



Agenda

Audit and Risk Committee Meeting

**Tuesday 11 August 2026
at 9.00am**

**Council Chambers
15 Queen Street
Te Kuiti**

Waitomo District Council is committed to conducting its business in a manner that is open, transparent and facilitates accountability and public participation. Any member(s) of the public wishing to address the Council at a Meeting or Workshop are asked to make arrangements through the Mayor's Office at least three clear working days before the scheduled Meeting or Workshop.

All attendees at this meeting are advised that the meeting will be electronically recorded (audio and video) for the purpose of webcasting to the Council 's website. Every care will be taken to maintain individuals' privacy; however, attendees are advised they may be recorded as part of the general meeting proceedings.



NOTICE OF MEETING

A MEETING OF THE WAITOMO DISTRICT COUNCIL AUDIT AND RISK COMMITTEE IS TO BE HELD IN THE COUNCIL CHAMBERS, 15 QUEEN STREET, TE KUITI ON TUESDAY 11 AUGUST 2026 COMMENCING AT 9.00AM

COMMITTEE MEMBERS

Jaydene Kana (Independent Chair)
Cr Olivia Buckley

Mayor John Robertson
Cr Janette Osborne

Deputy Mayor Eady Manawaiti

A handwritten signature in blue ink, appearing to read "Michelle Higgie".

MICHELLE HIGGIE

MANAGER – GOVERNANCE SUPPORT

ORDER PAPER

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IMPORTANT NOTE

1. The business papers attached to this Order Paper set out recommendations and suggested resolutions only. Those recommendations and suggested resolutions **DO NOT** represent Council policy until such time as they might be adopted by Council resolution.
2. This Order Paper may be subject to amendment either by the addition or withdrawal of items contained therein.
3. This Meeting will be webcast in real time to the Waitomo District Council website and will also be available for viewing on demand as soon as reasonably practicable following the meeting.

WAITOMO DISTRICT COUNCIL
Audit and Risk Committee

MINUTES OF A MEETING OF THE WAITOMO DISTRICT COUNCIL AUDIT AND RISK COMMITTEE HELD IN THE COUNCIL CHAMBERS, QUEEN STREET, TE KUITI ON TUESDAY 12 MAY 2026 AT 9.00AM

PRESENT: Independent Chair Jaydene Kana
 Deputy Mayor Eady Manawaiti
 Councillor Olivia Buckley
 Councillor Janette Osborne

IN ATTENDANCE: Matt Laing and Callum Maxwell (Deloitte)

STAFF: Chief Executive, Ben Smit
 Manager – Governance Support, Michelle Higgie
 Chief Financial Officer, Tina Hitchen
 Financial Accountant, Wayne La Roche
 Manager – Strategy and Policy, Charmaine Ellery
 Policy Advisor, Rajeshwari (Raj) Mahadevappa
 General Manager – Community Services, Helen Beever
 Manager – Customer and Digital Services, Kat Merrin-Brown
 Health and Safety Coordinator, Tanchia Pitts-Brown
 Acting General Manager – Strategy and Environment, Hilary Walker

Matt Laing and Callum Maxwell (Deloitte) joined the meeting online at 9.00am.

1. Karakia Tuwhera

2. Apologies

Resolution

The apology from Mayor John Robertson be received and leave of absence granted.

Kana/Osborne Carried

3. Declarations of Member Conflicts of Interest

Declarations were made as follows:

Name	Item of Business	Reason for Declaration
Jaydene Kana	10 Progress Report: Waters – Transition to Waikato Waters Limited	Director of Waikato Waters Limited

The Committee noted that Item 10 Progress Report: Waters – Transition to Waikato Waters Ltd to which the declared conflict relates is an information only paper so there is no conflict in this instance.

4. Confirmation of Minutes: 10 February 2026

Resolution

The Minutes of the Waitomo District Council Audit and Risk Committee meeting held on 10 February 2026 be confirmed as a true and correct record.

Kana/Buckley Carried

5. Annual Report and Summary Annual Report 2025/26 – Audit Engagement, Plan and Timeline

The Committee considered a business paper -

- a) Presenting the Audit Engagement Letter for the audit of the Annual Report and Summary Annual Report 2025/26.
- b) Presenting the Confirmation of Engagement letter for the Limited Assurance Report in respect of the Waitomo District Council's Debenture Trust Deed including the proposed fee.
- c) Introducing the Deloitte Planning Report detailing the scope, approach and areas of focus for the external audit of Council's 2025/26 Annual Report and the indicative timeline.
- d) Seeking approval for the signing of the engagement letters.

Matt Laing and Callum Maxwell (Deloitte) expanded verbally on the audit papers and answered Members questions.

The Committee noted the staff resourcing pressures around finalising the Annual Report and developing budgets for the Long Term Plan and requested that the Chief Executive keep Council apprised of any issues.

The Asset Accountant entered the meeting at 9.25am.

Resolution

- 1 The business paper on Annual Report and Summary Annual Report 2025/26 – Audit Engagement, Plan and Timeline be received.
- 2 The Deloitte Audit Engagement Letter be accepted as presented.
- 3 The Deloitte Confirmation of Engagement letter for the Limited Assurance Report for the Trust Deed be accepted as presented.
- 4 The Deloitte Audit Planning Report be accepted as presented.
- 5 The Chief Executive and Mayor be delegated authority to sign the Deloitte Engagement Letters on behalf of the Waitomo District Council.

Kana/Manawaiti Carried

Matt Laing and Callum Maxwell (Deloitte) left the meeting online at 9.33am.
The Chief Financial Officer and Asset Accountant left the meeting at 9.33am.

6. Chair Report – May 2026

The Committee considered the Independent Chair's report for May 2026

The Independent Chair spoke to her report for May 2026.

The Committee noted the comments provided to members separately in a memorandum from Mayor Robertson.

Resolution

The Chair Report – May 2026 be received.

Kana/Osborne Carried

The Manager – Strategy and Policy and Policy Advisor entered 9.49am.

7. Mastercard Expenditure Report (January to March 2026)

The Committee considered a business paper on expenditure incurred via WDC issued Corporate Mastercard for the period January to March 2026.

The Manager – Governance Support and Chief Executive expanded verbally on the business paper and answered Members questions.

Resolution

The business paper on Mastercard Expenditure Report: January to March 2026 be received.

Kana/Buckley Carried

8. Policy and Bylaw Reviews

The Committee considered a business paper presenting details of Council adopted policies and bylaws, including a brief summary of each, their respective review timelines, and any relative comments for the Committee's information and oversight.

The Manager – Governance Support expanded verbally on the business paper and answered Members questions.

Resolution

The business paper on Policy and Bylaw Reviews be received.

Kana/Osborne Carried

9. Risk Management and Mitigation
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The Committee considered a business paper providing an overview of key risk and assurance matters for the Audit and Risk Committee, with a particular focus on:

- The organisational context and recent changes that have influenced Council's risk profile and risk maturity
- The introduction of a Risk Management Framework (RMF) and what it is intended to achieve
- Current and planned approaches to embedding risk management into Council's activities
- Priorities for the year ahead, including development of a more centralised operational risk register and continued integration of risk into decision making and contract management.

The Chief Executive expanded verbally on the business paper and answered Members questions.

Resolution

- 1 The business paper on Risk Management and Mitigation be received.
- 2 The Committee recommend to Council that the amended Risk Management Framework and Guideline be adopted.

Kana/Osborne Carried

The Chief Financial Officer entered the meeting at 10.23am.

10. Progress Report: Waters – Transition to Waikato Waters Ltd

The Committee considered a business paper providing an update the Committee on the transition of WDC's water and wastewater assets and operations to Waikato Waters Limited (WWL).

The Chief Executive expanded verbally on the business paper and answered Members questions.

Resolution

The business paper on Progress Report – Transition to Waikato Waters Limited be received.

Manawaiti/Buckley Carried

The meeting adjourned for morning tea at 10.27am and reconvened at 10.43am.

The Chief Financial Officer and Asset Accountant entered the meeting at 10.43am.

11. Top Twenty Suppliers by Value

The Committee considered a business paper providing an annual update of WDC's top twenty suppliers, by value, for year to date 2026.

The Chief Financial Officer expanded verbally on the business paper and answered Members questions.

Resolution

The business paper on Top Twenty Suppliers by value be received.

Kana/Osborne Carried

12. Treasury Management Report for the quarter ended 31 March 2026

The Committee considered a business paper providing an update on Council's debt position and compliance with borrowing limits for the quarter ended 31 March 2026.

The Chief Financial Officer and Asset Manager expanded verbally on the business paper and answered Members questions.

Resolution

- 1 The business paper on Treasury Management Report for the period ended 31 March 2026 be received.
- 2 The Committee notes a breach of the fixed interest hedging percentages as fixed rate cover is lower than policy requirements for the 0-2 year and 2-4 year bands. No new fixed rate cover will be entered into at this time due to the debt settlement from Waikato Waters Ltd on 1 July 2026.

Kana/Manawaiti Carried

13. Treasury Management Policy Review

The Committee considered a business paper presenting suggested changes to the Treasury Policy and seeking a recommendation to Council on the changes to Treasury Policy.

The Chief Financial Officer, Asset Accountant and Chief Executive expanded verbally on the business paper and answered Members questions.

The General Manager – Community Services, Manager – Customer and Digital Services and Health and Safety Coordinator entered the meeting at 11.03am.

At the recommendation of Councillor Osborne, the Committee agreed that the role and responsibilities relating to the the Treasury Management Committee should remain in the Policy for transparency purposes, with the removal of the Independent Treasury Advisor.

Resolution

- 1 The business paper on Review of the Treasury Policy be received.
- 2 The Committee recommends to the Council the following changes be made to the Treasury Policy:
 - The Investment Policy section be updated as amended.
 - The Liability Management Policy section (Role of the Treasury Management Committee) is updated to remove the Waitomo District Council's Independent Treasury Advisor.
 - The Liability Management Policy be updated to include reporting to the Audit and Risk Committee on policy compliance and treasury performance where total debt is greater than \$10 million. Any policy breaches or planned breaches will continue to be reported to Audit and Risk Committee.
- 3 The Committee note the engagement of an external treasury advisor will be on an as needed basis following the significant reduction in debt on 1 July 2026.
- 4 The draft Treasury Policy, incorporating the marked-up changes, be referred to the Independent Chair before they are presented to Council for adoption.

Kana/Manawaiti Carried

14. Annual Insurance Update Report (2025/2026 Insurance Arrangements)

The Committee considered a business paper providing a brief on Council's 2025/2026 Insurance arrangements.

The Chief Financial Officer and Asset Accountant expanded verbally on the business paper and answered Members questions.

Resolution

The business paper on Insurance Update Report for the insurance year to 31 October 2026 be received.

Kana/Osborne Carried

15. Progress Report: Health and Safety (Quarter 3 – January to March 2026)

The Committee considered a business paper providing a brief on WDC's health and safety performance during quarter two of the 2025/26 year.

The Health and Safety Coordinator and General Manager – Community Services expanded verbally on the business paper and answered Members questions.

Resolution

The Progress Report: Health and Safety be received.

Kana/Osborne Carried

The Health and Safety Coordinator left the meeting at 11.50am.
The Manager – Strategy and Policy and Policy Advisor entered 10.51am.

16. Artificial Intelligence (AI) Policy

The Committee considered a business paper presenting Waitomo District Council's Artificial Intelligence Use Policy and advising of the controls being established to support responsible use of approved artificial intelligence tools across Council-related work.

The Manager – Customer and Digital Services expanded verbally on the business paper and answered Members questions.

The Committee noted the matters raised by members (chatbots and AI platforms) and the planned role out of AI induction training for staff and elected members post adoption of the Policy by Council.

Resolution

- 1 The business paper on Artificial Intelligence Use Policy be received.
- 2 The Committee notes that the Artificial Intelligence Use Policy applies to employees, contractors, consultants, Elected Members, and others undertaking Council-related activities.
- 3 The Committee recommend to the Council the adoption of the Artificial Intelligence Use Policy.

Kana/Buckley Carried

The General Manager – Community Services and Manager – Customer and Digital Services left the meeting at 12.04am.

17. Quarterly Report: Key Performance Indicators for the period ended 31 March 2026

The Committee considered a business paper presenting Waitomo District Council's delivery performance on non-financials for the 2025/26 financial year for the period ending 31 March 2026 (Quarter 3).

