

**RISK AND OPPORTUNITIES IDENTIFICATION
AND EVALUATION SHEET**

Research & Development Group

Assessment Rating Guide:
Probability:
 3 (High, ≥0.8 to 1.0 occurrence)
 2 (Medium, ≥0.4 to < 0.8 occurrence)
 1 (Low, 0.1 to < 0.4 occurrence)
Severity:
 3 (High, ≥0.8 to 1.0 Major)
 2 (Medium, ≥0.4 to < 0.8 Moderate)
 1 (Low, 0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

	Corrective Action Plan plus Monitoring and Measurement is required
	Monitoring and Measurement is required
	No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6),
VH = Very High (7-9)

Date of Assessment:		Prepared/Assessed by:		Reviewed by:		Approved by:		Next Date of Assessment:									
27 June 2023		<i>Anica B. Cummings</i> Divisional Document Custodian		<i>M. Sullivan</i> RMG Head		 Chief, Division		27 June 2024									
RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement / Expectation	Risk Origin/ Interested Parties Internal / External	Potential Risk / Issue	Impact	Current Control	Probability		Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open / Closed/ Hold)	Opportunities
							P	S									
RM-R&D /Op R-CED -01	All process	All year round	Internal	Safety of human resources/ facilities are compromised since facilities are situated along the seismic fault	<ul style="list-style-type: none"> Casualties, injuries of manpower; loss and damage of properties Disruption of business operations/ services 	<ul style="list-style-type: none"> Regular building inspection to check on structural integrity Repair/ renovation of buildings, if necessary Transfer of facilities/ equipment units to a much safer place Development/ implementation 	2	3	6	MH	<ul style="list-style-type: none"> Update evacuation and emergency exit plan and divisional disaster management committee organization chart Replenishment of first aid kit 	Chief/OIC	3Q 2022	Updated evacuation and emergency exit plan and divisional disaster management committee organization chart	31 Aug 2022 and 29 June 2023	Open	Repair/ renovation of building
												3Q 2022	Replenished first aid kit	Aug 2022			

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					properties • Disruption of business operations / services	office/work suspension.												
RM-R&D /Op R-CED -04	PM-ADM-PPMS 05-01 Purchasing of Goods	All year round	Internal	Delay in the implementation of project activities due to procurement issues: • Incomplete / tailor fit specifications of supplies, materials (S&M) & equipment units due to poor planning (ABC) • Limited suppliers of special S&M and equipment units • Permits & requirements for controlled chemicals /reagents	Unmet target/s, milestone/s	<ul style="list-style-type: none"> • Strategic planning and project management • Discussion with PBAC • Regular monitoring of PRs and other documents • Market study and consultative meetings with possible suppliers 	2	3	6	MH	<ul style="list-style-type: none"> • Additional Divisional Canvasser by amending SO 	Chief/OIC	August 2022					

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RM-R&D/ CR- CED- 01	PM-ITDI 05-03 Implementation of Regular Approved R&D Projects	All year round	Internal	Delay in the implementation of activities due to unexpected breakdown of equipment unit/s	<ul style="list-style-type: none"> • Unmet target/s, milestones • Disruption of business operation 	<ul style="list-style-type: none"> • Regular preventive maintenance activities • Ensure availability of Supply of spare parts with the right specs • Ensure After-sales service of suppliers 	1	3	3	L							
RM-R&D/ CR- CED- 02	PM-ITDI 05-03 Implementation of Regular Approved R&D Projects	All year round	Internal	Uncertainty in the accuracy / reliability of result/s of measuring equipment due to delay in calibration	<ul style="list-style-type: none"> • Institutional integrity of released results 	<ul style="list-style-type: none"> • Outsource calibration services • Ensure availability of funds for a scheduled calibration • Formation of calibration monitoring team per division • Verify / recalculate results 	1	3	3	L							

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RM-R&D / OpR - CED -05	All process	All year round	Internal	Unavailability of manpower to carry out R&D activities and technical services due to unexpected leave of absence, study leave, resignation, and other related issues	<ul style="list-style-type: none"> • Unmet target/s, milestones • Disruption of business operation and services 	<ul style="list-style-type: none"> • Clear delineation of duties and responsibilities of divisional staff • Establish succession plan and knowledge management system within the division • Documented Information such as Procedures Manual and Work Instructions • Capability/competency building such as training, seminar and other learning and development strategies 	1	3	3	L							
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RM-R&D / OpR - CED -06	PM-ADM-HRM 04-01 Recruitment, Selection and Placement	All year round	Internal	Limited applicants for high-ranking positions (Division Chief) due to mismatch in the institute's criteria and preferences for said position	<ul style="list-style-type: none"> Operational deficiency/ineffectiveness of division/s 	<ul style="list-style-type: none"> Designation of Officer-in-Charge Review and updating of the institute's criteria and preferences 	1	3	3								
RM-R&D / OpR - CED -07	PM-ADM-HRM 04-02 Staff Development	All year round	Internal	Limitations in terms of the capability of newly-hired staff to carry-out R&D projects	<ul style="list-style-type: none"> Deficiency in achieving quality results and performance 	<ul style="list-style-type: none"> Capability building Coaching / Mentoring / Immersion Competency-based Learning and Development 	1	3	3								
RM-R&D / OpR - CED -08	PM-TSD-BDS 05-01 Technology Transfer/ Commercialization of ITDI Matured Technologies	All year round	Internal	Lack of market study of newly generated technologies to ensure effective transfer and commercialization	<ul style="list-style-type: none"> No Technology Adopter for Tech Transfer 	<ul style="list-style-type: none"> Conduct stakeholder meeting/ demonstration before project completion 	2	3	6	MH	<ul style="list-style-type: none"> Conduct market survey, technology pitching and focus group discussion 	Project Leader	To be discussed with TSD	In talks with TSD		Open	Project proposal for GIA funding

RM-R&D / OpR - CED -09	All processes	All year round	Internal	Lack of safety measures (laboratory) in the new building	<ul style="list-style-type: none"> • Unexpected injuries to laboratory staff 	<ul style="list-style-type: none"> • Signages • Limited safety equipment 	2	3	6	MH	Reactivation/ updating/ replacement/ transfer/ procurement of safety equipment	Project Leaders	TBD					
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**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET**

PMISD

Assessment Rating Guide:

Probability:
 3 (High, ≥0.8 to 1.0 occurrence)
 2 (Medium, ≥0.4 to < 0.8 occurrence)
 1 (Low, (0.1 to < 0.4 occurrence))

Severity:
 3 (High, ≥0.8 to 1.0 Major)
 2 (Medium, ≥0.4 to < 0.8 Moderate)
 1 (Low, (0.1 to < 0.4 Minor))

Risk Acceptability Rating Indicators:

- VH Corrective Action Plan plus Monitoring and Measurement is required
- MH Monitoring and Measurement is required
- No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6),

VH = Very High (7-9)

Date of Assessment: June 13, 2023	Prepared/Assessed by: <i>monika...</i> Divisional RMG	Reviewed by: <i>...</i> RMG Head	Approved by: <i>...</i> Division Chief	Next Date of Assessment: January 15, 2024
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RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT			RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES				
No	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties Internal / External	Potential Risk / Issue	Impact	Current Control	Probability Severity		Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open / Closed / Hold)	Opportunities
							P	S									

PLANNING AND MONITORING SECTION

RM - OPR - 01- PMISD - PMS	Preparation of Institute's programs and projects aligned with the national and department priorities and needs	All year round	Internal and External	Shifts in priorities, directions, and strategies due to change in leadership and/or organizational structure	Will not harm the operations	Reprioritization/realignment of existing PAPs and/or call for additional project proposals aligned in the new directives	1	1	1	L							
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			Internal / External				P	S	P*S	L/MH/VH								RISK CONTROL AND MANAGEMENT
RM - OPR - MISD - PMS	Preparation of Institute's plans and budget proposals within the prescribed date	As prescribed by DBM	Internal	Under estimation of targets set due to the delay in submissions from divisions of proposed PAPs with corresponding budgetary requirements	Low appropriations released to the institute	Implementation of control mechanisms: -Memo re: submission deadline -Constant follow ups -DPCR rating -Estimation of targets based on the previous years' accomplishments	1	1	1	L								
			External	Unexpected reduction in the budget appropriation	Some of the PPAs targeted for the year will be deferred due to the sudden reduction in the budget appropriation	Budget apportioned among the divisions for the conduct of PPAs	1	2	2	L								

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			Internal / External				P	S	P*S	L/MH/VH							RISK CONTROL AND MANAGEMENT
RM - OPR -03- PMI SD - PMS	Monitoring of Institute's programs, projects and activities (PPAs)	Quarterly	External	Disruption to normal operations due to natural/ man-made disasters, calamities and health-related emergencies	Delay in the validation of project accomplishments and preparation of project documents as a result of delayed project monitoring activities	Reschedule monitoring before the project evaluation Constant follow-up Conduct of online monitoring	1	2	2	L							
RM - OPR -04- PMI SD - PMS	Evaluation of Institute's programs, activities and projects (PAPs)	Quarterly	Internal	1. Compromised and ineffective assessment of project proposals or project accomplishments /progress due to the absence of subject matter expert of TRC during the evaluation	Technical issues and concerns in project not resolved	The comments and/or inquiries about the projects are sent through e-mail seven (7) working days upon notification	1	2	2	L							
			External	2. Disruption to normal operations due to natural/man-made disasters and health-related emergencies	Delay in the conduct of evaluation	Reschedule evaluation	1	2	2	L							

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			Internal / External				P	S	P*S	L/MH/VH							
RM - OPR -05- PMI D - PMS	Review of existing and/ or formulation of new organizational policies	As need arises	Internal	Limited information/ data to be used as basis for policy review/ reformulation/ development	Compromised effectiveness of policy development	Cite minutes of EXECOM/ MANCOM/ Committee meetings and emphasize the significance of the current issues to justify the amendment of existing policies or development of new policies	1	3	3	L							

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			Internal / External				P	S	P*S	L/MH/VH								RISK CONTROL AND MANAGEMENT
MANAGEMENT INFORMATION SYSTEMS SECTION																		
RM - OPR -01- MI SD - MIS	Impleme ntation of approved and Budgete d ISSP	Implement ation Period (2020- 2022)	Internal / External	1. Sudden resignation of IT Contract of Service Staff	Delayed implemen tation of plan	Use of same system development platform for easy re- assignment of priority workload	1	3	3	L								
				2. Approved ISSP not funded by DBM	Set back on ICT capabilities progress	Request for target revision from office of the Director	1	3	3	L								
				3. Major change of end-user/s requirements (e.g. addition/ reduction of processes, user privileges and required pages and fields)	Set back on ICT capabilities progress	Use of Rapid Applicatlon Design in IS development	1	3	3	L								

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			Internal / External				P	S	P*S	L/MH/VH							
RM - OPR -02- PMISD - MIS	Provision of ICT Infrastruct ure and Data	As need arises	Internal	Cyber Security Risk that would compromise data integrity	Interruption on organiza- tion's activities that rely on ICT Infrastruc- ture	Issue Policy guidelines for ICT Security Use of Enterprise Multi-layer Data and Network Security Infrastructure	1	3	3	L							
				Sudden loss of network connection to Information systems and servers	Interruption on organiza- tion's activities that rely on ICT Infrastruc- ture	Provide redundancy In network connection and power source	1	3	3	L							

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**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET
ADMINISTRATIVE DIVISION**

<p>Risk Acceptability Rating Indicators:</p> <p>Corrective Action Plan Not Monitoring and Measurement is required</p> <p>Monitoring and Measurement is required</p> <p>No Action is required</p> <p>Legend: L = Low (1-3), MH = Medium High (4-6), VH = Very High (7-9)</p>		<p>Assessment Rating Guide:</p> <p>Probability: 3 (High, 20.0 to 1.0 occurrence) 2 (Medium, 20.4 to < 0.9 occurrence) 1 (Low, 0.1 to < 0.4 occurrence)</p> <p>Severity: 3 (High, 20.0 to 1.0 Major) 2 (Medium, 20.4 to < 0.9 Moderate) 1 (Low, 0.1 to < 0.4 Minor)</p>																	
<p>Date of Assessment: June 1, 2023</p>		<p>Prepared/Assessed by: <i>Ms. Katharine P. Robinson</i> Divisional Document Custodian</p>		<p>Reviewed by: <i>Mr. Sullivan</i> RMG Head</p>		<p>Approved by: <i>Dr. [Signature]</i> Division Chief/OIC</p>		<p>Next Date of Assessment: June 1, 2024</p>											
<p align="center">RISK / ISSUE IDENTIFICATION AND EVALUATION</p>																			
No.	Process/Activity	Requirement / Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	RISK ASSESSMENT			RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES				
									P	S	P*S	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open / Closed / Hold)	Opportunities	Addressed Risk / Issue
<p>CASHIER SECTION (CS)</p>										<p>Risk Acceptability Rating (RAR)</p>			<p>RISK CONTROL AND MANAGEMENT</p>			<p>Addressed Risk / Issue</p>			
RM-01	80% of approved DV are processed and transmitted to AGSB within 3 working days	All year round	Internal / External	Delay in the processing of DV due to lack of information such as bank details and discrepancy of payee against account name	Lapsed NCA	In lieu of LDDAP-ADA check payment will be issued	1	3	3	LMH/VH									

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HUMAN RESOURCE MANAGEMENT SECTION (HRMS)									
RM-OR-ADM-HRM S-02	All year round	Internal	Employees are not given the opportunity to attend L&D due to: - Limited fund allotment for training within the year; - Conduct of coaching and mentoring, and self-learning is not recorded/ documented	Gaps on competency is not addressed	- Conduct of Institutional Training; - Conduct of Echo Training / Seminar; - Coaching and Mentoring Training; - Use of Coaching Form; - Implementation of the Self Learning Form/Tool	1	2	2	2
RM-OR-ADM-HRM S-03	-do-	Internal	Employees are not interested due to: - Mandatory/ optional retirement; - resistance to adapting to new learnings	Gaps on competency is not addressed	- Conduct of Coaching	1	2	2	

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RM-OR-ADM-HRM-S-05	100% of IPCR submissions are monitored and reviewed in accordance with SPNS calendar and analyzed to identify developmental interventions.	Internal	Delay in the conduct of review and evaluation due to late submission of IPCR from the divisions / individual on the prescribed deadline	Compromise the effectiveness of review process	Continuous follow-up on the submission of IPCR	1	2	2	Transfer	Division	July 2022
PROPERTY & PROCUREMENT MANAGEMENT SECTION (PPMS) WITH BIDS & AWARDS COMMITTEE SECRETARIAT (BAC-SECT)											
RM-OR-ADM-PPM-S-01	80% of approved PO/NO are delivered within the agreed delivery terms based on specifications of end-user and in accordance with the provision of RAB184	External	Delay in the delivery of goods & services due to sudden change of specification / brand or model / price escalation / phase-out model by the external provider	Hamper the implementation of R&D activities Budget utilization rate is low	Transfer the risk to the end-user Change of project milestone Accept / Tolerate	1	2	2			

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RM-CR-ADM-PPM S-01	-do-	Compliance with RA 9184	Internal	End-user is unfamiliar with undertaking procurement processes consistent with the RA 9184 guidelines	Potential COA AOM	Awareness of the implementing rules and regulations of COA and RA 9184 by the end-user	1	3	3								
RM-OPR-ADM-PPM S-06	-do-	All year round	External / Internal	Delay in the implementation of procurement activities due to: <ul style="list-style-type: none"> • Incomplete / tailor fit specifications of supplies, materials (S&M) & equipment units due to poor planning (ABC) • Limited suppliers of special S&M and equipment units • Permits & requirements for controlled chemicals/ reagents 	Unmet targets, milestone	<ul style="list-style-type: none"> • Strategic planning and project management • Discussion with PSAC • Regular monitoring of PRs and other documents • Market study and consultative meetings with possible suppliers 	1	2	2	As needed	Division Chief Top Management	Designation of licensed Pharmacist from the division concerned					
RM-OPR-ADM-PPM S-09	80% of newly acquired donation & transferred properties are properly	All year round	Internal	Delay in the inspection due to: <ul style="list-style-type: none"> • unavailability of the inspector; • mismatched 	Possible warranty lapse Processing	Request for provision of warranty extension Provision for	1	2	2								

Form: RM-ITDFF2

Issue Date: June 2021

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accounted, labeled and recorded within 15 days upon inspection	All year round	Internal	schedule of end-user and inspector; and building facility / laboratory site is not yet ready	of payment on-hand	partial payment for the delivered item but yet commissioned / installed	Conduct virtual inspection	1	3	3								
RM- Opr- ADM- PPM S-10	100% of unserviceable properties are accounted for and properly disposed of within the scheduled plan in accordance with COA rules and regulations	Internal	Disposal of unrecorded unserviceable items cannot be conducted due to a lack of documentary requirements	Accumulate unserviceable items in the laboratory/ offices Occupy laboratory/ office space	Assign storage room for unserviceable items Donate to another government unit / institutions	Conduct virtual inspection	1	3	3								
RM- Opr- ADM- PPM S-11	All functional areas	Internal	Pandemic situation	Delay / suspension / deferment of activities that highly affect the achievement of functional objectives	Compliance with IATF guidelines Implementation of AWA as per CSC guidelines & policies Determine catch-up plan for Change in Milestone/s for approval of the concerned official Development & implementation of PSCP		1	3	3								

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RM- OpR- ADM- PPM S-11	All functional areas	All year round	Internal	Typhoons, floods, and other disaster occurrence	<ul style="list-style-type: none"> • Safety of human resources and facilities is compromised • Casualties injuries of manpower; loss and damage of properties 	<ul style="list-style-type: none"> • Regular inspection and maintenance of buildings / facilities including trees drainages • Compliance with safety protocols and issuance of office /work suspension 	1	3	3								
RECORDS MANAGEMENT SECTION (RMS)																	
RM- PR- ADM- RMS- 01	90% of records received are properly disseminated with the day and shall be maintained and readily available when needed	All year round	Internal	Possible loss of documents due to wrong / incomplete details of the recipient	Important / urgent information received by the recipient	Send an electronic copy of the document to the recipient	1	3	3								

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RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET
ENVIRONMENT AND BIOTECHNOLOGY DIVISION

Date of Assessment:		Prepared/Assessed by:		Reviewed by:		Approved by:		Next Date of Assessment:									
June 6, 2023		MARIA FREITAS E. ALIVE		VIRGILIANO REYNALDO FIGUEROA		Division Chief		June 6, 2024									
Divisional Document Custodian		RISK / ISSUE IDENTIFICATION AND EVALUATION		RISK ASSESSMENT		RISK TREATMENT		RISK CONTROL AND MANAGEMENT									
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
														Plan of Action Taken	Status (Open/Closed/Hold)	Actual Implementation Date	Verification of Action Taken
RM-OpR-EBD-01	All process	All year round	Natural Phenomena External	Safety of human resources/facilities are compromised since facilities are situated along the seismic fault	Casualties, injuries of manpower, loss and damage of properties Disruption of business operations/services	Regular building inspection to check structural integrity Repair/renovation of buildings, if necessary Development/implementation of business continuity plan	0	3	0	NA	None	NA	NA	Staff and facilities relocated. Memorandum on buddy system and wearing of appropriate PPE when going to old EBD building was issued. Emergency exits at old EBD building were cleared of obstructions.	Closed Closed	December 2021 August 2022 September 2022	Reduced utilities consumption Assurance of safety of staff and facilities Risk addressed Risk addressed

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			Internal / External				P	S	P*S	L/M/H/VH	RISK CONTROL AND MANAGEMENT				Verification of Action Taken	Addressed Risk / Issue	
RM-OpR-EBD-02	All year round process	All year round	Internal/External	Health of staff may be compromised due to contracting COVID-19 virus	Delay/ suspension/ deferment of activities that highly affect the achievement of functional objectives	Compliance with IATF guidelines Implementation of AWA as per CSC guidelines and policies Determine catch up plan for Change in milestones/ for approval of concerned official? Development and implementation of PSCP	1	2	2	L	Update list of immunization of staff especially for new employees	Division Chief	EO December 2023	Primary series of immunization of all qualified staff were completed. Complete booster dose immunization of staff.	Dec 2021 December 2022	Closed Closed	Reduced risk of contracting of COVID-19 virus
RM-OpR-EBD-03	All processes	All year round	External	Typhoons, floods, and other disasters occurrence	Safety of human resources and facilities are compromised Illness or injuries to personnel; damage to properties Disruption of business operations / services	Regular inspection and maintenance of buildings / facilities including trees, drainages Compliance to safety protocols and issuance of office/work suspension.	1	2	2	L	None	NA	NA	Clearing of building downspouts Trimming of tree branches De-clogging of canal at pilot plant	Every last Sat of the month Quarterly Quarterly	Regularly implemented (Open) Regularly implemented (Open) Regularly implemented (Open)	Reduced risk of flooding; extended lifespan of facilities; lessen occurrence of occupational hazard

