JCU Risk Management

Framework and Plan

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Approved by Council

Contents

1. **RISK MANAGEMENT FRAMEWORK** 2
   1.1 General 2
   1.2 What is Risk? 2
   1.3 Why Should We Manage Risk? 2
   1.4 Objectives 3
   1.5 Risk Management Policy 3
   1.6 Risk Management Plan 3

2. **RISK MANAGEMENT PROCESS** 3
   2.1 How Can We Manage Risk? 3
   2.2 Overview 4
   2.3 Communication and Consultation 4
   2.4 Establish context 4
   2.5 Defining Risk Criteria 5
   2.5 Risk identification 5
   2.6 Risk Analysis 6
   2.7 Risk Evaluation 6
   2.8 Risk Treatment 7
   2.9 Monitoring and Review 8
   2.10 Recording and Reporting 8

3. **RISK MANAGEMENT PLAN** 9
   3.1 Risk Management Responsibilities 9
      Council 9
      Audit, Risk and Compliance Committee 9
      Other Council Committees 9
      Vice Chancellor 9
      University Executive 9
      Chief of Staff (Risk Management Co-ordinator) 10
      Risk and Compliance Officer 10
      Manager Internal Audit 10
      All Managers and Staff (Risk Owners) 10
      Risk Champions 11
   3.2 Risk Management Framework Review 11
   3.3 Risk Register Establishment and Review 11
      University Level 11
      Division Level 11
      Project Level 11
      Activity Level 12
   3.4 Risk Management Plan Progress Reports 12
   3.5 University Plan and Annual report ..... **Error! Bookmark not defined.**
   3.6 Training 12
   3.7 Summary of Key Risk Management Plan Activities 13

Appendix A – Likelihood Ratings 15
Appendix B – Consequence Ratings 16
Appendix C – Risk Rating Matrix 19
Appendix D – Control Effectiveness Ratings 20
Appendix E – Risk Management Glossary 21

1. RISK MANAGEMENT FRAMEWORK

1.1 General

James Cook University recognises that risk management is an integral part of good governance and management practice and is committed to its application at all management levels within a university-wide framework.

JCU's risk management framework provides the foundations and organisational arrangements for designing, implementing, monitoring, reviewing and continually improving risk management throughout the organisation. The two key elements of JCU's framework are its Risk Management Policy, which establishes a mandate and commitment for managing risk, and the Risk Management Plan which details the procedures and processes by which risk management will be implemented within the organisation.

The JCU Risk Management Framework has been developed to meet three primary objectives:

1. To provide consistency to business risk management practices throughout the University.

2. To provide assurance that all key risks within the business are being identified and managed appropriately and to ensure the University, including management and the Council, are aware of key business risks.

3. James Cook University (JCU) as a Person Conducting a Business or Undertaking (PCBU) is required to demonstrate that it has done everything reasonable and practical in addressing WHS risks and this is operationally delivered via the JCU WHS Officers. The WHS Officers are required to demonstrate positive steps to exercise "due diligence" by definition of the *Work Health and Safety Act 2011* (the Act). This includes the identification of hazards and the elimination and mitigation of the associated risks.

JCU also recognises its risk management oversight responsibilities in respect of its controlled entities and non-controlled entities in which it has a significant interest. This includes JCU Singapore, which operates out of a different jurisdiction.

1.2 What is Risk?

The International Standard on Risk Management AS/NZS ISO 31000:2018 defines risk as *"the effect of uncertainty on objectives".* This definition highlights risk as an uncertainty of outcome. This uncertainty can relate to either a threat or an opportunity and risk management can relate to how we ensure threats don't result in negative consequences and how we ensure opportunities are realised.

1.3 Why Should We Manage Risk?

ISO 31000 defines risk management as *"coordinated activities to direct and control an organization with regard to risk".* It is the systematic and ongoing process of risk identification, assessment, treatment and monitoring. It can be applied at any level of the University including strategic, operational and at project level. It is not solely about limiting risk but rather about fully appreciating and recognising the risks we carry and balancing risk and reward in an informed manner.

Properly applied, risk management should:

- improve the likelihood that University objectives will be achieved
- reduce the likelihood of unwanted 'surprises'
- help the University maximise opportunities

- provide information to support University decision making
- provide a basis for effective resource allocation
- help the University meet compliance and governance requirements
- improve overall stakeholder confidence in the University
- reduce the likelihood of injury and illness throughout our facilities and across all activities.

The overarching objective of risk management is to ensure that risk identification, assessment and management occurs continuously in accordance with changes in the internal and external environment and that the University has processes in place to enable it to provide assurance to University management, the Council and the external community that processes are effective in controlling risk.

1.4 Objectives

In support of the achievement of strategic and operational goals, the objective of the University's risk management plan is to provide a framework for all levels of management to enable, support and promote:

- awareness and understanding of the real and significant business risks and their impact;
- demonstration of due diligence in decision-making;
- exercise of appropriate duty of care;
- innovation through the taking of calculated risks in pursuit of business opportunity and excellence; and
- provision of assurance that business risks are properly managed, commensurate with their level of threat or exposure; and
- ensure that information about such risks and their management is properly communicated.

1.5 Risk Management Policy

JCU has an adopted Risk Management Policy. This policy outlines the expectations that the Council and University Executive have with respect to risk management, and establishes the risk management responsibilities of the Council, Council committees, management and staff.

