Straddie Employment and Training Company (SETCo) Standard Operating Procedures Manual

Introduction

Preamble and Mandate

This Standard Operating Procedures (SOP) Manual serves as the foundational governance document for the Straddie Employment and Training Company (SETCo). SETCo is conceived as the central "human capital engine" for the 10-entity Straddie Everything Ecosystem, tasked with sourcing, training, deploying, and managing all personnel.
The purpose of this manual is to ensure all SETCo operations are conducted with consistency, transparency, and uncompromising adherence to all legal and regulatory obligations. These procedures encapsulate best practices meticulously crafted to uphold a commitment to excellence, operational integrity, and the safety and well-being of all personnel.

Commitment to "Overcompliance"

SETCo operates under an explicit "overcompliance" mandate. This principle dictates that these SOPs are designed not merely to meet, but to proactively exceed, the baseline requirements of all relevant Australian and Queensland legislation.
This commitment extends to, but is not limited to:

- The *Fair Work Act 2009 (Cth)* and the National Employment Standards (NES).
- The *Work Health and Safety Act 2011 (QLD)*.
- The *Migration Act 1958 (Cth)* and all Standard Business Sponsor obligations.
- The *Privacy Act 1988 (Cth)* and the Australian Privacy Principles (APPs).
- The *Labour Hire Licensing Act 2017 (QLD)*.
- The *Standards for Registered Training Organisations (RTOs)* as mandated by ASQA.
- All corporate and financial reporting obligations under the *Corporations Act 2001 (Cth)* and the *Australian Charities and Not-for-profits Commission Act 2012 (Cth)*.

Scope and Interoperability

This SOP manual governs all personnel directly employed by, trained by, or deployed by SETCo. It further outlines the protocols for interoperability and the formal provision of services to all partner entities within the Straddie Everything Ecosystem, including Aura of Intelligence, Sandworm Subterranean Systems, Quandamooka Intelligence, and others. All services provided to partner entities shall be governed by formal agreements as detailed herein.

SOP Review and Continuous Improvement Protocol

Objective: To ensure this manual remains a living, compliant, and effective document, adapting to evolving legislation, regulatory guidance, and the operational needs of the ecosystem.
Procedure:

1. **Annual Review:** A mandatory, comprehensive review of all SOPs shall be conducted annually by a designated Compliance Manager in consultation with qualified legal and compliance experts.
2. **Legislative Update Review:** An immediate review and, if necessary, amendment of any SOP section shall be triggered by any new or amended legislation, judicial precedent, or binding regulatory guidance affecting SETCo's obligations.
3. **Post-Incident Review:** A mandatory review of the relevant SOP (e.g., WHS, Data Breach) shall be conducted following any notifiable incident to identify and implement preventative improvements and corrective actions.
4. **Feedback Mechanism:** A formal channel shall be maintained for all personnel and partner entities to submit suggestions for the improvement of these procedures.

Section 1: Corporate Governance & Legal Status

This section establishes the foundational legal and governance framework for SETCo, which is critical given its proposed non-profit status and its complex, transactional relationship with for-profit ecosystem partners.

1.1. SOP: Legal Entity Status (Company Limited by Guarantee)

Objective: To define SETCo's legal structure as a Company Limited by Guarantee (CLG) and ensure all corporate obligations under the *Corporations Act 2001* are met.
Procedure:

1. The Company Secretary shall maintain all required registrations with the Australian Securities and Investments Commission (ASIC) and submit all annual statements and other required filings by the due date.
2. All financial and operational records shall be maintained in accordance with ASIC requirements for a CLG, noting the specific financial reporting thresholds.

1.2. SOP: Public Benevolent Institution (PBI) Status

Objective: To secure and maintain Public Benevolent Institution (PBI) status under the *ACNC Act* to access relevant tax concessions (including FBT exemptions) and fulfill SETCo's community-benefit mandate.
Procedure:

1. The Company Secretary shall ensure all registration and annual reporting requirements with the Australian Charities and Not-for-profits Commission (ACNC) are met.
2. All SETCo activities must be demonstrably in furtherance of its main PBI purpose (e.g., providing benevolent relief, such as training and employment pathways for disadvantaged local job seekers).

3. **PBI Firewall:** To protect its status, SETCo must ensure that no transactions with any external entity, particularly for-profit ecosystem partners (e.g., Aura Pty Ltd, Sandworm Pty Ltd), constitute an "undue private benefit".
4. All inter-entity services must be provided at fair market value, as detailed in SOP 1.5.

1.3. SOP: Board of Directors Governance

Objective: To ensure the Board of Directors fulfills its fiduciary and governance duties under the *Corporations Act 2001* and the ACNC Governance Standards.
Procedure:

1. All Directors must exercise their powers and discharge their duties with the degree of care and diligence that a reasonable person would exercise, in good faith in the best interests *of SETCo*, and for a proper purpose.
2. A formal Board Charter shall be maintained, defining the Board's role, responsibilities, composition, and meeting protocols.
3. A mandatory induction shall be provided to all new directors covering their legal duties (under both the *Corporations Act* and *ACNC Act*), this SOP manual, and the critical importance of the Conflict of Interest policy (SOP 1.4).

1.4. SOP: Management of Conflicts of Interest (Inter-Ecosystem)

Objective: To proactively identify, declare, and manage all actual, potential, or perceived conflicts of interest, particularly those arising from directors or managers holding roles in multiple ecosystem entities ("Director Hat-Swapping"). Failure to manage these conflicts rigorously may breach the *Corporations Act* and jeopardise SETCo's PBI status.
Procedure:

1. **Register of Interests:** The Company Secretary *must* maintain a current "Register of Inter-Ecosystem Interests" for all directors and key management personnel, detailing all directorships, shareholdings, and other material interests in any of the 10 ecosystem entities.
2. **Declaration of Interest:** This Register *must* be tabled at the beginning of every Board meeting. Directors *must* declare any interest related to any item on the agenda.
3. **Mandatory Recusal:** A director with a declared material conflict of interest in a matter being considered by the Board *must not*: a. Be present (physically or remotely) during the discussion of the matter; and b. Vote on the matter.
4. **Minutes:** The declaration of the interest, the nature of the conflict, and the subsequent recusal (or any Board decision to the contrary) *must* be meticulously recorded in the Board minutes as a permanent legal record.

1.5. SOP: Inter-Entity Service Agreements

Objective: To ensure all services provided by SETCo (a PBI) to other ecosystem partners (particularly for-profit entities) are formally documented and transacted at arm's length to protect SETCo's non-profit and PBI status from claims of "undue private benefit".
Procedure:

1. No training, recruitment, or personnel deployment services shall be provided to any ecosystem entity without a formal, legally-reviewed Service Level Agreement (SLA).
2. This SLA *must* define, at a minimum: a. The scope of services to be provided. b. Key

performance indicators and service standards. c. A cost-allocation or fee-for-service mechanism based on *fair market value* for the services rendered.
3. All inter-entity invoices must be issued and paid in accordance with standard commercial terms (see SOP 4.1).

