Item 12
For Approval

GLASGOW KELVIN COLLEGE

BOARD OF MANAGEMENT – 13 JUNE 2022

RISK APPETITE AND RISK REGISTER REVIEW

REPORT BY VICE PRINCIPAL OPERATIONS AND DIRECTOR OF CORPORATE SERVICES

1. Introduction

It is normal practice that the Strategic/College Risk Register is considered at every meeting of the Audit and Risk Committee, Risk Management Committee and is considered twice per year by the Board of Management, once per year by each of the other formal Sub Committees of the Board and reviewed by the College's Senior Management Team at least once a Quarter.

A copy of the Strategic/College Risk Register as at May 2022 is provided for information at **Appendix 1.**

2. Risk Management Activities

Since the last Audit and Risk Committee (in February 2022) and the Board of Management Meeting in March 2022, a number of activities have taken place in relation to Risk Management:

- Risk Management Committee meeting held on 19 April 2022.
- Communication and Marketing Department Risk Register prepared – currently being fully finalised.
- Members of the SMT, Incident Management Team and Marketing Team attended the training on Crisis Communications & Public Relations after a Cyber Security Incident. *(Note: This training was undertaken but did not deliver expected outcomes.)*
- The Learning and Teaching Committee and the Finance and Resources Committee have undertaken their annual review of the Strategic/College Risk Register.

3. Risk Appetite

The Risk Appetite, as set by members of the Board of Management, are contained within the Strategic/College Risk Register.

4. Risk Register Review

The Risk Title, Residual Risk Score and colour of the thirteen risks which could impact on the College's ability to deliver its strategic ambitions are summarised in the table below including Inherent Risks Scores/Categories and Residual Risks Scores/Categories.

Risk Nº	Date Identified	Risk Title	IR	IR2	RR	RR2	Risk Appetite Category	Movement in Period
1	Nov 21	SFC Review	20	Very High	12	High	1. Policy	↔
2	Nov 21	GKC Identity	16	Very High	9	High	2. Reputation	↔
3	Nov 21	People	20	Very High	9	High	5. Workforce	↑
4	Nov 21	Litigation / Compliance	16	Very High	6	Medium	7. Legal & Compliance (inc. H&S risks)	↑
5	Nov 21	Curriculum Relevance	16	Very High	9	High	6. Student Experience	↔
6	Nov 21	Sustainable Funding	16	Very High	12	High	3. Financial	↔
7	Nov 21	Student Experience	16	Very High	9	High	6. Student Experience	↔
8	Nov 21	Environment	16	Very High	9	High	8. Environmental Sustainability	↔
9	Nov 21	Digital Transformation	16	Very High	6	Medium	4. Digital	↔
10	Nov 21	Student Recruitment & Retention	20	Very High	12	High	6. Student Experience	↔
11	Nov 21	Cyber Risk	25	Very High	12	High	2. Reputation	↔
12	Dec 21	COVID-19 - Ongoing Implications	16	Very High	9	High	1. Policy	↓
13	Apr 22	Strike Action	25	Very High	16	Very High	6. Student Experience	New

The College considers risks on an ongoing basis, these include:

- Covid-19 and related negative effects on credits/delivery/students/staffing/ resources.
- An emerging/changed world/hybrid learning and teaching/working/the job market.
- Brexit and related negative effects on staffing, contractors and supplies i.e. shortages with suppliers now unable to meet deadlines.
- The impacts of the Climate Emergency.
- The Review of Coherent Provision and Sustainability of the Glasgow Region.
- Inflation/cost of living, high energy and ever-increasing food prices and the very negative impact on standards of living for everyone but particularly the lowest income households will feel this the most.
- National Insurance increases (April 2022).
- Increase in Living Wage costs.
- Mental health decline with some individuals fearful of going outside; COVID-19 impact.
- National Health Service has unprecedented delays to operations; the health of the nation will decline and the impact will be felt by the College.
- Cybersecurity threats are growing – from 2020, malware and ransomware attacks increased by 358% and 435% respectively outpacing the ability to respond to them effectively. In relation to our impending cyber security renewal, we are advised that the cyber insurance market has hardened considerably over the last 12-18 months, premiums have increased dramatically and underwriting requirements are far stricter than they have even been before.
- NJNC – Strike Action on the following dates:
  - Tuesday 26 April and Wednesday 27 April 2022;
  - Wednesday 04 May and Thursday 05 May 2022;
  - Thursday 12 May 2022;
  - Tuesday 17 May 2022;
  - Wednesday 25 May.2022;

- Monday 30 May and Wednesday 01 June 2022 – action cancelled for 1 June 2022;
- Tuesday 07 June and Thursday 09 June 2022 – dates suspended;
- Monday 13 June, Wednesday 15 June and Friday 17 June 2022 – dates suspended;
- Tuesday 21 June, Thursday 23 June and Friday 24 June 2022; and
- Monday 27 June, Tuesday 28 June and Wednesday 29 June 2022.

