Bendigo Kangan Institute

Compliance Framework

May 2026

Contents

1. About this framework

This Framework explains how legislation and other obligations set the governance standards across the Institute. It applies to all Bendigo Kangan Institute. Commitment Statement

Bendigo Kangan Institute (BKI) is committed to providing vocational education programs that lead to quality outcomes for students, employers and the community. As a public sector entity, the Institute achieves these outcomes pursuant to Government requirements outlined in this Framework.

VETASSESS and eWorks as a distinct trading arm, form a part of BKI and operate under the overarching BKI Compliance Framework. VETASSESS maintains some unique compliance obligations in recognition of an operating model with a more international focus in its operations.

This Framework assists the Institute to control its operations, realise and address any gaps and apply a managed approach to assuring the Institute's compliance within a complex regulatory setting. It seeks to develop and embed a culture of accountability, participation and responsiveness where all staff understand their individual and collective responsibility for compliance, quality processes and outcomes.

Compliance obligations change as laws and policies adjust to evolving community expectations which will require the Framework to be regularly monitored and reviewed. In addition, Government, regulators, industry and the public expect the Institute to act within the rules and with integrity.

2. The Framework

This Framework helps the Institute navigate the complex layers of legislation and regulation that govern how it operates. The Institute has created this Framework as a network of interconnecting obligations, including:

- its establishing Act
- whole-of-government laws and obligations
- universal laws and obligations such as health and safety or privacy
- specific legislative obligations that relate to the Institute as a vocational education provide key internal documents including the strategic plan, delegations and policies.

This Framework integrates reporting across three sections:

- Section 1: Compliance Registers
- Section 2: Policy Development and Compliance
- Section 3: Audit Review and Systems.

3. Whole of Government

As **a public sector entity**, there is a range of overarching laws and obligations that apply to the Institute.

3.1 Public Administration Act

Public entities are subject to the *Public Administration Act 2004* (Vic). This Act sets the over-arching integrity and governance standards for the whole of the Victorian public sector.

Examples of key requirements in this Act are:

- **public sector values** – all Board members and employees to perform their role in line with these values

- **public sector employment principles** – these principles enshrine fair and merit-based recruitment and equal opportunity employment
- **integrity standards** – these are the individual and collective standards, duties and accountabilities of Board members

3.2 Financial Management Act

The Institute is also a **public body**. Public bodies are subject to the *Financial Management Act 1994* (Vic) (FMA).

The FMA sets financial standards and accountabilities for the Victorian public sector. The *Standing Directions of the Minister for Finance 2018* is an important tool in implementing these standards.

Part of these obligations include providing the Minister with an annual report. The annual report is then tabled or reported in Parliament.

Public bodies also have performance reporting obligations during the year. We also need to ensure compliance with the *Victorian Government Risk Management Framework*.

3.3 Victorian Public Sector Commission (VPSC)

The VPSC aims to strengthen the public sector's efficiency, effectiveness and capability. The VPSC maintains and advocates for public sector professionalism and integrity.

The VPSC issues binding obligations to public officials. These include the *Code of Conduct for Victorian Public Sector Employees* and the *Code of Conduct for Directors of Victorian Public Entities* which applies to board members.

It also issues generic guidance on whole-of-government obligations.

3.4 Watchdog Agencies

There are a range of public watchdog agencies set up by the Victorian Parliament. They have the power to:

- set certain integrity and performance standards for the Victorian public sector; and
- investigate public entities to ensure they are working effectively, efficiently and in compliance with its obligations.

Some examples of watchdog agencies include the Victorian Ombudsman, the Victorian Auditor General's Office (VAGO), and the Independent Broad-based Anti-corruption Commission (IBAC).

3.5 Other whole of government laws and obligations

There are many other laws that apply to the Institute.

Other government departments can also issue directives across the whole-of-government.

A more complete list of whole-of-government laws and obligations is attached in the schedule in Section 13.

In addition, VETASSESS as a gazetted skilled migration assessing authority have a range of specific obligations that apply to them. Key obligations that apply to VETASSESS are the Guiding Principles

and standards for Skilled Migration Assessing Authorities issued by the Department of Employment and Workplace Relations (DEWR) and Trades Recognition Australia (TRA) Service Deed.

