

# Eleven free tools. Clear next steps.

Fictional examples for reviewing visual design and developing report content. Each sample begins with the decision, shows the supporting picture and ends with action and review questions.

START HERE

Compare the Assessment, Culture and Assurance summaries first. They show three different ways of presenting uncertainty, evidence and results.

| Sample | Report                                 | Book page |
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Review focus: hierarchy and readability / usefulness of the interpretation / action ownership / visibility of limitations. All inputs and evidence references are fictional. These designs have not replaced the website print layouts.

## EXECUTIVE SUMMARY / FICTIONAL SAMPLE

# Program Assessment & Roadmap

Northstar Components - fictional organisation. Prepared as a prospect showcase; no real organisation has been assessed.

## What this report is about

A screening view of programme robustness across 50 ISO 37301-related checks, including the 2024 climate considerations.

## Why you may need it

Use this before deciding where to invest improvement effort or commission a more detailed evidence review.

### MAIN FINDINGS

Indicative range 60-68/100; 46 checks rated and four unresolved. This is not an ISO conformity score.

## What you will find in this report

Area profile; all 50 responses and evidence notes; prioritised improvement actions.

## Recommended next decision

Resolve the four unknowns and review the lowest-rated safeguards with their owners.

Reading note: all inputs, evidence references and findings are invented. The following pages illustrate the tool output plus editorial interpretation; they are not an independent assurance opinion.

CAMP 01 / SAMPLE REPORT 01

# Program Assessment & Roadmap

Northstar Components - fictional organization  
Review basis: dummy entries prepared for design discussion / 15 September 2026

DECISION IN FOCUS

Where should the program focus next?

60-68

Indicative index range / 100

46

Checks rated out of 50

4

Checks needing evidence



Dark: entered rating. Gold extension: unresolved range.

## What the example suggests

The example shows defined practices alongside implementation gaps and unresolved checks. Resolve uncertainty and validate the lowest-rated safeguards before interpreting the whole-program picture.

Self-reported screening against requirement areas. The index is a Sherpa measure, not an ISO score, conformity decision or certification.

# Supporting detail

THE BASIS FOR THE EXAMPLE

## Where to focus first

Priority safeguards rated 0-1 appear first, followed by lower ratings. This sequence is generated by the tool; the organization should validate it against actual risk.

| Clause / rating | Improvement prompt                                                                        | Evidence to examine                                                                                    |
|-----------------|-------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| 5.1.3 / 1/4     | Confirm the function's independence, authority and direct governing-body access.          | A compliance charter, reporting lines, escalation arrangements and examples of direct access.          |
| 8.2 / 1/4       | Map controls to risks and obligations, then establish a practical testing cycle.          | A risk-to-control map, test results, periodic reviews and follow-up records.                           |
| 7.2.1 / 1/4     | Document required competencies and verify that gaps are being closed.                     | Competency requirements, records and checks on the effectiveness of development actions.               |
| 9.3.1 / 1/4     | Schedule management-system reviews with the appropriate leadership participation.         | Planned leadership reviews and records showing evaluation of the system.                               |
| 4.4 / 2/4       | Map the key processes and close gaps in ownership or coordination.                        | A process map showing responsibilities, inputs, outputs and connections between compliance activities. |
| 4.6 / 2/4       | Include external processes and establish both periodic and change-triggered reassessment. | Third-party risk assessments and records of periodic or change-triggered reviews.                      |

## Related Sherpa camps

Camp 05: Training & Culture - 4 linked checks rated 0-2.

Camp 04: Policies & Controls - 2 linked checks rated 0-2.

Camp 08: Monitoring & Assurance - 2 linked checks rated 0-2.

# From findings to action

Proposed follow-up for this fictional example; these owners and dates are editorial additions for report-design review.

| Action                                                        | Owner / target                  | Evidence for review                                          |
|---------------------------------------------------------------|---------------------------------|--------------------------------------------------------------|
| Gather evidence for unresolved checks.                        | Compliance Lead<br>2026-09-30   | Every unknown has evidence or a documented follow-up.        |
| Validate the highest-priority safeguards with process owners. | Managing Director<br>2026-10-15 | Agreed actions have owners, dates and verification criteria. |
| Revisit the profile after corrective action.                  | Compliance Lead<br>2026-11-15   | Changes in ratings are supported by evidence.                |

## Questions for the review meeting

- 01 / Is the evidence sufficient for the conclusion, and what remains uncertain?
- 02 / Does each action have an owner with authority and resources to deliver it?
- 03 / What result would justify closure, and who will verify it?

### HOW TO USE THIS REPORT

Read the summary first, challenge the supporting detail, then agree the next action. Keep an editable draft with the record so future changes can be explained.

## Basis and limitations

Self-reported screening against requirement areas. The index is a Sherpa measure, not an ISO score, conformity decision or certification.

All organizations, cases, evidence references, ratings and operational findings in this report are fictional. No source documents were inspected. These PDFs are proposed report designs generated from dummy inputs and the current tool models; they are separate from the website's existing print layouts.

Companion editable input: 01-Program-Assessment.json. Import it into the corresponding local tool to reproduce the sample entries. The narrative and meeting agenda are editorial additions for discussion.

# Complete assessment record

All 50 checks, including climate relevance and stakeholder considerations. The questions are original screening prompts from the tool; consult the standard for the full requirements.

| Check / clause        | Screening prompt                                                                                | Rating   | Dummy evidence note                                                                    |
|-----------------------|-------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------|
| 01 / 4.1              | Do you understand the internal and external factors that shape your compliance program?         | Not sure | DUMMY evidence 01: Process owner confirmation pending.                                 |
| 02 / 4.1 / Amd 1:2024 | Have you determined whether climate change is relevant to your compliance management system?    | 3/4      | DUMMY evidence 02: Workshop self-report; verify against the current controlled record. |
| 03 / 4.2              | Have you identified whose expectations matter and which requirements your program will address? | 3/4      | DUMMY evidence 03: Workshop self-report; verify against the current controlled record. |
| 04 / 4.3              | Is the scope of your compliance program clearly defined and documented?                         | 3/4      | DUMMY evidence 04: Workshop self-report; verify against the current controlled record. |
| 05 / 4.4              | Do your compliance processes operate as a connected management system?                          | 2/4      | DUMMY evidence 05: Workshop self-report; verify against the current controlled record. |
| 06 / 4.5              | Do you systematically identify and document the obligations that apply to your activities?      | 3/4      | DUMMY evidence 06: Workshop self-report; verify against the current controlled record. |
| 07 / 4.5              | Can you identify changed obligations and put the necessary changes into practice?               | 3/4      | DUMMY evidence 07: Workshop self-report; verify against the current controlled record. |
| 08 / 4.6              | Do you identify, analyze and evaluate compliance risks using your obligations and operations?   | 3/4      | DUMMY evidence 08: Workshop self-report; verify against the current controlled record. |
| 09 / 4.6              | Does your risk assessment cover third parties and get refreshed when circumstances change?      | 2/4      | DUMMY evidence 09: Workshop self-report; verify against the current controlled record. |
| 10 / 5.1.1            | Do leaders actively integrate compliance into business decisions and follow through on issues?  | 3/4      | DUMMY evidence 10: Workshop self-report; verify against the current controlled record. |

| Check / clause   | Screening prompt                                                                            | Rating   | Dummy evidence note                                                                    |
|------------------|---------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------|
| 11 / 5.1.2       | Do leaders consistently model and reinforce compliant behavior?                             | 3/4      | DUMMY evidence 11: Workshop self-report; verify against the current controlled record. |
| 12 / 5.1.3       | Can the compliance function act independently and reach the governing body directly?        | 1/4      | DUMMY evidence 12: Workshop self-report; verify against the current controlled record. |
| 13 / 5.2         | Does your compliance policy give people clear, credible direction?                          | 2/4      | DUMMY evidence 13: Workshop self-report; verify against the current controlled record. |
| 14 / 5.3.1       | Are compliance responsibilities assigned, communicated and subject to leadership oversight? | Not sure | DUMMY evidence 14: Process owner confirmation pending.                                 |
| 15 / 5.3.1       | Does top management provide resources, reporting and meaningful accountability?             | 3/4      | DUMMY evidence 15: Workshop self-report; verify against the current controlled record. |
| 16 / 5.3.2       | Can the compliance function perform its full role with the access and advice it needs?      | 3/4      | DUMMY evidence 16: Workshop self-report; verify against the current controlled record. |
| 17 / 5.3.3-5.3.4 | Do managers and personnel take responsibility for compliance in their own work?             | 2/4      | DUMMY evidence 17: Workshop self-report; verify against the current controlled record. |
| 18 / 6.1         | Does planning address risks and opportunities that affect the program's success?            | 3/4      | DUMMY evidence 18: Workshop self-report; verify against the current controlled record. |
| 19 / 6.1         | Are planned actions integrated into work and checked for effectiveness?                     | 3/4      | DUMMY evidence 19: Workshop self-report; verify against the current controlled record. |
| 20 / 6.2         | Are compliance objectives documented, monitored and backed by delivery plans?               | 3/4      | DUMMY evidence 20: Workshop self-report; verify against the current controlled record. |
| 21 / 6.3         | Are changes to the compliance system deliberately planned?                                  | 2/4      | DUMMY evidence 21: Workshop self-report; verify against the current controlled record. |