The Acting General Manager – Strategy and Environment entered the meeting at 12.06pm.

The Policy Advisor, Manager – Strategy and Policy and Chief Executive expanded verbally on the business paper and answered Members questions.

Resolution

The Quarterly Report: Key Performance Indicators for the period ended 31 March 2026 be received.

Kana/Manawaiti Carried

18. Progress Report: Procurement Summary Schedule (January to March 2026)

The Committee considered a business paper presenting a summary of the procurements made in the period 1 January 2026 to 31 March 2026 in accordance with Waitomo District Council's Procurement Policy.

The Acting General Manager – Strategy and Environment and Chief Executive expanded verbally on the business paper and answered Members questions.

Resolution

The business paper on the Progress Report: Procurement Summary Schedule (January to March 2026) be received.

Kana/Osborne Carried

19. Progress Report: WDC Resource Consents – Compliance Monitoring (January 2026 to March 2026)

The Committee considered a business paper providing a brief on compliance reporting against Resource Consent conditions, due during the third quarter (2025/2026).

The Chief Executive expanded verbally on the business paper and answered Members questions.

Resolution

The business paper on WDC Resource Consents – Compliance Monitoring be received.

Kana/Osborne

Carried

20. Karakia Whakamutunga

There being no further business the meeting closed at 12.19pm

Dated this day of

JAYDENE KANA

INDEPENDENT CHAIR

Document No: 998920

Report To: Audit and Risk Committee



Meeting Date: 11 August 2026
Subject: **Chair Report – August 2026**
Type: Information Only
Author(s): Jaydene Kana
 Independent Chairperson

1. Purpose of Report

- 1.1 The purpose of this business paper is to present the Independent Chairperson's report for August 2026.
- 1.2 Attached to and forming part of this business paper is the Chair Report.

2. Suggested Resolution

- 2.1 The following is a suggested resolution only and does not represent Council policy until such time as it is adopted by formal resolution.
 - 1 The Chair Report – August 2026 be received.

3. Attachments/Separate Enclosures

Attachment:

- 1 Chair Report – August 2026 (Doc # 998919)

WAITOMO DISTRICT COUNCIL

AUDIT AND RISK COMMITTEE

AUGUST 2026 – CHAIR REPORT

Teenaa koutou katoa e ngaa rau rangatira maa,

Firstly, I wanted to acknowledge the significant change impacting local government and the work of Mayor John, Elected Members, Chief Executive Ben and his Team in responding to these changes on behalf of the Waitomo community.

Given this significant change, this Chair report focusses not on Forum's I've attended in my capacity as Chair but some risk-related governance questions and potential responses for Committee members to consider and discuss. I look forward to the koorero:

Key Question	Potential Governance Response
Is the Government's Head Start programme creating new strategic risks or changing existing priorities?	Request regular readiness updates, scenario analysis and assurance over implementation planning.
Are Council's highest strategic risks still the ones most likely to affect Council achieving its long-term outcomes?	Undertake an annual strategic risk review and quarterly horizon scanning for emerging risks.
Are management's mitigation strategies reducing strategic risk, or simply managing operational issues?	Request evidence-based reporting on risk treatment effectiveness and residual risk trends.
Is Council's fraud and corruption risk heightened as a result of changes to structure, systems and responsibilities?	Seek assurance over fraud risk assessments, whistleblower reporting, procurement controls, delegated authorities, cyber-enabled fraud controls, and internal audit coverage of fraud-prone areas.
Could a failure in one strategic risk (e.g. cyber security, financial sustainability or reform) trigger wider organisational impacts?	Receive reporting on interdependencies between strategic risks and organisational resilience.
Are Council's Long-Term Plan assumptions and financial strategy still appropriate following the transfer of water services?	Request review of financial forecasts, debt capacity, revenue assumptions and residual liabilities.

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

Recommendation

That the Audit and Risk Committee receive the report.

Jaydene Kana
Chair, Audit and Risk Committee
8 August 2026

Document No: 990280

Report To: Audit and Risk Committee

Meeting Date: 11 August 2026

Subject: **Progress Report: Health and Safety**

Type: Information Only

Author(s): Tanchia Pitts-Brown
Health and Safety Coordinator

Helen Beever
General Manager – Community Services

1. Purpose of Report

- 1.1 The purpose of this business paper is to brief the Committee on Waitomo District Council's (WDC) health and safety performance during quarter four of the 2025/26 year.

2. Suggested Resolutions

- 2.1 The following is a suggested resolution only and does not represent Council policy until such time as it is adopted by formal resolution.
- 1 The Progress Report: Health and Safety be received.

3. Background

- 3.1 Elected Members are provided with ongoing progress reports to provide visibility of health and safety performance and agreed Key Performance Indicators. This report covers the April to June 2026 period.
- 3.2 This report has been structured to align with the SafePlus Programme developed by WorkSafe NZ, ACC and MBIE in 2017. The programme is voluntary and aims to support organisations wanting to improve their health and safety culture and exceed minimum compliance requirements.

4. Commentary**LEADERSHIP COMMITMENT**

- 4.1 Under the Health and Safety at Work Act 2015, "Officers" are required to exercise due diligence to provide them with a level of assurance that health and safety is being effectively managed. Due diligence requires "Officers" to keep up to date with health and safety matters and information; ensure critical risks are effectively controlled; ensure health and safety is adequately resourced; and ensure appropriate monitoring and reviews are conducted to provide assurance and verify that health and safety matters are being appropriately addressed.
- 4.2 Ongoing senior leadership oversight continues to demonstrate a commitment to health and safety through effective governance, consultation, and continuous improvement. During the reporting period, the Health and Safety Representative (HSR) structure was reviewed and reconfigured to align with WDC's new organisational structure, effective July 2026. The revised work groups ensure health and safety representation remains aligned with operational functions and support meaningful worker engagement and consultation across the organisation. This work reflects an ongoing commitment to an effective health and safety management framework.

- 4.3 Health and Safety key performance indicators (KPIs) remained consistent throughout the reporting year with all indicators meeting or exceeding target. Site inspections consistently exceeded target, while workplace inspections and worker engagement activities remained on track throughout the year. Outstanding corrective actions remained at zero for most of the year, with a temporary increase to three outstanding actions in Quarter 2 due to supplier quotes being awaited. These actions were subsequently completed, with no outstanding actions remaining by year-end. Near miss reporting remained above target across all quarters, demonstrating continued worker engagement and a proactive reporting culture.
- 4.4 Figure 1. Health and safety performance indicators for the Quarter 4 reporting period continued to demonstrate strong performance against established targets. Inspection targets across both operational and non-operational workplaces were achieved, scheduled worker engagement activities were completed, and all corrective actions were closed within the reporting period.
- 4.5 Near miss reporting remained at or slightly above target which is considered a positive indicator of WDC's reporting culture and worker engagement. Increased reporting enables hazards and potential incidents to be identified before they result in harm, providing valuable information to strengthen risk controls and support proactive decision-making.
- 4.6 Overall, the results indicate that WDC's health and safety management system continues to perform effectively, with strong performance across monitoring, worker engagement, corrective action management and incident reporting. Continued focus on maintaining these standards will support ongoing compliance and the effective management of WDC's risks.

KPI	PERFORMANCE OUTCOMES	PROGRESS
Site Inspections H&S inspections carried out on physical works' sites (contractors and staff) Target: 5 per month	16 Site Safety Inspections	
Workplace Inspections Target: 1 per month	2 Workplace – Operational e.g. Plants 2 Workplace – Non-operational	
Worker Engagement Target: 1 HSR meeting per month	Scheduled meetings completed	
Outstanding Actions in Tomo Target: Zero	All actions completed	
Near Miss Reporting Target: 5 per month	17 for Q4	



Red Light = target not reached – management focus required



Yellow light = target almost reached – maintain management focus



Green light = target achieved or exceeded

Figure 1: Key Performance Indicators

EVENTS BY SEVERITY

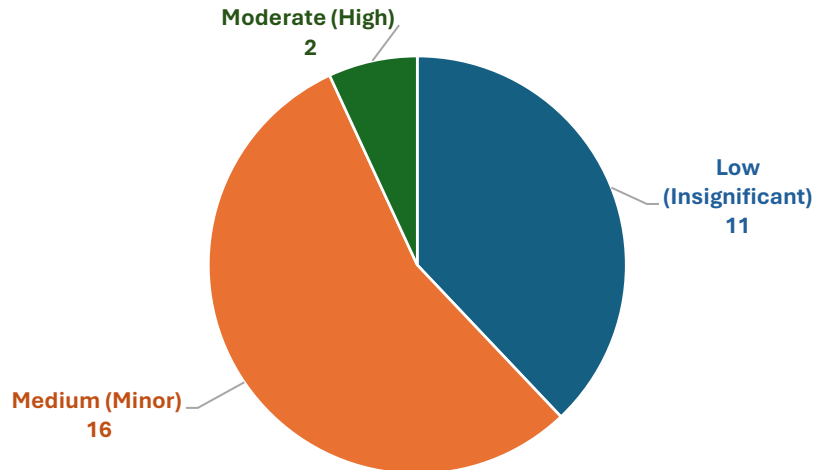


Figure 2: Events by Severity

- 4.7 Figure 2. Summarises workplace events by severity for the reporting period. A total of 11 low (insignificant) events, 16 medium (minor) events, and two moderate (high) events were recorded, with no extreme (critical) events reported.
- 4.8 While no critical events were recorded, the number of moderate (high) events highlights the need to maintain focus on preventative controls and early intervention to reduce escalation in event severity.
- 4.9 Reported events resulted in low to minor consequences and were managed through established reporting, investigation and corrective action processes. The moderate events primarily reflected an increased potential from harm rather than actual serious injury, reinforcing the importance of maintaining effective preventative controls across operational activities.
- 4.10 12 reported events were associated with our critical risks, including aggressive interactions with members of public, security of council facilities, driving and vehicle usage, and hazardous animal interactions. While no critical harm occurred, these events continue to demonstrate the importance of maintaining robust operational controls and monitoring arrangements.
- 4.11 Overall, the reporting period demonstrates a positive reporting culture, with staff continuing to identify and report hazards, near misses and operational events. The information obtained through event reporting supports continuous improvement by enabling emerging trends to be monitored, corrective actions to be implemented, and critical risk controls to be regularly reviewed.

CRITICAL RISK EVENT TYPES

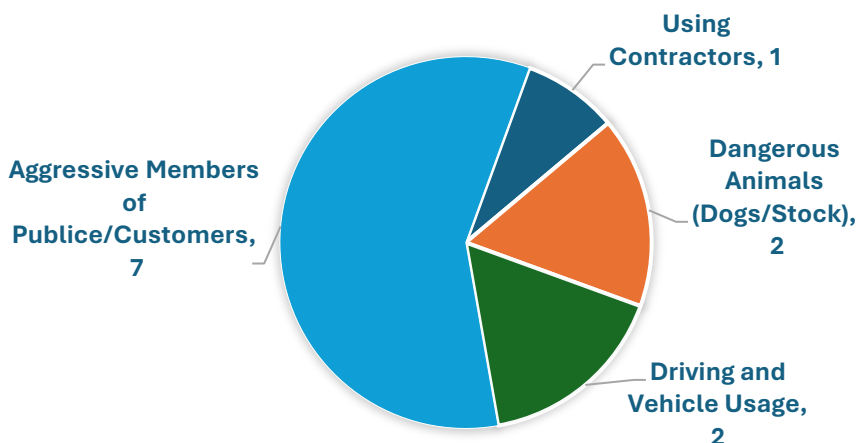


Figure 3: Critical Risk Event Types

Aggressive Members of Public/Customers:

1. Several incidents involved aggressive, abusive, or disruptive behaviour towards WDC staff and contractors while delivering frontline services. In each case, staff followed established procedures to de-escalate the situation, with incidents reported and monitored. Ongoing training, reporting, and security measures continue to support staff safety.
2. An individual gained unauthorised access to a council facility after hours, activating the site security alarm. Security personnel responded promptly, and the enhanced CCTV system installed following a previous incident, enabled the individual to be identified. The matter was referred to Police.

Dangerous/Aggressive Animals:

3. Staff responded to two animal-related incidents during the reporting period. One involved an animal displaying defensive behaviour during apprehension, resulting in minor contact with an employee. The event has reinforced the need for consistent animal handling practices, and staff are currently developing a suite of Standard Operating Procedures (SOPs) covering safe handling of a range of animals encountered during operational activities, rather than dogs alone.
4. A second involved livestock causing minor damage to a WDC vehicle while staff were undertaking fields activities.