1.6 Risk Management Plan

This Risk Management Plan specifies the approach, the management components and resources to be applied to the management of risk. It details the procedures, practices, assignment of responsibilities, sequence and timing of activities to help all people within the organisation manage risk. This plan is supported by other guidelines and procedures offering more detailed information on the management of specific types of risk, the management of risk within particular areas and the use of risk management tools.

2. RISK MANAGEMENT PROCESS

2.1 How Can We Manage Risk?

Inherent within any decision making is consideration of the various risks facing the University and coordinated response(s) to these risks. A rigorous and systematic approach to identifying and adequately managing risks and integrating this process into significant activities and function sis essential.

Risk management is an ever-present management responsibility. All staff are required to be conversant with risk management concepts and practices and be able to utilise and

demonstrate application of risk management principles within their areas of control. Staff familiar with the work undertaken in specific areas are well placed to identify risks in their own areas and recommend suitable strategies for controlling the impact of those risks.

2.2 Overview

Integrating risk management into an organization is a dynamic and iterative process, and needs to be customized to the organization's needs and culture. Risk management should be a part of, and not separate from, the organizational purpose, governance, leadership and commitment, strategy, objectives and operations.

The University's Risk Management process complies with AS/NZS ISO 31000:2018. Under this approach, there are six key stages to the risk management process.

1. Communicate and consult - with internal and external stakeholders
2. Establish context - the scope, boundaries and criteria
3. Risk Assessment - identify, analyse and evaluate risks
4. Treat Risks - implement and assess controls to address risk
5. Monitoring and review - risk reviews and audit
6. Recording and Reporting – effective governance

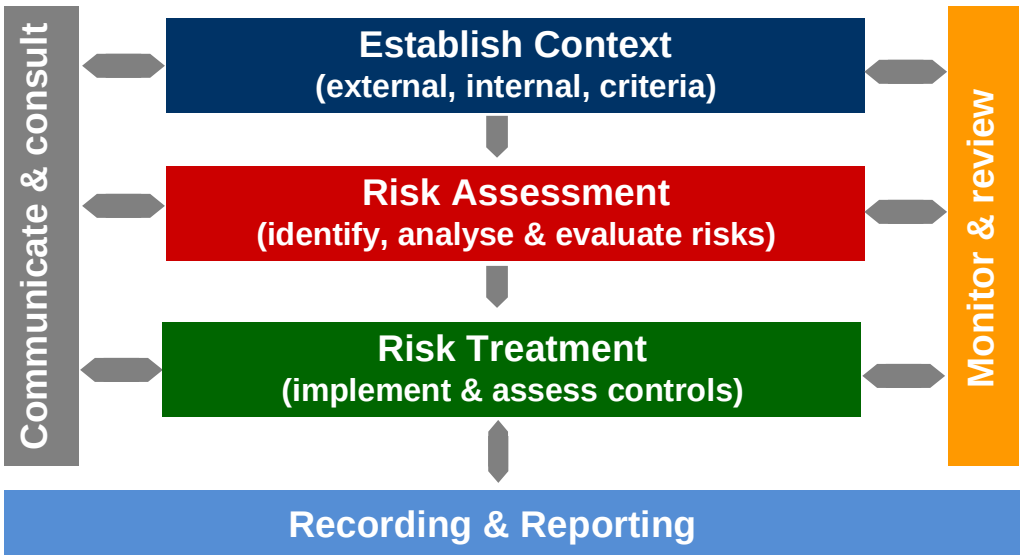

Figure 1: JCU risk management approach using AS/NZS ISO 31000:2018 Risk Management Standard

2.3 Communication and Consultation

Effective communication and consultation with key stakeholders regarding risk management processes, issues and initiatives is critical to the success of JCU's risk management framework. Staff must ensure that relevant stakeholders are consulted and informed of risk management activities. This will be done through means such as training, continuous professional development activities, standard agenda items on team meetings, dissemination of policies and procedures and through inviting feedback on key documents.

2.4 Establish context

Establishing the context of risk management at JCU is designed to customise the risk management process, enabling effective risk assessment and appropriate risk treatment.

Context is established by the risk leadership team and involves setting boundaries around

the depth and breadth of risk management efforts to relevant matters required to achieve the strategic intent of the University, and should reflect the specific environment of the activity to which the risk management process is to be applied.

Important considerations when determining context include:

- JCU's external environment – social factors, demographics, political, economic, environmental.
- JCU's stakeholders – students, customers, regulators, employers, politicians, media, insurers, service providers and suppliers, staff and volunteers.
- JCU's internal environment – goals, objectives, culture, risk appetite, organisational structures, systems, processes, resources, key performance indicators and other drivers.

2.5 Defining Risk Criteria

It is important that JCU understands the amount and type of risk that it may or may not take, relative to objectives. Within the University's risk appetite statement, risk capacity and tolerances are expressed against a number of key risk indicators against categories of risk (refer Section 2.5). *Risk capacity* being the amount of risk an organisation can afford to take or sustain, and *risk appetite being* the amount and type of risk that the organisation is willing to take in order to meet their strategic objectives.

A range of appetites exist for different risks and these may change over time.

JCU is not averse to accepting, managing or reducing risk provided a thorough risk assessment has been carried out and when appropriate contingency plans and mitigation strategies have been developed.