1.6. SOP: Financial Controls and Audit (CLG)

Objective: To ensure robust, transparent, and compliant financial controls in line with CLG and ACNC requirements.
Procedure:

1. Strict segregation of duties shall be implemented for all financial transactions (e.g., authorization, payment, and reconciliation functions must be performed by different individuals).
2. If SETCo is registered as a charity with the ACNC, it is exempt from the financial reporting requirements of the *Corporations Act* but *must* meet all ACNC reporting requirements.
3. In line with the "overcompliance" mandate, if annual revenue exceeds the *Corporations Act* threshold (currently $1 million), the annual financial report *must* be independently audited, even if only a review is required by the ACNC.

Section 2: Core Human Resources & Employment Standards

This section operationalizes baseline HR compliance under Australian law, adapting the structure from the Aura SOP and integrating the stringent legal requirements identified for SETCo.

2.1. SOP: Recruitment, Selection, and Hiring

Objective: To attract, select, and hire the most suitable talent in a fair, consistent, non-discriminatory, and efficient manner, in full compliance with Equal Employment Opportunity (EEO) and the *Anti-Discrimination Act 1991 (QLD)*.
Procedure:

1. (Procedure as adapted from , including job posting, application collection, screening, and interviews).
2. Mandatory background checks (e.g., National Police Check, Working with Vulnerable People Check) must be conducted for roles identified as high-risk, particularly those involving deployment to Aura (vulnerable populations) or Sandworm (high-security infrastructure).

2.2. SOP: New Employee Onboarding and Induction

Objective: To effectively integrate all new personnel into SETCo's culture, values, and systems, and to ensure they are fully aware of their legal, safety, and compliance obligations from Day 1.
Procedure:

1. (Procedure as adapted from , including pre-arrival, first day, and first-week activities).
2. The First Week induction *must* include mandatory, assessed training modules on: a. The SETCo WHS Management System (SOP 5.1). b. Data Privacy (APP) and Data

Sovereignty (SOP 10.1 & 10.3). c. The Code of Conduct, including the Conflict of Interest policy (SOP 1.4). d. A formal acknowledgment of having read and understood this SOP Manual.

2.3. SOP: Employee Records Management

Objective: To ensure 100% compliance with the 7-year record-keeping obligations of the *Fair Work Act 2009* and *Fair Work Regulations* , while simultaneously facilitating the ecosystem's "Sovereign Skills Wallet" philosophy by issuing Verifiable Credentials (VCs).
Procedure: This SOP establishes a "Dual Archive" system to resolve the conflict between statutory employer obligations and the ecosystem's user-centric data philosophy.

1. **System 1: The Legal Compliance Archive (Internal):** a. SETCo shall create and maintain a central, secure, "employer-access" digital archive for all legally mandated employee records. b. These records *must* be kept in a legible form, in English, for a minimum of **7 years** after the employee's termination. c. This archive *must* be structured to be "readily accessible" to a Fair Work Inspector upon a lawful request. d. This archive *must* contain all records specified in Table 2.1.
2. **System 2: The Sovereign Credentialing System (External):** a. As a supplementary service, SETCo will issue key credentials (e.g., qualifications, training completions, licenses) to an employee's personal digital wallet as Verifiable Credentials (VCs) (see SOP 10.4).
3. **Clarification of Precedence:** The issuance of a VC (System 2) *supplements but does not replace* SETCo's primary and non-delegable legal obligation to create, maintain, and secure the 7-year Legal Compliance Archive (System 1). In any conflict, the requirements of System 1 take legal precedence.

Table 2.1: Mandated 7-Year Employee Records (Fair Work Act/Regulations)

This table provides a non-exhaustive checklist of the minimum records to be stored in the Legal Compliance Archive (System 1) as required by law.

Record Category	Required Information
General	Employer's name and ABN; Employee's name; Employee's start date; Basis of employment (full-time/part-time, permanent/temporary/casual).
Pay	Rate of pay; Gross and net amounts paid; Any deductions; Details of incentive payments, bonuses, loadings, or penalty rates.
Hours of Work	For casual or irregular part-time employees, the hours worked; For other employees, any overtime hours worked; Any averaging of hours agreements.
Leave	All leave taken (paid and unpaid); Leave balances accrued.
Superannuation	Amount of contributions made; Date(s) of contributions; Name of the superannuation

Record Category	Required Information
	fund.
Termination	How the employment was terminated (e.g., resignation, dismissal); If dismissed, the notice period provided.

2.4. SOP: Payroll Administration (AUD)

Objective: To ensure all personnel are paid accurately, on time, and in full compliance with Australian taxation and superannuation law.
Procedure:

1. All payments shall be processed in Australian Dollars (AUD).
2. Payroll must correctly withhold Pay As You Go (PAYG) tax and remit it to the ATO.
3. All payroll activities must be reported to the ATO via Single Touch Payroll (STP) on or before each pay day.
4. Mandatory superannuation guarantee contributions must be calculated and paid into the employee's nominated fund by the quarterly due dates.

2.5. SOP: Employee Performance Evaluation and Feedback

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To periodically assess employee performance and provide constructive feedback to aid professional development. **Procedure:** (As per , including regular check-ins and annual reviews).

2.6. SOP: Grievance and Conflict Resolution

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To address and resolve any workplace conflicts or grievances in a fair, confidential, and timely manner. **Procedure:** (As per , including reporting, assessment, mediation, and resolution).

2.7. SOP: Employee Offboarding and Exit Procedures

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To facilitate a smooth and compliant transition for employees leaving the organization and to gain insights into their experiences.
Procedure:

1. (Procedure as per , including transition of tasks, return of company property, and conducting an exit interview).
2. **Mandatory Compliance Step 1 (Migration):** If the departing employee is a sponsored visa holder, the HR Manager *must* notify the Department of Home Affairs of the employment cessation within 28 days (see SOP 7.4).
3. **Mandatory Compliance Step 2 (Records):** The HR Manager *must* ensure all the employee's records are finalized and securely archived in the Legal Compliance Archive (System 1) to commence the mandatory 7-year retention period.

Table 2.2: National Employment Standards (NES) Summary

This table serves as a quick-reference guide for all managers and HR staff, ensuring all employment contracts, policies, and actions meet these 11 minimum standards.

