

Shire of Donnybrook Balingup V1



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Introduction

The Shire's Risk Management policy in conjunction with the components of this document encompasses the Shire's Risk Management Framework. It sets out the Shire's approach to the identification, assessment, management, reporting and monitoring of risks. All components of this document are based on the aim and intent to meet the AS/NZS ISO standards for Risk Management and have been tailored to suit the Shire.

It is essential that all areas of the Shire adopt these procedures to ensure:

- Strong corporate governance,
- Compliance with relevant legislation, regulations and internal policies,
- Integrated Planning and Reporting requirements are met, and
- Uncertainty and its effects on objectives is understood.

This Framework aims to balance a documented, structured and systematic process with the current size and complexity of the Shire.

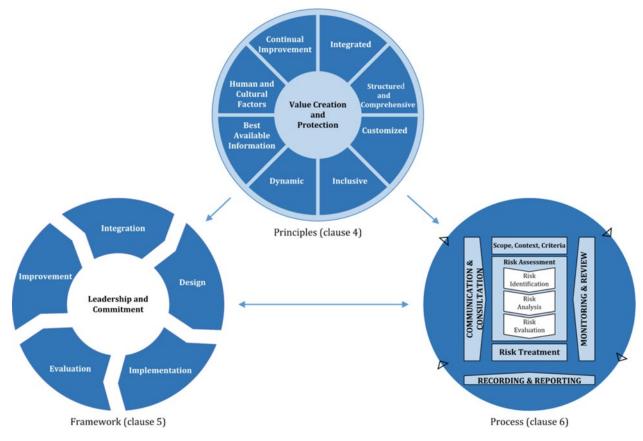


Figure 1: Relationship between the risk management principles, framework and process (Source: ISO 31000:2018)



Governance

Appropriate governance of risk management within the Shire provides:

- Transparency of decision making,
- Clear identification of the roles and responsibilities of the risk management functions, and
- An effective Governance Structure to support the risk framework.

Framework Review

The Risk Management Framework is to be reviewed for appropriateness and effectiveness at least every three (3) years.

Operating Model

The Shire has adopted a "Three Lines of Defence" model for the management of risk. This model ensures roles, responsibilities and accountabilities for decision making are structured to demonstrate effective governance and assurance. By operating within the approved risk appetite and framework, the Council, the Administration and Community will have assurance that risks are managed effectively to support delivery of the Shire's Strategic, Corporate and Operational Plans.

First Line of Defence

All operational areas of the Shire are considered '1st Line'. They are responsible for ensuring that risks within their scope of operations are identified, assessed, managed, monitored and reported. Ultimately, they bear ownership and responsibility for losses or opportunities from the realisation of risk. Associated responsibilities include:

- Establishing and implementing appropriate processes and controls for the management of risk (in line with these procedures),
- Undertaking adequate analysis (data capture) to support the risk decision-making process,
- Prepare risk tolerance proposals where necessary, based on the level of residual risk, and
- Retain primary accountability for the ongoing management of their risk and control environment.

Second Line of Defence

The Chief Executive Officer (CEO) acts as the primary '2nd Line'. This position owns and manages the framework for risk management. They draft and implement the governance procedures and provide the necessary tools and training to support the 1st line process.

Maintaining oversight on the application of the framework provides a transparent view and level of assurance to the 1st and 3rd lines on the risk and control environment. Support can be provided by additional oversight functions completed by other 1st Line Teams (where applicable).





Additional responsibilities include:

- Providing independent oversight of risk matters as required,
- Monitoring and reporting on emerging risks, and
- Co-ordinating the Shire's risk reporting for the CEO & Senior Leadership team and the Audit and Risk Management Committee.

Third Line of Defence

Internal and External Audit are the '3rd Line' of defence, providing independent assurance to the Council, Audit and Risk Management Committee and Shire Management on the effectiveness of business operations and oversight frameworks (1st and 2nd Line).

Appointed by the CEO to report on the adequacy and effectiveness of internal Internal Audit

control processes and procedures. The scope of which would be determined

by the CEO with input from the Audit and Risk Management Committee.

External Audit Appointed by Council on the recommendation of the Audit and Risk

Management Committee to report independently to the President and CEO on

the annual financial statements only.

Governance Structure

The following diagram depicts the current operating structure for risk management within the Shire.

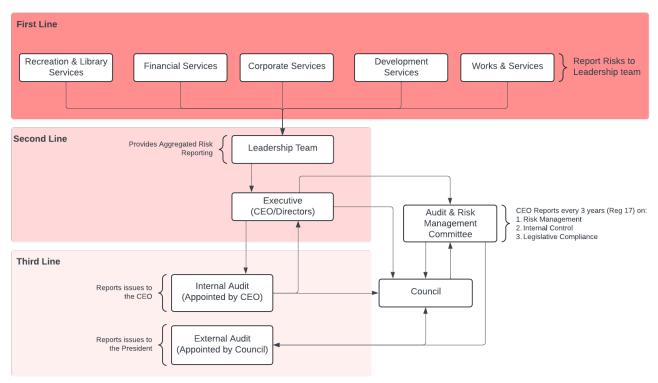


Figure 2: Operating model

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Roles & Responsibilities

Council

Council is responsible for establishing the overall Risk Management policy and framework, providing strategic oversight to ensure risk management is integrated into the Shire's culture and operations. It approves the risk management strategy and significant decisions and holds the Chief Executive Officer accountable for implementing effective risk management practices. Council is to ensure that adequate resources are made available for effective risk management.

Audit and Risk Management Committee (ARMC)

The Committee regularly reviews and monitors the effectiveness of the risk management framework and processes, advises the Council on risk management issues and provides recommendations for improvement, ensures compliance with relevant laws, regulations, and policies, and reviews risk management reports to ensure significant risks are communicated to the Council. ARMC is to recommend to Council that adequate resources are made available for effective risk management.

Chief Executive Officer (CEO)

The Chief Executive Officer is the overall sponsor of the risk management process and will set the tone and promote a positive risk management culture by providing firm and visible support for risk management.

The CEO will review the appropriateness and effectiveness of the Shire's systems and procedures regarding risk management, internal controls and legislative compliance at least once every three calendar years and report the results of that review to the Audit and Risk Management Committee and Council ensuring that adequate resources are allocated for effective risk management.

