UNIVERSAL FRAMEWORK

Domain Evidence Guidebook

Evidence-Based Maturity Assessment Across Seven Organisational Domains

This guidebook consolidates the seven domain evidence notes into one reference for assessors. It supports consistent use of the E1 (Exists), E2 (Enabled), and E3 (Executed) maturity model when assessing documentary evidence, interviews, records, and performance data.

Contents

Domain 1. Strategy & Direction

METRIC % of strategic objectives with a named owner and tracked outcomes

- E1 — Exists: Does a defined organisational process exist for establishing, prioritising, and assigning strategic objectives?
- E2 — Enabled: Are objectives supported by defined measures, targets, and regular performance tracking?
- E3 — Executed: Have objectives demonstrably driven real decisions (e.g. funding changes, reprioritisation, stopping initiatives)?

Specific documentary evidence and interview notes can be tied directly to how objectives are set, owned, measured, and used in decision-making.[1][2][3]

E1 — Exists

Does a defined organisational process exist for establishing, prioritising, and assigning strategic objectives?

Evidence you would look for

- An approved strategic plan or corporate plan explaining how objectives are developed, prioritised, and cascaded (for example, a planning-cycle diagram, the role of the Executive/Board, and consultation steps).[4]
- A documented methodology or framework (for example, use of Balanced Scorecard, OKRs, or an internal strategy framework) describing how strategic priorities are selected and reviewed.[3][5]
- Terms of reference for a strategy committee or executive leadership team specifying responsibility for setting and approving strategic objectives.[4]
- A policy or procedure for strategic planning and performance management, including how objectives are added, changed, or retired.[3][4]
- Objective registers or strategy maps clearly listing all strategic objectives in a single, controlled source.[6][7]
- Evidence that each objective has an explicitly named single owner (person or role) documented in the plan, roadmap, or register.[8][1]
- For this metric, E1 evidence mainly proves there is a consistent way to create objectives and assign owners; the percentage may be calculated, but strong measures or tracking are not yet required for E1.[1][8]

Example notes you might record

- *“Organisation uses a documented three-year planning cycle approved by the Board; process describes environmental scan, prioritisation criteria and Executive endorsement.”[4]*
- *“All 14 strategic objectives are recorded in the corporate plan; each has a named Executive owner listed next to the objective.”[8]*

- *“There is a written ‘Strategy and Performance Policy’ defining responsibilities for setting, updating and retiring strategic objectives.”[3]*

E2 — Enabled

Are objectives supported by defined measures, targets, and regular performance tracking?

Evidence you would look for

- For each, or nearly all, strategic objective, at least one KPI or measure with a clear definition of what is measured, how it is calculated, and the data source.[9][6]
- For each KPI, a baseline and target (X to Y by date).[2][5]
- A named data/measure owner, distinct from or in addition to the objective owner.[10][8]
- Performance reports or dashboards showing regular (for example, monthly or quarterly) updates on each objective’s KPIs.[2][3]
- Use of traffic lights or trend indicators to show status against target.[3]
- Coverage across the whole set of strategic objectives, rather than only operational metrics.[7]
- An agreed reporting calendar and forum (for example, Executive performance review meeting or Board performance report) where objectives and KPIs are reviewed.[2][3]
- Data-quality and KPI-governance elements: data definitions, responsibilities for data collection, and sign-off before reporting.[10][4]
- At E2, a high percentage (for example, greater than 80–90%) of objectives would usually have a named owner, at least one KPI tied to the objective, a target, and regularly updated results in the reporting system.[5][1][2]

Example notes you might record

- *“12 of 14 strategic objectives have at least one KPI with a defined measure, target and baseline; documented in the performance framework.”[5][6]*
- *“Quarterly strategy performance report to Executive includes all strategic objectives with RAG status, trend over last four quarters, and commentary by objective owner.”[2][3]*
- *“KPI governance procedure allocates accountability for data collection and target ownership for each strategic measure.”[10][4]*

E3 — Executed

Have objectives demonstrably driven real decisions (funding, reprioritisation, stopping initiatives)?

Evidence you would look for

- Documented decision records explicitly referencing objective performance, such as Executive or Board minutes where under- or over-performance against strategic objectives leads to changes in funding, scope, or timelines.[2][3]
- Business cases or investment proposals that show alignment to specific strategic objectives and refer to KPI results to justify investment or disinvestment.[6][9]
- Records of initiatives being stopped, scaled back, or accelerated because their contribution to a strategic objective was not supported by data or was outperformed by alternatives.[11][2]