NES Entitlement	Summary
1. Maximum weekly hours	38 hours per week, plus reasonable additional hours.
2. Requests for flexible working	Certain employees have the right to request flexible working arrangements.
3. Casual employment	Rights for casual employees to be offered or request conversion to permanent employment.
4. Parental leave	Up to 12 months of unpaid parental leave, with a right to request an additional 12 months.
5. Annual leave	4 weeks of paid leave per year (pro-rata).
6. Personal/carer's leave	Paid personal (sick) and carer's leave, plus unpaid compassionate leave.
7. Community service leave	Unpaid leave for voluntary emergency activities and paid leave for jury service.
8. Long service leave	Entitlement to long service leave after a long period of service.
9. Public holidays	Right to be absent from work on a public holiday, with payment for permanent employees.
10. Notice of termination / Redundancy	Minimum notice periods for termination and entitlement to redundancy pay.
11. Information Statements	Must be given the *Fair Work Information Statement* (FWIS) and *Casual Employment Information Statement* (CEIS).

Section 3: Novel Human Capital Management

This section translates the ecosystem's visionary workforce models into legally compliant and operationally sound HR policies.

3.1. SOP: "Try Everything Once" Rotational Workforce Program

Objective: To facilitate inter-ecosystem skill development, workforce flexibility, and employee engagement, as envisioned by the "Try Everything Once" model , through a legally structured framework.
Procedure: The legal mechanism for this program is a formal **secondment**.

1. SETCo, in consultation with ecosystem partners, shall identify and advertise rotational opportunities.
2. Personnel may apply for a rotational assignment.
3. **Prerequisite:** The employee *must* complete all mandatory prerequisite training and competency assessments (as per RTO procedures, SOP 8.4) for the proposed rotational role (e.g., Tunnelling Safety Induction (SOP 5.4) before a Sandworm rotation; TGA Competency (SOP 5.5) before an Aura rotation).
4. **Commencement:** The rotation *cannot* commence until two legal documents are finalized and signed by all parties: a. A formal Secondment Agreement (see SOP 3.2). b. A Host Employer WHS Agreement (see SOP 6.1).
5. **Employment Status:** The employee *remains* an employee of SETCo at all times during

the rotation, with SETCo retaining responsibility for payroll, leave, and primary WHS duty of care.

3.2. SOP: Secondment Agreement Protocol

Objective: To legally document the terms of any deployment or rotation of a SETCo employee to a Host Employer (ecosystem partner), clearly defining WHS, financial, and management responsibilities.
Procedure:

1. A standard, legally-vetted Secondment Agreement template (based on industry best practice) shall be maintained by the legal team.
2. This agreement *must* be executed for *every* secondment and must specify: a. The Home Organisation (SETCo) and Host Organisation (e.g., Sandworm). b. The Secondee (the employee's name). c. The Start Date and End Date of the secondment. d. The Position Description, work objectives, and performance expectations at the Host. e. Financial arrangements (i.e., the Host's payment to SETCo for the Secondee's time, as per the SLA in SOP 1.5). f. Supervision and management responsibilities. g. A clear delineation of WHS duties, which must reference the overarching Host Employer WHS Agreement (SOP 6.1).

3.3. SOP: "Intermittent Retirement" (Sabbatical Leave) Policy

Objective: To provide a structured, financially sound, and legally compliant policy that enables employees to take extended leave cycles ("Intermittent Retirement") for personal or professional development.
Procedure: The legal mechanism for this program is a **Purchased Leave** scheme. This is *not* an entitlement under the NES.

1. **Program:** SETCo offers a voluntary Purchased Leave (Sabbatical) Program.
2. **Eligibility:** Available to all permanent employees after years of continuous service (period to be confirmed by Board).
3. **Mechanism:** a. Employees may apply to enter a -year work cycle, during which they will receive % of their ordinary salary. b. The withheld % shall be accrued to fund a -year paid sabbatical to be taken in the [5th] year. c. Alternative cycles (e.g., 80% over 2 years for 6 months leave) may be approved by management.
4. **Legal Status:** a. **Superannuation:** Superannuation guarantee contributions will continue to be paid based on the employee's *100%* (pre-sacrifice) salary. b. **Leave Accrual:** During the paid sabbatical year, the employee's service is continuous, but they *do not* accrue new annual leave or personal/carer's leave.
5. **Termination:** If employment is terminated (by either party) before the sabbatical is taken, all withheld salary (the 20% portion) not yet paid out *must* be paid to the employee in their final pay.

Section 4: Financial Procedures & Braided Economy

This section governs SETCo's financial operations, with a specific focus on the complex compliance challenges posed by the C-Hour and PBI tax concessions.

4.1. SOP: Invoicing and Billing (AUD)

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To ensure accurate, timely, and clear invoicing for all services provided. **Procedure:**

1. (Procedure as per , including invoice creation, distribution, and payment monitoring).
2. **Inter-Entity Billing:** All invoices for services rendered to ecosystem partners *must* be in accordance with the signed SLA (SOP 1.5) and reflect fair market value to protect SETCo's PBI status.

4.2. SOP: Expense Reporting and Reimbursement

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To ensure employees are promptly and accurately reimbursed for approved business expenses. **Procedure:**

1. **Expense Submission:** a. Employees must submit receipts or proof of purchase for all expenses. b. Ensure expenses align with company policies (e.g., spending limits, approved vendors).
2. **Expense Review:** a. Designated financial staff or managers review submitted expenses for approval. b. If discrepancies or questions arise, contact the employee for clarification.
3. **Reimbursement Process:** a. Approved expenses are reimbursed through the preferred company method (e.g., bank transfer, check). b. Ensure reimbursements are processed within a set timeframe (e.g., within 15 business days of expense approval).
4. **Record Keeping:** a. Archive all expense reports and associated receipts. b. Update company financial records to reflect reimbursements.

4.3. SOP: Budget Creation and Monitoring

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To ensure SETCo operates within its means, optimizes resource allocation, and achieves its financial and non-profit targets. **Procedure:**

1. **Budget Drafting:** a. Gather financial data from all departments to forecast expenses and revenues. b. Determine financial goals for the upcoming period (quarterly, annually).
2. **Budget Approval:** a. Present the drafted budget to senior management or board members for review. b. Make adjustments based on feedback and finalize the budget.
3. **Budget Distribution:** a. Inform all departments of their approved budgets. b. Ensure managers understand their financial limits and priorities.
4. **Budget Monitoring:** a. Regularly compare actual spending and revenues to budgeted amounts. b. Identify any discrepancies and take corrective action if needed (e.g., reduce expenses, adjust strategies).
5. **Periodic Review:** a. Conduct monthly or quarterly budget review meetings. b. Adjust future budgets based on past performance and changing company goals.

4.4. SOP: Community-Hour (C-Hour) Valuation and Issuance

Objective: To establish a clear, auditable, and legally defensible valuation policy for the C-Hour, acknowledging both the long-term strategic goal of legal recognition and the immediate need for tax compliance.
Procedure: This policy operates on a dual-track basis:

1. **Track 1: Strategic Objective (Legal Carve-Out)** a. SETCo formally acknowledges and

supports the ecosystem-wide strategy to establish the C-Hour as a unique "regenerative asset class of Time Banking". b. The long-term objective is to achieve a formal legal and tax "carve-out" that recognizes the C-Hour as a non-financial, non-taxable, pro-social instrument.

