UKCBC Risk Management Framework

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Linked policies:	GA 3.3 Corporate Academic Governance Framework (CAGF); GA 3.5 Anti-Fraud, Bribery and Corruption Policy; GA 3.4 Conflicts of Interest Policy
Audience:	Staff

Contents

1.Introduction

UKCBC operates within a complex environment shaped by university partnership requirements, external regulatory expectations and the needs of students and staff. As a private higher education provider delivering franchised programmes across multiple campuses, the College must manage risks in a structured, transparent and proportionate way. This framework sets out how UKCBC identifies, assesses, manages and monitors risks across academic and corporate functions. It provides the foundation for a consistent risk culture, supports informed decision making and enhances institutional resilience.

2.Purpose

The purpose of this framework is to establish a coherent and comprehensive approach to risk management across UKCBC. It supports effective governance, ensures appropriate oversight and provides assurance to university partners, committees and the Board of Governors. This framework also forms part of UKCBC's readiness for future regulatory engagement, including the requirements of the Office for Students. It describes the structures, processes and responsibilities that underpin the effective management of risk at UKCBC.

The framework is accompanied by a series of appendices, which provide detailed templates, operational guidance and examples to support day to day implementation.

3.Aims and Objectives

This framework aims to ensure that risk management is embedded in UKCBC's decision making, operational planning and quality assurance activities. Its objectives are to:

- establish a consistent approach to identifying and assessing risks
- support the prioritisation of actions and allocation of resources
- ensure early identification of risks affecting academic quality, student outcomes or financial sustainability
- promote a culture of openness and shared responsibility

- align risk oversight with university partner requirements and future OfS expectations
- ensure risks are escalated to the appropriate governance level
- provide clear documentation and oversight routes for all areas of activity
- strengthen assurance to senior leaders and the Board

4.Scope of Usership

This framework applies to all UKCBC staff involved in academic delivery, professional services, governance, partnership management and operational support. It must be used by:

- risk owners in academic and corporate teams
- curriculum leaders, heads of department and professional services managers
- members of the Executive Leadership Team (ELT) Quality of Education Group (QoE), College Management Team and Risk and Audit Committee (RAC)
- staff responsible for partner reporting, internal monitoring and statutory returns

University partners and external assurance bodies may refer to this framework when reviewing UKCBC's governance and risk arrangements.

Accessing the Risk Management Form

All risks must be recorded and updated using the **UKCBC Risk Management Form**.

➡️ *Click here to access the form:*

5.Principles

UKCBC's approach to risk management is guided by principles that ensure the process is fair, consistent and proportionate. These principles underpin all elements of the framework and shape how individuals and teams handle risks.

The principles are:

- **Openness**: Risks are raised early and discussed without blame.
- **Proportionality**: Processes reflect the size and complexity of UKCBC.
- **Integration**: Risk management supports planning, decision making and resource allocation.
- **Regulatory readiness**: The framework aligns with university partner requirements and the expectations of the OfS.
- **Shared responsibility**: Managing risk is a collective responsibility across all departments.
- **Three lines of defence**: Oversight is structured across operational control, management oversight and independent assurance (Appendix G).

6.Definitions

A shared understanding of risk terminology supports consistent application of the framework. Key definitions include:

Term	**Definition**
Risk	The possibility that an event or action may adversely affect UKCBC's objectives.
Gross risk	The level of risk before controls or mitigations are applied.
Residual risk	The level of risk after controls and mitigations have been considered.
Risk owner	The individual responsible for assessing, updating and managing a risk.
Control	A measure that reduces the likelihood or impact of a risk.

Further examples and contextual definitions are provided in **Appendix A**.

7.Risk Categories

Risk categories enable UKCBC to structure risk identification consistently across academic and corporate activities. They reflect areas that could affect the College's ability to operate effectively, maintain academic quality or meet partner expectations.

UKCBC's six risk categories are:

1. **Strategic and governance**
2. **Financial and sustainability**
3. **Academic quality and standards**
4. **Regulatory and compliance**
5. **Operational delivery**
6. **Business continuity and incident management**

Each category is defined with examples in **Appendix A** to support consistent classification.

8.Risk Scoring Methodology

An effective scoring approach enables UKCBC to evaluate risk exposure objectively and consistently. The College uses a five-by-five scoring model, assessing each risk on likelihood and impact. This method provides a structured approach for comparing different types of risks and supports the escalation and prioritisation of actions.

Full scoring tables, descriptors and worked examples are provided in **Appendix B**.

Likelihood Scale

The likelihood scale assesses the probability of a risk materialising within a typical operational period. Scores range from 1 (rare) to 5 (almost certain). Risk owners must consider evidence from internal data, partner reports, historical patterns and sector trends when determining likelihood.

Impact Scale

The impact scale measures the severity of consequences if the risk were to occur. It includes academic, regulatory, financial, reputational, student outcomes and operational considerations. Risk owners must select the **highest relevant impact level**, even where a risk has multiple dimensions.

Objective Impact Measures

To support consistent scoring, the framework incorporates objective measures that provide indicative thresholds for each type of impact. These measures help risk owners identify whether the consequences of a risk would be minor, moderate, major or severe. They include indicators for:

- financial variation
- reputational visibility or partner escalation
- academic standards and assessment integrity
- student continuation, progression or achievement
- regulatory and contractual exposure
- operational disruption

Objective measures are fully set out in **Appendix B**.

Consolidated Risk Banding

By multiplying likelihood and impact, a risk obtains a score between **1 and 25**. UKCBC uses the following bands:

- **1 to 5**: Very Low
- **6 to 10**: Low
- **11 to 15**: Moderate
- **16 to 20**: High

- **21 to 25**: Very High

Each band has defined oversight requirements and escalation triggers, set out in **Appendix F**.

Scoring Flowchart and Process

A structured scoring process ensures consistency across the institution. The UKCBC scoring flowchart, found in **Appendix B**, guides risk owners through each stage from initial identification to residual scoring. Risk owners must follow this process each time a risk is created or updated.

9. Academic Quality and Student Success Risks

Academic risks play a critical role in safeguarding teaching quality, academic integrity and student outcomes across UKCBC's franchised provision. This section outlines how academic risks are identified and managed and how they align with relevant partner expectations and future OfS conditions (notably B1, B2 and B4).

The Academic Quality and Standards Risk Register captures risks relating to:

- teaching quality and curriculum delivery
- assessment practice, marking and moderation
- academic integrity and misconduct
- student engagement, attendance and continuation
- the reliability and accuracy of academic data
- feedback from university partners
- monitoring outcomes and external scrutiny

The register is reviewed monthly by the **Quality of Education Group**. Examples of academic risks are provided in **Appendix M**.

10.Roles and Responsibilities

Effective risk management requires clear responsibilities across the organisation. UKCBC operates a **three lines of defence** model:

Line One: Operational Management

Academic and professional services teams identify risks, maintain controls and update registers monthly.

Line Two: Oversight

The Director of Governance, Quality and Student Success (DGQSS) oversees the corporate register; the Quality team oversees the academic register.
The Quality of Education Group and the College Management Team review risks monthly.

Line Three: Independent Assurance

The Risk and Audit Committee provides quarterly oversight and assurance to the Board. University partners contribute additional scrutiny through monitoring and review processes.