Driving and Vehicle Usage:

5. Two vehicle-related events, one involved a trailer tyre blowout. The vehicle was safely brought to a stop, with no injuries sustained.
6. The second event involved minor damage to a WDC vehicle after contact with a wooden post while reversing in a confined area with limited manoeuvring space. Staff were reminded of safe driving practices and exercising additional caution when operating vehicles.

Using Contractors:

7. A contractor was observed not following WDC site access procedures by exiting before the security gate had fully closed, creating the potential for a security breach. The contractor was contacted and reminded of the required procedure and asked to communicate the requirements to the wider team. No further breaches have been reported.

RISK MANAGEMENT

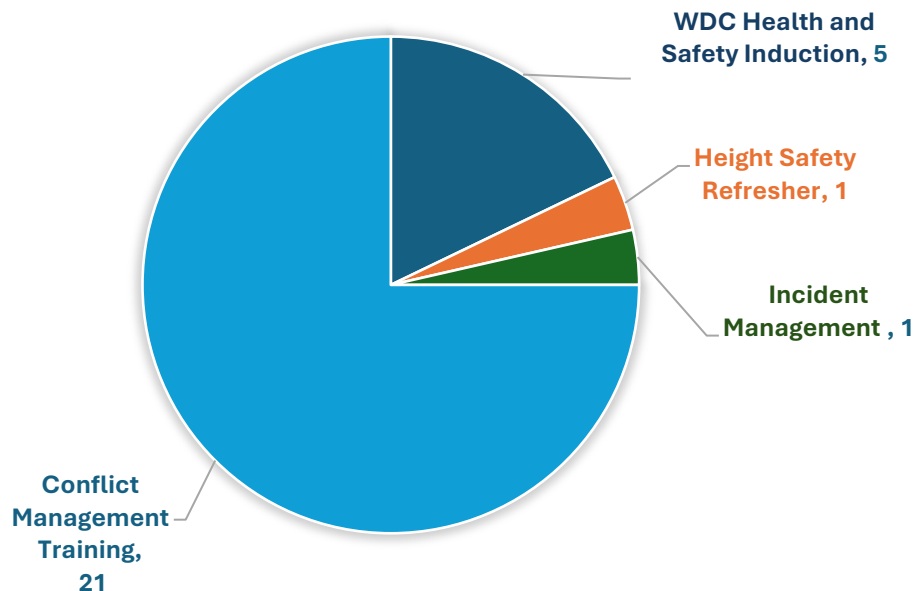
- 4.12 Organisation wide health and safety risk register reviews were completed in consultation with the HSRs to confirm that departmental risks and associated controls remain current and reflective of operational activities. The review confirmed WDC's overall risk profile remains appropriate, with no significant changes requiring amendment.
- 4.13 Critical risk controls continued to be monitored through workplace inspections, incident investigation and routine assurance activities. Opportunities identified through these processes resulted in strengthened site security measures, reinforcement of contractor access procedures and the continued development of Standard Operating Procedures (SOPs) for animal handling activities.
- 4.14 Routine inspections of fire extinguishers and first aid kits were completed across council facilities to verify emergency equipment remained compliant, accessible and fit for purpose. Corrective actions arising from inspections and reported events were monitored through the Tomo system, with all actions completed during the reporting period.
- 4.15 Emergency preparedness continues to be strengthened through a range of planned exercises and real-life response activities conducted across its facilities. These included: Fire evacuation exercises, chemical spill response exercises, six-monthly earthquake drill, lockdown drill, and management of an attempted break-in incident.

- 4.16 Each activity provided an opportunity to validate emergency procedures, confirm staff understood their roles and responsibilities, and identify opportunities for improvement. Debriefs were completed following each exercise and event, with lessons learned incorporated into ongoing emergency planning and risk management activities.

STAFF COMPLIANCE TRAINING

- 4.17 Continued investment in developing employee capability has occurred through targeted health and safety training aligned to organisational risks. During Quarter Four, Personal Safety and Conflict Management Training was delivered to frontline employees to strengthen their ability to safely manage challenging customer interactions and enhance personal safety.
- 4.18 21 participants completed post-training evaluation, with the programme achieving:
- Overall satisfaction: 4.8/5
Presenter effectiveness: 4.95/5
Workplace relevance: 4.8/5
- 4.19 A follow-up evaluation completed by 20 participants confirmed the training remained highly valued, with all evaluation categories achieving average scores above 4.55 out of 5.
- 4.20 Participants reported an increased confidence in applying situational awareness, conflict de-escalation techniques, and personal safety strategies to challenging situations. Feedback also identified opportunities for future learning, including mental wellbeing in the workplace.
- 4.21 The evaluation results demonstrate that investment in capability development is strengthening employee confidence and supporting WDC's critical risk management programme. The training provides assurance that frontline employees are better equipped to safely manage challenging interactions and reduce the likelihood of harm.

TRAINING COMPLETED



WORKER ENGAGEMENT PARTICIPATION AND REPRESENTATION

- 4.22 Following the review and reconfiguration of HSR work groups, HSR elections were held during July 2026 to align with WDC's revised organisational structure. The elections coincide with the completion of the current three-year HSR term and will ensure continued worker representation, consultation, and participation in health and safety matters across the organisation. The revised HSR structure provides assurance that worker representation remains aligned with WDC's operational profile and continues to support effective consultation on health and safety matters.

STAFF WELFARE AND WELLBEING

- 4.23 Staff wellbeing continues to be supported through the *My Everyday Wellbeing* programme, providing regular health information, educational resources and wellbeing challenges that encourage a positive behaviour change and support workforce health, resilience and wellbeing.
- 4.24 The My Everyday Wellbeing Report (October 2026 – March 2026) shows that engagement with the programme remained strong throughout the reporting period. Weekly wellbeing emails achieved an average open rate of 61%, significantly exceeding the industry benchmark of 15.1%. Overall, 83% of staff accessed the weekly wellbeing communications, with 72% engaging by accessing additional wellbeing resources. These results demonstrate strong and sustained employee engagement with WDC's wellbeing initiatives and highlighting the ongoing value of the programme in supporting staff wellbeing.
- 4.25 Staff engagement extends beyond email communications, with the programme recording 1,032 page views across 330 user sessions over the six-month reporting period. This demonstrates engagement across a range of physical and mental wellbeing topics.
- 4.26 These results provide assurance that employees continue to actively engage with WDC's wellbeing initiatives and are accessing resources that support healthier lifestyles and personal resilience. We will continue promoting the programme as a part of WDC's ongoing commitment to fostering a healthy, safe and engaged workforce.

5. Continuous Improvement – Quarter Four Focus
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- 5.1 Following the transfer of WDC's Waters function to the new entity in July 2026, the Health and Safety Management System and associated reporting framework will be reviewed to ensure they remain aligned with WDC's revised organisational structure and operational risk profile.
- 5.2 The transition will result in changes to operational activities and organisational risks, which will influence future health and safety reporting, including event trends, inspection activity and key performance indicators. Performance measures and reporting metrics will be reviewed and, where appropriate, refined to ensure they continue to provide meaningful assurance to the Audit and Risk Committee.
- 5.3 This review presents an opportunity to further strengthen WDC's Health and Safety reporting framework by ensuring future reports remains aligned with the organisation's current operational risks, strategic priorities, and continuous improvement objectives. As WDC's activities and risk profile evolve, the reporting framework will be refined accordingly to ensure the information presented to the Audit and Risk Committee remains relevant, meaningful, and focus on matters of greatest governance significance.

Document ID: 997269

Report To: Audit and Risk Committee



Meeting Date: 11 August 2026

Subject: **Mastercard Expenditure Report: April – June 2026**

Type: Information Only

Author(s): Michelle Higgie
Manager – Governance Support

1. Purpose of Report

- 1.1 The purpose of this business paper is to report on expenditure incurred via WDC issued Corporate Mastercard for the period April to June 2026.

2. Suggested Resolutions

- 2.1 The following is a suggested resolution only and does not represent Council policy until such time as it is adopted by formal resolution.

1 The business paper on Mastercard Expenditure Report: April – June 2026 be received.

3. Commentary

INTRODUCTION

- 3.1 In today's technological climate, the use of credit cards is an everyday norm. The issue of WDC Corporate credit cards is also deemed a prudent and sometimes necessary form of currency.
- 3.2 Many purchases can be made online with discounts not applicable through other purchasing avenues, necessitating the use of a credit card. In other circumstances the only purchase method available is online. Online purchases also significantly reduce staff time in making purchases.
- 3.3 From time to time WDC incurs work related expenses where the use of a WDC corporate credit card is the most expedient method of payment. The use of corporate credit cards avoids time consuming processes for arranging pre-purchase cheques, petty cash or making payment personally and claiming back the expense after the fact.

ACKNOWLEDGEMENT OF RISK

- 3.4 However, it is also acknowledged that as with dealing with any type of cash equivalent, there is always a risk.
- 3.5 To mitigate the level of risk in WDC employees utilising credit cards, WDC has a policy relative to the use of corporate credit cards.

POLICY

- 3.6 Credit card expenditure is classed as "sensitive expenditure" and the policy relating to credit card use is contained in Council's Sensitive Expenditure Policy.
- 3.7 The policy makes provision that copies of all Mastercard Statement Authorisation Forms shall (at the Committee's discretion) be presented to the Audit and Risk Committee for monitoring and public transparency purposes.

PRESENTATION OF EXPENDITURE DETAILS

- 3.8 Historically, copies of the monthly "Mastercard Statement Authorisation Forms" have been presented to each Audit and Risk Committee Meeting.
- 3.9 Copies of the supporting invoices/receipts are not included in any Agendas, however, should a Committee Member wish to view any of this supporting information, that information can be made available by arrangement.
- 3.10 The publishing of credit card expenditure in public Agendas has also reduced requests made under the Local Government Official Information and Meetings Act for this information.

4. Considerations**RISK**

- 5.1 There is no risk in reporting, or not reporting, on credit card expenditure.
- 5.2 Other than transparency, the only benefit of reporting publicly on credit card expenditure is the reduction in requests for the information under LGOIMA.

CONSISTENCY WITH EXISTING PLANS AND POLICIES

- 5.3 Council's Sensitive Expenditure Policy provides that reporting on credit card expenditure is "at the Committee's discretion," and is therefore consistent with Council's Policy.
- 5.4 Regardless of whether the Committee chooses to receive these reports or not, the Mastercard Authorisation Forms must still be completed for audit purposes, so there is no additional resource load in providing these reports to the Committee.

SIGNIFICANCE AND COMMUNITY VIEWS

- 5.5 As credit card expenditure is of very low value in the overall scheme of Council's budgets, there are no triggers for community engagement as provided for in Council's Significance and Engagement Policy.

5. Attachments/Separate Enclosures

Attachments:

- 1 Mastercard Authorisation Forms: April to June 2026 (Doc # 997270)

Mastercard Expenditure Authorisation - 2025/2026

Cardholder	Position	Statement Date	Creditor	Date	Total Amount	Amount Detail	GL Code	Expenditure Detail
April 2026								
Michelle Higgie	Manager - Governance Support		Waka Kotahi (NZTA)	2/04/2026	\$722.44		82027516	10,000km Road User Charges for Fleet Vehicle (QTU438) - Water Services
					\$722.44			
Helen Beever	General Manager - Community Services		Immigration NZ	8/04/2026	\$775.00		81739710	Renewal of Employer Accreditation
					\$775.00			
Alex Bell	General Manager - Strategy & Environment		The Law Association	21/04/2026	\$230.00		22230410	Commercial Deed of Lease
				24/04/2026	\$227.10	\$130USD		Umbraco website annual forms license for waitomo.govt.nz
			Umbraco Website		\$457.10			

Authorisation:

Position	Date	Signature
Mayor	5/05/2026	
Chief Executive	5/05/2026	
Manager Governance Support	5/05/2026	
General Manager Community Services	5/05/2026	
General Manager Strategy & Environment	8/05/2026	

Note:
In accordance with Council's Sensitive Expenditure Policy, approval for monthly credit card statement monitoring and authorisation is as follows:

Cardholder	Authoriser
Chief Executive	Mayor (or Deputy Mayor in the Mayor's absence) and Manager – Governance Support
Senior Management Team Members	Chief Executive
Manager – Governance Support	Mayor (or Deputy Mayor in the Mayor's absence) and Chief Executive
Mayor	<u>Note:</u> The current Mayor does not hold a corporate credit card.

