



Central Tablelands Water

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Central Tablelands Water

CTW Investment Report

28-Feb-26

		Credit Rating	Term (Days)	Rate	Maturity Date	% of Portfolio
Short Term Deposits	\$ 13,100,000.00					83.99%
Westpac Banking Corporation	\$ 500,000.00	AA-	365	4.65%	03/03/26	3.21%
ING - Curve Securities	\$ 500,000.00	A	365	4.68%	11/03/26	3.21%
Bank Vic - Curve Securites	\$ 600,000.00	BBB+	270	4.35%	13/03/26	3.85%
ING - Curve Securities	\$ 500,000.00	A	364	4.65%	13/03/26	3.21%
Bank of QLD - Curve Securities	\$ 500,000.00	A-	182	4.10%	23/03/26	3.21%
ING - Curve Securities	\$ 500,000.00	A	365	4.66%	26/03/26	3.21%
NAB - Curve Securities	\$ 500,000.00	AA-	365	4.55%	02/04/26	3.21%
Unity Bank Ltd	\$ 500,000.00	BBB+	182	4.60%	11/06/26	3.21%
NAB - Curve Securities	\$ 500,000.00	AA-	365	4.00%	02/07/26	3.21%
Unity Bank Ltd	\$ 500,000.00	BBB+	365	4.15%	14/07/26	3.21%
Westpac Banking Corporation	\$ 500,000.00	AA-	365	4.15%	05/08/26	3.21%
MyState - Curve Securities	\$ 500,000.00	BBB+	365	4.15%	03/09/26	3.21%
NAB - Curve Securities	\$ 500,000.00	AA-	367	4.15%	14/09/26	3.21%
NAB - Curve Securities	\$ 500,000.00	AA-	365	4.15%	15/09/26	3.21%
Westpac Banking Corporation	\$ 500,000.00	AA-	365	4.18%	30/09/26	3.21%
NAB - Curve Securities	\$ 500,000.00	AA-	365	4.20%	07/10/26	3.21%
ING - Curve Securities	\$ 500,000.00	A	365	5.03%	16/10/26	3.21%
NAB - Curve Securities	\$ 500,000.00	AA-	365	4.10%	29/10/26	3.21%
ING - Curve Securities	\$ 500,000.00	A	365	4.21%	03/11/26	3.21%
Westpac Banking Corporation	\$ 500,000.00	AA-	367	4.33%	07/11/26	3.21%
Bank Vic - Curve Securites	\$ 500,000.00	BBB+	365	4.40%	18/11/26	3.21%
Bank of QLD - Curve Securities	\$ 500,000.00	A-	367	4.35%	07/12/26	3.21%
Bank Vic - Curve Securites	\$ 500,000.00	BBB+	365	4.45%	08/12/26	3.21%
Westpac Banking Corporation	\$ 500,000.00	AA-	365	4.78%	03/02/27	3.21%
Defence Bank - Curve	\$ 1,000,000.00	BBB+	365	4.05%	25/02/27	6.41%

At Call Bank Accounts	\$ 2,497,676.15					16.01%
Macquarie Bank - Curve Securities	\$ 500,000.00	A+		4.15%	At Call	3.21%
Commonwealth Bank - General Account	\$ 624,273.50	AA-	At Call	3.45%	N/A	4.00%
Commonwealth Bank - BOS Account	\$ 1,373,365.83	AA-	At Call	3.50%	N/A	8.80%
Unity Bank Ltd - Cheque Account	\$ 36.82	BBB+	At Call	0.00%	N/A	0.00%

Total Value of Investment Funds **\$ 15,597,676.15** **100%**

Average Rate on Term Deposits

90 Day BBSW for February 2026	3.9861%
Average Rate on Term Deposits	4.3628%
Margin over 90 day BBSW	0.3767%

Average Term - Short Term Deposits (days) 347

Portfolio by Long Term Credit Rating	Principal Amount	Portfolio %	Policy Limit	Remaining Capacity
AA-	\$ 7,497,639.33	48.07%	100%	52%
A+	\$ 500,000.00	3.21%	100%	97%
A	\$ 2,500,000.00	16.03%	80%	64%
A-	\$ 1,000,000.00	6.41%	80%	74%
BBB+	\$ 4,100,036.82	26.29%	50%	24%
Unrated	\$ -	0.00%	30%	30%
Total	\$ 15,597,676.15	100.00%		

CTW Bank Reconciliation

Balance as per Bank Statement - General Account	\$ 1,997,676.15
Add: Visa card to be processed February 2026	\$ 7,317.13
Add: Receipting 27.02.2026 deposited 02.03.2026	\$ 1,077.43

Balance as per Cash Book - General Account **\$ 2,006,070.71**

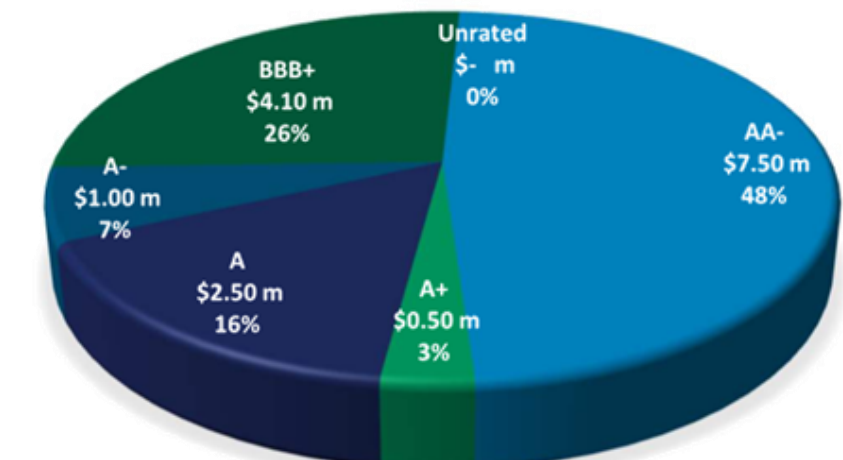
GENERAL FUND

(a) Cash Book Balance	\$ 2,006,070.71
(b) Bank Balance	\$ 2,006,070.71

Portfolio by Investment Type



Portfolio by Credit Rating (\$m)



CTW Investment Report

31-Mar-26

		Credit Rating	Term (Days)	Rate	Maturity Date	% of Portfolio
Short Term Deposits	\$ 13,100,000.00					82.51%
NAB - Curve Securities	\$ 500,000.00	AA-	365	4.55%	02/04/26	3.15%
Unity Bank Ltd	\$ 500,000.00	BBB+	182	4.60%	11/06/26	3.15%
NAB - Curve Securities	\$ 500,000.00	AA-	365	4.00%	02/07/26	3.15%
Unity Bank Ltd	\$ 500,000.00	BBB+	365	4.15%	14/07/26	3.15%
Westpac Banking Corporation	\$ 500,000.00	AA-	365	4.15%	05/08/26	3.15%
MyState - Curve Securities	\$ 500,000.00	BBB+	365	4.15%	03/09/26	3.15%
NAB - Curve Securities	\$ 500,000.00	AA-	367	4.15%	14/09/26	3.15%
NAB - Curve Securities	\$ 500,000.00	AA-	365	4.15%	15/09/26	3.15%
Westpac Banking Corporation	\$ 500,000.00	AA-	365	4.18%	30/09/26	3.15%
NAB - Curve Securities	\$ 500,000.00	AA-	365	4.20%	07/10/26	3.15%
ING - Curve Securities	\$ 500,000.00	A	365	5.03%	16/10/26	3.15%
NAB - Curve Securities	\$ 500,000.00	AA-	365	4.10%	29/10/26	3.15%
ING - Curve Securities	\$ 500,000.00	A	365	4.21%	03/11/26	3.15%
Westpac Banking Corporation	\$ 500,000.00	AA-	367	4.33%	07/11/26	3.15%
Bank Vic - Curve Securites	\$ 500,000.00	BBB+	365	4.40%	18/11/26	3.15%
Bank of QLD - Curve Securities	\$ 500,000.00	A-	367	4.35%	07/12/26	3.15%
Bank Vic - Curve Securites	\$ 500,000.00	BBB+	365	4.45%	08/12/26	3.15%
Westpac Banking Corporation	\$ 500,000.00	AA-	365	4.78%	03/02/27	3.15%
Defence Bank - Curve	\$ 1,000,000.00	BBB+	365	4.05%	25/02/27	6.30%
Westpac Banking Corporation	\$ 500,000.00	AA-	365	4.97%	03/03/27	3.15%
ING - Curve Securities	\$ 500,000.00	A	365	5.14%	11/03/27	3.15%
Bank Vic - Curve Securites	\$ 600,000.00	BBB+	364	5.25%	12/03/27	3.78%
ING - Curve Securities	\$ 500,000.00	A	364	5.23%	12/03/27	3.15%
MyState - Curve Securities	\$ 500,000.00	BBB+	365	5.50%	24/03/27	3.15%
ING - Curve Securities	\$ 500,000.00	A	364	5.44%	25/03/27	3.15%

At Call Bank Accounts	\$ 2,777,140.84					17.49%
Macquarie Bank - Curve Securities	\$ 500,000.00	A+		4.15%	At Call	3.15%
Commonwealth Bank - General Account	\$ 300,580.02	AA-	At Call	3.95%	N/A	1.89%
Commonwealth Bank - BOS Account	\$ 1,976,524.00	AA-	At Call	4.00%	N/A	12.45%
Unity Bank Ltd - Cheque Account	\$ 36.82	BBB+	At Call	0.00%	N/A	0.00%

Total Value of Investment Funds **\$ 15,877,140.84** **100%**

Average Rate on Term Deposits

90 Day BBSW for March 2026	4.3080%
Average Rate on Term Deposits	4.5404%
Margin over 90 day BBSW	0.2324%

Average Term - Short Term Deposits (days) 358

Portfolio by Long Term Credit Rating	Principal Amount	Portfolio %	Policy Limit	Remaining Capacity
AA-	\$ 7,777,104.02	48.98%	100%	51%
A+	\$ 500,000.00	3.15%	100%	97%
A	\$ 2,500,000.00	15.75%	80%	64%
A-	\$ 500,000.00	3.15%	80%	77%
BBB+	\$ 4,600,036.82	28.97%	50%	21%
Unrated	\$ -	0.00%	30%	30%
Total	\$ 15,877,140.84	100.00%		

CTW Bank Reconciliation

Balance as per Bank Statement - General Account	\$ 2,272,413.49
Add: Visa card to be processed March 2026	\$ 4,474.04
Add: Eftpos receipting deposited April 2026	\$ 253.31

Balance as per Cash Book - General Account **\$ 2,277,140.84**

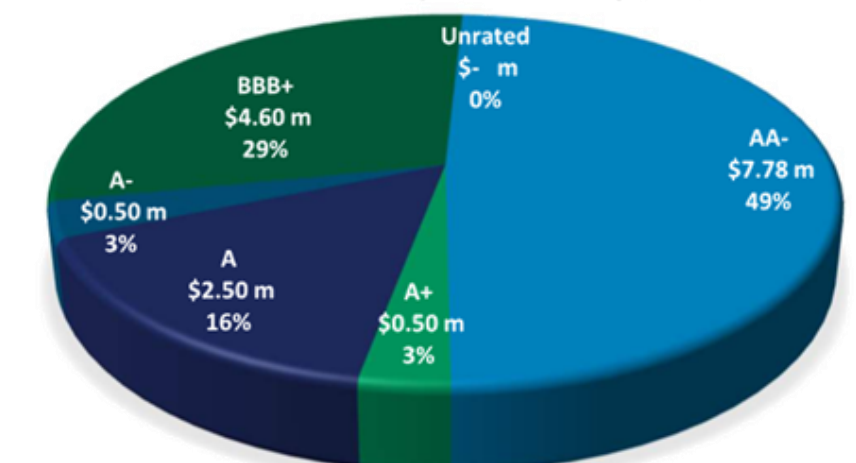
GENERAL FUND

(a) Cash Book Balance	\$ 2,277,140.84
(b) Bank Balance	\$ 2,277,140.84

Portfolio by Investment Type



Portfolio by Credit Rating (\$m)



Quarterly Debt Recovery Performance Report

For Central Tablelands Water – Q2 25



Overview

This report summarises the debt recovery activities for the date accepted the 14th of October with the period ending 24 February 2026. It provides insights into the status of referred accounts, amounts recovered, commitments in place and any remaining balances requiring action.

