

- Receipt of executed contract and finalisation of project set up activities.

#### **Ongoing key items that we are working on**

- Receipt of more background information – critical documents include Calvary Asset Register
- Populating document register and completing gap analysis
- Commencing Condition Assessment
- Return Brief updates/development confirming delivery approach, assumptions, schedule, budget.

#### **Outstanding items/issues**

- Receipt of background information from Calvary/ACT Health
- Return Brief updated draft issue

Regards

#### **AECOM**

L4, Civic Quarter, 68 Northbourne Ave, Canberra, ACT 2601  
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 T +61 2 6100 0551  
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**From:** [REDACTED]

**Sent:** Monday, 30 March 2020 11:55 AM

**To:** Brad Burch ([brad.burch@act.gov.au](mailto:brad.burch@act.gov.au)) <[brad.burch@act.gov.au](mailto:brad.burch@act.gov.au)>; Landon, Daniel (Health) <[Daniel.Landon@act.gov.au](mailto:Daniel.Landon@act.gov.au)>

**Cc:** [REDACTED]

**Subject:** AECOM Project Update - 27/03/2020 Northside Hospital Development Options Analysis

Hi Brad and Daniel,

Please find below Project Update for **Northside Hospital Development Options Analysis**.

#### **Key items we worked on this week**

- Quasi-Monthly Project Control Meeting held on 26/03/2020, notes issued on 27/03/2020
- Monthly Report issued to ACT Health 26/03/2020
- Background information received from Calvary on 26-27/03/2020. Attached is a register of all information received to date.
- Update of the Return Brief and Project Schedule to reflect proposed alternative delivery method delaying site inspections until after the COVID19 situation.
- Receipt of executed contract and finalisation of project set up activities.

#### **Ongoing key items that we are working on**

- Return Brief updates/development confirming delivery approach, assumptions, schedule, budget.
- Receipt of more background information – critical documents include Calvary Asset Register
- Populating document register and completing gap analysis
- Visit to Calvary plan room to source additional building and asset information based on gap analysis
- Commencing Condition Assessment

- Undertaking initial Asset Priority Level (criticality) assessment
- Internal project set up
- Variation request to extend the contract end date

#### Outstanding items/issues

- Receipt of background information from Calvary/ACT Health
- Project set up

Regards

#### AECOM

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---

**From:** [REDACTED]  
**Sent:** Monday, 23 March 2020 10:00 AM  
**To:** Brad Burch ([brad.burch@act.gov.au](mailto:brad.burch@act.gov.au)) <[brad.burch@act.gov.au](mailto:brad.burch@act.gov.au)>; 'Landon, Daniel (Health)' <[Daniel.Landon@act.gov.au](mailto:Daniel.Landon@act.gov.au)>  
**Cc:** [REDACTED]  
**Subject:** AECOM Project Update - 20/03/2020 Northside Hospital Development Options Analysis

Hi Brad and Daniel,

Please find below Project Update for **Northside Hospital Development Options Analysis**.

#### Key items we worked on this week

- Development and issue of draft Return Brief to ACT Health on 18/03/2020
- Fortnightly Project Co-ordination Meeting held on 19/03/2020, notes issued on 20/03/2020
- Notes from project inception meeting with Calvary were issued
- Document Register including Gap Analysis spreadsheet developed and circulated to the project team
- Risk and Issue register population (initial assessment included in draft Return Brief)
- Email regarding invoicing moving forward sent on 18/03/2020
- Email regarding the approach to conducting the site inspections sent on 20/03/2020

#### Ongoing key items that we are working on

- Return Brief updates/development confirming delivery approach, assumptions, schedule, budget.
- Receipt of background information
- Populating document register and completing gap analysis
- Undertaking initial Asset Priority Level (criticality) assessment
- Monthly Report Dashboard template development
- Internal project set up

**Outstanding items/issues**

- Confirmation that the first Monthly Project Control Group can be postponed until the week commencing 20/04/2020
- Receipt of background information from Calvary/ACT Health
- Project set up

Regards

[REDACTED]

[REDACTED]

**AECOM**

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---

**From:** [REDACTED]

**Sent:** Monday, 16 March 2020 4:42 PM

**To:** Brad Burch ([brad.burch@act.gov.au](mailto:brad.burch@act.gov.au)) <[brad.burch@act.gov.au](mailto:brad.burch@act.gov.au)>; 'Landon, Daniel (Health)' <[Daniel.Landon@act.gov.au](mailto:Daniel.Landon@act.gov.au)>

**Cc:** [REDACTED]

**Subject:** AECOM Project Update - 13/03/2020 Northside Hospital Development Options Analysis

Hi Brad and Daniel,

Please find below Project Update for **Northside Hospital Development Options Analysis**

**Key items we worked on this week**

- Project Inception and set up planning.
- Project inception meeting with Calvary held on 12/03/2020.
- Request for information issued to ACT Health and Calvary.
- Development of Return Brief.
- Project inception meeting with AECOM Team held on 13/03/2020.
- Receipt of project contract and execution of same.

**Ongoing key items that we are working on**

- Notes from project inception meeting with Calvary to be prepared and issued
- Return Brief confirming delivery approach, assumptions, schedule, budget.
- First Project Coordination Meeting scheduled for 19/03/2020. Agenda to be prepared and circulated.
- Document Register including Gap Analysis spreadsheet development
- Risk and Issue register population
- Monthly Report Dashboard template development
- Internal project set up

**Outstanding items/issues**

- Project set up
- Return Brief issue to ACT Health
- Receipt of background information

Regards

[REDACTED]

**AECOM**

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P.O. Box PO Box 1942 Canberra City 2601

T +61 2 6100 0551

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**From:** [REDACTED]

**Sent:** Tuesday, 10 March 2020 12:14 PM

**To:** Brad Burch ([brad.burch@act.gov.au](mailto:brad.burch@act.gov.au)) <[brad.burch@act.gov.au](mailto:brad.burch@act.gov.au)>; Landon, Daniel (Health)

<[Daniel.Landon@act.gov.au](mailto:Daniel.Landon@act.gov.au)>

**Cc:** [REDACTED]

**Subject:** AECOM Project Update - 06/03/2020 Northside Hospital Development Options Analysis

### Northside Hospital Development Options Analysis

06/03/2020

#### Key items we worked on this week

- Project Inception and set up planning.
- Project inception meeting with ACT Health held on 06/03/2020.

#### Ongoing key items that we are working on

- Notes from project inception meeting with ACT Health to be prepared and issued
- Return Brief confirming delivery approach, assumptions, schedule, budget. This will include initial request for information, proposed governance meeting schedule and report templates.
- Inception meeting with Calvary schedule for 12/03/2020.
- Inception meeting with AECOM/BLP scheduled for 13/03/2020

#### Outstanding items/issues

- Receipt of Work Order (Contract) for the engagement

Kind regards,

[REDACTED]

[REDACTED]

**AECOM**

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**Lowes, Shannon (Health)**

---

**From:** George, Jacinta (Health)  
**Sent:** Tuesday, 9 June 2020 3:19 PM  
**To:** Lopa, Liz (Health); O'Halloran, Peter (Health); Stewart, Margaret (Health)  
**Cc:** Landon, Daniel (Health); ACT Health StrategicInfrastructure  
**Subject:** RE: Northside hospital - [REDACTED]

**Follow Up Flag:** Follow up  
**Flag Status:** Completed

**Categories:** Northside

UNCLASSIFIED

Thanks

[REDACTED]

Jacinta George  
 Executive Group Manager  
 Ph: (02) 5124 9983 (Executive Assistant)  
 [REDACTED]  
 Email: [jacinta.george@act.gov.au](mailto:jacinta.george@act.gov.au)  
**Health System Planning and Evaluation**  
 Level 3, 2 Bowes Street Phillip ACT 2606  
[health.act.gov.au](http://health.act.gov.au)



**From:** Lopa, Liz (Health) <Liz.Lopa@act.gov.au>  
**Sent:** Wednesday, 3 June 2020 8:58 AM  
**To:** O'Halloran, Peter (Health) <Peter.O'Halloran@act.gov.au>; George, Jacinta (Health) <Jacinta.George@act.gov.au>; Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>  
**Cc:** Landon, Daniel (Health) <Daniel.Landon@act.gov.au>; ACT Health StrategicInfrastructure <ACTHealthStrategicInfrastructure@act.gov.au>  
**Subject:** Northside hospital - [REDACTED]

UNCLASSIFIED

Hi Jacinta, Peter and Margaret

[REDACTED]



Thanks

Liz

**Liz Lopa | Executive Group Manager**

Mobile: [REDACTED]

**Strategic Infrastructure Division | ACT Health Directorate**

4 Bowes Street Phillip ACT 2606, Australia

[www.health.act.gov.au/digital](http://www.health.act.gov.au/digital)



**Lowes, Shannon (Health)**

---

**From:** Lopa, Liz (Health)  
**Sent:** Wednesday, 10 June 2020 9:55 AM  
**To:** Landon, Daniel (Health)  
**Subject:** FW: Calvary infrastructure - [REDACTED]

UNCLASSIFIED Sensitive

**From:** Lopa, Liz (Health)  
**Sent:** Wednesday, 10 June 2020 9:30 AM  
**To:** Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>  
**Cc:** Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>  
**Subject:** RE: Calvary infrastructure - [REDACTED]

UNCLASSIFIED Sensitive

Hi Margaret

I am free between 3:30-4:30pm today

Liz

**From:** Stewart, Margaret (Health) <[Margaret.Stewart@act.gov.au](mailto:Margaret.Stewart@act.gov.au)>  
**Sent:** Tuesday, 9 June 2020 5:57 PM  
**To:** Lopa, Liz (Health) <[Liz.Lopa@act.gov.au](mailto:Liz.Lopa@act.gov.au)>  
**Cc:** Pini, Sallyanne (Health) <[Sallyanne.Pini@act.gov.au](mailto:Sallyanne.Pini@act.gov.au)>  
**Subject:** Calvary infrastructure - [REDACTED]

UNCLASSIFIED Sensitive

Hi Liz

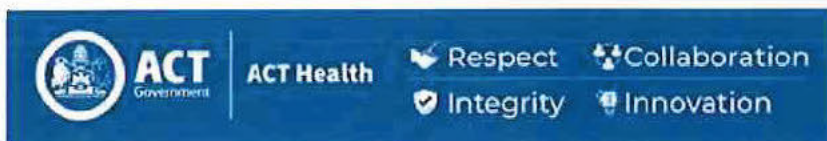
[REDACTED]

Margaret

**Margaret Stewart | Executive Branch Manager**

Ph: +61 2 5124 9420 | Mob: [REDACTED] Email: [margaret.stewart@act.gov.au](mailto:margaret.stewart@act.gov.au)

LHN Commissioning Branch, Health Services Planning & Evaluation Division | ACT Health Directorate  
 Level 4, 6 Bowes Street Phillip ACT 2606  
[health.act.gov.au](http://health.act.gov.au)



**Lowes, Shannon (Health)**

---

**From:** Jarrad Nuss <[REDACTED]>  
**Sent:** Wednesday, 10 June 2020 5:50 PM  
**To:** Landon, Daniel (Health)  
**Subject:** FW: NHDOA - Draft Stage 1 Condition Assessment Report  
**Attachments:** NHDOA-Condition Assessment Workbook CPHB Version 1.xlsx  
  
**Categories:** Northside

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Hi Daniel



Many thanks

**Jarrad Nuss**  
 Director Business Infrastructure and Performance  
 Finance and Business Information

Public Hospital Bruce  
 Business Support Facility  
 Dunlop Court Business Park 21 Thynne Street Bruce ACT 2617  
 PO Box 254 Jamison Centre ACT 2614  
 P: 02 6201 6818  
 E: [REDACTED]  
[www.calvary-act.com.au](http://www.calvary-act.com.au)

Calvary acknowledges the Traditional Custodians and Owners of the lands on which all our services operate, commits to Closing the Gap and to the ongoing journey of Reconciliation.

**From:** Jarrad Nuss  
**Sent:** Wednesday, 10 June 2020 5:43 PM  
**To:** [REDACTED]  
**Cc:** Denise Holm [REDACTED], Landon, Daniel <Daniel.Landon@act.gov.au>  
**Subject:** RE: NHDOA - Draft Stage 1 Condition Assessment Report

Hi [REDACTED]

As per our commitment at the last NHDOA meeting we have now had the opportunity to work through the draft Asset condition audit workings that you have provided. An attached working document is provided as a return brief, which contains a material level of commentary and some further questions. The structure of the document that I

have attached is essentially acknowledgement whether or not we agree with the assessment provided (Column A), where there is not agreement there will be comments in the cells pertinent to that row of data.