Executive Team (CEO and Directors)

The Executive are responsible for the oversight of the Risk Management Framework, including the review of risk management procedures and policies on an annual basis. It is responsible for setting the tone and promoting a positive risk management culture within the Shire. The Executive maintains oversight of the highest-level risks and takes responsibility for ensuring mitigation strategies are being implemented.

The Executive will drive the risk management process for the organisation by liaising will key stakeholders in both identifying risks, and in the recommendation of further actions to be implemented. The Executive will work with the CEO to ensure that adequate resources are allocated for effective risk management.

The Executive is responsible for overall reporting on the Shire's Risk Management Framework, and in the evaluation of the Shire's internal controls.

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Leadership Team (Managers)

Members of the Leadership team are responsible for completing risk management actions for risks identified within their areas. This will be done through liaising and communication of requirements to their relevant employee's and overseeing the action to completion. The Leadership Team will work with the Executive to recommend resources required for effective risk management.

Employees

All employees within the Shire are expected to develop an understanding and awareness of risks and how they can contribute to the risk management process. All employees are responsible for escalating/communicating risks to their immediate supervisor. Employees are also required to act in a manner that does not place at risk the health and safety of themselves, other employees, residents and or visitors to the Shire.



Document Structure (Framework)

The following diagram depicts the relationship between the Risk Management Policy, Procedures and supporting documentation and reports.

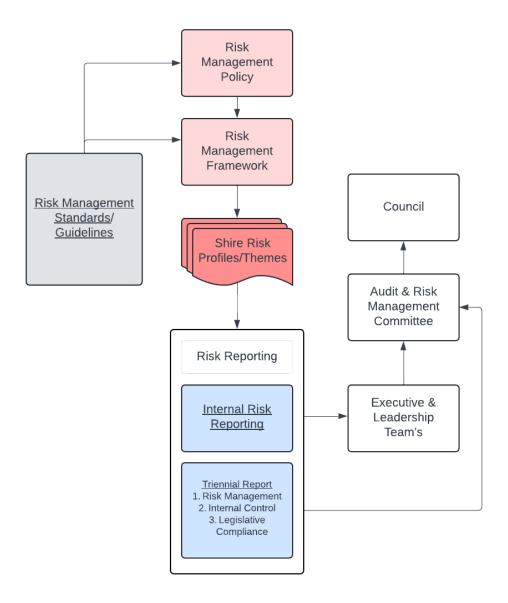


Figure 3 Document Structure



Risk Management Procedures

Each Executive (assigned as the Control Owner), is accountable for ensuring that Risk Profiles/ Themes are:

- Reflective of the material risk landscape of the Shire.
- Reviewed on at least an 18-month rotation, or sooner if there has been a material restructure or change in the risk and control environment.
- Maintained in the standard format.

This process is supported by the use of key data inputs, workshops and ongoing business engagement.

The risk management process is standardised across all areas of the Shire. The following diagram outlines that process with the following commentary providing broad descriptions of each step.

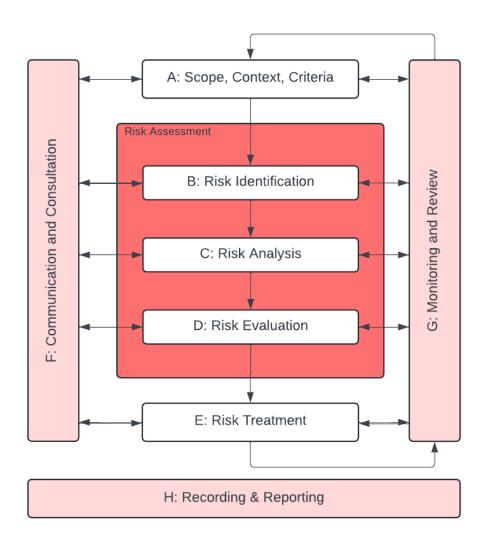


Figure 4: Risk Management Process ISO 31000:2018



A: Scope, Context, Criteria

The first step in the risk management process is to understand the context within which the risks are to be assessed and what is being assessed, this forms two elements:

Organisational Criteria

This includes the Risk Assessment and Tolerance Criteria (Risk Tables) (Appendix E) and any other tolerance tables as developed.

All risk assessments are to utilise these documents to allow consistent and comparable risk information to be developed and considered within planning and decision-making processes.

Scope and Context

To direct the identification of risks, the specific risk assessment context is to be determined prior to and used within the risk assessment process. Risk sources can be internal or external.

For specific risk assessment purposes, the Shire has three levels of risk assessment context:

Strategic Context (known as Strategic Risks)

These are risks that generally occur in the Shire's external environment and may impact the long-term viability of the Shire. These are generally managed at the Council level and are captured within the Shire's Strategic Plan.

Operational Context (known as Operational Risks)

These are risks the Shire faces in the course of conducting its daily business activities, procedures and systems. These are generally managed by the Executive/Leadership team however may be reported to Council, particularly those with a heightened risk level. These risks are captured in the Operational Risk Profiles/Themes.

Project Context

These are risks that occur which have an impact on meeting a specific project objective. These risks are managed by designated teams and are captured in project/activity risk assessments.

Project Risk has two main components:

- Direct refers to the risks that may arise as a result of project activity (i.e. impacting on process, resources or IT systems), which may prevent the Shire from meeting its objectives.
- Indirect refers to the risks which threaten the delivery of project outcomes.









B: Risk Identification

Once the context has been determined, the next step is to identify risks. This is the process of finding, recognising and describing risks. Risks are described as the point along an event sequence where control has been lost. An event sequence is shown below:



Figure 5: Event (risk) sequence

Using the specific risk assessment context as the foundation and in conjunction with relevant stakeholders, raise the questions listed below and then capture and review the information within each defined Risk Profile. The objective is to identify potential risks that could stop the Shire from achieving its goals. This step is also where opportunities for enhancement or gain across the organisation can be found.

These questions / considerations should be used only as a guide, as unidentified risks can cause major losses through missed opportunities or adverse events occurring. Additional analysis may be required.

Risks can also be identified through other business operations including policy and procedure development, internal and external audits, customer complaints, incidents and systems analysis.