- Action short of strike action (ASOS) and withdrawal of goodwill by EIS members.
- UNISON also balloted for strike action but the turnout of those voting (48%) fell short of the mandatory thresholds set out in anti-trade union legislation to progress with industrial action.
- Budget Cuts for 2022-25.
- SFC – In Year Redistribution of Credit Activity for AY 2021-22.
- Foundation Apprenticeship delivery/Voluntary Severance Scheme being offered to team members due to changes to regional delivery.
- Ukraine/Russia conflict is resulting in warnings of increased likelihood of cyber-attacks i.e. on national infrastructure, defence companies, oil and gas infrastructure providers, financial instructions and government.
- Energy prices are forecasted to massively increase; gas on average by 232% and electricity by 41% as indicated by APUC/Procurement Scotland; this equates to an additional estimated total price of over £400k per annum for the College.
- The energy price hikes will place severe financial pressures on the already disadvantaged communities the College serves with many households unable to afford food and heating resulting in untold misery that will get worse as we head into autumn and winter.
- The College insurance company have advised of an almost weekly incident of student suicide.
- The wellbeing of any Russian employees needs to be fully considered.
- The emergence of Monkeypox (as a possible new next global pandemic) is being monitored accordingly.

5. Fire Risk Assessment

An annual fire risk assessment was carried out at all campuses; the final reports are available for review via the following link:

Link to Fire Risk Assessment reports

All actions referred to in these reports have been extracted and are contained within an Action Plan which is being worked through; this is attached as at **Appendix 2.**

6. Cladding

During a period of extremely windy weather, a very small cladding panel was dislodged from the Springburn Campus building. Checks of all panels were carried out and a report was provided in relation to the findings. The report can be reviewed via the following link:

Link to the Springburn Campus Cladding Report

During the period between the checks being conducted and the report being generated, a large panel (at ground level) became dislodged and was discovered on the ground in pieces. There is no reason known as to why this happened. This panel

was not on the report as referred to in the above paragraph and Struan have taken the broken panel to ascertain why this fell. Advice currently awaited.
Liaison has taken place with the College insurance company in relation to this matter and to provide them with the report received from Struan. The report from Struan identified a number of cracked panels and also a large number panels which are displaying rust spots; the cause of these cracks and rust spots is not 100% clear.

A structural survey is currently being conducted by another company we have used previously to ascertain what is causing the rust spots and why some panels are cracking. For this survey to be conducted we had to have an appropriate panel removed for analysis. The areas under where the cracked panels are located have been cordoned off (as per our insurance company request) in case they fall; although this is considered to be unlikely. Members should note that replacement panels have been ordered via the only company that supplies these – based in France. Replacement panels are taking several months to arrive due to Brexit and Covid-19 related issues.

When the cause of the rust spots and cracking tiles is known via this structural survey; the College will take any necessary steps required to rectify the situation.

The Audit and Risk Committee is being kept fully apprised of this situation; this matter has been added to the Corporate Risk Register.

7. Chemical Leak at Springburn Campus

On 11 March 2022, there was a chemical leakage in our Springburn Campus. The building was promptly evacuated and the emergency services dealt with the situation. A full report was generated and discussed at SMT – refer to **Appendix 3**. All actions contained in this report are being undertaken at present (refer to the Strategic/College Risk Register.)

8. Vandalism at East End Campus

After one month of added security, the vandalism at East End Campus Community Garden appears to have ceased.

9. Insurance Conference

L Clark attended the annual conference on 30 March 2022; emerging trends in relation to claims are:

- Discrimination
- Sexual Misconduct
- Data Breach Claims
- Employment Tribunal Claims
- Personal Injury Damages
- Claimant Legal Costs
- Unrepresented Claimants
- Escape of Water

The above matters have been discussed with the Risk Management Committee members.

10. Student Experience/Performance Indicator Data

A recent Scottish Government report stated that the number of college students in Scotland leaving their studies saw an increase during the pandemic.

The report also warned that drop-out rates could rise further and this year's college enrolment was "considerably down".

