



**EMBRC**  
EUROPEAN  
MARINE  
BIOLOGICAL  
RESOURCE  
CENTRE

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# Plan for risk management and QA&IA system for EMBRC construction and operation phases

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April 2013

**The EMBRC preparatory-phase**

***Deliverable D7.7***



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# Report on Adoption of Risk Management & Quality Assurance

The European Marine Biological Resource Centre, EMBRC, will be a distributed Research Infrastructure of state-of-the-art research and training facilities at leading marine research stations across Europe. EMBRC will be organised as a European Research Infrastructure Consortium (ERIC) in accordance with EC Council Regulation 723/2009. Services and access to the infrastructure will be offered to the benefit of science, industry and the society at large. These aims will be reached through a set of defined objectives:

- Coordinate and enable access to marine model organisms for the RTDI community at large, including for the biomedical research community;
- Enable end-users to do high-level research in basic biology, marine biology and ecology by integration with modern technology and 'omics' platforms;
- Promote the use of existing marine model organisms and to establish novel ones;
- Build prototype equipment to maintain marine organisms in a marine-free environment;
- Provide advanced training and education to professionals in the life sciences;
- Enable efficient knowledge transfer to match biotechnology companies with the most appropriate marine infrastructure in Europe, thus facilitating the growth of spin-off companies in marine biotechnology

Attached to these objectives there are *threats*, which might prevent the EMBRC from achieving some of its stated *objectives*. The greatest immediate risk is that the EMBRC will not become a Research Infrastructure as defined by the **European Strategic Forum for Research Infrastructures** (ESFRI). Once this is achieved there are threats which will provide financial and reputational risks. Although not all risks can be mitigated from within EMBRC, our risk management policy and procedure is designed to reduce the probability of failure and to manage operational and strategic risks to EMBRC.

# EMBRC Risk Management and Quality Assurance Manual

## Chapter I: Risk Management

### I.1. Introduction to Risk Management

**DEFINITION:** RISK MANGEMENT is the structured approach by which we identify, assess, evaluate and control RISKS, and when necessary by taking action to reduce those RISKS. This process has to be planned, coherent and robust. It is not enough to deal with RISKS reactively, although we must sometimes do this also, but rather we must pro-actively look for RISKS then deal with them systematically

When we talk about ACCIDENTS or ADVERSE EVENTS, these are the tangible outcomes from RISKS. The damage from these outcomes may be felt in terms of HARM to: reputation; finance; research; safety; morale; efficiency; infrastructure; the environment etc., as demonstrated below. Through a systematic assessment approach, the risk management also prepares the organisation better to the unpredicted risks that may confront and threaten these processes.

An Adverse Event...	results in	Damage to...
Failure to retain key staff	results in	Quality; Planning; Reputation
Failure to organise meetings effectively	results in	Finance; Planning
Inadequate archiving system	results in	Quality; Planning
Failure to collect and disseminate data	results in	Legal; Quality; Finance
Failure of project management	results in	Quality; Finance; Planning

We therefore aim to reduce the number of ACCIDENTS or ADVERSE EVENTS by better controlling the RISKS leading to them. In order to do that, we assess the possible risks then evaluate each of them to identify those that are INTOLERABLE, and to focus efforts on reducing these to a level which we think is TOLERABLE.

To effectively control a RISK, we must try to understand where it comes from. The underlying CAUSES of RISK may arise from WEAKNESSES in the Consortium's own systems, or they may arise from THREATS from the environment in which we operate. Examples include: financial markets; politics and governments; legislation; contractual responsibilities; business or academic processes; human interactions; communication; natural disasters; malicious acts; equipment downtime or IT failure.

By dealing with the CAUSES of RISKS, we can render ADVERSE EVENTS less frequent.

An Adverse Event...	may arise from	Cause of Risk...
Failure to retain key staff	may arise from	Stress; Job dissatisfaction; Inadequate salaries
Failure to organise meetings effectively	may arise from	Lack of procedures; Inadequate attention to detail
Inadequate archiving system	may arise from	Inadequate IT hardware; Failure to meet user needs
Failure to collect and disseminate data	may arise from	Inadequate skills; Poor project planning
Failure of project management	may arise from	Poor training; Unclear expectations; No monitoring

## I.2. Managing Risk

There are two major components to the risk management process. These are the *Risk Register* and the *Gantt chart*. Information from the Risk Register is used by those within the EMBRC management structure to identify control procedures and to provide the governing bodies with the appropriate information. Therefore, it is important to ensure that the Risk Register is up-to-date at all times.

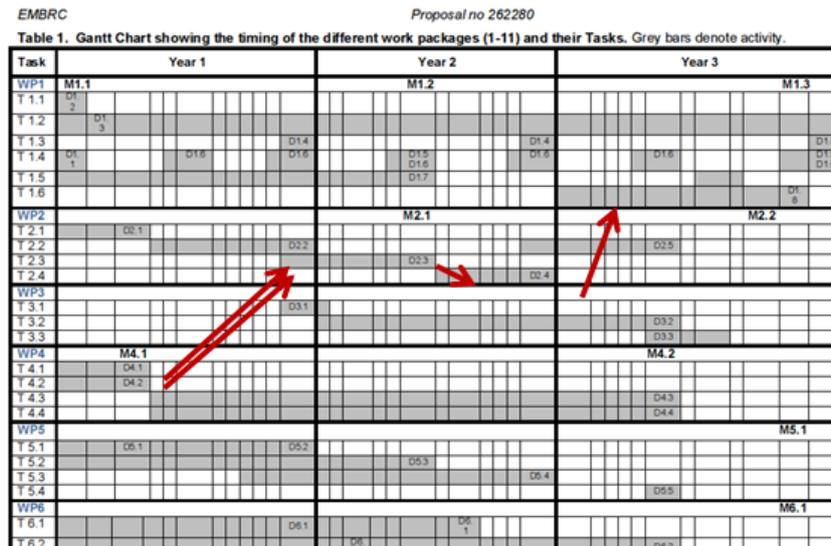


Figure I.1 An example of a Gantt chart - the Gantt chart for the ppEMBRC from the Description of Work

### I.3.1 Gantt chart

The Gantt chart summarises the schedule and defines the expected start and end date of each work task such as calls for on-site access or workshops, meetings and how other processes are planned to progress. The EMBRC uses a Gantt chart to display the work breakdown for the Consortium and when each work task is expected, as well as how long the piece of work will require for completion. The Gantt chart adds to the Risk Register by informing when each task is due and through the Risk

Register EMBRC management can interpret whether there is a likelihood of a task being delayed. Together with the *Standard Operating Procedures (SOPs)* and the *Quality Assurance System (Chapter 2)* the *Risk Register* and the *Gantt chart* constitutes the **EMBRC Quality System** (or Quality Policy).

### 1.3.2 Managing the Risk register

The Risk Register lists all the risks associated with the Consortium. Populating the Risk Register is a continuous task and requires input from individuals' at all organisational levels throughout the lifetime of the EMBRC.

During the preparation phase, the Risk Register of the EMBRC includes risks structured around each of the work packages, as well as other broader risks at the whole-project level. Post preparation-phase the EMBRC will consider any risk effecting the Consortium as well as risks structured around five general areas: Consortium Outcomes & Quality; Financial Management; Planning Processes; Stakeholders and Reputation; Legal and Statutory.

The Risk Register will be managed the EMBRC ERIC Secretariat. For each “*threat*” there is a RISK OWNER who is responsible for that risk; this may be the secretariat or an individual assigned to the task.

The Risk Register collates all the associated risks in one place and contains information flowing from risk description to relevant actions to reduce the risk. The software during the ppEMBRC only allows you to add information in that order. This activity generates data, which must be managed in the most efficient way possible. We should therefore administer the process by using a DATABASE. Once a risk is identified and assessed in the Risk Register, it is assigned a risk owner and a severity. A RISK may be low, moderate, elevated or severe, in terms of severity. Any risk that is moderate, elevated or severe will be brought to the attention of the risk owner and the EMBRC ERIC Secretariat. If the EMBRC ERIC Secretariat and the risk owner take appropriate action this should reduce the risk. Risks classed as elevated or severe will be shown to the relevant Committee or EMBRC ERIC Secretariat quarterly as an agenda item and provided on request if desired. The EMBRC ERIC Secretariat may then recommend an action to reduce the risk level.

