

Aberystwyth University

**Risk Management Policy and Procedures**

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| Authorised by: | Audit, Risk and Assurance Committee |  |
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| Date: | October 2020 |  |
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| **Version** | **Prepared by** | **Date** | **Approved by** | **Date** |
| **Version 10** | **Sarah Taylor** | **27/10/2020** | **Council** | **4th Dec 2020** |

**Risk Management Policy and Procedures**

1. **Introduction**

The HEFCW Financial Management Code requires the University to:

“Ensure that it has an effective policy of risk management which is able to demonstrate that the organisation and management of the instituiton’s financial affairs are appropriately controlled.”

(para 41 Financial Management Code v1.0)

In addition, any organisation needs to know what it does well and where any potential risks lie that may prevent it from continuing to do so in the future. Deciding positively not to do something can be an option – understanding the importance of active risk management is vital at all levels of an organisation.  Embedding planning as part of the day to day operation is key to understanding risk and mitigating both its likelihood and its impact.

The Risk Management Policy and Procedures forms part of the University’s internal controls and corporate governance arrangements. This outlines the University’s approach to risk management, documents the roles and responsibilities of the Governing Body, the University Executive and other key parties. It also outlines the system for evaluating risks and identifies the main reporting procedures

Good internal controls and a commitment from senior management are prerequisites; but it’s the whole community of staff, who understand the business well, who can best design, deliver and strive to continuously improve the management of risks identified as part of their normal activities. The University Risk Management Policy Statement is included as Annex A.

* 1. **Definition – Risk**

A helpful definition of risk is:

*‘The threat that an event will adversely affect the ability to achieve objectives. It arises as much from the likelihood that something good will not happen as it does from the threat that something bad will happen.’*

The University is exposed to risks derived from financial, political, legal and technological sources, among others.

* 1. **Definition – Risk management**

A helpful definition of risk management is:

*‘Taking actions and putting controls in place to reduce the uncertainty, prepare for the consequences, and to make sure that the organisation can leverage risk to its best advantage.’*

* 1. **Risk Management System**

The Executive encourages all areas of the University to consider the risks they face and actively manage those risks in as transparent and responsible a way as possible. The Risk Management system supports this approach across the organisation and provides structure for reporting and consideration of the risks identified.

1. **Aims and Objectives**

The University is committed to promoting a positive risk management culture and aims toe nsure that robust systems of control and contingency plans are in place. The Risk Management Policy and Procedures have been designed for use by all University staff and serves to:

* Communicate approaches for managing risk across the institution to all appropriate persons/organisations working for or on behalf of the organisation to encourage a unified approach whether acting as principal or agent
* Establish procedures that should be adopted in the risk management process, involving staff and other stakeholders in identifying risks and their mitigation

The Objectives of the Risk Management processes are to:

* Protect students, staff and visitors to and assets of the University
* Manage risk in accordance with best practice and reduce the cost of risk
* Anticipate and respond to changing social, environmental and legislative requirements
* Raise awareness of the need for risk management
* Integrate risk management into the culture of the University
* Adopt legal compliance with all relevant legislation, codes of practice, policies and procedures as a minimum standard

1. **Implementation**

**a.** The Governing Body will oversee the implementation of these objectives through the University Executive who will have overall responsibility for ensuring that procedures are in place to maintain effective management of risk.

To achieve these aims, the ***University Executive*** will:

* Identify and evaluate both generic and specific risk inherent in the organisation and in delivering the Strategic Plan
* Maintain documented procedures for the management of risk
* Provide suitable information, training and supervision, ensuring management competence is maintained to manage risk
* Maintain effective communication and the active involvement of employees and other stakeholders in identifying risks and their mitigation, including regular reporting to Council Committees and other stakeholders as appropriate
* Maintain an appropriate incident reporting and recording system, with investigation procedures to establish cause and prevent recurrence
* Monitor risk management arrangements on an ongoing basis, including periodic review by Internal Audit

**b.** The role of the ***Audit, Risk and Assurance Committee*** is to advise the Governing Body on the effectiveness of the institution’s risk management, control and governance arrangements and the arrangements to promote economy, efficiency and effectiveness (Value for Money).

As part of this role, the Audit, Risk and Assurance Committee will test the Risk Appetite Statement and Matrix proposed annually to Council by the University Executive, and will monitor and review the Risk Register at every meeting. In addition, the Audit, Risk and Assurance Committee will obtain both management and independent assurance of the adequacy and effectiveness of the risk management framework.