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RM-OpR-EBD-04	All processes	All year round	Internal	Inability to sustain adequate knowledge management (KM)	Difficulty in attaining targeted activities	Develop proper documentation protocols	1	3	3	L	None	NA	NA	Updating of WIs; staff development	Yearly	Work Instructions; Training Certificates (Open)	Undisrupted PPAs
RM-OpR-EBD-05	All processes	All year round	Internal	Delay in the implementation of project activities due to acquisition issues	Unmet target/s, milestones	Strategic planning and project management Discussion with PBAC Regular monitoring of PRs and other documents Consultative meetings with possible suppliers	1	3	3	L	None	NA	NA	Direct coordination with suppliers Provide COS staff from GIA projects to supplement procurement process	Every procurement of new equipment Yearly	Approved POs (Open) Regularly implemented (Open)	Expedite acquisition of equipment and supplies Risk addressed
RM-OpR-EBD-06	All processes	All year round	Internal	Delay in the implementation of activities due to unexpected breakdown of equipment unit/s	Unmet target/s, milestones Disruption of business operation	Regular preventive maintenance activities Ensure after-sales service of suppliers	1	2	2	L	None	NA	NA	Always ensure availability of spare parts and consumables with the appropriate specifications	Every acquisition of new equipment	Regularly implemented (Open)	Reduced downtime of equipment, extended lifespan and disruption of operations

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No.	RISK / ISSUE IDENTIFICATION AND EVALUATION				RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES					
	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
RM-OpR-EBD-07	All processes	All year round	Internal	Uncertainty in the accuracy/ reliability of results of measuring equipment due to delay in calibration	Institutional integrity of released results	Outsource calibration services Ensure availability of funds for scheduled calibration Formation of calibration monitoring team per division	1	1	1	L	None	NA	NA	Regular calibration laboratory equipment	Dependent on laboratory equipment	Presence of calibration certificates (open)	More reliable results of parameters measured
RM-OpR-EBD-08	OPB 1.4.1	Meet target of number of peer-reviewed publications	Internal	Not meeting OPB targets on publication (OPB 1.4.1)	ITDI will not meet KRA, performance indicators and targets	Formation of Technical Working Team to be trained and certified by NML for internal calibration Conduct of workshop	2	1	2	L	None	NA	NA	Regular conduct of Writeshop. Designation of responsible staff to assist in preparation of papers.	Yearly August 2022	Regularly implemented (Open) Closed	Potential increase in number of publications Risk addressed

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No.	RISK / ISSUE IDENTIFICATION AND EVALUATION				RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES					
	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
RM-OpR-EBD-09	TEM operation	TEM in place and operational	Internal	Delay in infrastructure projects	Equipment not in place	No current control since TEM was in place and operational already.	0	3	3	NA	None	NA	NA	Clearing of designated rooms	Jun 2022	Closed	Operationalization of TEM
RM-OpR-EBD-10	Biosafety and Biosecurity Processes	All year round	Internal	Health and safety of staff may be compromised due to infection with biological agents Unauthorized release of biological agents	Illness or injuries to personnel Compromise of intellectual properties; public safety; erosion of public image	PPEs, good laboratory practices and engineering controls of laboratories	1	3	3	L	Preparation of biosafety and biosecurity protocols/manual	VIP Program	Dec 2023	Institutional Biosafety Committee was established.	Dec 2022	Closed	Improved biosafety and biosecurity operations and practices
RM-OpR-EBD-11	All Processes	All year round	Internal	Delay in completion of GAA funded projects	Unmet targets / milestones	Hiring of staff	1	2	2	L	Workload distribution	Division Chief	EO Jan 2024	NA	NA	NA	Professional growth

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**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET**

FINANCE AND MANAGEMENT DIVISION

Assessment Rating Guide:
Probability:
3 (High, ≥0.8 to 1.0 occurrence)
2 (Medium, ≥0.4 to < 0.8 occurrence)
1 (Low, 0.1 to < 0.4 occurrence)

Severity:
3 (High, ≥0.8 to 1.0 Major)
2 (Medium, ≥0.4 to < 0.8 Moderate)
1 (Low, 0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

- **VH** Corrective Action Plan plus Monitoring and Measurement is required
- **MH** Monitoring and Measurement is required
- **L** No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6)

VH = Very High (7-9)

Date of Assessment:

Prepared/Assessed by:

Reviewed by:

Approved by:

Next Date of Assessment:

April 3, 2023

Rose Theresa A. Right
Divisional Document Custodian

V. Mahalingam
RMG Head

J. M. M.
Division Chief

April 4, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION

RISK ASSESSMENT

RISK TREATMENT

RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES

No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability		Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
							P	S									
							RISK CONTROL AND MANAGEMENT										
FMD-01	Processing of financial transactions	All year round	Internal / External	Incomplete supporting documents	3 days delay of processing	Reiteration of ITDI memorandum on COA Circular re: List of supporting documents	1	1	1	L	Review completeness and correctness of supporting documents and signatures	End-user/PPMS					
FMD-02	Allotment for the budgetary requirement of ITDI	All year round	Internal	Urgent or sudden funding requirements	Delay of processing time	Immediate approval of request by the Head of Agency	1	1	1	L	Possible source of funding	Budget Section					

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RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External						P	S							
FMD-03	Book up Statement of Account (SOA)	All year round	Internal	Unsettled account; Delinquent account	Accumulation of Receivables Account in the book of accounts; No action on demand letters	Issue demand letter (1 st , 2 nd and Final) to delinquent customers for outstanding accounts beyond 45 days; Regular monitoring; Suspension from further availing of services until settlement of overdue accounts; Request for Write-off for bad accounts	1	1	1	L	Strictly follow the set of guidelines of non-issuance of result until services rendered is fully paid; Intensify the monitoring of receivable accounts	Accounting Section ADMATEL				Closed	No credit policy

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**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET**

MATERIALS SCIENCE DIVISION

Assessment Rating Guide:
Probability:
 3 (High, ≥ 0.8 to 1.0 occurrence)
 2 (Medium, ≥ 0.4 to < 0.8 occurrence)
 1 (Low, 0.1 to < 0.4 occurrence)
Severity:
 3 (High, ≥ 0.8 to 1.0 Major)
 2 (Medium, ≥ 0.4 to < 0.8 Moderate)
 1 (Low, 0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:



Corrective Action Plan plus Monitoring and Measurement is required



Monitoring and Measurement is required



No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6), VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 6, 2023	 DR. MARISSA A. PAGLICAWAN Divisional Document Custodian	 MA. DOLOR L. VILLASEÑOR RMG Head	 DR. MARISSA A. PAGLICAWAN OIC-MSD	July 6, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT			RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES				
No	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	P r o b a b i l i t y	S e v e r i t y	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommen ded Additional Control	Responsi ble	Implement ation Date	Plan of Action Taken	Actual Implementati on Date	Status (Open / Closed/ Hold)	Opportu nities
			Internal / External						P*S	L/MH/VH							
RM- R&D- MSD- 01	Implementa tion of approved R&D (GAA & GIA) projects	All year round	Internal: PMISD, Procure ment, BAC	If the events identified below will happen, then there is a risk that targeted mileston es will not be delivered	Project objective(s) not met												

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				and so project objective (s) will not be met																
				> failed bidding of equipment, supplies and materials,	<ul style="list-style-type: none"> • Conduct of canvass and procure ahead of time • Inventory of materials and supplies available • Create a team to monitor status of procurement and delivery 	1	3	3	L											
				> unexpected equipment breakdown	<ul style="list-style-type: none"> • Regular calibration and preventive maintenance of equipment • Preparation Purchase Request of spare parts (with right specifications, warranty inclusions of 															

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					calibration and preventive maintenance, timeline of delivery)														
			Internal: MSD Section Heads and Chief	> manpower availability due to disaster and pandemic (COVID-19)		<ul style="list-style-type: none"> Budget allotment for repair and maintenance Implementation of alternative work arrangement (AWA) Follow up succession plan/conduct coaching and mentoring (in-house training) 	1	1	1										
	All year round	Internal: Chemical Inventory Team	> No indicated expiration date of reagents on chemical inventory	Possible use of expired reagents that could lead to unreliable results	Follow harmonized ITDI chemical inventory format and monthly updating of inventory	1	3	3											

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		All year round	Internal: PMISD	> If terminal report is not submitted within agreed time frame, then there is a risk that one of the functional objectives will not be met resulting in low rating in the overall performance of the division.	Low rating in the overall performance of the division	<ul style="list-style-type: none"> • Strict monitoring of activities according to the work plan, posting on bulletin board and sending of email for the reminder of submission of terminal report. 	1	3	3	L							
RM-Opr-MSD-02	Provision of technical services	All year round	External: Academic, Industry, LGU Private Individuals Internal: R&D Divisions	If the event of unexpected equipment malfunction or breakdown, there is a risk that targeted due date will not be met and delivery of results	Delay in the delivery of results	<ul style="list-style-type: none"> • Regular calibration and Preventive Maintenance of equipment Change of schedule / due date (communicate with client thru email, phone) 	1	3	3	L							

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				will be delayed.														
RM-R&D-MSD-03	Delivery of Major Final Outcome: <ul style="list-style-type: none"> • Application for IP Protection • Papers published in peer reviewed journals or conference /proceedings presented in local/international conference /fora 	All year round	Internal: MSD Section Heads and Chief, Project Doers TSD	In the event of limited budget, the risk or failure to file for IP protection and papers published as target milestone will result to low rating of the overall divisional performance	Low rating of the overall divisional performance	• Submission of patent draft to TSD and technical paper to Publication Committee	1	1	1									

Form: RM-ITDI-F2
Issue: June 2021

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**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET
PACKAGING TECHNOLOGY DIVISION**

Assessment Rating Guide:
Probability:
 3 (High, ≥0.8 to 1.0 occurrence)
 2 (Medium, ≥0.4 to < 0.8 occurrence)
 1 (Low, (0.1 to < 0.4 occurrence)
Severity:
 3 (High, ≥0.8 to 1.0 Major)
 2 (Medium, ≥0.4 to < 0.8 Moderate)
 1 (Low, (0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

Corrective Action Plan plus Monitoring and Measurement is required

Monitoring and Measurement is required

No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6), VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 2023	 Divisional Document Custodian	 RMG Head	 Division Chief	July 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH							RISK CONTROL AND MANAGEMENT
RM-RD-R & D-PTD-01	Implementation of Approved R & D Projects (GAA & GIA assisted) Provision of technical services	All year round	DOST Project staff External/ Internal	Uncertainties in the outcome of research/test results Unforeseen events in the conduct of research	Unmet targets, milestone/s	Conduct extensive literature research Consult a knowledge provider Change of milestone Catch-up plan	1	1	1	L							
RM-RD-OpR-PTD-01	-do-	All year round	Project staff BAC Procurement section Internal/ External	Delay in the purchase, delivery of equipment, materials & supplies due to procurement issues	Unmet targets, milestone/s	Strategic planning and project management Discussion/consultation with BAC Regular monitoring of PRs and other	1	1	1	L							

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						documents												
						Search for possible suppliers												
RM-RD-OpR-PTD-02	-do-	All year round	Project staff Supplier of equipment Internal/external	Delay in operation and conduct of experiment or tests due to unexpected equipment breakdown	Unmet targets, milestone/s	Regular Preventive maintenance, and calibration Activities Source out equipment from other division or testing lab Outsource test from other laboratories Ensure availability of supply of spare parts with the right specifications Ensure after-sales service of suppliers Change of proj. milestone	1	2	2	L								
RM-RD-OpR-PTD-03	-do-	All year round	Project staff Internal/external	Delay in operation and conduct of experiment or tests due to uncalibrated equipment	Unmet targets, milestone/s	Regular preventive maintenance & calibration activities Non-usage of uncalibrated unit with	1	2	2	L								

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OpR - PTD -06	technology transfer	schedule	Technol ogy lead person and team	carry-out technology transfer Unavailability of technology adopter's facilities, equipment, etc. for the conduct of technology transfer		techno- transfer activities Fast tract completion of tech. transfer documents i.e. TLA, FOB approval, etc. Orientation & convene regular meetings between the tech. provider and adoptor to discuss complete specifications of materials, equipment etc. needed in the tech. transfer activities.										
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RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

Assessment Rating Guide:
Probability:
 3 (High, ≥ 0.8 to 1.0 occurrence)
 2 (Medium, ≥ 0.4 to < 0.8 occurrence)
 1 (Low, 0.1 to < 0.4 occurrence)
Severity:
 3 (High, ≥ 0.8 to 1.0 Major)
 2 (Medium, ≥ 0.4 to < 0.8 Moderate)
 1 (Low, 0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

■ **CA** Corrective Action Plan plus Monitoring and Measurement is required

■ **M** Monitoring and Measurement is required

■ **NA** No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 3, 2023	<i>[Signature]</i> Divisional Document Custodian	<i>[Signature]</i> RMG Head	<i>[Signature]</i> OIC, Chief	Jan 4, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH					RISK CONTROL AND MANAGEMENT		Verification of Action Taken
OPR-RM-TSD-BDS-01	FO#5: Techno-economic studies (market/industry profile, FS/BOP and techno-packages) of identified mature/commercial technologies within the prescribed period.	Information and data about the technologies submitted by the technology generators. Prepare and update techno-economic profiles of priority technologies based on available data/information from technology generators.	Internal/ External	Unavailability of data from R&D divisions that will affect accuracy of techno-economic studies.	Uncertainties on the accuracy of results of the techno-economic study (financial, technical and marketing)	Assumptions/projections being incorporated in the financial analysis. Gathering of marketing info to supplement the available data.	1	1	1	L					Since 2018 Closed		Designed forms for data gathering from R&D divisions

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RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

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 3 (High, ≥ 0.8 to 1.0 occurrence)
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 1 (Low, 0.1 to < 0.4 occurrence)
Severity:
 3 (High, ≥ 0.8 to 1.0 Major)
 2 (Medium, ≥ 0.4 to < 0.8 Moderate)
 1 (Low, 0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

- VH Corrective Action Plan plus Monitoring and Measurement is required
- M Monitoring and Measurement is required
- L No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 3, 2023	<i>[Signature]</i> Divisional Document Custodian	<i>[Signature]</i> RMG Head	<i>[Signature]</i> OIC, Chief	Jan 4, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITES			
No.	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/ Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH					RISK CONTROL AND MANAGEMENT		Verification of Action Taken
OPR-RM-TSD-BDS-02	Techno-economic studies (market/industry profile, FS/BOP and techno-packages) of identified mature/commercializable technologies within the prescribed period.	Adequacy of a well-defined system in reviewing ITDI technologies/IPs ready for transfer.	Internal / External	Insufficient info/data will compromise the effective review to identify and prioritize technologies for transfer and commercialization.	Loss of ownership and income/benefit due to lapses in the review process for technologies for possible transfer and commercialization.	Developed strategies and tools to capture pertinent information to include criteria for technology review and assessment	1	2	2	L					Closed		Monitoring for effectiveness

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RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

Assessment Rating Guide:
Probability:
 3 (High, ≥ 0.8 to 1.0 occurrence)
 2 (Medium, ≥ 0.4 to < 0.8 occurrence)
 1 (Low, (0.1 to < 0.4 occurrence))
Severity:
 3 (High, ≥ 0.8 to 1.0 Major)
 2 (Medium, ≥ 0.4 to < 0.8 Moderate)
 1 (Low, (0.1 to < 0.4 Minor))

Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

M Monitoring and Measurement is required

L No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 3, 2023	<i>[Signature]</i> Divisional Document Custodian	<i>[Signature]</i> RMG Head	<i>[Signature]</i> OIC, Chief	Jan 4, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External						P*S	L/MH/VH							RISK CONTROL AND MANAGEMENT
OPR-RM-TSD-BDS-03	FO#3: Implement approved requests for technical assistance/techno transfer in the regions based on schedule/duration within the year with a VS rating	100% requests from clients implemented	Internal/ External	Unmet requirements of client due to readiness level of the requested technologies.	Unsuccessful transfer of technologies.	Validation of technologies vis-a-vis clients requirements prior to negotiation.	1	2	2	L					Since 2018 Closed		Developed Evaluation Criteria, i.e. (Stop/Modify; Plan, Test and Validate; Go/Launch)

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RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

Assessment Rating Guide:
Probability:
 3 (High, ≥ 0.8 to 1.0 occurrence)
 2 (Medium, ≥ 0.4 to < 0.8 occurrence)
 1 (Low, (0.1 to < 0.4 occurrence))

Severity:
 3 (High, ≥ 0.8 to 1.0 Major)
 2 (Medium, ≥ 0.4 to < 0.8 Moderate)
 1 (Low, (0.1 to < 0.4 Minor))

Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

M Monitoring and Measurement is required

L No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 3, 2023	<i>[Signature]</i> Divisional Document Custodian	<i>[Signature]</i> RMG Head	<i>[Signature]</i> OIC, Chief	Jan 4, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
							P	S	P*S	L/MH/VH					Verification of Action Taken		Addressed Risk / Issue
OPR-RM-TSD-ESS-04	FO#7: Engineering support to technology transfer, R&D, technical services, maintenance and repair of physical facilities/buildings.	Efficient delivery of services in support of technology transfer, R&D, and technical services within the prescribed time with a VS rating.	Internal/External	Unavailability of training requirements (raw materials and supplies) despite close coordination with the requesting party.	Compromised efficiency in the conduct of training due to time and material constraint.	Stricter monitoring/checking of availability of required materials prior to deployment of staff.	1	1	1	L	Transfer of risk to the client. Client shall provide a waiver pertaining to lack of training requirements that will compromise effectiveness of training.				Open (On-going)		Online meeting with the requesting party for inspection of equipment and needed materials to ensure readiness and availability, e.g. for bioreactor, dual drum composter.
		Delivery of support services in relation to repair and maintenance of building following the approved schedule and building maintenance protocol.	Internal	Lack of manpower capability to perform the appropriate action. Unavailability of necessary resources (supplies/materials, equipment, etc.) to perform the appropriate action.	Delays in the delivery of TSD services thus, hamper the implementation of maintenance activities.	Resort to outsourcing of possible suppliers with needed funds. - Infra - SDO	1	1	1	L	Transfer For outsourcing of services not within the capability of ESS. Coordination with Building Coordinators.				Open (On-going)		



RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

Assessment Rating Guide:
Probability:
 3 (High, ≥ 0.8 to 1.0 occurrence)
 2 (Medium, ≥ 0.4 to < 0.8 occurrence)
 1 (Low, 0.1 to < 0.4 occurrence)
Severity:
 3 (High, ≥ 0.8 to 1.0 Major)
 2 (Medium, ≥ 0.4 to < 0.8 Moderate)
 1 (Low, 0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

M Monitoring and Measurement is required

L No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 3, 2023	<i>Ayala</i> Divisional Document Custodian	<i>M. P. ...</i> RMG Head	<i>U. ...</i> OIC, Chief	Jan 4, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH					RISK CONTROL AND MANAGEMENT		
OPR-RM-TSD-IDS-05	FO#4: Provide relevant information to customers and stakeholders both internally and externally in all forms (print and non-print, media/press conference, exhibits, techno fora) at the right time.	100% relevant information provided to customers and stakeholders both internally and externally	Internal/External	Limited fund allocation for the production of print materials	Compromised quality and quantity of print IEC materials.	Provision of digital copy of IEC materials to customers	1	1	1	L	Mitigate				Closed		With fund from GAA
			Internal	Constraint in the identification of relevant stakeholders/ participants for a specific technology fora.	Unmet required number of relevant participants/ stakeholders for techno-fora will result to low probability of technology matching/ adoption.	Updating of list/database of stakeholders; networking with other agencies/ institutions for relevant stakeholders; enhance marketing and promotion of technologies thru multi/social media.	1	2	2	L	Mitigate				Closed		



RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

Assessment Rating Guide:
Probability:
 3 (High, ≥0.8 to 1.0 occurrence)
 2 (Medium, ≥0.4 to < 0.8 occurrence)
 1 (Low, (0.1 to < 0.4 occurrence))

Severity:
 3 (High, ≥0.8 to 1.0 Major)
 2 (Medium, ≥0.4 to < 0.8 Moderate)
 1 (Low, (0.1 to < 0.4 Minor))

Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

M Monitoring and Measurement is required

L No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 3, 2023	<i>Agallan</i> Divisional Document Custodian	<i>Mabulac</i> RMG Head	<i>John</i> OIC, Chief	Jan 4, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement / Expectation	Risk Origin/ Interested Parties Internal / External	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed / Hold)	Opportunities
							P	S	P*S	L/MH/VH					RISK CONTROL AND MANAGEMENT		
OPR-RM-TSD-IDS-06	Availability of resources for easy retrieval of information	Enhancing and sustaining the ITDI in-house collection and knowledge products	Internal and external	Drawbacks on storing and safekeeping of in-house collections that resulted to decentralized library holdings due to the closure of the physical library.	Decentralized library holdings can no longer provide quality library service to external and internal customers in terms of quick and easy access to needed data/information for research works, and failure to protect the ITDI in-house collection and knowledge products.	Digitization of library holdings of ITDI in-house collections Referral to STII Library Currently working on KM Platform project that aims to revitalize then memorabilia including a Special STI library to retain and sustain all internal knowledge holdings/resources.	2	2	4	MH	Mitigate On-going activities: <ul style="list-style-type: none"> Secure funding for Project Proposal – Repair and Renovation of DOST-ITDI KM Platform for STI (Science, Technology, and Innovation) Culture, and Arts (DOST-ITDI KM STICA) A Special STI Library/R&D Archives is provided in the KM Platform (as one of its three components) Building up of database to form part of the Special Library/R&D Archive towards institutionalizing KM 				Open (On-going)		Rehabilitation of former memorabilia/library

