardless of value, to be recorded in the contracts register on the authority system. The following provides an overview of the contracts as of quarter two, financial year 2024/25.

Contracts register currently has 110 active contracts valuing to $110.2 million.

Table 5: Breakdown of contracts

Contract Status	No. of Contrac	Contract Stages	Count	Value ($000)
Active	110	Awarded	19	7,239
		Agreed and Locked	82	98,852
		Completed	9	4,120
TOTAL	**110**			**110,211**

Figures are GST exclusive

Movement in contract status has been recorded since the last procurement report 2024/2023. This indicates that contracts administration on Authority has slightly improved.

There are 28 active contracts on the register assigned to staff that have left MPDC or on long term leave arrangement. This needs to be reassigned to the staff in place responsible for maintaining these contracts. Usually, when staff leave or take leave for a longer period, the managers are required to re-assign the contract maintenance roles to ensure the contracts administration is managed.

Contracts management on the contracts register supports:

- Allow greater visibility to contracts data for decision making.
- Enhance procurement planning.
- Comply to the principles Office of the Auditor General (accountability, openness,lawfulness, fairness and integrity)
- Comply to records management.

Professional Services Contract (PSP)

The E-Team approved joining the new generation PSP contract on 4th February 2025. The contract commenced on 2 December 2024 for five years (three years' initial term with an option to renew for two years). MPDC will roll out the use of contract once:

- It formally signs and is a party to the contract – the working group of the PSP contract is putting together the signing documents and will confirm this by 25th of February.

~~The contract will be made available live/available for staff to use once:~~

- The staff are signed up to the Co-Lab portal
- CM and contracts register is made ready to record the engagement
- The processes are confirmed, documented and published
- A thorough training will be extended to staff

This is anticipated to be achieved by end of March 2025.

All of Government Contract

MPDC also joined the All of Government External Legal Services contract. The term of this contract is two years effective June 2024 with two rights of renewal of two years each (six years in total).

The contract covers all external legal services in the following areas of law:

- banking and finance
- corporate and commercial
- employment
- environmental and resource management
- health and safety
- litigation
- property and construction
- public
- other (like health/medical, immigration, tikanga Māori and any area not contained in another area of law).

This contract offers:

- Access to a comprehensive range of quality providers throughout New Zealand.
- Competitive rates and hourly rate comparisons, resulting in material savings compared to market rates.
- Regular opportunities for new providers to join the panel (every 2 years).
- Continuous performance management and improved provider performance data, based on agency responses to regular provider performance surveys. This data will help inform agencies' selection of providers when direct sourcing.
- Consolidated reporting on external legal services spend.

A secondary procurement process is being conducted to determine the suppliers that will provide legal services.

8.9 Project Management Update - February 2025

CM No.: 2997250

Te Kaupapa | Purpose

This report aims to update the Committee on Project Reporting Progress, ensuring that project management teams are effectively monitoring costs, activities, timelines, and risks to meet Council objectives. Progress reports enhance transparency, keeping stakeholders and management informed about the project schedule and status, and allowing for necessary adjustments based on resource availability.

Rāpopotonga Matua | Executive Summary

In 2023, MPDC introduced the Project Management Framework with a transition period until July 1, 2024. The Project Delivery Lead supports this framework by providing standardized templates and tools, collecting data for reporting, and offering guidance. The Monthly Project Progress Report, compiled from individual project managers' reports, is presented to the Executive Team to support management decisions, identify projects needing additional support, clarify project statuses, balance workloads and budgets, and highlight projects requiring further analysis. It also provides an overview of risks to ensure alignment with the Risk Management Framework.

Recent achievements include improved quality of information in Monthly Progress Reports, positive feedback from a tailored project management training session, and the development of a continuous improvement plan based on an independent review and feedback. Priorities for the next quarter include resuming project auditing, developing a generic list of key project risks, and collaborating with team leaders to clarify requirements for upcoming projects in the 2025/26 fiscal year.

Tūtohunga | Recommendation

That:

1. The information be received;

Horopaki | Background

MPDC introduced the Project Management Framework in 2023 with a transition period up to 1 July 2024, from this date, all projects are expected to follow the new framework, process and templates. The Project Delivery Lead is a supportive function for the framework, collects and collates the data for reporting, supplies standardised project templates and tools, provides guidance acting as a consulting role and has a low level of control over the project.

The Monthly Project Progress Report provides a summary of project progress, Project Delivery Lead, in attendance discusses the report with the Executive Team and is collated from project manager's individual monthly progress reports.

The report aims to provide information to support management decisions and identify:

- Projects that may require additional support to achieve objectives
- Clarity for project status and to balance realistic workloads and budget of what can be achieved with resourcing levels.
- Projects that have been identified but require additional analysis (pre-project – options, feasibility) before they can move to initiation stage.

- Providing an overview of risks and their trend to ensure there is alignment with our Risk Management Framework as well as the Project Lead is supporting individual Project Managers

Ngā Take/Kōrerorero | Issues/Discussion

The project progress report is expected to evolve over time as project management matures within the organisation.

Focus and achievements for the last quarter are as following:

- Overall the quality of information provided by Project Managers for the Monthly Progress Reports has improved over the last quarter. Focus for improvement will be Project Managers regularly meeting with their sponsor to review, discuss project progress, issues or actions that require decisions or support.

- An external provider specialising in Project Management tailored a 2 day project management training session in December 2024 where the Project Managers in attendance provided positive feedback about the training.

- A continuous improvement plan was created using insights from an independent review of our Project Management Framework, along with feedback from management and project managers.

Priorities and improvements for the next quarter:

- Project auditing to recommence and Project Deliver Lead to prepare a compliance report that represents the Project Management Framework, Process, Templates and tools compliance and compares results from Initial and Subsequent audits during each quarter, commencing next quarter March – June 25

- Risk registers will be a focus over the coming months. The Project Delivery Lead is currently working on developing a generic list of key project risks that project managers can use for efficiency and ease of use when completing their risk register.

- Upcoming projects for 25/26 f/y. Clarity of requirements, working with the Asset Team Leaders and Project Management Team Leader with a focus on what the objectives are to enable scoping to be initiated by project managers.

Ngā Tāpiritanga | Attachments

A⇩. Pre-Project Progress: January 2025
B⇩. Project Progress: January 2025

Ngā waitohu | Signatories

Author (s)	Rachel Norman **Kaiārahi Kaupapa | Project Lead**	

Approved by	Susanne Kampshof **Pou Rawa me ngā Kaupapa | Assets & Projects Manager**	
	Manaia Te Wiata **Tumu Whakarae | Chief Executive Officer**	

MPDC Pre-Project Status Dashboard - Investigations, Options Analysis

Budget 24/25 Only

Approved Budget	Actual	Variance
$7,160,006	$-	$7,160,006

0% Budget Spend 100% Remaining Budget

All: Pipeline - Pre-Project Overall Status

Not Started	Achievable	At Risk	Action Required
44 70%	8 13%	6 10%	5 8%

70% NOT STARTED
30% IN PROGRESS

By Service: Overall Status

ACHIEVABLE ACTION REQUIRED AT RISK NOT STARTED

Total
Business_Support
Community_Facilities_Property
Infrastructure_Assets
Strategy_Engagement

Residual Risk Trend

INCREASE DECREASE NO CHANGE

0% 0% 100%

Risk: Increase - Top 5

- District-Wide Infiltration and Inflow Reduction Program 24/34
- Morrinsville - Wastewater Treatment Plant Resource Consent
- Raungaiti Reservoir and Pumps Resource Consent Renewal 24/25
- Consumer Water Meter Installation 24/28
- Wall at RSA Morrinsville 24/25

Total Escalations: At Risk

Budget	Time	Scope	Resources
1 1%	13 14%	13 14%	6 6%

Total Escalations: Action Required

Budget	Time	Scope	Resources
3 3%	4 4%	5 5%	5 5%

Business Areas Breakdown Escalations: At Risk / Action Required

Business Support

Budget	1	
Time	2	
Scope	2	
Resources	2	

Infrastructure Assets

Budget		
Time	10	1
Scope	10	2
Resources	3	2

Community Facilities & Property

Budget	1	1
Time	3	1
Scope	3	1
Resources	3	1

Strategy & Engagement

Budget		
Time		
Scope		
Resources		

Budget At Risk & Action Required
- Wall at RSA Morrinsville 24/25
- Digital Governance
- Te Aroha SwimZone Outdoor Spa 24/25
- Waters Done Well PROGRAM

Timeframe At Risk & Action Required
- Wall at RSA Morrinsville 24/25
- Digital Governance
- Waters Done Well PROGRAM
- Digital Strategy Enablement 24/27
- Consumer Water Meter Installation 24/28

Scope At Risk & Action Required
- Digital Governance
- Waters Done Well PROGRAM
- Morrinsville - Stormwater Upgrades 24/26
- Wall at RSA Morrinsville 24/25
- Digital Strategy Enablement 24/27

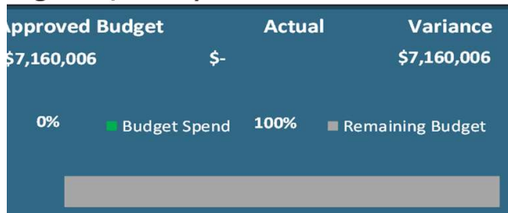
Resources At Risk & Action Required
- Morrinsville - Wastewater Treatment Plant Resource Consent
- Wall at RSA Morrinsville 24/25
- Digital Governance
- Waters Done Well PROGRAM
- Digital Strategy Enablement 24/27

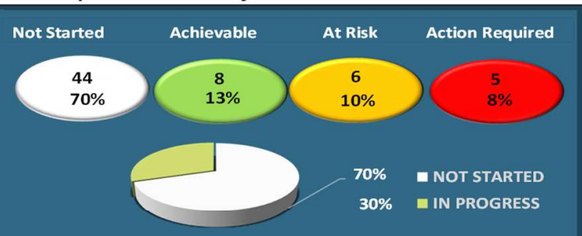
Program	Project ID	Project	Project Priority	Overall Status	Budget	Time	Scope	Resources	Dec/Jan Project Summary	Residual Risk Trend	Dec/Jan Risk Summary
Cemetaries	356	Ashes Walls - provide additional Program 24/34	Low	NOT STARTED					No update for Dec/Jan		No risk register completed
Digital_Services_Technology	307	Digital Strategy Enablement 24/27		ACTION REQUIRED					Project Manager to be assigned to lead, manage and monitor project. No information in Project container		No risk register completed
	383	Digital Governance		ACTION REQUIRED					Project Manager to be assigned to lead, manage and monitor project		Risk register not complete
	410	M365 Implementation		NOT STARTED					New Project in Jan 25. Project Manager has been employed for project, started end of Jan 25		Risk register not complete
	412	IT infrastructure Equipment - Matamata office		NOT STARTED					New Project in Jan 25		Risk register not complete
District_Pools	405	Te Aroha SwimZone Outdoor Spa 24/25	High	AT RISK					Consultant has been engaged to do a condition assessment of the outdoor spa. Assessment carried out to provide clarity on the scope of this project.		Risk register not complete
Parks_Open_Spaces_Recreation	388	Wall at RSA Morrinsville 24/25	High	ACTION REQUIRED					Unanticipated unplanned works. Action Required. Direction sought from Council. Project Manager to be assigned. Budget to be determined		Risk register not complete
Roading_Network	331	Matamata - Station to Peria Road Link 24/28	High	NOT STARTED					Led by developer pending timing of subdivisions progressing		N/A
	332	Matamata - Tower Road Pedestrian 24/25	High	NOT STARTED					No update, scoping to commence		Risk register not complete
	333	Matamata - Hinuera to Station Road Link 24/25	High	NOT STARTED					Led by developer pending timing of subdivisions progressing		N/A
Stormwater_Network	335	Morrinsville - Stormwater Upgrades 24/26	High	AT RISK					Hydraulic modelling and options study has been completed. The study has revealed that options to provide flood protection to CBD very costly and financially not viable. Therefore, the project as planned might not go ahead, but we are looking at options to use the available funds to develop solutions for other Stormwater flooding issues. Change of scope required		No risk register completed
	336	Te Aroha Stormwater Modelling/Planning 24/25	High	ACHIEVABLE					Initial models and flood maps have been developed. Further model updates will be carried out.		No risk register completed
	367	Matamata Stormwater Modelling/Planning 24/26		ACHIEVABLE					Initial model has been constructed and initial flood maps produced. Further survey of critical assets carried out.		No risk register completed
Wastewater_Network	337	District-Wide Infiltration and Inflow Reduction Program 24/34	High	ACHIEVABLE					Draft wastewater master plan is nearing completion. Some of the physical works have been identified.		No risk register completed
Wastewater_Treatment_Plants	369	Morrinsville - Wastewater Treatment Plant Resource Consent Upgrades 24/27		AT RISK					Allan Street. Looking how to optimise the current pump station. Allowing for 2024/25 for $300k design for the pump station/storage or new rising main.		Risk register not complete
	NEW	Desludging - Te Aroha and Matamata 24/27	High	AT RISK					Options report has been commissioned Matamata prioritised with partial desludging works being completed as part of the ID:244 Matamata Wastewater Treatment Plant Upgrade project Morrinsville & Te Aroha works to be determined from options		Risk register not complete
Water_Network	341	Consumer Water Meter Installation 24/28	High	ACHIEVABLE					Scoping underway, project manager to be appointed Feb 25		Risk register not complete
	343	Water Loss Strategy Implementation 24/26	Medium	ACHIEVABLE					Scoping underway, project manager to be appointed Feb 25		Risk register not complete
	292	Te Aroha Trunkmain Condition Report inc. Longsection Survey 23/24	High	ACHIEVABLE					Consultant engaged to do an options assessment in December 2024.		Risk register not complete
Water_Treatment_Plants	347	Hinuera Water Treatment Plant 24/26	High	AT RISK					The scope of the project will change to upgrade some of the other critical WTPs. Scoping work will begin in February.		Risk register not complete
	348	Matamata Tills Road Sludge 24/26	High	NOT STARTED					The scope of the project will change to upgrade some of the other critical WTPs. Scoping work will begin in February.		Risk register not complete
	350	Raungaiti Reservoir and Pumps Resource Consent Renewal 24/25	High	NOT STARTED					To commence in February 2025		Risk register not complete
	354	Te Aroha Water Treatment Plant Intake Consent, Upgrade, Resource Consent Renewals 24/26	High	ACHIEVABLE					Water source investigations are almost complete		Risk register not complete
	355	Te Poi Water Treatment Plant Resource Consent Renewal 24/26	High	AT RISK					Consultant is working on a fee proposal for investigation part of this work.		Risk register not complete
	411	Tahuna Bore 2 Re-establishment 24/25		NOT STARTED					New Project in Jan 25		Risk register not complete

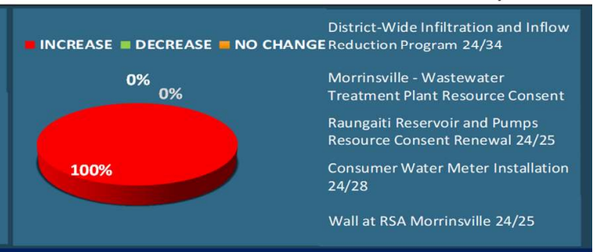
Item 4.9

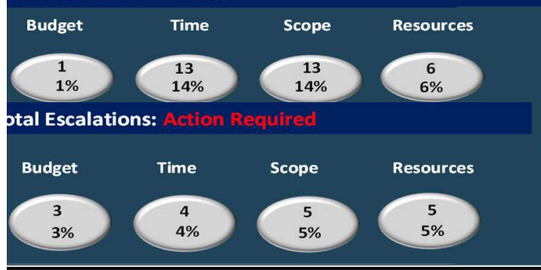
Attachment B

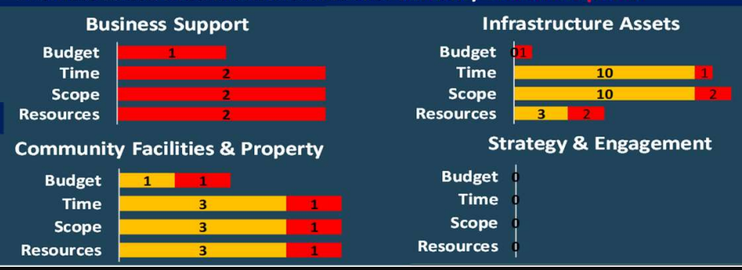
MPDC Pre-Project Status Dashboard - Investigations, Options Analysis











Budget At Risk & Action Required
- Wall at RSA Morrinsville 24/25
- Digital Governance
- Te Aroha SwimZone Outdoor Spa 24/25
- Waters Done Well PROGRAM

Timeframe At Risk & Action Required
- Wall at RSA Morrinsville 24/25
- Digital Governance
- Waters Done Well PROGRAM
- Digital Strategy Enablement 24/27
- Consumer Water Meter Installation 24/28

Scope At Risk & Action Required
- Digital Governance
- Waters Done Well PROGRAM
- Morrinsville - Stormwater Upgrades 24/26
- Wall at RSA Morrinsville 24/25
- Digital Strategy Enablement 24/27

Resources At Risk & Action Required
- Morrinsville - Wastewater Treatment Plant Resource Consent
- Wall at RSA Morrinsville 24/25
- Digital Governance
- Waters Done Well PROGRAM
- Digital Strategy Enablement 24/27

gram	Project ID	Project	Project Priority	Overall Status	Budget	Time	Scope	Resources	Dec/Jan Project Summary	Residual Risk Trend	Dec/Jan Risk Summary
									6 activities yet to be started. 3 activities at Firth Tower (Toilets, Woolshed & Cottage) are being delayed in starting due to in-house resources becoming stretched. External contractors assisting with some of the larger activities e.g. Library roof and carpet. 2 activities complete: 2A Grace Ave staff housing refurbishment, Boyd Park toilets upgrade to flushing system. The following activities are in progress. Te Aroha: Bathhouse No.2 ventilation system renewal. Te Aroha Library Roof and carpet replacement. Te Aroha Mineral Spas Room 8 renewal Matamata: SZMM changing rooms refurbishment, staff room refurbishment and carpet renewal		Overall Risk for program staying the same
lings	294	Building & Housing Renewals Program 24/34	Low	AT RISK					Morrinsville: SZMV replace shade covers with purpose-built shelters		High risk for Budget, Schedule
	407	Morrinsville Office Building Upgrade 24/25	High	AT RISK					No update for Dec/Jan		Risk register not complete
orate_People_Wellness	228	Organisational Review		COMPLETED					There are some roles still to be implemented that will be undertaken as part of BAU		No ongoing risks identified in completion report
al_Services_Technology	314	IT Sophos Firewall Upgrade		ACHIEVABLE					Meeting to be set up with IT Manager for potential Program for IT low risk, low complexity activities and only separate high risk, high complex activities to be run as a project. Procurement underway for Sophos		No risk register completed
ict_Event_Centres_Community_Venues_Events	240	Matamata Sports Stadium 24/25	High	ACHIEVABLE					Development agreement fully signed. Enabling works and design and build contracts fully signed. Expect detailed design to be complete shortly.		Overall risk trend for project staying the same. Financial: Council have accepted the risk for uncertainty of external funding applications being approved and the amount granted vs applied for and will cover shortfall if any. High risks for Brand & Reputation if community expectations and funding partners are not managed appropriately, Operational, project delays leading to additional time and additional costs, operations may be disrupted for key stakeholders
ict_Pools	295	District Pools & Spa Plant Renewals Program 24/34	High	ACHIEVABLE					Te Aroha Swim Zone - replacement pool covers ordered. Unplanned works completed on Mokena in December 24 to clear blocked bore. Staff are waiting on recommendations for bore structure changes.		Overall Risk for program staying the same High risk for Budget, Schedule
Partnerships_Relationships	384	IWI Partnership Project	(blank)	ACTION REQUIRED					No budget allocated Create learning series workshops: Goals considered, targets confirmed Document operational best practices related to IWI/Maori engagement and relations: Goals considered, targets confirmed Create a working group with selected Councillors and IWI: Complete, The Partnership Project Working Group has been established. Policies Engagement Enhancement: This will transition to Business as Usual (BAU) being delivered through Te Manawhenua Forum (TMF) participation		Risk trend staying the same, high risk to stakeholder engagement (IWI)
s_Open_Spaces_Recreation	296	Street Furniture Replacement Program 24/34	Medium	ACHIEVABLE					Te Aroha: Benches on Stanley Avenue identified as needing renewals. Morrinsville: Barriers on Thames St, identified as needing renewals. Awaiting condition assessment/decision from Parks & Reserves on how to proceed		No risk register completed
	297	Morrinsville Recreation Ground Masterplan 24/34	High	ACHIEVABLE					Staff presented to Council (Council Workshop) a list of projects that have been prioritised for implementation this financial year. Key messages shared with the Councillors were (1) Endorse list of priority projects as identified by staff (2) provide guidance on whether there is a need to consult with the community again. It was agreed at this meeting that the projects presented were suitable for implementation and that staff would report back to the Morrinsville councillors with cost estimates and final list of projects that can be implemented with the available budget.		No risk register completed
	298	Tracks & Track Structures Renewal Program 24/34	Medium	ACHIEVABLE					Specialised procurement memo being drafted for Ngati Tumutumu to be able to undertake physical works Tui Domain Track - Te Aroha		Overall Risk for program staying the same High risk for Community expectations and Budget, Schedule