| Check / clause   | Screening prompt                                                                               | Rating   | Dummy evidence note                                                                    |
|------------------|------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------|
| 22 / 7.1         | Do you identify and provide the resources needed to run and improve the program?               | 3/4      | DUMMY evidence 22: Workshop self-report; verify against the current controlled record. |
| 23 / 7.2.1       | Can you demonstrate that people affecting compliance performance are competent?                | 1/4      | DUMMY evidence 23: Workshop self-report; verify against the current controlled record. |
| 24 / 7.2.2       | Do employment processes establish compliance expectations and apply risk-based due diligence?  | 3/4      | DUMMY evidence 24: Workshop self-report; verify against the current controlled record. |
| 25 / 7.2.2       | Are targets, bonuses and incentives reviewed for pressures that could encourage misconduct?    | 2/4      | DUMMY evidence 25: Workshop self-report; verify against the current controlled record. |
| 26 / 7.2.3       | Is employee training relevant, repeated and assessed for effectiveness?                        | 3/4      | DUMMY evidence 26: Workshop self-report; verify against the current controlled record. |
| 27 / 7.2.3       | Do relevant third parties receive compliance awareness and training appropriate to their risk? | Not sure | DUMMY evidence 27: Process owner confirmation pending.                                 |
| 28 / 7.3         | Do people understand their own obligations, the policy and how to raise concerns?              | 3/4      | DUMMY evidence 28: Workshop self-report; verify against the current controlled record. |
| 29 / 7.4         | Are compliance communications planned, reliable and accessible to their audiences?             | 2/4      | DUMMY evidence 29: Workshop self-report; verify against the current controlled record. |
| 30 / 7.5.1-7.5.3 | Is necessary compliance information created, approved, available and protected?                | 3/4      | DUMMY evidence 30: Workshop self-report; verify against the current controlled record. |
| 31 / 8.1         | Do operational processes have clear criteria and evidence that work follows them?              | 3/4      | DUMMY evidence 31: Workshop self-report; verify against the current controlled record. |
| 32 / 8.1         | Are operational changes controlled and unintended consequences addressed?                      | 3/4      | DUMMY evidence 32: Workshop self-report; verify against the current controlled record. |

| Check / clause | Screening prompt                                                                               | Rating   | Dummy evidence note                                                                    |
|----------------|------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------|
| 33 / 8.1       | Are compliance-relevant external processes, products and services controlled and monitored?    | 2/4      | DUMMY evidence 33: Workshop self-report; verify against the current controlled record. |
| 34 / 8.2       | Are controls tied to obligations and risks, maintained and tested periodically?                | 1/4      | DUMMY evidence 34: Workshop self-report; verify against the current controlled record. |
| 35 / 8.3       | Can people safely report concerns, including anonymously, and obtain advice?                   | 3/4      | DUMMY evidence 35: Workshop self-report; verify against the current controlled record. |
| 36 / 8.4       | Are concerns assessed and investigated fairly by competent people free of conflicts?           | 3/4      | DUMMY evidence 36: Workshop self-report; verify against the current controlled record. |
| 37 / 8.4       | Are investigation records retained, outcomes reported and lessons used to improve the program? | 2/4      | DUMMY evidence 37: Workshop self-report; verify against the current controlled record. |
| 38 / 9.1.1     | Do you define what to measure, how and when, and use results to evaluate effectiveness?        | 3/4      | DUMMY evidence 38: Workshop self-report; verify against the current controlled record. |
| 39 / 9.1.2     | Do you seek feedback from different sources and act on what it reveals?                        | 3/4      | DUMMY evidence 39: Workshop self-report; verify against the current controlled record. |
| 40 / 9.1.3     | Do your indicators help assess compliance performance and progress against objectives?         | Not sure | DUMMY evidence 40: Process owner confirmation pending.                                 |
| 41 / 9.1.4     | Does reporting deliver reliable information to the right people, routinely and by exception?   | 2/4      | DUMMY evidence 41: Workshop self-report; verify against the current controlled record. |
| 42 / 9.1.5     | Are accurate and current compliance activity records retained for monitoring and review?       | 3/4      | DUMMY evidence 42: Workshop self-report; verify against the current controlled record. |
| 43 / 9.2.1     | Do planned internal audits examine both conformity and effective implementation?               | 3/4      | DUMMY evidence 43: Workshop self-report; verify against the current controlled record. |

| Check / clause | Screening prompt                                                                      | Rating | Dummy evidence note                                                                    |
|----------------|---------------------------------------------------------------------------------------|--------|----------------------------------------------------------------------------------------|
| 44 / 9.2.2     | Is the audit program planned, impartial, risk-informed and documented?                | 3/4    | DUMMY evidence 44: Workshop self-report; verify against the current controlled record. |
| 45 / 9.3.1     | Do the governing body and top management review the system at planned intervals?      | 1/4    | DUMMY evidence 45: Workshop self-report; verify against the current controlled record. |
| 46 / 9.3.2     | Do management reviews use the full range of performance and contextual information?   | 3/4    | DUMMY evidence 46: Workshop self-report; verify against the current controlled record. |
| 47 / 9.3.3     | Are review decisions about improvements and system changes documented?                | 3/4    | DUMMY evidence 47: Workshop self-report; verify against the current controlled record. |
| 48 / 10.1      | Do you continually improve the system's suitability, adequacy and effectiveness?      | 3/4    | DUMMY evidence 48: Workshop self-report; verify against the current controlled record. |
| 49 / 10.2      | When a problem occurs, do you correct it, address consequences and remove its causes? | 2/4    | DUMMY evidence 49: Workshop self-report; verify against the current controlled record. |
| 50 / 10.2      | Do you verify corrective action worked and update the system where needed?            | 3/4    | DUMMY evidence 50: Workshop self-report; verify against the current controlled record. |

## EXECUTIVE SUMMARY / FICTIONAL SAMPLE

# Integrity Risk Map

Northstar Components - fictional organisation. Prepared as a prospect showcase; no real organisation has been assessed.

## What this report is about

A map of two integrity-risk scenarios concerning an intermediary relationship.

## Why you may need it

Use this to connect business exposure, obligations and safeguards before committing to a relationship or activity.

**MAIN FINDINGS**

Improper-influence residual risk is estimated at 15/25. Unsupported fees remain unrated after controls.

## What you will find in this report

Risk scenarios and rating basis; obligation review; control gaps and action ownership.

## Recommended next decision

Verify the unresolved obligation and obtain evidence for the residual ratings.

Reading note: all inputs, evidence references and findings are invented. The following pages illustrate the tool output plus editorial interpretation; they are not an independent assurance opinion.

CAMP 02 / SAMPLE REPORT 02

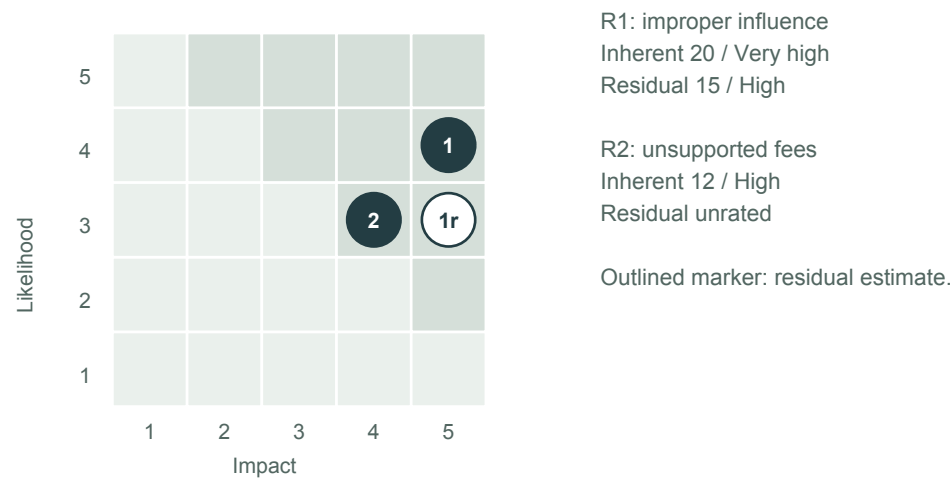
# Integrity Risk Map

Northstar Components - fictional organization  
Review basis: dummy entries prepared for design discussion / 15 September 2026

DECISION IN FOCUS

Can the intermediary activity proceed on a sound basis?

|                |                           |                      |
|----------------|---------------------------|----------------------|
| 2              | 1                         | 1                    |
| Risk scenarios | Residual estimate unrated | Obligation to verify |



## What the example suggests

Improper influence remains a high residual estimate in this example. Unsupported-fee risk remains unrated after controls because current evidence is insufficient. Resolve obligations and control evidence before treating the map as decision-ready.

Ratings and applicability are team judgments. No legal lookup, source verification or independent risk assessment is performed.

# Supporting detail

THE BASIS FOR THE EXAMPLE

Activity and pressures

An intermediary coordinates permit submissions for a planned production facility. Opening deadline and milestone-linked intermediary fees

## R1 / Improper influence

An intermediary offers an improper benefit to accelerate an approval.

| Current safeguards                                                    | Evidence and reasoning                                                                                                                                        |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Pre-engagement review; written scope; approval of public interactions | DUMMY DD-01: checklist and one approval record; coverage incomplete<br>Approvals address some exposure, but ownership and payment evidence remain incomplete. |

## R2 / Unsupported fees

Unsupported administrative fees are passed through as legitimate costs.

| Current safeguards                               | Evidence and reasoning                                                                                           |
|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| Invoice review against contract and deliverables | DUMMY FIN-02: payment-control walkthrough; no operating sample<br>Current control operation has not been tested. |

## Obligation review

| Requirement                                | Status / source                                       | Reviewer        |
|--------------------------------------------|-------------------------------------------------------|-----------------|
| Intermediary approval policy               | Confirmed by your team<br>DUMMY POL-07 v2, section 4  | Compliance Lead |
| Applicable public-interaction requirements | To verify<br>Source to be identified by local counsel | Not recorded    |

# From findings to action

Recorded in the dummy tool inputs.

| Action                                                             | Owner / target                      | Evidence for review                         |
|--------------------------------------------------------------------|-------------------------------------|---------------------------------------------|
| Resolve ownership and public-interaction checks before engagement. | Procurement Lead<br>2026-09-30      | Record the check and remaining uncertainty. |
| Define supporting-document criteria and test a payment sample.     | Finance Controls Lead<br>2026-10-15 | Record the check and remaining uncertainty. |

## Questions for the review meeting

- 01 / Is the evidence sufficient for the conclusion, and what remains uncertain?
- 02 / Does each action have an owner with authority and resources to deliver it?
- 03 / What result would justify closure, and who will verify it?

