



Shire of Ngaanyatjaraku
ON A JOURNEY

AUDIT & RISK COMMITTEE MEETING

ATTACHMENTS

**Tjulyuru Cultural and Civic Centre
Warburton Community**

27 April 2022

at

1.00 pm

Risk Number	Risk Assessment Category	Risk Issue and Failure Modes	Existing Controls	Risk Rating	Mitigation and Management Strategy (Possible Future Controls)	Responsible Officer	Complete Y/N/%	Action taken
1	Legislative / Regulatory / Policy / Occupational Safety and Health	Insufficient and/or inconsistent procedures in relation to procurement processes, including selection criteria, assessment requirements, declarations of independence of assessors, variations to contracts and review.	Purchasing policy	High	Review procurement processes to consider where gaps exist and address deficiencies. Develop procedures/framework to guide and direct procurement requirements for all staff.	DGS	70%	A procurement and purchasing procedure has been completed. This will be reviewed as part of the new CEO Procedures.
2	Service Delivery/Business Interruption	Failure to prepare and plan for potential events which could interrupt the administrative operations in delivering services to the community.		High	Identify and document key business continuity risks along with the treatments to reduce risks to an acceptable level. Develop into a Business Continuity Plan and test to ensure validity.	DGS	80%	The Business Continuity Plan was adopted by Council in December 2021.
3	Environmental Risk	Inadequate control and management of reclaimed water (for irrigation etc)	Agreements with Water Corporation	Medium	Develop procedures and review schedule for the control and management of reclaimed water.	CEO	Y	Water management is managed by DoC REMS Contractor
4	Environmental Risk	Failure to adequately enforce conditions and manage landfill operations at unmanned landfill sites.	Waste Management Plan	High	Articulate operating arrangements for waste disposal facilities. Develop workflow diagrams for administration staff when processing front counter transactions for unmanned waste	CEO	Y	Landfills are not the Shires. The Shire has report potentially contaminated sites to DEWR who are liaising with DoC / DPLH
5	Legislative / Regulatory / Policy / Occupational Safety and Health	Inadequate processes to manage and comply with OSH requirements	OSH safety audit, OSH risk register, toolbox meetings, OSH officer	High	Safety audit to be undertaken through to assess OSH requirements. Maintain OSH risk register and actions through OSH meetings.	DCS	30%	Software (WHS monitor) in place to assist with managing Workplace Health and Safety requirements as per new legislation. Training and input of base data in progress.
6	Legislative / Regulatory / Policy / Occupational Safety and Health	Failure to manage HR matters in accordance with statutory requirements.	IR consultant / professional advice subscription	Medium	Review policies and procedures to address gaps relating to HR in existing practices. Develop procedures and / or workflows for HR activities.	DCS	50%	Policy Manual has been reviewed and endorsed by Council. CEO Procedures under review.
7	Financial	Incorrect processing of employee payroll	Processes for timesheet authorisation, payroll authorisation and review processes		Develop procedures and/or workflows for appropriate processing, review and authorisation process for all functions of fortnightly payroll processing.	DCS	85%	Updates to documentation in progress.
RISK ASSESSMENT FROM REG 5. and REG 17. REVIEW.				RISK ASSESSMENT FROM REG 5. and REG 17. REVIEW.				
External Complaints								
6.2.1	This policy governs the procedure for complaints against elected members of Council, which contradicts the appointment of the CEO as the Complaints Officer in the Code of Conduct for Council			Medium	Review and amend the policy with consideration of the complaints resolution procedures as documented in the Code of Conduct for Council Members, Committee Members and candidates for election.	DGS	50%	A complaint resolution procedure has been completed. This will be incorporated into the updated CEO Procedures.
Business Continuity & Disaster Recovery Plan								

Risk Number	Risk Assessment Category	Risk Issue and Failure Modes	Existing Controls	Risk Rating	Mitigation and Management Strategy (Possible Future Controls)	Responsible Officer	Complete Y/N/%	Action taken
7.1.1		A Business Continuity Plan was prepared in 2016 however there was no evidence of the plan being tested to ensure its validity.		High	Progress the review, update of the Business Continuity Plan and test it to ensure its validity, including validity of the documented key business continuity risks along with the treatments. Ensure content of the plan is relevant and current to the Shire, and risk treatments are consolidated with overarching risk management activities. The plan should facilitate organised decision making in the event of any major disruption impacting the Shire's ability to continue normal operations, with testing involving relevant and key personnel to ensure validity of the identified risks and treatments within the plan.	DGS	60%	BCDRP adopted by Council in December 2021. The IT Recovery Plan is going to Council April 2022 for adoption.
ICT Disaster Recovery Plan								
7.1.2		A Disaster Recovery Plan was adopted by Council on 09 November 2016 however there was no evidence of the plan being tested to ensure its validity.		Medium	Review and update content of the Disaster Recovery Plan to ensure relevancy and currency to the Shire. Maintain, review and test the plan to ensure validity.	DGS	60%	See above comment
Administration Procedures								
7.1.3		Documented procedures currently exist in the form of a CEO Procedures Manual (currently under review). Some other		High	Finalise review of the CEO Procedures.	DGS / DCS	70%	A draft update of the CEO procedures has been completed. With the CEO for review.
Asset Management Plan								
7.1.4		The most recent Asset Management Plan was adopted in November 2018. The plan does not meet the standards set within the DLGSCI Integrated Planning and Reporting Advisory Standard (September 2016) in that the plan		High	Review and update the Asset Management Plans to maintain effective alignment with IPR documents, and to include all required data and information as published within the DLGSCI Integrated Planning and Reporting Advisory Standard (September 2016).	DIS	20%	Road Map adopted November Council, to be completed April 2021.
Checklists & Workflow Diagrams								
7.2.1		Checklists of key functions are maintained for selected functions. Checklists were not maintained and evidenced for all standard routine functions such as end of month reconciliations and reporting across the organisation. It was noted some staff have commenced with the creation of checklists and procedures.		High	Creation and maintenance of standard checklists may assist in evidencing key points of control. Checklists assist in ensuring compliance with repetitive legislative compliance tasks. Staff are encouraged to continue with the development of checklists and procedures for routine functions, including evidencing independent review. In conjunction with, or as an alternative to, the development of documented procedures and checklists, development of workflow process diagrams may assist in clearly identifying controls and processes to be followed.	DCS	10%	Updates to happen to processes to incorporate a review to current checklists. Procedures to be reviewed to include this.
Procedure Changes								
7.2.2		Process for amending or changing procedures are not formalised (administration procedures yet to be finalised). This creates opportunities for unilateral unauthorised changes to procedures and a breakdown in key controls within internal and financial controls.		Medium	Establish a process for the development, review, amendment and authorisation of procedures, checklists and other internal control documentation, throughout the Shire to assist with managing changes to procedures.	DCS	10%	Procedures under review.
Changes to Banking Details								