As you can appreciate there is a large volume of assets included in the draft audit, and whilst we have gone through the report in detail I expect there will be further refinement and material changes prior to issuance as a final document. Some overarching comments for your consideration:

Please let me know your thoughts

Many thanks

**Jarrad Nuss**

Director Business Infrastructure and Performance  
Finance and Business Information

Public Hospital Bruce  
Business Support Facility  
Dunlop Court Business Park 21 Thynne Street Bruce ACT 2617  
PO Box 254 Jamison Centre ACT 2614  
P: 02 6201 6818  
E: [REDACTED]  
[www.calvary-act.com.au](http://www.calvary-act.com.au)

Calvary acknowledges the Traditional Custodians and Owners of the lands on which all our services operate, commits to Closing the Gap and to the ongoing journey of Reconciliation.

**From:** [REDACTED]  
**Sent:** Tuesday, 2 June 2020 4:58 PM  
**To:** Landon, Daniel <[Daniel.Landon@act.gov.au](mailto:Daniel.Landon@act.gov.au)>; Jarrad Nuss [REDACTED]  
**Cc:** Denise Holm [REDACTED]; Bladin, Caitlin <[Caitlin.Bladin@act.gov.au](mailto:Caitlin.Bladin@act.gov.au)>; Rees, Emily [REDACTED]  
**Subject:** NHDOA - Draft Stage 1 Condition Assessment Report

**CAUTION:** This email originated from outside of Calvary Public Hospital Bruce. Do not click links or open attachments unless you recognise the sender and know the content is safe.

Hi Daniel and Jarrad,

Following on from the Monthly Control Group Meeting, please find attached a draft of the Stage 1 Calvary Public Hospital Bruce Condition Assessment Report. Also attached is a raw, editable copy of the Condition Assessment Register for both Engineering and Building Fabric Assets. Please note that there have been some updates to this register as a result of the reviews completed since it's issue on 20/05/2020.

As discussed on Thursday 28/05/2020, this document is provided for Calvary's review and comment. The intent is that Calvary reviews the register and report to confirm that the assessment generally reflects their knowledge and

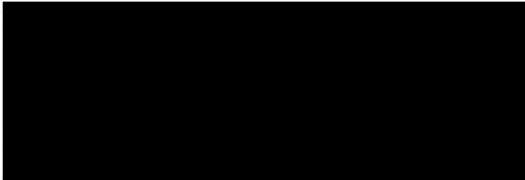
understanding of the CPHB Campus. Per our conversation, we would appreciate review comments within a week and understand that Calvary intends to take the following approach to the review of the attached:

- An internal half day review with [REDACTED] on call to answer any high level questions, and
- A second half day review with the AECOM technical assessors dialling in as required to go through the register line by line.

Jarrad – confirming receipt of the meeting invite for the Calvary-internal review session this Friday 05/06/2020. Depending on the outcome of this session will determine the timing, duration and attendees of the second session. Could you please also let me know if you have issues saving changes to the attached spreadsheet?

If there are any queries or concerns regarding the above or the attached please let me know.

Regards



**AECOM**

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**Lowes, Shannon (Health)**

---

**From:** Landon, Daniel (Health)  
**Sent:** Wednesday, 10 June 2020 4:27 PM  
**To:** Lopa, Liz (Health); George, Jacinta (Health); Stewart, Margaret (Health); Pini, Sallyanne (Health)  
**Subject:** FW: NHDOA - Stage 2 CPHB Risk Register Initial DRAFT  
**Attachments:** 60628807-NHDOA-CPHB-RiskRegister\_A-20200605.pdf

UNCLASSIFIED

Hi all

Pls see attached FYI.

[REDACTED]

Dan

**From:** [REDACTED]  
**Sent:** Friday, 5 June 2020 12:08 PM  
**To:** Landon, Daniel (Health) <Daniel.Landon@act.gov.au>; Jarrad Nuss (Calvary) [REDACTED]  
**Cc:** Denise Holm (Calvary) [REDACTED] Bladin, Caitlin (Health) <Caitlin.Bladin@act.gov.au>; [REDACTED]

**Subject:** NHDOA - Stage 2 CPHB Risk Register Initial DRAFT

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Hi Daniel and Jarrad,

[REDACTED]

If you have any queries or concerns regarding the attached please let me know.

Regards

[REDACTED]

**AECOM**

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**Lowes, Shannon (Health)**

---

**From:** George, Jacinta (Health)  
**Sent:** Wednesday, 10 June 2020 6:02 PM  
**To:** Landon, Daniel (Health); Lopa, Liz (Health); Stewart, Margaret (Health); Pini, Sallyanne (Health)  
**Subject:** RE: NHDOA - Stage 2 CPHB Risk Register Initial DRAFT  
**Categories:** Northside

UNCLASSIFIED

Thanks Daniel

This template doesn't seem to be aligned with current risk documentation guidelines for ACTH but there may well be different set up for capital so happy to take your advice on that question.

The reference to risks with risk number already being on ACTHD Risk Register – is that the numbers or the references Y-.....?

Are we still anticipating Calvary's response by end of this week?

I think it would be a good idea to put aside some time next week for you and Margaret and Sallyanne and I to

Thanks for keeping me in the loop.

Jacinta

Jacinta George  
 Executive Group Manager  
 Ph: (02) 5124 9983 (Executive Assistant)

Email: [jacinta.george@act.gov.au](mailto:jacinta.george@act.gov.au)

Health System Planning and Evaluation  
 Level 3, 2 Bowes Street Phillip ACT 2606  
[health.act.gov.au](http://health.act.gov.au)



**From:** Landon, Daniel (Health) <Daniel.Landon@act.gov.au>  
**Sent:** Wednesday, 10 June 2020 4:27 PM  
**To:** Lopa, Liz (Health) <Liz.Lopa@act.gov.au>; George, Jacinta (Health) <Jacinta.George@act.gov.au>; Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>  
**Subject:** FW: NHDOA - Stage 2 CPHB Risk Register Initial DRAFT

UNCLASSIFIED

Hi all

Pls see attached FYI.

[REDACTED]

Dan

**From:** [REDACTED]  
**Sent:** Friday, 5 June 2020 12:08 PM  
**To:** Landon, Daniel (Health) <[Daniel.Landon@act.gov.au](mailto:Daniel.Landon@act.gov.au)>; Jarrad Nuss (Calvary) [REDACTED]  
**Cc:** Denise Holm (Calvary) [REDACTED]; Bladin, Caitlin (Health) <[Caitlin.Bladin@act.gov.au](mailto:Caitlin.Bladin@act.gov.au)>; [REDACTED]

**Subject:** NHDOA - Stage 2 CPHB Risk Register Initial DRAFT

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Hi Daniel and Jarrad,

[REDACTED]

If you have any queries or concerns regarding the attached please let me know.

Regards

[REDACTED]

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**Lowes, Shannon (Health)**

---

**From:** Landon, Daniel (Health)  
**Sent:** Thursday, 11 June 2020 10:38 AM  
**To:** Rochford, Brian (Health)  
**Subject:** RE: Risk register questions

UNCLASSIFIED

Many thanks Brian.

**From:** Rochford, Brian (Health) <Brian.Rochford@act.gov.au>  
**Sent:** Thursday, 11 June 2020 10:35 AM  
**To:** Landon, Daniel (Health) <Daniel.Landon@act.gov.au>  
**Subject:** RE: Risk register questions

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Will do – just engaged on some urgent work . Will be in touch soon.

Brian

**From:** Landon, Daniel (Health) <[Daniel.Landon@act.gov.au](mailto:Daniel.Landon@act.gov.au)>  
**Sent:** Thursday, 11 June 2020 10:31 AM  
**To:** Rochford, Brian (Health) <[Brian.Rochford@act.gov.au](mailto:Brian.Rochford@act.gov.au)>  
**Subject:** Risk register questions

UNCLASSIFIED

Hi Brian

I'm working with an external consultant who is preparing a draft risk register for Calvary Public Hospital Bruce.

The consultant would like to ensure that the draft register is consistent with ACT Health's risk framework. Given I'm not hugely familiar with our directorate's frameworks, I need some expert help from someone like yourself.

Would you mind giving me a call to discuss, or direct me to someone who could help me please?

Kind regards

Dan

**Daniel Landon**

Phone: [REDACTED] | Email: [daniel.landon@act.gov.au](mailto:daniel.landon@act.gov.au)

Senior Director, Business Analysis, Strategic Infrastructure Division | ACT Health Directorate  
[health.act.gov.au](http://health.act.gov.au)



**Lowes, Shannon (Health)**

---

**From:** [REDACTED]  
**Sent:** Thursday, 11 June 2020 10:38 AM  
**To:** Jarrad Nuss (Calvary)  
**Cc:** Denise Holm (Calvary); Landon, Daniel (Health); [REDACTED]  
**Subject:** RE: NHDOA - Draft Stage 1 Condition Assessment Report  
**Attachments:** NHDOA-Condition Assessment Workbook CPHB Version 1 - AECOM.xlsx

**Follow Up Flag:** Follow up  
**Flag Status:** Completed

**Categories:** Northside

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Hi Jarrad,

[REDACTED]



Regards

**AECOM**

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T +61 2 6100 0551

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**From:** Jarrad Nuss   
**Sent:** Wednesday, 10 June 2020 5:43 PM  
**To:**   
**Cc:** Denise Holm ; Landon, Daniel <Daniel.Landon@act.gov.au>  
**Subject:** [EXTERNAL] RE: NHDOA - Draft Stage 1 Condition Assessment Report

Hi 

As per our commitment at the last NHDOA meeting we have now had the opportunity to work through the draft Asset condition audit workings that you have provided. An attached working document is provided as a return brief, which contains a material level of commentary and some further questions. The structure of the document that I

have attached is essentially acknowledgement whether or not we agree with the assessment provided (Column A), where there is not agreement there will be comments in the cells pertinent to that row of data.

As you can appreciate there is a large volume of assets included in the draft audit, and whilst we have gone through the report in detail I expect there will be further refinement and material changes prior to issuance as a final document. Some overarching comments for your consideration:

Please let me know your thoughts

Many thanks

Jarrad Nuss  
Director Business Infrastructure and Performance  
Finance and Business Information

Public Hospital Bruce  
Business Support Facility  
Dunlop Court Business Park 21 Thynne Street Bruce ACT 2617  
PO Box 254 Jamison Centre ACT 2614  
P: 02 6201 6818  
E: [REDACTED]  
[www.calvary-act.com.au](http://www.calvary-act.com.au)

Calvary acknowledges the Traditional Custodians and Owners of the lands on which all our services operate, commits to Closing the Gap and to the ongoing journey of Reconciliation.

From: [REDACTED]  
Sent: Tuesday, 2 June 2020 4:58 PM  
To: Landon, Daniel <[Daniel.Landon@act.gov.au](mailto:Daniel.Landon@act.gov.au)>; Jarrad Nuss [REDACTED]  
Cc: Denise Holm [REDACTED] Bladin, Caitlin <[Caitlin.Bladin@act.gov.au](mailto:Caitlin.Bladin@act.gov.au)> [REDACTED]  
Subject: NHDOA - Draft Stage 1 Condition Assessment Report

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Hi Daniel and Jarrad,

Following on from the Monthly Control Group Meeting, please find attached a draft of the Stage 1 Calvary Public Hospital Bruce Condition Assessment Report. Also attached is a raw, editable copy of the Condition Assessment Register for both Engineering and Building Fabric Assets. Please note that there have been some updates to this register as a result of the reviews completed since it's issue on 20/05/2020.

As discussed on Thursday 28/05/2020, this document is provided for Calvary's review and comment. The intent is that Calvary reviews the register and report to confirm that the assessment generally reflects their knowledge and

understanding of the CPHB Campus. Per our conversation, we would appreciate review comments within a week and understand that Calvary intends to take the following approach to the review of the attached:

- An internal half day review with Ama King on call to answer any high level questions, and
- A second half day review with the AECOM technical assessors dialling in as required to go through the register line by line.

Jarrad – confirming receipt of the meeting invite for the Calvary-internal review session this Friday 05/06/2020. Depending on the outcome of this session will determine the timing, duration and attendees of the second session. Could you please also let me know if you have issues saving changes to the attached spreadsheet?

If there are any queries or concerns regarding the above or the attached please let me know.

Regards



**AECOM**

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**Lowes, Shannon (Health)**

---

**From:** Stewart, Margaret (Health)  
**Sent:** Thursday, 11 June 2020 10:59 AM  
**To:** George, Jacinta (Health)  
**Cc:** Landon, Daniel (Health); Pini, Sallyanne (Health)  
**Subject:** RE: NHDOA - Stage 2 CPHB Risk Register Initial DRAFT

**Categories:** Northside

UNCLASSIFIED

Hi Jacinta

Further to Dan's email below, I spoke to Mark Dykgraaf this morning, as you know, who confirmed the same re mitigations and that Calvary will provide ACTHD with briefing.