Key Metrics

Metric	Value
Total Ratepayers Referred	23
Total Referred Debt (\$)	\$35,028
Cash Collected (\$)	\$25,147
Arrangement Balance (\$)	\$1,018
Sale of Land Balance (\$)	\$0
Total Collected (Cash + Commitments) (\$)	\$26,165
Collection Rate (%)	74.7%
Remaining Debt to Collect (\$)	\$8,863
Open Count	8
Closed Count	15
Open Balance (\$)	\$10,571
Overpayments (\$)	\$2,818

Overview of Open Accounts

Category	Count	Open Balance (\$)
Letters Sent	8	\$10,571
Visited	3	\$3,552
Not Yet Visited	5	\$7,018
Arrangements in Place	2	\$1,018
Sale of Land	0	\$0

Performance Summary

The collection rate for the period was 74.7% (based on cash and commitments). The portfolio comprised 23 accounts, with 8 open and 15 closed. The predominant closure channel was other (Phone, SMS, Email). Among open accounts, 3 have been visited and 5 are yet to be visited. Payment arrangements are in place for 2 open accounts (\$ 1,018), and sale of land actions apply to 0 accounts (\$ 0).

Financial Analysis

Metric	Value
Cash Collected	\$25,147
Arrangement Balance	\$1,018
Sale of Land Balance	\$0
Still to Collect	\$9,553
Remaining Debt to Collect	\$8,863
Overpayments	\$2,818

Quarterly Debt Recovery Performance Report
For Central Tablelands Water – Q2 25



Figure 1: Open vs Closed (Case Count)

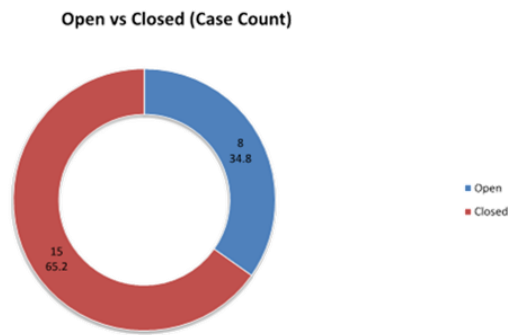


Figure 2: \$ Position (Collected vs Committed vs Still to Collect)

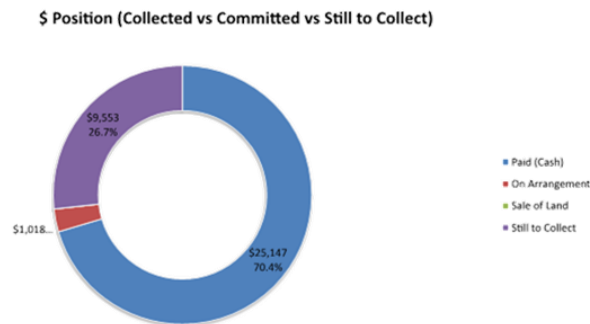
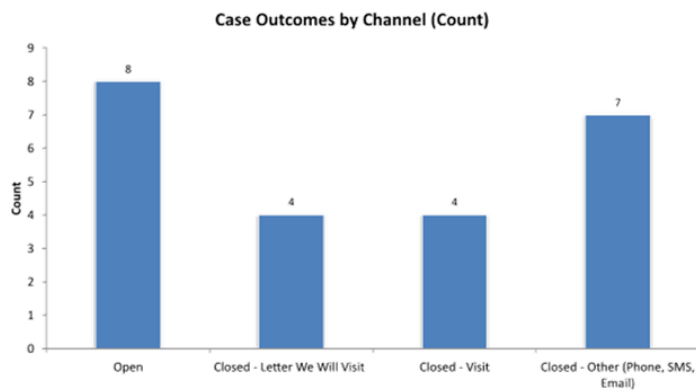


Figure 3: Case Outcomes by Channel (Count)



Quarterly Debt Recovery Performance Report
For Central Tablelands Water – Q2 25



Figure 4: Case Outcomes by Channel (\$)

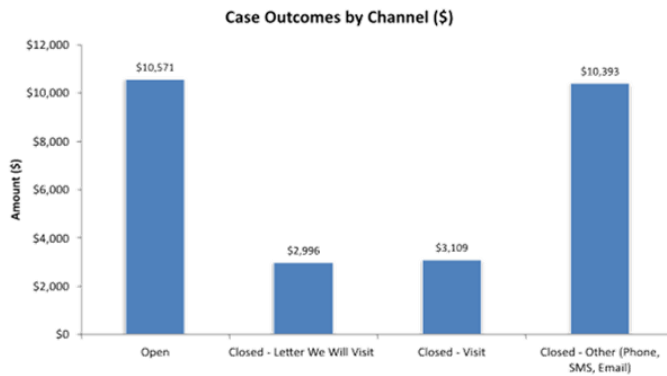


Figure 5: Monthly Closures by Channel

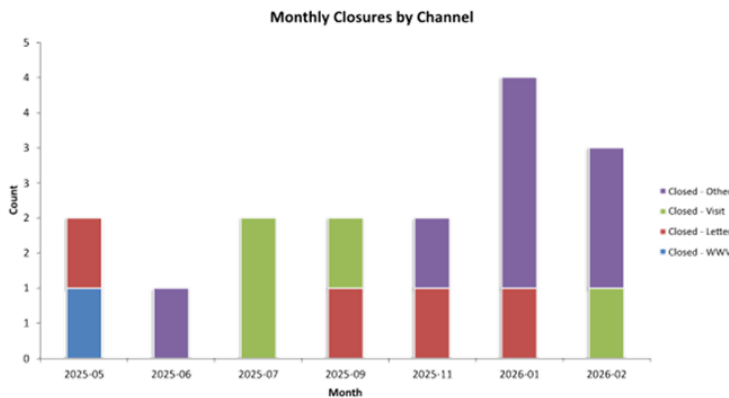
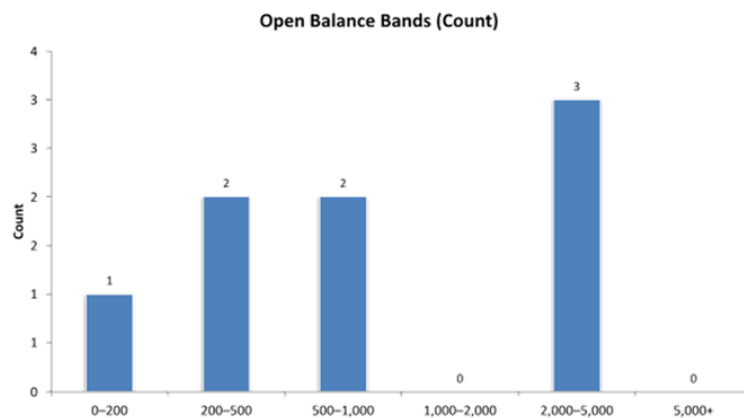


Figure 6: Open Balance Bands (Count)



Quarterly Debt Recovery Performance Report For Central Tablelands Water – Q2 25



Recommendations

- Prioritise follow-up on open accounts with higher balances to accelerate recovery by visiting or moving forward with the digital window for those 5 open accounts that have not been visited.
- Increase field visits to convert unvisited accounts into recoveries.
- Promote payment arrangements to more ratepayers to secure commitments.

Conclusion

Overall, the debt recovery program achieved a collection rate of 74.7% with contributions from cash receipts and commitments. The open book remains manageable but requires targeted actions to progress visits, arrangements and sale of land procedures. Ongoing focus on high-value accounts and proactive engagement will continue to improve recovery outcomes.



Central Tablelands Water
Quarterly Budget Review Statement for the period
1 January 2026 to 31 March 2026

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The following statement is made in accordance with Clause 203(2) of the Local Government (General) Regulations 2021.

It is my opinion that the Quarterly Budget Review Statement for Central Tablelands Water for the quarter ended 31 March 2026 indicates that Council's projected financial position at 30 June 2026 will be satisfactory at year end, having regard to the projected estimates of income and expenditure and the original budgeted income and expenditure.