In those months where no expenditure is incurred on a credit card, no authorisation signature is required.

Mastercard Expenditure Authorisation - 2025/2026

Cardholder	Position	Statement Date	Creditor	Date	Total Amount	Amount Detail	GL Code	Expenditure Detail
May 2026								
Michelle Higgle	Manager - Governance Support		Waka Kotahi (NZTA)	28/04/2026	\$772.44		82027779	10,000km Road User Charges for Fleet Vehicle (PFN107) - Chief Executive
			Waka Kotahi (NZTA)	29/04/2026	\$772.44		82027522	10,000km Road User Charges for Fleet Vehicle (RKJ399) - Parks and Reserves
			Air New Zealand	30/04/2026	\$782.13		11142700	Airfares (Hamilton-Wellington return) - Cr Buckley's attendance at Local Government New Zealand Rural & Provincial Sector Meeting in Wellington on 14/15 May 2026.
			Waka Kotahi (NZTA)	30/04/2026	\$772.44		82027521	10,000km Road User Charges for Fleet Vehicle (RKJ383) - Animal Control
			Air New Zealand	12/05/2026	\$875.82		11142700	Airfares (Hamilton-Wellington return) - Mayor's attendance at Local Government New Zealand Rural & Provincial Sector Meeting in Wellington on 14/15 May 2026.
			Waka Kotahi (NZTA)	21/05/2026	\$392.44		82027778	5,000km Road User Charges for Fleet Vehicle (N<MK783) - Infrastructure Services Pool
					<u>\$4,367.71</u>			
Helen Beever	General Manager - Community Services		Fishpond	21/05/2026	\$34.92		82635605	Repair of Cemetery Books for Customer Services
			Park 360	27/05/2026	\$20.00		81738315	Centre Place Carpark - Civil Defence Training (No Invoice/Receipt Issued)
					<u>\$54.92</u>			

Authorisation:	Position	Date	Signature
	Mayor	17/06/2026	
	Chief Executive	17/06/2026	
	Manager Governance Support	16/06/2026	
	General Manager Community Services	17/06/2026	
	General Manager Strategy & Environment		N/A

Note:
In accordance with Council's Sensitive Expenditure Policy, approval for monthly credit card statement monitoring and authorisation is as follows:

Cardholder	Authoriser
Chief Executive	Mayor (or Deputy Mayor in the Mayor's absence) and Manager – Governance Support
Senior Management Team Members	Chief Executive
Manager – Governance Support	Mayor (or Deputy Mayor in the Mayor's absence) and Chief Executive
Mayor	<u>Note:</u> The current Mayor does not hold a corporate credit card.

In those months where no expenditure is incurred on a credit card, no authorisation signature is required.

Mastercard Expenditure Authorisation - 2025/2026

Cardholder	Position	Statement Date	Creditor	Date	Total Amount	Amount Detail	GL Code	Expenditure Detail
June 2026								
Helen Beever	General Manager - Community Services	27/06/2026						
			Yeti New Zealand	18/06/2026	\$660.00		81739705	Gifts for staff transitioing to Waikato Waters Limited x 11 staff
			The Warehouse	19/06/2026	\$74.89		82620700	Kitchen / Council Chamber Supplies
					<u>\$734.89</u>			

Authorisation:	Position	Date	Signature
	Mayor	-	N/A
	Chief Executive	16/07/2026	
	Manager Governance Support	-	N/A
	General Manager Community Services	16/07/2026	
	General Manager Strategy & Environment	-	N/A

Note:
In accordance with Council's Sensitive Expenditure Policy, approval for monthly credit card statement monitoring and authorisation is as follows:

Cardholder	Authoriser
Chief Executive	Mayor (or Deputy Mayor in the Mayor's absence) and Manager – Governance Support
Senior Management Team Members	Chief Executive
Manager – Governance Support	Mayor (or Deputy Mayor in the Mayor's absence) and Chief Executive
Mayor	<u>Note:</u> The current Mayor does not hold a corporate credit card.

In those months where no expenditure is incurred on a credit card, no authorisation signature is required.

Document ID: 997295

Report To: Audit and Risk Committee**Meeting Date:** 11 August 2026**Subject:** **Local Government Funding Agency Cash Advance Facility - Recommendation to Council****Type:** Decision Required

Author(s): Wayne La Roche
Financial Accountant

Tina Hitchen
Chief Financial Officer

1. Purpose of Report

- 1.1 The purpose of this business paper is to present the Local Government Funding Agency (LGFA) cash advance facility option and seek a recommendation to Council to replace the current wholesale advance facility with the LGFA cash advance facility.

2. Suggested Resolutions

- 2.1 The following are suggested resolutions only and do not represent the committee's recommendation until such time as it might be adopted by resolution.
- 1 The business paper on Local Government Funding Agency Cash Advance Facility – Recommendation to Council be received.
 - 2 The Committee recommends that Council approve the LGFA Cash Advance facility in place of the current wholesale advance facility.

3. Background

- 3.1 A credit facility is vital to support day to day cash management and is utilised to temporarily cover cash requirements that typically arise due to timing of cash received quarterly from rates, the monthly NZTA subsidy funding and payment of suppliers.
- 3.2 WDC has had a facility with Westpac for many years and the use of the facility, when required, has run very smoothly.
- 3.3 Recently the LGFA have offered a very similar product but at considerably lower cost.
- 3.4 The Treasury Policy requires the approval of Council following a recommendation from the Audit and Risk Committee, to enter into the new borrowing facilities.

4. Commentary

- 4.1 The LGFA is WDC's principal lender and is now offering a new cash advance facility that will operate in a very similar fashion as the current Westpac Wholesale Advance facility in place.
- 4.2 The new facility is more cost effective, in both the facility fee charge and applicable interest rates.
- 4.3 Set out in the table below are the key differences between the LGFA Cash Advance and the Westpac Wholesale Advance facility for credit fee and effective interest rate, with example cost comparisons.

Terms	LGFA Cash Advance Facility	Westpac Wholesale Advance Facility	LGFA the better option?
Base Interest Rate	OCR	Westpac Prime Rate	Yes
Margin	50 basis points	100 basis points	Yes
Commitment Fee	20 basis points	40 basis points	Yes
For Example			
Facility Limit	\$6,000,000	\$6,000,000	n/a
Commitment/Facility Fee	\$12,000 per year	\$24,000 per year	Yes
Example Drawn Amount	\$1,500,000 for 31 days	\$1,500,000 for 31 days	n/a
OCR/Westpac Prime Rate	2.25%	2.55%	Yes
Estimated Interest Cost	\$41,250 per year \$3,503 for 31 days	\$53,250 per year \$4,523 for 31 days	Yes

- 4.4 As shown in the table above, the benefit of the LGFA offering is the facility fee being half the rate of the existing facility. It is priced at 0.20% (20 basis points) compared with 0.40% under the current arrangement, with the amount payable based on the facility limit.
- 4.5 The interest rate payable on the drawn amount is also more favourable for the LGFA option.
- 4.6 The LGFA facility term is for 3 years, compared to 1 year for the existing facility. Interest accrues on a daily basis on the outstanding balance and is paid on maturity (ie, each time a repayment is made).
- 4.7 The administration and use of the facility is slightly more cumbersome than the existing facility however this is manageable within the day to day cash management processes.
- 4.8 The current facility has a current limit of \$6 million. This limit will be reviewed over the coming months and as we work through forecasts for the Long Term Plan to determine whether a lower limit would be more appropriate, given the volume of transactions that have now moved to Waikato Waters Ltd.
- 4.9 This facility will be secured under the existing security arrangements with the LGFA.

5. Analysis of Options

- 5.1 **Option 1:** Enter into the new LGFA Cash Advance Facility to realise both the savings in facility fee costs and interest rate charged.
- 5.2 **Option 2:** No change - continue with the existing Wholesale Advance Facility. The facility is currently in place and working well but is more expensive than Option 1 in both facility fee costs and interest rate charged.

6. Considerations

- 6.1 No additional risks are identified with the selection of either option. There are adequate internal controls, management oversight and audit scrutiny around cash management and the drawing of debt, which would apply to either option selected.

CONSISTENCY WITH EXISTING PLANS AND POLICIES

The decision is consistent with Council's Treasury Policy which provides for and requires a standby facility to be in place.

- 6.2 Further the same policy requires the approval of Council to negotiate new borrowing facilities following recommendation from the Audit and Risk Committee.

SIGNIFICANCE AND COMMUNITY VIEWS

- 6.3 The decision on this matter is considered of low significance under the Significance and Engagement Policy 2026 and will provide cost savings for ratepayers.

7. Recommendation

- 7.1 It is recommended that Council enters into the LGFA Cash Advance facility to replace the existing Wholesale Advance facility as it is more cost effective.

Document No: 997108

Report To: Audit and Risk Committee



Meeting Date: 11 August 2026

Subject: **Progress Report: Audit Findings for year ended June 2025**

Type: Information Only

Author(s): Wayne La Roche
Financial Accountant

Charmaine Ellery
Manager – Strategy and Policy

Tina Hitchen
Chief Financial Officer

Kat Brown-Merrin
Manager Customer and Digital Services

1. Purpose of Report

- 1.1 The purpose of this business paper is to provide a further update on WDC's progress on the audit findings from the audit conducted by Deloitte Limited for the year ending 30 June 2025.

2. Suggested Resolutions

- 2.1 The following are suggested resolutions only and do not represent Council policy until such time as they might be adopted by resolution.
1. The business paper on Progress Report: Audit findings for year ending June 2025 be received.

3. Background

- 4.1 As part of the annual audit, Deloitte issues a report to Council highlighting matters that should be addressed to enhance the control environment and reporting. The recommendations are evaluated by Council staff and a management response provided.
- 4.2 The confidential audit report was presented by Deloitte to the Audit and Risk Committee at the 7 October 2025. The final audit report is attached and forms part of this business paper.
- 4.3 This business paper provides an update on staff progress and follow-up actions on the audit report items arising from the 2025 audit.

4. Commentary

- 5.1 No significant issues were identified through the course of the audit in any areas, recommendations for improvements have been noted and discussed with management.
- 5.2 The table below outlines the audit control findings and the progress that has been made in these areas since the last update in February 2026 (red text).

Audit Area	Audit Findings	Finding first identified	Target/Result	Staff Commentary
Finance	Treatment of Accrued expenses and Payables	2025	Further Refresher training will be provided to staff and the process reviewed to ensure we continue to accurately account for transactions.	Completed. Staff received additional training, and task responsibilities were redefined. The implementation of the PO processing module has also supported this area of the year-end process.
Policies	Timely review of policies	2022	A review timetable was pushed out in incorporate the 5 th edition government procurement changes. A review policy was taken to the Council meeting in August where members made the decision to defer the review until a new Council was formed after the local body elections.	Completed Key staff are working on a current draft of the procurement policy, this will be workshopped with Elected Members. The draft incorporates the 5 th edition updates and the approach to 'buy local'. Policy adopted 30 June 2026 including 'buy local' approach.
Finance	Timely Claiming of expenses	2025	Additional reminders will be communicated to ensure that claims are submitted in a timely manner.	Completed. The process for expense claims is operating well, with claims being provided in a timely manner.
Finance	Fixed asset register processing	2024	The completion of regular updates to the asset register continues to be a work in progress for our team. Additions and disposals are completed during the year where information is readily available however in some instances such as-built and componentisation of additions needs to be worked through which can delay the process.	The completion of regular updates to the asset register were completed throughout the year as information became available. The more complicated network and constructed type assets that rely on componentisation and as-built information need to be worked through before being processed into the accounts, which can delay the processing into the fixed asset register. Progress on additions to the asset register during the year was impacted by staff involvement in the waters transition work programme. Update: Final additions for June are underway along with reconciliations of work in progress, impairment and asset disposal reviews.
Statement of Service Performance	We recommend that managements should develop a formal mechanism for each performance measure, which includes reviews undertaken by staff with appropriate expertise in each	2025	Administration staff collating SSP data work closely with those teams and by and large have a good understanding of the data they are submitting. Checks of data are in some cases are done verbally and not recorded. A checking and sign-off record will be added to the process	Completed Email records are currently being used to capture review/sign-off by appropriate staff. A more formal capture method is being worked on to add to the KPI result spreadsheets. Sign-off added to the KPI spreadsheets capturing formal approval of results.

