# INTEGRITY RISK ASSESSMENT METHODOLOGY

FOR INSTITUTIONS OF CENTRAL GOVERNMENT

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# INTRODUCTION

The need to establish effective systems of integrity management is very important in the context of public institutions in the country, in order to have a professional public administration with ethics, integrity, and committed to serving the citizens. Public institutions, in the exercise of their functions and responsibilities, face corruption risks which may affect the performance of public administration, and consequently the civic trust in central government. Therefore, strengthening integrity and adopting systematic anti-corruption measures are vital in the context of public administration reforms. This priority occupies a very important place in the strategic document of the Inter-Sectoral Anti-Corruption Strategy (IACS) 2015-2020[1]. This strategy envisages concrete objectives in function of integrity planning, with the ultimate goal of installing a culture of integrity assessment in public institutions in the country. The development of integrity plans for public institutions is in support of the measures provided in the relevant Action Plan 2018-20202[2], pursuant to objective A8 "Systematic use of evidence that identify and prove corruption" and objective A9 "Strengthening the integrity of public employees". The Integrity Plan puts into operation an effective system of integrity management at the institutional level, a high standard of management that suits a modern central public administration. Specifically, the integrity plan instrument will provide the conceptual framework for policies and measures to prevent violations of the integrity of public officials in the institution.

In order to help public sector institutions in their efforts to adopt anti-corruption policies and instruments at the institutional level, the instrument for Integrity Risk Assessment Methodology (IRAM) for Central Government, piloted at the Ministry of Justice, has been drafted. The areas of operation of the Ministry of Justice are included in the document for this purpose. The methodology is relevant to the assessment of integrity risk in all central government institutions and aims to contribute to strengthening the process of planning and managing integrity risk in the public sector in Albania.

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1    Decision of the Council of Ministers no. 247 dated 20.03.2015 "On the approval of the Cross-cutting/ Inter-Sectoral Anti-Corruption Strategy for the period 2015-2020"

2    Decision of the Council of Ministers no.241 dated 20.04.2018

IRAM aims to serve the central government institutions in drafting, implementing and monitoring integrity plans. Theoretically, the methodology relies mainly on the analysis of the national legal framework on the organization and functioning of public administration, ethics and integrity, and legislation in the areas regarding the functioning of public institutions that carry risks of breach of integrity. In terms of risk analysis, from the methodological point of view the main references are ISO Standards, codified in the norms E 31 000 and EN 31010 ISO, adapted to analyze the risk of integrity in the public sector. Another source is the Integrity Risk Assessment Methodology for Local Self-Governing Units[3], which was implemented with the establishment of integrity management systems in some municipalities of the country. Another source in drafting this document have been good international practices in public sector integrity management systems.

The document aims to support the process of planning and managing integrity in the public sector in the country. It presents a general framework of key risk management concepts, which includes: planning, identifying, analyzing and assessing the risks of integrity, as well as drafting, approving, implementing and monitoring the integrity plan in a public institution. The methodology provides the theoretical framework of the risk management process, methodological instruments, stages of the process for the development of the integrity plan in the institution, as well as a standard model of the integrity plan.

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3   IRAMLSU was drafted in the context of the Project "Strengthening Ethics and Integrity in Local Government", in the framework of UNDP assistance through the STAR2 project

# 1. INTEGRITY IN CENTRAL GOVERNMENT

In the context of the public sector, integrity consists in meeting certain characteristics, such as: being transparent, accountable, ethical and honest, effective and efficient, i.e. a government responsible for improving the performance of public administration and reducing levels of corruption.

Public institutions in the exercise of functions defined by law face various corruption risks, which hinder the realization of strategic, programming or operational objectives of the institution. In this context, the integrity risk management process is a process through which the institution methodically addresses integrity risks for work processes / activities (according to functions), with the ultimate goal of strengthening institutional resistance to corruption and reducing its levels.

## 1.1 Integrity as a standard

Integrity is already a well-established standard of good governance, a prerequisite for the legitimacy of government actions, and is of particular importance in the context of the fight against corruption. Integrity is a necessary standard for the functioning of an integrity management system in a public institution, which relies on the assessment of integrity risk. At the institutional level, the implementation of an anti-corruption plan of measures to address the risks of integrity is aimed at improving the efficiency, effectiveness, transparency and accountability of the institution, as well as increasing public confidence in governance.

## 1.2 Managing integrity risks in central governance

Integrity risk management is a continuous and systematic process in the public institution, which addresses the regulatory, organizational and practical risks of integrity that belong to the institutional past, the current situation, but also the future of the performance/activity of the public institution. In this context, the integrity management system is a preventive instrument of corruption in the public sector institution. In order for public institutions to have a functioning integrity management system,

it is important that they adopt and implement a framework for continuous improvement of integrity, as well as install the integrity management process as a work culture in the exercise of responsibilities and its own functions. Thus, it is required that the institution: i) adopt and implement pro-integration policies such as the code of conduct and the integrity plan; ii) to supervise and evaluate the implementation of the activities of the institution in relation to the prevention of corruption and the strengthening of integrity, against the fulfillment of the institutional objectives of integrity and pro-integration policies adopted for this purpose. The results of the evaluation should be reported to the head of the institution; iii) to continuously carry out activities related to the improvement and strengthening of the integrity of the institution and the integrity management system.

## 1.3 Integrity Plan

The Integrity Plan is a strategic and operational document, which is based on the results of the integrity risk assessment process for all work processes in the institution. The Integrity Plan serves the institution in identifying, assessing and preventing the totality of risks that affect the integrity of the institution and the individuals working in it. The Integrity Plan is a documented process that assesses the level of vulnerability of an institution and its exposure to corruption and unethical and unprofessional practices. An integrity plan will provide a conceptual framework on policies and measures to prevent violations of the integrity of public officials and employees, as well as to monitor the effects of measures implemented in a public institution.[4] In addition, the plan is a working document which defines concrete measures for addressing the risks of integrity and achieving the strategic and specific objectives of the institution.

### 1.3.1 The purpose of the Integrity Plan

The plan will play a very important role for the public institution, and specifically in:

- Improving an effective system of integrity management in the institution, which aims to ensure compliance with legal, procedural requirements, internal regulatory framework, and international standards in the field. This system will be functional through the development of the human capacity of the institution at all levels for effective anti-corruption, and the establishment of co-ownership

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4    Decision of the Council of Ministers no. 241, dated 20.4.2018 "On the approval of the Action Plan 2018-2020".

for the whole process, for the development of the implementation and monitoring of integrity plans, for all employees of the institution;

● Strengthening public accountability and transparency in the institution, to ensure increased public confidence in governance and public sector integrity performance;

● Strengthening institutional resistance to integrity breaches, by improving operational controls in the areas of the institution's function and corruption risk work processes;

● Planning the integrity risk management in the institution, with a focus on the areas of function of the institution with the highest risk of integrity breach, aiming at the integration of this process in the institutional culture. Strengthening institutional resistance to violations of integrity by improving operational controls in areas of institutional function with corruption risk.

## 1.4 Principles of Integrity Risk Assessment for central government institutions

● The methodology is based on several key principles, the implementation of which affects the prevention of violations that violate the integrity of the institution. These principles include:

● Minimize excessive and unnecessary discretionary power possessed by the executive authorities, administration or bodies / structures in making a decision, and / or clarifying the definition of criteria, procedures and standards for the decision-making process;

● Increasing transparency and public accountability in the work of the institution, which minimizes the risks that damage the integrity of the institution and is a guarantee for the implementation of the principle of legality;

● Strengthening control mechanisms for the institution. In principle, any action by the public authority should be subject to control in order to maintain the "control balance" system and the principle of separation of powers;

● Simplifying and reorganizing the procedures implemented by the central authorities, bodies or administrations which do not meet the purpose for which they were approved and create opportunities for integrity risks. [5]

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5    Mojsilović, M. (2017) "Model of Anti-corruption plan with Guidelines for Adoption, Implementation and Monitoring". Anti-Corruption Agency, Republic of Serbia, Belgrade

# 2. THEORETICAL FRAMEWORK OF INTEGRITY RISK ASSESSMENT METHODOLOGY

## 2.1 GENERAL CONCEPTS

**"Integrity risk"** is defined as the effect of uncertainty on the organizational objectives of the institution, caused by corruption and integrity breaches (adapted from the ISO 73: 2009 guideline, definition 1.1).[6]

 **"Risk assessment",** according to the definition given in the Risk Management Strategy document[7] (2015), is the process of risk assessment related to the impact it brings if a risk occurs or is likely to occur. So risks are analyzed considering opportunities and impact, as a basis for deciding how to be continuously managed.[8]

**"Integrity planning"** means the process of assessing the risk of integrity and developing integrity plans, in accordance with the objectives and subjects of integrity.

**"Risk"** is the possibility of a certain event occurring, which would negatively affect the achievement of the objectives and integrity of the institution. Opportunity is defined as the likelihood that an event will occur and affect the achievement of

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6     Monkova, M. (2015) "Guidelines for integrity planning and integrity management, Kosovo: UNDP, p. 9.

7     Order no. 41 dated 30.03.2015 of the President of the Supreme State Audit "On the approval of the Risk Management Strategy in the Supreme State Audit".