Signed  Date 20 Apr 2026

Name C. Wright

Responsible Accounting Officer, Central Tablelands Water

Quarterly Budget Review Statement - Financial Overview											
Central Tablelands Water											
Budget review for the quarter ended - 31 March 2026											
Description		Previous Year	Current Year	Approved	Approved	Approved	Revised Budget	Recommended	Projected Year	VARIANCE	ACTUAL YTD
		Actual	Original Budget	Changes	Changes	Changes					
		2024/25	2025/26	Review	Review	Review		changes for	End (PYE)	ORIGINAL	
		\$000's	\$000's	Q1	Q2	Q3	\$000's	council	Result	budget v PYE	
				\$000's	\$000's	\$000's		resolution	2025/26	2025/26	2025/26
								\$000's	\$000's	\$000's	\$000's
Net Operating Result before grants and contributions provided for capital purposes	Consolidated	(361)	(710)	(19)	431	-	(298)	301	3	713	(272)
Operating Result from continuing operations (with capital grants and contributions) excluding depreciation, amortisation and impairment of non financial assets	Consolidated	3,401	4,060	(19)	431	-	4,472	(517)	3,954	1,531	2,715
Borrowings	Total Borrowings	-	-	-	-	-	-	-	-	-	-
	External Restrictions	218	1,218	-	-	-	1,218	(816)	402	(816)	361
	Internal Allocations	12,280	11,342	(1,131)	294	-	10,505	3,259	13,764	2,422	15,016
	Unallocated	500	500	-	-	-	500	-	500	-	500
	Total Cash, Cash Equivalents and Investments	12,998	13,060	(1,131)	294	-	12,223	2,443	14,666	2,422	15,877
Capital	Capital Funding	1,174	1,907	1,252	(294)	-	2,809	(158)	2,706	800	549
	Capital Expenditure	1,174	1,907	1,252	(294)	-	2,809	(158)	2,706	800	549
	Net Capital	-	-	-	-	-	-	-	-	-	-

		Opening Balance	Total Cash Contributions Received	Total Interest Earned	Total Expended	Total Internal Borrowings (to)/from	Held as Restricted Asset	Cumulative balance of internal borrowings (to)/from
		As at 1 July 2025 \$000's	As at this Q \$000's	As at this Q \$000's	As at this Q \$000's	As at this Q \$000's	As at this Q \$000's	As at this Q \$000's
Developer Contributions	Total Developer Contributions	190	134	9	-	-	333	

Income and Expenses Budget Review Statement										
Central Tablelands Water										
Budget review for the quarter ended - 31 March 2026										
Description	Previous Year	Current Year	Approved Changes	Approved Changes	Approved Changes	Revised Budget	Recommended changes for council resolution	Projected Year End (PYE)	VARIANCE	ACTUAL YTD
	Actual 2024/25 \$000's	Original Budget 2025/26 \$000's	Review Q1 \$000's	Review Q2 \$000's	Review Q3 \$000's	\$000's	\$000's	Result 2025/26 \$000's	ORIGINAL budget v PYE 2025/26 \$000's	2025/26 \$000's
INCOME										
Access Charges	2,019	2,415	-	-	-	2,415	-	2,415	-	1,865
User Charges	5,691	6,176	15	-	-	6,191	-	6,191	15	4,503
Other Revenue	93	92	-	(13)	-	78	-	78	(13)	63
Grants & Contributions - Operating	10	250	19	38	-	306	-	306	56	(7)
Interest and Investment Income	612	430	-	153	-	583	97	680	250	103
Other Income	35	-	-	-	-	-	-	-	-	-
Net gain from disposal of assets	136	50	-	-	-	50	-	50	-	132
Total Income from continuing operations	8,595	9,413	34	177	-	9,624	97	9,721	308	6,659
EXPENSES										
Employee benefits and on-costs	2,584	3,331	-	(180)	-	3,151	(121)	3,031	(301)	2,123
Materials & Services	2,971	3,325	52	(73)	-	3,304	(83)	3,221	(104)	2,180
Borrowing Costs	-	-	-	-	-	-	-	-	-	-
Water purchase charges	34	41	-	-	-	41	-	41	-	31
Other Expenses	17	24	-	-	-	24	-	24	-	15
Net Loss from Disposal of Assets	101	-	-	-	-	-	-	-	-	-
Total Expenses from continuing operations excluding depreciation, amortisation and impairment of non financial assets	5,707	6,720	52	(253)	-	6,519	(204)	6,316	(405)	4,349
Operating Result from continuing operations excluding depreciation, amortisation and impairment of non financial assets	2,887	2,692	(19)	431	-	3,104	301	3,405	713	2,310
Depreciation, amortisation and impairment of non financial assets	3,248	3,402	-	-	-	3,402	-	3,402	-	2,582
Surplus / Deficit from continuing operations before capital amounts	(361)	(710)	(19)	431	-	(298)	301	3	713	(272)
Grants and Contributions - Capital	513	1,368	-	-	-	1,368	(818)	549	818	406
Surplus / Deficit from continuing operations after capital amounts	153	657	(19)	431	-	1,070	(517)	552	1,531	133

Notes

(i)

(ii)

(iii) (iii)

(iv) (iv)

Notes

Original Budget +/- approved budget changes in previous quarters = REVISED Budget

Revised Budget +/- recommended changes this quarter = PROJECTED year results

The quarterly recommended changes to the revised budget are to include:

- 1) an explanation for the recommended changes and any impact this will have on the Operational Plan, Delivery Program and Long Term Financial Plan
- 2) any impacts of year to date expenditure on recommended changes to the budget

Explanations are to be in plain English and in a style that is easily understood by readers of non-financial information.

The narrative is important in understanding why budget changes are necessary.

Capital Budget Review Statement										
Central Tablelands Water										
Budget review for the quarter ended - 31 March 2026										
Description	Previous Year	Current Year	Approved Changes	Approved Changes	Approved Changes	Revised Budget	Recommended changes for council resolution	Projected Year	VARIANCE	ACTUAL YTD
	Actual 2024/25 \$000's	Original Budget 2025/26 \$000's	Review Q1 \$000's	Review Q2 \$000's	Review Q3 \$000's			End (PYE) Result 2025/26 \$000's	ORIGINAL budget v PYE 2025/26 \$000's	
CAPITAL FUNDING										
Rates & other untied funding	-	-	-	-	-	-	-	-	-	-
Capital Grants & Contributions	233	-	109	-	-	109	-	109	109	51
Reserves - External Restrictions	91	-	-	-	-	-	-	-	-	-
Reserves - Internally Allocated	816	1,636	1,143	(294)	-	2,430	(158)	2,327	690	388
New Loans	-	-	-	-	-	-	-	-	-	-
Proceeds from sale of assets	35	270	-	-	-	270	-	270	-	110
Total Capital Funding	1,174	1,907	1,252	(294)	-	2,809	(158)	2,706	800	549
CAPITAL EXPENDITURE										
WIP	-	-	-	-	-	-	-	-	-	-
New Assets	338	565	112	-	-	676	(50)	626	62	37
Asset Renewal	836	1,342	1,140	(294)	-	2,133	(108)	2,080	738	512
Other - specify	-	-	-	-	-	-	-	-	-	-
Total Capital Expenditure	1,174	1,907	1,252	(294)	-	2,809	(158)	2,706	800	549
Net Capital Funding - Surplus / Deficit	-	-	-	-	-	-	-	-	-	-

Notes

Original Budget +/- approved budget changes in previous quarters = REVISED Budget

Revised Budget +/- recommended changes this quarter = PROJECTED year results

Where the Total Capital Funding and the Total Capital Expenditure values do not match an explanation is to be provided.

Carry over funding from previous year should be identified and any proposed carry forwards into next financial year are to be explained.

The quarterly recommended changes to the revised budget are to include:

- 1) an explanation for the recommended changes and any impact this will have on the Operational Plan, Delivery Program and Long Term Financial Plan
- 2) any impacts of year to date expenditure on recommended changes to the budget

Explanations are to be in plain English and in a style that is easily understood by readers of non-financial information.

The narrative is important in understanding why budget changes are necessary.

Cash and Investments Budget Review Statement										
Central Tablelands Water										
Budget review for the quarter ended - 31 March 2026										
Description	Previous Year	Current Year	Approved Changes	Approved Changes	Approved Changes	Revised Budget	Recommended changes for council resolution	Projected Year End (PYE) Balance Result 2025/26	VARIANCE ORIGINAL budget v PYE 2025/26	ACTUAL YTD
	Actual Balance 2024/25 \$000's	Original Budget 2025/26 \$000's	Review Q1 \$000's	Review Q2 \$000's	Review Q3 \$000's					
Total Cash, Cash Equivalents & Investments	12,998	13,060	(1,131)	294		12,223	2,443	14,666	1,606	15,877
EXTERNALLY RESTRICTED										
Developer contributions	190	1,190	-			1,190	(816)	374	(816)	333
Specific purpose unexpended grants	2	2	-			2	-	2	-	2
Other contributions	26	26	-			26	-	26	-	26
Total Externally Restricted Cash	218	1,218	-	-	-	1,218	(816)	402	(816)	361
Cash, cash equivalents & investments not subject to external restrictions	12,780	11,842	(1,131)	294	-	11,005	3,259	14,264	2,422	15,516
INTERNAL ALLOCATIONS										
Employee leave entitlements	713	683	-			683	30	713	30	713
Infrastructure replacement	10,136	9,308	(1,131)	294		8,471	3,229	11,700	2,392	12,740
Plant and vehicle replacement	850	730	-			730	11	741	11	982
Development reserve	461	461	-			461	(461)	-	(461)	461
Consultancy	120	160	-			160	-	160	-	120
IT fund	-	-				-	250	250	250	-
Drought fund	-	-				-	200	200	200	-
Total Internally Allocated	12,280	11,342	(1,131)	294	-	10,505	3,259	13,764	2,422	15,016
Unallocated	500	500	-	-	-	500	-	500	-	500

External Restrictions - must be used for a specific purpose and are not to be used for general operations. The funds are bound by legislation or third party agreement that restricts their use.
 Internal Allocations - Council have allocated by resolution or policy to identified programs of work and any forward plans identified by Council. These allocations are at the discretion of council.

Summary Developer Contributions																					
Central Tablelands Water																					
Budget review for the quarter ended - 31 March 2026																					
Description	Opening Balance As as 1 July 2025 \$000's	Contributions Received									Interest Earned			Amounts Expended			Internal Borrowings (to)/from			Held as Restricted Asset As at this Q \$000's	Cumulative balance of internal borrowings (to)/from As at this Q \$000's
		Cash Q1 \$000's	Cash Q2 \$000's	Cash Q3 \$000's	Non-Cash Land Q1 \$000's	Non-Cash Land Q2 \$000's	Non-Cash Land Q3 \$000's	Non-Cash Other Q1 \$000's	Non-Cash Other Q2 \$000's	Non-Cash Other Q3 \$000's	Q1 \$000's	Q2 \$000's	Q3 \$000's	Q1 \$000's	Q2 \$000's	Q3 \$000's	Q1 \$000's	Q2 \$000's	Q3 \$000's		
S64 Contributions	190	51	29	55	-	-	-	-	-	-	-	3	3	3	-	-	-	-	-	-	333
Other																					
Total Developer Contributions	190	51	29	55	-	-	-	-	-	-	-	3	3	3	-	-	-	-	-	-	333

Notes

All developer contributions received are to be disclosed, and distinguished as cash or non cash. Recognition occurs when council gains control over the asset (cash or non cash).

Councils have obligations to provide facilities from contribution revenue levied on developers under the provisions of s7.4, s7.11 and s7.12 of the Environmental Planning and Assessment Act 1979.

Developer contributions may only be expended for the purpose for which the contributions were required, however council may apply contributions according to the priorities established in work schedules for the contribution plan.

'Amounts Expended' only includes monetary expenditure. The result should be a positive and not negative result.

