

NOTICE OF ORDINARY MEETING

Notice is hereby given that the next Meeting of Council will be held in the Council Chambers on **Thursday, 21 November at 4.00pm.**

Agenda

1. Submission of Questions for Next Meeting
2. National Anthem
3. Prayer
4. Acknowledgement of Traditional Owners:

"I acknowledge the traditional custodians of the land on which we live, work and play. I pay my respects to our Elders past and present and thank them for the contribution they have made, and continue to make, in the cultural identity of our nation."

5. Commencement of recording
6. Apologies
7. Declarations of Interest

At this juncture, Councillors should indicate any items in which they have an interest and therefore will not be participating in discussion or voting.

8. Confirmation of Minutes
 - Extraordinary meeting held on 29 October 2024
9. Presentation of the 2023/24 Financial Statements
10. Listing of matters to be considered in Closed Council

The following matters are listed to be considered in Closed Council in line with the confidentiality policy of Council and Clause 10A (2) of the Local Government Act, 1993, relating to:

- (a) personnel matters concerning particular individuals (other than councillors)
- (b) the personal hardship of any resident or ratepayer
- (c) information that would, if disclosed, confer a commercial advantage on a person with whom the council is conducting (or proposes to conduct) business
- (d) commercial information of a confidential nature that would, if disclosed:
 - I. prejudice the commercial position of the person who supplied it, or
 - II. confer a commercial advantage on a competitor of the council, or
 - III. reveal a trade secret
- (e) information that would, if disclosed, prejudice the maintenance of the law
- (f) matters affecting the security of the council, councillors, council staff or council property

- (g) advice concerning litigation, or advice that would otherwise be privileged from production in legal proceedings on the grounds of legal professional privilege information concerning the nature and location of a place or an item of Aboriginal significance on community land.
- Procedural Motion to close Council to Press and Public
- Reports from Servants to Closed Council Meeting
 - Quotation Q23/24 Internal Audit Function (d)
 - Aged Care Worker Accommodation Project Update (c)
 - Council Property Lease, 7 Enterprise Drive (d)
 - Senior Staff Leave (a)
 - Tender T22/24 Office Design and Construction (Including Furniture Fitout) (c)
 - Tender T452425OROC: Provision of Roadside Slashing and Spraying (d)
 - Tender T18/24 Construction of Industrial Subdivision (d)
- Procedural Motion to re-open meeting to Press and Public

11. Reports



David Neeves
General Manager

Procedural Motion – to exclude Press and Public

“That by reason of the confidential nature of the matters to be considered in line with the confidentiality policy of Council and Clause 10(2) of the Local Government Act, 1993, relating to financial matters, staff matters, industrial matters, acceptance of tenders, personal affairs of private individuals, possible or pending litigation and such other matters considered appropriate – the Press and Public be excluded from the Meeting.

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MAYORAL MINUTE - 13/24
MAYORAL COMMITMENTS

SUMMARY

To advise of the Mayor's activities since the 15 October 2024 meeting.

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21/10/24	Warren Shire delegate tour of Cooee Lodge Hostel and Villa Units
28/10/24	Castlereagh Macquarie County Council Meeting, Coonamble
29/10/24	Extraordinary Council Meeting
29/10/24	Local Government NSW Councillor Induction Training
30/10/24	Meeting with Chris Riley of the SES to discuss recognition of the Late Geoffrey Kiehne
30/10/24	Meeting with Mark Spittal, Western NSW Local Health District
5/11/24	Meeting with NSW Police regarding Local Police Staffing
5/11/24	Local Government NSW: Councillor Conduct and Meeting Practice Discussion Paper via Teams
8/11/24	Alliance of Western Councils Meeting, Dubbo
11/11/24	Remembrance Day Service
11/11/24	White Ribbon Day Organising Group Meeting
12/11/24- 13/11/24	Castlereagh Macquarie County Council, Lightening Ridge
14/11/24	CoREM Meeting, Sydney
15/11/24	Country Mayors Association Meeting, Sydney
17/11/24- 19/11/24	Local Government NSW Annual Conference, Tamworth
21/11/24	Council Workshops and Meeting

Principal Activity Lead

Policy Implications Nil

Budget Implications Nil

Delivery Program Actions **4.2.1.1**
Implement the Community Engagement Strategy to inform, involve, empower, consult, and collaborate with stakeholders

MEETING OF: GILGANDRA SHIRE COUNCIL
HELD ON: 21 NOVEMBER 2024

RECOMMENDATION

That the report be noted.

D Batten
Mayor

AGED CARE WORKER ACCOMMODATION FUNDING

SUMMARY

To obtain a decision from Council on how to fund Councils \$1 for \$1 contribution to the Residential Aged Care Worker Accommodation project, funded through the Aged Care Capital Assistance Program.

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The grant requires Council to match the funding \$1 for \$1. Options for funding the additional \$2.458,700 include:

Proposed loan for \$2,458,700 through TCorp

If Council was to borrow \$2,458,700 from TCorp, the fixed interest rates would be 4.37% for 3 years, 4.60% for 6 years or 4.85% for 10 years.

The yearly repayments would be as follows:

- 3 years at 4.37% = \$883,393 per year
- 6 years at 4.60% = \$473,608 per year
- 10 years at 4.85% = \$313,214 per year

The interest paid over the terms are as follows:

- 3 years is \$191,419
- 6 years is \$328,890
- 10 years is \$673,383

Internal Loan Option

If Council were to take up an internal loan option from say, the Orana Living Fund, the terms of that loan are up to Council to determine. A possible scenario would be that the interest rate payable to Orana Living would equal the same rate that would be available if Orana Living had the funds invested through the banks.

Council recently invested \$2,000,000 with IMB Bank which is rated BBB and offering attractive interest rates. The term invested was for 6 months at 4.90%. The 12 month rate was lower at 4.80%. These rates are very similar to those offered by TCorp for a loan over 10 years.

That being the case, there appears to be little advantage to Council to take up the internal loan option compared to the TCorp loan option if the above scenario is used.

However, an advantage of an internal loan over a TCorp loan is flexibility in repayments as the TCorp loan is fixed. Plus there are no penalties applied if the loan was paid out before maturity.

Rental Income

There will be rental income derived from the project and this can be offset against the proposed loan. It is estimated that the property will return \$2,200 per week based on 6 x 2 bedroom units at \$250 per week each and 2 x 3 bedroom units at \$350 per week each. This equates to an annual rental of \$114,400.

Contributions from Cooee Lodge & JTH

It is proposed that the loan (either internal or external) will be carried within General Fund. It is also proposed that the cost of the project and the asset also be carried within General Fund. Therefore, it is expected that Cooee Lodge and Jack Towney Hostel be required to contribute to the cost of servicing the loan.

It is also proposed that a cash contribution of \$458,700 be made to reduce the amount to be borrowed to \$2,000,000. It is proposed that this contribution be made from the fund balance of Jack Towney Hostel.

Also, it is proposed that Cooee Lodge and Jack Towney Hostel contribute equally to servicing the loan on a 50/50 basis. This cost break up would be as follows:

Term (Yrs)	Rate	Repayment	Estimated M&R	Rental Income	Difference	Cost to Cooee	Cost to JTH	Total Interest
3	4.37%	718,568.00	25,000.00	114,400.00	-629,168.00	-314,584.00	-314,584.00	155,704.00
6	4.60%	385,242.00	25,000.00	114,400.00	-295,842.00	-147,921.00	-147,921.00	311,452.00
10	4.85%	254,774.00	25,000.00	114,400.00	-165,374.00	-82,687.00	-82,687.00	547,740.00

Cooee Lodge & JTH Ability to Pay

The 24/25 September quarterly budget results for Cooee Lodge forecasts a surplus result \$413,207 while the budget for Jack Towney Hostel forecasts a \$179,218 surplus result. Both estimated results indicate there is capability to service the loan principal and interest expenses.

The actual results for the 23/24 financial year were a \$575,218 surplus for Cooee Lodge and a \$19,818 surplus for Jack Towney Hostel.

Current Cash Positions of Aged Care Services

Cooee Lodge has no discretionary cash available. While Cooee Lodge has \$4,124,065 in cash, there is also a liability of \$5,272,384 in Refundable Accommodation Deposits (RADs). It is reasonable to assume that all of the \$4,124,065 in cash is made up of RADs. Under the Prudential Regulations, RADs can only be spent on permitted uses. The building of accommodation for staff that is not on site, is not defined as a permitted use. This would rule out Cooee Lodge being able to contribute a cash component to the project.

Jack Towney Hostel fund has a cash balance of \$978,423. Jack Towney Hostel is different in that it is not subject to the same Prudential Regulations. All of the cash balance of \$978,423 is from accumulated surpluses which is considered unrestricted and suitable for use for the proposed purpose.

Gilgandra Community Care has cash reserves within General Fund of:

Gilgandra Community Care \$50,753

Community Transport \$395,823

Cash balances for Community Care and Community transport is permissible to be utilised under the funding agreements.

Based on these assumptions Council could technically access approximately \$1,425,000 of cash reserves for this project

If Council accessed \$458,700 say from JTH only, that would leave over \$950,000 in cash reserves for other aged care programs and JTH would retain a cash balance of \$519,723 in reserves.

These cash positions were taken into account when considering a possible project contribution thus reducing the amount to be borrowed. It is determined that Cooee Lodge has no available funds while Jack Towney Hostel can contribute the proposed amount of \$458,700. And that Community Care would not contribute to this project as it is a Residential aged Care project.

Impact on LTFP

The impact of the proposed loan to the LTFP is dependent on the final amount to be borrowed. Having said that, the 24/25 version of the LTFP included a loan of \$1,600,000 for the Aero Park Subdivision that was ultimately not required. This loan over a term of 10 years had repayments of \$207,207 included in the LTFP.

The LTFP for Cooee Lodge indicates a combined surplus of \$784,506 over 10 years. The inclusion of a paying 50% of the loan repayments will negatively impact this result. The 10 year full loan option cost is a net \$82,687 per year

which equates to \$826,870 over the 10 years of the LTFP. This would result in Cooee Lodge returning a combined deficit of just \$42,364 for the 10 years. The LTFP for Jack Towney Hostel indicates a combined surplus of \$1,198,969 over 10 years. The inclusion of paying 50% of the loan repayments will negatively impact this result. The 10 year full loan option cost is a net \$82,687 per year which equates to \$826,870 over the 10 years of the LTFP. This would result in Jack Towney Hostel returning a combined surplus of \$372,099 for the 10 years.

Debt Service Ratios

The 24/25 LTFP includes the following borrowing amounts:

- 24/25: \$3,000,000 for industrial subdivisions
- 25/26: \$500,000 for medical precinct
- 25/26: \$8,000,000 for new swimming pool
- 27/28: \$2,500,000 for CBD upgrade
- 28/29: \$2,000,000 for combined sports centre
- 30/31: \$2,000,000 for administration building
- 31/32: \$600,000 for Yarragrין Creek bridge

The debt service ratios with the above proposed borrowings plus the additional \$2,000,000 will be:

Year	General Fund	GF with 10 Yr Loan	Council	Council with 10 Yr Loan
24/25	5.59%	6.89%	3.38%	4.10%
25/26	9.38%	10.65%	5.13%	5.82%
26/27	9.15%	10.39%	5.01%	5.68%
27/28	9.37%	10.57%	5.12%	5.78%
28/29	10.04%	11.21%	5.49%	6.13%
29/30	9.77%	10.91%	5.34%	5.97%
30/31	10.32%	11.44%	5.64%	6.25%
31/32	10.32%	11.41%	5.64%	6.24%
32/33	10.09%	11.15%	5.51%	6.10%
33/34	9.86%	10.90%	5.39%	5.96%

The above ratios are calculated based on current income streams. It should be noted that there should be no impact to General Fund as there will be a contribution from Cooee Lodge and Jack Towney Hostel for the cost of the loan.

Loan Assumptions

Based on the above
 Cash deposit of \$458,760 (draw down of JTH)
 Loan amount of \$2,000,000
 Rental Income:

- 6 x 2 bedroom units @ \$250 = \$1500 pw and
- 2 x 3 bedroom @ \$350 = \$700 pw
- Total per week \$2,200 or \$114,400 per year.

Maintenance and rates based on cost at 63 Waugan St would be approximately \$25,000 per year (utilities, rates, insurance etc)

Loan	Cost per year	Total interest	Rental income	Estimated rates & maintenance	Difference Income vs expenditure	Total cost to Cooee/JTH per year 50% per	Cost to be found each per month	Cost per week per service
3 years @ 4.37%	\$718,568	\$155,704	\$114,400	\$25000	-\$629,168	\$314584	\$26215.00	\$6553.75
6 years @ 4.60%	\$385,242	\$311,452	\$114,400	\$25000	-\$295,842	\$147921	\$12326.75	\$3081.50
10 years @ 4.85%	\$254,774	\$547,740	\$114,400	\$25000	-\$165,374	\$82687	\$6890.58	\$1722.64

The difference between 10 years and 3 years is an additional \$392,036 in interest. I'm not sure each service could find savings of \$314,584 in their operational budgets for this scenario.

Savings can be found of \$82,687 to support the 10 year loan, which equates to \$1,723 per week roughly for each service (can be done by adjusting each line slightly and also by increasing income opportunities at Cooee through respite and potential savings in capital works through Grant funding (not guaranteed though). Occupancy and client fee payments will be the key, along with ANACC assessments that are timely and efficient. ANACC assessments recently has seen an increase in funding in excess of \$100,000 per annum.

However, if in year 6 once the grant conditions are met Council will have the opportunity to sell the properties should they wish, for example, Council could choose to sell the duplex, the proceeds of the sale could then be used as a repayment on the loan balance

If we chose to work with borrowings from Orana Living, I believe the interest rate may be higher but there would be further flexibility to repay the loan quicker – let's say if both services could transfer additional funds to the borrowings at the end of each year – dependant on their net surplus. I will highlight that we need to be mindful in the transfer from Jack Towney – it is only permissible to transfer 14% from the income for administration charges to the provider. I do not believe that JTH grant money could be used to refund a loan.

<u>Principal Activity</u>	Grow
<u>Policy Implications</u>	Nil
<u>Budget Implications</u>	Up to \$2,458,760 of additional funding to be sourced from Council over the course of the project.
<u>Delivery Program Actions</u>	3.2.1.2 Implement recommendation of the Gilgandra Housing Strategy to investigate seasonal housing needs and options* 3.2.1.1 Coordinate the development of strategies and implementation projects associated with the Towards 5000 Vision

RECOMMENDATION

1. That the Council contribution of \$2,458,700 be funded via:
 - a) a contribution from Jack Towney Hostel Reserves of \$458,700
 - b) a loan of \$2,000,000 from TCorp to be repaid over a period of 10 years.
 - c) The repayments be equally funded (50% each) from Jack Towney and Cooee Lodge annual operational budgets.

Donna Dobson
Director Aged Care and Disabilities

**RESPONSE TO QUESTION ON NOTICE - 41 MILLER STREET,
GILGANDRA**

SUMMARY

To respond to a Question on Notice from the October meeting.

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Cr Mann asked the following Question at the October meeting:

“With the purchase of the Tavern with funding from Orana Lifestyles - could we have a report to next or December Meeting (or Orana Lifestyles Meeting) on how we manage the 'purchase / premises' as an investment proposition – i.e. by charging services operating from the building.”

It is proposed that the various operations housed within the building will be charged an internal rental fee (excluding Orana Living). Gilgandra Lifestyles Services operating from this building will pay a rental back to general fund. General fund will then transfer the proceeds to the Orana Living operational budget and will be accounted for as an income source. It is anticipated that the internal rental charged will be equivalent to the external rental currently being paid for the lease of the Community Care building. It should be noted that the internal charges will not materialize into net positive return on investment. Meaning, the money Orana Living contributes to the purchase and fit out of the building will be less than the income that the equivalent sum of money may have earned through a bank term deposit. However, the operational financial structure of the new building will be considered in conjunction with the 2025/26 budget preparations.

<u>Principal Activity</u>	Lead
<u>Policy Implications</u>	Nil
<u>Budget Implications</u>	To be considered in conjunction with 2025/26 Budget preparations
<u>Delivery Program Actions</u>	4.3.3.1 - Prepare annual Budgets, Long Term Plan Reviews, Quarterly Budget Reviews and Annual Statements and place investments in line with legislative requirements and Council policy.

RECOMMENDATION

That the report be noted.

Donna Dobson
Director Aged Care and Disabilities




AGED CARE & DISABILITY SERVICES – OVERVIEW OF SERVICES

SUMMARY

To provide an overview of Aged Care & Disability Service division functions.

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COOEE LODGE HOSTEL

Hostel (mainstream) beds occupied	Special care beds occupied	Respite care clients
 = 39	 = 10	 = 1

Note: Respite residents converted to permanent status.

Occupancy is strong with a waiting list and demand for respite and permanent beds

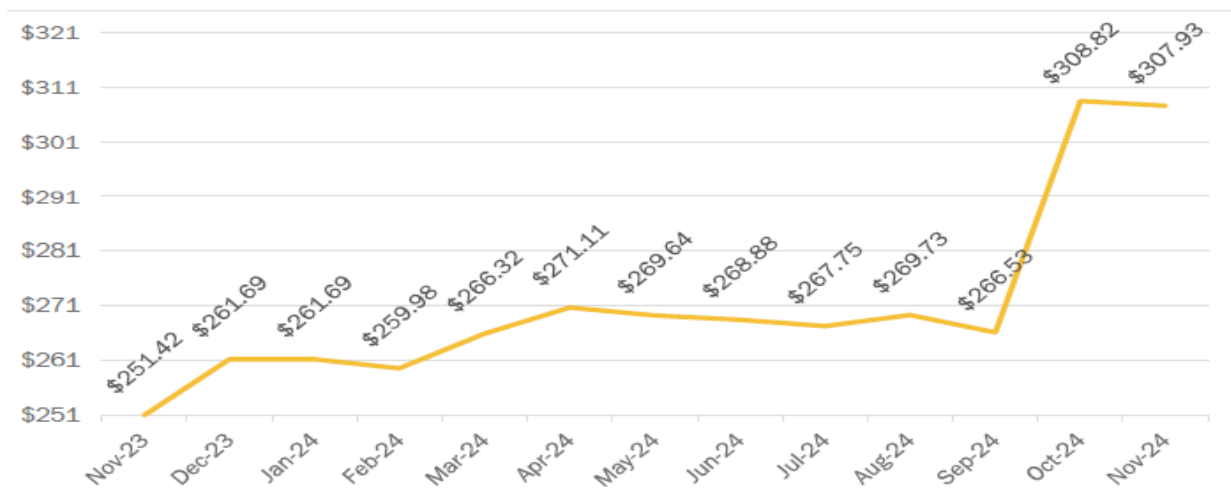
OVERVIEW OF THE FINANCIAL PERFORMANCE

ADS (\$307.93) increased by 22.48% over the past 12 months, while the industry ADS has increased by 14.59% to \$293.33. ADS is the average subsidy for all residents (permanent and respite) excluding defaults.

AN-ACC

Average daily subsidy (ADS) for the reporting period = \$268.47

Over the past 12 months ending July 2024 the ADS at Cooee Lodge increased by \$15.32 to \$268.47 (6.05%).



This funding will change depending on the level of care required by the residents. It should be noted that the care minutes required to care for these residents will also increase with any increase in levels of care.

CARE MINUTES

Care minutes are the amount of direct care that older people living in residential care receive from:

- RNs
- enrolled nurses (ENs)
- Personal care workers (PCWs) or assistants in nursing (AINs) – also known as nursing assistants.

The care minutes responsibility is based on a **sector-wide average** of 215 minutes of care per resident per day, including 44 minutes of direct care by an RN.

Residents received 203 direct care minutes from care staff last quarter which is 17 minutes above target.

Residents received 27 minutes of direct care from a Registered Nurse which is 12 minutes below target.

