



**Victoria Daly**  
REGIONAL COUNCIL

# AGENDA

**AUDIT AND RISK COMMITTEE MEETING  
TO BE HELD ON MONDAY 29 APRIL 2024  
AT 9:00 AM  
AT THE REGIONAL OFFICE - KATHERINE  
18 PEARCE STREET, KATHERINE NT 0850**

## **MEMBERS**

Mr John De Koning (Chairperson)  
Ms Maxine Bright  
Deputy Mayor Georgina Macleod  
Councillor Andrew McTaggart  
Councillor Yvette Williams

## **Chief Executive Officer**

Brian Hylands



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The Victoria Daly Regional Council advises that anyone who has any application lodged with the Victoria Daly Regional Council shall obtain and should only rely on **WRITTEN CONFIRMATION** of the outcome of the application, and any conditions attaching to the decision made by the Victoria Daly Regional Council in respect of the application.

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Brian Hylands  
**Chief Executive Officer**



## **AUDIT & RISK MANAGEMENT COMMITTEE**

### **Role and Responsibilities**

As per section 87 of the Local Government Act 2019.

The Nature of the Audit Committee's functions

An audit committee has the following functions in relation to a council:

- (a) to monitor and review the integrity of the council's financial management;
- (b) to monitor and review internal controls;
- (c) to make recommendations to the council about any matters the committee considers require the council's consideration as a result of the committee's functions under paragraph (a) or (b).



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## **1. Present**

## **2. Apologies**

Nil

## **3. Disclosure of Interest - Councillors and Staff**

Nil



## 4. Confirmation of Minutes

### 4.1. Confirmation of Minutes

#### **Recommendation**

That the minutes of the Confirmation of Minutes be taken as read and be accepted as a true record of the meeting.

#### **Attachments**

1. 20231020- AR M- Minutes- Unconfirmed [4.1.1 - 4 pages]
2. 20231030- AR M- Minutes- Special- Unconfirmed [4.1.2 - 4 pages]



# MINUTES

**AUDIT AND RISK COMMITTEE MEETING  
HELD ON FRIDAY 20 OCTOBER 2023  
AT 1:00 PM  
AT THE REGIONAL OFFICE - KATHERINE  
18 Pearce Street, Katherine NT 0850**



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A handwritten signature in black ink, appearing to be "Brian Hylands", written over a light blue horizontal line.

Brian Hylands  
**Chief Executive Officer**





## 2. Apologies

Nil

## 3. Disclosure of Interest - Councillors and Staff

There were no declarations of interest at this meeting.

## 4. Confirmation of Minutes

### 4.1. Unconfirmed Minutes 26 JUN 2023

**ARMC-2023/7 Resolution:** Carried (Maxine Bright/Deputy Mayor Georgina Macleod)  
That the minutes of the Unconfirmed Minutes 26 JUN 2023 be taken as read and be accepted as a true record of the meeting.

## 6. Reports to Committee

### 6.1. Reports for Decision

### 6.2. Reports for Information

## 7. General Business

NIL

## 8. Confidential

Members of the press and public to be excluded from the meeting of the Closed Session and access to the correspondence and reports relating to the items considered during the course of the Closed Session be withheld.

Meeting moved into confidential session at 1.20pm

### 8.1. Policy Revision Schedule

**Status 51(1)(c)(i)** - *This item is considered 'Confidential' pursuant to section 99(2) and 293(1) of the Local Government Act 2019 and section 51(1)(c)(i) of the Local Government (General) Regulations 2021, which states a council may close to the public only so much of its meeting as comprises the receipt or discussion of, or a motion or both relating to, information that would, if publicly disclosed, be likely to:*



*cause commercial prejudice to, or confer an unfair commercial advantage on, any person*

## 8.2. Annual Report Draft

**Status 51(1)(c)(i)** - *This item is considered 'Confidential' pursuant to section 99(2) and 293(1) of the Local Government Act 2019 and section 51(1)(c)(i) of the Local Government (General) Regulations 2021, which states a council may close to the public only so much of its meeting as comprises the receipt or discussion of, or a motion or both relating to, information that would, if publicly disclosed, be likely to: cause commercial prejudice to, or confer an unfair commercial advantage on, any person*

## 8.3. Audited Financials

**Status 51(1)(c)(i)** - *This item is considered 'Confidential' pursuant to section 99(2) and 293(1) of the Local Government Act 2019 and section 51(1)(c)(i) of the Local Government (General) Regulations 2021, which states a council may close to the public only so much of its meeting as comprises the receipt or discussion of, or a motion or both relating to, information that would, if publicly disclosed, be likely to: cause commercial prejudice to, or confer an unfair commercial advantage on, any person*

## 9. Next Meeting

*The meeting closed at 2:29 pm.*

This page and the preceding 3 pages are the minutes of the meeting of Audit and Risk Committee held on 20 October 2023.



# MINUTES

**AUDIT AND RISK COMMITTEE MEETING  
HELD ON MONDAY 30 OCTOBER 2023  
AT 11:00 AM  
AT THE REGIONAL OFFICE - KATHERINE  
18 Pearce Street, Katherine NT 0850**



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A handwritten signature in black ink, appearing to read "Brian Hylands".

Brian Hylands  
**Chief Executive Officer**



The meeting opened the time being 11:13 am.

## 1. Present

### Elected Members Present

Chair	John De Koning (teams)
Independant	Maxine Bright (teams)
Deputy Mayor	Andrew McTaggart
Councillor	Yvette Williams
Councillor	Georgina Macleod

### Staff Present

Governance and Compliance Manager	Janelle Iszlaub (minute taker)
CEO	Brian Hylands

### Committee Guests

Mayor	Brian Pedwell
Director of Corporate & Community Services	Trudy Braun
A/Director of Operations	Adam Justin
Chief Financial Officer	Jackson Bernard
Manager of Executive Services	Michelle Griffin

## 2. Apologies

NA

## 3. Disclosure of Interest - Councillors and Staff

There were no declarations of interest at this meeting.

## 4. Reports to Committee

### 4.1. Reports for Decision

### 4.2. Reports for Information

## 5. Confidential

### 5.0. VDRC 2022-2023 Audited Financials



**Status 51(1)(c)(i)** - *This item is considered 'Confidential' pursuant to section 99(2) and 293(1) of the Local Government Act 2019 and section 51(1)(c)(i) of the Local Government (General) Regulations 2021, which states a council may close to the public only so much of its meeting as comprises the receipt or discussion of, or a motion or both relating to, information that would, if publicly disclosed, be likely to: cause commercial prejudice to, or confer an unfair commercial advantage on, any person*

**ARMC-2023/13 Resolution:** Carried (Deputy Mayor Georgina Macleod/Cr Yvette Williams)

Members of the press and public to be excluded from the meeting of the Closed Session and access to the correspondence and reports relating to the items considered during the course of the Closed Session be withheld.

Moved to confidential session at 11:14am

## 6. Next Meeting

*The meeting closed at 11:19 am.*

This page and the preceding 3 pages are the minutes of the meeting of Audit and Risk Committee meeting held on 30 October 2023.



## 6. Reports to Committee

### 6.1. Reports for Decision

### 6.2. Reports for Information

#### 6.2.1. VDRC Risk Management Matrix Review

**Report Type** Officer Report For Information

**Department**

**Prepared by** Director of Corporate Services

#### **Purpose**

To provide the Audit and Risk Committee an update on the Councils reviewed risk register.

#### **Recommendations**

- A. That the report VDRC Risk Management Matrix Review is received and noted

#### **Regional Plan**

##### **Goal 1: Quality Leadership**

1.3 - Comply with all statutory, regulatory and reporting requirements

#### **Background**

It is a requirement of the Local Government Act 2019 section 87 (b) that the Council monitor and review internal controls including the Risk Register.

The previous review was presented to the Audit and Risk committee was June 2023. A recent review was conducted on 16<sup>th</sup> April 2024 with updates made to the register for presentation to the Audit and Risk Committee.

#### **Considerations**

##### **Outcome of Review conducted 16<sup>th</sup> April 2024**

Measure	October 2023 - Risk	April 2024 - Risk	Comments
Misconduct	Low	Low	No Change to Risk New IT Asset System implemented



<b>External Theft and Fraud (inc. Cyber Crime)</b>	Medium	Medium	No Change to Risk Asset register still being completed
<b>Failure to fulfil statutory, regulatory or compliance requirements</b>	Low	Low	No Change to Risk
<b>Business and Community Disruption</b>	Medium	Medium	No Change to Risk Business Continuity Plan is currently being developed
<b>ICT Systems and Infrastructure failure</b>	Low	Low	No Change in Risk Avepoint Implemented
<b>Inadequate procurement / supplier / contract management</b>	Low	Low	No Change in Risk
<b>Inadequate records management process</b>	Low	Low	No Change in Risk Avepoint implemented
<b>Inadequate project / change management</b>	Low	Low	No Change in Risk Currently recruiting to Project positions
<b>Inadequate engagement practices</b>	Low	Low	No Change in Risk VDRC Newsletter has been developed and distributed and is now adequate.
<b>Ineffective and / or unsustainable financial management</b>	Medium	Medium	No Change in Risk Financial training has been given to all Managers. Budget review process has been completed with all managers and process is now adequate.
<b>Inadequate safety and security practices</b>	Medium	Medium	No Change in Risk Toolbox meeting record not received from program areas. Currently investigating.

Out of the 126 controls over 11 measures Council has 68 excellent controls, 51 adequate controls and 7 insufficient controls currently being worked on.

**Policy implications**

No implications





**Budget implications**

No implications

**Risk statement**

Yes - a risk assessment has been completed

Risk Rating 1 - Low (Acceptable Risk, managed by procedures)

**Council officer conflict of interest declaration**

We the Author and Approving Officer declare we do not have a conflict of interest in relation to this matter.