The risk register is a “living document” which means that it will be continually updated. All risks will be viewed periodically, at least every 6 months. The person responsible for the risk management and quality assurance will liaise with relevant individuals and will periodically review the risks within the risk register. Risks with higher severity should be reviewed more often than lower class risks (i.e. risks with a lower risk score). When a risk register is used properly, it provides a process through which the management and governance bodies can see where action needs to be taken and where resources may need to be focussed in order to mitigate risk and keep EMBRC ERIC on track.



<p>This is where we identify and describe the risk we are concerned about.</p>	<p>This is where we keep a record of the current measures in place to reduce the risk.</p>	<p>This is where we assess the risk and evaluate whether it is tolerable or not.</p>	<p>If we need to reduce the risk, then this is where we record and track the actions to help us achieve this.</p>	<p>We prepare reports to monitor progress on key risks and to provide assurance to the Audit Committee</p>
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**Figure I.2 The flow of information within the EMBRC Risk Register**

### I.3.Risk & Management Software

The EMBRC risk and management software was previously planned to fulfil the following requirements:

1. The tool will be able to operate across a distributed network of users within all countries of the European Union.
2. The tool will be computer-based and will update with no significant delays (i.e. broadly in real time) when new data are entered.
3. The tool will be accessible from all current and future partner institutions (i.e. it should have the capacity to expand in future).
4. The tool will be secure to the outside world and will be compliant with EU law on data access, including access to personal information.
5. The tool will be accessible to up to 100 authorised individuals who can be allocated different rights of access depending upon their role (e.g. System administrator, partner institute manager, project manager, users).
6. All data will be backed up and recoverable in the event of systems failure.
7. The tool will interface with financial management and project management systems. It is recognised that the way in which the tool interfaces with other information sources across EMBRC is going to determine its utility.
8. The tool will use project delivery information and financial information to deliver reports of progress towards targets in all defined subsections of the business of EMBRC.
9. Reports will be generated automatically on a pre-determined schedule, or on command, and will be delivered to appropriate EMBRC management by e-mail.
10. The tool should be intuitive for users who are conversant with the web and the use of desktop computing.
11. The tool will have the facility for entering data by cutting and pasting from other standard database system.
12. The tool will cost <Euro 5k/year to maintain (exclusive of the system administrator costs and the costs of the time of those using the system).

## I.4.Future Plans for the Risk & Management Software

Software for the EMBRC community will be viewed with an aim to meet previous requirements. There are 3 general options:

- **Basic risk register:** It is possible to use a simple (Excel) spread sheet. While free this would prevent filtering which would mean generating reports and obtaining the correct data could be time consuming. The use of a spread sheet would mean that access would need to be open and associated to the intranet for people to obtain access. There could be multiple copies of the same document available at any one time, possibly leading to confusion. This would not be ideal.
- **In-house developed software:** This would involve front-end user in-put webpages which allows for a database to be populated. This would enable filtering and so reports on particular areas could be generated at random. Software could be in the cloud and individuals could have user access defined. However, this could take a couple of months to generate and would most likely incur a charge as this is above the requirements for a central service such as IT. The advantage is that this could be amended and adapted to use as required and would most likely cost less than commercially available software.
- **Advanced Commercial software:** There is a wide range of commercial software on the market (see table over page) however there is no guarantee that they are compliant with EU law on data access as many of them has headquarters in North America. Unfortunately it is not always transparent whether they are EU compliant.

While the price of commercial software has decreased significantly over the past few years, the prices are not always clear as often prices are not on websites. There may also be additional charges to incur. For instance, some may now offer free internet hosting (e.g. Symbiant) but others charge (e.g. Yodiz ~2780 Euros/Year). There may also be additional consultation fees which could cost 84 Euros/hour (e.g. Yodiz).

It is now clear that some of these software offer “modules” or units that provide the function of tracking budgets and invoices (e.g. Project Portfolio Office, Zilicus and Genius Project).

Software Company	Fulfills needs	Financial option?	Additional Charges	Base Cost
@Risk6	X	√	-	-
Cura Software <a href="http://www.curasoftware.com/">http://www.curasoftware.com/</a>	√	?	-	-
Iris <a href="http://www.irisintelligence.com/">http://www.irisintelligence.com/</a>	?	√ (Expert version)	-	-
Methodware (Kairos)	√	x	-	-
Symbiant	√	?	n/a	230 € ppm (for 5 licences)
Zilicus	?	x	-	11 € ppm i.e. 1100 €/ yr (for 10 users)
Clarizen (USA) <a href="http://www.clarizen.com/">http://www.clarizen.com/</a>	X	?	-	18 € ppm (if 36 mths paid in advance for 10 users 6500 €)
Psoda <a href="http://www.psoda.com/cms.php/home">http://www.psoda.com/cms.php/home</a>	√	√	-	10 €/module/mth †
Yodiz	X	x	-	18 € ppm (up to 10 users)
Project Portfolio Office <a href="http://www.projectportfoliooffice.com/">http://www.projectportfoliooffice.com/</a>	√	√	Internet Hosting: 2,790 €/yr; Consultant rate: 84 €/hr	37 € ppm (Up to 10 users); 34.2 € ppm (Up to 25 users)
Genius Project <a href="http://www.geniusinside.com/">http://www.geniusinside.com/</a>	√	√	-	3 options available pricing unclear

**Table I A table demonstrating a survey of current risk management software options available (survey performed February 2013).**

x Not suitable or no financial options; ✓ for yes; – for not apparent

† Free read-only access for customers or senior managers; and free account management with any of the modules which is required for adding, editing or deleting users. Or get a system administration license for three units per month (€ 31). The total number of users possible is not stated.

#### 1.4.1. Recommendations for the Risk & Management Software

The two workable options are the development of in-house software such as currently running or for the purchase of a commercial software licence. This may depend on IT arrangements and any risk system present at the host institute, which is yet to be decided. The budget for the risk software is likely to be what determines options which are available as is whether there is still a requirement for a financial component.

If it is decided that the software currently running in ppEMBRC is suitable then this could be extended for the purpose of the construction and operation phases with a fee for hosting, adaptation, maintenance and technical support ( $\leq 2,000$  €/ year), the total cost of this would be lower than that of the Project Portfolio Office internet hosting fee. The current software is capable of expanding to further users and has been designed with a view for further use such that most of the fields would not need to be amended, for example the Assessment section could remain without any changes.

If the budget is more considerable and a financial component to the software was required then a more extensive range of products could be considered than those demonstrated in Table I. The most expensive software was not considered knowing that a budget would be limited. Product Portfolio Office and Psoda are potential existing software systems that are suitable for use provided EMBRC has the needed of a financial component. Psoda may offer value for money however it is possible that there are hidden costs such as consultation and hosting.

## 1.5. Plans for the Risk Assessment Regime

Risk assessments are an integral part of the process in managing the risks in any business. It is practical therefore to have a written health and safety policy and risk assessment in order to eliminate or reduce risk to their employees and others who could be affected by their work activities. However, the exact requirements for this will be dependent on which country is chosen to host the EMBRC ERIC Secretariat.

The EMBRC, as a dispersed infrastructure, will operate as part of other facilities for example Goeteborgs Universitet, Sweden. Staff and visitors must operate under guidance from host institutes. However, it would be improper to fund individuals who then would have to work with low health and safety standards and thus a prerequisite for being a new EMBRC partner should be that health and safety regulations exist to a satisfactory standard.

However, if the Headquarters of the EMBRC does not fall under the domain of an existing infrastructure with its own risk assessment regime then the EMBRC will need to implement its own risk assessment regime such as detailed here.

A health and safety policy should be developed. The following statements could be used with a person responsible for each action or arrangements as described:

- Prevent accidents and cases of work-related ill health and provide adequate control of health and safety risks arising from work activities
- Provide adequate training to ensure employees are competent to do their work
- Engage and consult with employees on day-to-day health and safety conditions and provide advice and supervision on occupational health
- Implement emergency procedures - evacuation in case of fire or other significant incident.
- Maintain safe and healthy working conditions, provide and maintain plant, equipment and machinery, and ensure safe storage / use of substances
- There is a first aid and accident book located in a known and stated position

This should be signed off by the EMBRC ERIC Director and both the health and safety and the risk assessments should be reviewed every six months. The risk assessments should also be reviewed following an accident to help ensure that any accident does not reoccur. Risk assessment should also be reviewed as a consequence of changes in working practices, the installation of new machinery or equipment, new staff or new legislation. The risks to new and expectant mothers and young people should also be considered. The following template (over page) could be used for risk assessments.