Risk Number	Risk Assessment Category	Risk Issue and Failure Modes	Existing Controls	Risk Rating	Mitigation and Management Strategy (Possible Future Controls)	Responsible Officer	Complete Y/N/%	Action taken
7.2.3		Current procedures to restrict changes to bank details are considered appropriate, however do not appear to always be consistently documented to evidence all control validations for changes which have occurred. We noted more formal procedures relating to changes to banking details for employees and creditors master files are developed to ensure sufficient controls exist in both substantiating the change request and the changes performed within the Shire's ERP system.			Progress and complete the review and update procedures to ensure the following matters are appropriately considered and controls are adequate to: <ul style="list-style-type: none"> •Validate the change request and its origin; •Authority exists for the change request; and •Validate and control the changes once completed. Procedures should require documentary support to evidence all controls having been applied when applying changes to banking details within the Shire's ERP.	DCS	10%	Procedures under review.
End of Month Processes								
7.2.4		Creditors invoices appears to be processed and entered only at the time where a routine creditors payment run is scheduled resulting in month end creditor balances being nil at the end of each month selected for review. This may		High	Supplier invoices should be processed in a timely fashion and entered through the Shire's ERP system as soon as practicable after receipt to provide a more accurate representation of the Shire's liabilities at any given time. Invoices should be followed up where not received for goods or services obtained.	DCS	90%	Process to be developed for outstanding Purchase Order followup.
General Journal Entries								
7.2.5		There are limited documented internal control procedures for general journals. No general journal audit trail is currently produced to ensure no unauthorised journals have been posted.		Medium	Document internal controls to ensure journals requests initiated are reviewed and approved/authorised prior to posting by an appropriate officer, the current practice of independent review is maintained, and evidence of review is consistently applied. A monthly journal audit trail report should be produced and independently reviewed prior to preparation of the monthly statement of financial activity. IT permissions should also be considered when developing controls.	DCS	10%	Procedures under review.
Receipting and Banking								
7.2.6		Evidence of an independent review of end of day receipting reports selected for testing was not always recorded.		High	Update procedures and controls to ensure an appropriate review process has been undertaken for all end of day receipting activities processed for banking.	DCS	10%	Procedures under review.
Petty Cash								
7.2.7		Our testing of petty cash noted a breakdown within the systems and controls described to us. The March 2021 reconciliation did not evidence review and authorisation of an appropriate senior officer, independent of the preparer.		Medium	Undertake a review of systems and processes relating to petty cash, to ensure adequate controls exist for the security of cash held, as well as maintaining and processing of petty cash transactions.	DCS	10%	Procedures under review.
Credit Cards								

Risk Number	Risk Assessment Category	Risk Issue and Failure Modes	Existing Controls	Risk Rating	Mitigation and Management Strategy (Possible Future Controls)	Responsible Officer	Complete Y/N/%	Action taken
7.2.8		<p>Credit card statement in December 2020 selected for review was not signed by the FAC for the transactions incurred as required by the documented policy and procedure in place.</p> <p>Our review noted a credit card transaction in December 2020 which did not reconcile to the support documentation included with the credit card statement.</p>		Medium	<p>Update systems and processes relating to credit cards, to ensure adequate controls exist relating to ensure compliance with adopted policy and approved procedure requirements. This should also provide for controls for robust control and review processes prior to payments being deducted through automated bank payments.</p> <p>Ensure processes exist to maintain adherence to and detect any deviation from established documented procedures and controls. Where possible, segregation of duties should exist where those who have incurred charges on corporate credit cards are not also responsible for reconciling and entering credit card transactions. If circumstances prevent the full segregation of duties, documented procedures should describe the controls in place to reduce associated risks.</p>	DCS	10%	Procedures under review.
Procurement								
7.2.9		<p>Through limited testing of payments we noted the following:</p> <ul style="list-style-type: none"> An instance where the requirements of the purchasing policy had not been adhered to; Authorisation of invoices to be processed for payment made by the same individual who requested and authorised the purchase order; Some invoices did not evidence independent review and authorisation when entered/processed for payment Purchase orders being issued with no assigned value. 		Medium	<p>All procurement of goods or services should be undertaken in accordance with legislative requirements and the purchasing policy. A review of the purchasing policy may be required to ensure the policy reflects the purchasing objectives of the Shire.</p> <p>Appropriate segregation of duties relating to the requisitioning, approval and authorisation of procurement related activities should exist. If circumstances prevent the full segregation of duties then procedures should exist to demonstrate alternate controls in place to reduce associated risks.</p> <p>Review and update procedures to ensure appropriate review and authorisation has occurred and is evidenced prior to creditors invoices being authorised for payment.</p> <p>Values should be assigned to all purchase orders to ensure purchasing authorisations and policy requirements have been adhered to and controls have been developed to prevent unauthorised changes being applied after purchase orders have been approved.</p>	DCS	90%	<p>All procurement of goods and services is undertaken according to legislation and the Shire's purchasing policy.</p> <p>Duties are segregated and all processes require an independent review by a senior officer.</p> <p>Procedures are under review.</p>
Outstanding Purchase Orders								
7.2.10		We did not observe any formal procedures relating to the routine monitoring of and clearance of outstanding purchase orders. Regular review of outstanding		Medium	Update procedures to include review of the status of outstanding purchase orders as part of end of month processes. Ensure any controls developed are routinely and consistently applied.	DCS		
ICT Security								
7.2.11		We noted some levels of permissions have been established for IT network access to software and data, however this is largely undocumented. A number of recommendations were		High	Progress the implementation of recommendations included within the Shire's recent IT Strategic Plan and consider undertaking a comprehensive IT general security review, articulate current practices and implement findings of the review.	DGS	70%	The IT Strategic Plan was adopted by Council, and a new IT Contractor (Focus Networks) has been engaged by the shire to assist in completing the actions from the IT Strategic plan.
Art Shop Controls								