### HOW TO USE THIS REPORT

Read the summary first, challenge the supporting detail, then agree the next action. Keep an editable draft with the record so future changes can be explained.

## Basis and limitations

Ratings and applicability are team judgments. No legal lookup, source verification or independent risk assessment is performed.

All organizations, cases, evidence references, ratings and operational findings in this report are fictional. No source documents were inspected. These PDFs are proposed report designs generated from dummy inputs and the current tool models; they are separate from the website's existing print layouts.

Companion editable input: 02-Integrity-Risk-Map.json. Import it into the corresponding local tool to reproduce the sample entries. The narrative and meeting agenda are editorial additions for discussion.

## EXECUTIVE SUMMARY / FICTIONAL SAMPLE

# Accountability Map

Northstar Components - fictional organisation. Prepared as a prospect showcase; no real organisation has been assessed.

## What this report is about

A practical record of who delivers, approves, oversees and receives escalations.

## Why you may need it

Use this when unclear authority or overlapping roles make decisions difficult to defend.

### MAIN FINDINGS

Corrective-action delivery and oversight overlap. The alternative reporting route returns to the usual recipient.

## What you will find in this report

Responsibility matrix; escalation routes; support arrangements; review prompts and actions.

## Recommended next decision

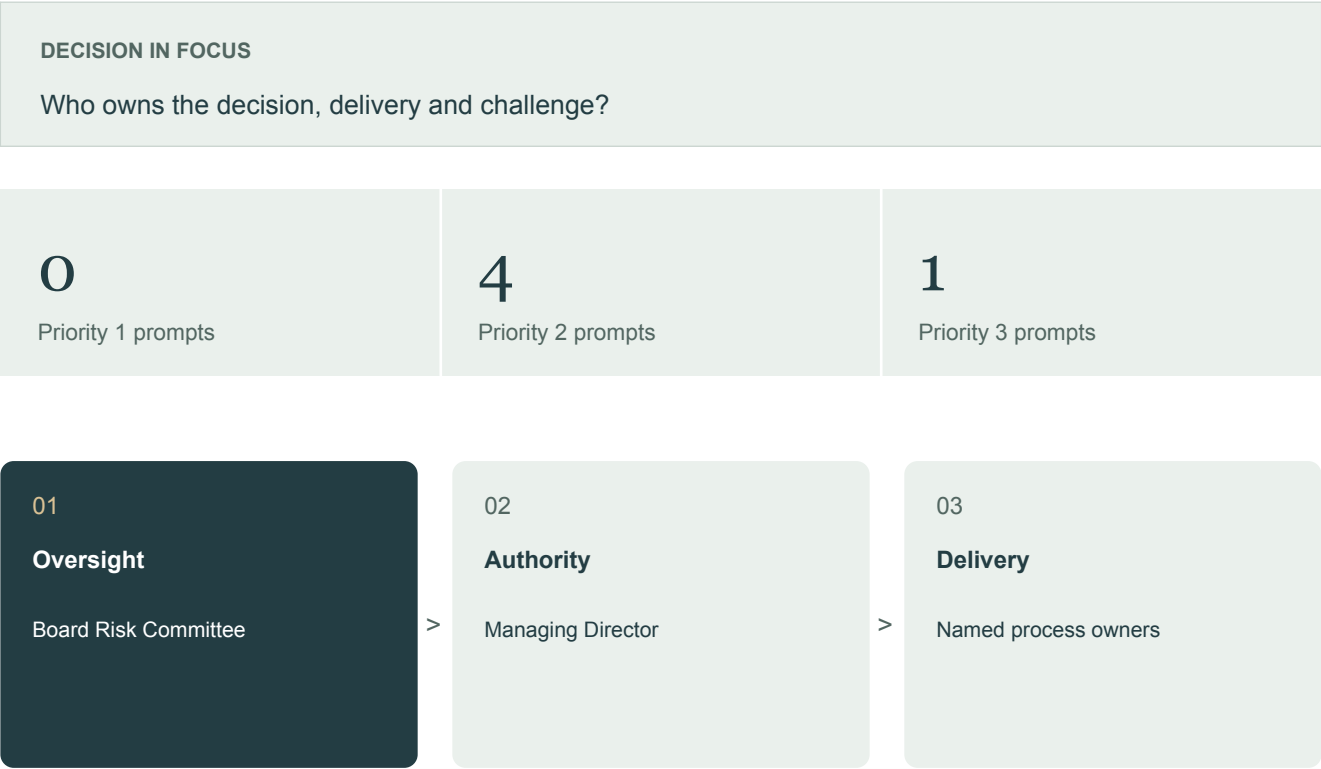
Agree an independent alternative route and challenge the overlapping assignments.

Reading note: all inputs, evidence references and findings are invented. The following pages illustrate the tool output plus editorial interpretation; they are not an independent assurance opinion.

CAMP 03 / SAMPLE REPORT 03

# Accountability Map

Northstar Components - fictional organization  
Review basis: dummy entries prepared for design discussion / 15 September 2026



## What the example suggests

Most assignments are recorded, but delivery and oversight overlap for corrective action. The alternative reporting route also returns to the usual recipient. These arrangements need challenge before the map is adopted.

Role overlap is a review prompt, not an automatic governance failure. Authority and safeguards require organizational agreement.

# Supporting detail

THE BASIS FOR THE EXAMPLE

## Responsibility and decision matrix

| Decision                                       | Work owner          | Authority         | Oversight            |
|------------------------------------------------|---------------------|-------------------|----------------------|
| Approve compliance policies                    | Compliance Lead     | Managing Director | Board Risk Committee |
| Accept or escalate significant compliance risk | Operations Director | Managing Director | Board Risk Committee |
| Authorize sensitive investigations             | People & Legal Lead | Managing Director | Board Risk Committee |
| Deliver corrective actions                     | Operations Director | Managing Director | Operations Director  |
| Report program performance                     | Compliance Lead     | Managing Director | Board Risk Committee |
| Approve compliance resources                   | Compliance Lead     | Managing Director | Board Risk Committee |

## Escalation routes

| Route                        | Holder               |
|------------------------------|----------------------|
| Usual recipient              | Compliance Lead      |
| When recipient is implicated | Compliance Lead      |
| When unavailable             | People & Legal Lead  |
| Investigation authorizer     | Managing Director    |
| Response oversight           | Board Risk Committee |

# Practical support & challenge

## Support arrangements

| Arrangement                                       | Response |
|---------------------------------------------------|----------|
| Compliance can access the governing body directly | Yes      |
| Relevant information is available to compliance   | Unknown  |
| Authority and responsibilities are documented     | Yes      |
| Resources match the agreed responsibilities       | Partly   |
| Oversight receives timely reports and follows up  | Yes      |

## Review prompts generated by the tool

| Priority | Review item                                                    |
|----------|----------------------------------------------------------------|
| 2        | Deliver corrective actions: delivery and oversight may overlap |
| 2        | Alternative route returns to the same role or holder           |
| 2        | Relevant information is available to compliance: unknown       |
| 2        | Resources match the agreed responsibilities: partly            |
| 3        | Approve compliance resources: authority evidence not recorded  |

### Escalation trigger and evidence

Escalate urgent harm and leadership conflicts promptly under the approved route. DUMMY GOV-02: route diagram; alternate route not yet tested

These prompts identify questions for organizational review. They do not imply that combining roles is always inappropriate.

# From findings to action

Recorded in the dummy tool inputs.

| Action                                                                            | Owner / target                  | Evidence for review                                   |
|-----------------------------------------------------------------------------------|---------------------------------|-------------------------------------------------------|
| Review whether challenge is sufficiently independent and document safeguards.     | Managing Director<br>2026-09-30 | Document authority and demonstrate the revised route. |
| Identify an alternative that can address a concern involving the usual recipient. | Compliance Lead<br>2026-10-15   | Document authority and demonstrate the revised route. |
| Verify the arrangement and record the evidence.                                   | Managing Director<br>2026-09-30 | Document authority and demonstrate the revised route. |
| Agree what needs to change, with a responsible owner and date.                    | Compliance Lead<br>2026-10-15   | Document authority and demonstrate the revised route. |
| Record the charter, delegation or other evidence supporting these assignments.    | Managing Director<br>2026-09-30 | Document authority and demonstrate the revised route. |

## Questions for the review meeting

- 01 / Is the evidence sufficient for the conclusion, and what remains uncertain?
- 02 / Does each action have an owner with authority and resources to deliver it?
- 03 / What result would justify closure, and who will verify it?

### HOW TO USE THIS REPORT

Read the summary first, challenge the supporting detail, then agree the next action. Keep an editable draft with the record so future changes can be explained.

## Basis and limitations

Role overlap is a review prompt, not an automatic governance failure. Authority and safeguards require organizational agreement.

All organizations, cases, evidence references, ratings and operational findings in this report are fictional. No source documents were inspected. These PDFs are proposed report designs generated from dummy inputs and the current tool models; they are separate from the website's existing print layouts.

Companion editable input: 03-Accountability-Map.json. Import it into the corresponding local tool to reproduce the sample entries. The narrative and meeting agenda are editorial additions for discussion.

## EXECUTIVE SUMMARY / FICTIONAL SAMPLE

# Control Design Specification

Northstar Components - fictional organisation. Prepared as a prospect showcase; no real organisation has been assessed.

## What this report is about

A specification connecting a payment risk to its policy, procedure and control.

## Why you may need it

Use this to move from a written rule to a control that can be operated and tested.

