
Practical Systems Review

A Self-Review
Tool for Local
Government to
Evaluate the
Capability and
Performance of
Compliance
Systems

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HCCREMS
HUNTER & CENTRAL COAST REGIONAL
ENVIRONMENTAL MANAGEMENT STRATEGY

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Introduction

The periodical review of Local Governments systems for managing compliance activities, both internal and of the regulated community is acknowledged as not only good business practice, but essential for councils to adequately manage and mitigate their risk of both environmental harm and legal liability.

The Practical System Review provides the following benefits to Councils:

- An opportunity for discussion and reflection on organisational processes
- A standard methodology for identifying strengths and weaknesses in current compliance systems and practices
- A structured methodology for tracking (and potentially reporting on) progress over time
- An ability to prioritise corrective actions and improvements to systems to ensure they deliver the desired compliance outcomes
- Building staff knowledge and skills in relation to best practice.

The “Practical System Review” tool has been developed as a “review” checklist, and designed to be tailored to suit the review objectives and/or the systems being audited.

This review tool does not include a scoring system or provide any ‘overall rating’, but does enable councils to identify areas for improvement and rank their own priorities for addressing any identified corrective actions.

Councils utilising the “Practical Systems Review” are encouraged to first determine the scale and scope of the review, and remove any questions not suited to the department or issue being reviewed. The tool provides adequate opportunity for the addition of questions specific to the issue being reviewed, as well as Key Performance Indicators specific to Council or department under review.

Review Methodology

The “Practical Systems Review” is primarily designed as a checklist review of systems, capacity and performance of regulatory processes. The basic design of the tool identifies the following review categories:

- Corporate systems – reviews the underlying systems and processes used by councils to manage and track compliance activities.
- Regulatory system structure – reviews each aspect of Council’s compliance systems (dependent on the scope of the Review). Questions are posed on issues such as complaint management, inspections and monitoring, investigations, etc.
- Legislation change and policy – reviews councils responsiveness to changes in legislation and internal policy.
- Administration – reviews the systems that manage delegations, risk management, document control, record keeping and auditing.
- Ethics – reviews the systems council employs to ensure Officers behave ethically, to investigate claims of unethical behaviour and to apply natural justice.
- Training – reviews councils systems for providing training, and keeping officers training skills up-to-date.
- Performance measurement – reviews systems that measure performance of compliance activities.
- Research and review – reviews councils processes of utilising intelligence to drive compliance activities and system improvements.

Assessment questions are arranged under theme headings and, where appropriate, sorted into the following sub-categories:

- Core Capability Elements – items considered essential for effective regulation systems;
- Best Practice Capability Elements – items considered to exceed minimum standards, but provide added value to regulatory systems; and
- System Health Elements – items that determine the flexibility, robustness and currency of a regulatory process.

Recommended Review Process

The following process is recommended for councils utilising the “Practical System Review Tool”.

The Tool has been developed to enable review of an entire Council compliance department, or individual units such as environmental compliance, parking, or health inspections. The Tool allows (and encourages) its questions to be tailored to suit the issues and KPIs relating the areas under review.

Step 1 – Select Review Officer

Select a staff member to lead the review process. The Review Officer should be responsible for overall coordination of the review process, including:

- Organising relevant staff to participate in review meetings
- Determining the review objectives
- Tailoring of questions to suit the review objectives and the issue/department being assessed
- Compilation of evidence
- Developing recommended corrective actions
- Developing priorities for corrective actions
- Developing a final review report
- Reporting on the outcomes of the review

Step 2- Determine objectives and scope of the review

The Review Officer, with the assistance of management, shall clearly articulate the scope and objective of the Review. The Review Officer needs to clearly identify the desired outcome, and provide an understanding of what questions are required to be answered, to enable management to ensure the review addresses the required issues.

The review Officer, with input from management, shall review the standard questions included in the Assessment Tool and add, modify, or delete to suit the agreed scope. It is recognised that many sections of the review may not be of interest depending on what section of councils is being assessed.