Average hours per day a Registered Nurse was available in September was 17 hours 46 minutes which is 6 hours 14 minutes below target.

Strategies include:

- Recruitment of Registered Nurse - interviews completed – requires sponsorship, working with HR
- Six employees working towards Australian APRA registration

Recruitment from contract to permanent

- Cooee Lodge Hostel Manager
- Team Leader – catering

Performance remains affected by continued reliance on agency clinical staff including:

Agency staff	Strategies
2 FTE Registered Nurses	We have six care staff transitioning towards their Australian AHPRA registration

There has been an increase in staff incidents (total six) over the quarter with one staff member on Workers' Compensation.

Strategies to increase Registered Nurse minutes

Cooee Lodge is currently working on 24 hours RN coverage 7 days a week; we have engaged Agency Registered Nurses & have two contracted RN's to support existing RN's.

STAR RATING

Overall Star Rating

★★★★☆ Good

aged care
Star Ratings

This rating is based on this organisation's performance in relation to Compliance, Quality Measures, Residents' Experience, and Staffing. The ratings for each of the subcategories that make up the Overall Star Rating are shown below. The Overall Star Rating was most recently updated on 10 November 2024.

[Learn how this is calculated](#)

Compliance ★★★★☆	>	Quality Measures ★★★★☆	>
Residents' Experience ★★★★☆	>	Staffing ★★★☆☆	>

This is an increase on previous Star Ratings and is a great result. The time and effort of staff to improve this performance has been considerable and is to be commended.

It should be noted the Staffing rating will not increase until 24/7 RN coverage can be attained and maintained.

NATIONAL QUALITY INDICATORS & CLINICAL DATA

Quality Measures

★★★★☆ Good

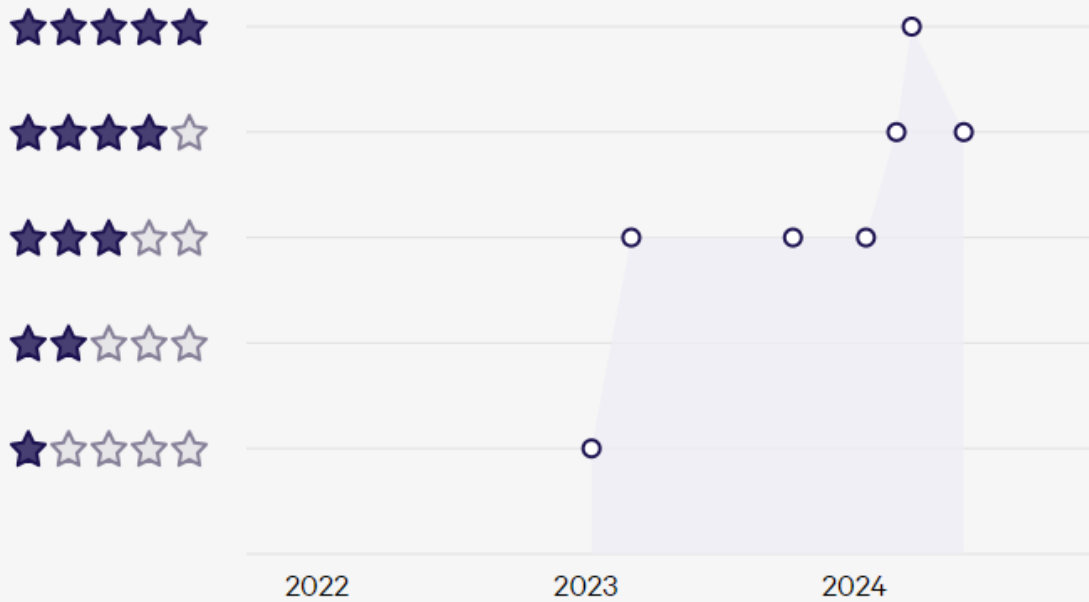
aged care
Star Ratings

Quality Measures consider if Cooee Lodge is delivering good clinical care. This rating is for the quarterly reporting period from 1 January 2024 to 31 March 2024, and it was most recently updated on 28 June 2024.

Clinical data for the month of October 2024 has been included as a confidential attachment.

Quality Measures ratings history

This graph shows how the Quality at Cooee Lodge has tracked over the last 3 years:



COMPLIANCE

Cooee Lodge is fully compliant against the ACQSC Standards.

Management will continue to provide support and guidance to staff to provide a high quality of care to the residents and work with the appointed Commonwealth Advisors to ensure systems and processes are efficient and streamlined.

JACK TOWNEY HOSTEL & HOME CARE PACKAGES/COMMUNITY CARE

Jack Towney Hostel places	Home Care Packages	Social Group clients	In home flexible care places
=7	=18	=10	=5
On site residents Including 1 respite	Individual home support 18 Level 2	Social Group support	In home support

No change from previous quarter

Occupancy at Jack Towney Hostel remains strong and training is continuing resulting in improved team morale and resident outcomes.




Plan for continuous improvement has been implemented to address any identified issues.

Electronic medication management system has been implemented resulting in more effective and efficient medication management.

Person Centred Software (Care Management system), training and implementation is completed.

Old Bus has been removed from the facility grounds.

Recruitment has resulted in a permanent service manager and additional indigenous staff.

Community transport	MOW	Active clients
 = 508 (11000Km)	 = 3936 MOW deliver for 51 clients	 = 199 Up from previous quarter
		Total active service clients.

Community services still maintains services through the use of volunteers, however at times the paid staff are needing to deliver services.



Implement a new software program Polixen for capturing and reporting transport data.

Increased staffing to support the programs resulting in my consistent services being offered.

Group activities have increased including morning tea outings, sewing groups and bus trips.

Team preparing for the move to the new building by sorting office spaces.

COOEE LODGE RETIREMENT VILLAGE

VILLA UNITS OCCUPIED	VACANCIES
 = 62	 = 1




Currently, there is only one vacant Villa within the Cooee Lodge Retirement Village, being 8 McCarthy Crescent (two bedroom).

Recent sales include 16 McCarthy, 5 Grevillia Place and 68 Cooee Drive.

The bore pump has currently malfunctioned and is in for repair. The bore is still functioning on gravity feed and 90% of the village still being watered.

No current complaints from residents.

ORANA LIVING

Supported accommodation	Drop in support	Life skills
 = 27	 = 3	 = 13

63 Waugan street has recently leased out the non-SDA (not registered as a SILS property) unit to a current community housing client who receives care from Orana Living under his NDIS package. This is a private lease arrangement.

Orana Living staff are currently undertaking medication review with the view to implement an electronic medication system the same as JTH and Cooee Lodge.

Community Visit scheme visits in last 3 months resulted in positive feedback with some suggestions for minor improvements. Staff are working towards implementing suggestions.

232 Warren roads painting program has been completed inside and outside.

10 Waugan st is scheduled to commence painting in the new year.






Lifeskills program review has been conducted with an alignment of the programs to the NDIS quality indicators resulting in more personalised community-based options for clients.

New bus was purchased and implemented.

One complaint received in relations to sons ageing and the appropriate type of care. Staff worked with family, support coordinator and therapist and developed a new plan of management which has been implemented. Regular updates to family with no further concerns raised.

No reportable incidents to the NDIS commissioner.

CARLGINDA ENTERPRISES

Carlinda	Gilgandra Recycling	Bogan recycling	Cardboard	Yellow Bags
				
= 17	= 4400kg	= 3000kg	= 4000kg	= 175 _{pw}
Supported employee positions	Average weekly totals recycled	Average weekly total recycled	Average Baled Amount PW	up to 17 August 2021

Currently have one vacancy due to resignation of a supported staff member.

Staff team have in consultation with the aged care team developed some additional work duties and are seeking external funding to implement some work teams at Cooe Lodge, Jack Towney and along the Windmill walk. These teams would do a variety of basic maintenance jobs, serving morning teas and assisting with the kitchen/catering teams and outside gardening jobs.

The current business run produces approximately 30 bales per week of cardboard. Clients collect from local various businesses.

Average of 75 cars per day through the gate of the tip.

Principal Activity Nil

Policy Implications Nil

Budget Implications Nil

RECOMMENDATION

That the report be noted.

Donna Dobson
Director Aged Care and Disabilities

AGED CARE AND DISABILITY SERVICES ADVISORY BOARDS

SUMMARY

To seek concurrence to disband the Aged Care Advisory Board and Disability Services Advisory Board and meet governance requirements through an amended advisory structure direct to Council.

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The Gilgandra Lifestyles Advisory Board (GLAB) was established in 2022 and the Disability Services Advisory Board in 2024 in response to Aged Care and NDIS reforms.

These Boards were set up as Section 355 Committees of Council with no delegation of authority. As per the Boards' Terms of Reference (Charter), the Boards were scheduled to meet three monthly and comprise councillor representation and paid advisory staff with relevant skills and experience in one or more of the following areas:

- Governance and industry reform experience
- Clinical governance
- Financial management in a corporate environment
- Residential aged care facility operations experience
- Experience as a senior manager in organisations which provide human services similar to those provided by Gilgandra Lifestyles
- Experience on the Board or governing body of organisations which provide services similar to those provided by Gilgandra Lifestyles
- Organisational strategy development
- Knowledge of the health care/ home care/retirement living sector knowledge and expertise
- Experience in community-based organisations

According to the *Provider Governance Reform Quick Reference* available on the Aged Care Quality and Safety Commission website (copy separately provided), the requirements for existing providers as at 1 December 2023, as highlighted below, some of which do not apply for a local government authority.

 **New providers Day of approval** | **Existing providers 1 December 2023**

What	Align your governing body to membership requirements	Establish a quality care advisory body	Offer to/establish a consumer advisory body	Ensure your people are skilled and build their capability	Align your constitution to the requirements
Why	The right mix of people will improve your organisation and consumer care outcomes.	The advisory body will give invaluable feedback on the quality of care and services provided and support your continuous improvement processes.	This allows you to hear directly from those at the centre of care; your consumers.	A quality team will drive quality care and services.	This ensures directors are authorised to act in consumers' best interests.
Get ready	<ul style="list-style-type: none"> Ensure the majority of governing body members are independent and non-executive. Include one member with experience in the provision of clinical care in your governing body. <p>You are automatically exempt from this requirement if you:</p> <ul style="list-style-type: none"> have fewer than 5 board members and provide care to less than 40 care recipients are an Aboriginal Community Controlled Organisation have a determination from the Commission that one or both requirements do not apply. 	<ul style="list-style-type: none"> Establish and ensure continuation of a quality care advisory body. Ensure the quality care advisory body provides six-monthly reports about the quality of aged care that the approved provider provides through each aged care service. Require the governing body to consider the quality care advisory body reports and feedback when making decisions in relation to aged care. Make sure the governing body advises the quality care advisory body in writing about how their feedback was used/considered. 	<ul style="list-style-type: none"> Offer to establish (at least once every 12 months) a consumer advisory body (or multiple bodies). Require the governing body to consider the consumer advisory body reports and feedback when making decisions in relation to aged care. Make sure the governing body advises the consumer advisory body in writing about how their feedback was used/considered. 	<ul style="list-style-type: none"> Ensure staff have appropriate skills, qualifications or experience to provide the care and services they are hired to. Give opportunities to develop your employees' capability to provide services. 	<ul style="list-style-type: none"> Make sure that your constitution requires directors to act in the best interests of consumers (only applicable if your service is a wholly owned subsidiary of another body corporate that is not an approved provider).


1 December 2023 requirements do not apply if you are:

- a state or territory government
- a state or territory authority or
- a local government authority.

The information contained in this template is general in nature. It is your responsibility to be aware of your legislative requirements. If you are unsure about how these apply to your situation, please contact us.

 **Phone**
1800 951 822

 **Web**
agedcarequality.gov.au

 **Write**
Aged Care Quality and Safety Commission,
GPO Box 9819, in your capital city

This information is further supported in the Frequently Asked Questions of the Aged Care Quality & Safety Commission website as follows:

I am an approved provider who is exempt from the governing body requirements. Do I need to apply for a determination?

No. If you meet the criteria that exempts you from the governing body requirements, it will be applied automatically, and you won't need to apply or complete the form for a determination.

That criterion is:

- You have fewer than 5 members on your governing body and fewer than 40 consumers receiving aged care services
- You are a state or territory approved provider, including state or territory authorities.
- You are an approved Aboriginal Community Controlled Organisation (ACCO) provider. However, it's important to note that all providers are still accountable for the broader responsibilities outlined in the Aged Care Quality Standards and other requirements of the *Aged Care Act 1997*.

You will still be required to meet responsibilities relating to ensuring proper governance, having adequately skilled staff, and consumer and quality care advisory bodies.

The governance requirements of Standard 8 of the Aged Care Quality and Safety Standards are:

Standard 8

Organisational governance

Consumer outcome

- (1) I am confident the organisation is well run. I can partner in improving the delivery of care and services.

Organisation statement

- (2) The organisations' governing body is accountable for the delivery of safe and quality care and services.

Requirements

- (3) The organisation demonstrates the following:
- (a) Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement;
 - (b) The organisation's governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery;
 - (c) Effective organisation wide governance systems relating to the following:
 - (i) information management;
 - (ii) continuous improvement;
 - (iii) financial governance;
 - (iv) workforce governance, including the assignment of clear responsibilities and accountabilities;
 - (v) regulatory compliance;
 - (vi) feedback and complaints.
 - (d) Effective risk management systems and practices, including but not limited to the following:
 - (i) managing high-impact or high-prevalence risks associated with the care of consumers;
 - (ii) identifying and responding to abuse and neglect of consumers;
 - (iii) supporting consumers to live the best life they can.
 - (e) Where clinical care is provided – a clinical governance framework, including but not limited to the following:
 - (i) antimicrobial stewardship;
 - (ii) minimising the use of restraint;
 - (iii) open disclosure.

Both the Gilgandra Lifestyles Advisory Aged Care and the former Disability Services Committee considered the Delivery Program and Financial information which is later replicated in an Ordinary Council meeting. Regular reports from management are also considered and contain relevant finding and analysis and any areas of concern.

There is also a Clinical Care and Risk Meeting that meets at Cooee Lodge Hostel on a weekly basis with minutes circulated to myself as Director, enabling me to be aware of any immediate risks or concerning trends and act accordingly if necessary. The quarterly meeting structure of these advisory boards is not conducive to ensuring the board is aware of concerns in a timely manner.

It is proposed that governance requirements could be better met by establishing a Clinical Care and Risk Committee comprising key clinical staff of Cooee Lodge Hostel, Jack Towney Hostel and Orana Living, the Director Aged Care and Disability Services plus two paid independent clinical consultants. This Committee would then provide a confidential monthly report to Council identifying any issues of concern related to clinical risk. Council as a whole would consider additional reports relating to aged care and disability services as and when required. Savings could be made by having paid clinical staff concentrating on clinical issues and Council as a whole considering policy and financial matters.

The past Board meeting structure was an attempt to meet Council's board responsibilities under the Aged Care Act structure. Feedback from the independent members and the external consultants' report is that the format was not effective, noting also that most reports were for notation by the Board only.

The change in structure would free up a lot of staff time in preparing business papers for the advisory board meetings in their current structure, reduce duplication and allow the whole Council to be across the matters relevant to Aged Care and Disability Services.

Independent oversight on the Clinical Care and Risk Committee plus regular reporting to the Commonwealth (detailed below from the various websites) and Council will ensure that any concerns are identified early and can be dealt with in a timely manner.

REPORTING REQUIREMENTS

The [Aged Care Financial Report](#) (ACFR) allows the Australian Government to collect financial information for approved providers and parent entities where applicable. What providers are required to report in the ACFR depends on the type of service they provide.

Residential aged care providers supply:

- information on income and expenses for care services and other activities for each facility, including information on labour costs and hours
 - an approved provider level balance sheet, income statement and cash flow statement (non-government providers only)
 - movement schedules to accompany the financial statements
 - a Consolidated Segment Report which collects financial information about the approved provider's ultimate Australian parent organisation (which may include both aged care and non-aged care operations/subsidiaries)
 - the Survey of Aged Care Homes
 - an Annual Prudential Compliance Statement.
-

Home care providers supply:

- information on income from providing services, such as fees for the provision of care and package management
- information on expenses, including wages and salaries, management fees, care-related expenses, and information on labour costs and hours
- other financial information, unspent package funds, and cash and liquid assets.
- an approved provider level balance sheet, income statement and cash flow statement (non-government providers only)
- a Consolidated Segment Report which collects financial information about the approved provider's ultimate Australian parent organisation (which may include both aged care and non-aged care operations/subsidiaries).

The Quarterly Financial Report (QFR) was introduced from 1 July 2022 as part of broader initiatives to improve [financial reporting transparency and strengthen prudential compliance](#) for approved aged care providers, the QFR provides:

- **Financial oversight** – enabling more timely analysis of the sector's financial performance and viability.
- **Consumer choice and transparency** – informing the Star Rating system that allows older Australians and their families to make informed choices.
- **Policy development** – policy planning and development by the department is informed by accurate data from the providers
- **Funding** – informing the [Australian National Aged Care Classification \(AN-ACC\)](#) funding model and pricing studies
- **Viability monitoring** – enabling the ACQSC to monitor provider financial viability and the earlier identification of providers at risk
- **Quality standards regulation** – Risk-based regulation of services and providers performance against the Quality Standards and other provider responsibilities.

All approved providers must submit a QFR and the [annual Aged Care Financial Report \(ACFR\)](#).

Approved providers must submit the QFR 4 times throughout the financial year. Legislated submission dates are:

Quarter	Reporting period	Due date
Quarter 1 (2024–25)	1 July – 30 September	4 November 2024
Quarter 2 (2024–25)	1 October – 31 December	14 February 2025
Quarter 3 (2024–25)	1 January – 31 March	5 May 2025
Quarter 4 (2024–25)	1 April – 30 June	4 August 2025

What you report in the QFR depends on the type of service you deliver:

Residential aged care service providers

Residential aged care service providers must complete:

- viability and prudential compliance questions
 - year to date financial statements, at the approved provider level
 - residential care labour cost and hours reporting, at the facility level
 - quarterly food and nutrition report for each approved residential aged care service
 - information around outbreak management expenses.
-

Home care service providers

Home care service providers must complete:

- viability and prudential compliance questions
- year to date financial statements, at the approved provider level
- home care labour cost and hours reporting, at the Aged Care Planning Region level.

Providers of Multi-Purpose Services (MPS) and National Aboriginal and Torres Strait Islander Flexible Aged Care Program (NATSIFACP)

Providers of [Multi-Purpose Services \(MPS\)](#) and [National Aboriginal and Torres Strait Islander Flexible Aged Care Program \(NATSIFACP\)](#) must complete:

- quarterly food and nutrition report for each approved residential aged care service.

State and territory government providers

State and territory government providers must complete:

- residential care labour cost and hours reporting, at the facility level
- home care labour cost and hours reporting, at the Aged Care Planning Region level.
- quarterly food and nutrition report for each approved residential aged care service.

Scope of the QFR

There are 5 parts to the QFR.

1. Viability and prudential compliance questions

We use the viability and prudential compliance questions for residential and home care providers to:

- identify emerging financial viability issues
- allow the department and the Aged Care Quality and Safety Commission to proactively work with providers to support their compliance and address financial risks.

Provider engagement will help us to:

- assess the challenges and risks to a provider's viability
- identify the options or strategies available to the provider that could reduce viability risks
- establish future contact with providers to monitor the progress and outcomes of government support and action.

The Commission will also use a provider's viability to inform other risks and develop effective regulatory responses.

The Commission will assess compliance with the Prudential Standards over the reporting period to inform future regulatory responses. Reporting will also enable detailed sector-wide insights to support providers' and senior Australians' understanding of compliance risk.

2. Year to date financial statements

The year to date Financial Statements include an income statement and a balance sheet at the approved provider level. This is segmented into residential care, home care, community, retirement living and other categories.

Based on feedback from providers for the Aged Care Financial Report, cash, financial assets and equity are only collected as a total and not required to be segmented. The department and the Commission will use this financial information to understand sector performance and communicate it back to the sector.