A full responsibilities matrix is included in **Appendix H**.

11.Governance Route and Reporting Cycle

Risk monitoring follows a structured reporting cycle to ensure timely oversight and escalation. This cycle supports assurance to committees and the Board of Governors.

Body	Frequency	Purpose
Quality of Education Group	Monthly	Academic risks, student outcomes, partner compliance
College Management Team	Monthly	Corporate and consolidated academic risks

Risk and Audit Committee	Quarterly	Scrutiny, assurance and challenge
Board of Governors	Quarterly	Receives RAC report and monitors institutional exposure

A visual escalation map is set out in **Appendix F**, and the annual risk calendar in **Appendix J**.

12.Audit and Assurance Integration

12.1 Purpose

This section defines how internal and external audit activity is integrated within UKCBC's risk management and governance framework. It ensures that audit planning, delivery, and follow up are aligned with the College's risk profile and that audit activity provides effective assurance to the Audit and Risk Committee and the Board of Governors.

Audit and assurance activity forms a core component of the College's overall control environment and supports the identification, evaluation, and mitigation of risks across academic and corporate functions.

12.2 Risk Based Audit Planning

UKCBC operates a risk based approach to audit planning. The internal audit strategy and annual audit plan are developed with reference to:

- the Corporate Risk Register and Academic Quality and Standards Risk Register
- the College's defined risk appetite and tolerance levels
- emerging risks identified through quality assurance, operational monitoring, and external review
- regulatory requirements, including the Office for Students Conditions of Registration

The proposed internal audit plan is submitted annually to the Audit and Risk Committee for review and approval. The Committee ensures that planned audit activity provides appropriate coverage of the College's key strategic, academic, financial, and operational risks.

External audit activity, including the audit of financial statements, is commissioned in accordance with Board approved arrangements. The scope and approach of external audit are reviewed by the Audit and Risk Committee to ensure alignment with regulatory and financial reporting requirements.

12.3 Audit Delivery and Oversight

Internal and external audit activity is undertaken in accordance with the approved audit plans and relevant professional standards.

The Audit and Risk Committee provides oversight of audit delivery, including:

- reviewing the scope, progress, and outputs of internal audit engagements
- reviewing the external audit plan, findings, and management letter
- ensuring that audit activity remains aligned to the College's risk profile
- maintaining oversight of auditor independence, objectivity, and effectiveness

Audit findings are reported through formal governance routes, with summary reports presented to the Audit and Risk Committee and escalated to the Board of Governors where appropriate.

12.4 Management Response and Action Tracking

All audit recommendations are subject to formal management response. Actions arising from internal and external audit are:

- recorded within the College's audit action tracking processes
- assigned to named action owners with defined completion deadlines
- monitored through the governance reporting cycle

Progress against audit actions is reported regularly to the Audit and Risk Committee. Where actions are overdue, or where implementation is not progressing as expected, this is escalated through the governance structure in line with the College's escalation framework.

12.5 Integration with Risk Management

Audit activity is fully integrated with the College's risk management processes.

Specifically:

- audit findings inform the identification, reassessment, and escalation of risks within the Corporate and Academic Risk Registers
- control weaknesses identified through audit are reflected in residual risk scoring and mitigation planning
- recurring or systemic issues identified through audit are considered within institutional risk evaluation and quality enhancement activity

This ensures that audit activity contributes directly to the continuous improvement of the College’s control environment and the effective management of institutional risk.

12.6 Assurance to the Audit and Risk Committee and Board

The Audit and Risk Committee receives regular assurance on:

- delivery of the internal audit plan
- outcomes of internal and external audit activity
- progress in implementing audit recommendations
- the effectiveness of the College’s control environment

The Committee provides formal assurance to the Board of Governors through:

- regular summary reports
- escalation of significant audit findings or control weaknesses
- an Annual Audit and Assurance Report, including an opinion on the adequacy and effectiveness of risk management, governance, and internal control

12.7 Continuous Improvement

Audit and assurance arrangements are subject to periodic review to ensure they remain proportionate, effective, and aligned with the College’s risk profile and regulatory environment.

Feedback from audit activity, governance review, and external scrutiny is used to strengthen:

- audit planning and coverage
- integration between audit and risk management
- the effectiveness of internal controls and assurance processes

13.Documentation Set

UKCBC maintains a clear set of documents to support consistent risk management. These documents are stored in the Microsoft Teams risk workspace and include:

- Corporate Risk Register (**Appendix C**)
- Academic Quality and Standards Risk Register (**Appendix D**)
- Board Risk Dashboard (**Appendix E**)
- Escalation and Reporting Map (**Appendix F**)
- Three Lines of Defence Summary (**Appendix G**)
- Roles and Responsibilities Matrix (**Appendix H**)
- Risk Appetite Table (**Appendix I**)
- Annual Risk Cycle (**Appendix J**)
- Risk Register Completion Guidance (**Appendix K**)
- Sample Corporate Risks (**Appendix L**)
- Sample Academic Risks (**Appendix M**)

Review Cycle

The framework is reviewed to ensure it remains effective, proportionate and aligned with partner and regulatory expectations.

- Risk owners update registers monthly.
- The Quality of Education Group and CMT review risks monthly.
- The Risk and Audit Committee receives quarterly updates.
- The Board receives quarterly oversight reports.

- The framework is reviewed annually by the Risk and Audit Committee.
- A full independent review takes place every three years or following significant organisational change.

Appendix A – Risk Category Definitions

This appendix provides detailed definitions, boundaries and illustrative examples for each UKCBC risk category. It supports consistent classification across academic and corporate areas and ensures risks are not duplicated between registers. The examples include both sector level scenarios and UKCBC specific issues that may arise within a franchised private provider operating across two campuses.

1. Strategic and Governance Risks

Definition

Risks that affect UKCBC's long term direction, strategic decision making, governance arrangements or organisational performance. These risks may impede the College's ability to deliver its mission, meet partner expectations or respond to changes in the external environment.

Scope and Boundaries

Strategic and governance risks relate to decisions, organisational design, leadership capability, governance effectiveness and long-term planning. They do not include operational issues, academic quality concerns or financial variances unless these rise to the level of strategic threat.

Examples

- Sector level: Major policy change affecting private providers or the franchise sector.
- UKCBC specific: Delay in finalising the strategy reset affects ability to progress toward OfS registration.
- UKCBC specific: Ineffective governance oversight following the launch of the new Board and committees.

Indicators / Red Flags

- persistent lack of clarity about organisational direction

- unresolved leadership or governance issues
- repeated delays in strategic decisions
- insufficient Board oversight or ineffective committee operation

2. Financial and Sustainability Risks

Definition

Risks that affect UKCBC's financial stability, sustainability or ability to meet financial obligations. These include income, expenditure, cash flow, forecasting accuracy and financial controls.

Scope and Boundaries

Financial risks relate to internal and external pressures on the College's financial position. They do not include operational overspends unless they affect sustainability or solvency.

Examples

- Sector level: Unexpected inflationary pressures increasing operating costs.
- UKCBC specific: Cash flow forecast showing the balance may fall below zero without tightened controls.
- UKCBC specific: Under recruitment on key franchised programmes leading to reduced partner income.

