RISK MANAGEMENT

As part of our commitment to good practice governance, the Risk and Audit Committee oversaw a process to update the organisation's Risk Framework and embarked on setting risk assessment and management plans for 2012–13. During the year the committee also reviewed its Charter and Annual Calendar to align with good practice standards.

During the year, with the assistance of an external facilitator, the Executive Leadership Team came together to:

- identify and assess risks facing MS Queensland and our planned strategy;
- determine MS Queensland's risk profile;
- consider options for remedial action; and
- develop a risk management action plan for critical risks.

EXTERNAL QUALITY AUDITING

During the year the Queensland Government moved to a new system for assessing the quality of disability services. The two stage audit was critical for accreditation to deliver services funded by the Queensland Department of Communities.

For the first time the Human Services Quality Framework was used, requiring recertification against six broad standards:

1 governance and management;

2 service access;

3 responding to individual need;

4 safety, wellbeing and rights;

5 feedback, complaints and appeals; and

6 human resources.

MS Queensland successfully completed all areas of the audit with no improvement actions required. The assessors commended our professionalism, philosophy and passion seen from staff. Of particular note was our:

- culture of continuous improvement;
- respect for each other and our clients;
- strong focus on the individuality of each of our clients; and
- providing care and support well above expectations.

The auditors also noted our organisational commitment to continuous improvement over the years and the major projects we are taking on board to keep MS Queensland moving forward. We continually strive to be first-choice for MS information, education, treatment, care and support across Queensland.



The HDAA Mark provides assurance to service users, patients, staff, stakeholders, regulators, general public and the business community of the organisations' commitment to maintaining an effective quality management system and level of care and service.



CORPORATE STRATEGIC RISK REGISTER AND PROFILE

The following table describes our key result areas, our objectives, the strategic risks that could impact the achievement of our objectives, and the result of our risk mitigation strategies in 2012–13.

OBJECTIVE → KEY RESULT AREA →

1 Client and clinical care

To improve the quality of life for PwMS through high quality, timely and convenient access to service solutions which encompasses accommodation support; physiotherapy and exercise services; nursing; psychology; service co-ordination and matching patient need; and information and education.

2 Staff and volunteers

Highly skilled and capable staff and volunteers that provide appropriate levels of service, corporate and fundraising support in alignment with our values, operating in a safe work environment that recognises relevant compliance obligations.

3 Funding

To secure sustainable sources of funding across a range of income streams (including event fundraising, lotteries and donations/bequests and government funding) to meet service requirements.

4 External relations

Maintain and enhance good standing and our brand with Government, clients, carers and families, health professionals, and community service providers, supporters and the broader community.

STARTING LEVEL OF RISK

The role of the Board is to ensure that MS Queensland has clear strategic direction and strong oversight on the journey to achieve our strategic objectives." Jonathan Loraine, Chairman

4.4

ST	RATEGIC RISKS →	Low Mediu High	Low Mediun High
1.1	Unable to retain quality certification.		
1.2	Adverse client event.		
1.3	Unable to deliver improved quality of life for PwMS.		
1.4	Maintaining relevance in regional Queensland.		
1.5	Delivering the strategic plan.		
1.6	Lack of adequate safety planning in new and existing activities.		
1.7	Extended service interruption.		
1.8	Other care providers taking market share from MS Queensland.		
1.9	Preparedness for a national disability insurance scheme (NDIS).		
2.1	Attracting and retaining appropriately skilled and values-aligned services staff and volunteers.	$\bigcirc\bigcirc\bigcirc\bullet$	
2.2	Appropriate training for staff and volunteers to successfully undertake duties.		
2.3	Keeping staff and volunteers safe during service and fundraising activities.		
2.4	Resistance to change which impacts the delivery of strategic objectives.		
3.1	Loss of government funding/change of government expectations impacts service delivery.	$\bigcirc \bullet \bigcirc$	
3.2	Lottery programs decline and become unprofitable.		
3.3	MS Brissie to the Bay does not meet targets.		
3.4	Over-reliance on existing funding sources.		
3.5	Insecure long-term funding pipeline to deliver services.		
3.6	Limited capacity to respond to funding and commercial opportunities.		
3.7	Preparedness for a NDIS.		
4.1	Adverse event diminishes stakeholder trust in MS Queensland.		
4.2	Adverse incident at public event.		
4.3	Failure to respond appropriately to client expectations of emerging/alternative MS treatments.		

Failure to manage future client accommodation/housing expectations of stakeholders.

CONTINUED →

CORPORATE STRATEGIC RISK REGISTER AND PROFILE

KEY RESULT AREA → OBJECTIVE →

5 Advocacy

- Strong and respected evidence-based advocacy that influences and delivers a change in government policy and community attitudes that directly benefits people living with MS.
- Corporate governance and compliance

Maintain good corporate governance as a responsible corporate citizen and uphold legislative and contractual obligations, that demonstrates accountability to our stakeholders.

7 Commercial approach

Ensure MS Queensland maintains efficient and effective systems and processes in order to deliver service, funding and corporate outcomes.

8 Assets

Ensure efficient and effective use of assets.



		STARTING LEVEL OF RISK	RESIDUAL LEVEL OF RISK
ST	RATEGIC RISKS →	Low Mediu	Low Medium High
5.1 5.2 5.3 5.4 5.5	Gaining access to relevant decision makers. Lack of adequate evidence-base in relation to critical policy/advocacy areas. State Government no longer values MS Queensland. Unable to influence the NDIS outcomes to benefit PwMS in Queensland. Public disagreement on policy negatively impacts government relationship.		
6.1 6.2 6.3	Non-compliance with regulations/contract provisions. Fraud impacts fundraising income. Communication strategies that do not effectively promote MS Queensland's performance.		• 0 0
7.1 7.2 7.3 7.4 7.5 7.6	IT systems project fails to deliver planned outcomes. Difficulties arise during the transition to new IT systems that affect organisational performance. IT systems project runs over time and budget. Lack of support for business case to drive organisational wide renewal of systems. Organisational overhead increases and impacts available services funding. IT infrastructure is inadequate to support our activities.		0000000000
8.1 8.2 8.3 8.4 8.5	Failure to achieve highest value in exit from Coorparoo site.* Unable to secure an alternative site to develop suitable accommodation for assessed client need. Failure to develop an agreed MS Queensland client accommodation/housing strategy. Inefficient use of property assets. Adverse event due to a property related issue.		

^{*} This risk has been actively managed and everything is in place to deliver a strong outcome however the result of this activity is unknown in this period.