3. Residential care labour cost and hours reporting

The residential care labour cost and hours reporting section captures both facility-level direct care related labour expenses and hours.

This is broken down into care types, including:

- registered nurses
- enrolled nurses
- personal care workers.

Assistants in nursing are considered 'personal care workers' for the purposes of direct care reporting.

We use this information to inform [Star Ratings](#) and costing studies for the [AN-ACC funding model](#).

The care hours in conjunction with other qualitative information will be used to inform Star Ratings for individual aged care services.

From Quarter 4 2023–24, additional information is being collected on outbreak management expenses, including the cost of planning for, and managing outbreaks, including:

- COVID-19
- influenza
- gastroenteritis
- respiratory syncytial virus
- other infectious diseases.

This is important to ensure the Government can assess the financial impacts of preparing for and managing outbreaks on the aged care sector.

Providers who fail to submit a QFR by the due date will receive a 1 Star Staffing Rating. This will affect the service's overall Star Rating.

4. Home care labour cost and hours reporting

The home care labour cost and hours section is similar to the residential care labour cost and hours section. It collects information on the direct care cost and hours delivered in home care.

The information is collected at the Aged Care Planning Region level and includes a balance sheet and income statement at the approved providers level.

These reporting requirements will bring greater transparency and accountability to the home care sector by better aligning the reporting requirements with residential care.

5. Quarterly Food and Nutrition report

We introduced reporting on food and nutrition in July 2021 as a requirement to receive the 2021 Basic Daily Fee (BDF) supplement.

In October 2022, the 2021 Basic Daily Fee supplement was combined into the AN-ACC funding model, and reporting requirements included into the QFR. This includes service level information on Internal and Contract Catering costs and hours.

For more information, see the [Basic Daily Fee \(BDF\) supplement](#).

Operations to be reported

Residential aged care and home care providers are required to report:

- executive position details, such as the Chief Executive Officer
- governing body membership, including:
 - number of independent non-executive members and clinical care representation
 - whether the provider has exemption from this responsibility
- a statement signed by the governing body stating whether the provider did or did not comply with its duties under the aged care legislation and:
 - each duty the provider failed to comply with
 - whether the non-compliance affected one or more services
 - the reasons why the provider failed to comply
 - actions taken to rectify the non-compliance
 - resolution of the non-compliance
- diversity information, including:
 - representation of First Nations, disability, gender diverse and cultural and linguistically diverse communities (or any other diversity demographic) within the provider's governing body
 - initiatives to support a diverse and inclusive environment for care recipients, residents and staff
- common kinds of feedback and complaints received by each service
- key improvements made to service quality.

Transition care providers must report:

- common kinds of feedback and complaints received by each service
- key improvements made to service quality.

Who must report

All residential aged care providers must report on the RN coverage for each facility each calendar month. You must report even if the facility has an [exemption](#).

Reporting about the 24/7 RN coverage is a legal requirement.

What to report

You must report on:

- each period of 30 minutes or more an RN was not on-site and on duty
- whether each RN absence was planned or not planned
- who had delegated responsibility for nursing practices during each RN absence
- on-call support/alternative arrangements, including their access to residents' clinical records

If there is any RN absence you must also report at the end of the month any:

- option to transfer residents to a local health facility
 - RN recruitment processes.
-

About the program

Quality indicators measure important aspects of aged care services. This helps to improve the quality of aged care services provided to older people.

Residential aged care providers currently report on 11 quality indicators, with 3 staffing quality indicators to be added in 2025.

We are also expanding the QI program to include quality indicators for in-home aged care providers.

We [consulted extensively](#) with the sector and aged care experts to develop the quality indicators.

Learn [how to submit your QI Program data](#).

Why it's important

Reporting on the quality of care helps:

- **approved providers** measure, monitor, compare and improve the quality of their services
- **older people** find information about the quality of aged care services when making choices about their care
- **government** monitor the quality of aged care provided to residents, and make evidence-based policy decisions.

The QI Program addresses recommendations from the [Royal Commission into Aged Care Quality and Safety](#).

Quality indicators for residential aged care

Residential aged care providers must report on the following 11 quality indicators for each resident every 3 months:

- Pressure injuries
- Physical restraint
- Unplanned weight loss
- Falls and major injury
- Medication management
- Activities of daily living
- Incontinence care
- Hospitalisation
- Workforce
- Consumer experience
- Quality of life

New quality indicators for staffing in 2025

From 1 April 2025 (quarter 4, 2024–25) providers will start collecting data for:

- enrolled nursing
- allied health
- lifestyle officers.

Providers will report the data through the [Government Provider Management System \(GPMS\)](#) from 1 July 2025.

Enrolled nurses, allied health workers and lifestyle officers are an important part residential aged care. The new quality indicators make sure their valuable work is properly measured and recorded.

The new quality indicators respond to feedback that the 24/7 registered nurse requirement could lead to a decrease in enrolled nurses, allied health and lifestyle services.

See how [we consulted the sector on the new staffing quality indicators](#).

New quality indicators for in-home aged care

We completed consultation on suitable quality indicators for in-home aged care in July 2024. Thank you to everyone who contributed.

We have engaged [HealthConsult](#) to run a 12-week pilot from early October 2024 to test the proposed quality indicators.

Reporting

The Australian Institute of Health and Welfare (AIHW) publishes [QI data](#) at national, state and territory levels, and by geographical remoteness for each quarter of reporting.

Legislation

The QI Program is governed by:

- the [Aged Care Act 1997](#)
- the [Aged Care Legislation Amendment \(Quality Indicator Program\) Principles 2021](#)
- [Accountability Principles 2014](#)
- [Records Principles 2014](#).

What the Star Ratings represent

Aged care homes receive an Overall Star Rating of between 1 and 5 stars, and a rating across each of the 4 sub-categories.



The more stars an aged care home receives, the better the quality of care.

Overall Star Rating

- ★★★★★ Excellent
- ★★★★☆ Good
- ★★★☆☆ Acceptable
- ★★☆☆☆ Improvement needed
- ★☆☆☆☆ Significant improvement needed

Overall star rating also takes into account any prior regulatory non-compliance decision, sanction, notice to agree, infringement, notice to remedy, etc. For example a 5 star rating can only be achieved following no non-compliances for 3 years; 3 star maximum rating if no current non-compliances for a 1-3 year period.

The 4 sub-categories are:

Residents' Experience

This sub-category represents the experiences of residents at their aged care home captured through the face-to-face annual [Residents' Experience Survey](#) with at least 10% of residents. The survey asks 14 questions about:

- experiences of safety
- treatment from staff
- food standards
- feelings of independence and belonging.

Compliance

This sub-category is based on regulatory decisions by the [Aged Care Quality and Safety Commission](#) about aged care homes' compliance with their obligations, including with the [Aged Care Quality Standards](#).

It is based on the type of formal regulatory notice issued by the commission or period without specific formal regulatory notices being issued.

Staffing

This sub-category measures the average amount of care time – compared with minimum average care targets – that residents at each aged care home receive. Care time is based on [care minutes](#) delivered by:

- registered nurses
- enrolled nurses
- personal care workers
- assistants in nursing.

The average minimum care minute targets for each aged care home varies depending on the specific care needs of their residents. An independent assessment under the [Australian National Aged Care Classification \(AN-ACC\)](#) funding model determines resident care needs.

The Staffing rating reflects the degree to which an aged care home meets or exceeds its minimum care minute targets.

Quality Measures

This sub-category describes the quality of care provided to residents across 5 quality indicators under the [National Aged Care Mandatory Quality Indicator Program](#). These are:

- pressure injuries
- restrictive practices
- unplanned weight loss
- falls and major injury
- medication management.

We adjust the data when calculating the Quality Measures rating to account for differing levels of resident needs. This ensures a fair comparison between aged care homes. Risk adjustment uses [AN-ACC](#) classification and assessment data to understand variation in the care needs of residents in each aged care home.

We adjust:

- pressure injuries data – using residents’ Braden Scale scores (a validated tool used to measure elements of risk that contribute to pressure injuries) and their mobility (from their individual AN-ACC assessment)
- unplanned weight loss data – using residents’ AN-ACC classification, and their frailty status (from their individual AN-ACC assessment)
- falls and major injury data – using residents’ mobility data (from their individual AN-ACC assessment).

Restrictive practice and medication management are not risk adjusted.

How Star Ratings are calculated

Star Ratings applies a combination of rules to determine the Star Ratings for each aged care home.

Each of the sub-category ratings carry a different weighting. This was decided through consultation with older people and providers, based on:

- the degree of importance they noted
- the quality or maturity of the data.

Sub-category weightings

- Residents’ Experience – 33% weighting towards the Overall Star Rating.
- Compliance – 30% weighting towards the Overall Star Rating.
- Staffing – 22% weighting towards the Overall Star Rating
- Quality Measures – 15% weighting towards the Overall Star Rating.

For more information about the rules and calculations used for Star Ratings, see the:

- [Star Ratings Provider Manual](#)
- [My Aged Care website](#).

Star Ratings updates

We update Star Ratings at least every quarter, and publish them on the [‘Find a provider’ tool](#).

We update the sub-categories at different intervals:

- Residents’ Experience is updated quarterly for aged care homes that have recently completed the annual [Residents’ Experience Survey](#).
- Compliance is updated:
 - daily in response to new regulatory decisions
 - weekly in response to changes in accreditation decisions of the [Aged Care Quality and Safety Commission](#).
- Staffing and Quality Measures are updated quarterly.

The Overall Star Rating automatically recalculates when new data is available.

MANAGEMENT AND PREVENTION OF INCIDENTS

The Serious Incident Response Scheme (SIRS) sets requirements for providers of aged care services to manage and take reasonable action to prevent incidents. It focuses on older people's:

- safety
 - health
 - wellbeing
 - quality of life.
-

Under the SIRS, providers must have an incident management system in place. An effective system will help to:

- identify, manage, and resolve incidents that happen during the delivery of care and services to older people
- prevent future incidents.

These requirements apply to all providers of residential aged care and home services.

Home services include:

- home care packages
- Commonwealth Home Support Programme
- flexible care delivered in a home or community setting, including the
 - Multi-Purpose Services Program
 - Short-Term Restorative Care Programme
 - Transition Care Programme
- National Aboriginal and Torres Strait Islander Flexible Aged Care Program.

The Aged Care Quality and Safety Commission (ACQSC) runs the SIRS. Providers must use the My Aged Care provider portal to tell the ACQSC if a reportable incident occurs.

Reportable incidents are:

- unreasonable use of force
- unlawful sexual contact or inappropriate sexual conduct
- neglect
- psychological or emotional abuse
- unexpected death
- stealing or financial coercion by a staff member
- inappropriate use of restrictive practices
- unexplained absence from care (missing consumers).

Find out more about the [SIRS reporting](#).

RECORDS PRINCIPLES 2014

Purpose of these principles

For Division 88 of the Act, these principles specify the kinds of records that must be kept and retained by an approved provider.

Note: Under subsection 89-1(2) of the Act, a person who has ceased to be an approved provider must retain records that the person was required to retain under section 88-1 of the Act, other than records that the approved provider is required to transfer to another approved provider under section 16-10 of the Act.

6A Records about governing body

- (1) This section applies if the responsibilities set out in paragraphs 63-1D(2)(a) and (b) of the Act apply in relation to an approved provider.
- (2) The approved provider must keep a record about the members of the approved provider's governing body that includes the following information:
 - (a) the names of the members of the governing body who are independent non-executive members;

- (b) the names of the members of the governing body who are not independent non-executive members;
- (c) both:
 - (i) the names of the members of the governing body who have experience in the provision of clinical care; and
 - (ii) details of each such member's experience.

6B Records about the quality care advisory body

- (1) This section applies if the responsibility set out in subsection 63-1D(6) of the Act to establish and maintain a quality care advisory body applies in relation to an approved provider.
- (2) The approved provider must keep a record about the quality care advisory body that includes the following information and documents:
 - (a) the names of the members of the quality care advisory body and details of the following:
 - (i) the date each member was appointed to the quality care advisory body;
 - (ii) the date a member resigned from the quality care advisory body;
 - (b) details about how the quality care advisory body satisfies the requirements of section 53B of the Accountability Principles 2014;
 - (c) a copy of the minutes of any meeting held by the quality care advisory body and the date on which the meeting was held;
 - (d) a copy of each written report given to the governing body of the approved provider by the quality care advisory body under subparagraph 63-1D(6)(a)(ii) of the Act;
 - (e) details of any feedback given to the governing body of the approved provider by the quality care advisory body under subparagraph 63-1D(6)(a)(iii) of the Act;
 - (f) a copy of any written advice given to the quality care advisory body by the governing body of the approved provider under subparagraph 63-1D(6)(b)(ii) of the Act advising how the governing body has considered the report and feedback mentioned in paragraphs (d) and (e).

6C Records about the consumer advisory body

- (1) This section applies if the responsibility to offer care recipients and their representatives an opportunity to establish a consumer advisory body under subsection 63-1D(9) of the Act applies in relation to an approved provider.
 - (2) The approved provider must keep a record that includes the following information and documents:
 - (a) a copy of each written offer made to care recipients and their representatives giving them the opportunity to establish a consumer advisory body;
 - (b) the date on which each offer was given to care recipients and their representatives;
-

(c) if a consumer advisory body is established:

- (i) a copy of the minutes of each meeting of the consumer advisory body; and
- (ii) details of any feedback given to the governing body of the approved provider by the consumer advisory body under paragraph 63-1D(9)(a) of the Act; and
- (iii) a copy of any written advice given to the consumer advisory body by the governing body under subparagraph 63-1D(9)(b)(ii) of the Act advising how the governing body has considered any such feedback.

6D Records about the qualifications, skills or experience etc. of staff members

- (1) This section applies if the responsibility under subsection 63-1D(11) of the Act applies in relation to an approved provider.
- (2) The approved provider must keep a record about how the governing body of the approved provider has ensured that the staff members of the approved provider:
 - (a) have appropriate qualifications, skills or experience to provide the care or other services that the approved provider provides to care recipients through an aged care service; and
 - (b) are given opportunities to develop their capability to provide that care or those other services.

Note: Other record keeping responsibilities of an approved provider in relation to certain staff are set out in sections 9, 10A and 10B.

7 Records about care recipients

An approved provider must keep the following kinds of records:

- (a) assessments of care recipients;
 - (b) appraisal and reappraisal records for care recipients in the form of Answer Appraisal Packs, including:
 - (i) assessment tools from the Assessment Pack; and
 - (ii) sources of evidence mentioned in the Answer Appraisal Pack;
 - (c) copies of applications for classification for care recipients that are not transmitted to the Secretary in electronic form;
 - (d) individual care plans for care recipients;
 - (e) medical records, progress notes and other clinical records of care recipients;
 - (f) schedules of fees and charges (including retention amounts relating to accommodation bonds) for previous and current care recipients;
 - (g) agreements between care recipients and the approved provider;
 - (h) accounts of care recipients;
 - (i) records relating to the approved provider meeting prudential requirements;
-

- (j) records relating to the payment and repayment of refundable deposits, accommodation bonds and entry contributions;
 - (k) records relating to care recipients' entry, discharge and leave arrangements, including death certificates where appropriate;
 - (l) records relating to a determination that a care recipient is a care recipient with financial hardship;
 - (m) records of the amount of daily accommodation payments, daily accommodation contribution and accommodation charge paid or payable to the approved provider by care recipients;
 - (n) records of the amount of accommodation charge refunded by the approved provider in relation to care recipients who paid an accommodation charge for a period during which they were charge exempt residents;
 - (o) in relation to a continuing residential care recipient to whom the approved provider starts to provide residential care through a residential care service on or after 1 July 2014—a record of whether the care recipient made a written choice to be covered by Chapters 3 and 3A of the Act in relation to the service;
 - (p) in relation to a continuing home care recipient to whom the approved provider starts to provide home care through a home care service on or after 1 July 2014—a record of whether the care recipient made a written choice to be covered by Chapters 3 and 3A of the Act in relation to the service;
 - (q) in relation to a continuing flexible care recipient to whom the approved provider starts to provide flexible care through a flexible care service on or after 1 July 2014—a record of whether the care recipient made a written choice to be covered by Chapters 3 and 3A of the Act in relation to the service;
 - (r) up-to-date records of:
 - (i) the name and contact details of at least one representative of each care recipient, according to information given to the approved provider by the care recipient or by the representative; and
 - (ii) the name and contact details of any other representative of a care recipient, according to information given to the approved provider by the care recipient or by the representative;
 - (s) copies of notices given under section 21E of the User Rights Principles 2014;
 - (t) records relating to the payment of the care recipient portion or transfer portion of care recipients' unspent home care amounts under section 21F of the User Rights Principles 2014 (as in force before 1 September 2021);
 - (ta) records relating to the payment of the care recipient portion of a care recipient's unspent home care amount under section 21F or 37 of the User Rights Principles 2014 (as in force on or after 1 September 2021);
 - (v) records required by the National Aged Care Mandatory Quality Indicator Program Manual to be kept.
-

8A Records about Charter of Aged Care Rights given to care recipients

- (1) An approved provider must keep a record relating to each copy of the Charter of Aged Care Rights given to a care recipient under:
 - (a) for approved providers of residential care—paragraph 11(1)(b) or subsection 33(1) of the User Rights Principles 2014; or
 - (b) for approved providers of home care—paragraph 20(1)(b) or subsection 33(1) of the User Rights Principles 2014; or
 - (c) for approved providers of a flexible care service through which short-term restorative care is provided—paragraph 23AE(1)(b) or subsection 33(1) of the User Rights Principles 2014.
- (2) Subsection (1) does not apply to an approved provider if:
 - (a) for approved providers of residential care—the care recipient does not enter the approved provider’s residential care service; or
 - (b) for approved providers of home care—the care recipient does not enter the approved provider’s home care service; or
 - (c) for approved providers of a flexible care service through which short-term restorative care is provided—the care recipient does not enter the approved provider’s flexible care service.

9 Records about staff members and volunteers—police certificates and NDIS worker screening clearances etc.

An approved provider must keep records that enable the provider to demonstrate that:

- (a) in accordance with Part 6 of the Accountability Principles 2014, there is for each person who is a staff member of the approved provider, or a volunteer for the approved provider, one of the following at all times during which the person remains a staff member or volunteer:
 - (i) a police certificate that is not more than 3 years old;
 - (ii) an NDIS worker screening clearance that is not more than 5 years old and is not suspended; and
- (b) for any period that a staff member or volunteer is allowed under Part 6 of the Accountability Principles 2014 to be without such a police certificate or NDIS worker screening clearance:
 - (i) an application for a police certificate has been made; or
 - (ii) the staff member or volunteer is in the process of obtaining an NDIS worker screening clearance; and
- (c) any statutory declaration required to be made by a staff member or volunteer under Part 6 of the Accountability Principles 2014 has in fact been made.

10 Duty to keep police certificates and documents relating to NDIS worker screening clearances

- (1) If a police certificate, or a copy of a police certificate, is kept by an approved provider under section 9, the police certificate or copy must be kept in accordance with the Privacy Act 1988.
- (2) If an NDIS worker screening clearance, or a copy or other evidence of an NDIS worker screening clearance, is kept by an approved provider under section 9, the clearance or copy must be kept in accordance with the Privacy Act 1988.

10A Records about service staff—influenza vaccinations

Residential care services, certain flexible care services and home care services

- (1) An approved provider of:
 - (a) a residential care service; or
 - (aa) a flexible care service through which transition care is provided (whether in a residential or community setting); or
 - (b) a flexible care service through which short-term restorative care is provided (whether in a residential care setting or a home care setting); or
 - (c) a home care service;

must keep records, for each calendar year, of the number of service staff in relation to the service who have informed the approved provider, whether voluntarily or as required under a law of a State or Territory, that they have received the annual seasonal influenza vaccination for that year (whether or not under the approved provider's influenza vaccination scheme).