Capital Works Program Central Tablelands Water Budget review for the quarter ended - 31 March 2026									
Description	Current Year	Approved Changes	Approved Changes	Approved Changes	Revised Budget	Recommended changes for council resolution	Projected Year	VARIANCE	ACTUAL YTD
	Original Budget 2025/26 \$000's	Review Q1 \$000's	Review Q2 \$000's	Review Q3 \$000's			End (PYE) Result 2025/26 \$000's		
NEW ASSETS									
Business/Corp System	110	-			110	-	110	-	4
Acquisition of Crown Lands sites relating to existing CTW structures	50	-			50	-	50	-	-
Smart Metering Project	150	-			150	-	150	-	4
Telemetry Upgrades	100	65			165	-	165	65	4
Water Loss Program Meters	-	35			35	-	35	35	12
Blayney Administration Office CCTV	5	-			5	-	5	-	0
Blayney Office - Outdoor Drainage and Yard Seal	100	-			100	-	100	-	1
Water Supply Network									
Gooloogong Bore - Online CHL and Turbidity analyser	50	-			50	(50)	-	(50)	-
Carcoar WTP Reservoir - New - Emergency Grant Funding - Cowra to CTW Project	-	5			5	-	5	5	5
Mains Extension - Derowie Street Manildra	-	6			6	-	6	6	6
Total New Assets Expenditure	565	112	-	-	676	(50)	626	62	37
RENEWALS									
Vehicle Replacements	540	-			540	-	540	-	442
Other Plant and Equipment Replacement	32	-			32	-	32	-	-
Computer Hardware	54	-			54	(33)	21	(33)	9
Blayney Administration Office Indoor Refurbishment	30	-			30	-	30	-	0
Depot Upgrades - Canowindra, Grenfell and Blayney	140	368	(77)		430	-	430	290	-
Canowindra Depot - Refurbishment	-	-	77		77	-	77	77	39
Trunk Mains									
Manildra Reticulation Mains - relocation across new bridge	64	-	(64)		-	-	-	(64)	-
Western Artery	-	19	-		19	-	19	19	1
Reticulation Mains Renewal Program - Blayney, Carcoar, Millthorpe and Canowindra	-	361	(200)		161	(52)	109	109	-
PSV Replacement at Pit 1	-	-	-		-	52	52	52	-
Treatment Plant									
Carcoar WTP - Equipment Renewals	64	-	-		64	-	64	-	13
Carcoar WTP - Chlorine Lifting System	50	-	-		50	-	50	-	0
Blayney WTP - Equipment Renewals	32	-	-		32	-	32	-	4
Carcoar WTP - PLC upgrade	-	70	-		70	-	70	70	-
Water Supply Network									
Quandialla Site Upgrades - Electrical/Telemetry, Bore Site	75	-	-		75	-	75	-	0
Quandialla Site Upgrades - Electrical/Telemetry, Reservoir Site	75	-	-		75	(75)	-	(75)	-
Reservoir access ladders	160	-	-		160	-	160	-	0
Lake Rowlands Destratification upgrades	25	-	-		25	-	25	-	0

Notes

(a)

(a)

(b)

(b)

(a)

Capital Works Program Central Tablelands Water Budget review for the quarter ended - 31 March 2026									
Description	Current Year	Approved Changes	Approved Changes	Approved Changes	Revised Budget	Recommended changes for council resolution	Projected Year End (PYE)	VARIANCE	ACTUAL YTD
	Original Budget 2025/26 \$000's	Review Q1 \$000's	Review Q2 \$000's	Review Q3 \$000's	\$000's	\$000's	Result 2025/26 \$000's	ORIGINAL budget v PYE 2025/26 \$000's	2025/26 \$000's
Bangaroo Booster Pump	-	7	(7)		-	-	-	-	-
Eugowra Booster Pump	-	78	-		78	-	78	78	-
Gooloogong Bore Switchboard	-	114	(114)		-	-	-	-	-
Carcoar Fluoride Plant Upgrade	-	100	-		100	-	100	100	-
Carcoar Town Reservoir - relocate pumps	-	25	(25)		-	-	-	-	-
Insurance Claim - Power Supply Fire - near Cudal Pump Station - DOI 26/3/2025	-	-	-		-	-	-	-	3
Millthorpe Reservoir Recoating	-	-	49		49	-	49	49	-
Grey's Hill Reservoir Recoating	-	-	55		-	-	55	55	-
Canowindra Town Reservoir Renewal - Relining	-	-	11		11	-	11	11	-
Total Asset Renewals Expenditure	1,342	1,140	(294)	-	2,133	(108)	2,080	738	512
Total Capital Expenditure	1,907	1,252	(294)	-	2,809	(158)	2,706	800	549
FUNDING									
Vehicle Sales	270	-			270	-	270	-	110
Plant Restriction	270	-			270	-	270	-	72
Capital Grant Funding	-	109			109	-	109	109	51
Internal Allocations	1,366	1,143	(294)	-	2,159	(158)	2,056	690	316
External Restrictions	-	-			-	-	-	-	-
Total Funding	1,907	1,252	(294)	-	2,809	(158)	2,706	800	549

Notes

Capital Variations
 Central Tablelands Water
 Budget review for the quarter ended - 31 March 2026

Budget variations recommended include the following items:

Notes Details

- (a) Reprogramming of the capital works program from 2025/26 into 2026/27 to align delivery and remaining staff capacity including: Office Equipment \$33k, Quandialla Site Upgrades - Electrical/Telemetry, Reservoir Site \$75k and Gooloogong Bore Turbidity Analyser \$50k.
- (b) Additional project for Pressure Sustaining Valve in Pit 1 with a budget transfer from Reticulation Mains Renewals of \$52k.

Operational Variations
 Central Tablelands Water
 Budget review for the quarter ended - 31 March 2026

Budget variations recommended include the following items:

Notes Details

- (i) Increase operational income due to maintained interest rates on investments and slow capital program increasing investment balance held \$97k.
- (ii) Increase operational expenses; \$18k for mandatory dam risk assessment.
- (iii) Decrease operational expenses; \$20k from meter reading, \$30k from pump stations, \$30k from reservoirs, \$40k from reticulation mains, \$30k from trunk mains, \$20k from telemetry and \$14k from depot expenditure, \$22k from Fringe Benefits Tax and \$15k from consultants to reflect staffing and current actuals and estimated budget for quarter 4.
- (iv) Reprogram \$447k of Section 64 contribution to align to anticipated Occupation Certificate into 2026/27 and remove remaining \$480k budget based on updated assessment.
- (v) Increase capital funding for omitted revote funding of \$100k for Carcoar WTP Fluoride and \$9 for Western Artery Renewal - shown in capital funding in Q1 but omitted on income summary.

Concealed Leak Allowances Granted - Financial Year to Date
 Central Tablelands Water
 Budget review for the quarter ended - 31 March 2026

Total	No of Applications Granted	Total Allowance KIs	Total Allowance Granted \$
Residential	16	1999.09	\$ 8,236.25
Total	16	1999.09	\$ 8,236.25
July to September			
Residential	10	1113.09	\$ 4,585.93
October to December			
Residential	3	593.50	\$ 2,445.22
January to March			
Residential	3	292.50	\$ 1,205.10

Note: Council's Concealed Leaks Policy provides for an allowance to be granted if eligibility criteria are met.

The granting of a leak allowance is at the absolute discretion of Council based upon individual circumstances.
 Property owners are responsible for the maintenance of private water infrastructure on their properties.

**Minutes of the Audit Risk & Improvement Committee Meeting of Central Tablelands
Water held at Blayney Community Centre, on Wednesday, 25 February 2026,
commencing at 11.33am**

Present

Ron Gillard	Chairperson – Independent Member – Voting
Stephen Coates	Independent Member – Voting
Liz Jeremy	Independent Member – Voting
Cr. Craig Gosewisch	Councillor Observer
Katy Henry	Intentus – Auditor
Min Lee	Audit Office
Charlie Harris	General Manager
Lynette Safranek	Executive Manager Corporate Services
Claire Wright	Executive Management Accountant
Achal Deo	Governance & Executive Support Officer - Secretariat

1. WELCOME

The Chairperson opened the meeting at 11.33am and noted that this was his first meeting in the role of Chairperson. He acknowledged that, in line with previous practices, all items would be resolved by consensus. Additionally, the minutes would reflect any instances of dissent. This approach will be followed in all future ARIC meetings.

Proceedings in brief:

The Committee noted all items are resolved by consensus and that, its minutes will record any instances of dissent.

2. ACKNOWLEDGEMENT OF COUNTRY

The Chairperson gave an acknowledgement of country.

3. DECLARATION OF ANY CONFLICT OF INTEREST

The Chairperson and the independent members made standing declarations that they are also members of other Council ARICs. Any changes to these standing declarations will be advised as required.

4. DECLARATION OF ANY UNETHICAL BEHAVIOURS REPORTED TO COUNCIL

Nil

This declaration to be included in the Governance Report in future and removed from the agenda.

5. APOLOGIES FOR NON-ATTENDANCE

Nil

This is Page No. 1 of the Minutes of the Audit Risk & Improvement Committee Meeting held 25 February 2026.

6. CONFIRMATION OF MINUTES**6.1) MINUTES OF THE AUDIT RISK & IMPROVEMENT COMMITTEE HELD ON 13 NOVEMBER 2025****RESOLVED:**

That the Minutes of the Audit Risk & Improvement Committee of Central Tablelands Water, held on 13 November 2025, be confirmed.

Proceedings in brief:

The chairperson added a new item 6.2 Matters Arising to the Agenda.

6.2) MATTERS ARISING**RESOLVED:**

13 November 2025 Agenda 7.9: The Chair stated that he believes that due to a conflict of interest with the agenda item, the Committee members were unable to 'endorse' the recommendation. The Committee members agreed with the statement by the Chair to "remove the word endorse from Item 7.9 of the previous meeting".

7. REPORTS OF STAFF**7.1) GENERAL MANAGER UPDATE (CM.AG.1)****RESOLVED:**

That Audit Risk & Improvement Committee note the General Manager update.

Proceedings in brief:

Item 7.3 was moved forward to allow the Auditors to discuss 7.2 and leave the meeting.

Katy introduced Min Lee from the Audit Office, who has replaced Farisha Ali as the Auditor. Katy provided an overview of the 2025/26 Audit Engagement Letter.

7.3) 2025/26 AUDIT ENGAGEMENT LETTER (CA.CO.1)**RESOLVED:**

That the Audit Risk & Improvement Committee note the 2025/26 Audit Engagement Letter.

Katy Henry and Min Lee left the meeting at 12.10pm.

This is Page No. 2 of the Minutes of the Audit Risk & Improvement Committee Meeting held 25 February 2026.

- 7.2) **QUARTERLY BUDGET REVIEW STATEMENT - 31 DECEMBER 2025 (FM.FR.1)**
- RESOLVED:**
- The Committee note the Quarterly Budget Review Statements as presented to Council 18 February 2025.
- 7.4) **AUDIT ACTIONS UPDATE (CM.AU.3)**
- RESOLVED:**
- That the Audit Risk & Improvement Committee note the report regarding progress of Audit recommendations.
- 7.5) **DRINKING WATER MANAGEMENT SYSTEM (DWMS) INTERNAL AUDIT (CA.CO.1)**
- RESOLVED:**
- That Audit Risk & Improvement Committee Note the Drinking Water Management System Internal Audit and the staff actions in relation to recommendations.
- 7.6) **POLICY REVIEWS (CM.PL.1)**
- RESOLVED:**
- That ARIC Note the updated Council endorsed policies.
- 7.7) **RISK REGISTER REVIEW (GO.AM.1)**
- RESOLVED:**
- That Audit Risk & Improvement Committee Note the Risk Register presented in this report.
- 7.8) **GENERAL MANAGER ATTESTATION AND 4-YEAR WORKPLAN (CA.CO.1)**
- RESOLVED:**
- That the Audit Risk & Improvement Committee noted the report and for the Chair to assist to finalise the General Manager Attestation for Year Ended 2024/25 and the draft 4-year Workplan out of session, and the report to be presented back to the May ARIC meeting.
- 7.9) **DELIVERY PROGRAM 6-MONTH PROGRESS REPORT (CA.CO.1)**
- RESOLVED:**
- That Audit Risk & Improvement Committee note the Delivery Program 6-month progress report covering the period July to December 2025.

