

Strategic Risk update

1.0 PURPOSE OF PAPER

For discussion

- 1.1 The purpose of this paper is to present to the Board the risks assigned to it, within the current strategic risk register, and to provide an update on the agreed actions.

2.0 EXECUTIVE SUMMARY

- 2.1 Following the Board development day on 9th November five risks have been assigned to the Board.
- 2.2 Due to the progress and completion of actions for risk 4.1 – College breaches GDPR and/or data legislation, the score for this risk has been reassessed to take the score from 8 to 6.
- 2.3 All five risks are currently within or below the agreed risk appetite agreed by the Board.
- 2.4 Appendix 1 details each risk and the progress on the agreed actions which are assigned to the Board..
- 2.5 Appendix 2 contains the full risk register for information.

3.0 RECOMMENDATION

3.1 It is recommended the Board:

- 3.1.1 note the progress on the agreed actions contained in Appendix 1.
- 3.1.2 note the revised risk score for risk 4.1.

4.0 BACKGROUND

- 4.1 Identifying and managing risk is a corner stone of effective management and good governance. The strategic risk register was developed through a period of engagement with Board Members and with the Senior Leadership Team. The Board development day on 9th November agreed the revised format of the risk register and the Committee responsible for monitoring progress on the risks.

4.2 The Board agreed risk appetites for each of the identified risks. The table below provides details the parameters for each risk appetite:

Risk Appetite	Description	Risk Appetite Score
Averse	Avoidance of risk and uncertainty in achievement of key deliverables or initiatives is key objective. Activities undertaken will only be those considered to carry virtually no inherent risk.	Lower than 7
Minimal	Preference for very safe business delivery options that have a low degree of inherent risk with the potential for benefit/return not a key driver. Activities will only be undertaken where they have a low degree of inherent risk.	between 7 -9
Cautious	Preference for safe options that have low degree of inherent risk and only limited potential for benefit. Willing to tolerate a degree of risk in selecting which activities to undertake to achieve key deliverables or initiatives, where we have identified scope to achieve significant benefit and/or realise an opportunity. Activities undertaken may carry a high degree of inherent risk that is deemed controllable to a large extent.	between 10 - 14
Open	Willing to consider all options and choose one most likely to result in successful delivery while providing an acceptable level of benefit. Seek to achieve a balance between a high likelihood of successful delivery and a high degree of benefit and value for money. Activities themselves may potentially carry, or contribute to, a high degree of residual risk.	between 15- 19
Hungry	Eager to be innovative and to choose options based on maximizing opportunities and potential higher benefit even if those activities carry a very high residual risk.	20 and above

5.0 BOARD RISKS UPDATE

5.1 Following the Board Development day on 9th November the following were agreed for the Board to monitor.

no	Risk	Appetite	Score
3.1	College does not meet its sustainability targets	Open	6
4.1	College breaches GDPR and/or data legislation	Averse	6
4.2	College does not meet its PREVENT and Safeguarding duties	Averse	4
4.3	College does not meet its equality & diversity duties	Averse	4
4.4	College does not adhere to Health & Safety legislation	Averse	6

5.2 Training has been provided to all curriculum and DEBI department staff by the Data Protection Office and articles have been included in the Newsletters reminding staff of GDPR legislation and requirements. Due to these actions the impact score has been reassessed from 4 to 3, resulting in a revised overall score decrease of 8 to 6. This brings the score with the risk appetite approved by the Board.

5.3 All risks assigned to the Board are currently within or below the risk appetite agreed by the Board.

5.4 Progress has been made on the actions agreed by the Board and these are detailed in Appendix 1.

- 5.5 The Senior Leadership Team has fully reviewed the risks and progress of actions on 19 December, 23 January, 20 February and 19th March. No new risks have been added to the strategic risk register.
- 5.6 Two risks assigned to Finance and Resources Committee have been reviewed and the risk scores amended. These changes were discussed at the Finance and Resources meeting on 14 March. The score for Risk 1.2 – Delivery of College outcomes unaffordable has increased from 12 to 16 and risk 3.4 – Disruption or failure of IT/Digital services has decreased from 12 to 9.
- 5.7 The full risk register and progress of agreed actions completed by the Board and the Finance and Resources Committee has been reviewed by the Audit and Risk Committee on 8 February. The full risk register is contained in Appendix 2 for information.

6.0 IMPLICATIONS AND CONSIDERATIONS

6.1 Financial Implications

There are no direct financial implications from the contents of this report.

6.2 Learner Implications

There are no direct learner implications from the contents of this report.

6.3 Staff Implications

There are no direct staff implications from the contents of this report.

6.4 Equality and Diversity Implications/Equality Impact Assessment

There are no direct equality implications from the contents of this report.

6.5 Sustainability/Environmental Implications

There are no direct sustainability implications from the contents of this report.

7.0 RISK COMMENTARY

- 7.1 The management of risks is an essential part of good governance for an organisation. The monitoring of risk is a key element of this management. This report provides the Board with assurance that the monitoring of risks is undertaken and agreed actions to further mitigate risks are being progressed.

8.0 CONCLUSION

- 8.1 The risks register has been reviewed and progress has been made on the actions approved by the Board.

Kirsty Robb, Vice Principal Finance & Corporate Services

Previous Board or College Committee Approvals: Board 14 December, Finance & Resource Committee 14 March, Audit and Risk Committee 8 Feb, CQSE 1 Feb

Alternative formats

If you need access to a college document in an alternative format, for example, accessible PDF, large print, easy read, audio recording and braille:

- Complete an accessibility request form by [clicking on this link](#).
- Call [01896 66 26 00](tel:01896662600) and ask to speak with the Marketing Team.

We will consider your request and get back to you within 5 working days.

Translate documents from this website into other languages

You can download any of our published documents and translate them into many languages. Please click this link to use [Google Translate](#)

For publication <input checked="" type="checkbox"/>	Not for publication <input type="checkbox"/> If not, why not?
---	--

Dundee College Risk Register - 03 Oct 23/03/2024															
no	Risk	Causes/ Risk factors	Consequences/ Potential Effect	Risk Owner	Committee	Appetite	Pre Mitigation Score			Existing Mitigation Actions	Post Mitigation Scores			Actions	Progress as at 19/3/24
							Likelihood	Impact	Score		Likelihood	Impact	Score		
Financial Stability															
Objectives/Strategies															
3.1	College does not meet its sustainability targets	Cost and availability of technology Culture of organisation Changes to legislation Lack of funding	Environmental impacts Adverse risk to reputation of College Failure to meet needs of customer base through carbon training/carbon literacy Financial impacts	Dir Estate & Facilities/ VP Fin & Corp Ser	Board	Open	3	4	12	Sustainability Strategy Regular progress reporting Sustainability Committee Carbon emissions data monitoring Membership of the Central and South Scotland College partnership with EAUC	2	3	6	TREAT -Develop further carbon reduction projects through sustainability workstreams (ongoing) - Identify and access available and future funding (ongoing) - Complete scoping works and funding application for decarbonisation of Campus through NDEEF (by 31/12/23) - Establish Sustainability Champions	- Product Support Unit Funding support approved by Scot Gov . -Works progressing with Mott Macdonald and other partners to scope out project at SBC not impacted by Campus power upgrade requirements.
Statutory Duties															
4.1	College breaches GDPR and/or data legislation	Non adherence or understand of GDPR legislation Lack of security for sensitive data Cyber breach	Adverse impact on reputation of College Penalties from Information Commissioner Office	VP Fin & Corp Services	Board	Averse	4	5	20	Dedicated DPO Regular reporting & Monitoring Investigations undertaken of any breaches Member of HEFETSTIS Mandatory staff training	2	3	6	TREAT -Additional training for staff on GDPR (ongoing) -Additional training/testing on cybersecurity (by 31/3/24)	- Training provided by DPO to all Curriculum and DEBI department staff - GDPR article contained in newsletter, with additional ones scheduled - Cyber training completed by 112 staff members , additional Phishing campaign scheduled
4.2	College does not meet its PREVENT and Safeguarding duties	Non adherence or understanding of Prevent legislation Lack of staff awareness of their roles/responsibilities Possible terrorist incident Changes to legislation	Adverse impact on reputation of College Physical harm to staff and/or students Possible litigation Damage to buildings and/or equipment Harm to students/staff	VP Fin & Corp Services/ VP Student Experience	Board	Averse	3	5	15	Mandatory staff training SPOC identified Safeguarding officers identified Active members of National groups Partnership working with Lothian and Borders Colleges, Council and Blue light services Quarterly reporting to Health & Safety Committee Annual report to the Board Business Continuity Plan	2	2	4	TREAT -Additional PREVENT training for staff (by 01/04/24) -Review content of quarterly and annual reports (by 31/12/"4 -Safeguarding Policy to be updated Nov 23 - T&C's for Commercial hires to be reviewed for PREVENT requirements (by 29/02/24)	- Some staff have undertaken Safeguarding training with the Public Protection Committee at varies levels to meet the needs of the college. - Quarterly and annual reports fully reviewed and amended - Action complete
4.3	College does not meet its equality & diversity duties	Poor understanding of duties Culture of organisation Changes to legislation Fail to undertake statutory reporting requirements	Loss of students poor staff and student retention litigation Impact on Colleges reputation harm to staff/students Staff disciplinary	AP Curriculum & Quality/Dir People Services	Board	Averse	3	3	9	Mandatory staff training Annual equality reports to Equality & Inclusion Committee & CQC Bi-annual mainstreaming Equality reports to Board Active Student Association and student representation Student Experience Committee Equality outcomes set every 4 years by Board Ashco events and training provided to staff & students Equality impact assessment part of decision making process Equality diversity inclusion Policy Dedicated Equality Officer Safeguarding Officers identified	2	2	4	TREAT -Additional Training for all staff on Equality & Diversity (by 31/7/2024) -Mapping exercise of current College Outcomes to the national outcomes (by 31/12/24)	- Good progress with Trauma informed practice. 2 Leads identified and undertaking level 5 training to support cultural change. - New Equality & Diversity Officer has made good progress around action planning and outcomes.

no	Risk	Causes/ Risk factors	Consequences/ Potential Effect	Risk Owner	Committee	Appetite	Likelihood	Impact	Score	Existing Mitigation Actions	Likelihood	Impact	Score	Actions	Progress as at 19/3/24
4.4	College does not adhere to Health & Safety legislation	Poor understanding of duties Culture of organisation Changes to building regulations defects in estate	Injury to staff and/or students Impact on Colleges reputation Litigation damage to building and/or equipment Restricted access or closure of buildings	Dir Estate & Facilities/ VP Fin & Corp Services	Board	Averse	3	5	15	Dedicated H&S officer Mandatory staff training H&S assessments in place, Maintain reporting and monitoring structures to assess trends Effective risk assessment practices adhered to Heath surveillance programs in place Quarterly monitoring to H&S Committee Annual report to Board Active Partnership working Business Continuity Plan	2	3	6	TREAT -Review of quarterly and annual reports (by 31/12/24) - Increased training on risk assessment and first aid (by 31/7/24)	- Quarterly and Annual reports fully reviewed and amended - Action Complete - Training IOSH working safely being planned for all staff

no	Risk	Causes/ Risk factors	Consequences/ Potential Effect	Risk Owner	Committee	Appetite	Pre Mitigation Score			Existing Mitigation Actions	Post Mitigation Scores			Actions	Progress as at 19/3/24
							Likelihood	Impact	Score		Likelihood	Impact	Score		
	Financial Stability														
1.1	Commercial income targets not fully reached.	Availability of external grants lack of Employer demand lack of Student demand External training providers competing for same market	income targets not achieved resulting in budget deficit Costs incurred not fully covered by income resulting in losses Under utilization of permanent staff and resources Not meeting needs of community & employers Possible impact on credit targets Long term financial targets not achieved.	Dir Fin & Proc/ VP Finance & Corp Services	F&R	Open	4	4	16	Income targets set and monitored on regular basis Membership of National, local and sectors to identify potential funding sources Regular market research and communication with employers Regular Partnership working	3	3	9	TREAT - Increased monitoring and reporting of Non Core funding to SLT and F&R Committee (by 31/12/23) - Identify new funding sources (ongoing) - Embed commercial income into curriculum areas supported by DEBI (by 31/7/24)	- Report developed and presented to F&R on 30/11/23 and approved - Action Complete - Grantfinder implemented and live - Action Complete - Non Core SFC income has increased by 1% to 16% - Work progressing for administration of commercial income into curriculum.
1.2	Delivery of College outcomes unaffordable	Strategic political policies Changes to SFC funding methodology & allocations Identified savings not achieved Loss of HWU rent/SLA income Unaffordable national pay awards Under utilization of estate	Possible reductions in funding and credits reduction could result in deficit position Unable to deliver to the level required by students and employers Long term Financial targets not achieved Adverse impact on reputation of College Possible staff losses	Dir Fin & Proc/ VP Finance & Corp Services	F&R	Cautious	5	4	20	Budgetary monitoring process in place Membership of CDN networks Regular contact with SFC and outcome agreement manager Working with Colleges and CES to lobby Regular reporting to SLT and F&R Committee Partnership working with HWU	4	4	16	TREAT - Develop 3 year budget setting - by 31/7/2024) - Increased monitoring and reporting of savings target (by 31/7/24) - Undertake increased liaison with HWU for future estate use (by 31/3/24) - Savings monitor report to be developed for SLT (by 31/7/24) - Agree KPI's for Board and F&R reports (by 31/12/23)	- Budget setting timetable presented to F&R Committee on 14 Mar - 23/24 savings on track with forecast inline with budget savings - Discussion ongoing with HWU - SLT developing savings tracker from Workshop outputs - KPI's presented to F&R on 30/11/23- Action complete
Student Experience															
2.1	Student application numbers low	Curriculum doesn't meet student demand Poor or inadequate teaching and student social spaces Course offer not matching employers demand Changes to course requirements Reduced demand for traditional trades/careers New technology resulting in new trades/careers lack of student transport Changes to SFC Guidance	Reduced student applications adverse impact of reputation Lower success rates Loss of students to other providers Failure to meet ROA targets Financial clawback of SFC grant Failure to meet needs of the economy Reduced commercial income due to relevance of commercial courses Not meeting Community and employers needs	VP Student Experience	CQSE	Cautious	3	4	12	Working with schools , DYW & universities to establish learner pathways that meet students, employers and regional need Use DATA supplied by SDS on Senior Phase pupils career routes to influence the curricular offer Strategies to support students to become successful learners imbedded in all areas Employers forums in place Marketing action plan in place Work with SBC for transport planning Monitoring labour market information to inform curriculum planning Early withdrawals monitored regularly	2	3	6	TREAT -Further development of Employers forums across all curricular areas (ongoing). -Further development of curriculum planning process -Develop further use of DATA -Implementation of Pro-monitor for student support needs -Implementation of aligned student support services structure. -Increase ownership of DATA across the College	Current applications are higher than this time last year with the exception of HE FT however, some progression students have still to roll over and HOS are working with marketing to promote any areas of concern.

no	Risk	Causes/ Risk factors	Consequences/ Potential Effect	Risk Owner	Committee	Appetite	Likelihood	Impact	Score	Existing Mitigation Actions	Likelihood	Impact	Score	Actions	Progress as at 19/3/24
2.2	Students are not adequately supported to enable them to complete their studies	Lack of support staff Poor access and signposting to support staff Increase demand for support services	Poor student experience Lower success rates Increased early withdrawals Increase student behaviour issues Increased absenteeism	Dir Student Support Services	CQSE	Cautious	4	4	16	Transition support of mental health issues is being funded 23/24 Induction activities Quite induction Partnership working with Student Association Partnership with 3rd sector Robust tracking and monitoring of issue including attendance	3	3	9	TREAT -Implementation of Pro-monitor for student support needs (ongoing) -Implementation of aligned student support services structure (ongoing)	-Students receiving counselling support through mental health partnerships. -Support alignment project underway with action plan in development. -Exploring additional partnership with NHS Borders and Health in Mind to enhance wellbeing support offer. -Met with MIS to explore the development of a Student Support dashboard
Objectives/Strategies															
3.1	College does not meet its sustainability targets	Cost and availability of technology Culture of organisation Changes to legislation Lack of funding	Environmental impacts Adverse risk to reputation of College Failure to meet needs of customer base through carbon training/carbon literacy Financial impacts	Dir Estate & Facilities/ VP Fin & Corp Ser	Board	Open	3	4	12	Sustainability Strategy Regular progress reporting Sustainability Committee Carbon emissions data monitoring Membership of the Central and South Scotland College partnership with EAUC	2	3	6	TREAT -Develop further carbon reduction projects through sustainability workstreams (ongoing) - Identify and access available and future funding (ongoing) - Complete scoping works and funding application for decarbonisation of Campus through NDEEF (by 31/12/23) - Establish Sustainability Champions	- Product Support Unit Funding support approved by Scot Gov . -Works progressing with Mott Macdonald and other partners to scope out project at SBC not impacted by Campus power upgrade requirements.

no	Risk	Causes/ Risk factors	Consequences/ Potential Effect	Risk Owner	Committee	Appetite	Likelihood	Impact	Score	Existing Mitigation Actions	Likelihood	Impact	Score	Actions	Progress as at 19/3/24
3.2	College unable to recruit, retain and maintain effective and skilled staff	Failed recruitments Low staff moral External competition Age profile of staff Pay awards Lack of succession planning	High staff turnover Inability to provide services due to staff vacancies Strike action from staff High sickness levels Increased staff performance issues Poor student experience	Dir People Services	F&R	Cautious	3	4	12	Workforce Strategy Policies and Procedures, regularly reviewed Regular monitoring and reporting to F&R Committee Regular staff survey via Great Places To Work Staff Performance and Reviews carried out regularly	2	3	6	TREAT -Increased publicity around success (ongoing) -Improve profile of Great Place To Work - more staff involvement (end April 2024) -Consider succession planning (September 2024)	- we are using the 40th birthday celebrations to highlight success - GPTW survey launched and due to close mid to late March, staff are being encouraged to complete and reminders are sent regularly - The Director of People Services is attending a sharing good practice event on Succession/Workforce planning in May 2024
3.3	Closure/disruption/denial of access to site facilities	Power failure Fire Pandemic Power rationing/disruption Terrorist event Building defects	Business Interruption Impact on student outcomes Impact on ability to meet future obligations Potential loss of essential data Building defects cause building to be unsafe for occupation	Dir Estate & Facilities/ VP Fin & Corp Services	F&R	Minimal	3	5	15	Business Continuity Plan in place Active membership and participant of the Contest group Under regular statutory inspections Planned preventative maintenance Program Statutory training mandatory Fire test and evaluation tests undertaken Risk assessments undertaken Regular internal inspections Required Permits in place	2	3	6	TREAT -Improve awareness of Business Continuity Plan with staff group (31/03/24) - RAAC survey work being undertaken (by 30/11/23)	- Very High Risk remedial works completed, planning underway to complete remaining works within the Tower over Easter break. Once complete overall risk level will reduce to tolerable.
3.4	Disruption or failure of IT/Digital services or infrastructure	Cyber attack Power Loss system failure Data breach Business interruption	Business Interruption Potential loss of essential data Impact on student outcomes Impact on ability to meet future obligations Adverse financial impact	Dir IT & Digital/ VP Fin & Corp Services	F&R	Minimal	3	5	15	Various technical controls in place for end users and infrastructure Cyber threat early warning notifications Server/Network Monitoring/Alerts Backup as a Service Disaster Recovery as a Service	3	3	9	TREAT -Network redesign to remove SBC as single point of failure (by 29/2/24) -Network infrastructure refresh (by 31/7/25) -End User Awareness Training (by 31/3/24)	- Design and costs to be provided during January for DataVita - Stage 1 of complete (current system health check) Scope of tender documents being finalised for inclusion in bid to capital budget setting - Cyber training completed 23/1/24, additional phishing campaign being scheduled
Statutory Duties															
4.1	College breaches GDPR and/or data legislation	Non adherence or understand of GDPR legislation Lack of security for sensitive data Cyber breach	Adverse impact on reputation of College Penalties from Information Commissioner Office	VP Fin & Corp Services	Board	Averse	4	5	20	Dedicated DPO Regular reporting & Monitoring Investigations undertaken of any breaches Member of HEFETSTIS Mandatory staff training	2	3	6	TREAT -Additional training for staff on GDPR (ongoing) -Additional training/testing on cybersecurity (by 31/3/24)	- Training provided by DPO to all Curriculum and DEBI department staff - GDPR article contained in newsletter, with additional ones scheduled - Cyber training completed by 112 staff members , additional Phishing campaign scheduled

no	Risk	Causes/ Risk factors	Consequences/ Potential Effect	Risk Owner	Committee	Appetite	Likelihood	Impact	Score	Existing Mitigation Actions	Likelihood	Impact	Score	Actions	Progress as at 19/3/24
4.2	College does not meet its PREVENT and Safeguarding duties	Non adherence or understanding of Prevent legislation Lack of staff awareness of their roles/responsibilities Possible terrorist incident Changes to legislation	Adverse impact on reputation of College Physical harm to staff and/or students Possible litigation Damage to buildings and/or equipment Harm to students/staff	VP Fin & Corp Services/ VP Student Experience	Board	Averse	3	5	15	Mandatory staff training SPOC identified Safeguarding officers identified Active members of National groups Partnership working with Lothian and Borders Colleges, Council and Blue light services Quarterly reporting to Health & Safety Committee Annual report to the Board Business Continuity Plan	2	2	4	TREAT -Additional PREVENT training for staff (by 01/04/24) -Review content of quarterly and annual reports (by 31/12/"4 -Safeguarding Policy to be updated Nov 23 - T&C's for Commercial hires to be reviewed for PREVENT requirements (by 29/02/24)	- Some staff have undertaken Safeguarding training with the Public Protection Committee at varies levels to meet the needs of the college. - Quarterly and annual reports fully reviewed and amended - Action complete
4.3	College does not meet its equality & diversity duties	Poor understanding of duties Culture of organisation Changes to legislation Fail to undertake statutory reporting requirements	Loss of students poor staff and student retention litigation Impact on Colleges reputation harm to staff/students Staff disciplinary	AP Curriculum & Quality/Dir People Services	Board	Averse	3	3	9	Mandatory staff training Annual equality reports to Equality & Inclusion Committee & CQC Bi-annual mainstreaming Equality reports to Board Active Student Association and student representation Student Experience Committee Equality outcomes set every 4 years by Board Ashco events and training provided to staff & students Equality impact assessment part of decision making process Equality diversity inclusion Policy Dedicated Equality Officer Safeguarding Officers identified	2	2	4	TREAT -Additional Training for all staff on Equality & Diversity (by 31/7/2024) -Mapping exercise of current College Outcomes to the national outcomes (by 31/12/24)	- Good progress with Trauma informed practice. 2 Leads identified and undertaking level 5 training to support cultural change. - New Equality & Diversity Officer has made good progress around action planning and outcomes.
4.4	College does not adhere to Health & Safety legislation	Poor understanding of duties Culture of organisation Changes to building regulations defects in estate	Injury to staff and/or students Impact on Colleges reputation Litigation damage to building and/or equipment Restricted access or closure of buildings	Dir Estate & Facilities/ VP Fin & Corp Services	Board	Averse	3	5	15	Dedicated H&S officer Mandatory staff training H&S assessments in place, Maintain reporting and monitoring structures to assess trends Effective risk assessment practices adhered to Heath surveillance programs in place Quarterly monitoring to H&S Committee Annual report to Board Active Partnership working Business Continuity Plan	2	3	6	TREAT -Review of quarterly and annual reports (by 31/12/24) - Increased training on risk assessment and first aid (by 31/7/24)	- Quarterly and Annual reports fully reviewed and amended - Action Complete - Training IOSH working safely being planned for all staff