							Te Aroha: Domain BBQ has been delivered and is awaiting installation. Boyd Park, Tui Domain Track & Boat Ramp seating has been installed. Te Aroha cemetery gates have been handed over to Property team.. Morrinsville: Events Centre drinks fountain has been installed. TA Swim Zone pool modules have been delivered and in use. Matamata: Rose Yorke Lounge AV System and lounge carpet tiles have been installed. Swap Park safety fence has been handed over to KVS team. District-wide carpet tiles and trolleys have been ordered, delivery expected Feb 2025. Park and wayfinding signage is awaiting further instruction from the Parks team.		
	302	Building, Parks & Open Spaces Bulk Fund 24/25	Medium	ACHIEVABLE					No risk register completed
	XXX	Rapurapu Reserve 23/24	High	ACHIEVABLE			Project construction completed. To be capitalised		Project risk decreasing, construction complete
grounds	247	Destination Playgrounds - Matamata Domain 24/25	High	AT RISK			Continuing to work through design and provide feedback to Matamata Futures, expecting final design over the coming weeks. Project will not be completed within this financial year as planned due to delays in funding. Matamata Futures is continuing fundraising to meet funding target.		Overall risk trend for project staying the same. High risks for Brand & Reputation if community expectations are not managed appropriately, Operational, Financial due to uncertainty of scope and detailed design costs not finalised
	299	Playground Renewals Program 24/34	Medium	ACHIEVABLE			Site visits to high priority playgrounds to assess key focus for this FY. At this stage the shortlist is Hanna Reserve - Te Aroha and Russell Reserve - Te Aroha. Scoping document nearly complete to set out renewals program for the next 3+ FY		High risk for Community expectations and Budget, Schedule
	406	Maea Fields Playground 23/24	Medium	ACHIEVABLE			Comments on final design received from Assets, with developer for edits		Risk register not complete
ic_Amenities	300	Public Toilet Upgrades Program 24/34	Low	DEFERRED			N/A		N/A
	303	Matamata Domain - New Toilets 24/25	High	ACHIEVABLE			Building consent and resource consent submitted, slight delay while we wait for approvals. Work anticipated to start in February pend required consents approval.		Risk trend staying the same, no high risks identified
	304	Davies Park - Lockerbie Estate - New Toilets 24/25	High	ACHIEVABLE			Arborist report obtained. Resource consent submitted.		No risk register completed
ling_Subsidised	319	Pavement Renewals Program 24/34 - Subsidised	High	ACHIEVABLE			Package 1 - Contract 2374 (Gunn Rd and Snell St) complete. Package 2 - Contract 2379 Alexandra Rd 50% complete. Ngarua Rd start programmed for 29 January. Package 3 - Contract 2387 - Morrinsville-Walton Rd. Tender closes 23/01/25.		Risk trend for program staying the same. Very High risks for Safety/Wellness(working on the road/traffic) High Risks for Safety/wellbeing (working around power lines/gas/mobile plant, hazardous substances and bitumen)
	320	Reseals Program 24/34 - Subsidised	High	ACHIEVABLE			Most of reseal programme around the southern end (Matamata area) has now been completed. Contractors now completing reseals around the Morrinsville area and north of Morrinsville.		Risk trend staying the same. Very High risk for Safety/Wellness(working on the road/traffic) High Risks for Safety/wellbeing (working around power lines/gas/mobile plant, hazardous substances and bitumen)
	321	District-wide Footpaths Program 24/34 - Subsidised	High	ACHIEVABLE			Footpath renewals work has started on Smith Street Street and Station Road Matamata.		Risk trend staying the same
	322	Traffic Services - Streetlight poles, posts, signs Program	High	ACHIEVABLE			Program progressing as expected, replacements as required Sign Renewals: various locations district wide Road Markings: various locations district wide, to be completed during summer months Street lighting: various locations district wide		No risk register completed
	323	Unsealed Roads Program 24/34 - Subsidised	High	ACHIEVABLE			No update for Dec/Jan 25 Resheeting unsealed roads as required, best completed during Autumn / Winter when its not so dry.		No risk register completed
	324	Drainage Renewals Program 24/34 - Subsidised	High	ACHIEVABLE			Program milestones progressing as expected. Gunn Rd, part of tender 3/23/2374 Completed RFQ to go out for Henry Watson Rd Culvert #43 and Hutchinson Rd Culvert # 15		No risk register completed
	325	Structure Renewals Program 24/34 - Subsidised	High	ACHIEVABLE			RFQ has gone out to contractors for small bridge component replacement programme		No risk register completed
egies_Plans	308	Long Term Plan 27-37		ACHIEVABLE			Project Planning underway. Early discussions underway regarding improvements that can be made to smooth the workload during the three-year period including the development of 10 year budgets.		No risk register completed
	309	Annual Plan Program 24/34		ACHIEVABLE			Program experiencing delays but not expected to affect adoption of 1 July 25. Annual Plan budgets: preliminary budget approved at December Council meeting Decision on consultation: At December meeting, Council made decision that consultation not required and instead an information campaign will take place Property revaluations: substantially delayed. New timeline confirmed. Fees and Charges: Due to be approved for consultation at February meeting		No risk register completed however risk trend decreasing now that we have confirmation of property revaluations dates noted on report
	310	Annual Report Program 24/34		ACHIEVABLE			The Annual Report was published on the website within legislative timeframes. The 6 month report is currently being prepared for Eteam, Risk and Assurance Committee and Council.		No risk register completed however risk trend decreasing now project nearing completion
	311	Bylaw Reviews Program 24/34		ACHIEVABLE			project progressing as expected. Public Amenities and Public Safety Bylaws under review. Early engagement has been completed and bylaws have been reviewed. The review has resulted in two standalone bylaws: Community Safety Bylaw and Cemeteries Bylaw. Drafts have been prepared with sign off received from Council to seek formal feedback. In November 2024, Council agreed to progress with an Alcohol Licensing Bylaw to ensure that the fees more accurately represent the costs of processing, rather than relying on ratepayer contribution to account for cost coverage. Draft Bylaws complete: Council are expected to approve the draft Alcohol Licensing Bylaw in February 2025, and all three draft bylaws will be consulted on in March/April 2025.		Risk trend staying the same. High risk for Brand & Reputation - lack of enforcement/monitoring raised as a key concern by the community.
	313	Policy Reviews Program 24/25		ACHIEVABLE			No budget. Statutory review of the Gambling and TAB policies. Review of Dangerous, Affected and Insanitary Buildings Policy due to audit requesting changes.		No risk register completed
	379	Climate change river map implementation 24/27		ACHIEVABLE			Sustainability at MPDC Events - Christmas Party, Pōwhiri Climate change updates to Te Ohu Takutū Anamata December Staff Climate Change group meeting January update provided to E Team 2 x presentations to Council in planning stage: Insurance, Hauraki Adapatation Planning Project Emissions inventory report due to be presented to Council in February Presentation to Full Staff Meeting in planning stage		Risk trend staying the same, High risks for Financial and Brand & Reputation
a_Kotahi_NZTA_Funded_Low_Cost_Low_Risk	326	Local Improvements - Streetlighting		ACHIEVABLE			Budget reinstated Nov 24. Working on planning and preparing cost estimates.		No risk register completed
	327	Safety Improvements Program 24/34 -Roads to Zero		ACHIEVABLE					No risk register completed
	328	Speed Management Plan Implementation 24/25		ACHIEVABLE			Budget reinstated Nov 24. Working on planning and preparing cost estimates.		No risk register completed
	243	School Travel Plan Implementation 24/25	High	ACHIEVABLE			Project scope, estimate, and responsibility list developed, working on graphics plan. Review of school, road safety education training and potential consultants for developing a school travel action plan, availability to be determined		Project overall risk trend staying the same. No residual risks rated High or above currently identified
te_Recycling	334	Transfer Stations - Minor Upgrades 24/26	High	ACHIEVABLE			Waihou Refuse Transfer Station: The Roading upgrades for the Waihou RTS project were successfully completed December 24. This included resurfacing, concreting, resealing the top area, installing speed humps, road markings, and signage. All activities were completed on schedule, contributing to the successful delivery of the project. Morrinsville Refuse Transfer Station - scoping to be finalised		Risk trend decreasing. Waihou site completed
	249	RTS Management & Operations - External to MPDC In-H		AT RISK			Late November discussed upcoming trial with SEL supervisor; However, approached three different hire companies, who had telehandlers available for hire and none could supply a grab bucket with the hire machine; One company can supply in January'25; RTS Team Leader position description approved and sent for job sizing. Recruitment process started with entering details into Snaphire. Advertise in Jan 2025 - close first week in Feb 2025.		Overall risk trend staying the same High project risks for Resources (project manager, internal IT resource availability to deploy software and hardware for business continuity, recruitment of new staff) Financial and Operational, if project does not meet timeframe additional costs will be incurred, operations may be interrupted. Safety/Wellness, working with plant, equipment and machinery
	381	Closed Landfills Pump Station Upgrade Waihou/Morrins		ACHIEVABLE			Morrinsville - Commissioning the pumps and power faulted. Need to cable locate the power main to find and repair. Confirm if power faulted due to contractor strike. Waihou - Completed.		Overall risk trend staying the same Very high risk for operational is pumps fails before replacement can be completed
tewater_Network	339	Wastewater Reticulation Renewal Programme 24/34	High	ACHIEVABLE			Relining of 60m. 225Ø earthenware pipe in Farmers St, Te Aroha Contractor contracted to replace the Fonterra manhole and 165m over-pumping works. A change request form has been sent to S&P team for approval to allow $50k more for work order.		No risk register completed
	340	Te Aroha Wastewater Pipe Increases Associated with Ne	Low	NOT STARTED			Works completed as required		N/A

Komiti o te Mōrearea me te Tūmaru | Risk & Assurance Committee
25 February 2025

te kaunihera ā-rohe o matamata-piako district council

	OLD	Wastewater Reconsenting 20/21		AT RISK	The notification period for the consent closed mid October, and 4 submissions were received, two in support (Iwi and Fonterra) and two of opposed from Auckland Waikato Fish & Game and Harlow Holdings. The Consenting Project Team are working through submission comments, and drafting responses to both submitters. A discussion has been had with WRC to set a hearing date, the date has not yet been requested formally as once that process has started a Commissioner must oversee and approve the outcome. The Project Team is continuing to work with submitters over the coming month to see if a outcome can be reached for a hearing date is formally requested.		Risk trend staying the same. High risk Financial, risk for consent not being granted for proposed discharge limits and requires further investment
tewater_Treatment_Plants	244	Matamata Wastewater Treatment Plant Upgrade 24/26	High	AT RISK	The Enabling Works contract is underway and great progress has been made with reclaiming the pond, the bund now extended across the entire pond, and the sections are being installed. Contractors have started removing the sludge from under the new plant platform. Desludging of the remaining space will be start this week, however, Pond 1 will not be desludged until February 2025. The Main Civil works contract was out to tender, closed 24 December 2024. Two of the four shortlisted tenderers have confirmed they will submit a tender. The Detailed Design from consultant is now well progressed with Issue for Tender (IFT) drawings issues, only minor amendments will occur from this stage ahead of the Issue for construction (IFC) drawings set. Due to contract taking longer than anticipated to be awarded, some sections of design are tracking behind.		Risk increasing, high risks for scope, legal & regulatory for non compliance of plant and environmental compliance. Financial if new plant does not meet consent requirements and standards that are currently unknown until 2025. Operational, insufficient power supply getting upgraded. Health & Safety, machinery
	338	Wastewater Plant Renewal Programme 24/34	High	AT RISK	Program budget revised, schedule of work determined, awaiting work orders from Assets team to proceed to Delivery. Risk to timeframe to complete schedule		Risk register not complete
	277	Waihou Wastewater Treatment Plant Upgrade 23/24	High	ACHIEVABLE	Final site clearance and re-grassing		Overall risk trend for project decreasing. No residual risks rated High or above currently identified
	XXX	Te Aroha Wastewater Fine Screens 23/24	High	ACHIEVABLE	Concept design completed, building structural report underway to confirming the loadings for the new screen and any potential civil work.		Project overall risk staying the same High risk, Financial and Very High Operational: Unknown civil works required due to the increase in screen size and loadings on the building, awaiting report from structural engineer and access options and costs
	279	Te Aroha Wastewater Treatment Plant Fencing 23/24	Medium	ACHIEVABLE	Obtained work order to progress the work. Finalise area to be fenced with operations. Discussions with farmer and iwi on planting. Early discussion with HRT and Hauraki DC re: the planting.		Risk trend staying the same, High risk Health & Safety, working around a farm, livestock. Brand & Reputation, media interest. Project risk very high, fencing alignment, plantings, boundary readjustment
	281	Terminus Wastewater Pump Station Flowmeter Installat	Medium	ACHIEVABLE	Air valve received awaiting installation by KVS		Project overall risk trend staying the same. No residual risks rated High or above currently identified
er_Network	346	Water Retic Renewals Program 24/34	High	AT RISK	Te Aroha: Kenrick St started to configure the Kenrick/Stanley Ave corner to enable isolation of either side of Stanley Ave to minimise disruption to residents. Matamata: Gordon Terrace is underway, anticipated completion mid Feb 25. Request submitted to bring 25/26 budget forward to continue planned program of work while under contract (current budget will be expended prior to end of financial year). Current watermain renewals contract due to end Dec 2025, decision will be required on how we package future watermain renewals.		Risk register not complete
	349	Morrinsville - North Water Retic Upgrade 24/25	High	COMPLETED	Capitalisation required		Risk trend decreasing, project complete
	252	Gross Pollution Monitoring (Conductivity and PH Probes	Medium	AT RISK	Approval of the Project Brief and issue of work orders to complete the Morrinsville and Te Aroha raw water analysers. The Morrinsville analysers have been purchased and installed on site, they are yet to be connected to MDPC SCADA. Project Manager has been unsuccessful in finding out the procurement approach or where this has been charged to and has exhausted all avenues. Unable to proceed with this activity or close it out. Assistance required		High risk of non compliance, prioritisation completed and staging of the works with high priority plants to be completed first
er_Treatment_Plants	342	HSNO Upgrades 24/26	High	NOT STARTED	No update		Risk register not complete
	344	Raw Water Intake Resource Consent Compliance 24/25	High	TERMINATED 24/25	Budget reduced to 0 $150k reallocated to Gross polluting monitoring (ID252) $100k Re-allocated to Rolleston to 25/26 (ID263)		N/A
	345	Water Plant Renewals Program 24/34	High	AT RISK	Progressing slowly to determine works schedule, gathering stakeholder information as we go to correct inaccuracies of asset information in system, some tasks started		Risk register not complete
	351	Tahuna Water Treatment Plant Resource Consent 24/25	High	COMPLETED	Allocated to W/O 064618 Scotts Road PLC Replacement (carry over 23/24) to complete project		No risk register completed
	352	Tahuna Water Treatment Plant New Bore Investigations	High	TERMINATED 24/25	Refer Project ID 260 Tahuna New Bore $250k allocated to W/O 06416 Tahuna New Bore (carry over 23/24) to complete project		N/A
	266	Matamata South (Burwood Rd) Bore Upgrade 23/24	High	ACTION REQUIRED	Estimate of construction costs received Available budget does not cover construction phase, cost estimate for construction received, then decision required by Assets for budget availability if project is to proceed		Overall risk trend staying the same. High risk, non - compliant Non-compliance with DWQAR
	262	Tawari Water Treatment Plant - Replacement Caustic So	High	AT RISK	Final design sign off, further budget may be required		Risk register not complete
	283	Tahuna Wastewater Treatment Plant Alkalinity Dosing 2	High	ACHIEVABLE	Connection to existing system-still on going. In final commissioning stage		Risk trend staying the same, not high or above risks noted
	251	Morrinsville Lockerbie Bore Pump and Water Treatment	High	ACHIEVABLE	Permanent WAN connection with KVS/Wireless IT/Epic. There is a plan underway for the completion of MPDC IT tasks. Noise monitoring of the bore headworks still to be undertaken. Performance Stage 2 testing due to be complete in March 2025 depending on water demand		Risk Trend staying the same: Technology critical for operations of plant. Residual risk for Operational increasing due to three water sources running at the same time, managing flow rates to avoid pressure fluctuations in the network (to be addressed during handover)
	250	Morrinsville Water Treatment Plant Alum Tank Renewal	High	ACHIEVABLE	Tank WorkSafe Certification obtained by the tank manufacturer. Tank is ready and waiting in Auckland for MPDC/Contractor to be ready for this to be delivered to site. Main Contractor is on holiday until Labour day, Electrical Contractor is currently on site finalising what they can in the mean time.		Project overall risk trend staying the same. Operational risk if tank lead time exceeds life of tank.
	254	Te Aroha Water Treatment Plant Retaining Wall and Wa	High	AT RISK	Scope and budget increased to include security fencing and security cameras Stage 1 - retain around de-sludging tanks, 90 % complete Stage 2 - retain bank near filters, halted to allow for engineer to assess wall. Met with consultant to get a first draft design for a retaining wall around the clarifiers Stage 3 - retain track and repair stormwater piping		Project overall risk trend staying the same. High risk for Operational: Bank holding clarifiers is failing due to stormwater erosion.
	263	Rollenston Street Intake (Permanent) 23/24	High	AT RISK	Concept Design: Complete Project does not include construction at this stage. Further Geotech and a Ecological report on the site being completed. Budget to be discussed with Assets		Project overall risk trend staying the same. No residual risks rated High or above currently identified
	260	Tahuna New Bore 23/24	High	ACHIEVABLE	Septic Tank removed, Land Use consent granted from MPDC		No risks high or above noted
rly_Persons_Housing	390	EPH Program 24/34		ACHIEVABLE	Program progressing as expected. The program is self funded program, refurbishments completed as required. Te Aroha: 2/9 Boundary Street complete7/87 Centennial Ave- total refurbishment underway. Morrinsville: 2/4 McPherson Derive - complete Matamata: 1/55 Rata Street, 3/40 Rawhiti Ave - Refurbishment underway		Risk register not complete
er_Off	315	BOF - Place Plan Program Resource 24/25		ACHIEVABLE	To date a resource has been brought on board to assist with delivery of Place Plans - some resourcing is also available for the Communications and Engagement team and the great work they do to support the Place Plan projects. Transition to BAU as position is funded on contract		No risks high or above noted
	316	BOF - Community Led Initiatives Grant 24/25		ACHIEVABLE	Te Aroha - Yoga Day - Local yoga enthusiast provided free sessions in the Domain during the day and evening. Smaller Communities - Waharoa - Christmas at the Hauora - A wellness day was hosted for the community.		Risk register not complete
	396	BOF - Morrinsville - State Highway Crossing near Lorne S	High	ACHIEVABLE	Completed initial cost estimates for the project. Received first round of quotes from consultants. Awaiting proposals for the revised scope. Site visit with Roading team to get feedback. Discussion held with Project Sponsor to determine expectations and scope and prepare		Risk register not complete

	226	BOF - Matamata - Enhance Matamata Connectivity 24/2	Medium	ACHIEVABLE		Final design work underway; Lighting design for the Tainui crossing and Burwood Rd crossing underway		Overall risk trend staying the same. No residual risks rated High or above currently identified
	242	BOF - Matamata - Matamata/Morrinsville Accessibility I	High	ACHIEVABLE		Tender closed and evaluation team have agreed upon a suitable contractor. Tender evaluation report going to E-Team to approve tender evaluation decision 21/01/25		Risk trend staying the same, high risk for financial, scoping budget accuracy and heath and safety, working with plant/equipment, working near roads and excavation.
munity_Parnerships_Governance	305	Triennial Elections 24/27	(blank)	ACHIEVABLE		800 ratepayer roll rates notices have been ordered and will be included in the rates notice to be sent out in May 2025. Solution Dynamics (our mail house) will be developing an e-tile to link inserts to those who receive their rates notices via email. This is to avoid having another attachment for security reasons. Continued collaborative discussions happening with other entities on joint engagements. Beginning discussion internally regarding induction process.		No risk register completed
	306	Pre-Election Report 24/25	(blank)	ACHIEVABLE		Developing a timeline to ensure financial information and graphic design can be completed by the deadline. Staff are registering to attend a online hui about Pre-Election reports by TaituarāPre-Election Report is a legal requirement to be produced prior to all Triennial Elections - work is due to commence February 2025		No risks high or above noted
	318	Pride of Place 24/27		ACHIEVABLE		Matamata - Hetana/Arawa Street laneway - A modern mural created with the community was installed and celebrated with a launch event in December 2024. Matamata - Social Seating - A unique New Zealand shaped table with paua inspired seating designed by the community was installed and celebrated in December 2024. Te Aroha - Aroha pickleball - Following a successful pickleball trial, this community-led initiative developed into the delivery of permanent lines that were installed at the Domain in December 2024.		Risk trend staying the same, no high or above risks noted

8.10 Top Risks Deep Dive - Failure of essential services/infrastructure/assets/systems, initially focusing on water/wastewater

CM No.: 2996443

Te Kaupapa | Purpose

To facilitate a discussion on the top risks deep dive – Failure of essential services/infrastructure/assets/systems in relation to water/wastewater.

