



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
			Internal / External				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 all entries in Cheque	1	3	3	L							

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			Internal / External						P	S							
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							

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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							

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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				

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3	-do-	-do-	-do-	No external provider complied with the requirements	Prolonge d procurem ent 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	Constrai nt in time in case the requeste d item is urgently needed; prolonge d 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 conferen ce	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 requirem ents	Report to MIS; use other connection; home-based posting; coordinate with PhilGEPs	2	3	6	MH	Increase band width	PMISD-MIS	As needed				

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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				




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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							


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15	-do-	All year round	External	Fraud / misrepresentatio n of facts	Violation of RA 9184; terminatio n 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; prolonge d procurem ent process	Assign alternate signatory in the absence of primary signatory	1	2	2	L							
17	Inspectio n of goods delivered	All year round	Internal	Unavailability of inspector	Delay in inspection, commissio ning and testing; warranty will lapse; delay processin g 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				





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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							

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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				

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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 intereste d 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				

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

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		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

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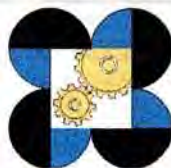
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			Natural phenomena External	Safety of staff and equipment are compromised since some EBD Buildings are on top of a seismic fault	Compromised safety of staff and damage to equipment	Treat/Mitigate	3	3	9	VH	Staff Relocation Building Renovation Plan	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												
Risk Code	Risk Statement	Prob H(3) / M(2) / L(1)	Impact H(3)/ M(2) / L(1)	Risk Factor	Priority	TREATMENT (Accept / Mitigate / Transfer / Terminate)	Objective	Action Plan	Responsible Person	Timeline	Evaluation of Treatment			Opportunities , if applicable	Action Plan if Ineffective	
					Ranking						Effective	Ineffective	Result			
					(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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Department of Science and Technology
INDUSTRIAL TECHNOLOGY DEVELOPMENT INSTITUTE

RISK MANAGEMENT REGISTER

Date Prepared: _____

Page 2 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							Evaluation of Treatment			Opportunities , if applicable	Action Plan if Ineffective	
Risk Code	Risk Statement	Prob	Impact	Risk Factor	Priority	TREATMENT (Accept / Mitigate / Transfer / Terminate)	Objective	Action Plan	Responsible Person	Timeline	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:



Corrective Action Plan plus Monitoring and Measurement is required



Monitoring and Measurement is required



No Action is required







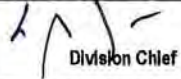
Legend: L = Low (1-3), MH = Medium High (4-6),

VH = Very High (7-9)

Date of Assessment:		Prepared/Assessed by:					Reviewed by:		Approved by:				Next Date of Assessment:		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)		Legend: L = Low (1-3), MH = Medium High (4-6), VH = Very High (7-9)				
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 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	Implement ation Date	Plan of Action Taken	Actual Implementation Date	Status (Open /Closed/ Hold)	Opportunities				
			Internal / External															P	S	P*S	L/MH/VH
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)	
			Internal / External				P	S	P*S	L/MH/VH	RISK CONTROL AND MANAGEMENT				Verification of Action Taken		
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 memorandu m 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)	
			Internal / External				P	S	P*S	L/MH/VH	RISK CONTROL AND MANAGEMENT				Verification of Action Taken		A R
BUDGET SECTION (BS)																	
3	-do-	All year round	Internal	Incomplete supporting documents	3 days delay of processing time	Reiteration of ITDI memorandu m 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 accomplishin g 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) 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: <div>  Corrective Action Plan plus Monitoring and Measurement is required  Monitoring and Measurement is required  No Action is required </div> 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		Make a list of suppliers/external providers for equipment and the critical parts of the equipment Preparation of GIA equipment preventive maintenance and list of equipment for transfer	Equipment custodian Project Leader	October 2019 January 2020	Prepared preventive maintenance of equipment and prepared list of equipment for transfer	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	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. Identification of at least 2 possible suppliers of target raw material (s) prior to project implementation	2	3	6	MH	Coordination with regional and provincial government agencies (e.g. DA, DTI, BPI, etc) to source out raw materials especially in times of natural calamity	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
SECTION	RISKS AND OPPORTUNITIES	PAGE NUMBER	1 of 2
TITLE	RISK MANAGEMENT REGISTER	EFFECTIVITY DATE	02 April 2018
		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												
Risk Code	Risk Statement	Probability	Impact	Risk Factor	Priority	TREATMENT (Accept / Mitigate / Transfer / Terminate)	Objective	Action Plan	Responsible Personnel	Timeline	Evaluation of Treatment			Opportunities, if applicable	Action Plan, if Ineffective	
		H(3) / M(2) / L(1)	H(3)/ M(2) / L(1)		Ranking						Effective	Ineffective				
					(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