'Brainstorming' will always produce a broad range of ideas and all things should be considered as potential risks. Relevant stakeholders are considered to be the subject experts when considering potential risks to the objectives of the work environment and should be included in all risk assessments being undertaken. Key risks can then be identified and captured within the Risk Profiles/Themes.

- What can go wrong? / What are areas of uncertainty? (Risk Description)
- How may this risk eventuate? (Potential Causes)
- What are the current measurable activities that mitigate this risk from eventuating? (Controls)
- What are the potential consequential outcomes of the risk eventuating? (Consequences)

Risk Description describe what the risk is and specifically where control may be lost. They can also be described as an event. They are not to be confused with outcomes following an event, or the consequences of an event.

<u>Potential Causes</u> are the conditions that may present or the failures that may lead to the event or point in time when control is lost (risk).



Inherent Risk are made up of three components within this step:

- 1. Determine relevant consequence categories and rate the 'probable worst consequence' if the risk eventuated with existing controls in place. This is not the worst-case scenario but rather a qualitative judgement of the worst scenario that is probable or foreseeable. (Consequence) - Use Table 2: Measures of Consequence
- 2. Determine the likelihood that the 'probable worst consequence' will eventuate with existing controls in place. – Use Table 3: Measures of Likelihood
- 3. Combine the measures of consequence and likelihood to determine the risk rating. (Risk Rating) – Use Table 4: Risk Matrix

Controls are measures that modify risk. At this point in the process only existing controls should be considered. They must meet the following three tests to be considered as controls:

- Is it an object, technological system and / or human action?
- 2. Does it, by itself, arrest or mitigate an unwanted sequence?
- 3. Is the required performance specifiable, measurable and auditable?

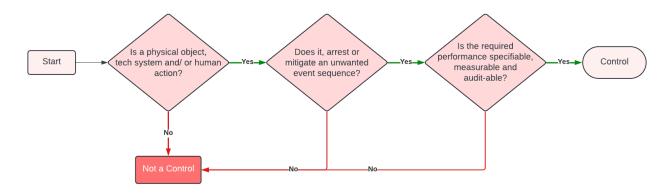


Figure 6: Control determination

C: Risk Analysis

To analyse identified risks, the Shire's Risk Assessment and Tolerance Criteria (Risk Tables) (Appendix A) is now applied.

Step 1 - Consider the effectiveness of key controls

Controls need to be considered (using Table 1: Controls Rating) from three perspectives:

- 1. The design effectiveness of each individual key control.
- 2. The operating effectiveness of each individual key control.



3. The overall or combined effectiveness of all identified key controls.

Design Effectiveness

This process reviews the 'design' of the controls to understand their potential for mitigating the risk without any 'operating' influences. Controls that have inadequate designs will never be effective, no matter if it is performed perfectly every time.

There are four components to be considered in reviewing existing controls or developing new ones:

- Completeness The ability to ensure the process is completed once. How does the control 1. ensure that the process is not lost or forgotten, or potentially completed multiple times?
- 2. Accuracy – The ability to ensure the process is completed accurately, that no errors are made, or components of the process missed.
- Timeliness The ability to ensure that the process is completed within statutory timeframes 3. or internal service level requirements.
- Theft or Fraud The ability to protect against internal misconduct or external theft / 4. fraudulent activities.

It is very difficult to have a single control that meets all the above requirements when viewed against a Risk Profile. It is imperative that all controls are considered so that the above components can be met across several controls.

Operating Effectiveness

This process reviews how well the control design is being applied. Like above, the best designed control will have no impact if it is not applied correctly.

As this generally relates to the human element of control application there are four main approaches that can be employed by management or the risk function to assist in determining the operating effectiveness and / or performance management.

- Re-perform this is only applicable for those short timeframe processes where they can be reperformed. The objective is to re-perform the same task, following the design to ensure that the same outcome is achieved.
- Inspect review the outcome of the task or process to provide assurance that the desired outcome was achieved.
- Observe physically watch the task or process being performed.
- Inquire through discussions with individuals / groups determine the relevant understanding of the process and how all components are required to mitigate any associated risk.

Overall Effectiveness

This is the value of the combined controls in mitigating the risk. All factors as detailed above are to be considered so that a considered qualitative value can be applied to the 'control' component of risk analysis.







The criterion for applying a value to the overall control is the same as for individual controls and can be found using Table 1: Control Ratings.

Step 2 – Determine the Residual Risk rating

There are three components to this step:

- 1. Determine relevant consequence categories and rate the 'probable worst consequence' if the risk eventuated with existing controls in place. This is not the worst-case scenario but rather a qualitative judgement of the worst scenario that is probable or foreseeable. (Consequence) – Use Table 2: Measures of Consequence
- 2. Determine how likely it is that the 'probable worst consequence' will eventuate with existing controls in place. (Likelihood) – <u>Use Table 3: Measures of Likelihood</u>
- 3. Combine the measures of consequence and likelihood to determine the risk rating. (Risk Rating) - Use Table 4: Risk Matrix

D: Risk Evaluation

The risk evaluation process ensures an action (decision) is taken in response to the residual risk. This involves applying the residual risk rating to Table 5: Risk Tolerance Criteria to determine whether the risk is within acceptable levels to the Shire. It will also determine through the use of the Risk Tolerance Criteria, what (if any) high level actions or treatments need to be implemented. In effect, the Risk Tolerance Criteria becomes the Shires risk appetite as follows:

- The Shire will accept risks with a low residual risk rating,
- The Shire will accept risks with a moderate residual risk rating with ongoing monitoring of that risk to ensure it does not escalate,
- The Shire will only accept risks with a high residual risk rating if it is controlled effectively, managed by the Executive Team and subject to monthly monitoring,
- The Shire will generally not accept risks with an extreme residual risk rating.

If a decision is required outside of the above parameters, Executive approval will be required.

E: Risk Treatment

There are generally two requirements following the evaluation of risks.

- 1. In all cases, regardless of the residual risk rating; controls that are rated 'Inadequate' must have a treatment plan (action) to improve the control effectiveness to at least 'Adequate'.
- If the residual risk rating is high or extreme, treatment plans must be implemented to either:
 - Reduce the consequence of the risk materialising. a.
 - b. Reduce the likelihood of occurrence.









(Note: these should have the desired effect of reducing the risk rating to at least moderate)

Improve the effectiveness of the overall controls to 'Effective' and obtain delegated C. approval to accept the risk as per the Risk Tolerance Criteria.