M

**Margaret Stewart | Executive Branch Manager**

Ph: +61 2 5124 9420 | Mob: [REDACTED] Email: [margaret.stewart@act.gov.au](mailto:margaret.stewart@act.gov.au)

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**From:** Landon, Daniel (Health) <Daniel.Landon@act.gov.au>

**Sent:** Thursday, 11 June 2020 10:05 AM

**To:** George, Jacinta (Health) <Jacinta.George@act.gov.au>; Lopa, Liz (Health) <Liz.Lopa@act.gov.au>; Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>

**Subject:** RE: NHDOA - Stage 2 CPHB Risk Register Initial DRAFT

UNCLASSIFIED

Hi Jacinta

I am anticipating Calvary's response by the end of this week.

Kind regards

Dan

**From:** George, Jacinta (Health) <[Jacinta.George@act.gov.au](mailto:Jacinta.George@act.gov.au)>  
**Sent:** Wednesday, 10 June 2020 6:02 PM  
**To:** Landon, Daniel (Health) <[Daniel.Landon@act.gov.au](mailto:Daniel.Landon@act.gov.au)>; Lopa, Liz (Health) <[Liz.Lopa@act.gov.au](mailto:Liz.Lopa@act.gov.au)>; Stewart, Margaret (Health) <[Margaret.Stewart@act.gov.au](mailto:Margaret.Stewart@act.gov.au)>; Pini, Sallyanne (Health) <[Sallyanne.Pini@act.gov.au](mailto:Sallyanne.Pini@act.gov.au)>  
**Subject:** RE: NHDOA - Stage 2 CPHB Risk Register Initial DRAFT

UNCLASSIFIED

Thanks Daniel

This template doesn't seem to be aligned with current risk documentation guidelines for ACTH but there may well be different set up for capital so happy to take your advice on that question.

The reference to risks with risk number already being on ACTHD Risk Register – is that the numbers or the references Y-.....?

Are we still anticipating Calvary's response by end of this week?

Thanks for keeping me in the loop.

Jacinta

Jacinta George  
 Executive Group Manager  
 Ph: (02) 5124 9983 (Executive Assistant)  
 Email: [jacinta.george@act.gov.au](mailto:jacinta.george@act.gov.au)  
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**From:** Landon, Daniel (Health) <[Daniel.Landon@act.gov.au](mailto:Daniel.Landon@act.gov.au)>  
**Sent:** Wednesday, 10 June 2020 4:27 PM  
**To:** Lopa, Liz (Health) <[Liz.Lopa@act.gov.au](mailto:Liz.Lopa@act.gov.au)>; George, Jacinta (Health) <[Jacinta.George@act.gov.au](mailto:Jacinta.George@act.gov.au)>; Stewart, Margaret (Health) <[Margaret.Stewart@act.gov.au](mailto:Margaret.Stewart@act.gov.au)>; Pini, Sallyanne (Health) <[Sallyanne.Pini@act.gov.au](mailto:Sallyanne.Pini@act.gov.au)>  
**Subject:** FW: NHDOA - Stage 2 CPHB Risk Register Initial DRAFT

UNCLASSIFIED

Hi all

Pls see attached FYI.

[REDACTED]

Dan

From: [REDACTED]

Sent: Friday, 5 June 2020 12:08 PM

To: Landon, Daniel (Health) <[Daniel.Landon@act.gov.au](mailto:Daniel.Landon@act.gov.au)>; Jarrad Nuss (Calvary) [REDACTED]

Cc: Denise Holm (Calvary) [REDACTED] Bladin, Caitlin (Health) <[Caitlin.Bladin@act.gov.au](mailto:Caitlin.Bladin@act.gov.au)>; [REDACTED]

Subject: NHDOA - Stage 2 CPHB Risk Register Initial DRAFT

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Hi Daniel and Jarrad,

[REDACTED]

If you have any queries or concerns regarding the attached please let me know.

Regards

[REDACTED]

**AECOM**

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**Lowes, Shannon (Health)**

---

**From:** Rochford, Brian (Health)  
**Sent:** Thursday, 11 June 2020 11:04 AM  
**To:** Landon, Daniel (Health)  
**Cc:** Bear, Jacqui (Health)  
**Subject:** FW: ACT govt policies on risk management  
**Attachments:** The Enterprise Risk Management Framework Approved Final updated contacts and links 2020.docx; The Enterprise Risk Management Guide Approved Final updated contacts and links 2020.docx; The Risk Management Plan Approved Final updated contacts and links 2020.docx; Trusted Generic Risk Register 2 for Divisions, Branch or Projects.xlsm; Risk Assessment & Treatment Sheet - New 2020.docx

**Follow Up Flag:** Follow up  
**Flag Status:** Completed

**Categories:** Northside

UNCLASSIFIED

Greetings Daniel,

Some Background re your Risk management request, will call shortly.

Brian

Regards,

Brian Rochford

Brian Rochford | Director Enterprise Risk Management  
 Phone: 02 5124 9702 | Email: [brian.rochford@act.gov.au](mailto:brian.rochford@act.gov.au)  
 Governance and Risk | Health Directorate | ACT Government  
 Level 4, 2-6 Bowes Street, Woden ACT 2606 | GPO Box 825 Canberra ACT 2601 | [www.act.gov.au](http://www.act.gov.au)

**From:** Landon, Daniel (Health) <[Daniel.Landon@act.gov.au](mailto:Daniel.Landon@act.gov.au)>  
**Sent:** Thursday, 11 June 2020 10:31 AM  
**To:** Rochford, Brian (Health) <[Brian.Rochford@act.gov.au](mailto:Brian.Rochford@act.gov.au)>  
**Subject:** Risk register questions

UNCLASSIFIED

Hi Brian

I'm working with an external consultant who is preparing a draft risk register for Calvary Public Hospital Bruce.

The consultant would like to ensure that the draft register is consistent with ACT Health's risk framework. Given I'm not hugely familiar with our directorate's frameworks, I need some expert help from someone like yourself.

Would you mind giving me a call to discuss, or direct me to someone who could help me please?

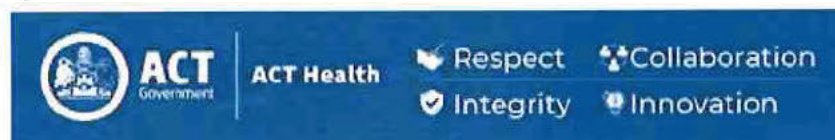
Kind regards

Dan

**Daniel Landon**

Phone: [REDACTED] | Email: [daniel.landon@act.gov.au](mailto:daniel.landon@act.gov.au)

Senior Director, Business Analysis, Strategic Infrastructure Division | ACT Health Directorate  
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## Enterprise Risk Management Framework



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## Overview

The ACT Health's Directorates **Enterprise Risk Management (ERM) Framework** guides and links the overall structure for enterprise risk, our policy and its effect on the culture of the organisation. Our **ERM Plan** outlines accountabilities and resources, our **ERM Guide** has a step by step process for risk management and its application at a practical level.

## Our ERM Framework

Our goal with the ERM framework is to ensure that it clearly supports our people when considering risk and when undertaking risk management. Simply, we seek to ensure that risk management is both considered and integrated into all critical decision-making processes associated with the ACT Health Directorate.

Our framework, at its foundation aligns with the current Australian Standard – AS ISO 31000:2018 Risk Management Guidelines<sup>1</sup> (the Standard) and mirrors its application through and in accordance with the *ACT Government Risk Management Policy* and its attributes, namely:

- *Attribute 1* - Cultivating a positive risk culture;
- *Attribute 2* - Establishing a risk management framework and policy;
- *Attribute 3* - Establishing a robust risk assessment process - a risk management plan;
- *Attribute 4* - Defining responsibility and accountability;
- *Attribute 5* - Aligning our risk management with our strategic objectives; and
- *Attribute 6* - Embedding risk management into all operations and processes.

This framework recognises that within the ACT Government, current legislation requires all ACT staff to manage risk, and to ensure that they comply with legislation including, but not limited to:

- *the Public Sector Management ACT 1994;*
- *the Financial Management Act 1996;*
- *the Insurance Authority Act 2005; and*
- *the Work Health and Safety Act 2011.*

## Key Elements of the ERM Framework

- The Directorate aligns its risks to the Strategic Plan and through it the organisation's objectives;
- Policy Statement – this policy articulates the Directorates approach to risk;
- The ERM Plan defines -
  - the roles, accountabilities and responsibilities of our people;
  - the resources available in support of enterprise risk management in the Health Directorate; and
  - the various reporting and communication mechanisms for staff undertaking risk management in the organisation.
- The ERM Guide- a step by step process using the *ACTIA Risk Management Implementation Guide* and the *ACTIA Risk Matrix*, addressing how, why and when risks are managed and escalated;

---

<sup>1</sup> AS ISO 31000:2018 Risk Management Guidelines

- Tools (an addendum of the Guide) - these include links to the ACT Government Risk Management Policy and Guidelines, AS ISO 31000:2018 Risk Management Guidelines<sup>1</sup>, as well as in house risk registers;
- Training (an addendum of the Guide), this area identifies opportunities for further refinement through an online training module (under development) and links to both internal help and external resources for staff when undertaking risk management activities for the organisation; and
- An intranet presence housing all items associated with the framework.

## Enterprise Risk Management

Enterprise risk is the integration of risk into and across critical business processes, it impacts on the culture of the organisation, it considers aspects such as the assessment of risk in terms of its effects across the organisation, and it effectively seeks to manage, monitor and report on risk in a quality review cycle seeking to improve on both its use and integration across the organisation.

*Diagram 1: A visual representation of how risk is considered across the enterprise*



## Risk Management – the concept

Risk is defined as the ‘effect of uncertainty on objectives’<sup>1</sup>; and risk management as ‘coordinated activities to direct and control an organisation with regard to risk’<sup>1</sup>.

In the Directorate, we look at risk and its management from two perspectives; one that considers events that may have a negative impact on our business (i.e. threats), and one that considers embracing some level of risk as an opportunity.

In undertaking risk management, staff are directed to consider issues or events that may impact on expected results – positive or negative. Our risks are assessed in terms of the consequences of an event, and the likelihood of that event happening; and we do this in accordance with the Australian Standard, AS ISO 31000 Risk Management Guidelines<sup>1</sup>, and specifically utilise the ACTIA Risk Matrix for this activity.

## Policy Statement

The ACT Health Directorate is committed to achieving best practice in the management of risk that may impact on the organisation meeting its objectives.

Our risk management practices align to the Australian standard of risk management AS ISO 31000:2018 Risk Management Guidelines<sup>1</sup>; and the policy and guide to risk management provided by ACTIA – *ACT Government Risk Management Policy/Implementation Guide 2019* for managing and reporting on risk.

Dependent on the type of risk its severity and controls attributed, we follow defined processes for assessment, ownership, on-going management and reporting obligations, as outlined in the **ERM Plan and Guide**.

## Risk Policy Environment

The Directorate, as the steward of health and health services in the Australian Capital Territory (the Territory) and its regions faces a broad range of risks that reflect its unique responsibilities.

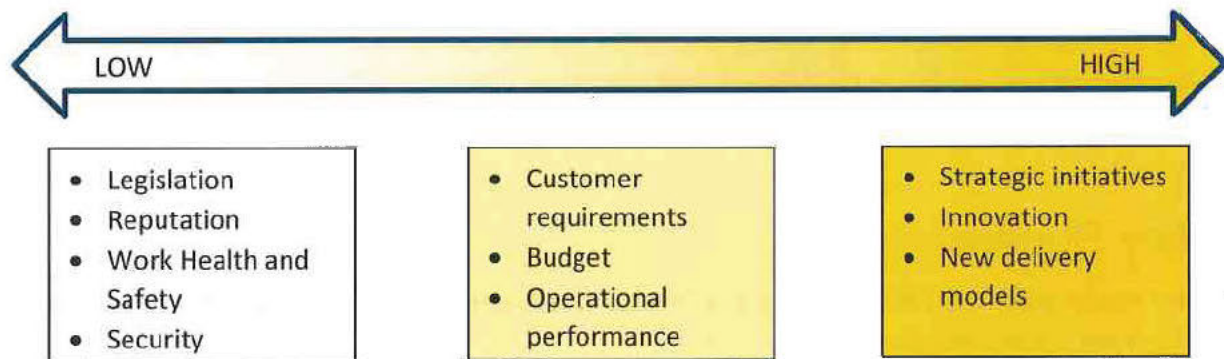
Typically, these risks can affect our:

- reputation and our ability to manage and effectively deliver high quality health services;
- ability to behave strategically and deliver value to the people of Canberra and its regions both now and in the future;
- financial stability, and longevity; and
- ability to ensure the well-being of people, including our workers and stakeholders.

## Considering Our Risk Appetite and Tolerance<sup>1</sup>

### The difference between appetite and tolerance of risk

Simply, **risk appetite** is the amount of risk, on a broad level, that the Directorate's Executive are willing to accept in the pursuit of the organisation's objectives. Tolerance relates to specific levels of variation that the organisation is willing to accept around specific objectives. For example, a project may be a high-risk venture that is considered tolerable for a specific objective – greater reward.