### MAIN FINDINGS

The control is reported operating, but effectiveness testing is pending and walkthrough evidence is limited.

## What you will find in this report

Control objective and steps; ownership; operating evidence; verification and follow-up.

## Recommended next decision

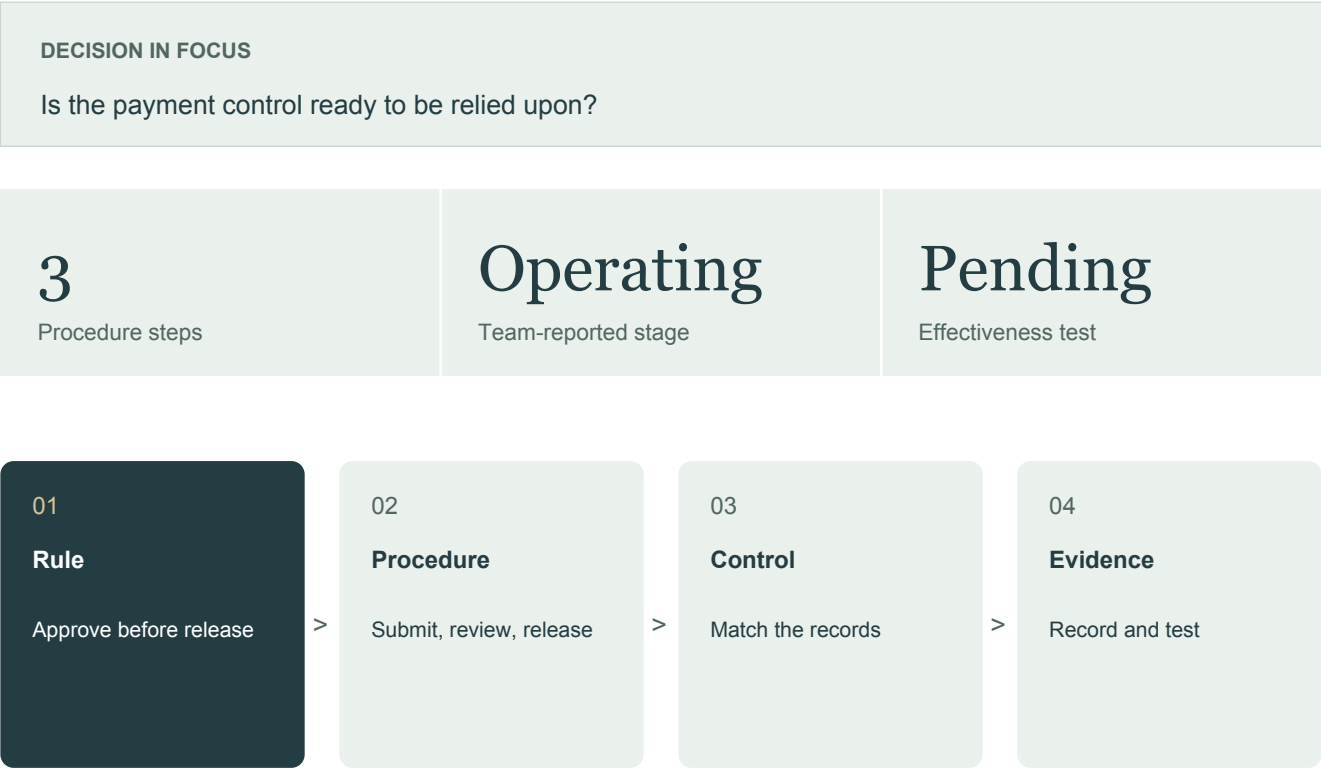
Agree acceptance criteria and test actual operation before relying on the control.

Reading note: all inputs, evidence references and findings are invented. The following pages illustrate the tool output plus editorial interpretation; they are not an independent assurance opinion.

CAMP 04 / SAMPLE REPORT 04

# Control Design Specification

Northstar Components - fictional organization  
Review basis: dummy entries prepared for design discussion / 15 September 2026



## What the example suggests

The control is reported operating, with limited walkthrough evidence. Its effectiveness has not been established. The next task is to verify operation against explicit acceptance criteria and confirm record-retention arrangements.

A documented design or operating claim does not establish effectiveness. Evidence, scope and testing limitations need review.

# Supporting detail

THE BASIS FOR THE EXAMPLE

Scope

Finance and operations; all intermediary invoices

Policy rule

Release payment only after contract, delivery evidence and approval are checked.

Acceptance criteria

Amounts and beneficiary agree; delivery is evidenced; authorized approval predates release.

Exception handling

Hold the payment; request clarification; escalate unresolved exceptions to Finance Lead.

## Procedure and handovers

| Step                                                | Owner                     | Output                            |
|-----------------------------------------------------|---------------------------|-----------------------------------|
| Submit invoice with contract and delivery reference | Relationship Owner        | Complete payment request          |
| Check records and approve or hold                   | Accounts Payable Reviewer | Dated decision and exceptions     |
| Release approved payment and retain record          | Payments Officer          | Payment record linked to approval |

Evidence and retention

Approval record and referenced documents in the controlled finance repository; retention period to be confirmed.

Verification plan

Select 20 payments; compare approval dates, amounts, payees and delivery evidence.

Basis for operating claim

DUMMY CTRL-01: walkthrough and two approval records

# From findings to action

Recorded in the dummy tool inputs.

| Action                                                | Owner / target                      | Evidence for review                              |
|-------------------------------------------------------|-------------------------------------|--------------------------------------------------|
| Confirm retention rules and perform the planned test. | Finance Controls Lead<br>2026-10-15 | Document retention rules and the completed test. |

## Questions for the review meeting

- 01 / Is the evidence sufficient for the conclusion, and what remains uncertain?
- 02 / Does each action have an owner with authority and resources to deliver it?
- 03 / What result would justify closure, and who will verify it?

### HOW TO USE THIS REPORT

Read the summary first, challenge the supporting detail, then agree the next action. Keep an editable draft with the record so future changes can be explained.

## Basis and limitations

A documented design or operating claim does not establish effectiveness. Evidence, scope and testing limitations need review.

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Companion editable input: 04-Control-Specification.json. Import it into the corresponding local tool to reproduce the sample entries. The narrative and meeting agenda are editorial additions for discussion.

## EXECUTIVE SUMMARY / FICTIONAL SAMPLE

# Compliance Knowledge-gap Profile

Northstar Components - fictional organisation. Prepared as a prospect showcase; no real organisation has been assessed.

## What this report is about

An introductory profile of responses to four compliance scenarios.

## Why you may need it

Use this to identify topics for focused learning and a fuller follow-up assessment.

### MAIN FINDINGS

Three responses reviewed; two match the suggested approach. An incorrect information-handling answer was given with high confidence.

## What you will find in this report

Response and confidence profile; scenario feedback; unassessed area and learning actions.

## Recommended next decision

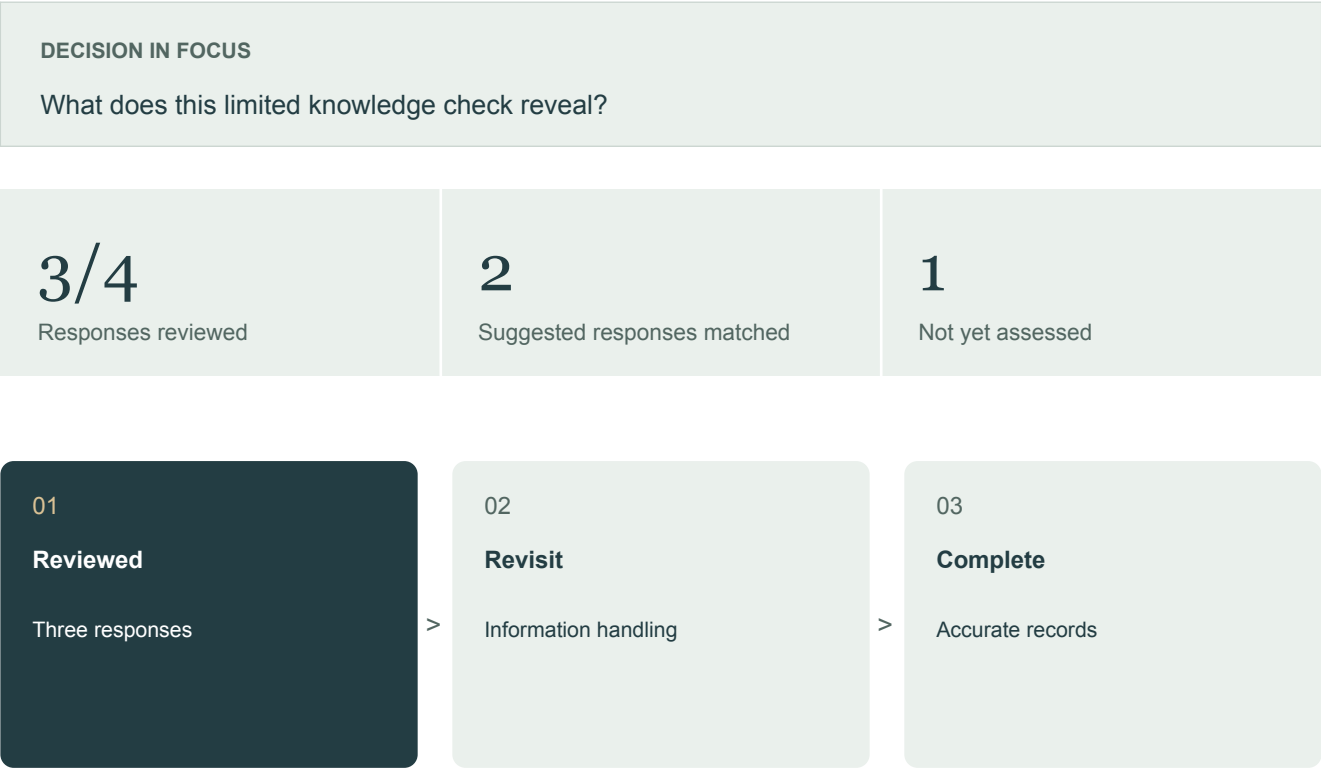
Revisit information handling and complete the unassessed records scenario.