Where specific departments or services are under review, the specific departmental KPI’s should be added to the review.

Step 3 – Conduct the review

The Review Officer shall arrange the required interviews with staff and management, to respond the questions included in the Tool. Ample time should be set aside for the questioning, and gathering of evidence.

The Review Officer should be familiar with the content in the Tool prior to conducting interviews. It is important to identify the intent of the requirements behind the questions in the interview so that the Review Officer is able to ascertain the ability of any activity to achieve the outcomes sought by Council. When conducting interviews, the Review Officer should test the effectiveness of implementation of the requirement with further questions (i.e. don't simply ask Yes / No questions, but seek explanation of activities and outcomes achieved).

The Review Officer is required to respond to the following items in the Review:

- “Compliant / Not Yet Compliant” or “Yes / No” (depending on the question). The Review Officer is required to make a call on whether the question posed, is adequately being addressed by the systems in place, and being utilised by Council Staff.
- “Comments and Evidence”. The Review Officer is required to ask sufficiently detailed questions to determine what evidence, if any, is available to substantiate the claims for compliance (or otherwise). Comments on how strongly officers feel about the adequacy of the process, consistency of application, etc. should also be noted.
- “Recommendation / Action”. The Review Officer should note any recommendation or Actions they feel are required to either improve the system in question.
- “Responsibility”. The Review Officer should recommend a Position or Officer responsible for implementing any recommendations.
- “Priority for Action”. Following the completion of the Review, the Review Officer should make recommendations regarding the relative priority for all actions identified through the review.
- “Comments”. The Review Officer should make any further notes or comments they feel essential to be recorded against each specific question.

Step 4 – Report on outcome of the Review

A report on the outcome of the review should be developed that provides details on:

- The scope and objectives of the Review;
- The Officer(s) involved in the review;
- The Review Officer's overall impressions of the capability and Performance of the compliance system assessed;
- All standout positive outcomes identified in the Review; and
- The priority list of all corrective actions, and recommended Officers to manage the implementation of the corrective actions.

The development of the Practical System Review Report will assist council to develop an appropriate activity list, which when implemented, will enhance council's current compliance systems capabilities and performance.

Attachments

Attached is a word version of the Assessment Tool to assist the Review Officer with determining the questions to include in the review. Please note it is expected that for many (majority) of the questions, a large volume of notes and comments will be recorded against each question. Please note that an MS Excel version of the Assessment Tool is available.

Attachment 1 – Systems Review Summary

Attachment 2 – Corporate Systems questions

Attachment 3 – Regulatory Structure questions

Attachment 4 – Legislation Change and Policy questions

Attachment 5 – Corporate Administration questions

Attachment 6 – Ethics questions

Attachment 7 – Training questions

Attachment 8 – Performance Measurement questions

Attachment 9 – Research and Review questions

Attachment 1 – Systems Review Summary

Practical Systems Review	
Department	
Council System	
Interviewee(s)	
Assessor	
Date	
Time	
Length	
Trigger for Review	
Departments Responsibilities	

Attachment 2 – Corporate Systems questions

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Council Systems							
A system to record notifications of non-compliance with Legislation is present							
The system is available for all Council staff who receive and register notifications of non-compliance							
The system has the capability to record internal non-compliances (i.e. Council non-compliances)							
The system is applied consistently; there are no non-compliances that are managed outside the system							
The system records all relevant details:							
Name of person who made the notification and contact details							
Time and date of the notification							
Type of notification							
Investigation details							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Actions identified							
Responsibilities for actions							
Required close out time for actions							
Close out and sign off of actions							
Resolution of all Notification Actions and final sign off by management							
The system can track complaints through the process from notification to closure							
The system can provide the following statistics on performance for Councils review.							
% completion rate in various time periods for each type of notification							
Number of notifications in the system that are not signed off							
Number of notifications not signed off in each area of responsibility							
Time notifications take to pass through each area of responsibility							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Number of notifications of each type							
Historical trends of completion times							
Historical trends of notification types							
The system allows prioritisation of actions in a manner that meets Councils ability to resource the actions and addresses areas of key risk							
The system can demonstrate support from senior management							
A system to record notifications of non-compliance with legislation is present							
The system is available for all Council staff who receive and register notifications of non-compliance							
The system has the capability to record internal non-compliances (i.e. Council non-compliances)							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
The system is applied consistently; there are no non-compliances that are managed outside the system							
Education							
An education/awareness strategy targeted at encouraging voluntary compliance by the regulated community is in place.							
An education/awareness strategy is in place.							
Education program is evaluated and reviewed regularly							
Research is conducted to provide intelligence to the strategy							
Senior management devote resources to the program							

