



Purpose

The purpose of this policy is to set out the approach taken by the Office of the Health Ombudsman (OHO) to identify and manage operational and strategic risk.

Application

This policy applies to all permanent and temporary employees of the OHO. It is the responsibility of all staff to identify, manage and escalate risks through their division communication channels as required in the course of their work.

Legislative provisions

Crime and Corruption Act 2001

Financial Accountability Act 2009

Work Health and Safety Act 2011

Related resources

Australian Standard AS/NZS ISO 31000:2018 Risk Management – Guidelines

[A Guide to Risk Management, Queensland Treasury, June 2020](#)

Financial and Performance Management Standard 2019 (Qld)

[2023-2027 Office of the Health Ombudsman Strategic Plan](#)

OHO Procedure – Risk Management (D/200021)

Policy statement

The OHO recognises the need for effective risk management to achieve efficient and consistent decision making across all levels of the organisation. Implicit risk management underpins all operational and strategic decisions made on a day-to-day basis and this should operate as part of normal business practice.

Identifying and responding to key risks in an explicit manner is an important pillar of good corporate governance. For the OHO, effective risk management is directly focused towards achieving its legislative objectives, namely:

- to protect the health and safety of the public;
- to promote professional, safe and competent practice by health practitioners and high standards in health service delivery by health service organisations;
- to maintain public confidence in the management of complaints and other matters relating to the provision of health services.

Principles

The OHO principles for risk management are adopted from the Australian Standard AS/NZS ISO 31000:2018 Risk Management – Guidelines (the Standard):



- creates and protects value – contributes to OHO’s achievement of our strategic objectives through continuous review of processes and systems
- systemic, structured and timely – our risk management process is consistent across the OHO
- cognisant of human and cultural factors – recognises the combined contribution that people and culture have on achieving OHO objectives
- responsive to change – the process for managing risk is flexible, we consider the context of the risk as well as new risks that emerge and make allowances for those risks that no longer exist
- systemically integrated into OHO processes and decision making – the process of risk management helps our staff to make informed choices, identify priorities and select the most appropriate action
- transparent and inclusive – we engage stakeholders through risk management processes. Communication and consultation are key to identifying, analysing and monitoring risk
- facilitate continuous improvement – our risk management approach will demonstrate the continual achievement of our objectives over time

Roles and responsibilities

Health Ombudsman

The Health Ombudsman has responsibility for having systems of risk management and oversight in place, including determining risk appetite and tolerance and promoting a positive risk culture.¹

Executive Leadership Committee

The Executive Leadership Committee is responsible for reviewing, monitoring and managing risks within their respective divisions. More specifically they are required to facilitate risk conversations, promote a positive risk culture and embed risk management into the day-to-day decision making process of their respective division.

Risk owner

A risk owner is accountable to managing, monitoring, reporting and escalating risks. The respective risk owners are identified on the *OHO strategic risk register*.

Treatment owner

The treatment owner is responsible for implementing and monitoring treatments where the controls in place are ineffective and further mitigation activities are required. A treatment owner is identified on the *OHO strategic risk register*.

¹ s61(b) *Financial Accountability Act 2009*

Control owner

The control owner is responsible for ensuring that the control activity is in place and is operating effectively. The control owner doesn't necessarily perform the activity, however they will have a level of oversight of its performance.

All staff

All employees are responsible for identifying, managing, and escalating risks in their daily work.

Risk and Audit Committee

The Risk and Audit Committee are responsible for monitoring and reviewing the OHO's risk profile and advising on the management of key risks and other responsibilities as outlined in the Risk and Audit Committee Charter.

Risk appetite

The OHO monitors risks that may impact the achievement of strategic objectives according to the level of appetite. The OHO has the lowest appetite for risks associated with:

- workplace health and safety of its staff and visitors
- security of confidential information held by the OHO
- legislative compliance
- fraud and corruption.

The OHO is willing to accept a higher level of risk when pursuing innovation and opportunities that further our strategic objectives where the risks are fully understood and accepted.

How to apply risk appetite to our decision making

The risk appetite statement outlines the level of risk that can be taken in delivery the OHO's objectives. In areas where the OHO has the lowest appetite, staff must implement controls and actions to make sure the risk is within the acceptable range. In areas of lowest appetite, the target risk level must be low.