*Diagram 2: A graphical representation of our risk appetite and tolerance for Risk*

### Appetite and tolerance defined

**Risk appetite** is defined as 'the amount of risk an entity is willing to accept or retain to achieve its objectives. It is a statement or series of statements that describes the entity's attitude toward risk taking.'<sup>2</sup>

The Directorate's risk appetite involves effectively managing uncertainty, not avoiding or eliminating risk. A higher risk appetite in some sectors allows us to consider opportunities that involve the acceptance of some risk. Our goal is to consider risk and then manage, mitigate or embrace risk and monitor and report on risk. Accordingly, the Directorate is prepared to pursue, retain or accept risk that has been well considered, thoroughly assessed and is managed and monitored appropriately. The Directorate has generally a low appetite for any risk that will affect our management and through it our stewardship of health services delivery for the Territory and region.

**Risk tolerance** is defined as 'the maximum level of risk an entity can accept within the risk appetite without hindering the achievement of its strategic objectives or operating plan.'<sup>2</sup>

Dependant on the objective, the Directorate will tolerate higher risk levels for specific circumstances. By way of example, this may take the form of innovative concepts around service delivery models. Consideration and acceptance of any high-risk ventures would typically be at the Directorate Leadership Committee level.

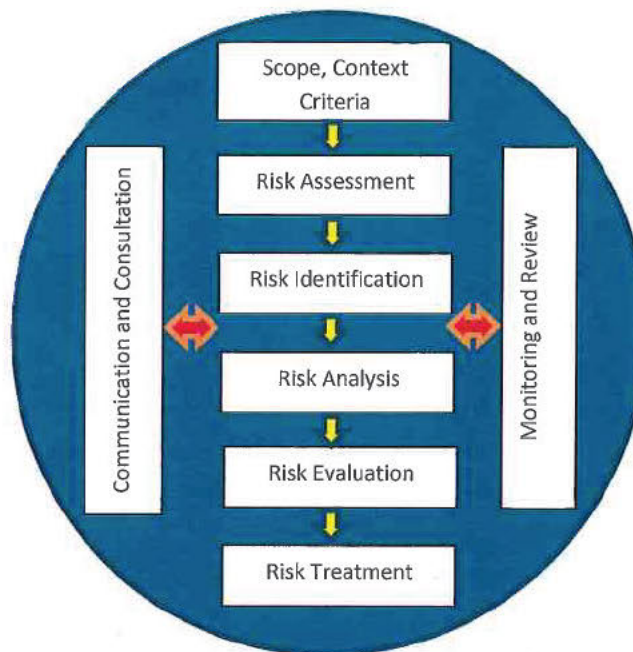
<sup>2</sup> ACTIA – ACT Government Risk Management Policy/Implementation Guide 2019

## Risk Management Process – (Defined in detail in the ERM Guide)

We consider the value of our objectives (as identified in our planning documentation - strategic, divisional, branch and project/team) and the risk to them, and then we assess and consider if the process or its reporting would benefit from documenting the exercise using the risk assessment template. By way of example, a complex project may require a detailed risk analysis to be undertaken, complete with documentation, while for a simple activity this may not be appropriate with the cost involved (time and effort) and may not justify the benefit.

When we assess risk, we consider the current measures that are in place ('controls') and their effectiveness. Using the ACTIA matrix, risks are given a rating (low to extreme). Further measures ('treatments') can then be considered to ensure that the risk is further mitigated, actively managed, transferred or eliminated. When we document this evaluation process, we generally use templates (risk registers); This ensures consistency of approach, risk ownership, ongoing monitoring and reporting across the organisation.

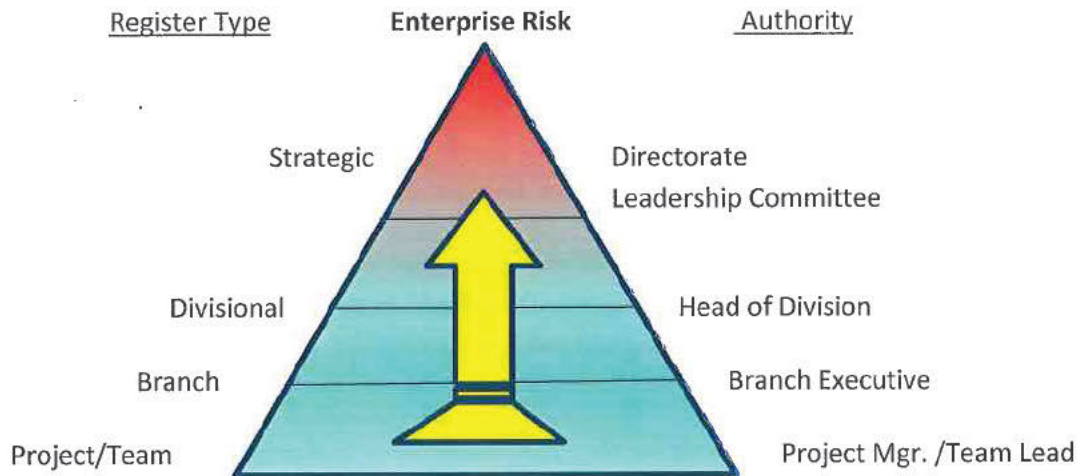
Specific risk tolerances can and would typically be determined by the appropriate risk owner to manage risk to a level that is reasonably practical. The ERM Guide expands on the concept below and gives practical examples in support. The diagram below maps out this process of evaluation, assessment, documentation and review.



**Diagram 3: The Risk Assessment Process, AS ISO 31000:2018 Risk Management Guidelines1**

## Risk – Governing in terms of the Enterprise

In the Directorate we integrate our risks into our business that enables linkages from lower risks to be brought to the attention of management and into the strategic risk profiles; This enterprise approach enables clear monitoring and reporting lines to be established. The below diagram provides a visual representation of this process and the individuals that take responsibility for both the ownership and reporting of risk in the organisation.



**Diagram 3: Risk linkages from the lowest to the strategic**

## Governance Forum

A governance forum that meets quarterly, with a representative from each Division (nominated by the Executive at the EO level – Senior Officer C) has been established. Topics covered by this forum include Risk Management, Delegations; Audits (internal and External); FOI – issues of note. Members of this forum represent the conduit for information exchange to the divisions and the leadership, the group discusses any proposed changes to Governance related initiatives, with the goal of continual improvement and embedding governance into the business streams, e.g. Risk Management. The forum members also advise their Division of any training and resources that become available through the Governance and Risk Branch of the organisation. The secretariat for this forum is the Governance and Risk Branch – specifically the Director of Enterprise Risk management.

## Escalation of Risk – Risk that may impact on a higher-level register

Any risks that may need to be escalated upwardly i.e. Project to Branch, to Division, to Group, to Strategic should be advised to the Director Enterprise Risk Management, Governance and Risk Branch, ACT Health Directorate. Risks will then be considered for inclusion at the next level. In addition, emerging risks and general discussion on risk treatments and controls are standing items for discussion at each of the governance forum meetings.

## Documenting Risk

When the Directorate considers risk, and its effects on meeting our objective at any level, we effectively map the risk, assign ownership, and define its rating (e.g. Low, Medium, High or Extreme risk), along with controls treatments etc.

Post the mapping exercise we then consider the risks priority for attention Low (1-3 months), Medium (within 3 months), High (within 7-14 days) or Extreme (within 24 hours). In addition, we consider our identified controls and their effectiveness as inadequate, room for improvement or adequate.

All the information in the above is documented in our standardised risk register – they all look the same whether be it the strategic risk register, or the down to the project/team risk register. They, by necessity have varying reporting obligations. The detail associated with the assessment, mapping, associated controls, risk ownership, monitoring and reporting obligations etc. are articulated in the Directorate's **ERM Guide**.

## Related Documents - see ACT HD Governance Risk Management Intranet Pages

- **The ERM Plan: *defines***
  - the roles, accountabilities and responsibilities of our people;
  - the resources available in support of enterprise risk management in the ACT Health Directorate; and
  - the various reporting and communication mechanisms for staff undertaking risk management in the organisation.
- **The ERM Guide: *provides***
  - an overview of risk management and its implementation in the ACT Health Directorate;
  - a step by step process for conducting a risk assessment; and
  - practical examples for completing a risk assessment utilising the ACTIA Rix Matrix and guidance for completion of your risk register.

## Training

- Training – an overview of risk management is provided through the induction program for new starters in the Directorate (in progress) – all and any staff are welcome to attend to refresh their appreciation of risk management;
- Individual training and/or guidance is available now for all staff in the organisation on request – contact the Director of Enterprise Risk Management on EXT. 49702 for details; and
- Our ACTHD Risk Management intranet page, which can be accessed from the Governance menu on the ACT HD Intranet home page. The page has linkages to an online training module provided by ACTIA.



## Some useful Hyper-links to Risk Management material (on line version)

- Australian Standard, AS ISO 31000:2018- Risk Management Guidelines;
- ACTIA – the Authority for Risk Management in the ACT Government; and
- The Institute of Internal Auditors Australia – a link to gaining formal qualifications as a Certified Practising Risk Manager (CPRM); an internationally recognised certification.

## Practical Help

- **We are here to help – please call Ext. 49702 to talk to the Director Enterprise Risk Management.**

## Legal based documents

### Legislation:

- *the Public Sector Management ACT 1994;*
- *the Financial Management Act 1996;*
- *the Insurance Authority Act 2005; and*
- *the Work Health and Safety Act 2011.*

## Policies, Guides and Standards used in Risk Management in the Directorate

- *Australian Capital Territory Insurance Authority (ACTIA) provided ACT Government Risk Management Policy and Implementation Guide; and*
- *Australian Standard, AS ISO 31000:2018- Risk Management Guidelines.*

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# Enterprise Risk Management Guide



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## Overview

This Guide is to be read in conjunction with the Enterprise Risk Management Framework and Plan

The Directorates **Enterprise Risk Management (ERM) Framework** guides and links the overall structure for enterprise risk, our policy and its effect on the culture of the organisation. Our **ERM Plan** outlines accountabilities and resources, our **Guide** (this guide) has a step by step process for risk management and its application at a practical level.

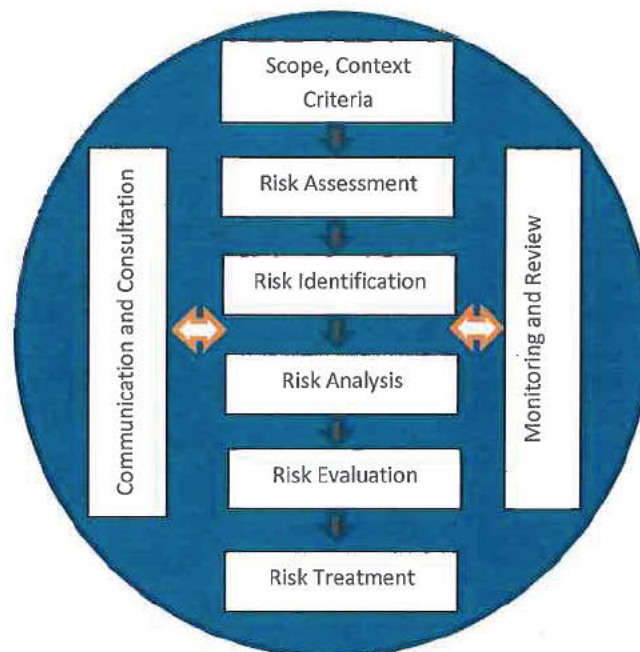
### The Process - an overview

To assess if we should apply a risk management approach to support achieving our objectives, we must consider the value of our objectives (as identified in our planning documentation - strategic, divisional, branch and project/team) and the risk to achieving them. By way of example, a complex project may require a detailed risk analysis to be undertaken, while for a simple activity this may not be appropriate with the cost involved (time and effort) and may not justify the benefit.

When we assess risk, we consider the current measures that are in place ('controls') and their effectiveness. Using the ACT Insurance Authority (ACTIA) Risk Matrix, risks are given a rating (low to extreme). Further measures ('treatments') can then be considered to ensure that the risk is further mitigated, actively managed, transferred or eliminated. When we document this evaluation process, we generally use Templates (risk registers), this ensures consistency of approach, risk ownership, ongoing monitoring and reporting across the organisation.

### The Process - In Detail - Implementation

The following is a visual representation of the step by step process for considering risk and its management.



**Diagram 1: The Risk Assessment Process, AS ISO 31000:2018 Risk Management Guidelines**

# Implementation

A practical guide to completing a risk assessment

**NOTE:** Use the supplied Generic Risk Register to document your process. Our ACTHD Risk Management intranet page, can be accessed from the Governance menu on the ACT HD home page.