Once a treatment has been fully implemented, the responsible Executive is to review the risk information and tolerance decision with the treatment now noted as a control and those risks that are acceptable then become subject to the monitor and review process (Refer to Table 5: Risk Tolerance).

F: Communication & Consultation

Effective communication and consultation are essential to ensure that those responsible for managing risk, and those with a vested interest, understand the basis on which decisions are made and why particular treatment / action options are selected or the reasons to accept risks have changed.

As risk is defined as the effect of uncertainty on objectives, consulting with relevant stakeholders assists in the reduction of components of uncertainty. Communicating these risks and the information surrounding the event sequence ensures decisions are based on the best available knowledge.

G: Monitoring & Review

It is essential to monitor and review the management of risks, as changing circumstances may result in some risks increasing or decreasing in significance.

By regularly reviewing the effectiveness and efficiency of controls and the appropriateness of treatment / action options selected, we can determine if the organisation's resources are being put to the best use possible.

During the quarterly reporting process, management are required to review any risks within their area and follow up on controls and treatments / action mitigating those risks. Monitoring and the reviewing of risks, controls and treatments also apply to any actions / treatments to originate from an internal audit. The audit report will provide recommendations that effectively are treatments for risks that have been tested during an internal review.





H: Monitoring, Recording & Reporting

The following diagram provides a high-level view of the ongoing reporting process for Risk Management.

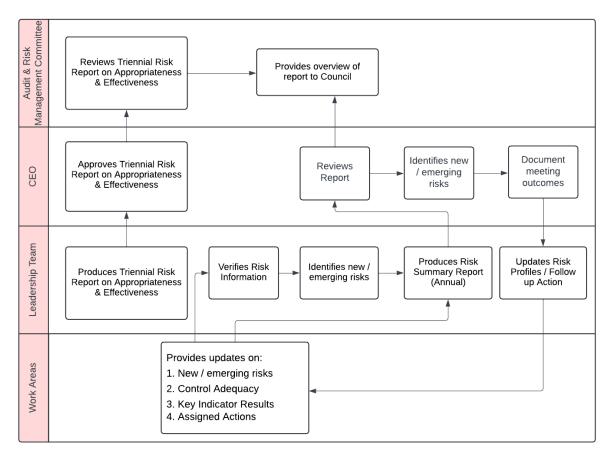


Figure 6: Risk Management Reporting Workflow

Each Work Area is responsible for ensuring:

- They continually provide updates in relation to new, emerging risks, control effectiveness and any relevant key indicator performance to the Director.
- Work through assigned actions and provide relevant updates to the Director
- Risks / Issues reported to the CEO & Senior Leadership team are reflective of the current risk and control environment.

The Director/s are responsible for:

Ensuring Shire Risk Profiles/Themes are formally reviewed and updated, at least on an 18month rotation or earlier when there has been a material restructure, change in risk ownership or change in the external environment.



Annual Risk Reporting for the CEO & Senior Leadership team - Contains an overview of the Risk Summary for the Shire.

Audit & Risk Management Committee

The Audit & Risk Management Committee is responsible for reviewing reports from the Chief Executive Officer on the appropriateness and effectiveness of the Shire's systems and procedures in relation to risk management, internal control and legislative compliance. The Audit & Risk Management Committee will report to Council the results of that review including a copy of the Chief Executive Officer's report.

Risk Theme Profiles

Operational Risks

The Shire utilises risk theme profiles to capture its operational risks. These risks are usually managed and monitored at the Executive/management level.

The profiles (Risk themes) assessed are:

1. **Business and Community Disruption**

Failure to adequately prepare and respond to events that cause disruption to the local community and/or normal Local Government business activities. The event may result in damage to buildings, property, plant and equipment (all assets). This could be a natural disaster, weather event, or an act carried out by an external party (inc. vandalism).

This does not include disruptions due to IT Systems or infrastructure related failures - refer "Failure of IT and/or Communication Systems and Infrastructure".

2. Failure of IT and/or Communication Systems and Infrastructure

Instability, degradation of performance, or other failure of IT Systems, Infrastructure, Communication or Utility causing the inability to continue business activities and provide services to the community. This will result in IT Disaster Recovery Plans being invoked. This also includes where poor governance results in the breakdown of IT maintenance

This does not include new system implementations - refer "Inadequate Project/Change Management".

3. External Theft and Fraud

Loss of funds, assets, data or unauthorised access, (whether attempts are successful) by external parties, through any means (including electronic), for the purposes of Fraud, Malicious Damage or Theft.

4. Misconduct

Intentional activities more than authority granted to an employee, which circumvent endorsed policies, procedures or delegated authority.









This does not include instances where it was not an intentional breach - refer Errors, Omissions and Delays in transaction processing, or Inaccurate Advice.

Inadequate Safety and Security Practices 5.

Non-compliance with the Work Health and Safety Act associated regulations and standards. It is also the inability to ensure the physical security requirements of employee's, contractors and visitors.

6. Inadequate Project/Change Management

Inadequate analysis, design, delivery and / or status reporting of change initiatives, resulting in additional expenses, time requirements or scope changes. This includes Directorate or Service Unit driven change initiatives except new Plant and Equipment purchases. Refer "Inadequate Asset Management"

7. Errors, Omissions and Delays

Errors, omissions or delays in operational activities because of unintentional errors or failure to follow due process.

This excludes process failures caused by inadequate / incomplete procedural documentation refer "Inadequate Document Management Processes".

8. Inadequate Document Management Processes

Failure to adequately capture, store, archive, retrieve, provision and / or disposal of documentation.

9. Inadequate Supplier/Contract Management

Inadequate management of External Suppliers, Contractors, IT Vendors or Consultants engaged for core operations. This includes issues that arise from the ongoing supply of services or failures in contract management and monitoring processes.

10. Providing Inaccurate Advice/Information

Incomplete, inadequate or inaccuracies in advisory activities to customers or internal employee's. This could be caused by using unqualified, or inexperienced employee's, however it does not include instances relating to Misconduct.

11. **Ineffective Employment Practices**

Failure to effectively manage and lead human resources (full/part time, casuals, temporary and volunteers). This includes not having an effective Human Resources Framework in addition to not having appropriately qualified or experienced people in the right roles or not having sufficient employee numbers to achieve objectives.