<b>Hazard</b>	<b>Who will be harmed? And how?</b>	<b>What is in place?</b>	<b>Do you need to do anything else?</b>	<b>Action by whom?</b>	<b>Action by when?</b>	<b>Done (date)</b>
<i>Slips and trips</i>	<i>Staff and visitors may be injured if they fall over objects or slip on spillages</i>	<i>We carry out general good housekeeping. All areas are well lit including stairs. Staff keep work areas clear, e.g. no boxes or cables left in walkways, deliveries stored immediately, offices cleaned each evening</i>	<i>Better housekeeping is needed e.g. on spills</i>	<i>All staff, supervisor to monitor</i>	<i>01/10/2010</i>	<i>01/10/2010</i>

**Table 2. Risk Assessment Template with example provided**

In short, employees need to make arrangements for implementing the health and safety measures identified as necessary by risk assessments. The EMBRC ERIC could collaborate with other employers operating in the same workspace, sharing information on the risks that other staff may be exposed to. They should monitor and review these arrangements and appoint people with sufficient knowledge, skills, experience and training to help them to implement these arrangements. The EMBRC ERIC should provide clear information, supervision and training for employees and should ensure that suitably competent people are appointed who are capable of carrying out the tasks entrusted to them. For example, there should be a designated First Aider; training for members trained in first aid should be refreshed at least every two years.

Emergency procedures will need to be established and all employees should be informed about these procedures and/or to any changes made to them. Employees upon induction into the Consortium should be informed about such procedures.

Major Area	Steps to undertake
Accident or injury	<ol style="list-style-type: none"> <li>1. First aider should be appointed and staff should be notified as to designated first aiders (e.g. signs in communal areas)</li> <li>2. Staff should be deemed competent before performing certain activities e.g. appropriate diving certificates or monitoring/supervision before using different equipment</li> <li>3. Testing/Maintenance of equipment/boats on at least annual frequency</li> </ol>
Fire prevention	<ol style="list-style-type: none"> <li>1. Installation of appropriate equipment e.g. alarms, extinguishers, and detectors</li> <li>2. Testing of equipment e.g. weekly tests of alarms, and annual test of extinguishers</li> <li>3. Testing of electric equipment on an annual frequency</li> <li>4. Congregation point for fire drill decided and staff informed</li> <li>5. Fire drills practiced twice every year</li> </ol>
Earthquake?	<ol style="list-style-type: none"> <li>1. Known congregation points used if appropriate and a drill like fire drill to practice</li> <li>2. Assess facilities to ensure goods are not stored in high places which might cause problems if they fall</li> </ol>

**Table 3. Accident and Emergency procedures to establish**

## Chapter 2: Quality Assurance

The overall scope of the quality assurance system of EMBRC is to support the fulfilment of the Consortium vision – i.e. to establish a distributed and integrated network of marine biology infrastructure throughout Europe. The Risk Management System and Quality Assurance System together set the foundation for the successful progress of EMBRC; to become a Research Infrastructure as defined by the European Strategic Forum for Research Infrastructures; to achieve ERIC status and deliver a successful access programme.

The Quality Assurance System is integrated with the Risk Assessment System in EMBRC. By establishing a simple, structured and transparent system of checking that the Consortium does what it has said it will – on time, on budget and meeting users expectations – both the EMBRC partners/current beneficiaries, its funding agents and the stakeholder/user community are enabled to assess the EMBRC performance. Good quality assurance is an important part of reducing risk.

This Quality Policy is established on the ISO 9000 series' standards/templates. Thus the project organization is prepared for an accreditation process to be initiated.

Quality management in this context is measured by the organization's ability to add value to the EMBRC by providing continuous improvement of delivered services such as access and ensure it continues to meet the user community's expectations. This shall be achieved is through a **review system** which will be in place to anticipate changes in user needs as well as a mechanisms to ensure and improve the **quality of access** with the components "user feedback" and "staff training".

The approaches to monitoring quality within the EMBRC are as follows:

- Quantitative and qualitative indicators such as numbers of applications in each call and rates of application success, users' access, users' satisfaction, availability of human and technical resources, number and ranking of scientific publications resulting from work developed at EMBRC, knowledge/ technology transfer efficiency, socio-economic impact indicators.
- Financial indicators such as services revenue, potential external funding), actionable indicators (such as the service's capacity), practical indicators (accessing the interface with existing infrastructure processes).
- Directional indicators such as changing policies and scientific developments to readjust the EMBRC scientific strategy based on changing users demands.

### Access

EMBRC will offer and host training courses for university students as well as companies. The user community using remote services will encompass besides academic users, schools, museums, NGOs,

journalists, private users, SMEs and industry. Details of EMBRC access policy can be found in D10.2 Best practice guidelines for uniform access to institutional and research platforms.

Proposals to access EMBRC partners' infrastructure, facilities or service resources will be received at a single entry point to simplify and provide consistency for the users. For academics cost will be at full economic cost for commercial users the cost will be at least full economic cost plus an additional supplement. However, academic users may be entitled to grants from third parties; these will be awarded based on scientific merit which should assist in achieving high quality research. It is foreseen that EMBRC will develop bidirectional access agreements with non-European countries to facilitate access of non-EU researchers to EMBRC facilities and to provide access of EU researchers to non-EU infrastructures.

### Staff training

EMBRC will inherit the experience and procedures in place with ASSEMBLE ensuring immediate implementation and efficient management by the EMBRC partnership from the beginning. The ASSEMBLE programme has developed best-practise guidelines to streamline the application procedure.

EMBRC aims to organise advanced training and workshops mainly for technical and administrative staff to harmonise techniques and services related to on-site access, remote access, animal transportation and handling of organisms and samples. The workshops outcomes should be included in EMBRC technical reports to be shared widely amongst nodes and visitors.

### User feedback

The access office should develop and provide a questionnaire for user feedback. The online system used for the application should be used to submit the questionnaire, and by the access office to remind and encourage the user to give feedback.

All feedback is collated by the access office and shown together with a report to the EMBRC ERIC Secretariat at regular intervals as directed by the EMBRC ERIC Secretariat. Serious complaints that need immediate action will be forward to the EMBRC ERIC Secretariat right after arrival.

### Review System

EMBRC Services will be developed towards the needs of users and there will be a review system in place to anticipate advances in technology and changes in user needs. The EMBRC will implement a recurrent scientific and technological review system. This system will include an annual review of the four strategic service areas (Access to Ecosystems; Aquaria & Culture; Omics Technologies; User

Access & Experience) to rapidly identify short-comings, problems and any improvements that are needed to keep EMBRC up to date with research and technological trends. The review process will also evaluate feed-back from users, as well as monitor trends in research and research interests, funding priorities from the EU (Horizon 2020) and national funding agencies to ensure that EMBRC is able to react to latest public and private research interests and continuously nurtures leading scientific research and novel innovations.

An international review and advisory panels will be established, the procedures for appointment of this panel are under development. These members will be selected from high profile experts in infrastructure function and planning, marine biology industry and major international scientific organizations. The EMBRC will aim to avoid any conflicts of interest.

## 2.1. Scope

The EMBRC Quality Assurance aims at a continuous improvement cycle (plan-check-act) so that when the whole organisation is trained in the same methodology and 'language' so to strengthen a unilateral approach to requests and requirements from the Consortium's user community.

## 2.2. Terms and Definitions

Our quality management system uses the same internationally recognised terms, vocabulary and definitions given in ISO 9000:2005.

<b>Terms</b>	<b>Definition</b>
Document	The information along with the supporting medium, which may be a paper or electronic format
Procedure	Specified way to carry out an activity or a process
Product	Output of a process
Quality Assurance	The quality management system concerned with the supply of full confidence that requirements related to quality will be achieved
Quality Management System	A management system in which the organisation is oriented and controlled concerning quality
Quality Manual	Document specifying the quality management system of the consortium
Quality Policy	The orientation of the consortium regarding quality
Record	A document that states the achieved results (in any recorded form)

Records Management	A systematic approach to the creation, maintenance, use and disposition of records. It ensures that the consortium can control the quality and quantity of information created and received.
Requirement	The need or expectation that is declared or implied, to be achieved

## 2.3. Quality Management System

The Consortium's work is focused on establishing a distributed and integrated network of marine biology infrastructure throughout Europe. The Consortium will primarily collaborate in meetings and communicate via email and other electronic means. To facilitate efficient modes of communication and collaboration among the EMBRC partners a series of policy documents, Standard Operating Procedures (SOPs), are established - for internal communication, handling of documents, use of email exchange and email retention, internet usage, record-keeping, equal opportunities, and general ethics.