Audit Area	Audit Findings	Finding first identified	Target/Result	Staff Commentary
	group of activities being reported. We would also recommend ensuring that there is evidence retained of those reviews.		to formally capture this process.	
Information Technology	Enhance user access management procedures.	2024	Reliable process for provision/de-provision of user access and regular review of access.	Completed Feb 25: A monthly report is setup to be generated and sent to Chief Financial Officer, Financial Accountant, Chief Information Officer and Customer and Information Manager reviewing the general access users have to different modules. The CFO reviews the Finance level of access of the users. An onboarding/offboarding process review with a wider organisational team has started to refine and clarify these processes. May 25: The review of the onboarding/offboarding process is continuing. An online HR module (Elmo) is in the early stages of implementation which will assist with managing the onboarding/offboarding process. Aug 25: Elmo will be live in the coming weeks, the onboarding/offboarding function is still work in progress. User access reports are reviewed by CFO and IM.
Information Technology	Third party vendor risks not documented or monitored.	2024	Third party vendors risks appropriately managed.	Completed Feb 25: A request has been sent to our enterprise system software provider (MagiQ) to provide WDC with their Risk Management Procedure documentation. Aug 25: Policy supplied- MAGIQ Software Backup and Restoration Policy 2025 (Confidential)
Information Technology	No formal change management policy or monitoring of vendor database changes	2024	Change request policy in place with clear guidelines and approval procedures. Controls in place for reviewing database associated with requested application changes.	Feb 25: A Change Management Process documents has been developed and will be critiqued and approved by the end of March 2025. Aug 25: Draft document in progress.
Information Technology	Passwords parameter settings in MagiQ not aligned with password policy.	2024	Review policy and align parameters to meet the policy.	Completed

Audit Area	Audit Findings	Finding first identified	Target/Result	Staff Commentary
Information Technology	Larger number of vendor support staff have access to database.	2024	Review that the vendor users with access are appropriate.	Completed. Feb 25: WDC staff will review the access that MagiQ support team has to fix issues raised. Aug 25: The number of MagiQ support team with access has been reduced to 3 from 20.

5. Attachments/Separate Enclosures

Separate Enclosure: Final Deloitte Audit Report - 30 June 2025 (Doc #917888)

Document No: 996430**Report To: Audit and Risk Committee****Meeting Date:** 11 August 2026**Subject:** **Quarterly Report: Key Performance Indicators for the period ended 30 June 2026****Type:** Information Only**Author(s):** Rajeshwari Mahadevappa
Policy AdvisorCharmaine Ellery
Manager Strategy and Policy**1. Purpose of Report**

- 1.1 The purpose of this business paper is to present Waitomo District Council's delivery performance on non-financials for the 2025/26 financial year for the period ending 30 June 2026 (Quarter 4).
- 1.2 A copy of the KPI (Key Performance Indicator) Quarterly Report is included as an attachment to this business paper.

2. Suggested Resolution

- 2.1 The following is a suggested resolution only and does not represent Council policy until such time as it is adopted by formal resolution.
 - 1 The Quarterly Report: Key Performance Indicators for the period ended 30 June 2026 be received.

3. Background

- 3.1 The WDC Long Term Plan (LTP) 2024-2034 was adopted in June 2024 which includes the outcomes Council is aiming to deliver for the community through each activity area. Each group of activities has a level of service that we have agreed with the community to deliver.
- 3.2 These outcomes and levels of service are reported on to the community via the Annual Report at the end of each financial year.
- 3.3 Each quarter, a report is produced to monitor the performance of the activities and levels of service by way of the KPI's developed through the LTP 2024-2034.
- 3.4 This is the fourth quarterly report for the 2025/26 year, covering the period 1 April to 30 June 2026 (Quarter 4).

4. Commentary**SERVICE PERFORMANCE SUMMARY**

- 4.1 Of the 74 key performance indicators measured this quarter, 56 (76%) are achieved, 4 nearly achieved (5%), 9 (12%) are not achieved and 5 (7%) with no data available.

LEADERSHIP

- 4.2 All measures are achieved, these are for Council agendas, communicating with our community regularly, getting back to the customers requiring feedback and residents' survey results (percentage of residents satisfied that they received or could find Council information when they needed it).

COMMUNITY AND PARTNERSHIPS

- 4.3 All measures are achieved. These are for contestable grant funding, events delivered in partnership with other organisations, number of participants in library programmes and activities, active library members and residents' survey results (nearly achieved - percentage of residents satisfied their initial interaction with council customer services was friendly and helpful).

RECREATION AND PROPERTY

- 4.4 Two out of three measures are achieved, all facilities have current Building Warrant of Fitness.
- 4.5 Residents' survey measure related to satisfaction with parks and open spaces is achieved.
- 4.6 Residents' survey measure related to cleanliness of public toilets is not achieved.

REGULATORY SERVICES

- 4.7 Three of the seven measures are achieved - these are for alcohol licenses, food licenses, and accreditation of building consent authorities (BCA). And two measures are nearly achieved - building consents and Land Information Memorandum (LIM) applications.
- 4.8 The KPI for processing building consents is nearly achieved for this quarter and for the year. One building consent application exceeded the statutory period due to admin error. An issue occurred when vetting (receiving) the application. The complexity rating was changed following the first Vetting Request for Information (VRFI) which meant the system was not showing that the 20 day clock was counting. Once the error was found and corrected - it was past the statutory timeframe.
- 4.9 The KPI for completing Land Information Memorandum (LIM) applications within the statutory period is nearly achieved for this quarter and for the year. One LIM application exceeded the statutory 10 working day period (11 days) due to the delay in the sign-off process.
- 4.10 Residents' survey measure related to satisfaction with animal control service is not achieved.
- 4.11 The Civil Defence training KPI is reported as no data. An exercise was not done as there was an Emergency Operation Centre (EOC) activation within six months of the measurement being due. The Civil Defence Emergency Management (CDEM) Group will undertake an after-action review and provide improvement opportunities in lieu of a qualitative measure (like a score).

RESOURCE MANAGEMENT

- 4.12 The one measure in this area has been achieved with all resource consents processed within statutory timeframes for Quarter 4.

SOLID WASTE

- 4.13 Two of the four measures have been achieved, these are for complaints about uncollected rubbish and waste diversion rate.
- 4.14 Residents' survey measure related to the satisfaction of the rural transfer stations is not achieved.
- 4.15 Residents' survey measure related to the satisfaction of the Te Kūiti Transfer Station (landfill) is nearly achieved.

STORMWATER

- 4.16 All measures for stormwater have been achieved for this quarter.

- 4.17 Measure related to the number of complaints has not been achieved for the 2025/26 year, as the result exceeded the target slightly (target 9 complaints, result 10 complaints).

WASTEWATER

- 4.18 Six of seven measures have been achieved with response times within the target.
- 4.19 The measure related to notices is not achieved for this quarter and for the year. Two abatement notices were issued for this quarter and in total three notices for the year, these are related to non-compliant discharges of wastewater (EAC11451 and EAC11514) and wastewater discharge events related to a period of high rainfall (EAC10966). Details in the table below -

Wastewater Abatement Notices till date

Site	Enforcement	Date Issued
Piopio WWTP	Abatement Notice (EAC11451)	12 May 2026
Benneydale WWTP	Abatement Notice (EAC11514)	12 May 2026
Te Kuiti Wastewater Network	Abatement Notice (EAC10966)	9 July 2025

- 4.20 Measures achieved in this quarter but not achieved for the year:
- measure related to complaints for Piopio is not achieved for the year. Most complaints relate to electrical and pump related faults such as - failed pump, faulty float switches, submerged electrical connection etc. The complaints were addressed by replacing the failed pump, installing an anti-syphon valve¹ and fixing the electrical faults.
 - measure related to the number of wastewater complaints related to dry weather overflows is not achieved for the year. Most of the complaints are related to electrical and septic tank issues in Piopio (no complaints are linked to rainfall events or wet weather overflows).

WATER SUPPLY

- 4.21 23 out of 31 measures have been achieved.
- 4.22 Four measures are not achieved for this quarter:
- T2 Treatment Monitoring Rules for Mōkau - E. coli or Total Coliform sample was not collected as scheduled in June 2026 due to the road closure caused by a slip. The sampling was rescheduled, however due to the absence of the staff member concerned, the June 2026 sampling was inadvertently missed. Once the oversight was identified, sampling was carried out immediately on 2 July 2026 and the results showed that neither E. coli nor Total Coliforms were detected.
- To reduce the risk of missed sampling events in the future, sampling has been rescheduled to occur during the first planned trip to Mokau each month. This approach provides sufficient flexibility to reschedule sampling within the same month if unforeseen circumstances prevent the original sampling from taking place.
- Protozoa for Te Kūiti and Piopio –
- Te Kūiti - non-compliance in April 2026 (four days) is due to elevated raw water turbidity following rainfall events. Non-compliance in May 2026 (two days) is due to the air pockets in the turbidity flow gauge causing inaccurate high turbidity readings. The flow gauge fittings were replaced following the identification of the issue.
- Piopio - non-compliance (one day in April and May 2026) is due to turbidity spikes caused by fluctuations in waterflow through the sampling line. The team is investigating options to install a regulator to regulate the flow, however, the available solutions are expensive.

¹ In a septic system, when the pump turns off, the wastewater in the discharge pipe can sometimes be pulled back toward the tank. The anti-syphon valve allows air to enter the pipe when the pump stops, breaking the vacuum and preventing water or liquids from flowing backward.

- Bacteria rules for Te Kūiti - this is due to non-compliance for one day on 1 April 2026 due to the minimum contact time falling below the required standard. The minimum contact time requirement is 5.0 minutes; however, a result of 4 mins 48secs was recorded. This is due to system recording continuous data even when there is no water (for example, if the treatment plant is shut down).

4.23 Free Available Chlorine (FAC) levels are checked five times a week throughout the reticulation network and is highly effective in killing bacteria. FAC levels were compliant, assuring the safety of the drinking water. There was no reportable risk to public health.

4.24 Measure related to the percentage of water loss for Te Kūiti, Mōkau and Maniaiti/Benneydale are recorded as no data as this was not available at time of writing the report. June 2026 data is being retrieved for year end reporting.

ROADS AND FOOTPATHS

4.25 Five out of six measures have been achieved both for this quarter and for the year. These are related to the smooth travel exposure rating which is measured every three years, ratings for footpath network, resurfacing the sealed roads, metaling the unsealed roads and responding to service requests.

4.26 The measure for serious crashes has not been achieved due to two serious crashes this quarter. For the year, there were no fatal crashes and five serious crashes, therefore this measure is not achieved (target is nil for both fatal and serious crashes).