Reading note: all inputs, evidence references and findings are invented. The following pages illustrate the tool output plus editorial interpretation; they are not an independent assurance opinion.

CAMP 05 / SAMPLE REPORT 05D

# Compliance Knowledge-gap Profile

Northstar Components - fictional organization  
Review basis: dummy entries prepared for design discussion / 15 September 2026



## What the example suggests

Information handling was answered incorrectly with high confidence. That combination deserves focused feedback. Accurate records remains unassessed, and sound choices in other scenarios do not establish workplace competence.

Introductory learning and facilitated reflection only. No certification, representative survey conclusion or complete competence assessment.

# Supporting detail

## THE BASIS FOR THE EXAMPLE

### Gifts & conflicts

Sound response in this scenario

Selected response: Pause acceptance, disclose the offer and seek guidance through the approved gifts and conflicts process.

The timing and relationship create a potential conflict. Disclosing the offer and using the approved process allows it to be assessed before you act. A personal label does not remove the concern.

Apply it: Find your gifts and conflicts guidance and identify where to ask before accepting an offer.

Recorded confidence: Somewhat confident

### Information handling

Revisit this topic

Selected response: Upload it, then delete it after the colleague downloads it.

Urgency does not establish that a personal service is an appropriate channel. Use approved arrangements and limit access to people who need it. Deleting a copy later does not undo an unauthorized disclosure.

Apply it: Identify the approved fallback for sharing sensitive information when the usual system is unavailable.

Recorded confidence: Very confident

### Speaking up

Sound response in this scenario

Selected response: Raise the factual concern through an appropriate approved channel, using an alternative route if needed.

Report what you observed and distinguish facts from assumptions. You do not need to conduct your own investigation before seeking guidance. Use the approved channels, especially if the usual route is compromised.

Apply it: Locate a reporting route that is available when a concern involves your manager.

Recorded confidence: Unsure

### Accurate records

Not yet assessed

Selected response: No reviewed response.

Records should reflect the current facts. An expected approval is not an approval already obtained. Keep the status accurate and escalate the delay through the appropriate process.

Apply it: Identify one status field in your work and the evidence required before marking it complete.

Recorded confidence: Not recorded

# From findings to action

Proposed follow-up for this fictional example; these owners and dates are editorial additions for report-design review.

| Action                                          | Owner / target                           | Evidence for review                                                  |
|-------------------------------------------------|------------------------------------------|----------------------------------------------------------------------|
| Give targeted feedback on information handling. | People Development<br>Lead<br>2026-09-30 | Fresh scenario demonstrates understanding without prior explanation. |
| Complete the accurate-records scenario.         | Learning Participant<br>2026-09-20       | A reviewed response is recorded; no general competence claim.        |

## Questions for the review meeting

- 01 / Is the evidence sufficient for the conclusion, and what remains uncertain?
- 02 / Does each action have an owner with authority and resources to deliver it?
- 03 / What result would justify closure, and who will verify it?

### HOW TO USE THIS REPORT

Read the summary first, challenge the supporting detail, then agree the next action. Keep an editable draft with the record so future changes can be explained.

## Basis and limitations

Introductory learning and facilitated reflection only. No certification, representative survey conclusion or complete competence assessment.

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Companion editable input: 05D-Knowledge-Checkup.json. Import it into the corresponding local tool to reproduce the sample entries. The narrative and meeting agenda are editorial additions for discussion.

## EXECUTIVE SUMMARY / FICTIONAL SAMPLE

# Annual Compliance Communication Plan

Northstar Components - fictional organisation. Prepared as a prospect showcase; no real organisation has been assessed.

## What this report is about

A fictional twelve-month communication plan for 2027, organised by audience and message.

## Why you may need it

Use this to coordinate communications and expose missing ownership or checks of understanding before rollout.

### MAIN FINDINGS

Ten of twelve months contain all planning fields. November lacks an owner; December lacks an understanding check.

## What you will find in this report

January-December sequence; audiences and channels; owners; measures and planning actions.

## Recommended next decision

Assign November ownership and define December follow-up. Set weekday dates and local-holiday adjustments before delivery.

Reading note: all inputs, evidence references and findings are invented. The following pages illustrate the tool output plus editorial interpretation; they are not an independent assurance opinion.

CAMP 05 / SAMPLE REPORT 05E

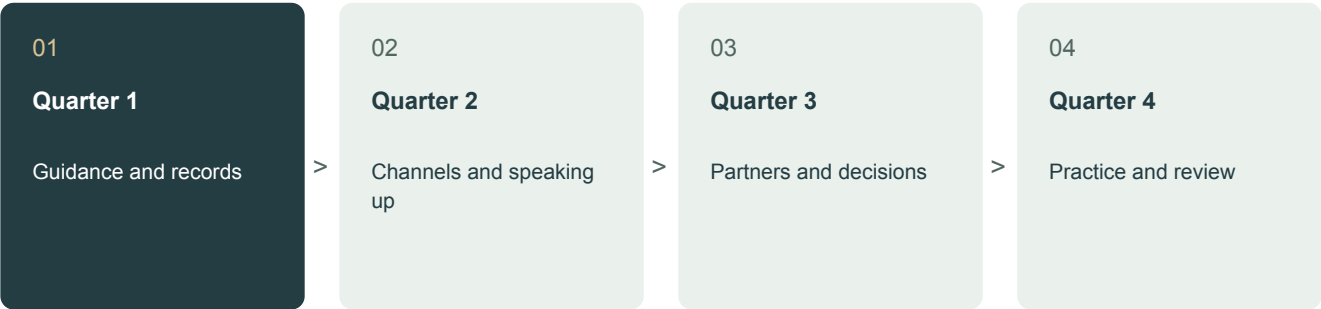
# Annual Compliance Communication Plan

Northstar Components - fictional organization  
Review basis: dummy entries prepared for design discussion / 15 September 2026

DECISION IN FOCUS

Will communication lead to understanding and application?

|                                                  |                                             |                                               |
|--------------------------------------------------|---------------------------------------------|-----------------------------------------------|
| <div>10/12</div> <div>Months fully planned</div> | <div>1</div> <div>Month without owner</div> | <div>1</div> <div>Month without a check</div> |
|--------------------------------------------------|---------------------------------------------|-----------------------------------------------|



## What the example suggests

The twelve-month sequence connects messages to audiences and follow-up. Ten months have every planning field completed. November still needs an owner and December needs an understanding check.

Introductory learning and facilitated reflection only. No certification, representative survey conclusion or complete competence assessment.

# Supporting detail

THE BASIS FOR THE EXAMPLE

## Priority risks and audiences

Priorities: accurate records, third-party interactions and speaking up under deadline pressure.

## January - June 2027

| Month / audience                     | Message / channel                                                      | Owner / understanding check                                                                  |
|--------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| January 2027<br>All personnel        | Know where to ask for guidance<br>Manager briefing                     | Compliance Lead<br>Ask staff to identify the approved route in a fresh scenario.             |
| February 2027<br>Procurement & sales | Recognize and disclose conflicts<br>Short scenario discussion          | People Development Lead<br>Review a small sample of work records for application.            |
| March 2027<br>Finance                | Keep records accurate<br>Intranet guide + team check                   | Finance Controls Lead<br>Collect questions and check understanding in the next team meeting. |
| April 2027<br>All personnel          | Use approved information channels<br>Manager briefing                  | Compliance Lead<br>Ask staff to identify the approved route in a fresh scenario.             |
| May 2027<br>All personnel            | Raise concerns early<br>Short scenario discussion                      | People Development Lead<br>Review a small sample of work records for application.            |
| June 2027<br>Procurement & sales     | Review lessons from the first half-year<br>Intranet guide + team check | Finance Controls Lead<br>Collect questions and check understanding in the next team meeting. |

### REVIEW THE SEQUENCE

Use audience questions and evidence from work to adapt the next message. Completion of a communication activity is not proof of understanding.

# July - December 2027

| Month / audience                    | Message / channel                                                    | Owner / understanding check                                                                  |
|-------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| July 2027<br>Finance                | Check third-party interactions<br>Manager briefing                   | Compliance Lead<br>Ask staff to identify the approved route in a fresh scenario.             |
| August 2027<br>All personnel        | Support managers in difficult decisions<br>Short scenario discussion | People Development Lead<br>Review a small sample of work records for application.            |
| September 2027<br>All personnel     | Revisit gifts and hospitality<br>Intranet guide + team check         | Finance Controls Lead<br>Collect questions and check understanding in the next team meeting. |
| October 2027<br>Procurement & sales | Test understanding with a fresh scenario<br>Manager briefing         | Compliance Lead<br>Ask staff to identify the approved route in a fresh scenario.             |
| November 2027<br>Finance            | Share improvements made after feedback<br>Short scenario discussion  | OWNER NOT ASSIGNED<br>Review a small sample of work records for application.                 |
| December 2027<br>All personnel      | Review impact and plan next year<br>Intranet guide + team check      | Finance Controls Lead<br>CHECK NOT PLANNED                                                   |

## REVIEW THE SEQUENCE

Use audience questions and evidence from work to adapt the next message. Completion of a communication activity is not proof of understanding.

# From findings to action

Proposed follow-up for this fictional example; these owners and dates are editorial additions for report-design review.

| Action                                   | Owner / target                        | Evidence for review                                          |
|------------------------------------------|---------------------------------------|--------------------------------------------------------------|
| Assign the November communication owner. | Compliance Lead<br>2026-11-30         | Owner accepts the delivery and follow-up responsibilities.   |
| Define the December understanding check. | People Development Lead<br>2026-11-30 | The check tests application, not message distribution alone. |

## Questions for the review meeting

- 01 / Is the evidence sufficient for the conclusion, and what remains uncertain?
- 02 / Does each action have an owner with authority and resources to deliver it?
- 03 / What result would justify closure, and who will verify it?