2. **Track 2: Interim Compliance Policy (Fair Market Value)** a. In accordance with the "overcompliance" mandate, *until* the legal carve-out in Track 1 is fully ratified and legislated, SETCo *must* treat all C-Hour transactions as subject to current Australian tax law. b. **Valuation:** The Board of Directors, in consultation with a qualified external tax advisor, *must* set a "fair market value" in AUD for one (1) C-Hour. This valuation must be formally reviewed and minuted at least annually. c. **ATO Private Ruling:** The CEO *must* engage a tax-law specialist to prepare and lodge an application for an **ATO Private Ruling**. This ruling will seek binding advice on the tax treatment (Income Tax, PAYG Withholding, FBT, GST) of C-Hour transactions *under current law*, based on the interim valuation. d. **Ledger:** All C-Hour issuances (e.g., for volunteer training) must be approved by a manager and recorded in a central, auditable ledger, noting the recipient, date, quantity, and the AUD-equivalent fair market value.

4.5. SOP: Accounting and Tax Treatment of C-Hour Transactions

Objective: To compliantly manage the tax implications of C-Hour transactions *under the interim policy*, strategically leveraging SETCo's PBI status to create a tax-efficient, lawful, and auditable solution.
Procedure: This procedure is the interim compliance strategy, contingent on the ATO Private Ruling (SOP 4.4) and pending the long-term legal carve-out (SOP 4.4).

1. **Proposed Classification:** Subject to the ATO ruling, C-Hours provided to employees as part of their remuneration package *will not* be treated as salary. They *will* be classified and treated as **Fringe Benefits**.
2. **PBI Exemption:** As an endorsed PBI, SETCo is eligible for a Fringe Benefits Tax (FBT) exemption on benefits provided to employees, up to a specific capping threshold (currently a grossed-up value of ~$30,000 per employee).
3. **Tracking:** HR and Payroll *must* meticulously track the total AUD-equivalent value (per SOP 4.4) of all C-Hours provided to *each individual employee* during the FBT year (1 April – 31 March).
4. **Capping:** This total value *must* be managed to ensure it remains *below* the PBI FBT-exempt capping threshold.
5. **Reporting:** a. Any C-Hour benefits provided *in excess* of the cap *must* be reported, and FBT will be paid on the excess. b. All reportable fringe benefits (including C-Hours) will be included on employee Income Statements as required by the ATO for income-testing purposes.

4.6. SOP: Fringe Benefits Tax (FBT) Management (General)

Objective: To manage all other (non-C-Hour) fringe benefits (e.g., company cars, entertainment) in accordance with the PBI concessions.
Procedure:

1. All fringe benefits provided to employees will be recorded and valued.
2. Payroll will manage the FBT-exempt cap for all employees, ensuring the combined value of C-Hours and other benefits does not exceed the threshold.

3. All records required for an FBT audit (e.g., log books, declarations, valuations) must be meticulously maintained.

Section 5: Health, Safety & Environmental (HSE) Management

This section details SETCo's WHS duties for its *own* premises (offices, training rooms) and directly employed staff. Section 6 details the WHS duties for *deployed* personnel.

5.1. SOP: WHS Management System

Objective: To meet SETCo's primary duty of care under the *Work Health and Safety Act 2011 (QLD)* to ensure the health and safety of its workers (employees, trainees, volunteers) and others (visitors, clients).
Procedure:

1. Provide and maintain a work environment that is safe and without risks to health.
2. Establish a Health and Safety Committee and facilitate regular worker consultation on safety matters.
3. Provide all necessary information, training, instruction, and supervision to enable personnel to work safely.
4. Appoint and maintain training for accredited WHS Representatives and First Aid Officers.
5. Ensure safe use, handling, and storage of any plant or substances.

5.2. SOP: Workplace Hazard Identification and Risk Assessment

Objective: To proactively identify, assess, and control all reasonably foreseeable hazards within SETCo-controlled workplaces.
Procedure:

1. Conduct and document formal WHS risk assessments for all SETCo-controlled premises and work activities.
2. Maintain a central Hazard and Risk Register, which is to be reviewed at least quarterly and/or after any incident.
3. Implement the "Hierarchy of Controls" (Elimination, Substitution, Isolation, Engineering, Administration, PPE) to manage all identified risks.

5.3. SOP: Incident Reporting and Notifiable Incidents

Objective: To ensure all WHS incidents are reported, investigated, and, where legally required, notified to Workplace Health and Safety Queensland (WHSQ).
Procedure:

1. All personnel (employees, trainees, volunteers) *must* report all incidents, injuries (including minor ones), and near-misses immediately to their manager and via the internal incident reporting system.
2. A formal **Injury Register** *must* be maintained.
3. The WHS Manager *must* lead an investigation into all incidents to identify root causes and implement corrective actions.
4. **Notifiable Incidents:** In the event of a "Notifiable Incident" (i.e., a death, a "serious injury

or illness," or a "dangerous incident"), the WHS Manager *must*: a. Immediately secure the incident site. b. Provide aid and contact emergency services. c. Notify WHSQ immediately by the fastest means possible. d. Ensure the site is not disturbed (other than to make it safe or aid the injured) until cleared by a WHSQ Inspector.

5.4. SOP: High-Risk Work: Tunnelling and Underground Operations (RTO Training)

Objective: As an RTO, to ensure all personnel being *trained* for deployment to Sandworm Subterranean Systems receive comprehensive, competency-based training on the specific, high-risk hazards of underground work, as identified in WHS Regulations and guides.
Procedure: This SOP governs the *content* of RTO training products.

1. The RTO training curriculum for "Tunnelling Operations" *must* include mandatory, assessed modules on: a. **Ground Stability:** Identifying changing ground conditions and understanding the function of rock bolts, shoring, and other support systems. b. **Ventilation & Atmosphere:** Understanding the critical nature of ventilation systems, atmospheric monitoring (for oxygen depletion, flammable/toxic gases), and "dead spots". c. **Confined Spaces:** All tunnelling work is to be treated as confined space work, requiring adherence to entry/exit, monitoring, and rescue protocols. d. **Fire and Explosion:** Risks from plant, hazardous substances, and flammable gas. e. **Emergency Procedures:** Specific responses to "notifiable incidents" such as the inrush of water, mud, or gas. f. **Plant Interaction:** Risks of mobile plant movement in enclosed spaces.
2. No employee may be deemed "competent" or deployed to a Sandworm site (SOP 6.2) without passing all relevant assessment modules.

5.5. SOP: High-Risk Work: Medical Device Operation (RTO Training)

Objective: As an RTO, to ensure all personnel being *trained* for deployment to Aura of Intelligence meet the stringent competency standards required by the *Therapeutic Goods Act 1989* (TGA) and associated quality systems.
Procedure: This SOP governs the *content* of RTO training products to manage Aura's "flow-down" compliance risk.