5. Attachments/Separate Enclosures
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Attachment:

1 KPI Quarterly Report Quarter 4 for period ending 30 June 2026 (Doc # 994557)

Key Performance Indicators

Quarterly Report Q4

For the period 1 April to 30 June 2026



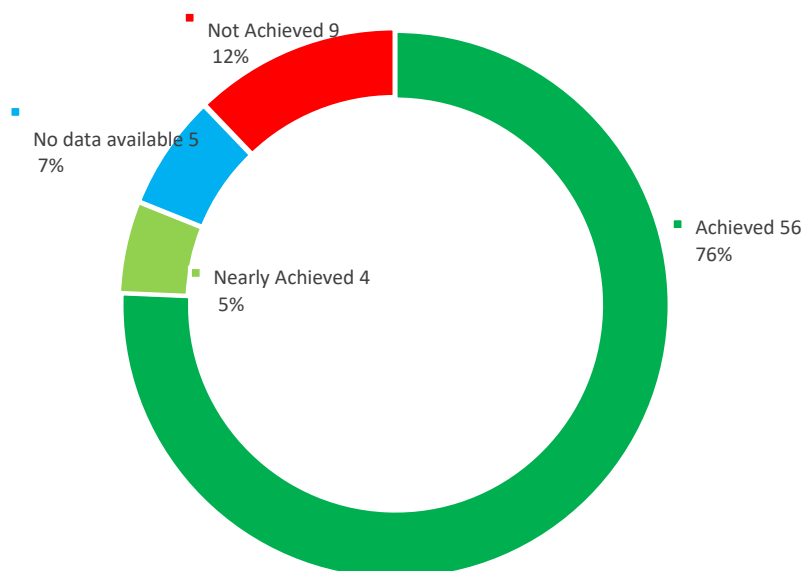
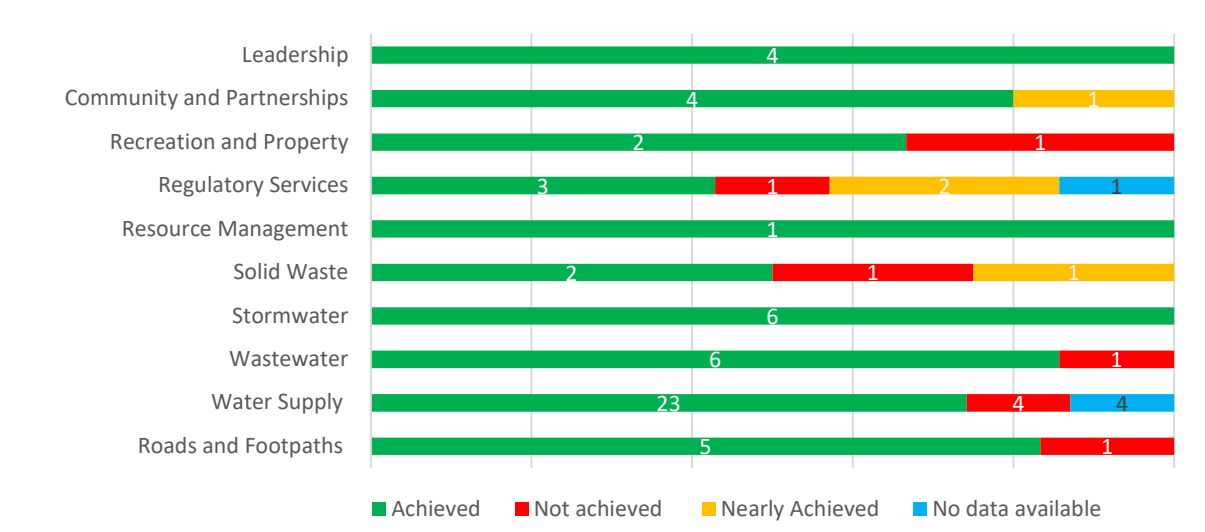
INTRODUCTION

The 2024-2034 Long Term Plan (LTP) was adopted in June 2024. It sets out outcomes we aim to deliver for our community through the activities we undertake. Within each group of activities outlined in the LTP, we have outlined the levels of service we intend to deliver.

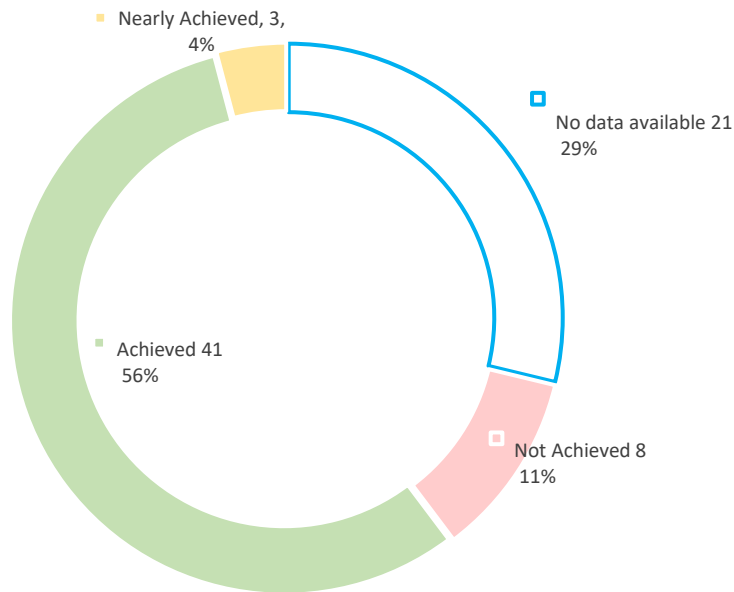
The purpose of this report is to provide high-level updates of these Council activities for the months of 1 April to 30 June 2026. The report covers non-financial KPI (Key Performance Indicators) of groups of activities.

Each KPI reported on in the quarterly report is given a result of either achieved, not achieved, nearly achieved, and no data available. A nearly achieved result is shown when a KPI has not been achieved but was close to achieving. This occurs when a result is within 5% of the target, this being within the margin of error for Resident Survey results.

SERVICE PERFORMANCE SUMMARY FOR QUARTER FOUR 2025/2026



Of the 74 key performance indicators measured this quarter, 56 (76%) are achieved, 4 nearly achieved (5%), 9 (12%) are not achieved and 5 (7%) with no data available.



Of the 74 key performance indicators measured, the year end results are - 41 (56%) are achieved, 8 (11%) are not achieved, 3 (4%) are nearly achieved and 21 (28%) with no data available.

SERVICE PERFORMANCE MEASURES			
Performance Measure Status			
 Not Achieved	 Achieved	 Nearly achieved*	 Data not available
Target/Result shading indicating year end results			
	On track	Off track	Not Achieved

* A nearly achieved result occurs when a result is within 5% of the target, this being within the margin of error for Resident Survey results.

Leadership							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
Our governance services are robust and transparent.	The percentage of Council agendas that are publicly available before a Council meeting.					Target: ≥ 70% available 4 working days prior and 100% available 2 working days prior Q4 Result: Achieved 2024/25 YE Result: Achieved	Available 4 working days prior - 86% Available 2 working days prior - 100% Year end result: Achieved Available 4 working days prior - 95% Available 2 working days prior - 100%
We communicate effectively with our community.	Percentage of residents satisfied that they received or could find Council information when they needed it.					Target: Between 70 - 100% Q4 Result: 89% 2024/25 YE Result: Achieved 87%	Achieved Year end result: Achieved 89%

Leadership							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
We communicate regularly with our community about what matters.	The number of posts on our Facebook page per week.	●	●	●	●	Target: ≥ 5 week for at least 45 weeks Q4 Result: Achieved 2024/25 YE Result: Achieved	Q4 KPI met. Out of the 13 weeks in Q4, all exceeded the number of required FB posts per week. The total number of posts not including shares was 175. The weekly average was 13. Year end result: Achieved The total amount of FB posts for the year was 614. The average across the year was 11 posts per week.
We get back to our customers to let them know the outcome of their service requests.	The percentage of service requests where an officer has contacted the customer to inform them of the outcome of the request.	●	●	●	●	Target: 100% Q4 Result: 100% 2024/25 YE Result: Achieved 100%	All customers that required feedback had been contacted for Quarter 4. Year end result: Achieved

Community and Partnerships							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
We facilitate strong and sustainable partnerships to support improved outcomes for our community.	All contestable grant funding ¹ is disseminated fairly and equitable in accordance with our Policy.	●	●	●	●	Target: Achieved Q4 Result: Achieved 2024/25 YE Result: Achieved	Achieved. Year end result: Achieved
We will work in partnership with others on projects or events that enhance the culture and wellbeing of residents.	The number of projects or events that promote culture or wellbeing delivered in partnership with other organisations.	●	●	●	●	Target: ≥ 2 Q4 Result: Year to date 3 2024/25 YE Result: 3	The Great NZ Muster was held on Saturday 11 April 2026 in partnership with the NZ Shearing Championships Committee. Centennial Park Open Day was held on 27 September 2025 in partnership with Centennial Park sports organisations. Waitomo District Christmas Parade was held on 12 December 2025 in partnership with Legendary Te Kūiti. Year end result: Achieved
We provide a comprehensive and well used Library service for our community.	The number of active library members.	●	●	●	●	Target: ≥ 2% on the year previous (≥927 members, which is 2% of 909 active members in 2024/25) Q4 Result: Achieved 1005 2024/25 YE Result: Nearly Achieved	Achieved. Year end result: Achieved
We deliver a range of well attended activities and programmes at the Waitomo District Library.	The number of participants in Library programmes and activities.	●	●	●	●	Target: ≥ 5% on the year previous (≥ 1752 participants, which is 5% of 1,669 participants in 2024/25) Q4 Result: 879 2024/25 YE Result: Achieved	An average of 438 participants is needed each quarter for this to be achieved. For Quarter 4, we had 879 participants, this brings YTD total to 1977. Year end result: Achieved - 1977

¹ Contestable grant funding is the Multi-Year Community Partnership Grant.

Community and Partnerships

You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
Our customer service team are friendly and helpful.	The percentage of residents satisfied their initial interaction with council customer services was friendly and helpful.					Target: Increasing trend Q4 Result: 88% 2024/25 YE Result: Achieved 88%	Nearly Achieved

Recreation and Property

You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
We provide parks and open spaces across our district.	Percentage of residents satisfied with our parks and open spaces.					Target: ≥ 85% Q4 Result: 91% 2024/25 YE Result: Achieved 92%	91%
We provide community facilities that are compliant with legislative standards.	Ensure facilities with compliance schedules have current Building Warrant of Fitness (BWOFF).					Target: Achieve Q4 Result: Achieved 2024/25 YE Result: Achieved	All facilities have current Building Warrant of Fitness (BWOFF).
We provide clean public toilets for our community and visitors.	Percentage of residents satisfied with the cleanliness of public toilets.					Target: ≥ 85% Q4 Result: 61% 2024/25 YE Result: Not Achieved 63%	61% Not Achieved.

Regulatory Services

You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
Building consents are processed in a timely fashion.	All building consents are processed within 20 working days.					Target: 100% Q4 Result: Nearly Achieved 98% 2024/25 YE Result: Nearly Achieved 99%	All building consents processed within 20 working days. One application exceeded the statutory timeframe due to admin error. Year end result: Nearly Achieved 99%
We provide regulatory services for alcohol licences.	All premises that sell alcohol are licensed.					Target: 100% Compliance Q4 Result: Achieved 100% 2024/25 YE Result: Achieved 100%	All premises that sell alcohol are licensed. Year end result: Achieved

Regulatory Services							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
We provide regulatory services for food licences.	All premises that sell food are licensed and registered.	●	●	●	●	Target: 100% Compliance Q4 Result: Achieved 100% 2024/25 YE Result: Achieved 100%	All premises that sell food are licensed. Year end result: Achieved
We provide Land Information Services (LIMs) efficiently.	LIM applications are processed within 10 working days.	⊘	⊘	●	⊘	Target: 100% Compliance Q4 Result: Nearly Achieved 97% 2024/25 YE Result: Nearly Achieved 99%	28 LIMs out of 29 were processed within the statutory 10 days. One LIM was processed over the statutory 10 working day period (11 days) due to the delay in the sign off process. Year end: Nearly Achieved 95% Eight LIMs exceeded 10 days due to critical staff involved in the Western Waikato Emergency Operations Centre in February, combined with process and administrative issues.
We will process, inspect, and certify building work in the Waitomo District.	WDC maintains building control systems and process to meet IANZ Audit requirements.	●	●	●	●	Target: BCA accreditation maintained Q4 Result: Achieved 2024/25 YE Result: Achieved	The current BCA accreditation continues to be valid while the June 2026 assessment is underway.
We provide an effective Animal Control service.	Percentage of residents satisfied with the provision of the Animal Control service.	●	●	●	●	Target: ≥ 75% Q4 Result: Not Achieved 2024/25 YE Result: Not Achieved 63%	2026 Survey result 67%
WDC is resourced and staff trained to effectively support operations of Civil Defence Headquarters during an emergency.	The evaluation of the annual exercise as a measure of effectiveness of training.	●	●	●	●	Target: ≥ 61% (comprehensive score) Q4 Result: No data 2024/25 YE Result: Nearly Achieved 58%	An exercise was not required as there was an Emergency Operation Centre (EOC) activation within six months of the measurement being due. The Civil Defence Emergency Management Group will undertake an after-action review and provide improvement opportunities in lieu of a qualitative measure.