### HOW TO USE THIS REPORT

Read the summary first, challenge the supporting detail, then agree the next action. Keep an editable draft with the record so future changes can be explained.

## Basis and limitations

Introductory learning and facilitated reflection only. No certification, representative survey conclusion or complete competence assessment.

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Companion editable input: 05E-Communication-Plan.json. Import it into the corresponding local tool to reproduce the sample entries. The narrative and meeting agenda are editorial additions for discussion.

## EXECUTIVE SUMMARY / FICTIONAL SAMPLE

# Culture Performance Discussion Profile

Northstar Components - fictional organisation. Prepared as a prospect showcase; no real organisation has been assessed.

## What this report is about

A discussion profile comparing perceptions with recorded practice across culture themes.

## Why you may need it

Use this to focus a culture review on areas where reported confidence is not supported by practice.

### MAIN FINDINGS

Leadership perceptions exceed recorded practice. Pressure and incentives need attention; clarity ratings lack a source reference.

## What you will find in this report

Theme comparison; evidence notes; uncertainties; follow-up questions and actions.

## Recommended next decision

Gather supporting evidence and broaden participation before drawing organisation-wide conclusions.

Reading note: all inputs, evidence references and findings are invented. The following pages illustrate the tool output plus editorial interpretation; they are not an independent assurance opinion.

CAMP 05 / SAMPLE REPORT 05F

# Culture Performance Discussion Profile

Northstar Components - fictional organization  
Review basis: dummy entries prepared for design discussion / 15 September 2026

DECISION IN FOCUS

Where do perceptions and observed practice diverge?

6

Areas discussed

24/80

Voluntary participants

1

Area missing a source

|                           |                                                         |                   |                |
|---------------------------|---------------------------------------------------------|-------------------|----------------|
| Confidence to speak up    | <div><div></div><div></div><div></div><div></div></div> | 3 / 4 perceptions | 2 / 4 practice |
| Leadership consistency    | <div><div></div><div></div><div></div><div></div></div> | 4 / 4 perceptions | 2 / 4 practice |
| Pressure & incentives     | <div><div></div><div></div><div></div><div></div></div> | 2 / 4 perceptions | 1 / 4 practice |
| Fairness & accountability | <div><div></div><div></div><div></div><div></div></div> | 3 / 4 perceptions | 3 / 4 practice |
| Clarity & guidance        | <div><div></div><div></div><div></div><div></div></div> | 3 / 4 perceptions | 3 / 4 practice |
| Learning & improvement    | <div><div></div><div></div><div></div><div></div></div> | 2 / 4 perceptions | 2 / 4 practice |

The scales describe different things. A gap is a prompt for discussion, not a statistical test.

## What the example suggests

Leadership perceptions are more positive than the recorded practice. Pressure and incentives also deserve attention. The small voluntary workshop sample limits interpretation, and clarity ratings lack a source reference.

Introductory learning and facilitated reflection only. No certification, representative survey conclusion or complete competence assessment.

# Supporting detail

THE BASIS FOR THE EXAMPLE

Scope

Production and office teams in Fictional Market A

How inputs were gathered

Two facilitated workshops and a structured review of selected process records.

Participation and limits

24 of 80 personnel attended voluntarily; managers were underrepresented. Findings are directional and not representative.

| Area / perceptions / practice          | Interpretation               | Sources and follow-up                                                                                                                                                       |
|----------------------------------------|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Confidence to speak up<br>3/4 / 2/4    | Priority for discussion      | DUMMY CULT-1: workshop notes and limited record review, 10 September 2026<br>Discuss the weaker signals with the relevant audience and agree a follow-up.                   |
| Leadership consistency<br>4/4 / 2/4    | Perspectives differ          | DUMMY CULT-2: workshop notes and limited record review, 10 September 2026<br>Investigate why perceptions and observed practice differ; avoid averaging away the difference. |
| Pressure & incentives<br>2/4 / 1/4     | Priority for discussion      | DUMMY CULT-3: workshop notes and limited record review, 10 September 2026<br>Discuss the weaker signals with the relevant audience and agree a follow-up.                   |
| Fairness & accountability<br>3/4 / 3/4 | Positive signals to validate | DUMMY CULT-4: workshop notes and limited record review, 10 September 2026<br>Check whether the positive picture holds across roles, locations and time.                     |
| Clarity & guidance<br>3/4 / 3/4        | Evidence source missing      | SOURCE NOT RECORDED<br>Document the source, date and limitations of the ratings.                                                                                            |
| Learning & improvement<br>2/4 / 2/4    | Priority for discussion      | DUMMY CULT-6: workshop notes and limited record review, 10 September 2026<br>Discuss the weaker signals with the relevant audience and agree a follow-up.                   |

# From findings to action

Proposed follow-up for this fictional example; these owners and dates are editorial additions for report-design review.

| Action                                                 | Owner / target                          | Evidence for review                                     |
|--------------------------------------------------------|-----------------------------------------|---------------------------------------------------------|
| Examine the leadership perception/practice difference. | People & Compliance Leads<br>2026-10-15 | Additional sources explain or qualify the difference.   |
| Review pressure points with representative teams.      | Operations Director<br>2026-10-31       | Document incentives, constraints and agreed safeguards. |
| Record sources for the clarity ratings.                | Compliance Lead<br>2026-09-30           | Source, date and limitations accompany both ratings.    |

## Questions for the review meeting

- 01 / Is the evidence sufficient for the conclusion, and what remains uncertain?
- 02 / Does each action have an owner with authority and resources to deliver it?
- 03 / What result would justify closure, and who will verify it?

### HOW TO USE THIS REPORT

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## Basis and limitations

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Companion editable input: 05F-Culture-Profile.json. Import it into the corresponding local tool to reproduce the sample entries. The narrative and meeting agenda are editorial additions for discussion.

## EXECUTIVE SUMMARY / FICTIONAL SAMPLE

# Third-Party Review & Monitoring Plan

Northstar Components - fictional organisation. Prepared as a prospect showcase; no real organisation has been assessed.

## What this report is about

A third-party review and monitoring record for a fictional business relationship.

## Why you may need it

Use this to bring unresolved diligence and decision conditions into one reviewable record.

### MAIN FINDINGS

The team decision is Hold. Three risk signals remain unknown, including unresolved ownership and screening work.

## What you will find in this report

Relationship profile; risk signals; diligence status; safeguards; decision and monitoring plan.

## Recommended next decision

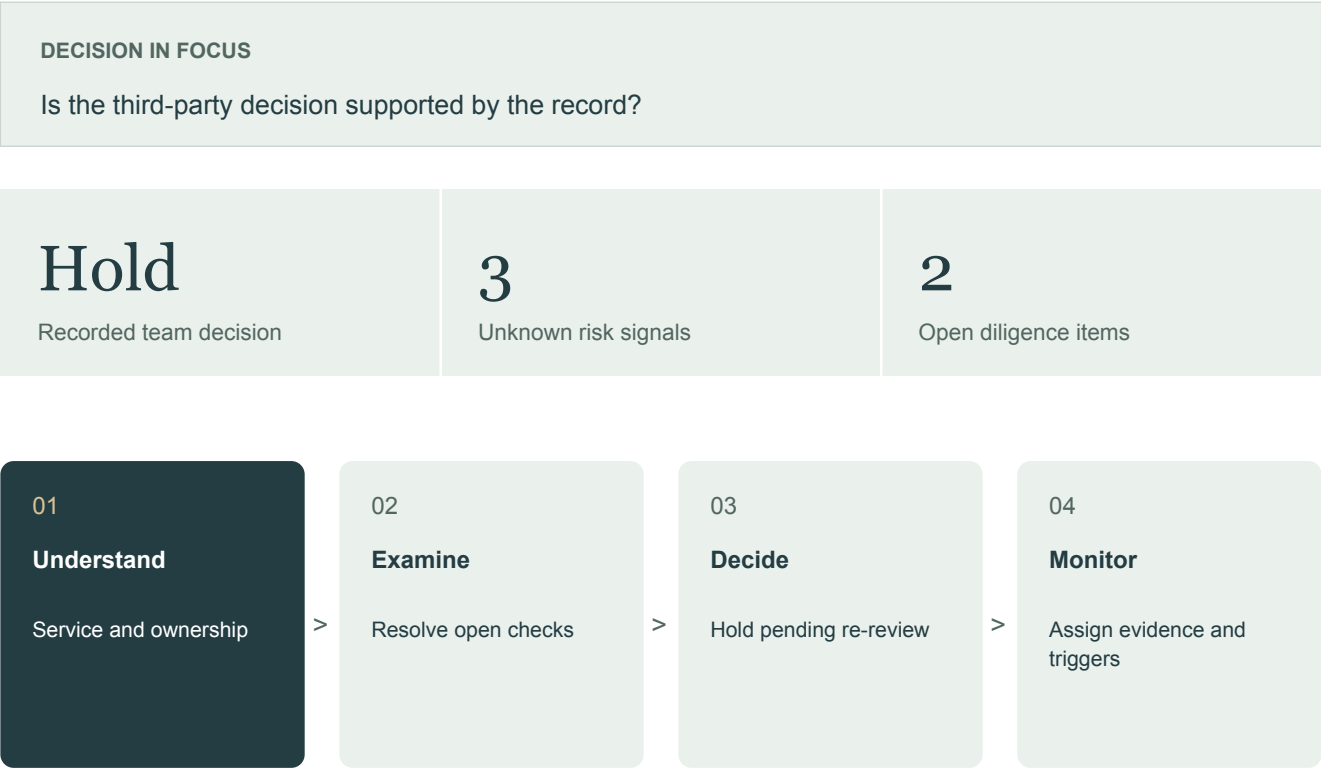
Complete the open diligence and obtain an authorised re-review. The tool does not perform live screening.