4. Establishing Act

The Institute was established as a TAFE under the *Education and Training Reform Act 2006* (Vic). This Act:

- sets out our purpose, role, functions, powers, and key governance obligations;
- defines what we do, how we do it and why;
- limits our activities by preventing activities inconsistent with our core functions; and
- can impose extra obligations on top of the usual whole-of-government obligations.

Under this Act, TAFE functions are to:

- oversee and govern the Institute efficiently and effectively and to prepare periodic strategic and management plans for the Institute;
- provide efficient and effective technical and further education programs and services responsive to the needs of industry, students and general community;
- provide efficient, effective adult, community and further education programs and services which are responsive to community needs and to consult local government about the provision of these services and programs;
- offer and conduct a course of study leading to the conferral of a higher education award;
- confer higher education;
- make adequate arrangements for persons and groups which have not had or do not have adequate access to technical and further education programs and services;
- conduct research, development, education, training delivery on a commercial basis for other businesses; and

prepare, publish, distribute or license the use of literary or artistic work, audio / visual material or computer software.

5. Human Rights

Public entities have specific requirements under the Charter of Human Rights and Responsibilities 2006 (Vic). These include to:

- act compatibly with the rights set out under the Charter;
- give proper consideration to the Charter rights when making decisions; and
- only limiting Charter rights in a way that is lawful and reflects the least restriction on the relevant right.

There are two external bodies that have distinct roles in regard to the Charter. These are:

- the Victorian Ombudsman, which can consider whether a public entity's actions are compatible with the Charter; and
- the Victorian Equal Opportunity and Human Rights Commission, which has an education function in relation to the Charter.

6. Information laws

There are three Acts that apply to how the Institute collects, handles, discloses information and responds to information breaches. These are the:

- *Privacy and Data Protection Act 2014* (Vic)
- *Privacy Act 1988* (Cth)
- *Freedom of Information Act 1982* (Vic).

7. Universal laws and obligations

There are many laws and obligations that apply to all businesses or people in Victoria, not just the government. These include the *Occupational Health & Safety Act 2004* (Vic) *and the Equal Opportunity Act 2010* (Vic). The regulators for these roles are the:

- Victorian WorkCover Authority, which oversees Occupational Health and Safety (OHS) legislation; and
- Victorian Equal Opportunity and Human Rights Commission, which conciliates complaints with regard to the Equal Opportunity Act.[1]

We need to follow these laws and obligations the in the same way as any other organisation.

8. Internal Documents

Some obligations that apply to the Institute are reflected in government policies, codes of practice or regulations.

A Minister may have issued ministerial directions, statements of expectations or obligations. The Secretary of the Department of Education and Training may have issued guidelines or notifications that we provide certain information.

The Board is required to endorse a strategic plan and operational plans to guide the Institute's operations. As well, the Board and/or Chief Executive Officer will from time to time develop and implement policies to define the compliance regime of the Institute consistent with Government laws and obligations. These internal documents are as important as formal legal frameworks. They represent how we work through our obligations and deliver on our commitments.

9. Compliance and Self-Assurance

The Institute is deliberately shifting its focus from pure compliance to working toward quality assurance and measuring outcomes.

Compliance means adhering to the requirements of laws, industry and organisational standards and codes, principles of good governance and accepted community standards (AS 3806-2006, Australian Standard: Compliance programs).

Managing compliance supports the Institute to:

- act in the public interest;
- guard the welfare of its people and students;
- manage public funds responsibly and ethically;
- demonstrate integrity in all of its dealings;
- maintain relevance as a leading vocational education provider; and

[1] Commonwealth legislation also applies to discrimination and human rights. The Australian Human Rights Commission can also hear and conciliate complaints about discrimination and human rights.

- ensure ongoing registration with regulatory authorities meet eligibility requirements to receive government funding

Self-Assurance is the way the Institute manages its operations to ensure a focus on quality, continuous improvement and ongoing compliance. Self-assurance focusses on how the Institute integrates systems, checks and balances to support compliance within its design and on an ongoing basis, learning from its practices and finding ways to continuously improve.

Self-assurance is an important part of managing risk and demonstrates the Institute's commitment and capability to deliver quality training.

At BKI, the Education Design and Self-Assurance Hub is accountable for the Institute's Courseware Lifecyle framework, ensuring a consistent approach for the end-to-end Courseware Lifecyle enabling BKI to be responsive to industry needs and keep abreast of change.