In particular, JCU recognises that in order to achieve its objectives and capitalise upon opportunities during a period of significant change and uncertainty in the tertiary education sector, it will need to accept some level of well managed risk inherent in:

- Continuing to pursue academic and research excellence
- Investment in the re-profiling of courses and facilities to meet JCU's Strategic Intent and the imperatives of a competitive market
- Pursuing innovative new methods, new approaches and new technologies
- Increased reliance on partnerships with the private and public sector
- The management and commercial exploitation of the University's land holdings and buildings

Whilst all risks require appropriate management, risks that may:

- compromise the health and safety of staff, students and visitors; and/or
- compromise the University, its staff and students through inadvertent legislative breaches and consequent penalty; and/or
- compromise national security; and/or
- result in sustained damage to the organisation's reputation;

will require very thorough evaluation, receive additional management scrutiny and be mitigated as far as reasonably possible.

JCU's Risk Appetite Statement is a quantitative and qualitative statement reviewed annually by the Executive and Council, with key risk indicators reported on quarterly and annual bases.

2.5 Risk identification

Risk identification is the process of identifying risks facing JCU. This involves thinking through the sources of risks, the potential hazards, the possible causes and the potential exposure.

The aim of this step is to generate a comprehensive list of risks based on those events that might create, enhance, prevent, degrade, accelerate or delay the achievement of objectives. It is important to identify the risks associated with not pursuing an opportunity.

Risk identification occurs within the following categories of risk that are aligned with the Appetite Statement:

- Strategic risks;
- Sustainability risks;
- Financial risks;
- Reputational risks;
- Legal and Regulatory (Compliance) risks;
- Workplace Health and Safety risks;
- Business disruption risks;
- People risks; and
- Academic risks

The key questions when identifying risks are what, where, when, why and how can it happen, what is the impact and who is responsible for managing the risk?

The organization can use a range of techniques for identifying uncertainties that may affect one or more objectives. The following factors, and the relationship between these factors, should be considered:

- tangible and intangible sources of risk
- causes and events
- threats and opportunities
- vulnerabilities and capabilities
- changes in the external and internal context
- indicators of emerging risks
- the nature and value of assets and resources
- consequences and their impact on objectives
- limitations of knowledge and reliability of information
- time-related factors.

2.6 Risk Analysis

Once risks have been identified, they are then analysed. Risk analysis involves consideration of uncertainties, risk sources, consequences, likelihood, events, scenarios, controls and their effectiveness. Risk analysis should consider factors such as:

- the likelihood of events and consequences;
- the nature and magnitude of consequences;
- complexity and connectivity;
- time-related factors and volatility;
- the effectiveness of existing controls;
- sensitivity and confidence levels.

JCU's likelihood and consequence tables are shown at Appendix A and Appendix B.

2.7 Risk Evaluation

Risk evaluation involves comparing the level of risk found during the analysis process with the established risk appetite to determine where additional action is required.

This can lead to a decision to:

- do nothing further (accept the risk);

- consider risk treatment options (mitigate the risk);
- undertake further analysis to better understand the risk;
- maintain existing controls;
- reconsider objectives.

At JCU, for the various levels of risk, the following treatment strategies are required:

High:	Requires immediate action as it has the potential to be damaging to the organisation.
Medium:	Requires treatment with routine or specific procedures.
Low:	Continue to monitor and re-evaluate the risk, ideally treat with routine procedures.

Decisions should take account of the wider context and the actual and perceived consequences to external and internal stakeholders. The output of the risk evaluation is a prioritised list of risks for further action. This is achieved through application of a numbered scale within the 3-tier risk matrix for each risk level (refer Appendix C – Table 5b).

If any further treatment required to reduce risks to an acceptable level will take some time to implement, the risk should generally be avoided until such time as the required treatment is in place. Where this is not practical, a conscious and informed decision needs to be made and recorded as to whether alternative short term treatments may be appropriate or whether the risk should still be accepted in its pre-treatment form (refer Table 1, Section 3.4)

2.8 Risk Treatment

Risk treatment involves selecting one or more options for avoiding, removing or modifying risks, removing the source, changing likelihood or consequence and implementing those options. It involves identifying and evaluating existing controls and management systems to determine if further action (risk treatment) is required. Existing controls are identified and then assessed as to their level of effectiveness. The selection of risk treatment options should be made in accordance with the organization's objectives, risk criteria or appetite, and available resources.

JCU will utilise the control effectiveness ratings shown in Appendix D.

Current risk is the level of risk after considering existing controls. It is determined by applying the effectiveness of existing controls to inherent risk. The Risk Matrix tables in Appendix C-Table 5a Risk Level Ratings (see above) should also be used to determine the level of current risk.

Where controls either do not exist, or are considered ineffective to manage the risk down to risk appetite, risk treatment will be required. The level of risk remaining after risk treatment is the **residual risk.**

A Risk Treatment Plan should be developed for complex and significant risk items shown on the Risk Register (generally 'High" risk rating). The information provided in treatment plans should include:

- the reasons for selection of treatment options, including expected benefits to be gained;
- those who are accountable for approving the plan and those responsible for implementing the plan;
- proposed actions;
- resource requirements including contingencies;
- performance measures and constraints;
- reporting and monitoring requirements; and
- timing and schedule.

The treatment plans adopted will be documented and their implementation tracked through Riskware as part of the reporting process.