### 2.4.1 General Requirements

All processes within the Consortium must either follow the Standard Operating Procedures set out for the EMBRC or, when applicable and/or requested due to national regulations etc., comply with regulations valid at the different partners (national legislation or internal regulations).

### 2.4.2 Documentation Requirements

Together with the schedule of work, the Memorandum of Understanding and (eventually) the statutes of the ERIC; this "Risk Management and Quality Assurance Manual" constitutes the documentation of the EMBRC Quality System.

All Documents and Products will be associated with one single "**owner**" at all times: One person will be responsible for the delivery of a product on time. The relevant person at the EMBRC ERIC Secretariat has to be informed about the submission of documents/products listed in the risk register; it will then enter this information in the risk register.

#### 2.4.2.1 Risk ownership

The responsibility to provide requested information and documents concerning individual partner institutes lies with the contact person from this institute. To generate documents required, working groups can be established based on consent of the work group members. The working group is then responsible for issuing the document and the lead member responsible for the working group

assumes the ownership by approving it. This document may become included in the risk register, as the production of documents may act as a control for certain risks.

#### **2.4.2.2 Submission and approval of deliverables**

Upon delivery of a product of work this will be checked off by the relevant member of the EMBRC ERIC Secretariat, the member of the secretariat managing the risks will be informed to ensure the timing of the delivery/product is in accordance with the decided schedule of work. The risk ownership remains with the member of the Headquarters. The EMBRC ERIC secretariat is informed about the progress of the task and has the opportunity to suggest changes and additions. The

document is then presented to the EMBRC ERIC Secretariat for evaluation; this is also the case if the member of the Headquarters and EMBRC ERIC Director disagree on the content. Only after acceptance by the EMBRC ERIC Secretariat is the ownership transferred to one member of the EMBRC ERIC Secretariat who keeps it until approval by the Governing Board.

#### **2.4.2.3 Control of Documents and Records**

All documents or “Products” from the Consortium will be presented to the EMBRC ERIC Secretariat for initial approval and treated further in accordance with the Governing Board. The Product will be signed off jointly by a member from the EMBRC ERIC Secretariat. The Product will subsequently be presented to the Governing Board for final approval.

All EMBRC procedure documents (SOPs) shall be identified with a version number upon approval and only the most recent version will be valid and guide the activities within the Consortium. Changes, amendments and updates shall be registered at the front sheet of all such documents. Document versions shall be adequately archived at a central project archive managed by the Director.

Registration of records must ensure that the data are properly identified and accessible for the users. **Management Responsibility**

EMBRC-ERIC will be governed by the Governing Board comprising two representatives (one administrator, one scientist) of each EMBRC member<sup>1</sup>. The Governing Board has full decision-making power and must approve EMBRC strategy and scientific development

The executive level comprises the EMBRC-ERIC Director, who is the executive authority and legal representative of the ERIC. This position will provide strategic leadership of the Research Infrastructure and drive the project to achieve its goals by raising funds, identifying opportunities, and setting EMBRC vision, plan and strategies. In addition, the EMBRC-ERIC Director will be

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<sup>1</sup> EU member states, associated states and international organizations listed in the ERIC Statutes.

responsible for building the EMBRC community and for directing and coordinating operational activities at the highest level. The Director will be appointed by the Governing Board and will have full autonomy and independence within the framework provided by the Governing Board. The EMBRC-ERIC Director is heading the EMBRC-ERIC Secretariat and appoints its staff.

### **2.5.1 Management commitment**

To ensure efficient lines of command in a distributed Consortium like the EMBRC, a management system for decisions, reporting, feedback and improvement is established.

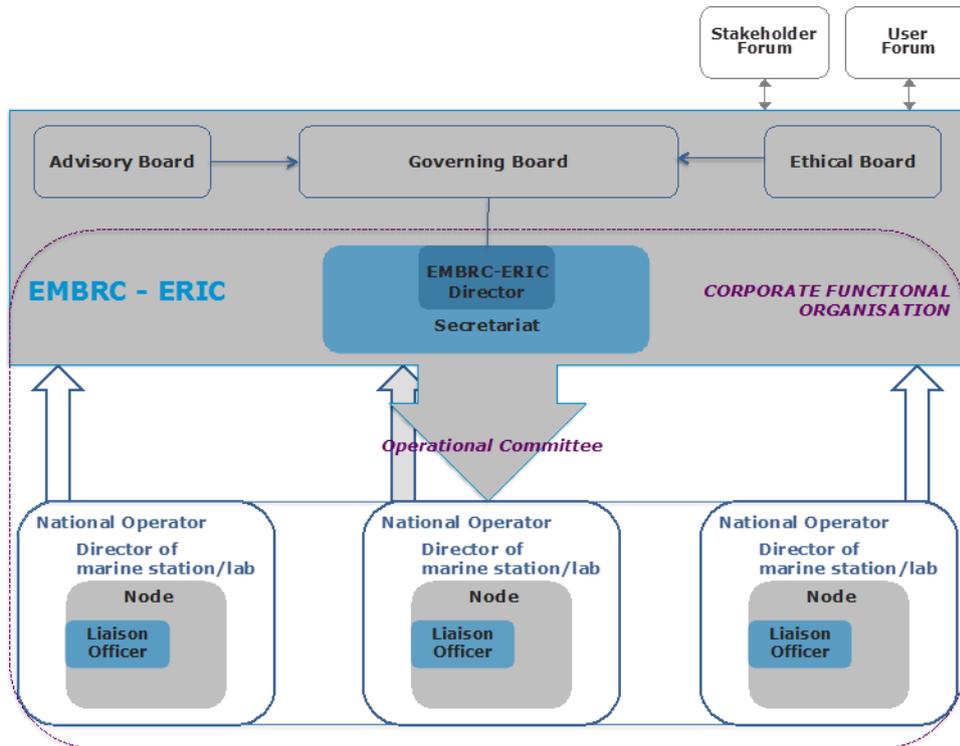
The Consortium decision body is the Governing Board. The Governing Board is chaired by the EMBRC ERIC Director. The daily management and instruction towards the nodes is handled by (or delegated to) the EMBRC-ERIC Secretariat. The central secretariat may be assisted by members from one or more of the Consortium partners.

### **2.5.2 Customer focus**

In the context of EMBRC the Consortium's "customers" are the funding bodies and the wider community of stakeholders (academic and other researchers, industry and other users in the wider community). The stakeholders/users are represented by a Stakeholder and User Forums and will provide strategic inputs and communicate to the Consortium via the EMBRC ERIC Secretariat.

### **2.5.3 Quality policy**

The authorized representatives or a delegate of the institutes are to inform all personnel working for EMBRC at their institute about the risk management and quality assurance manual. For EMBRC related activities, all EMBRC members have to adhere to the procedures and regulations of the risk management and quality assurance manual.



**Figure 2.1: Diagram of the EMBRC Governance structure.**

### 2.5.4 Responsibility, authority, communication

Overall responsibilities, lines of command, management and communication lines will be defined in the Statutes of the ERIC.