Rāpopotonga Matua | Executive Summary

The deep dive into the Failure of essential services/infrastructure/assets/systems in relation to water/wastewater provides an overview of the risk environment, various risk controls and mitigations. The inherent rating for this risk is extreme and despite various risk controls, the residual rating is very high. The information in this report and attachments provide further detail on the risks, risk controls and improvement actions. This is an opportunity for the committee to consider the current controls and what is an acceptable level of risk.

Tūtohunga | Recommendation

That:

1. The Information be received.

Horopaki | Background

Risk management is about identifying, evaluating, planning for and responding to threats. The aim is to be prepared for what may happen and have a plan in place to respond.

The Top Risks Register provides the Risk & Assurance Committee with key insights to oversee the organization's most significant risks. This includes evaluating the overall risk profile, assessing whether the level of risk is appropriate, ensuring risks are accurately described, and confirming that the register is regularly reviewed and updated.

For this specific top risk deep dive—the failure of essential services/infrastructure/assets/ systems for water and wastewater (Attachments A & B)—the risk has evolved significantly over the past decade. Given its complexity, multiple layers of risk must be considered. This risk spans various aspects of council risk management, from project-level and operational risks to also intersecting with other identified top risks, including the loss of data and business systems and inadequate response to local natural disasters, extreme weather events, and pandemics.

Ngā Take/Kōrerorero | Issues/Discussion

When essential services fail there is the potential for widespread service disruption, public health impacts, regulatory breaches, financial losses, and reputational damage. If failure occurs public health, the environment and resourcing are at risk.

Failure of essential services for water and wastewater relates to the provision of water and the collection of wastewater:

- Provision of Water (abstraction, treatment, reticulation, storage)
    - Abstraction failure (raw water / bore)
    - Treatment plant failure (process or asset)
    - Reticulation failure
    - Reservoir / dam failure
    - Distribution mains failure

- The collection of Wastewater (reticulation, wastewater pump stations, treatment and disposal)
    - Trunk/bulk main failure
    - Wastewater Pump station failure
    - Treatment plant failure (process or asset)

The deep dive process looked to validate the risk description, impact of the risk, effectiveness of the controls and that controls are consistent with risk tolerance levels. There are multiple controls in place for this risk. The controls have been assessed as Partially Effective 60%. The combination of existing controls and ongoing improvements demonstrates how Council is currently managing risk and progressing improvements.

Mōrearea | Risk

The risk of Failure of essential services/infrastructure/assets/systems, initially focusing on water/wastewater has been assessed as having a Very High residual risk. This means that even after implementing risk controls and strategies Councils risk remains Very High.
Currently, the team are working on reducing the residual rating to High. Operationally the key risks for water and wastewater essential services have been identified as public health, environmental and resourcing. The work in progress has the potential to reduce the residual risk rating from Very High to High.

A key piece of work towards this outcome is the risk based approach project to make improvements to operational water treatment services. A review has been completed of the water treatment plant sites and associated documentation. An operational risk register (Attachment C) has been developed and the development of Standard Operating Procedures (Attachment D) and Emergency Response Plans (Attachment E) are under way.

Once we have completed the operational treatment waters risk assessment we will move to progressing the water/wastewater reticulation risk assessment and operational wastewater treatment risk assessment. The information from these assessments will be used to amend the top risk assessment controls.

Currently, we are also considering options as required by law to publish a Water Services Plan that outlines how Council will deliver water services in the future in a sustainable manner. In preparing for this council are undertaking a review of the current state and looking to find opportunities for improvement. This review may also provide invaluable insights that can be used to amend the top risk assessment controls.

The work currently in progress may result in a change to the residual rating from Very High to High.

Achieving a residual risk rating less than high for the failure of essential services/infrastructure/assets/systems is highly unlikely given:

- **essential nature of the service with failure having a severe consequence** – external threats, regulatory and compliance pressures
- **aging infrastructure** – pipes, treatment plants, pump stations are at increased vulnerability and likelihood of failure
- **external threats** – earthquakes, floods, power outages and cyber-attacks outside our control
- **regulatory and compliance pressures** – stringent water and wastewater standards / regulations (Taumata Arowai and Waikato Regional Council). Any system failure is now a high priority risk
- **complexity** – reliance on workforce and suppliers

To achieve a lower than high rating would require:

- **Multiple Redundant Systems** – backup pumps, alternative treatment facilities, emergency power supplies, and bypass systems, to reduce the likelihood of total failure.
- **Advanced Predictive Maintenance & Monitoring** – real-time SCADA monitoring, AI-based predictive analytics, and condition-based maintenance reducing the risk of unexpected failures.
- **Extensive Emergency Preparedness** – detailed contingency plans, rapid response teams, and emergency contracts with suppliers and repair services.
- **Stronger Investment in Upgrades & Resilience** – Ongoing **capital investment** in upgrading infrastructure (rather than reactive fixes) can shift the risk downward.

While building in redundancy, advanced systems and emergency preparedness for some parts of the system may reduce the residual risk ranking. The likelihood of a **"Medium" or "Low"** residual risk rating for water and wastewater is exceptionally rare and would require significant investment in capital upgrades, technology and contingency planning. This was emphasised in the work led by the Department of Internal Affairs on Three Waters Reform.

Ngā Whiringa | Options

Options

There practical options for the committee to consider given three water reforms are the:

- **Status Quo:** Continue with current controls and ongoing improvements. This maintains existing strategies but may not significantly reduce risk levels in the short term.
- **Emergency Preparedness Strengthening:** Conduct more frequent emergency response drills, review contingency plans, and establish stronger supplier agreements for rapid repairs.
- **Risk Appetite Definition:** consider the committee's risk tolerance levels for water and wastewater service failures.

More advanced options for consideration include:

- **Increased Investment in Infrastructure & Redundancy:** Prioritize funding for capital upgrades, backup systems, and resilience projects. This could lower the residual risk over time but requires significant financial commitment and may not reduce the risk below High.
- **Enhanced Risk-Based Maintenance Strategy:** Shift from reactive maintenance to predictive analytics-driven asset management. This option leverages technology to anticipate failures before they occur.

However, as these two options require integration into the Long-Term Plan, the 1 July 2026 Local Waters Done Well timeline does not align and therefore are unachievable.

Next Steps

- **Implement the Operational Risk Based Approach for Water Treatment:** Water Treatment and Implement
- **Further Deep Dive Risk Assessments:** Develop a project scope for the assessment of water/wastewater reticulation and wastewater treatment to refine risk controls.
- **Develop a Water Services Plan:** Align long-term strategy with legislative requirements and sustainability objectives.
- **Risk Appetite Statements:** consider tolerances for service disruptions, balancing costs with acceptable risk levels.
- This structured approach provides the committee with actionable options and strategic next steps to strengthen risk management for water and wastewater services

Ngā take ā-ture, ā-Kaupapahere hoki | Legal and policy considerations

There are no legal or policy considerations

Local Government Act 2002 (LGA 2002) Decision-making requirements

Having regard to the decision making provisions in the LGA 2002 and Councils Significance Policy, a decision in accordance with the recommendations is assessed as having a low level of significance.

All Council decisions, whether made by the Council itself or under delegated authority, are subject to the decision-making requirements in sections 76 to 82 of the LGA 2002. This includes any decision not to take any action.

Local Government Act 2002 decision making requirements	Staff/officer comment
Section 77 – Council needs to give consideration to the reasonable practicable options available.	Options are addressed above in this report.
Section 78 – requires consideration of the views of Interested/affected people	The relevant views are those from Council, Risk and Assurance Committee and staff.
Section 79 – how to achieve compliance with sections 77 and 78 is in proportion to the significance of the issue	The Significance and Engagement Policy is considered above. This issue is assessed as having a low level of significance.
Section 82 – this sets out principles of consultation.	Consultation is not considered necessary.

Policy Considerations

1. To the best of the writer's knowledge, this recommendation is not significantly inconsistent with nor is anticipated to have consequences that will be significantly inconsistent with any

policy adopted by this local authority or any plan required by the Local Government Act 2002 or any other enactment.

Ngā Tāpiritanga | Attachments

A⇩. RAC Risk Deep Dive Failure of essential services Feb25 - full
B⇩. Failure of Essential Services_Infrastructure_Assets_Systems
C⇩. Ops Water Risk Register Full
D⇩. COAG-SOP-003 Coag Pump Dose Time and Checks
E⇩. GEN-ERP-002 Coagulation or Flocculation Failure

Ngā waitohu | Signatories

Author(s)	Fiona Vessey **Hautū Whakahaere | Group Manager Operations**	

Approved by	Manaia Te Wiata **Tumu Whakarae | Chief Executive Officer**	

Risk deep dive: Failure of essential services/infrastructure/assets/systems, initially focusing on water/wastewater

Description of risk (including cause of risk)

In the event of the failure of essential services, infrastructure, assets, or systems related to water and wastewater services there is a risk that public health and the environment will be compromised. The causes of failure could include:

- Environmental threats (e.g., natural disasters, climate change impacts).
- Technological failures (e.g., outdated SCADA systems, equipment failure).
- Regulatory non-compliance.
- Community-related challenges (e.g., growing demand, reputational risks).

This risk description is particularly broad and led to a white board exercise, to align the risk with our strategic pillars, vision, mission and values (see attachment B).

Risk Consequences

- Fatality or disease outbreaks (public health).
- Impacts on community health and safety (illness due to water contamination).
- Environmental degradation.
- Prosecution or financial implications due to non-compliance.
- Increased costs due to emergency repairs or operations.
- Disruptions to community functions (e.g., school closures, business downtime).
- Reputational damage leading to loss of public trust.
- Loss of productivity (e.g., staff unable to work due to system failures).

The white board exercise identified the key risk consequences as (see attachment B):

- Public Health
- Environmental
- Resourcing

Risk Assessment

This table summarizes the risks likelihood, its potential consequences, and potential impact rating as well as the current inherent and residual risk assessments.

	Likelihood	Consequence	Rating
Inherent	Almost Certain	Very High	Extreme
Residual	Possible	Very High	Very High

The current assessment is supported by staff. There has been significant discussion on the ability of essential water and wastewater services, achieving a residual risk rating below "High" given the critical nature of the service, aging condition of the assets, increased external factors including regulatory compliance, the impact of weather/natural events and the inherent risks involved.

Controls in place, and how they mitigate the risk

This table summarizes the risks controls in place, and how those controls help to mitigate the risk and the assessed level of effectiveness.

Control	How the control mitigates the risk (preventative or corrective)	Level of effectiveness
Performance monitoring	Tracks system health to identify and address failures early.	Partially 60%
Training, L&D Framework, induction processes	Ensures staff are skilled to manage and respond to failures effectively.	Partially 60%
Adequate funding and forward planning	Enables proactive investment in infrastructure maintenance and upgrades.	Partially 60%
Project and contract management	Ensures projects meet quality standards, reducing risk of failure.	Partially 60%
SOPs, policies, plans, strategies, processes	Standardizes response and operational actions, improving consistency.	Partially 60%
Internal and external audits (regulators)	Identifies compliance gaps and enforces corrective actions.	Partially 60%
Compliance monitoring, reporting, assessment	Tracks adherence to regulatory standards, reducing legal risks.	Partially 60%
External advisors (legal, technical, supply agreements)	Provides expertise to ensure system resilience and access to critical supplies.	Partially 60%
Maintenance and renewal programs	Prevents asset deterioration through regular upkeep and replacement.	Partially 60%
Identifying critical employees and coverage	Reduces operational downtime by ensuring essential roles are filled during emergencies.	Partially 60%
Technology (SCADA, telemetry, reporting)	Provides real-time system data to predict and prevent failures.	Partially 60%
Emergency response	Ensures rapid recovery and mitigation during incidents.	Partially 60%
Engineering design for resilience	Builds infrastructure to withstand environmental and technological challenges.	Partially 60%
Governance oversight (Risk and Assurance Committee, Council)	Monitors and guides risk management strategies at an organizational level.	Partially 60%
Business continuity and demand management	Ensures services continue despite interruptions and optimizes resource use during high demand.	Partially 60%

Level of effectiveness
The controls in the table have been summarised into groups. Currently, the assess control has been identified as Partially 60% for water and wastewater. While this is a subjective percentage the team generally agree with it given our Asset Management Plans, Insurances, Business Continuity Plans, Technical Specifications, Data Capture, Planning and Funding.

Currently, the three high level assess controls are, Ineffective, Partially 60% and Effective 99%. Controls for water are more advanced than wastewater. The team are in the process of doing a deep dive exercise to assess controls for water treatment (see attachment C, D and E). Deep dives for reticulation water/wastewater and wastewater treatment is yet to begin.

Future Controls and planned actions to mitigate the risk further
To reduce the level of risk we are constantly expanding and strengthening controls.

- Predictive maintenance programs
- Emergency response drills
- Upgrading Technology

Have any incidents occurred? If so what have we learnt from them? What measures have we taken to prevent this from happening again?
On average Council has three to five incidents per year that would constitute the failure of essential services/infrastructure/assets/systems for water and wastewater with no two incidents being the same. These incidents have been main breaks, treatment plant failures or unauthorised discharges. Each incident is investigated either internally or externally and the learnings shared with teams involved. Corrective actions are raised and actioned. The timeliness of this can be significantly delayed due to limitations in available resourcing and funding. While each incident is thoroughly investigated and corrective actions are identified, implementation often takes longer than ideal because councils must prioritize urgent responses, navigate budget constraints, and secure the necessary approvals for infrastructure upgrades or process improvements. As a result, while lessons are learned and improvements are made, progress on actions can be slow.

Emerging information (or other risks) that might impact this risk in the future

- Water Services Delivery Plans
- Council Controlled Organisation for Water and Wastewater
- New Economic Regulator

Are we prepared if the risk was to happen?
We are prepared to respond if and when this risk happen. We have a very experienced internal and external team that come together at all hours of the day and night to undertake emergency works. That being said every event is different and the team need to be agile to respond.

What level of assurance can the Risk & Assurance Committee have that the risk is effectively being managed at this time?
The Risk & Assurance Committee can have a moderate level of confidence that risk is being actively managed within current constraints. The Very High residual risk rating is a concern, and work on this continues to improve control effectiveness, and better understanding risk appetite to strengthen assurance levels.

There are multiple controls in place including Asset Management Plans, Insurances, Business Continuity Plans, Technical Specifications, Data Capture, Planning and Funding, incident review and lessons learnt which all contribute towards managing the risks.

Risk Appetite

Currently, the residual risk is Very High. There are actions and controls to be implemented that may reduce the residual risk to High. Given the critical nature of water and wastewater services, the aging condition of the assets, increased external factors including regulatory compliance, impact of weather/natural events and the inherent risks it may well be that a residual risk of High is can be achieved under the current framework.

Understanding risk appetite in terms of public health, environmental, regulatory and reputational consequences and our tolerances for them given our current controls helps us make informed decisions that balances the risk. At this stage there has been limited work in this space.