Risk Number	Risk Assessment Category	Risk Issue and Failure Modes	Existing Controls	Risk Rating	Mitigation and Management Strategy (Possible Future Controls)	Responsible Officer	Complete Y/N/%	Action taken
7.2.12		Purchases for the Warta Shop are managed by an officer who has responsibility for operation of the centre, negotiating purchases of art with artists, recording the art, setting of prices for the disposal of the art, sale of art and issuing cash payment when purchasing artwork from artists. Limited oversight documentation exists in relation to these activities.		High	A full review of procedures and controls is required to determine practical procedures, documentation and controls for the purchase and sale of art. Procedures should ensure compliance with the regulatory requirements in relation to the setting of fees and charges and ensure appropriate stock reconciliation controls are in place.	DCS	10%	Procedures under review.
Grants Management								
7.2.13		Limited procedures exist to support processes and controls in respect to: <ul style="list-style-type: none"> • application of grants; • acquittal of grants; • compliance with grant conditions; and • governance and administration arrangements. 		High	Systems relating to grants management should include controls for the monitoring of grants with funding conditions and acquittal processes. Incomplete consideration of these factors may contribute to the Shire's ability to effectively deliver grant programs.	DCS	10%	Grant register to be implemented. Review of procedures to include.
Segregation of Duties and Internal Controls								
7.1.14		We noted a lack of independent oversight for some key roles, with some existing controls considered inadequate, especially where multiple process controls for high risk transactions are performed by a single individual or involve closely related parties. Where a single individual or closely related parties are responsible for or involved in multiple stages of various processes, there is an increased risk and opportunity for error, misconduct etc to occur.		High	Interventions should be available at various stages for a number of operational functions, including routine independent reviews of controls to ensure they are being observed and maintained as required. Where resourcing constraints exist (such as small local governments with limited staff), other considerations should be applied such as training and engaging officers within the organisation who may not normally be involved in these processes, to assist with checks and controls, or engaging independent parties to provide sufficient levels of oversight.	DCS	10%	Procedures under review.
Procurement Assessment								
7.2.15		Documented formal requirements when undertaking assessments of responses to requests for quotations exist, however are not always consistently recorded / maintained with our samples selected for testing. Procedures		High	To help ensure probity and fairness when assessing high value procurement, at least three persons should assess the procurement responses independently of each other. Documented processes should require a higher level of probity and due diligence, for higher value or higher risk purchases.	DCS / DGS	10%	The draft procurement procedures outline the requirements for high value procurement. Procedures under review.
Rates								
7.2.16		Evidence of routine reviews of rate exempt properties as defined by section 6.26(2)(g) of the Local Government Act 1995 was not available for our inspection.		Medium	Develop and maintain systems and processes whereby routine reviews are undertaken of rate exempt properties within the Shire, confirming these properties are used exclusively for rate exempt purpose, in accordance with policy 2.6 Rating Exemption.	DCS	10%	Procedures under review.
Fixed Assets								
7.2.17		We noted two instances of asset additions being incorrectly recorded on the fixed assets register due to inconsistent GST treatment of some line item expenses for the asset acquisition.		High	Ensure appropriate controls are in place to correctly identify the initial carrying value of new assets. Review procedures and controls for updates to the asset register, including review and authorisation by an independent officer.	DCS	10%	Procedures under review.
Stock Controls								

Risk Number	Risk Assessment Category	Risk Issue and Failure Modes	Existing Controls	Risk Rating	Mitigation and Management Strategy (Possible Future Controls)	Responsible Officer	Complete Y/N/%	Action taken
7.2.18		Controls in relation to management of stock for the Warta Shop are considered inadequate. Documented procedures for annual stocktakes of artwork and other items of value as well as reconciliations to		High	Review and update systems and procedures relating to stock controls at Shire facilities, including permission/authorisation requirements for stock pricing changes and stock write offs. Periodic stocktakes should minimally include reconciliation of stock movements against sales and independent review of data etc.	DCS	10%	Procedures under review.
Employee Appointment Procedures								
7.3.1		Staff inductions are inconsistently applied throughout the Shire, and induction processes do not consistently communicate to staff required expectations and requirements when performing local government functions. It is noted that draft procedures for this are currently being developed.		High	Develop and implement procedures to ensure all new staff are appropriately inducted and aware of the parameters of their employment responsibilities and obligations including: <ul style="list-style-type: none"> •OH&S; •Duties and responsibilities; •Security; •Code of Conduct; •HR Policies and Procedures; •Legislative Compliance; •Risk Management; and •Other relevant and required topics. 	DCS	10%	Procedures under review.
Employee Termination Procedures								
7.3.2		No formal process or procedure is currently in place to ensure the appropriate process on termination of employees ensuring security and IT permissions are		High	Establish policies, procedures or checklists to manage and document the termination of employees, ensuring access to IT systems, etc. is appropriately restricted and all allocated Shire assets are recovered.	DCS	10%	Procedures under review.
Employee Identity and Credentials								
7.3.3		Practices and procedures for verifying employee identity, right to work in Australia, background checks, verification of employment history and qualifications are considered inadequate. We noted a breakdown in controls where an employee file did not contain evidence of background checks, licences, qualifications etc.		Medium	Develop, implement and maintain appropriate policies and procedures to reduce the risk of unqualified or unsuitable staff being employed by the Shire, in line with the Western Australian Auditor General's Report in June 2019 relating to Verifying Employee Identity and Credentials.	DCS	10%	Procedures under review.
Staff Training								
7.3.4		Planned and required staff training needs for employees are currently recorded for some operational areas/departments. A central training matrix is not currently maintained.		Medium	Refine the current practice of documenting training requirements to add further value by developing and maintaining a central training matrix to identify staff training needs relevant to their role, ensuring it is co-ordinated across the organisation and monitors currency of required licences and qualifications.	DCS	10%	WHS Monitor software will assist with documentation in relation to staff training. Procedures under review.
Payroll								
7.3.5		Evidence of review and authorisation of fortnightly payroll reports was not recorded by both review/authorising officers. The officer responsible for preparing and processing employee pays is also tasked with authorising the payments through the bank. Risks may exist where reduced impartiality and lack of segregation of duties are associated with payroll		Medium	Implement documented procedures to ensure adequate controls are consistently followed for review and authorisation of fortnightly payroll reports, with appropriate evidence of these reviews consistently recorded. Where possible, segregation of duties should exist where those responsible for processing payroll transactions are not responsible for approving payments through the bank. If circumstances prevent the full segregation of duties, documented procedures should describe the controls in place to reduce associated risks.	DCS	10%	Procedures under review. Duties are segregated and all processes require an independent review by a senior officer.
Payroll Audit Trails								