2.9 Monitoring and Review

Few risks remain static. Risks will be continuously monitored and reviewed; and the effectiveness of the controls in place and of the risk treatment plans will be assessed to ensure changing circumstances do not alter risk priorities. Feedback on the implementation and the effectiveness of the Risk Management Policy and Plan will be obtained from the risk reporting process, internal audits and other available information.

At minimum, the risk register will be reviewed every six months to the Vice Chancellor's Advisory Committee and to Audit, Risk and Compliance Committee of Council.

Key Risk Indicators (KRIs) have been developed within the Risk Appetite Statement and will be reported on a quarterly or annual basis as relevant to these Committees. Key Risk Indicators are designed to be predictive in nature and identify changes in emerging risks. They are linked to risk factors that may impact on the achievement of a particular strategy. Figure 2 below highlights how KRIs are linked back to organisational objectives, noting the terminology below is not necessarily reflective of the university sector.

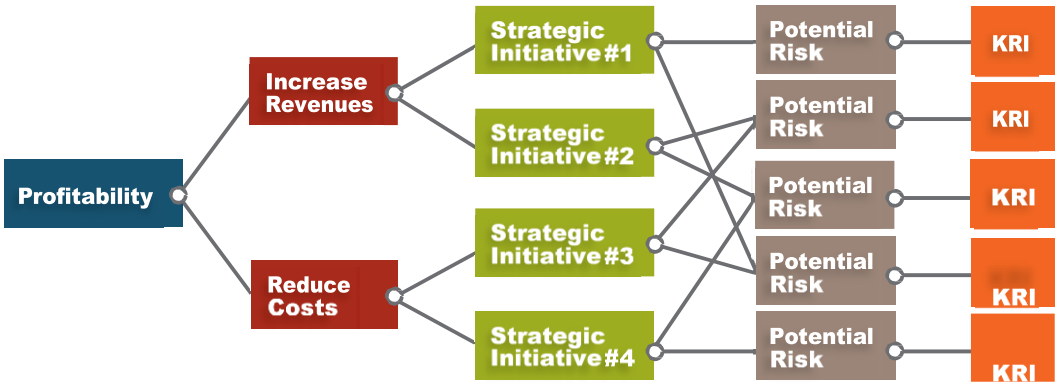

Figure 2: Linking Key Risk Indicators

From: Beasley, M. Branson, B. Hancock, B. "How Key Risk Indicators can Sharpen Focus on Emerging Risks", COSO Developing Key Risk Indicators to Strengthen Enterprise Risk Management, December 2010, 2

2.10 Recording and Reporting

Important risk management processes and activities throughout JCU will be recorded. Riskware ERM, JCU"s web-based risk management software, will be used to record and update the enterprise risk registers for University and Divisional level as well as Work Health and Safety risk registers. Recording is important for the following reasons:

- it gives integrity to the process and is an important part of good corporate governance;
- it provides an audit trail and evidence of a structured approach to risk identification and analysis;
- it provides a record of decisions made which can be used and reviewed in the future; and
- it provides a record of risk profiles for JCU to continuously monitor.

Key records include:

- **Risk Management Policy** – Establishes commitment and provides a high level overview of risk management framework;
- **Risk Management Framework and Plan** – Details the risk management framework processes and activities;
- **Risk Register and Risk Profiles** – the key risks and controls for JCU's activities and processes will be recorded on Riskware ERM.
- **Risk Treatment Plans** – strategies to treat risk levels higher than acceptable risk attitude will be recorded on Riskware ERM.

Risk documentation including risk profiles, risk registers, written/formal risk assessments, risk/control audits, self-assessments will be maintained in JCU's official record keeping system. These records may be called upon in the management of ongoing treatments, as evidence in incident investigations, in dealing with insurance matters or during other inquiries, and for audit purposes.

Risk management records should be reviewed:

- On handover of responsibilities between managers
- On assuming responsibility for a project or program
- Regularly to match reporting requirements, and
- Whenever operating parameters are subject to major change

3. RISK MANAGEMENT PLAN

3.1 Risk Management Responsibilities

Council

Council is ultimately responsible for approving, and committing to, the risk management policy and setting and articulating the University's appetite for risk. Responsibilities specific to the risk management framework include:

a. reviewing and approving the Risk Management Policy;
b. establishing and articulating the University's risk appetite statement;
c. providing feedback to management on important risk management matters/issues raised by management;
d. supporting management in communicating the importance and benefits of good risk management to stakeholders;
e. fully considering risk management issues contained in Council reports.; and
f. identifying and monitoring emerging University risks.

Audit, Risk and Compliance Committee

The Audit, Risk and Compliance Committee is responsible for approving and reviewing the University's Risk Management Framework and Plan and overseeing the risk management process of the University as a whole in accordance with the Committee's Charter, and recommends to Council an appropriate risk appetite or level of exposure for the University. The Audit, Risk and Compliance Committee is also responsible for reviewing and making recommendations to Council regarding the Risk Management Policy.

Other Council Committees

Other Council Committees have responsibility for risk management relating to their governance area of responsibility (such as Workplace Health and Safety Committee and Finance Committee).

Vice Chancellor

The Vice Chancellor is responsible for leading the development of an enterprise risk management culture across the University through promoting and supporting the Risk Management Policy and Framework.