**c.** The University ***Pro Vice-Chancellors with responsibility for Faculties or Professional Services, Heads of Department and Heads of Professional Services*** will:

* Have primary responsibility for managing risk on a day-to-day basis within their specialist areas
* Have responsibility for promoting risk awareness within their operations; introduce risk management objectives into their areas of activity
* Identify and evaluate the significant risks faced by their operations for consideration by the University Executive, the Audit, Risk and Assurance Committee and Council
* Ensure that risk management is incorporated at the conceptual stage of projects as well as throughout a project
* Ensure that individual Departmental risk management and review is a regular management meeting item to allow consideration of exposure and to prioritize work in the light of effective risk analysis
* Report early warning indicators to the University Executive

**d.** The ***Risk Management Champion*** is responsible for:

* Developing specific programmes and procedures for establishing and maintaining risk management activities across the University
* Ensuring the dispersal of vital information
* Providing guidance, interpretation and understanding of the risk management systems and procedures
* The Director of Finance and Corporate Services is the Executive Officer responsible for ensuring that risk management processes run efficiently and effectively in the University. Support in this role is provided by the Planning Department. The Head of Planning is the nominated Risk Management Champion.

**e. Staff should:**

* Understand their accountability for individual risks
* Understand that risk management and risk awareness are a key part of the University’s risk culture
* Understand how they can enable continuous improvement of risk management response
* Report systematically and promptly to senior management any perceived new risks or failures of existing control measures

**f. Online assistance**

Online assistance (copies of this guidance etc.) can be found at: http://www.aber.ac.uk/en/pag/planning/risk-management/

1. **The Risk Register**

The Institute of Risk Management (IRM) has produced a Risk Management Standard that defines a number of steps in the risk management process. Briefly, these can be summarized as follows:



Each of these steps will be considered in the paragraphs below and are reflected in the processes embedded in the University’s online Risk Management system.

**5. Risk Identification**

Risk identification should be approached in a methodical way to ensure that all significant activities within the organisation have been identified and all the risks flowing from these activities defined.

All areas of activity within the University and partnerships with third party organisations should be considered together with what would stop them being as successful as they should. The key risks that the University faces will be those that would stop it achieving its objectives in these areas.

Risk management processes are aligned to the University’s Strategic Aims as stated in the University’s Strategic Plan which is available at http://www.aber.ac.uk/en/strategicplan/ . At Departmental level you may also be looking at high-level operational risks; and the University risk register also considers a set of key operational risks.

To facilitate the identification of risks, strategic and local objectives should be continually communicated and kept in the forefront of daily activity. This way, it is easier to identify the uncertainties associated with achieving your objectives. Use a “cast a wide net” approach to identify a broad spectrum of risks and invite multiple and diverse views.

**6. Risk Capture**

The objective of the recording and description of risks is to capture and record the identified risks in a structured format for evaluation and monitoring of risk mitigation actions.

*Risk Registers*

To support the Risk Management process, the University has a standard format for documenting identified risks and the controls in place to reduce these risks through the development of Risk Registers, which are held in a common format both at corporate and local (academic and service department) level on the University’s online Risk Management system.

A blank template detailing the elements of a Risk Register is provided at Appendix B. This may be of use when designing a new risk register prior to entering it onto the online system. Additionally, there are some risk registers which it may be more practical to keep at local level (e.g. for small, low level and temporary projects and tasks as opposed to department level registers and University Major Projects). Only practical, relevant and meaningful information should ideally be included in the Register.

A corporate-level Risk Register is maintained by the University Executive. Local Risk Registers are developed and maintained for each Academic Department and Professional Service area.

The Risk Register Template summarises risks in line with the key objectives of the Strategic Plan into risk areas. Risk owners are asked to identify risks within these broad corporate risk areas.

Entries in the Risk Register must:

* be meaningful and support the risk management process;
* be able to demonstrate what is in place (or not) to respond to significant risks;
* be concise – the risk register is not the place to provide project updates;
* refer only to current or near-future actions; avoid listing htings which took place some time ago, or things that are taking place too far ahead, or at an unspecified time.
* include dates, wherever possible, both for actions taken and for planned mitigating actions

*Risk Owners*

Every risk recorded should have a ***Risk Owner*** identified. Risks on the Corporate Risk Register are assigned to a member of the Executive, in line with their portfolio.

At Departmental level, an identified ‘owner’ should similarly be identified for each risk. The Risk Owner is the person charged with the overall responsibility for assessing, managing and reporting the risk, although they may delegate implementation of mitigating actions to the appropriate staff.