The Self-Assurance team is responsible for a consistent and robust approach to education quality systems and the self-assurance model within education delivery, ensuring that self-assurance is implemented and operationalised as part of the annual cycle.

The Hub teams work closely with teaching centres, governance, risk and compliance, ICT and external providers to deliver excellent outcomes for our students through high-quality curriculum, courseware and processes.

10. Compliance Pillars

The Institute manages its compliance obligations against five 'Compliance Pillars':

Financial Controls - As a public sector entity, corporate entity and TAFE, BKI is required to comply with specific financial management practices to guard against the risk of fraud and corruption and enable our systems to ensure the prudent use of public resources. Our compliance with our financial obligations is supported by internal checks and balances and the Board's appointed Internal Auditor. This Pillar focuses on the Institute's compliance with obligations that are centred on financial control. An element of this is financial viability. This Pillar is not intended to measure financial performance beyond compliance.

Accountability and Integrity - Accountability and Integrity is about being responsible and answerable for our decisions, actions and conduct, how we learn from past mistakes and experiences and how we act in accordance with ethical standards.

People, Wellbeing and Safety - People, Wellbeing and Safety is about the people who we connect with and our duty of care to them, whether that be students, customers, employees or contractors. It is also about the expectations of public sector entities in facilitating people to have equitable opportunity and access to employment and student opportunities and, how we work to provide a positive and safe learning and work environment.

Academic Quality - Academic Quality is about how we deliver our educational services. This Pillar covers the five key phases of the student journey, is mapped against the Standards for Registered Training Organisations (RTOs) 2025,[2] together with specific State and Federal legislative obligations that relate to the Institute's functions as a vocational education provider and trainer.

[2] Marketing and Recruitment, Enrolment, Support and Progression, Training and Assessment, Completion, Governance Arrangements.

VETASSESS –. In recognition of revenue and operating models unique to VETASSESS, VETASSESS has several additional compliance obligations.

All compliance obligations including VETASSESS' unique obligations are reported to the Financial, Audit and Risk Management Committee (FARMC) on a quarterly basis. VETASSESS' unique obligations are also reported to the VETASSESS Committee.

This Framework covers the following compliance activities:

- identifying obligations;
- identifying potential breaches;
- responding to potential breaches;
- internal reporting; and
- attestation processes.

10.1 Identifying obligations

The Institute has a wide range of compliance obligations including legislation, directives, permits, licences, orders issued by regulators, judgements of courts or tribunals, protocols and relevant industry codes and standards. Compliance obligations may also be included within contracts and agreements including government funding agreements.

Monitoring contractual compliance obligations is managed via the Contract Management System (CMS) and responsibility rests with the Contract Manager, with Governance, Risk and Compliance to provide guidance.

The Institute is also required to comply with its own policies and procedures,

Compliance obligations can be identified through:

- horizon scanning: receiving information and proactively looking for information about changes in the Institute's regulatory and compliance environment, such as regulatory updates and media releases;
- communication with regulatory, government and industry bodies;
- legislative updates;
- professional associations and memberships;
- internal communication; and
- research and benchmarking with other institutes (i.e. better practice).

The Institute maintains a consolidated list of compliance obligations in the GRC system.

10.2 Identifying potential breaches

A breach or 'compliance failure' is an act or omission leading to the Institute failing to meet its compliance obligations. The Institute applies the following principles to the identification of potential breaches:

- Recognising that mistakes happen;
- Employees are not penalised for reporting breaches or for making genuine mistakes;
- The Institute's Employee Code of Conduct applies where employees intentionally do not report breaches.

- Staff can choose to anonymously report improper conduct through the Institute's Speak Up service or by contacting IBAC to make a public interest disclosure complaint.[3]
- Deliberate or negligent breaches of obligations are not tolerated and are dealt with under the Institute's Improper Conduct Policy and Procedure and Employee Code of Conduct as appropriate.

By reporting potential breaches, the Institute can identify systemic issues and ways to improve its processes.

In addition to staff reporting, potential breaches can also be identified through other sources, including:

- self-assessments;
- attestation processes;
- audit reports;
- fines, penalties, damages or legal costs;
- adverse publicity or media attention;
- inquiries from regulators, integrity or government bodies;
- allegations, complaints and feedback from stakeholders;
- OHS incidents; and
- systemic errors / problems.