Indicators / Red Flags

- frequent variance from budget
- declining or volatile income patterns
- increasing creditor pressure
- inability to maintain minimum cash reserves

3. Academic Quality and Standards Risks

Definition

Risks that affect the quality, integrity or consistency of academic delivery, assessment, student engagement, continuation, progression, achievement or compliance with university partner requirements. These risks may undermine academic standards, student outcomes, or UKCBC's ability to meet its contractual and regulatory obligations as a franchised provider.

Scope and Boundaries

This category covers all risks related to:

- teaching, learning, curriculum delivery and assessment
- internal and partner moderation processes
- academic integrity and misconduct
- data quality for assessment, outcomes and partner reporting
- student attendance, engagement, continuation, progression and achievement
- student satisfaction and academic experience
- compliance with university partner academic frameworks and reporting expectations
- programme monitoring, enhancement and academic governance

It excludes non-academic student welfare or pastoral issues **unless** these directly affect academic outcomes or partner compliance.

Examples

Sector level

- Widespread academic integrity concerns reducing confidence in assessment reliability.

- Sector wide declines in attendance or engagement linked to cost-of-living pressures.
- Increased university partner scrutiny of private providers following sector incidents.

UKCBC specific

- Partner moderation identifies inconsistent marking across multiple modules or cohorts.
- Persistent low attendance or progression issues affecting continuation on franchised programmes.
- Delays or inaccuracies in partner returns, monitoring submissions or assessment board evidence.
- Gaps in academic governance records such as moderation files, panel documentation or programme monitoring reports.
- Partner raising formal concerns due to repeated quality issues or compliance breaches.

Indicators / Red Flags

- increasing moderation variances or partner queries on academic standards
- rising concerns about academic misconduct or AI related integrity issues
- declining retention, continuation or progression rates
- repeated delays in assessment feedback, marking or board readiness
- clusters of student complaints in modules or programmes
- persistent low attendance across cohorts, levels or campuses
- negative trends in student feedback or student satisfaction measures
- repeated missed deadlines for partner reporting or quality submissions
- escalation in partner correspondence, monitoring frequency or formal conditions

- unmet or overdue partner requirements linked to assessment, data or quality assurance

4. Regulatory and Compliance Risks

Definition

Risks that impact UKCBC's ability to comply with legal, regulatory or external assurance requirements. These include risks related to OfS readiness, statutory returns, legal compliance and mandatory reporting.

Scope and Boundaries

Regulatory risks relate to compliance with external frameworks. Partner driven academic risks belong in Category 5 unless the risk extends beyond partnership arrangements.

Examples

- Sector level: Introduction of new DfE rules affecting private HE providers.
- UKCBC specific: Inaccurate data returns submitted to partners that would undermine future OfS registration.
- UKCBC specific: Insufficient evidence to meet OfS Conditions B1 B2 or B4 when applying for registration.

Indicators / Red Flags

- recurring errors in statutory or partner data returns
- unclear ownership of compliance processes
- lack of documentation for regulatory evidence
- legal updates not implemented in policy or practice

5. Operational Delivery Risks

Definition

Risks that affect the operational functions required to deliver UKCBC's academic and corporate activities. These include estates, IT, staffing, timetabling, systems, health and safety and core administrative processes.

Scope and Boundaries

Operational risks concern routine delivery of services and infrastructure. Disruptions that result in major consequences may also be classified under business continuity.

Examples

- Sector level: Widespread IT outages affecting access to teaching systems.
- UKCBC specific: Staff shortages impacting timetabled delivery at a campus.
- UKCBC specific: Persistent delays in student registration or onboarding processes.

Indicators / Red Flags

- repeated operational service failures
- unresolved IT or estate defects
- chronic understaffing in critical roles
- delays in essential student or staff processes

6. Business Continuity and Incident Management Risks

Definition

Risks that threaten the continued operation of the College or a major service, including those arising from significant incidents, emergencies or external disruptions.

Scope and Boundaries

These risks involve severe disruption requiring immediate action. They do not include minor operational issues unless they escalate to a continuity threat.

Examples

- Sector level: Flood, fire or utilities failure leading to campus closure.
- UKCBC specific: Extended IT system outage preventing access to student records or assessment data.
- UKCBC specific: Major incident affecting the safety or accessibility of a campus.

Indicators / Red Flags

- lack of tested business continuity arrangements
- over reliance on single systems or suppliers
- unexplained delays in incident response
- insufficient backup or data recovery capability

End of Appendix A

Appendix B – Risk Scoring Guidance Pack

This appendix provides detailed guidance to support consistent and proportionate risk scoring across UKCBC. It should be used by all risk owners when identifying, assessing or updating risks within the corporate or academic risk registers.

The guidance balances structure with judgement: UKCBC uses objective measures to support scoring, but final assessments must reflect professional insight and context.

1. Introduction

Risk scoring at UKCBC follows a five-by-five model using **likelihood** and **impact**. This appendix provides the supporting tools that enable staff to apply the model consistently. It includes descriptors, objective thresholds, worked examples and a scoring flowchart.

The purpose of this guidance is to ensure:

- consistent scoring across academic and corporate areas
- transparent rationale behind each risk rating
- clear alignment with partner expectations and UKCBC's operational context
- accurate escalation and reporting to governance bodies

This appendix should be read alongside:

- the main risk framework
- **Appendix A** (risk categories)
- **Appendix F** (escalation map)

2. Likelihood Scale

Likelihood reflects how probable it is that a risk will occur within a typical operational period.

Risk owners must consider:

- historical patterns

- partner reports
- internal data trends
- environmental or sector changes
- staff feedback or early warning signals

Score	Descriptor	Narrative Description
1 – Rare	Highly unlikely to occur	No known history of similar issues. Would require multiple failures to materialise.
2 – Unlikely	Possible but not expected	Could occur in exceptional circumstances. No current trend or warning signs.
3 – Possible	Could realistically occur	Some early indicators or previous incidents. Could happen under certain conditions.
4 – Likely	Expected to occur	Clear pattern, repeated concerns or strong indicators. Predictable in current environment.
5 – Almost Certain	Imminent or recurring	Known issue that happens frequently or is already occurring. Very strong evidence base.

Narrative guidance:

Likelihood should be based on evidence. “Possible” should not be used as a default. If early indicators or recurring patterns are present, likelihood should lean towards “Likely” or “Almost certain”.

3. Impact Scale

Impact reflects the severity of consequences if the risk materialises.

Risk owners must always select the **highest potential impact**, even if other impacts are lower.

Score	Descriptor	Narrative Description
1 – Insignificant	No meaningful disruption	Easily resolved. No partner escalation. No impact on students or operations.
2 – Minor	Small, contained effect	Localised issue with limited visibility. Minor correction needed.

3 – Moderate	Noticeable impact	Requires intervention. Partner or student concern likely. Impacts specific cohorts or processes.
4 – Major	Significant institutional effect	Disrupts operations or academic activity. Loss of partner confidence likely.
5 – Severe	Critical institutional failure	Threatens academic standards, solvency, continuity or regulatory readiness. Immediate senior oversight required.

4. Objective Impact Measures

Objective measures help risk owners select consistent impact ratings. They support fairness and reduce variation across teams.