1. The RTO training curriculum for "Aura Operations" *must* be co-designed and formally approved by Aura's Quality/Regulatory Manager.
2. The curriculum *must* include mandatory, assessed modules on: a. The principles of the *Therapeutic Goods Act 1989* and TGA regulations. b. Aura's specific Quality Management System (QMS), likely based on ISO 13485. c. The safe, documented, and compliant operation of the specific medical device (e.g., Aura Capsule). d. Strict adherence to patient confidentiality and health records privacy.
3. A verifiable record of this competency *must* be issued (SOP 10.4) and a copy provided to Aura for their TGA audit files.

5.6. SOP: Emergency Evacuation and Crisis Communication

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To ensure a clear procedure for safe evacuation and controlled communication in case of emergencies (e.g., fire, natural disaster).
Procedure: (As per , including designated wardens, assembly points, and communication

protocols).

Section 6: Deployed Personnel & Host Employer (WHS) Protocol

This section is critical. It manages SETCo's legal liability as an employer and Labour Hire Provider for personnel deployed to high-risk worksites controlled by ecosystem partners (Hosts), such as Sandworm or Aura. Under the *WHS Act*, SETCo and the Host Employer *share* a non-delegable duty of care for the worker.

6.1. SOP: Host Employer WHS Agreement

Objective: To formally consult, cooperate, and coordinate WHS responsibilities between SETCo (as the employer) and the Host Employer (e.g., Sandworm, Aura) *before* any personnel are deployed.
Procedure:

1. **Mandatory Agreement:** No SETCo personnel (employee or trainee) may be deployed to a Host Employer site without a current, signed Host Employer WHS Agreement.
2. This agreement *must* be based on QLD guidance and clearly delineate responsibilities: a. **Host Employer Duties:** Provide a safe work environment; conduct site-specific inductions; provide task-specific training and supervision; manage site-specific hazards; report incidents to SETCo. b. **SETCo's Duties:** Ensure the worker is competent and qualified for the role (i.e., has passed SOP 5.4 or 5.5); provide general WHS induction; consult with the Host on WHS matters; manage worker records and workers' compensation.
3. This agreement *must* define the joint incident reporting and investigation mechanism.

6.2. SOP: Site-Specific Risk Assessment and Induction (Pre-Deployment)

Objective: To exercise SETCo's WHS due diligence by verifying the safety of a host site *before* deploying personnel.
Procedure:

1. **Site Assessment:** Prior to the *first* deployment of any personnel to a new host site, a qualified SETCo WHS Manager *must* conduct a physical site inspection and risk assessment.
2. **Verification:** The WHS Manager *must* verify the Host Employer's WHS systems are adequate for the risks (e.g., review Sandworm's ventilation management plan , review Aura's QMS documentation).
3. **Site-Specific Induction:** SETCo *must* obtain a copy of the Host's site-specific induction and verify its adequacy.
4. **Worker Sign-off:** No worker may commence deployment until they have: a. Completed SETCo's mandatory competency training (SOP 5.4 or 5.5). b. Completed the Host Employer's site-specific induction. c. Signed a pre-deployment checklist acknowledging they have received all training and understand the site risks.

6.3. SOP: Deployed Personnel Supervision and WHS Monitoring

Objective: To maintain SETCo's ongoing duty of care and consultation with deployed personnel.
Procedure:

1. **SETCo Supervisor Check-in:** A designated SETCo representative (e.g., Supervisor, WHS Manager) *must* conduct regular (e.g., weekly) WHS check-ins with all deployed personnel.
2. **Site Audits:** A SETCo WHS Manager *must* conduct periodic (e.g., quarterly) random WHS audits of host sites where personnel are deployed to verify ongoing compliance.
3. **Right to Withdraw:** a. All personnel *must* be trained on their "Right to Stop Work" if they hold a reasonable concern about a serious and imminent safety risk. b. SETCo management *must* have a clear protocol to immediately withdraw all personnel from a host site if a critical, unmanaged safety failure is identified, pending investigation and rectification by the Host.

6.4. SOP: Incident Reporting Protocol for Deployed Personnel

Objective: To ensure a "dual-reporting" system that meets the legal WHS obligations of *both* SETCo and the Host Employer.
Procedure:

1. In the event of an incident involving a SETCo employee at a host site, the employee (if able) *must* report it *immediately* to: a. The Host Employer's on-site supervisor; AND b. Their designated SETCo supervisor.
2. The incident will be recorded in *both* SETCo's Injury Register (SOP 5.3) and the Host's incident register.
3. For any Notifiable Incidents , the Host Employer (as the entity in control of the site) is primarily responsible for notifying WHSQ. However, the SETCo WHS Manager *must* be informed immediately, co-operate fully with the investigation, and conduct a parallel investigation for SETCo's own due diligence.

Section 7: Global Talent & Skilled Migration

This section operationalizes SETCo's compliance with the *Migration Act 1958* and its significant legal responsibilities as a Standard Business Sponsor (SBS).

7.1. SOP: Standard Business Sponsor (SBS) Obligations

Objective: To ensure 100% compliance with all SBS obligations to maintain SETCo's sponsorship approval from the Department of Home Affairs, which is critical for sourcing global talent.
Procedure: SETCo *must* at all times:

1. Maintain all records related to sponsorship for 5 years.
2. Cooperate fully with any departmental inspectors.
3. Ensure sponsored workers are employed under terms and conditions no less favourable than an equivalent Australian worker (i.e., meet the Annual Market Salary Rate - AMSR).

4. Ensure the sponsored employee works *only* in their nominated occupation.
5. Pay all reasonable and necessary return travel costs for a sponsored worker and their family if requested in writing.
6. Not engage in discriminatory recruitment practices.

7.2. SOP: Visa Application and Nomination Process

Objective: To manage the orderly, compliant, and non-discriminatory nomination and visa application process for skilled workers (e.g., Temporary Skill Shortage (TSS) visa, subclass 482).
Procedure:
1. **Needs Assessment:** Confirm with the ecosystem partner (e.g., Aura) that a genuine skills shortage exists for a skilled occupation.
2. **Labour Market Testing (LMT):** Conduct LMT (i.e., domestic advertising) as required by Home Affairs for the specific visa subclass.
3. **Nomination:** Lodge a nomination with Home Affairs, demonstrating LMT and ensuring the role and proposed salary meet or exceed both the AMSR and the TSMIT.
4. **Visa Application:** Support the approved candidate in lodging their visa application.
5. **Record Keeping:** All evidence of LMT, the nomination application, and the visa grant notification *must* be saved in the employee's file in the Legal Compliance Archive (SOP 2.3).