Attachment 3 –Regulatory Structure questions

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Regulatory Complaint Management and response							
Core Capability Elements							
There is a process for receiving, recording a distributing the complaint for investigation							
Complaints are prioritised for investigation based on risk							
Investigation intensity varies based on risk							
The process adequately documented							
Reasons for decisions are always recorded							
Decisions recorded in adequate detail to allow legal review of process							
Decisions are recorded in a standard format							
The management of this issue resourced correctly							
The method of management is applicable to the level of risk							
The method of management is useful and efficient							
Best Practice Capability Elements							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
The process is consistent with the NSW Ombudsman's Guidelines							
System Health Elements							
The Council's method of management is reviewed regularly. There is a timing trigger for review							
The review process includes a review of any legislative change							
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							
The outcomes of the process included in the review are implemented to improve the process							
EXAMPLE - FOOD (Auditor to determine what to add here)							
Complaints are registered with NSW Food Authority and returned to Council for action							
<i>INSERT ADDITIONAL QUESTIONS</i>							
Compliance Inspection and Monitoring							
Core Capability Elements							
A basic risk based inspection and monitoring strategy exists							
The process is adequately documented							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Reasons for decisions are always recorded							
Decisions are recorded in adequate detail to allow legal review of process							
Decisions are recorded in a standard format							
The management of this issue resourced correctly							
The method of management is applicable to the level of risk							
The method of management is useful and efficient							
Best Practice Capability Elements							
A comprehensive risk based inspection and monitoring strategy exists and is based on a sophisticated risk rating system							
System Health Elements							
The Council's method of management is reviewed regularly. There is a timing trigger for review							
The review process includes a review of any legislative change							
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
The outcomes of the process included in the review are implemented to improve the process							
EXAMPLE - FOOD (Auditor to determine what to ad here)							
Food premises inspection frequency is determined in accordance with Food authority's risk based guidelines							
Conduct of Investigations							
Core Capability Elements							
Investigations are conducted by staff with suitable training, qualifications and delegations							
Clear procedures for the conduct of investigations exist							
Decisions are recorded in a standard format							
The process adequately documented							
Reasons for decisions are always recorded							
Decisions are recorded in adequate detail to allow legal review of process							
The management of this issue resourced correctly							
The method of management applicable to the level of risk							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
The method of management useful and efficient							
Best Practice Capability Elements							
Initial assessment of the report of non-compliance follows advice of NSW Ombudsman (enforcement guidelines of council)							
Review of appropriate delegations to ensure correctly appointed staff participate in the investigation							
Council's standards for OHS are met (work in pairs, site risk assessment, leave if threatened, etc.)							
System Health Elements							
The review process includes a review of any legislative change							
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							
The outcomes of the process included in the review are implemented to improve the process							
Investigation Planning							
Core Capability Elements							
Investigation plans and matrices are developed and utilised for complex investigations							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
The management of this issue resourced correctly							
The method of management applicable to the level of risk							
The method of management useful and efficient							
The process adequately documented							
Reasons for decisions are always recorded							
Decisions are recorded in adequate detail to allow legal review of process							
Decisions are recorded in a standard format							
System Health Elements							
The Council's method of management reviewed regularly. There a timing trigger for review							
The review process include a review for legislative change							
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							
The outcomes of the process included in the review are implemented to improve the process							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Management of Investigation Parties							
Core Capability Elements							
The management of this issue resourced correctly							
The management of investigations given to a single officer to co-ordinate and control							
The method of management applicable to the level of risk of the investigation in question							
The method of management useful and efficient							
Processes are adequately documented							
Reasons for decisions are always recorded							