**Attachments**

1. 042024 VICTORIA Risk Profile Reporting Dashboard [6.2.1.1 - 2 pages]

## Victoria Daly Regional Council Risk Dashboard Report April 2024

**Executive Summary**

Being Victoria Daly Regional Council's first risk review under the 2022 revised risk management approach, initial focus is on developing appropriate and effective risk information then followed by embedding and driving continual improvement. Future reports will continue to provide relevant insight and recommendations to assist governance and risk activities for Management, Audit and Risk Committee and Council. It is supported by the attached documents that were produced through workshops on the 29th March 2022 and ensuing discussions:

1. Risk Information for the 11 Risk Profiles Identified.
2. Risk Management Policy and Procedures.

**Recommendations**

Embedding

1. Arrange for the attached Risk Management Framework, Policy and Procedures to be endorsed and adopted.

Risk Profiles

1. Discuss, review and approve the attached Risk Profiles (from a Risk & Control perspective).
2. Confirm Current Issues / Actions / Treatments (Responsibility & Due Date)

<u>Misconduct</u>		Risk	Control
		Low	Adequate
Current Issues / Actions / Treatments	Due Date	Responsibility	
New IT asset system - Completed		Trudy	
Continual Staff Training and Awareness	Continuous	Directors	
New booklets & Training recruitment	Jun-24	Trudy	

<u>Business and Community Disruption</u>		Risk	Control
		Medium	Adequate
Current Issues / Actions / Treatments	Due Date	Responsibility	
Update current business continuity plan	Jun-24	Trudy	
Building & Vehicle Plant review - ongoing	Jun-24	Matt	

<u>External Theft and Fraud (inc. Cyber Crime)</u>		Risk	Control
		Medium	Adequate
Current Issues / Actions / Treatments	Due Date	Responsibility	
Asset Register - on going	Jan-25	Matt	

<u>ICT Systems and Infrastructure Failure</u>		Risk	Control
		Low	Excellent
Current Issues / Actions / Treatments	Due Date	Responsibility	
Continual Monitoring of ICT Performance		Trudy	
Avepoint implementation - Completed		Trudy	

<u>Failure to Fulfil Statutory, Regulatory or Compliance Requirements</u>		Risk	Control
		Low	Adequate
Current Issues / Actions / Treatments	Due Date	Responsibility	
Continual monitoring		Directors	

<u>Inadequate Safety and Security Practices</u>		Risk	Control
		Medium	Adequate
Current Issues / Actions / Treatments	Due Date	Responsibility	
Safety Management System/Framework - on hold till we move buildings	Aug-24	WHS	
Weekly Toolbox meetings		WHS / Trudy	

**Victoria Daly Regional Council  
Risk Dashboard Report  
April 2024**

<b>Inadequate Records Management Processes</b>			<b>Risk</b> Low	<b>Control</b> Adequate	<b>Ineffective and/or Unsustainable Financial Management</b>			<b>Risk</b> Medium	<b>Control</b> Adequate
<b>Current Issues / Actions / Treatments</b>	<b>Due Date</b>	<b>Responsibility</b>			<b>Current Issues / Actions / Treatments</b>	<b>Due Date</b>	<b>Responsibility</b>		
AvePoint Implementation - Completed		Trudy			Asset Management plan	Jan-25	Matt		
archiving and destroying of Hard Copies in Storage from iron mountain - ongoing		Governance			Financial training for all managers - Completed		Trudy		
					CFO to sit with all managers to build budget - Completed		Trudy		
<b>Inadequate Project/Change Management</b>			<b>Risk</b> Low	<b>Control</b> Excellent	<b>Inadequate Procurement / Supplier / Contract Management</b>			<b>Risk</b> Low	<b>Control</b> Excellent
<b>Current Issues / Actions / Treatments</b>	<b>Due Date</b>	<b>Responsibility</b>			<b>Current Issues / Actions / Treatments</b>	<b>Due Date</b>	<b>Responsibility</b>		
Continous review		Directors			Continual review		Directors		
<b>Inadequate Engagement Practices</b>			<b>Risk</b> Low	<b>Control</b> Adequate	<b>Errors, Omissions, Delays and Incorrect Advice</b>			<b>Risk</b>	<b>Control</b>
<b>Current Issues / Actions / Treatments</b>	<b>Due Date</b>	<b>Responsibility</b>			<b>Current Issues / Actions / Treatments</b>	<b>Due Date</b>	<b>Responsibility</b>		
<b>Inadequate Asset Sustainability Practices</b>			<b>Risk</b>	<b>Control</b>	<b>Ineffective HR Management / Employment Practices</b>			<b>Risk</b>	<b>Control</b>
<b>Current Issues / Actions / Treatments</b>	<b>Due Date</b>	<b>Responsibility</b>			<b>Current Issues / Actions / Treatments</b>	<b>Due Date</b>	<b>Responsibility</b>		
<b>Ineffective Management of Public Facilities / Venues / Events</b>			<b>Risk</b>	<b>Control</b>	<b>Inadequate Environmental Management</b>			<b>Risk</b>	<b>Control</b>
<b>Current Issues / Actions / Treatments</b>	<b>Due Date</b>	<b>Responsibility</b>			<b>Current Issues / Actions / Treatments</b>	<b>Due Date</b>	<b>Responsibility</b>		



### 6.2.2. NDIS Risk Matrix

**Report Type** Report for Information  
Community Report For Information

**Department** NDIS Programs

**Prepared by** Community Care Manager

#### **Purpose**

To provide the Audit and Risk Committee with the current NDIS Risk Matrix.

#### **Recommendations**

- A. That the report NDIS Risk Matrix is received and noted

#### **Regional Plan**

##### **Goal 4: Liveability**

- 4.1 Delivery of quality programs which support resident's well being
- 4.3 Facilitate the provision of services which improve residents' lives

#### **Key Issues**

If Major Non-Conformity is not meet by due date of 22/05/2024 Victoria Daly Regional council NDIS Program will not be registered as a NDIS Provider.

#### **Background**

NDIS and the Aged Care Programs have restructured to one program. The Community Services Program. NDIS Program Risk Management and Improvement Register was already in place. An Aged Care Risk Management and Improvement Register is under development.

#### **Considerations**

Current NDIS Midterm Audit on site visit was undertaken 20<sup>th</sup> – 21<sup>st</sup> March 2024 at Regional Office. The Auditors corrective actions comprised of 10 Minor non-conformities and one Major Non-Conformity to be meet before 22/05/2024. Minor non-conformities at time of report have been reduced to 5 items with remaining to be reduced to maximum of 2 before 22/08/2024.

NDIS has implemented the LOGIC Quality Management System which when set up is completed will replace the tracking sheets for document control, participant review schedule.

#### **Policy implications**

NDIS Audit determined the need for an additional two policies which have since been completed. All policies meet requirements.



**Budget implications**

Significant budget implications if Major Non-Conformity is not able to be addressed as 95% of the program's income generated is only approved for a NDIS Registered provider.

**Risk statement**

Yes - a risk assessment has been completed

Risk Rating 1 - Low (Acceptable Risk, managed by procedures)

**Council officer conflict of interest declaration**

We the Author and Approving Officer declare we do not have a conflict of interest in relation to this matter.

**Attachments**

1. NDIS Risk Management and Improvement Register viv copy d U Adn U A 2 0 yue Yq G Sp PR Hw [6.2.2.1 - 9 pages]

NDIS RISK MANAGEMENT AND IMPROVEMENT REGISTER									
		CONSEQUENCES					<p><b>THE RISK MANAGEMENT AND IMPROVEMENT REGISTER IS A LIVING DOCUMENT</b></p> <p>THE REGISTER IS UPDATED AS ACTIONS ARE COMPLETED TOWARDS REDUCING OR ELIMINATING RISKS. POTENTIAL RISKS ARE INCORPORATED AND ALLOCATED TO A RESPONSIBLE PERSON FOR ACTION</p>		
LIKELIHOOD		Insignificant	Minor	Moderate	Major	Catastrophic			
	Almost Certain	Medium	High	High	Extreme	Extreme			
	Likely	Medium	Medium	High	High	Extreme			
	Possible	Low	Medium	High	High	High			
	Unlikely	Low	Low	Medium	Medium	High			
Rare	Low	Low	Medium	Medium	High				
Risk Area		Current Risk Rating			Risk Identified	Improvement Action			
Register Number	Core Module	Practice Standard	Consequence	Likelihood	Rating	Risk Detail	Risk Improvement Action	Responsible Person	Date Improvement Action Completed
<b>1. PEOPLE AND CAPABILITY</b>									
1.1	2.Provider Governance and Operational Management	2. Human Resource Management	Moderate	Almost Certain	High	No Workforce Development Plan or strategies to meet future workforce demands	Develop Workforce Development Plan to deliver services effectively and ensure sustainability and include Identified issues with regards to distance, recruitment, retention and succession planning - ongoing reviews for assessment still meeting requirements	NDIS Manager	
1.2	2.Provider Governance and Operational Management	2. Human Resource Management	Moderate	Rare	Medium	Lack of access to appropriate training for staff and volunteers to successfully undertake duties.	Created NDIS staff induction manual and NDIS Staff Induction Checklist for all existing and new staff. Hosted Learning and Development training platform provides refresher modules spread across staff meeting annual schedule for relevant topic	NDIS Manager	9/04/2023
1.3	2.Provider Governance and Operational Management	2. Human Resource Management	Moderate	Rare	Medium	No Policy or Procedure to formalise the informal supports, such as tool box meetings and informal reviews	Captured information from service provision by amendment to current shift report and creation and implementation of easy read reporting forms. Toolbox requirements in place already	NDIS Manager	1/04/2023
1.4	2.Provider Governance and Operational Management	2. Human Resource Management	Minor	Rare	Low	No formal document requiring staff to commit to informal supervision processes	Schedule in NDIS Manager calander from first day for weekly, fortnightly,monthly informal support meetings. Developed local process to outline structure and purpose of informal supervision expected for all staff. Created resource to guide team leaders through process (Formal - Performance Management and Performance Appraisal Policy already in place).	NDIS Manager	10/04/2023
1.5	2.Provider Governance and Operational Management	2. Human Resource Management	Moderate	Possible	High	Unable to attract and retain appropriately skilled and values-aligned and screened staff	Developed suitable advertisement considering local recruitment as priority in line with VDRC media guidelines • Need to Build relationships with education and training providers and employment services to attract a local workforce and to ensure we retain qualified staff	NDIS Manager	1/04/2023
1.6	2.Provider Governance and Operational Management	2. Human Resource Management	Minor	Unlikely	Low	Financial Assistance for expected high turn-over from casualisation and recruitment of longer term unemployed or no industry experience	Developing, growing and maintaing relationships with Australian Apprenticeship Centre, CDP program and CDU trainers Financial incentives from CDP, indigenous wage subsidy or Australian Apprenticeship Centre	NDIS Manager	1/04/2023