7.3. SOP: Visa Holder Compliance Monitoring (HRIS)

Objective: To use the custom HRIS as an "overcompliance" tool to proactively monitor and automate visa-holder compliance.
Procedure:
1. The HRIS *must* securely store the following data fields for all sponsored employees: Visa subclass, Visa grant date, Visa expiry date, and the specific ANZSCO code and salary listed on the approved nomination.
2. The HRIS *must* generate automated alerts to the HR Manager and the employee at 90, 60, and 30 days before the visa expiry date.
3. Any manager proposing a *change in duties* or a significant change in work location for a sponsored employee *must* flag this to HR *before* the change occurs. HR must assess if a new nomination is required.
4. A quarterly audit *must* be run from the HRIS to ensure all sponsored employees' salaries match or exceed the salary specified in their nomination.

7.4. SOP: Notification of Changes to Home Affairs

Objective: To ensure strict compliance with the mandatory 28-day notification rules. Failure to notify is a breach of sponsorship obligations.
Procedure:
1. The HR Manager *must* notify the Department of Home Affairs, via the ImmiAccount portal, within **28 calendar days** of any of the following events: a. The cessation of employment of a sponsored worker (as per SOP 2.7). b. A change in the sponsored worker's duties (as flagged in SOP 7.3). c. A change to SETCo's legal name, ABN, or address. d. SETCo becoming insolvent.

2. The HRIS workflow for employee termination (SOP 2.7) *must* automatically create a "Notify Home Affairs" task with a 28-day deadline for the HR Manager whenever a visa holder's employment is ceased.

Table 7.1: Standard Business Sponsor Compliance Checklist

This is a quick-reference checklist for HR and Compliance Managers.

Obligation	Compliant?	SOP Ref.
Notify of cessation within 28 days?	Y/N	7.4
Notify of change in duties within 28 days?	Y/N	7.4
Ensure salary meets or exceeds nominated salary?	Y/N	7.1, 7.3
Ensure worker is *only* in nominated occupation?	Y/N	7.1, 7.3
Keep all sponsorship records for 5 years?	Y/N	7.1, 2.3
Cooperate with inspectors?	Y/N	7.1
Pay return travel costs if requested?	Y/N	7.1

Section 8: Training & Competency (RTO Operations)

This section governs SETCo's operations as a Registered Training Organisation (RTO) under the Australian Skills Quality Authority (ASQA), adhering to the *Standards for RTOs*. These SOPs are based on the new *2025 Standards for RTOs*, which prioritize "quality outcomes for learners and employers" over prescriptive compliance.

8.1. SOP: RTO Governance and Administration

Objective: To ensure all RTO operations comply with the *National VET Regulator Act 2011* and the *2025 Standards for RTOs*.
Procedure:
1. Maintain all ASQA registration requirements and submit all mandatory reporting on time.
2. Ensure all marketing and advertising materials are accurate, not misleading, and include SETCo's RTO code.
3. Ensure all operations comply with the three components of the 2025 Standards: a. **Outcome Standards** (delivering quality for students/industry). b. **Compliance Standards** (fit and proper person, NRT Logo use). c. **Credential Policy** (trainer/assessor qualifications).

8.2. SOP: Training Needs Analysis (TNA) for Ecosystem Entities

Objective: To meet the 2025 Standards' focus on "outcomes for... employers" by formally defining the competency requirements for each ecosystem partner.
Procedure:
1. The RTO Manager *must* conduct a formal TNA with each ecosystem partner (e.g., Aura,

Sandworm) *before* developing any training product for them.
2. This TNA *must* be documented and formally signed off by the partner, agreeing on the specific competencies, skills, knowledge, and "quality outcomes" required for their personnel.
3. This TNA documentation will form the primary evidence base for curriculum design (SOP 8.3) and assessment validation (SOP 8.4).

8.3. SOP: Curriculum Design and Development

Objective: To design flexible, high-quality, and innovative training products that are directly mapped to the TNA (SOP 8.2) and relevant industry Training Packages.
Procedure:

1. All curriculum shall be designed based on the partner-approved TNA and the principles of assessment.
2. Curriculum will be developed in a modular fashion to allow for "flexible and innovative" delivery, as encouraged by the 2025 Standards.
3. The specific high-risk content for Aura (SOP 5.5) and Sandworm (SOP 5.4) *must* be integrated into their respective training products.

8.4. SOP: Training Delivery and Assessment

Objective: To ensure training and assessment are valid, reliable, fair, flexible, and sufficient to produce the "quality outcomes" defined in the TNA.
Procedure:

1. Training and assessment shall only be delivered by trainers and assessors who meet the requirements of the *Credential Policy*.
2. **Validation of Assessment:** A formal validation schedule *must* be maintained. All assessment tools *must* be validated by a qualified person (independent of the trainer) *before* first use and reviewed periodically to ensure they are fit-for-purpose.
3. **Competency:** Assessment *must* be competency-based. A trainee is deemed "Not Yet Competent" until they can demonstrate the required skills to the specified standard (e.g., safely operate Aura's device, or identify a tunnelling hazard).

8.5. SOP: Issuance of Qualifications and Verifiable Credentials (VCs)

Objective: To issue compliant qualifications under the Australian Qualifications Framework (AQF) and, as a supplementary service, issue secure ecosystem Verifiable Credentials (VCs).
Procedure:

1. Upon a determination of "Competent" (SOP 8.4), the RTO will issue the student with the relevant AQF qualification (e.g., Certificate III) and/or a Statement of Attainment in a timely manner.
2. This formal qualification will *also* be issued as a digital VC into the student's personal digital wallet (as per SOP 10.4).

8.6. SOP: Student Support and Grievance Procedures

Objective: To provide a clear, fair, and transparent process for student support, complaints, and assessment appeals. **Procedure:** (Standard RTO student grievance and appeals process to be developed in line with ASQA requirements).

Section 9: Labour Hire Licensing Compliance (QLD)

SETCo's operational model of employing/training personnel and "supplying" them to work for partner entities legally defines it as a Labour Hire Provider under the *Labour Hire Licensing Act 2017 (QLD)*. This licence is mandatory to operate.

9.1. SOP: Maintenance of Labour Hire Licence

Objective: To ensure SETCo maintains its mandatory QLD Labour Hire Licence at all times.
Procedure:

1. The original licence certificate must be securely stored, and the licence number displayed as required.
2. The licence status must be monitored, and the renewal application lodged well in advance of the expiry date.
3. This licence *cannot* be sold, transferred, or "hired out" to any other person or entity.

9.2. SOP: Fit and Proper Person Test Compliance

Objective: To ensure SETCo and its key personnel (directors, executives) continue to meet the "fit and proper person" test on an ongoing basis.
Procedure:

1. All new directors and key executives *must* consent to and undergo relevant background checks (e.g., criminal history checks) upon appointment.
2. Any event that may adversely affect the "fit and proper" status of an individual (e.g., a relevant criminal charge, bankruptcy) *must* be immediately reported to the Board and the Labour Hire Licensing Unit (LHLU) as a change in circumstances.