Decisions are recorded in adequate detail to allow legal review of process							
Decisions are recorded in a standard format							
System Health Elements							
The Council's method of management reviewed regularly. There is a timing trigger for review							
The review process includes a review for legislative change							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							
The outcomes of the process included in the review are implemented to improve the process							
Decision Making Processes							
Core Capability Elements							
Decisions are made by officers with the correct delegations							
Decisions are made that are suitable to the level of risk posed by the incident under investigation							
Suitable supervision and approval processes are operating to reduce risk to councils for decisions made							
The decision making process adequately documented							
Reasons for decisions are always recorded							
Decisions are recorded in adequate detail to allow legal review of process							
Decisions are recorded in a standard format							
System Health Elements							
The Council's method of management reviewed regularly. There is a timing							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
trigger for review							
The review process includes a review for legislative change							
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							
The outcomes of the process included in the review are implemented to improve the process							
Conflict Management							
Core Capability Elements							
The management of this issue is resourced correctly							
Training provided to compliance and inspection officers on conflict management							
Appropriate controls are in place to ensure staff are reasonably protected from incidents where they can be physically harmed whilst conducting inspections and investigations							
The method of management is applicable to the level of risk							
The method of management useful and efficient							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Incidents of note adequately documented							
System Health Elements							
The Council's method of management reviewed regularly, is there a timing trigger for review							
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							
The outcomes of the process included in the review are implemented to improve the process							
Camera Surveillance							
Core Capability Elements							
The management of this issue resourced correctly							
The process adequately documented							
Reasons for decisions are always recorded							
Decisions are recorded in adequate detail to allow legal review of process							
Best Practise Elements							
Processes / notification occur as required in Privacy and Personal Information Act (signage to notify of cameras), delete all							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
non essential images etc.							
Process in line with Surveillance Devices Act							
Only an "Enforcement Officer" manages cameras and evidence							
Surveillance file is developed that notes: (i) camera installation and movement (date and officer); (ii) camera type, operation and calibration; (iii) maintenance of camera; (iv) when / what images are captured, transferred, deleted or saved.							
Images treated as evidence and included in a chain of evidence file							
Images kept secure with log taken of every individual that accesses image (date and time)							
System Health Elements							
The Council's method of management reviewed regularly. There is a timing trigger for review							
The review process includes a review for legislative change							
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
The outcomes of the process included in the review are implemented to improve the process							
Developing Quality Conditions of Consent							
Core Capability Elements							
The management of this issue resourced correctly							
The method of management applicable to the level of risk							
The method of management useful and efficient							
The process is adequately documented							
Reasons for decisions are always recorded							
Decisions are recorded in adequate detail to allow legal review of process							
Decisions are recorded in a standard format							
Best Practise Elements							
Conditions clearly articulate the desired outcome from each condition							
The conditions are SMART (specific, measurable, achievable, relevant, time-specific)							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Council has a register of standard conditions that can be tailored to specific site needs							
Conditions are organised into process stages when added to approval (to assist developer in meeting conditions at appropriate time in development)							
Consent conditions are monitored for compliance through an approved inspection program							
System Health Elements							
The Council's method of management reviewed regularly. There is a timing trigger for review							
The review process includes a review for legislative change							
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							
The outcomes of the process included in the review are implemented to improve the process							
Enforcement options							
Core Capability Elements							
The management of this issue resourced correctly							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
The method of management applicable to the level of risk							
The method of management useful and efficient							
The process adequately documented							
Reasons for decisions are always recorded							
Decisions are recorded in adequate detail to allow legal review of process							