To facilitate archiving e-mail is the major means of communication in EMBRC. The central platform for storage of and access to preliminary and finished documents is the work space at [www.embrc.eu](http://www.embrc.eu)

#### **2.5.4.1 Responsibility and communication within EMBRC**

The members of the EMBRC ERIC secretariat are responsible for the timely generation of the relevant documents such as the users feedback form. The necessary activities to achieve this can be delegated to members at the partner institutes. They can request institute specific information and documentation from the contact persons at the institutes. Additional documents and information can be generated by working groups. The progress of the work is monitored by the relevant member at the EMBRC ERIC secretariat; all e-mails that are relevant for the progress are sent or copied to the secretariat. Specific members of the EMBRC ERIC secretariat (e.g. the marketing and outreach Officer) should actively seek to inform other members of the EMBRC ERIC secretariat (e.g. Financial Officer) about progress of work that might be relevant to these other work areas. In turn, they can ask for relevant information from their colleagues. Members of the nodes will inform the EMBRC ERIC Secretariat about the progress towards an area of work, this should be done for the first time at least two months before the item of work is expected. The EMBRC ERIC Secretariat can at any time contact the members responsible for the item of work to obtain information about the status of the work. Upon completion of a deliverable, the document is sent to the EMBRC ERIC Secretariat and the relevant person for risk management and quality assurance is informed. The EMBRC ERIC Secretariat communicates the document to the EMBRC ERIC Director for review and validation. In case the EMBRC ERIC Director does not approve the work, the member responsible for the work is informed about the necessary changes/additions by the EMBRC ERIC Secretariat. After approval of a document the Director presents the product to the Governing Board, which will ultimately approve it or request changes.

#### **2.5.4.2 Communication with the User Forum and Advisory Board**

Advice by the User Forum and Advisory Board is generally provided at the level of the Governing Board and EMBRC ERIC Secretariat. Communication with the User Forum and Advisory Board is mediated by the Director.

#### **2.5.4.3 Communication with the EC**

The Director is the person responsible for communication with the EC. In addition, the EMBRC ERIC secretariat communicates with the EC about operational aspects of the Consortium. All requests for information from the EC should be managed by the EMBRC ERIC Director.

#### **2.5.4.4 Resource Management**

All EMBRC partners shall provide the Consortium with necessary human and other resources according to the expected/planned participation during the agreed period of time as stated in the Statutes of the ERIC.



# Annexes

## Software User Guide to the EMBRC Risk Register

### And

## The ppEMBRC Standard Operating Procedures

The regulations described here are mostly appropriate within a single legal entity. A distributed network, such as the multi-national consortium EMBRC creates difficulties in knowing the boundaries of responsibility e.g. the use of “employee” and responsibilities/liabilities attached to such.

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## Annex no.1. Software User Guide to the EMBRC Risk Register

The EMBRC Risk Register is a database organising the collection of data from which we can draw out the relevant information.

**Figure 1. Login screen for the EMBRC Risk Register**



### Logging into the homepage

To login please open up your web browser of choice and enter the following URL into your browser:

<https://embrc-risk.st-andrews.ac.uk/pls/apex/f?p=108:1>

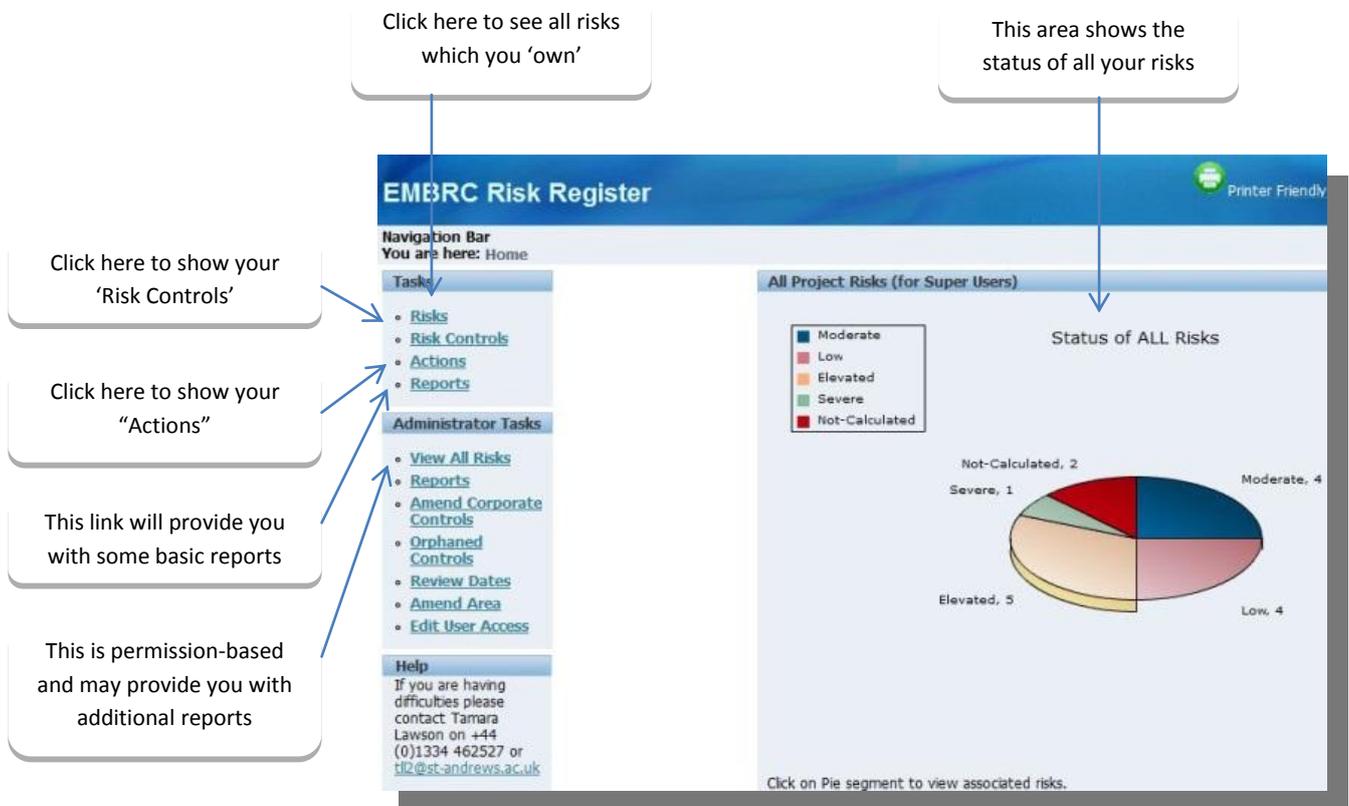
This will take you to a login screen where you should enter your allocated system username and password. The risk register should work on Internet Explorer, Mozilla Firefox, Google Chrome, Opera or Safari. (If the system will not accept your credentials at login, please report to one of the system administrators.) Your screen will now look like Figure 2.

### How the data is organised

Please click 'Risks' which will take you to the main list of risks, which are allocated to you. From here, you can create a new risk or edit an existing risk. From this screen you can also edit or create risk controls, a risk assessment or risk actions.

When adding a new risk the system will require you to add a risk description, add relevant controls, assess the risk then add any actions (this can be seen, in order, as 'Stages 1-4' within Figure 3). When you add a new risk, the screens must be completed in this order to follow the risk management process. However, when you are editing an existing set of records, you may simply access any screen required, regardless of sequence.





The screenshot shows the EMBRC Risk Register homepage. A navigation bar at the top indicates 'You are here: Home'. A 'Tasks' menu on the left includes links for Risks, Risk Controls, Actions, Reports, Administrator Tasks (View All Risks, Reports, Amend Corporate Controls, Orphaned Controls, Review Dates, Amend Area, Edit User Access), and Help. A main section titled 'All Project Risks (for Super Users)' displays a pie chart titled 'Status of ALL Risks' with a legend: Moderate (4), Low (4), Elevated (5), Severe (1), and Not-Calculated (2). Callout boxes provide instructions: 'Click here to see all risks which you own' points to the 'Risks' link; 'This area shows the status of all your risks' points to the pie chart; 'Click here to show your Risk Controls' points to the 'Risk Controls' link; 'Click here to show your Actions' points to the 'Actions' link; 'This link will provide you with some basic reports' points to the 'Reports' link; and 'This is permission-based and may provide you with additional reports' points to the 'View All Risks' link.

**Figure 2. The EMBRC Risk Register Homepage**

Each risk description will have multiple risk controls and multiple actions attaching to it. However, it can only have a single risk assessment, which is periodically updated as required. The risk register uses a pre-set formula to evaluate the risk status (refer to column titled 'outcome' in Figure 3). This is based on the responses within your risk assessment.

**DEFINITION:** A risk CONTROL is something which is already in place and which reduces risk in some way. It could be a process, a piece of equipment or skills and experience. A risk ACTION is something which is not yet in place and which we still need to do. Once an ACTION is completed, it will often then become a CONTROL.