4.1 Financial Impact

Score	Indicator Thresholds
1	<£10k variation. No impact on cash flow.
2	£10k–£50k variation. Manageable locally.
3	£50k–£150k variation. CMT intervention needed.
4	£150k–£300k variation. Risk to cash reserves.
5	>£300k variation. Solvency or continuity risk.

4.2 Reputational Impact

Score	Indicator Thresholds
1	Internal only. No external visibility.
2	Localised concern. One partner query.
3	Recurring partner concerns or cluster of student complaints.
4	Major partner escalation. Multi cohort dissatisfaction.
5	Public criticism. High likelihood of regulatory interest.

4.3 Regulatory Impact

Score	Indicator Thresholds
1	Minor oversight with no regulatory relevance.
2	Delayed or incomplete submission. Correctable.
3	Concern noted in partner monitoring.
4	Significant non-compliance with franchise obligations.
5	Serious regulatory exposure. OfS registration risk.

4.4 Academic Quality and Standards Impact

Score	Indicator Thresholds
1	Minor marking inconsistency resolved internally.
2	Pattern of small variations requiring faculty action.
3	Partner queries academic integrity or assessment boards.
4	Verified concern affecting marking reliability or moderation.
5	Systemic failure threatening franchise approval.

4.5 Student Outcomes Impact

Score	Indicator Thresholds
1	Small single cohort variance. Easily resolved.
2	Decline in one area requiring action.
3	Multiple cohorts affected. Partner concerns expected.
4	Significant drop in continuation or completion.
5	Structural outcomes failure affecting partner confidence and B3 readiness.

4.6 Operational Impact

Score	Indicator Thresholds
1	Brief service interruption. No impact on teaching.
2	Local disruption quickly resolved.

3	Persistent IT, estates or staffing issues.
4	Major operational failure affecting delivery.
5	Campus closure or loss of major system/function.

5. Combined Scoring and Interpretation

Likelihood × Impact gives a total score between **1 and 25**.

Scores determine institutional oversight level:

Score Range	Band	Interpretation
1–5	Very Low	Routine management.
6–10	Low	Monitor and maintain controls.
11–15	Moderate	Requires active management.
16–20	High	CMT oversight required.
21–25	Very High	Urgent action and RAC escalation.

Narrative guidance:

If a risk reaches "High" or "Very High", the expectation is escalation to CMT. "Very High" triggers mandatory review by RAC.

6. Worked Examples

Example 1 – Academic Integrity Concern

Emerging use of AI tools leads to increased suspicion of misconduct in Level 5 assessments.

- Likelihood: 4 (Likely, based on pattern and sector trend)
- Impact: 3 (Moderate academic integrity implications)
- Total Score: **12 – Moderate**

Example 2 – Cash Flow Deterioration

Forecast shows cash reserves may drop below minimum tolerance within two months.

- Likelihood: 5 (Almost certain)
- Impact: 5 (Severe financial consequence)
- Total Score: **25 – Very High**

Example 3 – Partner Reporting Deadline Risk

A key monitoring return is at risk of delay.

- Likelihood: 3 (Possible)
- Impact: 3 (Partner concern expected)
- Total Score: **9 – Low**

7. Scoring Flowchart

(A visual version will be included in the final design pack. Textual version below.)

1. Identify the risk and describe it clearly
2. Identify all potential consequences
3. Use objective measures to assign the highest impact score
4. Assess likelihood using data and judgement
5. Multiply likelihood × impact
6. Record controls and reassess residual risk
7. Apply escalation criteria
8. Enter into correct register (corporate or academic)
9. Update monthly
10. Provide commentary for RAC and Board reports where required

End of Appendix B

Appendix C – Corporate Risk Register Template

This appendix sets out the structure and requirements for the UKCBC Corporate Risk Register. All corporate risks must be submitted and updated using the UKCBC Risk Management Form, which serves as the sole input mechanism. The Corporate Risk Register is generated automatically from form submissions and maintained by the DGQSS within the Microsoft Teams workspace.

The purpose of this appendix is to ensure that risks are recorded in a consistent format, assessed in line with UKCBC scoring guidance, and reviewed through the College's corporate governance structure.

Access to the Risk Management Form

The Corporate Risk Register is populated exclusively from submissions via the **UKCBC Risk Management Form.**

➡ *Submit or update a risk here:*

1. Corporate Risk Register Data Fields

The Corporate Risk Register is generated from the data entered the UKCBC Risk Management Form. The form contains the following fields, which are divided into user entered fields and system generated fields to support consistency and auditability.

User Entered Fields (completed via the UKCBC Risk Management Form)

Field	Description
Risk Category	Selected from the approved list in **Appendix A**.
Risk Title	Clear and concise summary of the risk.
Risk Description	Cause, event and consequence statement describing the nature of the risk.
Inherent Likelihood	Score selected from the five-point scale in **Appendix B**.
Inherent Impact	Score selected from the five-point scale in **Appendix B**.
Controls in Place	Current, active control measures only.

Residual Likelihood	Likelihood score after considering existing controls.
Residual Impact	Impact score after considering existing controls.
Risk Owner	Individual responsible for monitoring and managing the risk.
Actions Required	Specific, time bound mitigation actions.
Action Owner	Person responsible for completing each action.
Due Date	Date by which each action must be completed.
Monthly Status Update	Short narrative summarising movement, progress and issues.

System Generated Fields (created automatically in the Corporate Risk Register)

Field	Description
Risk ID	Unique identifier assigned by the system.
Inherent Score	Calculated as Likelihood × Impact.
Residual Score	Calculated as Likelihood × Impact.
RAG Rating	Applied automatically using thresholds in Section 3 of this appendix.
Escalation Route	Determined by residual score using *Appendix F*.

2. Guidance for Completing the UKCBC Risk Management Form

All corporate risk updates must be submitted through the UKCBC Risk Management Form. This ensures that the Corporate Risk Register remains accurate, aligned to governance processes and consistent across departments.

Completing the Form

- Risk Category must reflect the primary nature of the risk. Appendix A should be consulted if uncertain.
- Risk Title should be specific and limited to one line.
- Risk Description must follow the structure: Cause → Event → Consequence.

- Inherent Scores must be selected before considering existing controls.
- Controls in Place should be factual and describe what is already operating.
- Residual Scores must reflect the expected likelihood and impact if all controls operate effectively.
- Actions Required must be time bound and linked to the underlying cause of the risk.
- Monthly Status Update should summarise progress in fewer than seventy words.

Update Cycle

Risk owners must submit updates via the form between the first and fifth working day of each month to support:

- monthly review by the College Management Team
- quarterly oversight by the Risk and Audit Committee
- assurance reporting to the Board of Governors

3. RAG Rating Criteria

The RAG rating is generated automatically from the residual risk score.

Residual Score	Band	RAG Rating
1–10	Very Low to Low	Green
11–15	Moderate	Amber
16–20	High	Red
21–25	Very High	Red (with mandatory escalation)

4. Escalation and Reporting

Escalation is determined by the residual score and is applied automatically in the Corporate Risk Register.