Below: A screen shot of what the generic risk register looks like

Risk Register Header	Risk Category	Generic Risk Register										Risk Rating	Risk Status	Comments	Owner
		The Risk	How to identify the risk	How to measure the risk	How to monitor the risk	How to manage the risk	How to report the risk	How to review the risk	How to update the risk	How to close the risk	How to archive the risk				
1	Information	Loss of getting in writing, simply write down the risk	No data	Outcomes	All risks	Timing and location	Owner	Yes or no	Not replace	6	1	High	High	The table on the left was changed to be	1
2	Business, Processes and Systems	Personal Business system failure (THIS IS FOR ALL WITHIN THE PUMPED ONLY - ONLY WHITE (THIS IS NOT THE RISK) BUT THE END OF THIS ROW)	Main frame Run as per Strategic Plan in IT service Maintenance	Linked to System Performance Indicators - The system has been in trouble with reported weekly issues but no clear trend - should have been in daily with down time should not read down time from	Linked to the Security Status Report to the Chief and the Chief of Police by the AGS (AGS Report 1234)	Main frame - IT	Loss of Data Work stoppage as access is restricted Reproductive consequences	6	2	High	High	High	High		2
3															3
4															4
5															5
6															6
7															7

The guidance below is an aid to completing the process in practical steps (the generic risk register - see above screen shot) has practical examples of how to fill out the sheet and guidance for its completion) to help those new to Risk Management.

The guide below takes less than 5 minutes to read and gives you the basics before getting into the detail of the generic risk register & using the risk matrix (an individual guidance matrix attached to the generic risk register).

## Hints:

- If you want to add free text in the context areas etc. then unprotect the sheet, as it opens in read only format;
- Don't add or delete any cells – if you need to delete a risk use the delete button at the end of the risk register sheet; and
- To add a line within any cell, click on the cell and hit the Alt and Enter buttons together.

## Step 1 – Choosing a Template/Risk Register to document your process – does it exist already

Ask yourself - What registers currently exist - Decide this first.

Note: all assessments follow the same steps but are dependent on the impact /potential impact of the risk and as such should be placed into one of four Risk registers.

- 1) First level (The Top level register in the Directorate) – the **Strategic Risk Register**, Risks that may impact on the organisation's stated objectives – and is typically the domain of the Directorate Leadership Committee – The Register is managed and held by the Governance and Risk Branch– specifically, the Director Enterprise Risk Management.
- 2) Second level - A **Group Risk Register** – these are typically the domain of the Executive – identifying risks that impact across their group – the Register is owned and held by the Executive Group Manager or delegate.
- 3) Third level – A **Divisions Risk Register** – Risks that are typically more specialised and impact only or mostly on that Divisions work – and are typically approved, owned and held by the Executive of the Division with support from middle management.
- 4) Fourth level – **Project or Team Risk Register** – Risks relevant to a project objective or a team's work. Owned and held by the Team Leader regardless of the Level.

## Step 2 – Categorising the Risk

Risks typically fall into defined Categories: There are 22 Examples Categories in the ACTIA Risk Register choose one, or you can enter your category into the register:

Assets	Legislation
Business, processes and systems	People
Commercial	Products and services
Compliance / regulation	Project
Contractual	Records management
Leadership and culture	Reputation and Image
Environment	Security
Financial	Stakeholder management
Fraud	Strategic
General management activities	Technology
Operational	Infrastructure and governance

### Step 3 – Defining the Risk

Think about the risk of something either stopping or limiting your ability to meet an objective.

Put a short (simple English) statement into the risk register field under **risk** that describes the risk. Risk statements are written in terms of a consequence happening, an example of a risk statement: 'ACT Health is unable to attract & retain a capable workforce'. Further guidance on writing a statement, its source etc is in the Generic Risk register. Put you risk statement into the Template.

### Step 4 - Define the source of the Risk

Where did the risk come from – why is it a risk?

Put a short (simple English) statement into the risk register Field under **Source** that describes where the risk comes from.

Put that source into the Template.

### Step 5 – What's the Impact

What will happen if the risk happens? i.e. becomes a real event.

Put a short (simple English) statement into the risk register Field under **Impact/Outcome** that describes the impact/outcome.

Put that impact/outcome into the Template.

### Step 6 - Who's the Risk Owner

Who owns this risk? – the person that is best placed to manage its progress towards elimination?

Put a position/role into the risk register field under **Risk Owner** that tells us who is the owner, or group of owners.

Put that owner/s into the Template.

### Step 7 – Risk Controls currently in Place

Are there any existing controls to mitigate this risk?

Put a short statement/s into the risk register field under **Risk Controls Currently in Place** that help you understand what if any controls can help or are helping the reduce this risk.

Put the controls into the Template.

## Step 8 – Rating the Risk - How Bad can it Be?

### **NOTE: Use the ACTIA Risk Matrix**

Using the Matrix think about the risk in terms of likelihood and consequence – The left-hand horizontal fields range from rare to almost certain of the risk happening; while the top vertical fields help to define the consequence. Some text is added on the matrix as a guide. When you do the assessment put it in the Risk Register under the Consequence and Likelihood fields (place a number into these fields and the sheet will populate the level based on the score) and you will end up with a **Low, Medium, High or Extreme risk** – We call this the inherent risk – a risk that typically has some in built control e.g. jumping out of a plane is a risk the parachute is the control.

Add these into the template under Consequence (a numerical Score); Likelihood (a numerical score), the Inherent Risk Rating will then display a colour as per the Matrix. You have now completed the assessment elements and will now think about how you can improve/lower, or remove the risk going forward.

## Step 9 – Control effectiveness

Located on the Risk Matrix is a guide to accessing the risk control effectiveness. This is aimed at helping you decide if the risk can be better controlled. Place the **control effectiveness** element (from the guide/a drop down menu) – i.e. adequate; room for improvement; inadequate) into the template – this will provide readers/ reviewers an overview of your level of comfort around controls and why you went for more control, or not.

## Step 10 – Considering the Risk treatments

If you think that there may be benefit in additional controls - Think about what else could be done and at what cost – you may be happy to hold the risk as it currently stands. Some risks never fully go away, some risk is particularly relevant for an organisation that has innovation as its catch cry. Health is not one of those organisations. Our risks and our appetite and tolerance for risks are considered by the Executive in terms of their potential harm or benefit. Generally, the organisation has a low appetite for risk but will consider accepting some higher risks (tolerance) particularly in relation to projects, design and new activities where the reward is worth the risk.

**A PRACTICAL EXAMPLE** - Like the person jumping out of the plane, the risk IS THE JUMP; then the control IS THE PARACHUTE; the additional control/treatment may be that the individual may pack their own parachute or not jump at all, either way it's that individual's considered decision to have the known risk and jump or not. In the same way this goes for any risk that you own or map into any of the registers. Consider that if it went wrong, would you be happy to accept this in front of the minister or the media, if yes then you have it right, if not, it possibly needs a rethink. **We are here to help - Contact the Director of Enterprise Risk Management for advice/support ext. 49702.**

Remember that sometimes risks can be reduced (we call this mitigating); some can be eliminated; some are known but accepted; some are transferred (Insurance is a good example of transferring a risk).

### **Defining further treatments**

We consider what additional treatments could be applied to improve the rating – So if you think that the risk will benefit from further treatment answer **yes via the drop down menu**, add this to the treatments sheet of the risk register and place this consideration in the form of a short statement or

series of statement in the field **Further Treatments to Improve Rating**, in the treatments sheet of the template.

## Step 11 – The Strategy for implementing a new treatment

This is **when** and **how** we identify if we are going apply additional treatments to improve our exposure to the risk. – Put this consideration in the form of a short statement or series of statement in the field **Strategy/Implementation**. In the treatments sheet of the template.

## Step 12 – Assigning a treatment owner

This is where we identify who is responsible for the additional treatment of a risk. We identify this person by position, and place this into the template under **treatment owner**.

## Step 13 – Deciding when a risk treatment could be realised

This is where we state when additional treatment would be in place to further help the reduction of the risk. Place this **due date** into the template.

## Step 14 – Undertaking another assessment post the treatments of an initial risk to end up with the residual risk Rating

This effectively closes the loop on the risk register process (except for ongoing monitoring, review and reporting).

We effectively go through 'Step 8 – Rating the Risk - How Bad can it Be'; to document and give us a residual rating post initial controls (the inherent risk); and the application of new treatments - to end up with the Residual Risk Rating. Typically, this is what we review at regular intervals, monitor for changes, and report on progress toward reducing our risk exposure. Place this analysis (again using the supplied risk matrix) into the risk register template into the relevant fields in the treatments sheet.

Congratulations you now have a completed risk assessment – documented into the Organisations template and are now better placed to ensure risk is both considered, and assessment is applied to meet the organisations objectives.

## Reporting Obligations, Responsibilities and Authorities

Our Enterprise Risk Management Plan defines –

- the roles, accountabilities and responsibilities of our people;
- the resources available in support of enterprise risk management in the Directorate; and
- the various reporting and communication mechanisms for staff undertaking risk management in the organisation.

## The Governance and Risk Branch – Enterprise Risk Management support team:

Reports and maintains the **Strategic Risk Register**. The team also monitors and reports on Group/Divisions and project registers (where known) to the Directorate Leadership Committee, and to the Audit and Risk Management Committee.

## Group, Divisions and Individual Projects/Team Risk Registers:

Groups, Divisions and team/projects are responsible for their own risk registers, but we are here to help you manage risk so please call on Ext.49702 for assistance.

The Governance team will review all risk registers from time to time that are known in the organisation, any risks that may impact on the organisation at the strategic level will be considered for inclusion in the Strategic Risk Register. Associated reports on such risks, their elevation and linkage will be the subject of regular reports from the Governance and Risk team to the Directorates Leadership Committee and the Audit and Risk Management Committee.

## The Tools for Assessing/Considering Risk

Additional support and links are available on the ACTHD Risk Management intranet page, which can be accessed from the Governance menu on the ACT HD Intranet home page.

## The Generic Risk Register:

Go to the ACT HD Governance Risk Management Page on the Intranet obtain the generic risk register

Remember we are here to help – simply contact the Governance and Risk Branch – Director of Enterprise Risk Management on Ext. 49702 for support and guidance around risk.

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**ACT**  
Government

**ACT Health**

# Enterprise Risk Management Plan



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## Purpose

This plan supports the integration of enterprise risk management at the ACT Health Directorate (Directorate) and is aimed at embedding Risk Management into all critical business areas of the organisation.

It contains the roles of those accountable and details those activities that will ensure its effective integration.

This plan articulates opportunities and objectives, accountability requirements; resources and training; communication and reporting requirements.

This plan should be read in conjunction with the Enterprise Risk Management (ERM) Framework.

## Objective of this Plan

The objective of this plan is to ensure that:

- the Directorate's approach to risk management is fit-for-purpose, aligned with the whole of Government guidance (ACT Government Risk Management Policy and Guide) through the Australian Capital Territory Insurance Authority (ACTIA) and is continuously reviewed and improved;
- systematic risk management processes are effectively and consistently embedded into business processes at the Directorate;
- effective communication and consultation about risk occurs throughout the organisation;
- staff have the appropriate tools, training and resources in order to manage risk consistently and effectively within their span of control; and
- the risk culture at the Directorate continues to mature.

## Accountability

The ultimate responsibility for enterprise risk management in the Directorate rests with the Director-General. *The Financial Management Act 1996 (FMA Act)* states that the Director-General must manage the Directorate in a way that:

- (a) promotes the achievement of the purpose of the Directorate;
- (b) promotes the financial sustainability of the Directorate; and
- (c) is not inconsistent with the policies of the government.

In achieving these goals, and in terms of risk:

'Territory entities must establish and maintain effective risk governance that includes an appropriate internal management structure and oversight arrangements for managing risk'<sup>1</sup>. Accordingly, the Directorate's aim is to have:

- (a) an appropriate system of risk oversight and management for the organisation;
- (b) an appropriate system of internal control for the organisation; and

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<sup>1</sup> ACT Government Risk Management Policy 2019 and Implementation Guide

- (c) appropriate guidance for officials of the organisation to effectively meet their related Legislation and Policies obligations in terms of risk management.

## Roles and Responsibilities

The **Director-General** is responsible for ensuring the effective management of risk across the Directorate with the support of the Deputy Directors-General's and the Group General Managers.

The **Deputy Directors-General's** are responsible for promoting the application of risk management principles and ensuring that risk management is embedded into all critical business activities, processes and systems. They are also responsible for ensuring that staff within their respective Groups and associated Divisions have the appropriate tools, training and resources in order to manage risk consistently and effectively, to achieve division objectives.