Reading note: all inputs, evidence references and findings are invented. The following pages illustrate the tool output plus editorial interpretation; they are not an independent assurance opinion.

CAMP 06 / SAMPLE REPORT 06

# Third-Party Review & Monitoring Plan

Northstar Components - fictional organization  
Review basis: dummy entries prepared for design discussion / 15 September 2026



## What the example suggests

The fictional decision is Hold. Ownership and screening work remain open, with three risk signals unknown. A recorded decision is not independent clearance; re-review the relationship when the missing information is resolved.

No sanctions screening, adverse-media search, ownership verification or automatic approval is performed by the tool.

# Supporting detail

THE BASIS FOR THE EXAMPLE

Relationship and business rationale

Coordinate permit applications and documented administrative interactions.

Scope and value

Illustrative fee of 40,000 units across six months; no currency implied

Decision rationale

Unresolved ownership and screening questions prevent a supported engagement decision.

## Due-diligence record

| Review area                            | Status      | Findings / next step                                                                                                |
|----------------------------------------|-------------|---------------------------------------------------------------------------------------------------------------------|
| Identity, ownership & control          | In progress | Source coverage and ownership information remain incomplete. Obtain missing sources and resolve findings.           |
| Relevant external screening            | In progress | Source coverage and ownership information remain incomplete. Obtain missing sources and resolve findings.           |
| Business rationale & capability        | Reviewed    | Review recorded within the limited supplied scope; confirm current information. Confirm safeguards in the contract. |
| Commercial terms & payments            | Reviewed    | Review recorded within the limited supplied scope; confirm current information. Confirm safeguards in the contract. |
| Conflicts & public interactions        | Reviewed    | Review recorded within the limited supplied scope; confirm current information. Confirm safeguards in the contract. |
| Access, subcontractors & service risks | Reviewed    | Review recorded within the limited supplied scope; confirm current information. Confirm safeguards in the contract. |

# Safeguards & ongoing attention

## Safeguards and conditions

| Safeguard                                               | Recorded plan                                                                                    |
|---------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| Contractual expectations and required approvals         | Written scope; approvals before public interactions; audit and termination terms to be reviewed. |
| Payment and deliverable checks                          | Match fees to contract, receipts and delivery evidence before payment.                           |
| Access, information and subcontractor safeguards        | Limited access to project documents; no subcontracting without approval.                         |
| Guidance, training and concern-reporting arrangements   | Provide conduct guidance and approved concern-reporting routes.                                  |
| Open findings, conditions and actions before engagement | Resolve ownership, screening scope and payment rationale before engagement.                      |

## Risk signals to keep under review

| Signal                              | Response |
|-------------------------------------|----------|
| Public interactions                 | Yes      |
| Unusual payments                    | Unknown  |
| Ownership or conflicts              | Unknown  |
| Sensitive access                    | No       |
| Other intermediaries                | Yes      |
| Adverse or inconsistent information | Unknown  |

### Monitoring trigger

Ownership changes, unusual payment requests or new adverse information

# From findings to action

Recorded in the dummy tool inputs.

| Action                                                         | Owner / target                 | Evidence for review                                               |
|----------------------------------------------------------------|--------------------------------|-------------------------------------------------------------------|
| Obtain missing records and submit for an authorized re-review. | Procurement Lead<br>2026-09-30 | Authorized decision after reviewing unresolved items.             |
| Review the relationship against agreed triggers.               | Procurement Lead<br>2026-10-01 | Updated due-diligence record, deliverables and payment exceptions |

## Questions for the review meeting

- 01 / Is the evidence sufficient for the conclusion, and what remains uncertain?
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### HOW TO USE THIS REPORT

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## Basis and limitations

No sanctions screening, adverse-media search, ownership verification or automatic approval is performed by the tool.

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Companion editable input: 06-Third-Party-Review.json. Import it into the corresponding local tool to reproduce the sample entries. The narrative and meeting agenda are editorial additions for discussion.

## EXECUTIVE SUMMARY / FICTIONAL SAMPLE

# Speak-Up & Response Readiness Plan

Northstar Components - fictional organisation. Prepared as a prospect showcase; no real organisation has been assessed.

## What this report is about

A readiness review of how concerns move through reporting, triage, response and learning.

## Why you may need it

Use this to identify weaknesses in the process before a sensitive concern tests it.

### MAIN FINDINGS

Partial arrangements and unknowns remain around access, triage and follow-up responsibilities.

## What you will find in this report

Readiness responses; evidence references; response ownership and handovers; improvement plan.

## Recommended next decision

Clarify owners and unresolved arrangements. This sample contains no allegations or live case information.

Reading note: all inputs, evidence references and findings are invented. The following pages illustrate the tool output plus editorial interpretation; they are not an independent assurance opinion.

CAMP 07 / SAMPLE REPORT 07

# Speak-Up & Response Readiness Plan

Northstar Components - fictional organization  
Review basis: dummy entries prepared for design discussion / 15 September 2026

DECISION IN FOCUS

Can a concern move safely from reporting to learning?

3

Checks not assessed

3

Missing or partial

0

Positive / evidence absent



## What the example suggests

The example contains both partial arrangements and unknowns. Clarify access, triage and follow-up responsibilities before relying on the response route. This report concerns program design and contains no live allegations.

Program-readiness review only. Do not use this report as a reporting channel or case-management record.

# Supporting detail

THE BASIS FOR THE EXAMPLE

## Review scope

Program arrangements for the fictional facility; no live allegation or case information.

| Area / check                                                                                                      | Response | Evidence reference                                         |
|-------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------------|
| Accessible reporting<br>Can intended users find and use the reporting routes?                                     | Yes      | DUMMY SU-1: process walkthrough; owner validation pending. |
| Accessible reporting<br>Are confidentiality and protection expectations explained accurately?                     | Partly   | DUMMY SU-2: process walkthrough; owner validation pending. |
| Accessible reporting<br>Is an alternative route available when the usual recipient is implicated?                 | Unknown  | Evidence not recorded                                      |
| Triage & early response<br>Is there a consistent intake and initial assessment process?                           | Yes      | DUMMY SU-4: process walkthrough; owner validation pending. |
| Triage & early response<br>Are urgent harm, preservation or other time-sensitive matters escalated appropriately? | Yes      | DUMMY SU-5: process walkthrough; owner validation pending. |
| Triage & early response<br>Are acknowledgment, follow-up and timing responsibilities defined?                     | Yes      | DUMMY SU-6: process walkthrough; owner validation pending. |
| Investigation arrangements<br>Are investigation scope, authority and oversight established?                       | Partly   | DUMMY SU-7: process walkthrough; owner validation pending. |
| Investigation arrangements<br>Are appropriate competence, capacity and specialist support available?              | Unknown  | Evidence not recorded                                      |
| Investigation arrangements<br>Are information preservation, access and records handling planned?                  | Yes      | DUMMY SU-9: process walkthrough; owner validation pending. |

| Area / check                                                                                                     | Response | Evidence reference                                          |
|------------------------------------------------------------------------------------------------------------------|----------|-------------------------------------------------------------|
| Decisions & corrective action<br>Are findings assessed against evidence with limitations recorded?               | Yes      | DUMMY SU-10: process walkthrough; owner validation pending. |
| Decisions & corrective action<br>Are response decisions assigned to authorized, appropriately independent roles? | Yes      | DUMMY SU-11: process walkthrough; owner validation pending. |
| Decisions & corrective action<br>Do corrective actions have owners, dates and verification criteria?             | Partly   | DUMMY SU-12: process walkthrough; owner validation pending. |
| Follow-up & learning<br>Is appropriate feedback provided without disclosing information unnecessarily?           | Unknown  | Evidence not recorded                                       |
| Follow-up & learning<br>Is there a process to identify and respond to possible retaliation after a report?       | Yes      | DUMMY SU-14: process walkthrough; owner validation pending. |
| Follow-up & learning<br>Are recurring themes and action effectiveness reviewed by oversight?                     | Yes      | DUMMY SU-15: process walkthrough; owner validation pending. |

Unknowns require evidence gathering; partial arrangements require an agreed improvement. A Yes answer with a reference remains self-reported.

## Response ownership and handovers

| Stage                         | Recorded route                                            |
|-------------------------------|-----------------------------------------------------------|
| Accessible reporting          | Compliance channel with People & Legal backup             |
| Triage & early response       | Compliance Lead; urgent matters to authorized sponsor     |
| Investigation arrangements    | People & Legal Lead with independent specialist support   |
| Decisions & corrective action | Managing Director, with conflict route to board committee |
| Follow-up & learning          | Board Risk Committee receives aggregated follow-up        |

# From findings to action

Recorded in the dummy tool inputs.

| Action                                              | Owner / target                    | Evidence for review                                |
|-----------------------------------------------------|-----------------------------------|----------------------------------------------------|
| Test channel awareness and alternate access.        | Compliance Lead<br>2026-09-30     | Record the walkthrough, gaps and agreed follow-up. |
| Agree urgency and conflict-routing criteria.        | People & Legal Lead<br>2026-10-07 | Record the walkthrough, gaps and agreed follow-up. |
| Confirm specialist capacity and records safeguards. | People & Legal Lead<br>2026-10-15 | Record the walkthrough, gaps and agreed follow-up. |
| Define evidence-based action closure.               | Operations Director<br>2026-10-15 | Record the walkthrough, gaps and agreed follow-up. |
| Schedule a themes and action-effectiveness review.  | Compliance Lead<br>2026-10-31     | Record the walkthrough, gaps and agreed follow-up. |

## Questions for the review meeting

- 01 / Is the evidence sufficient for the conclusion, and what remains uncertain?
- 02 / Does each action have an owner with authority and resources to deliver it?
- 03 / What result would justify closure, and who will verify it?