*Defining the risks*

Our corporate objectives state what we want to achieve as a university or Department. In the Risk Management process, we must identify what risks could affect the desired outcomes. Departmental ‘sub risks’ should, therefore, be identified in respect of achieving both strategic and local objectives. Sub risks can be defined as:

*‘Risks to the successful achievement of Department plans or the Strategic Objectives.’*

In defining risk within risk areas, it may be helpful to think about what is changing, both internally and externally, for example changes in the HE regulatory environment, learning and teaching approach, management structure, tuition fees. Look for new risks, as well as changes to current risks. Think about:

Internal:

* staff
* students
* community
* trade unions
* partner organisations
* policy makers and administrators
* employers
* suppliers
* organisational changes

External:

* legal and political changes
* funding bodies and regulators
* the impact of funding cuts and changes
* policy developments in relation to HE funding and regulation

**7. Risk Evaluation (Assessing Probability and Impact)**

1. **Impact and likelihood**

Risk assessment involves assessing our performance in controlling these risks. Risk levels should be assessed by looking at the **impact and the likelihood** (probability) of risks separately. Most mitigating actions and controls tend to be about reducing the likelihood of risk, rather than being able to reduce impact – for instance reducing the likelihood of power failure through back-up systems, testing etc., rather than concentrating on reducing the university’s dependence on mains electricity, which would reduce the impact.

The risk assessment for impact and likelihood is based on the familiar assessment of Low/Medium/High/Very High.

An assessment matrix defining how risk can be quantified has been provided at Appendix D. Please use these assessment matrices when completing the risk register, as this enables better upwards iteration of local risks into the Corporate Risk Register if appropriate.

Assessment of risk should be a group activity, since this can highlight whether staff members think that a control is effective, or whether they have the same understanding of the importance of certain issues.

1. **Assessing risk appetite**

To deliver its Strategic Plan, the University may need to be prepared to take risks, as risks can also be opportunities.

Risk Appetite is defined as:

*‘The University’s willingness to accept risk in pursuit of its objectives’*

Our risk management processes should be flexible enough to recognise this; and aid senior management to make bold, informed decisions based on full knowledge of risk levels. It is important to avoid over-mitigation of risk – \_this could lead to missed opportunities. For this reason, Council is tasked with agreeing acceptable risk levels for significant risks. Any revisions to the Risk Appetite Statement are proposed by the University Executive, and tested by the Audit, Risk and Assurance Committee prior to consideration by the Council.

The Aberystwyth University Statement of Risk Appetite is available on the Risk Management webpage http://www.aber.ac.uk/en/pag/planning/risk-management/ . A risk appetite matrix is also provided to help assess risk appetite in specific cases.

1. **Cause and Effect**

Causes of a risk event (contributing factors) are anything which may cause the risk event to occur.. Contributing factors can be either external (e.g. Government policy, new regulations, economic environment, media coverage) or internal (e.g. staffing issues) to the University. Assessing the causes of a risk will provide a guide to scoring the gross likelihood rating of the risk.

Effect of a risk event is a description of what the impact of a risk being realised would be. The effect of a risk will provide a guide to scoring the gross impact risk rating of the risk.

**8. Response (Risk Mitigation)**

**a. Introduction**

When risks have been identified, captured and assessed, you need to decide how these will be addressed.

As the first step, you should assess the ‘cost’ of **accepting** the risk. This may be a financial cost or a lost opportunity. You may decide that accepting a particular risk is appropriate and not take any further action and record this on the risk register.

If you decide further action is needed, there are three options to consider:

* Avoid the risk
* Transfer all or part of the risk
* Mitigate the risk

A risk may be **avoided** by withdrawing from the area of activity but doing so may result in a missed opportunity.

A risk may be **transferred** either wholly or in part to a third party, possibly through insurance or a partnership or other contractual arrangement. Generally, it is not possible or cost-effective to insure against all possible business risks. Equally, insurance is not a substitute for risk management as insurers expect policyholders to take all reasonable steps to avoid or minimize the risk of losses.

In the majority of cases, the next step will be to put in place systems to **mitigate** either the likelihood or the impact of the risk. These will include systems addressing the whole operation of the University as well as the areas where risks have been identified. Any system of risk mitigation should provide for:

* Effective and efficient operation of the institution
* Effective internal controls
* Compliance with law and legislation

b. **Controls**, **Mitigating actions and Sources of Assurance**

*Controls*

A control can be defined as ‘what you do’ ,to manage a risk. They should be things that can be easily tested for assurance that their design is appropriate and effective at mitigating the relevant risk.