8     According to the definitions given by the SSA Risk Management Strategy (2015), "inherent risk" is exposure that arises from a specific risk before any action is taken to manage it (before taking action on identifying and eliminating it). While "residual risk" is exposure to a specific risk after taking action to identify and eliminate it, as well as the presumption that the action undertaken has been effective.

objecties. [9]

**"Risk factor"** means any attribute, characteristic or exposure that an individual or institution has to risk, or process that increases the likelihood of a corrupt behavior, breach of integrity, unethical behavior, or any other type of behavior that may have a negative effect related to the objectives and goals of the institution (e.g. the exercise of competencies or decision-making processes).[10]

## 2.2 INTEGRITY RISK ASSESSMENT PROCESS IN INSTUTIONS

Assessing the integrity risk in public central government institutions has a comprehensive and ongoing approach to developing effective instruments in combating corruption and managing integrity at the institutional level. This approach implies that the integrity plan must be adapted to the specific environment in which corruption may occur, the results of the risk assessment process identified, and thus have a specific adaptation to the institution. Through a structured self-assessment process, the institution conducts: a) the identification of risks - the definition of work processes that are exposed to corruption; b) assessment of the level of risks by analyzing the possibility of occurrence and the level of consequence; c) risk prioritization; and d) drafting an integrity plan which also includes anti-corruption measures.

The head of the public institution sets up a working group with employees of the institution to develop risk assessment. The working group is chaired by a coordinator, under whose leadership the working group takes over the tasks for the process of assessing the risk of integrity in the institution. All directorates of the institution are committed to supporting the working group throughout the process. For this purpose, a self-assessment questionnaire is prepared which covers all areas of functioning of the institution that are exposed to integrity risks. The process continues with the consolidation of the data obtained from the risk assessment process and the drafting of the integrity plan, with the relevant measures for addressing the integrity risks. The Integrity Plan, after consultation with the employees of the institution and interested stakeholders, is approved by the head of the institution.

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9    Law no. 10 296/2010 "On financial management and control".

10   Selinsek, Liljana (2015) "Corruption Risk Assessment in Public Institutions in South East Europe Comparative Study and Methodology", Regional Cooperation Council, f.18 (available at: http://rai-see.org/wp-content/uploads/2015/10/CRA_in_public_ins_in_SEE-WEB_final.pdf).

Monitoring and reporting of the integrity plan are equally important stages of the risk management cycle in the institution. Monitoring is periodic (every year) and includes the performance of activities by employees / groups of responsible employees, for the implementation of measures adopted in the integrity plan. Meanwhile, reporting is a regular procedure that ensures the implementation of the integrity plan for integrity risks according to the set deadlines. This process is followed by the responsible person, appointed by the head of the institution, who is responsible for the progress of the implementation. The minimum reporting frequency is within a quarterly period.

Integrated risk management in public institutions includes the implementation of 6 phases which are interrelated, and which are detailed below:

1. Setting Objectives;

2. Identification of risks;

3. Risk assessment;

4. Treatment of Risk;

5. Risk management action plan and risk register;

6. Monitoring and reporting.

## 2.2.1 Setting objectives in the IRA process

The IRA process is an integral part of strategic planning, in order to identify and assess the integrity risks related to the implementation of the objectives set out in the strategic plan of the institution. The first step is to create the context for strategic planning taking into account the internal and external parameters of the institution, the framework of institutional action and risk factors. The objectives are set following the creation of the institutional context. The objectives are strategic, [11]programmatic and operational[12] and are defined according to the areas of the institution's functioning.

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11    The medium-term and strategic objectives of the institution usually include a period of 3.5 years or more.

12    Operational objectives are short-term objectives set out in the institution's annual work plans.

## 2.2.2 Identification of risks

The process continues with the identification of integrity risks, which include finding, recognizing, and describing integrity risks. The purpose of this phase is to identify the events that may occur in meeting the objectives set for the institution. Identification of risks refers to the past experience found in various reports of the institution's activity, the current situation, as well as the future related to the expected political, economic, social changes, etc. The identification of risks and its related factors (sources, impact, and causes) is performed at the same time. By the end of this phase, a comprehensive list of those risks that hinder the achievement of the set objectives will be obtained according to the work processes performed by the institution.

**Internal risks** stem from the activity of the institution. They include, but are not limited to:

- risks related to aspects of sectoral policy - strategic planning, sectoral policy evaluation indicators, sectoral policy standards, etc.;

- risks related to the aspects of legality and supervision (clarity, stability and accuracy in the regulatory framework of the institution: approved rules / procedures) - coordination of relations between different directorates / sectors; supervising the activity of subordinate units, supporting subordinate units to meet the set objectives, etc.);

- risks related to regulatory functions such as: issuance of permits, licenses, inspections, etc.;

- risks related to supportive functions such as: human resources, ethics and behavior in the institution; internal organization etc.

- related information and communication risks: communication methods and channels; high quality and timely information made available; document control, public relations, IT system; public procurement, institution infrastructure;

- risks associated with operating processes - service delivery.

This phase also includes the identification of risk factors, as well as the impact they may have on the integrity of institutions. Internal regulatory framework, internal reporting within the activities of various directorates of the institution constitute primary data for this phase. Other sources within the institution that ensure the process of identifying risks, factors and their impact, are meetings with employees of the institution by all sectors (focus groups), as well as data derived from the analysis of the questionnaire with all

employees of the institution. Sources can also be provided from outside the institution such as: external audit reports of the institution; reports of supervisory authorities (such as those of the Supreme State Audit, inspectorates, etc.); administrative or judicial practices, as well as various independent studies on the activity of the institution.

### 2.2.3 Risk Assessment

This stage involves understanding of the integrity risks identified at the above stage. The identified risks will be assessed in relation to:

- the probability of an unwanted event occurring when there are no control activities or when they are insufficient to prevent or reduce the risk;
- the consequence that an unwanted event might take place in the institution if it occurred. The consequence may be some kind of damage that is caused or an opportunity that is not missed (which may be quantitative or described in specific terms).

This analysis is mostly assisted by focus groups on risk assessment by institution employees, according to the directorates where they work. The possibility of risk occurrence and its impact is divided into three categories of evaluation: high / moderate / low.

***Table no.1 - Classification of the probability of occurrence of a risk and assessment of the impact of its occurrence:***

| Evaluation | Result | Assessment of chance/ probability of risk occurrence | Assessment of impact/influence of risk occurrence |
|---|---|---|---|
| **Low** | 1 | Risk did not occur in the past or occurs very rarely, so it is unlikely that this will occur in the same time period in the future. | The impact on the integrity of the institution is insignificant |
| **Moderate** | 2 | The risk has appeared in a number of cases in the past, so the probability of occurrence in the same time period in the future is moderate. | Impact is important for the integrity of the institution |

| Evaluation | Result | Assessment of chance/ probability of risk occurrence | Assessment of impact/influence of risk occurrence |
|---|---|---|---|
| **High** | 3 | Risk has often appeared in the past and there is a high probability that it will occur in the same time period in the future | Impact is very important for the integrity of the institution |

Risk assessment implies the ranking of integrity risks, starting from primary risks that have a substantial impact on the integrity of the institution and that may jeopardize its effectiveness and reputation, to low risks that may not need measures but just suffices to be monitored continuously.

The risk level for all identified and assessed risks is determined after analyzing the probability of occurrence of risks and the consequences of the risks that have already occurred. Based on the assessment made for the risks, at this stage the importance of the risks for the institution is assessed. Respectively, it is decided which risks will be accepted and treated according to their priority. The listing of risks is done according to importance, and includes the assessment between the probability of occurrence or appearance of a risk and its impact on the integrity of the institution. The final level of risk is determined according to the Risk Matrix, in the form of a combination between probability and consequence (1 and 2 low, 3 and 4 medium and 6 and 9 high) (refer to table no.2). In this way, the primary risks of the institution are identified, which should be covered by immediate measures to improve integrity. For example, in a situation where the working group estimates that "the lack of establishing the unit for informing in the institution will appear and be repeated more than once" and that "the impact is very important for the integrity of the institution", multiplying 3 x 3 = 9, shows that the risk intensity is high and that the measures to reduce this risk should be immediate.

*Table no.2: - Risk intensity assessment - Risk matrix*

| RISK INTENSITY ASSESSMENT | RISK ASSESSMENT | | |
|---|---|---|---|
| | Risk has not appeared in the past or appears very rarely, so it is unlikely that this will happen in the future (1) | The risk has appeared in a number of cases in the past, so the likelihood that this will happen in the future is moderate (2) | Risk has often occurred in the past and it is likely that this will happen in the future (3) |
| The impact on the integrity of the institution is insignificant (1) | 1 | 2 | 3 |
| The impact on the integrity of the institution is significant (2) | 2 | 4 | 6 |
| The impact on the integrity of the institution is highly significant (3) | 3 | 6 | 9 |

CONSEQUENCES OF RISK OCCURRENCE

## 2.2.4 Treatment of risk

Listing of risks based on priority shall serve as a basis for determining measures[13] for the treatment of identified risks. Addressing risk means defining one or more alternatives of managing risk, as well as combining or modifying them case by case. The determination of priority measures is done so that the resources (financial, human, infrastructural, etc.) made available by the institutions shall be allocated according to primary needs. Priority risks require immediate handling with priority measures. Continuous or periodic monitoring of the effectiveness of existing measures, or other additional measures may be assigned case by case for risks categorized as low. Risk treatment can also be carried out through auditing activities, which may be rules, procedures or actions that aim to reduce the risks of integrity to achieve objectives. Risk auditing activities shall include preventive, corrective, managerial, or revealing activities.[14] The purpose of this phase is to document how the proposed risk management measures will be implemented. At this stage, the existing resources of the institution and the deadline for the implementation of measures should be taken into account, so that the defined control measures are feasible, and do not affect the efficiency of the risk assessment process.