### HOW TO USE THIS REPORT

Read the summary first, challenge the supporting detail, then agree the next action. Keep an editable draft with the record so future changes can be explained.

## Basis and limitations

Program-readiness review only. Do not use this report as a reporting channel or case-management record.

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Companion editable input: 07-Speak-Up-Readiness.json. Import it into the corresponding local tool to reproduce the sample entries. The narrative and meeting agenda are editorial additions for discussion.

## EXECUTIVE SUMMARY / FICTIONAL SAMPLE

# Monitoring, Testing & Assurance Review

Northstar Components - fictional organisation. Prepared as a prospect showcase; no real organisation has been assessed.

## What this report is about

A targeted review of a payment control using 20 examined items from a recorded population of 100.

## Why you may need it

Use this to explain what a control test supports, where exceptions occur and what follow-up is needed.

### MAIN FINDINGS

15 items have no identified exception; three show late approval; two remain unresolved. The team conclusion is partial compliance with criteria.

## What you will find in this report

Scope and test criteria; sample outcomes; exceptions; evidence limitations and actions.

## Recommended next decision

Resolve the two uncertain outcomes and investigate late approvals. Do not extrapolate the sample to the full population.

Reading note: all inputs, evidence references and findings are invented. The following pages illustrate the tool output plus editorial interpretation; they are not an independent assurance opinion.

CAMP 08 / SAMPLE REPORT 08

# Monitoring, Testing & Assurance Review

Northstar Components - fictional organization  
Review basis: dummy entries prepared for design discussion / 15 September 2026

DECISION IN FOCUS

What does the payment sample support?

|                |                       |                     |
|----------------|-----------------------|---------------------|
| 20             | 3                     | 2                   |
| Items examined | Items with exceptions | Unresolved outcomes |

|                         |                   |                    |
|-------------------------|-------------------|--------------------|
| 15                      | 3                 | 2                  |
| No exception identified | With an exception | Unresolved outcome |

20 examined / 20 selected / 100 in the recorded population. No extrapolation.

## What the example suggests

The team concludes that the control partly meets criteria within the reviewed scope. Three late approvals and two unresolved items require follow-up. The targeted sample does not establish a population-wide exception rate.

Counts apply only to examined items and the test performed. No statistical confidence or independent assurance opinion is produced.

# Supporting detail

## THE BASIS FOR THE EXAMPLE

### Review objective and scope

Were required approvals obtained before payment release?

### Period and population

100 intermediary payments listed in DUMMY FIN-POP-01

### Criteria and method

Compare release and approval timestamps; inspect contract, invoice and delivery references.

### Selection rationale

Targeted selection of higher-value and unusual payments; not a representative statistical sample.

### Review safeguards

Reviewer does not operate the control; Finance Lead reviews factual accuracy without determining the conclusion.

### Recorded findings

Late approvals suggest the check can occur after release. Missing records leave two outcomes unresolved; root causes require review.

### Conclusion and limits

Fifteen examined items had no exception identified; three failed the timing criterion and two remain unresolved. The result is limited to this targeted sample.

#### EVIDENCE REFERENCES

DUMMY TEST-01: 20-item test log; three late approvals and two missing approval records. Only selected payments and available records examined. No population-wide exception rate inferred.

### Review record

1 June - 31 August 2026. Reviewer: Internal Audit Reviewer. Conclusion reviewer: Head of Internal Audit / 2026-09-13. Team conclusion: Partly meets criteria.

# From findings to action

Recorded in the dummy tool inputs.

| Action                                                                                 | Owner / target                      | Evidence for review                                                                                                            |
|----------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| Investigate late approvals, resolve missing records and test the revised release gate. | Finance Controls Lead<br>2026-10-15 | Independent reviewer to examine a fresh targeted sample after implementation, document limitations and report unresolved gaps. |

## Questions for the review meeting

- 01 / Is the evidence sufficient for the conclusion, and what remains uncertain?
- 02 / Does each action have an owner with authority and resources to deliver it?
- 03 / What result would justify closure, and who will verify it?

### HOW TO USE THIS REPORT

Read the summary first, challenge the supporting detail, then agree the next action. Keep an editable draft with the record so future changes can be explained.

## Basis and limitations

Counts apply only to examined items and the test performed. No statistical confidence or independent assurance opinion is produced.

All organizations, cases, evidence references, ratings and operational findings in this report are fictional. No source documents were inspected. These PDFs are proposed report designs generated from dummy inputs and the current tool models; they are separate from the website's existing print layouts.

Companion editable input: 08-Assurance-Review.json. Import it into the corresponding local tool to reproduce the sample entries. The narrative and meeting agenda are editorial additions for discussion.

## EXECUTIVE SUMMARY / FICTIONAL SAMPLE

# Continuous Improvement & Support Plan

Northstar Components - fictional organisation. Prepared as a prospect showcase; no real organisation has been assessed.

## What this report is about

An improvement record distinguishing delivery of a change from verification that it works.

## Why you may need it

Use this when actions are marked complete but the original risk may still remain.

### MAIN FINDINGS

The workflow change and briefing are reported complete. Effectiveness verification is still pending.

## What you will find in this report

Original issue; corrective action and ownership; verification criteria; review and closure arrangements.

## Recommended next decision

Keep effectiveness review open until fresh evidence supports closure.

Reading note: all inputs, evidence references and findings are invented. The following pages illustrate the tool output plus editorial interpretation; they are not an independent assurance opinion.

CAMP 09 / SAMPLE REPORT 09

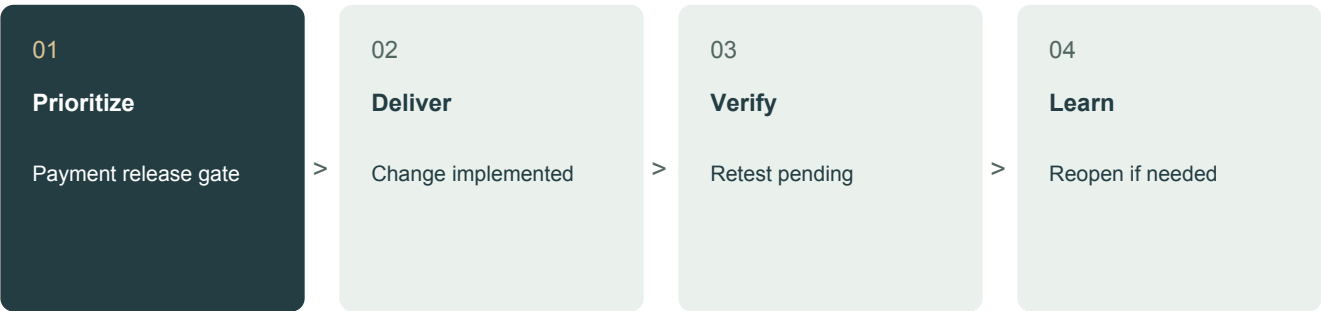
# Continuous Improvement & Support Plan

Northstar Components - fictional organization  
Review basis: dummy entries prepared for design discussion / 15 September 2026

DECISION IN FOCUS

Has the improvement worked, or only been implemented?

|                                                    |                                                    |                                                   |
|----------------------------------------------------|----------------------------------------------------|---------------------------------------------------|
| <div>Pending</div> <div>Effectiveness review</div> | <div>15 Oct</div> <div>Implementation target</div> | <div>31 Oct</div> <div>Effectiveness review</div> |
|----------------------------------------------------|----------------------------------------------------|---------------------------------------------------|



## What the example suggests

The workflow change and briefing are reported complete. Verification is still pending. Keep the action open for effectiveness review, compare the fresh evidence with the original issues and reopen delivery work if gaps persist.

Implementation and effectiveness are distinct. Status is entered by the team and evidence is not independently verified.

# Supporting detail

THE BASIS FOR THE EXAMPLE

**Source finding**

DUMMY TEST-01: Camp 08 sample review

**Problem and possible causes**

Possible workflow bypass and unclear record ownership; causes require validation.

**Desired outcome**

Payments cannot be released without a valid approval reference; exceptions are held and reviewed.

**Baseline**

Targeted sample: 3 exceptions and 2 unresolved outcomes among 20 examined; not a population estimate.

**Implementation evidence**

DUMMY IMP-01: workflow change record and staff briefing attendance

**Effectiveness review**

Inspect a fresh sample for approval before release and completeness of records; record exceptions and limitations.

**Observed result**

Not yet available. Implementation is reported complete; effectiveness has not been established.

**INTERNAL OWNERSHIP AND SUPPORT**

Internal team retains ownership and approval; discuss specialist control-design review and independent retesting. Internal sponsor: Chief Financial Officer.

# From findings to action

Recorded in the dummy tool inputs.

| Action                                                                               | Owner / target                      | Evidence for review                                                                                                |
|--------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| Confirm causes; configure release gate; brief finance users; examine a fresh sample. | Finance Controls Lead<br>2026-10-15 | Payments cannot be released without a valid approval reference; exceptions are held and reviewed.                  |
| Perform and review the effectiveness retest.                                         | Internal Audit Lead<br>2026-10-31   | Inspect a fresh sample for approval before release and completeness of records; record exceptions and limitations. |

## Questions for the review meeting

- 01 / Is the evidence sufficient for the conclusion, and what remains uncertain?
- 02 / Does each action have an owner with authority and resources to deliver it?
- 03 / What result would justify closure, and who will verify it?

### HOW TO USE THIS REPORT

Read the summary first, challenge the supporting detail, then agree the next action. Keep an editable draft with the record so future changes can be explained.

## Basis and limitations

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Companion editable input: 09-Improvement-Plan.json. Import it into the corresponding local tool to reproduce the sample entries. The narrative and meeting agenda are editorial additions for discussion.