Risk Number	Risk Assessment Category	Risk Issue and Failure Modes	Existing Controls	Risk Rating	Mitigation and Management Strategy (Possible Future Controls)	Responsible Officer	Complete Y/N/%	Action taken
7.3.6		A review of changes to the payroll is made each pay run and is conducted prior to the payroll being updated into the bank. However, our testing noted a payroll audit trail had no preparer or reviewer evidenced on the report.		High	Procedures to minimise risk of erroneous or unauthorised changes to employee details should be consistently evidenced and maintained. Regular reviews of software audit trails is one form of control and this practice is strongly encouraged to continue with the addition of consistent evidence of the review.	DCS	80%	Independent review of all changes to employee database is performed by a senior officer. The process to be developed to ensure supporting documentation is maintained.
7.3.7		The officers responsible for processing and reviewing payroll are tasked with review and capture of employee entitlements, allowances, deductions, etc. with no verification to contractual entitlements. Staff have advised more formal documentation / checklists are intended to be created to assist with payroll processing, review and authorisation.		Medium	Review of procedures and controls to define procedures, documentation and controls for the accurate processing of payroll each fortnight. Details for each employee should be reviewed against individual employment contracts to capture allowances, deductions, entitlements etc, into a master list, with appropriate review and authorisation for changes. Payroll exception reporting and review of audit trails should be undertaken to capture anomalies or unauthorised changes.	DCS	10%	Procedures under review.
Contractor Insurance								
7.4.1		Contractors' insurances are not always assessed prior to award of contracts. Reliance is placed on contract managers to ensure copies of insurances are provided and are current.		High	To help ensure contractors have the relevant licences and have adequate insurance cover for the works they undertake for the Shire, procedures should be finalised, and records maintained to ensure copies of contractors' current insurances and licences are held on file.	DCS	5%	Software (WHS monitor) in place to assist with managing contractor Workplace Health and Safety requirements as per new legislation. Procedures under review.
Register of Hazardous Materials								
8.2.1		A register of hazardous materials was not available for our inspection, to reflect properties under the control of the Shire		High	Develop and maintain a register to record details of hazardous materials, such as asbestos, for properties under the control of the Shire.	DIS / DCS	50%	90% of Shire owned buildings have been inspected for hazardous materials and data collected for input into register. LGIS generic asbestos risk register being reviewed and adapted for Shire of Ngaanyatjarraku purposes.
Investment Register								
8.2.2		An investment register was not available for our inspection detailing the nature and location of all investments and all related transactions.		High	Recording the nature and location of all investments and related transactions is required by Regulation 19 (2) of the Local Government (Financial Management) Regulations 1996. Tracing of funds on maturity of investments is essential and record of where funds are transferred and who authorised the transfer should be maintained within the register. Maintaining printed copies of the investment register, reviewed and authorised by a senior manager, independent of the control of the investments, prevents subsequent amendment to the register.	DCS	95%	Investment register to be established.
Contracts Register								
8.2.3		A contracts register was not available for our inspection detailing the status of contracts held by the Shire.		Medium	Maintain a register to record details of all contracts (current and expired) and their status in a form to assist with ensuring contracts are monitored and actioned as required and reflecting the value of the contracts.	DGS		To be developed
Tender Register								
8.2.4		Inspection of the register noted the inclusion of a procurement activity which was not a tender, but rather a request for quotation. Procurement processes which are		Medium	Ensure the tender register contains only the information required to comply with Regulation 16 & 17 of the Local Government (Functions and General) Regulations 1996.	DGS		Ongoing
Financial Interest Register								
8.2.5		Our testing noted several returns prior to 2018/19 are not recorded within the register for some		Medium	Maintain systems and procedures to obtain all returns required under the Local Government Act 1995.	DGS	Yes	This is being actioned as part of the annual compliance calendar
Community Complaints								

Risk Number	Risk Assessment Category	Risk Issue and Failure Modes	Existing Controls	Risk Rating	Mitigation and Management Strategy (Possible Future Controls)	Responsible Officer	Complete Y/N/%	Action taken
8.4.1		A procedure to guide the process for managing community complaints was prepared in 2017. An update to this procedure is being prepared, including the Internal Audit		High	Finalise and implement procedure to ensure community complaints are adequately reported, actioned, and addressed.	DGS		A draft community complaint procedure has been completed. This is included in the draft updated CEO Procedures.
8.5.1		Currently, no internal auditors have been appointed, and limited internal audit functions have been undertaken.		Medium	We suggest as the level of documented procedures increases, an expanded internal audit function to confirm adherence to documented policies and procedures may be required as recommended by the OAG in their report to Parliament on the Audit Results Report – Annual 2017-18 Financial Audits of Local Government Entities.	DGS		The Shires Internal Audit function will be reviewed once the policies and procedures have been completed.
Significant Adverse Trend Report								
8.5.2		A significant adverse trend was identified during the 2018-19 & 2019-20 audits. We noted the following legislative requirements were not met: •A report was not prepared stating actions intended to be taken in relation to the adverse trends		High	Prepare a report stating actions intended to be taken relating to the significant adverse trend identified during the 2018-19 & 2019-20 audits and present for consideration by the Audit Committee and Council, forward to the Minister after adoption, and publish the report on the Shire's website. Ensure any future reports are prepared and published as required by section 7.12A of the Local Government Act 1995.	CEO		
Audit Regulation 17 Review								
8.6.1		A review was last undertaken in August 2017, which is outside of the time period as required by regulation 17 of <i>Local Government (Audit) Regulations 1996</i> .		Medium	Ensure the next review is undertaken within the time period as required by legislation. Ensure future review identifies operational and financial risk, control weaknesses and compliance weaknesses.	DCS / DGS	50%	Improvements are being made and control weaknesses managed. A continual process to ensure compliance with the legislation. Procedures and documentation established and updated.
Financial Management Review								
8.6.2		Evidence of a previous review was not available for our review. Staff representations indicated the previous review was performed in house by staff responsible for		Medium	Ensure the next review is undertaken within the time period, by parties with required levels of independence and is considered by Council as required Local Government (Financial Management) Regulations 1996.	DCS / DGS		Ensure compliance with the legislation.
8	Financial	Expenditure exceeds policy threshold or tender threshold set within regulations.	Purchasing policy		Ensure policy sets out guidance in relation to management of price variations, review procurement processes to allow for early detection of variations (through creditors processing etc).	DGS		The procurement and purchasing procedure has been completed. This has been included in the draft updated CEO Procedures.
9	Financial	Collusion and/or perceived or actual conflict of interest during procurement assessment process.	Purchasing policy		Review or develop procurement procedures to set out requirements for assessment panels to meet objectives of the purchasing policy.	CEO		
10	Performance	Inability to deliver projects due to poor contract management, expenditure over budget etc	Processes and reporting	High	Maintain contract register, implement regular procurement training to set out required monitoring processes etc.	DGS		To be developed
11	Performance	Infrastructure failure	Asset Management Plans, Maintenance	High	Progress with implementation of asset management plans and improvement plans (including scheduling for required maintenance activities etc)	DIS	20%	See Item 7.1.4 above

Risk Number	Risk Assessment Category	Risk Issue and Failure Modes	Existing Controls	Risk Rating	Mitigation and Management Strategy (Possible Future Controls)	Responsible Officer	Complete Y/N/%	Action taken
12	Service Delivery/Business Interruption	Inability to attract and retain staff to maintain operational services	Professional Development Incentives, Subsidised Accommodation	High	Consider external services available for key roles to assist during periods of position vacancy. Succession planning and development strategies to multi skill workforce.	DGS	Ongoing	
13	Service Delivery/Business Interruption	Insufficient consideration of ICT risks and subsequent management	ICT Strategic Plan	High	Develop ICT Strategic Plan to highlight and address ICT risks.	DGS	Also see 7.1.1 above	
14	Service Delivery/Business Interruption	Inadequate management of facilities and events	BOOKING system/process, facility operation manuals, maintenance schedules and reports, qualified	High	Develop and / or review facility operation manuals to consider and address risk management for relevant facilities.	DIS/DGS	80%	Building Risk Management and Maintenance Plan has been developed and approved by Council at the September OCM. This covers all buildings under the care and control of the Shire of Ngaanyatjarraku. It also contains a plan to remediate all defects in the building that will be updated annually.
15	Legislative / Regulatory / Policy / Occupational Safety and Health	Deliberate actions by an employee to bypass procedures, authorisations or controls for personal benefit or the unfair benefit of others.	Segregation of duties, delegated authority, ICT permissions, procurement processes, cash management controls, financial management	High	Review induction procedures to ensure adequate training and information is available on misconduct and reporting processes. Establish documented procedures for high risk functions (e.g. cash management and stock control).	DCS/DGS	10%	Procedures under review.
16	Reputational Damage	Inaccurate representation of information or reports	Staff training, internal review and authorisation processes.	High	Ensure independent review and authorisation processes exist throughout the organisation. Implement risk based staff training matrix to ensure high risk positions are resourced with appropriate training.	DCS	10%	Procedures under review.
17	Reputational Damage	Operational activities conducted erroneously, or not performed within required time frames.	Procedures and checklists, review and authorisation processes, segregation of duties.	High	Establish compliance calendars, review and / or develop documented procedures for core compliance functions.	DGS	Yes	Compliance calendar adopted and maintained.
18	Financial	Theft, fraud, malicious damage or unauthorised access to data or assets.	Procedures and checklists, review and authorisation processes, segregation of	High	Maintain appropriate hierarchy of controls to IT systems. Review insurances to ensure appropriate level of insurance is in place to cover events of malevolence.	DGS/DCS	To be reviewed with new IT contractors	
19	Service Delivery/Business Interruption	Failure to prepare and plan for potential events which could interrupt safe service delivery to the community during a pandemic.	Procedures and checklists, review and authorisation processes, segregation of duties.	High	Follow and comply with government advice, including from the Department of Health, to provide accurate updates on the current COVID-19 (Coronavirus) health issue based on the latest information from the Federal and State health departments.	CEO		