This is Page No. 3 of the Minutes of the Audit Risk & Improvement Committee Meeting held 25 February 2026.

7.10) CORPORATE SERVICES UPDATE (CM.CP.2)**RESOLVED:**

That the Audit Risk & Improvement Committee note the information provided within the Corporate Services Update.

8. GENERAL BUSINESS

The Chair raised the need to review and potentially revise the Internal Audit Charter to ensure it complies with the updated global internal audit standards 2025. This matter will be followed up and addressed with the Executive Manager Corporate Services prior to the next meeting.

9. NEXT MEETING

Next Meeting: The next meeting of Central Tablelands Water will be held at Blayney Community Centre on Wednesday, 6 May 2026 at 11.30am

10. CONCLUSION OF THE MEETING

There being no further business, the Chairperson declared the meeting closed at 1.06pm.



Internal audit and risk management attestation statement for the 2024/25 financial year for Central Tablelands Water

I am of the opinion that Central Tablelands Water (CTW) has an audit, risk and improvement committee, risk management framework and internal audit function that operate in compliance with the following requirements except as may be otherwise provided below:

Audit, Risk and Improvement Committee

	Requirement	Compliance
1.	CTW has appointed an audit, risk and improvement committee that comprises of an independent chairperson and at least two independent members (section 428A of the <i>LG Act 1993</i> , section 216C of the <i>Local Government (General) Regulation 2021</i>).	Compliant
2.	The chairperson and all members of CTW's audit, risk and improvement committee meet the relevant independence and eligibility criteria prescribed under the <i>LG (General) Regulation 2021</i> and have not exceeded the membership term limits prescribed under the Regulation (sections 216D, 216E, 216F, 216G of the <i>LG (General) Regulation 2021</i>).	Compliant
3.	CTW has adopted terms of reference for its audit, risk and improvement committee that are informed by the model terms of reference approved by the Chief Executive of the OLG and the committee operates in accordance with the terms of reference (section 216K of the <i>Local Government (General) Regulation 2021</i>).	Compliant
4.	CTW provides the audit, risk and improvement committee with direct and unrestricted access to the General Manager, other senior management, the information, and resources necessary to exercise its functions (section 216L of the <i>LG (General) Regulation 2021</i>).	Compliant
5.	CTW's audit, risk and improvement committee exercises its functions in accordance with a four-year strategic work plan that has been endorsed by the governing body and an annual work plan that has been developed in consultation with the governing body and senior management (Core requirement 1 of the OLG's <i>Guidelines for Risk Management and Internal Audit for Local Government in NSW</i>).	Non-compliant
6.	CTW's audit, risk and improvement committee provides the governing body with an annual assessment each year, and a strategic assessment of each council term of the matters listed in section 428A of the <i>LG Act 1993</i> reviewed during that term (Core requirement 1 of the OLG's <i>Guidelines for Risk Management and Internal Audit for LG in NSW</i>).	Compliant (Nov 2025 – Annual Report)
7.	The governing body of CTW reviews the effectiveness of the audit, risk and improvement committee at least once each council term (Core requirement 1 of the OLG's <i>Guidelines for Risk Management and Internal Audit for Local Government in NSW</i>).	Compliant (Dec 2025)



Membership

The chairperson and membership of the audit, risk and improvement committee are:

Chairperson	Donna Rygate	August 2021	November 2025
Independent member	Liz Jeremy	August 2024	August 2028
Independent member	Stephen Coates	May 2025	May 2029
CTW member	Cr Craig Gosewisch	October 2024	October 2028

Risk Management

	Requirement	Compliance
8.	CTW has adopted a risk management framework that is consistent with current Australian risk management standard and that is appropriate for the CTW's risks (section 216S of the <i>LG (General) Regulation 2021</i>).	Compliant (review due 2026)
9.	CTW's audit, risk and improvement committee reviews the implementation of its risk management framework and provides a strategic assessment of its effectiveness to the governing body each council term (section 216S of the <i>LG (General) Regulation 2021</i>).	Compliant (2022)

Internal Audit

	Requirement	Compliance
10.	CTW has an internal audit function that reviews the council's operations and risk management and control activities (section 216O of the <i>LG (General) Regulation 2021</i>).	Compliant
11.	CTW's internal audit function reports to the audit, risk and improvement committee on internal audit matters (sections 216M, 216P and 216R of the <i>LG (General) Regulation 2021</i>).	Compliant
12.	CTW's internal audit function is independent and internal audit activities are not subject to direction by the CTW staff (section 216P of the <i>LG (General) Regulation 2021</i>).	Compliant
13.	CTW has adopted an internal audit charter that is informed by the model internal audit charter approved by the Chief Executive of the OLG and the internal audit function operates in accordance with the charter (section 216O of the <i>LG (General) Regulation 2021</i>).	Compliant
14.	CTW has appointed a member of staff to direct and coordinate internal audit activities (section 216P of the <i>LG (General) Regulation 2021</i>).	Compliant
15.	Internal audit activities are conducted in accordance with International Professional Practices Framework (Core requirement 3 of the OLG's <i>Guidelines for Risk Management and Internal Audit for LG in NSW</i>).	Compliant
16.	CTW provides the internal audit function with direct and unrestricted access to staff, the audit, risk and improvement committee, and the information and resources necessary to undertake internal audit activities (section 216P of the <i>LG (General) Regulation 2021</i>).	Compliant



17.	CTW's internal audit function undertakes internal audit activities in accordance with a four-year strategic work plan that has been endorsed by the governing body and an annual work plan that has been developed in consultation with the governing body and senior management (Core requirement 3 of the OLG's <i>Guidelines for Risk Management and Internal Audit for LG in NSW</i>).	Non-compliant
18.	CTW's audit, risk and improvement committee reviews the effectiveness of the internal audit function and reports the outcome of the review to the governing body each council term (section 216R of the <i>Local Government (General) Regulation 2021</i>).	Compliant

Non-compliance with the *Local Government (General) Regulation 2021*

I advise that CTW has not complied with the following requirements prescribed under the *LG (General) Regulation 2021* with respect to the operation of its audit, risk and improvement committee and risk management.

Non-compliance	Reason	Alternative measures being implemented	How the alternative measures achieve equivalent outcomes
5. CTW's ARIC exercises its functions in accordance with a four-year strategic work plan that has been endorsed by the governing body and an annual work plan that has been developed in consultation with the governing body and senior management	<p>The 4-Year Strategic Work Plan was in place and endorsed, but an Annual Work Plan for 2024/25 remained in draft during the reporting period.</p> <p>Finalisation was not achieved because CTW was preparing for several forthcoming organisational changes — including a planned procurement system implementation, redevelopment of key corporate policies, and restructure of management positions.</p>	Internal audit continued delivering scheduled audits under the strategic plan, ensuring core assurance activities proceeded.	The development and implementation of a formal Annual Work Plan for 2025/26 will restore full compliance and ensure ARIC's activities are properly structured, risk-aligned, and consistent with the endorsed 4-year plan.



<p>17. CTW's internal audit function undertakes internal audit activities in accordance with a 4-year strategic work plan that has been endorsed by the governing body and an annual work plan that has been developed in consultation with the governing body and senior management</p>	<p>Refer abo The 4-Year Strategic Work Plan was in place and endorsed, but an Annual Work Plan for 2024/25 remained in draft during the reporting period.</p> <p>Finalisation was not achieved because CTW was preparing for several forthcoming organisational changes — including a planned procurement system implementation, redevelopment of key corporate policies, and restructure of management positions.</p>	<p>Internal audit continued delivering scheduled audits under the strategic plan, ensuring core assurance activities proceeded.</p>	<p>The development and implementation of a formal Annual Work Plan for 2025/26 will restore full compliance and ensure ARIC's activities are properly structured, risk-aligned, and consistent with the endorsed 4-year plan.</p>
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These processes, including the alternative measures implemented, demonstrate that CTW has established and maintained frameworks, systems, processes and procedures for appropriately managing audit and risk within CTW.

Lynette Safranek
Acting General Manager

16 February 2026



Audit, Risk & Improvement Committee
Annual and 4-Year Work Plan (endorsed dd/mm/yyyy)

DRAFT

Plan Ref #	Terms of Reference Requirement [per Schedule 1 (s.428A of Act)]	Frequency (minimum)	Source / Supporting Documents and/or Actions Required	Yr 1 Q1 Aug	Yr 1 Spec Mtg	Yr 1 Q2 Nov	Yr 1 Q3 Feb	Yr 1 Q4 May	Yr 2	Yr 3	Yr 4	Committee Report required	Responsible Officer
Internal Audit			Principle: The Council has an effective internal audit function and receives maximum value from its internal audit activities.										
1	Provide overall strategic oversight of internal audit activities	Annual	IA Projects / IA Coord	x					x	x	x	N/A	
2	Act as a forum for communication between the governing body, general manager, senior management, the internal audit function and external audit	Always		x	x	x	x	x	x	x	x	Minutes of meeting	EMCS
3	Coordinate, as far as is practicable, the work programs of internal audit and other assurance and review functions	Annual	IA Plan	x					x	x	x	Audit Plan	EMCS
4	<i>Review and advise the Council:</i>												
4.1	on whether CTW is providing the resources necessary to successfully deliver the internal audit function	Annual	Meet with IAC / Review IA Function	x					x	x	x	Annual Report	Chair
4.2	if CTW is complying with internal audit requirements, including conformance with International Professional Practices Framework	4 Yr	Review IA Function & Charter								x	N/A	
4.3	if CTW's internal audit charter is appropriate	Annual	IA Charter	x					x	x	x	Review of IA Charter	Chair
4.4	whether the internal audit policies and procedures and audit/risk methodologies used by CTW are suitable	4 Yr	Review IA Policies & Procedures								x	Annual Report	Chair
4.5	of the strategic four-year work plan and annual work plan of internal audits to be undertaken by CTW's internal audit function	Annual	IA Plans	x					x	x	x	Annual & 4 Yr Work Plan	EMCS
4.6	if CTW's internal audit activities are effective, including the performance of the IAC and the internal audit function	Annual	Approve IA Scopes / Assess IA Function	x					x	x	x		
4.7	of the findings and recommendations of internal audits conducted, and corrective actions needed to address issues raised	Qtr	IA Project Reports	x		x	x	x	x	x	x	IA & Review Reports	EMCS
4.8	of the implementation by CTW of these corrective actions	Qtr	IA Action Plan	x		x	x	x	x	x	x	Rec. Action Plan	EMCS
4.9	on the appointment of the IAC	As Required	during selection process									Appoint. Report	EMCS
4.10	on the appointment of the IA external providers	As Required	during selection process									Quotation updates	EMCS
4.11	if the internal audit function is structured appropriately and has sufficient skills and expertise to meet its responsibilities	Annual	Meet IAC / Review	x					x	x	x	Annual Report	Chair
External Audit			Principle: The Council receives maximum value from its external audit activities.										
5	Act as a forum for communication between the governing body, general manager, senior management, the internal audit function and external audit	Always		x	x	x	x	x	x	x	x	N/A	