Score Band	Escalation Requirement

Moderate (11–15)	Discussed by the College Management Team.
High (16–20)	Mandatory review at CMT and referred to the DGQSS for monitoring.
Very High (21–25)	Automatically escalated to the Chair of the Risk and Audit Committee. The Board of Governors is informed through the RAC report.

Risks that deteriorate significantly between meetings must be raised immediately with the DGQSS.

5. Output, Storage and Data Integrity

The Corporate Risk Register is generated automatically from the form submissions and held within the protected Microsoft Teams risk workspace. Only the DGQSS may amend system generated fields or formulas. Monthly versions are archived to maintain a complete audit trail.

The register feeds directly into:

- the monthly CMT Assurance Report
- the quarterly RAC Risk Update
- the Board's risk overview report

This ensures that risk information is accurate, reconciled and consistent across all governance bodies.

End of Appendix C

Appendix D – Academic Quality and Standards Risk Register Template

This appendix sets out the structure of the Academic Quality and Standards Risk Register. It supports academic leaders and programme teams in identifying and monitoring risks that affect teaching quality, academic standards, student outcomes and compliance with university partner requirements. All academic risks must be submitted via the UKCBC Risk Management Form, which acts as the single input mechanism for the register. The register itself is generated automatically and maintained within the Microsoft Teams workspace.

This appendix ensures that UKCBC's academic risk management aligns with university partner expectations, UK sector practice and the internal quality governance structure.

1. Purpose of the Academic Quality and Standards Risk Register

The Academic Quality and Standards Risk Register captures risks relating to:

- UKCBC's ability to maintain academic standards consistently
- the quality of teaching, learning and assessment
- adherence to awarding partner expectations
- the student experience and their academic outcomes
- data accuracy, moderation, external examining and quality assurance processes
- alignment with the OfS B Conditions and expectations for future registration

The register is reviewed monthly by the Quality of Education Group (QOE), monthly by the College Management Team (CMT), and quarterly by the Risk and Audit Committee (RAC).

2. Academic Risk Register Data Fields

The Academic Quality and Standards Risk Register includes the fields listed below. These mirror the corporate register but contain content that is specific to academic risk assessment. All user entered fields are submitted through the UKCBC Risk Management Form.

User Entered Fields (via the Risk Management Form)

Field	Description
Risk Category	Selected from Appendix A (usually Academic Quality and Standards).
Risk Title	Clear academic focused summary, e.g. “Inconsistent internal moderation”.
Risk Description	Cause, event and consequence narrative focusing on academic standards or outcomes.
Inherent Likelihood	Selected using the Appendix B scoring descriptors.
Inherent Impact	Scored using the academic objective measures in Appendix B.
Controls in Place	Active academic or quality assurance controls (such as moderation, observations, validation conditions).
Residual Likelihood	Expected likelihood after considering controls.
Residual Impact	Expected impact after controls.
Risk Owner	Usually an academic lead, Head of Department, or Quality Lead.
Actions Required	Academic interventions, quality assurance improvements or compliance actions.
Action Owner	Responsible academic or quality staff member.
Due Date	Deadline for each action.
Monthly Status Update	Summary of progress, changes or new evidence.

System Generated Fields (output only)

Field	Description
Risk ID	Automatically assigned.
Inherent Score	Calculated as Likelihood × Impact.
Residual Score	Calculated automatically.
RAG Rating	Assigned automatically using thresholds.

Escalation Route	Determined by the scoring model.

3. Academic RAG Rating Criteria

The automatic RAG rating thresholds match the corporate register, ensuring institutional consistency.

Residual Score	Band	RAG Rating
1–10	Very Low to Low	Green
11–15	Moderate	Amber
16–20	High	Red
21–25	Very High	Red (mandatory escalation)

Academic risks often move between bands more frequently than corporate risks due to assessment cycles and quality monitoring timetables. Risk owners must report material change immediately.

4. Academic Escalation and Reporting

Academic escalation reflects both institutional and partner expectations:

Score Band	Escalation Requirement
Moderate (11–15)	Discussed at the monthly Quality of Education Group. Actions monitored through CMT.
High (16–20)	Mandatory CMT review. Reported at the next QOE. Quality Lead to notify relevant university partner if partner provision is materially affected.
Very High (21–25)	Immediate escalation to the Director of Education and DGQSS. Referred to RAC. Partner notification required following partner protocol.

Academic leaders must also determine whether the risk indicates:

- deterioration in a specific programme
- a systemic quality assurance failure

- a partner facing compliance issue
- an emerging threat to future OfS B Condition readiness

These must be highlighted in the monthly narrative.

5. Use of the UKCBC Risk Management Form for Academic Risks

All academic risk owners must use the UKCBC Risk Management Form to:

- create new academic risks
- update existing entries
- provide monthly status commentary
- report deterioration or improvement
- submit evidence for QOE review

The form ensures data integrity and supports automated dashboards, academic trends reporting and partner quality returns.

6. Academic Quality Controls to Reference in Form Submissions

When recording controls, academic risk owners may reference:

- moderation and second marking processes
- external examiner reports
- partner quality assurance requirements
- teaching observation cycles
- programme monitoring
- student feedback and module evaluations
- attendance monitoring procedures
- action plans from QOE or validation events
- assessment board scrutiny

- data integrity checks for outcomes reporting

Risk owners must list only active controls that are in place at the time of submission.

7. Monthly Review Expectations

Academic risks must be reviewed as follows:

- Quality of Education Group (monthly): Focus on emerging patterns in teaching, assessment, delivery, moderation and outcomes.
- College Management Team (monthly): Cross referencing academic risks with financial, operational or strategic drivers.
- Risk and Audit Committee (quarterly): assurance on trends, controls and evidence for oversight of academic standards.

The DGQSS compiles a consolidated risk report drawing on both the corporate and academic registers for RAC and the Board.

8. Integration with Partner Reporting

Where a risk affects franchised provision, the DGQSS and Academic Director ensure that:

- risk mitigation aligns with partner quality expectations
- necessary notifications or returns are submitted on time
- partner concerns are recorded, addressed and tracked in the risk narrative
- academic risks feed into annual monitoring processes and action plans

9. Storage, Output and Audit Trail

The Academic Quality and Standards Risk Register:

- is auto generated from the UKCBC Risk Management Form
- is held in the protected Microsoft Teams workspace
- is backed up and archived monthly by the DGQSS

- is not editable except through the form submission process

This ensures a full audit trail of all academic risk decisions, consistent with university partner expectations.

End of Appendix D

Appendix E – Academic Quality and Standards Risk Categories and Triggers

This appendix provides detailed subcategories, descriptors and indicative triggers to assist academic leaders in identifying and classifying academic quality and standards risks. It supports consistent scoring and ensures alignment with UKCBC's partner obligations and internal academic governance processes.

The categories and triggers outlined here are designed to work alongside Appendix A (Risk Category Definitions) and Appendix B (Scoring Guidance). They help staff decide whether issues should be recorded as risks, monitored as routine quality issues or escalated for academic governance action.

1. Purpose of This Appendix

Academic risk identification requires professional judgement. This appendix strengthens that judgement by:

- clarifying the subcategories of academic risk most relevant to UKCBC
- offering indicators, early warning signs and escalation triggers
- ensuring alignment with university partner quality standards
- supporting consistent classification across campuses and departments
- enabling early intervention in academic issues that may escalate to wider institutional risk

This appendix does not replace academic policies or procedures. It informs how concerns feed into the Academic Quality and Standards Risk Register.