1.7	2.Provider Governance and Operational Management	2. Human Resource Management	Minor	Unlikely	Low	Not developing accountable self managing teams	Build capacity to support and develop professional skills for all staff to self-manage through appropriate training plans. Provide in house supports and reporting to allow the teams to have autonomy for day to day operations • Provide the tools and supports for team leaders to manage teams and allow for skill development. Developed monthly staff informal supervision process, forms and team leader learning resource to accompany	NDIS Manager	10/04/2023
1.8	2.Provider Governance and Operational Management	2. Human Resource Management	Minor	Unlikely	Low	Unable to provide opportunities for current and future employees for professional development and training to enable staff to be promoted internally	Program team leader role has appointed second in place by identifying talented candidates for leadership succession. • Career development supports to provide employees with the tools and resources to map out their careers and plan for their own advancement while developing the skills and competencies they need to fulfil crucial roles in the organisation through informal and formal appraisal processes including development appropriate training plans. • Address any barriers or challenges preventing succession.	NDIS Manager	10/04/2023
1.9	2.Provider Governance and Operational Management	2. Human Resource Management	Moderate	Unlikely	Medium	Lack of support and empowerment for employees to achieve their best for the vulnerable within our community while maintaining personal and professional safety	Build a strong support culture that ensures all staff and management reach their potential to ensure quality delivery of service and products by providing a flexible and supportive workplace. • Investment made in front line staff and risk assessed roles in Etrainu learning platform, with a focus on person-centred values • Created annual schedule of staff meetings that include professional development and refresher opportunities, including where topics of culture and diversity and advocacy and protections for vulnerable persons are covered.	NDIS Manager	1/04/2023
1.10	2.Provider Governance and Operational Management	2. Risk Management	Major	Almost Certain	Extreme	Any staff not holding current and appropriate probity clearances	Maintain up to date local staff recruitment, onboarding, employment and training register. Implement appropriate reminder function to ensure renewals are completed in a timely manner, ie: calendar reminders - no staff to work unsupervised by senior worker while not in possession of probity clearances	NDIS Quality and Compliance Coordinator	1/03/2024
1.11	2.Provider Governance and Operational Management	2. Human Resource Management	Moderate	Unlikely	Medium	Any staff who have not read and understood and signed acknowledgement of NDIS Code of Conduct	Created easy read version that includes all relevant information and implemented into staff induction as signed acknowledgement staff member understands and agrees with the NDIS Code of Conduct required prior any supports to participants. To be implemented/completed/evidence gathered	NDIS Manager	9/04/2023
1.12	2.Provider Governance and Operational Management	2. Human Resource Management	Minor	Unlikely	Low	Lack of informal staff supervision process	Developed an informal staff supervision process to be undertaken at least monthly by team leaders and create process, a team leader guide to mentoring and all associated forms - These should be held on staff HR files once completed and inform manager of progress/issues at time of formal performance reviews/ training plan development	NDIS Manager	10/04/2023
1.13	2.Provider Governance and Operational Management	2. Human Resource Management	Moderate	Likely	High	Lack of formal staff appraisal systems and performance management systems	Complete formal staff supervision/performance reviews for all regional office and community based NDIS staff - due for completion before 1st July 2024	NDIS Manager	
<b>2. FINANCIAL SUSTAINABILITY</b>									
2.1	2.Provider Governance and Operational Management	2. Risk Management	Major	Rare	Medium	Public and Directors Liability and Workers Comp and General Insurance Reviews/Lapses	Ensuring Workers Compensation, Directors Liability, Public Liability, Vehicle and General Insurances are current	CEO	1/04/2023

2.2	2.Provider Governance and Operational Management	2. Risk Management	Major	Unlikely	Medium	Non-Compliance with auditing and reporting requirements against the NDIS practice standards	Reporting requirements reviewed regularly to ensure all due dates are met, including formal internal review consultancy - Internal Audit last completed Feb2023	NDIS Manager	28/02/2023
2.3	2.Provider Governance and Operational Management	2. Governance and Operational Management	Moderate	Unlikely	Medium	Reviewing and approval of budgets prior to commencement of each financial year, with regular review dates throughout	Review dates to be added to Manager calander - NDIS Manager to meet with Fianance Manager and Director of Corporate and Community Services before end of March 2024 to discuss and finalise budgets to forward to the board for approval	VDRC Board Members	
2.4	2.Provider Governance and Operational Management	2. Risk Management	Moderate	Possible	High	grants and fundraising Product or item from fundraiser causes injury or harm	Ensure current insurance cover is adequate. Ensure appropriate food handling certificate holder is on site if selling foodstuff. Ensure all foodstuffs are correctly labelled with required information, all staff trained with food handling certificate and undertake training in assisting with food handling for vulnerable persons in active support induction. Recorded on staff training register and training plans - Create food saftey program before end of April 2024	NDIS Quality and Compliance Coordinator	
2.5	2.Provider Governance and Operational Management	2. Risk Management	Minor	Unlikely	Low	Billing and collections Loss of government funding/change of government expectations impacts service delivery	Secure some alternative funding arrangements for projects to assist financially. Developing self income generating model to derive income for self-sustainability of programs	NDIS Manager	Ongoing
2.6	2.Provider Governance and Operational Management	2. Governance and Operational Management	Minor	Unlikely	Low	Insecure long-term funding pipeline to deliver services	Exploring property investment opportunities and retaining funds for housing modification contingency fund	Director Corporate and Community Services	2/04/2024
2.7	2.Provider Governance and Operational Management	2. Governance and Operational Management	Minor	Unlikely	Low	Lack of clear and responsibility specific Banking and Financial Delegations	All transactions require approval by Delegated officers of council	VDRC Board Members	1/04/2023
2.8	2.Provider Governance and Operational Management	2. Risk Management	Moderate	Unlikely	Medium	Mismanged Contract Management	Measured and benchmarked management and administration of overheads • Optimised assets with required procurement of fleet, facilities and contractor management for assets - leased from VDRC	Director Corporate and Community Services	1/04/2023
2.9	2.Provider Governance and Operational Management	2. Governance and Operational Management	Moderate	Possible	High	Inability to grow our capacity and capabilities to maintain a sustainable future	Seek business grants and new sources of funding to grow innovative and alternative services. • Deliver sustainable financial "profits for purpose" through agreed business plan that is constantly reviewed • Generate opportunities for financial success to enable "profit for purpose" and may include existing offerings diversification and mergers or acquisitions	NDIS Manager	Ongoing
2.10	3. Provision of Supports	3. Support Planning	Moderate	Unlikely	Medium	Unable to develop strong business ties with likeminded organisations	Develop financial models to support alliances and partnerships • Develop a cost benefit model when outsourcing services	NDIS Manager	Ongoing
2.11	4. Provision of Supports Environment	4. Safe Environment	Moderate	Unlikely	Medium	Lack of committment and responsibility to WHS through lack of specific Periodical Agreements	Periodical agreements in place for essential services, first aid, fire safety, safe drinking and cooking water, sanitary and contaminated watse	NDIS Manager	1/04/2023
<b>3. STRATEGIC AND PLANNING</b>									
3.1	2.Provider Governance and Operational Management	2. Human Resource Management	Moderate	Unlikely	Medium	Resistance to change which impacts the delivery of strategic objectives.	Remaining transparent in reasons for change and involve staff in shaping that change wherever possible, staff alerts and regular scheduled staff meetings and mentoring and training - include change management in PD section of staff meeting	NDIS Quality and Compliance Coordinator	1/04/2023
3.2	2.Provider Governance and Operational Management	2. Quality Management	Minor	Unlikely	Low	Un reviewed Strategic Plan with clear goals and direction	Ensure any change involves support and/or training for staff whenever warranted ie: new technology	VDRC Board Members	1/04/2023



3.3	2.Provider Governance and Operational Management	2. Quality Management	Minor	Unlikely	Low	No evaluation process in place to measure organisational progress against strategic and workforce development plans	Evaluation process in place to measure organisational progress against strategic and workforce development plans included in monthly committee of management obligations tracker setr annually from first meeting	VDRC Board Members	
3.4	2.Provider Governance and Operational Management	2. Feedback and Complaints Management	Moderate	Unlikely	Medium	Resources and information are not clear and accessible interfaces and feedback mechanisms	Clear and accessible client interfaces and feedback mechanisms in place with creation of Feedback form and IT to link QR code for mobile phone completion and submission of anonymous feedback form.and accessible at each location, easy read guides and clarification and review of these with support staff during implementation and upon any future reviews	NDIS Manager	6/04/2023
3.5	2.Provider Governance and Operational Management	2. Information Management	Minor	Likely	Medium	Lack of promotion of our name/services and development of our services in expanding our local footprint	Secure funding and supplier to Establish a more interactive website for ease of access for participants and to give greater exposure to program • develop promotional materials including NDIS information	NDIS Quality and Compliance Coordinator	
3.6	3. Provision of Supports	3. Responsive Support Provision	Moderate	Rare	Low	Lack of consultation with participants, parents and carers with respect to service provision	Regular liaison with relevant parties is undertaken by team leader and regular meetings with carers when requested and participants and families included in development of personal support plans, risk assessments and transistion plans to ensure choice and control to participants	NDIS Manager	10/04/2023
<b>4. PROPERTY MANAGEMENT</b>									
4.1	2.Provider Governance and Operational Management	2. Risk Management	Moderate	Possible	High	Contractors fail to perform maintenance contract / Poor response time by contractors	Have list of trusted tradespeople or businesses. Ensure to nurture relationships with regular tradespeople and businesses	NDIS Manager	
4.2	2.Provider Governance and Operational Management	2. Incident Management	Minor	Possible	Medium	Damage due to wear and tear caused because of NDIS activities	Report to council as soon as possible and obtain quotes to repair damage	NDIS/Aged Care Team Leader	1/04/2023
4.3	2.Provider Governance and Operational Management	2. Incident Management	Minor	Possible	Medium	Malicious damage caused in the event of crime or violent behaviour	Report crime to police and any other relevant parties such as landlord, guardian and committee of management. Critical Incident Reporting process to be followed if necessary. Financial retribution payable by participant explored and video doorbell in residential settings	NDIS Manager	1/04/2023
4.4	2.Provider Governance and Operational Management	2. Quality Management	Minor	Possible	Medium	No current Asset Register to maintain currency and appropriateness of equipment and vehicles	Develop NDIS regional office asset and loans register for all assets and equipment and Implement process of notification of new assets to be added to register	NDIS Manager	1/02/2024
<b>5. INFORMATION TECHNOLOGY AND KNOWLEDGE</b>									
5.1	2.Provider Governance and Operational Management	2. Information Management	Minor	Unlikely	Low	IT and Communications not sufficient for expanded organisation	Ensure purchase and maintainane of efficient and effective equipment, systems and processes. Obtained old photocopier/scanner/printer from VDRC when they upgraded at Kalkaringi - Investigate this option for other communities.	NDIS Manager	1/04/2023
5.2	2.Provider Governance and Operational Management	2. Information Management	Moderate	Unlikely	Medium	Difficulties arise during the transition to new IT systems that affect organisational performance.	Ensure appropriate training in new equipment or software to cater to low literacy levels, comprehension by ESL staff and various levels of ability across the workforce. Mobile devices pre-loaded with required contacts and apps, email created and on line access obtained, staff are provided mentoring and support to use effectively during onboarding period and as requiried thereafter	NDIS Manager	1/04/2023
5.3	2.Provider Governance and Operational Management	2. Information Management	Minor	Unlikely	Low	Lack of appropriate accessibility levels and responsibilities of social media administrators	Ensure only relevant and competent staff are appointed as administrators of NDIS social media posts - VDRC responsibility	Director Corporate and Community Services	1/04/2023