- Performance-review packs including “management response” or “action taken” sections linked directly to objective status (for example, “Objective 3 off track; reallocated FTE from Initiative X to Y”).[11][2]
- Evidence of target resets or strategy refresh driven by KPI trends, such as revising objectives, changing targets based on benchmarking, or adjusting measures where they are not useful.[6][10]
- Examples where performance insights have shaped priorities across portfolios, not just within a single project (for example, rebalancing a portfolio from growth to customer experience because of NPS and churn metrics against relevant objectives).[12][11]
- At E3, the focus is not only the percentage but also a high proportion of objectives where owners actively propose and implement actions in response to tracked outcomes, with traceable decisions and changes.[11][10][3]

Example notes you might record

- *“Board minute 12/2025: Under-performance on ‘Improve customer retention’ objective (NPS and churn KPIs) used as basis to increase CX program funding by $2m and pause two lower-impact marketing initiatives.”[12][2]*
- *“2024–25 budget pack contains a section mapping investments to strategic objectives and referencing prior-year KPI results for each objective.”[9][11]*
- *“Strategy refresh 2025 updated three objectives and retired one, explicitly citing three years of KPI data and benchmarking as rationale.”[6][10]*

Additional guidance

How to phrase assessment notes for the metric

- *“A corporate planning process is documented and followed; 100% of strategic objectives are listed in the corporate plan with a named Executive owner, but measures and targets are incomplete for some objectives.”[1][5]*
- *“92% of strategic objectives have a named owner, at least one defined KPI, baseline and annual target; performance is reported quarterly to the Executive in a consolidated dashboard.”[5][8][2]*
- *“Performance against strategic objectives is routinely discussed in Executive and Board forums, and there are multiple documented examples in the past 12–18 months where objective-level results have led to funding reallocations, initiative stoppages and reprioritisation.”[11][3][2]*

These types of evidence and notes make the maturity rating transparent and auditable while directly aligning to the intent of the metric.

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Domain 2. Decision-Making Quality

METRIC Decision reversal or rework rate

- E1 — Exists: Does a defined organisational decision-making framework exist (authority levels, criteria, escalation)?
- E2 — Enabled: Are decision-makers trained and supported to apply the framework consistently?
- E3 — Executed: Is there evidence that decisions are made once, stick, and rarely require reversal or rework?

This assessment uses artefacts that show the framework exists (E1), evidence that people are enabled to use it (E2), and data or records that show stable, low-rework decisions (E3).

E1 — Exists

Does a defined organisational decision-making framework exist (authority levels, criteria, escalation)?

Evidence you would look for

- A delegation of authority (DoA) or decision-rights policy defining authority levels (for example, Board, CEO, Executive, BU Head, Manager), financial or risk thresholds, and decision types for each level.[1][2][3]
- A decision-making and escalation matrix showing decision categories, approval roles, escalation levels, and routing rules for cross-functional or high-risk decisions.[2][4]
- A standard decision framework or methodology (for example, decision trees, criteria-based scoring, risk/benefit assessments) documented in procedures, playbooks, or methodology guides.[3][5][1]
- Process maps including decision points, approval steps, and escalation paths for key workflows (projects, change control, product, customer exceptions, and similar workflows).[4][6][3]
- Defined quality metrics and KPIs explicitly including "decision reversal rate", "rework rate", or similar, including how rework is defined and calculated (for example, rework rate = effort on rework ÷ total effort × 100).[6][7][8]
- A framework that is version-controlled, approved by the appropriate governance body, and accessible on the intranet or QMS.
- Explicit definitions of what counts as a decision, a reversal, and rework versus scope change.[8][9]
- Escalation criteria that are risk- and value-based (for example, dollar thresholds, customer impact, safety, compliance), not simply "ask your manager".[1][2][4]

Example notes you might record

- *"The framework is version-controlled, approved by the appropriate governance body, and accessible on the intranet or QMS."*

- *“Definitions are explicit: what counts as a decision, what counts as a reversal, and what counts as rework versus scope change.”[8][9]*
- *“Escalation criteria are risk- and value-based (for example, dollar thresholds, customer impact, safety, compliance), not just ‘ask your manager’.”[1][2][4]*

E2 — Enabled

Are decision-makers trained and supported to apply the framework consistently?

Evidence you would look for

- Training materials and records: slides, e-learning modules, and attendance logs for decision-making, delegation-of-authority, and escalation training targeted at managers and leaders.[5][10][11]
- Induction/onboarding content explaining authority levels, decision criteria, escalation paths, and how to use the framework in day-to-day work.[3][1]
- Coaching, workshops, or clinics where managers practise applying the framework to real cases and receive feedback (for example, decision workshops or governance clinics).[10][11][5]
- Job descriptions and performance criteria for leaders referencing decision-making quality, appropriate escalation, and adherence to the framework.[1][3]
- Decision tools embedded in systems: workflow or approval systems that enforce authority thresholds, require justification fields, and route escalations automatically according to the matrix.[4][6][3]
- Guidance artefacts such as quick-reference guides, checklists, and decision templates—with sections for options, criteria, risks, and rationale—used in steering committees or project boards.[10][3][1]

Example notes you might record

- *“Training covers both the mindset (ownership, bias awareness, escalation discipline) and the skillset (using criteria, assessing risks, documenting rationale).”[11][10]*
- *“Decision-makers can accurately describe their decision authority, when to escalate, and how rework and reversals are tracked, when interviewed.”*
- *“People analytics or surveys show reasonable confidence in decision rights and clarity of who decides what.”[3][1]*

E3 — Executed

Is there evidence that decisions are made once, stick, and rarely require reversal or rework?