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13    Risk management measures include: measures to limit or reduce risk - planning checks that provide reasonable assurance that the risk is limited to acceptable parameters, depending on the importance and cost of the checks. The risks to which such control measures are addressed are subject to periodic monitoring; risk transfer - the head of the institution estimates that the high risk can be transferred to another institution (by mutual agreement between the two parties); risk tolerance - this measure is taken for risks that have a limited impact on achieving the objectives of the institution or when the costs of the measures to be taken are inversely proportional to the potential benefits. The risks to which this measure is addressed must be constantly monitored. The probability that these risks will pass into priority risks is high, as there is a possibility that under the influence of various factors (internal or external) the possibility of the occurrence of unwanted events and their consequences increases; risk termination - refers to avoiding certain risks by finally waiving the objectives associated with these risks.

14    Control activities include: preventive control activities: which aim to reduce the likelihood of an unwanted outcome, e.g. the division of tasks between the staff of a sector where each employee does not act for a certain decision-making without the approval of another employee, etc.; corrective control activities: which aim at correcting unwanted results and provide ways to repair damages caused such as the condition of ensuring public contracts which enables the payment of financial damages in the event of the occurrence of a risk; management activities conceived to achieve a certain result (such as safety measures, or requirements for maintaining health and life); or training staff with the required skills that enable them to work unattended; reconnaissance control activities perceived to identify cases where unwanted results have already occurred (e.g. controls of reserves, reconciliation activities or procedures).

## 2.2.5 Risk management action plan

Risks identified by priority and associated with the relevant measures are part of the Integrity Risk Management Action Plan. The purpose of the plan is to document how certain measures will be implemented, including: describing identified risks, objectives of the action plan, proposed activities, financial costs, responsible persons, and implementation deadline (Plan format Integrity Model, Chapter V of this document).

## 2.2.6 Monitoring and reporting of the Action Plan - Integrity Plan

The implementation of the Integrity Plan will be monitored in a planned manner, periodically, and will be updated in accordance with developments or legal and sub-legal, institutional, procedural changes, as well as changes in personnel that affect the functions and activity of the institution.

Continuous monitoring of the implementation of the Integrity Plan as an important stage of the integrity risk management cycle in the institution, ensures that:

- control activities and measures to address integrity risks to be effective in design, operation and implementation;
- the procedures should be clear;
- the integrity plan to be forwarded to the institution.

The monitoring will determine whether these implemented measures have been effective, whether they have identified changes in the context of the institution or changes in the risks themselves, which may require the reviewing of existing measures and risk priorities, as well as drawing lessons for more better planning in the future. The responsibilities for the regular monitoring of the Integrity Plan have been assigned to an employee by the head of the institution[15].

Reporting is a regular procedure that ensures the implementation of the action plan for integrity risks according to the set deadlines. This process is followed by the responsible person, appointed by the head of the institution, who is responsible for progress of implementation. The minimum reporting frequency is within a

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15   In order to guarantee the implementation and not the case-by-case assignment of persons, it may be useful to determine in the job description of a relevant position, in order to ensure continuous implementation and monitoring.

six-month period. Reporting allows the head of the institution to take timely remedial action, if the implementation of any particular measure has brought difficulties or delays.

## 2.3 ASSESSMENT METHODS

The resources that will be used to assess the risk of integrity in the institution are a combination of secondary sources (legal-institutional analysis and review of documentation) as well as primary sources (surveys and questionnaires, focus groups, interviews with key executives). Secondary resources will be used in the preliminary phase of the integrity risk assessment process, in order to obtain a general overview of the governance and functioning of the institution, as well as to identify the areas most exposed to integrity risk. Primary resources will be used for a more detailed analysis of the most critical integrity risks by including a specialized analysis regarding the level of risks (the possibility of occurrence / occurrence of risks and the impact on the integrity of the institution). The methods to be used in integrity risk assessment will be:

- **Documentary analysis**, a qualitative method which includes an analysis of all legal acts in force in relation to: central government and the legal framework for integrity; the legal framework that regulates the scope of the institution; of the internal regulatory framework of the institution with a focus on the administrative acts issued for the administration of the functions for which the institution is responsible (regulatory functions, financial resources, human resources); administrative acts that define general and normative rules of conduct, as well as mandatory standards in accordance with the law (on ethics, integrity, conflict of interest, declaration of assets, prevention of corruption); national political documents related to the fight against corruption; internal documents such as various annual reports, audits, etc. and external documents (SSC reports, audit) and other information needed to assess the exposure to integrity risks in the institution; as well as previous internal and external audit findings.

- **Interview,** qualitative interpretation of findings that include interviews with employees of the institution in its various sectors as face to face, semi-structured ones. Employees have been identified from their positions and working experience in the institution (snowballing).

- **Surveys,** quantitative method which includes questionnaires, statistical analysis of the perception of employees of the institution through a structured questionnaire on the risks of integrity in their institution or activities most exposed to corruption. The questionnaire that will be used by the working group is presented in appendix no. 2 of this document.

# 3. RISKS OF INTEGRITY IN PUBLIC INSTITUTIONS OF CENTRAL GOVERNMENT

The institution in the public sector consists of the entirety of: (i) _its actors:_ the head of the public institution which is the executive body and the administration of the institution; _(ii) areas of activity or functions_ for which the public sector institution is responsible and has the legal competence to exercise them; (iii) _the regulatory environment / framework_ which includes: the principles and standards of conduct of the actors of the public institution; rules and procedures for exercising the functions of the institution and meeting the principles.

Integrity risks can appear in most areas of the public sector institution's function. Integrity risks are related to the probability of occurrence of events related to corruption and the integrity of the public institution, which hinder it in meeting its strategic, programmatic and operational objectives. The institution is constantly faced with risks of its integrity. The probability of occurrence of an event affecting the integrity of the institution is daily. From the methodological point of view, **the activity of the public institution can be grouped into five common areas and specific / specific areas (depending on the functions and responsibilities they exercise**) which are seen as high-risk areas but are not limited to these.

Common areas for public central government institutions mainly include: 1. The field of financial management; 2. Human resources management field; 3. Field of control, audit and anti-corruption mechanisms; 4. Transparency field; 5. Field of archiving, storage and administration of documents as well as information, and electronic documents. Elements of these areas, derived from the legal framework in force, are detailed in the following tables:

## 3.1 Field of financial management.

This is an area with many risks and major impacts. Risks can occur both in the planning and collection of financial resources and in

their use (control and audit of budgets, asset management, expenditure payments, public procurement, etc.). For methodological purposes and not wanting to limit ourselves to them, in the following tables we are giving the constituent elements of the field of financial management and other fields. This will enable us to more easily identify the risks and their impacts, identify the actors that with their actions or lack of them are the cause of these risks, and more easily identify the measures to addressing the risks.

*Table no.3: Field of Financial Management*

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence for any risk | The impact of risk on integrity of the institution |
|----|--------|----------------------------------------|--------------------------------------------|----------------------------------------------------|
| 1 | Preparation, approval and implementation of the strategic development plan of the institution | 1. …… <br> 2. ………. <br> 3. ……… | a. Often <br> b. Probable <br> c. Rare | d. High <br> e. Moderate <br> f. Low |
| 2 | Preparation, approval and implementation of the medium-term budget program | | | |
| 3 | Preparation, approval and implementation of the annual budget of the institution | | | |
| 5 | Preparation, approval and implementation of rules and procedures for the storage, protection and decommissioning of assets | | | |
| 6 | Preparation, approval and implementation of norms and rules for the storage and administration of financial documents | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence for any risk | The impact of risk on integrity of the institution |
|----|--------|------|------|------|
| 7 | Preparation and approval of the register of public procurement forecasts and their implementation | | | |
| 8 | Establishment and functioning of the bid evaluation commission and procurement unit | | | |
| 9 | Preparation, approval and publication every month (after April 30 of each budget year) of the summarized reports on the progress of the realization of the main indicators of revenues and expenditures, according to the annual plan and the plan of the period of time. | | | |
| 10 | Preparation, approval and publication of the consolidated annual budget implementation report. | | | |

## 3.2 Field of human resources management.

This is an important area of the institution in which events with multiple negative impacts can occur. A series of events can occur in the appointment, selection, transfer, dismissal of staff, in the approval, implementation or change of organizational structure, regulations and various codes that shall have impact on the integrity of the institution.