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:

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. 2, 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					RISK CONTROL AND MANAGEMENT		
1	Implementation of approved regular R&D projects	All year round	Internal	Failure to sustain competent staff	Disruption /delay of activities	➤ 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	➤ 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	➤ Monitoring of materials/supplies ➤ Proper implementation of experimental design/processes	1	3	3	L							

Form: RM-ITDI-F2

Issue: Apr. 2018

MATERIALS SCIENCE DIVISION


6.1 ACTIONS TO ADDRESS RISKS AND OPPORTUNITIES

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


			~ 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			Risk Acceptability Rating Indicators:							
Date of Assessment:		Prepared/Assessed by:		Reviewed by:		Approved by:		Next Date of Assessment:		Assessment Rating Guide:							
December 19, 2019		ADORA T. ORTIZ Divisional Document Custodian		ROCHEEL LEE C. DELUTA RMG Head		DR. ZORAYDA V. ANG Division Chief		June 30, 2020		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: <div> <div>VH</div> Corrective Action Plan plus Monitoring and Measurement is required </div> <div> <div>MH</div> Monitoring and Measurement is required </div> <div> <div>L</div> No Action is required </div> Legend: L = Low (1-3), MH = Medium High (4-6), VH = Very High (7-9)																	
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							
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	Implementa tion of approved and Budgeted ISSP	Implemen tation 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 implement ation 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:
 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:
Jan. 2, 2020				Jan. 4, 2021
	Divisional Document Custodian	RMG Head	Division Chief	

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 Implementa tion Date	Status (Open /Closed/ Hold)	Opportunities
			Internal / External				P	S	P*S	L/MH/VH							
1. Manpower																	
	PM- ITDI-08-03 Implement ation 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 Reassignme nt 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 confidenc e level of staff in conductin g 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 implement ation and/or completio n of proj activities	Assign other staff to assist in the implementati on of proj activities	1	2	2	L	Review of staff assignment/s	Div. chief, section head & staff	Always	Review organizatio n 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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				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 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 align with strat			

[illegible]






				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			

			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		

														from external provider Always check with the external provider schedule of delivery of results			
				Power interruption/failure	Delay in operation and conduct of experiment or tests Damaged equipment and/or analytical instrument		1	3	3	L	Installation of additional generator	Assigned researcher	Q1 2020	Installation of additional generator			
				Equipment breakdown No available spare parts	Delay in operation and conduct of experiment, tests or trials	Preventive maintenance, regular calibration	1	3	3	L	Provision of spare parts	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	Source out chemical from other	1	3	3	L	Purchase of chemicals from other suppliers (abroad)	Section head Assigned researcher	Immediately				


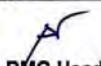
						laboratori al Source out test from other lab												
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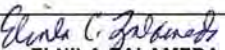

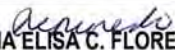
 RISK AND OPPORTUNITIES IDENTIFICATION AND EVALUATION SHEET														Assessment Rating Guide: Probability: 3 (High, ≥ 0.8 to 1.0 occurrence) 2 (Medium, ≥ 0.4 to < 0.8 occurrence) 1 (Low, 0.1 to < 0.4 occurrence) Severity: 3 (High, ≥ 0.8 to 1.0 Major) 2 (Medium, ≥ 0.4 to < 0.8 Moderate) 1 (Low, 0.1 to < 0.4 Minor)		Risk Acceptability Rating Indicators: <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  VH Corrective Action Plan plus Monitoring and Measurement is required </div> <div style="text-align: center;">  M Monitoring and Measurement is required </div> <div style="text-align: center;">  L No Action is required </div> </div> <div style="text-align: right; font-size: small;">Legend: L = Low, MH = Medium High, VH = Very High</div>			
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			 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
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 constraint 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							