Care should be taken when considering insufficient employee numbers as the underlying issue could be a process inefficiency.

12. Failure to Fulfil Statutory, Regulatory or Compliance Requirements

Failure to correctly identify, interpret, assess, respond and communicate laws and regulations because of an inadequate compliance framework. This could result in fines, penalties, litigation or increase scrutiny from regulators or agencies. This includes, new or proposed regulatory



and legislative changes, in addition to the failure to maintain updated legal documentation (internal and public domain) to reflect changes.

This does not include Work Health Safety Act (refer "Inadequate Safety and Security Practices"), or any Employment Practices based legislation (refer "Ineffective Employment Practices)

It does include the Local Government Act, Health Act, Building Act, Privacy Act and all other legislative based obligations for Local Government.

13. Inadequate Asset Sustainability Practices

Failure or reduction in service of infrastructure assets, plant, equipment or machinery. These include fleet, buildings, roads, playgrounds, boat ramps and all other assets and their associated lifecycle from procurement to maintenance and ultimate disposal.

It does not include issues with the inappropriate use of the Plant, Equipment or Machinery. Refer Misconduct.

14. Inadequate Engagement Practices

Failure to maintain effective working relationships with the Community (including Local Media), Stakeholders, Key Private Sector Companies, Government Agencies and / or Elected Members. This invariably includes activities where communication, feedback and / or consultation is required and where it is in the best interests to do so.

This does not include instances whereby Community expectations have not been met for standard service provisions such as Community Events, Library Services and/or Transport services.

15. Ineffective Management of Facilities/Venues/Events

Failure to effectively manage the day-to-day operations of facilities, venues and / or events.

16. Inadequate Environmental Management

Inadequate prevention, identification, enforcement and management of environmental issues.

For each risk theme listed above, the profile contains the following information:

- Risk Description
- Causal Factors
- Potential Outcomes/Consequence
- Inherent and Residual Risk
- Key Controls / Control Type
- **Control Operating Effectiveness**
- Risk Evaluation
- Actions and Responsibility





Appendix A: Risk Assessment and Tolerance Criteria (Risk Tables)

TABLE 1: CON	NTROLS RATING					
Rating		Description				
	Documentation:	Processes (Controls) fully documented, with accountable 'Control Owner'.				
Effective (E)	Operating Effectiveness:	Subject to ongoing monitoring and compliance to process is assured.				
	Design Effectiveness: Reviewed and tested regularly.					
	Documentation:	Processes (Controls) partially documented, with a clear 'Control Owner'.				
Adequate (A)	Operating Effectiveness:	Limited monitoring, ad-hoc approach and compliance to process is generally in place.				
	Design Effectiveness:	Reviewed and tested, but not regularly.				
	Documentation:	Processes (Controls) not documented or no clear 'Control Owner'.				
Inadequate (I)	Operating Effectiveness:	No monitoring or compliance to process is not assured.				
, ,	Design Effectiveness:	Have not been reviewed or tested for some time.				



	EASURES OF CC				
Rating	Insignificant	Minor	Moderate	Major	Catastrophic
Health & Safety	First aid injuries	Medical treatment	Lost time injury of > 5 days	Notifiable incident	Fatality, permanent disability
Financial	Less than \$2,000	\$2,000 - \$20,000 Or < 5% variance in cost of project	\$20,001 - \$100,000 Or > 5% variance in cost of project	\$100,001 - \$1M	More than \$1M
Service Interruption	No material service interruption	Temporary interruption to an activity – backlog cleared with existing resources	Interruption to Service Unit/(s) deliverables – backlog cleared by additional resources	Prolonged interruption of Service Unit core service deliverables – additional resources; performance affected	Indeterminate prolonged interruption of Service Unit core service deliverables
Compliance/ Legal	No noticeable regulatory or statutory impact	Some temporary non compliances	Short term non- compliance but with significant regulatory requirements imposed	Non-compliance results in termination of services or imposed penalties	Non-compliance results in criminal charges or significant damages or penalties
Reputation	Unsubstantiated , localised low impact on community trust, low profile or no media item	Substantiated, localised impact on community trust or low media item	Substantiated, public embarrassment, moderate impact on community trust or moderate media profile	Substantiated, public embarrassment, widespread high impact on community trust, high media profile, third party actions	Substantiated, public embarrassment, widespread loss of community trust, high widespread multiple media profile, third party actions
Community	No noticeable effect on constituents, community, organisations, businesses, services, etc.	Limited effect on constituents, community, organisations, businesses, services, etc.	Moderate and manageable effect on constituents, community, organisations, businesses, services, etc.	Substantial effect on constituents, community, organisations, businesses, services, etc.	Devastating effect on constituents, community, organisations, businesses, services, etc.
Property	Inconsequential or no damage.	Localised damage rectified by routine internal procedures	Localised damage requiring external resources to rectify	Significant damage requiring internal & external resources to rectify	Extensive damage requiring prolonged period of restitution. Complete loss of plant, equipment & building
Environment	Contained, reversible impact managed by on site response	Contained, reversible impact managed by internal response	Contained, reversible impact managed by external agencies	Uncontained, reversible impact managed by a coordinated response from external agencies	Uncontained, irreversible impact



TABLE 3: MEASURES OF LIKELIHOOD									
Rating	Description	Frequency							
Almost Certain (5)	The event is expected to occur in most circumstances	More than once per year							
Likely (4)	The event will probably occur in most circumstances	At least once per year							
Possible (3)	The event should occur at some time	At least once in 3 years							
Unlikely (2)	The event could occur at some time	At least once in 10 years							
Rare (1)	The event may only occur in exceptional circumstances	Less than once in 15 years							

TAB	TABLE 4: RISK MATRIX											
				Consequence								
	Insignificant (1) Minor (2) Moderate (3) Major (4) Catastrop											
	Almost Certain (5)	Moderate (5)	High (10)	High (15)	Extreme (20)	Extreme (25)						
po	Likely (4)	Low (4)	Moderate (8)	High (12)	High (16)	Extreme (20)						
Likelihood	Possible (3)	Low (3)	Moderate (6)	Moderate (9)	High (12)	High (15)						
Ä	Unlikely (2)	Low (2)	Low (4)	Moderate (6)	Moderate (8)	High (10)						
	Rare (1)	Low (1)	Low (2)	Low (3)	Low (4)	Moderate (5)						