5.4	2.Provider Governance and Operational Management	2. Information Management	Minor	Unlikely	Low	Lack of information on staff responsibilities for electronic communication and records and security of electronic devices and software	Ensure all staff read and understand media relations, social media, mobile phone and internet use policy and procedures Ensure all staff read and understand confidentiality and privacy policy and procedures. Installation of appropriate virus protection software and regular updates as required. Develop strong relationships with IT for expertise in place.	NDIS Manager	1/04/2023
5.5	2.Provider Governance and Operational Management	2. Information Management	Minor	Unlikely	Low	Lack of responsibility and consents for publishing or promotion of any participant, their productions or their stories	Implementation of appropriate social media policy and procedure, policy and procedures on use of electronic information and production of photos covered throughout induction. Implementation of consent form for use of media for all participants and staff.	NDIS Manager	4/04/2023
<b>6. RISK MANAGEMENT</b>									
6.1	2.Provider Governance and Operational Management	2. Risk Management	Major	Likely	High	Engage Fire warden and First Aid Officer	Obtain Fire Warden and first Aid Officer Officer responsibilities and Duties Statement and appoint	NDIS Manager	
6.2	2.Provider Governance and Operational Management	2. Risk Management	Major	Rare	Medium	Non compliance with workplace WHS and ensure mandatory requirements are being meet	Undertake regular workplace Inspections as directed Arrange regular Fire and Emergency Evacuation Drills and Fire extinguisher compliance checks through WHS Manager Arrange regular First Aid Box restocking through WHS Manager Arrange regular Test and Tag for all electrical equipment over 12 months old	NDIS Manager	1/04/2023
6.3	2.Provider Governance and Operational Management	2. Risk Management	Major	Unlikely	Medium	Staff not aware of Trash Cards and Critical Incident and Accident Reports Ensure all staff are able to identify an incident and effectively follow processes in the event of an accident, incident or critical incident	Appropriate training provided at commencement of employment throughout induction, training provided via scheduled staff meetings, action plans from staff meetings with updates on responses to incidents, supervision levels adequate to provide support as and when required, critical incidents lodged within timeframes	NDIS Manager	1/04/2023
6.4	2.Provider Governance and Operational Management	2. Human Resource Management	Moderate	Unlikely	Medium	Unable to source training for staff in managing new participant risks and behaviours of concern as/when NDIS market expands	Developed support plans to identified support needs and strategies Completed Individual Risk Assessment forms from all relevant professional plans, medical advices, NDIS plan, participant and their support networks and developed participant transition plan	NDIS Manager	10/04/2023
6.5	2.Provider Governance and Operational Management	2. Human Resource Management	Major	Possible	High	Ensure all staff are able to safely handle and store foodstuff for vulnerable persons	Ensure appropriate training provided at commencement of employment in foodhandling for vulnerable persons and all staff supported to obtain food handling certificate. Food Safety for Vulnerable People included in staff induction training and covered by ETrainU refresher module.	NDIS Manager	9/04/2023
6.6	2.Provider Governance and Operational Management	2. Human Resource Management	Major	Unlikely	Medium	Unsafe manual handling and moving people processes and techniques	Ensure appropriate training provided at commencement of employment regarding manual handling and moving of persons. Manual Handling covered in both Active Support Staff Induction and more detail in the Personal Care Support Staff Induction and Manual Handling ETrainU module assigned to all staff. External manual handling training sourced whenever available	NDIS Manager	9/04/2023

6.7	2.Provider Governance and Operational Management	2. Risk Management	Moderate	Possible	High	Staff working from home or staff home visits Threat or Assault by a participant or member of the participant's household or animal on premises whilst attending home visit leading to staff injury	Staff members have been trained and have protocols of how to recognise a potentially violent situation and always carry a mobile phone in hand Ensure that all staff contact participant prior to each visit to determine their emotional state Ensure that two staff. Implmented policy and procedure for home visits and working from home, including risk assements forms and evaluations for staff members visit and at risk participants	NDIS Manager	1/01/2024
6.8	2.Provider Governance and Operational Management	2. Risk Management	Moderate	Unlikely	Medium	Unsafe storage and/or use of chemicals or personal protective equipment	Ensure current SOP available for all chemicals used or held on premises or in course of staff carrying out duties or activities, standardise chemicals for easier management and cotinuity for safety purposes, introduction of chemical register/supplier and emergency supplier	NDIS Manager	
6.9	2.Provider Governance and Operational Management	2. Incident Management	Moderate	Rare	Medium	Use of non approved or Non-restrictive practices	Developed Individual Risks Assessment outcomes, behavioural support plans with recommended strategies from qualified professionals and provide support in conjunction with relevant policies and procedures	NDIS Manager	1/04/2023
6.10	2.Provider Governance and Operational Management	2. Incident Management	Moderate	Unlikely	Medium	No participant Risk Assessment undertaken or provided	Created all assessments (inc. skin integrity, nutrition, falls) for each participant. Update each participant's care plan to reflect any changes identified by assessment reviews. Ensure that each participant's care plan includes sufficient detail to ensure their needs and preferences are met safely and effectively. Still need completed assessments for evidence.	NDIS Manager	10/04/2023
6.11	2.Provider Governance and Operational Management	2. Incident Management	Minor	Rare	Low	Lack of social or emotional support for staff	Promotion of use of employee assistance program for counselling after any event of signaficance or concerns observed and acknowledged by staff.	NDIS Manager	1/04/2023
6.12	2.Provider Governance and Operational Management	2. Risk Management	Moderate	Rare	Medium	Unable to access buildings or Vehicles when needed	Access to be assured by way of all duplicate keys being secured offsite for the event of any lockout and access by way of key to access the accessible bus at all times as in secured yard overnight and weekends	NDIS Manager	1/04/2023
6.13	2.Provider Governance and Operational Management	2. Risk Management	Moderate	Rare	Medium	MSDS availability at all locations for all chemicals at that site	MSDS information is available on site in the event the product has been exhausted and thrown out or product label is not available or readable	NDIS Manager	
6.14	2.Provider Governance and Operational Management	2. Risk Management	Moderate	Possible	High	Lack of risk assessment and susequent risk management plan for undertaking activities in the community/recreational activities with level of risk	Develop form to assess external venues and risk assessment matrix which is to be completed by Team leaders prior to undertaken any activities in and around the community	NDIS Manager	1/03/2024
<b>7. QUALITY IMPROVEMENT AND PARTICIPANT SATISFACTION</b>									

7.1	4. Provision of Supports Environment	4. Safe Environment	Major	Almost Certain	Extreme	Lack of worker screening and commitment to zero tolerance framework	Conduct an internal review based on the new quality and safeguarding standards • Make any required amendments to practices and procedures for the quality and safeguarding standards • Development and implementation workers screening recording within staff register, declarations while awaiting production if applying and unable to work automously until recieved. Vic Daly to support all renewals and calandarise expiration to ensure remain current at all times	NDIS Quality and Compliance Coordinator	1/01/2024
7.2	2.Provider Governance and Operational Management	2. Governance and Operational Management	Moderate	Possible	Medium	Unable to develop a culture of data collection to ensure information is provided to people as and when needed	Maintaining an effective quality management system that suits the needs of Vic Daly by Survey participant satisfaction systematically and lifting outcomes through targeted quality improvement programs while Increasing staff accountability for outcomes via position descriptions and resource supported individual activity plans. Reviewed PD's for regional office positions and recommended position changes to better respond to buisness and participants need	NDIS Manager	15/02/2024
7.3	2.Provider Governance and Operational Management	2. Governance and Operational Management	Moderate	Possible	High	Unable to implement efficient IT and database systems to improve service delivery, data management and reduce administrative issues	Use document management to improve information accessibility and reduce printing, induction available electronically and using shared resoruces such as pdf documents and policy and procedures • Need to Implement a "fit for purpose" software suite for NDIS to capture data for reporting that will match with the current financial system	NDIS Manager	14/03/2024
7.4	2.Provider Governance and Operational Management	2. Feedback and Complaints Management	Moderate	Unlikely	Medium	Not continuously reviewing and monitoring all functions of services to continuously improve participant satisfaction	Seeking regular feedback and use the information to inform individual and organisation-wide service reviews • Individuals, families, friends, carers and advocates are actively supported to provide feedback, make a complaint or resolve a dispute without fear of adverse consequences Feedback mechanisms including complaints resolution, and how to access independent support, advice & representation are clearly communicated to individuals, families, friends, carers and advocates and via easy read documents explained by support staff. • Complaints are resolved together with the individual, family, friends, carer or advocate in a proactive and timely manner. Develop a culture of continuous improvement using compliments, feedback and complaints, to plan, deliver and review services for individuals and the community	NDIS Manager	10/04/2023
7.5	1. Rights and Responsibilities	1. Person Centered Supports	Major	Rare	Medium	Services and supports are not assessed, planned, delivered and reviewed to build on individual strengths and enable individuals to reach their goals	Service planning is based on individual choice and is undertaken together with an individual and, with consent, their family, friends, carer or advocate. • Service plans, deliver and regularly reviews services or supports against measurable life outcomes through production of a suitable activity plan. • Service planning and delivery is responsive to diversity including disability, age, gender, culture, heritage, language, faith, sexual identity, relationship status, and other relevant factors reflected in individual support plans. Collaboration with other service providers in planning service delivery and to support internal capacity to respond to diverse needs or changes	NDIS Manager	9/04/2023
7.6	2.Provider Governance and Operational Management	2. Quality Management	Major	Unlikely	Medium	Unable to retain NDIS Registration in current registration groups .	Undertaking audit of quality standards being met through accreditation processes and ensuring currency of required clearances for all staff and visitors. Remain up to date through NDS, and events of significance	NDIS Manager	1/04/2023
7.8	2.Provider Governance and Operational Management	2. Risk Management	Major	Unlikely	Medium	participants placed at risk due to not coordinating transport arrangements to ensure supports maintained	Use of journey management process and completion of daily vehicle checks. Booking system for vehicles held by team leader at each site	NDIS Manager	1/04/2023
7.9	2.Provider Governance and Operational Management	2. Emergency and Disaster Management	Major	Unlikely	Medium	Personal Emergency Evauation Plans tailored to each participants support and equipment needs	Developed Personal Emergency Evauation Support Plans tailored to each participants support and equipment needs. Need to finalise completions as evidence.	NDIS Manager	1/04/2023