1/11/20

 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: <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <div style="background-color: red; color: white; padding: 2px;">VH</div> Corrective Action Plan plus Monitoring and Measurement is required </div> <div style="text-align: center;"> <div style="background-color: yellow; padding: 2px;">M</div> Monitoring and Measurement is required </div> <div style="text-align: center;"> <div style="background-color: green; padding: 2px;">L</div> No Action is required </div> </div> <div style="text-align: right; font-size: small;">Legend: L = Low, MH = Medium High, VH = Very High</div>			
Date of Assessment:		Prepared/Assessed by:			Reviewed by:		Approved by:			Next Date of Assessment:									
January 3, 2020		<i>Elvira C. Zalameda</i> ELNILA ZALAMEDA Divisional Document Custodian			 RMG Head		<i>Nelia Elisa C. Florendo</i> NELIA ELISA C. FLORENDO Division Chief			June 3, 2020									
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								RISK CONTROL AND MANAGEMENT	
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								

		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: <div> <div>VH</div> Corrective Action Plan plus Monitoring and Measurement is required <div>M</div> Monitoring and Measurement is required <div>L</div> No Action is required </div> <div>Legend: L = Low, MH = Medium High, VH = Very High</div>			
Date of Assessment:		Prepared/Assessed by:				Reviewed by:		Approved by:			Next Date of Assessment:						
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 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							
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		Responsible: TSD Chief and Section Heads						

		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: <div style="display: flex; justify-content: space-between;"> <div> <div style="background-color: red; color: white; padding: 2px; margin-bottom: 2px;">VH</div> <div style="background-color: yellow; color: black; padding: 2px; margin-bottom: 2px;">M</div> <div style="background-color: green; color: black; padding: 2px;">L</div> </div> <div> Corrective Action Plan plus Monitoring and Measurement is required Monitoring and Measurement is required No Action is required </div> </div> <div style="text-align: right; font-size: small;">Legend: L = Low, MH = Medium High, VH = Very High</div>			
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			 RMG Head		<i>Nelia Elisa C. Florendo</i> NELIA ELISA C. FLORENDO Division Chief			June 3, 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							
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						

		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: <div> <div>VH</div> Corrective Action Plan plus Monitoring and Measurement is required <div>M</div> Monitoring and Measurement is required <div>L</div> No Action is required </div> <div>Legend: L = Low, MH = Medium High, VH = Very High</div>			
Date of Assessment: January 3, 2020		Prepared/Assessed by:  ELNILA ZALAMEDA Divisional Document Custodian			Reviewed by:  RMG Head		Approved by:  NELIA ELISA C. FLORENDO Division Chief			Next Date of Assessment: June 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
			Internal / External				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		Responsible: TSD Staff/Coordinators						

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	Risk Management Manual	REVISION NUMBER	0
		PAGE NUMBER	1 of 22
SECTION	RISKS AND OPPORTUNITIES	EFFECTIVITY DATE	01 September 2016
TITLE	RISK MANAGEMENT - RESEARCH & DEVELOPMENT (R&D) GROUP	DOCUMENT TYPE	PAPER / PDF FILE

I. Scope:




This Risk Assessment has been completed in regard to the functional areas of the Research and Development (R&D) divisions, which composed of Chemicals and Energy, Environment and Biotechnology, Food Processing, Materials Science, and Packaging Technology, as to the:

- 1) Implementation of all approved Regular R&D Projects.
- 2) Submission of terminal report after completion of R&D Projects.
- 3) Implementation of the approved contract projects.
- 4) Undertake of the approved technology transfer activities based on the schedule.