TABLE 5: RISK	TABLE 5: RISK TOLERANCE CRITERIA								
Risk Rank	Description	Criteria For Risk Tolerance	Responsibility						
Low	Tolerated	Risk tolerated with adequate controls, managed by routine procedures and subject to annual monitoring	Operational Manager						
Moderate	Monitor	Risk tolerated with adequate controls, managed by specific procedures and subject to semi- annual monitoring	Operational Manager						
High	Urgent Attention Required	Risk tolerated with effective controls, managed by senior management / executive and subject to monthly monitoring	Director / CEO						
Extreme	Unacceptable	Risk only tolerated with effective controls and all treatment plans to be explored and implemented where possible, managed by highest level of authority and subject to continuous monitoring	CEO / Council						



Appendix B: Risk Profile Example

Risk Consequence Category	Risk Theme	Risk Description Link	Casual Factors Link	Risks Identified	Inherent Consequence	Inherent Likelihood		Controls Link	Control Effectivenes	Residual Consequence	Residual Likelihood	Residual Risk Rating
Health & Safety - Sumr Health & Safety	Business and Community Disruption	Failure to adequately prepare and respond to events that cause disruption to the local community and/or normal Local Government business activities. The event may result in damage to buildings, property, plant and equipment (all assets)	Natural Disasters and Weather Events 1. Climate Change: Increasing frequency and severity of extreme weather events. 2. Geographical Location: Proximity to fault lines, flood plains, or coastal aceas	TRUE	Major (4)	Unlikely (2)	Moderate (8)		Not Rated	Moderate (3)	Unlikely (2)	Moderate (6)
Health & Safety	Failure of IT and/or Communication Systems and Infrastructure	Instability, degradation of performance, or other failure of IT Systems, Infrastructure, Communication or Utility causing the inability to continue business activities and provide services to the community. This may on may not result in IT Disaster Recovery Plans	2 Software Burs: Unresolved software		N/A	N/A	N/A	N/A	Not Rated	Not Rated	Not Rated	Not Rated
Health & Safety	External Theft and Fraud	Loss of funds, assets, data or unauthorised access, (whether attempts are successful) by external parties, through any means (including electronic), for the purposes of Fraud, Malicious Damage or Theft.	Electronic Means (Cybersecurity)	TRUE	Minor (2)	Rare (1)	Low (2)		Not Rated	Minor (2)	Rare (1)	Low (2)
Health & Safety	Misconduct	Intentional activities more than authority granted to an employee, which circumvent endorsed policies, procedures or delegated authority. This does not include instances where it was not an	Governance and Oversight 1.Lack of Supervision: Insufficient oversight and monitoring of employee activities. 2. Weak Internal Controls: Inadequate	TRUE	Moderate (3)	Possible (3)	Moderate (9)		Not Rated	Moderate (3)	Unlikely (2)	Moderate (6)
Health & Safety	Inadequate Safety and Security Practices	Non-compliance with the Work Health and Safety Act associated regulations and standards. It is also the inability to ensure the physical security requirements of staff, contractors and visitors.	Governance and Compliance 1.Lack of Awareness: Employees and contractors not fully aware of WHS regulations and standards. 2. Inadequate Policies: Absence of	TRUE	Major (4)	Unlikely (2)	Moderate (8)		Not Rated	Not Rated	Not Rated	Not Rated
Health & Safety	Inadequate Project/Change Management	Inadequate analysis, design, delivery and / or status reporting of change initiatives, resulting in additional expenses, time requirements or scope changes. This includes Directorate or Service Unit driven change initiatives excent new Plant and Fouriement	Planning and Analysis 1.Insufficient Planning: Lack of thorough planning before initiating change projects. 2. Poor Needs Assessment: Inadequate assessment of the actual needs and		N/A	N/A	N/A	N/A	Not Rated	Not Rated	Not Rated	Not Rated
Health & Safety	Errors, Omissions and Delays	Errors, omissions or delays in operational activities because of unintentional errors or failure to follow due process. This excludes process failures caused by inadequate /	Human Factors 1.Lack of Training: Insufficient training leading to mistakes and oversights. 2.Fatigue: Employees experiencing fatigue or burnout, affecting their performance.	TRUE	Major (4)	Possible (3)	High (12)		Not Rated	Not Rated	Not Rated	Not Rated
Health & Safety	Inadequate Document Management Processes	Failure to adequately capture, store, archive, retrieve, provision and / or disposal of documentation.	Documentation Capture 1.Inconsistent Practices: Varied methods of capturing documentation leading to gaps. 2.Lack of Training: Staff not trained on		N/A	N/A	N/A	N/A	(I) Inadequate	Not Rated	Not Rated	Not Rated
Health & Safety	Inadequate Supplier/Contract Management	Inadequate management of External Suppliers, Contractors, IT Vendors or Consultants engaged for core operations. This includes issues that arise from the ongoing supply of services or failures in contract management and monitoring processes.	Supplier and Contractor Selection 1. Poor Vetting: Inadequate vetting processes for selecting suppliers and contractors. 2. Lack of Due Dilisence: Failure to		N/A	N/A	N/A	N/A	Not Rated	Not Rated	Not Rated	Not Rated
Health & Safety	Providing Inaccurate Advice/Information	Incomplete, inadequate or inaccuracies in advisory activities to customers or internal staff. This could be caused by using unqualified, or inexperienced staff, however it does not include instances relating to Misconduct.	Staff Qualifications and Experience 1.Unqualified Staff: Employing staff without the necessary qualifications for advisory roles. 2.Inexperienced Staff: Using staff who		N/A	N/A	N/A	N/A	Not Rated	Not Rated	Not Rated	Not Rated
Health & Safety	Ineffective Employment Practices	Failure to effectively manage and lead human resources [full/part time, casuals, temporary and volunteers]. This includes not having an effective Human Resources Framework in addition to not having appropriately qualified or experienced people.	Human Resources Framework 1.Lack of Policies: Absence of comprehensive HR policies and procedures. 2 Inadequate Training: Insufficient	TRUE	Minor (2)	Unlikely (2)	Low (4)		Not Rated	Not Rated	Not Rated	Not Rated
Health & Safety	Failure to Fulfil Statutory, Regulatory or Compliance Requirements	Failure to correctly identify, interpret, assess, respond and communicate laws and regulations because of an inadequate compliance framework. This could result in fines, penalties, litigation or increase scrutiny from regulators or agencies. This includes, new or			N/A	N/A	N/A	N/A	Not Rated	Not Rated	Not Rated	Not Rated
Health & Safety	Inadequate Asset Sustainability Practices	Failure or reduction in service of infrastructure assets, plant, equipment or machinery. These include fleet, buildings, roads, playgrounds, boat ramps and all other assets and their associated lifecycle from accourage to maintenance and ultimate disposal	Procurement 1.Poor Quality: Procuring low-quality assets that are prone to failure. 2.Inadequate Specifications: Not specifying the proceet requirements during.	TRUE	Minor (2)	Unlikely (2)	Low (4)		Not Rated	Not Rated	Not Rated	Not Rated
Health & Safety	Inadequate Engagement Practices	Failure to maintain effective working relationships with the Community (including Local Media), Stakeholders, Key Private Sector Companies, Government Agencies and / or Elected Members. This invariably includes activities where.	Communication 1.Poor Communication Channels: Ineffective or outdated communication channels. 2.Lack of Transparency: Insufficient	TRUE	Moderate (3)	Unlikely (2)	Moderate (6)		Not Rated	Not Rated	Not Rated	Not Rated
Health & Safety	Ineffective Management of Facilities/Venues/Event s	Failure to effectively manage the day-to-day operations of facilities, venues and / or events.	Planning and Coordination 1. Poor Planning: Inadequate planning for daily operations and events. 2. Lack of Coordination: Poor coordination between different teams and departments.	TRUE	Moderate (3)	Unlikely (2)	Moderate (6)		Not Rated	Not Rated	Not Rated	Not Rated
Health & Safety	Inadequate Environmental Management	Inadequate prevention, identification, enforcement and management of environmental issues.	Prevention 1.Lack of Policies: Absence of comprehensive environmental policies and procedures. 2. Insufficient Training: Inadequate.	TRUE	Moderate (3)	Unlikely (2)	Moderate (6)		Not Rated	Not Rated	Not Rated	Not Rated