Evidence you would look for

- A clear operational definition of “decision reversal” (an approved decision later overturned or materially changed) and “decision rework” (effort spent revisiting decisions previously marked complete).[7][9][8]
- A standard metric such as decision reversal rate = number of reversed decisions ÷ total decisions in period; or decision-related rework rate = effort on rework caused by poor/changed decisions ÷ total effort.[6][7][8]

- Trend reports or dashboards showing stable or improving decision reversal/rework rates over several periods, ideally segmented by function, project type, or decision level.[7][8][6]
- Project and change logs showing relatively few instances where major scope, investment, or policy decisions are reversed after approval; where reversals occur, they are linked to new information rather than avoidable errors.
- Issue and incident analyses quantifying rework effort and identifying root causes, with only a small proportion attributed to "poor initial decision" or "unclear authority/escalation".[12][13][6]
- Stage-gate or governance records where decisions are clearly documented once with rationale, and subsequent reviews focus on progress rather than re-arguing the same decision.
- Retrospectives or lessons-learned reports noting decreasing rework or fewer "churn" cycles due to indecision or frequent direction changes.[13][12][6]
- Audit or compliance reviews confirming approvals align with authority thresholds and that exceptions/escalations follow the defined matrix.[2][3]

Example notes you might record

- *"Data shows rework and reversals are the exception, not the norm (for example, a relatively low rework rate compared to internal targets or industry norms)."[9][8][6][7]*
- *"Where significant rework or reversal occurs, documented root causes are external (new regulation, major market change) rather than controllable factors (unclear criteria, wrong approver, skipped escalation)."*
- *"Managers and teams report fewer 'back-and-forth' approvals, less churn, and shorter decision cycle times as the framework matures."[6][1][3]*

Additional guidance

How to use this in an assessment

- Map actual artefacts and data against the examples above and note any gaps.
- Interview a sample of decision-makers to confirm understanding and observe whether their behaviours match the documented framework.
- Review a handful of recent major decisions (for example, projects, investments, policy changes) and trace where the decision was made, whether it aligned with authority thresholds, and whether it was later reversed or required substantial rework.

These evidence types, combined with notes on quality and consistency, strongly support the rating for each level (E1, E2, E3) against the "decision reversal or rework rate" metric.

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Domain 3. Risk & Resilience

METRIC % of critical risks with treatments that reduce risk to target

- E1 — Exists: Does a defined organisational process exist for identifying, assessing, and managing risks?
- E2 — Enabled: Are treatments defined, resourced, and linked to risk targets or tolerances?
- E3 — Executed: Have treatments demonstrably reduced risk exposure in practice (not just on paper)?

The assessment looks for a defined, repeatable risk-management process (E1), specific resourced treatments for critical risks tied to risk appetite/tolerances (E2), and evidence that those treatments have reduced exposure in practice (E3).[1][2][3]

E1 — Exists

Does a defined organisational process exist for identifying, assessing, and managing risks?

Evidence you would look for

- A documented risk-management framework and policy approved by the governing body, referencing standards such as ISO 31000 and describing objectives, scope, roles, and responsibilities.[2][4]
- A documented risk-management process (for example, procedure or toolkit) setting out the steps: establish context, identify risks, analyse/assess, evaluate against criteria, treat, and monitor/review.[1][4]
- Defined risk categories, rating scales, and risk-evaluation criteria (likelihood, consequence, and clear definitions of “critical” risk).[5][2]
- Evidence that the process is in use: completed enterprise or divisional risk registers showing risks identified, assessed, and evaluated using the standard method.[2][1]
- Governance artefacts showing the process is embedded: terms of reference for risk committees, role descriptions for risk owners, and scheduled risk-review cycles.[4][5]
- Training or awareness material showing staff are informed about how to identify and escalate risks (for example, presentations, intranet guidance, learning modules).[1][4]

Example notes you might record

- *“Risk management framework v2.1 approved by Board in May 2025; process aligned to ISO 31000 and applied across all business units.”[4]*
- *“Enterprise risk register evidences consistent use of standard likelihood/consequence matrix and risk criteria for all critical risks.”[2]*
- *“Quarterly risk committee pack includes standing agenda items on risk identification, assessment, and treatment planning.”[1][4]*

E2 — Enabled

Are treatments defined, resourced, and linked to risk targets or tolerances?