The assessment has not considered risks associated with:

- 1) Selection and hiring of Project Staff, Science Analyst, Science Research Specialist, and Project Leader.
- 2) Procurement and purchasing of goods process.
- 3) Payment of salaries, wages and benefits of Project Staff, Science Analyst, Science Research Specialist, and Project Leader.

These functional areas of R&D group cover all activities related to the implementation of regular and contract projects, submission of terminal report, and undertaking technology transfer activities.

Prepared by:  DR. MARISSA A. PAGLICAWAN Head, Risk Management Group	Review by:  DR. DIANA L. IGNACIO Quality Management Representative	Approved by:  MARIA PATRICIA V. AZANZA, Ph.D. Director
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Risk Management Manual

SECTION

RISKS AND OPPORTUNITIES

EFFECTIVITY DATE

01 September 2016

TITLE

**RISK MANAGEMENT - RESEARCH &
DEVELOPMENT (R&D) GROUP**

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II. External Context:

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

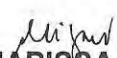
A. Regulatory Environment – compliance with the government policies, rules, and regulations:

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

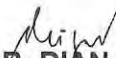
B. Standard References – compliance with the standards in test, evaluation, and analysis.

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

Prepared by:


DR. MARISSA A. PAGLICAWAN
Head, Risk Management Group

Review by:


DR. DIANA L. IGNACIO
Quality Management Representative

Approved by:


MARIA PATRICIA V. AZANZA, Ph.D.
Director



Risk Management Manual

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➤ 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.
- **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.
- **Customer** - various industries in the field of: biotechnology; chemical; energy; environment; food processing; material science; and packaging, academies and other government institutions in terms of S&T activities regarding compliance assistance and innovation.

III. 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.

Prepared by:


DR. MARISSA A. PAGLICAWAN
Head, Risk Management Group

Review by:

DR. DIANA L. IGNACIO
Quality Management Representative

Approved by:

MARIA PATRICIA V. AZANZA, Ph.D.
Director

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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.

IV. Risk Management:

A. Strategic Objectives


This risk assessment will focus on the functional objectives of the R&D group, as follows:

- To implement 90% of approved projects for implementation based on **AGREED DURATION**.
- To submit a terminal report **TWO MONTHS** after project completion.
- To implement 90% of the approved contract projects based on agreed schedule with **VERY STAISFACTORY** customer rating.
- To undertake 90% of the approved technology transfer activities based on schedule with **VERY SATISFACTORY** customer rating.

B. Strategic Measure

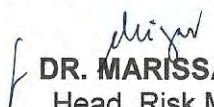


R&D's functional areas that will be implemented and undertake are in accordance with S&T Plan, National Agenda, Divisional Planning Workshop, output of industry consultation for R&D priority areas and the collaborator.


Prepared by:  DR. MARISSA A. PAGLICAWAN Head, Risk Management Group	Review by:  DR. DIANA L. IGNACIO Quality Management Representative	Approved by:  MARIA PATRICIA V. AZANZA, Ph.D. Director
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C. Risk Assessment Criteria and Matrix

LIKELIHOOD/ PROBABILITY	I M P A C T				
	INSIGNIFICANT (1)	MINOR (2)	MODERATE (3)	MAJOR (4)	SEVERE (5)
ALMOST CERTAIN (5)	Low 5	Medium 10	High 15	High 20	High 25
LIKELY (4)	Low 4	Medium 8	Medium 12	High 16	High 20
MODERATE (3)	Low 3	Medium 6	Medium 9	High 12	High 15
Unlikely (2)	Low 2	Low 4	Medium 6	Medium 8	Medium 10
RARE (1)	Low 1	Low 2	Low 3	Low 4	Low 5

Prepared by:  DR. MARISSA A. PAGLICAWAN Head, Risk Management Group	Review by:  DR. DIANA L. IGNACIO Quality Management Representative	Approved by:  MARIA PATRICIA V. AZANZA, Ph.D. Director
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	Department of Science and Technology INDUSTRIAL TECHNOLOGY DEVELOPMENT INSTITUTE	DOCUMENT CODE	RM-ITDI-R&D-06-01
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Where:


The probability rating is:

LIKELIHOOD / PROBABILITY RATING	PROBABILITY OF OCCURRENCE	DESCRIPTION
1	Very Low	<3% chance
2	Unlikely	between 3% and 10% chance
3	Fair	between 10% and 50% chance
4	Significant	between 50% and 90% chance
5	Near Certain	> 90% Chance

Prepared by:

Review by:

Approved by:


DR. MARISSA A. PAGLICAWAN
 Head, Risk Management Group


DR. DIANA L. IGNACIO
 Quality Management Representative


MARIA PATRICIA V. AZANZA, Ph.D.
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Risk Management Manual

SECTION

RISKS AND OPPORTUNITIES

EFFECTIVITY DATE

01 September 2016

TITLE

**RISK MANAGEMENT - RESEARCH &
DEVELOPMENT (R&D) GROUP**

DOCUMENT TYPE

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While the Impact is:

For time basis: $N \times D = \text{Project} - \text{Week}$

Where: N = Number of Project ; D = Duration (in weeks, months or years)

IMPACT	PRODUCT / SERVICE QUALITY / TIME	PROCESS CHANGES
1 (Insignificant)	Some negative impact; Duration delay in less than 1 week	Remains well within acceptable tolerances
2 (Minor)	Negative impact; Duration delay in less than 2 weeks	Requires very minor changes in production
3 (Moderate)	Negative impact with minor significance; Duration delay in less than 4 weeks	Requires modest changes in production, requires work-arounds to meet acceptable tolerances
4 (Major)	Negative impact with minor significance; Duration delay in less than 6 weeks	Extensive work-arounds maybe/are necessary
5 (Severe)	Critically negative impact; Duration delay more than 6 weeks	Even the work-arounds present significant risk, there is no alternative solution

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D. Risk Classification

RISK LEVEL	DEFINITION
HIGH 9 and above	Because concerted and continual emphasis and coordination may not be sufficient to overcome major difficulties, these events must be placed in the program and fully funded. They are likely to cause significant disruption in the schedule, increase in cost (relative to the total production cost of the product), and/or degradation of technical performance.
MEDIUM 6 - 10	Special emphasis and close coordination will be required to mitigate this risk. Should this risk occur significant disruption of schedule, increase in cost (relative to the production cost of the product) and/or degradation of technical performance is likely.
LOW 5 and below	Normal emphasis and close coordination should be sufficient to mitigate major difficulties. However, should this risk occur, there is potential for disruption of schedule, increase in cost (relative to the production cost of the product), and/or degradation of technical performance. Fund at the risk-adjusted value.

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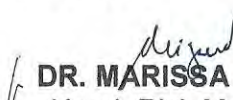
E. Risk Identification, Analysis, Evaluation


RISK	RISK OWNER	LIKELIHOOD	IMPACT	RISK FACTOR	TREATMENT / ACTION PLAN	DOCUMENTED INFORMATION
MANPOWER						
1. Lack of training competence, awareness; level of capability versus needed expertise	Division Chief / Project Leader / HRMS R&D Staff	1	2	2 (Low)	<ul style="list-style-type: none">Awareness & training, staff meeting, coaching, mentoring	<ul style="list-style-type: none">Competency, gaps & training need
2. Unavailability of staff (maternity leave, absences, health condition of staff., multitasking, intervening duties, training, scholarships)	Division Chief Project Leader / R&D Staff	2	3	6 (Medium)	<ul style="list-style-type: none">Proper management of staff development activities, assign assistant project leader, assign alternate staffInclude Personnel services in LIB (for additional staff/consultant-project proposal.Health and Wellness Program & Facilities	<ul style="list-style-type: none">Project proposal, logical frame
3. Lack of time to write report due to multitasking /	Project Leader / R&D Staff	2	4	8 (Medium)	<ul style="list-style-type: none">Start to write Technical Report when project is 75% completed	