*Table 4: Field of Human Resources*

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|----|--------|----------------------------------------|---------------------------------------------|----------------------------------------------------|
| 1 | Establishment and operation of human resource management unit | 1. …… <br> 2. ………. <br> 3. ……… | a. Often <br> b. Probable <br> c. Rare | d. High <br> e. Moderate <br> f. Low |
| 2 | Establishment and functioning of the disciplinary commission | | | |
| 3 | Creating and administering staff files for each employee | | | |
| 4 | Establishment and operation of a job evaluation system | | | |
| 5 | Drafting and approval of the structure and organigram of the administration of the institution | | | |
| 6 | Drafting, approving and implementing the plan / program for the qualification and training of the administration | | | |
| 7 | Drafting, approval and implementation of the internal regulation of the administration / Code of Ethics of the institution | | | |
| 8 | Drafting and approving the policy document for personal data protection | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|---|---|---|---|---|
| 9 | Establishment and functioning of the authority responsible for preventing conflict of interest in the institution | | | |
| 10 | Drafting and approving of duties, functions and responsibilities of the Responsible Authority for the prevention of conflicts of interest | | | |
| 11 | Establishment and administration of a conflict of interest register | | | |
| 12 | Creating and administering a register for gifts | | | |

## 3.3 Field of control, audit and anti-corruption mechanisms.

This field, on the one hand, has the mission of dealing with the various risks faced by the institution, and on the other hand, it itself faces many negative risks and impacts. Numerous negative events can occur in the establishment and operation of internal audit and the system of financial management and control, in the drafting, approval and implementation of various regulations and codes, etc. The following is a table with the constituent elements but not limited to the related field:

*Table no.5: Field of control, audit and anti-corruption mechanisms*

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|----|--------|------|------|------|
| 1 | Establishment and operation of internal audit service | 1. …… <br> 2. ………. <br> 3. ……… | a. Often <br> b. Probable <br> c. Rare | d. High <br> e. Moderate <br> f. Low |
| 2 | Establishment and operation of the Financial and Control Management System (FCM) | | | |
| 3 | Establishment and operation of the Strategic Management Group | | | |
| 4 | Drafting and approval with an administrative act of the "Audit Charter" on the organizational status, purpose, mission, objectives of the work, accountability and responsibilities of the internal audit unit | | | |
| 5 | Drafting and approval of audit traces for procedures related to the main activities of the institution | | | |
| 6 | Drafting, approval and implementation of control activities, including written procedures and policies | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|----|--------|------------------|------------------|------------------|
| 7 | Establishment and operation of the responsible unit which registers, investigates administratively and examines the signals for suspected acts or practices of corruption | | | |
| 8 | Drafting, approving and implementing special internal regulations for the procedure of reviewing the administrative signaling investigation and confidentiality protection mechanisms | | | |
| 9 | Drafting, approving and implementing rules and procedures for notification, review, detection and reporting of administrative vulnerabilities, discrepancies and violations that create grounds for corruption, fraud, or irregularities | | | |
| 10 | Drafting, approving and enforcing internal rules and norms to avoid conflict of interest | | | |
| 11 | Drafting, approval by administrative act of the "Code of Ethics" and implementation of rules of conduct and principles that should guide the work of auditors | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|---|---|---|---|---|
| 12 | Drafting, approving and implementing internal rules on the ways of sharing information and communication between the actors of the institution and different levels of administration of external control reports or internal audit and their placement at the disposal of the public | | | |
| 13 | Creating an appropriate control environment (Including personal integrity and professional ethics; managerial policies and work style; organizational structure, guarantee of division of labor, hierarchy and clear rules, rights, responsibilities and reporting lines; policies and practices of human resource management) | | | |

## 3.4 Field of transparency

The mission of the central government institution is to ensure effective, efficient and transparent governance. Numerous events with negative impacts / consequences can occur in the field of transparency of the institution, such as in the appointment of the coordinator for the right to information, the updating of the transparency program, the quality and transparency of the process. The following is a table with the constituent elements of this field but not limited to these elements.

*Table 6: Field of Transparency*

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|----|--------|----------------------------------------|---------------------------------------------|----------------------------------------------------|
| 1 | Assigning the coordinator for the right to information and approving the tasks, responsibilities and interaction with other structures of the institution | 1. ...... 2. .......... 3. ......... | a. Often b. Probable c. Rare | d. High e. Moderate f. Low |
| 2 | Approval, publication and updating of the Transparency Program | | | |
| 3 | Appointment of the coordinator for public announcement and consultation and approval of tasks, responsibilities and interaction with other structures of the institution | | | |
| 4 | Description in the internal regulation of the institution of procedures and rules for public consultation | | | |
| 5 | Determining the ways and forms of presenting the civic initiatives, reviewing procedures and their approval in the regulation of the institution | | | |
| 6 | The central institution regularly holds public consultation sessions before reviewing and approving its acts. | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|---|---|---|---|---|
| 7 | Website operation: Electronic Register for Public Notification and Consultation | | | |
| 8 | Preparation of the Annual Transparency Plan for the institution | | | |
| 9 | Preparation of the Annual Transparency Report and sharing with the administration | | | |
| 10 | Determining the point of contact in the institution for the protection of personal data | | | |
| 11 | Prediction of internal rules for the protection of personal data and information related to the state | | | |

## 3.5 Field of archiving, storing and administering of documents as well as information, and electronic documents.

This is also an important area in the activity of the institution. On the one hand, this field contains the memory of the institution and on the other hand, it is the daily work with documents, with the administrative acts, with the electronic systems and service. Events with negative impacts / consequences are numerous in this area, these events are related to the creation and operation of the archive, management / administration of the archival fund, in the creation and maintenance of electronic information systems, in the design, approval and implementation of regulations and various manuals. The following is a table with the constituent elements of this field but without being limited to just these.

*Table no.7. Field of archiving, storing and administering of documents as well as information, and electronic documents.*

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|---|---|---|---|---|
| 1 | Drafting, approval and implementation of the internal regulation for the implementation of the legislation on archives | 1. …… <br> 2. ………. <br> 3. ……… | a. Often <br> b. Probable <br> c. Rare | d. High <br> e. Moderate <br> f. Low |
| 2 | Management / administration of the institutional archival fund | | | |
| 3 | Establishment and operation of the Archive | | | |
| 4 | Establishment and functioning of the Expertise Commission | | | |
| 5 | Establishment and use of a unified model for the administrative document in the institution | | | |
| 7 | Development and maintenance of electronic systems | | | |
| 8 | Establishment and functioning of the unit for information, communication and information security and electronic documents | | | |
| 9 | Creating and maintaining information systems | | | |
| 11 | Risk management for information systems | | | |

The areas of special functions of the Ministry of Justice include: 1. Regulatory Aspect of Justice Cases; Field of Deregulation, Permits, Licenses and Monitoring; 3. Scope of Policies and Strategies in the Field of Justice; 4. Field of Legislation Drafting and Evaluation; 5. Field of Legal Relations and International Judicial Cooperation; 6. Programs and Projects in the field of Justice and 7) Programs and Projects in the Anti-Corruption Field. Elements of areas of specific functions (derived from the legal and regulatory framework governing the functioning of the Ministry of Justice) are detailed in the following tables. In the first step, by identifying and analyzing the risks according to areas of activity, we can create all the premises and opportunities to identify, analyze and address the risks of integrity at the institutional level.

*Table 8: Regulatory Aspect of Justice Cases*

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|----|--------|------------------------|---------------------|---------------------|
| 1 | Dealing with the requests of the Vetting bodies and other justice institutions / KED | 1. …… <br> 2. ………. <br> 3. ……… | a. Often <br> b. Probable <br> c. Rare | d. High <br> e. Moderate <br> f. Low |
| 2 | Administrative treatment of claims for financial damages of former political persecuted | | | |
| 3 | Preparation of recommendations of the Council of Ministers for the General Prosecutor's Office | | | |
| 4 | Monitoring the Strategy for the Juvenile and Action Plan 2018-2021 | | | |
| 5 | The process of enforcing the Criminal Justice Code for the Juvenile | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|----|--------|----------------------------------------|---------------------------------------------|---------------------------------------------------|
| 6 | Process of cooperation agreements between local administrative units and the Ministry of Justice in relation to juveniles in conflict with the law | | | |
| 7 | Monitoring the deregulation process for aspects related to juvenile criminal justice issues | | | |
| 8 | Administrative treatment of complaints related to the judiciary / prosecutor's office / juvenile | | | |

**Table 9: Field of Deregulation, Permits, Licensing and Monitoring**

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|----|--------|----------------------------------------|---------------------------------------------|---------------------------------------------------|
| 1 | Addressing issues related to: the organization, functioning, treatment and monitoring of free professions | 1. …… 2. ………. 3. ……… | a. Often b. Probable c. Rare | d. High e. Moderate f. Low |
| 2 | Addressing issues related to: the organization, functioning and monitoring of subordinate institutions | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|---|---|---|---|---|
| 3 | Preparation of recommendations for the Ministry of Justice (regarding the taking of legal or institutional measures to solve the problems identified by process 1 and 2 above) | | | |
| 4 | Following, verifying and conducting investigations of free professions (notary, mediation and bailiff service in the justice system) Preparation of recommendations for the Deregulation Department, Permits, Licensing and Monitoring in order to take legal or institutional measures for solving the issues identified. | | | |
| 5 | Maintenance of ALBIS and RNSH systems | | | |
| 6 | Collection, processing and analysis of statistical data conveyed by dependence in the field of free professions. | | | |
| 7 | Monitoring of other Dependent institutions | | | |
| 8 | Addressing complaints from the public on various issues related to the activities of subordinate institutions | | | |

*Table 10: Field of Policies and Strategies in the Field of Justice*

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|----|--------|----------------------------------------|----------------------------------------------|----------------------------------------------------|
| 1 | Drafting periodic monitoring reports pursuant to the Intersectoral Strategy against Corruption 2015-2020. (Processing of statistical data, analysis on strategic objectives). | 1. ...... <br> 2. .......... <br> 3. ......... | a. Often <br> b. Probable <br> c. Rare | d. High <br> e. Moderate <br> f. Low |
| 2 | Drafting periodic monitoring reports pursuant to the 2017-2020 Inter-Sectoral Justice Strategy and its Action Plan. (Statistical data processing, analysis on strategic objectives). | | | |
| 3 | Collection, processing and analysis of unified criminal, civil and administrative statistical data of courts. | | | |
| 4 | Drafting of programs in the field of justice for the development of policies and strategies | | | |
| 5 | Reporting on the implementation of programs to meet policy objectives and strategies (analysis, identification, assessment of constraints and risks) | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|---|---|---|---|---|
| 6 | Preparation of the contribution of the Republic of Albania for the report of the European Commission, respectively: Chapter "Political Criteria" and Chapter 23 "Judicial and Fundamental Rights" | | | |
| 7 | Preparation of the contribution within the National Council for European Integration Plan, namely: Chapter "" political criteria "and Chapter 23" Judiciary and Fundamental Rights. | | | |
| 8 | Preparation of Contributions within the EU-Albania Subcommittees and Committees | | | |
| 9 | Contributions relating to Reports with the International organizations in the framework of War Against Corruption (UNCAC and GREECO) | | | |
| 10 | Analysis of the approximation of Albanian legislation with that of Acquis of the European Union. Table analysis within the screening process | | | |