**Editing or adding data**

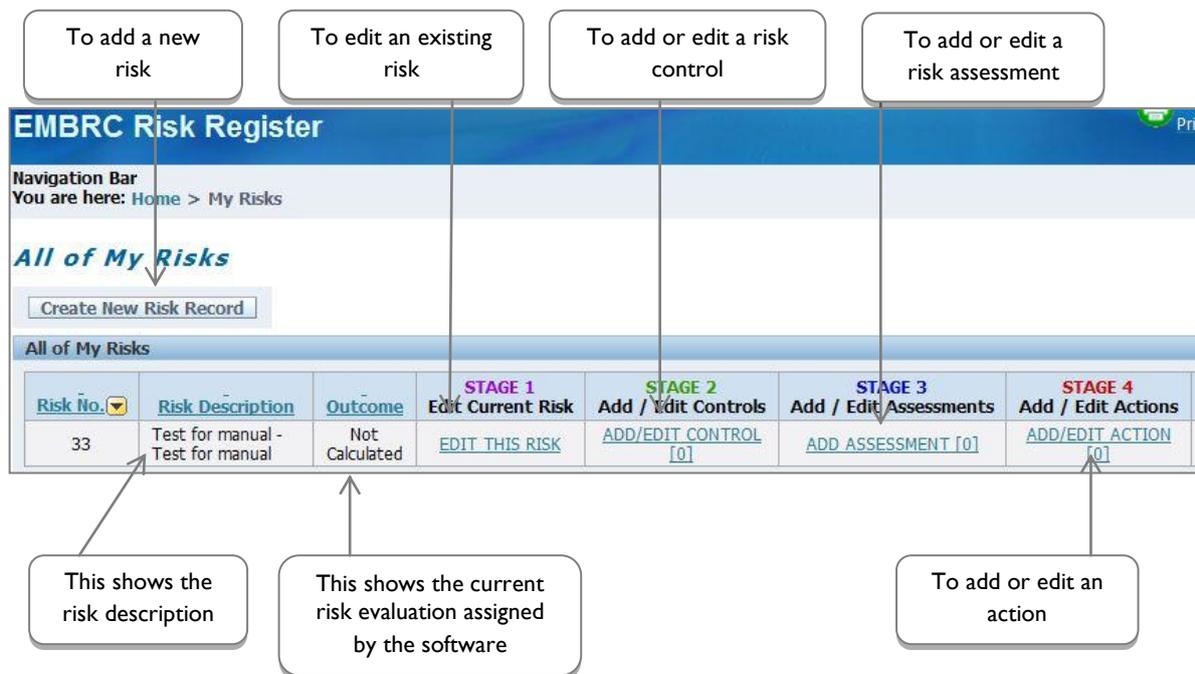
As you move your cursor over certain headings you may see a small 'question mark' symbol appearing. This means the system has some help text relating to that field. Please left-hand click with your mouse



to see the help text, which has been designed to aid you in completing the field in question. If the field heading has a small asterisk (\*), this means that completion of this field is mandatory and the system will not save your records until you input appropriate data.

When completing text fields, please keep your responses to the minimum required to convey understanding. Brief notes or bullet points are acceptable. Some of these fields have limits on field length and will display an error message if you input too much text.

When you have completed the Risk description, you may add Risk Controls. Please note that you can only add a risk action or risk control by navigating via the appropriate risk, per Figure 3, and attaching the action or control to one of your risks. However, if you just want to edit an existing action or control then you can still proceed via the relevant risk, per Figure 2, or you can take a shortcut by selecting either 'Risk Controls' or 'Actions' from the Homepage (Fig 2).



The screenshot shows the 'EMBRC Risk Register' interface. At the top, there is a navigation bar with 'You are here: Home > My Risks'. Below this is a section titled 'All of My Risks' with a 'Create New Risk Record' button. The main part of the interface is a table with the following columns: Risk No., Risk Description, Outcome, STAGE 1 Edit Current Risk, STAGE 2 Add / Edit Controls, STAGE 3 Add / Edit Assessments, and STAGE 4 Add / Edit Actions. A single row is visible with Risk No. 33, Risk Description 'Test for manual - Test for manual', Outcome 'Not Calculated', and links for 'EDIT THIS RISK', 'ADD/EDIT CONTROL [0]', 'ADD ASSESSMENT [0]', and 'ADD/EDIT ACTION [0]'. Callouts point to various parts: 'To add a new risk' points to the 'Create New Risk Record' button; 'To edit an existing risk' points to the 'EDIT THIS RISK' link; 'To add or edit a risk control' points to the 'ADD/EDIT CONTROL [0]' link; 'To add or edit a risk assessment' points to the 'ADD ASSESSMENT [0]' link; 'This shows the risk description' points to the 'Risk Description' column; 'This shows the current risk evaluation assigned by the software' points to the 'Outcome' column; and 'To add or edit an action' points to the 'ADD/EDIT ACTION [0]' link.

**Figure 3. List of “Your” EMBRC Risks**

## Risk assessment and evaluation

The “Risk Assessment” screen asks you to record the potential SEVERITY of the Risk against one of five key risk areas. It then asks you to record the LIKELIHOOD of the Risk occurring.

In order to complete the risk assessment, you simply choose the statement from each dropdown which in your opinion most closely equates to the potential impact of the risk in question. The risk register converts these statements into numbers and evaluates the outcome accordingly;

Risks annotated '**Severe**' are reported to the steering committee regularly and represent EMBRC's most serious issues. There is an expectation that action should be taken to reduce these risks wherever practical.

Risks annotated '**Elevated**' once again indicate a level of risk with which the steering committee is not comfortable. Where practical, action should be taken to reduce the risk.

Risks annotated '**Moderate**' indicate whilst action should be taken to reduce these risks where practical and economic to do so, the steering committee considers the risk to be tolerable in the interim.

Risks annotated '**Low**' indicate that the steering committee deems the issue to be well controlled. Actions may be taken at the discretion of the risk owner to reduce these risks further, but there would be no automatic expectation that this is necessary.

## The system "Administrators"

### Administrator

Dr Tamara Lawson  
Risk Management & Quality Assurance  
T: +44 (0) 1334-462527  
E: [tl12@st-andrews.ac.uk](mailto:tl12@st-andrews.ac.uk)

### Administrator back-up

Trygve Serck-Hanssen  
Head of Administration  
T: +47 55 58 43 07  
E: [Trygve.Serck-hanssen@sars.uib.no](mailto:Trygve.Serck-hanssen@sars.uib.no)

Please contact the administrators if you have problems with the risk register or enquiries regarding the Risk Management process.

## Training and Further Information

Further information regarding the risk register is available online within a training video which is embedded within the risk register software. For additional guidance on risk management, risk projects or the risk register, please contact Tamara Lawson who will be pleased to assist with workshops or projects, conduct group or 1:1 training and create guidance for you.

## Changing access rights, passwords and permissions

Please contact one of the above Administrators if you require to a change of access rights, password or permissions, including granting permissions for other staff to use the risk register.

## Running detailed management reports

Although the system contains snapshot reports for the benefit of users, Tamara Lawson is able to run more detailed management reports, which might require further information to be pulled from the system.

## Annex no.2. EMBRC Record Keeping Policy

### I. Overview

This Recordkeeping policy establishes a framework for best practice recordkeeping throughout EMBRC. It incorporates the requirements of the legislative environment as well as principles and practices endorsed by EC standards, in particular AS ISO 15489-2002 Records Management.

The EMBRC is subject to the provisions of National laws and European regulations. The purpose of this Act is to ensure accountability and transparency in the recordkeeping practices by regulating the creation, retention and disposal of records.

Key provisions include the requirement to:

- Create and maintain adequate records of EMBRC's activity to ensure sufficient evidence of its performance;
- Maintain records in accordance with approved retention and disposal schedules;
- Support recordkeeping programs with clear policies and procedures.

For the purposes of this policy, a record is defined as recorded information in any form, including data in computer systems, created, received or maintained by EMBRC in the transaction of business and kept as evidence of, and support for, the EMBRC's activities and the good conduct of its affairs.

The systematic creation and capture of official records into EMBRC's recordkeeping system is fundamental to the efficient and effective functioning of EMBRC processes and to protecting its corporate memory. Management, for example, is not able to make fully informed decisions without ready access to relevant and complete records that are kept available for an appropriate retention period. These records may also be needed as prima facie evidence to support EMBRC's defence of its decision-making during litigation, or be required by legal processes. They may also be required in response to any regulatory audit or other investigation.