University Executive

Members of the University Executive are responsible for ensuring that appropriate resources, systems and processes are in place to implement the Risk Management Framework across the organisation and that key University Level risks have been identified and are being managed appropriately. In particular University Executive will:

a. Monitor the enterprise risk management process periodically by reviewing the University Level Risk Assessment;
b. Examine the corporate risk profile and review of the operational risk management process results – based upon the risk information reported by the Divisions;

c. Ensure all risks are being recorded in the enterprise risk register and that these risks are regularly reviewed;
d. Implement enterprise risk management action plans; and
e. Report to Council through the Vice-Chancellor.

Chief of Staff (Risk Management Co-ordinator)

The Risk Management Coordinator is responsible for ensuring that the Risk Management Framework and Policy are being effectively implemented across the organisation. Specific responsibilities include:

a. Ensuring that the Risk Management Framework is reviewed every two years;
b. Ensuring that the Risk Management Framework within JCU is assessed/audited by an independent third party every four years;
c. Contributing to the risk management process and monitoring the management of the risk treatments for corporate risks;
d. Submission of reports to the University Executive and Audit, Risk and Compliance Committee on the effectiveness of risk management activities
e. Provision of risk management advice to Risk Champions and where necessary, management and staff at all levels;
f. Assisting with the facilitation of risk identification workshops when requested;
g. Coordinating and facilitating enterprise risk management training across the University where appropriate;
h. Assessing whether the processes for the identification and analysis of risks are being followed by Divisions (with assistance from Risk Champions)
i. Compiling risk management reports and information for University Executive and Audit, Risk and Compliance Committee; and
j. Monitoring the quality of the risk information.

Risk and Compliance Officer

The Risk and Compliance Officer supports the Chief of Staff in promoting and developing staff capability in risk assessment and management, and assists risk champions and staff with risk responsibilities within the Divisions. The Risk and Compliance Officer also oversees the requirements of the University's Compliance Framework, understanding legislative obligations relevant to the Higher Education Sector and the activities specific to JCU.

Manager Internal Audit

The Manager Internal Audit develops and implements the University's Internal Audit Strategy and risk based Internal Audit Annual Work Plan under the oversight of the Audit, Risk and Compliance Committee of Council and in consultation with Senior Management particularly the Chief of Staff; by assessing key business risks, identifying assurance gaps and emerging needs, and providing advice on how these might be addressed within the overall University assurance framework and the independent Internal Audit budget allocation.

All Managers and Staff (Risk Owners)

Managers and staff at all levels may be risk owners and are responsible for developing an understanding of and becoming competent in the implementation of risk management principles and practices in their work areas. Specific responsibilities include:

a. establishing clear objectives and identifying and evaluating the significant risks that may influence the achievement of those objectives;
b. designing, resourcing, operating and monitoring internal control systems;
c. ensuring that a risk based approach to internal control is communicated to staff and embedded in operational processes;
d. assessing and managing the risk of fraud and corruption, in line with the *Staff Code of Conduct* and the *Financial Management Practice Manual*;
e. assigning accountability for managing risks within agreed boundaries; and
f. providing an annual assurance to the University Executive regarding the extent of compliance with the Risk Management Policy.

Risk Champions
Risk champions within each Division are responsible for coordination of risk management activities within that Division. Specific responsibilities include:

a. provision of risk management advice to managers and staff within the relevant division when required;
b. assisting with the facilitation of risk identification workshops when requested;
c. coordinating the analysis and evaluation of identified risks in conjunction with the managers within the relevant division;
d. ensuring that the processes for the identification and analysis of risks are being followed within their functional area;
e. providing assistance to managers in the implementation of identified risk treatments; and
f. ensuring that identified risks are documented in the Division risk register..

3.2 Risk Management Framework Review

Documentation including policies, procedures, risk registers and systems relating to the risk management framework will be subject to periodic review. In particular the Risk Management Coordinator is to coordinate a review of the Risk Management Policy every two years (or earlier if there are any material changes in circumstances). The results of the review are to be reported to the University Executive, the Audit, Risk and Compliance Committee and ultimately the Council. The Risk Management Coordinator must also review the Risk Management Framework and Plan annually and submit the outcome and any recommended changes to University Executive and the Audit, Risk and Compliance Committee for adoption.

3.3 Risk Register Establishment and Review

One of the key principles underpinning effective risk management is that it should be integrated into normal organisational processes especially those that set the objectives and strategies of the organisation. As the University has an established business planning process it is critical that risk management is integrated into the normal business planning cycle.

The risk management process described above will be applied at four levels within the University - these being University, Division, Project and Activity.

University Level
As part of the University's annual business planning cycle, University Executive will conduct a University level risk assessment to identify, review and/or update key strategic risks facing the organisation that may impact on the University's ability to achieve its strategic intent. The outcomes of this assessment will be recorded in the University enterprise risk register and will be reported to the Audit, Risk and Compliance Committee and to the Council. Progress in implementing risk treatment plans emanating from the University Level Risk Assessment will be monitored on a regular basis by University Executive.

Division Level
Each Division is required to identify and analyse key risks that may impact on achieving objectives specific to that Division. The outcome of this assessment will be recorded in a Divisional risk register

Project Level
All submissions regarding new projects or initiatives must be accompanied by a full risk assessment commensurate with the scale of the project or initiative. The risk assessment must be completed by the relevant Division using the process detailed above and must be recorded in an enterprise project risk register. The register is to be overseen by the Risk Management Champion.