9.3. SOP: Six-Monthly Reporting Obligations

Objective: To comply with the mandatory 6-monthly reporting requirements of the *Act*.
Procedure:

1. The Compliance Manager, in coordination with HR and Finance, *must* collect all data required for the 6-month report (e.g., number of workers supplied, to whom, locations, accommodation details, WHS incidents, tax compliance status).
2. This report *must* be lodged with the LHLU via the online portal within **28 days** of the end of the reporting period.
3. A copy of all submitted reports *must* be archived in the Legal Compliance Archive for auditing.

9.4. SOP: Internal Audit for Labour Hire Compliance

Objective: To operationalize the "overcompliance" mandate by proactively ensuring and demonstrating SETCo's compliance with all "relevant laws" as required by the *Act*.
Procedure:

1. One month *before* the 6-monthly report (SOP 9.3) is due, the Compliance Manager shall

conduct a formal internal audit.
2. This audit *must* verify and document compliance with key "relevant laws," including: a. *Fair Work Act 2009* (correct pay, NES, and record-keeping for all deployed workers). b. *WHS Act 2011* (WHS incidents, and currency of all Host Employer Agreements per SOP 6.1). c. *Taxation Acts* (PAYG, Superannuation, and Payroll Tax payments are all up-to-date).
3. Any non-compliance identified must be rectified *immediately* and, if necessary, disclosed in the 6-monthly report.

Section 10: Data, Privacy & Digital Identity

This section merges SETCo's standard legal obligations under the *Privacy Act* with the ecosystem's advanced "Sovereignty Stack" and "Verifiable Credential" philosophies.[1, 1]

10.1. SOP: Personal Information Handling (Privacy Act / APPs)

Objective: To ensure all collection, use, storage, and disclosure of personal information strictly complies with the *Privacy Act 1988* and the 13 Australian Privacy Principles (APPs).
Procedure:
1. **APP 1 (Openness):** Maintain a clear and up-to-date Privacy Policy.
2. **APP 3 & 5 (Collection):** Only collect personal information that is *reasonably necessary* for SETCo's functions (e.g., employment, training). At or before collection, provide a notice (Collection Notice) explaining why the information is being collected and how it will be used.
3. **APP 6 (Use/Disclosure):** Do not use or disclose personal information for a secondary purpose (e.g., marketing) without consent, or unless required or permitted by law.
4. **APP 11 (Security):** Take all reasonable steps to secure personal information (both digital and physical) from misuse, interference, loss, and unauthorized access.
5. **APP 12 & 13 (Access/Correction):** Provide individuals with access to their personal information upon request and take reasonable steps to correct any inaccuracies.

10.2. SOP: Data Breach Incident Response Plan

Objective: To provide a clear, rapid, and compliant response to any suspected data breach in line with the Notifiable Data Breaches (NDB) scheme.
Procedure:
1. **Contain:** Any suspected breach must be immediately reported to the IT Manager, who will take immediate steps to contain the breach (e.g., revoking access, isolating systems).
2. **Assess:** The IT Manager and Compliance Manager will conduct a rapid assessment to determine if the breach is an "eligible data breach" (i.e., likely to result in serious harm to any individual).
3. **Notify:** If assessed as an "eligible data breach," the Compliance Manager *must* prepare a statement and notify: a. The Office of the Australian Information Commissioner (OAIC). b. All affected individuals.

10.3. SOP: Data Sovereignty and User Control Protocol

Objective: To formally state and implement the *philosophy* of the Sovereignty Stack [1, 1] within SETCo's operations, demonstrating respect for user-centric data control.
Procedure:
1. This policy affirms SETCo's commitment to the principle of data sovereignty.
2. Where legally and operationally practicable, SETCo will prioritize mechanisms that give individuals greater control and ownership of their personal data.
3. This philosophy is primarily implemented via the Verifiable Credential (VC) system (SOP 10.4), which allows *credentials* (proof of skill) to be held by the user, rather than centrally by SETCo.

10.4. SOP: Issuance and Verification of Verifiable Credentials (VCs)

Objective: To establish a secure, auditable, and standardized process for issuing digital credentials (such as qualifications and competencies) to personnel wallets, in line with the ecosystem's technical architecture.[1, 1]
Procedure:
1. **Issuance:** Upon successful completion of an RTO assessment (SOP 8.4) or competency verification (SOP 5.4/5.5), the RTO Manager or WHS Manager will authorize the issuance of a cryptographically signed VC.
2. **Format:** The VC *must* adhere to the W3C standards and specific data schemas adopted by the Straddie Everything Ecosystem.
3. **Delivery:** The VC will be securely issued to the individual's registered Decentralized Identifier (DID) or personal digital wallet.
4. **Verification:** SETCo shall maintain a "verifiable data registry" (e.g., a secure ledger or blockchain) that allows ecosystem partners (like Aura or Sandworm) to cryptographically verify the authenticity of a VC presented to them by an employee, without needing to contact SETCo directly.

10.5. SOP: Data Architecture: Harmonizing Legal Archives and Sovereign Credentials

Objective: To provide a final, unambiguous clarification of SETCo's data architecture, resolving the inherent conflict between statutory record-keeping laws and the data sovereignty philosophy by defining the "single source of truth" for different data types.
Procedure: SETCo's data architecture is defined by *two distinct, parallel systems*:
1. **System 1: The Legal Compliance Archive (Internal)**
   - **Purpose:** To meet SETCo's non-delegable statutory obligations as an Employer, RTO, and SBS.
   - **Content:** All employee records as defined in Table 2.1 (Pay, Tax, Super, Leave, Hours, Visa Sponsorship documents, etc.).
   - **Access:** Controlled by SETCo. *Must* be "readily accessible" to a Fair Work Inspector or other regulator upon lawful request.
   - **Retention:** 7 years minimum.
   - **Source of Truth:** This is the primary and sole source of truth for all matters of employment, payroll, tax, and migration compliance.
2. **System 2: The Sovereign Credentialing System (External)**
   - **Purpose:** To provide user-controlled, portable, and verifiable *proof* of skills and

qualifications.[1, 1]
    - **Content:** Verifiable Credentials (VCs) for RTO Qualifications, TGA Competency Tickets, WHS Licences, etc..
    - **Access:** Controlled by the *individual* (in their wallet). Verifiable by third parties (via the registry, SOP 10.4).
    - **Retention:** Indefinite (held by user).
    - **Source of Truth:** This is the primary source of truth for *third-party verification* of a person's competency or qualification.

Section 11: Technology, Systems & Cybersecurity

This section (adapted from) governs the use of SETCo's internal technology, including the custom HRIS, LMS, and RTO platforms mandated in the SETCo blueprint.

11.1. SOP: Acceptable Use of Technology

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To ensure all personnel use SETCo's technology, systems, and networks responsibly, securely, and lawfully. **Procedure:** (Standard AUP, including prohibitions on unauthorized software, personal use, and illicit content).