Failure of Essential Services/Infrastructure/Assets/Systems

Initially focusing on water/wastewater

Pillars	Vision, Mission and Values	Risks
• Our People Thrive • Work Smarter/Better • Future Ready • With our community	• Make and act as a community • Resilient & better together	1. Public Health 2. Environmental 3. Resourcing

1. Provision of Water Supply (WS) → Abstraction → Treatment → Retic → Store → Distribution to customers

2. Collection of Wastewater (WW) → Retic → WWPS → Treatment → Disposal

Water Supply System (WS)

2.1. Failure of raw water intake → No water → Public Health

2.2. Treatment failure → Public Health

2.3. Retic → No water / Reduced LOS → Public Health

2.4. Storage → Reservoir damage → Dams → No/low water supply → Public Health/Environmental

2.5. Distribution main failure → Localized outages → Public Health

Wastewater (WW)

1.1. Trunk/Bulk Main Failure

1.2. Failure of WWPS

1.3. Treatment Plant Failure

Process failure → Environmental Risk → Public Health

Asset failure → Environmental (overflow) → Public Health → Environmental

Mitigations

- Asset management / Knowledge

- Maintenance / Renewal

- Compliance Monitoring (DWS/RC)

- Proactive Risk Management & Business Continuity Planning

Item 4.10

Attachment C

Risk No.	#Risk Description	#Consequences	Inherent Risk Assessment			#Describe Individual Controls	•Select Control Type	•Assess Control	Residual Risk Assessment			Comments	Timing	Required Documentation	Applicable Sites
			•Likelihood	•Consequence	*Inh Rating				•Likelihood	•Consequence	*Res Rating				
1	**Weather Event - Change in Raw Water Quality** *Causes:* - Rain Events causing high RW turbidity and/or colour. - Quality changes causing coagulant dosing to not perform.	Non-compliance or plant shut-down resulting in loss of supply >1 day.	Almost Certain	Very High	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - RW monitoring of turbidity, pH and Conductivity with appropriate alarms - SCM for automatic dose control - Redundant plants within network Operational: - Refer to Risk 6 - Weather Monitoring - Plant weather preparation and response plans - Process visual inspections		Partially (60%)	Unlikely	High	**Moderate**	Tasks: - Log Weather and 3-day Forecast - Review Weather Trend - Prepare for event - Check weather station - Respond to Weather Event	 - Daily - Daily - As required - Weekly - As required	 - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP - Tasklist/Water Outlook - Response plan	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP, Te Poi WTP
2	**Polyelectrolyte - Floc Poly Dosing Failure** Flocculation polyelectrolyte dosing failure due to: - Pump wear - Pump failure - Dose line partial or full blockage - Dose line break or leak - Dose Tank empty (see Risk 17)	- High clarified water turbidity (if clarification used). - Excessive Filter backwashing. - Potential Filter Turbidity Breakthrough. - Plant shutdown. - Drop in production volumes due to excessive backwashing. - Sludge system overwhelmed. - Broken Cones (if clarification used). - Poly Dose Pump Damage - Environmental impact - Chemical exposure for leak	Almost Certain	Very High	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Clarified Water Turbidity (Settled) monitoring - Filter turbidity monitoring - Poly Dosing Flow-Meter with appropriate alarms. - Pump Fault Feedback - Redundant Pump with automatic fail-over - Redundant or spare dose line - Double contained dose lines with leak detection. - Weight scales on cones - Risk 17 Operational: - Poly dose line flushing - Compare actual flow to calculated flow - Inspection of sparge for flow issues - Inspect Pressure Relief discharge		Effective (99%)	Possible	Moderate	**Moderate**	Tasks: - Poly dose line flushing - Compare flow meter measurement to calculated flow - Do dose-time on pumps - Inspect Sparge for even flow - Inspect Pressure Relief Discharge point - Poly Failure Response Plan	 - Monthly - Daily - Weekly - Daily - Bi-Weekly - As required	 - SOP - Tasklist/Water Outlook - SOP - Tasklist/Water Outlook - Tasklist/Water Outlook - Response Plan	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP
3	**Clarification - Ratholing and Thick Sludge** *Causes:* - Flocculation polyelectrolyte dose rate not optimised leading to ratholing which in-turn causes ineffective sludge removal. May be a result of over or under poly dosing. - Slow build-up of sludge in cone over time. - Incorrect launder height setting causing uneven sludge blanket height and uneven sludge bleeding. - Old sludge undergoing anaerobic bacterial growth and becoming thicker. - Build up of polyelectrolyte in sludge blanket due to no bleeding.	- Excessive cone weight resulting in cone breaking. - Sludge build-up in clarifier becoming heavier and harder to bleed requiring eventual draindown and clean. - Low possibility of sludge blanket overflowing to filters (very niche and unlikely scenario)	Almost Certain	Moderate	High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Flow-paced poly dosing - Weight scale on cone - Automatic sludge bleeds from cone and base of clarifier Operational: - Inspection and lifting of cones - Jar Testing - Poly dose-rate Rules of thumb (in SOP) - Sludge Burns - Inspection of sludge blanket - Manual sludge bleeds - Changes in automatic bleed frequency		Effective (99%)	Unlikely	Low	**Low**	Tasks: - Inspection of cones and sludge blanket - Lifting of cones - Jar Testing - Log poly dose rate - Review trends - Sludge Burn (no equipment) - Review weight scale trends for flat-lines - Manual sludge bleeds - Review automatic sludge bleed length and freq	 - Daily - Weekly/As required - Weekly/As required - Daily - Weekly - Weekly - Daily - Weekly/As required - As Required	 - Tasklist/Water Outlook - SOP - SOP - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP - Tasklist/Water Outlook - SOP - SOP	Te Aroha WTP, Morrinsville WTP
4	**Clarification - Sludge Blanket Lifting/Billowing** *Causes:* - Plant start-up - Sudden increases in plant flow - Build up of too much sludge due to insufficient sludge bleeding as a consequence of high solids loading and/or ratholing (risk 3) and/or blocked sludge bleeds and/or insufficient bleed length/frequency. - Coagulation failure (see risk no. 6, 7) - Polyelectrolyte underdosing (see risk no. 3, 5)	- High clarified water turbidity - Excessive filter backwashing. - Potential filter turbidity breakthrough. - Plant shutdown. - Drop in production volumes due to excessive backwashing. - Sludge system overwhelmed. - Broken Cones	Likely	Very High	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Automated plant flow changes - Further detail in individual risks Operational: - Operate plant to waste on start-up for short period - Refer to Risk 3 for sludge build-up controls.		Effective (99%)	Unlikely	Very High	**High**	Tasks: - Manual flow change - Coag Failure Response Plan	 - As required - As required	 - SOP - Response Plan	Te Aroha WTP, Morrinsville WTP
5	**Polyelectrolyte - Make-up Issues** *Causes:* - Mixer failed - Wetting cone blocked or partially blocked - Poly Makeup strength too high or low as a result of screwfeeder blockages, hopper ratholing and/or screwfeeder set incorrectly. - Over or under mixing of polyelectrolyte - No polyelectrolyte powder in hopper - Insufficient carrywater pressure for venturi/bowl water - Venturi blocked - Polyelectrolyte old	Polyelectrolyte concentration too high or low causing: - Clarifier sludge blanket lifting if using clarification (see Risk 4) - Clarifier ratholing and thick sludge if using clarification (see Risk 3) - Sludge dewatering ineffective resulting in environmental impact (see Risk 44) - Polyelectrolyte spill - chemical exposure, slip hazard, environmental hazard	Likely	Very High	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Further detail in individual risks 3, 4 - Fault alarms - Poly make-up tank level monitoring - Automated make-up sequence - Sight glasses on hopper - Bund/spill tray - Pressure switch/booster pump on carry water Operational: - Refer to Risk 3, 4 tasks. - Hopper inspection and top-up - Visual inspection of make-up - Poly Burn (no equipment available)		Effective (99%)	Unlikely	Very High	**High**	Tasks: - Hopper inspection for level - Hopper top-up - Visual inspection of make-up sequence - Inspection and Cleaning of Wetting Cone - Verify hopper level is decreasing	 - Daily - As required - Weekly - Weekly - Weekly	 - SOP - SOP - SOP - SOP - SOP	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP
6	**Coagulation - Incorrect Coag Doserate (Over/Under/No)/ Failure to Coagulate** *Causes:* - Set incorrectly based on error in jar testing - Water quality changes due to changes in water source changing the required dose-rate - Weather events (see Risk 1). - Insufficient alkalinity (see Risk 8) - Incorrect coag pH (see Risk 8) - Coag dosing failure (see Risk 7) - Carry water failure (see Risk 7) - SCM fault (see Risk 26)	- Clarifier sludge blanket lifting if using clarification (see Risk 4) - High clarified water turbidity (if clarification used) - Filter turbidity breakthrough. - Excessive filter backwashing - Plant shutdown - Drop in production volumes due to excessive backwashing. - High aluminium residual in treated water - Non compliant water produced creating public health risk - UV turbidity/UVT out of limits making UV disinfection ineffective resulting in non-compliant water being produced and public health risk.	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - See Risk 1 Controls - See Risk 7 Controls - See Risk 8 Controls - Flow-paced control - SCM for automatic control - Pre-pH/Alkalinity dosing system Operational: - See Risk 1 Controls - See Risk 7 Controls - See Risk 8 Controls - Jar testing - Process monitoring		Effective (99%)	Rare	Very High	**Moderate**	Tasks: - Jar Testing and adjusting alum dose - Visual inspection of coagulated water, flocculated water, clarifier, filter - Alkalinity Test - Check trends: Clarified turb, Filter turb, SCM, Coag pH, RW pH, RW Turb, RW Cond, Alum dose-rate.	 - Weekly/As Required - Daily - Daily - Daily	 - SOP - Tasklist/Water Outlook - SOP - Tasklist/Water Outlook	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP, Te Poi WTP

Risk No.	#Risk Description	#Consequences	Inherent Risk Assessment			#Describe Individual Controls	•Select Control Type	•Assess Control	Residual Risk Assessment			Comments	Timing	Required Documentation	Applicable Sites
			•Likelihood	•Consequence	*Inh Rating				•Likelihood	•Consequence	*Res Rating				
7	**Coagulation - Coag Dosing System Failure** *Causes:* - Pump wear - Pump failure - Dose line partial or full blockage - Dose line break or leak - Carry Water or Flushing Failure - Dose Tank Empty (see risk 17)	- Incorrect Coag Doserate (under). See Risk 6. - Coag Dose Pump Damage - Environmental impact - Chemical exposure for leak - Insufficient flash mixing resulting in poor coagulation (See Risk 6)	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Clarified Water Turbidity (Settled) monitoring if clarification used - Filter turbidity monitoring CCP plant trips - Coag Dosing Flow-Meter with appropriate alarms. - Pump Fault Feedback - Redundant Pump with automatic fail-over - Redundant or spare dose line - Double contained dose lines with leak detection. - See Risk 1, 6, 17 Operational: - Compare actual flow to calculated flow - Inspect Pressure Relief discharge - See Risk 17		Effective (99%)	Rare	Very High	**Moderate**	Tasks: - Compare flow meter measurement to calculated flow - Do dose-time on pumps - Inspect Pressure Relief Discharge point	- Daily - Weekly - Bi-Weekly	- Tasklist/Water Outlook - SOP - Tasklist/Water Outlook	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP, Te Poi WTP
8	**Raw Water pH & Alkalinity Dosing - Over/Under/None** *Causes:* - Raw Water Quality Changes - Seasonal - Weather events (see Risk 1) - Dosing chemical concentration high or low (see Risk x,x) causing pump to hit maximum or minimum speed or PID control to over or undershoot. - Instrument drift (see Risk 25,26) with PID control - Incorrect dose setpoint by operator - RW pH/Alkalinity dosing system failure (see Risk 9)	- Insufficient alkalinity or high/low coag pH resulting in coag dosing issue. See Risk 6 - Ineffective organics removals if pH too high - Risk of overdosing on post-pH correction causing non-compliant water.	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - See Risk 1 Controls - See Risk 6 Controls - PID control on Pre and Post pH correction with trip conditions - Coag pH Monitoring and alarms Operational: - See Risk 1 Controls - See Risk 6 Controls - Alkalinity Testing - Handheld testing to verify pH meter		Effective (99%)	Rare	High	**Low**	Tasks: - Alkalinity Test - Log Coag pH/Check trends - Handheld testing	- Daily - Daily - Daily	- SOP - Tasklist/Water Outlook - SOP	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP
9	**Raw Water pH/Alkalinity - Dosing System Failure** *Causes:* - Pump wear - Pump failure - Dose line partial or full blockage - Dose line break or leak - Carry Water or Flushing Failure - Dose Tank Empty (see Risk 17)	- RW pH/Alkalinity Underdosing See Risk 8. - Dose Pump Damage - Environmental impact - Chemical exposure for leak - Insufficient Mixing	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - See Risk 8 - Pump Fault Feedback - Redundant Pump with automatic fail-over - Redundant or spare dose line - Double contained dose lines with leak detection. - Flow switch on carry water line - Automatic flush of dose line - See Risk 17 Operational: - Compare actual flow to calculated flow - Inspect Pressure Relief discharge - Flush dose-line - See Risk 17		Effective (99%)	Rare	High	**Low**	Tasks: - Compare flow meter measurement to calculated flow - Do dose-time on pumps - Inspect Pressure Relief Discharge point - Flush dose line	- Daily - Weekly - Bi-Weekly - As required	- Tasklist/Water Outlook - SOP - Tasklist/Water Outlook - SOP	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP
10	**Post pH Dosing - Over/Under/None** *Causes:* - Dosing chemical concentration high or low (see Risk 14, 15, 16) causing pump to hit maximum or minimum speed or PID control to over or undershoot. - Instrument drift (see Risk 30, 31) with PID control - Incorrect dose setpoint by operator - Post pH dosing system failure (see Risk 11) - Overdosing on pre and intermediate pH correction	- High pH resulting in ineffective chlorine disinfection (non-compliant water produced) - Low pH resulting in corrosive water produced affecting network pipework.	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - PID control on Pre and Post pH correction with CCP trip - Post dosing pH monitoring and Final water pH monitoring - Flow meter HiHi alarm Operational: - Handheld testing to verify pH		Effective (99%)	Rare	High	**Low**	Tasks: - Log Post contact and final water pH/Check trends - Handheld testing	- Daily - Daily	- Tasklist/Water Outlook - SOP	All
11	**Post pH - Dosing System Failure** *Causes:* - Pump wear - Pump failure - Dose line partial or full blockage - Dose line break or leak - Carry Water or Flushing Failure - Dose Tank Empty (see Risk 17)	- Post pH Dosing (under). See Risk 10. - Dose Pump Damage - Environmental impact - Chemical exposure for leak - Insufficient Mixing	Almost Certain	Moderate	High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - See Risk 10, 17 - Pump Fault Feedback - Redundant Pump with automatic fail-over - Redundant or spare dose line - Double contained dose lines with leak detection. - Flow switch on carry water line - Automatic flush of dose line Operational: - Compare actual flow to calculated flow - Inspect Pressure Relief discharge - Flush dose-line - See Risk 17		Effective (99%)	Rare	Low	**Low**	Tasks: - Compare flow meter measurement to calculated flow - Do dose-time on pumps - Inspect Pressure Relief Discharge point - Flush dose line	- Daily - Weekly - Bi-Weekly - As required	- Tasklist/Water Outlook - SOP - Tasklist/Water Outlook - SOP	All
12	**Intermediate pH Dosing - Over/Under/none** *Causes:* - Dosing chemical concentration high or low (see Risk 15) causing pump to hit maximum or minimum speed or PID control to over or undershoot. - Instrument drift (see Risk 14) with PID control - Incorrect dose setpoint by operator - Intermediate pH dosing system failure (see Risk 13) - Overdosing on pre-pH correction	- High manganese causing coating of instruments - High manganese causing dirty water events in network resulting in complaints from public.	Almost Certain	High	Very High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - PID control on Intermediate and Post pH correction - Intermediate, Post and Final water pH monitoring Operational: - Handheld testing to verify pH		Effective (99%)	Rare	High	**Low**	Tasks: - Log Intermidate/Clarified pH/Check trends - Handheld testing	- Daily - Daily	- Tasklist/Water Outlook - SOP	Morrinsville WTP
13	**Intermediate pH Dosing - Dosing System Failure** *Causes:* - Pump wear - Pump failure - Dose line partial or full blockage - Dose line break or leak - Carry Water or Flushing Failure	- Intermediate pH Underdosing See Risk 12. - Dose Pump Damage - Environmental impact - Chemical exposure for leak - Insufficient Mixing	Almost Certain	High	Very High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - See Risk 12, 17 - Pump Fault Feedback - Redundant Pump with automatic fail-over - Redundant or spare dose line - Double contained dose lines with leak detection. - Flow switch on carry water line - Automatic flush of dose line Operational: - Compare actual flow to calculated flow - Inspect Pressure Relief discharge - Flush dose-line - See Risk 17		Effective (99%)	Rare	High	**Low**	Tasks: - Compare flow meter measurement to calculated flow - Do dose-time on pumps - Inspect Pressure Relief Discharge point - Flush dose line	- Daily - Weekly - Bi-Weekly - As required	- Tasklist/Water Outlook - SOP - Tasklist/Water Outlook - SOP	Morrinsville WTP

Risk No.	#Risk Description	#Consequences	Inherent Risk Assessment •Likelihood	Inherent Risk Assessment •Consequence	Inherent Risk Assessment *Inh Rating	#Describe Individual Controls	•Select Control Type	•Assess Control	Residual Risk Assessment •Likelihood	Residual Risk Assessment •Consequence	Residual Risk Assessment *Res Rating	Comments	Timing	Required Documentation	Applicable Sites
14	**Caustic Soda - Variability in Concentration** *Causes:* - Caustic Soda Delivery Strength high or low due to manufacturing issues (insufficient mixing and stratification) - Incorrect strength delivered (e.g. 50% instead of 30%).	- Raw Water pH & Alkalinity Over/Under/No Dosing (see Risk 8) - Intermediate pH dosing Over/Under/No Dosing (see Risk 12) - Post pH Over/Under/No Dosing (see Risk 10) - Low flow-rates causing build-up of crystals in line (high conc) - Higher electricity costs associated with pumping. - High flow-rates causing higher electricity costs	Rare	Extreme	High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - PID control on Pre and Post pH correction - Flow monitoring Operational: - Check delivery docket - Hydrometer test		Effective (99%)	Rare	High	**Low**	Tasks: - Check delivery docket - Hydrometer test to confirm concentration	 - As Required - As Required	 - SOP - SOP	Morrinsville WTP, Tills Rd WTP, Hinuera WTP, Tahuna WTP, Burwood Rd WTP, Tawari Rd WTP
15	**Lime - Variability in Concentration** *Causes:* - Incorrect amount of water and powder added during manual top-up - forgetting bags, extra bags or incorrect water volume added (forgot or mistake) - Build-up on tank walls reducing tank volume, but calculation not adjusted. - Lime powder provided weaker than expected - Mixer failure/settling	- Raw Water pH & Alkalinity Over/Under/No Dosing (see Risk 8) - Intermediate pH Over/Under/No Dosing (see Risk 12) - Post pH Over/Under/No Dosing (see Risk 10) - Low flow-rates causing build-up of lime in line (high concentration) requiring premature replacement - Higher electricity costs associated with pumping. - High flow-rates causing higher electricity costs - Pump not meeting demand at maximum speed - Pump overdosing at minimum speed - Additional Pump Wear - Ineffective PID control causing over or under shooting - Tank drained quickly and more frequent top-ups required	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - PID control on Pre and Post pH correction (CCP shut-down) - Flow monitoring - Automated flushing sequences Operational: - Check delivery docket - Lime burn (w/w% test) - Top-up procedures - Manual flushing - Lime tank cleaning (maintenance activity)		Effective (99%)	Rare	High	**Low**	Tasks: - Check level and top-up Lime Tank - Lime burn - Manual Flushing	- Daily - As required - Weekly	- SOP - SOP - SOP	Te Aroha WTP, Tills Rd WTP
16	**Soda Ash - Variability in Concentration** *Causes:* - Incorrect amount of water and powder added during manual top-up - forgetting bags, extra bags or incorrect water volume added (forgot or mistake) - Soda Ash powder provided weaker than expected - Mixer failure/settling	- Post pH Over/Under/No Dosing (see Risk 10) - Low flow-rates causing build-up of crystals in line (high conc) - Higher electricity costs associated with pumping. - High flow-rates causing higher electricity costs	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - PID control on Pre and Post pH correction (CCP trip) - Flow monitoring Operational: - Check delivery docket - Top up procedures - Manual doserate intervention		Effective (99%)	Rare	High	**Low**	Tasks: - Check delivery docket - Check level and top-up tank	- As Required - As Required	- SOP - SOP	Te Poi WTP
17	**Dose Tank, Drum or Hopper Empty** *Causes:* - Chemical not ordered - Delays in delivery of chemical from supplier - Transfer of chemical from bulk tank faulted - Manual top up sequence not done - Leak/loss of containment - Low concentration resulting in high consumption (see Risk 15)	- Polyelectrolyte Dosing Failure (see Risk 2) - Coag dosing failure (see Risk 7) - RW pH and Alkalinity dosing failure (see Risk 9) - Intermediate pH Dosing Failure (see Risk 13) - Post pH Dosing Failure (see Risk 11) - Pre/Post Chlorine Gas Dosing Failure (see Risk 21, 22) - Pre/Post Hypo Dosing Failure (see Risk 23, 24) - Carbon Dosing Failure (see Risk 19)	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Tank Level Monitoring and alarms - Various trips on CCPs Operational: - Check tank/drum/hopper levels - Manual top-up procedure - Stocktake		Effective (99%)	Rare	High	**Low**	Tasks: - Log tank/hopper/drum levels/weight and reorder - Log tank levels and manual top-up procedure - Stocktake	- Weekly - Daily - Weekly	- Tasklist/Water Outlook - SOP - Tasklist/Water Outlook	All
18	**Sodium Hypochlorite - Variability in Concentration** *Causes:* - Decay with age - Decay due to heat - Hypo delivered old or decayed - Incorrect amount of water and chemical added during manual top-up - forgetting to add hypo, too much hypo, incorrect water volume added (forgot, mistake or incorrect calculation) - Insufficient mixing (stratification) - Chemical reaction with make-up water	- High Chlorates causing health risk/non-compliance - Low chlorine residual in treated water resulting in non compliant water being produced or insufficient residual for network causing health risk - Overdosing of chlorine exceeding MAV for chlorine or generating DBPs - Ineffective PID control causing over or under shooting	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Tank Level Monitoring and alarms - Use a more stable low concentration of hypo - Size tanks to ensure turnover of chemical - Storage in cool environment - FAC monitoring with CCP shutdowns - Softener on Make-up water Operational: - Check tank levels - Manual top-up procedure - Stocktake - check manufacturing dates - Chlorate testing (lab)		Partially (60%)	Possible	Moderate	**Moderate**	Tasks: - Log tank levels and manual top-up procedure - Check manufacturing dates on delivery and when used	- Daily - As required	- SOP - SOP	Te Poi WTP, Hinuera WTP, Tahuna WTP
19	**Carbon Dosing Failure** *Causes:* - Screwfeeder blocked - Hopper ratholing - Screwfeeder speed cannot be changed - Hopper empty (see Risk 17) - Dose line blocked - Carrywater and bowl water low pressure - Venturi blocked - Wetting cone build-up/blockage	- Public complaints due to odour (see Risk 20) - Environmental impact due to spill - Damage to screwfeeder	Almost Certain	High	Very High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Booster pump - Pressure switch - Low flow switch Operational: - See Risk 20 - Inspection of carbon dose point - Inspection of wetting cone for build-up		Partially (60%)	Unlikely	Moderate	**Moderate**	Tasks: - Check Hopper Level and add carbon bags - Inspect and clean wetting cone - Inspect Dose point for flow	- Daily - Weekly - Daily	- SOP - SOP - Tasklist/Water Outlook	Morrinsville WTP
20	**Odour** Causes: - Geosmin or other odour causing organisms in Raw Water - Carbon under or no dosing	Complaints from public.	Almost Certain	High	Very High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Carbon Dosing System Operational: - Odour and lab tests - Odour tests not currently being done.		Partially (60%)	Unlikely	Moderate	**Moderate**	Tasks: - Odour test - Enable Carbon Dosing - Increase carbon doserate	- Weekly - As required - As required	- SOP - SOP - SOP	Morrinsville WTP
21	**Pre-Chlorine Dosing (Gas) - Over/Under/None** *Causes:* - Instrument drift (see Risk 29) with PID control - Incorrect dose setpoint by operator - Service Water Pressure low - Venturi/eductor blockage/grit - Chlorine regulator failure - Drums empty (see Risk 17) - Drum valve not opened after changeover or maintenance - Grit or corrosion in chlorinator needle valve (sticky) - Gas leak triggering auto drum shut-off - Leak on gas line (sucking air) - Chlorine demand higher than maximum dose rate of chlorinators - Manual valves closed	- Poor iron and manganese removal leading to complaints due to dirty water. - Low final chlorine if ammonia causing high chlorine demand resulting in compliance issues or plant shut-down. - High final chlorine if overdosing of chlorine occurs exceeding MAV and DBPs (non-compliant health risk) - Reaction with organics creating DBPs (potential non-compliant health risk) - Odour complaints related to high chlorine residual - Chemical exposure for leak (see Risk 51) - Insufficient Mixing	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Post-Filtration and Post Clear-Water Chlorine Monitoring with CCP trips - Strainer on Chlorine carry water before eductor - Redundant Chlorine drums/bottles - Redundant Chlorinators - Redundant eductors - Flow-Paced dosing and PID feedback - Redundant Service water pumps - Tanker connection if reservoir empty - Back-up Hypo dosing system Operational: - Regular checks of chlorine dose rate and post-filtration FAC - Regular working of chlorinator valves - Cleaning carrywater strainers (is this ops or maintenance). - Vacuum down on bottle changeover indicates leaks.		Effective (99%)	Rare	High	**Low**	Tasks: - Log Pre-Chlorine Dose Rate - Adjust Pre-Chlorine Dose Rate - Log Post Filtration Chlorine Residual - Manually work chlorinator valve - Check for leaks during changeover - Log drum weights and order if required - Set up Auxilary Hypo Dosing System	- Daily - As required - Daily - Monthly - As required - Daily - As required	- Tasklist/Water Outlook - SOP/Spreadsheet Calculation - Tasklist/Water Outlook - SOP - Include in changeover SOP - Tasklist/Water Outlook - SOP	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP, Burwood Rd WTP, Tawari Rd WTP