Shire of **Ngaanyatjaraku**
ON A JOURNEY

Risk Management Strategy

2022

Table of Contents

1.1	Introduction.....	1
1.2	Risk Management – Principles, Framework and Process.....	1
1.3	Risk Management Policy	2
1.4	Risk Management Principles	3
1.5	Risk Management Framework.....	4
1.6	Risk Management Process.....	5
1.7	Risk Management Process – Communication and Consultation	6
1.8	Risk Management Process – Risk Categories / Risk Themes.....	7
1.9	Risk Management Process – Risk Tolerance / Risk Appetite	8
	Table 1: Roles and Responsibilities.....	10
	Table 2: Consequence Ratings	11
	Table 3: Risk Matrix.....	12
	Table 4: Likelihood Rating.....	12
	Table 5: Risk Response	12
	Document Management	13
	Terminology.....	14

1.1 Introduction

The Risk Management Strategy (Strategy) aims to support an **integrated** and effective approach to risk management to ensure an organisation-wide approach to risk management, with the aim of value creation and protection, in accordance with the Shire of Ngaanyatjarraku Risk Management Policy. This includes consistent assessment of risks including risk mitigation activities from a top down perspective, as well as bottom up, through operational processes and procedures.

The Shire has implemented a structured approach to risk management based on, Australian / New Zealand International Standard for Risk Management – Guidelines ISO 31000:2018. This will assist the Shire work towards:

- Aligning the objectives, culture and strategy of the Shire with risk management;
- Addressing and recognising all obligations (including voluntary commitments) of the Shire;
- Communicating the risk appetite of the Shire to guide the establishment of risk criteria, whilst conveying to all elected members, employees and contractors;
- Promoting and conveying value of risk management across the Shire;
- Encouraging methodical monitoring of risks; and
- Ensuring the Risk Management Strategy remains relevant to and considers the context of the organisation.

The key **objectives** of the Strategy are to:

- Ensure consistent and systematic approach to risk management through decision-making and corporate planning, contributing toward an effective and efficient risk management culture over time;
- Provide tools to assist management with risk identification and articulation of risks to enable appropriate risk mitigation strategies; and
- Supports the overall governance framework through integration of corporate culture, internal controls, policies and procedures (“internal control environment”) and management oversight.

The Strategy has been developed with input and review from the Executive Leadership Team and the Audit and Risk Committee.

1.2 Risk Management – Principles, Framework and Process

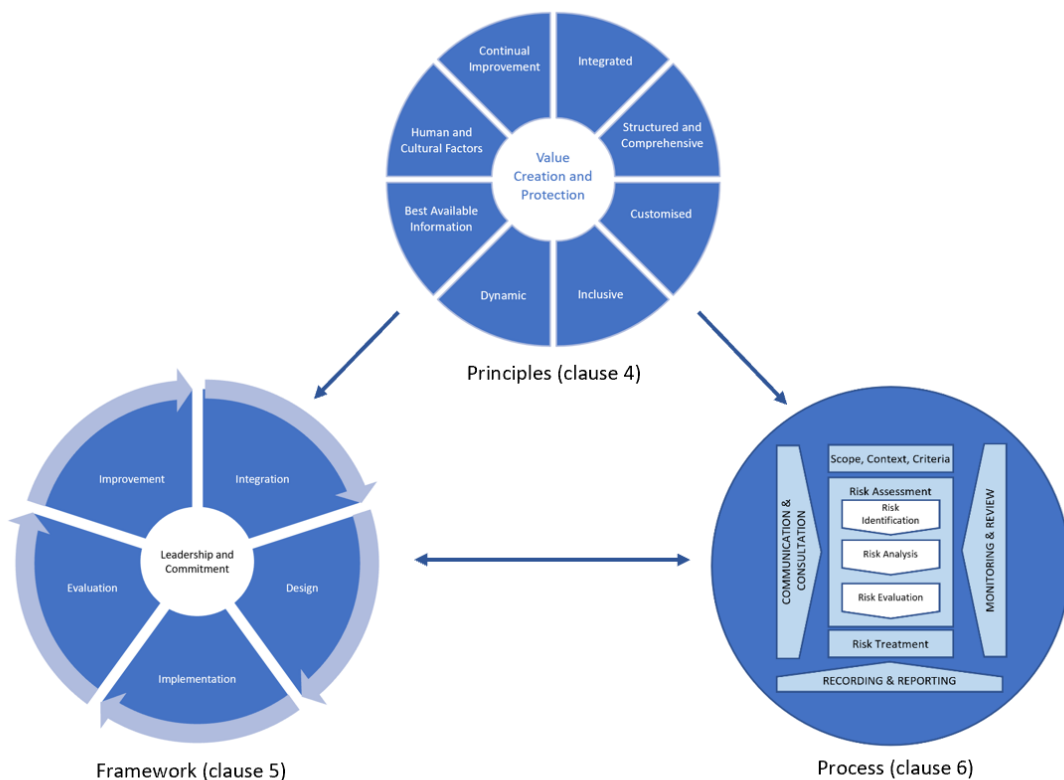
ISO 31000:2018 provides guidance on the development of a risk management approach, designed to be tailored to best apply to any organisation and its requirements. This Strategy has been developed using the Principles, Framework and Process as outlined within ISO 31000:2018.

The diagram below demonstrates the relationship between each component of the Risk Management Strategy, with the Principles forming the foundation of the Strategy. The Principles describe the features to be utilised and influence the Framework and Process elements.

The Framework component of the Strategy is intended to facilitate integration of risk management throughout the Shire, through commitment from leadership to risk management practices. Any gaps identified through analysis of existing practices will be remedied through the application of the Framework and will inform the Process component.

