Seenaryo Risk Management Policy

(Reviewed in May 2025. For review in or before May 2026.)

Contents

1. Risk policy purpose

This policy:

- Is a formal acknowledgement that Seenaryo's Board of Trustees is committed to maintaining a strong risk management framework. The aim is to ensure that the charity makes every effort to manage risk appropriately by maximising potential opportunities whilst minimising the adverse effects of risks.
- Should be used to support the internal control systems of the charity, enabling the charity to respond to operational, strategic and financial risks regardless of whether they are internally or externally driven.

2. Risk policy objective

- To confirm and communicate the charity's commitment to risk management.
- To establish a consistent framework and protocol for determining appetite for and tolerance of risk and for managing risk.

- To assign accountability to management and staff for risks within their control and provide a structured process for risk to be considered, reported and acted upon throughout the organisation.

3. Risk policy statement

Seenaryo's Trustees and Directors believe that sound risk management is integral to both good management and good governance practice. Risk management should form an integral part of the charity's decision-making and be incorporated within strategic and operational planning.

Risk assessment is conducted on all new activities and projects to ensure they are in line with the charity's objectives and mission. Any risks or opportunities arising are identified, analysed and reported at an appropriate level. Additionally, an organization-wide risk register covering key strategic risks is maintained and routinely updated twice per year (January & September) and more frequently where risks are known to be volatile.

3.1 Staff training

All staff are provided with training on risk management as part of their onboarding with Seenaryo, and we provide an annual refresher in risk management for all staff as well as informing them whenever the policy is updated. The risk management training includes:

- Introduction to the organisational and project-based Risk Registers
- Review of staff roles and responsibilities regarding project-based risk assessments
- Review of reportable events procedures, including how staff report incidents and how they are escalated up the management chain and to trustees, to ensure a proactive approach and mitigate risks before they occur

Seenaryo's Staff Handbook features a full suite of policies to control different types of risk, including the Safeguarding, Code of Conduct, Whistleblowing and Health and Safety policies. All policies can be read at https://www.seenaryo.org/policies.

Seenaryo regularly reviews and monitors the effectiveness of its risk management framework and updates it as considered appropriate. Risk is a standing agenda item at the quarterly meetings of Seenaryo's Board of Trustees, at which any incident reports about incidents considered to pose a significant threat to the charity are reviewed and incidents investigated where needed. The Trustees also identify continuing and emerging high concern risks and those where priority action is needed to better mitigate them.

As a small organisation, we recognize that our risk appetite needs to be relatively low as we do not have the capacity in terms of finances or human resources to mitigate against all risks (e.g. by providing life insurance, funding evacuations, funding court cases, etc).

However, we are also aware that Lebanon is (at time of writing) designated a high-risk country by bodies including the UK's FCDO, due to political and social instability and security concerns. The Trustees understand the need to accept this level of risk in order to carry out Seenaryo's charitable purposes, and have put preventions and policies in place in order to mitigate these risks, as per the Risk Register.

3.2 Reportable Events procedures

A Reportable Event is an adverse event or incident that could pose risks to any Seenaryo stakeholders. Seenaryo staff, including core staff, freelancers, volunteers and trustees, as well as beneficiaries and other stakeholders, are invited to use their judgment in assessing an incident to be a Reportable Event.

Seenaryo's Financial & Control Procedures, Whistleblowing Policy, Anti Fraud, Corruption and Bribery Policy and Safeguarding Policy highlight reportable events relating to financial incidents, criminal allegations and safeguarding. Other events or incidents outside of these, must also be reported as significant incidents. These include but are not limited to:

- Failures of governance, e.g. not enough charity trustees to make a legal decision
- Significant sums of money or property donated to the charity from an unknown or unverified source (NB Seenaryo's Acceptance of Gifts Policy should be consulted in conjunction with this policy)
- Suspicions that the charity and/or its assets are being used to fund criminal activity including terrorism (NB Seenaryo's Counter Terrorism Financing Policy should be consulted in conjunction with this policy)