Decisions are recorded in a standard format							
Best Practise Elements							
When determining enforcement council follows advice of NSW Ombudsman (Seriousness of the breach, Offender culpability, Appropriateness, Public interest, Recentness, Estoppel, Level of evidence)							
Council has a system to report and track all levels of enforcement against offender and parcel of land affected							
System Health Elements							
The Council's method of management reviewed regularly. There is a timing trigger for review							
The review process includes a review for legislative change							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							
The outcomes of the process included in the review are implemented to improve the process							
Interviewing							
Core Capability Elements							
The management of this issue resourced correctly							
The method of management applicable to the level of risk							
The method of management useful and efficient							
The process adequately documented							
Reasons for decisions are always recorded							
Decisions are recorded in adequate detail to allow legal review of process							
Decisions are recorded in a standard format							
Best Practise Elements							
Only authorised officers conduct interviews and manage recording devices							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Translation services utilised for people with difficulty speaking English							
Interview plan developed to ensure equipment, questions, exhibits etc. arranged							
Appropriate cautions and warnings available to staff and utilised at the correct time in process							
System Health Elements							
The Council's method of management reviewed regularly. There is a timing trigger for review							
The review process includes a review for legislative change							
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							
The outcomes of the process included in the review are implemented to improve the process							
Promoting Compliance							
Core Capability Elements							
The management of this issue resourced correctly							
The method of management applicable to the level of risk							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
The method of management useful and efficient							
The process adequately documented							
Reasons for decisions are always recorded							
Decisions are recorded in adequate detail to allow legal review of process							
Decisions are recorded in a standard format							
Best Practise Elements							
Campaigns developed to overcome barriers to not doing the right thing (as opposed to just telling people what to do)							
Campaigns are developed considering : the issue the desired outcomes the target audience the benefit of doing the right thing what to do to encourage correct behaviour appropriate deployment of campaign to engage with target audience							
System Health Elements							
The Council's method of management reviewed regularly, is there a timing trigger for review							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
The review process includes a review for legislative change							
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							
The outcomes of the process included in the review are implemented to improve the process							
Prosecutions Policy							
Core Capability Elements							
There is a policy that provides guidelines for the exercise of prosecutorial discretion							
The policy approved by senior management							
The policy consistent with DPP guidelines							
The policy is adequately documented							
System Health Elements							
The application of the policy audited							
All applicable staff aware of the Policy and able to implement it							
Records for Decisions Made Regarding Prosecutions							
Core Capability Elements							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Reasons for decisions are always recorded							
Decisions are recorded in adequate detail to allow legal review of process							
Decisions are recorded in a standard format							
The standard format is approved by senior management							
Senior management team can demonstrate a high level of knowledge of decision making principles							
System Health Elements							
All staff have up to date training in decision making							
There are regular reviews of the decision making process							
Legislative changes are incorporated in the review of the decision making process							
Statistics for successful appeals against decisions are kept							
Enforcement Options							
Core Capability Elements							
Enforcement options guidelines exist							
Enforcement options guidelines are comprehensive and cover the entire business							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Enforcement options guidelines are used by all relevant personnel							
Enforcement options guidelines are a controlled document to ensure that only the most current version is in use.							
Enforcement options guidelines are approved by senior management							
System Health Elements							
Legislative changes incorporated in the review of the Enforcement Options Guidelines							
Documentation exists allowing the implementation of the Enforcement Options Guidelines to be audited							
Emergency Response							
Core Capability Elements							
Senior management have delegated authority for regulatory related crisis management							
Council assesses the risk of potential emergency situations							
System Health Elements							
Council periodically reviews emergency preparedness							
Council periodically tests it's emergency preparedness							