Note: An approved provider must have an influenza vaccination scheme: see sections 8 and 15BA of the Quality of Care Principles 2014.

10B Records about service staff—COVID-19 vaccinations

Residential care services, certain flexible care services and home care services

- (1) An approved provider of:
 - (a) a residential care service; or
 - (aa) a flexible care service through which transition care is provided (whether in a residential or community setting); or
 - (b) a flexible care service through which short-term restorative care is provided (whether in a residential care setting or a home care setting); or
 - (ba) a home care service;

must keep records of the following information:

- (c) the number of service staff in relation to the service who have informed the approved provider, whether voluntarily or as required under a law of a State or Territory, that they have received a single dose of a COVID-19 vaccine;
 - (d) the number of service staff in relation to the service who have informed the approved provider, whether voluntarily or as required under a law of a State or Territory, that they have received a second dose of a COVID-19 vaccine;
-

- (da) the number of service staff in relation to the service who have informed the approved provider, whether voluntarily or as required under a law of a State or Territory, that they have received a booster dose of a COVID-19 vaccine;
- (e) the number of service staff in relation to the service who have informed the approved provider, whether voluntarily or as required under a law of a State or Territory, that they have not received one or more of the following:
 - (i) a single dose of a COVID-19 vaccine;
 - (ii) a second dose of a COVID-19 vaccine;
 - (iii) a booster dose of a COVID-19 vaccine;because:
 - (iv) an exemption from the requirement to receive a COVID-19 vaccine under a law of a State or Territory applies to them; or
 - (v) the requirement to receive a COVID-19 vaccine under a law of a State or Territory does not apply to them;
- (f) for those service staff covered by paragraph (e):
 - (i) the nature of the exemption from the requirement to receive a COVID-19 vaccine under a law of a State or Territory; or
 - (ii) the reason why the requirement to receive a COVID-19 vaccine under a law of a State or Territory does not apply to them.

10C Records about residential care recipients—vaccinations

An approved provider of:

- (a) a residential care service; or
- (aa) a flexible care service through which transition care is provided in a residential setting; or
- (b) a flexible care service through which short-term restorative care is provided in a residential care setting; or
- (c) a multi-purpose service;

must keep records of the following information:

- (d) for each calendar year—the number of care recipients to whom residential care is provided through the service who have voluntarily informed the approved provider that they have received the annual seasonal influenza vaccination for that year;
 - (e) the number of care recipients to whom residential care is provided through the service who have voluntarily informed the approved provider that they have received a single dose of a COVID-19 vaccine;
 - (f) the number of care recipients to whom residential care is provided through the service who have voluntarily informed the approved provider that they have received a second dose of a COVID-19 vaccine;
-

- (g) the number of care recipients to whom residential care is provided through the service who have voluntarily informed the approved provider that they have received a third dose of a COVID-19 vaccine;

Note: Care recipients who are assessed by their health practitioner as being immunocompromised may receive a third dose of a COVID-19 vaccine.

- (h) the number of care recipients to whom residential care is provided through the service who have voluntarily informed the approved provider that they have received a booster dose of a COVID-19 vaccine;
- (i) the number of care recipients to whom residential care is provided through the service who have voluntarily informed the approved provider that they have received a winter 2022 dose of a COVID-19 vaccine;
- (j) the number of care recipients to whom residential care is provided through the service who have voluntarily informed the approved provider that they are willing and clinically suitable to receive one or more doses of a COVID-19 vaccine but they have not received any dose of a COVID-19 vaccine;
- (k) the number of care recipients to whom residential care is provided through the service who are unwilling or clinically unsuitable to receive:
- (i) any recommended dose of a COVID-19 vaccine; or
 - (ii) all of the recommended doses of a COVID-19 vaccine.

11 Kinds of records that must be retained

An approved provider who ceases permanently to provide care to a care recipient must retain, in relation to the care recipient, records of the kinds mentioned in section 7.

Note: Under subsection 89-1(2) of the Act, a person who has ceased to be an approved provider must retain records that the person was required to retain under.

AUDITS AND ACCREDITATION

Residential aged care services need accreditation to receive government subsidies.

Accreditation also allows providers to show how they meet the [Aged Care Quality Standards](#).

Our role is to assess providers and issue accreditation. We perform full audits, checking the quality of care that providers deliver. We also do an audit when providers apply for accreditation.

The key steps in the accreditation process are:

- The provider self-assesses their service against the Quality Standards.
 - They apply for accreditation (or reaccreditation).
 - We assess the provider and write a performance report.
 - We approve the accreditation and issue a certificate to the provider.
 - We publish the performance report and accreditation decision on this website.
-

The [Aged Care Quality and Safety Commission Act 2018](#) outlines the accreditation process.

The [Aged Care Act 1997](#) also applies.

For more on the process, see the following pages:

- [Accreditation of commencing services](#)
- [Re-accreditation of residential services](#).

Assessing providers

We visit providers and collect evidence to see how they meet the Quality Standards. This includes (but is not limited to):

- reviewing procedure documents
- observing practices at the service
- looking at resident records and other documents
- checking incident reports, care plans and complaints registers.

We also speak with people receiving aged care or their representatives.

NDIS REFORMS

The response to recommendations of the Disability Royal Commission was released in July 2024 including joint recommendations with State and Territory Governments.

Disability Ministers are currently considering the NDIS Review recommendations and a formal response to the NDIS Review is due in December 2024. Reform planning and implementation across governments will commence in January 2025 and is ongoing through 2025.

It is anticipated that the level of reporting for NDIS services will increase dramatically in line with Aged Care reporting requirements.

A Disability Reform Roadmap for 2024 and 2025 is provided as a separate attachment.

IN SUMMATION

In a workshop yet to be scheduled for Councillors, further information will be provided regarding performance and reporting options for Aged Care and Disability Services. Three examples of possible Board Governance reporting formats have been provided as attachments. Further examples are being developed and will be finalised after the Aged & Community Care Provider Association (ACCPA) training on 10 December 2024.

Current service updates in the format presented to the Gilgandra Lifestyles Advisory Board are included in this Business Paper to provide a current positional snapshot of all Aged Care & Disability Services.

Separate attachments have also been included relating to Aged Care Reform Activity (October 2022 – December 2025) and the NDIS Reform Roadmap.

<u>Principal Activity</u>	Lead
<u>Policy Implications</u>	Nil
<u>Budget Implications</u>	Nil
<u>Delivery Plan Actions</u>	4.3.1.1 Ensure all governance targets and statutory requirements are met in line with the relevant Acts and Regulations and Council policy

RECOMMENDATION

1. That the nature and extent of the governance and reporting requirements within Aged Care be noted.
2. That the Gilgandra Lifestyles Advisory Board and Disability Services Advisory Board be disbanded.
3. That a Clinical Care and Risk Committee be formed comprising key clinical staff of Cooee Lodge Hostel, Jack Towney Hostel and Orana Living, the Director Aged Care and Disability Services plus two paid independent clinical consultants.
4. That the Director Aged Care and Disabilities prepare monthly reports to Council outlining performance, identifying any issues of concern, trends and analysis related to corporate governance, clinical governance and operational risk including strategy and capital works updates.

Donna Dobson
Director Aged Care and Disabilities

GRANT OPPORTUNITY – ACTIVE TRANSPORT FUND – INFRASTRUCTURE INVESTMENT FUND

SUMMARY

To consider an application under the Commonwealth Government’s Active Transport – Infrastructure Investment fund for the Real Country Windmill Walk Extension.

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Active Transport Fund – Infrastructure Investment

- Open 31 October 2024
- Close 13 January 2025

There is \$100 million towards the Active Transport Fund, the program is part of the Australian Government’s commitment under the National Road Safety Strategy 2021-30, to improve road safety outcomes for bicyclists and pedestrians. The program also supports the Australian Government’s commitment to reducing transport emissions and supporting active and liveable communities.

The program will contribute up to a maximum of \$5 million in Australian Government Funding for each eligible project. Applications can only be made by state and territory governments and all LGAs.

For projects submitted by LGAs, the Australian Government recognises that some LGAs, particularly those in regional areas, may be limited in their ability to provide a 50% co-contribution. Alternative funding co-contributions can be sought as part of the application. Where an alternative co-contribution is sought, justification must be provided to demonstrate the need for an alternative arrangement.

Large projects (\$200,000 and over): will have default milestone payments (completion of preconstruction design > up to 10% Aust Govt funding; commencement of construction > 40% of funding; completion of construction > 30% of funding ; post completion report > 20% of funding)

Small projects (less than \$200,000): single financial milestone, payable on completion of project and presentation of post completion report.

The aim of the program is to encourage an increase in active transport through the upgrade of existing and construction of new bicycle and walking pathways across Australia.

The Focus Areas for the program are:

- road safety
- reducing transport emissions
- active and liveable communities

Eligible projects must:

- Be for the upgrade of an existing or construction of a new bicycle or walking pathway;
- Directly address at least one focus area, and be supported by evidence;
- Be located on a publicly owned road asset or corridor that is accessible to the public; and
- Be a whole and complete project (not reliant on other works).

2.3.2 Eligible and ineligible project costs

In accordance with section 20 of the [NLT Act](#) an Applicant must expend funds wholly on approved purposes for the funded project.

All eligible project costs must be part of a pathway project.

The table below lists examples of project costs likely to be eligible and ineligible.

Eligible project costs	Ineligible project costs
<ul style="list-style-type: none"> • re-alignment of pathways to improve safety • separate pathways along a road corridor • kerb extensions • intersection upgrades • pedestrian and cyclist crossings and refuges • widening of roads to accommodate pathways, with the primary outcome of the project to be delivery of a pathway • traffic signs, including signage related to the safe and proper use of the pathway • traffic control equipment • street lighting equipment • purchase of materials • labour hire • plant and equipment hire • construction activities • project management costs • labour costs for eligible work • ancillaries directly related to the project, such as insurance costs, as long as they can be broken down into a project specific allocation, such as an hourly or item rate. • direct land acquisition costs, excluding any legal or administrative costs incurred to facilitate the transaction 	<ul style="list-style-type: none"> • end of trip facilities • bike racks (that are not part of permanent pathway) • maintenance/repair costs for an existing asset • approval costs for the project (i.e. planning, environment, cultural, etc) • procurement costs that are not the direct acquisition of a material or service, such as consultant reviews of the competitiveness of tender responses • project costs incurred prior to the funding offer being signed • overhead for your organisation that cannot be broken down into a project specific allocation, such as staff training, office expenses and software subscriptions • legal costs • advertising and media costs, such as costs incurred by publicising the release of a public tender in a newspaper

2.4 Project delivery timeframes

Proponents have 30 calendar days from the date the funding offer is sent out to complete, sign and return it to the department for approval otherwise the offer may be withdrawn.

Note that delivery timeframes cannot commence until a funding offer is approved by the department and the proponent has been advised in writing via email when it is approved.

Delivery milestone	Construction only projects	Design and construction projects
To complete design	Not applicable	Within 12 months of the funding offer being approved
To commence construction	Within 12 months of the funding offer being approved	Within 24 months of the funding offer being approved
To complete construction	Within 36 months of the funding offer being approved	Within 48 months of the funding offer being approved

An acceptable Post Completion Report must be provided within three months of completion of construction for each project.

Merit based assessment. Below are the three Assessment Criterion:

1. **Strategic Fit:** Outline the rationale for the project, why there is a strong case for action, how it will achieve the stated objectives, and how it meets the needs of the community.
2. **Project Impact and Benefits:** Demonstrate the road safety, social, economic and environmental value of the project with supporting evidence-based analysis. This includes direct project benefits as well as benefits during the construction of the project.
3. **Project Deliverability:** Demonstrate the capability and capacity to deliver the project, including mitigating identified risks.

Suggested Project – Real Country Windmill Walk Extension

GSC has been successful in NSW Get Active NSW funding for \$532,477 with a co-contribution of \$25,000 for the detailed designs of the Real Country Windmill Walk extension.

This grant is due for completion 2025/26. NSW Get Active NSW is a regular, recurring funding opportunity and the project is eligible under current funding guidelines to apply for infrastructure and implementation funding in future rounds.

GSC is currently drafting documents for procurement of planning documents including Environment Assessment, Heritage Assessment and relevant geotechnical studies.

A Business Case, concept designs and QS report were developed for this project as part of the Real Country Business Case and Strategy Development Fund with Coonamble and Warrumbungle Shire Councils. Endorsed in Council's February Meeting, please see Resolution below:

RESOLVED 7/24	Cr Mockler/Cr Mann
<p>That:</p> <ol style="list-style-type: none"> 1. Council note community submissions received, along with the commentary provided by People, Place and Partnership. 2. Recognition of submissions be provided to the community, along with responses. 3. The Real Country Tourism Experience Strategy and Infrastructure Business Case be endorsed 4. Future funding opportunities be sought in-line with the Real Country Tourism Experience Strategy and Infrastructure Business Case 5. Congratulate Mrs Kathryn Larkin, Project Manager Strategy and Collaboration, and her team in the excellent work in coordinating this project across the 3 Local Government Areas 	

The following elements were included in the detailed design submission:

Detailed Design	\$ 557,477 (existing funding)
Windmill Walk + Gilgandra Cultural Precinct	
GCP River crossing and viewing platform	\$1,580,700
Accessible cycle/walkway Windmill Walk and signage	\$ 934,828
Nature trail connections to Golf Club, Racecourse and Gilgandra Caravan Park	\$ 25,650
Riverfront activation picnic tables	\$ 72,025
Solar lighting	\$ 204,400
CBD Town Centre Precinct	
Windmill Walk extension memorial precinct to Court Street	\$ 252,180
Viewing platform behind GIL Library Hub	\$ 102,000
Boardwalk	\$ 194,625
Contingency @ 20%	\$ 673,282
Estimated Gross Construction inc. Contingency	\$4,039,690
<u>Total Indicative Development Cost</u>	\$4,459,167.



Long Term Financial Plan

Council's current Long Term Financial Plan indicates \$3,000,000 expected expenditure in 2026/27 and a further \$4,000,000 over two years in 2032/33 and 2033/34. This is offset by the same amounts in income received through grants.

It is suggested that an application for the \$4,039,690 construction costs be submitted under the Active Transport Grant, with Council's contribution being 50% \$2,019,845 (which is unfunded in the current long term financial plan). Further, that future opportunities including potential NSW Government opportunities be pursued as

opportunities arise, and that the project is brought forward in Council's planning to align with grant opportunities.

<u>Principal Activity</u>	Live
<u>Policy Implications</u>	Nil
<u>Budget Implications</u>	An additional commitment of \$2,019,845 equal to 50% of the project construction costs in 2026/27 should the grant application be successful
<u>Delivery Program Actions</u>	2.3.2.1 Implement projects from the Real Country Tourism Experience Strategy and Business Case in conjunction with Coonamble and Warrumbungle Councils for transformational ecotourism projects in the Region. 3.3.2.1 Progress the Castlereagh River beautification and Real Country ecotourism infrastructure projects. 2.3.3.2 Implement the Gilgandra Activation Blueprint to connect the CBD tourist anchor and revitalised river corridor – including the Gilgandra Cultural Precinct transformation project.

RECOMMENDATION

1. That an application under Active Transport – Infrastructure Investment Fund for \$4,039,690 for the Real Country Windmill Walk Extension project be endorsed.
2. That an allocation of 50% of construction costs \$2,019,845 be considered in 2026/27 year of the Long Term Financial Plan, subject to a successful grant application.
3. That future NSW Government grant opportunities be pursued as opportunities arise.

Neil Alchin
Director Growth and Liveability

GOIN' TO GIL WEEKEND + UNDER THE GUMS FESTIVAL 2024

SUMMARY

To provide a summary of the Goin' to Gil Weekend and Under the Gums Festival 2024, including budget update and outlining plans for 2025.

.....

Goin' to Gil Weekend + Under the Gums Festival

What a weekend! The Goin' to Gil Festival Weekend, which kicked off on Friday, 27 September and ran through to Sunday, 29 September 2024. Rated a very positive 9/10 in the post event survey, locals and travellers alike enjoyed a jam-packed weekend.

The **Goin' to Gil Weekend** saw the delivery of a variety of events across the community including;

- Miller Street live music
- CWA Markets and Watermelon Eating Competition,
- Live Local Entertainment and Busking,
- Gilgandra Tractor & Machinery Club Show & Shine and Swap Meet,
- Live Mural Painting,
- Coo-ee Call Competition,
- Live Music + Royal Hotel Sunday Session,
- Goin' to Gil Street Parade
- Our flagship event; Under the Gums, Gilgandra.

Goin' to Gil event details can be found on the dedicated website >>>
<https://underthegums.com.au/goin-to-gil>

Delivering it's fourth successful year, the **Under the Gums Festival**, Gilgandra has become a regionally significant event with ticket sales exceeding 3000, and over 43% of ticket holders travelling to the region for the event, as measured using postcode data from ticket sales platform. Bringing over 1800 people to the region, the event brought significant expenditure, supported local and regional businesses, encouraged travel to the region and increased the profile of Gilgandra and the wider region as a great place to Visit, Explore and Stay!

Remplan reporting shows over \$900,000 in direct spend in the Gilgandra Region generated by Under the Gums alone.

Under the Gums attendees were delighted with a diverse range of;

- Red-hot foodies,
 - A variety of stall holders,
 - Local bars,
-

- Dedicated kids area,
- Market stalls,
- Fireworks
- And a headlining musical lineup including Sneaky Sound System, Zac & George, The Wiggles Dorothy the Dinosaur and Friends Show, Max Jackson, Splashpool, Phat Brass and Elle Flanagan.

Full Under the Gums, Gilgandra event details can be found on the dedicated website >>> <https://underthegums.com.au>

The Goin' to Gil Festival Weekend and Under the Gums, Gilgandra were developed, planned and run with cross-collaboration between Gilgandra Shire Council staff, Councils Economic Development Committee and external local Community Planning Crews, including local community groups, businesses and volunteers.

Quick statistics

- Over 60 floats involved in the Street parade
 - 3186 tickets sold to Under the Gums Festival
 - 43% Under the Gums revellers from outside 2827, 2817 and 2828 postcode
 - 900+ children's tickets to Under the Gums
 - \$906,629 direct spend in Gilgandra Region from Under the Gums Festival by REMPLAN reporting
 - 400+ attendees at the Show and Shine and Swap meet
 - Over 100 entries into the activities including Watermelon Eating, Coo-ee Call and Windmill Run Walk and Talk
 - 25 stall holders in the CWA Markets Sunday morning
 - One Miller Street business indicated a 90% increase in sales from the same weekend last year
 - From post-event surveys completed, there were four new volunteers wanting to join the External Community Planning Crew which has already begun plans for next year!
 - A key goal of the marketing plan sought to attract Real Country seekers from back roads to beach tracks, Leveraging collaborative regional marketing campaigns of the Great Western Plains (GWP) and Real Country, as well as Gilgandra Region's own destination goals, attendee ticket data detailed the number of intra-region ticket holders, highlighting the importance of this market >>> it was our biggest market outside locals, with 856 ticket holders from this market or 27% of ticket holders.
 - Post-event consultation with local accommodation providers showed that all motels were booked out for the weekend, and a significant increase to standard weekends.
 - Over 250 hours of rostered staff time, the entire Goin' to Gil weekend captained by crew in pink vests.
 - Many are very keen to see Goin' to Gil and Under the Gums back in 2025 with 97% of respondents to the attendee survey saying they will be back!
 - Over 18,800 unique social media user engagements
-

Please view attached wrap for key results.



Funding Sources and Budget

Funding for the 2024 event included NSW Government, ticketing income, as well as Council's own contribution.

The introduction of ticketing, site fees and merchandise sales, associated with Under the Gums specifically, was a focus for the 2024 event. The OpenStreets funding received in May 2024 meant that General Admission ticketing was required to remain free for the event. The view was that the event becomes sustainable into the future should funding opportunities reduce.