Where a reportable event is identified by any team member, they are required to write an incident report (which should include information about where and when the incident happened, what the team member witnessed, and who was implicated) and submit it to one or more of the following individuals:

- Their line manager (who will escalate the incident, if necessary, to one of the below individuals)
- Seenaryo's HR Lead (currently Lebanon Country Manager Hiba Hussein) for HR-related incidents
- The relevant Safeguarding Officer (as per Seenaryo's Safeguarding Policy) for safeguarding-related incidents
- The relevant Whistleblowing contact (as per Seenaryo's Whistleblowing Policy) for whistleblowing incidents
- The Finance Manager and Joint CEOs for financial incidents

The informed party will then add the alleged incident to Seenaryo's Incident Logs. Seenaryo has three Incident Logs: the Safeguarding Incidents Log (accessible to safeguarding officers only), HR Incidents Log (accessible to Directors and HR Lead), and the Financial & Other

Incidents Log (accessible to all core team members).

The informed party will investigate the alleged incident, in conjunction with – if appropriate - the Joint CEOs and Directors, other trustees and other staff members. When disclosing any concerns, the discloser will not be expected to have absolute proof of malpractice but will need to be able to show the reasons for his or her concern.

Incidents which are considered to pose a significant threat to the charity will be immediately escalated to the Joint CEOs by the HR Lead, Safeguarding Officer, Whistleblowing contact or Finance Manager. The Joint CEOs will then either immediately escalate the incident to the Board of Trustees, or wait until the next Board meeting, depending on the impact level of the incident as stated in the Incident Log.

4. Organisational roles

4.1 The role of the Board of Trustees

- To ensure that a culture of risk management is embedded throughout the charity
- To set the level of risk appetite and risk tolerance for the organisation as a whole and in specific circumstances
- To communicate the charity's approach to risk and set standards of conduct expected of staff
- To ensure risk management is included in the development of business plans, budgets and when considering strategic decisions
- To approve major decisions affecting the charity's risk profile or exposure
- To satisfy itself that less fundamental risks are being actively managed and controlled
- To regularly review the charity's approach to risk management and approve any changes to this
- To receive reports from internal audit, risk subcommittee, external consultants and any other relevant parties and to make recommendations on this

4.2 The role of the Joint CEOs and Senior Management Team

- To ensure that risk management policy is implemented throughout the organisation
- To anticipate and consider emerging risks and to keep under review the assessed level of likelihood and impact of existing key risks
- Provide regular and timely information to the trustees on the status of risks and their mitigation
- Discuss highest risks at each board meeting and any that are changing significantly

- To implement adequate corrective action in responding to significant risks; to learn from previous mistakes and to ensure that crisis management plans are sufficiently robust to cope with high level risk

4.3 The role of Project Managers

- Project Managers are responsible for managing project specific operational risks and for ensuring that risks are reported upon in a timely fashion through designated lines of reporting.
- Project Managers ensure that a risk assessment is completed before the start of each project and are responsible for ensuring that where possible, risks are mitigated in advance of beginning the project.

4.4 Interaction with internal control systems

- Risk management forms part of the charity's system of internal controls and should be read in conjunction with the policies and detailed controls procedures specified in our Financial Controls and Procedures document. This document sets out in detail operational limits within which individuals may act in particular circumstances in order to minimise the risk of fraud or error. These limits cover amongst other things – control over bank payments and receipts, authorisation of and processing of expenditure and approval required at particular levels of decision making.

5. Legislation and best practice

In addition the charity expects to meet minimum international standards for NGOs required by legislation and best practice in operational areas covering the following:

- IT and data protection
- HR
- Health and safety
- Governance
- Financial accounting and reporting
- Management of volunteers

The risk of falling short of these standards is mitigated as far as possible by ensuring that appropriate policies and working practices are adopted in each of these key areas and that staff are adequately experienced and trained to manage this. Where necessary, external advice is sought to supplement internal expertise.