**Table 11: Field of Drafting and Evaluation of Legislation**

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|---|---|---|---|---|
| 1 | Drafting the Annual Analytical Program of the Ministry | 1. …… <br> 2. ………. <br> 3. ……… | a. Often <br> b. Probable <br> c. Rare | d. High <br> e. Moderate <br> f. Low |
| 2 | Drafting and following the implementation of policies, legal and sub-legal acts in the field of Justice in the context of the annual analytical program of the Ministry | | | |
| 3 | Drafting of international agreements and draft instruments for the accession of the Republic of Albania to international acts (conventions and protocols and other acts) | | | |
| 4 | Drafting and approval of a methodology and unified standards of drafting legislation as a whole | | | |
| 5 | Proposing policies aimed at improvement of methodology and unified standards of drafting legislation as a whole | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|----|--------|----------------------------------------|----------------------------------------------|----------------------------------------------------|
| 6 | Coordination of work with other institutions in order to approximate the Albanian legislation with that of the European community and its member states | | | |
| 7 | Preparation of legislation in order to harmonize the Albanian domestic legislation in the field of justice and its approximation with the international standard structures | | | |
| 8 | Evaluation of all normative legal and sub-legal draft acts by the Council of Ministers, line ministries and other central institutions. | | | |
| 9 | Evaluation of international draft agreements, concluded on behalf of the Republic of Albania or the Council of Ministers. | | | |

*Table 12: Field of Legal Relations and International Judicial Cooperation*

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|---|---|---|---|---|
| 1 | Planning and identification of the needs for policy development in function of realization of jurisdictional relations and international judicial cooperation. | 1. …… <br> 2. ………. <br> 3. ……… | a. Often <br> b. Probable <br> c. Rare | d. High <br> e. Moderate <br> f. Low |
| 2 | Realization of mutual judicial cooperation between Albanian judicial authorities and foreign. | | | |
| 3 | Identification of the legal applicability of International Conventions where Albania is a party in accordance with the domestic legislation regarding the requirements addressed as well as following the legal deadlines specified for their treatment | | | |
| 4 | Representation of the institution with international bodies in the capacity of the central authority for the implementation of International Conventions. | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|---|---|---|---|---|
| 5 | Coordination of work for the treatment of practices of a specific character in order to prepare a more qualified legal and analytical opinion. | | | |
| 6 | Coordination of work with other Directorates in the framework of institutional interaction and fulfillment of obligations related to the EU integration process. | | | |
| 7 | Preparation of reports on the implementation of obligations arising from being a party to conventions, protocols and unilateral or multilateral agreements. | | | |
| 8 | Direction and coordination of work with cooperating institutions as the General Prosecutor's Office, the Ministry of Interior, the Courts and the Ministry of Foreign Affairs | | | |
| 9 | Planning of activities as defined by law for the official translation of acts drafted by this directorate. | | | |
| 10 | Direction and coordination of the official certification activity in the translation of international agreements of all institutions. | | | |

*Table 13: Field of Programs and Projects in the field of Justices*

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|----|--------|----------------------------------------|----------------------------------------------|----------------------------------------------------|
| 1 | Coordination with the Ministry of Europe and Foreign Affairs and the Delegation of the European Union in Tirana on issues related to the planning, management and coordination of EU-funded projects. | 1. …… <br> 2. ………. <br> 3. ……… | a. Often <br> b. Probable <br> c. Rare | d. High <br> e. Moderate <br> f. Low |
| 2 | Monitoring and reporting on the progress of IPA projects and other donors for all projects in the field of justice to the Minister, the Ministry of Europe and Foreign Affairs and the Ministry of Finance and Economy. | | | |
| 3 | Tracking processes on the progress of implementation of various programs activities of the EU as IPA; | | | |
| 4 | Monitoring, follow-up of project proposals and project-sheets on the needs of subordinate institutions and the ministry, in order to translate them for funding to the European Delegation or donors. | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|---|---|---|---|---|
| 5 | Control and monitor all documentation on IPA structures and send it according to the Procedures Manual of the General Directorate of Financing and Contracts for EU Funds, the World Bank and other donors. | | | |
| 6 | Preparation of reports on the development of programs in the field of justice in coordination with other directorates within the Ministry, as well as with counterpart structures in other institutions. | | | |
| 7 | Submission of recommendations to the General Directorate of Programs in the field of Justice and Anti-Corruption, regarding the taking of necessary measures in the field of justice. | | | |
| 8 | Coordination of activities with foreign institutions regarding issues of development and implementation of programs in the field of justice in coordination with other sectors of the MoJ. | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|---|---|---|---|---|
| 9 | Initiation of development programs for the field of justice and development programs for free professions. | | | |
| 10 | Administration of data on free professions, periodic follow-up of the process, legislative and functional framework on free professions (reporting and evaluation of data on free professions). | | | |

*Table 14: Programs and Projects in the field of Anti-Corruption*

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|---|---|---|---|---|
| 1 | Preparation of a report on the development of anti-corruption programs. Coordination of the work of the directorate of Programs and Projects in the field of Anti-Corruption with other directorates within the Ministry, as well as with the counterpart structures in other institutions for the preparation of the report. | 1. ……<br>2. ……….<br>3. ……… | a. Often<br>b. Probable<br>c. Rare | d. High<br>e. Moderate<br>f. Low |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|----|--------|-----------------------------------------|-----------------------------------------------|-----------------------------------------------------|
| 3 | Submission of recommendations to the Directorate of Programs in the field of Justice and Anti-Corruption regarding the taking of necessary measures in the field of anti-corruption | | | |
| 4 | Coordination of activities with foreign institutions regarding issues of development and implementation of anti-corruption programs. | | | |
| 4 | Coordination with the Ministry of Europe and Foreign Affairs and the Delegation of the European Union in Tirana on issues related to the planning, management and coordination of EU-funded anti-corruption projects. | | | |
| 6 | Monitoring and reporting on the progress of IPA projects and other donors for all projects in the field of anti-corruption, to the Minister, the Ministry of Europe and Foreign Affairs and the Ministry of Finance and Economy. | | | |

| No | Naming | Negative events that may occur / Risks | The possibility of occurrence (for any risk) | The impact of risk on integrity of the institution |
|----|--------|----------------------------------------|----------------------------------------------|---------------------------------------------------|
| 7 | Monitoring, follow-up of project proposals and project-sheets on the needs of subordinate institutions and the ministry, in order to translate them for funding to the European Delegation or donors. | | | |
| 8 | Administration of system data and preparation of periodic reports including anti-corruption Track-Record. | | | |
| 9 | Feel | | | |

# 4. INTEGRITY RISK ASSESSMENT PROCESS IN INSTITUTION

The process of Integrity Risk Assessment in the institution consists of five detailed stages below and summarized in Table no. 8 of this chapter. As a self-assessment process, it is undertaken by the head of the institution by setting up a working group to assess the risk of integrity and prepare the institution's integrity plan. This integrity plan is approved by the head of the institution.

## 4.1 Phase 1: Preparation, communication and mobilization of human resources

The Head of the Institution sets up an Integrity Working Group (IWG) for the development of risk assessment in the institution, which consists of: the risk coordinator in the institution, the heads of the main directorates within the institution, the representative of the conflict prevention unit, the head of the signaling unit in the institution, the head of the internal audit unit in the institution, the coordinator of transparency and the coordinator of public notification and consultation. The working group is chaired by a coordinator. The coordinator must be a senior management level in the institution to ensure management. Under the direction of the coordinator, the working group assumes the tasks for the entire process related to the preparation of the risk register and the action plan for managing integrity risks.

The head of the institution, regarding the timely drafting, approval and implementation of the action plan for integrity risk management, is committed to the following:

- informs in time all the employees of the institution about the establishment of a working group for the risk assessment of integrity, in order to ensure the support of all employees of the institution for the coordinator and other members of the IWG;

- ensures that the coordinator and other members of the IWG have sufficient time to perform the tasks related to the development of IRA.

The working group, together with the head of the institution introduces the terms, objectives, importance and manner of developing the integrity plan to other employees of the institution through:

- workshops / meetings with employees of the institution;

- publication of announcements on the Integrity Plan in the public notification corner in the institution;

- e-mail communication;

- sectoral meetings.

The coordinator manages the work of the working group and is responsible for monitoring and performing of the tasks defined in the decision taken by the head of the institution and the work program approved by the IWG. The working group drafts a work program with tasks and responsibilities for the IWG and well-defined deadlines (according to the model in Chapter V). The coordinator of the working group informs all employees in the institution, the actors of the institution (head of the institution, administration, public and interest groups) on the activities planned in the development of integrity risk assessment and relevant assessment methods.

## 4.2 Phase 2: Identification and risk analysis

This phase begins with the building of capacities of the members of the working group, through training sessions in modules on: (i) integrity, ethics and corruption; (ii) the process of identifying, analyzing and assessing risks according to the areas of activity of the institution; and (iii) the integrity plan model.