Remaining funds and income generated through sales is planned to flow into the 2025 and future events to best provide such sustainability.

NSW Government Funding for the Goin' to Gil Weekend and Under the Gums Festival, as identified in the Income table below included;

- Stronger Country Communities Fund,
- OpenStreets Program,
- Destination NSW Regional Event Fund,
- Transport NSW TARP funding
- NSW Health Knockout Challenge

Please note the below budget tables are project specific, as such they span multiple financial years 2023/24 and 2024/25.

Income	
Stronger Country Communities Fund R5	\$ 60,000.00
Open Streets	\$ 125,000.00
DNSW Regional Event Fund	\$ 20,000.00

Transport NSW	\$	10,709.00
NSW Health	\$	1,000.00
Gilgandra Shire Council sponsor	\$	50,000.00
123 Tix (Level Up, Showground, Merch, Bus)	\$	19,595.00
Vendor Site Fees	\$	2,600.00
Merchandise Sales (Vend)	\$	6,160.00
SUB TOTAL	\$	295,064.00

Expenses	Invoice
Entertainment, fencing, toilets, sound and lighting hire	\$ 60,607.00
Entertainment Goin' to Gil, traffic control, staffing, kids activities, fireworks, Goin' to Gil competitions, security, user-paid police, signage, mural, licensing.	\$ 125,172.35
Photography, videography, radio, in-app advertising, billboard, social media and Real Country collaboration	\$ 20,001.40
Regional buses – Dubbo, Coonabarabran, Coonamble (including Tooraweenah, Armatree, Gulargambone)	\$ 6,721.82
Showground Trust, merchandise, artist accommodation, VIP inclusions, contract reviews, advertising.	\$ 18,011.91
Windmill Run Walk and Talk	\$ 450.00
SUB TOTAL	\$ 230,964.48

The Future

The following is an extract from 2023 Under the Gums report to Council which outlines our vision and outcomes for the festival:

“Council’s Economic Development Committee and Under the Gums Planning Crew aims to extend the growth of Under the Gums, over a three-year growth plan, to go from a free local event, to a sustainable and flagship festival for Gilgandra Region, and wider Real Country, Great Western Plains and regional NSW, into 2025 and beyond.

Bringing expenditure and travel into the region, for longer periods, support local and regional businesses, build the night sky experience, increase the profile. Extending the ‘Goin’ to Gil’ weekend notion, bringing in learnings, and anticipated community involvement, from the backgrounds of the Cooee Festival and Come Home to Gilgandra Festivals into planning.”

The Goin’ to Gil and Under the Gums Planning Crews have already met to progress plans for 2025. With the date for October Long Weekend 3 – 6 October 2025, as a one-off date, honouring the anniversary of the re-enactment of the Cooee March.

This weekend is tentatively to include; Miller Street music, street parade, Coo-ee call, Windmill Run, Under the Gums, CWA markets + watermelon eating, Show & Shine swap meet, Speedway season opening, and encouraging any other events over the weekend!

Funding 2025 Goin' to Gil Weekend and Under the Gums Festival Event

The 2025 event budget will include the following existing 2024/25 funding:

- \$59,393 remaining from Stronger Country Communities Round 5 Fund
- \$3,987 remaining from NSW Government TARP TfNSW funding
- \$32,000 GSC sponsorship

This allows planning, promotions and bookings to commence. Noting that continued ticketing, merchandise sales, site fees and sponsorships will be included in the 2025 planning required to fund the Festival Weekend.

The 2025/26 budget forecast is \$100,000, with \$50,000 in income, which will include the final deliverables of the 2025, and once again the planning, promotions and bookings for the following 2026 event.

Survey Results

Surveys have been conducted across four areas:

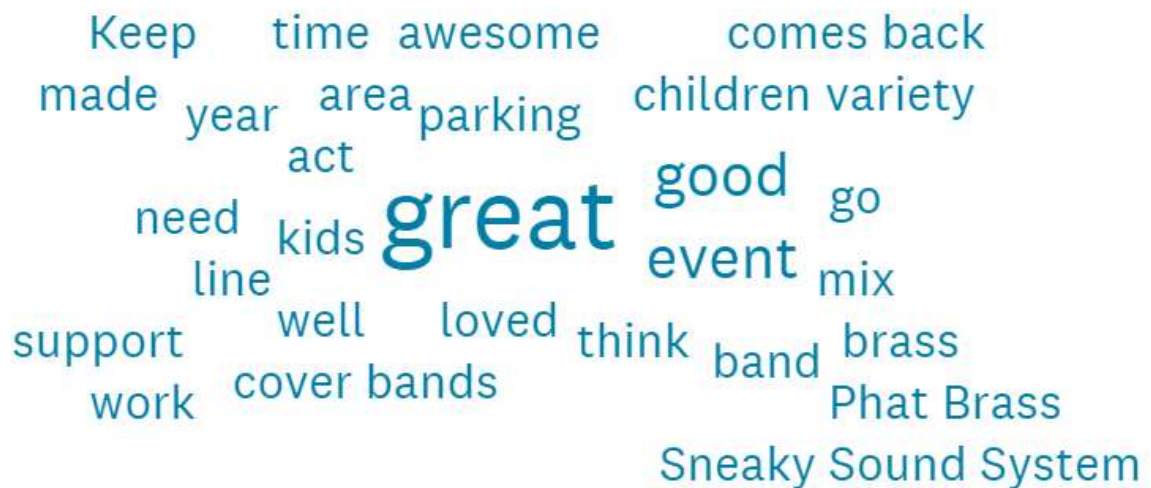
- Ticket holders
- Local businesses
- Food and beverage vendors
- Artists

With the results summarised below.

Ticket Holders

- 122 responses, 80% female, majority in 45-54 age group, all age groups from 17 and under to 65+ were represented.
 - 71% attended activities across the Goin' to Gil weekend
 - 54% attended Under the Gums with family, followed by 32% with friends
 - Average 9/10 rating for the Under the Gums event
 - Majority of people hears about the event through social media pages, followed by direct emails, word-of-mouth, letterbox drop and Newspapers
 - Close to 30%, and the majority of respondents spend \$50-100 at the event, with 11% spending over \$250.
 - 79% respondents would spend \$20-\$40 for a General Admission Ticket in 2025, and 87% between \$10-\$15 for a childrens ticket
 - 48% made a weekend of it
 - Accessibility at the site rated 86%
 - Parking 85%
 - Food and beverage options 83%
-

- Lineup 84%
- Stallholders 78%
- Kids area 78%
- MCs 81%
- Fireworks 89%
- Information in the lead up to the event 89%
- Lineup suggestions:



- 97% will be back for Under the Gums 2025
- Fairly even spread of expenditure across the Goin' to Gil weekend from <\$50 to \$250+, noting 20% of respondents selected 'other' and all but three responses indicated spend between \$400-\$1500.
- 60% were locals
- Variety of activities in the Goin' to Gil weekend scored 88%
- Suggestions for Goin' to Gil weekend



- Suggestions for Goin' to Gil weekend
 - 83% will attend Goin' to Gil activities again in 2025
-

- Four people indicated interest in being involved in the Planning Crew for 2025

Overall very positive feedback was received, with some great ideas regarding the weekend festival, Level Up area, lighting and bins.

Comparatively in 2023, there were 163 responses, similar amount from Gilgandra and again high majority of female (83%). 48% attended with family. Rated 8.6/10 – event has gained. 26% made a weekend – event has gained. Overall rating scores similar.

Local Businesses Survey

Seven local businesses responded:

3 retail, 1 hospitality, 1 service provider, 1 motor vehicle dealer, 1 livestock cooperative.

- 52% saw a positive impact from the weekend
- Even third split of quieter, regular, busier over the weekend
- 43% saw an increase in sales (3)
- 43% said customers were a great mix of both visitors and locals (3)
- 71% received sufficient communications (5)
- 86% attended Under the Gums (6)
- 2 indicated interested to be involved in the Planning Crew for 2025
- 3 indicated interest in sponsoring over the weekend

General comments were very supportive of the weekend activities, and one business indicated 90% increase in sales compared to previous year due to the introduction of events in Miller Street. Feedback included extended music Friday, parking and traffic access issues. It must be noted that only seven respondents can skew the % results significantly.

fantastic
Thank people street events parking
markets music weekend

Vendor Survey

The vendor survey was also conducted to understand how best to manage these operations in future years:

- 6 respondents
- Vendors rated the event 9.2/10
- Minimum sale \$600 by respondents, with one respondent stating 2024 - 250 rolls sold out 2023 - 217 rolls 2022 - 167 rolls. While another's location was unsuitable with limited access, reducing sales ability.
- 83% felt that there was a good range of food and beverage providers
- Comments:
 - *The event is run very well. Good atmosphere and excellent venue*
 - *Excellent communication with everyone involved and great layout*
 - *Well laid out event, great atmosphere and good music, great communication and advertising in lead up to event*
 - *I think the layout of the event was fantastic, most people commented on this there was a better variety of food this year which was great and the improvement on the kids area was a big hit.*
 - *Lots of info was great, location and layout was really well done.*
 - *The event was well organised. It was easy to get in and out. Communication was good and Council staff were helpful.*
- To improve next year, respondents requested better access to stalls, pathway and gateways, not blocking the kids area with trucks, extending the kids area time, more lighting, earlier access to leave – or ensure all stay until close, more kids stalls.
- 100% will be back in 2025, noting site fees will apply.
- WHS Induction was rates 10/10!

Artist Survey

- 6/7 artists responded
 - Scores:
 - Communications 10/10 (2023 9/10)
 - Sound 9/10 (2023 8/10)
 - Lighting 9/10 (2023 8/10)
 - Venue 10/10 (2023 9.5/10)
 - Production 9/10 (not scored in 2023)
 - 10/10 would be back again (2023 10/10)
 - Lineup suggestions and general comments
 - *We had a great time and really enjoyed being part of the line up. We were looked after very well and it was appreciated. Sneaky Sound System were awesome. Congrats on an excellent festival.*
 - *Great day great staff and organisers*
 - *Splashpool do many of these festival and Corporate events. This was up there as one of the best organized event that we have been a part off. The change over times between bands was a bit tight for a large 7pc band such as us, but apart from that it was great. 32 Hundred were so helpful to getting us ready to go ASAP.*
 - *Sammy White and Brad Cox Darshani Martin Phat Brass again for sure And me please*
 - *Our Wiggly team had an AMAZING time at your event and feedback from our cast and crew was how positive and hospitable you all were on the day. The only hiccup we encountered was there were no headset mic's provided as requested and*
-



Principal Activity Enjoy

Policy Implications Nil

Budget Implications Within existing budget allocations. Council may wish to consider 2025/26.

Delivery Program Actions **2.3.1.2**
Enhance the experience for local and visitors with the Under the Gums event, and associated Goin' to Gil Weekend activities, collaborating regionally to strive for a state significant event.

RECOMMENDATION

1. That the report and subsequent Goin' to Gil Weekend and Under the Gums Festival 'It's a Wrap!' document be noted.
 2. That the Mayor write to the Planning Crews thanking them for their time, input and commitment to the event.
 3. That Save the Date for the Goin' to Gil Weekend, including the Under the Gums Festival for the October Long Weekend 3 - 6 October 2025 be promoted.
 4. Subject to the financial position of the Council, that any remaining UTG's allocation at the completion of the 2024/25 financial year be considered as transfers to reserves as a further contribution towards the 2025 event.
 5. Noting the net costs associated with delivering 2024/25 Goin' to Gil Weekend and Under the Gums Festival, that Council reconsider the current 2025/26
-

MEETING OF
HELD ON:

GILGANDRA SHIRE COUNCIL
21 NOVEMBER 2024

budget allocation of \$100,000 in line with the 2025/26 budget preparations with a view to align with the current costs of the delivery of the event.

Neil Alchin
Director Growth and Liveability

COMMUNITY LOCAL INFRASTRUCTURE RECOVERY PROGRAM (CLIRP) PROJECT

SUMMARY

To advise Council of the completion of the CLIRP project.

.....

Council is an organisation that utilises and relies upon Information and Communications Technology (ICT). At the heart of Council's operations is the core network infrastructure, providing the critical devices and endpoints that allow the flow of information, data and phone calls across the whole of Council's decentralised locations. This network of devices is required to be operating at peak levels of efficiency to effectively leverage Information and Computing Technology for staff, visitors to the region, hostels and disability services managed by Council.

The core network infrastructure comprises the following key areas:

- Wireless links
- Optical fibre links and
- Network switches and cabling to interconnect them

Councils existing core network links were all wireless and have been in place for at least 10 years with significant weather and storm damage and known faulty core switches. In addition, Council is installing an "Internet of Things" (IoT), LoRaWAN network. This comprises Gateways at Gilgandra, Curban and Tooraweenah with a weather station at each site. These Gateways enable IoT devices such as tracking devices, people counters, water level meters, water usage meters, soil moisture and automated sprinkler systems etc to be utilised. The IoT network is an emerging technology and can be further utilised and expanded for Council to provide enhanced services to the community.

The implementation of this grant commenced in June 2023 and was completed in October 2024, delays were encountered in obtaining approval to "drill or bore" under the railway line on Warren Road and a significant rock shelf was encountered near the Depot on Warren Road.

The Tavern and Gil Library Hub are major communication hub points for Councils CBD operations and a carrier grade licensed spectrum 10GB/s wireless and fibre links will connect them into Councils Core network, enabling the provision of Public Wi-Fi (for the Community and Visitors) at each location.

Project Funding

In 2022/2023, Council applied to the NSW Government for funding to support a \$996,763 project and successfully secured a grant of \$934,843. With an additional co-contribution of \$61,920 from Council, this funding was used to

upgrade and repair the core network, laying a foundation to improve community services across Council's portfolio of operations.

The total project cost amounted to \$1,165,378.02, with the additional \$168,615.02 funded by the ICT capital budget.

Project Outcomes/Benefits

- A core network capable of running a modern Enterprise Resource Planning (ERP) system and Customer Relationship Management System (CRMS) at each of Council's sites.
- Improved and effective Business Continuity and Disaster Management and Recovery capability.
- Enhanced Community services through public Wi-Fi and access at all of Councils locations and public spaces leading to a digitally connected community.
- Enhance public security and monitoring.
- Provision of advanced high quality IoT systems:
 - Weather Stations accessible through Councils web site at Tooraweenah, Gilgandra and Curban
 - Tracking information on key Council and Community assets
 - People counting at key community events
 - Water level locations at key locations and
 - Water Usage metering

Principal Activity Live

Policy Implications NIL

Budget Implications NIL

Delivery Program Actions **1.3.8.2**
Optimise communications network in Gilgandra Region

RECOMMENDATION

That Council note the completion of the CLIRP Grant Project.

Melissa Welsh
Executive Leader Transformational Change

(RC.EM.1)

REQUEST TO WAIVE FEES - CAROLS ON THE CASTLEREAGH

SUMMARY

To advise Council of the Carols on the Castlereagh event and the Combined Christian Churches request to waive the \$200.00 venue hire fee for the Cooee Heritage Centre (CHC).

.....

On 17 October 2024, Council received correspondence from the Combined Christian Churches advising of their annual carols event, known as the Carols on the Castlereagh, to be held at the CHC on Sunday, 8 December 2024.

It is proposed that it will be a 'bring your own picnic' with contributions from various Church/Community and School Choirs and a Christmas art feature.

The Committee has requested whether they could utilise the deck as a stage area, have access to the CHC toilets, and in the event of wet weather be able to utilise the Shire Hall.

The Committee has requested whether Council would consider waiving the \$200.00 Venue Hire Fee for the Cooee Heritage Centre. Please see attached the correspondence for further details.

<u>Principal Activity</u>	Enjoy
<u>Policy Implications</u>	Nil
<u>Budget Implications</u>	Nil
<u>Delivery Program Actions</u>	2.1.4.1 Support community groups with promotion of activities and assistance with application for external funding

RECOMMENDATION

That Council consider the Combined Christian Churches' request to waive the \$200.00 Venue Hire Fee for the Cooee Heritage Centre.

Neil Alchin
Director Growth and Liveability

(RD.MT.1)

**RESPONSE TO THE QUESTION ON NOTICE - DISABLED CAR PARKING
IN GILGANDRA CBD**

SUMMARY

To provide information on the amount of disabled car spaces and their suitability in the Gilgandra central business district.

.....

This report is provided in response to a question from Cr Foran at the October meeting.

'Can a report be presented to a future Council Meeting outlining the current disabled car parking arrangements in the CBD and for staff to respond to the issued raised?'

Within the central business district (CBD) of Gilgandra there are six locations where parking spaces are provided for people with disabilities as indicated in the image below.



The Australian Standards and the National Construction Code: Building Code of Australia both provide guidance on the amount of disabled parking required with the former recommending 2% (or 1:50) for commercial/retail precincts and the latter varied as it is linked to the class of building. For the purposes of this assessment, *Australian Standard 2890.5: 2020 Parking facilities Part 5: On-street*

parking has been applied. Part 6 of the Australian Standard for off-street parking does not provide any guidance.

If we consider the CBD to be bound by Bridge and Morris Streets including the rear CBD car parking, there are approximately 175 car spaces with six of those allocated to people with disabilities. This represents 3.4% and satisfies the requirement. Additionally, there is a development presently under assessment at 72 Miller Street (which is outside the considered area) with disabled carparking the topic of ongoing discussions between Council staff and the proponent.

Within Australian Standard 2890, parking for people with disabilities is divided into on-street and off-street parking. In the image above, locations 1, 2, 3, 5 and 6 are all situated in areas set aside for carparks and so the Part 6 (offstreet) standard is considered appropriate while for location 4, Part 5 (on-street) was used to check compliance.

Off-street locations

Applicable excerpts are provided from *Australian Standard Part 6: Off-street parking for people with disabilities* are provided below:

2.2 PARKING SPACES—DIMENSIONS

2.2.1 Angle parking spaces

An angle parking space shall comprise a combination of areas as illustrated in Figure 2.1 as follows:

- (a) A dedicated (non-shared) space as follows:
 - (i) *In Australia*—2400 mm wide by 5400 mm long.
 - (ii) *In New Zealand*—2400 mm wide by 5000 mm long.
- (b) A shared area on one side of the dedicated space as follows:
 - (i) *In Australia*—2400 mm wide by 5400 mm long.
 - (ii) *In New Zealand*—1100 mm wide by 5000 mm long.

It may be entirely on the left or entirely on the right side of the dedicated space.
- (c) A shared area 2400 mm long by 2400 mm wide at one end of the dedicated space. It may be entirely at the front or entirely at the rear of the dedicated space.
- (d) The dedicated space and the shared area shall be at the same level.
- (e) *In Australia only*—bollards shall be provided in the positions shown in Figures 2.2 and 2.3.
- (f) The angle-parking angle shall be between 45 degrees and 90 degrees. It is not required that all spaces within a car park be at the same parking angle.

NOTE: Examples of angle parking spaces are shown in Figures 2.2 and 2.3.

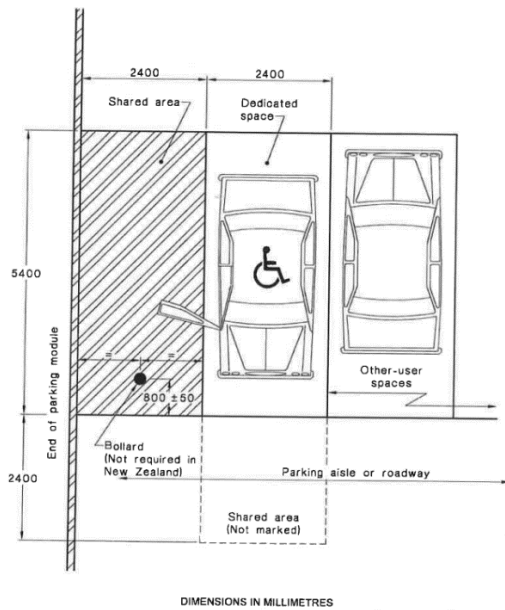


FIGURE 2.2 EXAMPLE OF AN ANGLE PARKING SPACE WITH SHARED AREA ON ONE SIDE ONLY—DIMENSIONS FOR AUSTRALIA ONLY*

Location 1 – near temporary toilets: presently there are two accessible parking spaces available (3m x 4.8m). Non-compliance issues arise with the absence of a shared area for either of the spaces as currently marked spaces are actually rear accesses to properties and have been marked as such to prevent parked cars from blocking these.