Appendix C: Risk Controls Register Example

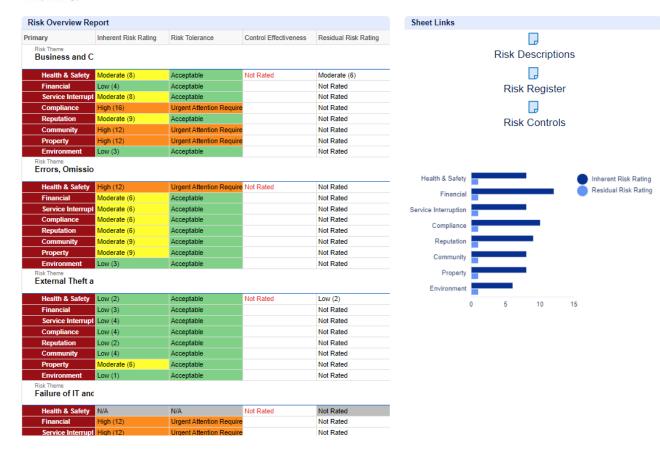
Risk Theme	Control Description	Control Type	Documentation	Operating Effectiveness	Design Effectiveness	Control Effectivene
nadequate Document Management Processes					OVERALL CONTROLS RATING	(I) Inadequate
Inadequate Document Management Processes	All hard copy documents are scanned and registered	Preventative	(I) Processes (Controls) not documented or no clear 'Control Owner'.	(A) Limited monitoring, ad-hoc approach and compliance to process is generally in place.		(I) Inadequate
Inadequate Document Management Processes	Archival process - up to date, safely stored	Preventative	(E) Processes (Controls) fully documented, with accountable 'Control Owner'.	(A) Limited monitoring, ad-hoc approach and compliance to process is generally in place.	17	(I) Inadequate
Inadequate Document Management Processes	Backlog management - items loaded nto EDMS	Recovery	Not Rated	Not Rated	Not Rated	Not Rated
Inadequate Document Management Processes	Customer Request system	Preventative	(A) Processes (Controls) partially documented, with a clear 'Control Owner'.	(A) Limited monitoring, ad-hoc approach and compliance to process is generally in place.		(A) Adequate
Inadequate Document Management Processes	Disaster Recovery Plan	Recovery	(A) Processes (Controls) partially documented, with a clear 'Control Owner'.	(I) No monitoring or compliance to process is not assured.	(I) Have not been reviewed or tested for some time.	(I) Inadequate
Inadequate Document Management Processes	Document / correspondence receipt & action process	Preventative	Not Rated	Not Rated	Not Rated	Not Rated
Inadequate Document Management Processes	Document security - electronic	Preventative	Not Rated	Not Rated	Not Rated	Not Rated
Inadequate Document Management Processes	Document security - physical	Preventative	Not Rated	Not Rated	Not Rated	Not Rated
Inadequate Document Management Processes	Electronic records back up	Responsive	Not Rated	Not Rated	Not Rated	Not Rated
Inadequate Document Management Processes	Electronic records back up testing	Responsive	Not Rated	Not Rated	Not Rated	Not Rated
Inadequate Document Management Processes	E-mail archiving	Preventative	Not Rated	Not Rated	Not Rated	Not Rated
Inadequate Document Management Processes	File management system	Preventative	Not Rated	Not Rated	Not Rated	Not Rated
Inadequate Document Management Processes	Management	Preventative	Not Rated	Not Rated	Not Rated	Not Rated
Inadequate Document Management Processes	Overdue / outstanding correspondence	Preventative	Not Rated	Not Rated	Not Rated	Not Rated



Appendix D: Risk Overview Example



Risk Management Dashboard



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Appendix E: Risk Register Example