Risk No.	#Risk Description	#Consequences	Inherent Risk Assessment			#Describe Individual Controls	•Select Control Type	•Assess Control	Residual Risk Assessment			Comments	Timing	Required Documentation	Applicable Sites
			•Likelihood	•Consequence	*Inh Rating				•Likelihood	•Consequence	*Res Rating				
22	**Post-Chlorine Dosing (Gas) - Over/Under/None** *Causes:* - Instrument drift (see Risk 30, 31) with PID control - Incorrect dose setpoint by operator - Service Water Pressure low - Venturi/eductor blockage/grit - Chlorine regulator failure - Drums empty (see Risk 17) - Drum valve not opened after changeover or maintenance - Grit or corrosion in chlorinator needle valve (sticky) - Gas leak triggering auto drum shut-off - Leak on gas line (sucking air) - High Pre-Chlorine Dosing (see Risk 21, 23) - Chlorine dosing while plant off	- Low final chlorine resulting in public health risk and non-compliance - High final chlorine if overdosing of chlorine occurs exceeding MAV and DBPs (non-compliant health risk) - Reaction with organics creating DBPs (potential non-compliant health risk) - Odour complaints related to high chlorine residual	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Post-Reservoir and Post Clear-Water Chlorine Monitoring with CCP trips - Strainer on Chlorine carry water before eductor - Redundant Chlorine drums/bottles - Redundant Chlorinators - Redundant eductors - Flow-Paced dosing and PID feedback - Redundant Service water pumps - Tanker connection if reservoir empty Operational: - Regular checks of chlorine dose rate and post-Clear-water/Reservoir FAC - Regular working of chlorinator valves - Cleaning carrywater strainers (is this ops or maintenance). - Vacuum down on bottle changeover indicates leaks.		Effective (99%)	Rare	High	Low	Tasks: - Log Post-Chlorine Dose Rate - Log Post Clear Water Chlorine - Log Treated Water Chlorine - Manually work chlorinator valve - Check for leaks during changeover - Low Chlorine Response Plan	 - Daily - Daily - Daily - Monthly - As required - As required	 - Tasklist/Water Outlook - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP - SOP - Response Plan	 Te Aroha WTP, Morrinsville WTP, Tills Rd WTP, Burwood Rd WTP, Tawari Rd WTP
23	**Pre-Chlorine Dosing (Hypo) - Over/Under/None** *Causes:* - Instrument drift (see Risk 29) with PID control - Incorrect dose setpoint by operator - Dosing chemical concentration high or low (see Risk 18) causing pump to hit maximum or minimum speed or PID control to over or undershoot. - Pump wear - Pump failure - Dose line partial or full blockage - Dose line break or leak - Dose Tank Empty (see Risk 17) - Chlorine dosing while plant off	- Poor iron and manganese removal leading to complaints due to dirty water. - Low final chlorine if ammonia causing high chlorine demand resulting in compliance issues or plant shut-down. - High final chlorine if overdosing of chlorine occurs exceeding MAV and DBPs (non-compliant health risk) - Reaction with organics creating DBPs (potential non-compliant health risk) - Odour complaints related to high chlorine residual - High chlorates causing health risk and non-compliance	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Post-Filtration and Post Clear-Water Chlorine Monitoring and CCP trips - Pre and Post Dose pumps (some redundancy) - See Risk 17, 18 - Pump Fault Feedback - Double contained dose lines with leak detection Operational: - Regular checks of chlorine dose rate and post-filtration FAC - Compare actual flow to calculated flow - Inspect Pressure Relief discharge - See Risk 17, 18		Effective (99%)	Rare	High	Low	Tasks: - Log Pre-Chlorine Dose Rate (gas + Hypo) - Adjust Pre-Chlorine Dose Rate - Log Post Filtration Chlorine Residual - Compare flow meter measurement to calculated flow - Do dose-time on pumps - Inspect Pressure Relief Discharge point	 - Daily - As required - Daily - Daily - Weekly - Bi-Weekly	 - Tasklist/Water Outlook - SOP/Spreadsheet Calc - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP - Tasklist/Water Outlook	 Morrinsville WTP
24	**Post-Chlorine Dosing (Hypo) - Over/Under/None** *Causes:* - Instrument drift (see Risk 30, 31) with PID control - Incorrect dose setpoint by operator - Dosing chemical concentration high or low (see Risk 18) causing pump to hit maximum or minimum speed or PID control to over or undershoot. - Pump wear - Pump failure - Dose line partial or full blockage - Dose line break or leak - Dose Tank Empty (see Risk 17) - Chlorine dosing while plant off- High Pre-Chlorine Dosing (see Risk 21, 23) - Chlorine dosing while plant off	- Low final chlorine resulting in public health risk and non-compliance - High final chlorine if overdosing of chlorine occurs exceeding MAV and DBPs (non-compliant health risk) - Reaction with organics creating DBPs (potential non-compliant health risk) - Odour complaints related to high chlorine residual - High chlorates causing health risk and non-compliance	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Post-Reservoir and Post Clear-Water Chlorine Monitoring - Redundant Dose Pumps - See Risk 17, 18 - Pump Fault Feedback - Double contained dose lines with leak detection - Flow-Paced dosing and PID feedback Operational: - Regular checks of chlorine dose rate and post-Clear-water/Reservoir FAC - Compare actual flow to calculated flow - Inspect Pressure Relief discharge - See Risk 17, 18		Effective (99%)	Rare	High	Low	Tasks: - Log Post-Chlorine Dose Rate - Log Post Clear Water Chlorine - Log Treated Water Chlorine - Compare flow meter measurement to calculated flow - Do dose-time on pumps - Inspect Pressure Relief Discharge point - Low Chlorine Response Plan	 - Daily - Daily - Daily - Daily - Weekly - Bi-Weekly - As required	 - Tasklist/Water Outlook - Tasklist/Water Outlook - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP - Tasklist/Water Outlook - Response Plan	 Morrinsville WTP, Te Poi WTP, Hinuera WTP, Tahuna WTP
25	**Raw Water Monitoring - Analyser Failure** *Causes:* - Instrument drift - Dirty sensor - Calibration missed - Calibration wrong - Old sensor - Left in calibration mode - No flow to instrument - Component failure	- Loss of data leading to Non Compliance - Handheld required for compliance - Loss of data leading to process control failure. E.g. Raw Water quality change not detected and system/operators fail to respond to event. Flow-on effects throughout plant include coagulation, clarification, filtration failures.	Almost Certain	High	Very High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Fault Feedback - Calibration automatic timeout - Low Flow Switch with alarm Operational: - Verification - Calibration - Cleaning - Sample line flushing - Handhelds - Servicing/annual calibration (maintenance)		Effective (99%)	Unlikely	High	Moderate	Tasks: - Log RW pH, Turb, Cond - Review daily/weekly water quality trends - Handheld Verification - Inst Verification against standard - Calibration - Sample Cell or Probe Cleaning - Sample Line Flush	 - Daily - Daily - Daily - Weekly - As Required - Weekly - Weekly	 - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP - SOP & Calibration Log - SOP & Calibration Log - SOP - SOP	 All
26	**Coag pH, SCM Monitoring - Analyser Failure** *Causes:* - Instrument drift - Dirty sensor - Calibration missed - Calibration wrong - Old sensor - Left in calibration mode - No flow to instrument - Component failure	- Poor coagulation performance - High clarified water turbidity - Excessive Filter backwashing - Filter Turbidity Breakthrough - Plant shutdown	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Fault Feedback - Calibration automatic timeout - Low Flow Switch with alarm - CCP alarms (some sites trips) Operational: - Verification - Calibration - Cleaning - Sample line flushing - Handhelds - Servicing/annual calibration (maintenance)		Effective (99%)	Unlikely	High	Moderate	Tasks: - Log Coag pH, Streaming Current - Review daily/weekly water quality trends - Handheld Verification - Inst Verification against standard - Calibration - Sample Cell or Probe Cleaning - Sample Line Flush	 - Daily - Daily - Daily - Weekly - As Required - Weekly - Weekly	 - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP - SOP & Calibration Log - SOP & Calibration Log - SOP - SOP	 Te Aroha WTP, Morrinsville WTP, Tills Rd WTP, Te Poi WTP
27	**Clarified Turb, pH Monitoring - Analyser Failure** *Causes:* - Instrument drift - Dirty sensor - Calibration missed - Calibration wrong - Old sensor - Left in calibration mode - No flow to instrument - Component failure	- Loss of data leading to process control failure. E.g. Clarified Water quality change not detected and system/operators fail to respond to event. Flow-on effects to filtration performance - Intermediate pH Dosing Over/Under/None (see Risk 12)	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Fault Feedback - Calibration alarm (when in cal and when cal time exceeded) - Low Flow Switch with alarm - Post-Filtration pH monitoring and CCP trips Operational: - Verification - Calibration - Cleaning - Sample line flushing - Handhelds - Servicing/annual calibration (maintenance)		Effective (99%)	Unlikely	High	Moderate	Tasks: - Log Clarified pH, Turb - Review daily/weekly water quality trends - Handheld Verification - Inst Verification against standard - Calibration - Sample Cell or Probe Cleaning - Sample Line Flush	 - Daily - Daily - Daily - Weekly - As Required - Weekly - Weekly	 - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP - SOP & Calibration Log - SOP & Calibration Log - SOP - SOP	 Te Aroha WTP, Morrinsville WTP, Tills Rd WTP

Risk No.	#Risk Description	#Consequences	Inherent Risk Assessment •Likelihood	Inherent Risk Assessment •Consequence	Inherent Risk Assessment *Inh Rating	#Describe Individual Controls	•Select Control Type	•Assess Control	Residual Risk Assessment •Likelihood	Residual Risk Assessment •Consequence	Residual Risk Assessment *Res Rating	Comments	Timing	Required Documentation	Applicable Sites
28	**Filtered Water Turb Monitoring - Analyser Failure** *Causes:* - Instrument drift - Dirty sensor - Calibration missed - Calibration wrong - Old sensor - Left in calibration mode - No flow to instrument - Component failure	- Loss of data leading to non compliance - Handheld required for compliance - Filters shutdown or plant shutdown affecting production - Loss of data during event resulting in high turbidity water not being detected causing public health risk.	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Fault Feedback - Calibration alarm (when in cal and when cal time exceeded) - Low Flow Switch with alarm - Multiple filters with individual turbidity meters Operational: - Verification - Calibration - Cleaning - Sample line flushing - Handhelds - Servicing/annual calibration (maintenance)		Effective (99%)	Unlikely	Low	**Low**	Tasks: - Log Filter Turbidities - Review daily/weekly water quality trends - Handheld Verification - Inst Verification against standard - Calibration - Sample Cell or Probe Cleaning - Sample Line Flush	 - Daily - Daily - Daily - Weekly - As Required - Weekly - Monthly	 - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP - SOP & Calibration Log - SOP & Calibration Log - SOP - SOP	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP, Te Poi WTP
29	**Post-Filtration FAC, pH Monitoring - Analyser Failure** *Causes:* - Instrument drift - Dirty sensor - Calibration missed - Calibration wrong - Old sensor - Left in calibration mode - No flow to instrument - Component failure	- Loss of performance data - Potential over/underdosing of pre-chlorine (see Risk 21, 23)	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Fault Feedback - Calibration alarm (when in cal and when cal time exceeded) - Low Flow Switch with alarm - Dosed and Final Water FAC, pH monitoring with CCP trips Operational: - Verification - Calibration - Cleaning - Sample line flushing - Handhelds - Servicing/annual calibration (maintenance)		Effective (99%)	Unlikely	High	**Moderate**	Tasks: - Log Filter FAC, pH - Review daily/weekly water quality trends - Handheld Verification - Inst Verification against standard - Calibration - Sample Cell or Probe Cleaning - Sample Line Flush	 - Daily - Daily - Daily - Weekly - As Required - Weekly - As Required	 - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP - SOP & Calibration Log - SOP & Calibration Log - SOP - SOP	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP
30	**Dosed Filtered FAC, pH Monitoring - Analyser Failure** *Causes:* - Instrument drift - Dirty sensor - Calibration missed - Calibration wrong - Old sensor - Left in calibration mode - No flow to instrument - Component failure	- Loss of performance data - Potential over/underdosing of Post-chlorine (see Risk 22, 24) - Loss of monitoring leading to no detection of an event over or under compliance limits resulting in reservoir/treated water tank being filled with non-compliant water. High potential for causing public health risk as response time for a final water non-compliance is very low and is likely to include a public health risk, boil-water notice or loss of supply from the affected treatment plant - Cost of draining off-spec water from Reservoir/Treated Water Tank.	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Fault Feedback - Calibration alarm (when in cal and when cal time exceeded) - Low Flow Switch with alarm - Final water FAC, pH Monitoring Operational: - Verification - Calibration - Cleaning - Sample line flushing - Handhelds - Servicing/annual calibration (maintenance)		Effective (99%)	Unlikely	Very High	**High**	Tasks: - Log Dosed Filtered FAC, pH - Review daily/weekly water quality trends - Handheld Verification - Inst Verification against standard - Calibration - Sample Cell or Probe Cleaning - Sample Line Flush	 - Daily - Daily - Daily - Weekly - As Required - Weekly - As Required	 - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP - SOP & Calibration Log - SOP & Calibration Log - SOP - SOP	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP
31	**Final Water Turb, FAC, pH - Analyser Failure** *Causes:* - Instrument drift - Dirty sensor - Calibration missed - Calibration wrong - Old sensor - Left in calibration mode - No flow to instrument - Component failure	- Loss of compliance data leading to non-compliance - Loss of monitoring leading to no detection of an event over or under compliance limits resulting in a public health risk, boil-water notice or loss of supply (if tank/res isolated) - Potential over/underdosing of Post-chlorine (see Risk 22, 24)	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Fault Feedback - Calibration alarm (when in cal and when cal time exceeded) - Low Flow Switch with alarm - Dosed Filtered FAC Operational: - Verification - Calibration - Cleaning - Sample line flushing - Handhelds - Servicing/annual calibration (maintenance)		Partially (60%)	Unlikely	Extreme	**Very High**	Tasks: - Log Final Water FAC, pH, Turb - Review daily/weekly water quality trends - Handheld Verification - Inst Verification against standard - Calibration - Sample Cell or Probe Cleaning - Sample Line Flush	 - Daily - Daily - Daily - Weekly - As Required - Weekly - As Required	 - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP - SOP & Calibration Log - SOP & Calibration Log - SOP - SOP	All
32	**UV Turb, Transmittance, Intensity - Analyser Failure** *Causes:* - Instrument drift - Dirty sensor - Calibration missed - Calibration wrong - Old sensor - Left in calibration mode - No flow to instrument - Component failure	- Loss of compliance data leading to non-compliance - Loss of monitoring leading to no detection of an event over or under compliance limits resulting in a public health risk, boil-water notice or loss of supply (if shutdown)	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Fault Feedback - Calibration timeout - Low Flow Switch with alarm - CCP trip conditions Operational: - Verification - Calibration - Cleaning - Sample line flushing - Handhelds		Effective (99%)	Unlikely	High	**Moderate**	Tasks: - Log UV Turb, UVT, UVI - Review daily/weekly water quality trends - Handheld Verification - Inst Verification against standard - Calibration - Sample Cell or Probe Cleaning - Sample Line Flush	 - Daily - Daily - Daily - Weekly - As Required - Weekly - As Required	 - Tasklist/Water Outlook - Tasklist/Water Outlook - Tasklist/Water Outlook - SOP & Calibration Log - SOP & Calibration Log - SOP - SOP	Tills Rd WTP, Te Poi WTP, Hinuera WTP, Tahuna WTP, Burwood Rd WTP, Tawari Rd WTP
33	**Loss of Data for Compliance Instruments** *Causes:* - Calibration mode holding values while water passing through CCP - Instrument Failure - Calibration missed	- Loss of compliance due to no data - Loss of monitoring leading to no detection of an event over or under compliance limits resulting in a public health risk, boil-water notice or loss of supply (if shutdown)	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Automatic calibration timeout Operational: - Awareness of CCPs - Procedures for putting equipment out of service or shutting plant down before calibration or for hand held measurements during a calibration at DWQAR prescribed frequency		Effective (99%)	Unlikely	Extreme	**Very High**	Tasks: - Put equipment out of service before cal - Take handhelds during calibration - Compliance Analyser Data Gap Response Plan	 - As required - As required - As required	 - SOP - SOP - SOP	All
34	**Ineffective Filter Backwash** *Causes:* - Broken nozzles - Poor filter design - Ageing media - Infrequent backwashing - Incorrect backwash rates - Overdosing of coagulant and flocculant	- High filter turbidites - Short filter run-times - Short-circuiting - Mudballing - Increased chance of filter turbidity break-through on start-up/flowchanges	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Headloss monitoring and backwashing triggers - Flow monitoring - Time based backwashing - Multiple filters for redundancy Operational: - Observation of Backwash - Caustic Backwashing - Fixing issues		Partially (60%)	Rare	Moderate	**Low**	Tasks: - Observe Filter Backwash - Caustic Backwash	 - Weekly - As required	 - SOP - SOP	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP, Te Poi WTP