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RISK	RISK OWNER	LIKELIHOOD	IMPACT	RISK FACTOR	TREATMENT / ACTION PLAN	DOCUMENTED INFORMATION
intervening activities					<ul style="list-style-type: none">Time managementDivide/distribute scope of report with all technical members for review of Project Leader	
4. Lack of technical writing skills	Project Leader / R&D Staff	2	2	4 (Low)	<ul style="list-style-type: none">Conduct echo seminar with workshopAwareness, training, coaching, mentoring	<ul style="list-style-type: none">Seminar / training programCertificateAttendance Sheet
5. Work (job) related attitude problems & interpersonal problems	Division Chief/ Project Leader / R&D Staff	2	3	6 (Medium)	<ul style="list-style-type: none">Conduct group meetings / team buildings.Personal counseling with supervisor / "elders".Motivation (reward) for good work.Reassignment to other duties / responsibilities / job rotation within division where she/he can be more effective.Moral Recovery Program	<ul style="list-style-type: none">Seminar / training programCertificateAttendanceSpecial Order
6. Brain drain; retirement;	Division Chief / Section Head /	2	3	6 (Medium)	<ul style="list-style-type: none">Avail of Balik-Scientist program.	<ul style="list-style-type: none">

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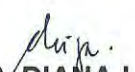
RISK	RISK OWNER	LIKELIHOOD	IMPACT	RISK FACTOR	TREATMENT / ACTION PLAN	DOCUMENTED INFORMATION
rationalization; migration of technical staff	R&D Staff				<ul style="list-style-type: none">Preparation of Succession Plan.Program on Organizational Knowledge Management to include:<ul style="list-style-type: none">~ stewardship programfull documentation of experience and tacit knowledgeMore info on webpage / LAN / WAN	<ul style="list-style-type: none">Succession PlanGuide / manual on management of organizational knowledgeKnowledge management (c/o TSD)
MACHINE (EQUIPMENT & FACILITIES)						
1. Unexpected breakdown; lack of spare parts from abroad	Division Chief/ Project Leader / R&D Staff	2	4	8 (Medium)	<ul style="list-style-type: none">Upgrading of old / obsolete equipmentRegular inspection, preventive maintenanceRegular calibrationProvision of budget for repairProvision of spare parts	<ul style="list-style-type: none">Equipment Maintenance Schedule / Equipment Maintenance RecordCalibration plan versus actualCOA policy on repair > or = 30% of acquisition cost of the equipment, beyond

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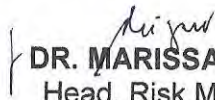



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RISK	RISK OWNER	LIKELIHOOD	IMPACT	RISK FACTOR	TREATMENT / ACTION PLAN	DOCUMENTED INFORMATION
2. Clean and orderly working area / building	R&D Divisions	3	2	6 (Medium)	<ul style="list-style-type: none"> of common breakdown Regular inspection & identification of unserviceable equipment, etc. Proper & immediate disposal of unserviceable equipment, etc. 	<ul style="list-style-type: none"> economic repair. MRs Inventory Auction
3. Power failure / fluctuations	Engineering Group and Divisional Representative	1	2	2 (Low)	<ul style="list-style-type: none"> Utilize the generator as back-up power supply Make operational the portable generator set. Provide UPS/AVR for sensitive Laboratory equipment. Provision for budget. 	<ul style="list-style-type: none"> Inventory of generator set
4. Internet of Things (IoT); slow / intermittent internet connections	MIS and Divisional Representative	1	2	2 (Low)	<ul style="list-style-type: none"> Designate area for report preparation (training / meeting / conference room). Group workshops on-line / network for TR. 	<ul style="list-style-type: none">

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RISK	RISK OWNER	LIKELIHOOD	IMPACT	RISK FACTOR	TREATMENT / ACTION PLAN	DOCUMENTED INFORMATION
5. Lack of area conducive to writing the Terminal Report	Project Leader / R&D Staff	2	3	6 (Medium)	<ul style="list-style-type: none">Designate area for report preparation like training, meeting or conference roomGroup workshop on-line / network for Terminal Report	
MATERIALS / SUPPLIES						
1. Lack of supplies & materials ~ water ~ seasonal raw Materials* ~ chemicals	End-user Project Leader / Staff	2	4	8 (Medium)	<ul style="list-style-type: none">Look for substitute raw materials, if no bidderSource from non-accredited biddersEmergency purchase (cash advance)Use alternate methodsSourced-out chemicals from other divisionsRegular accounting / inventory of supplies and materialsInclude in PPMP and revise (as needed, with	<ul style="list-style-type: none">Government policiesLDDAPCentralize database of chemicalsPPMP and justification