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RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

Assessment Rating Guide:
Probability:
 3 (High, ≥ 0.8 to 1.0 occurrence)
 2 (Medium, ≥ 0.4 to < 0.8 occurrence)
 1 (Low, (0.1 to < 0.4 occurrence))

Severity:
 3 (High, ≥ 0.8 to 1.0 Major)
 2 (Medium, ≥ 0.4 to < 0.8 Moderate)
 1 (Low, (0.1 to < 0.4 Minor))

Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

M Monitoring and Measurement is required

L No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 3, 2023	<i>Agallor</i> Divisional Document Custodian	<i>Adrian</i> RMG Head	<i>John</i> OIC, Chief	Jan 4, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH					RISK CONTROL AND MANAGEMENT		Verification of Action Taken
OPR-RM-TSD-IDS-07	FO#6: Implementation of project, TekNegoShow	Develop/produce videos for various technologies - online program which will air narratives and insights of technology generators, business people, and the consuming public on how they perceive a featured technology.	Internal/ External	Scheduling of experts for shooting, and limited resources	Delay in the production of videos/ material, thus will affect attainment of targets based on timeline/ workplan.	Close coordination with concerned experts for scheduling of shooting and interviews; and with FMD and Projects Leaders from GIA projects for additional budget.	1	1	1	L	Mitigate Ads on Siyensikat						Institutionalization of TekNegoShow as a means of technology promotion. Monitoring for effectiveness

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Severity:
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 2 (Medium, ≥ 0.4 to < 0.8 Moderate)
 1 (Low, (0.1 to < 0.4 Minor))

Risk Acceptability Rating Indicators:

VD Corrective Action Plan plus Monitoring and Measurement is required

M Monitoring and Measurement is required

L No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 3, 2023	<i>Gallo</i> Divisional Document Custodian	<i>Robinson</i> RMG Head	<i>Robinson</i> OIC, Chief	Jan 4, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH					RISK CONTROL AND MANAGEMENT		
OPR-RM-TSD-RCTS-08	FO#1: Design and develop one new and acceptable training program within the year.	One new and acceptable training program	Internal/ External	Lack of innovative technology-based training offerings that will match industry needs.	Pose constraint in achieving the Institute's goal in contributing to making local industry competitive.	Inventory of technologies applicable for industry training. Sending memo and conduct of divisional meetings with R&D and S&T for new training courses to be offered to industries.	1	3	3	L					Closed		

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 1 (Low, (0.1 to < 0.4 Minor))

Risk Acceptability Rating Indicators:

■ **VH** Corrective Action Plan plus Monitoring and Measurement is required

■ **M** Monitoring and Measurement is required

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Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 3, 2023	<i>[Signature]</i> Divisional Document Custodian	<i>[Signature]</i> RMG Head	<i>[Signature]</i> OIC, Chief	Jan 4, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH					RISK CONTROL AND MANAGEMENT		
OPR-RM-TSD-RCTS-09	FO#2: Implementation of training programs	100% of client request accommodated.	Internal/ External	Constraints to accommodate/ implement requested trainings by clients due to unforeseen events and mismatch of schedule as required by client.	Causing delay in the delivery of training services based on requirement of clients.	Develop competencies of technical personnel as subject matter expert to a specific technology (understudy). Close coordination with concerned experts/ trainers.	1	2	2	L	Mitigate Current controls being implemented				Closed		



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 1 (Low, (0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

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M Monitoring and Measurement is required

L No Action is required

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Date of Assessment: July 3, 2023

Prepared/Assessed by: *Gallon*
Divisional Document Custodian

Reviewed by: *McPallister*
RMG Head

Approved by: *Wright*
OIC, Chief

Next Date of Assessment: Jan 4, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH					RISK CONTROL AND MANAGEMENT		
OPR-RM-TSD-RCTS-10	FO #2: Implementation of training programs	Accommodate clients' requests for webinars/ online training given the stable internet connectivity of both parties.	Internal/ External	Limitations to accommodate requests particularly those that requires hands-on practice due to stability of internet connectivity particularly in laboratories, and from client's end.	Compromised the effectiveness of training program that may require demo and hands-on practice.	Ensure assigned trainers to have a stable internet connection either work from home or at the office. Develop videos for hands-on activity.	1	2	2	L	Mitigate Requested radius from MIS for experts/trainers and facilitators				Closed		Development of demo videos

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Risk Acceptability Rating Indicators:

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RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
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			Internal / External				P	S	P*S	L/MH/VH							
OPR-RM-TSD-11		Adequacy of a well-defined system in evaluating ITDI technologies/IPs ready for transfer.	Internal	If technology audit process and assessment criteria for technology readiness/maturity after R&D is not yet well defined, then it will be difficult to identify/prioritize technologies for transfer.	Unclear or under-developed assessment process/mechanism to identify potential IPs and appropriate mode of protection could lead to loss of income/benefit due to unprotected IPs.	Developed assessment criteria for technology readiness/maturity is being implemented to prioritize technologies for transfer.	1	1	1	L	Developed TRA protocol	Responsible: BDS			Closed		

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RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

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 2 (Medium, ≥ 0.4 to < 0.8 occurrence)
 1 (Low, (0.1 to < 0.4 occurrence))
Severity:
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 1 (Low, (0.1 to < 0.4 Minor))

Risk Acceptability Rating Indicators:

- V.H Corrective Action Plan plus Monitoring and Measurement
- M Monitoring and Measurement is required
- L No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

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July 3, 2023	<i>[Signature]</i> Divisional Document Custodian	<i>[Signature]</i> RMG Head	<i>[Signature]</i> OIC, Chief	Jan 4, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH					RISK CONTROL AND MANAGEMENT		Verification of Action Taken
OPR-RM-TSD-12	Monitoring of Technology Transfer agreements and Technical Assistance with MOA	Up-to-date Technology transfer and Technology assistance activities	Internal	If strict monitoring of the activities as stipulated in the TLA/MOA will not be implemented, the outputs will be delayed	Unclear or under-developed monitoring process/mechanism can lead to loss of clients and income	Stringent implementation of monitoring activities/criteria/ measures of BDS	1	3	3	L	To start monthly monitoring of activities of all tech transfer agreements and technical services agreements with present clients with on-going TLA/MOA. Responsible: BDS Implementation: 2020-2021				Closed		

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 1 (Low, (0.1 to < 0.4 occurrence))
Severity:
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 2 (Medium, ≥ 0.4 to < 0.8 Moderate)
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Risk Acceptability Rating Indicators:

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■ **M** Monitoring and Measurement is required

■ **L** No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
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RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH							
OPR-RM-TSD-RCTS-13	Post Training Monitoring	Received at least 30% response rate from online survey questionnaire sent to the participants.	External	Reluctance of the target respondents to answer the survey.	Compromised the target response rate, and lack of data/info to determine usefulness of ITDI training programs	Send survey questionnaire to participants from regular and customized trainings. Undertake follow-up from the target respondents.	2	2	4	MH	Mitigate						

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1.0 Objective:

To ensure that risks and opportunities are determined and actions to be taken are implemented to achieve the intended results.

2.0 Scope:

This procedure covers all activities from identification of risks and opportunities, analysis and evaluation, determination of action to be taken up to the review and monitoring of the effectiveness of actions.

3.0 Definition of Terms:

Risk – is a threat that will adversely affect the institute from meeting its business objectives, achieve its goals / targets and successfully executing its strategies.

Issue - a risk, which has already occurred.

Note: Risks are futuristic and anticipated, while Issues are risks, problems and nonconformities that already occurred.

Opportunity – positive risk that can be taken at maximum advantage.

Uncertainty – a state, even partial, of deficiency of information related to, understanding of knowledge of, an event, its consequence, or likelihood.



Risk Control – includes decision making to reduce and/or accept risks. The purpose of risk control is to reduce the risk to an acceptable level. The amount of effort used for risk control should be proportional to the significance of the risk.

Risk Reduction – focuses on processes for mitigation or avoidance of quality risk when it exceeds a specified (acceptable) level.


Risk Management – process of identifying, assessing and implementing measures to minimize risks to the Institute's property, interests and employees that may cause inefficiencies in performing their functions and achieving goals / objectives / targets.

Risk Management Group (RMG) - shall be responsible for the development and oversight of the institute's risk assessment activities. The RMG reconstitute per Special Order. The group shall oversee the system of limits to discretionary authority that the Director delegates to the process owners and senior staff to ensure that the system remains effective, that the limits are observed and immediate corrective actions are taken whenever limits are breached or violated.

Risk Review Committee (RRC) – shall be responsible for the review divisional risk management register; recommends changes as needed; monitors and evaluates the effectiveness of the

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proposed plan of action; and work with Risk Management Group (RMG) in ensuring that the risks are properly considered and addressed.

Risk Treatment – involves selecting one or more options for modifying risks, and implementing those options as to:

- **Tolerate / Accept** – risk is tolerated / accepted due to inability to do anything with risk.
- **Treat / Mitigate** – risk is treated / mitigated using controls such as actions, policies, procedures, technology to render risk to an acceptable level.
- **Transfer** – risk is transferred by engaging third party to carry the risk to reduce the exposure (e.i. insurance, subcontracting, outsourcing).
- **Terminate** - risk is terminated by dropping the activity.

RISK CATEGORIES:

Research and Development (R&D) Risk – uncertainties in terms of outcome of research results, availability of resources, and other unforeseen events in the conduct of research.

Technology Risk (TR) – uncertainties in terms of technology readiness for transfer and adoption commercialization due to lack or absence of proof of concept, market survey/validation study and results of clinical, field and other pertinent tests.



Market Risk (MR) – risk of financial loss or earnings of the institute brought about by uncertainties in terms of market opportunities/viability of technologies/IPs generated and competitiveness of the services offered by the institute;

Compliance Risk (CR) – arises from violations or non-conformance with pertinent laws, rules, regulations, guidelines, prescribed practices, internal/external policies and procedures, or ethical standards.


Legal Risk (LR) – risk due to uncertainties in legal actions on the applicability or interpretation of contracts/agreements.

Organizational Risk (OR) – arises from inadequate skills of personnel, lack of clear definition of responsibilities and accountabilities of divisional units/committees and personnel.

Operational Risk (OpR) – risk associated with execution, delivery, & process management that may cause delay or failure to deliver technology (products/services) and other transactions according to mutually agreed terms and conditions and existing statutory and regulatory requirements.

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Physical Risks (PR) – risks connected to the physical assets such as premises, equipment, furniture and fixtures. These also include the risks involved in keeping and/or storing of documents, knowledge holding, accountable forms, including the risks involved in the Information Technology (IT) such as viruses, database crashes, etc.

Socio-Political Risks (SPR) – uncertainties in terms of sustainability/continuity of projects/activities due to change in authorities and priorities.

4.0 External and Internal Contexts:

External Context - The external context in which the risk assessment will take place:

A. Regulatory Environment – compliance with the government policies, rules, and regulations, as to the:



- Environmental Law
- Techno Transfer Law
- Occupational Safety and Health

B. Standard References – compliance with the standards in test, evaluation, and analysis, as to the:


- Philippine National Standards
- ASTM
- Internal Standards
- AOAC
- JIS
- EU
- BAM
- FDA

C. Business Environment

- **Funding Agency/Institute [General Appropriations Act (GAA) and Grant-in-Aids (GIA)]** – generate research projects/proposal aligned to their mandate and strategic thrusts & programs.

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- **DOST and other Regional Offices** – assistance on enhancement and knowledge sharing related to their projects/programs adopted from the National Science and Technology Plan.
- **President’s Agenda/Program** – alignment of all R&D activities to the 10-point agenda which requires S&T intervention.
- **Interested Parties** – various industries in the field of: biotechnology; chemical; energy; environment; food processing; material science; and packaging, academes and other government institutions in terms of S&T activities regarding compliance assistance and innovation; external providers; and stakeholders.


Internal Context - The process is managed and administered by:

- A. PMISD** – project proposal submitted to PMISD for comment and approval to the ITDI Technical Review Committee (TRC).
- B. Project Leader / Project Team / Staff** – prepares the pertinent documents related to the project proposal, conduct experiment, tests, discussion and evaluation of the project and prepares monthly, quarterly and terminal report.
- C. TRC** – refer to the group of technical expert from different divisions to make assessment and recommendation based on the results/output of the completed project for scale up, technical paper, prototype.
- D. Director**– directs and stimulates all R&D activities towards the needs and expectations of identified interested parties.
- E. Support Group** – facilitate and process the general administrative services to the Research and Development group.

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	RISK MANAGEMENT		


5.0 Risk Assessment Criteria and Matrix:

Probability	Numerical Rating	Descriptive Analysis
High	3	<p>Greater than or equal to 80% probability of occurrence ($\geq 0.8 - 1.0$)</p> <p>Exhibits the high-risk indication(s), has happened frequently, has a very significant chance of happening in the future, or has already happened/occurred in 8-10 events in a year.</p>
Medium	2	<p>Greater than or equal to 40% but not more than 80% probability of occurrence (≥ 0.4 to < 0.8)</p> <p>Has happened occasionally (4-7 events in a year) or has a reasonable but not entirely expected chances of happening in the future.</p>
Low	1	<p>Below 40% probability of occurrence ($0.1 - < 0.4$)</p> <p>Has happened very occasionally (below 4 events in a year) or is expected not to happen except for rare occasion.</p>

Severity	Numerical Rating	Descriptive Analysis
High	3	<p>MAJOR (≥ 0.8 to 1.0)</p> <p>The issue will have a major impact on the system and is likely to cause significant disruption in delivery of service or outputs/outcomes in a very visible extent.</p>
Medium	2	<p>MODERATE (≥ 0.4 to < 0.8)</p> <p>The issue will have some impact on systems and be visible to a number of users. A possible disruption in delivery of service or outputs/outcomes for some customers (internal and external) is expected.</p>
Low	1	<p>MINOR ($0.1 - < 0.4$)</p> <p>Minimal service disruption or effects are expected. Any negative impact can be corrected without significant effort or visibility.</p>



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Other Criteria:

High	Medium	Low
Audit Impact	Audit Impact	Audit Impact
More than 10 AOM in a year	6 - 9 AOM in a year	1 - 5 AOM in a year
More than 10 personnel disallowed	5 - 9 personnel disallowed	1 -4 personnel disallowed
Environment	Environment	Environment
Adverse environmental impact with case filed against ITDI	Adverse environmental impact with written complaint from immediate premises	Adverse environmental impact with verbal reprimand from immediate premises
Financial	Financial	Financial
above ₱1,000,000.00	above ₱100,000.00 - ₱999,999.00	above ₱1.00 - ₱99,999.00
Above 30% reduction in the proposed budget	21% - 30% reduction in the proposed budget	5% - 20% reduction in the proposed budget
People	People	People
Accident resulting in injury equivalent to > 40 man-hours.	Accident resulting in injury from 18 to 31 man-hours.	Accident resulting in injury from 1 to 17 man-hours.
Administrative penalty of more than 90 days of suspension	Administrative penalty of less than 36 days but not more than 89 days of suspension	Administrative penalty of less than 2 days but not more than 35 days of suspension
more than 3 days after due date	2 days after due date	1 day after due date
Delays in office processes by more than 3 months	Delays office processes by more than 2 months	Delays office processes by more than 1 month
Non-compliance with requirements even after the Final Notice is served	Compliance with requirements upon receipt of the first and second notification letter	Compliance with requirements within the prescribed period



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SUBJECT		DOCUMENT TYPE	PAPER / PDF FILE
	RISK MANAGEMENT		

Inefficiency and Incompetence in the performance of official duty(grave offense)	Refusal to perform official duty (first and second offense)	Simple neglect of duty
Property	Property	Property
Equipment totally destroyed.		
Equipment damage more than P15,000	Equipment damage < P15,000, >P 5,000.	Equipment damage <P5,000, > P 100
Equipment non-operational from 24 to 30 days	Equipment non-operational from 12 to 23 days	Equipment non-operational 1 to 11 days.
Service	Service	Service
Suspension of the operations of the entire ITD for 6 hours to 8 hours	Suspension of the operations of the entire ITD for 3 hours to 5 hours	Suspension of the operations of the entire ITD for 1 hour to 2 hours
Suspension of operations of at least three Divisions for one (1) day	Suspension of operations of at least three Divisions for 4 hours	
Information is provided from 48 to 60 minutes	Information is provided from 12 minutes to 47 minutes	Information is provided from 1 minute to 11 minutes
A major non-compliance finding resulting in the loss of ISO Certification.	A major non-compliance finding resulting in major system, process, or operational degradation	A minor non-compliance finding resulting in the issuance of management letter for corrective action within 3 days
All information and data lost	Major Data Loss, 50% above	Minor Data Loss, less than 50%
Loss of information integrity, reliability, and accuracy resulting to irrevocable damage to public	Loss of information integrity, reliability, and accuracy resulting to revocable damage to public	
Reportorial Compliance	Reportorial Compliance	Reportorial Compliance
more than 5 errors affecting the values/amounts presented in the report	4 - 5 errors affecting the values/amounts presented in the report	1 - 3 errors affecting the values/amounts presented in the report

Prepared by:  CHAIRPERSON, RISK MANAGEMENT GROUP	Approved by:  DIRECTOR
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August 2022

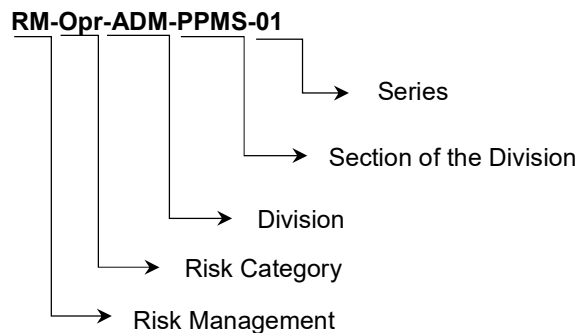
	DEPARTMENT OF SCIENCE AND TECHNOLOGY INDUSTRIAL TECHNOLOGY DEVELOPMENT INSTITUTE	DOCUMENT CODE	PM-ITDI 06-01
	PROCEDURES MANUAL	REVISION NUMBER	0
SECTION	RISKS AND OPPRTUNITIES	PAGE NUMBER	8 of 12
		EFFECTIVITY DATE	30 June 2021
SUBJECT	RISK MANAGEMENT		

Risk Acceptability Rating (RAR) Table

			Severity		
			Low	Medium	High
Probability	High	3	3	6	9
	Medium	2	2	4	6
	Low	1	1	2	3


Very High (9)	Corrective Action plan plus monitoring and measurement is required.
Medium High (4-6)	Monitoring and measurement is required
Low (1-3)	No actions required

6.0 Risk Code Format:





Prepared by: <i>Opafurendo</i> CHAIRPERSON, RISK MANAGEMENT GROUP	Approved by: <i>A. Jimenez</i> DIRECTOR
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	DEPARTMENT OF SCIENCE AND TECHNOLOGY INDUSTRIAL TECHNOLOGY DEVELOPMENT INSTITUTE	DOCUMENT CODE	PM-ITDI 06-01
	PROCEDURES MANUAL	REVISION NUMBER	0
PAGE NUMBER		9 of 12	
SECTION	RISKS AND OPPRTUNITIES	EFFECTIVITY DATE	30 June 2021
		DOCUMENT TYPE	PAPER / PDF FILE
SUBJECT	RISK MANAGEMENT		


7.0 Documented Information:

ISO 31000-2009 Risk Management – Principles and Guidelines
Risk and Opportunities Identification and Evaluation Sheet (ROIES)
Risk Management Register
Risk Management Plan
Plan of Action