Risk No.	#Risk Description	#Consequences	Inherent Risk Assessment			#Describe Individual Controls	•Select Control Type	•Assess Control	Residual Risk Assessment			Comments	Timing	Required Documentation	Applicable Sites
			•Likelihood	•Consequence	*Inh Rating				•Likelihood	•Consequence	*Res Rating				
35	**Backwash Grouping** *Causes:* - Backwashing of multiple filters at once due to an event or plant start-up - Gradual bunching over time due to manual initiation	- All filters backwash together affecting production rate of water and long down time due to filling upwash tanks between backwashes and possible waste system constraints. - Plant may have to shut down	Almost Certain	High	Very High	Operational: - Check backwash times and initiate manual backwashes to space backwashes out - Water tanker for backwash water		Effective (99%)	Unlikely	High	**Moderate**	Tasks: - Check backwash times and initiate manual backwash	- Daily	- Tasklist/ Water Outlook	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP
36	**UV Units - Air Bubbles or Empty Vessel** *Causes:* - Incorrect design - Unit drained for maintenance	- False UVI measurements - Lamps overheating	Almost Certain	Low	High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - UV Unit installed in correct configuration - Air release valves - Run to Waste valve Operational: - Refilling procedure for UV Reactors		Effective (99%)	Rare	Low	**Low**	Tasks: - UV refilling after maintenance	- As Required	- SOP	Tills Rd WTP, Te Poi WTP, Hinuera WTP, Tahuna WTP, Burwood Rd WTP, Tawari Rd WTP
37	**UV Units - Lamps Exceeded Design Life** *Causes:* - Lamps old - Lamps not replaced as scheduled - Lamp hours not checked	- UV Lamps not providing sufficient intensity to disinfect water - public health risk	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - UV Lamp Life alarms - UVI CCP trips Operational: - Check UV Lamp life		Effective (99%)	Rare	High	**Low**	Tasks: - Check lamp life	- Monthly	- SOP	Tills Rd WTP, Te Poi WTP, Hinuera WTP, Tahuna WTP, Burwood Rd WTP, Tawari Rd WTP
38	**UV Units - Lamp Sleeve and Sensor Window Fouling** *Causes:* - Iron, Manganese, hardness, etc deposits on lamp sleeves	- UV Lamps not providing sufficient intensity to disinfect water - public health risk	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Wipers - Iron and Manganese removal (pre-chlorine) - UVI CCP trips Operational: - Clean Lamp Sleeves/Sensor Window		Effective (99%)	Unlikely	High	**Moderate**	Tasks: - UV Lamp sleeve and sensor window cleaning	- Monthly/As required	- SOP	Tills Rd WTP, Te Poi WTP, Hinuera WTP, Tahuna WTP, Burwood Rd WTP, Tawari Rd WTP
39	**Sludge Pump Station Overflow** *Causes:* - Pump failure - Too many clarifier big bleeds at once	- Environmental harm - Discharge consent non-compliance	Possible	High	High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Redundant pumps		Effective (99%)	Rare	High	**Low**	Tasks: - Check trends for Sludge Pump Station	- As required	- Tasklist/Water Outlook	Morrinsville WTP
40	**Sludge Settling Tank - Supernatant High Solids** *Causes:* - Insufficient settling time - Sludge not being bled effectively due to excess sludge or blocked drain	- Environmental harm - Discharge consent non-compliance	Likely	High	Very High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Automated Sequence Operational: - Visual inspection and testing of Supernatant for WQ parameters		Partially (60%)	Possible	High	**High**	Tasks: - Visual inspection of settling period - Testing supernatant for WQ parameters	- Weekly - Weekly	- Tasklist/Water Outlook - SOP	Morrinsville WTP, Tills Rd WTP
41	**Sludge Bag - Overpressurisation** *Causes:* - Recycle valve closed or too restricted	- Tearing or damage to bag and environmental discharge/non-compliance	Likely	High	Very High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Recycle relief valve - Pressure gauge Operational: - Set recycle valve with padlock and pressure gauge plus visual inspections		Effective (99%)	Unlikely	High	**Moderate**	Tasks: - Check pressure gauge during operation - Set/adjust recycle valve position and padlock	- Weekly - As required	- Tasklist/Water Outlook - SOP	Morrinsville WTP, Tills Rd WTP
42	**Sludge Bag - Overfull or Torn (Bypassed)** *Causes:* - Bag not changed when full - Damaged during delivery - Connection not tight	- Environmental discharge/non-compliance	Likely	High	Very High	Operational: - Inspection of bag discharge - Testing of discharge water - Replacing bag as required - Inspection of bag and connection after replacement		Effective (99%)	Unlikely	High	**Moderate**	Tasks: - Inspection of bag and discharge clarity - Handheld test of discharge - Bag Replacement and Inspection	- Daily - Weekly/As required - As required	- Tasklist/Water Outlook - SOP - SOP	Morrinsville WTP, Tills Rd WTP
43	**Sludge Settling Tank - Ratholing or Thick Sludge** *Causes:* - Sludge build up over time - High poly dose - Old sludge thickened with excess poly or anaerobic growth - Excessive recycling of sludge going to bag increasing poly - Blocked drain	- Dirty supernatant (see Risk 40) - Ineffective sludge removal resulting in build-up in tank requiring frequent cleaning	Almost Certain	High	Very High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Automated sequence Operational: - Visual inspections - Hose down sludge (vacuum if required) - Adjust poly dose if thick sludge observed - Flush drain - Clean out sludge if building up - Sludge burns to confirm strength		Effective (99%)	Possible	Low	**Low**	Tasks: - Visual inspection - Hose down settling tanks - Adjust poly dose - Sludge Burns - Flush Drain	- Daily - Weekly - As required - Daily - Weekly	- Tasklist/Water Outlook - SOP - SOP - Tasklist/Water Outlook - SOP	Morrinsville WTP, Tills Rd WTP
44	**Polyelectrolyte - Settling Tank Poly Dosing Failure** *Causes:* - Pump wear - Pump failure - Dose line partial or full blockage - Dose line break or leak - Dose Tank empty (see Risk 17)	- Environmental discharge/non-compliance	Almost Certain	High	Very High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Pump Fault Feedback - Redundant Pump with automatic fail-over - Redundant or spare dose line - Double contained dose lines with leak detection. - Risk 17 Operational: - Poly dose line flushing - Compare actual flow to calculated flow - Inspect Pressure Relief discharge - Stop sludge bleeding if poly dose issue observed		Effective (99%)	Rare	Low	**Low**	Tasks: - Poly dose line flushing - Do dose-time on pumps - Inspect Pressure Relief Discharge point	- Monthly - Monthly - Bi-Weekly	- SOP - SOP - Tasklist/Water Outlook	Morrinsville WTP, Tills Rd WTP
45	**Electrical - Short-Term Power Failure** *Causes:* - Power failure from supply - Mains breaker tripped	- Plant shutdown - loss of production - Loss of compliance data - Loss of process control resulting in non-compliant water production.	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Compliance Instruments and key valves on UPS supply Operational: - Verify CCPs and close valves if required		Effective (99%)	Almost Certain	Low	**High**	Tasks: - Review CCPs after power failure	- As required	- SOP	All

Risk No.	#Risk Description	#Consequences	Inherent Risk Assessment •Likelihood	Inherent Risk Assessment •Consequence	Inherent Risk Assessment *Inh Rating	#Describe Individual Controls	•Select Control Type	•Assess Control	Residual Risk Assessment •Likelihood	Residual Risk Assessment •Consequence	Residual Risk Assessment *Res Rating	Comments	Timing	Required Documentation	Applicable Sites
46	**Electrical - Long-Term Power Failure** *Causes:* - Power failure from supply - Mains breaker tripped - Generator fault - Generator low fuel - Generator old fuel	- Plant shutdown - loss of production - Loss of compliance data - Loss of process control resulting in non-compliant water production	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Compliance Instruments and key valves on UPS supply - On-site standby generator Operational: - Regular fuel level checks - Regular maintenance checks - Regular generator tests		Effective (99%)	Unlikely	Low	**Low**	Tasks: - Changeover to generator when mains failed - Generator maintenance checks - Generator tests on load (maintenance) - Generator tests off load - Generator fuel level and age check	 - As required - Weekly - 6 Monthly - Weekly - Weekly	 - SOP - SOP - SOP - SOP - SOP	
47	**Software Download** *Causes:* - Software download for software change causes data/control loss - Software download to fix issue with software - Corruption of software	- Loss of compliance data - Loss of control of equipment (valves or pumps hold last position or move to unexpected position) - New software changes not working as expected resulting in unexpected outcomes	Almost Certain	Extreme	Extreme	Operational: - Shut-down plant or area being downloaded prior to download - Risk assess software changes - Take software back-ups prior to downloads - Test/commission software after download		Partially (60%)	Rare	Extreme	**High**	Tasks: - Shut-down plant or area being downloaded prior to download - Risk assess software changes - Take software back-ups prior to downloads (by programmer) - Test/commission software after download	 - As required - As required - As required - As required	 -SOP - SOP - N/A - N/A	All
48	**Safety Shower - Failure** *Causes:* - Low water pressure - Blockage - Valve closed - Physical Damage - Deterioration with age/sun damage	- Chemical exposure control failure	Almost Certain	Very High	Extreme	Operational: - Weekly operational checks		Effective (99%)	Unlikely	Very High	**High**	Tasks: - Test Safety Showers	- Weekly	- SOP	All
49	**Small Chemical Spill** *Causes:* - Drips from truck delivery pump/hoses - Drips from connection point during delivery - Hoses not flushed and drained fully after delivery - Drips from pipework/pumps - Small quantities of chemical spilled during maintenance - Drips of chemical combined with rainwater in tank - Spills or splashes while pouring	- Chemical Exposure - negative health effects - Environmental damage	Almost Certain	High	Very High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Bunded delivery area, tanks and pumps - Drip tray under delivery connection - Chemical spill kits - Double-contained doselines with sight glasses or level switches Operational: - Procedure for delivery including flushing to tank and emptying hoses into waste - Top-up procedure for manual filling - Procedure for containing and removing chemical spills - Procedure for testing, neutralising and disposing of chemicals/water in bunds.						Tasks: - Delivery procedure - Chemical spill response - Small - Bund testing, neutralising and disposal - Check sight glasses on dose lines - Chemical top-up	 - As required - As required - As required - Weekly - As required	 - SOP - SOP - SOP - SOP - SOP	All
50	**Large Chemical Spill** *Causes:* - Flushing onto ground - Break in hoses/damage to pump during delivery - Pipework disconnected before delivery tank drained - Human error - Pump to wrong tank overflowing - Tank overfilled/overflowed - Drain opened - Break in pipework connected to tank - Break in pipework after pumps - Damage to exterior of tank - Spills or dropping of containers. - Transfer pump overfilling tank due to faulty level sensor or manual error - Dilution water fill valve failed to close	- Chemical Exposure - negative health effects - Environmental damage	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Bunded delivery area, tanks and pumps - Double-contained doselines with sight glasses or level switches to detect leaks - Drip tray under delivery connection - Lockable delivery points - Electronic delivery system - Level indicators and safe fill levels displayed at delivery connection - Alarm with siren at delivery for Level HiHi Operational: - SOP for chemical delivery and top-ups						Tasks: - Delivery procedure - Chemical spill response - Large - Check sight glasses on dose lines - Chemical top-up - Chemical Response Plan	 - As required - As required - Weekly - As required - As required	 - SOP - SOP - SOP - SOP - Response Plan	All
51	**Chlorine Gas Leak** *Causes:* - Human error during changeover - Faulty regulator - Drum/Cylinder valve failure to close - Break in pipework or damage to valves	- Chemical exposure - injury or death	Almost Certain	Extreme	Extreme	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Gas detectors with automatic shut-off valves - Vacuum based system with spring-loaded regulator - Carbon scrubbers for minor leaks - Automatic door closure - Ventilation - Sirens/alarms for leaks Operational: - Changeover procedure including isolation followed by vacuum down of lines - Training requirement - 2 people required for handling gas - Breathing Apparatus available - Emergency Response Plan for leaks - Regular maintenance by supplier		Effective (99%)	Rare	Very High	**Moderate**	Tasks: - Chlorine Changeover Procedure - Gas leak evacuation test - Gas Leak Response Plan	 - As required - 6 monthly - As required	 - SOP - SOP - Response Plan	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP, Burwood Rd WTP, Tawari Rd WTP
52	**Chlorine Gas Drum/Cylinder Delivery Loss of Control** *Causes:* - Human error during moving of drums/cylinders - Loss of control by hiab or crane	- Crushing/pinching	Possible	Extreme	Very High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Wheeled base or trolley for drums - Remote control for delivery Operational: - Chlorine drum/cylinder delivery procedure		Effective (99%)	Rare	Moderate	**Low**	Tasks: - Chlorine Delivery Procedure	- As required	- SOP	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP, Burwood Rd WTP, Tawari Rd WTP
53	**Softener Fault** *Causes:* - No salt in brine tank - Salt-bridging in brine tank - Fault on control head - Blockage of control head ports - Low pressure on inlet/outlet of control head	- Deterioration of hypo strength	Almost Certain	Low	High	Operational: - Check and top-up salt - Check for salt bridges - Check for faults - Regular servicing of head		Effective (99%)	Rare	Low	**Low**	Tasks: - Check and top-up salt - Check for salt bridges - Check for faults - Regular servicing of head	 - Weekly - Weekly - Weekly - 6 Monthly	 - SOP - SOP - SOP - SOP	Hinuera WTP, Tahuna WTP
54	**Handheld FAC, pH, UVT, Turb - Analyser Failure** *Causes:* - Instrument drift - Dirty sensor - Calibration missed - Calibration wrong - Old sensor - Component failure	- Missed calibration leading to Non Compliance - Incorrect calibration of online analysers leading to over/under dosing of chemicals and public health risk.	Almost Certain	Extreme	Extreme	Operational: - Verification - Calibration - Servicing/annual calibration (maintenance)		Effective (99%)	Rare	Extreme	**High**	Tasks: - Verification - Calibration	 - Weekly - As required	 - SOP - SOP	All
55	**Plant Trip or Failure to Start** *Causes:* - Many causes	- Loss of production - Compliance issue during start-up	Almost Certain	Very High	Extreme	Operational: - Plant shutdown/restart procedure		Effective (99%)	Almost Certain	High	**Very High**	Tasks: - Plant shutdown/restart procedure	- As required	- SOP	All

Risk No.	#Risk Description	#Consequences	Inherent Risk Assessment			#Describe Individual Controls	•Select Control Type	•Assess Control	Residual Risk Assessment			Comments	Timing	Required Documentation	Applicable Sites
			•Likelihood	•Consequence	*Inh Rating				•Likelihood	•Consequence	*Res Rating				
56	**Raw Water Intake Blockage** *Causes:* - Leaves, branches or debris accumulating on screen - Algal growth on screen - Sediment build-up in or around intake	- Decrease in plant flow - Damage to RW pumps	Almost Certain	High	Very High	General recommended engineering controls are listed here. Actual controls are site specific so may not include these. General Engineering Controls: - Screens - Abstraction structure - Pressure monitoring on screens Operational: - Inspection of intake screen - Cleaning of screens		Partially (60%)	Likely	High	**Very High**	Tasks: - Inspect Intake Screen/Leaf Screen - Clean Intake Screen/Leaf Screen	 - Weekly/As required - As required	 - SOP - SOP	Te Aroha WTP, Morrinsville WTP, Tills Rd WTP, Te Poi WTP

MULTIPLE WATER TREATMENT PLANTS

COAGULANT DOSING
COAG PUMP DOSE TIME AND CHECKS

STANDARD OPERATING PROCEDURE

Version	Description	Date	Author	Revised by	Approved by
1	Draft for Review	11/09/2024	BDK		

1. PURPOSE

This procedure defines how to verify the dose rate for coagulant dosing pumps through flow-meter checks, dose timing checks and generic pump checks.

2. SCOPE

The following sites utilize coagulant dosing:

Site	Coagulant
Morrinsville WTP	Aluminium Sulphite (Alum)
Matamata WTP	Polyaluminium Chloride (PACl)
Te Aroha WTP	Polyaluminium Chloride (PACl)
Te Poi WTP	Polyaluminium Chloride (PACl)

The coagulant chemical is stored in a bulk or day tank. Coagulant is pumped from the bulk/day tank to the dose point at a rate set by the operators. The dose rate has a corresponding flow rate required to achieve the dose-rate. Typically, the flow rate is calculated automatically by the control system (except Te Poi which uses a reference sheet).

Over time the actual flow rate produced by the pump can change as a result of issues with the pump. Other potential issues are

- Dose line partial or full blockage
- Dose line break or leak
- Dose tank empty or very low level

Verification that the actual flow rate to the dose point matches the target is critical because an incorrect coagulant dose rate will result in significant performance issues with the plant that could breach compliance or require a plant shut down.

3. RESPONSIBILITIES

TBC during review.

4. PREREQUISITES

- Safety Data Sheet
- PPE – Safety goggles, long/long
- Safety Shower nearby
- Stopwatch

5. RELATED DOCUMENTATION

- Ixom Chemical changeover procedure
- Aluminium Sulphate Safety Data Sheet
- Polyaluminium Chloride Safety Data Sheet

6. HEALTH AND SAFETY/RISKS

- Only operators who are trained to carry out the works.
- Safety Data Sheet Required for chemical

Item 4.10

Attachment D

- A pump blockage or incorrectly closed valve could cause deadheading of the pump which may result in pipe bursts, chemical exposure or damage to the pumps.
- Incorrectly setting the valves during or after a dose time test causes dry running or no flow through the pump which may result in damage to the pumps and underdosing of coagulant.

te kaunihera ā-rohe o matamata-piako district council

7. INSTRUCTIONS

There are 2 outcomes for this procedure. The first is to ensure that the actual dose rate matches the target dose rate. The second is to identify issues with dose pump performance.

Important terms are defined below that should be read by all.

Calculations are provided for context in section 7.3, but they should be incorporated into a spreadsheet or the SCADA with operators only needing to enter values.

Definitions

Term	Units	Description
Target Dose	g/m3 or mg/L or ppm	The Target Dose is the coagulant dose rate required for optimal coagulation. It is determined by completing a jar test with trim by the SCM if in use. This value should be manually entered into the control system or spreadsheet by the operator. The units listed here are equivalent.
Actual Dose	g/m3 or mg/L or ppm	The actual dose is calculated based on the coagulant actual flow, coagulant concentration and plant flow. This represents what you are actually dosing. The coagulant actual flow is either measured by a flow meter or found through completing a dose time (section 7.1).
Dose Discrepancy	%	The dose discrepancy shows how different the actual dose is from the target dose. A discrepancy >5% should be investigated. If the actual dose differs from the target dose, then coagulation performance will suffer.
Calculated Flow	l/hr	The calculated flow refers to the theoretical output of the dose pump. It is calculated from the pump capacity, speed and stroke.
Actual Flow	l/hr	The actual flow is the measured flow of coagulant. Measurement can be done by a flow meter or through a dose time. In certain situations, a bucket test at the dose point may be required. The principle is the same as the dose time in section 7.1.
Pump Discrepancy	%	The pump discrepancy calculation shows how different the calculated flow is from the actual flow. A discrepancy >5% should be investigated. The calculated flow differs from the actual flow when there is an issue with the dose pumps, equipment or dose line. It will likely affect the dose discrepancy.
Target Flow	l/hr	The target flow is calculated from the target dose, plant flow and coagulant concentration. This can be useful to calculate when troubleshooting.