Activity Level
All Managers within the University are responsible for ensuring that risks arising from the activities under their control have been properly assessed and are being adequately treated. To this end, the Risk Champions, in conjunction with relevant Managers and the University's Risk and Compliance Officer, shall develop an annual program of activity based risk assessments appropriate to the size, scale and risk profile of the department in question. The outcome of these risk assessments is to be recorded in an activity level risk register which is to be kept under ongoing review by the relevant Manager or Risk Owner.

3.4 Risk Management Plan Progress Reports

The Risk Management Coordinator is to coordinate the preparation of six monthly reports to University Executive and to the Audit, Risk and Compliance Committee regarding progress in implementing the Risk Management Plan. These reports will at least contain details of:

- any risk management initiatives undertaken during the previous quarter
- any major incidents that have occurred during the previous quarter
- heat maps showing the distribution of risks across the risk evaluation matrix
- the high i residual risks facing the organisation and the controls in place to manage those risks (as per the table below)
- progress in implementing key risk treatment plans
- any other matters that may be of relevance to the Committee

The following table identifies the communication, recording and control requirements for each risk rating.

Table 1: Risk Notification and Control Table

Risk Rating	Authority to Accept Risk	Notification/ communication Requirements	Formal recording / reporting	Inherent risk review and control requirements
High	University Executive (through Risk Champions)	Council through Audit, Risk and Compliance Committee	Mandatory to Risk Register and Triennium Planning	Reviewed 6 monthly – controls implemented to **reduce risk to medium or below** within 12 months with defined treatment plans
Medium	Dean/Directors/Head of Academic Group or Manager	Divisional Risk Champion	Mandatory to Risk Register and Triennium Planning	Reviewed 12 monthly – include consideration of this risk in strategic and operational planning; controls to be identified and actions to reduce risk actively pursued
Low	Staff member one level removed from risk assessment owner	Nil	Included in Risk Register	Nil

3.5 Training

Risk owners and other key staff may require periodic training in how to implement the risk management process and their responsibilities and obligations under JCU's Risk Management Policy and Plan. General risk management training should be provided to all risk owners and other relevant staff every four years.

In addition, all new staff should be advised of JCU's commitment to risk management and their responsibilities and obligations when they commence working for JCU. This should generally be done through a short introduction at JCU's online induction session followed by a more detailed training session for risk owners within three months of commencing employment. The training may be delivered internally or externally or by a combination of

the two. The Risk and Compliance Officer is responsible for coordinating and recording the provision of such training.

3.6 Summary of Key Risk Management Plan Activities

Table 2 summarises the key actions, reviews and reports required by JCU's Risk Management Plan. It details who is responsible for each activity and the required timing.

Table 2: Summary of Key Activities

Action	Description	Responsibility	Timing
Review RM Policy	Review the currency and effectiveness of JCU's Risk Management Policy	Council to approve on advice of University Executive and Audit, Risk and Compliance Committee (review to be coordinated by Chief of Staff)	Every five years in August
Review RM Framework and Plan	Review the currency and effectiveness of JCU's Risk Management Framework and Plan	Audit, Risk and Compliance Committee to approve on advice of University Executive (coordinated by Chief of Staff)	Every five years in August
University Risk Register	Review risks and controls contained in the University risk register and identify new or emerging risks	University Executive to initiate, Audit, Risk and Compliance Committee to review (coordinated by Chief of Staff)	Every six months
Division Risk Register	Review risks and controls contained in each Planning Package and identify new or emerging risks	Provost and all DVCs (Risk Champions to coordinate)	Every six months
Project Risk Register	Conduct risk assessments for all new projects and initiatives	Risk Owners (Risk Champions to assist)	Prior to deciding to proceed with new project/ initiative
Activity Risk Registers	Conduct risk assessments for key activities and processes	Risk Owners (Risk Champions to assist)	As per annual plan to be developed within each Division
Risk Management Plan Progress Report	Review current status of key risks, Risk Treatment Plans, incidents and other relevant issues	University Executive and Audit, Risk and Compliance Committee (coordinated by Chief of Staff)	University Executive – six monthly Audit, Risk and Compliance Committee – six monthly

Training	Ensure risk owners and other staff are aware of the risk management process and their obligations.	Risk Management Coordinator (Risk Champions to assist)	Refresher for all Managers and Risk Champions as required. Introduction for all new staff at on-line induction with more detailed session for risk owners within three months of commencing.

Appendix A – Likelihood Ratings

Table 3: Likelihood Ratings

Rating	Likelihood	Description	Quantification
1	Rare	The event may occur but only in exceptional circumstances and/or no past event history.	May occur within every 10 year period or more.
2	Unlikely	The event could occur in some circumstances. No past event history.	Could occur within a 5 to 10 year period.
3	Possible	The event may occur sometime. Some past warning signs or previous event history.	Could occur within a 1 to 5 year period.
4	Likely	The event will probably occur. Some recurring past event history.	Could occur within a 3 to 12 month period.
5	Almost Certain	The event is expected to occur in normal circumstances. There has been frequent past history.	Likely to occur within a 3 month period or during the performance of an actual task.