Requirement	Compliant	Not yet Compliant	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Incentives							
Council utilises incentives where applicable - regulatory frameworks structured in a way that provides financial incentives to the regulated community to voluntarily comply with legislative requirements							
Incentives are applied consistently across the organisation							
There is a system to evaluate the effectiveness of incentives							
Incentives are an integral part of the review process for regulatory programs							
Incentives are evident in compliance policy documents							

Attachment 4 – Legislation Change and Policy questions

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Legislative Change							
There provision for the Council to comment and contribute to statutory review by lead agencies and Government							
Legislative changes are identified and considered into the review process for Council activities and responsibilities							
Legislative changes are disseminated throughout Council to the persons with delegated responsibility							
The legislative review process includes an immediate update where the legislative change results in a requirement to change the way Council manages it's business or the community							
Senior management have a comprehensive understanding of the legal obligations associated with regulatory functions							
Policy							
Staff with skills in policy development participate in the development of organisation policy							
Staff whose primary function is policy development are involved in policy development							
There are senior management resources who are primarily engaged in policy development							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
A senior executive connects policy development staff to management.							
Formal feedback mechanisms exist (standing committees etc.)							
Papers received by the organisation are addressed by a policy committee							
Committee actions and deliberations are documented and auditable							
A set cycle for policy review and development exists							
Capacity to influence policy and procedure development - staff with skills in policy development are retained who can both respond to and develop policy proposals and feedback mechanisms exist to provide information to senior management and/or policy makers about operational/policy issues.							

Attachment 5 – Corporate System Administration questions

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Delegations and Registers							
There is a Delegations of Authorities Register							
Registers are contained on an electronic database							
The results are produced in the database reliable							
All applicable staff aware of the database and able to maintain it							
The database is reviewed regularly to ensure reliable results							
Staff are appropriately trained on delegations							
Senior management aware of staff training on delegations							
If no delegations register in place, how are delegations managed?							
Risk Management							
Council maintains a risk register							
The risk register updated when new activities are assessed							
The risk register updated periodically							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Appropriate methodologies are used to assess the risk of an individual aspect of Councils business (i.e. AS/NZS 4360:2004 or ISO 31000:2009)							
Staff are aware of the risk register							
Staff manage project activities as per the controls stipulated in the risk register							
Document Control							
Council clearly identifies which documents should be controlled							
Council has a process to review and approve documents and procedures prior to issuing them for implementation							
Council has a process to regularly review documents							
Documents show the current revision status and date of last review							
Council ensures the current revision is the version in use across the organisation							
Record Keeping							
There is an electronic records system in place							
Files are in chronological order							
Files are stored in a way that facilitates retrieval							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Correspondence (inwards and outwards) is tracked							
Senior management is involved in managing records at a corporate level							
All staff and management understand the procedures involved in record-keeping and implement them throughout the organisation							
Records are catalogued and their movements tracked							
The record keeping system is maintained and kept up to date							
The training plan contains training on how to use the record keeping system, training is provided for all staff and refreshed when applicable							
Auditing							
Council regularly reviews operations compliance with systems where there are key legal or moral risks to Council							
Reviews are documented and provide feedback into process review where relevant							
Council determines the frequency of auditing activities							
Audit results are reported							
non-compliances identified in audits are acted on							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Results of audits are retained							
Where audits are conducted, the scope of the audit clearly defined							
Council utilises appropriately qualified staff or auditors to undertake audits and assessments							