**DRAFT**

**Audit, Risk & Improvement Committee
Annual and 4-Year Work Plan (endorsed dd/mm/yyyy)**

Plan Ref #	Terms of Reference Requirement [per Schedule 1 (s.428A of Act)]	Frequency (minimum)	Source / Supporting Documents and/or Actions Required	Yr 1 Q1 Aug	Yr 1 Spec Mtg	Yr 1 Q2 Nov	Yr 1 Q3 Feb	Yr 1 Q4 May	Yr 2	Yr 3	Yr 4	Committee Report required	Responsible Officer
6	Coordinate as far as is practicable, the work programs of internal audit and external audit	As Required										N/A	
7	<i>Provide input and feedback on the:</i>												
7.1	financial statements	Annual	[Draft and/or Final] Audited Fin Stmt	x	x	x			x	x	x	Financial Statements	EMA
7.2	performance audit coverage proposed by external audit	Annual	Annual Engagement Plan				x		x	x	x	Annual Eng Plan	GM
7.3	external audit services provided	Annual	Audit Mgmt Letters / AONSW Survey		x	x	x		x	x	x	Management Letters	GM
8	Review all external plans and reports in respect of planned or completed audits and monitor council's implementation of audit recommendations	Qtr	Annual Engagement Plan / Audit Mgmt Letters / Ext Audit Action List	x		x	x	x	x	x	x	Recommendations Action Plan	EMCS
9	Provide advice to the governing body and/or general manager on action taken on significant issues raised in relevant external audit reports and better practice guides	Annual	Final Audit Mgmt Letter / Annual Engagement Plan		x	x	x		x	x	x	Annual Eng Plan / Management Letters	EMCS
	Risk Management	Principle: The Council has an effective risk management framework and internal controls that successfully identify and manage the risks it faces.											
10	<i>Review and advise the Council:</i>												
10.1	if CTW has in place a current and appropriate risk management framework that is consistent with the Australian risk management standard	Annual	Review RMF				x		x	x	x	Annual Risk Management Report	EMCS
10.2	whether CTW is providing the resources necessary to successfully implement its risk management framework	Annual	Meet with IAC / Review RMF				x		x	x	x	ARIC Annual Report	ARIC Chair
10.3	whether CTW's risk management framework is adequate and effective for identifying and managing the risks CTW faces, including those associated with individual projects, programs and other activities	4 Yr	Review of RMF / IA Project Reports							x			ARIC Chair
10.4	if risk management is integrated across all levels of CTW and across all processes, operations, services, decision-making, functions and reporting	4 Yr	Review of RMF / IA Project Reports							x			ARIC Chair
10.5	of the adequacy of risk reports and documentation, for example, CTW's risk register and risk profile	Annual	RMF Risk Profile & Risk Appetite / Risk Register(s) / ARIC Meeting Papers				x		x	x	x	Strategic Risk Register	EMCS

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**Audit, Risk & Improvement Committee
Annual and 4-Year Work Plan (endorsed dd/mm/yyyy)**

Plan Ref #	Terms of Reference Requirement <i>[per Schedule 1 (s.428A of Act)]</i>	Frequency (minimum)	Source / Supporting Documents and/or Actions Required	Yr 1 Q1 Aug	Yr 1 Spec Mtg	Yr 1 Q2 Nov	Yr 1 Q3 Feb	Yr 1 Q4 May	Yr 2	Yr 3	Yr 4	Committee Report required	Responsible Officer	
10.6	whether a sound approach has been followed in developing risk management plans for major projects or undertakings	Qtr	Major Projects Report	x		x	x	x	x	x	x	Only when major projects undertaken	GM	
10.7	whether appropriate policies and procedures are in place for the management and exercise of delegations	4 Yr	Review of Delegations / IA Projects					x				Delegations Register & Amended Policies to Council	EMCS	
10.8	if CTW has taken steps to embed a culture which is committed to ethical and lawful behaviour	4 Yr	Council Report / Code of Conduct / Fraud and Corruption Policy / Risk Register(s) / IA Reports					x					EMCS	
10.9	if there is a positive risk culture within CTW and strong leadership that supports effective risk management	Annual	IA Project Reports / Risk Register(s)					x	x	x	x	Strategic Risk Register	EMCS	
10.10	of the adequacy of staff training and induction in risk management	Annual	Council Report to ARIC / IA Project Reports / Risk Register(s)					x	x	x	x		EMCS	
10.11	how CTW's risk management approach impacts on CTW's insurance arrangements	Annual	Insurance Report(s) / Council Report to ARIC					x	x	x	x	Report on Insurances	EMCS	
10.12	of the effectiveness of CTW's management of its assets	4 Yr	Council Report to ARIC / IA Project Reports						x			Audited Fin. Statements	EMA	
10.13	of the effectiveness of business continuity arrangements, including business continuity plans, disaster recovery plans and the periodic testing of these plans	Annual	Council Report to ARIC / IA Project Reports / BCP				x		x	x	x	BCP Annual Report	EMCS	
	Internal Controls		Principle: The Council has an effective risk management framework and internal controls that successfully identify and manage the risks it faces.											
11	<i>Review and advise the Council:</i>													
11.1	whether CTW's approach to maintaining an effective internal audit framework, including over external parties such as contractors and advisors, is sound and effective	4 Yr	Review of IA Charter									x	Review of IA Charter	EMCS
11.2	whether CTW has in place relevant policies and procedures and that these are periodically reviewed and updated	Annual	Policy and SWP Register / IA Project Reports				x		x	x	x	Prescribed Functions Activities	EMCS	
11.3	whether appropriate policies and procedures are in place for the management and exercise of delegations	4 Yr	Review of Delegations / IA Projects					x				Delegations	EMCS	
11.4	whether staff are informed of their responsibilities and processes and procedures to implement controls are complied with	4 Yr	Review of Delegations / IA Projects					x				Delegations	EMCS	
11.5	if CTW's monitoring and review of controls is sufficient	Annual	IA & Ext Audit Action Lists / IA Project Reports / IA Plan				x		x	x	x			



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Plan Ref #	Terms of Reference Requirement [per Schedule 1 (s.428A of Act)]	Frequency (minimum)	Source / Supporting Documents and/or Actions Required	Yr 1 Q1 Aug	Yr 1 Spec Mtg	Yr 1 Q2 Nov	Yr 1 Q3 Feb	Yr 1 Q4 May	Yr 2	Yr 3	Yr 4	Committee Report required	Responsible Officer
11.6	if internal and external audit recommendations to correct internal control weaknesses are implemented appropriately	Qtr	IA & Ext Audit Action Lists	x		x	x	x	x	x	x	Sch of Recommend.	EMCS
Compliance			Principle: The Council has an effective compliance framework that ensures it is complying with its legal obligations and other governance and contractual requirements when undertaking its functions.										
12	<i>Review and advise the Council:</i>												
12.1	of the adequacy and effectiveness of CTW's compliance framework	4 Yr	Review of Compliance Framework / IA Project Reports							x		Leg. Compliance Register	EMCS
12.2	on whether CTW's has appropriately considered legal and compliance risks as part of its risk management framework	4 Yr	Review of RMF / IA Project Reports							x			
12.3	on whether CTW's manages its compliance with applicable laws, regulations, policies, procedures, codes, and contractual arrangements	4 Yr	Review of Compliance Framework / Council Report to ARIC / IA Project Reports							x		Leg. Compliance Register	EMCS
12.4	on whether appropriate processes are in place to assess compliance	4 Yr	Review of Compliance Framework / Council Report to ARIC / IA Project Reports							x		Leg. Compliance Status	EMCS
Fraud and Corruption			Principle: The Council has an effective fraud and corruption control framework in place that minimises the incidence of fraud and corruption.										
13	<i>Review and advise the Council:</i>												
13.1	of the adequacy and effectiveness of CTW's fraud and corruption prevention framework and activities	4 Yr	Review of Fraud and Corruption Prevention Framework / IA Project Reports							x		IA Report	EMCS
13.2	whether CTW has appropriate processes and systems in place to capture and effectively investigate fraud-related information	Annual	Fraud Policy / Fraud Control Plans / Self Assessment Tool / Council Report to ARIC / IA Project Reports	x					x	x	x	Fraud Policy / IA Report	EMCS
Financial Management			Principle: The Council has an effective financial management framework, sustainable financial position and positive financial performance.										
14	<i>Review and advise the Council:</i>												
14.1	if CTW is complying with accounting standards and external accountability requirements	Annual	Audit Mgmt Letters / Final Audited Fin Stmts		x	x			x	x	x	Financial Statements	EMA
14.2	of the appropriateness of the Council's/ accounting policies and disclosures	Annual	Audit Mgmt Letters / Final Audited Fin Stmts		x	x			x	x	x	Financial Statements	EMA
14.3	of the implications for CTW of the findings of external audits and performance audits and the responses and implementation of recommendations	Annual	Audit Mgmt Letters / Final Audited Fin Stmts / Ext Audit Action List		x	x			x	x	x	Schedule of recommendations	EMCS

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**Audit, Risk & Improvement Committee
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Plan Ref #	Terms of Reference Requirement <i>[per Schedule 1 (s.428A of Act)]</i>	Frequency (minimum)	Source / Supporting Documents and/or Actions Required	Yr 1 Q1 Aug	Yr 1 Spec Mtg	Yr 1 Q2 Nov	Yr 1 Q3 Feb	Yr 1 Q4 May	Yr 2	Yr 3	Yr 4	Committee Report required	Responsible Officer
14.4	whether CTW's financial statement preparation procedures and timelines are sound	Annual	Annual Engagement Plan / Council Report to ARIC / Audit Mgmt Letters / Ext Audit Action List				x		x	x	x	EMA Report	EMA
14.5	the accuracy of CTW's annual financial statements prior to external audit, including: <ul style="list-style-type: none"> management compliance/representations significant accounting and reporting issues the methods used by CTW to account for significant or unusual transactions and areas of significant estimates or judgements appropriate management signoff on the statements 	Annual	Draft Fin Stmts / Council Report to ARIC / Audit Mgmt Letters / Ext Audit Action List	x	x				x	x	x	Financial Statements	EMA
14.6	if effective processes are in place to ensure financial information included in CTW's annual report is consistent with signed financial statements	Annual	Draft Council Annual Report / (Draft or Final) Audited Fin Stmts		x	x			x	x	x	Financial Statements	EMA
14.7	if CTW's financial management processes are adequate	Annual	IA & Ext Audit Action List / IA Project Reports / Audit Mgmt Letters / QBR's			x			x	x	x	EMA Report	EMA
14.8	the adequacy of cash management policies and procedures	Annual	Cash Mgmt and Investment Policies / QBR's / Council Cash & Investment Report / IA Projects / Audit Mgmt Letters			x			x	x	x	EMA Report	EMA
14.9	if there are adequate controls over financial processes, for example: <ul style="list-style-type: none"> appropriate authorisation and approval of payments and transactions adequate segregation of duties timely reconciliation of accounts and balances review of unusual and high value purchases 	Annual	Audit Mgmt Letters / IA Projects / IA & Ext Audit Action List / Council Report to ARIC			x			x	x	x	EMA Report	EMA
14.10	if policies and procedures for management review and consideration of the financial position and performance of CTW are adequate	4 Yr	Budget Policy/Procedure Review / IA Projects / Audit Mgmt Letters / Council Report to ARIC						x			Review of LTFP	EMA