The IWG continues to identify the strategic, programming and operational objectives of the institution, afterwards identifies the risks, in support of the theoretical framework of the methodology (section 2.2) and the elements of the fields of activities of the institution, defined in Chapter III of this document.

The IWG continues to identify and assess the existing risk management measures at the institutional level by monitoring whether they have been implemented and whether the expected effect of their implementation has been achieved. The identified risks, their factors, the possibility of occurrence, the impact they have on the integrity of the institution and their treatment, are discussed by the IWG at the directorate / sectoral level of the institution.

The IWG, at this stage, pays special attention to the legal, sub-legal and regulatory framework for preventing the occurrence and development of corruption, unethical, unprofessional and corrupt behavior, as well as other irregularities in the areas of functioning of the institution.

In addition, the data that will be collected from the anonymous questionnaire completed by all employees of the institution will be part of the work of this phase (the questionnaire can be found in appendix no. 2 of this document). The IWG distributes the questionnaire which is completed electronically / in writing (as the case may be) and sets a time limit of 3-5 days for its completion.

### 4.3 **Phase 3:** Assessing integrity risks and addressing them

This stage is related to the assessment of the intensity of the identified risks, i.e. whether they will be taken on or treated with the appropriate measures. Then, it continues by ranking integrity risks according to priorities (according to the risk matrix results). The IWG determines which risks will be pursued with priority by making available the institution's existing resources for their treatment. Risk assessment contains the ranking of risks according to priorities that have consequences on the integrity of the institution and that may jeopardize efficiency, effectiveness, trust and institutional image.

### 4.4. **Phase 4:** Risk Management Action Plan and Risk Register

At this stage, the working group drafts a final assessment for each identified risk. The IWG shall develop an action plan for the management of identified risks, which contains concrete measures to improve the integrity of the institution. Measures are proposed depending on the intensity of the risk, with high, moderate or low priority. If the risk is high, then a high-priority measure needs to be taken by also taking into account risk factors. In order for these measures to be effective, it is necessary to determine the responsible person for each measure, as well as the deadlines for its implementation (Chapter V- Integrity Plan Model: risk register format and action plan).

During this phase the IWG drafts a report on the state of integrity of the institution. The purpose of the report is to present the state of integrity of the institution, the activities undertaken by the working group, as well as the proposed measures to improve integrity. The structure of the report includes: the initial integrity assessment of the institution; results from the processing of the questionnaire data from the employees of the institution; data (description) on identified risks as well as assessment of their intensity.

**Consolidation of the Integrity Plan.** The IWG consolidates all the documentation produced within this process according to the integrity plan model, which is found in Chapter V of this document. This plan, after passing a consultation process with all the actors of the institution, with other interested actors and the public, is submitted for approval to the head of the institution.

### 4.5 **Phase 5:** Monitoring and reporting

Continuous monitoring and reporting assist to understand whether the identified risks have been managed effectively, whether they have undergone changes to their profile

whether they have been reduced or increased in magnitude. This stage includes:

- developing mechanisms for the implementation of the Risk Management Plan in the Institution;

- the appointment by the head of the institution of a person responsible for monitoring the implementation of the Integrity Plan (in particular for the measures set for improving integrity);

- informing regularly the executive body and representatives of the institution on issues or developments related to the risk management plan;

- updating the risk register on a regular basis;

- calculating the financial effects that the development of mechanisms for the implementation of the Integrity Plan may bring, or implications that may come from changes in the risk profile, which may require immediate action;

- clear definition of rules, tasks, responsible persons and deadlines for monitoring the implementation of the Integrity Plan (in the internal regulation of the institution);

- establishing effective communication mechanisms between the person responsible for integrity, the representative and executive body of the institution, as well as with the administration of the institution.

At this stage, the employees of the institution are obliged to: a) inform the responsible person for monitoring the implementation of the plan, in relation to the occurrence or actions which may lead to the formation and development of integrity risk, corrupt, unethical and unprofessional behavior, practices and other irregularities in the work of the institution; and b) provide relevant information necessary for the implementation of the integrity risk management plan.

*Table no.15: Steps for the implementation of the Integrity Risk Assessment Process*

| No | Activity | Responsible Persons/ Institutions |
|----|----------|-----------------------------------|
| *Phase 1. Preparation, communication and mobilization of human resources: The result of this phase is the drafting and approval of a work plan for assessing integrity risks. The work plan contains a description of the responsibilities for the persons involved in this process, as well as the deadlines for their performance.* | | |

| No | Activity | Responsible Persons/ Institutions |
|----|----------|-----------------------------------|
| 1 | High managerial and representative level commitment of for the realization of the IRA process | Head |
| 2 | Establishment of the working group that will carry out the IRA in the institution | Head |
| 3 | Drafting and approving the responsibilities of the working group (work plan) | IWG |
| 4 | Evaluation of the legal and internal regulatory framework of the institution regarding integrity Evaluation of organizational structures of the institution | IWG |
| 5 | Drafting and approval of the "institutional package" | IWG +Head |
| **Phase 2: Identification and analysis of integrity risks:** *The result of this phase is the compilation of a list of identified risks and the assessment of which risks are under control or not, as well as the ways of their management.* | | |
| 1 | Training (capacity building) for the process of integrity self-assessment and VRI methodology | IWG |
| 2 | Establishment of strategic, programming and operational objectives of the institution Identification of elements of the field of activity of the institution that may be at risk from corruption, violations of integrity, unethical and unprofessional behavior, as well as other irregularities | IWG |
| 3 | Identification of integrity risks according to fields of activity, identification of risk factors considering the probability of occurrence or the manifestation of risks, as well as their impact on the integrity of the institution | IWG |
| 4. | Identification of risks to be managed and evaluation of existing control mechanisms | IWG |
| 5 | Conducting a survey on integrity (with questionnaires) with the employees of the institution | IWG |

| No | Activity | Responsible Persons/ Institutions |
|---|---|---|
| **Phase 3: Assessing integrity risks:** *The result is the final assessment for each risk* | | |
| 1 | Intensity assessment of the identified risks and their possible interaction | IWG |
| 2 | Ranking risks identified by priority | IWG |
| 3 | Drafting the risk assessment report | IWG |
| **Phase 4: Risk Management Action Plan and Risk Register:** *at the end of this phase a risk management action plan / integrity plan is drafted* | | |
| 1 | Drafting the Risk Register, which includes a detailed description of all identified risks<br><br>Based on the interpretation and recommendations provided during the evaluation phase, the Risk Management Action Plan is drafted, which includes:<br>- handling of risks (measures) and control activities;<br>- financial effects required for the implementation of measures (if any);<br>- recommendations for improving the activities carried out by the institution within the areas of its activity;<br>- rules for the implementation of measures for the control of identified risks. | IWG |
| 2 | Preparation of the final report on the state of integrity in the institution | IWG |
| 3 | Drafting the Integrity Plan (includes the consolidation of all documents drafted within the IRA process: risk management action plan, risk register, final integrity report), as well as its submission to the head | IWG + Head |
| 4 | Introducing the Integrity Plan to all employees, the public and other actors involved in the process | IWG + Head |
| 5 | Approval of the Integrity Plan | Head |

| No | Activity | Responsible Persons/ Institutions |
|---|---|---|
| **Phase 5: Monitoring and Reporting:** *the assignment of an instrument and a system for evaluating the integrity plan will be the final result* | | |
| 1 | Establishment of an evidence-based monitoring system on the progress and development of integrity | IWG + Head |
| 2 | Appointment of the coordinator for integrity | Head |
| 3 | Informing in a systematic way of the directorates within the institution and the head of the institution on the implementation of the integrity plan | Coordinator for Integrity + or the person in charge appointed by the head |
| 4 | Drafting and putting into operation the communication instruments between the coordinator for integrity, the executive of the institution and the administration of the institution | Head + Coordinator for Integrity |

# 5. INTEGRITY PLAN MODEL FOR THE INSTITUTION

The Integrity Plan includes:

1. basic information for the institution and the working group for the development of an integrity plan;

2. the order for drafting an integrity plan for the institution;

3. notification to employees of the institution on the development of an integrity plan;

4. the work program of the working group for the development of an integrity plan;

5. description of identified, analyzed and assessed risks;

6. measures and recommendations for addressing risks according to priorities;

7. the decision of the head of the institution for the approval and implementation of the integrity plan in the institution.

## 5.1 Basic information for the institution and responsible persons on the preparation and implementation of the Integrity Plan

| |
|---|
| Name of the institution: Institution X |
| Address: |
| E-mail address of the Institution: |
| Telephone number of the institution: |
| Name and surname of the head of the institution: |
| Names and surnames of the coordinator and members of the working group for the development of the integrity plan |
| 1. |

| | |
|---|---|
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| Date of approval of the integrity plan: | |
| Name and surname of the person responsible for monitoring the implementation of the integrity plan: | |
| The telephone number of the person responsible for monitoring and implementing the integrity plan: | |

## 5.2 A model order for developing an integrity plan for Institution X

_____(Full name of the institution)

**ORDER no_____ date_____**

**FOR DRAFTING THE INTEGRITY PLAN**

Pursuant to Article 102, point 4, of the Constitution, article 7, point 2, ...... Decision of the Council of Ministers no. 241, dated 20.4.2018 "On the approval of the Action Plan 2018-2020, for the implementation of the Inter-sectoral Anti-Corruption Strategy 2015-2020"

ORDERS:

1. Establishment of the working group for drafting the Integrity Plan for the Ministry of Justice, in the context of measures predicted in the Action Plan 2018-2020, for the realization of the objective "A9 - Strengthening the integrity of public servants" of the Inter-sectoral Anti-Corruption Strategy 2015 -2020.