Appendix B – Consequence Ratings

Table 4: Consequence ratings

Category	Risk Area and Impact								
	Financial	**Academic**	**Reputation**	**Business Disruption**	**People**	**Legal and Regulatory (Compliance)**	**Workplace Health & Safety**	**Strategic**	**Sustainability**
5. Catastrophic	>10% recurrent reduction in operating fund revenue, one off loss of > $50m, Cash balance falls below 5 week forecast	Loss of accreditation of multiple courses, institutionalised and/or systemic fraud or misconduct in academic activities including enrolments and examination processes, loss of flagship research projects	Sustained negative national and international publicity that could result in significant loss of funding, staff and/or students	Unavailability of critical infrastructure, utilities > 2 weeks; unavailability of ICT services > 2 business days and catastrophic impact to critical business cycle; inability to deliver teaching > 2 days; impact to JCU research standings affecting top 2% achievement in Academic Ranking of World Universities	Recruitment to a business/academic critical role >24months resulting in serious damage to research reputation and league table standing; a significant number of resignations among high reputation researchers; Systemic failure to deal with grievances leading to multiple Fair Work Commission rulings against the University with moderate financial impact and reputational damage affecting student recruitment; Prolonged University-wide industrial action potentially resulting in business disruption, reputational damage and student recruitment	Successful class actions or serious prosecution, repeated breaches of significant contractual arrangements, significant statutory intervention due to serious breach of legislation and/or breach of university policy resulting in termination of employment	Fatality; prosecution and penalty/fine >$500k; Smartraveller Alert Level 4; .	Most University objectives can no longer be achieved; complete revision of long term business model required	Long term environmental damage (5 years or longer), requiring >$1M to remedy Breaches results in prosecution by DEHP; Multiple Human Rights claims; Serious breaches of the Voluntary Code of Best Practice for the Governance of AS Public Universities; and serious ethical breaches with the potential for litigation, consistent failure to comply with regulatory mandatory reporting requirements

4. Major	Between 5 & 10% recurrent reduction in operating fund revenue, one off loss of between $20m & $50m, Cash balance falls below 10 week safety margin	Loss of mandatory accreditation of single course, localised fraud or misconduct in academic activities including enrolments and examination processes, loss of multiple significant research projects	Significant negative publicity that could result in some loss of funding, staff and/or students	Unavailability of critical infrastructure, utilities between 1 and 2 weeks; Unavailability of ICT services during business day for 24-48 hours and major impact to critical business cycle; inability to deliver teaching for 24-48 hours; research productivity impact 8+ weeks; impact on JCU research standings	Recruitment to a business/academic critical role 12-24months, potentially impacting research rankings or loss of academic accreditations; Single high profile performance management case resulting in Fair Work Commission ruling against the University resulting in minor financial impact and causing reputational damage; Higher than desired staff turnover across a Division impacting performance; Morale issues impacting operational performance across some Divisions; Industrial action at Divisional level	One off serious successful prosecution or adverse findings, breach of significant contractual arrangement, statutory intervention due to breach of legislation; breach of university policy treated as misconduct resulting in formal action/investigation	Permanent disability; prosecution and penalty/fine between >$200-500k; Smartraveller Alert Level 3 or combination of 3 and 4;	A number of significant University objectives can no longer be achieved	Medium-term (1-5 years) environmental damage, requiring >$500k to $1M to study and/or remedy; Breaches result in an Enforceable Undertaking by DEHP; sustained reputational damage as a result of significant loss of confidence in governance and management oversight of university activities; failure to comply with regulatory mandatory reporting requirements.
3. Moderate	Between 1 & 5% recurrent reduction in operating fund revenue, one off loss of between $5m & $20m	Loss of voluntary accreditation of single course, localised fraud or misconduct in academic activities, loss of significant research project	One off negative publicity of several days' duration requiring some management resources to deal with	Unavailability of critical infrastructure, utilities between 3 & 5 days; unavailability of ICT services during business day for 12-24 hours and/or moderate impact to critical business cycle; inability to deliver teaching for 12-24 hours; loss of raw un-reproducible data; research productivity impact 2-8 weeks; possible impact to JCU research standings	Recruitment to a business/academic critical role 6-12months from advertising; Escalation of performance management case(s) to Fair Work Commission; Inability to attract/retain key staff across multiple disciplines; Morale issues impacting operational performance across a Division	One off breach of legal or contractual arrangements requiring legal or regulatory intervention; repeated breaches of university policy with formal counselling of an employee	Lost time injury; penalty/fine between $50-200k; Smartraveller Alert Level 2 or combination of 2 and 3;	Some important University objectives can no longer be achieved	Short-term (less than 1 year) environmental damage, requiring >$150k to $500k to study and/or remedy; Administrative action taken by Env. Regulator; allegations of mismanagement and lack of governance oversight on university activities; breaches in conduct at the senior management or governance level; warning/notice letter from Regulator on governance practices.