10.3 Responding to potential breaches

The Executive is responsible for ensuring resources and practices are in place to consider and respond to potential breaches. These include:

- collecting information about a potential breach – What happened? When did it happen? Why did it happen?;
- confirming whether a breach has indeed happened and if so, the severity of the breach using the Institute's *Breach Assessment Scale* (refer below to 11.4
- establishing treatment actions and ensuring a response is proportionate and necessary to the risks posed by a breach;
- sharing information about significant breaches and proposed treatments with Governance Risk and Compliance (GRC);
- consulting with GRC if unsure how to proceed;
- reporting all breaches (regardless of severity) to GRC on a quarterly basis, via the Institute's Governance, Risk and Compliance system; and[4]
- reporting breaches to regulators if required.

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[3] Details of BKI's Speak Up Service are outlined in the Institute's *Improper Conduct Policy and Procedure*. In accordance with the *Public Interest Disclosure Act 2012 (Vic),* BKI has established this policy and procedure to:

a) explain public interest disclosure complaints about the Institute or any ofits employees or contractors must be made to IBAC
b) explain what supports and assistance are available to enable the reporting of suspected improper conduct
c) explain how BKI considers information about suspected improper conduct
d) summarise BKI's obligations under the Act.

[4] Risk and Integrity Leads have access to the Institute's Governance, Risk and Compliance System

10.4 Breach Assessment Scale

Significant Breach	Moderate Breach
Examples include: • A material compliance deficiency that a reasonable person would consider has a material / substantial impact on the Institute's or State's reputation, financial position or financial management. • Loss of Australian Skills Quality Authority (ASQA) / Victorian Registration and Qualifications Authority (VRQA) registration or other key license or accreditation. • Significant legal penalties or regulator sanctions applied. • Criminal convictions of employees, contractors or Directors in connection with their Institute duties. • Institute prosecution of employees, contractors or Directors. • Loss of course accreditation or license restriction / sanction which impacts on key operations, strategy or budget.	Examples include: • A requirement that the Institute is not fully compliant with. • Legal proceedings resulting in minor or no legal penalties. • Financial penalty imposed due to a compliance breach. • Institute receives warning or notice from regulator to rectify breaches and/or undertake specific improvements without penalty • Minor compliance breach or non-material series of small breaches, identified and rectified internally. • Correspondence from regulators acknowledging actions taken without further action needed.

10.5 Internal Reporting

GRC facilitates reporting of aggregated data to the Executive and FARMC on a quarterly basis.

The quarterly compliance report provides the Executive Team and FARMC with an understanding of the Group's compliance environment, including an updated status of compliance against key focus areas and awareness of compliance health in accordance with this *Framework.* As part of compliance reporting, a Policy Overview is also provided which indicates the Institute's point in time policy currency.

For each of BKI's compliance obligations maintained, the Institute's reports the following:

• Compliance Mechanism – controls in place which support and assure compliance is being met;
• Assessment Mechanism – how the Institute's compliance is assessed (e.g. external audit);
• Compliance Rating – Compliant, Partially Compliant or Non-Compliant. See Section 1 Compliance Register - Compliance Rating Legend; and
• Summary of Compliance – A high level summary of compliance status to justify compliance rating. The summary may include commentary following a compliance assessment and/or variances to compliance rating.

For reporting of specific breaches, portfolio business units are responsible for completing the *Breach Reporting Template* accessible here.

For compliance non-breaches, systemic issues and improvement opportunities may also be captured via lessons learned and/or continuous improvement and corrective action registers.

10.6 Attestation Processes

The Institute operates an attestation process to inform the Board's end of year financial reporting responsibilities and where necessary to declare any compliance deficiencies to Government, such as part of the Standing Directions to the Minister for Finance under the *Financial Management Act 2004* (Vic).

Compliance breaches must also be reported as part of the TAFE Annual Return – Breaches and Rectification Actions.