7.10	2.Provider Governance and Operational Management	2. Emergency and Disaster Management	Major	Possible	High	Lack of Meal Management Plans tailored to each participants support and equipment needs	Meal Management Plans tailored to each participants support and equipment needs has been drafted and awaiting approval for implementation, along with obtaining allied health eating plans	NDIS Coordinator of Supports	15/03/2024
7.11	1. Rights and Responsibilities	1. Violence, Abuse, Neglect, Exploitation and Discrimination	Moderate	Unlikely	Medium	Lack of user friendly way of gathering feedback from participants, families, carers and staff	Created method and form to capture participant feedback and collection for COS and service provision - create posters to display with QR code link to feedback form	NDIS Manager	10/04/2023
7.12	1. Rights and Responsibilities	1. Privacy and Dignity	Moderate	Rare	High	Lack of access to information if information is only available via online or connected services	Develop hard copy file system for secure storage on community (will need to ascertain current security arrangements and implement better process for maintaining confidentiality) and implement process for quarterly participant file reviews to be undertaken with team leaders and participants directly to ensure currency of all information and ensure support plans still meet participant goals - Create basic data capture process (acknowledgement form) to confirm this occurred for evidence.	NDIS Manager	
7.13	3. Provision of Supports	3. Responsive Support Provision	Moderate	Likely	High	Lack of participant plan for managing service related risks	Develop a plan for each participant on managing service related risks such as low staffing, weather events, vehicle unavailability etc - These to be provided to each participant during the onboarding process so will need to create a new plan template and complete these and including other informal and formal supports etc - Will require one for COS (covering waitlists, inability to secure therapists, waittimes for actions required by NDIA such as COC or reviews etc) and will require one for SP to cover location, activities and personal care supports	NDIS Quality and Compliance Coordinator	
7.14	3. Provision of Supports	3. Transitions to or from a Provider	Moderate	Unlikely	Medium	Lack of organisational plan for managing risks in continuity of support and service delivery	Develop policy and procedure and create transition process and associated forms to effectively move supports between Vic Daly and other providers	NDIS Manager	10/04/2023
7.15	4. Provision of Supports Environment	4. Participant Money and Property	Moderate	Rare	High	Lack of training and resources to enable staff to recognise and assist participants regarding their own money and property	Developed staff training resources on supporting participants to manage their own money and property - Include in the staff induction training for all new staff - This could be evidenced by staff supporting participants with the learning program for participants - understanding your money - This training is included in the annual refresher training delivered through the NDIS staff meetings in the month covering the most aligned content	NDIS Manager	7/04/2023
7.16	3. Provision of Supports	3. Transitions to or from a Provider	Moderate	Rare	Medium	Lack of transition process and risks associated with transitioning participant to a new provider	Developed participant transition plan. process for stages of transition and consider risks associated with transitions to or from VDRC - this will need to be done with COS to cover all informal and other formal support networks and one from SP to cover continuity of support, service bookings, approval to provide information in relation to progress towards goals etc	NDIS Manager	10/04/2023
7.17	3. Provision of Supports	3. Responsive Support Provision	Moderate	Possible	High	Lack of information available for participants to understand when and why they can request changes to their support	Created easy read participant journey booklet, and subsequent participant induction manual. Need to add what supports can be withdrawn and reasons they may wish to withdraw and appropriate notifications to ensure smooth transition or exit for participants	NDIS Manager	
7.18	1. Rights and Responsibilities	1. Person Centered Supports	Moderate	Rare	Medium	Lack of understandable information during onboarding of participants	Created NDIS participant induction booklet - includes easy read content and all compliance information has been included and include and acknowledgement that booklet has been received, explained and understood by participant	NDIS Manager	1/04/2023

7.19	1. Rights and Responsibilities	1. Independence and Informed Choice	Moderate	Rare	Medium	Collaboration occurs with each participant to develop a service agreement which establishes expectations, explains the supports to be delivered, and specifies any conditions attached to the delivery of supports, including why these conditions are attached	Develop a conflict of interest statement to be included in COS and service provision service agreements to be signed by participants	NDIS Manager	1/04/2023
7.20	1. Rights and Responsibilities	1. Violence, Abuse, Neglect, Exploitation and Discrimination	Moderate	Rare	Medium	Evidence of periodic review/training in prevention of abuse, harm, and neglect and incident management and reporting processes.	Included in the staff induction process and included in HR compliance register, refresher training to be provided annually through staff meeting professional development time	NDIS Manager	10/04/2023
7.21	3. Provision of Supports	3. Support Planning	Moderate	Rare	Medium	Support plans are reviewed at least annually or earlier in collaboration with participants, in accordance with their changing needs or circumstances.	Easy read Participant Support Plans Developed. Plans are to be reviewed with participants as needs change or new plans are initiated by participants and calanderised with quality and compliance coordinator to ensure regular reviews undertaken	NDIS Manager	1/04/2023
7.22	1. Rights and Responsibilities	2. Feedback and Complaints Management	Moderate	Rare	Medium	Rights and responsibilities (e.g. right to access advocate services, how to make a complaint) discussed and/or provided to the participant	Created an easy read resource regarding complaints and accessing independent advocacy services and inbeded in participant induction booklet	NDIS Manager	5/04/2023
<b>8. GOVERNANCE</b>									
8.1	2.Provider Governance and Operational Management	2. Risk Management	Major	Possible	High	Lack of risk assessed roles bieng monitored for the incumbert holding relevant probility clearances, including NDIS worker clearance	Include risk assessed roles on the HR tracker for probility monitoring for currency and enter reminders into complaince coordinator email for all expirys	NDIS Quality and Compliance Coordinator	1/03/2024
8.2	2.Provider Governance and Operational Management	2. Human Resource Management	Moderate	Unlikely	Medium	Lack of board members completing the NDIS governance training	Developed NDIS Board Induction and incldue all training and links to complete and information on rissk assessed roles the requirement for worker clearances for risk assessed roles.	NDIS Quality and Compliance Coordinator	5/04/2023
8.3	2.Provider Governance and Operational Management	2. Quality Management	Major	Likely	High	Lack of policies and procedures meeting compliance requiriements as a registered provider of modules 1-4	Update and submit for review all new policies for NDIS - print and bind a policy booklet for each site and imbed in monthly staff meeting for referesher of policies at least annually	NDIS Manager	17/03/2024
8.4	2.Provider Governance and Operational Management	2. Quality Management	Major	Likely	High	Lack of organsiational governance policy that reflects the NDIS practice standards	Update organisational governance policy manual, services and supports for daily living policy and personal care/clinical care policy to reflect NDIS practice standards and not aged care standards as it currently does	NDIS Manager	



### 6.2.3. Finance Report for period ending 31st March 2024

**Report Type** Finance Report

**Department** Executive Services Chief Executive Office

**Prepared by** Manager of Governance and Executive services

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#### **Purpose**

The purpose of this report is to provide Council with the financial management report for the period ended 31 March 2024

#### **Recommendations**

- A. That the report Finance Report for period ending 31st March 2024 is received and noted

#### **Regional Plan**

Not Applicable

#### **Background**

Regulation 17(1) of the General Regulations requires the CEO each month give the council a report setting out the actual income and expenditure for the year to date; the most recently adopted annual budget; and details of any material variances between the most recent actuals and the most recently adopted annual budget.

Attached report includes.

- Balance sheet
- Income and expenditure
- Accounts Receivable and payable age analysis
- Cash and Investment held.
- Capital expenditure summary.
- Payment and reporting obligations for GST, fringe benefits tax, PAYG withholding tax, superannuation and insurance.

#### **Risk statement.**

No risk assessment has been carried out at this stage.

#### **Council officer conflict of interest declaration**

We the Author and Approving Officer declare we do not have a conflict of interest in relation to this matter.



**Attachments**

1. Finance report for the month ended March [**6.2.3.1** - 17 pages]





**Victoria Daly**  
REGIONAL COUNCIL

**VICTORIA DALY REGIONAL COUNCIL**  
ABN 66 931 675 319

**Monthly Income and Expenditure Statement For the Period Ended 31 March 2024**

	YTD Actuals \$	YTD Budget \$	YTD Variance \$	Annual Budget \$
<b>OPERATING INCOME</b>				
Rates	1,187,603	1,161,904	25,699	1,161,904
Charges	940,853	936,810	4,043	936,810
Fees and Charges	4,036,046	4,950,171	(914,125)	6,600,228
Operating Grants and Subsidies	6,568,718	7,392,739	(824,021)	9,856,985
Interest / Investment Income	610,595	473,133	137,461	709,700
Commercial and Other Income	148,033	442,104	(294,071)	663,155
<b>TOTAL OPERATING INCOME</b>	<b>13,491,848</b>	<b>15,356,861</b>	<b>(1,865,013)</b>	<b>19,928,782</b>
<b>OPERATING EXPENDITURE</b>				
Employee Expenses	7,275,066	8,988,805	(1,713,738)	11,971,821
Materials and Contracts	4,343,198	5,346,766	(1,003,568)	6,661,015
Elected Member Allowances	157,470	183,076	(25,605)	244,101
Elected Member Expenses	71,992	69,808	2,184	92,698
Council Committee & LA Allowances	20,400	25,113	(4,713)	33,484
Council Committee & LA Expenses	2,717	3,863	(1,145)	5,150
Depreciation, Amortisation, and Impairment	1,952,519	2,396,739	(444,220)	3,195,652
Interest Expenses	-	-	-	-
Other Expenses	-	375	(375)	500
<b>TOTAL OPERATING EXPENDITURE</b>	<b>13,823,363</b>	<b>17,014,543</b>	<b>(3,191,180)</b>	<b>22,204,420</b>
<b>OPERATING SURPLUS / DEFICIT</b>	<b>(331,515)</b>	<b>(1,657,682)</b>	<b>1,326,167</b>	<b>(2,275,638)</b>

**VICTORIA DALY REGIONAL COUNCIL**  
**ABN 66 931 675 319**

**Monthly Operating Position**

	YTD Actuals \$	YTD Budget \$	YTD Variance \$	Annual Budget \$
<b>BUDGETED OPERATING SURPLUS / DEFICIT</b>	<b>(331,515)</b>	<b>(1,657,682)</b>	<b>1,326,167</b>	<b>(2,275,638)</b>
<b>Remove NON-CASH ITEMS</b>				
Less Non-Cash Income			-	
Add Back Non-Cash Expenses	1,952,519	2,396,739	(444,220)	3,195,652
<b>TOTAL NON-CASH ITEMS</b>	<b>1,952,519</b>	<b>2,396,739</b>	<b>(444,220)</b>	<b>3,195,652</b>
<b>Less ADDITIONAL OUTFLOWS</b>				
Capital Expenditure/Capital works	1,676,429	6,977,374	(5,300,945)	9,303,166
Borrowing Repayments (Principal Only)			-	
Transfer to Reserves			-	-
Other Outflows			-	
<b>TOTAL ADDITIONAL OUTFLOWS</b>	<b>(1,676,429)</b>	<b>(6,977,374)</b>	<b>5,300,945</b>	<b>(9,303,166)</b>
<b>Add ADDITIONAL INFLOWS</b>				
Capital Grants Income	781,409	1,515,095	(733,686)	2,020,126
Prior Year Carry Forward Tied Funding	855,353	2,744,194	(1,888,841)	3,658,925
Other Inflow of Funds	1,531,685	1,336,814	194,871	1,782,419
Transfers from Reserves	461,051	1,455,000	(993,949)	1,940,000
<b>TOTAL ADDITIONAL INFLOWS</b>	<b>3,629,498</b>	<b>7,051,102</b>	<b>(3,421,604)</b>	<b>9,401,470</b>
<b>NET BUDGETED OPERATING SURPLUS / DEFICIT</b>	<b>3,574,074</b>	<b>812,785</b>	<b>2,761,289</b>	<b>1,018,318</b>

Total revenue year to date is \$13,491,848 and is under the budget by \$1,865,013.