In making decisions about processes, systems or initiatives which affect service delivery, consideration must be given to:

- the level of risk (or opportunity) the decision will create;
- whether the proposed level of risk (or opportunity) aligns with the OHOs risk appetite;
- what actions or controls can be taken to reduce the impact of the risk to an acceptable level (or to maximise the opportunity).

The risk appetite statement should guide divisions to put in place appropriate controls, to reduce the chance of the risk occurring. Further information in regards to controls is available in the Risk Management Procedure.



Definitions of the levels of risk appetite

Classification	Description
Low	Seek to avoid and limit exposure to risks where they impact on the areas lowest appetite.
Medium	Prefer safer options to limit OHO to adverse risk exposure.
High	Prepared to pursue innovative options in a measured and considered way, where risks are fully understood and accepted.
Very High	Seek to engage with risk and innovation in the pursuit of potential benefits, where risks are fully understood and accepted.

OHO's risk categories and appetite

Risk category	Appetite	Risk appetite statement
People, capability and culture	Medium	The OHO aims to create a positive, inclusive and diverse workplace culture. It values compliance with <i>Queensland Public Service Code of Conduct</i> and OHO values and has a medium appetite for risks that compromise these.
Financial	Medium	The OHO aims to maintain a sustainable service delivery model and has a medium appetite for risks that limit its achievement of the OHO long term financial sustainability and viability.
Legislative compliance	Low	The OHO has the lowest risk appetite for any decisions which might result in a breach of legislation, regulations or internal policy.
Infrastructure and information technology	High	The OHO will provide infrastructure and technology in line with best practice and industry standards. Where these support the achievement of quality and effective outcomes for the public the OHO is willing to accept a high level of risk as long as these are fully understood and accepted.
Complaints (service delivery)	Medium	The OHO has a medium appetite for risks that could compromise service delivery as this could lead to loss of public confidence, but we accept there may be circumstances where we need to tolerate some uncertainty in the interest of much greater benefit across other objectives.
Cyber/Data	Low	The OHO has the lowest appetite for risks that could compromise the security of personal and confidential information.
Reputation	Low	The OHO has the lowest appetite for risks that could have a negative impact to the reputation on the OHO, its services, the Health Ombudsman, the Minister and the State Government.
Workplace health and safety	Low	The OHO has the lowest appetite for risks that could compromise workplace health and safety of our staff and visitors.



Risk category	Appetite	Risk appetite statement
Strategic priorities	Very high	The OHO is willing to accept a higher level of risk when pursuing innovation to achieve its strategic objectives, as long as potential benefits and risks are fully understood and accepted.
Fraud and corruption	Medium	The OHO has a medium risk appetite for risks that could expose the OHO to fraudulent or corrupt activities.


Definitions

Control	An existing strategy used to maintain or reduce a risk.
Risk	Chance of something happening that will impact, either positively or negatively, on the OHO's strategic objectives.
Risk appetite	The level of risk the OHO is prepared to accept in pursuit of its strategic objectives.
Risk management	The identification and process for the identification and assessment of potential risks, assigning responsibility and taking action to mitigate, monitor and report where relevant to the operation of the OHO.
OHO strategic risk register	A tool for document risks, actions and outcomes on how each risk is managed.

Version control

Version no.	Initial draft of policy to be considered.
1.0	Merge of previous draft policy and inclusion of updated information.

Approval

Effective date	12 December 2023
Last reviewed	10 October 2023
Next review	10 October 2026
Contact	Principal Policy and Governance Officer
Custodian	Director Office of the Health Ombudsman
Approved by	Health Ombudsman
Approval date	12 December 2023
Signature	



Security classification²	Official
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² NB. This footnote is intended to provide guidance when deciding the security classification of information.

Official – routine information without special sensitivity or handling requirements and a low business impact per document if compromised or lost. For example, information that may be shared across government agencies.

Sensitive – information that requires additional handling care due to its sensitivity or moderate business impact if compromised or lost. For example, information containing legal professional privilege.

Protected – information that requires the most careful safeguards due to its sensitivity or major business impact if compromised or lost. For example, cabinet documents.