Evidence you would look for

- For each critical risk, defined treatment(s) or control improvements recorded in the risk register, including description, owner, due date, and implementation status.[2][1]
- Documented risk-appetite and tolerance statements setting target risk levels (for example, "no more than medium residual risk for safety incidents with potential fatality").[6][3]
- Explicit linkage between each critical risk's target level and the organisation's risk appetite/tolerances, such as register fields or mapping showing current residual versus target residual aligned to appetite.[3][6]
- Evidence of resourcing for key treatments: budget approvals, project charters, assigned FTE, or contracts with external providers.[7][1]
- Key risk indicators (KRIs) or control indicators defined for each critical risk to monitor whether treatments are expected to keep exposure within tolerance.[8][5]
- Regular reporting showing progress on treatment implementation for critical risks, including overdue items and escalation of slippage.[8][1]

Example notes you might record

- *"Risk appetite statement defines quantitative tolerances for WHS, cyber, and financial loss; risk register includes 'target rating' aligned to these tolerances for all critical risks."[6][3]*
- *"For top 20 critical risks, specific treatment plans documented with named owners and funding approved through FY26 budget."[7][1]*
- *"KRIs mapped to critical risks (e.g. number of high-severity incidents, control test failures) and reported quarterly to Executive with thresholds linked to tolerance levels."[5][8]*

E3 — Executed

Have treatments demonstrably reduced risk exposure in practice (not just on paper)?

Evidence you would look for

- Before/after risk ratings for critical risks showing movement from above-tolerance to at-or-below-tolerance following treatment implementation, with dates and rationale recorded.[6][2]
- Trend data for KRIs and incident metrics showing improvement attributable to treatments (for example, sustained reduction in frequency or severity of relevant incidents, losses, or near misses).[9][8]
- Control-effectiveness assessments or testing results indicating improved design or operation of key controls (for example, internal-audit reports, control testing, scenario exercises).[10][8]
- Post-implementation reviews or benefits-realisation reports for major risk treatments that specifically evaluate impact on risk exposure versus target.[9][1]
- Evidence that, where treatment outcomes have not reduced risk to target, management has adjusted strategy, escalated exceptions, or reconsidered appetite.[3][6]
- Case examples where the organisation absorbed and recovered from an event more effectively due to new treatments (for example, cyber-incident response time reduced or service restored faster than prior events).[10][9]

Example notes you might record

- *“Residual ratings for 15 of 20 critical risks reduced from ‘High’ to ‘Medium’ over 12 months; narrative in register links reductions to implemented treatments and confirms alignment with risk appetite.”[6][2]*
- *“Lost-time injury frequency rate and high-potential near-misses down >30% over two years following implementation of new safety controls; KRIs remain within tolerance thresholds.”[5][8]*
- *“Internal audit 2025–26 program reports improved control effectiveness for key cyber and financial controls; no critical control deficiencies remaining open for top risks.”[10][1]*

Additional guidance

Metric-specific evidence: “% of critical risks with treatments that reduce risk to target”

- A clearly defined list of “critical risks” and how they are designated (for example, all inherent “Extreme/High” or risks above tolerance).[4][5]
- For each critical risk, documentation of current residual rating, target rating, and linkage to appetite/tolerance.[3][6]
- A data extract from the risk system showing, for all critical risks, whether at least one implemented or in-progress treatment is mapped and whether current residual is at or below target.[8][1]
- Calculations of the metric (for example, X of Y critical risks currently at or better than target with defined treatments), trended over time to show progress.[8][9]
- Commentary explaining any critical risks still above target, including planned treatments, timelines, and approved temporary appetite exceptions.[3][6]

An assessor’s working note might read:

- *“As at Q2 FY26, 24 of 30 critical risks (80%) have active treatments in place and residual ratings at or below target; remaining six have documented exceptions approved by Executive and time-bound action plans.”[6][8]*

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Domain 4. Execution & Operational Control

METRIC On-time, on-budget delivery rate for material initiatives

- E1 — Exists: Does a defined organisational framework exist for planning, governing, and controlling delivery of material initiatives?
- E2 — Enabled: Are teams equipped with governance, reporting, and corrective mechanisms?
- E3 — Executed: Do initiatives consistently deliver outcomes within agreed time and cost tolerances?

The assessment is supported by progressively stronger evidence that a coherent delivery-governance framework exists, that teams are equipped to use it, and that it demonstrably drives on-time, on-budget outcomes for material initiatives.

E1 — Exists

Does a defined organisational framework exist for planning, governing, and controlling delivery of material initiatives?