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14.1	if CTW's grants and tied funding policies and procedures are sound	4 yr	Grant Funding Policy/Procedure Review / IA Projects / Audit Mgmt Letters / Council Report to ARIC						x			EMA Report	EMA
Governance			Principle: The Council has an effective governance framework to ensure it is appropriately directing and controlling the management of the Council.										
15	<i>Review and advise the Council regarding its governance framework:</i>												
15.1	decision-making processes	Annual	Policy and SWP Register / IA Project Reports				x		x	x	x		
15.2	implementation of governance policies and procedures	Annual	Policy and SWP Register / IA Project Reports				x		x	x	x		
15.3	reporting lines and accountability	4 Yr	Organisation Structure / Delegations Register / Council Report to ARIC					x				Review of Org. Structure	GM
15.4	assignment of key roles and responsibilities	4 Yr	Organisation Structure / Delegations Register / Council Report to ARIC					x				Delegations Register	EMCS
15.5	committee structure	4 Yr	Council Report to ARIC					x					
15.6	management oversight responsibilities	Annual	Organisation Structure / Delegations Register / Policy and SWP Register / IA Project Reports				x		x	x	x		
15.7	human resources and performance management activities	4 Yr	Council Report to ARIC / IA Project Reports						x				
15.8	reporting and communication activities	4 Yr	Council Report to ARIC / IA Project Reports						x				
15.9	information and communications technology (ICT) governance	Annual	Council Report to ARIC / IA Project Reports					x	x	x	x	Review of ICT Strategic Plan	EMCS
15.1	management and governance of the use of data, information and knowledge	4 Yr	Council Report to ARIC / IA Project Reports						x			Review of Framework	EMCS
Strategic Planning			Principle: The Council has an effective framework that ensures it achieves its strategic plans and objectives under the integrated planning and reporting (IP&R) framework.										
16	<i>Review and advise the Council:</i>												
16.1	of the adequacy and effectiveness of CTW's integrated, planning and reporting (IP&R) processes	Qtr	Council Report to ARIC / QBR's / Budget / Council Annual Report	x		x	x	x	x	x	x	Prescribed Functions Activities	EMCS

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Annual and 4-Year Work Plan (endorsed dd/mm/yyyy)**

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16.2	if appropriate reporting and monitoring mechanisms are in place to measure progress against objectives	Qtr	Council Report to ARIC / QBR's / Budget / Council Annual Report	x		x	x	x	x	x	x	Prescribed Functions Activities	EMCS
16.3	whether CTW is successfully implementing and achieving its IP&R objectives and strategies	Annual	Summary of IP&R Documents / Council Annual Report / Council Report to ARIC			x			x	x	x	IP&R Docs / CTW Annual Report	EMCS
Service Reviews & Business Improvement			Principle: The Council has an effective framework to ensure it is delivering services and conducting its business and functions to an expected standard.										
17	Act as a forum for communication and monitoring of any audits conducted by external bodies and the implementation of corrective actions (for example, NSW government agencies, Commonwealth government agencies, insurance bodies)	Always		x	x	x	x	x	x	x	x	N/A	
18	<i>Review and advise the Council:</i>												
18.1	if CTW has robust systems to set objectives and goals to determine and deliver appropriate levels of service to the community and business performance	4 Yr	Review Service Management Framework / Council Annual Report / IA Project Reports / Council Report to ARIC						x			IP&R / CTW Annual Report / Review of SR Framework	EMCS
18.2	if appropriate reporting and monitoring mechanisms are in place to measure service delivery to the community and overall performance	Annual	Council Annual Report / IA Project Reports / Council Report to ARIC			x			x	x	x	IP&R / CTW Annual Report	EMCS
18.3	how CTW can improve its service delivery and performance of its business and functions generally	Always		x	x	x	x	x	x	x	x		
Performance Data Measurement			Principle: The Council's performance management framework ensures the Council can measure its performance and if it is achieving its strategic goals.										
19	<i>Review and advise the Council:</i>												
19.1	if CTW has a robust system to determine appropriate performance indicators to measure the achievement of its strategic objectives	4 Yr	Review Performance Data Framework / IA Project Reports / Council Report to ARIC						x				EMCS
19.2	if the performance indicators CTW uses are effective	Annual	Summary of IP&R Documents / Council Annual Report					x	x	x	x		EMCS
19.3	of the adequacy of performance data collection and reporting	Annual	Council Report to ARIC / IA Project Reports					x	x	x	x	IP&R / CTW Annual Report	EMCS



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	Additional Tasks Not Included On Schedule 1												
20	Review/update annual and strategic work plan	Annual	Annual & Four Year Work Plan	x					x	x	x	CTW Annual Report	EMCS
21	Review ARIC Terms of Reference	Annual	Terms of Reference	x					x	x	x	Review of annual and strategic work plan	EMCS
22	ARIC Annual Report to Council	Annual	ARIC Annual Report	x					x	x	x	Review of TOR	EMCS
23	Agree ARIC meeting schedule for the next fiscal year, including any 'Special Meeting' dates for reviewing draft and/or final audited financial statements	Annual	Annual Engagement Plan				x		x	x	x	ARIC Annual Report	Chair
24	The committee will provide a comprehensive assessment every council term of the matters listed in Schedule 1 to the governing body and the general manager. ... Guidelines p87	4 Yr									x	Financial Statement	EMA

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POLICY



**Central
Tablelands
Water**

Complaints Management Policy

DOCUMENT CONTROL

Document Title		Complaints Management			
Policy Number		CTW-PR056			
Responsible Officer		Executive Manager Corporate Services			
Reviewed by		EMCS, General Manager			
Date Adopted		30 April 2026			
Adopted by		Council			
Review Due Date		April 2030			
Revision Number		1			
Versions	Date	Description of Amendments	Author	Review/ Sign Off	Minute No: (if relevant)
New	Feb 2026	This policy was developed using the NSW Ombudsman guidelines	EMCS	GM	

PURPOSE

Customers have a right to expect that principles of economy, efficiency, effectiveness, fairness, impartiality, and responsiveness will underpin service delivery. When they believe that their expectations have not been met, the Customer has a right to expect that the Council will deal with their concerns in a professional, respectful and timely manner.

This policy is intended to ensure that Council handles complaints fairly, efficiently and effectively. Council's complaint management system is intended to:

- Enable Council to respond to issues raised by people making complaints in a timely and cost-effective way,
- Boost public confidence in Council's administrative process, and
- Provide information that can be used by Council to deliver quality improvements in Council's services, systems and complaint handling.

This policy provides guidance to Council's staff and customers who wish to make a complaint. It provides a framework to ensure complaints received are dealt with courteously, investigated thoroughly, resolved quickly and appropriately, in accordance with the relevant statutory requirements and this policy and procedure.

SCOPE

This Policy applies to all staff receiving or managing complaints from the public regarding Council's services.

Code of Conduct complaints and public interest disclosures are dealt with through separate mechanisms.

POLICY STATEMENT

Council expects staff at all levels to be committed to fair, effective and efficient complaint handling. The below table outlines the nature of the commitment expected from staff and the way that commitment should be implemented.

Who	Commitment	How
General Manager	Promote a culture that values complaints and their effective resolution	<ul style="list-style-type: none"> • Report publicly on Council's complaint handling. • Provide adequate support and direction to key staff responsible for handling complaints. • Regularly review reports about complaint trends and issues arising from complaints. • Encourage all staff to be alert to complaints and assist those responsible for handling complaints to resolve them promptly. • Encourage staff to make recommendations for system improvements. • Recognise and reward good complaint handling by staff. • Support recommendations for service, staff and complaint handling improvements arising from analysis of complaint data.

Public Officer	Establish and manage Council's complaint management system.	<ul style="list-style-type: none"> • Provide regular reports to the General Manager on issues arising from complaint handling work. • Ensure recommendations arising out of complaint data analysis are canvassed with the General Manager and implemented where appropriate. • Recruit, train and empower staff to resolve complaints promptly and in accordance with Council's policies and procedures. • Encourage staff managing complaints to provide suggestions on ways to improve the complaint management system. • Encourage all staff to be alert to complaints and assist those responsible for handling complaints to resolve them promptly. • Recognise and reward good complaint handling by staff.
Staff whose duties include complaint handling	Demonstrate exemplary complaint handling practices	<ul style="list-style-type: none"> • Treat all people with respect, including people who make complaints. • Assist people make a complaint, if needed. • Comply with this policy and its associated procedures. • Remain informed about best practice in complaint handling. • Provide feedback to management on issues arising from complaints. • Provide suggestions to management on ways to improve Council's complaints management system. • Implement changes arising from individual complaints and from the analysis and evaluation of complaint data as directed by management.
All staff	Understand and comply with Council's complaint handling practices.	<ul style="list-style-type: none"> • Treat all people with respect, including people who make complaints. • Be informed and aware of Council's complaint handling policies and procedures. • Assist people who wish to make complaints and access the Council's complaints process. • Be alert to complaints and assist staff handling complaints to resolve matters promptly. • Provide feedback to management on issues arising from complaints. • Implement changes arising from individual complaints and from the analysis and evaluation of complaint data as directed by management.

1. DEFINITIONS

Complaint - A complaint is an expression of dissatisfaction with the Council's policies, procedures, charges, staff, agents or quality of service. A complaint may relate to a specific incident or issue involving Council, or to matters of a more philosophical or general nature regarding Council's processes and/or procedures. A complaint covered by this Policy can be distinguished from:

- Public interest disclosures made by Council staff (see 2D Public Interest Disclosures: Internal Reporting Policy);
- Code of conduct complaints (see Council's policies 1B, 1D and 1E on Code of Conduct);
- Responses to requests for feedback about the standard of Council's service provision (see the definition of 'feedback' below);

- Reports of problems or wrongdoing merely intended to bring a problem to Council's notice with no expectation of a response (see definition of 'feedback');
- Service requests (see definition of 'service request' below); and
- Requests for information (see 2G Access to information policy).