7.1. Determine Actual Flow

No.	Steps	Photos/Details
7.1.1	Review Pre-requisites in Step 4	
7.1.2	If a coagulant flow meter is available proceed to section 7.2	
7.1.3	<u>Dose Time Set-Up</u> 1. Put on PPE as identified in Section 6 2. Locate Dose-Timers for dose pump 3. Record current pump speed and stroke	
7.1.4	<u>Fill Dose Time (Calibration) Column</u> 1. Open the dose time column isolation valve to fill the column. 2. Close the dose time column isolation valve when the level in the column reaches close to the top marker. 3. Alternatively, use a hose to fill the dose time column with water.	
7.1.5	<u>Dose Timing</u> 1. Prepare stopwatch 2. Confirm pump speed/stroke hasn't changed since it was recorded in 7.1.2. 3. Open the dose time column isolation valve and close the tank to dose pump isolation valve(s). 4. The level in the dose time column will start to drop. 5. Start the stopwatch when the level in the dose time column passes a marker. 6. Stop when it passes the 5th mark below the start mark (may vary by column). 7. Subtract the volume measurements at the start point from the stop point to find the volume pumped.	Photos: 1. Dose Time column with marks for start and stop 2. Valves with steps

No.	Steps	Photos/Details
	8. Record volume and time in site diary and dose timer spreadsheet Note When the dose time is done over a larger volume then it will be more accurate.	

7.2. Verify Dose Rate

No.	Steps	Photos/Details
7.2.1	Record in Site Diary, Water Outlook and Dose Timer Spreadsheet: 1. Target Dose 2. Pump Capacity (shouldn't change) 3. Coagulant Concentration (shouldn't change) 4. Pump Speed 5. Pump Stroke 6. Actual Flow OR Volume Pumped and Time found in 7.1.5 7. Raw Water Flow	Screenshot of spreadsheet
7.2.2	Calculate Discrepancies Review the dose discrepancy and pump discrepancy. If either discrepancy is greater than 5% then investigate the cause of the discrepancy.	Screenshot of spreadsheet

7.3. Calculations

$$Actual\ Dose\ \left(\frac{g}{m^3}\right) = 100 \times \frac{Actual\ Flow\left(\frac{l}{hr}\right) \times Coag\ Concentraion\ \left(\frac{g}{l}\right)}{Raw\ Water\ Flow\ \left(\frac{m^3}{hr}\right)}$$
$$Actual\ Flow\left(\frac{l}{hr}\right) = \frac{Volume\ (l)}{time\ (s)} \times 3600\left(\frac{s}{hr}\right)$$
$$Calculated\ Flow\ \left(\frac{l}{hr}\right) = Pump\ Capacity\left(\frac{l}{hr}\right) \times Pump\ Speed\ (\%) \times Pump\ Stroke\ (\%)$$
$$Discrepancy\ (\%) = 100 \times \frac{Target\ Dose\ \left(\frac{g}{m^3}\right) - Actual\ Dose\ \left(\frac{g}{m^3}\right)}{Target\ Dose\ \left(\frac{g}{m^3}\right)}$$
$$Pump\ Discrepancy\ (\%) = 100 \times \frac{Calculated\ Flow\ \left(\frac{l}{hr}\right) - Actual\ Flow\ \left(\frac{l}{hr}\right)}{Calculated\ Flow\ \left(\frac{l}{hr}\right)}$$
$$Target\ Flow\ \left(\frac{l}{hr}\right) = \frac{Target\ Dose\ \left(\frac{g}{m^3}\right) \times Raw\ Water\ Flow\left(\frac{m^3}{hr}\right)}{Chemical\ Concentration\ \left(\frac{g}{l}\right)}$$

8. TROUBLESHOOTING

To be updated after review.

9. REPORTING/TASK COMPLETION

Record all values in Water Outlook and site diary.

MULTIPLE SITES

GENERAL
COAGULATION OR FLOCCULATION FAILURE

EMERGENCY RESPONSE PLAN

Version	Description	Date	Author	Reviewed by	Approved by
1	Draft for Review	23/08/2024	BDK	CG	
2	Updated after first review	24/09/2024	BDK		

1. PURPOSE

This Emergency Response Plan details the recommended troubleshooting, and corrective actions required when Clarifier or Filter performance is adversely affected by coagulation or flocculation issues.

2. SCOPE

Coagulation or flocculation failure is catastrophic for treatment plant performance causing high clarified water turbidity, short filter run times and high filtered water turbidity.

The plant will either produce non-compliant water or be shutdown to prevent non-compliance. An extended shutdown may result in water restrictions being applied which is a failure of MPDC to meet its requirement to provide sufficient drinking water to the public.

Coagulation and flocculation are dependent on chemical dosing of a coagulant, a flocculant and a form of pH/alkalinity adjustment.

Table 1: Sites using coagulant and flocculant dosing

Site	Coagulant	Flocculant	Pre-pH Dosing
Morrinsville WTP	Aluminium Sulphite (Alum)	Crystalfloc B570	Caustic Soda
Matamata WTP	Aluminium Chlorohydrate (ACH)	Crystalfloc LT22S	Lime
Te Aroha WTP	Polyaluminium Chloride (PACl)	Crystalfloc LT22S	Lime
Te Poi WTP	Polyaluminium Chloride (PACl)	N/A	N/A

This Emergency Response Plan (ERP) outlines the consequences, potential causes and steps to follow for troubleshooting issues with coagulation or flocculation failure.

3. RESPONSIBILITIES

It is the responsibility of the duty operator to carry out the response detailed in this procedure. However, escalation of the issues to the Operations Manager and Water Services Manager should be completed when a significant coag/poly failure is detected. Early escalation allows for allocation of resources and planning for public notice when water restrictions or water quality issues may occur.

4. RELATED DOCUMENTS

This ERP should be read in conjunction with the Operational Risk Register. Risk item numbers are identified in the ERP which can be looked up in the Operational Risk Register.

5. HEALTH AND SAFETY/RISKS

The ERP covers a diverse range of activities, all of which cannot be identified. Where applicable, relevant Standard Operating Procedures will be listed that will contain task specific H&S information. For any other activities, it is recommended that a Job Safety Analysis form is completed to ensure that the relevant H&S risks are identified and mitigated for the specific activity.

6. SEQUENCE OF INVESTIGATION

6.1. Gather Information

No.	Step	Additional Information
6.1.1	Existing Information from Others 1. If you aren't the first person working on this issue, ask people what the problem is and what they saw exactly. 2. Review daily logbook for notes of maintenance activities, investigations by previous operators or changes. 3. Review Daily Log sheet for key values. 4. Look for underlying assumptions and verify this information by reviewing data in step 6.1.2, doing visual inspections in 6.1.3 and completing field checks in 6.1.4.	Add photo of logbook and daily log sheet Warning It is important to document any troubleshooting activities such as changes made, handheld measurements, instrument calibrations, dose-time results, values, etc. These notes are critical evidence when proving compliance, proving that water restrictions were necessary and as useful notes for other operators completing investigations afterwards.
6.1.2	Trends and Values 1. Review trends, values and alarms and work out the sequence of events as they happened. 2. Log key values in the logbook to help build a picture of what is happening. 3. Look for changes over the previous hours, day, week and month to see if there has been a sudden or gradual change. 4. Do a sense check for whether any of these seem wrong or off. 5. Review the Possible Causes and Consequences sections 7 and 8 Add relevant SOP references	Add photos of trend buttons that have these values on them already. Trends and Values to Review Trend 1 1. Weather forecast/history 2. Raw Water (RW) pH 3. RW Conductivity 4. RW Turbidity 5. Coag pH 6. Streaming Current Meter (SCM) 7. Alum Dose Rate 8. Alum Actual Flow/Dose Rate 9. Poly Dose Rate 10. Poly Actual Flow/Dose Rate 11. Pre-pH Dose Rate (Lime or Caustic) 12. Pre-pH Actual Flow/Dose Rate 13. Pre-pH Flush frequency (Lime) 14. Sludge Bleed Frequency 15. Clarifier Cone Weights 16. Clarified Water Turbidity 17. Filter head loss 18. Filter run times 19. Filter Outlet Turbidity 20. Alum, Poly and Pre-pH Tank Levels

No.	Step	Additional Information
6.1.3	Visual Inspections 1. Flash Mixer – Look for floc formation and size/haziness. Check mixer is running if it is an active mixer. 2. Poly Dose Point – Confirm poly is dosing at sparge 3. Flocculated Water – Look for floc growth after coagulation. 4. Clarifier – Look at cones for ratholing, sludge blanket level and for haziness. 5. Filters – Look for haziness in filter. 6. Alum, Poly and Lime/Caustic dose pumps – Physically look at pump to confirm they are running at the correct speed/stroke. 7. Carry Water – Check that carry water is running. Add SOP References for each item above Notes 1. Haziness typically indicates an issue with coagulation dose rate. 2. Coagulated Water should have small, light floc particles. 3. Flocculated water (after poly dosing) should have larger floc particles.	Add photos of: 1. Coagulated Water with floc 2. Flocculated Water with floc 3. Poly Dose point 4. Clarifier cones and sludge blanket 5. Filter 6. Dose Pump example

No.	Step	Additional Information
6.1.4	Field Checks 1. Alkalinity Test – SOP XX 2. Complete Jar Test – SOP XX 3. Dose Time test on alum, poly and pre-pH (lime/caustic) dose pumps – SOP XX 4. Handheld verification of key instruments – SOP XX a. Coag pH b. Raw Water Turbidity and pH c. Clarified Water Turbidity 5. Check SCM sample flow and operating – SOP XX 6. Check Poly Strainers – SOP XX 7. Inspect Poly Make-up system – SOP XX	Note Field checks are done to prove that the system is functioning correctly. It is recommended to complete all of these checks, even when a potential issue is found.

6.2. Implement Solutions

No.	Step	Additional Information
6.2.1	Review Gathered Information 1. Review gathered information in step 6.1 and look for possible causes and consequences in sections 7 and 8 2. Discuss with co-workers (if available) to see if you have missed something and get ideas for solutions.	
6.2.2	Implement Solutions 1. Start with simple solutions and small changes first. Refer to section 6.3 for potential solutions to try 2. Make 1 change at a time except where the problem is obvious (e.g. dose pump failed). 3. Observe the plant after the change is made before making another change. 4. Don't assume that there is only one cause of an issue. Keep going after fixing one issue.	

6.3. Potential Solutions

No.	Potential Solution	Application	Cause or Consequence	SOPs
6.3.1	Adjust Coag pH setpoint/pre-pH dose rate	1. Coag pH too high 2. Alkalinity low	7.1, 7.5, 8.2	TBC
6.3.2	Adjust Alum dose rate	1. Jar test dose rate differs from current dose rate 2. SCM is showing gradual change	7.1, 7.2, 8.2	

No.	Potential Solution	Application	Cause or Consequence	SOPs
6.3.3	Adjust Poly dose rate	1. Ratholing observed 2. Sludge blanket billowing or lifting 3. Sludge blanket overflowing into launders 4. Sludge visually too thick or thin	7.1, 7.3, 7.4, 8.1, 8.3	
6.3.4	Flush or replace dose lines	1. Dose time test reveals issue and pump not the issue 2. Coag/pre-pH dosing matches jar test, but poor coagulation 3. Light floc despite high poly dose rate	7.2, 7.3, 7.5, 8.1, 8.2	
6.3.5	Repair dose pump or change pump duty	1. Dose time test reveals issue and blockage not the issue 2. Coag/pre-pH dosing matches jar test, but poor coagulation 3. Light floc despite high poly dose rate	7.2, 7.3, 7.5, 8.1, 8.2	
6.3.6	Adjust sludge bleed frequency	1. Sludge visually too thick or thin 2. Ratholing observed 3. Sludge blanket not overflowing into cone (low level) 4. Sludge blanket gone	7.1, 7.3, 7.4, 8.1, 8.3, 8.4	
6.3.7	Manually bleed sludge	1. Sludge visually too thick 2. Ratholing observed 3. Sludge blanket level high	7.3, 7.4, 8.3	
6.3.8	Lift and shake clarifier cones	1. Ratholing observed 2. Sludge blanket level high 3. Sludge bleed clear despite high sludge level	7.3, 7.4, 8.3	
6.3.9	Calibrate instruments	1. Handheld testing shows discrepancy	7.2, 7.5, 8.2	
6.3.10	Backwash filters	1. Filter headloss high 2. Filter turbidity high 3. After coag issue resolved	7.1, 7.2, 7.3, 7.4, 7.5 8.1, 8.2	
6.3.11	Drain and clean clarifier	1. Sludge visually very thick or bleeds blocked 2. Ongoing significant ratholing observed 3. Bacterial growth measured	7.3, 7.4, 8.3	

No.	Potential Solution	Application	Cause or Consequence	SOPs
6.3.12	Repair broken dose lines	1. Dose time results acceptable, but bucket test or flow meter at dose point shows lower flows 2. Coag/pre-pH dosing matches jar test, but poor coagulation 3. Light floc despite high poly dose rate	7.2, 7.3, 7.5, 8.1, 8.2, 8.3	
6.3.13	Top up empty tanks or empty hopper	1. Poly system checks reveal that hopper is empty or makeup failed 2. Tank level checks reveal empty or low tanks	7.2, 7.3, 7.5, 8.1, 8.2, 8.3	
6.3.14	Check chemical makeup strength (lime)	1. Pre-lime dose pumps at 100%, coag pH still low, coag pH instrument checked, dose lines flushed and dose time on pump completed. 2. Pre-lime dose pumps at minimum speed, coag pH still high, coag pH instrument checked, dose lines flushed and dose time on pump completed.	7.5, 8.2	
6.3.15	Fix issues with poly makeup	1. Poly makeup checks reveal issues with hopper ratholing, screw feeder blockages, wetting cone blockages or poly mixer failure. 2. Poly in dose tank is >24 hours old.	7.4, 8.1, 8.3	

7. POTENTIAL CAUSES AND EARLY INDICATORS

No	Potential Causes	Risks	Early Indicators
7.1	Weather Event 1. Rain Events causing high Raw Water (RW) turbidity and/or colour. 2. Low turbidity in Raw Water. 3. Quality changes causing coagulant dosing to not perform.	1	1. Weather forecast 2. Raw Water (RW) pH 3. RW Conductivity 4. RW Turbidity 5. Coag pH 6. Flash mixer, Clarifier and Filter visual inspections.
7.2	Coagulation Over, Under or No Dosing 1. Set incorrectly based on error in jar testing 2. Water quality changes due to changes in water source changing the required dose-rate 3. Carry water failure 4. SCM Instrument Drift or fault (where PID in use) 5. Coag pH Instrument Drift or Fault (where PID in use) 6. Pump wear 7. Pump failure 8. Dose line partial or full blockage 9. Dose line break or leak 10. Dose Tank Empty	6, 7, 8, 17, 26	1. Coag flow meter (if available) 2. Weekly dose time checks 3. Coag pH 4. Streaming Current Meter (SCM) 5. Fault alarms on pumps 6. Dose-rate check in daily log 7. Jar test results 8. Tank Level 9. Flash mixer, Clarifier and Filter visual inspections
7.3	Poly Dosing Failure 1. Pump wear 2. Pump failure 3. Dose line partial or full blockage 4. Dose line break or leak 5. Dose Tank empty	2, 17	1. Poly flow meter alarms (if available) 2. Weekly dose time checks 3. Dose point inspection (daily) 4. Dose-rate check in daily log 5. Fault alarms on pumps 6. Tank Level 7. Clarified Water Turbidity 8. Poly flush 9. Clarifier and Filter visual inspections

No	Potential Causes	Risks	Early Indicators
7.4	Poly Makeup Failure 1. Mixer failed 2. Wetting cone blocked or partially blocked 3. Poly Makeup strength too high or low as a result of screwfeeder blockages, hopper ratholing and/or screwfeeder set incorrectly. 4. Over or under mixing of polyelectrolyte 5. No polyelectrolyte powder in hopper 6. Insufficient carrywater pressure for venturi/bowl water 7. Venturi blocked 8. Polyelectrolyte old	5	1. Poly makeup checks 2. Poly hopper level checks 3. Clarifier and Filter visual inspections
7.5	Pre-pH Over, Under or No Dosing 1. Dosing chemical concentration high or low causing pump to hit max/min speed or PID control to over or undershoot. 2. Instrument drift (see Risk 25,26) with PID control 3. Incorrect dose setpoint by operator 4. Changes in water source changing the required dose-rate 5. Carry or flush water failure 6. Raw Water and Coag pH Instrument Drift or Fault 7. Pump wear or failure 8. Dose line partial or full blockage 9. Dose line break or leak 10. Dose Tank Empty	8, 9, 17, 25, 26, 14, 15, 16	1. Pre pH flow meter (if available) 2. Weekly dose time checks 3. Coag pH 4. Fault alarms on pumps 5. Dose-rate check in daily log 6. Tank Level 7. Alkalinity Test 8. Flash mixer, Clarifier and Filter visual inspections

8. CONSEQUENCES AND LATE INDICATORS

No	Consequences	Risks	Late Indicators	Potential Causes
8.1	Clarifier Sludge Blanket Overflowing 1. Sludge blanket lifts and spills into clarified water channels due to low/no poly dosing. 2. Filter binds with excess inlet turbidity/sludge causing excessive filter head loss, turbidity breakthrough and backwashing.	3, 4	1. Clarified Water Turbidity 2. Filtered Water Turbidity 3. Filter head loss 4. Excessive filter backwashing 5. Sludge blanket inspection 6. Clarifier cone weight alarms (if available)	7.1 7.2 7.3 7.4 7.5
8.2	Poor Coagulation or Flocculation 1. Incorrect coagulant dose or Coag pH results in floc not forming. 2. Resultant coagulated water does not get removed through clarifier(s) and filter(s) resulting in high filtered water turbidity and aluminium residual. 3. High filtered water turbidity leads to non-compliant water, plant shutdowns or excessive filter backwashing. 4. High chlorine demand due to poor removal of solids/organics.	1, 2, 3, 4, 5, 6, 7, 8, 9	1. Clarified Water Turbidity 2. Excessive filter backwashing 3. Flash Mixer, Clarifier and Filter Inspections (hazy appearance) 4. Filter head loss 5. Filtered Water Turbidity	7.1 7.2 7.3 7.4 7.5
8.3	Thick Sludge/Ratholing 1. Excessive poly dosing causes sludge to rathole at cones or bleeding pockets. 2. Cones break 3. Sludge becomes thicker and builds up in clarifier requiring drain-down and clean. 4. Filters bind with excess poly requiring excessive backwashing.	3	1. Sludge blanket inspection 2. Clarifier Cone Weights 3. Clarifier Sludge Manual bleeds 4. Filter head loss and runtimes	7.3
8.4	No Sludge Blanket 1. After a clarifier clean or coag issue there is no sludge blanket. 2. Absence of sludge blanket results in poor clarifier performance and filter runtimes/turbidity.		1. Sludge blanket inspection 2. Clarifier Cone Weights 3. Clarifier Sludge Manual bleeds and auto bleed frequency 4. Filter head loss and runtimes	7.2 7.3 7.4 7.5

9. REPORTING/TASK COMPLETION

Once complete, ensure all changes made are documented in the logbook and shared with relevant personnel such as Operators, Operations Manager, Water Services Manager and/or Compliance Specialist.

8.11 Top Risks Deep Dive - Inadequate response to local level natural disasters, extreme weather events and pandemics

CM No.: 2994313

Te Kaupapa | Purpose

Council over the last year has identified the tops risks to the organisation as a whole. The Risk and Assurance Committee have requested that we undertake a deep dive into the top ten risks. This item explores the risk, inadequate response to local level natural and human induced disasters, extreme weather events and pandemics and outlines the controls we have in place to reduce this risk.

Rāpopotonga Matua | Executive Summary

Inadequate response to local level natural and human induced disasters, extreme weather events and pandemics has been identified as one of Council's top risks. The inherent risk rating for this risk is extreme and after considering the controls we have in place, the residual rating drops to very high. The information in this report provides further detail on the risks, risk controls and the focus of improvement actions. The purpose of this item is to provide the Risk and Assurance Committee the opportunity to dive deep into this risk so they have the assurance that our focus and actions are appropriate for this risk.