The **Directorate Leadership Committee** is responsible for:

- governing the implementation of the ERM Framework and Plan and assessment criteria;
- determining the Directorate's risk appetite and tolerance;
- assessing, monitoring and reviewing identified, emerging and key strategic risks;
- periodic review of the Strategic Risk Register;
- overseeing the implementation of risk treatment strategies;
- reviewing whether a sound and effective approach has been followed in developing risk management plans for major projects or undertakings;
- periodically reviewing with the aim of improving the ERM Framework and associated plan and procedures; and
- reporting on the organisation's risk profile as appropriate in the annual report and as required by governing authorities (e.g. The Ministers Office; ACT Legislative Assembly; and, the Auditor General).

The **Audit and Risk Management Committee's** responsibilities regarding risk management are detailed in its charter<sup>2</sup>. It is responsible for ensuring:

- *ensuring that the Directorate has a sound enterprise risk management framework and associated processes for effective identification and management of business and financial risks, including those associated with individual projects and program implementation activities, business continuity management planning arrangements, legal and compliance risks; and*
- *the process for developing and implementing Directorate's fraud control and corruption prevention plan is sound and that the Directorate has appropriate processes and systems in place to detect, capture and effectively respond to fraud and corruption risks including reporting from the Senior Executive Responsible for Business Integrity Risk (SERBIR).*

<sup>2</sup> ACT Health Directorate Audit and Risk Committee Charter (July 2019)

The **Divisional Executive Group Managers** and related **Executive Branch Managers** are responsible for:

- managing risk within their span of control;
- assisting with the identification of global or broadly-based risks that could impact on the Directorate as a whole, including risk treatment strategies in Group, Divisional, Branch and Team/Project Plans;
- reporting on risk matters to the Directorate Leadership Committee;
- raising awareness and organising risk management training within their Groups;
- integrating risk management into Group processes and plans;
- ensuring identified risks are adequately addressed;
- ensuring relevant Risk Registers are reviewed and kept current;
- promoting the application of risk management by contractors; and
- being familiar with and competent in the application of the Directorate Enterprise Risk Management Framework and Policy.

The **Director, Enterprise Risk Management** Corporate and Governance Branch and relevant staff within the section are responsible for:

- leading the implementation of this plan;
- developing and embedding a comprehensive enterprise risk management capability throughout the Directorate;
- maintaining the organisation's Strategic Risk Register and reporting on treatments, risk and changes to the risk profiles to the Directorate Leadership Committee and the Audit and Risk Management Committee;
- reviewing and improving the Enterprise Risk Management Framework to ensure that it continues to meet the needs of the Directorate;
- identifying Business Group risks that are classified as Extreme and requiring treatment, or common risks across divisions/groups that should link into the Strategic Risk Register and associated reporting obligations;
- reviewing developments in the field of risk management as well as changes to statutory, legislative and/or regulatory requirements at a strategic level;
- raising the awareness of risk management at the Directorate;
- coordinating risk management training for staff;
- ensuring that risk management tools and intranet accessibility is maintained and current;
- providing advice and disseminating risk management information; and
- providing regular reports to the Directorate Leadership Committee and the Audit and Risk Management Committee.

**Managers and Supervisors** are responsible for:

- managing risk within their span of control;
- supporting staff in assessing risk and identifying risk owners while ensuring that staff adopt and utilise the Directorate's Enterprise Risk Management Framework;
- ensuring that risk registers for which they are responsible are maintained, reviewed and updated where appropriate and that relevant changes that may affect the Strategic Risk Register are communicated to the Director, Enterprise Risk management, Governance and Risk Branch; and

- assisting with the identification (when required) of broadly-based risks that could impact on the Directorate as a whole.

Staff are responsible for:

- managing risk within their span of control;
- considering the Directorate's Enterprise Risk Management Framework prior to conducting risk assessments;
- using the Directorate's Enterprise Risk Management Guide when undertaking risk assessments (including the risk register and treatment plan template and other tools provided on the risk management intranet page) to assist in managing risk;
- recognising, communicating and responding to emerging or changing risks;
- communicating and informing colleagues, managers and supervisors of changes to current risks, or new and emerging risks; and
- contributing to the process of developing risk assessments for their section or business group.

## Reporting and Communication mechanisms

### Governance Forum

A governance forum that meets quarterly, with a representative from each Division (nominated by the Executive at the EO level – Senior Officer C) has been established. Topics covered by this forum include Risk Management, Delegations; Audits (internal and External); FOI – issues of note. Members of this forum represent the conduit for information exchange to the divisions and the leadership, the group discusses any proposed changes to Governance related initiatives, with the goal of continual improvement and embedding governance into the business streams, e.g. Risk Management. The forum members also advise their Division of any training and resources that become available through the Governance and Risk Branch of the organisation. The secretariat for this forum is the Governance and Risk Branch – specifically the Director of Enterprise Risk management.

### Escalation of Risk – Risk that may impact on a higher-level register

Any risks that may need to be escalated upwardly i.e. Project to Branch, to Division, to Group, to Strategic should be advised to the Director Enterprise Risk Management, Governance and Risk Branch, ACT Health Directorate. Risks will then be considered for inclusion at the next level. In addition, emerging risks and general discussion on risk treatments and controls are standing items for discussion at each of the governance forum meetings.

### Risk reporting and associated Risk Registers

The requirements and areas for maintaining the reporting of risks and associated risk registers are:

Report	Audience	Responsibility	Report/Review Frequencies
Strategic Risk Register	<b>Directorate Leadership Committee</b>	Director Enterprise Risk Management, Governance and Risk Branch	Quarterly – or as risks are advised

Report	Audience	Responsibility	Report/Review Frequencies
Group Risk Register	DG & DDG's/Equivalents	The relevant areas for direct responsibility for development and maintenance of the registers; with ongoing support from the Governance and Risk Branch (i.e. the Director of Enterprise Risk Management).	Quarterly – or as risks are advised
Divisional Risk Register	Executive Group Manager – Divisional Head	The relevant areas for direct responsibility for development and maintenance of the registers; with ongoing support from the Governance and Risk Branch (i.e. the Director of Enterprise Risk Management).	Quarterly – or as risks are advised
Team/Project	Team/Project Leader	The relevant areas for direct responsibility for development and maintenance of the registers; with ongoing support from the Governance and Risk Branch (i.e. the Director of Enterprise Risk Management).	Aligned to Project reporting timeframes  (e.g. Prince 2 – at Project Gates)
Audit and Risk Committee	Audit and Risk Committee	Director Enterprise Risk Management, Governance and Risk Branch	Quarterly
Emerging Risks	Relevant Executive Members	Risk Owner/assessment officer	As they occur
Critical/Extreme Risks	Minister through DG/DDG's/ Executive Contact	Nominated Executive in Discussion with Director Enterprise Risk Management, Governance and Risk Branch	As and when Risks are confirmed by the Executive

## Resources and Training

### Resources

The DIRECTORATE Enterprise Risk Management Framework consists of:

- An acknowledgement of primary documents such as:
  - *the Public Sector Management ACT 1994;*
  - *the Financial Management Act 1996;*

- *the Insurance Authority Act 2005; and*
  - *the Work Health and Safety Act 2011*
- A policy statement that articulates the DIRECTORATE's approach to risk; its tolerance and appetite for risk;
- The ERM Plan defines -
  - *the roles, accountabilities and responsibilities of our people;*
  - *the resources available in support of enterprise risk management in the Directorate; and*
  - *the various reporting and communication mechanisms for staff undertaking risk management in the organisation.*
- The ERM Guide- a step by step process using the ACT Government Risk Management Policy and Guide incorporating the ACTIA Risk Matrix, addressing how, why and when risks are managed and escalated;
- Tools (an addendum of the Guide) - these include links to the ACT Government Policy and Guidelines through ACTIA, AS ISO 31000:2018 Risk Management Guidelines, as well as in house risk treatment plan templates (i.e. a generic risk register for use in the Directorate);
- Links to training (an addendum of the Guide), this area identifies opportunities for further refinement through an online training module (under development) and links to both internal help and support, including external resources for staff when undertaking risk management activities for the organisation; and
- Our ACTHD Risk Management intranet page, which can be accessed from the Governance menu on the ACT HD Intranet home page. The page also has linkages to an online training module and training opportunities provided by ACTIA.

## Training

- Work is continuing on the development of a comprehensive training package for staff, a significant amount of support material will be our ACTHD Risk Management intranet page, which can be accessed from the Governance menu on the ACT HD Intranet home page;
- An overview of risk management is provided through the induction program for new starters in the Directorate (in progress) – all and any staff are welcome to attend to refresh their appreciation of risk management; and
- Individual Training and/or guidance is available now for all level staff in the organisation on request – contact the Director of Enterprise Risk Management on EXT. 49702 for details.

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## ACT Government Strategic Risk Register Instructions

## Sheet 1: The Context

Identifying the context sets the scene for how the risk assessment will proceed, what risks will be considered, how they will be rated and what actions and decisions will follow from the process to manage and reduce the risks identified.

## Topic of the Risk Assessment

This field allows free text to be entered to identify the topic of the risk assessment to be carried out. Is the risk assessment a business unit or department risk assessment? Alternatively, is the risk assessment for the entity as a whole?

## Details

Provide a summary of the activity including strategic objectives and priorities within the business unit, department or entity as a whole. What do we hope to achieve through the management of risk, keeping in mind the end result. This may include defining responsibilities and scope for the risk assessment process (what is included and excluded). This may also include defining the risk appetite and tolerance levels for the particular strategic risk assessment.

## Owner

Complete as per the titles.

It is important to save the original risk assessment and to save a different version for each review period. The risk assessment may be updated as risk controls/treatments are reviewed/monitored or as new risks are identified. Appropriate record keeping and audit trails are integral to ensuring risks are managed effectively.

## Sheet Two: Risk Register

## Risk Reference Number

Provide a reference number for the risk. The easiest and most effective numbering system is 1,2,3,4,5 etc.

## Risk Category

There is a drop down box to select the appropriate category of risk to which the risk identified relates. Categorising risk often helps ensure that we identify all relevant risks.

Please note, the risk categories provided should be considered where possible to categories risk, however there is the option to amend or add your own risk categories as appropriate in the Control Panel sheet. Please refer to the Control Panel for further instructions.

## Risk Description

A description of the risk, what can happen?

Language is important. Legislation is not in itself a risk – the risk is better defined as “breach of legislation.” Likewise a building is not a risk: risks relating to a building may be: “damage to building,” “failure of building integrity / collapse of building” etc.

Examples of appropriate language include:

Failure of  
Failure to  
Breach of  
Damage to  
Loss of

Exceeding (authority, delegations, contract price etc.)

## Link to Strategic Objective

This is a free text field. This field allows to enter the strategic objectives directly related to a particular risk. Identifying this link helps to understand the management of risks directly associated with the achievement of strategic objectives.

## Key Risk Indicators (KRIs)

This is a free text field. KRIs are leading and lagging indicators which gives an early warning sign of a risk eventuating.

Further guidance is provided within the ACT Government Risk Management Policy 2019 Implementation Guide (the ‘Guide’) located in the ACTIA website.

Some examples:

- % of BCPs tested in the last 12 months
- % Compliance in regulatory and legislative requirements

## Link to Internal Audit Reports and Recommendations

This is a free text field. You may wish to include the links to particular Audit reports or recommendations (if applicable) in relation to the risks identified. Factoring in these recommendations will assist with formulating effective controls and treatments related to the risks.

## Source

This is a free text field which identifies the driver to the risk. How the risk comes about or what causes the risk?

This is the result of if what can happen does happen. Essentially this is the consequence of the risk. If there is no consequence then what has been described is not a risk.

It is important to remember that the consequence described should be the consequence in its most normal form and not the extreme form. For example the consequence of a paper cut in its most likely form is injury/small cut not requiring first aid treatment. The consequence in its most extreme form would be injury/small cut, resulting in infection and blood poisoning resulting in death. Using the extreme form of the consequence does not add value to the process as all risks would end up in the “extreme” and “high” levels of risk which would make it difficult to prioritise risk treatment plans and further action where required.

## Risk Owner

This is a free text field. The risk owner should be a ‘role’ or ‘function’ responsible for managing the risk. Ideally this should be someone who understand the risk from a day to day operational perspective.

Names of people should be avoided, to ensure that the risk ownership remains regardless of whom is in that role.

## Risk Controls Currently in Place

This is a free text field which allows you to summarise all the things that we are already doing to manage the risk.

This may include, policies, procedures or practices, legislation or regulatory requirements, Acts, approvals, checks and verifications etc.

## Risk Rating (‘Inherent Risk Rating’)

The risk is rated taking into consideration the current controls that are already in place to modify and manage the risk. The ACTIA Risk Matrix (‘Matrix’) should be referred to in rating the risks. The Matrix was developed in collaboration with ACT Government stakeholders, therefore it is recommended that the Matrix is used to rate risks, where possible.

## Consequence

This is a drop down field. Consequence of a risk needs to be rated based on the impact of the event happening on a scale of 1-5 as shown below, taking into consideration the current controls which exist. In rating the consequence, it is important that the rating is looked at in its most ‘likely form’. The most likely form of the consequence of a risk is defined as the consequence in the normal course of business.