Resource Management							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
Resource consents are processed in accordance with legislation.	All non-notified land use consent and subdivision consents are processed within 20 days.	●	●	●	●	Target: 100% Q4 Result: Achieved 100% 2024/25 YE Result: Achieved 100%	All resource consents were processed within 20 days. Year end result: Achieved

Solid Waste							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
We will provide a reliable kerbside rubbish collection to stop rubbish becoming a health risk. ²	The number of justifiable complaints per week about uncollected rubbish.	●	●	●	●	Target: < 7 per week Q4 Result: Achieved 2024/25 YE Result: Achieved	No week exceeded 7 complaints. Nine complaints were received throughout the quarter for uncollected rubbish. Contractor was not able to access the route due to road works. Year end result: Achieved
We provide effective and fit for purpose solid waste facilities.	Percentage of users that are satisfied with the rural transfer service stations.	●	●	●	●	Target: ≥ 90% Q4 Result: 80% 2024/25 YE Result: Not Achieved 77%	Not achieved
	Percentage of users that are satisfied with the Waitomo District Landfill.	●	●	●	●	Target: ≥ 90% Q4 Result: 87% 2024/25 YE Result: Nearly 87%	Nearly achieved
We encourage waste minimisation by providing recycling services to reduce waste sent to landfill.	Diversion rate ³ of the District's waste to landfill.	●	●	●	●	Target: Increasing trend of diversion rate to ≥ 50% Q4 Result: 60.33% 2024/25 YE Result: Achieved 52%	Achieved. Current diversion rate is 60.33%.

² Kerbside collection services offered in Te Kūiti, Waitomo Village, Piopio, and Mōkau.

³ Diversion rate means not sending unwanted materials to disposal facilities. Instead, materials are repurposed through the process of **reuse**, **recycling**, or **recovery**. The diversion rate is found by dividing the weight of diverted waste only by the weight of all waste and multiplying this by 100 to get a percentage.

Stormwater							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
We maintain and operate the stormwater network in a way that minimises the likelihood of stormwater entering habitable buildings.	The number of flooding events ⁴ that occur in the district in a financial year.	●	●	●	●	YE Target: ≤ 2 Q4 Result: 0 2024/25 YE Result: Achieved 0	No flooding events in Quarter 4. Year end result: Achieved
	For each flooding event the number of habitable floors affected in a financial year.	●	●	●	●	YE Target: ≤ 5 per 1000 properties (1,862 properties) Q4 Result: 0 2024/25 YE Result: Achieved 0	No flooding events in Quarter 4. Year end result: Achieved
We comply with our resource consent conditions and minimise the impact of stormwater on the environment.	The number of infringement notices related to the management of the stormwater system.	●	●	●	●	YE Target: ≤ 2 Q4 Result: 0 2024/25 YE Result: Achieved 0	No notices received in Quarter 4. Year end result: Achieved
	The number of abatement notices, enforcement orders or convictions related to the management of the stormwater system.	●	●	●	●	YE Target: 0 Q4 Result: Achieved 2024/25 YE Result: Achieved	No notices received in Quarter 4. Year end result: Achieved
We will respond within a reasonable timeframe to flooding.	The median response time to attend a flooding event (measured from the time that the notification is received to the time that service personnel reach the site).	●	●	●	●	YE Target: ≤ 180 minutes (3hrs) Q4 Result: Achieved 2024/25 YE Result: Achieved	No flooding events in Quarter 4. Year end result: Achieved
We provide a reliable stormwater system.	The number of complaints received about the performance of the Council's urban stormwater system per 1,000 properties connected.	●	●	●	●	Target: ≤ 5 complaints per 1000 properties (1,862 properties) or 9 complaints Q4 Result: Achieved – 2 complaints 2024/25 YE Result: Achieved – 2 complaints per 1,000 properties	Q1 – 1.0 per 1000 properties or total 2 complaints Q2 – 2.7 complaints per 1000 properties or total 5 complaints Q3 – 0.5 per 1000 or total 1 complaint Q4 – 1.0 per 1000 properties or total 2 complaints YTD – 10 complaints per 1000 properties Year end result – Not Achieved

⁴ A flooding event means an overflow of stormwater from a territorial authority's stormwater system that enters a habitable floor. Habitable floor refers to the floor of a building (including a basement) but does not include ancillary structures such as stand-alone garden sheds or garages.

Wastewater							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
We will attend and resolve issues with the wastewater system within a reasonable timeframe.	The median attendance time for callouts, from the time that we received notification to the time that our service personnel reach the site.	●	●	●	●	Target: ≤180 minutes (3hrs) Q4 Result: 44 minutes 2024/25 YE Result: Achieved 1hr 30mins	44 minutes Year end result: 54 mins
	The median resolution time of callouts, from the time that we received notification to the time that our service personnel confirm the fault or interruption has been resolved.	●	●	●	●	Target: <u>Rest of District</u> ≤480 minutes (8hrs) Q4 Result: 3hrs 3mins 2024/25 YE Result: Achieved 3hrs 4mins	3 hrs 3 mins Year end result: 2 hrs 38 mins
		●	●	●	●	Target: <u>Piopio</u> ≤480 minutes (8hrs) Q4 Result: 6hrs 4mins 2024/25 YE Result: Achieved 4hrs 22mins	6hrs 4mins Year end result: 5 hrs 19 mins
We comply with our resource consent conditions and minimise the impact of wastewater on the environment.	Zero abatement, infringement, enforcement or convictions issued.	●	●	●	●	Target: 0 Q4 Result: Not Achieved, 2 notices 2024/25 YE Result: Not Achieved 1 notice received	Q1 - 1 abatement notice issued Q2 & Q3 – Achieved Q4 – 2 abatement notices issued Year end result: Not achieved 3 notices – 2025-26
Our wastewater system is operated and maintained to minimise odour and blockages.	The number of complaints about wastewater odour, system faults or blockages and complaints about our response to issues with its wastewater system.	●	●	●	●	Target: <u>Piopio</u> ≤200 complaints per 1,000 connections (204) or 41 complaints Q4 Result: 196 complaints per 1000 connections 2024/25 YE Result: Not Achieved, 232 per 1000 connections	Q2 – 25 complaints or 117 per 1000 connections Q1 – 21 complaints or 99 complaints per 1000 connections Q3 – 16 complaints or 78 complaints per 1000 connections Q4 – 40 complaints or 196 complaints per 1000 connections YTD – 102 complaints or 500 complaints per 1000 connections Most complaints are related to septic tank alarms, triggered by electrical issues (tripping).

Wastewater							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
						Target: <u>Rest of District</u> ≤35 complaints per 1,000 connections (2085) or 73 complaints Q4 Result: 4.8 complaints per 1000 connections 2024/25 YE Result: Achieved, 23 per 1000 connections	Q1 – 25 complaints or 12 complaints per 1000 connections Q2 – 12 complaints or 5.7 per 1000 connections Q3 – 4 complaints or 2 complaints per 1000 connections Q4 – 10 complaints or 4.8 complaints per 1000 connections YTD – 51 complaints or 24 complaints per 1000 connections Most complaints related to blockages/overflow.
Our wastewater system is optimised to reduce the risk of harm to the community and environment.	Number of dry weather overflows in a financial year					Target: ≤5 complaints per 1,000 connections (2289) or 11 complaints Q4 Result: Achieved - 4.8 complaints per 1000 connections 2024/25 YE Result: Previous result: Not Achieved, 10 per 1000 connections	Q1 – 5 complaints or 2 per 1000 connections Q2 – 6 complaints or 2.6 per 1000 connections Q3 – 9 complaints or 4 per 1000 connections Q4 – 11 complaints or 4.8 per 1000 connections YTD – 31 complaints or 13.5 per 1000 connections

Water Supply							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
We provide water that is safe to drink and hygienic to use which meets the drinking water standards.	Water quality complies with the drinking water standards for T2 Treatment Monitoring Rules.					Target: <u>Mōkau</u> Achieve Compliance Q4 Result: Not met 2024/25 YE Result: Almost met	Compliance not met. No sample was collected for E. coli and Total Coliform testing in June 2026 due to a road closure. Resample was missed due to staff absence, sampling was carried out on 2 July 2026. No E.coli or Total Coliforms were detected. Year end result: waiting for the water compliance report

Water Supply							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
						Target: Maniaiti/Benneydale Achieve Compliance Q4 Result: All met 2024/25 YE Result: All met	Compliance Achieved. Year end result: waiting for the water compliance report
	Water quality complies with the drinking water standards for T2 Protozoal Rules.					Target: <u>Mōkau</u> Achieve Compliance Q4 Result: All met 2024/25 YE Result: Almost met	Compliance Achieved. Year end result: waiting for the water compliance report
						Target: Maniaiti/Benneydale Achieve Compliance Q4 Result: All met 2024/25 YE Result: All met	Compliance Achieved. Year end result: waiting for the water compliance report
	Water quality complies with the drinking water standards for T2 Filtration Rules.					Target: <u>Mōkau</u> Achieve Compliance Q4 Result: All met 2024/25 YE Result: All met	Compliance Achieved. Year end result: waiting for the water compliance report
						Target: Maniaiti/Benneydale Achieve Compliance Q4 Result: All met 2024/25 YE Result: All met	Compliance Achieved. Year end result: waiting for the water compliance report
	Water quality complies with the drinking water standards for T2 Chlorine Rules.					Target: <u>Mōkau</u> Achieve Compliance Q4 Result: Met 2024/25 YE Result: All met	Compliance Achieved. Year end result: waiting for the water compliance report
						Target: Maniaiti/Benneydale Achieve Compliance Q4 Result: All met 2024/25 YE Result: All met	Compliance Achieved. Year end result: waiting for the water compliance report

Water Supply							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
	Water quality complies with the drinking water standards for T3 Bacteria Rules.					Target: Te Kūiti Achieve Compliance Q4 Result: Not met 2024/25 YE Result: Almost met	Non-compliant on 1 April 2026 due to the minimum contact time falling below the required standard by 12secs. Year end result: waiting for the water compliance report
We provide water that is safe to drink and hygienic to use which meets the drinking water standards.	Water quality complies with the drinking water standards for T3 Bacteria Rules.					Target: Piopio Achieve Compliance Q4 Result: All met 2024/25 YE Result: All met	Compliance Achieved. Year end result: waiting for the water compliance report
	Water quality complies with the drinking water standards for T3 Protozoa Rules.					Target: Te Kūiti Achieve Compliance Q4 Result: Not Achieved 2024/25 YE Result: All met	There were 4 days non-compliant in April 2026 due to elevated raw water turbidity caused by rainfall. In May 2026, there were two additional non-compliant days related to air pockets in the turbidity flow gauge to prevent further occurrences, the flow gauge fittings were replaced. Year end result: waiting for the water compliance report
	Water quality complies with the drinking water standards for D2 Distribution System Rule.					Target: Piopio Achieve Compliance Q4 Result: Not Achieved 2024/25 YE Result: Almost met	Non-compliant for 1 day each in April and May. There were instances of turbidity spikes caused by sudden changes in water flow in the sampling line. Year end result: waiting for the water compliance report
	Water quality complies with the drinking water standards for D2 Distribution System Rule.					Target: Mōkau Achieve Compliance Q4 Result: All met 2024/25 YE Result: All met	Compliance Achieved. Year end result: waiting for the water compliance report
We provide water that is safe to drink and hygienic to use which meets the drinking water standards.	Water quality complies with the drinking water standards for D2 Distribution System Rule.					Target: Maniaiti/Benneydale Achieve Compliance Q4 Result: All met 2024/25 YE Result: All met	Compliance Achieved. Year end result: waiting for the water compliance report

Water Supply							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
		●	●	●	●	Target: Piopio Achieve Compliance Q4 Result: All met 2024/25 YE Result: All met	Compliance Achieved. Year end result: waiting for the water compliance report
	Water quality complies with the drinking water standards for D3 Microbiological Monitoring Rule.	●	●	●	●	Target: Te Kūiti Achieve Compliance Q4 Result: All met 2024/25 YE Result: Almost met	Compliance Achieved. Year end result: waiting for the water compliance report
We provide an efficient and effective water supply. We will achieve this by undertaking activities such as water leakage detection and maintaining the network of water pipes. ⁵	Percentage of real water loss from Council's networked reticulation system						
	Te Kūiti	●	●	●	●	Target: ≤ 20% Result: no data 2024/25 YE Result: Achieved, 17.4%	No data – June data TBC (Percentage calculated using Minimum Night Flow which assumes that there is little consumption overnight, therefore remaining flow is attributed to water loss).
	Mōkau	●	●	●	●	Target: ≤ 5% Result: no data 2024/25 YE Result: Achieved, 1.98%	
	Piopio	●	●	●	●	Target: ≤ 5% Result: 0.34% 2024/25 YE Result: Achieved, 2.01%	
	Maniaiti/ Benneydale	●	●	●	●	Target: ≤ 5% Result: no data 2024/25 YE Result: No data	
We provide efficient management of demand for water for our community.	The average consumption of drinking water per Waitomo District resident, per day.	●	●	●	●	Target: ≤ 400 litres per person per day Q4 Result: 359 litres 2024/25 YE Result: Achieved, 340 litres/day	Q4: 359 litres Year end result: 292 litres/day
We will respond within a reasonable timeframe to issues with the water supply. ⁶	The median attendance time for urgent callouts, from the time that we received notification to the time that our service personnel reach the site.	●	●	●	●	Target: ≤ 180 minutes (3hrs) Q4 Result: 9 mins 2024/25 YE Result: Achieved - 10 mins	9 mins Year end result: 14 minutes

⁵ Water Losses includes real losses through leaks in the network and apparent losses through metering inaccuracies or water theft. This does not include unauthorised consumption.