10.7 Policy Development

The Board and Chief Executive Officer are accountable for the Institute's policy development program. Relevant executives are assigned functional responsibility for ensuring policies and procedures are relevant, accurate and updated in accordance with the Institute's *Resources Review Cycle.*

In addition to complying with relevant BKI policies, VETASSESS and eWorks have developed additional policies to meet operating requirements outlined in:

- Federal skills assessment agreements with the Department of Workplace Relations and Department of Education
- International Standards (ISO) certifications (ISO 9001:2015, ISO 27001:2022)

VETASSESS' Executive Director is accountable for VETASSESS/eWorks specific policies. The policies are managed in accordance with the VETASSESS/eWorks Quality Management System.

10.8 Audit and Systems

The relevant executive is accountable for the rectification of actions arising out of audits, reviews or investigations and for ensuring the Institute has the required systems to support compliance. This includes actions arising from all audits, reviews and investigations, whether commissioned by the Institute through its *Strategic Internal Audit Plan (SIAP),*[5] by the Board, by the Chief Executive Officer, or externally by the Institute's regulators or an oversight body. Relevant Executives or delegated staff are assigned responsibility for the implementation of rectification action in accordance with their functional responsibility.

The Board is responsible for overseeing the SIAP.

10.9 Responsibility

Board/FARMC

- Overarching responsibility for monitoring legislative compliance pursuant to this Framework.
- Responsible for engaging the Institute's Internal Audit and implementing a *SIAP.*
- Provides an end of year declaration to the Victorian government on compliance.
- Attests to the Institute's compliance with a range of obligations, including the Standing Directions.

[5] The Institute's Strategic Internal Audit Plan is published on the Governance Risk and Compliance intranet page, here.

- Satisfies itself the Compliance Framework accurately reflects the Institute's compliance obligations.

Chief Executive Officer

- Provides leadership and tone for compliance across the Institute and a Speak Up culture.
- Reports to the Board on policy development on an end of year basis.
- Reports to the Board on audit rectification on an annual basis.
- Annually reports to the Board on the development, review, application and compliance of Institute policies.

Chief Operating Officer

- Executive Sponsor for Legislative Compliance, Risk Management and Audit.
- Provides quarterly reporting to Board on legislative compliance.

Executive Team Members

- Although individual executives may be responsible for ensuring the development of compliance mechanisms, the Executive Team has collective responsibility for legislative compliance oversight and action.

Head of Governance Risk and Compliance

- Leads the Institute's Legislative Compliance, Risk Management and Audit programs.
- Coordinates ongoing development of compliance management processes.

Senior Leadership Teams / Managers

- Implements rectification actions.
- Reports compliance breaches to Governance Risk and Compliance on a quarterly basis and significant breaches as they occur.
- Ensures staff are aware of compliance obligations.
- Identifies new and changing compliance obligations.

Individual Employees

- Adhere to Institute policies and procedures.
- Identify compliance risks and issues.
- Deliver controls and rectification plans.

10.10 Related Documents

- Employee Code of Conduct
- Feedback, Policy and Procedure
- Improper Conduct Policy and Procedure
- Policy and Procedure Focus Group Committee Terms of Reference
- Risk Management Framework
- Self-Assurance Plan
- Strategic Internal Audit Plan

Context - public sector environment

Laws that apply to Bendigo Kangan Institute as a public sector entity

Agency-specific: establishing Act or terms of reference (sets the agency's purpose, role, functions, powers, and key governance obligations) and related regulations.

Whole of Government: Public Administration Act (PAA) and related codes and other integrity obligations. Financial Management Act and related Standing Directions, Instructions and Guidance, and associated obligations (e.g. compliance with the Victorian Government Risk Management Framework). Other whole of government laws.

Other obligations that apply

Government policy (agency-specific and whole of government). Ministerial directions, guidelines and statements of expectation. Guidelines and notification of information required by the Secretary under s 13A of the Public Administration Act. Premier's Circulars and other whole of government obligations (e.g. Appointment Guidelines). The agency's strategic and business plans, etc.

Public watchdogs

Victorian Ombudsman, VAGO, IBAC and other public watchdogs appointed by Parliament have the power to investigate and report on whether a portfolio agency is meeting required governance and performance standards.

Victorian Public Sector Commission

Promotes public sector integrity and good governance – e.g. issues whole of government integrity codes and requirements under the Public Administration Act, whole of government generic guidance, advice on executive remuneration levels.

On Board

The Victorian Government and the Victorian Public Sector Commission websites.

(Support – e.g. the Institute's *Governance Handbook,* which includes key policies and

Also acts as a **knowledge base and advisory** for the Institute's departments and teams.