It should be noted that these spaces were temporarily relocated to make way for the temporary toilets. Once the toilets are removed, this will allow for a fully compliant disabled single space to be installed. A bollard (800mm high) is required in the shared area for compliance.

Location 2 – frontage of IGA: there are two accessible parking spaces available (2.8m x 4.8m) on either side of the IGA entrance. Since the parking spaces are adjacent to the pedestrian area, adequate shared area is available for both spaces.

However, the dedicated space and the shared area are not at the same level with the pedestrian area slightly elevated when compared to the parking spaces and small ramp-like structures on either side of the area to facilitate accessibility. The accessible parking spaces could be raised to be level with the pedestrian area to remove the non-compliance. Alternatively, two regular parking spaces on the sides of the accessible spaces may be converted to shared spaces, which would be on the same level. This would result in a loss one or two normal car spaces depending on how they were configured.

Location 3 – IGA carpark adjacent to the Community Plaza: there are two accessible parking spaces available (3.2m x 5m). However, there is no shared area to allow ease of egress and access for either of the parking spaces. Additionally, arrow markings for vehicles moving through the carpark are close to the rear of the spaces, which suggests that the rear shared space requirement is also unsatisfied.

The total number of parking spaces at the IGA retail complex (covers locations 1, 2 and 3) is 74. Counting the accessible parking spaces in locations 1 and 2, the minimum requirement of 2% is already satisfied. Therefore, one of the accessible spaces could be converted to a shared area with a bollard added to ensure compliance.

Location 5 – behind GAC: This location has one accessible car space, which does not satisfy the minimum dimensions. There are no markings to indicate the dimensions of the parking space with only a sign denoting that it is dedicated to people with disabilities. The lack of a shared area is a further non-compliance.

The space is large enough to accommodate the minimum dimensions but will not fit the additional shared area which is needed for compliance. The space could be reverted to a regular parking space with two regular parking spaces found elsewhere to accommodate compliance. It should be noted that this space is located in the ‘tenants only’ area of the rear CBD but has been included in this audit for completeness.

Location 6 – rear of Library Hub: One accessible parking space (2.5m x 4.8m) is available that is fully compliant.

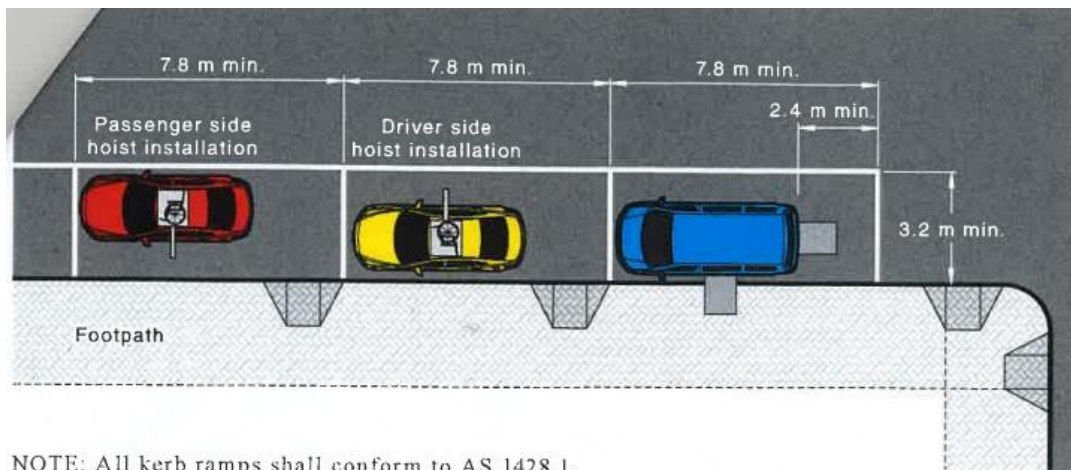
Off-street locations

Relevant excerpts are provided from *Australian Standard Part 5: On-street parking* are provided below:

4.5.2 Parking space design requirements

Parking spaces for use by people with disabilities shall conform with the following:

- (a) *Pavement requirements* — A parking space shall consist of an unobstructed area having a firm plane surface, all at the one level, with a fall not exceeding 1:40 in either the direction of parking or at 90° to it, or 1:33 if the surface has a bituminous seal.
- (b) *Provision of kerb ramps* — Accessible parking spaces and shared areas shall incorporate kerb ramps to access pedestrian footpaths in accordance with AS 1428.1. See [Figure 4.2](#) to [Figure 4.7](#) for examples.
- (c) *Provision of accessible path of travel* — A continuous, accessible path of travel in accordance with AS 1428.1 shall be provided between each parking space and the adjacent footpath.
- (d) *Signs* — Parking spaces shall be identified by a parking control sign incorporating the international symbol of access for people with disabilities (refer to AS 1742.11).
- (e) *Pavement markings* — Parking spaces shall be marked in accordance with AS/NZS 2890.6 except where a shared area is on a footpath.
- (f) *Headroom* — The headroom for each accessible parking space shall be at least 2.5 m.



NOTE: All kerb ramps shall conform to AS 1428.1.

Figure 4.2 — Examples of accessible parallel parking without kerb extensions

Location 4 – main street: One accessible parking space is available which does not satisfy the minimum dimensions of dedicated space. For compliance, both width and length would need to be extended. A kerb ramp is also not provided but noting that the rear of the space is adjacent to a driveway, this is a technicality.

As the space sits in along side a driveway, the rear markings could be moved closer to the driveway without obstructing it. The existing 'No Stopping' sign would also have to be moved to align with the rear extent of the parking space. This would satisfy the length requirement. The width markings could be removed and there is sufficient space to the fog line to allow 3.2m minimum width. As a kerb ramp is required, extending the driveway layback could accommodate access to the footpath without using the driveway.

As can be seen above, parking for people with disabilities is challenging because of the dimensions required of the spaces, accessibility to the footpath and shared spaces that all encroach on available space, limiting that for conventional parking. That is not to say its to be dismissed because of these difficulties. Rather, assessing on them on a case-by-case basis may result in an overly simplistic approach that displaces or creates problems elsewhere. It is suggested that a more a holistic assessment of the CBD parking should be undertaken with an opportunity arising with main street beautification project.

<u>Principal Activity</u>	Live
<u>Policy Implications</u>	Nil
<u>Budget Implications</u>	Nil
<u>Delivery Program Actions</u>	4.7.3.2 Support Councillors in their role by by providing information regularly and training as required.

MEETING OF: GILGANDRA SHIRE COUNCIL
HELD ON: 21 NOVEMBER 2024

RECOMMENDATION

That Council note the information provided regarding parking for people with disabilities in the Gilgandra CBD.

Daryl Colwell
Director Infrastructure

SEWER TREATMENT PLANT REPLACEMENT

SUMMARY

To confirm Council's commitment to the replacement of the Gilgandra Sewer Treatment Plant.

.....

The Gilgandra Sewer Treatment Plant is a trickling filter type facility that was constructed in the 1960's. Both sewer pump stations (SPS1 and SPS2) immediately upstream of the treatment plant were constructed at the same time. The plant and pump stations are old technology and have reached the end of their useful life.

Council has been working with the NSW Department of Climate Change, Energy, Environment and Water (DCEEW) through the Safe and Secure Water Program to address this risk. Public Works Advisory (PWA) were engaged to prepare a business case for the replacement of this infrastructure. An estimate of \$16,736,684 was provided by PWA in 2022 for the design and construction of the plant, which was endorsed by Council at the time. DCEEW has recently requested a review of the estimate and PWA have advised that this figure is now around 20,000,000 (\$19,764,405 to be exact).

The funding on a 90% State:10% Council basis. This means Council's contribution would be \$2M with sufficient funds currently held in the sewer reserve.

PWA have anticipated that DCEEW will wish to reaffirm Council's commitment to the project via a Resolution in order to progress through the funding gateway. The purpose of this report is to gain such a commitment.

<u>Principal Activity</u>	Live
<u>Policy Implications</u>	Nil
<u>Budget Implications</u>	Council has sufficient funds in the sewer reserve to meet the 10% contribution.
<u>Delivery Program Actions</u>	1.2.1.1 Progress design and construction of a new sewer treatment plant for Gilgandra.

RECOMMENDATION

That Council reaffirm its commitment to replacing the Gilgandra Sewer Treatment Plant and allocate \$2M from the sewer fund as its contribution.

Daryl Colwell
Director Infrastructure

**2024/25 QUARTERLY OPERATIONAL PLAN REVIEW Q1 1 JULY TO 30
SEPTEMBER 2024**

SUMMARY

To consider progress with Council's 2024/25 Operational Plan during Q1 1 July 2024 to 30 September 2024.

.....

Separately enclosed with this business paper is the 2023/24 Operational Plan Review document for Q1 1 July 2024 to 30 September 2024.

Highlights for the Quarter by Community Strategic Plan theme include:

Live

- 2.5km National Park Road now complete. Work is ongoing under Fixing Local Roads Program.
- Planning for reseals on John Renshaw Parkway later in the year for Block Grant program for regional roads.
- Design of the new Sewer Treatment Plant is 90% complete. Tender documents currently being worked on.
- The Gilgandra Lifestyles Advisory Board assessed risk and actioned appropriately. Clinical risks were managed utilising the skills and experience of the sound clinical team. Aged Care governance and clinical governance advisors formally contracted to advise for the forthcoming twelve months and are considered industry experts. All other governance requirements met
- One drop in support client receiving care with Orana Living is finalizing a move into a unit where care will be maintained as per his current support.
- Toggle Use introduction for Early Morning Lap Swimmers at Gilgandra Swimming Pool
- 934 visits to Gilgandra Fitness Centre in September 2024
- Interagency meeting held 22 August with 20 people attending representing 16 services.
- Health Vision completed.
- CLIRP grant finalisation optimising communications network.

Enjoy

- University of Newcastle Institute for Regional Futures were appointed to develop the Youth Strategy and engagement has commenced.
 - Get NSW Active funding received for Active Transport Strategy.
 - 2,702 hard copy loans at Gilgandra Shire Library, 752 digital loans 2,999 visitors to the space and 22 new members for this quarter.
-

- 107 children and 48 adults attends 11 Storytime and Baby Rhymetime sessions. 23 children's programs run for 215 children and 144 adults participation. 6 adult programs run for 48 adults.
- Six of the planned School Holiday Program for September/October had full participation
- 9,887 visitors to the Coo-ee Heritage Centre for the quarter. 594 overnight parking visitors.
- Gilgandra Art Gallery booked out for 2025 showcasing local and regional artists.
- Joy Trudgett Gallery winner of the Local Government Leo Kelly OAM Arts and Culture Award 2024.
- \$10,000 value for two projects funded under the Local Heritage Fund.
- Goin' to Gil Weekend and Under the Gums Festival 27 – 29 September 2024. Over 3,000 tickets, with 43% from outside of the 2827, 2817 and 2828 postcodes. More than 60 floats in the Goin' to Gil Street Parade, 400+ attendees at the Show and Shine and Swap meet, over 100 entrees into the activities including Watermelon Eating, Coo-ee Call and Windmill Run Walk and Talk; 25 stall holders in the CWA Markets Sunday morning.
- Get NSW Active funding received for \$532,477 for the Real Country Windmill Walk extension

Grow

- \$1,800 into local business for #LocalLegends Father's Day promotion.
- Aero Park Estate next stage lots released for sale.
- Planning Proposal to rezone land for industrial purposes in final stages, mapping and instrument drafting with Department of Planning
- 10 new DAs lodged during Q1. Average lodgement days – 9, with 80% meeting state government expectation of 14 day lodgement. Total development value \$6,051,015.

Lead

- 15 positions advertised, 11 successfully filled.
 - 10 Council staff attended Coonamble Shire Council Safety Day
 - Tender documentation for new ERP system, Customer Service review, Nurse Call system and Server Refresh project.
 - Cyber Security, Password Policy, Patch Management, Cyber Security manual drafted including AI policy, Mobile device management policy draft.
 - Plans of Management for Crown Lands have been drafted.
 - 8 grant submissions lodged.
 - Ongoing management, current cell nearing capacity at Gilgandra Waste Facility. Recently accepted quotation to undertake works in current cell and
-

future cell to prepare for use. Recently crushed approx. 2,500 tonnes concrete for reuse on-site for stabilisation of drop-off areas and in future cell works to create access ramp. Ongoing separation of recyclable material to divert material from landfill.

<u>Principal Activity</u>	Lead
<u>Policy Implications</u>	Nil
<u>Budget Implications</u>	Actions delivered in line with 2024/25 budget.
<u>Delivery Program Actions</u>	4.3.2.1 Review Council's Integrated Plans in line with NSW State Government guidelines

RECOMMENDATION

That the 2024/25 Operational Plan Review for Q1 1 July to 30 September 2024 be adopted.

Neil Alchin
Director Growth and Liveability

QUARTERLY BUDGET REVIEW 30 SEPTEMBER 2024

SUMMARY

To detail the variances to the original estimates for the 2024/25 financial year as presented in the Quarterly Budget Review as at 30 September 2024. In addition, to report as to whether the Quarterly Budget Review indicates that the financial position of Council is satisfactory, having regard to the original estimates adopted by Council.

.....

List of Budget Changes Previously Adopted by Council

Note	Description	When Done	Income Change	Expense Change	Resp.
	<i>Total General Fund</i>		<i>nil</i>	<i>nil</i>	
	<i>Total Gilgandra Shire Council</i>		<i>nil</i>	<i>nil</i>	

Result

The overall result for General Fund for this review as at 30 September 2024 is a \$11,177 decrease to the estimated deficit at year end to an estimated result of a \$454,954 deficit (depreciation not included).

Water Fund has a \$6,157 decrease to the estimated deficit at year end to an estimated result a \$71,959 deficit (depreciation not included).

Sewer Fund has a \$4,091 increase to the estimated surplus at year end to an estimated result of a \$322,143 surplus (depreciation not included).

Orana Living has a \$370,555 decrease to the estimated deficit at year end to an estimated result a \$30,446 deficit (depreciation not included).

Carlgingda Enterprises no change to the estimated result at year end of an \$18,372 surplus (depreciation not included).

Cooee Villa Units has a \$10,166 increase to the estimated surplus at year end to an estimated result of a \$199,020 surplus (depreciation not included).

Home Care Packages has no change to the estimated surplus at year end of a \$60,016 surplus (depreciation not included).

Cooee Lodge Hostel has a \$253,841 improvement to the original estimated deficit at year end to an estimated result of a \$253,403 surplus (depreciation not included).

Jack Towney Hostel has a \$51,591 increase to the estimated surplus at year end to an estimated result of a \$66,883 surplus (depreciation not included).

The overall result for this review as at 30 September 2024 is a \$707,578 decrease to the estimated deficit at year end for Council as a whole to an estimated result of a \$414,478 surplus (depreciation not included).

Details - Notes

The following notes are to be read in conjunction with the Quarterly Budget Review documents and contain a detailed description of the major variances to Council's budget. These changes are listed in the variance columns.

GENERAL FUND

Note 1101 (page 2)

Wages & Other Employee Costs

\$25,000 additional expense

Responsible Officer: Director Growth & Liveability

The additional \$25,000 is added to the Organisational Review line to cover the cost of a Customer Services Executive Review.

Note 1103 (page 2)

Administration Expenses

\$19,887 additional expense

Responsible Officer: Director Growth & Liveability

There are two changes being an additional \$7,887 (from \$227,218 to \$235,105) in insurance premium cost and an additional \$12,000 (from \$0 to \$12,000) for phone costs as this allocation was not included in the original 24/25 budget.

Note 1124 (page 2)

Plant Running Expenses

\$14,321 additional expense

Responsible Officer: Director Infrastructure

The additional cost is due to an increase in the 24/25 insurance premium for the plant fleet (from \$72,575 to \$86,896).

Notes 1125 to 1129 (page 2)

Employee Overhead Costs

\$445,913 less expense

Responsible Officer: Director Growth & Liveability

The savings of \$445,913 is the result of a review of Council's workers compensation premium for 24/25. The estimated premium was \$1,332,426 but, after requesting a review, this was reduced to \$886,513. However, this is offset by a transfer to reserves on page 10 of the same amount to cover an expected increase in 25/26.

Note 1141 (page 2)

Administration Expenses

\$15,000 additional expense

Responsible Office: Executive Manager Transformational Change

An additional \$15,000 is required to cover the cost of the Audit Risk and Improvement Committee. This cost was not included in the original budget for 24/25.

Note 1304 (page 3)

Development Income

\$679 less expense

Responsible Officer: Director Growth & Liveability

A small amount of \$679 was included in the budget for commission gained on the collection of the long service levy in development applications. The commission portion has now been removed.

Note 1401 (page 4)

Domestic Waste Management Expenses

\$41,000 additional expense

Responsible Officer: Director Growth & Liveability

The additional \$41,000 is included to undertake concrete crushing. This activity was not budgeted for but an opportunity has arisen. This will be the first time Council has done this for 12 years and the finished product can be used in the cell works which will reduce the need for aggregate to be purchased.

This amount is offset by a transfer from reserves on page 10.

Note 1500 (page 5)

Wages & Other Employee Costs

\$25,000 additional expense

Responsible Officer: Director Aged Care & Disabilities

Additional funds required for an additional staff member who is working 2 days per week.

Note 1501 (page 5)

Community Services Administration Expenses

\$2,000 additional expense

Responsible Officer: Director Aged Care & Disabilities

There is an additional \$4,000 required for Grow Worx costs that were from 23/24 but carried over into 24/25 and an expected \$2,000 savings in administration costs.

Notes 1510 & 1511 (page 5)

Gilgandra Youth Services Income & Expenses

\$25,000 less income

\$51,440 additional expense

Responsible Officer: Director Growth & Liveability

The income reduction is due to funding that was included in the original budget that will not be forthcoming in 24/25. The additional expenses are \$49,440 for the Youth Strategy which is offset by a transfer from reserves of the same amount on page 10 and \$2,000 for insurance premium cost.

Note 1520 (page 5)

Gilgandra Community Care Expenses

\$31,861 less expense

Responsible Officer: Director Aged Care & Disabilities

The changes here are as follows:

- Additional \$26,244 in wages
- Additional \$11,895 in volunteer costs
- Less \$70,000 in client services costs

The reduction in expense is offset by a reduced transfer from reserves on page 10.

Notes 1522 & 1523 (page 5)

Gilgandra Community Transport Income & Expenses

\$10,000 less income

\$35,000 less expense

Responsible Officer: Director Aged Care & Disabilities

Client fees have been reduced by \$10,000 (from \$16,264 to \$6,264) and this is a reflection of reduced usage of the service. Also, wages have been reduced by \$35,000 (from \$77,417 to \$42,417) which offsets the increase in wages for Community Care above.

Note 1601 (page 6)

Housing Expenses

\$3,000 additional expense

Responsible Officer: Director Growth & Liveability

A small increase in the maintenance costs based on the actuals up to 30th September.

Notes 1611 & 1612 (page 6)

Medical Centres Expenses & Dentist Expenses

\$4,800 additional expense

\$5,000 less expense

Responsible Officer: Director Growth & Liveability

A transfer of costs relating to cleaning with an overall reductions in expenses of just \$200.

Note 1651 (page 6)

Street Lighting Expenses

\$30,000 less expense

Responsible Officer: Director Infrastructure

The cost of street lighting has reduced since the installation of LED lights. As a result, it is expected that savings of \$30,000 will be realised.