⁶ Resolution and attendance based on working days are defined as Monday – Friday, excluding public holidays. If notification is received on the weekend or public holiday the timeframes start from the next working day.

Water Supply							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
	The median resolution time of urgent callouts, from the time that we received notification to the time that our service personnel confirm the fault or interruption has been resolved.	●	●	●	●	Target: ≤ 540 minutes (9hrs) Q4 Result: 29 mins 2024/25 YE Result: Achieved 1hr 9mins	29 mins Year end result: 2hrs 9mins
	The median attendance time for non-urgent callouts, from the time that we received notification to the time that our service personnel reach the site.	●	●	●	●	Target ≤ 24 hrs (1 day) Q4 Result: 35 mins 2024/25 YE Result: Achieved, 1hr 14mins	35 mins Year end result: 3hrs 22mins
	The median resolution time of non-urgent callouts, from the time that we received notification to the time that our service personnel confirm the fault or interruption has been resolved.	●	●	●	●	Target: ≤ 96 hours (4 days) Q4 Result: 4 hrs 45mins 2024/25 YE Result: Achieved, 22hrs 34mins	4 hrs 45mins Year end result: 20hrs 19mins
We provide water that is wholesome and is reliably supplied. The measure indicates	The total number of complaints received by Council in a year for: ⁷						
	Drinking water clarity.	●	●	●	●	Target: ≤ 5 per 1000 connections (2678 connections) Q4 Result: Achieved 1 complaint or 0.4 complaint per 1000 connections 2024/25 YE Result: Achieved, 1.88	1 complaint or 0.4 complaint per 1000 connections Year end result: 3 complaints or 1.12 complaint per 1000 connections
	Drinking water taste.	●	●	●	●	Target: ≤ 2 per 1000 connections (2678 connections) Q4 Result: Achieved 0 2024/25 YE Result: Achieved, 0	No complaints Year end result: No complaints
	Drinking water odour.	●	●	●	●	Target: ≤ 2 per 1000 connections (2678 connections) Q4 Result: Achieved 0 2024/25 YE Result: Achieved, 0	No complaints Year end result: No complaints

⁷ Total number of connections is 2659

Water Supply							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
customers and community satisfaction with the quality of the water.	Drinking water pressure flow.	●	●	●	●	Target: ≤ 5 per 1000 connections (2678 connections) Q4 Result: 1 complaint or 0.4 complaint per 1000 connections 2024/25 YE Result: Achieved, 1.5	Q1 – no complaints Q2 – 2 complaints or 0.75 per 1000 connections Q3 – 6 complaints or 2.24 complaints per 1000 connections Q4: 1 complaint or 0.4 complaint per 1000 connections Year end result: 9 complaints or 3.36 complaints per 1000 connections
	Continuity of supply.	●	●	●	●	Target: ≤ 4 per 1000 connections (2678 connections) or 10 complaints Q4 Result: Achieved 0 2024/25 YE Result: Achieved, 3.4	Q1 – 6 complaints or 2.25 complaints per 1000 connections Q2 – 4 complaints or 1.5 complaints per 1000 connections Q3 – 5 complaints or 1.87 complaints per 1000 connections Q4 – no complaints Year end result: 15 complaints or 5.62 complaints per 1000 connections, hence, end of year result is not achieved.
	Council's response to any of these issues.	●	●	●	●	Target: ≤ 5 per 1000 connections (2678 connections) Q4 Result: 0 2024/25 YE Result: Achieved, 0	No complaints. Year end result: no complaints

Roads and Footpaths							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
We are working towards a safe network with a vision of a decreasing trend of deaths and serious injuries on Waitomo District roads within ten years. We aim to achieve this by delivering projects that are focused on maintaining, upgrading, or changing the conditions of the roading environment to keep our community safe.	The change from the previous financial year in the number of fatalities and serious injury crashes on Waitomo District's local road network. ⁸	●	●	●	●	Target: maintain or decrease from previous year (previous year result 0 fatal or serious crashes) Q4 Result: 0 fatal and 2 serious crashes 2024/25 YE Result: Achieved	Q1 - 0 fatal and 1 serious crash Q2 - 0 fatal and 1 serious crash Q3 - 0 fatal and 1 serious crash Q4 - 0 fatal and 2 serious crashes Year end result - 0 fatal and 5 serious crashes
We aim for a smooth road that provides comfort for road users and improves the safety of the roads.	The average smooth travel exposure rating across the sealed road network. ⁹	●	●	●	●	Target: ≥ 80% (of total network) Q4 Result: 90% 2024/25 YE Result: Achieved 90%	Achieved at 90% below 150 NAASRA count. Assessment completed every three years, data from 2024. Year end result – Achieved 90%
We will maintain the road network by resealing it as needed. Resurfacing is only undertaken as required depending on the condition of the surface in that financial year.	The percentage of Waitomo District's sealed local road network that is resurfaced each year.	●	●	●	●	Target: 5% (of total network) Q4 Result: 6.4% kms 2024/25 YE Result: Achieved 8.9%	The programme surfacing quantity is 29.3525km which equates more the target 5%. Year end result – Achieved 6.4%
We will provide footpaths that are well maintained. The measure is the percentage of footpaths that meet the service level.	The percentage of footpath network that falls within a condition rating of 3. ¹⁰	●	●	●	●	Target: ≥ 85% Q4 Result: 93% 2024/25 YE Result: Achieved 93%	Survey done in March 2026 shows we need to upgrade 7% of footpath on our network. Year end result – Achieved 93%

⁸ This is using NZTA Crash Analysis System definitions: fatal is defined as a death occurring as the result of injuries sustained in a road crash within 30 days of the crash, serious is defined as injury (fracture, concussion, severe cuts or other injury) requiring medical treatment or removal to and retention in hospital.

⁹ Percentage of measured sealed road lane kilometres not exceeding a NAASRA roughness count rating of 150 to be at least 90%. NAASRA is a generally acceptable measure of road roughness. A NAASRA count of less than 150 indicates an acceptable level of ride comfort.

¹⁰ Acceptable ratings being 1-very good 2-good and 3-fair as assessed by industry trained raters.

Roads and Footpaths							
You can expect	Measure	Q1	Q2	Q3	Q4	Target/Result	Commentary
We will investigate and respond to the customer about their request for service relating to road and footpath issues.	The percentage of customer service requests relating to roads and foot paths responded to within 10 working days.	●	●	●	●	Target: ≥ 90% Q4 Result: 96% 2024/25 YE Result: Achieved 93%	194 out of 203 service requests received in Q4 were responded to within 10 working days. Year end result – Achieved - 1046 out of 1079 requests were responded to within 10 working days (97%).
We will maintain the overall condition of the unsealed roads to a specified adequate standard.	Percentage of unsealed road metaled each year.	●	●	●	●	Target: ≥ 15% (of total) Q4 Result: 12.2% 2024/25 YE Result: Not Achieved 10.5%	Q1 – 5.4% (29.6km) Q2 – 0.3% (2 km) Q3 – 0 km Q4 – 12.2% (66.8km) During Q4, the bulk of the target metal was successfully placed. Year end result – Achieved 17.9% (98.3km)

Document No: 997017

Report To: Audit and Risk Committee**Meeting Date:** 11 August 2026**Subject:** **Progress Report: Procurement Summary Schedule (April 2026 – June 2026)****Type:** Information Only**Author(s):** Hilary Walker
Acting General Manager Strategy and Environment**1. Purpose of Report**

- 1.1 The purpose of this business paper is to present to the Committee a summary of the procurements made in the period 1 April 2026 to 30 June 2026 in accordance with Waitomo District Council's Procurement Policy.

2. Suggested Resolutions

- 2.1 The following are suggested resolutions only and do not represent Council policy until such time as they are adopted by formal resolution.
- 1 The business paper on the Progress Report: Procurement Summary Schedule (April 2026 to June 2026) be received.

3. Background

- 3.1 Waitomo District Council's (WDC) Procurement Register (Register) provides a formal "one stop" reference to record WDC's procurement decisions.
- 3.2 The Register, at an operational level, provides a summary of the procurement decisions together with the associated financial components.
- 3.3 The Register provides procurement information including:
- Procurement Description
 - Type of Contract: Physical Works, or Professional services, or goods and services
 - Term of contract
 - Procurement Selection process adopted: All of Government (AOG), Syndicated, Tender, Quote or Direct Appointment
 - Reason for exemption (if applicable)
 - Number of tenders/quotes received
 - Tender/quote range
 - Evaluation method
 - Awarded contract value
 - Contractor/supplier
 - The Register provides key financial information for each procurement including:
 - Total cumulative value
 - Price range of Tenders/Quotes received

- 3.4 The keeping of records is part of an overall Risk Management Framework and assists in the early identification of risks.
- 3.5 All procurement documents such as the quotes, tender responses, notices to tenderers and related correspondence are held in the relevant physical contract folder, captured electronically, and the detail added to the Register.

4. Commentary

- 4.1 WDC's Procurement Policy (the Policy) three (3) year review was completed, submitted and adopted by Council at the 30 June 2026 meeting.
- 4.2 The Tenders Subcommittee (a subcommittee of WDC's Senior Management Team) operates to assist the Chief Executive in undertaking the management of procedures to ensure sound probity methods are followed, risks are mitigated, and quality documentation is produced in relation to the procurement of goods and services necessary to deliver WDC's work programme and operations as provided for in adopted 10 Year Plans and Annual Plans.

5. Procurement Summary Schedule

- 5.1 The attached Procurement Summary Schedule (PSS) Report provides details of procurements that result in a total contract award over \$200,000 + GST, and/or where the supplier selection method has deviated from the Procurement Policy, and a procurement exemption has been approved by the Chief Executive.
- 5.2 **EXEMPTION REASON**
- 5.3 The Audit, Risk and Finance Committee have requested that the reason for granting a Procurement Exemption be included in the PSS. The heading of related column has been amended to prompt this information when required.

6. Attachments/Separate Enclosures

Attachments:

- 1 Procurement Summary Schedule (Doc # 997027)

Contract / Order No.	Contract Title / Procurement Description	Type of Contract (Physical Works, Professional Services or Goods and Services)	Term of Contract	One-off or Ongoing Supply	Selection Process (AOG, Syndicated, Panel, Tender, Quote or Direct Appointment)	Funding Source / Cost Share (any joint funding arrangements)	Procuremnet Exemption Applied (Reason)	No. of Tenders / Quotes Received	Tender / Quote Range (GST exclusive)	Evaluation Method	Awarded Contract Value (Total cummulative)	Awarded To	Meeting Date	GM	Outlier Tenders	Remarks
500/25/040	Local Roothing Professional Services	Professional Services	3 Years	One-off	Tender	WDC	No exemption applied	4	\$1,358,400 - \$2,043,927	Price Quality Method	\$1,987,080	Pinnacles	05/06/26	Roothing	No Outliers	The tender price did not include two items that were in the awarded contract
500/25/041	Waitomo DC July 2025: Rangitoto Slip Repairs	Physical Works	120 Days	One-off	Tender	NZTA - 95% WDC - 5%	No exemption applied	4	\$949,684.79 - \$1,313,414.96	Price Quality Method	\$949,685	Nicholls & Uttinger Civil	15/04/26	Roothing	No Outliers	

Key

Evaluation Method

LPC

The **Lowest Price Conforming** (LPC) method is a procurement strategy where the contract is awarded to the bidder who offers the lowest price while meeting all specified requirements and standards.

PQM

The **Price Quality Method** (PQM) is a tender evaluation method that balances price and non-price attributes (quality) to determine the best value for money.