Evidence you would look for

- An enterprise project/program/portfolio delivery framework, methodology, or “end-to-end project delivery framework” approved by senior leadership (or equivalent), covering initiation, business case, planning, execution, control, and closure.[1][2]
- Standard templates—business case, project charter/PID, schedule, risk register, change request, status report, and benefits plan—referenced in the framework.[1]
- A formal governance model for material initiatives, such as a steering committee, project control board, or portfolio board, and terms of reference covering decision rights, quorum, and escalation paths.[3][4]
- Defined roles and responsibilities for sponsors, SROs, project managers, PMO, finance, and risk, documented in a RACI or equivalent.[5]
- A defined stage-gate/gateway or investment lifecycle with criteria for progressing, such as business-case quality, risk assessment, affordability, and delivery readiness.[3][1]
- A policy or standard for minimum controls on material initiatives: risk management, issues management, schedule and cost baselines, change control, and reporting cadence.[2][6]
- A defined “on-time, on-budget delivery rate” metric in the framework or PMO standards, including clear rules for “on time”, “on budget”, and initiatives in scope.[7][2]

Example notes you might record

- *“Framework exists, is approved and version-controlled, and applies explicitly to ‘material initiatives’ (e.g. above a value/complexity threshold).”*
- *“Governance forums and roles are defined, with TORs and RACIs, but there is not yet strong evidence of consistent use.”*

- *"On-time/on-budget metric is defined and included in standard PMO or performance reporting, even if data quality or usage is still maturing."*

E2 — Enabled

Are teams equipped with governance, reporting, and corrective mechanisms?

Evidence you would look for

- Active steering committees/PSCs/boards with forward-planned meeting schedules, agendas, packs, and minutes for current material initiatives.[6][3]
- Evidence that these forums review schedule/budget status, risks, and issues, and make decisions or approvals, such as gate approvals, scope decisions, and risk responses.[4][3]
- A standardised toolset in use (PPM system, scheduling tools, risk registers, financial tracking) with configuration reflecting the organisational framework.[8][2]
- Standard templates actually used in current initiatives: charters, business cases, stage-gate documentation, status reports, and change requests.[9][1]
- Regular, standardised status reporting for material initiatives showing schedule variance, cost variance, forecast at completion, risks, issues, and change log.[6][8]
- Defined and used escalation paths for red/amber status, including thresholds and timeframes for escalation to higher governance levels.[4][5]
- Corrective actions raised, tracked, and closed, such as schedule-recovery plans, approved rebaselining, and scope trade-offs to protect critical dates.[10][8]
- Active risk and issue management with mitigation plans, owners, and due dates, discussed in governance forums.[6]
- Training materials, onboarding guides, or communities of practice teaching the framework and use of tools for schedule/budget control.[2]
- Role descriptions or competency frameworks requiring project-governance and control skills for PMs/SROs.[4]

Example notes you might record

- *"Teams have access to and demonstrably use standard tools, templates, and governance forums for material initiatives."*
- *"There is consistent periodic reporting to governance bodies and a visible path from red/amber status to agreed corrective actions and decisions."*
- *"The on-time/on-budget metric is calculated and reported, even if performance is not yet strong."*

E3 — Executed

Do initiatives consistently deliver outcomes within agreed time and cost tolerances?

Evidence you would look for

- A portfolio-level KPI showing the percentage of material initiatives delivered on time and on budget over at least 12–24 months, with defined tolerances (for example, ±10% schedule and ±5% cost).[7][2]

- Trend analysis showing stable or improving on-time/on-budget rates and explanations for variances by segment, such as initiative type or business unit.[7]
- Case studies or post-implementation reviews for major initiatives showing governance interventions—gate decisions, scope changes, risk responses—helped avoid or recover delays and overruns.[11][6]
- Evidence that initiatives with stronger adherence to governance exhibit fewer delays and cost overruns, through internal analysis or industry evidence linking robust governance with fewer delays and cost overruns.[6]
- A sample of recent material initiatives showing each had an approved baseline, regular reporting, risk and change control, and closure reports including time and cost performance.[1][2]
- A low rate of surprises, such as late discovery of major overruns, because issues are surfaced early through governance.[10][6]
- Routine post-implementation reviews feeding lessons learned into updates of the framework, templates, and training.[2]
- Governance bodies periodically reviewing portfolio performance (including on-time/on-budget rates) and adjusting criteria, thresholds, or capability focus areas.[4]

Example notes you might record

- *"Metric for on-time, on-budget delivery rate is actively used as a management KPI for material initiatives, with sustained data and clear tolerances."*
- *"Majority of material initiatives meet agreed time and cost tolerances, and where they do not, there is traceable governance oversight, documented causes, and learning incorporated back into the framework."*
- *"Governance is not just present but demonstrably influencing decisions and driving better schedule and cost outcomes, consistent with research linking good project governance to lower delay and cost overrun rates."[6]*

Additional guidance

Example evidence map

Level	Core question focus	Example evidence items
E1 — Exists	Is there a defined framework for planning, governing, and controlling material initiatives?	Approved delivery framework, lifecycle with gates, governance model and TORs, RACI, defined on-time/on-budget metric.[3][1][2]
E2 — Enabled	Are teams equipped with governance, reporting, and corrective mechanisms?	Active governance forums, standard tools/templates in use, regular status reports, escalation and corrective-action processes, training/capability support.[8][5][6]

Level	Core question focus	Example evidence items
E3 — Executed	Do initiatives consistently deliver within time and cost tolerances?	Portfolio KPI data for on-time/on-budget rate, trend analysis, PIRs showing governance impact, high proportion of material initiatives within agreed tolerances, continuous improvement of the framework.[11][7][2][6]

Adapt these examples into an assessment checklist and evidence log, mapping what is observed to each level and noting gaps (for example, “E2 enabled but not yet E3: data shows inconsistent on-time performance despite strong documented framework”).

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Domain 5. People Leadership & Culture

METRIC Voluntary turnover in critical roles

- E1 — Exists: Does a defined organisational framework exist for managing critical roles, capability, and succession?
- E2 — Enabled: Are leaders equipped to recruit, develop, and retain people in those roles?
- E3 — Executed: Is voluntary turnover in critical roles demonstrably controlled and within tolerance?

The assessment asks whether there is a clear framework, whether leaders are equipped to use it, and whether the turnover outcome is actually under control.

E1 — Exists

Does a defined organisational framework exist for managing critical roles, capability, and succession?

Evidence you would look for

- A workforce or talent-management framework defining "critical roles" and how they are identified, such as impact on strategy, risk if vacant, and scarcity of skills.[1][2]
- A succession-planning policy or guidelines describing processes, accountabilities, review cadence, and governance (for example, HR leads, business leaders own, Board oversight).[3][4][5][1]
- A current list or heatmap of critical roles across the organisation, signed off by the executive team.
- Criteria or a scorecard to classify roles as "critical", including impact, difficulty to replace, and specialised knowledge.[2][6]
- Role profiles or success profiles for critical roles describing required technical, leadership, and behavioural capabilities.[4][1][2]
- A succession-planning matrix or 9-box-type outputs showing, for each critical role, rated successors, readiness (ready now/1–2 years), and risk indicators.[5][7]
- HR or People & Culture governance papers describing how critical roles and succession plans are reviewed, such as an annual talent review or Board people committee.
- Risk-register entries noting loss of incumbents in critical roles as a strategic or operational risk and referencing the succession framework.[3]

Example notes you might record

- *"Framework is documented, communicated, and approved by the executive."*
- *"Critical roles are identified using agreed, repeatable criteria, not ad-hoc opinion."[6][1][2]*
- *"At least one organisation-wide cycle of identification and succession mapping has been completed (even if maturity is early)."*

- *"Clear ownership: HR defines the process; line leaders own role identification and succession inputs."[4][6]*

E2 — Enabled

Are leaders equipped to recruit, develop, and retain people in those roles?

Evidence you would look for

- Training programs or toolkits on succession planning, talent reviews, interviewing for critical roles, development planning, retention conversations, and inclusive talent decisions.[8][6][4]
- Attendance/coverage data showing a meaningful proportion of leaders have completed these programs.
- Standard templates for succession plans, individual development plans (IDPs), and talent-review packs.[5][4]
- Regular talent and succession-review meetings at business-unit and executive level, with schedules and minutes.
- KPIs or scorecards for people leaders including critical-role fill time, internal-promotion rates into critical roles, percentage of critical roles with ready successors, engagement/manager-effectiveness scores, and voluntary turnover in their teams.[7][9][10][5]
- Links between these KPIs and performance reviews or incentives.
- Targeted development for successors (stretch assignments, mentoring, rotations, formal learning) aligned to success profiles.[2][6][4]
- Data showing the percentage of critical roles filled internally versus externally and time-to-productivity for new incumbents.[8][5]
- Clear, up-to-date job descriptions and criteria for critical roles shared with recruitment partners.
- Use of structured, capability-based selection methods, such as behavioural interviewing against success profiles.[6][2]

Example notes you might record

- *"Leaders understand which roles are critical and why, and can access practical tools to manage them."*
- *"People leadership expectations for critical roles are formalised in role descriptions and performance objectives."[4][6]*
- *"There is evidence that leaders are using the framework (for example, completed talent grids, quality of IDPs, documented talent discussions), not just that it exists."*

E3 — Executed

Is voluntary turnover in critical roles demonstrably controlled and within tolerance?

Evidence you would look for

- A documented definition of voluntary turnover in line with HR standards (resignations initiated by employees, excluding redundancies, retirement, and similar exits).[11][12][13]
- Agreed tolerance or target ranges for voluntary turnover in critical roles (for example, "aim 5–10% for critical roles, with red threshold above X%"), ideally informed by internal and external

benchmarks.[9][10][14][5]

• Periodic (for example, monthly or quarterly) reporting of voluntary turnover specifically for critical roles, separate from general turnover.

• Segment analysis by role, business unit, tenure band, performance level, and manager to identify hotspots and patterns.[10][9][8]

• Multi-period trends (12–24 months) showing turnover in critical roles is stable or improving and remains within defined tolerance.

• Where rates exceeded tolerance in prior periods, documented actions and subsequent improvement.[9][10][5][8]

• Exit-interview or survey themes specifically for critical-role leavers (for example, pay, manager relationship, career path, workload) and correlation with other people metrics (engagement, compa-ratio, workload).[10][9]

• Manager-level heatmaps highlighting outliers and follow-up with leaders whose teams show high critical-role attrition.[8][9]

• Examples of targeted interventions where critical-role turnover spiked—adjusted pay bands, changed managers, redesigned roles, improved onboarding—and documented impact on turnover.[9][10][8]

• Evidence that succession plans were activated smoothly when critical-role incumbents left: time to fill, business continuity, and performance of successors.[5][4]

Example notes you might record

• *"Voluntary turnover in critical roles is not just measured but actively managed through interventions, with an explicit 'within tolerance' definition and thresholds."[10][5][9]*

• *"Data shows that critical-role turnover is lower than or at least no worse than general turnover and is consistent with target ranges and market context."[14][9][10]*

• *"Leadership discusses critical-role turnover and succession regularly (for example, in quarterly business reviews or people committee meetings), and decisions are recorded."*

Additional guidance

Putting it together — example assessment notes

• *"A documented enterprise-wide succession and critical-role framework has been approved by the Executive and applied in the last annual talent review (E1)."[1][3][4][5]*

• *"People leaders have been trained in succession planning and are held to KPIs on internal promotion and voluntary turnover; over 80% of critical roles now have at least one identified successor (E2)."[7][6][5][8]*

• *"Voluntary turnover in critical roles has averaged 7% over the past 12 months against a tolerance band of 5–10%, with clear root-cause analysis and targeted actions where hotspots arose (E3)."[14][9][10]*

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Domain 6. Learning & Improvement

METRIC Repeat incidents or repeat failures

- E1 — Exists: Does a defined organisational process exist for learning from incidents, failures, and reviews?
- E2 — Enabled: Are root cause analysis and improvement mechanisms consistently applied?
- E3 — Executed: Is there evidence that lessons learned have reduced repeat incidents or failures?

Each level can be supported with a mix of documented processes, consistent practice, and trend data showing fewer repeats over time.[1][2]

E1 — Exists

Does a defined organisational process exist for learning from incidents, failures, and reviews?

Evidence you would look for

- A policy or standard describing the "learning from incidents" process, scope, and responsibilities (for example, based on steps such as collect, evaluate, decide, act, review).[4][2]
- A documented procedure or workflow for incident handling, including investigation, root-cause analysis, corrective/preventive actions, and effectiveness review.[3][5]
- Defined triggers for formal reviews, such as incident-severity thresholds, repeat failures, and significant near misses.[2]
- Templates and tools: investigation/RCA templates, lessons-learned forms, action-tracking registers, and after-action-review checklists.[5][6]
- Governance references in the management system, risk framework, or ISO 27001/9001/Safety management documentation showing how learning from events is embedded.[1][2]
- Clear roles: named owners for incident management, investigation leads, learning coordinators, or "local safety leaders."[7][2]

Example notes you might record

- *"Documented 'Learning from Incidents' procedure v3.2 covers reporting, investigation, RCA, action management, effectiveness review."*
- *"Standard templates used for investigations and lessons learned workshops are available in QMS."*
- *"Policy A.5.27 references requirements to capture and act on lessons from information security incidents."[1]*

E2 — Enabled

Are root cause analysis and improvement mechanisms consistently applied?

Evidence you would look for

- Incident records consistently including description, classification, root-cause analysis, contributing factors, and recommended actions.[8][5]

- Use of a recognised RCA or analysis method (for example, 5 Whys, fishbone, fault tree, discussion groups) for all significant incidents, not just a few.[9][7][5]
- Documented criteria for when RCA is required and evidence that criteria are followed (for example, "all high/critical incidents have an RCA within 10 working days").[5][1]
- Action logs showing improvement actions are SMART (specific, measurable, achievable, realistic, timely).[2][5]
- Action logs showing improvement actions are assigned to owners with due dates and tracked through to completion in a unified system.
- Quality checks on RCAs, such as peer review, standard evaluation criteria, and checks that causes are evidence-based and logically linked.[6][10]
- Training material and attendance records for staff who conduct investigations and facilitate lessons learned.[7][2]

Example notes you might record

- *"Sample of 10 high-severity incidents: all have documented RCA using standard template; actions assigned and tracked in central register."*
- *"RCA quality checklist used; investigations reviewed by safety manager before closure."[6]*
- *">80% of significant incidents have a documented post-incident review within 30 days (per KPI dashboard)."[1]*

E3 — Executed

Is there evidence that lessons learned have reduced repeat incidents or failures?

Evidence you would look for

- The rate of repeat incidents with the same root cause over time (for example, per quarter), by system, asset, or service.[1]
- Trends in the number or rate of high-impact incidents, normalised per site, user, or system.[7][1]
- The percentage of improvement actions verified as effective, rather than simply "closed".[1]
- Studies or internal analyses showing reductions in near misses/adverse events after implementation of specific actions.[7]
- Post-implementation reviews explicitly asking "Did this action prevent recurrence?" and documenting evidence, such as no similar incidents for X months or control-performance data.[9][2]
- Cases where ineffective actions were revised or strengthened following an effectiveness check.[7][1]
- Before/after examples: a recurring failure mode, the investigation and system changes, followed by a documented drop in that failure type.[1][7]
- Behaviour-change evidence, such as fewer "repeat clickers" in phishing tests or improved reporting and safer practices following targeted coaching.[11][12]
- Evidence that lessons from one area are communicated and applied more widely through alerts, safety bulletins, toolbox talks, or learning sessions.[4][2]

- Records showing controls or standards were updated and adopted across sites as a result of specific incidents.[3][2]

Example notes you might record

- *"Dashboard shows 60% reduction in incidents with root cause 'incorrect configuration' over 12 months after implementing new change control and training."[7][1]*
- *"Effectiveness reviews carried out for 90% of high-risk incident actions; two ineffective measures were redesigned after follow-up incidents."[7]*
- *"Lessons learned bulletins issued quarterly; evidence of procedure updates and toolbox talks referencing those bulletins."[4][2]*

Additional guidance

Example evidence table

Level	What to look for	Typical documents/artefacts
E1 — Exists	Defined process for learning from incidents	Policies, procedures, LFI standard, investigation and lessons-learned templates, role descriptions, QMS references.[2][3]
E2 — Enabled	Consistent application of RCA and improvement mechanisms	Sample incident files with RCA and actions, RCA criteria, action logs, training records, RCA quality checks.[5][6][7]
E3 — Executed	Demonstrable reduction in repeats due to learning	Trend metrics on repeat incidents, effectiveness reviews, case studies, evidence of wider rollout of improvements.[1][7][4]

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Domain 7. Governance & Accountability

METRIC % of material issues closed on time (audit, reviews, incidents)

- E1 — Exists: Do defined governance roles, accountabilities, and issue management processes exist?
- E2 — Enabled: Are issue owners supported with authority, tracking, and escalation mechanisms?
- E3 — Executed: Are material issues reliably closed on time, with consequences for non-closure?

Evidence and notes for the Governance & Accountability metric (% of material issues closed on time for audits, reviews, and incidents) support a structured maturity assessment across E1 (Exists), E2 (Enabled), and E3 (Executed).

E1 — Exists

Do defined governance roles, accountabilities, and issue management processes exist?

Evidence you would look for

- Documented frameworks, such as the three lines of defense model, that evidence defined governance roles, accountabilities, and issue-management processes.
- Role mappings and policies for issue identification, escalation, and remediation.
- Charters for risk committees.
- RACI matrices for audits, reviews, and incidents.
- Procedures outlining timelines for material issues, such as high-rated audit findings.
- Governance manuals, process flowcharts, and Board-approved standards confirming existence.[1][2][3][4]

Example notes you might record

- No worked example notes provided in source material.

E2 — Enabled

Are issue owners supported with authority, tracking, and escalation mechanisms?

Evidence you would look for

- Authority assignments, such as decision rights and BEAR-like regimes, supporting issue owners.
- Tracking dashboards for open issues with ageing metrics.
- Escalation workflows, such as automated notifications or tiered support.
- Incident-tracking systems.
- Executive scorecards linking to remediation status.
- Training on accountability cascades.
- Resource allocation for compliance functions.
- Remuneration incentives tied to timely closure to ensure enablement.[5][6][7][1]

Example notes you might record

- No worked example notes provided in source material.

E3 — Executed

Are material issues reliably closed on time, with consequences for non-closure?

Evidence you would look for

- KPIs such as “% deviations/non-conformances closed on time”, “audit findings closure rate”, and low numbers of open/aged findings demonstrating reliable on-time closure of material issues.
- Consequences for delays, such as inconsistent but applied non-remuneration actions.
- Reports on remediation timelines.
- Root-cause analyses.
- Back-tested outcomes showing >80-90% closure rates for material audits, reviews, and incidents.
- Consistent enforcement via clawbacks/malus.
- Board oversight of ageing metrics to drive accountability.[4][7][1][5]

Example notes you might record

- No worked example notes provided in source material.

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About this guidebook

This guidebook consolidates seven domain-specific evidence-notes documents into a single assessor reference. The E1/E2/E3 gateway levels are consistent across all domains: Exists / Enabled / Executed.