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2. Quality of materials / samples submitted	End-User/ Project Leader / R&D Staff	1	4	4 (Low)	justification) • FO 3: inform client of quality of materials / samples submitted if possible replaced as needed. • Require materials sample specification from source.	• Analysis of materials
MONEY / FINANCE / BUDGET						
1. Lack of SDO/Cash Advance (Regular = SDO/PCO = P15 to P25k)	Division Chief/ Special Disbursing Officer / Petty Cash Custodian Researcher	1	2	2 (Low)	• Request for increase in cash advance • Timely replenishment	• Request for increase of cash advance • Timely replenishment after 75% of cash advance
2. Insufficient funds for R&D projects	DBM Director Division Chief PMISD FMD	3	3	9 (High)	• Source out additional funds thru proposal(s) • Change milestone based on available budget	• Budget proposal for the year • Approved projects and budget
3. Low level of national spending for R&D / fiscal stress due to	DBM DOST FMD	3	3	9 (High)	• Reorganizing / resizing / re-engineering • Networking with	• Database of funding institutions; scope • Project proposals

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government budgetary deficits	Division Chief				preparation of projects proposals to other funding institutions (international); cooperative project with GIA.	
METHODS / PROCEDURES / EXPERIMENT SYSTEM						
1. Unexpected result(s) vs. milestone	Project Leader / Researcher	2	2	4 (Low)	<ul style="list-style-type: none">Use alternate method(s)Additional tests & experiments for failure analysis-factorsTraining on failure mode analysisImprove access to on-line journals	<ul style="list-style-type: none">c/o TSD
2. Inaccurate / inapt / weak experimental design	Division Chief / Project Leader / Concerned Staff	2	3	6 (Medium)	<ul style="list-style-type: none">Request PMISD to review submitted experimental design per projectImprove access to on-line journalsConsultation professional statistician	<ul style="list-style-type: none">Experimental designc/o TSD

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RISK	RISK OWNER	LIKELIHOOD	IMPACT	RISK FACTOR	TREATMENT / ACTION PLAN	DOCUMENTED INFORMATION
3. Analysis of results	Project Leader / Staff / Researcher	2	3	6 (Medium)	<ul style="list-style-type: none">• Purchase software/use freeware/open-source• Training & awareness• Coaching& mentoring• Request assistance from PMISD & other staff from other division• Consult professional statistician.	
4. Insufficient results / Insignificant data	Project Leader / Staff / Researcher	3	3	9 (High)	<ul style="list-style-type: none">• Conduct additional tests/experiments & confirmatory w/ in 2 months• Quarterly reports to include all data, info, tests & experimental results, problems encountered• Assign alternate staff, Assistant Project Leader study	<ul style="list-style-type: none">• Tables / graphs


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5. Inappropriate recognition & acknowledgement / authorship	Division Chief / Project Leader	2	2	4 (Low)	<ul style="list-style-type: none">Discuss with EXECOM for possible Policy/Guidelines.Conduct IP Seminar	<ul style="list-style-type: none">Policy/Guidelines
~ Paper/poster						
<ul style="list-style-type: none">Customer property: deterioration* / spoilage* / contamination of raw materials / samples due to mishandling / improper storage		1	2	2 (Low)	<ul style="list-style-type: none">Prompt and proper storage and handling<ul style="list-style-type: none">Proper labelling / codingCoordinate with other divisions(s) for alternate storage of raw materials / samples.	<ul style="list-style-type: none">Stickers with label / codesCustomer Supply Logbook with code, date, etcProduction Data Form (FPDF-F1).
<ul style="list-style-type: none">Possible violation / incomplete compliance from local laws, standards such as: ~ Environmental Laws (SWA, clean		1	3	3 (Low)	<ul style="list-style-type: none">Awareness seminars (internal) for hazardous wastesProper waste management / disposal of unserviceable equipment.	<ul style="list-style-type: none">Memo & attendance and seminar reportsSelf-monitoring report (quarterly) c/o ITDI-PCO.EMS / EMR