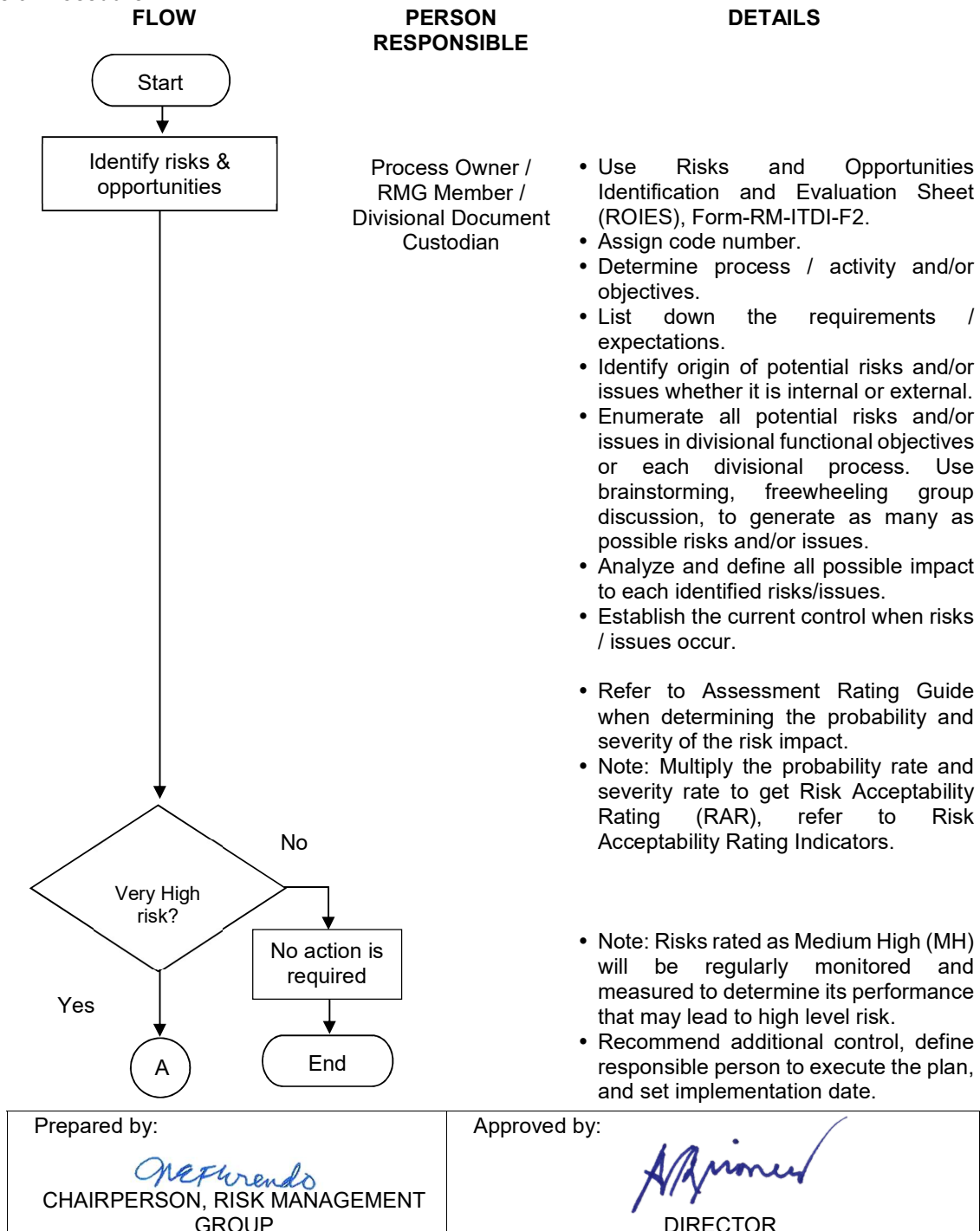
Prepared by:  CHAIRPERSON, RISK MANAGEMENT GROUP	Approved by:  DIRECTOR
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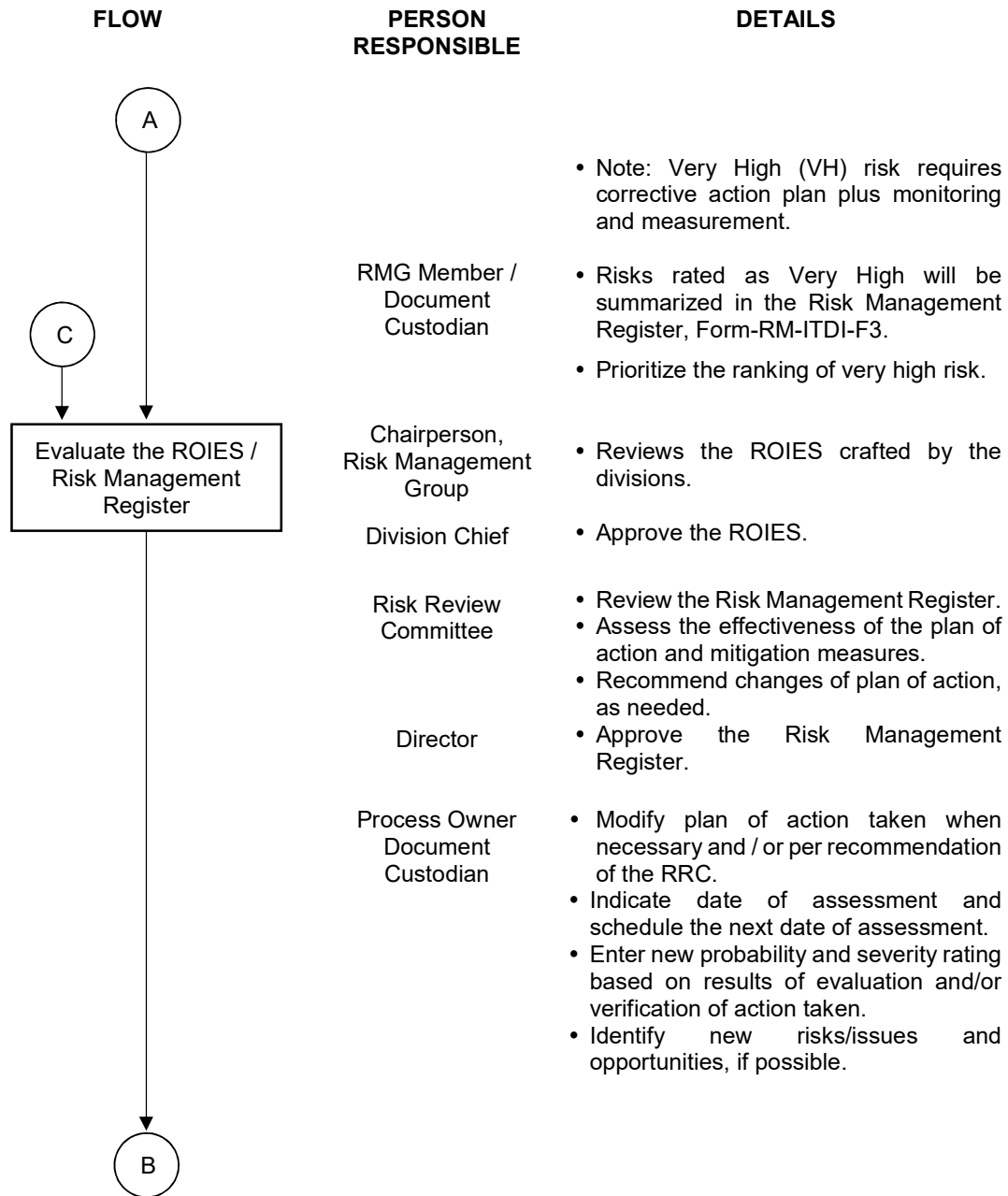
	DEPARTMENT OF SCIENCE AND TECHNOLOGY INDUSTRIAL TECHNOLOGY DEVELOPMENT INSTITUTE	DOCUMENT CODE	PM-ITDI 06-01
	PROCEDURES MANUAL	REVISION NUMBER	0
		PAGE NUMBER	10 of 12
SECTION	RISKS AND OPPRTUNITIES	EFFECTIVITY DATE	30 June 2021
		DOCUMENT TYPE	PAPER / PDF FILE
SUBJECT	RISK MANAGEMENT		



8.0 Procedure:




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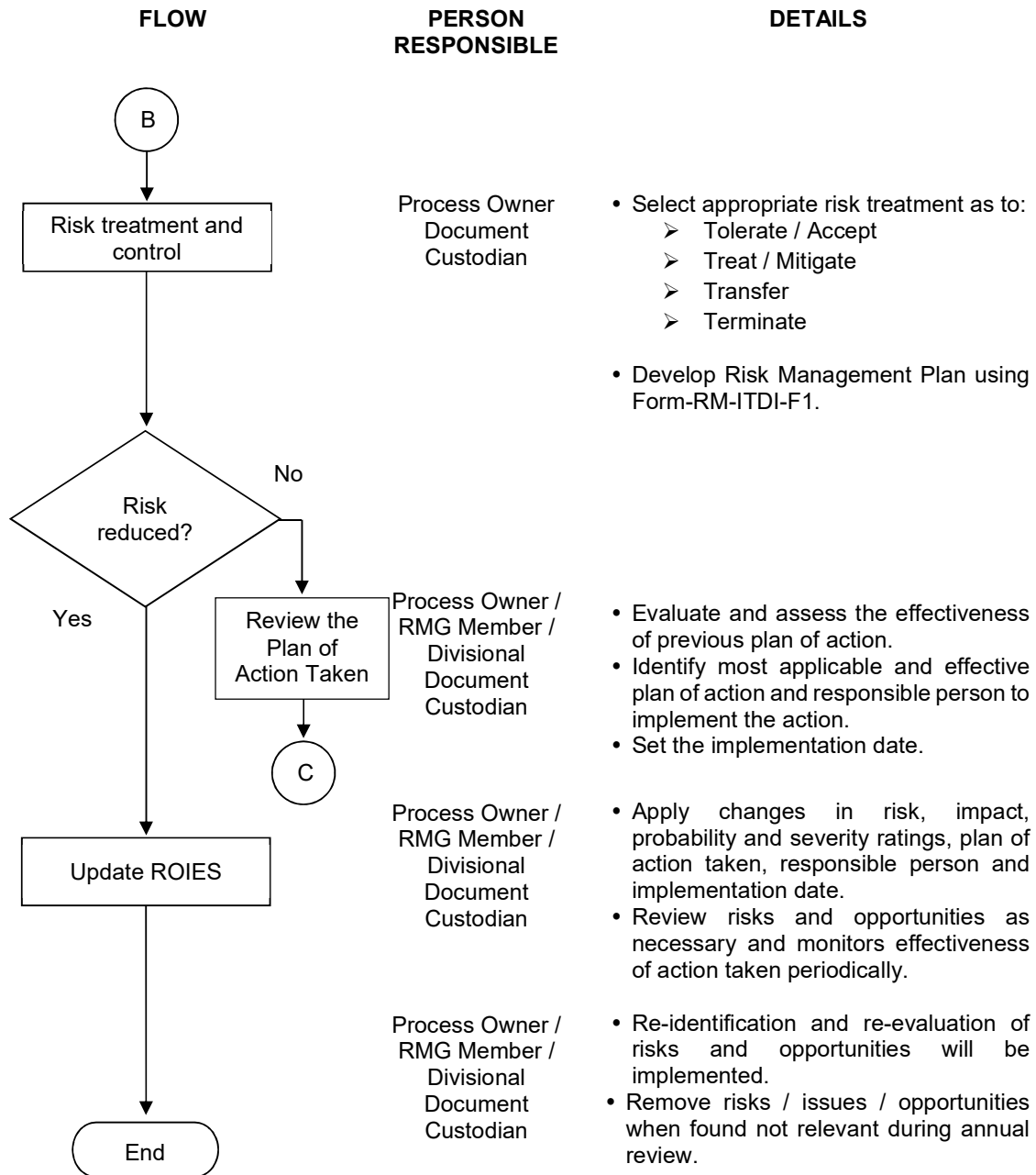
	DEPARTMENT OF SCIENCE AND TECHNOLOGY INDUSTRIAL TECHNOLOGY DEVELOPMENT INSTITUTE	DOCUMENT CODE	PM-ITDI 06-01
	PROCEDURES MANUAL	REVISION NUMBER	0
PAGE NUMBER		11 of 12	
SECTION	RISKS AND OPPRTUNITIES	EFFECTIVITY DATE	30 June 2021
		DOCUMENT TYPE	PAPER / PDF FILE
SUBJECT	RISK MANAGEMENT		





Prepared by:  CHAIRPERSON, RISK MANAGEMENT GROUP	Approved by:  DIRECTOR
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	DEPARTMENT OF SCIENCE AND TECHNOLOGY INDUSTRIAL TECHNOLOGY DEVELOPMENT INSTITUTE	DOCUMENT CODE	PM-ITDI 06-01
	PROCEDURES MANUAL	REVISION NUMBER	0
SECTION	RISKS AND OPPRTUNITIES	PAGE NUMBER	12 of 12
		EFFECTIVITY DATE	30 June 2021
SUBJECT	RISK MANAGEMENT		



Prepared by:  CHAIRPERSON, RISK MANAGEMENT GROUP	Approved by:  DIRECTOR
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**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET
ADMINISTRATIVE DIVISION**

Assessment Rating Guide:
Probability:
3 (High, ≥0.8 to 1.0 occurrence)
2 (Medium, ≥0.4 to < 0.8 occurrence)
1 (Low, (0.1 to < 0.4 occurrence)

Severity:
3 (High, ≥0.8 to 1.0 Major)
2 (Medium, ≥0.4 to < 0.8 Moderate)
1 (Low, (0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

- Corrective Action Plan plus Monitoring and Measurement is required
- Measurement is required
- Monitoring and Measurement is required
- No Action is required

Legend: L = Low (1-3); MH = Medium High (4-6),
VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
June 28, 2022	<i>M. Katherine E. Durand</i> Divisional Document Custodian	<i>RMG Head</i> RMG Head	<i>Division Chief/OIC</i> Division Chief/OIC	Jan. 2, 2023

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement / Expectation	Risk Origin/Interested Parties Internal / External	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open / Closed / Hold)	Opportunities
							P	S	P*S	L/MH/VH							

CASHIER SECTION (CS)																	
RM-OPR-ADM-CS-01	90% of approved DV are processed and transmitted to AGSBw/n 3 working days	All year round	Internal / External	Delay in the processing of DV due to lack of information such as bank details and discrepancy of payee against account name	Lapsed NCA Possible decrease in Agency's Proposed Budget due to the previous Year's Low budget Utilization Rate	In lieu of LDDAP-ADA, check payment will be issued	1	3	3	L							

HUMAN RESOURCE MANAGEMENT SECTION (HRMS)																		
RM-OR-ADM-HRM S-02	At least one (1) L&D is attended by every staff w/n the year	All year round	Internal	Employees are not given opportunity to attend L&D due to: - Limited fund allotment for training within the year; - conduct of coaching and mentoring, and self-learning is not recorded/documented	Gaps on competency is not addressed	-Conduct of institutional Training; -Conduct of Echo Training/Seminar; -Coaching and Mentoring Training; -Use of Coaching Form; Implementation of the Self Learning Form/Tool.	1	2	2	L		HRMS	July 2022			97.78% of the total Employees attended L&D intervention	Charging of trainings to GIA fund	
RM-OR-ADM-HRM S-03	-do-	-do-	Internal	-Employees are not interested due to: -mandatory /optional retirement; -resistance to adapt to new learnings	Gaps on competency is not addressed	-Conduct of Coaching	1	2	2	L								

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RM-OR-ADM-HRM-S-05	100% of IPCR submissions are monitored and reviewed in accordance with SPMS calendar and analyzed to identify developmental interventions.	Semi-annual	Internal	Delay in the conduct of review and evaluation due to late submission of IPCR from the divisions / individual on the prescribed deadline	Compromise the effectiveness of review process	Continuous follow-up on the submission of IPCR	1	2	2	L	Transfer	Division	July 2022					
PROPERTY & PROCUREMENT MANAGEMENT SECTION (PPMS) WITH BIDS & AWARDS COMMITTEE SECRETARIAT (BAC-SECT)																		
RM-OpR-ADM-PPM-S-01	90% of approved POWO are delivered w/n the agreed delivery terms based on Specifications of end-user and in accordance with the provision of RA9184.	Delivery on agreed delivery terms	External	Delay in the delivery of goods & services due to sudden change of specification / brand or model / price escalation / phase-out model, by the external provider	Hamper the implementation of R&D activities Budget utilization is low	Transfer the risk to the end-user Change of project milestone Accept / Tolerate	1	2	2	L								

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RM-CR-ADM-PPM S-01	-do-	Compliance with RA 9184	Internal	End-user is unfamiliar with undertaking procurement processes consistent with the RA 9184 guidelines	Potential COA AOM	Awareness of the implementing rules and regulations of COA and RA 9184 by the end-user	1	3	3	L							
RM-OpR-ADM-PPM S-06	-do-	All year round	External / Internal	<p>Delay in the implementation of procurement activities due to:</p> <ul style="list-style-type: none"> Incomplete / tailor fit specifications of supplies, materials (S&M) & equipment units due to poor planning (ABC) Limited suppliers of special S&M and equipment units Permits & requirements for controlled chemicals /reagents 	Unmet target/s, milestones	<ul style="list-style-type: none"> Strategic planning and project management Discussion with PBAC Regular monitoring of PRs and other documents Market study and consultative meetings with possible suppliers 	1	2	2	L							



RM- OpR- ADM- PPM S-09	90% of newly acquired donation & transferred properties are properly accounted, labeled and recorded w/n 15 days upon inspection	All year round	Internal	Delay in the inspection due to: unavailability of the inspector; mismatched schedule of end-user and inspector; and building facility / laboratory site is not yet ready	Possible warranty lapse Processing of payment on-hold	Request for provision of warranty extension Provision for partial payment for the delivered item but yet commissioned /installed Conduct virtual inspection	1	2	2	L							
RM- OpR- ADM- PPM S-10	100% of unserviceable properties are accounted for and properly disposed of within the scheduled plan in accordance with COA rules and regulations	All year round	Internal	Disposal of unrecorded unserviceable items cannot be conducted due to a lack of documentary requirements	Accumulate unserviceable items in the laboratory/offices Occupy laboratory/office space	Assign storage room for unserviceable items Donate to another government unit / institutions	1	3	3	L							

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RM- OpR- ADM- PPMS -11	All functional areas	All year round	Internal	Pandemic situation	Delay / suspensi on / deferment of activities that highly affect the achieve ment of functiona l objective s	<ul style="list-style-type: none"> • Compliance with IATF guidelines • Implementation of AWA as per CSC guidelines & policies • Determine catch up plan for Change in milestone/s for approval of concerned official • Development & implementation of PSCP 	1	3	3	L							
RM- OpR- ADM- PPMS -11	All functional areas	All year round	Internal	Typhoons, floods, and other disasters occurrence	<ul style="list-style-type: none"> • Safety of human resources and facilities are compromised • Casualties, injuries of manpower; loss and damage of properties 	<ul style="list-style-type: none"> • Regular inspection and maintenance of buildings / facilities including trees, drainages • Compliance to safety protocols and issuance of office/work suspension 	1	3	3	L							



					• Disruption of business operations/services	• Development & implementation of PSCP												
RECORDS MANAGEMENT SECTION (RMS)																		
RM-PR-ADM-RMS-01	90% of records received are properly disseminated w/n the day and shall be maintained and readily available when needed	All year round	Internal	Possible loss of documents due to wrong / incomplete details of the recipient	Important / urgent information will not be received by the recipient	Send an electronic copy of the document to the recipient	1	3	3									

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**RISK AND OPPORTUNITIES IDENTIFICATION
AND EVALUATION SHEET**

Research & Development Group

Assessment Rating Guide:
Probability:
 3 (High, 20.8 to 1.0 occurrence)
 2 (Medium, 20.4 to < 0.8 occurrence)
 1 (Low, 0.1 to < 0.4 occurrence)
Severity:
 3 (High, 20.8 to 1.0 Major)
 2 (Medium, 20.4 to < 0.8 Moderate)
 1 (Low, 0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

 Corrective Action Plan plus Monitoring and Measurement is required
 Monitoring and Measurement is required
 No Action is required
 Legend: L = Low (1-3), MH = Medium High (4-6),
 VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 5, 2022	<i>Marion B. Casanovi</i> Divisional Document Custodian	<i>J. Schwend</i> RMG Head	<i>[Signature]</i> Chief, Division	July 5, 2023

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES				
No.	Process/Activity	Requirement / Expectation	Risk Origin/Interested Parties Internal / External	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open / Closed / Hold)	Opportunities	
							P	S	P*S	L/MH/VH								RISK CONTROL AND MANAGEMENT
														Verification of Action Taken		Addressed Risk / Issue		
RM-R&D /Op R-CED -01	All process	All year round	Internal	Safety of human resources/ facilities are compromised since facilities are situated along the seismic fault	<ul style="list-style-type: none"> Casualties, injuries of manpower, loss and damage of properties Disruption of business operations/ services 	<ul style="list-style-type: none"> Regular building inspection to check on structural integrity Repair/ renovation of buildings, if necessary Transfer of facilities/ equipment units to a much safer place Development/ implementation 	2	3	6	MH	<ul style="list-style-type: none"> Update evacuation and emergency exit plan and divisional committee membership Replenishment of first aid kit Installation/ reactivation of alarm 	Chief/OIC	3Q 2022					
														3Q 2022				
														TBD				