11.2. SOP: System Backup and Disaster Recovery

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To ensure the integrity and availability of critical data (especially the Legal Compliance Archive) in the event of system failure or disaster. **Procedure:** (As per , including regular, automated, and off-site/cloud backups).

11.3. SOP: Cybersecurity Measures and Incident Response

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To protect SETCo's IT assets from cyber threats and unauthorized access. **Procedure:** (As per , including firewalls, system updates, access controls, and regular employee training on phishing/malware. This SOP links to the Data Breach plan in 10.2).

Section 12: Legal, Risk & General Compliance

This section details overarching compliance functions, including the "overcompliance" audit schedule and strategic risk management.

12.1. SOP: Contract Drafting and Review

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To ensure all contracts and legal agreements are sound, protect SETCo's interests, and are legally reviewed. **Procedure:**

1. (Procedure as per , including internal drafting and stakeholder review).
2. **Mandatory Legal Review:** The following documents *must* undergo external legal review before execution: a. All Inter-Entity Service Agreements (SOP 1.5). b. All Secondment Agreements (SOP 3.2). c. All Host Employer WHS Agreements (SOP 6.1).

12.2. SOP: Internal Compliance Audit Schedule

Objective: To operationalize the "overcompliance" mandate by implementing a schedule of proactive, internal audits to find and fix non-compliance *before* it is found by an external regulator.
Procedure:

1. The Compliance Manager shall maintain a formal Internal Audit Schedule.
2. This schedule *must* include, at a minimum: a. **6-monthly audit** of Labour Hire Compliance (to occur one month before SOP 9.3 reporting is due). b. **Quarterly audit** of Visa Holder Compliance (checking salaries and status per SOP 7.3). c. **Annual audit** of WHS Host Employer Agreements (to ensure all are current per SOP 6.1). d. **Annual audit** of PBI FBT Cap Management (to ensure no breaches of the $30k cap per SOP 4.5).
3. All audit findings must be reported to the CEO and, if material, to the Board.

12.3. SOP: Risk Management Framework

Objective: To proactively identify, assess, mitigate, and monitor strategic risks that threaten SETCo's mission, financial viability, or legal right to operate.
Procedure:

1. The Compliance Manager shall maintain a Strategic Risk Register.
2. This register *must* be formally reviewed by the Board at least quarterly.
3. The register *must* include, at a minimum, the following strategic compliance risks and their primary mitigations (as detailed in this manual):
    - **Risk:** Loss of PBI Status (due to private benefit or conflict of interest).
        - *Mitigation:* SOP 1.4 (Recusal), SOP 1.5 (FMV SLAs).
    - **Risk:** Adverse C-Hour Tax Ruling (creating unfunded tax liabilities).
        - *Mitigation:* SOP 4.4 (Seek Ruling), SOP 4.5 (FBT Cap Strategy).
    - **Risk:** WHS Prosecution (from incident at a host site).
        - *Mitigation:* SOP 6.1 (Host Agreement), SOP 6.2 (Site Audit), SOP 6.3 (Right to Withdraw).
    - **Risk:** Loss of Visa Sponsorship (SBS) (due to notification failure).
        - *Mitigation:* SOP 7.3 (HRIS Alerts), SOP 7.4 (28-day rule).
    - **Risk:** Loss of RTO Registration (due to poor training outcomes).
        - *Mitigation:* SOP 8.2 (TNA), SOP 8.4 (Validation).
    - **Risk:** Loss of Labour Hire Licence (due to non-compliance with "relevant laws").
        - *Mitigation:* SOP 9.3 (Reporting), SOP 9.4 (Internal Audit).
    - **Risk:** Critical Data Breach (loss of employee personal data).
        - *Mitigation:* SOP 10.1 (Security), SOP 10.2 (Breach Plan).

12.4. SOP: Partnership and Vendor Management

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To systematically identify, vet, and manage external (non-ecosystem) vendors and partners. **Procedure:**

1. **Identification & Vetting:** a. Define needs for external vendors or partners (goods, services, expertise). b. Research potential candidates through market analysis, industry networks, and recommendations. c. Establish clear selection criteria (e.g., quality, cost, reliability, ethical alignment, compliance record). d. Conduct thorough due diligence,

including reference checks, financial stability assessments, and review of past performance.

2. **Agreement & Onboarding:** a. Negotiate clear terms, deliverables, pricing, service levels, and key performance indicators (KPIs). b. Draft formal contracts or agreements, ensuring legal review (as per SOP 12.1). c. Establish communication protocols and onboard the vendor/partner into relevant SETCo systems or processes.
3. **Performance Management & Relationship:** a. Regularly monitor vendor/partner performance against agreed terms and KPIs. b. Conduct periodic performance reviews and provide constructive feedback. c. Manage the relationship proactively, addressing any issues or disputes promptly. d. Ensure timely processing of invoices and payments according to agreed terms.
4. **Review & Offboarding:** a. Periodically evaluate the overall effectiveness and value of the partnership/vendor relationship. b. Make informed decisions regarding contract renewal, modification, or termination based on performance and ongoing needs. c. Manage the offboarding process smoothly if a relationship concludes, ensuring knowledge transfer and final settlements.

12.5. SOP: Marketing and Communications Protocols

(Adapted from *Aura O.i. SOP Manual*) **Objective:** To ensure all external communications are professional, accurate, and aligned with SETCo's brand and legal obligations. **Procedure:**

1. **Brand Consistency:** a. Strictly adhere to SETCo's established brand guidelines (logos, colour palettes, typography, tone of voice) in all external materials. b. Maintain a central repository for approved brand assets. c. Implement an internal review and approval process for all new marketing collateral and external communications to ensure brand alignment.
2. **Content Development & Approval:** a. Ensure all content created for external audiences (website, brochures, press releases, social media) is accurate, clear, and professional. b. Verify all factual claims and data before publication. c. Establish a multi-level review process involving relevant stakeholders (e.g., legal, compliance, management) for sensitive or official communications like press releases.
3. **Media Relations & Public Statements:** a. Designate specific, trained individuals as official spokespersons authorized to speak on behalf of SETCo. b. Develop protocols for handling media inquiries, including response times and information clearance procedures. c. Prepare holding statements or templates for common inquiries or potential crisis scenarios (linking to SOP 5.6).
4. **Digital Presence Management:** a. Maintain accuracy and timeliness of information on SETCo's official website and other digital platforms. b. Adhere to established guidelines for social media engagement, ensuring professional conduct and appropriate responses to inquiries or comments.
5. **Compliance:** a. Ensure all marketing and communications materials comply with relevant Australian laws and regulations (e.g., Australian Consumer Law regarding misleading or deceptive conduct, privacy laws regarding use of images or testimonials). b. **Mandatory RTO Compliance:** All marketing materials that reference training or qualifications *must* include SETCo's RTO code, as required by ASQA.

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