Note 1760 (page 7)

Heritage Income

\$5,000 additional expense

Responsible Officer: Director Growth & Liveability

Due to an increase in funding.

Notes 1901 & 1902 (page 8)

Gravel Pits Income & Expenses

\$30,000 additional income

\$30,000 additional expense

Responsible Officer: Director Infrastructure

An increase in expected income due to usage which is offset by an increase in expenses of the same amount.

Note 1941 (page 8)

Roads to Recovery Expenses

\$188,830 less expense

Responsible Officer: Director Infrastructure

Additional expense carried over from the previous year that is offset by a transfer from reserves of the same amount on page 10.

Note 1981 (page 8)

Aerodromes Expenses

\$30,000 additional expense

Responsible Officer: Director Infrastructure

The additional \$30,000 requested is for works at the Gilgandra aerodrome that have been previously committed to in exchange for TAAF.

Notes 2015 & 2016 (page 9)

Economic Development Income & Expenses

\$81,850 additional income

\$35,452 less expense

Responsible Officer: Director Growth & Liveability

An additional.

Note 2801 (page 9)

Financial Assistance Grant

\$4,757,486 less income

Responsible Officer: Director Growth & Liveability

The Federal Government prepaid the 24/25 allocation in June. The reduced income of \$4,757,486 is offset by a transfer from reserves on page 10 of \$4,673,979 with the remaining \$83,507 being a reduction in the funding compared to the budget estimate.

The actual grant amount allocated or 24/25 is \$5,532,426 (including the prepayment). The budget was calculated on the 23/24 allocation of \$5,374,099 plus an increase of 4.50%, which was the rate peg, for a total of \$5,615,933.

The actual increase from 23/24 is \$158,327 which is an uplift of 2.94%.

Notes 2900 & 2901 (page 10)

Transfers from & to Reserves

\$8,374,280 additional income

\$470,913 additional expense

The following are the transfers from reserves for this budget review:

- Graincorp Reimbursement of Costs: \$8,673 less income as the actual amount of the reserve is \$197,327.
- Waste Facility: \$106,000 additional income which is offset by additional capita expense of \$65,000 on page 11 and additional operating expense of \$41,000 on page 4.
- Gilgandra Community Care: \$31,861 less income which is offset by less operational expense on page 5.
- Infrastructure Contributions: \$15,000 less income which is offset by reduced operating expenses on page 3.
- IT Upgrades: \$387,595 less income which is offset by less capital expense on page 11.
- Childcare Strategy: \$14,900 additional income which is offset by additional capital expense on page 11.
- Library Capital: \$12,371 additional income which is offset by additional capital expense on page 11.
- Community Building Partnerships: \$87,505 additional income which is offset by additional capital expense on page 11.
- SCCF Rounds 4 & 5: \$766,824 additional income which is offset by additional capital expense (\$383,412 x 2) on page 11.
- Roads to Recovery: \$188,830 additional income which is offset by additional operating expense on page 8.
- Financial Assistance Grant: \$4,673,979 additional income which is offset by less operating income on page 9.
- Open Street Program Grant: \$100,000 additional income
- Project Costs – Economic Development: \$13,950 additional income
- Fixing Local Roads Round 3: \$683,763 additional income which is offset by additional capital expense (Seal National Park Rd – Stage 1) on page 11.
- LRCI Round 4 Part B: \$554,060 additional income which is offset by additional capital expense (Seal National Park Rd – Stage 1) on page 11.
- Infrastructure Betterment Fund (Baronne Creek): \$225,000 additional income which is offset by reduced capital income on page 11.
- Aeropark Subdivision: \$140,000 additional income which is offset by additional capital expense on page 11.
- Youth Strategy: \$49,440 additional income which is offset by additional operating expense on page 5.
- Library Grant: \$66,416 additional income which is offset by additional operating expense on page 7.
- Business Case Strategy & Development Fund: \$21,000 additional income to offset additional capital expense on page 11.
- It's GREAT Program: \$37,028 additional income which is offset by additional capital expense on page 11.
- Miller Street Plaza: \$10,381 additional income which is offset by additional capital expense expense on page 11.

- LRCI Rounds 1, 2 & 3: \$65,247 additional income which is offset by additional capital expense on page 11.
- Local Roads (National Park Rd): \$985,715 additional income which is offset by additional capital expense (Seal National Park Rd) on page 11.

The following are the transfers to reserves for this budget review:

- Workers Compensation Premium: \$445,913 additional expense which is offset by less operating expense on page 2.
- Gilgandra Community Transport: \$25,000 additional expense which is offset by less operating expense on page 5.

Note 2903 (page 11)

Capital Income

\$2,002,428 additional income

Local Roads & Community Infrastructure

\$324,384 additional income. This additional funding will partly fund the capital works for the Baronne Creek project.

Infrastructure Betterment Fund

\$225,000 less income. Half of the funding (\$225,000) was received last year. The budget change is offset by a transfer from reserves on page 10.

Contribution from JTH for Aged Care Accommodation

\$456,000 additional income. A cash contribution from Jack Towney Hostel towards the aged care accommodation project which will leave the final Council contribution at \$2,000,000. This is offset by an additional cost within the Jack Towney Hostel budget.

Waste Facility

\$100,450 additional income. This is funding that should have been received in 23/24 for works that were completed then.

Library

\$173,796 additional income. This is the total of the following:

- \$114,483 for Regional Cultural Fund
- \$48,273 for BBRF
- \$11,040 for SCCF Round 3

The total partially offsets the additional capital expense on page 11.

Gilgandra Speedway

\$525,154 additional income. Funding Received on behalf of the Speedway Club that is offset by additional capital expenses of the same amount on page 11.

Get NSW Active

\$199,782 additional income. Funding that has been approved for the Active Transport Strategy and the extension of the Windmill Walk and is offset by additional capital expenses for those projects on page 11.

Business Case Strategy & Development Fund

\$97,862 additional income. The remaining funding allocation for the project that is partly offset by additional capital expenses of \$26,914 on page 11. The remaining \$70,948 was spent in 23/24.

Regional Drought Resilience Program

\$350,000 additional income. The remaining funding allocation for the project that is partly offset by additional capital expenses of \$277,141 on page 11. The remaining \$72,859 was spent in previous years.

Note 2904 (page 11)

Capital Expenditure

\$5,382,386 less expense

The following are the capital variance explanations:

Childcare Strategy

\$14,900 additional expense that is offset by a transfer from reserves on page 10.

Active Transport Strategy & Real Country Windmill Walk Extension

\$66,662 & \$133,120 additional expense that is offset by additional grant funding of \$199,782 for Get NSW Active.

Aged Care Accommodation

\$456,000 additional expense to get the project started. It is offset by additional capital income of the same amount.

SASS Round 2 – Miller St Plaza Upgrades

\$10,381 additional expense that is offset by a transfer from reserves.

Waste Facility

\$65,000 additional expense that is required to complete the new cell. It is offset by a transfer from reserves.

Library Capital

\$12,371 additional expense that is offset by a transfer from reserves.

IT Capital

\$387,595 less expense that is offset by a reduced transfer from reserves. The amount spent in 23/24 was more than anticipated and resulted in a lesser amount transferred to reserves.

Library Upgrade

\$503,796 additional expense. There is more work required to complete the project. The additional grant funding of \$173,796 partly funds the additional cost but the remaining \$330,000 is unfunded.

It's GREAT Program

\$37,028 additional expense that is offset by a transfer from reserves.

Gilgandra Speedway

\$525,154 additional expense. The Speedway Club have been successful in obtaining funding to replace the concrete track wall. Council will be managing the project. The cost is offset by grant income of the same amount.

Local Roads & Community Infrastructure Program

\$65,247 additional expense that is offset by a transfer from reserves.

SCCF Rounds 4 & 5

Combined \$766,824 (\$383,412 x 2) additional expense that is offset by a transfer from reserves.

Aeropark Subdivision

\$261,521 additional expense to complete the project and is partly offset by a \$140,000 transfer from reserves with the remaining \$121,521 being Council's contribution if needed.

Regional Drought Resilience Program

\$277,141 additional expense. The remaining grant funding for the program is \$350,000 with the difference of \$72,859 being additional income for 24/25 as it had been spent in 23/24.

Business Case & Strategy Development Fund

\$26,914 additional expense that is offset by additional capital income of \$97,862 with the difference of \$70,948 being additional income for 24/25 as it had been spent in 23/24.

Seal National Park Rd – Stage 1

\$2,547,922 additional expense that is offset by the following:

- Fixing Local Roads Round 3 transfer from reserves of \$683,763
- LRCI Round 4 Part B transfer from reserves of \$554,060
- Local Roads transfer from reserves of \$985,715
- Local Roads & Community Infrastructure additional capital grant of \$324,384

Note 3000 (page 14)

WATER SUPPLY

\$6,157 less expense

Responsible Officer: Director Infrastructure

The only change is a \$6,157 reduction (from \$36,578 to \$30,421) in the annual insurance premium.

Note 4000 (page 15)

SEWERAGE SERVICES

\$4,091 less expense

Responsible Officer: Director Infrastructure

The only change is a \$4,091 reduction (from \$22,608 to \$18,517) in the annual insurance premium.

Note 5000 (page 16)

ORANA LIVING

\$5,000 additional income

\$365,555 less expense

Responsible Officer: Director Aged Care & Disabilities

The additional \$5,000 in income is due to a client moving into 63 Waugan Street that will be paying rent.

The reduced expenses are made up of the following:

- \$300,000 allocation for Grow Worx has been removed.
- \$65,555 reduction (from \$165,555 to \$100,000) in lodging costs.

Note 6000 (page 17)

CARLGINDA ENTERPRISES

Responsible Officer: Director Aged Care & Disabilities

There are no changes.

Note 7000 (page 18)

COOEE VILLA UNITS

\$10,166 less expense

Responsible Officer: Director Aged Care & Disabilities

The only change is a \$10,166 reduction (from \$72,000 to \$61,834) in the annual insurance premium.

Note 7500 (page 19)

HOME CARE PACKAGES

Responsible Officer: Director Aged Care & Disabilities

There are no changes.

Note 8000 (page 20)

COOEE LODGE

\$200,000 additional income

\$53,841 less expense

Responsible Officer: Director Aged Care & Disabilities

The original budget was prepared using conservative occupancy numbers of residents. The current occupancy is 100% and has a rolling average above 98% budget was prepared on 95% occupancy.

Higher occupancy and higher ANACC funding has resulted in an improvement in income. Concise and timely clinical care reviews has resulted in ANACC

adjustments resulting in some care recipients receiving higher funding to meet their care needs.

The expenses have been adjusted across the board with an overall decrease in operating costs of \$103,841. This is due mainly to a reduction of administration costs for wages.

There is an additional \$50,000 in capital expenses for the Nurse Call Bell System which is expected to be at a higher cost than the original budget.

Note 8500 (page 21)

JACK TOWNEY HOSTEL

\$490,000 additional income

\$438,409 additional expense

Responsible Officer: Director Aged Care & Disabilities

The additional income is made up of \$34,000 in additional funding that has been advised and \$456,000 for an additional transfer from reserves to cover the cost of the contribution to General Fund for the aged care accommodation project.

The changes to the expenses are as follows:

- \$7,000 additional expense for training.
- \$104,591 less expense for Grow Worx and insurance costs.
- \$30,000 additional expense for equipment and flexi home care.
- \$506,000 additional capital expense being \$456,000 for the contribution to General Fund and \$50,000 for a grounds beautification project.

Finance Manager's Comments / Recommendations

General Fund

The original budget estimate for General Fund was an end of year result of a \$466,131 deficit (depreciation not included). This review indicates an estimated result of a \$454,954 deficit (depreciation not included) which is an improvement of \$11,177.

This result should be viewed as being satisfactory compared to the original budget.

Water Fund

The original budget estimate for Water Fund was an end of year result of a \$78,116 deficit (depreciation not included). This review indicates an estimated result of a \$71,959 deficit (depreciation not included) which is an improvement of \$6,157 and should be viewed as being satisfactory compared to the original budget.

Sewer Fund

The original budget estimate for Sewer Fund was an end of year result of a \$318,052 surplus (depreciation not included). This review indicates an estimated result of a \$322,143 surplus (depreciation not included) which is an improvement of \$4,091 and should be viewed as being satisfactory compared to the original budget.

Orana Living

The original budget estimate for Orana Living was an end of year result of a \$401,001 deficit (depreciation not included). This review indicates an estimated result of a \$30,446 deficit (depreciation not included) which is an improvement of \$370,555 and should be viewed as being satisfactory compared to the original budget.

Carlginda Enterprises

The original budget estimate for Carlginda Enterprises was an end of year result of an \$18,372 surplus (depreciation not included). This review indicates an estimated result of an \$18,372 deficit (depreciation not included) which is no change to the estimated budget. This result should be viewed as being satisfactory compared to the original budget.

Cooee Villa Units

The original budget estimate for Cooee Villa Units was an end of year result of a \$188,854 surplus (depreciation not included). This review indicates an estimated result of a \$199,020 surplus (depreciation not included) which is an improvement of \$10,166. This result should be viewed as being satisfactory compared to the original budget.

Home Care Packages

The original budget estimate for Home Care Packages was an end of year result of a \$62,016 surplus (depreciation not included). This review indicates an estimated result of a \$60,016 surplus (depreciation not included) which is no change to the estimated budget. This should be viewed as being satisfactory compared to the original budget.

Cooee Lodge

The original budget estimate for Cooee Lodge was an end of year result of a \$438 deficit (depreciation not included). This review indicates an estimated result of a \$253,403 surplus (depreciation not included) which is an improvement of \$253,841 and should be viewed as being satisfactory compared to the original budget.

Jack Towney Hostel

The original budget estimate for Jack Towney Hostel was an end of year result of a \$15,292 surplus (depreciation not included). This review indicates an estimated result of a \$66,883 surplus which is an improvement of \$51,591. This result should be viewed as being satisfactory compared to the original budget.

Overall Position

The original budget estimate for Gilgandra Shire Council was an end of year result of a \$343,100 deficit (depreciation not included). This review indicates an estimated result of a \$364,478 surplus (depreciation not included) which is an improvement of \$707,578. This result should be viewed as being satisfactory compared to the original budget.

Estimated Financial Performance Indicators

The ratios for 2022/23 and 2023/24 are actual ratios for Council's information while those for 2024/25 are an estimate only until the financial statements are completed and are subject to change.

	Benchmark	2024/25	2023/24	2022/23
Operating Performance Ratio	> 0.00%	2.52%	8.30%	7.42%
Own Source Revenue Ratio	> 60.00%	65%	60.25%	53.84%
Unrestricted Current Ratio	> 2.00:1	3.85:1	4.85:1	3.84:1
Debt Service Cover Ratio	> 3.00 x	7.00 x	14.54 x	7.33 x
Rates & Charges Outstanding	< 10.00%	10.00%	12.74%	10.30%
Cash Expense Cover Ratio	> 6.00 x	11.00 x	10.71 x	10.93 x
Building & Infrastructure Renewal Ratio	> 100.00%	95.00%	74.68%	74.22%
Infrastructure Backlog Ratio	< 2.00%	1.00%	0.90%	1.47%
Asset Maintenance Ratio	> 100.00%	100.00%	154.09%	93.02%

Principal Activity	Lead
Policy Implications	Nil
Budget Implications	Review of Annual Budget
Delivery Program Actions	4.3.3.1 Prepare annual Budgets, Long Term Plan Reviews, Quarterly Budget Reviews and Annual Statements and place investments in line with legislative requirements and Council policy.

RECOMMENDATION

That, subject to any decisions regarding the variances as reported, the Quarterly Budget Review document and report as at 30 September 2024 be adopted.

Neil Alchin
Director Growth and Liveability

AUDIT RISK, IMPROVEMENT COMMITTEE

SUMMARY

To provide Council with an update on the Auditor General's comments made during the NSW Auditor General Local Government ARIC Leadership Forum on 29 July 2024.

.....

The Chair of the Audit Risk Improvement Committee (ARIC) attended the NSW Auditor General Local Government ARIC Leadership Forum on Monday 29 July 2024.

The issue of RFS Assets was covered by the Auditor General (AG), with the two main points being:

- 1) AG now have new data from RFS which they intend to use to resolve the audit issues and clear qualifications.
- 2) AG will be collaborating with councils for efficient resolution on completeness and accuracy.

Other issues covered by the AG were Audit Fees and Valuations.

One particular item that the AG spent time on and I want to draw to ARIC's attention is, the 5 Focus Areas for upcoming Council audits are as follows:

- 1) Long Term Financial Planning and Sustainable Financial Management
- 2) Managing Climate risks to assets and services
- 3) Performance Management and monitoring councils Code of Conduct
- 4) Waste Management
- 5) Governance issues in particular councils

<u>Principal Activity</u>	Lead
<u>Policy Implications</u>	Nil
<u>Budget Implications</u>	Nil
<u>Delivery Program Actions</u>	4.3.1.1 Ensure all governance targets and statutory requirements are met in line with relevant Acts and Regulations and Council policy.

RECOMMENDATION

That the report be noted.

David Neeves
General Manager

CALENDAR OF COMPLIANCE UPDATE

SUMMARY

To advise Council of its current compliance with the Office of Local Government's Calendar of Compliance and Reporting Requirements 2024/25 in accordance with the *Local Government Act 1993* and related policies.

.....

Councils are required to submit several reports and returns/surveys annually, as required by the *Local Government Act 1993* and by OLG policy. The Integrated Planning and Reporting Framework details the reporting requirements that are mandated in the *Local Government Act*.

The Calendar of Compliance includes key deadlines for strategic management tasks for all councils and Joint Organisations in NSW (*see attached*).

Please note that the attached Calendar of Compliance still references the repealed *Public Interest Disclosures Act 2013* rather than the current *Public Interest Disclosures Act 2022*, so the sections are not correctly referenced. However, the requirements remain the same.

It is also important to note that Council is not involved with the Local Infrastructure Renewal Scheme (LIRS). However, Council has met its requirements for reporting under the *Local Government Recovery Grants*.

Council is not a designated Rehoming Organisation for the purposes of the *Companion Animals Regulation 2018*. Therefore, the requirement for the Rehoming Organisations Annual report does not apply.

Council is compliant for the financial year of 2024/25 to date.

<u>Principal Activity</u>	Lead
<u>Policy Implications</u>	Nil
<u>Budget Implications</u>	Nil
<u>Delivery Program Actions</u>	4.3.1.1 Ensure all governance targets and statutory requirements are met in line with relevant Acts and Regulations and Council policy.

RECOMMENDATION

That the report be noted.

David Neeves
General Manager

CODE OF MEETING PRACTICE

SUMMARY

To advise of the current Model Code of Meeting Practice for Local Councils in NSW 2021.

.....

Council's current Code of Meeting Practice is attached to this report. The Model Code of Meeting Practice (the Code) underwent extensive changes in 2021 after the Office of Local Government released a new Model Code of Meeting Practice.

This Model Code of Meeting Practice for Local Councils in NSW (the Model Meeting Code) is made under section 360 of the *Local Government Act 1993* NSW (the Act) and the *Local Government (General) Regulation 2005* NSW (the Regulation).

This code applies to all meetings of councils and committees of councils of which all the members are councillors (committees of council). Council committees whose members include persons other than councillors may adopt their own rules for meetings unless the council determines otherwise.

Currently the Code of Meeting Practice can be accessed on Council's website via the following link:

<https://www.gilgandra.nsw.gov.au/Your-Council/About-Council/Council-Meetings>

The Office of Local Government has published 'Councillor Conduct and Meeting Practices – A New Framework' which sets out proposed changes to the current Code of Meeting Practice Framework for Local Government. It focuses on transparency and the necessary degree of respect in the community for the role that councillors have.

At the time of writing this report, the proposed framework was seeking submissions. However, Councils staff had no major objections to the proposed framework that would warrant a submission. There is considerable industry discussion on what constitute a pre meeting briefing session and a business planning workshop. As the proposed framework is still in the exhibition period, Council will further consider any required amendments to its Code of Meeting Practice if and when the time arises.