Each identified consequence will fall within a consequence category as illustrated within the Matrix. The impact is further described under each of the consequence categories across the 1-5 scale within the Matrix.

Where there are multiple consequences that exists for one risk, the consequence with the highest impact is selected to rate the risk.

A rating between 1-5 needs to be selected for the highest consequence identified.

- 1 – Insignificant
- 2 – Minor
- 3 – Moderate
- 4 – Major
- 5 – Catastrophic

The consequence categories may be adjusted where appropriate to better reflect a certain project or program.

The important thing to remember is that at one end of the scale an insignificant consequence will have a limited impact on achieving your objectives and at the other end of the spectrum a catastrophic consequence may mean that you will not achieve your objectives at all.

## Likelihood

This is a drop down field. Now that the consequence has been defined and measured, the next question to be answered in the risk register is: What is the likelihood of the consequence?

The likelihood rating needs to be entered on a scale of 1-5. The criteria for each scale are contained within the Matrix.

- 1 – Rare
- 2 – Unlikely
- 3 – Possible
- 4 – Likely
- 5 – Almost certain

## Level of Risk (Inherent Risk Rating)

This field will be automatically populated. The Inherent Risk Rating is the level of risk taking into account the current controls in place.

The risk register automatically populates this field using the consequence and likelihood ratings entered. For example a ‘Moderate’ risk with a likelihood rating of ‘Possible’ will produce a level of risk of Medium. This is also evident from the Matrix, by the coloured risk levels shown against each consequence and likelihood scale.

## Control Effectiveness Rating

This rating is used to understand the effectiveness of current controls in managing the risk identified. This is a drop down field where the rating can be measured as ‘Adequate’, ‘Room For Improvement’, or ‘Inadequate’. The definition of each effectiveness rating is explained in the Matrix.

It is important to note that when selecting a rating, the rating is based on a quantitative assessment where appropriate rather than a qualitative assessment.

The ACT Government Risk Management Policy 2019 Implementation Guide (the ‘Guide’) recommends all risks rated ‘High’ or ‘Extreme’ or where the Control Effectiveness rating is ‘Inadequate’ or has ‘Room for Improvement’ to develop and implement treatments (new controls) in order to reduce the level of risk to an acceptable level.

## Further Treatments

This is a drop down field to select ‘Yes’ or ‘No’ to further treatments based on the results from the previous step.

## Comments

This is a free text field. Where the Inherent Risk Rating is ‘High’ or ‘Extreme’ and the Control Effectiveness rating is ‘Inadequate’ or ‘Room for Improvement’, AND further treatments will not be developed and implemented, this field allows to enter comments around the reasons for not implementing treatments (new controls).

This may be due to resource constraints, all applicable treatments have been identified and therefore the current level of risk needs to be accepted, or the current level of risk is within the risk appetite of the entity, project or program.

## ACT Government Strategic Risk Register Instructions

### Delete Function

**DO NOT DELETE ROWS IN THIS SPREADSHEET.** If you need to delete a risk, click on the 'X' Delete Button on the far right-hand side of the table. This will delete the entire row on both the RiskRegister and Treatments sheets and move the remaining risks up.

### Sheet Three: Treatments

The Guide recommends all risks rated 'High' or 'Extreme' or where the Control Effectiveness rating is 'Inadequate' or has 'Room for Improvement' to develop and implement treatments (new controls) in order to reduce the level of risk to an acceptable level.

The risks that require further treatments (new controls) as identified within the Risk Register sheet are highlighted in 'red' in column 'I'.

This page shows the information entered in the Risk Register sheet. This information is locked and cannot be amended within the Treatments sheet. The data is repeated for the purpose of transparency of the current controls in identifying the treatments (new controls).

It's important to note, that when the risk register is reviewed for currency according to the review timeframes, treatments (new controls) may become a current control (if implemented and active) and therefore should be amended as such in the revised version within the Risk Register sheet. It may also be applicable to remove a current control because it no longer contributes to the management of that risk.

### New Controls to Improve Rating

This is a free text field. Treatments (new controls) are entered within column 'J'.

### Strategy/Implementation

This is a free text field. The Treatment Action Plan is entered here which describes the strategy and actions taken to implement the new controls in order to further reduce the risk rating. Where required, the Treatment Action Plan can be documented in more detail using the ACTIA Treatment Action Plan template available in the ACTIA website.

### Treatment Owner

This is a free text field. This should be a 'role' or 'function' responsible for managing the treatment of the risk. In some circumstances, the risk treatment owners maybe the same as the risk owner. Names of people should be avoided, to ensure that the ownership for risk remains regardless of who is in that role.

### Due Date

This is a free text field. The dates for completion of the treatment strategies should be entered here in the following format (MM-Year).

### Risk Rating (Residual Risk Rating)

The risks are rated again using the consequence and likelihood criteria within the Matrix.

The risk rating steps illustrated in the Risk Register sheet, needs to be replicated in this section to rate the risks.

In rating the risks, it is important to note that the consequence and likelihood ratings should now take into consideration the treatments (new controls) identified within this section.

The Residual Risk rating is the level of risk that remains taking into account treatments or new controls.

### Control Effectiveness Rating

This is a drop down field. This rating is used to understand the effectiveness of treatments (new controls) in managing the risks identified.

The Control Effectiveness rating steps illustrated in the Risk Register sheet, needs to be replicated in this section to rate the risks.

It is important to note that when selecting a rating, the rating is based on a quantitative assessment where appropriate rather than a qualitative assessment.

### Sheet Four: Control Panel

**PLEASE DO NOT PRINT EACH TAB USING THE FILE> PRINT (Ctrl + P) FUNCTION.**

This page presents different printing options of the assessed risks to assist with reporting and decision making. Each button when pressed allows to print preview and print the selected option.

As noted in the Risk Register sheet, this page also allows for amending or adding your own risk categories. A maximum of 22 categories are able to be added. However, it is recommended that the pre populated categories are used where possible, as this represents a broad group of risk categories which is applicable across the ACT Government.

### Risk Register and Treatments

Print the Context, Risk Register and Treatments sheets.

### Selected Risks

All risks are sorted by consequence and likelihood. This option allows to print 'Extreme', 'High', 'Medium' and 'Low' risks.

### Risk Statistics

This option breaks down and maps all risks by a number of different views, and graphically shows a comparison of 'Residual' vs 'Inherent' and 'High' and 'Extreme' risks over 2 heat maps. An example is shown on the page.

### High Risks Analysis

This option provides the 'Inherent' and 'Residual' risk ratings for the 'High' and 'Extreme' risks and prints these along with the current controls and treatments (new controls).

### Data Dump: To Excel

This option provides a data dump of the data entered in the Risk Register and the Treatments sheets to a new excel workbook.

The user is able to create specialised reporting as required using this raw data.

### Data Dump: To Word

This option allows to print the data entered in the Risk Register and Treatments sheets in a 'Word' format for those that require this functionality. It is important to save the Mail Merge templates for the relevant risk register in the same location as the risk register, for the 'To Word' functionality to work. Please contact the ACTIA Risk Managers for assistance with this if required.

### Matrix

This option allows to print a copy of the ACT Government Risk Matrix.

### Strategic Risk Categories

The Strategic Risk Categories populate the Risk Category drop-box in the risk register.

Up to 22 are allowed but not mandatory.

If you remove a Risk Category that is used to flag a risk in the risk register, that risk will not appear in the statistics report.

This is why you should finalise your Risk Categories before creating your risks.

You can always add to the list any time, if you need to, without affecting the statistics report.

### Sheet Five: ACT Government Risk Matrix

This page is locked. The risk matrix sets the context as to how the ACT Government manages risk and is used to rate the risks in the risk register.

### How to edit or navigate in a cell.

#### To navigate the cursor within a cell (1)

Hit <F2> and use the arrow keys to move the cursor around within the cell.

#### To get a "line break" while editing a cell's text

Hit <Alt><Enter>

#### To navigate the cursor within a cell (2)

When there is too much text to fit in the formula bar, click this button to open the formula bar up to display all text.

Click again to close.

Shortcut; <Ctrl><Shift><U>

#### Pasting data into the register

ALWAYS use Paste Special - Values Only

This way the formatting of the register remains the same and the reports print OK.

#### Macros

The Risk Register spreadsheet contains custom macros to make the buttons work.

The file must be saved as an ".xlsm" file in order to save these macros.

Also, if you are asked to confirm "allow macros to run", use the button to say yes.

Why? Unauthorised macros can sometimes contain viruses!



**XX Divisional Risk Register**

Identifying the context sets the scene for how the risk assessment will proceed, what risks will be considered, how they will be rated and what actions and decisions will follow from the process to manage or reduce the risks identified.

**Topic of the Risk Assessment**

Purpose of the risk register, a specific event, project or undertaking.

Risk Register associated with xxxxx in the ACT Health Directorate

**Details**

Provide a summary of the activities and goals/objectives of the risk assessment. This may include defining responsibilities, the scope of the risk assessment (what is included and excluded) and how the risk assessment will be conducted.

(Hit <Alt><Enter> to make a line break)

Review of risks and treatments for ACT Health Directorate - with management responsibility within the xx Division

**Owner**

Directorate:

ACT Health Directorate

Agency / Branch / Event:

ACT HD XX Division

Risk Assessment Undertaken By:

Date Completed:

27-November-2019

Local Version Control:

1

Next Review Date:

Approving Authority

Signature

Strategic Version Ref: 2019-07-09

Directorate: ACT Health Directorate				Agency / Branch / Team: ACT HD RB Division											
Risk Reference Number	Risk Category	The Risk:	Link to Strategic Objective or SPI	Link to Internal Audit Reports and Recommendation 3 (If Applicable)	TARGET risk	Source	Impact / Outcome	Risk Owner	Risk Controls Currently in Place	Risk Rating				Further Treatments (Y/N)	Comments
										Consequence (1-5)	Likelihood of Consequence (1-5)	Inherent Risk Rating	Control Effectiveness Rating		
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															

Dir: ACT Health Directorate																	
Agency / Branch / Events: ACT HD 304 Division																	
Risk Reference	The Risk:	Risk Owner	Risk Controls Currently in Place	Risk Rating				Further Treatments (Y/N)	Further Treatments to Improve Rating	Strategy / Implementation	Treatment Owner	Due Date	Risk Rating				Control Effectiveness Rating
				Consequence	Likelihood of Consequence	Inherent Risk Rating	Control Effectiveness Rating						Consequence	Likelihood of Consequence	Residual Risk Rating		
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	

***Risk Register and Treatments***

Print the Context sheet

Print the risks as listed in the Risk Register

***Selected Risks***

Sort selected risks by consequence and likelihood and then print

***Risk Statistics***

Enter commentary regarding your Strategic Risk Statistics

Print the in-built risk statistics and charts

***High Risks Analysis***

Print the Inherent Vs Residual Ratings for Extreme & High risks

***Data Dump***

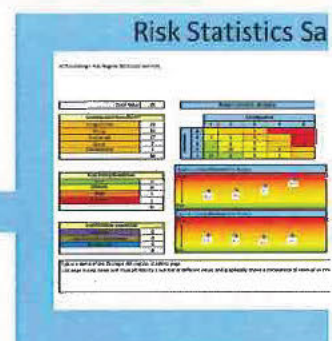
Flat file for custom reporting and analysis

***Matrix***

Print the ACT Gov Risk Matrix

; here.

Formatted Word doc - 1 risk per page



Enter/edit your own risk categories  
You can have up to 22 categories

Example

ACTIA

Risk Category	Selected
Assets	<input type="checkbox"/>
ACT HD People	<input type="checkbox"/>
Business, Processes and Systems	<input type="checkbox"/>
Commercial	<input type="checkbox"/>
Compliance / Regulation	<input type="checkbox"/>
Contractual	<input type="checkbox"/>
Environment	<input type="checkbox"/>
Financial	<input type="checkbox"/>
Fraud	<input type="checkbox"/>
General Management Activities	<input type="checkbox"/>
Legislation	<input type="checkbox"/>
Operational	<input type="checkbox"/>
Other	<input type="checkbox"/>
Products and Services	<input type="checkbox"/>
Project	<input type="checkbox"/>
Property & Services	<input type="checkbox"/>
Records Management	<input type="checkbox"/>
Reputation and Image	<input type="checkbox"/>
Security	<input type="checkbox"/>
Stakeholder Management	<input type="checkbox"/>
Strategic	<input type="checkbox"/>
Technology	<input type="checkbox"/>

Strategic Risk Categories	
Assets	0
ACT HD People	0
Business, Processes and Systems	0
Commercial	0
Compliance / Regulation	0
Contractual	0
Environment	0
Financial	0
Fraud	0
General Management Activities	0
Legislation	0
Operational	0
Other	0
Products and Services	0
Project	0
Property & Services	0
Records Management	0
Reputation and Image	0
Security	0
Stakeholder Management	0
Strategic	0
Technology	0
	0

### \* Hint

To help assess the consequence and likelihood of a risk:  
 1. **Consequence**- What will be the outcome/impact should the risk eventuate in the most normal form? Where there are many consequences, choose the one that has the highest outcome/impact.  
 2. **Likelihood**- What is the likelihood of that outcome/impact?  
 3. When identifying, analysing and rating risk, consideration should be given but not necessarily limited to the above categories of risk and the suggested examples of frequency and consequences.