Attachment 6 – Ethics questions

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
An ethics infrastructure exists - including as a minimum a Code of Conduct, ethics training and a gift register.							
How does Council Manage Ethics?							
An ethics infrastructure exists							
An ethics committee exists							
All levels of management have a high understanding of the ethics infrastructure and constantly reinforce the importance of ethics							
Ethics are regularly brought up in team meetings							
The ethics policy is disseminated to Council departments							
Council has a Code of Conduct							
The code of conduct is reviewed regularly							
A comprehensive gifts register exists which is regularly reviewed							
The gift register has triggers for immediate notification where a gifts value or significance may be unethical							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Council is active in pursuing instances of unethical conduct							
Complaints regarding Council Officers or other Council representatives							
Core Capability Elements							
There is a process for receiving, recording a distributing the complaint for investigation							
The process is adequately documented							
Reasons for decisions are always recorded							
Decisions are recorded in adequate detail to allow legal review of process							
Decisions are recorded in a standard format							
The management of this issue resourced correctly							
The method of management applicable to the level of risk							
The method of management useful and efficient							
Staff are notified of decisions and outcomes of the process							
Best Practice Capability Elements							
The process is consistent with the NSW Ombudsman's Guidelines							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
An internal investigations unit is in place							
A comprehensive complaint investigation policy and procedure is in place							
Staff are trained to conduct investigation training							
Complaints investigation policy and procedure is reviewed and updated regularly							
All complaints are appropriately investigated							
The unit is independent of other business units							
System Health Elements							
The Council's method of management reviewed regularly. There is a timing trigger for review							
The review process includes a review for legislative change							
There are other triggers for review e.g. feedback on statistics, complaints, audits, legal action, improved technology etc.							
The outcomes of the process included in the review are implemented to improve the process							
Principles of procedural fairness, natural justice, and rules of evidence are understood and applied							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Staff are trained in procedural fairness, natural justice and discretion							
Staff are trained in rules of evidence							
Managers are trained in procedural fairness, natural justice and discretion							
Managers are trained in rules of evidence							
Outcomes of legal proceedings are reviewed to identify areas for improvement							
Regulatory policies and procedures have regard to principles of procedural fairness, natural justice, and rules of evidence							
Cautioning of offenders is consistent with Attorney General's guidelines							

Attachment 7 – Training questions

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Training Register							
An overarching training plan exists							
The Register and Plan drive a training program							
The training program reflects Delegation of Authority at all levels of the Council							
The training program includes training for the maintenance of processes and systems within Council							
Training is conducted for all senior management and staff regarding the legal obligations of regulatory function							
Adequate provision is made to fund and deliver training courses at a suitable frequency, having regard to staff demand, and turnover							
Individual training records are stored and accessible, attendance at training is recorded							
Ethics a key part of the training program							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Environmental management a key part of the training program							
Investigation a key part of the training program							
Employee Health and Safety a key part of the training program							
Public health and Safety a key part of the training program							
New employees are trained at commencement							
Employees receive regular training on the legislation that they are authorised to administer							
List of training courses available to staff							
The induction training package for new employees reflects Councils key risks and core values in addition to the responsibilities of the particular employee's position.							

