

Compliance Action Plan

The following template should be used for Compliance Action Plans to be submitted to the Risk and Compliance Officer and for ultimate input to Riskware. Each area of non-compliance area should be addressed in a separate Action Plan. For obligation breaches where Policy Recommendations were issued, actions should address all agreed Policy matters. For non-compliance areas where the organisation appears to be using best endeavours, the Action Plan should indicate that processes are in place to support continuous use of best endeavours.

Please also refer to: JCU Compliance Policy and JCU Compliance Framework

Description of the Template Columns

The Action Plans should set out key steps to evaluate the area requiring development and to plan the process for achieving the required improvement. Compliance Action Plans should be prepared and submitted between 1-3 months after identification. Depending on the level of risk around non-compliance (a risk assessment may have to be completed on areas of non-compliance), organisations may have from 3 – 6 months for high risk, 6 – 12 months for medium risk, or 12 months or more for low risk non-compliance.

In summary, the three main information columns (Actions, Responsibility, and Resource) should indicate the following information:

- **Actions column** should indicate steps to seek funding/resources to carry out the planned activities as well as description of the key activities. It should also include key governance steps like approval by the relevant committee of the Vice Chancellor or Council.
- **Responsibility column** should indicate the person/position responsible for carrying through specific action.
- **Resource column** should indicate those specific resources (human and financial) that are required to carry out the action. In many cases those resources already exist at the organisation (for example, technical and professional staff in s HSE) and part of the normal operation of your organisation. Where there is some additional resource needed, please indicate the cost (at least the estimate). Also where an action requires use of consultants (designing the processes, etc.) it should be also indicated in this column.

Action Plans are developed by JCU to address non-compliance matters identified through responses to the Divisional Annual Compliance Declaration, or as notified to the Chief of Staff when a breach occurs, or in response to changes of legislation impacting the University's operations. They form part of a continuous process within the University's Compliance Framework to support the ongoing commitment to meet legislative obligations.

Action Plans are prepared based on risk and the priorities, processes and challenges specific to each Division. As such, they may vary in their objectives, content and level of detail, consistent with their differing environments and stages of development, and will be subject to periodic review and update.

Use of Information

On completion, Annual Compliance Declarations and Compliance Action Plans are CONFIDENTIAL.

ACTION PLAN

Division/Directorate/College: *As applicable*
 Compiled by: *Responsible Officer*
 Approved by: *UE member*
 Date Approved: / /
 Date Published: / /

Glossary:
[list all the acronyms used on the Action Plan]

Action Plan Subject: Non-Compliance Area X *[what is the non-compliance?]*
Action Plan Objective: *[Provide a one line description of high level objective addressed by this Action Plan]*

Background:						
Provide information on why the Compliance Action Plan is required						
	Start Date	Actions	Completion Date	Responsibility	Resource	Completed (Y/N)
Required actions to redress non-compliance:						
1.		[DESCRIPTION OF ACTION]				
2.		[DESCRIPTION OF ACTION]				
3.		[ADD ADDITIONAL ROWS AND SUBHEADS AS NECESSARY]				
Risk Mitigation Strategies whilst working towards compliance:						
4.		[DESCRIPTION OF ADDITIONAL ACTIONS TO REDUCE SAFETY RISK IN PARTICULAR IF APPLICABLE]				
Reporting/notification obligations:						
5.		[ANY EXTERNAL REGULATORY NOTIFICATIONS eg TEQSA]				
Review/updating of ORGANISATION's Compliance Information:						
6.		[INDICATE WHAT ACTIONS MAY BE REQUIRED IN THE FUTURE TO FURTHER IMPROVE ESTABLISHED PROCESSES AS WELL AS THE NEED TO REGULARLY REVIEW AND UPDATE ACTION PLAN INCLUDING THE POTENTIAL FOR INTERNAL AUDIT REVIEW]				
7.		[INDICATE WHEN INFORMATION OR OBLIGATIONS ARE UPDATED TO ENSURE CURRENCY OF PLANS IN RISKWARE]				

Enclosures:
 1. As required