The report, which focused on the "indirect, wider harms of the pandemic", said that although the 2021-22 session has been closer to what it was pre-Covid there was still "an on-going cumulative wider impact on students and learners".

It looked at three areas including:

- higher education;
- further education;
- and community learning and development in Scotland.

The report said that some of the wider harms "would not be unique to these sectors and are also likely to have affected other groups".

In its focus on colleges the paper said: "College and student representatives explained that the number of students dropping out of courses has increased. Further increases in drop-out rates remains a serious risk and new entrants who started in January 2022 are another at-risk cohort."

It went on to explain that the overall numbers of college enrolments were "considerably down in the current academic year" due to a number of factors.
More pupils had opted to stay on at school and more school pupils had secured university places. Added to that, there had been a greater availability of low skilled jobs and college course numbers had been capped as a result of physical distancing requirements.

The latest leaver destination survey, published in February 2022, indicated that the proportion of school leavers at either university or college had increased from 44.2% in 2019-20 to 45.1% in 2020-21.

The proportion of school leavers in further education fell from 28.1% to 23.3% and the proportion of school leavers who were unemployed fell from 6.0% to 4.2%.

11. Budget Cuts for 2022-25

The Draft Budgets for 2022-25 were presented to the Finance & Resources Committee for endorsement on 10 May 2022 and will go to the Board on 13 June 2022 for approval.

While the financial measures built into the budgets will allow the College to remain stable over the next three years, they represent significant challenges and may impact on student experience and staff morale. The approach adopted is not sustainable basis for long term financial planning or effective running the College.

12. SFC – In Year Redistribution of Credit Activity for AY 2021-22

The Quarter 2 Financial Forecast reflects the potential clawback of funding for 2,100 credits, estimated at c£480k. SFC/GCRB have not confirmed that this clawback will actually take place and it is unlikely that this will be confirmed until at least the end of the financial year. In addition, there is a risk that any additional under delivery of credits may also be subject to clawback and this will be taken into account for the Quarter 3 Forecast. The position continues to be closely monitored, but the uncertainty makes accurate financial forecasting very difficult.

13. Land at Springburn

The Vice Principal – Operations, Director of Corporate Services and Head of Facilities and Environmental Sustainability met with members of Hydepark Residents Association to discuss the amenity land where the Cycle Hub is situated. The College has received a valuation for this parcel of land.

A further meeting has been held with the Director of Corporate Services, Head of Facilities and Environmental Sustainability and the Factor for the Hydepark Residents Association. The Factor has advised that he is obtaining his own valuation for this piece of land. At the time of writing this report, this valuation is awaited. The Director of Corporate Services has made contact twice to request this in order that this matter can be concluded; response from Hydepark is still awaited.

14. Risk Management Committee

At the recent Risk Management Committee meeting held on 19 April 2022, due cognisance was taken of key risk reports/publications/newsletters; links provided below:

Audit Scotland: Fraud and Irregularity
BCI Horizon Scan Report
WEF: The Global Risks Report 2022
HEFESTIS Newsletters from 15 December 2021 to 4 April 2022

The approved minute of the Risk Management Committee held on 25 January 2022 is provided for interest and perusal; link below:

Risk Management Minute – 25 January

15. Glasgow Kelvin College and Rostov on Don

Members will be aware that the College has a current Memorandum of Understanding with the Don State Technical University in Rostov on Don, Russia. This is a very fruitful and long-standing student/staff exchange programme ran in conjunction with University of the West of Scotland and involving the Lord Provost and International Department at Glasgow City Council. However, this has been suspended via Glasgow City Council as per the link below:

https://www.glasgowlive.co.uk/news/glasgow-suspends-russian-town-twinning-23205531

16. Resource Implications

There are additional resource implications in relation to items referred to in this report i.e. cover for staff members on sickness leave due to COVID or COVID related issues, additional support needed for staff/students in relation to eg mental health matters. The cladding inspection outcome may also yield unexpected costs. The impact/effect of Monkeypox is (as yet) unknown but a close watch is being kept on matters pertaining to this matter in the event this develops as a new global pandemic with extremely negative and damaging consequences.

17. Risk & Assurance

There are no risks or perceived implications arising from this report that are not already recorded in the Risk Register or this paper. The strike action, action short of strike action (ASOS), the withdrawal of goodwill from EIS teaching members coupled with the impending threat of strike action from UNISON employees, places considerable strain on College operations and severely and very negatively disrupts the student experience which has not been a positive one for some time due to Scottish Government COVID-19 lockdowns and "on campus" restrictions. Failure to educate claims are therefore a very real possibility.