Adherence to this policy will promote administrative efficiencies and facilitate EMBRC's compliance with applicable legislation. It will also ensure that EMBRC's records are not destroyed prematurely and are kept available for evidentiary purposes, thereby avoiding potential administrative or legal problems.

## **2. Purpose**

This policy outlines acceptable procedures for record keeping at EMBRC in order to support good corporate governance and compliance to legislative requirements and best practice standards, and in order to comply with legislative and administrative requirements to create, manage, protect and make accessible records that properly and adequately document the performance of EMBRC's functions. Ownership of any record received or created by an employee of or staff otherwise affiliated to EMBRC in the course of their work for EMBRC resides with EMBRC and not the individual.

## **3. Scope**

This policy applies to:

1. Staff that manage or perform recordkeeping processes;
2. Contracts or arrangements entered into by EMBRC with persons delegated to perform any aspect of recordkeeping for EMBRC;
3. All aspects of EMBRC's activities and incorporates records in all formats including hardcopy and electronic. This includes "anything on which information has been stored or recorded, including records in databases, spread sheets, on websites, and created by electronic mail systems.

## **4. Roles and responsibilities**

The Director is responsible for ensuring EMBRC's compliance with the requirements of EMBRC Consortium policies and the Risk management and Quality Assurance. This responsibility is delegated to relevant staff in accordance with the provisions set out below.

The EMBRC ERIC Secretariat is responsible for ensuring the reliability and continuing operation and full functionality of systems that generate records;

### **4.3 All staff**

By staff it is meant employees and staff otherwise affiliated full-time or part-time to the EMBRC through all or parts of its lifespan.

- 4.3.1 All staff are responsible for ensuring that records are managed properly and evidence recorded adequately of the business activities for which they are responsible;
- 4.3.2 Staff are responsible for disposing of records in accordance with authorised disposal authorities in the EMBRC Consortium;
- 4.3.3 Staff must respect the confidentiality of EMBRC records and the privacy of personal information, and protect records from unauthorised access and release of information;
- 4.3.4 Staff are to comply with National requirements of the country that they are working in and any other applicable legislation with requirements pertaining to recordkeeping;
- 4.3.5 Staff that cease employment with or affiliation to EMBRC must ensure that central files in their possession are returned to the EMBRC ERIC Secretariat or transferred to the custody of their supervisor or successor in the Consortium.

#### **4.4 Records Management & Archiving**

- 4.4.1 The EMBRC ERIC Secretariat has responsibility for EMBRC records management and archiving;
- 4.4.2 The EMBRC ERIC Secretariat has responsibility for ensuring that EMBRC recordkeeping processes and practices comply with the requirements of Europe and records management standards of best practice;
- 4.4.3 The EMBRC ERIC Secretariat staff are responsible for the development, implementation and review of EMBRC's recordkeeping plan and associated policies, procedures, guidelines, disposal authorities and other documents as required by European regulations or National requirements.
- 4.4.4 The EMBRC ERIC Secretariat is responsible for providing appropriate recordkeeping training to their staff.

#### **5. Creation and maintenance of records**

- 5.1 Proper and adequate records that document the performance of EMBRC's functions must be created by all individuals subject to this policy;
- 5.2 Records should be full and accurate to the extent necessary to:
  - 1. Facilitate action by employees;
  - 2. Make possible a proper scrutiny of the conduct of business; and
  - 3. Protect the financial, legal and other rights of EMBRC, its clients and any other people affected by its actions and decisions;
- 5.3 All records received or created should be captured into a suitable recordkeeping system;
- 5.4 Records must not be removed from EMBRC without consent of the EMBRC ERIC Secretariat .

#### **6. Protection of Records**

- 6.1 Records will be maintained over time for as long as required to meet administrative, legal, fiscal and archival requirements;
- 6.2 A disaster management plan will be developed and maintained for the records of EMBRC.

#### **7. Access to Records**

- 7.1 All records received or created by EMBRC staff in the course of their work for EMBRC are official records that belong to EMBRC and, subject to the considerations shown at 7.2, are to be

available and accessible to any authorised staff member who is appointed by or authorised by the EMBRC ERIC Director;

- 7.2 A staff member's right to access records will be determined by the relevance of the records to the performance of their duties, their level of delegated authority, privacy considerations, legal professional privilege, commercial-sensitivity and other specific considerations where confidentiality restricts the normal right of access to records. Authorisation from a member of the administrative executive may be required before access is granted;
- 7.3 Staff are not permitted to give access to EMBRC records to unauthorised persons or agencies that are not approved for access by the Consortium;
- 7.4 The EMBRC is required to comply with legislation that permits access to its records by members of the public and authorised external agencies, or as part of a legal process such as discovery or subpoena. Applications for access to EMBRC records must be in writing, and access is subject to exemptions permitted by specific legislation and to privacy, legal and commercial considerations;
- 7.5 The transfer of original central files and official EMBRC records to any outside person or agency requires the express approval of the EMBRC ERIC Secretariat or EMBRC ERIC Director;
- 7.6 EMBRC records must remain available and accessible while they are required to meet administrative needs and external accountability requirements.

## **8. Retention and disposal of records**

- 8.1 Staff is required to retain and dispose of EMBRC records in accordance with national, EU and (internal) institute regulations;
- 8.2 Records must be appraised for possible continuing archival value that is records with historical significance to EMBRC;
- 8.3 Any records subject to legal processes or required for internal/external review or investigation must be protected and not destroyed even if the retention period has passed;
- 8.4 Records with no value to EMBRC may be destroyed at any time. These records only need to be retained for a very limited period of time and include announcements of social events, leaflets, flyers, and copies or extracts of documents sent only for reference;
- 8.5 Where the official version of a record is verified as being already maintained in EMBRC's recordkeeping system a copy may be destroyed at any time.

## **9. Enforcement**

Any employee found to have violated this policy may be subject to disciplinary action, up to and including termination of engagement and other affiliation to the EMBRC Consortium.

## 10. Definitions

<b>Terms</b>	<b>Definition</b>
Archives	Those records with continuing value to EMBRC.
Capture	A deliberate action which results in the registration of a record into a recordkeeping system
Central files	Administrative files that are organised according to a subject-based Keyword Classification System
Disposal Authority	A document authorising the disposal of records. This may take the form of Retention and Disposal Authority or Schedule, an Ad Hoc Disposal Authority or a Disposal List, which has been approved.
Record	Any record of information however recorded
Records Management	A systematic approach to the creation, maintenance, use and disposition of records. It ensures that an organisation can control the quality and quantity of information created and received.
Recordkeeping Plan	A document that sets out the matters about which records are to be created by an organisation and how it is to keep its records
Recordkeeping system	An information system that captures, maintains and provides access to records over time
Retention & Disposal Schedule	A systematic listing of the records series created and maintained by EMBRC in which the period of time that each record series is to be maintained or reviewed for destruction or kept for permanent archival retention is stated
Retention Period	The period for which a record must be kept before it may be destroyed. Retention periods are measured in years or semesters following the occurrence of a specified event such as the end of a financial or calendar year, the end of a specified appeal period, the completion of an audit or the discharge of a loan

## 11. Revision History

Template from Murdoch University Record keeping Policy, Murdoch University, Australia

14 February 2011 Revised by Wiebe Kooistra

7 March 2012; 14 February 2013; 18 November 2013 Revised by Tamara Lawson

## Annex no.3. Computer Disaster Recovery Plan Policy

### 1.0 Overview

Since disasters rarely happen, management often ignores the disaster recovery planning process. It is important to realise that having a contingency plan in the event of a disaster gives EMBRC a competitive advantage. This policy requires management to financially support and diligently attend to disaster contingency planning efforts. Disasters are not limited to adverse weather conditions. Any event that could likely cause an extended delay of service should be considered.

### 2.0 Purpose

This policy defines the need for management to support on-going disaster planning for EMBRC.

### 3.0 Scope

This policy applies to the management and technical staff of EMBRC.

### 4.0 Policy

#### 4.1 Contingency Plans

The EMBRC contingency plan is composed by the following elements:

##### 4.1.1. Computer Emergency Response Plan:

Who is to be contacted, when, and how? What immediate actions must be taken in the event of certain occurrences?