The Risk Management Process is to be designed and tailored to align best to the Shire’s structure, resources and practices. The Risk Process is iterative, consisting of Risk Assessment, Risk Identification, Risk Analysis, Risk Evaluation and Risk Treatment, Communication and Consultation, Recording and Reporting along with Monitoring and Review, as noted in the below diagram. The Process component of the Strategy draws on both the Framework and the Principles in its application to managing risk.

High Level Overview of Strategy



Source: Australia/New Zealand Standard ISO 31000:2018

1.3 Risk Management Policy

The Shire's Risk Management Policy (2.22) states the mandate and commitment including roles and responsibilities of Council and all staff:

“Management of risk is considered the responsibility of all elected members, employees and contractors, and is to be integrated throughout the Shire.”

The Risk Management Policy must be read and understood in conjunction with this Strategy.

1.4 Risk Management Principles

In accordance with ISO 31000:2018, the following key principles provide necessary guidance and methodology when implementing a structured risk management process.

Human and cultural factors: Risk culture is created from visible leadership and commitment in embedding a risk mindset. All elected members and employees have responsibility for managing risk.

Risk management should be a part of, and not separate from, the Shire's purpose, governance, leadership and commitment, strategy, objectives and operations.¹

Structured and comprehensive: Refers to the risk management process which encompasses:

- Risk identification, assessment and treatment;
- Risk monitoring and review; and
- Risk reporting and communication.

Inclusive accountability and transparency: Leadership to assign clear roles and responsibilities for staff, external stakeholders and decision makers to ensure risk management remains relevant and up-to-date, and is based on informed choices and agreed priorities.

Integrated: Managing risks should create and protect value by contributing to the achievement of objectives as included in the Strategic Community Plan and Corporate Business Plan (Plan for the Future), as well as project outcomes and improving Shire performance as an integrated activity within existing processes.

Customised to Shire risk profile: Recognises the Shire's external and internal influences and challenges, due to its geographical location and community needs.

Dynamic: Risks needs to be managed in a dynamic, iterative and responsive manner.

Continuous improvement: Developing a more risk aware workforce will result in operational processes which take into account risk considerations and enable processes and decision making to improve over time.

Best available information: Risk management is reliant on use of the best available information at any given point in time.

¹ ISO 31000:2018 Risk Management – Guidelines, page 5

1.5 Risk Management Framework

The impact of risk management efforts is highly dependent upon the integration of risk management throughout the Shire. The Risk Management Framework is designed to assist with facilitating high level of integration across activities, practices and functions of the Shire.

Details of each stage within the framework are:

Integration

- Integrate risk management into Shire processes and structure. All elected members and employees are responsible for managing risk.

Design the Strategy

- Understand the organisation and its context;
- Establish and adopt Risk Management Policy;
- Establish roles, responsibilities and accountabilities;
- Allocate resources; and
- Establish internal and external communication and reporting mechanisms.

Implement the Strategy

- Develop Risk Management Plan;
- Engage stakeholders to convey the purpose and importance of the Strategy and Plan;
- Implement corporate risk management processes in all activities throughout the Shire, particularly decision making processes; and
- Identify changes in the internal and external context, as well as identifying emerging risks or changed risk conditions.

Evaluate the Strategy

- Regularly assess the purpose, objectives, and outcomes of the Strategy against actual risk management practices; and
- Consider the suitability and application of the Strategy to the Shire's operations and activities.

Continuous Improvement

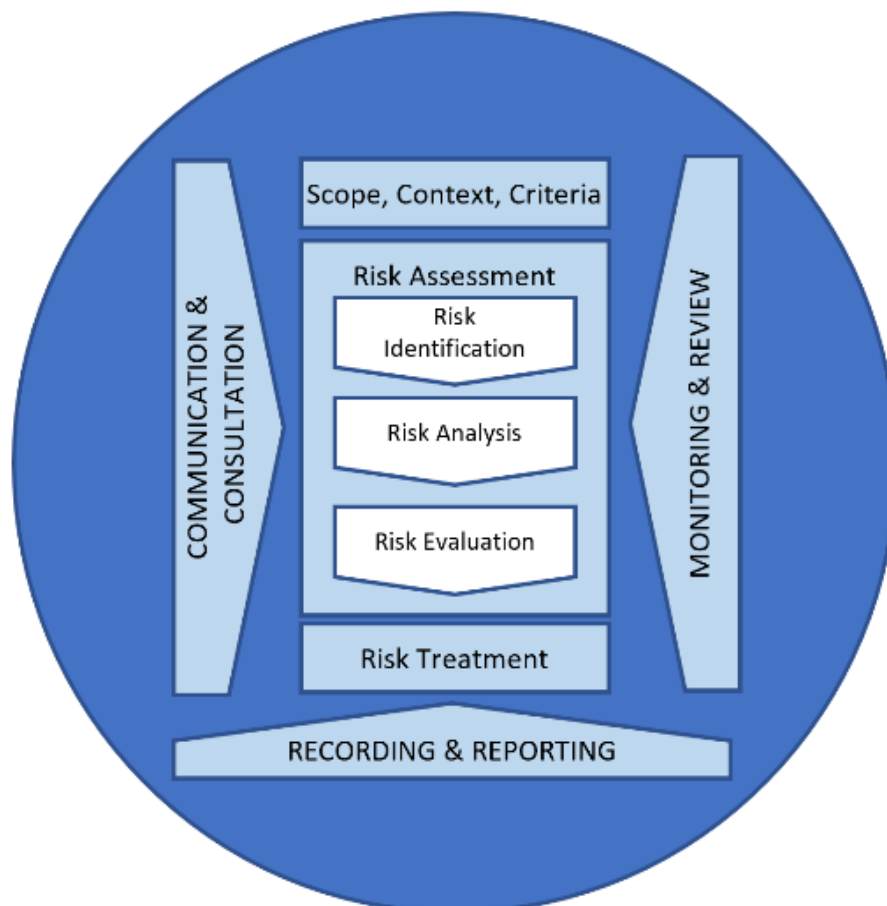
- As gaps or improvement opportunities are identified from risk processes, continuously refine the Framework and the way the process is integrated; and
- Develop plans and tasks and assign them to those accountable for implementation.

1.6 Risk Management Process

The risk management process can be delivered in many different ways. It should play a pivotal role in management of the Shire and decision making, unified with the general operations, practices, procedures and the structure of the Shire. Applications of the risk management process should be tailored to best work with the structure and context of the Shire and draw on the risk principles as defined in Section 1.4, with appropriate consideration afforded to maintaining the dynamic nature of the process, continual improvement, the variable nature of human and cultural factors, modifying and integration of processes/practices.

Given the highly dynamic and variable nature of the risk management process, the general approach by the Shire is to articulate and develop details relating to risk management processes within operational procedures, to best communicate the applicable elements of the process throughout the organisation. Development of these procedures will also enable appropriate feedback to be sought from stakeholders and implemented into decision making processes.

The diagram below depicts the re-iterative and continuous process for managing risks.