2. The working group is led by_____.

The working group members are:

1 . _____ , member

2 . _____ , member

3 . _____ , member

4 . _____ , member

5 . _____ , member

3. The Working Group for Integrity, in the institution___, will draft an integrity plan for the institution, in support of the Integration Risk Assessment Methodology for central government institutions and will submit it to the head of the institution, within 4 months from the date of approval of this order.

4. All employees of the institution should support the working group during the process of developing the integrity plan in the institution.

**This order enters into force immediately.**

Head of the Institution X

## 5.3 Notification model on drafting the Integrity Plan

**OBJECT: Notification of employees to undertake activities aimed at developing the integrity plan for Institution X**

Dear colleagues,

Institution X, considering the commitments to prevent corruption, is preparing the Integrity Plan.

In this regard, we would like to inform you that on _____ the Order No._____ for the preparation of the integrity plan has b issued and a working group has been set up to draft this integrity plan for the institution.

In this order, the coordinator of the working group is appointed

_____ and members of the working group are assigned:
_____ .

In order for the Working Group for Integrity to gather comprehensive information and data necessary to design the integrity plan, I seek the support, assistance and active participation of all employees of our institution.

I emphasize that all employees of Institution x have the obligation to cooperate with the Working Group for the successful implementation of the integration plan development process.

Sincerely,

Head of Public Institution

## 5.4 Working program for the Working Group engaged in integrity planning

Institution X
_____

Head of Institution:
_____

Coordinator of the Integrity Working Group:
_____

Members of the Integrity Working Group:
_____

_____

_____

_____

_____

_____

_____

Date of approval of the work program:
_____

Initiation of the Integrity Plan:
_____

Expected completion:
_____

## Work program model:

| Phase 1: Measure/Activity | The Responsible Person | Deadline for realization |
|---|---|---|
| Decision on the approval of the Integrity Working Group (IWG) | Head of Institution | |
| Preparation of the IWG work program | IWG | |
| Approval of the IWG Work Program | Head of Institution | |
| Informing the employees of the institution about the activities planned in the preparation of the integrity plan | Head of Institution | |

| Phase 2: Measure/Activity | The Responsible Person | Deadline for realization |
|---|---|---|
| Initial integrity assessment | IWG | |
| Collection of necessary documentation for the development of an integrity plan | IWG | |
| Review and analysis of the collected documentation regarding the assessment of the exposure and the resistance of the institution to risks | IWG | |
| Conducting a survey with anonymous questionnaire | IWG Employees of the Institution | |
| Identification, risk analysis and risk factors | IWG | |
| Assessing the intensity of identified risks and the ranking of risks | IWG | |

| Phase 3: Measure/Activity | The Responsible Person | Deadline for realization |
|---|---|---|
| Defining measures to address identified risks in order to improve integrity, as well as prioritizing proposed measures | IWG | |

| | | |
|---|---|---|
| Preparation of the risk register and action plan for the risk management of integrity | IWG | |
| Phase 4: Measure / Activity | Responsible Person | Deadline for realization |
| Preparation and submission of the report on the state of integrity in the Institution | IWG | |
| Review of the proposed integrity plan | Head of Institution | |
| Approval of the integrity plan. Appointment of the person responsible for overseeing the implementation of the integrity plan. | Head of Institution | |

## 5.5 Risk register:

| No | Factors / Sources of riskut të brendshëm Internal risk Related to aspects of Legality (L) Human Resources and the Institution (B) Information and Communication (I) Work Procedures and Processes (P) | Existing measures / existing control mechanisms in the | Analysis of risk - controlled - partially controlled - uncontrolled | Evaluation of the probability of occurrence of risk | Evaluation of risk occurrence consequences | Risk Intensity |
|---|---|---|---|---|---|---|
| 1. | | | examined | Risk did not occur in a certain period of time (this period should be determined) in the past or appears very rarely, so it is unlikely that it will occur in the same time period in the future (1) | The consequences for the institution are insignificant (1) | low |

| | | | |
|---|---|---|---|
| partially examined | The risk appeared in a number of cases over a period of time (this period should have been determined) in the past, so the probability of occurrence in the same time period in the future is moderate (2) | The consequences are important for the institution (2) | moderate |
| unexamined | The risk appeared often during a certain period of time (this period should have been determined) in the past and it is likely to occur in the same time period in the future (3) | The consequences are very important for the institution (3) | high |

It is necessary to allocate a minimum of two risks for each element of the field of activity of the institution and to analyze them in the above way.

| Risk | Measures for risk management, or for improving the integrity of the institution | Priority measures • High priority • Moderate priority • Low priority | Activities to be implemented for the implementation of the measures | The person responsible for the implementation of the measure and the deadline for the implementation of the activitiese | Eventual estimated costs for implementing the measure |
|---|---|---|---|---|---|
| It is necessary to emphasize the risk (eg. illegal receipt of gifts) | Proposes a working group based on the analysis of the state of institutional Integrity and the analysis of the answers from the questionnaire | The working group determines the priority of each proposed measure, based on the risk Intensity assessment in the previous table [16] | The working group determines the necessary activities for the implementation of the measure | The working group proposes a person (name, surname, function) as well as a time limit for implem-entation of each Individual measure | The working group assesses whether certain financial resources will be required to Implement some of the measure |

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16    High risk intensity determines high priority measures, moderate risk intensity means moderate priority measures, and low risk intensity is a low priority measure.

## 5.7 Order Model for Approval and Implementation of the Integrity Plan

**ORDER**

**no_____ date _____**

**On the Approval and Implementation of the Integrity Plan for the Institution X**

**Article 1**

Approval of the Integrity Plan for Institution X, attached to this decision, prepared by the working group set up by order ........ no ....... ......... date ........ .......

**Article 2**

(1) The person responsible for overseeing the implementation of the integrity plan will be assigned: _____ (name, surname and function)

(2) The person responsible for overseeing the implementation of the integrity plan has the task of monitoring the implementation of the integrity plan, in particular the action plan for integrity risk management, as well as providing the necessary suggestions for its improvement.

(3) All the employees of Institution X inform the person responsible for supervising the implementation of the plan, on the state of integrity of the institution, about actions or events that may occur that may lead to a breach of integrity of the institution.

(4) Employees of the Institution, at the request of the person responsible for supervising the implementation of the integrity plan, must submit the necessary data and information for the implementation of the integrity plan, which are not contrary to the regulations in force.

(5) At least once a year, but even more often if necessary, the person responsible for overseeing the implementation of the integrity plan is obliged to submit a report on the implementation of the integrity plan to the head of the institution.

**Article 3**

This Order enters into force immediately.

**Head of the institution**

Attached to the integrity plan will be:

Report of the working group on the state of integrity in the institution;

Integrity assessment questionnaire used by the working group;

Other.

## Annex 2: Questionnaire for the Central Government Institution

QUESTIONNAIRE FOR THE EVALUATION FOR THE EMPLOYEEES OF THE INSTITUTION

Institution _____ is working on drafting the integrity plan.

As part of this process, the working group for drafting the Integrity Plan in the Institution _____ is conducting a survey with the employees of the institution on their perceptions and experiences regarding issues of ethics and integrity in the institution. The data of this survey will serve the process of assessing and analyzing the risks of integrity in the institution, in order to prevent corruption and strengthen institutional integrity.

The Working Group guarantees the anonymity and confidentiality of the data, as well as their use only for study purposes. Thank you for your cooperation!

### I. DEMOGRAPHIC DATA:

**1. Gender:**

Male                    Female

**2. Which age group do you belong to:**

Up to 25 years old      26-35 years old        36-45 years old        46-55 years old

Over 56 years old

**3. How many years of work experience do you have in the Institution?**

Less than 5 years       5-10 years      11-20 years      21-30 years      Over 30 years

### II. TASKS, RESPONSIBILITIES AND PROCEDURES OF WORK IN INSTITUTION

**4. To what extent are you familiar with the tasks of your function (the organic**

**position you have in the institution / job description)? Please rate on a scale from 1 to 5, where 1 = not at all and 5 = completely.**

1 ☐ Not at all agree     2 ☐     3 ☐     4 ☐     5 ☐ Completely

**5. Are the job procedures you need to follow described and documented in detail?**

☐ Yes   ☐ No ☐ I don't know

6. Do you agree with the assertion that work procedures guarantee an appropriate division of tasks in your unit / directorate, so that the same person does not have an overlap of responsibilities? Please rate on a scale from 1 to 5, where 1 = not at all and 5 = fully agree.