Components of the *legislative governance framework*

Oversight and support by Governance Risk and Compliance

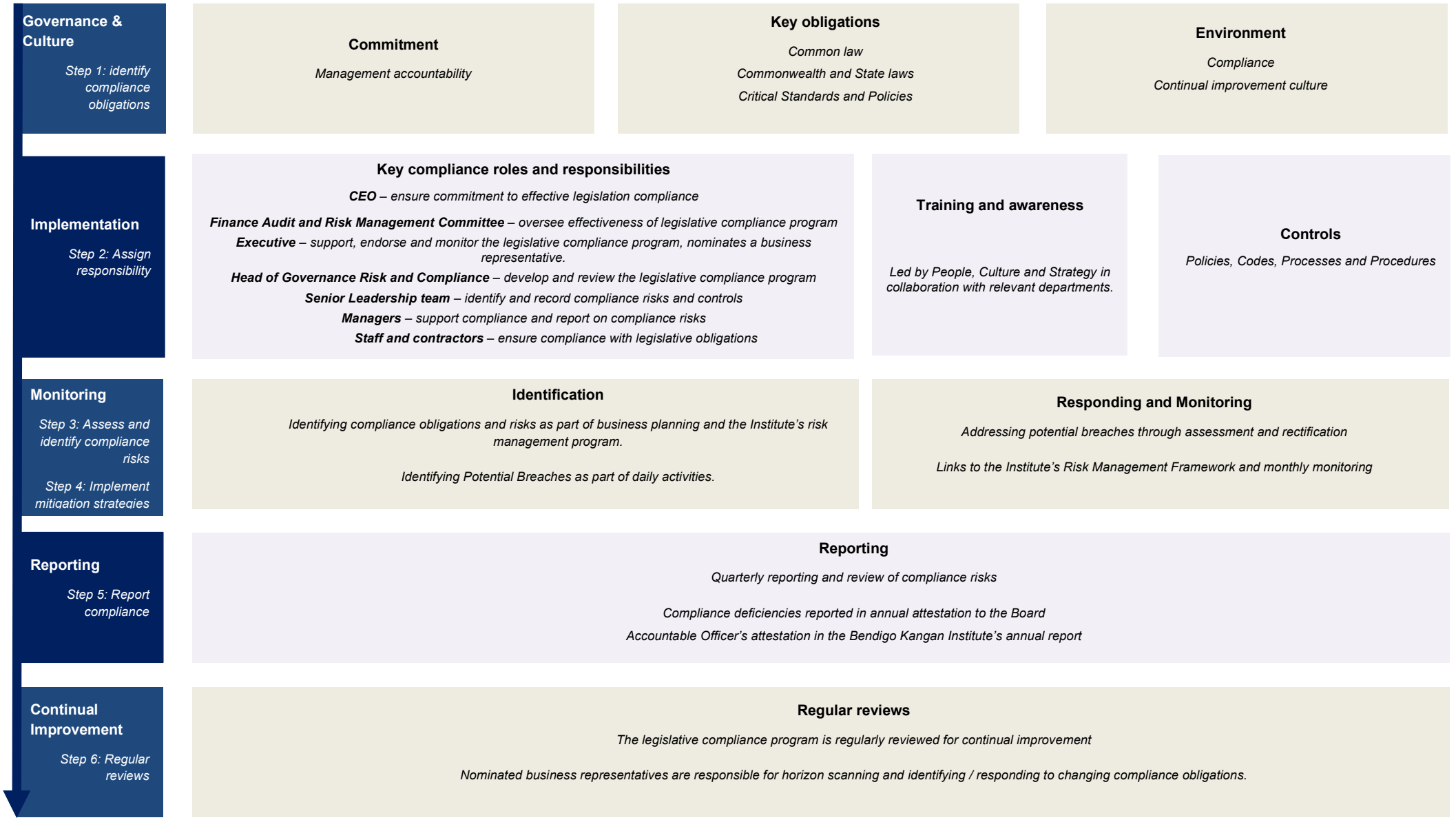
Partners with the business to facilitate compliance, understanding of obligations and treatment of breaches. Facilitates reporting and works to guard the Institute's integrity and protect its reputation as a vocational education provider and public sector entity. Coordinates policy development across the Institute.