Risk Consequence Category	Risk Theme	Risk Description Link	Casual Factors Link		Inherent Consequence	Inherent Likelihood	Inherent Risk Rating	Controls Link	Risk Tolerance	Control Effectiveness	Residual Consequence	Residual Likelihood	Residual Risk Rating	Treatment plan	Rating
B Health & Safety - Sur	ô			⊕ V			Moderate (8)						Low (1)		
Health & Safety	Business and Community	Failure to adequately nu	Natural Disasters and \	<u>~</u>	Major (4)	Unlikely (2)	Moderate (8)	Business a	Accentable	Not Rated	Moderate (3)	Unlikely (2)	Moderate (6)		
Health & Safety	Failure of IT and/or Comp		IT Systems and Infrastr		N/A	N/A	N/A	N/A	N/A	Not Rated	Not Rated	Not Rated	Not Rated		
Health & Safety	External Theft and Fraud	,,	Electronic Means (Cybi		Minor (2)	Rare (1)	Low (2)		Acceptable	Not Rated	Minor (2)	Rare (1)	Low (2)		
Health & Safety	Misconduct		Governance and Overs		Moderate (3)	Possible (3)	Moderate (9)		Acceptable	Not Rated	Moderate (3)	Unlikely (2)			
Health & Safety		Non-compliance with the			Major (4)	Unlikely (2)	Moderate (8)		Acceptable	Not Rated	Not Rated	Not Rated	Not Rated		
Health & Safety	Inadequate Project/Chan			_	N/A	N/A	N/A	N/A	N/A	Not Rated	Not Rated	Not Rated	Not Rated		
Health & Safety	Errors, Omissions and De				Major (4)	Possible (3)	High (12)	Errors Om-	Urgent Attention R		Not Rated	Not Rated	Not Rated		
Health & Safety	Inadequate Document M		Documentation Capture		N/A	N/A	N/A	N/A	N/A	(I) Inadequate	Not Rated	Not Rated	Not Rated		
Health & Safety	Inadequate Supplier/Con	1 1	Supplier and Contracto	-	N/A	N/A	N/A	N/A	N/A	Not Rated	Not Rated	Not Rated	Not Rated		
Health & Safety	Providing Inaccurate Adv		Staff Qualifications and		N/A	N/A	N/A	N/A	N/A	Not Rated	Not Rated	Not Rated	Not Rated		
Health & Safety		Failure to effectively ma			Minor (2)	Unlikely (2)	Low (4)		Acceptable	Not Rated	Not Rated	Not Rated	Not Rated		
Health & Safety	Failure to Fulfil Statutory.		Compliance Frameworl	_	N/A	N/A	N/A	N/A	N/A	Not Rated	Not Rated	Not Rated	Not Rated		
Health & Safety	Inadequate Asset Sustair	Failure or reduction in s	Procurement 1. Poor Q		Minor (2)	Unlikely (2)	Low (4)	Inadequate	Acceptable	Not Rated	Not Rated	Not Rated	Not Rated		
Health & Safety	Inadequate Engagement	Failure to maintain effe	Communication 1. Poo		Moderate (3)	Unlikely (2)	Moderate (6)		Acceptable	Not Rated	Not Rated	Not Rated	Not Rated		
Health & Safety	Ineffective Management	Failure to effectively ma-	Planning and Coordina		Moderate (3)	Unlikely (2)	Moderate (6)	Ineffective -	Acceptable	Not Rated	Not Rated	Not Rated	Not Rated		
Health & Safety	Inadequate Environmenta	Inadequate prevention,	Prevention 1, Lack of Fe	V	Moderate (3)	Unlikely (2)	Moderate (6)	Inadequate	Acceptable	Not Rated	Not Rated	Not Rated	Not Rated		
Financial - Summary				✓			High (12)						Low (1)		
Financial	Business and Community	Failure to adequately p	Natural Disasters and \	V	Major (4)	Rare (1)	Low (4)	Business a	Acceptable		Not Rated	Not Rated	Not Rated		
Financial	Failure of IT and/or Comr	Instability, degradation	IT Systems and Infrastre	~	Major (4)	Possible (3)	High (12)	Failure of I'-	Urgent Attention R		Not Rated	Not Rated	Not Rated		
Financial	External Theft and Fraud	Loss of funds, assets, co	Electronic Means (Cybi	V	Moderate (3)	Rare (1)	Low (3)	External Tr	Acceptable		Not Rated	Not Rated	Not Rated		
Financial	Misconduct	Intentional activities mo-	Governance and Overs	~	Minor (2)	Rare (1)	Low (2)	Misconduc -	Acceptable		Not Rated	Not Rated	Not Rated		
Financial	Inadequate Safety and S	Non-compliance with the	Governance and Comp	▽	Major (4)	Unlikely (2)	Moderate (8)	Inadequate	Acceptable		Not Rated	Not Rated	Not Rated		
Financial	Inadequate Project/Chan	Inadequate analysis, de-	Planning and Analysis	2	Major (4)	Possible (3)	High (12)	Inadequate	Urgent Attention R		Not Rated	Not Rated	Not Rated		
Financial	Errors, Omissions and De	Errors, omissions or de	Human Factors 1. Lack	2	Moderate (3)	Unlikely (2)	Moderate (6)	Errors, Om-	Acceptable		Not Rated	Not Rated	Not Rated		
Financial	Inadequate Document M	Failure to adequately ca	Documentation Capture	~	Major (4)	Likely (4)	High (16)	Inadequate	Urgent Attention R		Not Rated	Not Rated	Not Rated		
Financial	Inadequate Supplier/Con	Inadequate manageme	Supplier and Contracto	~	Major (4)	Possible (3)	High (12)	Inadequate	Urgent Attention R		Not Rated	Not Rated	Not Rated		
Financial	Providing Inaccurate Adv	Incomplete, inadequate	Staff Qualifications and	~	Moderate (3)	Possible (3)	Moderate (9)	Providing II-	Acceptable		Not Rated	Not Rated	Not Rated		
Financial	Ineffective Employment F	Failure to effectively ma	Human Resources Fran	~	Minor (2)	Unlikely (2)	Low (4)	Ineffective -	Acceptable		Not Rated	Not Rated	Not Rated		
Financial	Failure to Fulfil Statutory.	Failure to correctly iden-	Compliance Frameworls	V	Insignificant (1)	Possible (3)	Low (3)	Failure to F-	Accentable		Not Rated	Not Rated	Not Rated		

Shire of Donnybrook Balingup V1



Appendix F: Organisational Risk Management Policy

Organisational Risk Management (EXE/CP-6) – See Shire Website

Shire of Donnybrook Balingup V1



Appendix G: Risk Management Procedure

Organisational Risk Management (EXE/OP-35)