Source: Australia/New Zealand ISO31000:2018

1.7 Risk Management Process – Communication and Consultation

Communication and consultation are important elements of the risk management process. These elements promote a better understanding of risk across the Shire and convey the purpose behind actions occurring or required.

An effective risk management process relies on regular communication and consultation, both upward to leadership and downward from leadership and senior staff, involving risk owners, Shire management and Audit and Risk Committee / Council (as applicable).

The main objectives of risk communication and consultation are to:

- Provide information for decision making (relevance of information is dependent on currency);
- Utilise expertise from across the organisation in the course of carrying out risk management activities; and
- Facilitate an inclusive and empowered culture across the Shire in relation to risk management.

Communication of newly identified, untreated high level risks will be as follows:

Risk Context	Purpose	Reporting to:
Strategic	Emerging risks or existing risks which impact on the Council's ability to deliver on its strategic objectives.	CEO/Council
Operating	Risks identified from operational activities which need to be addressed, reported and monitored until effectively treated to an acceptable risk tolerance.	CEO
Projects	Risks identified from capital or infrastructure projects which impact on the project deliverables above the Council's acceptable risk tolerance.	CEO
Consolidated Risk Summary	For Executive Management – summary of high level risks and above items to inform Audit Committee & Council of risk treatments.	Audit Committee / Council

In line with the multi-directional approach to risk consultation it is equally important for newly identified untreated risk to be communicated from Council to the Executive.

Each level of management must communicate risks as they become aware of them, to relevant staff at the level directly above and below them, who must in turn communicate the risks to the next level above or below.

Communication and consultation of medium and higher risks should be through a documented process. Lower level risks may be communicated verbally.

1.8 Risk Management Process – Risk Categories / Risk Themes

The purpose of risk categories and/or risk themes is to group similar risks under the appropriate risk category. The use of standard risk categories enables:

- Structured process for staff to identify and capture risks; and
- Reporting of risks by risk type, providing focus areas requiring risk mitigation, especially where similar risks are identified across functional areas and/or by different stakeholders.

The Shire's risk categories/themes should be continually reviewed to ensure relevance in current environment.

Examples of risk categories within the local government sector include:

1. Performance: ability to achieve key objectives, within current resources, potential loss of infrastructure;
2. Financial: loss of assets, impact on annual revenues or costs, external audit issues, mismanagement of funds;
3. Environmental Risk: harm to the environment;
4. Reputational Damage: adverse publicity;
5. Service Delivery/Business Interruption: loss of service, disruption in business processes or impact to service delivery (including through lack of skilled resources); and
6. Legislative / Regulatory / Policy / Work Health and Safety: misconduct, injury, failure to meet statutory, regulatory or compliance requirements.

Risk categories will be defined in the initial establishment of risk registers and should be dynamic to reflect the current environment.

1.9 Risk Management Process – Risk Tolerance / Risk Appetite

Risk tolerance or risk appetite can be defined as the amount and type of risk the Shire is willing to take in order to meet its strategic objectives. Given the characteristic risk profile of local governments, it is important the Elected Members and CEO understand and consider this relatively low appetite for risk when evaluating major decisions. To facilitate meaningful analysis of the Shire's risk exposures, one role of the Council is to constructively challenge management's proposals from a risk perspective.

As risk management processes mature, a risk appetite matrix which pre-defines types of risk and quantifies them in a structured manner will help ensure the Shire's strategic objectives are effectively planned and managed. It enables articulation of specific actions/practices, i.e. the Shire does not tolerate any risk of breaches to regulatory obligations or legislative requirements. This assists staff understanding of how their day to day risk management activities contribute towards the Shire's risk culture and risk profile.

Understanding risk appetite helps determine the level of acceptable/unacceptable risk and the extent to which additional controls are required to treat risk. As a public body, there is an expectation the Shire will maintain an inherent low appetite for risk and as a consequence adopt policies and procedures in order to maintain the organisation's reputation and to protect public funds from loss or misappropriation.

The appetite for risk in relation to service delivery, finance, health, safety and the environment is considered 'low to medium', requiring treatment with effective controls. Where the level of risk is considered 'high' or 'extreme', additional controls are required to reduce the risk level. In circumstances where the level of risk cannot be reduced below 'high', close monitoring of risk controls is required to ensure the relevant internal controls remain effective. In cases of medium to high risk, the Shire will mitigate the risk by taking out insurance where possible.

1.9 Risk Management Process – Risk Tolerance / Risk Appetite (Continued)

Documentation to support risk management process

Documentation of medium and high level risks is best undertaken through the use of a risk register. Maintenance of risk registers demonstrates an active and evidentiary risk management process within the Shire.

The following provides guidance for documentation of risk registers:

- All elected members and employees have responsibilities to identify, assess, evaluate and treat risks in their day to day activities; risks assessed as being mitigated to an acceptable level through operating controls or risk treatments by eliminating the risk are deemed to be effectively addressed and do not require documenting;
- Risks which require further actions or treatment by more senior officers before they are within the acceptable risk tolerance must be documented in the risk register to enable effective communication and monitoring; and
- Any risks deemed to be rated High or Extreme and unable to be immediately treated to an acceptable level, must be escalated to the CEO immediately for further escalation to the Audit & Risk Committee and/or Council, where unable to be adequately treated by the CEO within the constraints of the annual budget. These risks must also be recorded in the risk register.

Assurance activities for risks mitigated through operational and/or financial controls

The Shire has the following governance activities to ensure controls required for risk mitigation are operating as intended:

- Completion of mandatory returns as required by legislation;
- Routine independent verification of operating controls, systems and procedures;
- External audit of financial statements; and
- Via Code of Conduct, Council policies and work procedures.

The following pages contain tools and guidance useful in the implementation of this Strategy.

- Table 1: Roles & Responsibilities
- Table 2: Risk Ratings
- Table 3: Matrix Assessment
- Table 4: Likelihood Rating
- Table 5: Risk Response

Table 1: Roles and Responsibilities

Role	Responsibilities
Council	<p>Council's responsibilities are to:</p> <ul style="list-style-type: none"> • Adopt a Risk Management Policy compliant with the requirements of AS/NZS ISO 31000:2018 and to review and approve the Policy in a timely manner as required. • Be satisfied risks are identified, managed and controlled appropriately, to achieve Shire's strategic objectives. • Supports the allocation of funds / resources to treat risks as required.
Audit & Risk Committee	<ul style="list-style-type: none"> • Requests and reviews reports on risk management on a biannual basis (minimum) or as required depending on the nature of the risk(s). • Monitors the overall risk exposure of the Shire and makes recommendations to Council as appropriate. • Assesses for effectiveness the risk control measures / risk treatment plans in reducing the severity of the risk(s).
Executive	<ul style="list-style-type: none"> • Creates an environment where staff are responsible for and actively involved in managing risk. • Oversight of the Shire's Risk Management Strategy. • Maintain and implement the Risk Management Strategy. • Ensures a consistent risk management approach is embedded in the operations and processes of the Shire. • Actively participates and supports the Risk Management Strategy through identification and creation of suitable risk treatments to control strategic and operational risks facing the Shire. • Monitors the strategic and operational risk management performance. • Reviews the Shire's Risk Summary Report prior to submission to the Audit & Risk Committee.
Staff	<ul style="list-style-type: none"> • Adopt and understand the principles of risk management and comply with policies, processes and practices relating to risk management. • Alert and bring to management's attention, the risks existing within their area. • Conduct risk assessments which are appropriate with the scope of the task and the associated level of risk identified.