Institute departments

Work to understand their legislative obligations, consults with and reports significant breaches to Governance Risk and Compliances. Responds and addresses breaches as they arise and shares information with Governance Risk and Compliance about breaches on a quarterly basis.

Nominated departmental representatives

Have access to the Institute's horizon scanning tool and identifies emerging changes to laws, regulations and standards. These representatives use these insights to brief responsible Executives and their respective areas on emerging and changing obligations. The work to facilitate compliance in accordance with annual plans and the rectification of breaches.


Governance & Culture
Step 1: identify compliance obligations
Commitment
Management accountability
Key obligations
Common law
Commonwealth and State laws
Critical Standards and Policies
Environment
Compliance
Continual improvement culture
Implementation
Step 2: Assign responsibility
Key compliance roles and responsibilities
CEO – ensure commitment to effective legislation compliance
Finance Audit and Risk Management Committee – oversee effectiveness of legislative compliance program
Executive – support, endorse and monitor the legislative compliance program, nominates a business representative.
Head of Governance Risk and Compliance – develop and review the legislative compliance program
Senior Leadership team – identify and record compliance risks and controls
Managers – support compliance and report on compliance risks
Staff and contractors – ensure compliance with legislative obligations
Training and awareness
Led by People, Culture and Strategy in collaboration with relevant departments.
Controls
Policies, Codes, Processes and Procedures
Monitoring
Step 3: Assess and identify compliance risks
Step 4: Implement mitigation strategies
Identification
Identifying compliance obligations and risks as part of business planning and the Institute's risk management program.
Identifying Potential Breaches as part of daily activities.
Responding and Monitoring
Addressing potential breaches through assessment and rectification
Links to the Institute's Risk Management Framework and monthly monitoring
Reporting
Step 5: Report compliance
Reporting
Quarterly reporting and review of compliance risks
Compliance deficiencies reported in annual attestation to the Board
Accountable Officer's attestation in the Bendigo Kangan Institute's annual report
Continual Improvement
Step 6: Regular reviews
Regular reviews
The legislative compliance program is regularly reviewed for continual improvement
Nominated business representatives are responsible for horizon scanning and identifying / responding to changing compliance obligations.

11. FRAMEWORK REPORTING

Section 1: Compliance Registers

The Institute reviews its compliance on a quarterly basis against the five compliance pillars. This review is informed by the Institute's Breach Reporting process described under the *Responding to Potential Breaches and Internal Reporting* sections of the *Compliance Framework* and is shared with the Senior Leadership Team for activation. Upon activation the review assessment is reported to the Executive, Finance Audit Risk Management Committee (FARMC) and Board. The Institute's Board is ultimately responsible for overseeing and ensuring the institute's compliance with its legislative obligations.

The Institute's compliance reporting is assessed against the following Grades, outlined below in the Compliance Reporting – Compliance Rating Legend. .

COMPLIANCE RATING LEGEND L

Grade	Description	Compliance definition
NC	**Non-Compliant**	Controls are not in place, or the requirements of the objective have not been met, or adequate, relevant and suitable information to form an objective determination on effectiveness was not available to demonstrate compliance. Findings noted are considered material in nature and require urgent remedial action. OR Systematic non-compliance identified.
PC	**Partially Compliant**	Key requirements of the objective have been met but only minor achievements in compliance have been demonstrated. Findings noted are considered significant and require correction. OR Instances of non-systemic non-compliance were identified.
C	**Compliant**	Controls are in place and requirements of the control objective have been met with some minor failures or breaches. Breaches are considered minor and require routine efforts to correct in the normal course of business. OR Compliance issues were not identified.
	**High Risk Obligation**	Obligations determined to carry a 'high risk' classification, in view of: • their impact on people, or • related risks within the Institute's Risk Register that carry a residual risk level, or • declared risk areas by the Australian Skills and Qualifications Authority (ASQA) per its *Regulatory Strategy 2020-22* . and ASQA's *Regulatory Risk Priorities 2022-23*. Obligations with a 'high risk' classification inform the Institute's effort and prioritisation of enhanced compliance.

Full quarterly compliance reports against the five compliance pillars are located in the GRC compliance system.

For more information about the Framework or for support on legislative obligations, contact a member of the Institute's Governance Risk and Compliance (GRC) team.

Email: riskandintegrity@kangan.edu.au