##### 4.1.2. Succession Plan:

Describe the flow of responsibility when normal staff is unavailable to perform their duties.

##### 4.1.3. Data Study:

Detail the data stored on the systems, its criticality, and its confidentiality.

##### 4.1.4. Criticality of Service List:

List all the services provided and their order of importance. It also explains the order of recovery in both short-term and long-term timeframes. For example:

- Servers/Computer storing data for the website (OOB)
- Servers storing archiving information (SZN)
- Servers/Applications for Risk Management software, including Access link (USTAN)

#### **4.1.5. Data Backup and Restoration Plan:**

Detail which data is backed up; the media to which it is saved; where that media is stored; and how often the backup is done. It should also describe how that data could be recovered.

#### **4.1.6. Equipment Replacement Plan:**

Describe what equipment is required to begin to provide services, list the order in which it is necessary, and note where to purchase the equipment.

#### **4.1.7. Mass Media Management:**

Who is in charge of giving information to the mass media? Also provide some guidelines on what data is appropriate to be provided.

### **4.2 Plans must be placed into Action**

After creating the plans, it is important to practice them to the extent possible. Management should set aside time to test implementation of the disaster plan. During these tests, issues that may cause the plan to fail can be discovered and corrected in an environment that has few consequences.

### **4.3 Plans must be updated**

Review all plans annually so changes in the EMBRC's situation can be incorporated.

### **5.0 Enforcement**

Any employee found to have violated this policy may be subject to disciplinary action, up to and including termination of engagement and other affiliation to the EMBRC Consortium.

### **6.0 Definitions**

#### **Terms Definitions**

Disaster: Any event that could likely cause serious disruption of the IT systems, including without limitation, weather events, power events, or acts of terrorism.

### **7.0 Revision History**

Original 7/6/09 Robert Comella

30 January 2012 Revised by Tamara Lawson

20 November 2012 Revised by Tamara Lawson

## Annex no.4. EMBRC Webpage/intranet communication Procedures

Communications within the EMBRC network are expected to share information regarding relevant meetings/committees, training programs, funding opportunities, etc. In order to optimise this information storage, access and to reduce e-mail traffic, its distribution must be performed via Webpage intranet using the following procedures:

1. Information must be sent to the EMBRC ERIC Webpage Administrator.
2. The Webpage Administrator will then validate the information and store it in the webpage section (congresses, training, funding opportunities, job opportunities, etc.) created for that purpose.
3. Validated information must be entered in the webpage no more than 36 hours after being received.
4. Members will be aware of all webpages new entries via a *track entries field* created in the member's intranet area of the webpage.
5. For recommendation of such information to external contacts, the EMBRC members are encouraged to suggest the EMBRC website to their own collaboration partners and professional partners (for viewing information and EMBRC marketing).

## Annex no.5. EMBRC Ethics Policy

### 1. Overview

The purpose for this ethics policy is to establish a culture of openness, trust and integrity in business practices. Effective ethics is a team effort involving the participation and support of every EMBRC employee and affiliated staff. All employees and affiliates should familiarise themselves with these ethics guidelines.

The EMBRC is committed to protecting employees, affiliated staff, partners and the Consortium from illegal or damaging actions by individuals, either knowingly or unknowingly. When EMBRC addresses issues proactively and uses correct judgment, it will help set us apart from competitors.

The organisation will not tolerate any impropriety at any time and will take appropriate measures to correct the issue if the ethical code is broken. Infractions of this code of ethics will not be tolerated.

### 2. Purpose

Our purpose for this policy on ethics is to emphasize the employee's and other affiliated staff's expectation to be treated to fair practices and to serve to guide behavior to ensure ethical conduct.

### 3. Scope

This policy applies to employees/affiliated staff, contractors, consultants, temporaries, and other workers at EMBRC, including all personnel affiliated with third parties.

### 4. Policy

#### 4.1. Executive Commitment to Ethics

- 4.1.1. Honesty and integrity must be top priority for executives.
- 4.1.2. Executives must have an open door policy and welcome suggestions and concerns from employees and other staff in the Consortium. This will allow individuals to feel comfortable discussing any issues and will alert executives to concerns within the work force.
- 4.1.3. Executives must disclose any conflict of interests regard their position within EMBRC.

#### 4.2. Employee and Affiliated Staff Commitment to Ethics

- 4.2.1. The EMBRC employees/staff will treat everyone fairly, show respect, promote a team environment and avoid the intent and appearance of unethical or compromising practices.
- 4.2.2. Every employee/staff needs to apply effort and intelligence in maintaining ethics value.
- 4.2.3. Employees/staff must disclose any conflict of interests regard their position within EMBRC.

### **4.3. Company Awareness**

4.3.1. The EMBRC will promote a trustworthy and honest atmosphere to reinforce the vision of ethics within EMBRC.

### **4.4. Maintaining Ethical Practices**

4.4.1. The EMBRC will reinforce the importance of the integrity message and the tone will start at the top. Every employee/staff, manager, director needs consistently maintain an ethical stance and support ethical behaviour.

4.4.2. Employees/staff at EMBRC should encourage open dialogue, get honest feedback and treat everyone fairly, with honesty and objectivity.

4.4.3. The EMBRC ERIC Secretariat is responsible for ensuring that the ethical code is delivered to all employees/staff and that concerns regarding the code can be addressed.

### **4.5. Unethical Behaviour**

4.5.1. The EMBRC will avoid the intent and appearance of unethical or compromising practice in relationships, actions and communications.

4.5.2. The EMBRC will not tolerate harassment or discrimination.

4.5.3. Unauthorised use of marketing, operational, personnel, financial, source code, & technical information integral to the success of our company will not be tolerated.

4.5.4. The EMBRC will not permit impropriety at any time and will act ethically and responsibly in accordance with laws.

4.5.5. Employees will not use corporate assets or business relationships for personal use or gain.

## **5. Enforcement**

Infractions of this code of ethics will not be tolerated and EMBRC will act quickly in correcting the issue if the ethical code is broken. Any employee and other affiliated staff found to have violated this policy may be subject to disciplinary action, up to and including disengagement from EMBRC.

## **6. Revision History**

Template from SANS Institute 2006

14 February 2011 Revised by Wiebe Kooistra

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## Annex no.6. Conflict resolution policy

### **1. Purpose**

The conflict resolution policy is to facilitate timely, supportive, positive resolution of interpersonal conflicts.

### **2. Policy**

Interpersonal conflict must be expected as part of the normal process of living in a community. Conflict can be difficult to deal with, but it must be addressed properly, timely, at the correct organisational level and with appropriate resources. The EMBRC members are responsible for speaking the truth, listening with care, respect and give flexibility in meeting each other, and working toward a resolution that meets the needs of the entire community. The EMBRC aims to use conflicts productively to make EMBRC a better place to work and to facilitate mutual understanding. Often underlying issues are behind conflicts; EMBRC wants to make the extra effort to deal with them.

### **3. Procedure**

1. It is important that each person's thoughts and feelings be expressed and that an attempt should be made to understand one another's perspective.

2. Conflicts will be promptly discussed between the parties in conflict. All members, including those in conflict, are responsible for helping this happen.

3. Members will strive to use conflict resolution techniques, such as active listening, mirroring, and role reversal. Members will strive to be honest. Important questions:

1. What do I feel about this issue and where did that feeling come from?

2. Are my feelings so strong that I'm not hearing what others say?

3. Am I operating with the best for the whole group as my goal?

4. Why do others think differently about this than I do?

5. Is this issue really worth it? If I give in what will happen in a year? What is going to happen to my relationship with this person if this conflict continues?

4. Conflict resolution can take many forms; some that have been productive in the past include:

1. Discussion between individuals as a first point in identifying the issues underlying a conflict and clearing up any misunderstandings.

2. Mediation by a neutral third party if individuals need help dealing with their conflict or finding a resolution.

3. Group process meetings allow the entire community to participate in the discussion and resolution of issues and to support the individuals in conflict.

#### **4. Revision History**

7 March 2012 Revised by Tamara Lawson

<b>REVISION HISTORY</b>			
<b>No.</b>	<b>Description of Change</b>	<b>Author (s)</b>	<b>Effective Date</b>
0	Initial release	TLL	5/4/13
1	Edited after comments from MT and SC	TLL	15/11/2013
2	Final edits	IAJ	27/11/2013
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