2. Academic Quality and Standards Sub-Categories

UKCBC operates primarily under franchised delivery models. Academic risk must therefore reflect both internal academic controls and partner expectations. Academic risks typically fall into the following sub-categories.

2.1 Teaching, Learning and Assessment Quality

Risks that affect the quality, effectiveness or consistency of teaching delivery or assessment design.

Triggers

- declining teaching observation outcomes
- poor student feedback across a module or cohort
- inconsistent assessment briefs or unclear marking criteria
- delays in feedback turnaround
- curriculum not followed as validated with partner
- gaps in teaching resource or expertise

2.2 Internal Moderation and Academic Standards

Risks relating to the integrity and reliability of marking, moderation, assessment decisions and record keeping.

Triggers

- partner moderation identifying significant marking variance
- repeated inconsistencies between markers
- missing evidence of internal moderation
- late or incomplete moderation reports
- concerns raised by External Examiners
- missing or inaccurate records presented at assessment boards

2.3 Student Engagement, Progression and Outcomes

Risks that affect students' ability to succeed academically.

Triggers

- persistent low attendance in one or more cohorts
- downward trends in continuation or completion
- clustering of academic appeals or complaints
- significant proportion of students at risk of failure
- barriers to student progression between levels

2.4 Data Quality and Academic Records

Risks arising from inaccurate or inconsistent academic data used for partner reporting, assessment boards or internal monitoring.

Triggers

- conflicting assessment marks across systems
- inaccuracies in student registration or module selection
- delays in uploading results to partner systems
- failure to meet reporting deadlines
- data discrepancies identified by partners or auditors

2.5 Academic Integrity and Misconduct

Risks relating to plagiarism, artificial intelligence misuse, collusion or other academic misconduct.

Triggers

- increased volume of academic misconduct referrals
- patterns of similarity across cohorts or modules
- gaps in assessment design that increase misconduct risk
- staff reporting uncertainty about AI detection or guidance
- partner queries about integrity concerns

2.6 Partner Compliance in Academic Delivery

Risks associated with meeting university partner academic expectations.

Triggers

- missed partner reporting deadlines
- partner queries on quality assurance evidence
- non-compliance with partner assessment regulations
- delays in actioning partner recommendations
- partner escalation or increased monitoring

2.7 Academic Governance and Continuous Improvement

Risks arising from academic governance structures, committees or processes failing to operate effectively.

Triggers

- incomplete actions from previous QOE or partner reviews
- outdated or missing programme documentation
- gaps in annual monitoring returns
- unclear ownership of academic risks or actions
- slow response to quality assurance issues

3. Frequency-Based Triggers and Thresholds

Certain academic issues become risks only when frequency, complexity or magnitude increases. The table below supports judgement.

Indicator	**Quality Issue**	**Academic Risk**	**Serious Academic Risk**
Moderation Variance	Single marker inconsistency	Pattern over two cycles	Pattern across programmes or campuses

Student Complaints	Individual complaint	Cluster in a module	Cross cohort or cross campus trend
Attendance	Temporary dip	Sustained decline over a term	Multiple cohorts below baseline
Partner Queries	Routine clarification	Repeated follow up	Partner escalation or formal concern
Assessment Timelines	One late submission	Recurring delays	Structural failure affecting multiple boards

4. Thresholds for Adding Items to the Academic Risk Register

Academic teams should add an issue to the Academic Quality and Standards Risk Register when:

1. It is likely to recur and is not resolved by routine quality processes.
2. It has measurable impact on student experience or outcomes.
3. It exposes UKCBC to partner compliance or reputational risk.
4. It indicates a systemic weakness rather than an isolated incident.
5. It shows high likelihood of affecting assessment boards or academic standards.
6. It could weaken evidence required for OfS B Conditions in future registration.

If uncertain, academic leaders should discuss the matter at the next Quality of Education Group.

5. Committee Roles and Triggers for Escalation

Quality of Education Group (Monthly)

- reviews new academic risks
- monitors trends in assessment, moderation, outcomes and integrity
- agrees required actions and provides scrutiny

- escalates High and Very High risks to CMT

College Management Team (Monthly)

- considers cross departmental or institution level academic impacts
- ensures academic risks align with financial, operational and strategic risks
- assigns resources where needed
- escalates Very High risks to RAC

Risk and Audit Committee (Quarterly)

- monitors assurance over academic standards
- receives academic risk analysis and trends
- considers partner impacts and escalation history
- reports significant matters to the Board of Governors

6. Integration with Partner Quality Assurance

Academic risks must be cross referenced to partner expectations and academic frameworks. If a risk affects:

- assessment boards
- moderation
- programme delivery
- data returns
- statutory reporting
- student outcomes
- partner reputation

The DGQSS must ensure that university partners are notified in accordance with partnership agreements.

7. Expectations of Academic Risk Owners

Academic staff with responsibility for risks must:

- use the UKCBC Risk Management Form for all submissions
- update academic risks between the first and fifth working day of each month
- provide evidence-based scoring
- consult Appendix B when determining likelihood and impact
- ensure controls reflect actual operations
- highlight partner implications in the monthly narrative
- raise urgent issues directly with the Director of Governance, Quality and Student Success.

End of Appendix E

Appendix F – Escalation Map

This appendix sets out the escalation pathways for risks submitted through the UKCBC Risk Management Form. It aligns with the Internal Management Framework (IMF), which defines the College's governance environment, Key Decision-Making Groups (KDMGs), assurance structures and reporting pathways. The escalation map ensures that risks move appropriately from operational areas through KDMGs, to the Executive Leadership Team (ELT), and to the relevant Board Committees and the Board of Governors.

The Director of Governance, Quality and Student Success (DGQSS) is the College's senior assurance officer for governance, quality and risk. All High and Very High risks are escalated to the DGQSS in accordance with the IMF.

1. Purpose of the Escalation Map

The escalation map provides a structured and transparent method for escalating risk in line with the IMF. It ensures that:

- risks are reviewed at the appropriate KDMG level
- the DGQSS provides senior oversight and assurance
- high-impact risks reach ELT, Board Committees and the Board
- academic and corporate risks follow consistent escalation pathways
- the escalation routes integrate with the College's assurance environment

This appendix should be read alongside **Appendix B** (Scoring), **Appendix C** and **D** (Registers), and the Internal Management Framework.

2. Escalation Principles

1. Residual risk score determines the initial escalation route, with separate pathways for academic and corporate risks as described in the IMF.
2. The DGQSS is the senior assurance officer, receiving all High and Very High risks for oversight and coordination.

3. KDMGs (CMT and QOE) review risks at operational and academic decision-making levels.
4. ELT, as the Executive KDMG, reviews High and Very High risks with potential institution-wide impact.
5. Board Committees (RAC, Finance, R&S) review risks relevant to their remit.
6. The Board of Governors receives Very High risks through RAC.
7. All escalations must be made through the UKCBC Risk Management Form to maintain audit integrity.