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					of Business Continuity Plan						system						
					<ul style="list-style-type: none"> Regular participation in earthquake drills PPEs and first aid kits 												
RM-R&D /Op R-CED -02	All process	All year round	Internal	Pandemic situation	<ul style="list-style-type: none"> Delay / suspension / deferment of activities that highly affect the achievement of functional objectives Compliance with IATF guidelines Implementation of AWA as per CSC guidelines & policies Determine catch up plan for Change in milestone/s for approval of concerned official Development & implementation of PSCP 	2	3	6	MH	<ul style="list-style-type: none"> Immediate reporting of health conditions within 24 hrs to CED OC in CED Official GC, email. 	Office of the Chief	August 2022					
RM-R&D /Op R-CED -03	All process	All year round	Internal	Typhoons, floods, and other disasters occurrence	<ul style="list-style-type: none"> Safety of human resources and facilities are compromised Casualties, injuries of manpower, loss and damage of Regular inspection and maintenance of buildings / facilities including trees, drainages Compliance to safety protocols and issuance of 	2	3	6	MH	<ul style="list-style-type: none"> Repair of leaks in the facilities 	Chief/OIC	TBD with TAC Infra and TSD-ESS					



					properties • Disruption of business operations / services	office/work suspension.												
RM-R&D /Op R-CED -04	PM-ADM-PPMS 05-01 Purchasing of Goods	All year round	Internal	Delay in the implementation of project activities due to procurement issues: • Incomplete / tailor fit specifications of supplies, materials (S&M) & equipment units due to poor planning (ABC) • Limited suppliers of special S&M and equipment units • Permits & requirements for controlled chemicals /reagents	Unmet target/s, milestone/s	<ul style="list-style-type: none"> • Strategic planning and project management • Discussion with PBAC • Regular monitoring of PRs and other documents • Market study and consultative meetings with possible suppliers 	2	3	8	MH	<ul style="list-style-type: none"> • Additional Divisional Canvasser by amending SO 	Chief/OIC	August 2022					



RM-R&D/ CR- CED- 01	PM-ITDI 05-03 Implementa tion of Regular Approved R&D Projects	All year round	Internal	Delay in the implementati on of activities due to unexpected breakdown of equipment unit/s	<ul style="list-style-type: none"> • Unmet target/s, milestone/s • Disruption of business operation 	<ul style="list-style-type: none"> • Regular preventive maintenance activities • Ensure availability of Supply of spare parts with the right specs • Ensure After-sales service of suppliers 	1	3	3	L	<ul style="list-style-type: none"> • Budget allotment for repair and maintenance or replacement • Source-out equipment unit/s from other divisions • Purchase of new equipment 	Project Leader	Upon occurrence of risk					•
RM-R&D/ CR- CED- 02	PM-ITDI 05-03 Implementa tion of Regular Approved R&D Projects	All year round	Internal	Uncertainty in the accuracy / reliability of result/s of measuring equipment due to delay in calibration	<ul style="list-style-type: none"> • Institutional integrity of released results 	<ul style="list-style-type: none"> • Outsource calibration services • Ensure availability of funds for a scheduled calibration • Formation of calibration monitoring team per division • Verify / recalculate results 	1	3	3	L	<ul style="list-style-type: none"> • Formation of Technical Working Team to be trained and certified by NML for internal calibration • Budget allotment for repair and maintenance or replacement • Source-out equipment 	Project Leader	Upon occurrence of risk					•

											unit/s from other divisions							
RM-R&D / OpR - CED -05	All process	All year round	Internal	Unavailability of manpower to carry out R&D activities and technical services due to unexpected leave of absence, study leave, resignation, and other related issues	<ul style="list-style-type: none"> • Unmet target/s, milestones • Disruption of business operation and services 	<ul style="list-style-type: none"> • Clear delineation of duties and responsibilities of divisional staff • Establish succession plan and knowledge management system within the division • Documented information such as Procedures Manual and Work Instructions • Capability/competency building such as training, seminar and other learning and development strategies 	1	3	3			Project Leader						





RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

ENVIRONMENT AND BIOTECHNOLOGY DIVISION

Assessment Rating Guide:

Probability:
3 (High, ≥ 0.8 to 1.0 occurrence)
2 (Medium, ≥ 0.4 to < 0.8 occurrence)
1 (Low, 0.1 to < 0.4 occurrence)

Severity:
3 (High, ≥ 0.8 to 1.0 Major)
2 (Medium, ≥ 0.4 to < 0.8 Moderate)
1 (Low, 0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

- VH Corrective Action Plan plus Monitoring and Measurement is required
- MH Monitoring and Measurement is required
- L No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6), VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
August 3, 2022	<i>Maria Theresa C. Artuz</i> Divisional Document Custodian	<i>Nelia Elisa C. Florendo</i> RMG Head	<i>Reynaldo L. Esguerra</i> Division Chief	August 2, 2023

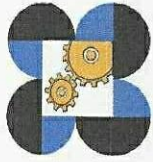
RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open / Closed / Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH							
RM-OpR-EBD-01	All processes	All year round	External	Safety of human resources/ facilities are compromised since facilities are situated along the seismic fault	Casualties, injuries of manpower, loss and damage of properties Disruption of business operations/ services	Regular building inspection to check on structural integrity Repair/ renovation of buildings, if necessary Transfer of facilities/ equipment units to a much safer place Development/ implementation of Business Continuity Plan	1	3	3	L	Issuance of memo on buddy system and wearing of appropriate PPE when going to old EBD buildings Ensure emergency exits at old EBD buildings are cleared	OC Building Coordinator	EO Aug 2022 EO Sep 2022	Staff and facilities relocation	Aug 2018 – Dec 2021	Physical presence of staff and atomic absorption spectrophotometer at EBD building (Closed)	Reduced utilities consumption Assurance of safety of staff and facilities
RM-OpR-EBD-02	All processes	All year round	External	Health of staff may be compromised due to contracting CoVID-19 virus	Delay/ suspension / deferment of activities that highly affect the achievement of functional objectives	Compliance with IATF guidelines Implementation of AWA as per CSC guidelines & policies Determine catch up plan for Change in Milestone/s for approval of concerned official	1	3	3	L	Complete booster dose immunization of staff	OC (in coordination with HR)	EO Dec 2022	Complete primary series of immunization of all qualified staff	Dec 2021	Availability of vaccination card (Closed)	Reduced risk of contracting CoVID-19 virus

						Development & implementation of PSCP											
RM-OpR-EBD-03	All processes	All year round	External	Typhoons, floods, and other disasters occurrence	Safety of human resources and facilities are compromised Illness or injuries to personnel; damage to properties Disruption of business operations / services	Regular inspection and maintenance of buildings / facilities including trees, drainages Compliance to safety protocols and issuance of office/work suspension.	1	2	2	L	De-clogging of canal at pilot plant	Building Coordinator	EO Dec 2022	Clearing of building downspouts Trimming of tree branches.	Every last Sat of the month Quarterly	Regularly implemented (Open) Regularly implemented (Open)	Reduced risk of flooding; extended lifespan of facilities; less occurrence of occupational hazard
RM-OpR-EBD-04	All processes	All year round	Internal	Inability to sustain adequate knowledge management (KM)	Difficulty in attaining targeted activities	Develop proper documentation protocols	1	3	3	L	Update succession plan	OC/Section Heads	Dec 2022	Updating of WIs; staff development	Dec 2021	Work Instructions; Training Certificates (Open)	Undisrupted PPAs
RM-OpR-EBD-05	All processes	All year round	Internal	Delay in the implementation of project activities due to acquisition issues	Unmet target/s, milestone/s	Strategic planning and project management Discussion with PBAC Regular monitoring of PRs and other documents Consultative meetings with possible suppliers	1	3	3	L	Provide COS staff from GIA projects to supplement procurement process	GIA PLs	EO Aug 2022	Direct coordination with suppliers	Mar 2022	Approved POs (Open)	Expedite acquisition of equipment and supplies
RM-OpR-EBD-06	All processes	All year round	Internal	Delay in the implementation of activities due to unexpected breakdown of equipment unit/s	Unmet target/s, milestone/s Disruption of business operation	Regular preventive maintenance activities Ensure after-sales service of suppliers	1	2	2	L	Ensure availability of supply of spare parts and consumables with the appropriate specifications	All staff	EO Dec 2022	N/A	N/A	N/A	Reduced downtime of equipment, extended lifespan and disruption of operations
RM-OpR-EBD-07	All processes	All year round	Internal	Uncertainty in the accuracy / reliability of result/s of measuring equipment due to delay in calibration	Institutional integrity of released results	Outsource calibration services Ensure availability of funds for scheduled calibration	1	1	1	L	None	N/A	N/A	Regular calibration laboratory equipment	Dependent of laboratory equipment	Presence of calibration certificates (open)	More reliable results of parameters measured

					Formation of calibration monitoring team per division												
					Formation of Technical Working Team to be trained and certified by NML for internal calibration												
RM-OpR-EBD-08	OPB 1.4.1	Meet target of number of peer-reviewed publications	Internal	Not meeting OPB targets on publication (OPB 1.4.1)	ITDI will not meet KRA, performance indicators and targets	Conduct of writeshop.	2	1	2	L	Designation of responsible staff to assist in preparation of papers	OC	EO Aug 2022	Conducted writeshop	Dec 2021	Documentation of writeshop (Open)	Potential increase in number of publications
RM-OpR-EBD-09	TEM operation	TEM in place and operational	Internal	Delay in infrastructure projects	Equipment not in place	On-going renovation of TEM room	1	3	3	L	Oversee renovation progress	OC	July 2022	Clearing of designated rooms	Jun 2022	Pictures of cleared items (Open)	Operationalization of TEM
RM-OpR-EBD-10	Biosafety and Biosecurity Processes	All year round	Internal	Health and safety of staff may be compromised due to infection with biological agents Unauthorized release of biological agents	Illness or injuries to personnel Compromise of intellectual properties; public safety; erosion of public image	PPEs, good laboratory practices and engineering controls of laboratories	1	3	3	L	Creation of institutional biosafety committee Preparation of biosafety and biosecurity protocols/manual	OC VIP Program	Dec 2022 Dec 2023	N/A	N/A	N/A	Improved biosafety and biosecurity operations and practices

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**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET**

FINANCE AND MANAGEMENT DIVISION

Assessment Rating Guide:
Probability:
3 (High, ≥ 0.8 to 1.0 occurrence)
2 (Medium, ≥ 0.4 to < 0.8 occurrence)
1 (Low, 0.1 to < 0.4 occurrence)

Severity:
3 (High, ≥ 0.8 to 1.0 Major)
2 (Medium, ≥ 0.4 to < 0.8 Moderate)
1 (Low, 0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

- VH Corrective Action Plan plus Monitoring and Measurement is required
- MH Monitoring and Measurement is required
- L No Action is required

Legend: L = Low (1-3), MH = Medium High (4-5),
VH = Very High (7-9)

Date of Assessment:

Prepared/Assessed by:

Reviewed by:

Approved by:

Next Date of Assessment:

April 1, 2022

Rose Therese A. Biglete
ROSE THERESA A. BIGLETE
Divisional Document Custodian

Nelia Elisa C. Florendo
NELIA ELISA C. FLORENDO
RMG Head

Dr. Janet F. Quizon
DR. JANET F. QUIZON
Division Chief

April 3, 2023

RISK / ISSUE IDENTIFICATION AND EVALUATION

RISK ASSESSMENT

RISK TREATMENT

RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES

No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability		Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
							P	S									
FMD-01	Processing of financial transactions	All year round	Internal / External	Incomplete supporting documents	3 days delay of processing	Reiteration of ITDI memorandum on COA Circular re: List of supporting documents	1	1	1	L	Review completeness and correctness of supporting documents and signatures	End-user/PPMS		Return of DVs/POs with lacking documents; Reissue memo of documentary requirements			Facilitate processing on time
FMD-02	Allotment for the budgetary requirement of ITDI	All year round	Internal	Urgent or sudden funding requirements	Delay of processing time	Immediate approval of request by the Head of Agency	1	1	1	L	Possible source of funding	Budget Section		Improve utilization rate			90%-100% fund utilization

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August 2022

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External						P	S							P*S
FMD-03	Book up Statement of Account (SOA)	All year round	Internal / External	Unsettled account; Delinquent account	Accumulation of Receivables Account in the book of accounts; No action on demand letters	Issue demand letter (1 st , 2 nd and Final) to delinquent customers for outstanding accounts beyond 45 days; Regular monitoring; Suspension from further availing of services until settlement of overdue accounts; Request for Write-off for bad accounts	1	1	1	L	Strictly follow the set of guidelines of non-issuance of result until services rendered is fully paid; Intensify the monitoring of receivable accounts	Accounting Section ADMATEL		No credit shall be extended until the full settlement of credit	After Final notice		Final collection of receivables; no credit policy





RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

Assessment Rating Guide:
Probability:
 3 (High, ≥0.8 to 1.0 occurrence)
 2 (Medium, ≥0.4 to < 0.8 occurrence)
 1 (Low, (0.1 to < 0.4 occurrence))
Severity:
 3 (High, ≥0.8 to 1.0 Major)
 2 (Medium, ≥0.4 to < 0.8 Moderate)
 1 (Low, (0.1 to < 0.4 Minor))

Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

MH Monitoring and Measurement is required

L No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6), VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 4, 2022	<i>[Signature]</i> Divisional Document Custodian	<i>[Signature]</i> RMG Head	<i>[Signature]</i> Division Chief	January 2, 2023

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH							Addressed Risk / Issue
RM-OpR-FPD-01	Provision of Technical Services	Process cycle time – All year round	Internal	Unexpected equipment breakdown during the implementation	Below Very Satisfactory rating from the client	Planning, implementation, and monitoring of equipment preventive maintenance and / or calibration. List of suppliers/external providers for equipment and the critical parts of the equipment	1	3	3	L							

RM-OpR- FPD-02	Provision of Technical Services	All year round	Internal/External	Changes of quarantine status in NCR and divisional lockdown due to COVID infection	Suspension/ deferment of technical services	Communication with the clients 2 to 3 days prior to agreed schedule	1	1	1	L					Since 2020	Closed	Risk/ Issue was addressed Already adapted to new normal scheme
RM-OR- FPD-01	Provision of Technical Services	Process cycle time – All year round	Internal	Delays completion of technical services due to sick leave, intervening tasks, and resignation and or transfer to another division of the expert (s)	Below Very Satisfactory rating from the client	Creation of FPD teams to handle specific technical activities Knowledge transfer for concerned team Attendance to trainings and seminars	1	1	1	L					Since 2019	Closed	Risk/ Issue was addressed The risk did not occur for the past 5 years
RM-R&D- FPD-01	Implementation of Approved Regular R&D Projects	Process cycle time – All year round	Internal/External	Unexpected equipment breakdown during the implementation	Below 90% completion of deliverables	Planning, implementation, and monitoring of equipment preventive maintenance and / or calibration. Outsourcing of similar equipment used in the project Planning, implementation, and monitoring of equipment preventive maintenance and / or calibration. Outsourcing of similar	2	3	6	MH	Come-up with the list of the after-sale services for different equipment purchased Ensure availability of funds for repair	Project staff	July 2022 July 2022				



						equipment used in the project For the GIA acquired equipment, prepare and submit request including other supporting documents for the transfer to ITDI											
RM-R&D-FPD-02	Implementation of Approved Regular R&D Projects	Process cycle time – All year round	Internal	Delays completion of projects due to sick leave, intervening tasks, and resignation and or transfer to another division of the expert (s)	Below 90% completion of deliverables	Knowledge transfer for concerned project staff	1	2	2	L				Since 2018	Closed	Risk/ Issue was addressed The risk did not occur for the past 5 years	
RM-R&D-FPD-03	Implementation of Approved Regular R&D Projects	Monthly	Internal/External	Delays on project implementation due to slow replenishment of cash advance	Below 90% completion of deliverables	Designation of new petty cash custodian	2	1	2	L							
RM-R&D-FPD-04	Implementation of Approved Regular R&D Projects	2 months after end of project duration	Internal	Delays/Non-submittal of terminal report due to slow pacing or difficulty in the preparation of the report	Failure to submit the report within the designated time frame	Issuance of NCAR	1	3	3	L							
RM-R&D-FPD-05	Implementation of Approved Regular R&D Projects	All year round	Internal/External	Delays on project implementation due to people and raw	Extension of project duration and completion	Submit request for change of milestone	1	3	3	L	Bulk order of RM and use of delivery/courier services.	Project Team	January 2022	Ordered RM in bulk and use of delivery/ courier services.	Since January 2022	Hold	The risk and current control are still under monitoring



				material mobility and divisional lockdown caused by COVID infection		/deliverables and or project completion date Coordinate with the DOST regional offices and RFICs and other government agencies					Conduct alternative activities related to the project			Conducted alternative activities related to the project			
RM-PR-FPD-01	All Processes	All year round	Internal	Exposure to chemical hazards	Frequent absence to duty	Compliance to Good Laboratory Practices. Observe regular segregation and/or disposal of chemical wastes Updating of Chemical Inventory	1	3	3	L							
RM-PR-FPD-02	All Processes	All year round	Internal/External	Pandemic concerns and calamities (e.g. fire, typhoon, earthquake)	Frequent absence to duty	Adopt the IATF Guidelines and protocols for the management of infectious diseases Daily health monitoring Form Disaster Management Committee -Participate in national drills Covid-19 vaccination	2	3	6	MH	Covid-19 booster vaccination	All Staff	January 2022	Booster vaccination of 100% of FPD staff	Since January 2022	Hold	The risk and current control are still under monitoring





**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET**

MATERIALS SCIENCE DIVISION

Assessment Rating Guide:
 Probability:
 3 (High, ≥ 0.8 to 1.0 occurrence)
 2 (Medium, ≥ 0.4 to < 0.8 occurrence)
 1 (Low, 0.1 to < 0.4 occurrence)
 Severity:
 3 (High, ≥ 0.8 to 1.0 Major)
 2 (Medium, ≥ 0.4 to < 0.8 Moderate)
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Risk Acceptability Rating Indicators:

VH	Corrective Action Plan plus Monitoring and Measurement is required
MH	Monitoring and Measurement is required
L	No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6), VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 6, 2022				July 6, 2023
	Divisional Document Custodian	RMG Head	Division Chief	

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT			RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES				
No	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	P	S	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open / Closed / Hold)	Opportunities
			Internal / External						P*S	L/MH/VH							
RM - R&D-MSD-01	Implementation of approved R&D (GAA & GIA) projects	All year round	Internal: PMISD, Procurement, BAC	If the events identified below will happen, then there is a risk that targeted milestones will not be delivered and so project objective(s) will not be met	Project objective(s) not met												

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			<input type="checkbox"/> failed bidding of equipment, supplies and materials,	<ul style="list-style-type: none"> • Conduct of canvass and procure ahead of time • Inventory of materials and supplies available • Create a team to monitor status of procurement and delivery 	1	3	3	L									
			<input type="checkbox"/> unexpected equipment breakdown	<ul style="list-style-type: none"> • Regular calibration and preventive maintenance of equipment • Preparation Purchase Request of spare parts (with right specifications, warranty inclusions of calibration and preventive maintenance, timeline of delivery) • Budget allotment for repair and maintenance 													
		Internal: MSD Section Heads and Chief	<input type="checkbox"/> manpower availability due to disaster and pandemic (COVID-19)	<ul style="list-style-type: none"> • Implementation of alternative work arrangement (AWA) • Follow up succession plan/conduct coaching and mentoring (in-house training) 	1	3	3	L									

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		All year round	Internal: Chemical Inventory Team	<input type="checkbox"/> No indicated expiration date of reagents on chemical inventory	Possible use of expired reagents that could lead to unreliable results	• Follow harmonized ITDI chemical inventory format and monthly updating of inventory	1	3	3	L						
		All year round	Internal: PMISD	<input type="checkbox"/> If terminal report is not submitted within agreed time frame, then there is a risk that one of the functional objectives will not be met resulting in low rating in the overall performance of the division.	Low rating in the overall performance of the division	• Strict monitoring of activities according to the work plan, posting on bulletin board and sending of email for the reminder of submission of terminal report.	1	3	3	L						
RM - Op r-MS D-02	Provision of technical services	All year round	External: Academe, Industry, LGU Private Individuals Internal: R&D Divisions	If the event of unexpected equipment malfunction or breakdown, there is a risk that targeted due date will not be met and delivery of results will be delayed.	Delay in the delivery of results	• Regular calibration and Preventive Maintenance of equipment Change of schedule / due date (communicate with client thru email, phone)	1	3	3	L						

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RM - R&D-MSD-03	Delivery of Major Final Outcome: <ul style="list-style-type: none"> • Application for IP Protection • Papers published in peer reviewed journals or conference /proceedings presented in local/international conference /fora 	All year round	Internal: MSD Section Heads and Chief, Project Doers TSD	In the event of limited budget, the risk or failure to file for IP protection and papers published as target milestone will result to low rating of the overall divisional performance	Low rating of the overall divisional performance	• Submission of patent draft to TSD and technical paper to Publication Committee	1	1	1	L							
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Form: RM-ITDI-F2
Issue: June 2021

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August 2022





RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

PMISD

Assessment Rating Guide:

Probability:
 3 (High, ≥ 0.8 to 1.0 occurrence)
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Severity:
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Risk Acceptability Rating Indicators:

- VH** Corrective Action Plan plus Monitoring and Measurement is required
- MH** Monitoring and Measurement is required
- L** No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6),
 VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
June 17, 2022	<i>martha yfira</i> Divisional RMG	<i>gabriel</i> RMG Head	<i>[Signature]</i> Division Chief	January 9, 2023

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT			RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
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PLANNING AND MONITORING SECTION