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Air, Clean Water, Hazardous Wastes Act)* ~ Food Laws (FS, GMP, HACCP)* ~ Techno Transfer Law ~ OSH (Pilot Plant, Fabricated Machine) ~ Biofuel Act* ~ Renewable Energy* ~ GEMP					<ul style="list-style-type: none">• Periodic emission test for gen set.• Operation test for gen set.• Schedule / planning of PCO (annual plan)• Help industries in awareness & compliance.	<ul style="list-style-type: none">• Hazardous waste report, ECC
<ul style="list-style-type: none">• Incomplete compliance with standards in tests and analysis such as: ~ ASTM ~ ISO ~ JIS ~ EU ~ AOAC* ~ PNS ~ BAM-MICRO* ~ ISTA*	Division Chief / Project Leader / Staff	1	2	2 (Low)	<ul style="list-style-type: none">• Purchase / upload updated copies of standards• Awareness / networking within ITDI division / laboratories• Check with other DOST institutes for free memberships / access to standards.• Continuous membership(s)	<ul style="list-style-type: none">• Pdf file and print-outs of standards.

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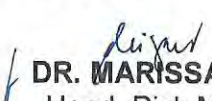


RISK	RISK OWNER	LIKELIHOOD	IMPACT	RISK FACTOR	TREATMENT / ACTION PLAN	DOCUMENTED INFORMATION
~ FDA*						
<ul style="list-style-type: none"> Lack of acknowledgment in specific S&T areas; multi-discipline; separate from DOST 	Division Chief TSD PMISD	2	2	4 (Low)	<ul style="list-style-type: none"> Webpage update (more info) c/o MIS Proper acknowledgment, improve ICT c/o MIS/TSD Branding c/o TSD, improve ICT c/o MIS/TSD Develop promotional strategy. 	<ul style="list-style-type: none">
<ul style="list-style-type: none"> Improper of use of ITDI assistance / intention in product labels (because of good perception); service logo and name and no. 	Division Chief TSD DOST-ROS	1	2	2 (Low)	<ul style="list-style-type: none"> Existing policy on not using ITDI name & logo in test and analysis. Improved monitoring (c/o TSD and DOST-ROS) 	<ul style="list-style-type: none"> Complaints from competitors


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F. Risk Treatment:

- **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.

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G. Risk Register and Action Plan

Category	Risk Identification	Risk Analysis		Risk Factor	Treatment (Accept /Mitigate /Transfer/Terminate) / Action Plan	Responsible Person	Timeline
		Probability	Impact				
Money / Finance / Budget	Insufficient funds for R&D projects	3 Moderate	3 Moderate	9 Medium	Accept ~ Source out additional funds thru project proposals ~ Change milestone based on available funds	Division Chief / Project Leader	Call for schedule of project proposal by Granting Institutions. As necessary
Money / Finance / Budget	Low level of national spending for R&D / fiscal stress due to government budgetary deficits	3 Moderate	3 Moderate	9 Medium	Accept ~ Reorganizing / right sizing / re-engineering	Top Management	2018 - 2019
Methods / Procedures /Experiment /System	Inaccurate analysis of results	3 Moderate	3 Moderate	9 Medium	Mitigate ~ Purchase software / use freeware / open- source ~ Competency upgrading	Project Leader	2017 – 2018 2017 - 2021

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					~ Consult professional statistician.		
Methods / Procedures /Experiment /System	Insufficient results / insignificant data	3 Moderate	3 Moderate	9 Medium	Mitigate ~ Conduct additional tests / experiments & confirmatory within 2 months. ~ Prepare quarterly reports to include all data, information, tests and experimental results, and problems encountered. ~ Assign alternate staff, Assistant Project Leader study.	Project Leader	Within the project duration


Legend:

* - Not applicable to Materials Science Division (MSD) and other division.

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