- Rates and Charges: Rates were over the budget by \$25,699, and Refuse Charges were over the budget by \$4,043. The variance is due to required adjustments.
- Fees and Charges were under the budget by \$914,125. The following factors contribute to the variance:
  - Income from CDP and NDIS is received in arrears; revenues for services delivered in March will be received in April.
  - Income from NDIS is expected to be less than budgeted due to fewer participants than anticipated.
- Grants and Subsidies were under budget by \$824,021. The grants were received later than budgeted—timing difference. OSCH, FAA (advance payment), Night Patrol (second instalment) and FAG (advance payment) grants have not been received.
- Interest income was over the budget by \$137,461. The Council has invested more excess/surplus cash in term deposits than originally planned.

- Commercial and other Income was under budget by \$294,071. The following factors contributed to the variance:
  - Income from Aged care programs is received in arrears a month after the services is delivered,
  - Profit from the disposal of plants and equipment has yet to materialise. Plant and equipment and motor vehicles are to be auctioned before the end of the financial year.
  - Income from HCP is expected to be lower than originally budgeted due to fewer participants than anticipated.

During March, the Council received a total operational income of \$610,794. This comprises \$461,987 in Fees and charges, \$24,826 in Grants and Subsidies, \$116,739 in interest income, and \$9,753 in commercial and other income. In the same month, Rates income was adjusted by \$2,511.

Income	March 2024 Actuals	YTD Actual
	\$	\$
Rates	(2,511)	1,187,603
Charges	0	940,853
Fees and Charges	461,987	4,036,046
Operating Grants and Subsidies	24,826	6,568,718
Interest / Investment Income	116,739	610,595
Commercial and Other Income	9,753	148,033
<b>Total Income</b>	<b>610,794</b>	<b>13,491,848</b>

Total expenditure year to date is \$13,823,363 and is under the budget by \$3,191,180.

- Employees' expenses were under the budget by \$1,713,738. The underspent is due to vacant positions across the organisation.
- Materials and Contracts costs were under the budget by \$1,003,568. The major Contributors of underspends are:
  - Training, seminars, and professional development,
  - Contractors' expenses,
  - Materials and consumables,
  - Fuel,
  - Software,
  - Travel and mileage allowance,
  - Repairs and maintenance,
  - Accommodation and
  - Cleaning expenses.
- Elected Member Allowances were \$25,605 under budget. The variance is due to Underspending on extra meeting allowances.
- Elected Member Expenses were over the budget by \$2,184.
- The Council Committee and LA allowances were under the budget by \$4,713.
- Council Committee & LA Expenses were under the budget by \$1,145.
- Depreciation is under the budget of \$444,220.
- Other expenses under the budget by \$375

In March, the total operational expenditure was \$1,348,385. This comprises \$738,049 in Employee costs, \$356,244 in Materials and contracts costs, \$17,231 in Elected Member allowance, \$11,365 in Elected members' expenses, \$4,600 in Committee and LA allowance, \$1,972 in Committee and LA expenses, and \$218,924 in depreciation.

OPERATING EXPENDITURE	March 2024 Actuals	YTD Actual
	\$	\$
Employee Expenses	738,049	7,275,066
Materials and Contracts	356,244	4,363,198
Elected Member Allowances	17,231	157,470
Elected Member Expenses	11,365	71,992
Council Committee & LA Allowances	4,600	20,400
Council Committee & LA Expenses	1,972	2,717
Depreciation, Amortisation, and Impairment	218,924	1,952,519
	<b>1,348,385</b>	<b>13,843,363</b>

**The following is a list of capital work and expenditures to date.**

- 18 Pearce St project \$461,051 (work in progress)
- Solar \$31,960 (Amanbidji)(Completed)
- Two Troppo Birds Hides \$5,073 (Completed)
- Playground-Yarralin \$273,660 (Completed)
- Playground-Pine Creek \$116,984 (Completed)
- Playground-Naiyu \$142,488 (Completed)
- Staff house renovation- Kalkarindji \$15,908 (Completed)
- New Mower \$41,200 (Completed)
- Playground-Bulla \$26,906 (Completed)
- Sport and Rec Trailer \$15,818 (Completed)
- Wattie Creek Crossing \$300,000 (work in progress)
- Daguragu Sports & Rec Hall Upgrade \$126,097 (work in progress)
- Duplex – Yarralin \$935 (work in progress)
- Cyclone Container Block \$6,750
- Cab Tractor \$108,000
- Respite Facility-Timber Creek \$3,600

**In March, the following payments were processed for capital works.**

- 18 Pearce St project \$34,653.77
- Respite Facility-Timber Creek \$3,600



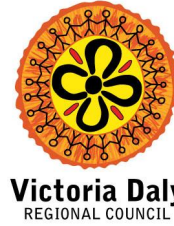
**Victoria Daly**  
REGIONAL COUNCIL

The table below compares capital revenue and expenditure to budget. Expenses will increase as projects progress.					Funded by			
CAPITAL EXPENDITURE	YTD Actuals \$	YTD Budget \$	YTD Variance \$	Current Financial Year (Annual) Budget \$	Council's Reserves/ Operational Revenue	LA Fundings	Grants	Insurance Claims & Grants
Arts Centre Park Shade Trees and Outdoor table-Kalkarindji	-	-	-	20,000	-	20,000	-	-
Basketball Court-Lingara			-	30,000		30,000		
Bus Shelter-Kalkarindji	-	-	-	40,000	-	40,000	-	-
Cab tractor(2x)	108,000	130,000	22,000	260,000	260,000	-	-	-
Cold drinking water fountains-Kalkarindji			-	80,000		80,000		
Compactor truck			-	250,000	250,000			
Daguragu Sports & Rec Hall Upgrade	126,097	126,097	-	635,947	-	-	635,947	-
Daguragu Street Lighting	-	-	-	30,000	30,000	-	-	-
Duplex - Yarralin	935	935	-	815,261	490,000	-	325,261	-
Flood recovery program			-	1,432,419	-	-	-	1,432,419

Kalkarindji Street Lighting	-	-	-	35,000	35,000	-	-	-
Lot 81 and Coms house Timber Creek Sceptic Upgrade (Provisional)	-	-	-	100,000	100,000	-	-	-
Major stormwater drain repairs-Pine Creek			-	318,243	-	-	318,243	-
Minor infrastructures-Pine Creek	-	-	-	100,000		50,000	50,000	-
Minor infrastructures-Timber Creek	-	-	-	100,000	20,000	30,000	50,000	-
Motor vehicles	-	-	-	200,000	200,000	-	-	-
New office Building-18 Pearce St	461,051	461,051	-	1,000,000	1,000,000	-	-	-
Night Patrol Bus (x2)			-	137,382		-	137,382	
No 4 Fitzer Road - Respite Centre Upgrade	3,600	3,600	-	626,883	-	-	626,883	-
Playground Installation (With Shade Shelter)-Yarralin	273,660	273,660	-	320,000	-	150,000	170,000	-
Playground Installation-Naiuyu (Playground with Soft fall Rubber)	142,488	142,488	-	150,000	-	-	150,000	-
Playground upgrade-Bulla	26,906	26,906	-	30,000		30,000		
Power card-operated lights for Yarralin Oval			-	30,000		30,000		
Cyclone Container Block-Timber Creek	6,750	-	(6,750)	-				
Proposed Oval Lighting	-	-	-	825,000	-		825,000	-
Road works on Wilson Street-Timber Creek.	-	-	-	518,050	160,000	-	358,050	-
Sealing road accessing to WTS in Timber			-	148,800			148,800	

Shade Shelter Installation- Playground-Pine Creek	116,984	110,000	(6,984)	110,000	-	-	110,000	-
Side-by-side all-terrain vehicles (ATV) (X5)			-	200,000	200,000			
Sign - Northern and Southern entrances-Pine Creek			-	20,000		20,000		
Solar light- Amanbidji	31,960	31,960	-	38,000		38,000		
Sports and Rec Trailer	15,818	20,000	4,182	40,000	20,000		20,000	
Staff House Upgrade-Kalkarindji	15,908	15,908	-	15,908	15,908			
Two Troppo Bird Hides	5,073	5,073	-	5,073	5,073	-	-	-
Water and Electricity project- Pigeon Hole			-	250,000			250,000	
Zero-turn mowers (2x)	41,200	41,200	-	41,200	41,200	-	-	-
Wattie Creek Crossing	300,000	350,000	50,000	350,000	-		350,000	
<b>TOTAL CAPITAL EXPENDITURE</b>	<b>1,676,429</b>	<b>1,738,877</b>	<b>62,448</b>	<b>9,303,166</b>	<b>2,827,181</b>	<b>518,000</b>	<b>4,525,566</b>	<b>1,432,419</b>

VICTORIA DALY REGIONAL COUNCIL  
ABN 66 931 675 319



**Monthly Balance Sheet Report**

Balance Sheet as at 31 March 2024	YTD Actuals \$	Note Reference
<b>ASSETS</b>		
Cash at Bank		(1)
Tied Funds	5,551,962	
Untied Funds	16,157,059	
Accounts Receivable		
Trade Debtors	246,123	(2)
Rates & Charges Debtors	670,143	(2)
Other Current Assets	(205,132)	
<b>TOTAL CURRENT ASSETS</b>	<b>22,420,154</b>	
Non-Current Financial Assets	172,075	
Property, Plant and Equipment	44,175,525	
<b>TOTAL NON-CURRENT ASSETS</b>	<b>44,347,600</b>	
<b>TOTAL ASSETS</b>	<b>66,767,754</b>	
<b>LIABILITIES</b>		
Accounts Payable	10,183	(3)
ATO & Payroll Liabilities	130,578	(5)
Current Provisions	1,056,751	(6)
Accruals	1,233	
Other Current Liabilities	1,575,127	(7)
<b>TOTAL CURRENT LIABILITIES</b>	<b>2,773,872</b>	
Non-Current Provisions	102,276	
Other Non-Current Liabilities	70,466	
<b>TOTAL NON-CURRENT LIABILITIES</b>	<b>172,742</b>	
<b>TOTAL LIABILITIES</b>	<b>2,946,614</b>	
<b>NET ASSETS</b>	<b>63,821,141</b>	
<b>EQUITY</b>		(8)
Asset Revaluation Reserve	2,377,320	
Reserves	38,669,536	
Accumulated Surplus	22,774,284	
<b>TOTAL EQUITY</b>	<b>63,821,141</b>	



**Note 1: Cash and Investment Held**

The Council invests cash from its operational and business Savers accounts to ensure it receives the best return on its cash holdings. As of March 2024, the Council's cash and cash equivalent decreased by \$244,606 from \$4,953,626 in February to \$4,709,020 in March. A total of \$4,000,000 in term deposits matured during the month of March. \$4,000,000 was reinvested with CBA for six months: \$2,000,000 at an interest rate of 4.85% and \$2,000,000 at interest rate of 4.86%. The amount invested in term deposits as of 31 March 2024 is \$17,000,000.