Table 2: Consequence Ratings

Description	Performance	Financial	Environment	Reputation	Service Delivery / Business Disruption	Legislative / Regulatory / Policy / WSH
CATASTROPHIC	Unable to achieve key objectives. External resources required. Ongoing loss of critical infrastructure.	>15% of asset value. Adverse >15% deviation from budget. Audit unable to be completed.	Catastrophic long term environmental harm.	Significant damage to public confidence leading to sustained compromise in the achievement of strategic objectives.	Major, including several important areas of service and/or a protracted period. Ongoing loss of business systems.	Criminal instances of regulatory non-compliance. Extreme breaches of Code of Conduct. Personal details compromised / revealed – all. Death.
MAJOR	Major impact on ability to achieve key objectives. Impact cannot be managed with current allocated resources. Long-term loss of critical infrastructure.	5%-15% of asset value. Adverse 5%→15% deviation from budget. Audit qualification on the report and accounts.	Significant long-term environmental harm.	Local publicity of a major and persistent nature, affecting the perception/ standing within the community.	Complete loss of an important service area for a short period. Major disruption to business processes.	Major revenue or cost implications. Individuals at risk of harm. Significant breaches of Code of Conduct. Personal details compromised / revealed – many. Multiple serious injuries.
MODERATE	Moderate impact on ability to achieve key objectives. Significant adjustment to resource allocation. Loss of support infrastructure.	2%-5% of asset value. Adverse 2%→5% deviation from budget. Management letter contains significant issues.	Significant short-term environmental harm.	Damage to reputation to a specific audience, may not have significant long-term or community effects.	Major effect to an important service area for a short period, brief impact on multiple areas. Moderate disruption to business processes.	Minor revenue or cost implications. Breach of Code of Conduct. Personal details compromised / revealed – some. Serious injury and/or illness.
MINOR	Minor impact on ability to achieve key objectives. Additional internal management efforts required. Interruption to support infrastructure.	< 2 of asset value. Adverse impact on revenues and costs <2% deviation from budget. Management letter contains minor issues.	Minor transient environmental harm.	Minor damage to reputation to a small audience, complaint from a large group of people.	Brief disruption of important service area. Noticeable effect to non-crucial service area. Minor disruption to business processes.	Minor breaches of Code of Conduct. Personal details compromised / revealed – isolated. First aid or minor lost time injury.
INSIGNIFICANT	Negligible impact on ability to achieve key objectives. Impact can be managed through routine activities. Negligible interruption to support infrastructure.	Insignificant loss. Insignificant adverse impact on annual revenue or costs. Matters discussed with management not reported.	Negligible transient environmental harm.	Minor unsubstantiated publicity or damage to reputation to a small audience, complaint from individual/small group.	Negligible impact on the effectiveness of the organisation's processes. Negligible disruption to business processes.	Little or no impact to Code of Conduct. Personal details compromised / revealed - an individual's. Incident with or without minor injury.



Table 3: Risk Matrix

		CONSEQUENCE				
		Insignificant 1	Minor 2	Moderate 3	Major 4	Catastrophic 5
Almost Certain	5	Medium	High	High	Extreme/Exceptional	Extreme/Exceptional
Likely	4	Medium	Medium	High	High	Extreme/Exceptional
Possible	3	Low	Medium	Medium	High	High
Unlikely	2	Low	Low	Medium	Medium	High
Rare	1	Very low	Low	Low	Medium	Medium

Table 4: Likelihood Rating

Likelihood	Definition	Frequency of Noted Occurrences	Score
Almost Certain	Expected to occur in most circumstances or occurs regularly. A clear opportunity already apparent, which can easily be achieved.	More than once per year	5
Likely	Occurrence is noticeable or is likely to occur. An opportunity that has been explored and may be achievable.	At least once per year	4
Possible	Occurs occasionally or may occur. Possible opportunity identified.	At least once in 5 years	3
Unlikely	Occurs infrequently or is not likely to occur. Opportunity that is fairly unlikely to happen.	At least once in 10 years	2
Rare	Only occurs in exceptional circumstances. Opportunity that is very unlikely to happen.	Less than once in 20 years	1

Table 5: Risk Response

Risk	Action Required
Extreme/Exceptional	Immediate corrective action
High	Prioritised action required
Medium	Planned action required
Low	Planned action required
Very low	Manage by routine procedures



Document Management

Date approved:

Responsible officer:

Endorsed by:

Approved by: Chief Executive Officer

Next review: 20xx

Terminology

Definitions

Consequence	The outcome of an event affecting achievement of organisational objectives.
Control	A measure that modifies a risk or manages risks within an organisation.
Establishing the context	Defining the external and internal parameters to be taken into account when managing risk and setting the scope and evaluating the significance of a risk (i.e. risk criteria).
Event	The occurrence or change of a particular set of circumstances.
Likelihood	The chance of a risk event occurring.
Monitoring	Continual checking, critically observing or determining status in order to identify change from the performance level required or expected.
Operational risk	Operational risks are linked to the Business Plan objectives and take into consideration risks which will prevent departments from delivering their annual business plans and ongoing services to the community.
Residual risk	The risk remaining after risk treatment.
Risk	The effect of uncertainty on objectives. The focus should be on the effect of incomplete knowledge of events or circumstances on the Shire's decision making.
Risk analysis	The process to comprehend the nature of risk and to determine the level of risk.
Risk assessment	The overall process of risk identification, risk analysis and risk evaluation.
Risk attitude	The organisation's approach to assessing and eventually pursuing, retaining, taking or turning away from risk.
Risk criteria	The terms of reference against which the significance of a risk is evaluated.
Risk evaluation	The process of comparing the results of a risk analysis with the risk criteria to determine whether the risk and/or its magnitude are acceptable or tolerable.
Risk identification	The process of finding, recognising and describing risks.
Risk management	The co-ordinated activities to direct and control an organisation with requirements to manage risk.

Terminology (Continued)

Definitions	
Risk management policy	The Shire's statement of overall intention and direction related to risk management.
Risk owner	The person with the accountability and authority to manage a risk.
Risk profile	The acceptable level of risk an organisation is prepared to accept. For the purposes of this Framework, the Shire's risk profile is the overall exposure to risk based on its aggregated risks, at a point in time.
Risk source	An element that, either alone or in combination, has the intrinsic potential to give rise to a risk.
Risk treatment	The process to modify risk.
Stakeholder	A person or organisation that can affect, be affected by or perceive themselves to be affected by a decision or activity.
Strategic risk	Strategic risks are the risks that will prevent the Shire from meeting the objectives outlined in its Plan for the Future.

Reference: ISO 31000:2018 Risk management—Guidelines