2. Minor	One off, or recurring loss of between $1m & $5m	One off instances of minor misconduct dealt with according to normal procedures, loss of research project	One off negative local publicity that requires a minimal response from the University	Unavailability of critical infrastructure, utilities between 1 & 3 days; unavailability of ICT services during business day for 4-12 hours and/or minor impact to critical business cycle; Inability to deliver teaching for 4-12 hours; Loss of research processing data, productivity impact (1-2 weeks)	Recruitment to a business/academic critical role within 3-6months from advertising; Performance management case(s) satisfactorily resolved by University requiring dedicated HR resources: Inability to attract/retain staff in a specialised area; Morale issues restricted to a Directorate/College impacting operational performance	Minor breach of regulations or standards; one off minor breach of university policy and no formal counselling of employee	Incident including medical treatment injuries, near miss; penalty/fine </=$50k; Smartraveller Alert Level 1 or combination of 1 and 2;	Reprioritisation of resources to enable achievement of key University objectives	Environmental damage, requiring up to $150,000 to study and/or remedy; Infringement notice may be issued by Env. Regulator; failure to comply with voluntary reporting requirements.
1. Insignificant	One off, or recurring loss of <$1m	Minor academic indiscretions dealt with according to normal procedures	One off media enquiries or neutral press coverage	Unavailability of critical infrastructure, utilities < 1 day, unavailability of ICT services during business day for < 4 hours and/or very limited impact to critical business cycle; inability to deliver teaching for < 4 hours; Minor loss of research data, little to no productivity impact	Performance management cases resolved satisfactorily requiring minimal HR resources; Higher than desired staff turnover in non-critical areas; Localised morale issues with minimal impact on operational performance	Minor technical breach of standards	Incident including first aid; workplace hazard contained immediately and no ongoing safety risk; Smartraveller Alert Level 1; Negligible environmental impact, managed within operating budgets; Warning notice/letter may be issued by Env. Regulator	Little or no impact on University objectives	Negligible environmental impact, managed within operating budgets; Warning notice/letter may be issued by Env. Regulator; lack of awareness of social responsibilities, ethics and integrity principles

Appendix C – Risk Rating Matrix

Table 5a: Risk Level Ratings

Consequence	Likelihood				
	Rare (E)	Unlikely (D)	Possible (C)	Likely (B)	Almost Certain (A)
5 Catastrophic	Medium	High	High	High	High
4 Major	Medium	Medium	High	High	High
3 Moderate	Low	Medium	Medium	High	High
2 Minor	Low	Low	Medium	Medium	Medium
1 Insignificant	Low	Low	Low	Low	Medium

Table 5b: Risk Evaluation

Consequence	Likelihood				
	Rare (E)	Unlikely (D)	Possible (C)	Likely (B)	Almost Certain (A)
5 Catastophic	15	19	22	24	25
4 Major	10	14	18	21	23
3 Moderate	6	9	13	17	20
2 Minor	3	5	8	12	16
1 Insignificant	1	2	4	7	11

Appendix D – Control Effectiveness Ratings

Table 6: Control Effectiveness Ratings

Rating	Effectiveness	Description
1	Not Effective	Control(s) does not address risk or no controls identified or controls identified and address risk, but not implemented.
2	Somewhat Effective	Control(s) exists, but not very effective as control design can be improved, better communicated and implemented.
3	Reasonably Effective	Control(s) mostly reliable and effective. Documentation exists but can be better communicated, testing and monitoring of controls needs to be improved
4	Highly Effective	Control(s) fully verified and tested as reliable and effective. Fully documented process and well communicated

Appendix E – Risk Management Glossary

Adapted from AS/NZS ISO 31000:2018

communication and consultation	continual and iterative processes that an organisation conducts to provide, share or obtain information and to engage in dialogue with stakeholders and others regarding the management of risk stakeholder person or organisation that can affect, be affected by, or perceive themselves to be affected by a decision or activity
consequence	outcome of an event affecting objectives
control	measure that maintains and/or modifies risk
establishing the context	defining the external and internal parameters to be taken into account when managing risk, and setting the scope and risk criteria for the risk management policy
external context	external environment in which the organisation seeks to achieve its objectives
internal context	internal environment in which the organisation seeks to achieve its objectives
level of risk	magnitude of a risk, expressed in terms of the combination of consequences and their likelihood
likelihood	chance of something happening
monitoring	continual checking, supervising, critically observing or determining the status in order to identify change from the performance level required or expected
residual risk	risk remaining after risk treatment
review	activity undertaken to determine the suitability, adequacy and effectiveness of the subject matter to achieve established objectives
risk	effect of uncertainty on objectives
risk analysis	process to comprehend the nature of risk and to determine the level of risk
risk appetite	the amount and type of risk an organisation is prepared to accept in the pursuit of its organisational objectives
risk assessment	overall process of risk identification, risk analysis and risk evaluation

risk criteria	terms of reference against which the significance of a risk is evaluated
risk evaluation	process of comparing the results of risk analysis with risk criteria to determine whether the risk and/or its magnitude is acceptable or tolerable
risk identification	process of finding, recognizing and describing risks
risk limit	threshold to monitor that actual risk exposure does not deviate too much from the desired optimum; breaching risk limits will typically act as a trigger for corrective action at the process level
risk management	coordinated activities to direct and control an organisation with regard to risk
risk management framework	set of components that provide the foundations and organisational arrangements for designing, implementing, monitoring, reviewing and continually improving risk management throughout the organisation
risk management plan	scheme within the risk management framework specifying the approach, the management components and resources to be applied to the management of risk
risk management policy	statement of the overall intentions and direction of an organisation related to risk management
risk management process	systematic application of management policies, procedures and practices to the activities of communicating, consulting, establishing the context, and identifying, analysing, evaluating, treating, monitoring and reviewing risk
risk owner	person or entity with the accountability and authority to manage the risk
risk profile	description of any set of risks
risk source	element which alone or in combination has the intrinsic potential to give rise to risk event
risk tolerance	the specific maximum risk that an organisation is willing to take regarding each relevant risk (sub-) category, often in quantitative terms
risk treatment	process to modify risk