To identify controls that are already in place, it may be helpful to ask the question *‘what do I rely on?’*. For new risks, consider whether you want the controls to be preventative or detective. Less may also be more. Excessive layers of control, especially for lower level risks, may slow down business processes and increase costs.

*Mitigating Actions*

A mitigating action is generally a policy/strategy being undertaken to manage the risk. Mitigating actions plans should be recorded against each risk that has been listed in the risk register with appropriate milestone dates. Each risk mitigation action should identify:

* The action owner
* The main actions that will be taken and the key milestone dates
* A regular update on progress against the identified milestones

This part of the risk management process should be dynamic. Ideally this part of the registershould capture relatively short term actions (to be done within 1 to 6 months) which can add to risk mitigation, and which can be updated at each refresh of the Risk Register. Actions can change from one version to the next, and the person allocated to the action (which can be someone other than then Risk Owner. Try to avoid any action which is ‘ongoing’ – if it costant risk mitigation, it belongs to the controls; or if it’s an action that is not complete, it may not be delivering good risk mitigation. These actions add a process of continuous improvement of risk management.

It should be noted that risk management activities may have an impact on different areas of the organisation. For example, a mitigating action taken to control costs in one department might have a negative impact on service delivery for another. In such cases it would be expected that any affected areas be consulted and Executive approval sought for any changes which would have a wide-reaching impact on another area of strategic importance.

*Sources of assurance*

A source of assurance can be defined as evidence that can prove that a) our assessment of net risk level is correct and b) our controls are in place and working. They could be:

* from internal and/or external sources, for example, minutes of meetings or HEFCW documents, Faculty /departmental plans;
* recent and readily accessible;
* robust enough for the Risk Management Committee to place reliance on them in determining risk levels; and
* aligned to a control and/or mitigating action.

In terms of detail, ‘Faculty / Departmental Meeting Minutes’, for example, is sufficient for Departmental Risk Registers; there is no need to list exact meeting dates, as long as compilers are satisfied that the relevant documents could be found for audit purposes.   However, reference to specific documents, for example, internal audit reports, should be dated for clarity.

It is good practice to consider the “three lines of defence assurance model” when considering the provision of assurance. The basic premise of the model is that the higher the line of defence, the greater the degree of objectivity and independence of the assurance and therefore its value.

*1st line of defence – Operational management*

For example: Maintaining effective controls and executing control procedures on a day to day basis; written procedures and staff training

*2nd line of defence – Risk Management and Compliance Functions*

For example : Supporting management policies, defining roles and responsibilities, providing risk management frameworks (e.g. providing guidance and training on risk management issues)

*3rd line of defence – Independent Sources of Asssurance*

For example : internal audit, external audit, external regulators and agencies.

**9. Residual Risk assessment (Gross and Net risk)**

Not all risks can be eliminated completely, so some residual risk is inevitable.

In completing the assessment of risk, recognition needs to be given to the impact of the mitigating actions taken to reduce the impact of the risk. Accordingly, risks should initially be recorded at their gross value – \_the impact without mitigating actions. The same risks should then be recorded allowing for the impact of the mitigating actions, giving a net risk score. By doing so, the University is able to evaluate the impact of the mitigating factors to determine whether they are effective.

**a. Assessing Gross risk exposure**

Gross risk exposure is the status of the risk (measured through impact and likelihood) prior to any mitigating actions or controls being put in place.

To determine the gross risk, firstly conceptualise a scenario where there are no controls in place, then assess the likelihood that the risk will happen and the impact this would have on achieving our strategic objectives if it does.

Although it might seem strange to ignore existing controls, it is important to capture and prioritise the key risks to the university, not just those that are perceived to be less well controlled. Understanding gross risk also enables the measurement of how much reliance is placed upon existing controls and can help to direct the work of assurance providers.

The risk assessment matrix at Appendix C should be used to assess gross risk levels and to determine the colour coded level to be placed in the ‘Gross (inherent) risk exposure’ column.

**b. Assessing net risk exposure**

Net risk exposure is the status of the risk after mitigating actions and controls have been applied. By assessing the risk after the control environment is considered, we can assess the effectiveness of our mitigating actions and controls.

The risk assessment matrix at Appendix C should be used to assess net risk levels after controls are in place and to determine the net risk score.