26% (\$5,551,962) of \$21,709,020 are tied funds.

**Cash and Investments**

Business Saver				2,865,395
Operational Account				757,723
Trust account				1,085,502
Petty Cash				400
				<u>4,709,020</u>

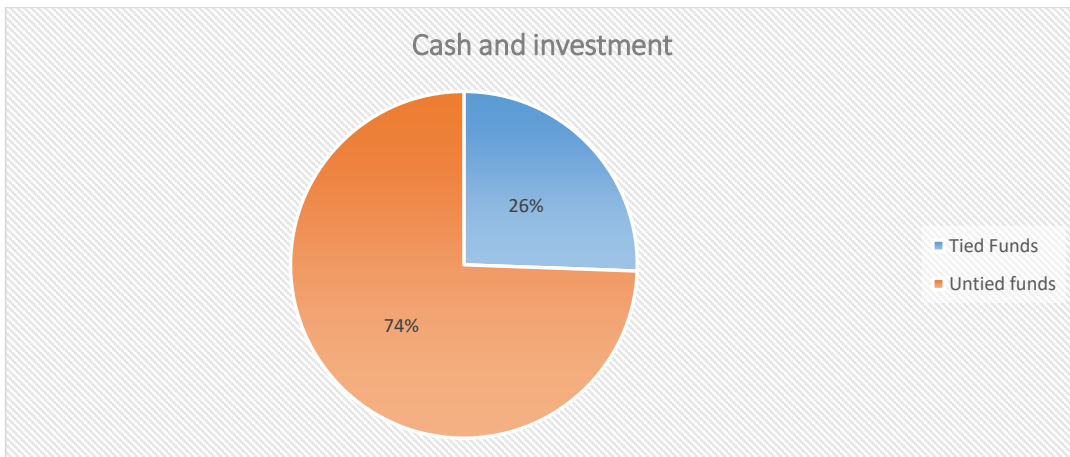
Cash Investments	Interest Rates	Maturing date	Maturing Term	Term Deposit amount	Total Expected Interest on Maturity
Term Deposit-CBA	4.97%	24/04/2024	6 months	1,500,000	36,764.38
Term Deposit-CBA	5.04%	27/05/2024	6 months	2,000,000	49,985.75
Term Deposit-CBA	4.87%	24/06/2024	6 months	2,000,000	47,766.03
Term Deposit-CBA	4.99%	25/07/2024	6 months	2,000,000	49,763.29
Term Deposit-CBA	4.99%	25/07/2024	6 months	1,500,000	37,322.47
Term Deposit-CBA	5.04%	31/07/2024	6 months	2,400,000	60,314.30
Term Deposit-CBA	4.85%	30/08/2024	6 months	2,000,000	47,304.11
Term Deposit-CBA	4.86%	30/09/2024	6 months	2,000,000	49,798.36
Term Deposit-CBA	4.94%	24/10/2024	8 months	1,600,000	53,054.25
				<b>17,000,000</b>	<b>432,072.93</b>

**Tied Funds**  
**Untied funds**

**5,551,962**  
**16,157,059**

**Total**

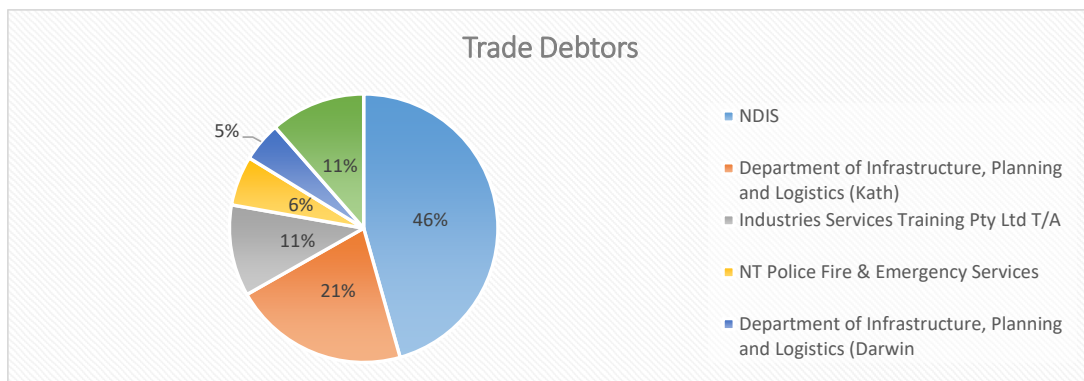
**21,709,020**



**Note 2: Statement of Trade Debtors**

The Council's trade receivables balance as of 31 March 2024 was \$246,123, of which \$148,882, or approximately 60%, was more than 90 days old. The finance team and Professional Collection Services (PCS) are following up on overdue invoices.

Contact	Current	1 Month	2 Months	3 Months	>3 Months	Total	
NDIS	32,291	-	-	1,489	78,502	112,282	45.6%
Department of Infrastructure, Planning and Logistics (Kath)	52,085	-	-	-	-	52,085	21.2%
Industries Services Training Pty Ltd T/A	-	-	-	-	27,087	27,087	11.0%
NT Police Fire & Emergency Services	-	-	-	-	14,713	14,713	6.0%
Department of Infrastructure, Planning and Logistics (Darwin)	-	-	-	-	11,783	11,783	4.8%
Other Debtors	5,701	-	180	5,494	16,799	28,174	11.4%
	<u>90,078</u>	<u>-</u>	<u>180</u>	<u>6,983</u>	<u>148,882</u>	<u>246,123</u>	
	37%	0%	0%	3%	60%		



In March, the Council received \$100,919 from Ratepayers. Total rates and refuse charges outstanding as of 31 March was \$670,143, of which \$306,005.75 are rates and charges for the financial year 2023-24, and \$363,994.25; the remaining balance is for prior years. The finance team is reviewing the large amount and investigating why the rates and charges are not paid by contacting the ratepayers.

**Rates and Refuse charges.**

Balance as at 01/03/2024	771,062
Cash received in March	<u>100,919</u>
Balance as at 31/03/2024	<u><u>670,143</u></u>

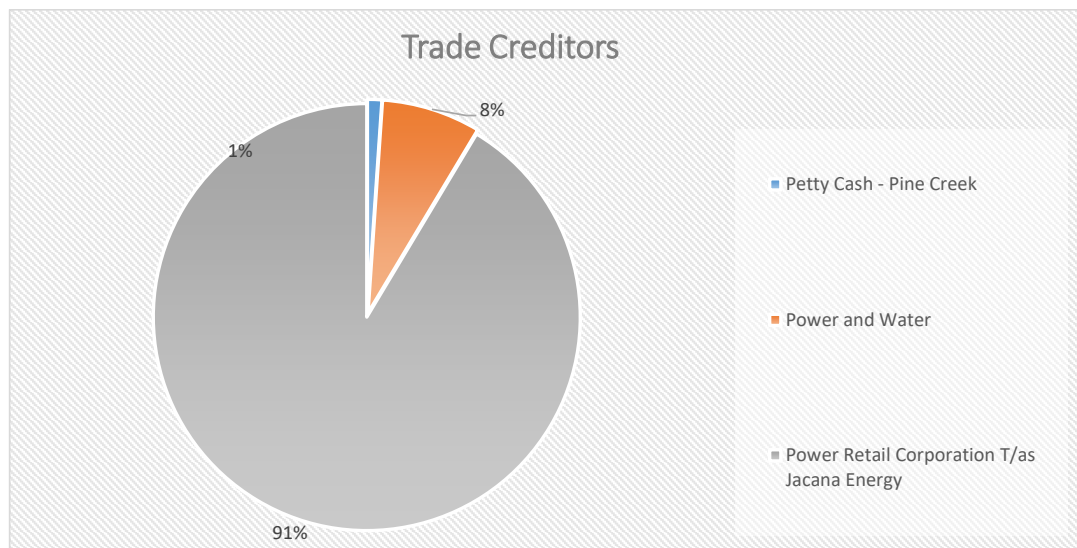
**Note 3: Statement on Trade Creditors**

The Council's trade payables balance as of 31 March 2024 was \$10,183.

Settlement of the Council's trade payables is generally within 30 days.

The Council has no trade payables that it classifies as non-current, i.e., not payable within 12 months. The negative balance in the report represents the credit notes the Council received from Suppliers after paying the suppliers' invoices. These amounts will be offset against future invoices.

Contact	Current	1 Month	2 Months	3 Months	>3 Months	Total	
eMerge IT Solutions and NT Tech	-	(189)	-	-	-	(189)	
Petty Cash - Pine Creek	-	111	-	-	-	111	1%
Power and Water	-	-	416	-	353	769	7%
Power Retail Corporation T/as Jacana Energy	9,364	-	-	-	-	9,364	89%
Yarralin Store - Kyang-Kyang Aboriginal Corporation	-	-	-	-	300	300	3%
Zoleo	-	(172)	-	-	-	(172)	0%
	9,364	(249)	416	-	653	10,183	
	92%	-2%	4%	0%	6%		



**Note 4: Corporate credit cards.**

The Council has a credit card facility of \$200,000, of which \$92,000 has been allocated to 13 cardholders.

For March 2024, there was an aggregate spending of \$23,187.