RM - OPR - 01- PMISD - PMS	Preparation of Institute's programs and projects aligned with the national and department priorities and needs	All year round	Internal and External	Shifts in priorities, directions, and strategies due to change in leadership and/or organizational structure	Will not harm the operations	Reprioritization/realignment of existing PAPs and/or call for additional project proposals aligned in the new directives	1	1	1	L							
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			Internal / External				P	S	P*S	L/MH/VH							RISK CONTROL AND MANAGEMENT
RM - OPR - 02- PMISD - PMS	Preparation of Institute's plans and budget proposals within the prescribed date	As prescribed by DBM	Internal	Under estimation of targets set due to the delay in submissions from divisions of proposed PAPs with corresponding budgetary requirements	Low appropriations released to the Institute	Implementation of control mechanisms: -Memo re: submission deadline -Constant follow ups -DPCR rating -Estimation of targets based on the previous years' accomplishments	1	1	1	L							
			External	Uncertainty in the approved budget by DBM due to unexpected events/ national emergencies	Decreased endorsed budget or unfunded expense items due to lack of fiscal space	Budget apportioned among the divisions for the conduct of PAPs	1	2	2	L							

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			Internal / External				P	S	P*S	L/MH/VH							
RM - OPR -03- PMI SD - PMS	Monitoring of Institute's programs, activities and projects (PAPs)	Quarterly	Internal	1. Mismatch of schedules between monitors and PLs/ project staff	Delay of conduct of monitoring	Reschedule monitoring before the evaluation	2	1	2	L							
				2. Disruption to normal operations due to natural/ man-made disasters and health-related	Delay of conduct of monitoring	Reschedule monitoring and evaluation	1	2	2	L							
RM - OPR -04- PMI SD - PMS	Evaluation of Institute's programs, activities and projects (PAPs)	Quarterly	Internal	1. Compromised and ineffective assessment of project accomplishments /progress due to the absence of subject matter expert of TRC during the evaluation	Technical issues and concerns in project implementation not resolved	Recorded videos of the evaluation are forwarded to TRC. The comments and/or inquiries about the projects are sent through e-mail three (3) days upon notification	1	2	2	L							
				2. Disruption to normal operations due to natural/man-made disasters and health-related emergencies	Delay in the conduct of evaluation	Reschedule evaluation	1	2	2	L							

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			Internal / External				P	S	P*S	L/MH/VH							
RM - OPR -05- PMI SD - PMS	Review of existing and/ or formulation of new organizational policies	As need arises	Internal	Limited information/ data to be used as basis for policy review/ reformulation/ development	Compromised effectiveness of policy development	Cite minutes of EXECOM/ MANCOM/ Committee meetings and emphasize the significance of the current issues to justify the amendment of existing policies or development of new policies	1	3	3	L							



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			Internal / External				P	S	P*S	L/MH/VH							
MANAGEMENT INFORMATION SYSTEMS SECTION																	
RM - OPR -01- PMI SD - MIS	Implementation of approved and Budgeted ISSP	Implementation Period (2020-2022)	Internal / External	<p>1. Sudden resignation of IT Contract of Service Staff</p> <p>2. Approved ISSP not funded by DBM</p> <p>3. Major change of end-user/s requirements (e.g. addition/reduction of processes, user privileges and required pages and fields)</p>	<p>Delayed implementation of plan</p> <p>Set back on ICT capabilities progress</p> <p>Set back on ICT capabilities progress</p>	<p>Use of same system development platform for easy re-assignment of priority workload</p> <p>Request for target revision from office of the Director</p> <p>Use of Rapid Application Design in IS development</p>	1	3	3	L							



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			Internal / External				P	S	P*S	L/MH/VH							RISK CONTROL AND MANAGEMENT
RM - OPR -02- PMISD - MIS	Provision of IT Infrastruct ure and Data	As need arises	Internal	Cyber Security Risk that would compromise data integrity	Interruption on organiza- tion's activities that rely on ICT infrastruc- ture	Issue Policy guidelines for ICT Security Use of Enterprise Multi-layer Data and Network Security Infrastructure	1	3	3	L							





**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET
PACKAGING TECHNOLOGY DIVISION**

Assessment Rating Guide:
Probability:
3 (High, ≥0.8 to 1.0 occurrence)
2 (Medium, ≥0.4 to < 0.8 occurrence)
1 (Low, 0.1 to < 0.4 occurrence)
Severity:
3 (High, ≥0.8 to 1.0 Major)
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Risk Acceptability Rating Indicators:

- VH Corrective Action Plan plus Monitoring and Measurement is required
- M Monitoring and Measurement is required
- L No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6), VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
August 15, 2022	<i>Arnold V. Linn</i> Divisional Document Custodian	<i>James</i> RMG Head	<i>Arnold V. Linn</i> DIC, Division Chief	November 2022

RISK / ISSUE IDENTIFICATION AND EVALUATION						RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES				
No.	Process Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH							

RM-RD-R & D-PTD-01	Implementation of Approved R & D Projects (GAA & GIA assisted) Provision of technical services	All year round	DOST Project staff External/Internal	Uncertainties in the outcome of research/test results Unforeseen events in the conduct of research	Unmet targets, milestone/s	Conduct extensive literature research Consult a knowledge provider Change of milestone Catch-up plan	1	2	2	L	Mitigate	Project leader Project researcher	Immediately	Submitted change of milestones to PMISD Consulted a knowledge provider and revised experimental design based on the recommendations of the consultant				
RM-RD-OpR-PTD-01	-do-	All year round	Project staff BAC Procurement section	Delay in the purchase, delivery of equipment, materials & supplies cue to procurement issues	Unmet targets, milestone/s	Strategic planning and project management	1	1	1	L								

			Internal/ External			Discussion/cn sultation with BAC											
						Regular monitoring of PRs and other documents											
						Search for possible suppliers											
RM- RD- OpR- PTD- 02	-do-	All year round	Project staff Supplier of equipmen t Internal/ external	Delay in operation and conduct of experlment or tests due to unexpected equipment breakdown	Unmet targets, milestone/s	Regular Preventive maintenance, and calibration Activities Source out equipment from other division or testing lab Outsource test from other laboratories Ensure availability of supply of spare parts with the right specifications Ensure after- sales service of suppliers Change of proj. milestone	1	2	2	L	Consult equipment suppliar re problem with the equipment/po ssible cause of malfunctionin g Prepare pre- inspection report, PR for immediate repair of the unit	Tech. staff assigned/ end-user	Immediately				Purchase of new equipment Budget allotment for repair and maintenance or replacement Equipment upgrade

RM-RD-OpR-PTD-03	-do-	All year round	Procurement section Certifying bodies Project researcher External/Internal	Difficulty in procurement of chemicals/reagents and/or standards needed for analyses due to certification requirements from PDEA and PNP	Unmet targets/milestone Delay in the conduct of analysis of product samples	Regular follow-up from Procurement section regarding certificate from PDEA and PNP	1	1	1	L	Purchase of sufficient supply of chemical solution	Assigned researcher	Immediate	Acquired copy of certificate from PNP Purchase allowed/permitt ed amount of chemical reagents	November 2021	Closed	
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RM-RD-OpR-PTD-04	-do-	All year round	External	Delay in the conduct of field trials due to weather disturbances/natural disasters/climate change	Delay in project implementation Unmet targets and milestones	Submit change of milestone and revised workplan to PMISD and monitoring council	1	1	1	L	Look for other sources of RM	Project leader/staff	Immediately	Submitted change of milestones to monitoring division or council Catch-up plan			
RM-RD-OpR-PTD-05	-do-	All year round	External/Internal	Unavailability of manpower to carry-out R & D activities and technical services due to unexpected leave of absence due to covid, study leave, resignation and other related issues i.e. changing IATF quarantine protocols	Unmet targets and milestones	Compliance to IATF rules regarding work arrangements Charge of milestone Catch-up plan	1	2	2	L	Request for project extension	ITDI Execom Project leader Project staff	Immediately	Submit to project monitor revised milestone and workplan Catch-up plan	November 2021	closed	

RM- RD- OpR - PTD -06	-do-	Submission of terminal report within two months after project completion	External/ internal	Non-submission of terminal report within the approved timeframe due to issues like incomplete analysis of data, delay in test results, etc.	Unmet Functional Objective	Submission of draft terminal report Request for extension on submission of final terminal report	1	2	2	L		Project leader Project staff	Immediately	Submission of draft terminal report Request on submission of terminal report Fast track writing the terminal report	August 2022		
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Risk Acceptability Rating Indicators:

CA Corrective Action Plan plus Monitoring and Measurement is required

M Monitoring and Measurement is required

L No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 4, 2022	<i>Egaiton</i> Divisional Document Custodian	RMG Head	<i>Kathleen</i> Division Chief	Jan 3, 2023

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
									P*S	L/MH/VH							
OPR-RM-TSD-ESS-04	FC#7: Engineering support to technology transfer, R&D, technical services, maintenance and repair of physical facilities/buildings.	Efficient delivery of services in support of techno-transfer, R&D, and technical services within the prescribed time with a VS rating.	Internal/ External	Unavailability of training requirements (raw materials and supplies) despite close coordination with the requesting party.	Compromised efficiency in the conduct of training due to time and material constraint.	Stricter monitoring/ checking of availability of required materials prior to deployment of staff.	1	1	1	L	Transfer of risk to the client. Client shall provide a waiver pertaining to lack of training requirements that will compromise effectiveness of training.				Open (On-going)		Online meeting with the requesting party for inspection of equipment and needed materials to ensure readiness and availability, e.g. for bioreactor, dual drum composter.
		Delivery of support services in relation to repair and maintenance of building following the approved schedule and building maintenance protocol.	Internal	Lack of manpower capability to perform the appropriate action. Unavailability of necessary resources (supplies/	Delays in the delivery of TSD services thus, hamper the implementation of maintenance activities.	Resort to outsourcing of possible suppliers with needed funds. - Infra - SDO	1	1	1	L	Transfer For outsourcing of services not within the capability of ESS. Coordination with Building Coordinators.				Open (On-going)		

Document Code: RM-ITDI-F2
 Issue Date: June 2021

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 August 2022



				materials, equipment, etc.) to perform the appropriate action.															
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RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

Assessment Rating Guide:
Probability:
 3 (High, ≥ 0.8 to 1.0 occurrence)
 2 (Medium, ≥ 0.4 to < 0.8 occurrence)
 1 (Low, 0.1 to < 0.4 occurrence)
Severity:
 3 (High, ≥ 0.8 to 1.0 Major)
 2 (Medium, ≥ 0.4 to < 0.8 Moderate)
 1 (Low, 0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

M Monitoring and Measurement is required

L No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
July 4, 2022	<i>Agatha</i> Divisional Document Custodian	RMG Head	<i>Infused</i> Division Chief	Jan 3, 2023

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/Hold)	Opportunities
							P	S	P*S	L/MH/VH	RISK CONTROL AND MANAGEMENT			Verification of Action Taken		Addressed Risk / Issue	
OPR-RM-TSD-IDS-06	Availability of resources for easy retrieval of information	Enhancing and sustaining the ITDI in-house collection and knowledge products	Internal and external	Drawbacks on storing and safekeeping of in-house collections that resulted to decentralized library holdings due to the closure of the physical library.	Decentralized library holdings can no longer provide quality library service to external and internal customers in terms of quick access to needed data/information for research works, and failure to protect the ITDI in-house collection and knowledge products	Digitization of library holdings of ITDI in-house collections Referral to STII Library Currently working on KM project that aims to revitalize then memorabilia and former library as a platform to retain and sustain all knowledge holdings.	2	2	4	MH	Mitigate On-going activities:				Open		Rehabilitation of former memorabilia/library





**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET**

ADMINISTRATIVE DIVISION

Assessment Rating Guide:
 Probability:
 3 (High, ≥0.8 to 1.0 occurrence)
 2 (Medium, ≥0.4 to < 0.8 occurrence)
 1 (Low, (0.1 to < 0.4 occurrence))
 Severity:
 3 (High, ≥0.8 to 1.0 Major)
 2 (Medium, ≥0.4 to < 0.8 Moderate)
 1 (Low, (0.1 to < 0.4 Minor))

Risk Acceptability Rating Indicators:

- VH Corrective Action Plan plus Monitoring and Measurement is required
- MH Monitoring and Measurement is required
- L No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6), VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
Jan. 3, 2020	 Divisional Document Custodian	 RMG Head	 Division Chief <i>SIC - Rom</i>	Jan. 4, 2021

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No	Process/Activity	Requirement / Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open / Closed / Hold)	Opportunities
							P	S	P*S	L/MH/VH							

CASHIER SECTION (CS)																	
1	Acceptance of Payment	All year round	Internal	Incomplete details in TSR: no TSR reference number; no cost/amount to be paid; no signature of analyst/validator	Long waiting period	Coordinate with concerned division	2	3	6	MH	Check completeness of details	Analyst / Validator	Always				
2	Acceptance of Payment thru Check	All year round	External	Post dated; Lack of signature; Discrepancy in words and figure; Incorrect name of payee; With alteration	Discrepancy in the list of deposited collections and actual deposit	Thorough verification of entries in Cheque	1	3	3	L							

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No	Process/ Activity	Requirement / Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External						P*S	L/MH/VH							
HUMAN RESOURCE MANAGEMENT SECTION (HRMS)																	
1	Hiring of personnel	All year round	Internal / External	Announcement not widely disseminated	Insufficient applicants	Posting of vacant position in other bulletins such as school campus, LGU offices, and other government institutions	2	3	6	MH	Posting of vacant position in social media, Jobstreet, and print ads	HRMS	As needed				
2	-do-	-do-	Internal	Tailored fit qualification and job description of the division	Delayed in filling up of the vacant position	Determine Job Description / specification based on the CSC rules	1	2	2	L							
3	Selection process	All year round	Internal	Slow process of selecting qualified applicants	Delayed in filling up of the vacant position	Strictly follow the CSC prescribed period on publication of vacant positions	1	2	2	L							
4	-do-	-do-	Internal	Difference in opinion between the requisitioner and the appointing authority	Delayed in preparation of appointment	Re-evaluation	1	2	2	L							

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITES			
No	Process/ Activity	Requirement / Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External						P*S	L/MH/VH							
HUMAN RESOURCE MANAGEMENT SECTION (HRMS)																	
5	Hiring of personnel	All year round	Internal / External	Filing of protest	Prolonged selection of applicant	Thorough evaluation by DSB / SPB	1	2	2	L							
6	Hiring of personnel	All year round	External	Fraudulent eligibility	Disqualification of the applicant	Require submission of authenticated copy of the eligibility	1	3	3	L							
7	Staff development	All year round	Internal	Allotment to attend seminar / training / workshop / conference is limited	Inability of staff to attend seminar / training / workshop / conference	Source out available relevant seminar / training / workshop / conference thru internet, newspaper, brochures, pamphlets, etc.	3	1	3	L							
8	-do-	-do-	Internal / External	Invitation not widely disseminated	Lose of chance to attend relevant seminar	Strictly monitor the recipient of the invitation; follow up to the concerned division	1	2	2	L							

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
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			Internal / External						P*S	L/MH/VH							
HUMAN RESOURCE MANAGEMENT SECTION (HRMS)																	
9	-do-	-do-	-do	Echo seminar is not conducted within the prescribed period	Delay in transfer of knowledge	Monitor the completed seminar; notify participant to conduct echo seminar	3	1	3	L							
10	Staff development	All year round	Internal	Unfinished / incomplete degree course of the scholar	Loss of opportunity to other employee	Signed contract	2	3	6	MH	Request for pledge of commitment from grantee	HRMS Head	As needed				
11	-do-	-do-	Internal	Scholar leaves the institute after rendering service obligation	Loss of opportunity for knowledge transfer	Screen thoroughly the prospective scholar	1	2	2	L							
PROPERTY & PROCUREMENT MANAGEMENT SECTION (PPMS) WITH BIDS & AWARDS COMMITTEE SECRETARIAT (BAC-SECT)																	
1	Conduct of Public Bidding	All year round	Internal	Lack of BAC quorum	Prolonged procurement process	Issuance of notice of procurement activity	1	3	3	L							
2	-do-	-do-	-do-	Incomplete technical specifications	Requested items not awarded on prescribed time	Conduct of pre-procurement	3	2	6	MH	Conduct market study / analysis	End-user	As needed				

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No	Process/ Activity	Requirement / Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External						P*S	L/MH/VH							
PROPERTY & PROCUREMENT MANAGEMENT SECTION (PPMS) WITH BIDS & AWARDS COMMITTEE SECRETARIAT (BAC-SECT)																	
3	-do-	-do-	-do-	No external provider complied with the requirements	Prolonged procurement process	Review the requirements as to specs and cost	3	2	6	MH	Conduct market study / analysis	End-user	As needed				
4	-do-	-do-	-do-	Late submission of Purchase Request (PR) and revised (PR) after pre-procurement conference	Constraint in time in case the requested item is urgently needed; prolonged bidding process	Follow up end-user; suggest better procurement plan	2	3	6	MH	Issuance of Memo	BAC Sect	As needed				
5	Conduct of pre-bid conference	All year round	Internal	Non-familiarity of end-user to the technical specifications indicated in PR	End-user caught off guard on the technical specs	Issuance of bid bulletin	1	2	2	L							
6	Posting of ITB, NOA & NTP	All year round	Internal / External	Poor internet connection; slow system of PhilGEPs	Violation of R.A. 9184 in posting requirements	Report to MIS; use other connection; home-based posting; coordinate with PhilGEPs	2	3	6	MH	Increase band width	PMISD-MIS	As needed				

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
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			Internal / External				P	S	P*S	L/MH/VH							
PROPERTY & PROCUREMENT MANAGEMENT SECTION (PPMS) WITH BIDS & AWARDS COMMITTEE SECRETARIAT (BAC-SECT)																	
6	Evaluation of bids	All year round	Internal / External	Veracity of the submitted documents by the external providers	Disqualification of supplier; re-process of procurement activities	Ocular inspection by the BAC-TWG; verification of submitted documents	1	3	3	L							
7	Purchasing of goods /services	All year round	Internal	Insufficient funding (ABC lower than provider's quotation	No external provider will submit quotation	Source out information from the market, internet and media	2	1	2	L							
8	-do-	-do-	Internal	Inadequate statement of requirements or brand name preferences	Violation of RA 9184 as to brand name	Source out information; benchmark to other R&D institutions	1	2	2	L							
9	Purchasing of goods /services	All year round	Internal / External	Terms and conditions unacceptable	Increase in cost	Include terms and conditions in the PR and quotation	1	3	3	L							
10	-do-	-do-	Internal / External	Insufficient number of bidders or no response from known accredited external providers	Failed bid ; re-process procurement activities	Source out from non-PhilGEPs accredited with government permits	2	3	6	MH	Issue Request for Quotation	Divisional canvasser	As needed				

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITES			
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			Internal / External				P	S	P*S	L/MH/VH							
PROPERTY & PROCUREMENT MANAGEMENT SECTION (PPMS) WITH BIDS & AWARDS COMMITTEE SECRETARIAT (BAC-SECT)																	
11	-do-	-do-	External	Offer fails to meet technical specifications	Unacceptable good / services; non-compliant	Request for brochure and its complete specifications before awarding the contract	2	3	6	MH	Benchmark to other R&D institutions to meet technical specifications	End-user	As needed				
12	-do-	-do-	Internal	Selecting an inappropriate / bogus external provider	No guarantee of delivery; no after sales	Conduct background check on the company; get feedback from other client; request for business permit	1	2	2	L							
13	-do-	-do-	Internal / External	Variations in price and specifications	Extension of delivery / cancellation of contract	Validate quotation prior to awarding	1	2	2	L							
14	Purchasing of goods / services	All year round	External	Commencement of work by the external provider before approval of contract	COA observation to possible notice of disallowance	No issuance of unsigned / unapproved PO/WO	1	3	3	L							

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITES			
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			Internal / External				P	S	P*S	L/MH/VH							
PROPERTY & PROCUREMENT MANAGEMENT SECTION (PPMS) WITH BIDS & AWARDS COMMITTEE SECRETARIAT (BAC-SECT)																	
15	-do-	All year round	External	Fraud / misrepresentation of facts	Violation of RA 9184; termination of contract	Further validation and verification of submitted documents; source out information from other company	1	3	3	L							
16	-do-	All year round	Internal	Key personnel / signatories not available	Impede cycle time; prolonged procurement process	Assign alternate signatory in the absence of primary signatory	1	2	2	L							
17	Inspection of goods delivered	All year round	Internal	Unavailability of inspector	Delay in inspection, commissioning and testing; warranty will lapse; delay processing of payment to external provider	Increase pool of inspectors	3	2	6	MH	Request for detailed inspector in PPMS (for small value procurement)	R. Deluta	2020				

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITES			
No	Process/ Activity	Requirement / Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH							
RECORDS MANAGEMENT SECTION (RMS)																	
1	Dissemination of ITDI / documents communications	All year round	Internal	Lack of vehicle for hand carried and mailing documents	Delay in delivery of official documents to the recipient	Early request for official vehicle	3	2	6	MH	Request for e-bike	M. Regonda	2020				
2	-do-	-do-	Internal	Insufficient and long process for request of stamp	Delay in delivery of official documents to the recipient	Prioritize mailing of documents as to the importance / urgency; Early preparation of DV and supporting for the replenishment of stamp	3	2	6	MH	Send advance copy through fax or email	A. Taywan	As needed				
3	-do-	-do-	Internal	Documents are not properly signed / lack of supporting documents	Delay in delivery of official documents to the recipient	Check thoroughly the completeness of document	3	2	6	MH	Issue checklist	M. Regonda	As needed				
4	-do-	-do-	External	Poor internet connection	Slow transmittal of documents through email	Send documents through other means like fax / LBC / registered mail, if urgent	1	3	6	L							