1 ☐ Not at all agree     2 ☐     3 ☐     4 ☐     5 ☐ Fully

**7. In practice, have you been assigned additional tasks beyond the description of tasks according to your organic position?**

☐ Yes   ☐ No

**8. If the answer to the previous question is "Yes," do you consult with your superiors before making decisions about these additional tasks?**

☐ Yes   ☐ No

**9. Are your superiors easily available to consult with you?**

☐ Yes   ☐ No     ☐ Other

**10. If you conduct joint consultations with the superior, how often do you discuss the issue of strengthening personal and institutional integrity??**

☐ Never     ☐ Rare (1-2 times a year) ☐ Occasionally (≤ time per month)

☐ Often (> 1 time a month)

**11. On average, how often do you report to superiors on your work?**

☐ < 1 time per month ☐ about 1 time per month ☐ > 1 time per month

**12. Does your institution regularly conduct periodic evaluations of employees in your institution?**

☐ Yes  ☐ No  ☐ I don't know

☐ If yes, please specify how many times evaluations are performed within a year_____

**13. Please rate on a scale of 1 to 5 the performance appraisal system at work, according to the criteria below**:

Clarity

1 ☐ Not at all clear  2 ☐  3 ☐  4 ☐  5 ☐ Very clear

Transparency

1 ☐ Not at all transparent  2 ☐  3 ☐  4 ☐  5 ☐ Very Transparent

Objectivity

1 ☐ Not at all objective  2 ☐  3 ☐  4 ☐  5 ☐ Very objective

Sufficiency of time

1 ☐ Not at all sufficient  2 ☐  3 ☐  4 ☐  5 ☐ Very sufficient

**14. If the rating system has insufficiencies, what could be the reasons?** *(You can give more than one answer)*

Evaluation is a formal process

The current appraisal system creates space for subjectivity

Other_____

**15. Does your institution have a plan for the professional qualification of employees?**

☐ Yes ☐ No ☐ I don't know

**16. How informed are you about this plan? Please rate on a scale of 1 to 5, where 1 = not at all informed and 5 = fully informed.**

1 ☐ Not at all informed        2 ☐        3 ☐        4 ☐        5 ☐ Fully informed

### III. MANAGEMENT OF ETHICS AND INTEGRITY IN THE INSTITUTION

**17. During your work, have you encountered situations where you have had to abuse your position (or have you heard that some of your colleagues were in such a situation)?**

Personally, I have not been in such situations, nor do I know anyone who may have encountered such situations.

Personally, I have not been in such situations, but I am aware of cases of abuse of position in the institution.

Others have advised me to act contrary to internal regulations.

Yes, it happened that I had to act in violation of internal regulations.

I am not aware that my colleagues have abused their office.

**18. Have you heard of any efforts by people inside or outside your institution to influence the professional decisions of your colleagues?**

☐ Yes ☐ No

**19. If the answer to the above question is yes, how often have you found yourself in such situations? Please rate on a scale of 1 to 5, where 1 = rarely and 5 = very often.**

1 ☐ Rarely        2 ☐        3 ☐        4 ☐        5 ☐ Very often

**20. Are you aware of cases when your colleagues have committed unethical and unprofessional behavior towards other colleagues?**

☐ Yes ☐ No ☐ I don't know

**21. If the answer to the above question is "yes", how did you act when you were made aware?**

I reported the behavior to my superior

I reported the behavior to the relevant structure

I confronted my colleague and asked him to correct the mistake

I did not react

Other_____

**22. During employment, have there been situations where you think you have been treated in a differentiated way by your superior?**

☐ Yes ☐ No

**23. During job relations, have there been situations where you think any of your colleagues have been treated in a differentiated way?**

☐Yes ☐No

**24. If you have ever performed or heard of activities / actions that are the subject of irregularities or that may be considered unethical and unprofessional behavior in your institution, can you give three examples of them:**

Example 1: _____

Example 2: _____

Example 3: _____

## IV. RULES AND GUIDELINES ABOUT UNETHICAL BEHAVIOUR AND INTEGRITY IN THE INSTITUTION

**25. To your knowledge, is there any specific regulation in your institution / approved procedures that address activities of a corrupt nature or unethical behavior?**

☐ Yes

☐ No

☐ I don't know if the internal regulations / rules exist in the institution

**26. If the answer to the previous question is "Yes", please rate on a scale of 1 to 5 how familiar you are with the content of the regulation/s?**

1 ☐ Not at all        2 ☐        3 ☐        4 ☐        5 ☐ Completely

**27. If the answer to question no. 25 is "Yes", please rate how clear and easily understood these rules are by the employees of the institution? Please rate on a scale of 1 to 5, where 1 = Not at all clear and 5 = Very clear.**

1 ☐ Not at all clear        2 ☐        3 ☐        4 ☐        5 ☐ Very clear

**28. To your knowledge, if an employee of the institution signals a suspected act or practice of corruption in the institution, are there any rules for the protection of whistleblowers? Do they apply in practice?**

Yes, there are rules and they apply in practice

Yes, there are rules, but they do not apply in practice

No, there are no such rules

I am not aware if there are such rules

**29. If such rules exist, have you been trained on these rules?**

☐ Yes ☐ No

**30. If the answer to question no. 29 is "No", which is, in your opinion, the reason for this?**

☐ In the institution where I work, no cases of fraud, theft or other acts that constitute violations of integrity have been registered.

☐ There are such cases in the institution where I work, but they are ignored or mitigated

☐ I do not know

**31. Are there regulations/procedures in your institution regarding the acceptance and administration of gifts?**

☐ Yes ☐ No ☐ I do not know

**32. If the answer to the previous question is "Yes", please rate on a scale of 1 to 5 how familiar you are with the content of the regulation/s?**

- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
1 ☐ Not at all     2 ☐          3 ☐          4 ☐          5 ☐ Completely
- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -

**33. If you encounter a conflict of interest in a situation, do you know who to report to your institution?**

☐ Yes

☐ The unit where I have to report is: _____

☐ No

**34. If the answer to the above question is "Yes", do you know if these cases are officially registered within the institution in which you work?**

☐ Yes, they are registered

☐ No, they are not registered

☐ I do not know

**35. Is there a structure / person in your institution who is in charge of monitoring**

**whether employees are in conflict of interest in performing an activity?**

☐ Yes ☐ No ☐ I do not know

**36. Have you been trained / consulted on issues of conflict of interest by this structure / person responsible for the conflict of interest?**

☐ Yes ☐ No

**37. How well do you think you know the law on conflict of interest and the obligations that follow from this law?**

1 ☐ Not at all      2 ☐           3 ☐           4 ☐           5 ☐ Completely

**38. Are there any rules / procedures in your institution that regulate the second employment by the employees of the administration of the institution?**

☐ Yes ☐ No ☐ I do not know

**39. To what extent do you know these regulations? Please rate on a scale from 1 to 5, where 1 = not at all and 5 = completely.**

1 ☐ Not at all      2 ☐           3 ☐           4 ☐           5 ☐ Completely

**40. Do you think these set of rules apply?**

☐ Rarely        ☐ Occasionally ☐ Often ☐ Very often        ☐ I do not know

**41. Are there clear procedures in the institution where you work that guarantee promotion based on meritocracy??**

☐ Yes ☐ No ☐ I do not know

**42. If the answer to question 41 is "yes", do you think these procedures**

**apply?**

☐ Rarely      ☐ Occasionally        ☐ Often          ☐ very often  ☐ I do not know

**43. Does your institution have any written instructions regarding the way of communication within the institution (written, electronic, or verbal communication)?**

☐ Yes  ☐ No  ☐ I do not know

**44. To what extent do the rules regarding communication apply?**

☐ Rarely        ☐ Occasionally ☐Often     ☐ Very often        ☐ I do not know

**45. Are there any rules in your institution regarding the storage of confidential / classified information??**

☐ Yes  ☐ No  ☐ I do not know

**46. If the answer to question no. 45 is "Yes" how do these rules apply in practice?**

☐ Rarely       ☐Occasionally ☐ Often     ☐ Very often       ☐ I do not know

**47. Are you trained on these rules?**

☐ Yes  ☐ No

**48. How do you inform the public about the activities of your institution (you can choose multiple answers):**

☐ Through the responsible unit: Coordinator for the right to information

☐ Through the information posted on the website

☐ Through press conferences

☐ Through public consultations

☐ Via e-mail

☐ Other - specify _____

**49. Is there a department in your institution responsible for monitoring cases of violation of ethical norms?**

🔲 Yes

🔲 If so, specify what this structure is _____

🔲 No

🔲 I do not know

**50. Do you think that you are well acquainted with the procedures for dealing with violations of ethics as well as disciplinary measures in case of violations?**

🔲 I have read them, I have been trained and I understand them

🔲 I have read them but I have not been trained, I understand them to some extent

🔲 I have read them, but I do not understand them

🔲 I need further clarifications

🔲 I don't understand them well

🔲 I have never met them

**51. If you are well-informed about the treatment of ethical violations, please circle the option that suits your opinion. Do you think that this procedure is efficient and that the imposition of disciplinary measures is carried out in accordance with the laws governing labor relations and / or the status of officials?**

🔲 Yes, the procedure is efficient and disciplinary measures are carried out in accordance with the relevant legislation.

🔲 The procedure is correct, but disciplinary measures are not always provided according to the relevant legislation

🔲 The procedure is not efficient and disciplinary measures are not always provided according to the relevant legislation

**52. If the answer to question no. 51 is the last option, do you think this procedure needs to be reorganized / changed?**

☐ Yes, please specify
the reasons: _____

☐ No

☐ I do not know

**53. To what extent do you agree with the following statements on a scale from 1 to 5, where 1 = fully agree and 5 = not at all:**

| ASSERTIONS | Fully agree (1) | Agree (2) | Neutral (3) | Partially agree (4) | Not at all agree (5) |
|---|---|---|---|---|---|
| Carrying out any small private activity during working hours is tolerable. | | | | | |
| Former officials of the institution should not represent within a period of two years persons, businesses or organizations that are in conflict or have entered in trade / relations of interest with the institution, for tasks that the former official has previously performed in the institution. | | | | | |
| The conflict between private interest and employees' function must be reported. | | | | | |
| It is necessary to conduct joint consultations with superiors and colleagues in performing and clarifying work tasks. | | | | | |
| The institution must have clear rules for receiving and administering gifts from third parties. | | | | | |
| I think that during the evaluation the superior should consider more the volume of work than the quality of the work done. | | | | | |

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