### \* Priority for Attention / Action

Every care should be taken to act as soon as possible to implement risk control measures wherever possible or to take action to fix the problem. 'Extreme' and 'High' risks especially where the risk relates to people and personal injury require us to act immediately to take steps to fix the problem. The suggested timing of treatment does not mean that immediate action ought not be taken or that the timing can not be completed sooner than suggested.

			Consequence of risk in the most normal form				
			Insignificant	Minor	Moderate	Major	Catastrophic
Financial			1% of Budget or <\$5K	2.5% of Budget or <\$50K	> 5% of Budget or <\$500K	> 10% of Budget or <\$5M	>25% of Budget or >\$5M
People			Injury or ailments not requiring First Aid treatment and/or psychological injury managed by staff support services.	Minor injury or requiring First Aid treatment or short term injury (less than four weeks incapacity for work) and/or psychological injury resulting in reduced ability to perform tasks requiring treatment from a health professional.	Serious injury causing hospitalisation or medium term reversible disability (four weeks or more incapacity for work) or multiple medical treatment cases and/or psychological injury resulting in reduced ability to perform tasks requiring ongoing support from GP/health professional.	Single life threatening injury (including loss of limbs) or multiple serious injuries causing hospitalisation and/or permanent disability and/or psychological injury resulting in reduced ability to perform tasks requiring significant additional psychological treatment.	Death or multiple life threatening injuries and/or multiple injuries causing major life altering impairment and/or psychological injury resulting in inability to perform tasks requiring ongoing significant psychological treatment.
Compliance/Regulation			Non-compliance with work policy and standard operating procedures which are not legislated or regulated.	Numerous instances of non-compliance with work policy and standard operating procedures which are not legislated or regulated.	Non-compliance with work policy and standard operating procedures which require self reporting to the appropriate regulator and immediate rectification.	Restriction of business operations by regulator due to non-compliance with relevant guidelines and / or significant non-compliance with policy and procedures which threaten business delivery.	Operations shut down by regulator for failing to comply with relevant guidelines / legislation and / or significant non-compliance with internal procedures which could result in failure to provide business outcomes and service delivery.
Reputation & Image			Internal review and/or minor dissatisfaction across a small number of demographic groups or stakeholders.	Scrutiny required by internal committees or internal audit to prevent escalation and/or moderate dissatisfaction across a small number demographic groups or several stakeholders.	Local media scrutiny (1 week) and/or scrutiny required by external committees or ACT Auditor General's Office, or Inquest, etc and/or dissatisfaction across a few demographic groups or multiple stakeholders.	Intense public, political and national media scrutiny (1 week) and/or Minister / Chief minister involvement and/or dissatisfaction across a large range of demographic groups and stakeholders.	Adverse finding from Assembly Inquiry or Commission of Inquiry or sustained adverse international media and/or loss of public confidence in Govt or Public Service forcing changes to the machinery of Govt.
Service Delivery			Loss of or interruption to non critical/no-core services up to 3 days.	Interruption of core services affecting critical infrastructure (eg law & order, public safety, health) or cessation of core/ critical service essential to business continuity for up to 3 days.	Cessation of core services affecting critical infrastructure (eg law & order, public safety, health) or cessation of core/ critical service essential to business continuity for up to 3 days and/or disruption for a week.	Cessation of core services affecting critical infrastructure (eg law & order, public safety, health) or cessation of core/ critical service essential to business continuity for up to 3 days and/or disruption over subsequent weeks.	Total cessation of core services affecting critical infrastructure (eg law & order, public safety, health) or cessation of core/ critical service essential to business continuity for more than 1 week and/or disruption over subsequent months.

Likelihood of Consequence	Frequency			Matrix	1	2	3	4	5
	Almost Certain	Is expected to occur in most circumstances	Once in a quarter or more	5	Medium	High	High	Extreme	Extreme
	Likely	Will probably occur	Once a year or more	4	Medium	Medium	High	High	Extreme
	Possible	Might occur at some time in the future	Once every 1 - 5 years	3	Low	Medium	Medium	High	Extreme
	Unlikely	Could occur but doubtful	Once every 5 - 20 years	2	Low	Medium	Medium	High	High *
	Rare	May occur but only in exceptional circumstances	Once every 20 - 100 years	1	Low	Low	Medium	Medium	High *

Priority for Attention/Action				
Priority	Indicative Escalation *	Indicative Action Plan *	Authority for Action	Optional Considerations
Extreme	Within 24 hours	1 month or sooner	DG & DDG (CEO or equivalent)	Chair ARMC Director WH&S
High	Within 7-14 days	2 months or sooner	Senior Executive or equivalent (DDG/ED/Head	Director WH&S
Medium	Within 1-3 months	3 months or sooner	Executive/Business Unit Head/Manager	WH&S Team
Low	1-3 months in course of normal business	3-6 months or sooner	Team Leader/Supervisor	WH&S Team

Risk Control Effectiveness	
Control Effectiveness	Guide
Adequate	Controls are well designed and operating effectively in treating the root cause of the risk. Additional controls exist to appropriately manage consequence. Nothing further to be done except review and monitor the existing controls. Controls are largely preventative and management believes that they are effective and reliable at all times.
Room for Improvement	Some deficiencies in controls have been identified however most controls are designed and implemented effectively in treating some root causes of the risk. While some preventative controls exist, controls are largely reactive. There are opportunities to improve the design/implementation of some controls to improve operational effectiveness.
Inadequate	Significant control deficiencies identified. Either controls do not treat root cause or they do not operate effectively. Controls, if they exist are just reactive. Management has little confidence on the effectiveness of the controls due to poor control design and/or very limited operational effectiveness.

Category of risk	Consequence of risk in the most normal form					
	Insignificant	Minor	Moderate	Major	Catastrophic	
	Assets	Loss or destruction of assets up to \$2,000.	Loss or destruction of assets \$2,000 to \$10,000.	Loss or destruction of assets \$10,000 to \$100,000.	Loss or destruction of assets \$100,000 to \$5M.	Loss or destruction of assets greater than \$5M.
	Compliance/ Regulation	Non-compliance with work policy and standard operating procedures which are not legislated or regulated.	Numerous instances of non-compliance with work policy and standard operating procedures which are not legislated or regulated.	Non-compliance with work policy and standard operating procedures which require self reporting to the appropriate regulator and immediate rectification.	Restriction of business operations by regulator due to non-compliance with relevant guidelines and / or significant non-compliance with policy and procedures which threaten business delivery.	Operations shut down by regulator for failing to comply with relevant guidelines / legislation and /or significant non-compliance with internal procedures which could result in failure to provide business outcomes and service delivery.
	People	Injury or ailments not requiring First Aid treatment and/or psychological injury managed by staff support services.	Minor injury or requiring First Aid treatment or short term injury (less than four weeks incapacity for work) and/or psychological injury resulting in reduced ability to perform tasks requiring treatment from a health professional.	Serious injury causing hospitalisation or medium term reversible disability (four weeks or more incapacity for work) or multiple medical treatment cases and/or psychological injury resulting in reduced ability to perform tasks requiring ongoing support from GP/health professional.	Single life threatening injury (including loss of limbs) or multiple serious injuries causing hospitalisation and/or permanent disability and/or psychological injury resulting in reduced ability to perform tasks requiring significant additional psychological treatment.	Death or multiple life threatening injuries and/or multiple injuries causing major life altering impairment and/or psychological injury resulting in inability to perform tasks requiring ongoing significant psychological treatment.
	Environment	Limited effect to something of low significance and/or effects are limited to a small area with rapid recovery.	Transient, minor effects and/or minor effects to environment and/or disturbance of native vegetation or waterways.	Moderate, short-term environmental harm to environment and/or disturbance of native vegetation or waterways.	Significant, medium-term environmental harm to environment and/or disturbance of native vegetation or waterways.	Long term environmental harm and/or widespread or severe impacts to environment, threatened species and/or long term effects on ecological community or native vegetation or waterways.
	Financial	1% of Budget or <\$5K	2.5% of Budget or <\$50K	> 5% of Budget or <\$500K	> 10% of Budget or <\$5M	>25% of Budget or >\$5M
	Service Delivery	Loss of or interruption to non critical/no-core services up to 3 days.	Interruption of core services affecting critical infrastructure (eg law & order, public safety, health) or cessation of core/ critical service essential to business continuity for up to 3 days.	Cessation of core services affecting critical infrastructure (eg law & order, public safety, health) or cessation of core/ critical service essential to business continuity for up to 3 days and/or disruption for a week.	Cessation of core services affecting critical infrastructure (eg law & order, public safety, health) or cessation of core/ critical service essential to business continuity for up to 3 days and/or disruption over subsequent weeks.	Total cessation of core services affecting critical infrastructure (eg law & order, public safety, health) or cessation of core/ critical service essential to business continuity for more than 1 week and/or disruption over subsequent months.
	Information & Records Management	Interruption to ICT systems, electronic records and data access less than ½ day and/or system breach to business administration system with no personal or classified information stored.	Interruption to ICT systems, electronic records and data access 1/2 - 1 day and/or system breach to business administration system with some identifiable information but non-client threatening (data access known).	Significant interruption (but not permanent loss) systems and data access 1-7 days and/or system breach to business administration system with some identifiable information but non-client threatening (data access unknown).	Complete, permanent loss of some electronic records and/or data, or loss of access to ICT systems and data for more than 7 days and/or systems breach to business administration system with identifiable/classified information stored but non-client welfare threatening.	Complete, permanent loss of or inability to recover/reconstruct all records and data and/or total loss of confidence in data/record integrity and/or systems breach to Govt or business critical systems with client and/or business welfare threatened.
	Reputation & Image	Internal review and/or minor dissatisfaction across a small number of demographic groups or stakeholders.	Scrutiny required by internal committees or internal audit to prevent escalation and/or moderate dissatisfaction across a small number demographic groups or several stakeholders.	Local media scrutiny (1 week) and/or scrutiny required by external committees or ACT Auditor General's Office, or inquest, etc and/or dissatisfaction across a few demographic groups or multiple stakeholders.	Intense public, political and national media scrutiny (1 week) and/or Minister / Chief minister involvement and/or dissatisfaction across a large range of demographic groups and stakeholders.	Adverse finding from Assembly inquiry or Commission of inquiry or sustained adverse international media and/or loss of public confidence in Govt or Public Service forcing changes to the machinery of Govt.
	Cultural & Heritage	Low-level repairable damage to commonplace structures.	Mostly repairable damage to items of cultural and/or heritage significance.	Significant damage to items of cultural and/or heritage significance.	Permanent damage to structures or items of cultural and/or heritage significance.	Irreparable damage to or loss of highly valued items of cultural and/or heritage significance.
	General Business Activities	Minor errors in systems or processes requiring corrective action and/or minor delay without impact on overall schedule and/or insignificant impact on business outcomes and strategic objectives and/or negligible disruption to services or non-essential subsidiary services.	Policy procedural rule occasionally not met and/or services do not fully meet need and/or minor impact on business outcomes and strategic objectives and/or non-essential or subsidiary services experience minor disruptions.	One or more key accountability requirements not met and /or inconvenient but not client welfare threatening and/or moderate impact on business outcomes and strategic objectives and/or a number of objectives not met, minor or subsidiary services impaired.	Significant impact on business and / or strategic objectives and/or strategies not consistent with Government's agenda and/or trends show service is degraded and/or key service delivery impaired.	Strategic business outcomes processes fail, control infrastructure failure, critical business objectives not met. Unable to deliver necessary critical services.



Reference to Registers	Ownership and Timelines
Strategic Register Risk #	Owner:
Divisional Risk #	Identified Date:
Project Risk #	Last Updated:

Section 1 - Identification	
Date notified:	
Risk owner:	Who takes responsibility?
What Division/Branch and/or project is this risk associated with?	Risk Location?
Risk Description:	What can Happen?
Where or what is the risk associated with? (the source of the Risk):	E.g. System, or function

Section 2 – Assessment and Evaluation	
Identifying Controls that are in place and working	Effective Date if Known:

Using the ACTIA Risk Matrix assess the risk

	Likelihood	Consequence	Rating
Current Risk			
Target Risk Level			

### Section 3 – Future/ proposed treatments to mitigate/reduce the risk

Treatment	Date Assigned	Assigned Individual or unit	Due Date	Completed

### Section 4 – Monitoring & Review – Progress Notes

Review Date	Notes - Comments