Masked Card Number	Transaction Dates		Amount
5550-05XX-XXXX-1528	24-Feb-24	24-Mar-24	2,198
5550-05XX-XXXX-2566	24-Feb-24	24-Mar-24	515
5550-05XX-XXXX-4529	24-Feb-24	24-Mar-24	4,655
5550-05XX-XXXX-5569	24-Feb-24	24-Mar-24	7,566
5550-05XX-XXXX-5850	24-Feb-24	24-Mar-24	1,770
5550-05XX-XXXX-6309	24-Feb-24	24-Mar-24	1,295
5550-05XX-XXXX-7716	24-Feb-24	24-Mar-24	540
5550-05XX-XXXX-8147	24-Feb-24	24-Mar-24	5
5550-05XX-XXXX-9718	24-Feb-24	24-Mar-24	4,644
5550-05XX-XXXX-4541	24-Feb-24	24-Mar-24	(23,187)

One transaction was made in March using the Mayor's credit card.

**Cardholder Name:** Mayor

Transaction Date	Amount	Supplier's Name	Reason for the Transaction
	\$		
18-Mar-24	5.00	WATERFRONT PARKING	Car park fees
<b>Total</b>	<b>5.00</b>		

Five credit card transactions were made in March using the CEO's credit card.

**Cardholder Name:** CEO

Transaction Date	Amount	Supplier's Name	Reason for the Transaction
	\$		
27-Feb-24	231.00	KATHERINE COUNTRY CLUB	Catering services for OCM
04-Mar-24	16.00	NEWS PTY LIMITED	Newspapers
05-Mar-24	3,261.31	WWW.WEBJET.COM.AU	Flight charges for CEO and Mayor
06-Mar-24	3,841.31	WWW.WEBJET.COM.AU	Flight charges for a Deputy Mayor and a Councillor
25-Mar-24	135.00	NDIS SCREENING	NDIS screening check
25-Mar-24	81.00	SAFE NT	Police check
<b>Total</b>	<b>7,565.62</b>		

**Note 5: Statement on Australian Taxation Office, Superannuation, and Insurance Obligations**  
**(a) Australian Taxation Office**

The Council has the following reporting and payment obligations with the Australian Taxation Office:

- (i) Goods and Services Tax – Amounts are reported and remitted monthly.
- (ii) PAYG Income Tax Withheld – Amounts are reported and remitted fortnightly as part of Single Touch Payroll (STP) arrangements and
- (iii) Fringe Benefits Tax—Instalment amounts are paid quarterly, and an FBT return for the 12 months ending 31 March must be lodged each year.

As of 31 March, the GST liability was \$53,455, and no PAYG liability was outstanding.

**(b) Superannuation**

Employees are paid defined superannuation contributions in accordance with the superannuation legislative framework. Superannuation contributions are paid to either an employee's choice of complying fund or the Council's default fund, which is currently Hostplus Super.

The Council contributes 11 percent of an employee's ordinary time earnings to their selected super account. Some Council employees receive an additional superannuation contribution as part of their agreed remuneration package.

Superannuation payments are remitted monthly.

As of 31 March 2024, super liability was \$77,123. The Council will remit this payment to superannuation funds in April.

		Obligation Accrued	To be paid/refunded
GST	53,455	March	April
Super	77,123	March	April
PAYG	-	March	April
	<b>130,578</b>		

**Note 6: Provisions**

The provision includes annual leave, LSL, and toils liability accrual. As of March 2024, employees' leave liability increased by \$8,203 from \$1,048,547 in February to \$1,056,751 in March.

	March	Feb	Difference
Provision - Annual Leave	687,693	667,631	20,061
Provision - LSL (Current)	369,058	380,832	(11,774)
Provision - TOIL	0	84	(84)
	<b>1,056,751</b>	<b>1,048,547</b>	<b>8,203</b>

**Note 7: Other Current Liabilities**

There was no change in the balance of other current liabilities compared to February.

<b>Current Liabilities</b>	<b>March</b>	<b>Feb</b>	<b>Difference</b>
Client Contribution clearing	1,054	1,054	-
Community Fund (Generated from CDP IGA)	6,837	6,837	-
Council Rates Received in Advance	6,821	6,821	-
Credit Card - B Hylands	-	-	-
Credit Card-2 - P Kaur	-	-	-
Current Lease Liability	120,769	120,769	-
Current Liability Other General	53,300	53,300	-
HCP Client Contingencies	29,710	29,710	-
Material Fund (CDP IGA)	7,682	7,682	-
Payables - Bond and Deposit	12,520	12,520	-
Payables - CDP Income Generation Activity	21,637	21,637	-
Payables - CDP Outcome Pay	5,000	5,000	-
Payables - Employee	-	-	-
Payables - Others	4,601	4,601	-
Payables - Retention Money	116,057	116,057	-
Payroll Clearing Account	-	-	-
Payroll Clearing-Paid Parental Leave	3,531	3,531	-
Rounding	0	0	0
Unexpended Grants	1,185,606	1,185,606	-
Workers Compensation Clearing	-	-	-
	<u>1,575,127</u>	<u>1,575,126</u>	<u>0</u>

**Note 8: Equity**

In March, the Council received less income than expenditures, resulting in the Equity balance decreasing by \$683,463 from \$64,504,603 in February to \$63,821,140 in March.

<b>Equity</b>	<b>March</b>	<b>Feb</b>
Accumulated Surplus/Deficit	21,097,475	21,097,475
Asset Reval Reserve	35,177,330	35,177,330
Asset Revaluation-Motor Vehicles	1,262,316	1,262,315
Asset Revaluation-Plant & Equipment	1,115,005	1,115,005
Assets Replacement Reserve	530,000	530,000
Unexpended Grants Reserve	2,962,206	2,962,206
	<b>62,144,331</b>	<b>62,144,331</b>
<b>Add:</b>		
Operating Surplus/Deficit	(331,515)	764,810
Capital items	476,638	63,777
Insurance Claims	1,531,685	1,531,685
Current Year Earnings	1,676,809	2,360,272
	<u>63,821,140</u>	<u>64,504,603</u>

**Note 9: Insurance for the financial year 2023/24.**

All insurance premium payments are up to date. There was no payment made in March.

Details of the Council's current insurance arrangements for the 2023-2024 financial year are as follows

Insurance	Amount \$	GST	Net	Paid on
Motor vehicle	53,795	4,890	48,905	01-Oct-23
Property	67,341	2,936	64,406	29-Sep-23
Property	866,065	78,733	787,332	06-Oct-23
1st Instalment Workers Comp	115,689	10,517	105,172	25-Aug-23
2nd Instalment Workers Comp	115,689	10,517	105,172	01-Oct-23
3rd Instalment Workers Comp	115,689	10,517	105,172	01-Dec-23
4th Instalment Workers Comp	-	-	-	
	<b>1,334,269</b>	<b>118,111</b>	<b>1,216,158</b>	

**Note 10: Key Indicators year to date.**

Key indicators	Jul-Mar 24	Jul-Feb 24	Variance
<b>Cash</b>			
Cash received	17,178,105	16,365,568	5%
Cash spent	18,402,865	17,273,943	7%
Closing bank balance	4,708,620	4,953,226	-5%
<b>Profitability</b>			
Income	15,801,343	15,104,958	5%
Expenses	14,144,533	12,744,685	11%
Profit (loss)	1,676,809	2,360,272	-29%
<b>Balance Sheet</b>			
Debtors	246,123	299,192	-18%
Creditors	10,183	1,949	423%
Net assets	63,821,140	64,504,603	-1%
<b>Ratios</b>			
Current assets to liabilities	3.91	4.06	-4%
Liabilities to assets Ratio	0.044	0.042	5%

**The current ratio** measures an organisation's capacity to meet its current obligations, and a good current ratio should be more than 1.5. VDRC's Current ratio is 3.91: For every \$1.00 in current liabilities, VDRC has \$3.91 of Current assets. In other words, VDRC's current assets are 3.91 times more than its current liabilities.

**The Liabilities to Assets Ratio (L/A)** is a solvency ratio that examines how much of an organisation's assets are made of liabilities. A good L/A ratio is around 0.3 to 0.6. VDRC's L/A ratio is 0.044: For every \$1.00 of assets, VDRC has \$0.044 of debt (liabilities). In other words, VDRC's total liabilities are 4.4% of total assets.



**Note 11: Quarterly Report on Planned Major Capital Works**

<b>Class of Assets</b>	<b>Total Prior Year(s) Actuals \$</b> <b>(A)</b>	<b>YTD Actuals \$</b> <b>(B)</b>	<b>Total Actuals \$</b> <b>(C = A + B)</b>	<b>Total Planned Budget ** \$</b> <b>(D)</b>	<b>Total Yet to Spend \$</b> <b>(E = DC)</b>	<b>Comments</b>
Cab tractor(2x)	-	108,000	108,000	260,000	152,000	One cab tractor delivered. One to be ordered
Compactor truck	-	-	-	250,000	250,000	To go to tender, won't be delivered this financial year
Daguragu Sports & Rec Hall Upgrade	881	126,097	126,977	636,828	509,851	Waiting on the engineers' report
Duplex - Yarralin	24,738	935	25,673	840,000	814,327	A new scope of work is being created
Flood recovery program	-	-	-	1,432,419	1,432,419	In progress, waiting on quotes from builders
Major storm water drains repairs- Pine Creek	-	-	-	318,243	318,243	To go to the tender
Motor vehicles (x3)	-	-	-	200,000	200,000	Purchase order raised
New office Building-18 Pearce St	1,451,203	461,051	1,912,254	3,000,000	1,087,746	Currently going through compliance
No 4 Fitzer Road - Respite Centre Upgrade	-	3,600	3,600	626,883	623,283	A new scope of work is being created
Playground Installation (With Shade Shelter)-Yarralin	-	273,660	273,660	320,000	46,340	Completed
Playground Installation-Naiyyu (Playground with Soft fall Rubber)	-	142,488	142,488	150,000	7,512	Completed



Proposed Oval Lighting	-	-	-	825,000	825,000	Still awaiting the grant application outcome
Road works on Wilson Street-Timber Creek	-	-	-	518,050	518,050	To go back to the tender
Side-by-side all-terrain vehicles (ATV) (X5)	-	-	-	200,000	200,000	Assessing quotes for PO to be raised
Water and Electricity project-Pigeon Hole	-	-	-	250,000	250,000	Purchase Order has been raised
Wattie Creek Crossing-Kalkarindji	-	300,000	300,000	350,000	50,000	Further work is to be carried out once ground radar work is completed.



## **7. General Business**

## **8. Confidential**

Nil

Members of the press and public to be excluded from the meeting of the Closed Session and access to the correspondence and reports relating to the items considered during the course of the Closed Session be withheld.

## **9. Next Meeting**