3. Escalation by Residual Score

Residual Score	Risk Band	Escalation Requirement	Recipients	Governance Tier
1–10	Very Low / Low	Managed locally. No formal escalation.	Line Manager	Operational Level
11–15	Moderate	Reviewed by CMT (Operational KDMG).	CMT Lead → CMT	KDMG Level
16–20	High	Mandatory escalation to DGQSS. DGQSS escalates to ELT (Executive KDMG). Academic risks also to Director of Education and QOE.	DGQSS → ELT → QO E if academic	Executive KDMG Level
21–25	Very High	Immediate escalation to DGQSS within 24 hours. DGQSS notifies RAC Chair within 48 hours. ELT undertakes urgent review. Included in RAC and Board reporting.	DGQSS → RAC Chair → ELT → Board	Board Committee and Board Level

4. Escalation Flow

Step 1 – Submission

Risk Owner submits the UKCBC Risk Management Form.

Step 2 – Automated Classification

System assigns the risk band based on residual score.

Step 3 – Escalation Routes

Residual Score 1–10 (Low)

- Reviewed at operational line management level
- No escalation to KDMGs

Residual Score 11–15 (Moderate)

- Escalated to CMT Lead
- Considered by CMT as an Operational KDMG
- Academic risks also discussed at QOE

Residual Score 16–20 (High)

- Automatically escalated to the DGQSS as Senior Assurance Officer
- DGQSS determines institutional impact and escalates to ELT as the Executive KDMG
- Academic risks also referred to the Director of Education and QOE
- CMT monitors actions

Residual Score 21–25 (Very High)

- Immediate escalation to the DGQSS within 24 hours
- DGQSS notifies RAC Chair within 48 hours
- ELT reviews urgent mitigation

- Included in RAC report and Board summary

5. Escalation Between Meetings

Risks must be escalated between scheduled meetings when:

- new information increases severity or likelihood
- an academic or operational control fails
- a partner raises a concern with compliance implications
- cross campus or cross programme issues emerge
- student outcomes or academic standards are threatened

Interim notifications must be made directly to the DGQSS.

6. Academic Risk Escalation

Academic risks follow the IMF's academic governance structure:

- High or Very High academic risks are escalated to the DGQSS
- DGQSS escalates to Director of Education and QOE
- Where strategic impact is identified, risks are escalated to ELT
- Risks affecting partner compliance follow partner reporting requirements

Triggers include:

- systemic moderation issues
- adverse external examiner findings
- academic integrity concerns
- deterioration in outcomes affecting multiple cohorts

7. Partner Compliance Escalation

Partner compliance risks must be escalated to the DGQSS who:

- ensures contractual notification requirements are met
- coordinates responses with Directors, CMT and QOE
- ensures alignment between academic and corporate mitigations
- reports significant issues through ELT and RAC

8. Reporting to Governance Bodies

Group	IMF Role	Receipt of Escalated Risks
QOE	Academic KDMG	Moderate and High academic risks
CMT	Operational KDMG	Moderate and High risks
ELT	Executive KDMG	All High and Very High risks
RAC	Board Sub Committee	Very High risks; selected High risks
Board of Governors	Governing Body	Very High risks via RAC

9. Audit Trail Requirements

All escalations must be recorded through:

- the UKCBC Risk Management Form
- the automated system audit log
- archived risk register snapshots
- reporting to CMT, QOE, ELT, RAC and the Board

The DGQSS maintains final oversight of the escalation audit trail within the IMF assurance environment.

End of Appendix F

Appendix G – Roles and Responsibilities

This appendix defines the roles and responsibilities that support effective risk management across UKCBC. It aligns to the Internal Management Framework (IMF), which sets out how Key Decision-Making Groups (KDMGs), senior officers, committees and the Governing Body operate together as a coherent system of control and assurance. These responsibilities ensure that risks are identified, evaluated, escalated and monitored in a consistent and proportionate manner.

The Director of Governance, Quality and Student Success (DGQSS) is the senior assurance officer for governance, quality and risk. This role maintains oversight of corporate and academic risks and ensures that escalation and reporting follow the IMF.

1. Governance Level

1.1 Board of Governors

The Board of Governors is the Governing Body and holds ultimate accountability for oversight of risk across the institution. It:

- receives assurance that risk management arrangements are effective
- reviews Very High risks and their mitigations through the Risk and Audit Committee
- approves the Risk Management Framework and associated policies
- considers risks that may affect strategic direction, sustainability or student success
- receives reports from the DGQSS as Clerk to the Board

1.2 Risk and Audit Committee (RAC)

RAC is a key assurance committee of the Board. It:

- reviews High and Very High risks escalated by the DGQSS
- evaluates the adequacy of controls and assurance sources

- tests whether risk management processes meet IMF expectations
- monitors patterns and trends across academic and corporate risk profiles
- reports findings and recommendations to the Board

1.3 Finance Committee

The Finance Committee considers risks affecting financial health, sustainability, cash position and resource allocation. It:

- reviews financial risks and mitigation actions
- advises the Board on financial elements of major strategic risks
- monitors the impact of risk on revenue, expenditure and future planning

1.4 Remuneration and Search Committee

This committee considers risks relating to leadership capacity, Board effectiveness and senior staff performance. It:

- monitors risks relating to succession planning
- advises the Board on recruitment and capability matters
- ensures that the leadership structure supports risk management across the College

2. Executive Level

2.1 Chief Executive Officer (CEO) – Accountable Officer

The CEO holds institutional accountability for the effectiveness of risk management. The CEO:

- ensures that risk management operates according to the IMF
- chairs or directs the ELT in reviewing strategic and severe risks
- leads the institutional response to major risks or incidents

- ensures resources are aligned to mitigate significant risks

2.2 Chief Legal and Compliance Officer

This role ensures legal and regulatory compliance across the College. The Chief Legal and Compliance Officer:

- monitors compliance risks and advises on controls
- supports the DGQSS in areas of statutory or regulatory assurance
- ensures that regulatory obligations are met in relation to partnerships, data and corporate matters

2.3 Director of Governance, Quality and Student Success (DGQSS) – Senior Assurance Officer

The DGQSS is the College's senior assurance officer. This role provides oversight of governance, quality, academic standards and risk. Responsibilities include:

- receiving and reviewing all High and Very High risks
- ensuring escalation in line with the IMF and Appendix F
- notifying the RAC Chair of Very High risks within required timeframes
- ensuring risk information is accurate, timely and complete
- coordinating reporting to CMT, QOE, ELT, RAC and the Board
- maintaining the College's risk registers and the digital risk environment
- acting as Clerk to the Board and ensuring governance integrity

2.4 Director of Operations, Innovation and Commercial Success

This Director oversees risks relating to operations, commercial activity, estates, IT infrastructure and College services. Responsibilities include:

- ensuring operational risks are identified and controlled
- supporting mitigation measures that involve estates, systems or service delivery

- informing the DGQSS and ELT about operational impacts of High risks

3. Academic Governance Roles

3.1 Quality of Education Group (QOE) – Academic KDMG

QOE is the primary academic KDMG under the IMF. It:

- reviews academic quality and academic standards risks monthly
- identifies emerging issues in learning, teaching, assessment and student outcomes
- monitors academic actions and improvement measures
- escalates High academic risks to the DGQSS and the Director of Education