**c. Assessing risk trend**

A risk trend should be assigned to both the gross and net risk assessments to indicate whether a risk is static, increasing or diminishing. The risk trend should reflect the movement in risk assessment since the last update of the risk register (for the first version, it will be level).

The risk trend should be defined, using one of the following symbols:

**⭤**  = risk is static;

**⭡** = risk has increased

**⭣** = risk has diminished.

On the University’s online system, a report may be run to indicate risk trend changes between specific dates. If using the paper-based form in Appendix B the appropriate symbols should be entered in the ‘Risk trend’ columns; one relating to gross risk and one for net risk.

**9. Risk monitoring and reporting**

**a. Introduction**

The most effective Risk Management frameworks are the ones where risk strategies, responses and controls are regularly assessed, monitored and updated. The effectiveness of the risk management framework will be subject to ongoing monitoring by the University Executive, on a monthly basis. The Audit, Risk and Assurance Committee will review the risk register and progress with risk mitigation actions on a regular basis. The criteria for judging effectiveness will be the receipt of satisfactory reports of compliance from Internal Audit, Financial Statements Audit and the funding bodies, among others.

The Audit, Risk and Assurance Committee will review Risk Assurance periodically. The structured mapping of assurances is a key component of the process of identifying the sources of assurance that are in place to enable an accurate assessment of risk management and corporate governance arrangements. The benefits of the assurance map include:

* Facilitating the escalation of risk and control issues
* Identifying assurance gaps
* Identifying where there are multiple sources of assurance that may not represent the best use of resources
* Providing supporting evidence for the Annual Report

The effectiveness of the University’s Risk Management processes will be subject to regular Internal Audit review.

**b. Risk reporting cycle**

Departmental (local) risk registers are collected according to a timetable which aligns with the start of the new academic year and Planning Round.

Updating the local risk registers should form part of the regular management processes within the Faculty or Professional Services Department, and discussed at Executive / Senior Team meetings or equivalent. The Executive will receive a full report on all Departmental and Major Project risk registers twice a year, around, October and April, and through the Planning Round.

If there are any significant changes to the local risk register outside of the normal reporting cycle (e.g. new risks emerging or large increases to existing risks) these should be reported to the Planning Department as soon as possible.

**Appendices**

The following are appendices:

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| Appendix A | Risk Management Policy Statement |
| Appendix B | Risk Register template for assistance in developing new risk registers prior to uploading to the online system |
| Appendix C | Matrix for colour coding the combined impact / likelihood score (5 x 5 scale) |

# Appendix A

# AU Risk Management Policy Statement

* Risk management and internal control are linked to the fulfilment of the University’s Mission and Aims at all levels, and in all areas
* The University views the taking of risk as an essential part of the business of higher education, in its management of core educational activities as well as its supporting activities.
* Risk is not only about threats to business that have to be managed; it is equally about the failure to seize opportunities.
* The University also sees the strategic management of risk as an integral element within its decision-making processes and culture, supporting effective planning and evaluation of its activities, including encouragement of innovation and the management of change. Risk management is accepted as a creative component of management generally, not an "add-on".
* It is accepted as axiomatic that good management is effective risk management, through the incorporation of systematic processes, engaging the whole of the institution, from its Council and Executive, through to Academic Faculties and Service Departments.
* The Governing Body will oversee the implementation of these objectives through the University Executive who will have overall responsibility for ensuring that procedures are in place to maintain effective management of risk.
* The role of the Audit, Risk and Assurance Committee is to advise the Governing Body on the effectiveness of the institution’s risk management, control and governance arrangements and the arrangements to promote economy, efficiency and effectiveness (Value for Money).
* The University’s Executive is responsible for reviewing the risk within the business and has overall responsibility for ensuring that procedures are in place to maintain effective management of risk.
* It is the responsibility of University management to implement AU policies and procedures and to identify and manage risks as a management activity.
* In order to be effective, risk management has to be tangible, be able to be audited, and explicitly incorporated into all major processes, with regular reporting to appropriate management and governance bodies on its operation.
* The University seeks to enhance the security and safety of staff and students for the management of physical risks.
* The University seeks through its risk management policy to secure financial benefits, e.g. in through savings in staff time, legal fees, insurance payments, bad debt reduction, etc through the early recognition and management of risk.
* Risk management must be embedded throughout the University. It is not the sole responsibility of senior managers but should be exercised by all staff, particularly those with management or operational responsibilities. The means of achieving this may vary according to the needs of different parts of the University, but include formal annual confirmation of compliance to the Vice-Chancellor as a minimum.