Attachment 8 –Performance Measurement questions

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
The existence of appropriate performance indicators							
A suite of performance indicators exist							
Performance indicators encompasses input, output, and outcome indicators							
The results of the indicators are used to improve council systems and procedures							
Senior management can demonstrate a high level of knowledge of the value of performance indicators							
Staff are made aware of the performance indicators							
A systematic review of the performance indicators is conducted regularly							
Performance indicators link to legislative objectives.							
A suite of relevant, up to date performance indicators exist							
Performance indicators are reviewed regularly in line with legislative objectives							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Results of performance indicators demonstrate that goals are being achieved							
There is independent evidence supporting the results of performance indicators							
Indicators regularly reported							
Percentage of notifications of alleged non-compliance that have been assessed/prioritised during the current reporting period.							
Council has the capacity to report on non-compliance matters that have been assessed and prioritised							
This is reviewed and reported							
Spread of notifications of alleged non-compliance across prioritisation bands							
Incidents are prioritised							
Incidents are prioritised logged and then reported on in a percentage figure							
Correlation between prioritisation of notifications/work tasks ad work actually completed.							
A prioritisation system exists							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Work is completed in accordance with a risk based prioritisation system							
The information is reported							
Percentage of non-compliance incidents responded to and resolved within stated performance standards during the current reporting period							
The percentage of non-compliant incidents responded to is available from the case management system							
Staff have a good understanding of the key performance indicators							
The information is reported							
Percentage of complaints about the regulator's service substantiated (internally, through the regulator's complaints management system and externally, through watchdog agencies) during the current reporting period							
The percentage of complaints is available from the case management system or the relevant watchdog Council							
The substantiated information is reportable							
Surveys of the regulated community covering perception of the regulator, perceived risk of getting caught, and awareness of the law.							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Surveys are conducted							
Survey program is well resourced and constantly reviewed							
Regulated staff have an understanding of the survey process							
Percentage of repeat offenders within the last 5 years (until end of the current reporting period)							
The number of repeat offenders is recorded							
Information made available from the Council's case management system							
Where there have been repeat offenders, regulator's response appropriate / proportionate (particularly, not the same response as for the initial non-compliance)							
The number of repeat offenders is recorded							
The number of repeat offenders is auditable							
Enforcement options for repeat offenders increases in severity							
Percentage of licensees or developers that have voluntarily and proactively demonstrated compliance to regulator in the current reporting period							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Voluntary compliance is recorded							
There is a system in place that is designed to record this type of information.							
Staff are involved in education programs							
Education and awareness strategies are reviewed regularly							
Regulators are involved in discussions with industry groups							
Management have knowledge of voluntary compliance system							
During risk based audit (proactive inspections etc.) of regulated entity, percentage of non-compliance found							
Non-compliances identified							
Staff have an understanding of non-compliances							
Management have knowledge of non compliances							
Spread of notifications of alleged non-compliance across prioritisation bands							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Incidents be prioritised							
Incidents are prioritised logged and then reported on in a percentage figure							
Correlation between prioritisation of notifications/work tasks ad work actually completed.							
A prioritisation system exists							
Work is completed in accordance with a risk based prioritisation system							
The information is reported							
Percentage of non-compliance incidents responded to and resolved within stated performance standards during the current reporting period							
The percentage of non-compliant incidents responded to is available from the case management system							
Staff have a good understanding of the key performance indicators							
The information is reported							
Percentage of repeat offenders within the last 5 years							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
The number of repeat offenders is recorded							
Information made available from the Council's case management system							
Where there have been repeat offenders, regulator's response appropriate/proportionate (particularly, not the same response as for the initial non-compliance)							
The number of repeat offenders is recorded							
The number of repeat offenders is auditable							
Enforcement options for repeat offenders increases in severity							
Percentage of licensees or developers that have voluntarily and proactively demonstrated compliance to regulator in the current reporting period							
Voluntary compliance is recorded							
There is a system in place that is designed to record this type of information.							
Staff are involved in education programs							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Education and awareness strategies are reviewed regularly							
Regulators are involved in discussions with industry groups							
Management have knowledge of voluntary compliance system							
During risk based audit (proactive inspections etc.) of regulated entity, percentage of non-compliance found							
Non-compliances identified							
Staff have an understanding of non-compliances							
Management have knowledge of non compliances							
percentage of non-compliances identified and reportable							
KPIs							
<i>Add list of KPIs here</i>							

Attachment 9 –Research and Review questions

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
An intelligence driven process - intelligence about non-compliant activity is collated, analysed and used to guide both audit, enforcement and education programs.							
Intelligence about non-compliant activity is collected							
Staff are trained in the collection, analysis and dissemination of intelligence							
A senior manager applies resources to assist in the development and review of regulatory programs							
non-compliant activity is reportable							
Audit, enforcement and education programs would be intelligence driven and aimed at the areas with the highest levels of non-compliance activity.							
Feedback on Non-compliance							
Staff are involved in the review of regulatory programs having regard to non-compliance history							
A senior manager applies resources to assist in the development and review of regulatory programs							

Requirement	Yes	No	Comments / Evidence	Recommendations / Actions	Responsibility	Priority for Actions	Comments
Outcomes of regulatory activity are communicated to the regulated community and the broader community, including reporting on non-compliance levels							
Regulatory program is adjusted based on feedback to ensure continuous improvement							
Percentage of complaints about the regulator's service substantiated (internally, through the regulator's complaints management system and externally, through watchdog agencies) during the current reporting period							
The percentage of complaints is available from the case management system or the relevant watchdog Council							
The substantiated information is reportable							
Surveys of the regulated community covering perception of the regulator, perceived risk of getting caught, and awareness of the law.							
Surveys are conducted							
Survey program is well resourced and constantly reviewed							
Regulated staff have an understanding of the survey process							