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
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			Internal / External				P	S	P*S	L/MH/VH							
RECORDS MANAGEMENT SECTION (RMS)																	
5	Dissemination of ITDI / documents communications	All year round	Internal	Wrong / incomplete address and addressee	Delay in delivery of official documents to the recipient	Early request for official vehicle	1	3	3	L							
6	Retrieval of records / documents	-do-	Internal	Wrong classification / labelling of documents	Misplaced / lost records or documents	Proper classification pursuant to RA 9470, Guidelines on Records Creation, Mail and File Administration	1	3	3	L							
7	-do-	-do-	Internal	No proper labelling on old files; location of old files cannot be ascertained	Prolonged to no retrieval of records	Check all folders related to the file to be retrieved; study and familiarize with the system used in filing by previous employee	2	3	6	MH	Conduct inventory of records	M. Regonda	2020				

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITES			
No	Process/ Activity	Requirement / Expectation	Risk Origin/ Interest Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH							
RECORDS MANAGEMENT SECTION (RMS)																	
8	Filing of records	All year round	Internal	Lack of storage room / filing of cabinet	Loss of records; can be stolen by other interested parties and might fall in the wrong hand	Dispose old files to make room for permanent / important files	2	3	6	MH	Request for additional filing cabinet	M. Regonda	2020				



**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET**

CHEMICALS AND ENERGY DIVISION

Assessment Rating Guide:
Probability:
 3 (High, ≥0.8 to 1.0 occurrence)
 2 (Medium, ≥0.4 to < 0.8 occurrence)
 1 (Low, 0.1 to < 0.4 occurrence)
Severity:
 3 (High, ≥0.8 to 1.0 Major)
 2 (Medium, ≥0.4 to < 0.8 Moderate)
 1 (Low, 0.1 to < 0.4 Minor)

Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

M Monitoring and Measurement is required

L No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6),
 VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
January 2, 2020	<i>Amir B. Curran</i> Divisional Document Custodian	<i>[Signature]</i> RMG Head	<i>[Signature]</i> OIC/Division Chief	January 4, 2020

RISK / ISSUE IDENTIFICATION AND EVALUATION						RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES				
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH							RISK CONTROL AND MANAGEMENT

RM-R&D/OpR-CED-01	PM-ITDI-08-03 Implementation of Regular Approved R&D Projects	Implement 90% of approved R&D project activities based on agreed duration	Project Staff/End-User Internal	Unexpected breakdown of equipment	Medium	- Regular preventive maintenance (EMS, ITDI F20; EMR, ITDI F19) - Seek assistance from other division with know-how/skill/ expertise on specific equipment - source out other Division or other institutions with available equipment - Contact the equipment supplier for service and	1	1	1	L	- Propose projects for GIA funding to include equipment maintenance in the LIB	Project Leader	January 2020	- GIA project proposal with inclusion of equipment maintenance in the LIB				Purchase new equipment
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**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET**

CHEMICALS AND ENERGY DIVISION

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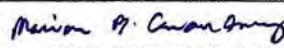
Risk Acceptability Rating Indicators:

7-9 Corrective Action Plan plus Monitoring and Measurement is required

M Monitoring and Measurement is required

1-6 No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6),
 VH = Very High (7-9)

Date of Assessment:		Prepared/Assessed by:			Reviewed by:	Approved by:		Next Date of Assessment:									
January 2, 2020		 Divisional Document Custodian			RMG Head	OIC/Division Chief		January 4, 2020									
RISK / ISSUE IDENTIFICATION AND EVALUATION						RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES				
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/Hold)	Opportunities
			Internal / External				P	S	P'S	L/MH/VH							

						quotation -Request for transfer of ownership (if equipment bought through GIA or other funding institutions) - Availability of supply of consumables (include 1 year supply) - Availability/ allocate budget for supply of consumables											
RM-R&D/CoR-CED-01	PM-ITDI-08-03 Implementation of Regular Approved R&D Projects	Implement 90% of approved R&D project activities based on agreed	Project Staff/End-User Internal	Uncertainty in the accuracy/reliability of result of measuring equipment	Medium	- Regular calibration (Equipment Calibration Plan, ITDI F7; ENR, ITDI F19)	1	1	1	L	- Propose projects for GIA funding to include equipment calibration in the LIB	Project Leader	January 2020	- GIA project proposal with inclusion of equipment maintenance in the LIB			Purchase new equipment



**RISK AND OPPORTUNITIES
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Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

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Legend: L = Low (1-3), MH = Medium High (4-6),
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Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
January 2, 2020	<i>Marian M. Curran Jones</i> Divisional Document Custodian	RMG Head	OIC/Division Chief	January 4, 2020

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
							P	S	P*S	L/MH/VH							

		duration				- Availability/ allocate sufficient funds for calibration											
RM-CoR/EA-CED-01	Energy Audit/ Assessment	Submission of report within three months	EA Team/ EA client Internal	Incomplete data to finish EA report thus submission is beyond three months	Medium	Monitoring report submission	1	1	1	L	Submission of EA report for DOST Regional Offices with numerous clients will be extended beyond 3 months but should be agreed upon by EA Team & DOST Regional Office	EA Team	January 2020	-Training of Regional Staff in energy auditing & report preparation			-Training of Regional Staff in energy auditing & report preparation



**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET**

ENVIRONMENT AND BIOTECHNOLOGY DIVISION

Assessment Rating Guide:
 Probability:
 3 (High, ≥0.8 to 1.0 occurrence)
 2 (Medium, ≥0.4 to < 0.8 occurrence)
 1 (Low, (0.1 to < 0.4 occurrence)
 Severity:
 3 (High, ≥0.8 to 1.0 Major)
 2 (Medium, ≥0.4 to < 0.8 Moderate)
 1 (Low, (0.1 to < 0.4 Minor)

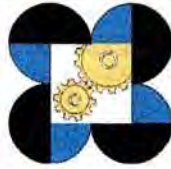
Risk Acceptability Rating Indicators:

- VH Corrective Action Plan plus Monitoring and Measurement is required
- MH Monitoring and Measurement is required
- L No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6),
 VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
Jan. 3, 2020	Divisional Document Custodian	RMG Head	Division Chief	Jan. 3, 2021

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement / Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open / Closed/ Hold)	Opportunities
							P	S	P*S	L/MH/VH							Verification of Action Taken
			Natural phenomena External	Safety of staff and equipment are compromised since some EBD Buildings are on top of a seismic fault	Compromised safety of staff and damage to equipment	Treat/Mitigate	3	3	9	VH	Staff Relocation Building Renovation Plan	WMS Division Chief; DCV	Sept 2018 November 2019	Staff re-located Renovation plan prepared	August 2018 December 2019	Closed Open	Risk Addressed To be addressed once renovation starts
			Internal	Unavailability of upgraded facilities	Not attaining 90% of targeted R&D activities	Treat/Mitigate	2	3	6	MH	Modernize equipment and facilities	Division Chief; Section Heads	July to Dec 2019	Proposal preparation	December 2019	Closed	Risk Addressed
			Internal	Inability to sustain adequate knowledge management	Not attaining 90% of targeted R&D activities	Treat/Mitigate	2	3	6	MH	Develop proper documentation on protocols	Division Chief; Section Heads	December 2019	Updating of WI; Staff dev; succession plan	December 2019	Open	Needs further action



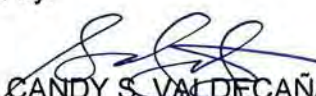

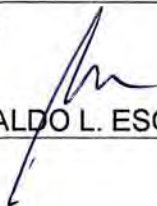
Department of Science and Technology
INDUSTRIAL TECHNOLOGY DEVELOPMENT INSTITUTE

RISK MANAGEMENT REGISTER

Date Prepared: _____

Page 1 of 2

RISK ASSESSMENT						Step 4: Risk Treatment					Step 5: Monitoring & Evaluation				Documented Information	
Step 1: Risk Identification		Step 2: Risk Analysis		Step 3: Risk Evaluation		TREATMENT (Accept / Mitigate / Transfer / Terminate)	Objective	Action Plan	Responsible Person	Timeline	Evaluation of Treatment			Opportunities , if applicable		Action Plan if Ineffective
Risk Code	Risk Statement	Prob	Impact	Risk Factor	Priority						Effective	Ineffective	Result			
		H(3) / M(2) / L(1)	H(3)/ M(2) / L(1)		Ranking											
					(Treatment)											
	Low level of customer awareness about EBD and its capabilities	3	3	H	1	Mitigate	Increase customer awareness level	more active participation in techno-transfer / promotional activities; utilization of social media for promotion and dissemination; regular updating of EBD Website	Division Chief; Section Heads; Info & Comm Group; Webmaster	Jan to Jun 2020						
	Lapses in QMS	3	3	H	2	Mitigate	Reduce lapses in QMS	Review and identify lapses in QMS; monitoring of QMS	All staff	Jan to Jun 2020						
	Some facilities located on top of fault that compromising safety of staff and integrity of buildings and equipment	3	3	H	3	Mitigate	Reduce exposure to natural hazards	Implement repair and renovation plan	All EBD Staff	Jan to Dec 2020						
MONITORING AND REVIEW (5.6)																

Prepared by:  CANDY S. VALDECAÑAS	Reviewed by:  DANTE C. VERGARA	Approved by:  REYNALDO L. ESGUERRA
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RISK MANAGEMENT REGISTER

Date Prepared: _____

RISK ASSESSMENT						Step 4: Risk Treatment					Step 5: Monitoring & Evaluation					Documented Information
Step 1: Risk Identification		Step 2: Risk Analysis		Step 3: Risk Evaluation		TREATMENT (Accept / Mitigate / Transfer / Terminate)	Objective	Action Plan	Responsible Person	Timeline	Evaluation of Treatment			Opportunities , if applicable	Action Plan if Ineffective	
Risk Code	Risk Statement	Prob	Impact	Risk Factor	Priority						Effective	Ineffective	Result			
		H(3) / M(2) / L(1)	H(3) / M(2) / L(1)		Ranking											
		(Treatment)														

Prepared by:  CANDY S. VALDECAÑAS	Reviewed by:  DANTE C. VERGARA	Approved by:  REYNALDO L. ESGUERRA
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**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET**

FINANCIAL MANAGEMENT DIVISION

Assessment Rating Guide:
Probability:
3 (High, ≥0.8 to 1.0 occurrence)
2 (Medium, ≥0.4 to < 0.8 occurrence)
1 (Low, (0.1 to < 0.4 occurrence))

Severity:
3 (High, ≥0.8 to 1.0 Major)
2 (Medium, ≥0.4 to < 0.8 Moderate)
1 (Low, (0.1 to < 0.4 Minor))

Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

MH Monitoring and Measurement is required

L No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6),

VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
Jan. 3, 2019	Divisional Document Custodian	RMG Head	Division Chief	Jan. 3, 2020

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open /Closed/ Hold)	Opportunities

ACCOUNTING SECTION AS)																	
1	Issuing Statement of Account	All year round	Internal / External	Unsettled account	Accumulation of Receivables Account in the book of accounts	Issue demand Letter after 30 days of no payment	1	2	2	L	Strictly follow the set of guidelines of non-issuance of result until services rendered is fully paid	Accounting Section ADMATEL					
2	-do-	All year round	Internal / External	Delinquent account	Accumulation of Receivables Account in the book of accounts	Regular monitoring; issuance of another demand letter and one final demand letter; suspension from further availing of services until settlement of overdue accounts	1	1	1	L	Issue demand letter to clients with outstanding accounts						

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPC			
No	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	O
			Internal / External				P	S	P*S	L/MH/VH							
ACCOUNTING SECTION AS)																	
3	-do-	All year round	Internal / External	Cannot locate the address or the addressee	Demand letter are returned to sender	Request for Write-off for bad accounts	2	1	2	L	Request for write-off						
4	Processing of financial transactions	-do-	Internal / External	Incomplete supporting documents	3 days delay of processing	Reiteration of ITDI memorandum on COA Circular re: List of supporting documents	2	1	2	L	Review completeness and correctness of supporting documents and signatures	End-user/PPMS					
5	-do-	-do-	External	No record of Tax Identification Number (TIN)	2 days delay of processing time	Compel BAC to check TIN in the submitted canvass quotations	1	1	1	L							
6	-do-	-do-	Internal	Incorrect computation	2 days delay of processing time	Compel PPMS to exercise due diligence	1	1	1	L							
BUDGET SECTION (BS)																	
1	Allotment for the budgetary requirement of ITDI	All year round	Internal	Activities not included in the approved list of project	4 days delay of processing time	Require PMISD to furnish updated list of projects	1	3	3	L							
2	-do-	All year round	Internal	Request not in accordance with prescribed rules and regulation	3 days delay of processing time	Reiteration of ITDI memorandum on COA circular re: list of supporting documents	2	1	2	L							

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPC			
No	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	O
			Internal / External				P	S	P*S	L/MH/VH							

BUDGET SECTION (BS)

3	-do-	All year round	Internal	Incomplete supporting documents	3 days delay of processing time	Reiteration of ITDI memorandum on COA Circular re: List of supporting documents	2	1	2	L							
4	Budget Proposal	All year round	Internal	Overestimate of Budget / TIER2	Non-approval of budget estimates	Completion of forward estimates; strict adhere to DBM Circular on Forward Estimates Exercise due diligence in accomplishing BF forms; conduct of planning workshop every quarter of the year	2	1	2	L							
5	-do-	All year round	Internal	Poor internet connection during online submission of budget proposal	Delayed online submission of budget proposal	Provide fast internet ; increase in band width	1	2	2	L							



RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

Assessment Rating Guide:
Probability:
 3 (High, ≥0.8 to 1.0 occurrence)
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Severity:
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Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

MH Monitoring and Measurement is required

L No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6),
VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
Jan. 2, 2020	 Divisional Document Custodian	 RMG Head	 Division Chief	Jan. 4, 2021

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH							
1	Provision of Technical Services	Process cycle time – All year round	Internal	Unexpected breakdown of equipment or facility	Delays on the implementation of technical services	Preparation and implementation of equipment preventive maintenance and / or calibration plan	2	3	6	MH	Make a list of suppliers/external providers for equipment and the critical parts of the equipment	Equipment custodian	October 2019				
2	Provision of Technical Services	Process cycle time – All year round	Internal/External	Unavailability of personnel due to study leave, absences, health-related issues, multi- tasking and/intervening duties	Delays on the implementation of technical services	Creation of FPD teams for each technology transfer activity. Proper designation and schedule of personnel for specific activities. Monitoring of the activities of each staff.	1	2	2	L							
3	Provision of Technical Services	All year round	Internal/External	Discontinuation of technical service(s) due	Knowledge gaps and loss of clients and	Knowledge transfer for concerned team.	1	2	2	L							

				to lack of expert(s)	services offered	Attendance to trainings and seminars											
4	Implementation of Approved Regular R&D Projects	Process cycle time – All year round	Internal	Unexpected breakdown of equipment or facility	Delays on project implementation	Preparation and implementation of equipment preventive maintenance and / or calibration plan	3	3	9		<p>Make a list of suppliers/external providers for equipment and the critical parts of the equipment</p> <p>Preparation of GIA equipment preventive maintenance and list of equipment for transfer</p>	<p>Equipment custodian</p> <p>Project Leader</p>	<p>October 2019</p> <p>January 2020</p>	<p>Prepared preventive maintenance of equipment and prepared list of equipment for transfer</p>	January 2020	Open	Purchase of new equipment as a replacement for outdated equipment
5	Implementation of Approved Regular R&D Projects	Process cycle time – All year round	External/Internal	Unavailable, seasonal and/or off-specification raw material(s)	Delays on project activities	<p>Availability of raw materials and its source are being considered during project planning and before the project implementation. Duration of the projects are set during peak season of the raw materials.</p> <p>Identification of at least 2 possible suppliers of target raw material (s) prior to project implementation</p>	2	3	6	MH	<p>Coordination with regional and provincial government agencies (e.g. DA, DTI, BPI, etc) to source out raw materials especially in times of natural calamity</p>	Project Leader and Staff	January 2020				
6	Implementation of Approved Regular R&D Projects	Process cycle time – All year round	Internal/External	Unavailability of personnel due to study leave,	Delay or termination of project(s)	Proper designation of personnel for specific	1	2	2								

				absences, health-related issues, multi-tasking and/intervening duties		activities. Monitoring of the activities of each staff.											
7	Implementation of Approved Regular R&D Projects	Monthly	Internal	Depleted cash advance	Delays on project implementation	Allotment of petty cash or every replenishment as per needs of every project	2	1	2								
8	Implementation of Approved Regular R&D Projects	Project Planning	Internal	Unexpected results vs theoretical targets	Project objective(s) not met	Conduct technical review evaluation/ Routine monitoring of experimental data	2	2	4	MH	Conduct preliminary runs/experiment if necessary	Project Leader and staff	January 2020				
9	Implementation of Approved Regular R&D Projects	All year round	Internal/External	Poor teamwork among project staff; Uncooperative staff	Delays/Unmet targets	Conduct annual team building activities	1	2	2								
10	All Processes	All year round	Internal/Internal	Safety risk posed on personnel because of exposure to chemical hazards	Health problems	Observe Good Laboratory Practices. Conduct scheduled segregation and disposal of chemical wastes	1	3	3								
11	All Processes	No injuries and casualties during calamities	Internal/Internal	Safety risk posed on personnel due to calamities such as fire, typhoon and earthquake	Loss of personnel	Form Disaster Management Committee -Participate in national drills	1	3	3								



Department of Science and Technology
INDUSTRIAL TECHNOLOGY DEVELOPMENT INSTITUTE

DOCUMENT CODE

RM-ITDI-06-03

Risk Management Manual

REVISION NUMBER

1

PAGE NUMBER

1 of 2

SECTION

RISKS AND OPPORTUNITIES

EFFECTIVITY DATE

02 April 2018

TITLE

RISK MANAGEMENT REGISTER

DOCUMENT TYPE

PAPER / PDF FILE


RISK ASSESSMENT					Step 4: Risk Treatment					Step 5: Monitoring & Evaluation				Documented Information		
Step 1: Risk Identification		Step 2: Risk Analysis		Step 3: Risk Evaluation		TREATMENT (Accept / Mitigate / Transfer / Terminate)	Objective	Action Plan	Responsible Personnel	Timeline	Evaluation of Treatment		Opportunities, if applicable		Action Plan, if Ineffective	
Risk Code	Risk Statement	Probability H(3) / M(2) / L(1)	Impact H(3) / M(2) / L(1)	Risk Factor	Priority						Effective	Ineffective				Result
				Ranking												
				(Treatment)												
RM-R&D-FPD-01	Delay or termination of project(s) or services because of unexpected breakdown of equipment or facility	2	3	6	1	Mitigate	To prevent delays or termination of project and / or services	Prepare and implement equipment preventive maintenance and / or calibration plan Make a list of suppliers/external providers for equipment and the critical parts of the equipment	Equipment custodian	Every 1 st Qtr		Project delay of a GIA Project due to unexpected breakdown of equipment	-Preparation of Equipment and Preventive Maintenance and Calibration Plan for 2019 were done last January 2019 - As of Dec 2019, there was a Project (GIA) delay due to unexpected breakdown of equipment	Purchase of new equipment as a replacement for outdated equipment	Adjust frequency of preventive maintenance and/or calibration schedule; Source out or change affected activities, if possible	Equipment Preventive Maintenance and / or Calibration Plan; Approved request for project deferment or extension; Approved request for change of project milestones; Purchase request

Prepared by:


MONICA R. MANALO
Divisional Representative,
Risk Management Group

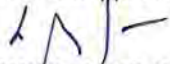
Reviewed / Approved by:


Dr. NORBERTO G. AMBAGAN
Chief, Food Processing Division

	Department of Science and Technology INDUSTRIAL TECHNOLOGY DEVELOPMENT INSTITUTE	DOCUMENT CODE	RM-ITDI-06-03
	Risk Management Manual	REVISION NUMBER	1
SECTION	RISKS AND OPPORTUNITIES	PAGE NUMBER	2 of 2
TITLE	RISK MANAGEMENT REGISTER	EFFECTIVITY DATE	02 April 2018
		DOCUMENT TYPE	PAPER / PDF FILE

MONITORING AND REVIEW (5.6)

RM-R&D-FPD-01		3	3	9	1			Preparation of GIA equipment preventive maintenance and list of equipment for transfer	Project leader	Starting January 2020						
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Prepared by: MONICA R. MANALO Divisional Representative, Risk Management Group	Reviewed /Approved by:  Dr. NORBERTO G. AMBAGAN Chief, Food Processing Division
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**RISK AND OPPORTUNITIES
IDENTIFICATION AND EVALUATION SHEET**

MATERIALS SCIENCE DIVISION

Assessment Rating Guide:
Probability:
 3 (High, ≥ 0.8 to 1.0 occurrence)
 2 (Medium, ≥ 0.4 to < 0.8 occurrence)
 1 (Low, (0.1 to < 0.4 occurrence))