Tūtohunga | Recommendation

That:

1. That the information be received.

Horopaki | Background

Risk management is about identifying, evaluating, planning for and responding to threats. The aim is to be prepared for what may happen and have a plan in place to respond.

Deep diving into the top ten risks enables the Risk & Assurance Committee to have oversight of the top risks to Council. This includes being able to critique the risk profile, appropriateness of the level of risk, whether the risk is correctly described and ensuring the register is reviewed and updated.

This risk is about Council's legislative responsibilities to plan for and response to natural and human induced disasters, extreme weather events and pandemics as outlined in the Civil Defence and Emergency Management Act 2002 (CDEMA).

As detailed on the NEMA website the purpose of the CDEMA includes to:

- Improve and promote the sustainable management of hazards in a way that contributes to the social, economic, cultural and environmental wellbeing and safety of the public and also to the protection of property;
- Encourage and enable communities to achieve acceptable levels of risk;
- Provide for planning and preparation for emergencies and for response and recovery in the event of an emergency;

- Require local authorities to coordinate, through regional groups, planning, programmes and activities related to civil defence emergency management across the areas of reduction, readiness, response and recovery, and encourage cooperation and joint action within those regional groups;
- Provide a basis for the integration of national and local civil defence emergency management planning and activity through the alignment of local planning with a national strategy and national plan
- Encourage the coordination of emergency management, planning and activities related to civil defence emergency management across the wide range of agencies and organisations preventing or managing emergencies under this Act.

Structure of CDEM

National Emergency Management Agency:

The National Emergency Management Agency (NEMA) is the Government lead for emergency management. Their goal is to help build a safe and resilient Aotearoa, New Zealand by empowering communities before, during and after emergencies.

Emergencies can have consequences for people, communities, property, infrastructure, the economy and the environment. NEMA works with central and local government, communities, iwi, and business to make sure responses to and recoveries from emergencies are effective and integrated.

Depending on the emergency, NEMA leads or supports the response and recovery. NEMA's key functions are steward, operator and assurer of the emergency management system. As steward, they provide strategic leadership for risk reduction, readiness, response and recovery activities, and build emergency management capability and capacity. As operator, they lead or support the response to, and recovery from, emergencies while also supporting the operation of the emergency management system. As assurer, they will provide assurance that the emergency management system is fit for purpose.

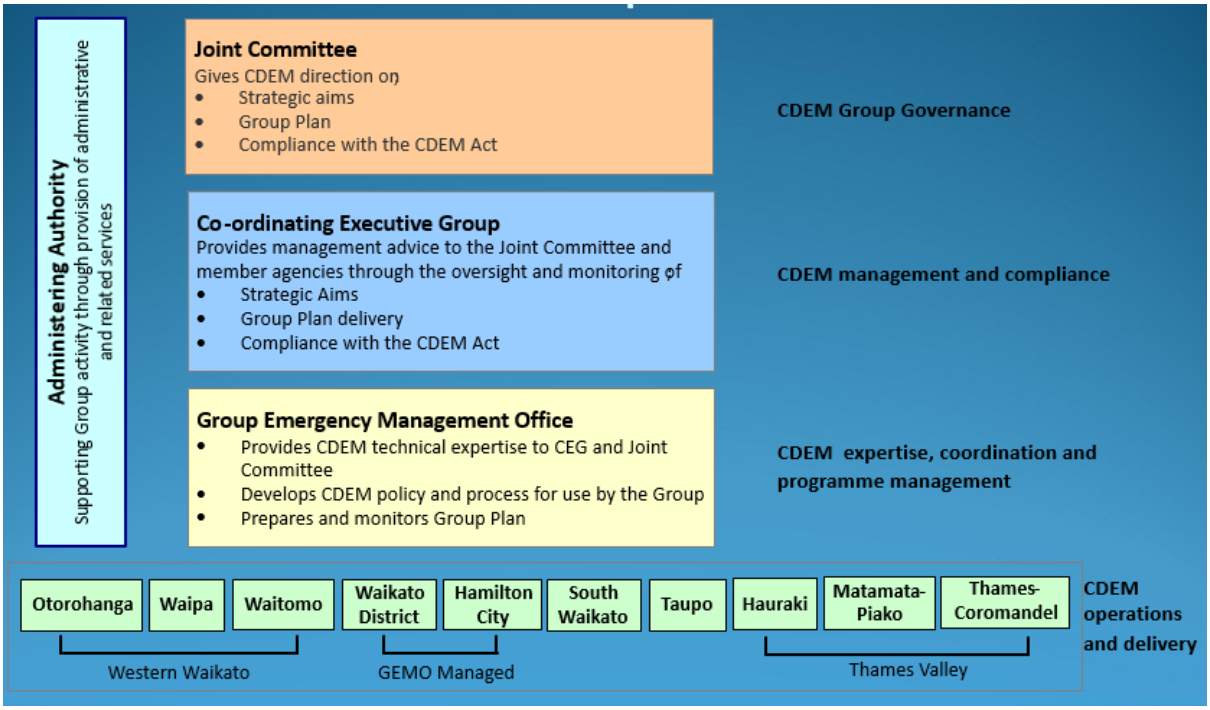
CDEM Groups:

Civil Defence Emergency Management Groups (CDEM Groups) are a core component of the CDEM Act 2002. Sixteen (16) CDEM Groups have been formed across New Zealand as committees of elected councillors from each council within regional boundaries.

The Group delivers CDEM through its executives, planners and operational staff of the many agencies involved in CDEM. Groups can be viewed as a consortium of the local authorities in a region working in partnership with emergency services, lifeline utilities and government departments, amongst other things, to:

- identify and understand hazards and risks
- prepare CDEM Group plans and manage hazards and risks in accordance with the 4R's (reduction, readiness, response and recovery).

Waikato CDEM Group Structure



Russell Smith is on the Joint Committee and the committee is made up of Elected Members.

The Coordinating Executive Group (CEG) is made up of Executive Officers and our representative is Ally van Kuijk.

Local Authorities (MPDC)

Specifically, under the Civil Defence Emergency Management Act 2002, local authorities must undertake the following duties:

Section 64 - Duties of local authorities

(1) A local authority must plan and provide for civil defence emergency management within its district.

(2) A local authority must ensure that it is able to function to the fullest possible extent, even though this may be at a reduced level, during and after an emergency.

In addition to the above, although Section 17 focuses on CDEM Groups not Local Authorities, it also notes; *"..and each of its members".*

Given the above, it is clear from this that the functions that apply to the CDEM Group, apply equally to the MPDC (and other councils). The importance of this underpins the fact that the controls for the risk not only come from the actions of MPDC but the combined actions of the collective which makes up the CDEM Group as well. An example is the policy which requires MPDC to contribute to and benefit from the Group Deployment Policy which enables sharing of trained personnel between Group members.

Ngā Take/Kōrerorero | Issues/Discussion

The deep dive process looks to validate the risk description, impact of the risk, effectiveness of the controls and that controls are consistent with risk tolerance levels. The combination of existing controls and ongoing improvements demonstrates to the Committee how Council is currently managing the risks.

The overview attached, alongside this report provides a summary on how Council is managing this risk and improvements that we are progressing. There are multiple controls in place for this risk. The majority of controls we have in place have been assessed as partially effective. The aim is to facilitate a discussion on what the Committee may wish further information on, suggested changes and/or recommendations.

Mōrearea | Risk

This risk has been identified as one of Council's top ten risks and undertaking a deep dive on each of the top ten risks will facilitate discussion and assurance that there are appropriate controls in place to mitigate the risk.

Ngā take ā-ture, ā-Kaupapahere hoki | Legal and policy considerations

As outlined in this report, Council under the Civil Defence and Emergency Management Act 2002, have a responsibility to plan for and provide (to the fullest extent possible) emergency management for the District.

Te Tākoha ki ngā Hua mō te Hapori me te here ki te whakakitenga o te Kaunihera | Contribution to Community Outcomes

Matamata-Piako District Council's Community Outcomes are set out below:

<table>
<tr><td colspan="2">MATAMATA-PIAKO TŌ MĀTOU WĀHI NOHO | OUR PLACE</td><td colspan="2">MATAMATA-PIAKO DISTRICT COUNCIL TE ARA RAUTAKI | STRATEGIC DIRECTION</td></tr>
<tr><td colspan="4">TŌ MĀTOU WHAKAKITENGA | OUR VISION

Matamata-Piako District is vibrant, passionate, progressive, where opportunity abounds. 'The heart of our community is our people, and the people are the heart of our community.</td></tr>
<tr><td colspan="4">TŌ MĀTOU WHĀINGA MATUA | OUR PRIORITIES (COMMUNITY OUTCOMES)</td></tr>
<tr><td>  </td><td>  </td><td>  </td><td>  </td></tr>
<tr><td>He wāhi kaingākau ki te manawa | A place with people at its heart</td><td>He wāhi puawaitanga |
A place to thrive</td><td>He wāhi e poipoi ai tō tātou taiao |
A place that embraces our environment</td><td>He wāhi whakapapa, he wāhi hangahanga | A place to belong and create</td></tr>
</table>

The community outcomes relevant to this report are as follows:

- He wāhi kaingākau ki te manawa | A place with people at its heart
- He wāhi puawaitanga | A place to thrive

- He wāhi e poipoi ai tō tātou taiao | A place that embraces our environment
- He wāhi whakapapa, he wāhi hangahanga | A place to belong and create

Pānga ki te pūtea, me te puna pūtea | Financial Cost and Funding Source

The Civil Defence and Emergency Management activity is provided for within existing budgets.

Ngā Tāpiritanga | Attachments

A⇩. Risk deep dive for RAC 25 February 2025

Ngā waitohu | Signatories

Author(s)	Ally van Kuijk **Hautū Tipu me te Whakamatua | General Manager Growth & Regulation**	
Approved by	Manaia Te Wiata **Tumu Whakarae | Chief Executive Officer**	

Risk deep dive - Inadequate response to local level natural and human induced disasters, extreme weather events and pandemics

The risk

Risk Number	Risk	Risk description	Inherent rating	Controls	Residual rating
1	Inadequate response to local level natural and human induced disasters, extreme weather events and pandemics	Inadequate response to local level natural and human induced disaster events resulting in compromised community resilience	Extreme	Threat Analysis (best case/ worst case and most likely scenarios)	Very High
				Monitoring of threats and initiation of processes (WRC Floodroom and Local and Group Duty)	
				Waikato Group Emergency Management Office - advice and support	
				National Emergency Management Agency - advice and support	
				Passing on threat warnings and preparedness advice to public	
				Business Continuity Management Policy and Plans (including contracts)	
				Policies, strategies and plans (Mayoral Relief, Welfare Plan (CDC identification) etc)	
				Member of the Lifelines group	

				Community partnerships (Welfare / Social / Business Groups)	
				Training, scenarios, exercises (e.g. all staff to complete foundation training)	
				Resourcing - IMT: trained staff (intermediate and higher level) to allow for two rosters, including function managers	
				Communities of Practice	
				On call staff available	
				Regulatory / Planning Controls (Hazard mapping, LIMs and PIMs)	
				Identify critical employees and ensure controls and cover for their roles	
				Response framework and deployment policy	
				Emergency Management Officer work plan	
				Community Response Planning	
				Adaptation Planning (Climate Change River Map)	

Understanding of the risk and its consequences

The risk of Council having an inadequate response to local level natural and human induced disasters, extreme weather events and pandemics is multifaceted as it encompassing natural hazards (such as earthquakes, floods, and tsunamis), pandemics (covid and birdflu) and human-induced events (such as industrial accidents). Given the unpredictable nature of these events, it is impossible to plan for every exact scenario. However, our approach is to be as prepared as possible through robust controls and multi-agency collaboration.

The critical nature of this risk lies in it's potential to cause widespread harm and disruption. We recognize that the impact of such events can be devastating, affecting not only the immediate area but also the broader community and economy. Therefore, understanding this risk is essential for effective planning and response.

The following are the possible consequences from our risk register:

- Injury, illness, fatality including physical and mental health
- Reputation damage
- Legal liability
- Social, economic, built and natural impacts on the community
- Social, economic, built and natural impacts on Council infrastructure
- Loss of essential services
- Financial impact
- Inability to meet strategic goals

The controls we have in place, and how they mitigate the risk

We are committed to minimizing risk through proactive measures. While it is acknowledged that zero risk is unattainable, we should aim to reduce risk to through:

- Readiness: Implementing comprehensive emergency plans and conducting regular exercises.
- Reduction: Investing in infrastructure improvements and community education to reduce vulnerability.
- Response: Ensuring a coordinated multi-agency response to manage incidents effectively.
- Recovery: Developing strategies for rapid recovery and support for affected communities.

By adopting a proactive and collaborative approach, we aim to enhance our resilience and ensure the safety and well-being of our communities.

Control	Why is this control in place and how does it mitigate the risk (preventative or corrective)	Level of effectiveness
Threat Analysis (best case/ worst case and most likely scenarios)	Group is currently undertaking work around the Hikurangi subduction zone and the impacts for the Waikato Region. At a local level we are working on three operational plans (flooding, earthquake and industry)	Partially 60%
Monitoring of threats and initiation of processes (WRC Floodroom and Local and Group Duty)	Relevant staff are linked in to national, regional local groups to ensure we are aware of any upcoming threats.	Partially 60%
Waikato Group Emergency Management Office - advice and support	The Waikato Group delivers CDEM through its executives, planners and operational staff of the many agencies involved in CDEM. We have a Councillor and Executive Manager appointed to represent Council on the Joint Committee and Coordinating Executive Group respectively.	Partially 60%
National Emergency Management Agency - advice and support	The National Emergency Management Agency (NEMA) is the Government lead for emergency management. Their goal is to help build a safe and resilient Aotearoa New Zealand by empowering communities before, during and after emergencies.	Partially 60%
Passing on threat warnings and preparedness advice to public	When Council are aware of potential threats these are communicated to the public through various channels.	Partially 60%
Business Continuity Management Policy and Plans (including contracts)	The majority of Council activities have business continuity plans in case of an event.	Partially 60%
Policies, strategies and plans (Mayoral Relief, Welfare Plan (CDC identification) etc)	Council have a number of plans, policies and procedures that will help guide staff in the event.	Partially 60%
Member of the Lifelines group	Council are a member of the Lifelines Group which ensures that we are connected and aligned with other lifeline providers.	Partially 60%
Community partnerships (Welfare / Social / Business Groups)	Council have a number of partnership with community groups that could assist/support/provide advice in any event.	Partially 60%
Training, scenarios, exercises (e.g. all staff to complete foundation training)	Council has a policy that all staff are expected to have undertaken foundational training and a performance measure that requires	Partially 60%

	a training exercise to be held every year.	
Resourcing - IMT: trained staff (intermediate and higher level) to allow for two rosters, including function managers	Council aims to have enough staff for two rosters and this is continually reviewed and the IMT meet as a group at least 4 times a year.	Partially 60%
Communities of Practice	Council has been working collaboratively with other Waikato Council's to establish a compendium. There are also external communities of practices and we are looking to establish internal communities of practices.	Partially 60%
On call staff available	Council have a number of staff on call for critical services.	Partially 60%
Regulatory / Planning Controls (Hazard mapping, LIMs and PIMs)	Council as part of its core function undertakes various duties that support our planning for and transparency of hazards.	Partially 60%
Identify critical employees and ensure controls and cover for their roles	While we could informally identify critical roles and coverage this has not been formally documented.	Partially 10%
Response framework and deployment policy	Council have a CDEM framework including electronic systems, documents established and we use the Waikato Group Deployment Policy.	Partially 60%
Emergency Management Officer work plan	This sets out the work plan for our EMO and is updated every 90 days	Partially 60%
Community Response Planning	This is part of our forward planning and is only in the early stages	Partially 10%
Adaptation Planning (Climate Change River Map)	The Climate Change River Map was part of our response to Climate Change in our LTP and is reported on annually through the Annual Plan.	Partially 10%

The following incidents have stress tested the rigor of the above controls:

- Cyclone Gabrielle
- CDEM exercises
- 2023 earthquakes
- Water supply incidents

Lessons learnt have been documented through:

- Hot and cold debrief of IMT incidents and exercises
- Outcomes of Regional and National Reviews
- Regional collaboration – learning from others

Forward planning actions:

- EMO work planning
- Building and maintaining relationship – iwi, community, essential services
- Recovery planning
- Welfare planning
- Ongoing research – Hikurangi subduction zone
- Regular exercises
- Review of the CDEM Act
- Review of Group Plan
- Operational planning for reasonably foreseeable events
- Updating Business Continuity Planning
- Identifying critical roles and coverage
- Community response planning and adaptation
- Establishing internal communities of practices

8.12 Risk and Assurance Work Programme 2025 - Update February

CM No.: 2995263

Te Kaupapa | Purpose

The purpose of this report is to provide an update to the committee on the work programme.

Rāpopotonga Matua | Executive Summary

Staff have updated the work programme format for the Committee based on feedback from the Risk and Assurance Chair.

An update on scheduled reports and standing items for February is included in the work programme.

Tūtohunga | Recommendation

That:

1. The information be received.

Horopaki | Background

Prior to the commencement of each calendar year the Committee sets a work programme.

While priorities can shift during the year as unexpected issues arise, the work programme is a useful tool to enable Committee members to set their direction and to allow staff to understand the work priorities that need to be achieved.

Staff have updated the work programme for the Committee based on feedback from the Risk and Assurance Chair. The work programme is now more streamlined and is presented on one page.

An update on scheduled reports and standing items for February is included in the work programme.

Ngā Tāpiritanga | Attachments

A⇩. Risk and Assurance Work Programme February update

Ngā waitohu | Signatories

Author(s)	Marsha McMillan **Kaitohu Kāwana | Governance Advisor**	

Approved by	Tamara Kingi **Kaiārahi Kāwana | Governance Team Leader**	
	Sandra Harris **Pou Kaupapahere, Rāngai Mahitahi me te Kāwana | Policy, Partnerships and Governance Manager**	

Item	Team	25-Feb-25		17-Jun-25		30-Sep-25		Dec (Date dependant on elections)	
		Status	Comment	Status	Comment	Status	Comment	Status	Comment
Key			= complete		= scheduled		= incomplete		
Standing items									
Chairs update	PPG								
CEO update	PPG								
Risk Report	PGR								
Review of top risks	Group Managers		- Essential services/infrastructure etc (initially focussing on water/wastewater) - Disasters, weather events and pandemics		- Partnerships with mana whenua, hapuu, iwi and Maaori - Financial strategy - Communicating/engaging with stakeholders		- Political change - climate impacts - compliance/legislative requirements		
Safety and Wellness update	PSW								
Review of significant projects, including an update on risk of compliance with consents	Assets		No update this quarter		An update on 3 key risks: - Matamata Stadium - Matamata Playground - Matamata WWTP upgrade				
Project Management Report	Assets								
Future Ready Update	PGR		No update required, comment included in CEO update						
Update on Work Programme	PPG								
Annual Reports									
IT/web security audit	IT								
Insurance Programme	Property								
LGOIMA Requests	Legal								
Delegations	Legal								
Legislative compliance assessment	Legal								
Risk Management Framework	Risk								
Setting Work Programme/Schedule of Meetings	PPG								
Scheduled Reports									
Self assessment / Review of Charter	PPG						Self assessment circulated ahead of meeting, to be complete by 30 September		Chairs report on self assessment, charter reviewed (TBC)
Long Term Plan / Annual Plan	PPG		No consultation required on Annual Plan, comment included in CEO update		Final Annual Plan		Annual Plan timeline and key risks		
Annual Report	PPG		Six Month Report		Annual Report timeline, key risks, audit scope and fees		Final Annual Report		
Progress tracking on audit recommendations	PPG		24/25 Audit Management Report also included						
Policy Register Review	PPG						Register update		
Policy Review	Various				TBC - 25 February meeting				TBC - 25 February meeting
Procurement Report	Finance								
Business Continuity Plans	Risk								