**Appendix B**

aber-uni-logo

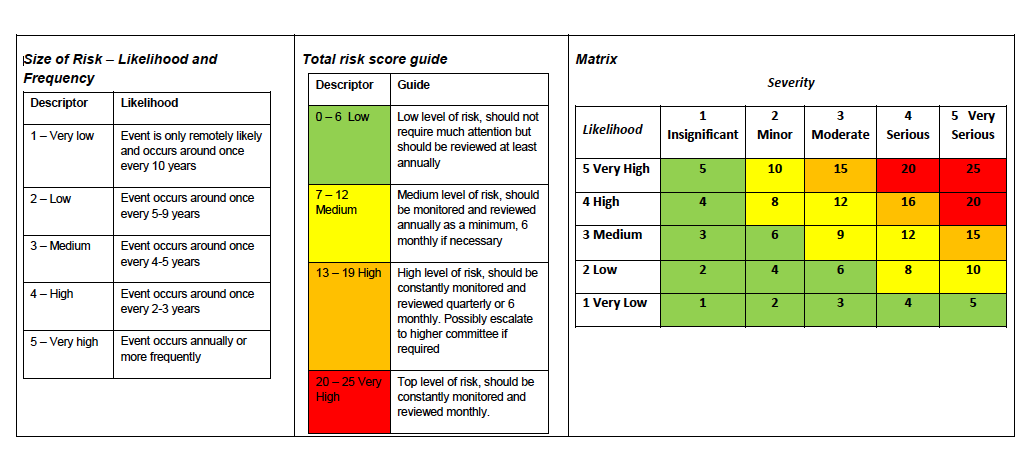
This may be of use when designing a new risk register prior to entering it onto the online system. Additionally, there are some risk registers which it may be more practical to keep at local level (e.g. for small, low level and temporary projects and tasks as opposed to department level registers and University Major Projects). Only practical, relevant and meaningful information should ideally be included in the Register.

Risk Register Template (at Corporate and Departmental level)

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|  | **Department Name:** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**Appendix C** - Matrix of definitions to assist in assessment of impact and likelihood risk levels. For Faculties and Service Departments, the definitions of Insignificant, Minor, Moderate, Serious and Very Serious financial impact at local level are <£50K, <50K to £100K, <£100K to <500K, and <£500K; or as per the University level measures if the risk being assessed is a university wide risk, for example, the impact of an incorrect statutory return does not just affect the Planning Department, but is a university wide hit.

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| **Severity descriptors** | **Possible consequences** | **Examples[[1]](#footnote-1)** |
| **1 - Insignificant** | No impact |  |
| **2 - Minor**  Negative outcomes from risks or lost opportunities unlikely to have a permanent or significant effect on the University’s reputation or performance | * Less than 0.5%of total turnover financial impact * No regulatory consequence * Minor adverse publicity * Minor reversible injury * No more than10 days of senior staff time | * University sued successfully for wrongful dismissal * Lecturer has work related injury e.g. slips |
| **3 – Moderate**  Negative outcomes from risks or lost opportunities having a significant impact on the University. Can be managed without major impact in the medium term | * Financial loss up to 2% of total turnover in any year * Limited regulatory consequence * Local adverse publicity of subject area * Major reversible injury * No more than 25 days of senior staff time | * Major IT project late or overspent * Contractual staff injured due to University negligence * Loss of a major contract |
| **4 - Serious**  Negative outcomes from risks or lost opportunities with a significant effect that will require major effort to manage and resolve in the medium term but do not threaten the existence of the institution in the medium term | * Financial loss over 2% of total turnover in a single year * Major savings programme required to break-even in the medium term * Significant regulatory consequence * Negative headlines in the national press * Irreversible injury or death * No more than 45 days of senior staff time | * Research team found to have falsified results with a major impact e.g. on health issues * Major overseas recruitment problems due to war or terrorism – potential to escalate to very serious * University financial systems fail completely and cannot be recovered |
| **5 – Very serious**  Negative outcomes from risks or lost opportunities which if not resolved in the medium term will threaten the existence of the institution | * Financial loss (or loss of potential financial surplus) over 2% of turnover for consecutive years or over 5% in a single year * Substantial regulatory consequence * Sustained negative headlines in national press * Major negative sanction by HEFCW * Closure of major part of business * Irreversible multiple injury or death * Over 45 days of senior staff time | * Major accident due to University negligence * Major fire prevents substantial part of the University delivering courses * Collapse in student application numbers * Sustained failure to recruit staff |



1. [↑](#footnote-ref-1)