Severity:
 3 (High, ≥ 0.8 to 1.0 Major)
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 1 (Low, (0.1 to < 0.4 Minor))

Risk Acceptability Rating Indicators:

- Corrective Action Plan plus Monitoring and Measurement is required
- Monitoring and Measurement is required
- No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6),
 VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
Jan. 2, 2020	 Divisional Document Custodian	 RMG Head	 Division Chief	Jan. 2, 2021

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITES			
No	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability		Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open / Closed / Hold)	Opportunities
							Internal / External	Internal / External									
1	Implementation of approved regular R&D projects	All year round	Internal	Failure to sustain competent staff	Disruption /delay of activities	<ul style="list-style-type: none"> ➤ Mentoring junior researchers ➤ Attendance to trainings and seminars 	2	2	4	MH	Structured training plan	Division Chief, Section Heads	Jan. 2, 2020				
2	Implementation of approved regular R&D projects / Provision of technical services	All year round	Internal	Laboratory testing and processing equipment malfunction or breakdown	Disruption / delay of activities	<ul style="list-style-type: none"> ➤ Regular preventive maintenance and calibration ➤ Available list of suppliers/service providers of spare parts 	1	3	3	L							
3	Implementation of approved regular R&D projects	Project planning	Internal	Unexpected result(s) vs milestone	Project objective(s) not met	<ul style="list-style-type: none"> ➤ Monitoring of materials/supplies ➤ Proper implementation of experimental design/processes 	1	3	3	L							

MATERIALS SCIENCE DIVISION

6.1 ACTIONS TO ADDRESS RISKS AND OPPORTUNITIES

Interested Parties	Requirements	Risks and Opportunities	Action to be Taken	Effectiveness of Actions
<p>External :</p> <p>Academe/Students</p> <p>Industry</p> <p>Local Government Units (LGU)</p> <p>Private Individuals</p> <p>R&D Collaborators</p> <p>Suppliers</p>	<p>~ Provision of technical assistance</p> <p>~ Use of testing and processing facilities</p> <p>~ MOA ~ Product/output</p> <p>~ Timely and complete delivery of supplies, materials and equipment.</p>	<p>~ Unmet timely delivery of results due to sample requirements</p> <p>~ Change of schedule due to sudden breakdown equipment</p> <p>~ Unmet timely delivery of results due to MOA issues</p> <p>~ Unmet timely delivery due to limited external providers</p>	<p>~ Communication through fax, email, land line phone or mobile phone.</p> <p>~ Communication through fax, email, land line phone or mobile phone. ~ Equipment maintenance</p> <p>~ Communication through fax, email, land line phone or mobile phone. ~ Completion of requirements.</p> <p>~ Expand sources of information from other external providers with government permit.</p>	<p>~ Communication achieved</p> <p>~ Communication achieved</p> <p>~ Operational equipment</p> <p>~ Communication achieved</p> <p>~ Completed requirements</p> <p>~ No delay in the delivery</p>

			~ Include delivery terms and conditions	
Internal:				
R&D Divisions	~ Provision of technical assistance ~ Use of testing and processing facilities	~Unmet timely delivery of results due to sample requirements ~ Change of schedule due to sudden breakdown equipment	~ Communication through fax, email, land line phone or mobile phone. ~ Equipment maintenance	~ Communication achieved ~ Operational equipment
PMISD	~Project proposal, LIB, monthly/quarterly and terminal reports	~Unmet timely delivery of results/reports due to material supply.	~Request for extension, submission of change of milestone ~ Expand sources of external providers /suppliers with government permit.	~Approved Request for extension

Form: RM-ITDI-F4
Issue: Apr. 2018

Prepared by:



Marissa A. Paglicawan, Ph.D.
Supvg. SRS.
Materials Science Division



RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

PMISD

Assessment Rating Guide:
Probability:
 3 (High, ≥ 0.8 to 1.0 occurrence)
 2 (Medium, ≥ 0.4 to < 0.8 occurrence)
 1 (Low, 0.1 to < 0.4 occurrence)

Severity:
 3 (High, ≥ 0.8 to 1.0 Major)
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Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

MH Monitoring and Measurement is required

L No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6),

VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
December 19, 2019	 ADORA T. ORTIZ Divisional Document Custodian	 ROCHEEL LEE C. DELUTA RMG Head	 DR. ZORAYDA V. ANG Division Chief	June 30, 2020

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties Internal / External	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open / Closed / Hold)	Opportunities
							P	S	P*S	L/MH/VH	RISK CONTROL AND MANAGEMENT				Verification of Action Taken		Addressed Risk / Issue

PLANNING																		
1	Preparation of Institute's programs and projects aligned with the national and department priorities and needs	All year round	Internal and External	Change in Management/ Leadership and organizational structure	Change in priorities, directions, strategies, programs, activities and projects	Constant monitoring of trends/ changes in the task and macroenvironments of the Institute	2	1	2	L								

2	Preparation of Institute's plans and budget proposals within the prescribed date	All year round	Internal	Failure of Divisions to submit their PAPs (proposals with corresponding budget) within the prescribed date	Institutional targets will not be implemented as planned	Implementation of control mechanisms: -Memo re submission deadline -DPCR -Constant follow ups	2	3	6	MH		All R&D Divisions And Technical Services Division	February 2020				
3	Monitoring of Institute's programs, activities and projects (PAPs)	All year round	Internal	No available project staff, results and outputs for the project monitoring period	Delayed monitoring of project's progress and corresponding monitoring report	Schedule quarterly monitoring (announced or unannounced) thru a memorandum	1	2	2	L							
4	Evaluation of Institute's programs, activities and projects (PAPs)	All year round	Internal	Failure to meet the required quorum of Technical Review Committee (TRC) during the evaluation TRC Members, division chiefs and project leaders do not attend despite prior confirmation of attendance	Failure assessment of Project viability	Advance issuance of yearly schedule of project evaluation through a memorandum Reschedule the evaluation to conform with the availability of TRC members, division chiefs and project leaders	1	3	3	L							
5	Review of existing and/ or formulation of new organizational policies	As need arises	Internal	Institutional Policy mechanism in place (e.g. Regular Top Management Policy Meeting)	Issues/ Concerns of Employees including gaps will	Keep systematic record of all policies issued	1	3	3	L							

				Absence of systematic record management	not be addressed No available reference of previous policies issued												
7	Implementation of approved and Budgeted ISSP	Implementation Period (2020-2022)	Internal / External	Sudden resignation of Contractual IT Staff (Programmers) Funding request not appropriated by DBM Major change of requirements (e.g. addition/ reduction of processes, user privileges and required pages and fields)	Delayed implementation of targets (activities and project timeline) Adjustment on the timeline	Use of same system development platform Use of Rapid Application Design development	1	3	3	L	Proper skills development plan for the staff	MIS Section of PMISD	2020				



RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET PACKAGING TECHNOLOGY DIVISION

Assessment Rating Guide:
Probability:
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 2 (Medium, ≥0.4 to < 0.8 occurrence)
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Severity:
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Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

M Monitoring and Measurement is required

L No Action is required

Legend: L = Low (1-3), MH = Medium High (4-6), VH = Very High (7-9)

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
Jan. 2, 2020	Divisional Document Custodian	RMG Head	Division Chief	Jan. 4, 2021

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES			
No.	Process/Activity	Requirement/Expectation	Risk Origin/Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open /Closed/ Hold)	Opportunities
			Internal / External														

1. Manpower																	
	PM- ITDI-08-03 Implementation of Regular Approved R & D Projects	To implement on schedule 90% of the approved R & D projects and activities	Internal	Unavailability (emergency leave, study leave, resignation)	Delay in conduct of proj. activities	Mentoring another staff or understudy Reassignment of project or study to another staff	1	3	3	L	Submission of schedule/plan of staff (education, travel, retirement or career) Giving of incentives	Division chief, section head, project leaders	Immediate	Provision of under study, proper planning, additional staff			
			Internal	Lack of competence	Low confidence level of staff in conducting research studies	Mentoring or coaching	1	3	3	L	Attendance to seminars, trainings, conferences Continuous mentoring & coaching	Division chief, researcher/s	Always	Provision of appropriate training, mentoring or coaching			
			Internal	Overload of duties	Delay in implementation and/or completion of proj activities	Assign other staff to assist in the implementation of proj activities	1	2	2	L	Review of staff assignment/s	Div. chief, section head & staff	Always	Review organization of PTD, additional staff, transition			

			Internal	Behavioral/attitude problem Non-compliance to office rules and policies	Delay in the conduct of project activities	Consultation with concerned staff Review of office policies, mandate of the division, mission & vision of the office	1	3	3	L	Monitoring of daily activities Checking of output	Div. chief, section head, immediate supervisor		-Personal counselling -Involving the staff in division's activities - continuous mentoring/coaching			
2. Support																	
			External	Delay in budget release, bidding & delivery of equipment, materials & supplies	Delay in the implementation of project activities	Check with FMD schedule of budget release	1	3	3	L	Constant checking/follow-up of documents	Division chief, Project leader, Researchers, FMD, Admin		Provide assistance in procurement Assist in the inspection of delivered equipment, supplies & materials			
			External	Delay in submission of results from external provider (i.e. testing laboratories)	Delay in evaluation of research data, report writing	Constant communication & follow-up	1	3	3	L	Pick-up test report from external provider	researcher		Constant communication & follow-up Pick-up test report from external provider Always check with the external provider schedule of delivery of test results			

			Internal	Unreliable results of analysis due to uncalibrated equipment	Incorrect results of testing and analysis	Constant checking of calibration & equipment maintenance plans	2	3	6	MH	Constant reminder to concerned tech. staff re calibration plan	Researcher, Section head		Early preparation of PR for calibration of equipment Conduct of internal calibration (by accredited tech, staff) as support to external calibration			
			Internal	Facilities/laboratory not properly equipped/limited space	Difficulty in conduct of tests or analyses	5S	1	3	3	L	Maintenance of cleanliness & orderliness of laboratory	Div. chief, assigned staff for building maintenance		Plan to upgrade & renovate facilities			

				Power interruption/failure	Delay in operation and conduct of experiment or tests Damaged equipment	Use of generator	1	3	3	L	Installation of additional generator	Assigned researcher	Q1 2020	Installation of additional generator			
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					and/or analytical instrument											
				Equipment breakdown No available spare parts	Delay in operation and conduct of experiment, tests or trials	Preventive maintenance, regular calibration Source out equipment from other division or testing lab Outsource test from other laboratory	2	3	6	MH	Provision of spare parts Check-up, operational tests & monitoring of equipment	Assigned researcher	Always	Upgrading of old equipment Procurement of new equipment		
				Difficulty in procurement of chemicals/reagents and/or standards needed for analyses	Delay in analysis of product samples	Constant follow-up from Procurement section certificate from PDEA Regular standardization of chemical solution before the analysis	3	3	9	HV	Purchase of sufficient supply of chemical solution	Assigned researcher	Immediate	Acquire certificate from PDEA Purchase sufficient supply of chemical solution		
3. Other factors																

				Weather disturbances/natural disasters	Delay in project implementation due to unexpected unavailability of raw materials	Inform PMISD and monitoring council re change of milestone Submit to PMISD revised workplan	2	3	6	MH	Sourcing of other suppliers of raw materials	Project leader Assigned researcher	Within 2 weeks	Revis e workp lan and chang e of milest one Add to docu mente d inform ation List of sourc es for raw matls Consu ltation with munic ipal and provin cial agricu lturist s re other sourc es of raw materi als		
				Change in priority areas (national, DOST, ITDI)	Delay in implementation of project activities	Modify roadmap & align with strat plan & agenda	1	3	3	L	Div. chief, section heads, proj. leaders	Div. chief, Section heads Researchers	Immediately	Modif y roadm ap & align with strat		

plan & agenda

Manpower

				Failed coordination	Delay in implementation of project activities	Documentation of all communication with customer	1	3	3	L	Appropriate coordination plan, available contact information	Assigned researcher Section head	Immediately				
				Delay in the submission/release of technical report/s or official documents	Low customer satisfactory rating	Documentation of all communication with customer Control of receiving & releasing of customer property using logbooks	1	3	3	L	Assign alternate signatory in the absence of primary signatory	Assigned researcher	Immediately				
				Miscommunication	Delay in the implementation of proj activities	Monitoring of feedback, communication with customers	1	2	2	L	Periodic meetings/discussion with customer	Assigned researcher Section head	Immediately				
			Internal	Behavioral/attitude problem	Delay in the conduct of project activities	Consultation with concerned staff	1	3	3	L	Monitoring and submission	Div. chief, section head, immediate supervisor	Immediately				

				Non-compliance to office rules and policies		Review of office policies, mandate of the division, mission and vision of the office					of daily activities Regular checking of output					
			Internal	Inappropriate record keeping	Incorrect technical report released to customer	Double checking of documents released Recording of accepted and released documents in logbooks	1	3	3	L	Monitoring of logbooks	Section head, Researcher/s	Regularly			

Other factors:

			External	Inconsistent and/or non-complying (micro and chemical) product samples submitted by customer Incomplete samples submitted by customer	Delay in start of study or analysis of product samples	Constant communication and consultation with customer Checking of prod samples submitted by customers	1	3	3	L		Assigned researcher	Always			
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			External	Delay or no feedback received from customers (i.e. label design)	Delay in the completion of label design	Constant follow-up thru letter, email, fax etc.	1	3	3	L	Meeting with customer	Assigned researcher Section head	Immediately				
			Internal	Equipment breakdown	Delay in operation/project implementation	Strict compliance to equipment maintenance and calibration plans	1	3	3	L	Provision of spare parts	Assigned researcher	Always	Upgrading of old equipment Procurement of new equipment			
			External	Power interruption/failure	Delay in operation and conduct of experiment or tests Damaged equipment and/or analytical instrument	Use of generator	1	3	3	L	Installation of additional generator	Assigned researcher Section head	immediately	Installation of additional generator			
	Submission of terminal report two months after the project completion		Internal	Unavailability (emergency leave, study leave, resignation)	Delay in conduct of proj. activities	Consultation with concerned staff Review of office policies, mandate of the division, vision &	1	3	3	L	Regular checking/follow-up of documents	Div. chief Section head	immediately	Personal counselling involving the staff in division			

						mission of office								on's activities Continuous monitoring/coaching			
			Internal	Lack of competence	Low confidence level of staff in conducting research studies	Mentoring or coaching	1	3	3	L	Attendance to seminars, training, conferences Continuous mentoring & coaching	Div. chief, Section head researchers	Regularly	Provision of appropriate training, mentoring or coaching			
			Internal	Overload of duties	Delay in implementation and/or completion of proj activities	Assign other staff to assist in the implementation of proj activities	1	2	2	L	Review of staff assignments	Div. chief Section head staff	always	Review organization of PTD, additional staff, transition			
			External	Delay in submission of results from external provider (i.e. testing laboratories)	Delay in evaluation of research data, report writing	Constant communication & follow-up	1	3	3	L	Pick-up test report from external provider			Constant communication & follow-up Pick-up test report			

						laboratori al Source out test from other lab												
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RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET

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Severity:
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Risk Acceptability Rating Indicators:

VH Corrective Action Plan plus Monitoring and Measurement is required

M Monitoring and Measurement is required

L No Action is required

Legend: L = Low, MH = Medium High, VH = Very High

Date of Assessment:	Prepared/Assessed by:	Reviewed by:	Approved by:	Next Date of Assessment:
January 3, 2020	<i>Elnila C. Zalameda</i> ELNILA ZALAMEDA Divisional Document Custodian	<i>[Signature]</i> RMG Head	<i>Nelia Elisa C. Florendo</i> NELIA ELISA C. FLORENDO Division Chief	June 3, 2021

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITIES				
No.	Process/ Activity	Requirement/ Expectation	Risk Origin/ Interested Parties	Potential Risk / Issue	Impact	Current Control	Probability	Severity	Risk Priority Number (RPN)	Risk Acceptability Rating (RAR)	Recommended Additional Control	Responsible	Implementation Date	Plan of Action Taken	Actual Implementation Date	Status (Open/Closed/ Hold)	Opportunities	
			Internal / External						P*S	L/MH/VH								RISK CONTROL AND MANAGEMENT
OPR-RM-TSD-06		Effective monitoring and measurement of TSD program/projects/ activities.	Internal	Inadequacy of TSD staff to aggressively conduct monitoring and impact assessment of project/ activities due to insufficient human resource competencies and budgetary requirements constrain the institute to acquire actual feedback/ document cases to further improve/ innovate the techno-transfer process.	Opportunities lost to document success stories of industries/ MSMEs and other clients with ITDI interventions, as well as feedbacks for further improvement of services of the Institute.	Efforts in acquiring feedback from clients thru email and DOST-ROs.	2	2	4	MH	Proposal submitted to funding agency on Impact monitoring system in 2017, but disapproved – should be ITDI's funding as recommended. KT implementation and institutionalization Responsible: TSD Chief, IDS Development of feedback/monitoring and evaluation tools on projects/activities (i.e. assessment of bioreactor technology, and post training monitoring) Responsible: TSD Chief, BDS, ESS and RCTS							

Jan 11/20/20



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January 3, 2020	 ELNILA ZALAMEDA Divisional Document Custodian	 RMG Head	 NELISA ELISA C. FLORENDO Division Chief	June 3, 2020

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			Internal / External				P	S	P*S	L/MH/VH					Verification of Action Taken		Addressed Risk / Issue
OPR-RM-TSD-07		Increase level of competencies and match qualifications of TSD staff to fit job requirements to achieve functional objectives	Internal	Inefficiencies towards achieving the functional objectives of the division due to inadequate competencies and mismatch on the qualification of personnel and the absence or lack of back-stopping.	Compromise and highly affect the quality of outputs and timeliness in the delivery of services of the division in support to the institute.	<ul style="list-style-type: none"> Timely hiring of qualified personnel to meet the demands Develop and monitor training plan Provide back-stopping/under study program to ensure continuous and quality delivery of services 	1	1	1	L	<ul style="list-style-type: none"> Continuous monitoring of training plan Clear on requirements and preferences based on job description during hiring and promotion. 	Responsible: TSD Chief, Section Heads and TSD Selection Committee	Implementation: On-going				
											TRANSFER						
											Outsourcing/job out particularly for ESS						



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January 3, 2020	 ELNILA ZALAMEDA Divisional Document Custodian	 RMG Head	 NELIA ELISA C. FLORENDO Division Chief	June 3, 2024

RISK / ISSUE IDENTIFICATION AND EVALUATION							RISK ASSESSMENT				RISK TREATMENT			RISK REDUCTION AND IDENTIFICATION OF OPPORTUNITES			
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			Internal / External				P	S	P*S	L/MH/VH							
OPR-RM-TSD-08		Awareness and clear delineation of responsibilities / accountabilities of the R&D group to support the functional objectives of TSD.	Internal / External	Unclear instructions/ inadequate understanding on the part of R&D and TSD personnel on the policies/ protocols and requirements in managing IPs/technologies (to include management of database of information, communication/ dissemination/ promotion of technologies), trainings and technical services.	Organizational inefficiencies of TSD staff in performing techno-transfer undertakings of the institute.	<ul style="list-style-type: none"> Conduct awareness seminar on IP management/ protocols Awareness seminar on tech audit, business planning and valuation conducted last Dec 2016-2017 Review and appreciation of divisions' functions to avoid encroachment on the respective functions of others. Divisional tech audit conducted in 2018 Continuous discussion with Top Management to come up with list of technologies for transfer/ commercialization 	1	1	1	L	Responsible: TSD Chief and Section Heads						



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January 3, 2020	 ELNILA ZALAMEDA Divisional Document Custodian	 NELIA ELISA C. FLORENDO Division Chief		June 3, 2024

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			Internal / External						P*S	L/MH/VH							
OPR-RM-TSD-09		Regular monitoring of TSD E-mail account.	Internal	Lapses of TSD assigned staff to monitor / respond and act regularly on inquiries in the TSD e-mail account due to issue on accountability.	Affect reputation of TSD and ITDI particularly in terms of providing quality and timely services to the public.	Regular checking/ monitoring of TSD email account of focal person/ alternate.	1	1	1		Responsible: Focal person/alternate in checking / monitoring of TSD email account.						



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							P	S	P*S	L/MH/VH							
OPR-RM-TSD-10		Level of awareness, and compliance of prospective adopter/client on the process of implementing TNA, technology matching, technology requirements prior to setting up of facility and purchase of required tools/equipment to ensure objectives of technology transfer activities are met.		If TSD staff is unable to undertake training/technology needs assessment and technology matching effectively due to absence of a consultative meeting among concerned parties then, it is uncertain that the objectives and requirements of customers are met.	Challenge/ affect the effectiveness of the implementation of the training/technology transfer activities.	<ul style="list-style-type: none"> Inform/reiterate DOST ROs to conduct initial TNA/ technology matching/ request site inspection prior to setting up of facility and purchase of required tools and equipment. Review/revisit MOA with adopters/ fabricators. Reiterate to DOST-ROs on pertinent ITDI technology requirements 	1	1	1	L	Responsible: TSD Staff/Coordinators						