3.2 Director of Education

The Director of Education provides academic leadership and oversight of academic quality. Responsibilities include:

- overseeing risks related to teaching quality, curriculum delivery and assessment
- reviewing academic risks escalated by Course Directors and Heads of Department
- working with the DGQSS to ensure academic standards are upheld
- supporting QOE in addressing and resolving academic risks

3.3 Course Directors and Heads of Department

These roles hold operational oversight of academic delivery within programmes and departments. They:

- identify academic risks early and submit them through the Risk Management Form
- monitor assessment, moderation, student engagement and progression
- implement agreed mitigations and track their impact

- escalate concerns immediately to the Director of Education and DGQSS

4. Operational Management Roles

4.1 College Management Team (CMT) – Operational KDMG

CMT is an Operational KDMG within the IMF. It:

- reviews Moderate and High risks across academic and corporate areas
- provides operational challenge, scrutiny and collective decision making
- coordinates cross departmental mitigations and resource allocation
- escalates High risks to the DGQSS and ELT

4.2 Head of Administration & Registry

The Head of Administration & Registry undertakes lead responsibility for risks relating to data, student records, reporting and compliance returns. This role:

- identifies and manages risks associated with data quality and accuracy
- ensures timely and accurate submissions to university partners
- supports QOE, CMT and ELT in assessing data related academic risks

4.3 Student Support Services Manager

This role oversees risks relating to student welfare, engagement, inclusion and support. The manager:

- monitors risks that may affect continuation, wellbeing or engagement
- works with academic teams on at risk student reporting
- escalates concerns to the DGQSS and Director of Education as required

4.4 IT Manager

The IT Manager oversees risks relating to technology, cybersecurity and systems reliability. The role:

- reviews vulnerabilities and service continuity risks
- ensures controls are implemented for system resilience
- escalates significant incidents to the DGQSS and Director of Operations

4.5 Estates Manager

The Estates Manager oversees risks related to health, safety, facilities and the physical environment. Responsibilities include:

- identifying health and safety risks
- ensuring compliance with statutory requirements
- **escalating any issues that may affect student or staff safety**

5. Individual Risk Roles

5.1 Risk Owners

Risk Owners are responsible for:

- identifying and recording risks through the Risk Management Form
- evaluating risks in line with **Appendix B**
- implementing and monitoring mitigation actions
- updating risks monthly and escalating deterioration immediately

5.2 Action Owners

Action Owners are assigned specific mitigation tasks. They:

- complete actions by agreed deadlines
- provide progress updates to the Risk Owner
- support the delivery of risk controls within their area

6. Summary of Escalation Responsibilities (IMF Aligned)

- Risk Owner → monitors and submits updates
- CMT Lead → oversees Moderate risks
- CMT (Operational KDMG) → reviews Moderate and High risks
- DGQSS (Senior Assurance Officer) → receives High and Very High risks
- QOE (Academic KDMG) → reviews academic risks
- ELT (Executive KDMG) → strategic review of High and Very High risks
- RAC → independent assurance for Very High risks
- Board of Governors → receives Very High risks via RAC

End of Appendix G

Appendix H – Risk Appetite Statement

This appendix sets out the level of risk that UKCBC is willing to accept in pursuit of its strategic aims. It supports decision making within the Internal Management Framework by defining the College's appetite across key risk categories. The risk appetite is approved by the Board of Governors and provides guidance to the Executive Leadership Team (ELT), Key Decision-Making Groups (KDMGs), managers and staff when assessing, escalating and responding to risk.

The statements below should be read alongside Appendix B (Scoring Guidance) and Appendix F (Escalation Map).

1. Purpose of the Risk Appetite Statement

The purpose of the College's Risk Appetite Statement is to:

- provide clarity on the level of risk the College is prepared to accept
- support proportionate and evidence informed decision making
- ensure that risks are managed in line with student success, academic quality and regulatory expectations
- guide escalation and prioritisation across KDMGs
- strengthen planning, assurance and accountability under the Internal Management Framework

Risk appetite varies across different categories and is reviewed annually by the Board as part of its oversight responsibilities.

2. Overarching Statement

UKCBC maintains a cautious to moderate risk appetite overall.

The College seeks to innovate and improve its academic and operational delivery, but will not accept risks that threaten:

- academic standards
- student welfare or success

- financial sustainability
- regulatory or partner compliance
- institutional reputation

Where risks fall outside the stated appetite, they must be escalated in line with **Appendix F**.

3. Risk Appetite by Category

3.1 Academic Quality and Standards

Risk Appetite: Low

The College maintains a low appetite for any risks that could compromise the quality, integrity or reliability of academic delivery, assessment, student engagement, student outcomes or compliance with university partner requirements.

This low appetite reflects the College's responsibilities as a franchised provider and covers risks relating to:

- teaching, learning and assessment quality
- moderation, second marking and external examining
- assessment reliability and integrity
- continuation, progression, achievement and satisfaction
- data quality used for academic and partner reporting
- adherence to university partner regulations, deadlines and monitoring expectations
- programme delivery obligations and quality assurance submissions

Where risks arise in any of these areas:

- prompt mitigation is required
- early escalation to the Director of Education and the DGQSS is expected

- sustained negative trends must be escalated urgently through the academic governance route

The College will only accept minimal, controlled risk in this domain, and only where such risk does not disadvantage students or breach partner expectations.

3.2 Financial Sustainability and Planning

Risk Appetite: Moderate

UKCBC accepts a moderate degree of financial risk when:

- investing in growth
- redesigning delivery models
- initiating change programmes
- improving systems or infrastructure

However, risk appetite becomes low where risks threaten:

- liquidity
- solvency
- cash flow stability
- payroll continuity

Financial risks at High or Very High levels must be escalated to the DGQSS and ELT.

3.3 Operational Delivery

Risk Appetite: Moderate

The College accepts moderate risk in operational areas (IT, estates, timetabling, process redesign) where innovation may improve efficiency or student experience. However, appetite becomes low where safety, security or learning continuity may be compromised.

3.4 Data Quality and Information Management

Risk Appetite: Low

The College maintains a low appetite for risks associated with:

- student records
- reporting accuracy
- academic data
- partner returns
- statutory or regulatory submissions

Errors or data integrity concerns require immediate review by the Head of Registry and DGQSS.

3.5 Reputational Risk

Risk Appetite: Low

UKCBC does not accept risks that could cause sustained reputational harm with:

- students
- partners
- regulators
- the community
- prospective employers

Communication related risks must be managed promptly and escalated where needed.

4. Interaction with Escalation and Scoring

Where a risk exceeds the appetite set for its category:

- the risk must be escalated according to Appendix F
- the DGQSS reviews the adequacy of controls
- the relevant KDMG must determine whether additional mitigation is required
- ELT considers institutional or strategic implications
- RAC receives escalations where required by the scoring model

Risk appetite informs decision making but does not replace scoring or escalation obligations.

5. Annual Review

The Risk Appetite Statement is reviewed annually by the:

- DGQSS (for assurance and alignment with the IMF)
- Executive Leadership Team (for operational and academic impacts)
- Risk and Audit Committee (for independent scrutiny)
- Board of Governors (for approval)

Changes in partner expectations, regulatory environment or strategic priorities may require interim updates.

End of Appendix H