<u>Principal Activity</u>	Lead
<u>Policy Implications</u>	Nil at this stage
<u>Budget Implications</u>	Nil
<u>Delivery Program Actions</u>	4.3.1.1

MEETING OF: GILGANDRA SHIRE COUNCIL
HELD ON: 21 NOVEMBER 2024

Ensure all governance targets and statutory requirements are met in line with the relevant Acts and Regulations and Council Policy

RECOMMENDATION

That Gilgandra Shire Council adopt the Code of Meeting Practice be presented.

David Neeves
General Manager

COUNCILLOR AND STAFF INTERACTION POLICY ADOPTION

SUMMARY

To present the draft Councillor and Staff Interaction Policy for consideration and adoption.

.....

A good relationship between councillors and staff is based, in large part, on both having a mutual understanding and respect for each other's roles and responsibilities. These are defined in the *Local Government Act 1993* NSW (LGA) and Council's Code of Conduct.

The Councillor and Staff Interaction Policy provides satisfactory standard of behaviour and processes, incorporating best practice principles. At its core, the policy has three main goals:

1. to establish a framework by which councillors can access the information they need to perform their civic functions;
2. to promote positive and respectful interactions between councillors and staff; and
3. to advise where concerns can be directed if there is a breakdown in the relationship between councillors and staff.

It is a governance requirement of the Office of Local Government (OLG) that Council adopt such policy. The policy presented is as per the model policy prepared by the OLG. Please note the specific inclusion of in schedule 1

<u>Principal Activity</u>	Lead
<u>Policy Implications</u>	New Policy Developed
<u>Budget Implications</u>	Nil
<u>Delivery Program Actions</u>	4.3.1.1 Ensure all governance targets and statutory requirements are met in line with the relevant Acts and Regulations and Council policy

RECOMMENDATION

That the Councillor and Staff Interaction Policy be adopted.

David Neeves
General Manager

FLAGS POLICY - AMENDMENT

SUMMARY

To propose an amendment to Council's Flags policy.

.....

Council has previously, as a general rule, flown the Aboriginal flag during the ANZAC Day Service alongside the Australian flag.

Council staff have reviewed the current Flags policy and it does not currently expressly outline the required flags for the ANZAC Day Service. Please see *attached*.

It is proposed that the Flags policy be amended to include the following:

1. *"War Memorial Precinct"* under the 'Scope' Section; and
2. *"5. That at the ANZAC Day Service both the Australian and Aboriginal flags be flown."* As point 5.

<u>Principal Activity</u>	Grow/Lead
<u>Policy Implications</u>	Amendments, as outlined above, to Council's policy register
<u>Budget Implications</u>	Nil
<u>Delivery Program Actions</u>	2.2.2.1 Maintain positive working relationships with various representative cultural groups 2.2.2.2 Encourage participation of all cultures in activities and events 4.3.1.1 Ensure all governance targets and statutory requirements are met in line with the relevant Acts and Regulations and Council policy

RECOMMENDATION

That the amendments as proposed be adopted.

David Neeves
General Manager

LOCAL GOVERNMENT REMUNERATION TRIBUNAL – 2025 ANNUAL DETERMINATION

SUMMARY

To advise the Local Government Remuneration Tribunal’s review of the 2025 annual determination.

.....

The Local Government Tribunal has advised that it has commenced its review for the 2025 annual determination. Please see attached correspondence.

As outlined in section 241 of the Local Government Act 1993 (LG Act), the Tribunal is required to make an annual determination, on the fees payable to Councillors and Mayors. The determination is to take effect from 1 July 2025.

The minimum and maximum fee levels for each category will be assessed by the Tribunal as part of the 2025 review process. The Tribunal is required to review the categories every three years under section 239 of the LG Act. The Tribunal will next consider the model, the criteria applicable to each group and the allocation of councils in 2026, however, this year, the Tribunal will examine if any councils warrant a recategorisation, due to meeting a category’s criteria outlined in Appendix 1 of the 2024 Determination.

The Tribunal invites submissions from individual councils as part of this review. **It is expected that submissions are endorsed by their respective council.**

Any submission that Council may wish to make should be received no later than 20 December 2024.

<u>Principal Activity</u>	Lead
<u>Policy Implications</u>	Nil
<u>Budget Implications</u>	Nil
<u>Delivery Program Actions</u>	4.3.1.1 Ensure all governance targets and statutory requirements are met in line with the relevant Acts and Regulations and Council policy

RECOMMENDATION

That Council determine any submission to be put forward.

David Neeves
General Manager

ANNUAL REPORT 2023/24 ENDORSEMENT

SUMMARY

To present Council with the Annual Report 2023/24 for Endorsement.

.....

The 2022/23 Annual Report has been prepared in accordance with Sections 428 and 428A of the *Local Government Act 1993* (NSW) and clause 217 of the *Local Government (General) Regulation 2021* (NSW) and is attached to this report.

The Annual Report highlights Council’s achievements and progress against the Community Strategic Plan 2032 outcomes and strategies of Live, Enjoy, Grow, and Lead.

The final audited Financial Statements will be presented as an attachment to the Annual Report when it is made available to the Minister for Local Government by 30 November 2024, as required.

The audited Financial Statements 2023/24 outline the income and expenditure and financial position of Council during this period.

<u>Principal Activity</u>	Lead
<u>Policy Implications</u>	Nil
<u>Budget Implications</u>	Nil
<u>Delivery Program Actions</u>	4.3.1.1 Ensure all governance targets and statutory requirements are met in line with the relevant Acts and Regulations and Council Policy.

RECOMMENDATION

That Council:

1. Endorse the Annual Report 2023/24;
2. Publishes the Annual Report on Council’s Website; and
3. Submits the Annual Report to the Minister for Local Government.

David Neeves
General Manager

STATE OF OUR REGION REPORT 2021-2024

SUMMARY

To present the State of Our Region Report for this term of Council that provides an update to the community on progress towards achieving the objectives of the four key themes identified in the Community Strategic Plan Live > Enjoy > Grow > Lead.

.....

Separately enclosed with this business paper is the 2021/2024 End of Term Report, now named the State of Our Region Report for this Council term.

The State of Our Region Report measures achievements made during this Term of Council against the four key themes identified in the 2017/18-2026/27 Community Strategic Plan, via the implementation of the Delivery Program and Operational Plans (2021-2024).

The four key themes are:

1. *Live*

A community with improved roads and transport network, a community with intergenerational infrastructure facilities and a community where service enhance liveability.

2. *Enjoy*

An active and thriving community, a community that celebrates its culture and heritage, and a region that offers a vibrant tourist destination experience.

3. *Grow*

A region with resilient and innovative businesses, a region growing towards 5,000 population, and a region that capitalises on opportunities for economic growth.

4. *Lead*

An innovative Council that is an employer of choice within the community, a progressive Council, engage with the community, and a Council valued by our community.

The report highlights Council's significant progress towards its objectives across the themes during the previous term of Council.

It should be noted that the State of The Region report was endorsed at the August Council meeting, however Council is obligated to endorse it again during the current Council term.

Principal Activity

Lead

Policy Implications

Nil

Budget Implications

Actions delivered in line with 2021/24 budget.

MEETING OF: GILGANDRA SHIRE COUNCIL
HELD ON: 21 NOVEMBER 2024

Delivery Program Actions

4.3.2.1

Review Council's Integrated Plans in line with
NSW State Government guidelines

RECOMMENDATION

That the State of Our Region Report 2021-2024, as presented, be endorsed.

David Neeves
General Manager

MINUTES – COMMITTEE MEETINGS FOR NOTATION

SUMMARY

To present the following minutes of Committee meetings for notation.

.....

Consultative Committee

5 November 2024

Principal Activity

Lead

Policy Implications

Nil

Budget Implications

Nil

Operational Plan Actions

4.2.1.1

Implement the Community Engagement Strategy to inform, involve, empower, consult and collaborate with stakeholders*

MEETING OF: GILGANDRA SHIRE COUNCIL
HELD ON: 21 NOVEMBER 2024

CONSULTATIVE COMMITTEE

5 November 2024

PRESENT

Mr C Marchant, USU Outdoor Representative
Mr M Foran, USU Outdoor Representative
Mr D Colwell, Management Representative
Mr B Dixon, USU Outdoor Staff Representative
Mrs Kathryn Larkin, Management Representative (for Neil Alchin)
Mrs Donna Dobson, Management Representative

IN ATTENDANCE

Mrs J Eason, People and Culture Manager

Proceedings of the meeting commenced at 9.33am.

APOLOGIES

Mr D Neeves, Management Representative
Mrs M Welsh, Management Representative
Mr G McAnally-Elwin, USU Indoor Representative

COMMITTEE'S RECOMMENDATION – 5/24	B Dixon/D Dobson
That the apologies submitted be accepted.	

ABSENT

DECLARATIONS OF INTEREST

Nil

CONFIRMATION OF MINUTES

COMMITTEE'S RECOMMENDATION – 6/24	D Colwell/C Marchant
That the Minutes of the meeting held 23 April 2024 be confirmed as a true and correct record of the meetings.	

BUSINESS ARISING

It was noted at 23 April 2024 meeting that C Marchant requested a question be added for staff to provide feedback on their supervisor and or organisation. MF asked about the reason why the question's where not included in the revised appraisal questions. JE confirmed she would address this and provide further information at the next meeting.

CHANGE OF AWARD CLASSIFICATION AND NAME

SUMMARY

To advise change of Award Classification of the Case Worker position from the SCHADS (Social, Community, Home Care and Disability Services) Award to the Local Government Award and change of name to Support Worker.

COMMITTEE'S RECOMMENDATION – 7/24	C Marchant /M Foran
That the report be noted.	

POSITION DESCRIPTION

SUMMARY

To present the position description for revised position.

It was noted that this position would benefit from introductory training in Case Management prior to completing Certificate III in Step 4. Position description amended from "knowledge of skills in Case Management" in Step 1 to "commencement of course in Case Management."

COMMITTEE'S RECOMMENDATION – 8/24	C Marchant /M Foran
That the position description, as presented be noted with changes	

RECRUITMENT

SUMMARY

To provide information on recruitment.

COMMITTEE'S RECOMMENDATION – 9/24	B Dixon/D Dobson
That the report be noted	

MEETING OF: GILGANDRA SHIRE COUNCIL
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TRAINING

SUMMARY

To provide information on training.

COMMITTEE'S RECOMMENDATION – 10/23	B Dixon/D Dobson
That the report be noted	

GENERAL BUSINESS

Nil

NEXT MEETING

The next Committee meeting will take place 3 December 2024.

THERE BEING NO FURTHER BUSINESS THE MEETING CLOSED AT 9.48 AM.

K Larkin
Acting Chair

RECOMMENDATION

That the minutes be noted.

David Neeves
General Manager

REPORTS FOR INFORMATION AND NOTATION

SUMMARY

To present reports for information and notation.

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- Statement of Bank Balances (Local Government (Financial Management) Regulation No. 93) and Investment Balances
- Matters Outstanding from Previous Council Meetings
- Questions for Next Meeting
- Development Applications

Any questions which Councillors may have in relation to these reports and/or issues to be raised, should be brought forward at this time.

STATEMENT OF BANK BALANCES AND INVESTMENT BALANCES

SUMMARY

Statement of Bank Balances and Investment Balances
 To present the following information relative to the above report headings:

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1. Statement of Bank Balances (Local Government Financial Management Regulation No.19) – Month of October 2024.
2. Certificate of Bank Reconciliation – Month of October 2024.

Details of investments as at 31 October 2024 (Local Government Financial Management Regulation No.19).

CASH BOOK BALANCE AS AT	30-Sep-24	\$4,777,608.41
Plus: Receipts		\$3,021,410.34
Less: Payments		\$4,781,662.76
CASH BOOK BALANCE AS AT	31-Oct-24	<u>\$3,017,355.99</u>

STATEMENT BALANCE AS AT	30-Sep-24	\$4,776,519.66
Plus: Receipts		\$2,982,384.90
Less: Payments		\$4,730,611.22
STATEMENT BALANCE AS AT	31-Oct-24	<u>\$3,028,293.34</u>

Plus: Unpresented Receipts		\$864.65
Less: Unpresented Payments		\$11,802.00
RECONCILED BALANCE AS AT	31-Oct-24	<u>\$3,017,355.99</u>

Cashbook balance as at 31 October 2024:	\$3,017,355.99
Investments held as at 31 October 2024:	\$33,000,000.00
Total Cash & Investments Held as at 31 October 2024:	<u>\$36,017,355.99</u>

The bank balances in each of the funds as at 31 October 2024 are:

General Fund	\$13,662,383.95
Water Fund	\$3,523,747.42
Sewer Fund	\$3,179,380.25
Orana Living	\$5,349,914.18
Carlinda Enterprises	\$538,948.97
Cocee Villa Units	\$3,701,449.12
Cocee Lodge	\$4,568,551.65
Jack Towney Hostel	\$1,078,847.79
Trust Fund	\$414,132.66

Balance as per Total Cash & Investments Held: \$36,017,355.99

Details of Council's investments are as follows:

(1)	\$1,000,000.00	For 270 days	5.05%	Due 03-Dec-24	With Defence
(2)	\$1,000,000.00	For 365 days	4.65%	Due 04-Sep-25	With Bendigo
(3)	\$1,500,000.00	For 365 days	4.75%	Due 04-Mar-25	With Bendigo
(4)	\$2,000,000.00	For 182 days	5.00%	Due 11-Apr-25	With Bank of Qld
(5)	\$2,000,000.00	For 182 days	4.80%	Due 24-Feb-25	With Bank of Qld
(6)	\$2,000,000.00	For 181 days	4.95%	Due 07-Apr-25	With Bank of Qld
(7)	\$1,000,000.00	For 180 days	5.00%	Due 02-Dec-24	With IMB Bank
(8)	\$2,000,000.00	For 180 days	4.90%	Due 24-Mar-25	With IMB Bank
(9)	\$2,000,000.00	For 120 days	4.85%	Due 23-Jan-25	With IMB Bank
(10)	\$1,000,000.00	For 120 days	5.20%	Due 07-Nov-24	With NAB
(11)	\$2,000,000.00	For 210 days	5.00%	Due 08-May-25	With NAB
(12)	\$3,000,000.00	For 270 days	5.20%	Due 07-Feb-25	With NAB
(13)	\$3,000,000.00	For 333 days	5.20%	Due 22-Apr-25	With NAB
(14)	\$2,000,000.00	For 181 days	5.05%	Due 07-Apr-25	With NAB
(15)	\$1,000,000.00	For 120 days	5.15%	Due 28-Nov-24	With NAB
(16)	\$2,000,000.00	For 182 days	5.35%	Due 06-Jan-25	With NAB
(17)	\$2,000,000.00	For 182 days	5.10%	Due 27-Nov-24	With NAB
(18)	\$2,500,000.00	For 210 days	5.04%	Due 04-Nov-24	With Suncorp
Total					\$33,000,000.00
Investments:					

OUTSTANDING MATTERS FROM PREVIOUS MEETINGS

SUMMARY

To provide an update in relation to matters previously resolved at Council Meetings requiring further action to be taken.

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<u>Res. No.</u>	<u>Subject</u>	<u>Action</u>
<u>July 2022</u>		
141/22	Compulsory Acquisition by Agreement Of Road Reserves and Licence Agreement	No further progress, remains outstanding
<u>April 2024</u>		
46/24	NDIS Advisory Board (Terms of Reference)	Report to this meeting
<u>June 2024</u>		
104/24	Draft Bush Fire Prone Land Map 2024	Report to future meeting for endorsement for the purpose of certification
<u>October 2024</u>		
167/24	Enterprise Lane Lease	Report to future meeting
177/24	Planning Proposal Update – Industrial Land	Report to future meeting once gazettal of the plan is complete

MEETING OF:
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GILGANDRA SHIRE COUNCIL
21 NOVEMBER 2024

DEVELOPMENT APPLICATIONS

Council League Table

As of 1 July 2024, the Department of Planning, Housing and Infrastructure is now publicly monitoring timeframes and expectations set for lodgment and assessment of development applications for all Local Government Areas in New South Wales. This will become a new addition to the monthly Notation Report.

Council is expected to:

1. Lodge DAs within 14 days of submission to the planning portal.
2. Determine DAs (including DAs determined by a local planning panel) as soon as practical and whichever is the lesser of Council's previous financial year average, or within an average of 115 days. Gilgandra previous financial year average was 55 days.

September 2024 – Lodgement Timeframes

Average lodgement days	Number of applications lodged	Number of applications meeting expectation (14-day lodgement)	% of applications meeting expectation (14-day lodgement)	Total development cost
5	3	3	100%	\$131,825

October 2024 – Lodgement Timeframes

Average lodgement days	Number of applications lodged	Number of applications meeting expectation (14-day lodgement)	% of applications meeting expectation (14-day lodgement)	Total development cost
6	6	6	100%	\$3,341,410

MEETING OF: GILGANDRA SHIRE COUNCIL
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September 2024 – Assessment Timeframes

Expectation days*	Average Assessment days	Number of applications assessed	Number of applications meeting expectation	% of applications meeting expectation	Total development cost
55	88	4	3	75	\$431,825

October 2024 – Assessment Timeframes

Expectation days*	Average Assessment days	Number of applications assessed	Number of applications meeting expectation	% of applications meeting expectation	Total development cost
55	46	3	2	67	\$81,352

MEETING OF:
HELD ON:

GILGANDRA SHIRE COUNCIL
21 NOVEMBER 2024

October Development Application Details

The following development applications were approved during October 2024

DA Number	Applicant's Name	Application	Property address	Total Development Cost
2024/544	Merilyn King	Alterations and additions (awning)	33 Miller Street, GILGANDRA	\$21,352
2024/552	Mr Barry Goodwin	Installation of manufactured building	25 Bob Street, GILGANDRA	\$60,000
2024/557	Mr Algie Piekus	Shed	45 Myrtle Street, GILGANDRA	\$15,000
2024/560	Mr Bryce Thomas	Swimming pool	190 Arthursleigh Road, GILGANDRA	\$79,650
			AUGUST	\$176,002
			Total 2024	\$7,728,682.18

Applications Under Assessment

The following development applications are currently under assessment

DA Number	Applicant's Name	Application	Property address	Estimated Development Cost
2024/539	Barnson	9 lot rural residential subdivision	172 Quealeys Road, GILGANDRA	\$407,386
2024/553	Coonamble Aboriginal Health Service Limited	Change of use (medical Centre)	72 Miller Street, GILGANDRA	\$1,863,224.96
2024/555	Gilgandra Shire Council	Alterations and additions (Pergola)	6 Castlereagh Street, GILGANDRA	\$64,350
2024/558	Anglican Property Trust Diocese of Bathurst	Alteration and additions (underpinning)	58 Myrtle Street, GILGANDRA	\$904,200
2024/559	Bradley Archeson	Demolition and new dwelling	35-37 Barden Street, GILGANDRA	\$429,984.92
2021/430/1	SLR Consulting Australia Pty Ltd	Modification to site layout and noise mitigation measures	361 Oxley Highway, GILGANDRA	\$9,534,359.25
			Total under assessment	\$13,203,505.11

RECOMMENDATION

That the reports be noted.

David Neeves
General Manager

MEETING OF: GILGANDRA SHIRE COUNCIL
HELD ON: 21 NOVEMBER 2024

PRECIS OF CATEGORY B CORRESPONDENCE

SUMMARY

To pass on relevant information from correspondence received.

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Documents mentioned are available upon request for any interested Councillors.

1. **CASTLEREAGH MACQUARIE COUNTY COUNCIL MINUTES**

Minutes of the meeting held on 28 October 2024.

2. **COUNTRY MAYORS ASSOCIATION**

Minutes of the meeting held on 9 August 2024.

RECOMMENDATION

That receipt of the Category B correspondence be noted.

David Neeves
General Manager