Complaints Management System - All policies, procedures, practices, staff, hardware and software used by Council in the management of complaints.

Dispute - An unresolved complaint escalated either within or outside of Council.

Feedback - Opinions, comments and expressions of interest or concern, made directly or indirectly, explicitly or implicitly, to or about Council services or complaint handling where a response is not explicitly or implicitly expected or legally required.

Service Request – A service request is likely to include:

- requests for approval;
- requests for action;
- routine enquiries about the Council's business;
- requests for the provision of services and assistance; and
- requests for explanation of policies, procedures and decisions.

Policy - A statement of instruction that sets out how Council should fulfil its vision, mission and goals.

Procedure - A statement or instruction that sets out how Council policies will be implemented and by whom.

Public Interest Disclosure - A report about wrongdoing made by a public official in New South Wales that meets the requirements of the Public Interest Disclosures Act 1994.

2. GUIDING PRINCIPLES

2.1 Facilitate complaints

People making complaints will be:

- Step 1: Facilitate complaint
- Step 2: Respond to complaint
- Step 3: Manage the parties to a complaint.

2.2 People Focus

Council staff are committed to seeking and receiving feedback and complaints about Councils facilities, services, systems, practices, procedures and complaint handling. Any concerns raised in feedback or complaints will be dealt with within a reasonable time frame.

People making complaints will be:

- Provided with information about Councils complaint handling process.
- Provided with multiple and accessible ways to make complaints.
- Listened to, treated with respect by staff and actively involved in the complaint process where possible and appropriate.
- Provided with reasons for Councils decision/s and any options for redress or review.

The Public Officer will acknowledge receipt of the complaint, informing the complainant who is managing the complaint and what the process to be followed for handling the complaint is.

2.3 No Detriment to people making complaint

Council staff will take all reasonable steps to ensure that people making complaints are not adversely affected because a complaint has been made by them or on their behalf.

2.4 Anonymous complaints

Council can accept anonymous complaints and will carry out an investigation of the issues raised where there is enough information provided. Where Council reviews a complaint and finds there is insufficient information to investigate, it will be closed with the action officer recording reasons why for audit trail purposes.

In some circumstances Council can deal with anonymous complaints, however these can prove difficult where limited information is provided.

2.5 Accessibility

Council will ensure that information about how and where complaints may be made about Council is well publicised. Council will ensure that its systems to manage complaints are easily understood and accessible to everyone, particularly people who may require assistance.

If a person prefers or needs another person or organisation to assist or represent them in the making and/or resolution of their complaint, Council will communicate with them through their representative (if this is their wish). Anyone may represent a person wishing to make a complaint with their consent (e.g. advocate, family member, legal or community representative, Member of Parliament or another organisation).

3. RESPOND TO COMPLAINTS

3.1 Early resolution

Where possible, complaints will be resolved at first contact with the relevant departmental manager. If a complaint is resolved at the first point of contact that manager who received and addressed the complaint is required to make a file note in Council's records management system.

3.2 Responsiveness

Council staff will promptly acknowledge receipt of complaints.

Council staff will assess and prioritise complaints in accordance with the urgency and/or seriousness of the issues raised. If a matter concerns an immediate risk to safety or security the response will be immediate and will be escalated from Customer Service staff to the appropriate manager.

Council staff are committed to managing people's expectations, and will inform them as soon as possible of the following:

- The complaints process.
- The expected time frames for actions by Council.
- The progress of the complaint and reasons for any delay.
- Their likely involvement in the process.

- The possible or likely outcome of their complaint.
- Council staff will advise people as soon as possible when Council are unable to deal with any part of their complaint and provide advice about where such issues and/or complaints may be directed (if known and appropriate).

Council staff will also advise people as soon as possible when Council are unable to meet time frames for responding to their complaint and the reason for the delay.

3.3 Objectivity and fairness

Council staff will address each complaint with integrity and in an equitable, objective and unbiased manner.

Council staff will ensure that the person handling a complaint is different from the staff member whose service or conduct is the subject of the complaint. Conflicts of interest, whether actual or perceived, will be managed responsibly. In particular, internal reviews of how a complaint was managed will be conducted by a person other than the original decision maker

3.4 Responding flexibly

Council's staff are empowered to resolve complaints promptly and with as little formality as possible. Council will adopt flexible approaches to service delivery and problem solving to enhance accessibility for people making complaints and/or their representatives.

Council will assess each complaint on its merits and involve people making complaints and/or their representative in the process as far as possible.

4. CONFIDENTIALITY

Council will protect the identity of people making complaints where this is practical and appropriate.

Personal information that identifies individuals will only be disclosed or used by Council as permitted under the relevant privacy laws, secrecy provisions and any relevant confidentiality obligations.

5. MANAGING THE PARTIES TO A COMPLAINT

5.1 Complaints involving multiple agencies or areas

Where a complaint involves multiple organisations, Council will work with the other organisation/s where possible, to ensure that communication with the person making a complaint and/or their representative is clear and coordinated.

Subject to privacy and confidentiality considerations, communication and information sharing between the parties will also be organised to facilitate a timely response to the complaint.

Where a complaint involves multiple areas within the organisation, responsibility for communicating with the person making the complaint and/or their representative will also be coordinated.

Should a third party need to be contacted to resolve a complaint then the relevant Director should be informed.

Where Council services are contracted out, we expect contracted service providers to have an accessible and comprehensive complaint management system. Council take complaints not only about the actions of Council staff but also the actions of service providers.

5.2 Empowerment of staff

All staff managing complaints are empowered to implement Council's complaint management system as relevant to their role and responsibilities.

Staff are encouraged to provide feedback on the effectiveness and efficiency of all aspects of Council's complaint management system.

5.3 Managing unreasonable conduct by people making complaints

Council staff are committed to being accessible and responsive to all people who approach Council with feedback or complaints. At the same time Council's success depends on:

- The health, safety and security of Council staff;
- Our ability to do our work and perform our functions in the most effective and efficient way possible; and
- Our ability to allocate Council resources fairly across all the complaints we receive.

When people behave unreasonably in their dealings with Council staff, their conduct can significantly affect the progress and efficiency of Council work. As a result, Council staff will take proactive and decisive action to manage any conduct that negatively and unreasonably affects Council and will support staff to do the same in accordance with this policy.

Customer Service staff should escalate any complainant they find is being unreasonable to an appropriate Manager or Director. Customer Service staff will receive training to assist them to manage difficult complainants. Complainants will always be treated respectfully and in a courteous manner.

For further information on managing unreasonable conduct by complainants please see Council's Unreasonable and Unreasonably Persistent Customer policy.

5.4 Malicious, frivolous, and vexatious complaints

All complaints received by Council will be treated with the utmost seriousness. However, if following investigation, a complaint is found to be malicious, frivolous or vexatious, Council will take no further action on the complaint.

A decision to take no further action on the complaint will be made by a member of staff at the level of Manager or higher and the complainant will be informed in writing that no evidence was found to support the allegations.

Council management may, at its discretion, seek legal advice with respect to the implications of the suspected vexatious or malicious complaints. Where the complaints relate to a member(s) of staff, such legal advice will be made available to the affected staff member(s) on request.

The matter may also be referred to the Public Officer, who will determine whether the complainant should be requested to apologise in writing to the employee or offer a full retraction.

Where the staff member believes that the nature of the complaint has impugned their professional or personal reputation, they must seek their own legal advice at their own expense with respect to any intended actions in seeking damages for defamation.

Where complaints against an individual staff member cause distress to the staff member, the staff member will be supported via the Employee Assistance Program.

5.5 Persistent complaints

From time to time, Council will encounter complainants who are persistent and write again and again to the point that Council's resources are unreasonably diverted. Where the complaints are about the same or similar issue(s) and the Council has either addressed or dismissed the issue(s) as being without substance, then an administrative control may be put in place to limit responses to future complaints.

Under these circumstances details of the number and nature of the complaints will be provided to the Director who will make a recommendation to the General Manager that further correspondence and/or telephone contact is to be restricted. The General Manager will consider all the facts and issues of the individual case prior to acting on any recommendation(s). Any action taken shall be in accord with Council's Unreasonable and Unreasonably Persistent Customer policy.

5.6 Difficult complainants

In cases where a complainant's behaviour is aggressive or threatening e.g. the complainant:

- Is consistently rude or abusive or makes threats to staff or third parties using Council services or on Council premises.
- Causes damage to Council property or threatens physical harm to staff or third parties.

Details of the aggressive or threatening behaviour are to be provided to the Director who will make a recommendation to the General Manager that access to the Council be restricted. The General Manager will consider all the facts and issues of each case. Any action taken shall be in accordance with Council's Unreasonable and Unreasonably Persistent Customer policy.

All threats of violence will be reported to the NSW Police.

6. COMPLAINT MANAGEMENT SYSTEM



When responding to complaints, staff should act in accordance with Council's complaint handling procedures as well as any other internal documents providing guidance on the management of complaints. Staff should also consider any relevant legislation and/or regulations when responding to complaints and feedback.

The five key stages in Council's complaint management system are shown in the above diagram.

7. RECEIPT OF COMPLAINTS

Verbal Complaints

Staff aim to manage complaints and feedback, including anonymous approaches, when they are received. Face to face and telephone customer complaints will be received by customer service staff in the first instance. When taking such complaints staff will endeavour to record details based on their interpretation of the complaint and the requested outcome sought. To this end the recorded complaint should be repeated to the complainant for endorsement.

Written Complaints

Written complaints and feedback, whether anonymous or otherwise, received by CTW in writing (hardcopy or email or via website) will be assessed by the Executive Manager Corporate Services.

Council will assign a unique identifier to the complaint file in its electronic records management system. The Manager responsible for the complaint will inform their Executive Manager that the complaint has been received and is being managed.

It is the responsibility of Managers to keep Executive Managers and the General Manager informed of complaint management occurring at any time.

The record of the complaint will document:

- The contact information of the person making a complaint.
- Issues raised by the person making a complaint and the outcome/s they seek.
- Any other relevant information.
- Any additional support the person making a complaint requires.

8. ACKNOWLEDGEMENT OF COMPLAINTS

With the exception of anonymous complaints, CTW will acknowledge receipt of each complaint promptly, and preferably within fourteen (14) working days. Consideration will be given to the most appropriate medium (e.g. email, letter) for communicating with the person making a complaint.

9. INITIAL ASSESSMENT AND ADDRESSING OF COMPLAINTS

9.1 Initial assessment

After acknowledging receipt of the complaint, CTW will confirm whether the issue/s raised in the complaint is/are within its control. It will also consider the outcome/s sought by the person making a complaint and, where there is more than one issue raised, determine whether each issue needs to be separately addressed.

When determining how a complaint will be managed, the following will be considered:

- how serious, complicated or urgent the complaint is
- whether the complaint raises concerns about people's health and safety
- how the person making the complaint is being affected
- the risks involved if resolution of the complaint is delayed, and
- whether a resolution requires the involvement of other organisations.

9.2 Addressing complaints

After assessing the complaint, Council staff will consider how to manage it. To manage a complaint Council staff may: