Risk Number & Name	Causes	Impacts	Residual Risk (Pre action)	Action Points	Residual Risk (Post action)	Owners
Shetland UHI / 1 **College does not achieve allocated HE student number targets.**	Failure to recruit sufficient students due to various factors such as: over ambitious PPF target, poor marketing, curriculum gaps, poor NSS results etc.	Reduction of college income from UHI, regional student number target at risk resulting in possible clawback to SFC from UHI in year or reduction in future years grant	12	• Implement Celcat to get a better handle on staff capacity and utilise resources better. • Consider increased partnership work to allow for more varied course offer and to run courses where viability in Shetland does not allow course to run. Engage with UHI curriculum review. Widening our reach to attract students from outside of Shetland. • Review HE numbers and plans for coming semester regularly. Encourage ownership of these risks and solutions by course teams. Review viability and attractiveness of courses. Amend where appropriate. Consider PT HE courses to start semester 2 or 3. • Look at progression pathways to address any gaps. Increase industry talks etc. • Review CDN research for marketing strategy. Ensure website is populated. Open days, good news stories, showcasing work. Raising awareness of new brand.		L&T sub committee, SMT, LB & KB Nov 22
Shetland UHI / 2 **College does not achieve allocated FE Credit targets.**	Failure to recruit sufficient students due to various factors such as: over ambitious PPF target, poor marketing, curriculum gaps, poor NSS results etc.	Reduction of college income from UHI, regional student number target at risk resulting in possible clawback to SFC from UHI in year or reduction in future years grant	16	• Increase offer of PT FE courses for semester 2 and 3 start. • Relook at courses to maximise credit numbers. Review numbers and plans for coming semester regularly. Encourage ownership and buy in from staff teams. Review viability and attractiveness of courses and amend where appropriate. Review FAs. • Cross departmental courses to develop additional or more attractive offer. Partnership courses to increase offer.	12	L&T sub committee, SMT, LB & KB Nov 22

Risk	Description	Impact	Score	Mitigation	Target	Owner
			(red)	Engage with UHI curriculum review. Cross departmental delivery. Review application processes • Build on existing industry relationships and create new links to offer increased work-based learning opportunities. Build on school partnerships, potentially considering engaging with younger children. • Review CDN research for marketing strategy. Ensure website is populated. Open days, good news stories, showcasing work. Raising awareness of new brand.		

Shetland UHI / 3
 	
The institution has a poor reputation.
	Significant or sustained adverse publicity, governance/ management failure, negative comments on social media, poor academic results, poor performance in league tables, significant withdrawal rates. Student complaints.	Inability to recruit students or attract and retain high calibre staff, inability to attract funding and/or develop strategic partnerships.
		Poor student experience
			12	• Manage expectations and perceptions:
				  o identification of elements of operational environment and strategy that could affect SUHI reputation.
				  o Assess reputation and areas for improvement through student feedback
				• Improve weak internal co-ordination:
				  o improving service by breaking down silos/improvement in infrastructure / governance / processes and culture to be prepared to meet opportunities and meet expectations
				• Role of Employees:
				  o use of communications guide and promotion and active use of values
				• Creating a strong positive reputation among stakeholders:
				  o engaging with stakeholders through communications channels to create a positive reputation
				• Complaints handling process:
				  o Dealing with student complaints in a timely manner and with the right process;
				  o Training on first point of contact complaints for all staff;
					9	BoM, SMT, Principal, GM, Comms
						
						Aug 2022

				o Handling a complaint properly will enhance the reputation as opposed to harming it.		

Shetland UHI / 4
 	
Disruption to services/projects and/or partnership working resulting from loss of a key staff member.
	Retirement, resignation or death in service of key staff member(s). Inadequate succession planning. Over-reliance on individuals. Associated knock on impacts resulting from transition arrangements with staff acting up and possible failure of backfill solutions.	Projects delayed due to loss of continuity, corporate knowledge gaps and disruption/loss of established relationships and contacts.	9	• Identify Key Staff Members/Isolated Functions:
				   o Identification of key staff members or key functions as priority using criteria such as knowledge, experience, specialist skills
				   o Assess critical areas where knowledge and experience is held by one person or assigned to one role
				   o Identify other individuals or roles that could share this knowledge and develop this experience using the key staff member as mentor.
				• Improve Staff Data to reduce the gap between the information we have about our employees and the information we need:
				   o Improve the use of Breathe HR as a central system;
				   o Documentation of key processes and file management within activity areas;
				   o Identify employees we may be at risk of losing through retirement and initiate succession planning.
				• Review Termination Notice Periods:
				   o Then communicate with the employee and consult on extension to notice periods
				• Invest in Staff Development:
				   o Develop talent internally; Line managers to identify employees with development aspirations aligned to the organisation;
				   o Consider cross-organisational moves as well as promotion and then look at the recruitment of new talent.
					6	HR&R, SMT, JF
						
						Nov 2022

Shetland UHI / 5	Lack of awareness of relevant laws and penalties.	GDPR will provide new rights for individuals and impose additional	15	• SharePoint site containing Health & Safety and GDPR policies and procedures is available to staff. GDPR Group and Health & Safety Committee have started to review all	10	Health, Safety & Wellbeing

Non-compliance with relevant statutory regulations	Management failures: eg new General Data Protection Regulation from 25th May 2018, Bribery Act, Health and Safety Regulations etc.
	
	Governance or management failure
		obligations on data controllers and processors. GDPR will also introduce an increased penalty framework for non-compliance/data breaches and includes new requirements for authorities to ensure that they maintain evidence to demonstrate compliance with the Law. Reputational damage, inability to attract funding; inability to develop strategic partnerships.
		
		Damage to individuals/Data Subjects
			<td style="background:red"></td>	policies and procedures. Amended documents to be read by all staff. This should be repeated annually. Refresher courses to be offered regularly.
				• Annual audit of data register must take place to ensure control of all personal data and in particular protected data. Data Breaches must be correctly reported and documented on the Data Breach Register. All incidences of consent must be recorded on the Consent Register.
				• Compliance and Projects Coordinator is a member of IOSH and is regularly updated with changes to H&S law and Insurance changes. Relevant changes are currently shared with staff. The Compliance and Projects Coordinator attends UHI H&S Practitioners Group Meetings. UHI DPO also circulates changed on GDPR law as they occur.
				• **Information available to staff on**
				   o **Health and Safety and GDPR policies and procedures;**
				   o **GDPR and Health, Safety and Welfare working groups review policies and procedures;**
				   o **Clear guidance through line management on processes for data security and GDPR compliance.**
				• **Document Control**
				   o **All forms that collect personal data, other than for research, to be approved by Data Protection Officer to ensure consistency and accuracy of Privacy Notices;**
				   o **Any changes to forms must be approved prior to use;**
				   o **Forms to be version-controlled and stored centrally for ease of finding and assurance that only current forms are in use.**
				• **Data Register and annual audit**
					<td style="background:orange"></td>	Group; GDPR Working Group, SMT BoM
						
						March 2023

			■		• o **Annual audit of Data Asset Register to ensure control of all personal data;** o **Data breaches should correctly and promptly reported and documented on the Data Breach Register;** o **All incidents of consent collection to be recorded on Consent Register;** o **Privacy notices to be reviewed annually.** • **Keeping up to date with new legislation and requirements**: o **Relevant Health and Safety changes are shared with staff;** o **Head of Facilities attends UHI Data Protection Practitioner meetings;** o **Head of Facilities regularly liaises with UHI Shetland Insurers.**		
Shetland UHI / 6 **Governance Failure**	Governing body does not have an appropriate balance of skills and experience. Role of a governor/director is onerous and it is difficult to attract a broad range of high calibre individuals to serve for non-remunerated roles. Individuals do not understand their roles. College does not adhere to Code of Good Governance	Recent advertisements for new members have attracted few applications • **Board is unable to discharge its duties properly;** • **Recruitment and retention of governor/director is challenging;** • **Auditors find poor decision-making at Board level;** • **Auditors challenge the college on its lack of adherence**	20	• College should run a scoring system for the recruitment of board members to ensure it has strong links with industry and has necessary key skills. • Regular review of board members skills and industry links by search and nominations committee • Regular review of Terms of Reference of sub-committees by Board • Board induction • Board training • Implementation of Code of Good Governance • **Board members induction and Board members complete core training** • **Annual Development Reviews completed** • **Training and upskilling of Board Secretary** • **Regular meetings between Principal, Secretary and Chairs** • **Completing Assignation to Regional Strategic Body**	9	Search & Nominations; Chair & Sec **March 2023**

		to the Code of **Good Governance**		16	• **Appointment of Auditors and undertaking audits**
					• **Review of audits by Audit Committee**
					• **Register of Interests renewed each year**
					• **Regular review of:**
					  o **Board members' skills and industry links by Search and Nominations Committee**
					  o **Terms of Reference of Committees by Board of Management**
					  o **Strategic Plan**		

Shetland UHI / 7
 	
Financial failure/operating loss. Inability to achieve a balanced budget.
	Efficiencies savings are not realised. Increased employment costs, whilst not achieving income forecasts.	Increased pay costs (national bargaining), pensions and NI contributions. Efficiency savings are not achieved quickly enough to counteract reductions in income.		16	• Budget Setting
					  o timetable set to collate income projections and related expenditures budgets from staff.
					  o Aim to maximise existing resources and identify efficiencies at earliest opportunity.
					• Budget Control
					  o Monitoring processes for both income and expenditure.
					  o Unexpected over/under income/expenditure identified early.
					  o Regular reporting to F&GP and SMG.
					• Employment costs
					  o Changes as a consequence of national agreements.
					  o Regular review of employment cost budget.
					  o Continued lobbying of SFC/SGOV to mitigate cost of changes through funding support.
					  o Plan for scenarios into the future where support reduces.
					• Pension Fund:
					  o Increased costs through employer contributions.
					  o Continue to monitor valuations and keep up to date on any options that may be available.
						12	HOSs, SM, IJ, Principal, F&GP, Capital Spend Working Group, Budget holders
							
							Sept 2022

				o Impact of increased costs likely to affect service budgets and should be considered when setting/monitoring budgets. • New Funding Streams: o Seek new funding streams, to maximise efficiency of existing activities and for new activities to grow business.		
Shetland UHI / 8 **College estate not fit for purpose.**	Lack of investment in capital maintenance/ new capital project expenditure. Rapid growth of student population without investment in new expanded facilities.	Poor performance in NSS, increased number of complaints received, unable to meet new growth targets.	12	• Engagement with Islands Deal and in-depth planning around best use of the fund available across the campuses • Capital Planning Group has been set up to monitor existing capital spend and plan for future capital investment. • Development of new and updated list of needs/wants from staff & students: creation of this list will allow SUHI to provide courses and infrastructure that meet industry standards and needs. List will be agile so we can take advantage of funding as and when it becomes available. • Maintaining planned and reactive repairs to maintain the condition of the buildings. • Seek options for developing student accommodation to support growth of activity. • New Funding Streams - Seek new funding streams to support development particularly with regard to reaching Net Zero.	6	F&GP, Operations and Estates, Capital Spend Working Group, GM, SM, AS, BH, JL June 2022
Shetland UHI / 9 **Academic quality is sub-standard**	Difficulty recruiting and retaining high calibre staff. Conditions and terms of employment are not competitive with limited scope for career progression. Infrastructure/ estate	Poor performance in quality monitoring/assurance reviews. Loss of staff to competitor institutions. Poor attainment levels, high level of withdrawal and poor retention. Damage to reputation.	3	• All teaching staff are required to have registered with GTCS and obtain TQFE qualifications and will be continually reviewed. Quality Assurance group will strive to continuously improve quality of teaching. • Peer reviews • Professional review • Review policies and procedures • Staff development days • TQFE mentors	1	LTR sub committee, QIC, KB, LB, SS **January 2023**

| | is unsuitable or not fit for purpose | | | • **Failure to engage with awarding bodies:**
 o **Regular 2 weekly meetings with Education Scotland**
 o **Responding promptly and appropriately to requests for verification visits. Staff being engaged and informed in good time.**
 o **Having a consistent approach to quality bodies.**
 o **Reinstatement and updating of internal audit system. Consider external audit.**
• **Failure to train staff adequately:**
 o **Provide training sessions to establish consistency.**
 o **Ensure staff induction process is robust.**
 o **Quality processes and procedures are accessible and available to all staff.**
 o **Staff development sessions with Education Scotland**
• **Quality Processes not circulated to staff/Ineffective QIC process:**
 o **6 weekly quality oversight at QIC & AB**
 o **TOR reviewed with regular updating**
 o **Ensure clear reporting routes for quality system**
 o **Cross departmental representation at review meetings**
• **Not up to date with UHI Quality discussion and forums:**
 o **Ensure that we keep up to date and communicate UHI processes.**
 o **UHI Shetland representation at UHI quality groups.**
 o **Implement and share UHI single policies.**
• **Failure to respond to feedback on Quality System:**
 o **Ask sections to send assessment materials for prior moderation**
 o **Departments have internal moderation as part of IV.** | | |

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Encourage staff to be part of the awarding body roles and IV marking which broadens knowledge.
Ensure student representation on appropriate committees.
QIC to review verifier feedback to ensure it is actioned.

- **Overly complex system for quality. Lack of oversight of the system:**
  - Make sure job descriptions are clear and that the responsibilities for quality for all staff is clear.
  - Foster a culture of quality and cross departmental collaboration. Improve quality internally
  - Attendance at APC with feedback of activity
  - Support other partners with verification. Seek opportunities for external experience
  - Central repository of quality information
  - Widen responsibility for quality across sections.
- **Poor Record Keeping:**
  - Ensure that record keeping sits with the IV process.
  - Exposure of wider organisation to activity – all should play a part.
  - Curriculum review to ensure we have the correct products.
  - Encouraging wider staff to be part of quality.
- **Out of date content and materials:**
  - Robust recruitment
  - PRDs
  - Probationary process
  - GTCS registration – develop staff to gain appropriate teaching qualifications.
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Shetland UHI / 10	Poor college estate. Dispersed campus	Poor performance in national student	6	• Encourage more student feedback. Engage with HISA. Create team, or dedicate a person, to action improvements.	4	LTR sub committee

| Poor Student Experience | with limited facilities for social interaction. Technology failures. Limited teaching/library resources. | satisfaction surveys. Reputational damage. Impact on ability to recruit future cohorts. Risk to core income streams. | | Response to feedback? Campus redevelopment project Redesigned induction Support sessions.
Listening and Responding to Students' Needs:
Review portfolio of courses that meets the needs of the islands.
Investment in the estate through campus development fund
Responding to student issues raised through student support and HISA. Providing regular information through student newsletters.
Provide positive opportunities for students during their study with Shetland UHI.
Responding to Enquiries and Engagement with Media:
Close monitoring and of comments received by e-mail, phone and social media. Enquiries responded to promptly.
Active media presence, promoting positive news stories of the work of college
Hold events to enhance the college's reputation.
Use external opportunities to positively promote the work of the college.
Encourage culture of staff and students to perform ambassadorial roles for the college.
Complaint Handling:
Staff are empowered to deal with initial complaints, preventing the need for escalation. **Escalated complaints are handled sensitively and within agreed time limits. Expectations are managed.** | | , Academic Board, SMT, LB, KB, GM, SS

Nov 2022 |

					• **Complaints are recorded and any patterns addressed.** ○ **Complainants are provided with a resolution as agreed. Where relevant, lessons learned are shared.** • **Student Surveys:** ○ **Issues highlighted in students surveys are shared with senior management.** ○ **Actions are taken to address concerns raised. Students are informed how we listen to their requests.** ○ **Students are given opportunities to express their opinion throughout their student life cycle within class groups or through Student Voice reps.** ○ **Students given an effective induction so that they are familiar with services available to them. Regular communications are made available.**		
Shetland UHI / 11 **Research outputs are sub standard**	Failure to publish sufficient quality papers and upload to PURE. Loss of key staff. Lack of funding. Inadequate resources allocated to research staff. Terms and conditions of employment are not comparable with competitor organisations. Impact of Brexit on access to European projects.	Damage to reputation. Brexit. Poor performance in next REF. Inability to retain staff and research teams. Reduced income.	9	• Seek additional research opportunities including, where possible, higher calibre projects. Take on more PhD students. Make it a policy to publish articles within regular set timelines. Assist staff to progress academically. Engage more with UK and international collaborators. Market our research skills. • Ensure research staff all have training in PURE and understand the requirements regarding open access • Training session included in SUHI training day 17-1-22 • All research students to be given PURE training as part of UHI Graduate School induction • Produce internal SUHI processes for the approval of publications for submission • Develop a research framework that provides staff with opportunities to develop research networks e.g.	9	LTR, BM, REKT, CA, MI June 2022

				o conference funding o encourage engagement with research pools and other committees o share information on sabbaticals • Ensure best practice with respect to REF including: o training for staff on how to improve the star rating of publications (being prepared for training day on 17-1-22) o training and awareness raising around REF Case studies (included in staff training for 17-1-22) • Encourage staff to participate in the Research Mentoring Programme		
Shetland UHI / 12 **Institutional, personal and sensitive data is corrupted, lost, stolen or misused or services are disrupted through malicious and illegal activities by external individuals or bodies.**	Poor IT security measures. Equipment with security holes. Poor patching regime. Anti-virus is not up-to-date and comprehensive. Firewalls are configured incorrectly. Coordinated DDOS attack on university infrastructure. Increasing number of security alerts. DDOS attacks on UK academic institutions up to 527 in 2015 - Janet CSIRT. Increase in cyber attacks such as ransomware	Information Commissioner fine of up to £500k. Adverse press coverage. Loss of confidence by regulators, stakeholders and HE sector. Ransomware encryption has been detected on UHI network.	12	• Ownership and proactive monitoring of cybersecurity risks at university and academic partner senior management level. Complete Information asset register. Sensitive personal data must be secured appropriately, handled correctly and accessed carefully by approved users. Mandated information security training and increased staff awareness of information security issues. Information security embedded as a core aspect of all staff job roles. • Business continuity plans in place for cyber-attack and information breach response. Open culture promoting the reporting of potential data security issues for investigation. Standard IT security measures in place validated by internal and external vulnerability testing • Since UHI cyber-attack, documents now stored on SharePoint and on Cloud. • Training and frequent reviews / annual refreshers on ICT security and safety measures. Tech Tips: available for staff on SharePoint and highlighted in newsletters • Reviewing ICT policies and ensuring that they are easily accessible for staff to check. • Timely removal of staff who have left from IT systems.	6	BoM, SMT, GDPR Working Group, Operations Committee, GM, AS, GG, ICT, JF **February 2023**

	reported in national media.			• Business Continuity Plan
				• Asset Database: need to combine and keep up to date in case of any future cyber incident.
				• **Training and awareness for all staff:**
				    ○ **Inclusion on induction checklist to meet with ICT**
				    ○ **Completion of mandatory training**
				    ○ **Tech Tips on Development Days**
				    ○ **Sharepoint Tech Tips**
				• **Reviewing ICT policies and ensuring that they are easily accessible for staff to check;**
				• **Timely removal of staff from ICT Systems:**
				    ○ **Implementation of MIM system; go between SITS and Active Directory.**
				    ○ **HR to review.**
				    ○ **Presently both systems have inaccuracies**
				    ○ **Local launch date for MIM TBC**
				• **Business Continuity Plan:**
				    ○ **Available for all**
				    ○ **Stress tested (subsea cable incident)**
				    ○ **Actions taken: MiFi at both campuses**
				    ○ **Future action: Broadband at Port Arthur House**
				• **Asset Database:**
				    ○ **To be updated and regularly reviewed**
				    ○ **High level asset information to be easily accessible**
				• **Microsoft Licence Level Increase:**
				    ○ **By July 2023 we will have moved to A5 Microsoft licensing, which has an increased level of security, as part of the move towards telephony via Teams.**
				    ○ **This comes as an additional cost, but it will give a stronger level of security**		

Shetland UHI/13	Climate change is widely accepted as	Business continuity and resilience may be impacted		**Workshop to identify actions and owners**		F&GP

Failure to act appropriately and timeously regarding progressing actions designed to achieve obligations to reduce emissions and to achieve net zero in the context of the climate emergency and in relation to all UHI activities and operations.	inevitable and some major effects are now broadly accepted to be certain and these may influence many of our activities from delivery of teaching, research and examinations to student recruitment, supply chains, insurance premiums and the profitability of investments. Following its declaration of a climate emergency in 2019, the Scottish Government has set ambitious legislative targets to reduce carbon emissions to net-zero by 2045. Emissions in 2030 are intended to be at least 75% lower than the 1990 baseline, with 2040 emissions at least 90% lower than baseline.	by a changing climate that has the potential to create new types of disruption, as well as exacerbating risks that already exist. Hotter summers could occur half the time by 2070. Storms will occur more often and be more intense with periods of exceptional rainfall. Estates in remote and exposed areas and at sea level may be particularly at risk to adverse weather events including storm damage and flooding. Risk of reputational damage if UHI is perceived to have failed to act appropriately to achieve its obligations (Greenwashing) and negative media coverage may impede future student recruitment, access to capital funding and research opportunities. ***Operational Risks***:		**To Minimise:** • **Operational risks** • **Transitional risks** • **Financial risks**		SMG / Prof Services F&GP JL, GM, BH **Nov 2022**

| | UHI is classified as a relevant public authority for the purposes of this legislation and specific duties and obligations exist that require proactive actions to reduce emissions and to routinely report on progress. | - Property damage due to changing and more intense weather conditions
- Disruptions to communications, teaching and travel caused by extreme weather events
- Shifting infrastructure requirements, for example the need to provide cooling in buildings during the summer months ;

Transitional Risks:
- Risk to reputation - student and societal pressure for UHI Shetland to demonstrate innovation and sustainability and show leadership in climate action.
- Risk to enrolment - student pressure to access training and accreditation in programs that will lead to opportunities that match their values and interests in climate justice and jobs associated with the net zero transition.
- Increasing staff and organizational capacity to meet compliance | | | | |

		requirements, for example PBCCD emissions tracking and reporting. *Financial Risks*: - Increasing financial demands to meet compliance requirements for emissions reductions, for example, decarbonized heating systems and fleet vehicles. - Supply chain pressures that will increase as emission reduction target dates draw closer, i.e. a slow response may be a more costly response - Rising insurance costs			

Key

RISK MAP (for Gross risk & residual risk)	TIMESCALE 3 YEARS

IMPACT					
5 - Catastrophic	5	10	15	20	25
4 - Major	4	8	12	16	20
3 - Significant	3	6	9	12	15
2 - Minor	2	4	6	8	10
1 - Insignificant	1	2	3	4	5
	1 -Very Rare	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain
	LIKELIHOOD				