The emergence of a possible new pandemic (Monkeypox) will be carefully monitored with appropriate guidance followed accordingly.

At present there are 6.6 million people in the UK who await hospital treatment; many will be students and staff members who will be on a very long waiting list. This situation is set to escalate with the declining living standards which will severely negatively impact on health. These declining living standards are now extremely evident as we move into a very changed world with no end to the pressures in sight.

18. Equality

There are no adverse impacts on individuals with protected characteristics arising from the contents of this report. As contained within this report, poverty is prevalent throughout the communities the College serves and there is a greater risk of student drop-out rates or non-engagement due to a wide number of factors such as rising living costs, many emerging mental health issues and a declining standard of living due to a wide number of factors affecting the entire world. Cold and hunger will be prevalent for many people, particularly over winter months, with undoubtedly illness swiftly following.

19. Data Protection

There are no new data protection risks arising from the contents of this report. Data protection continues to be a key consideration in College activities.

20. Recommendations

Members of the Board are recommended to:

i) approve the contents of this report and its appendices;
ii) review the College/Strategic Risk Register and request any changes be considered by the Audit and Risk Committee.

21. Further Information

Members can obtain further information on the contents of this report from Jeanette Evans, Vice Principal Operations at jevans@glasgowkelvin.ac.uk or Lisa Clark, Director of Corporate Services at lisaclark@glasgowkelvin.ac.uk

JE/LC
Glasgow Kelvin College
May 2022

GLASGOW KELVIN COLLEGE - College/Strategic Risk Register

Appendix 1

Board / Committee	
Prepared by: Jeanette Evans/Lisa Clark	
Contact Name and Tel. No.:	

						INHERENT ASSESSMENT					RESIDUAL ASSESSMENT										
Risk Ref No	Date Identified	Risk Title	Risk Description	Risk Owner	Responsible Person	IL	II	IR	IR	Controls and Mitigating Actions	RL	RI	RR	RR	Risk Appetite Category	Risk Appetite	Risk Treatment Approach	Date Reviewed	Movement in Period	Early Warning Mechanisms, Planned Next Steps & Future Action Required	Date of Next Review
1	04/11/2021	SFC Review	**RISK:** Being forced into position that is against our vision & mission, or reduces community engagement, e.g. A single governing body for Glasgow **CAUSE:** Failure to project a clear GKC identity or vision; failure to proactively engage in review; other voices are louder / stronger; or poor operating performance. **EFFECT:** Lose local autonomy; unable to meet local community needs; GKC identity is lost; loss of social footprint; loss of staff.	Principal & CEO / Chair	Vice Principal - Curriculum	4	5	20	**Very High**	1. Engagement with GCRB, SFC, Scot Gov, & UK Gov 2. Political engagement with local & national politicians 3. Engagement about possible models with other colleges 4. Board understanding & support 5. Identified forums where we can share our vision 6. Direct community engagement 7. Improved operating position & management of performance 8. Identifed awards & other opportunities to raise profile 9. Interaction with Scot Gov officials 10. Operational collaboration projects with other colleges	3	4	12	**High**	1. Policy	Cautious	Treat	19/04/2022	↔	**Early Warning Mechanism** 1. Outcome of consultants options appraisal 2. Ministerial responses / statements from Scot Gov 3. Performance Monitoring 4. GCRB Comms **Actions Planned** 1. Develop a college strategy for stakeholder consultation 2. Improving recruitment & student outcome performance 3. Continuing to influence GCRB decision making 4. Identify opportunities to collaborate	16/08/2022
2	04/11/2021	GKC Identity	**RISK:** Lack of understanding or awareness of the critical part GKC plays in communities; don't communicate USP **CAUSE:** Do not proactively promote identity, successes & uniqueness of GKC; ineffective comms on identity & successes; failure to illustrate impact we have; underinvestment in marketing / messaging. **EFFECT:** Weak employer engagement; students choose another college; affects risk no. 1	Vice Principal - Operations		4	4	16	**Very High**	1. Tendering for new website 2. Developing new internal & external comms & marketing framework (in train) 3. Actively seeking to promote successes 4. Faculties using own social media 5. Investment in marketing resource 6. Employer engagement activity 7. Awards - putting forward GKC 8. Community Engagement, e.g. Hub 9. Digital strategy / My Kelvin	3	3	9	**High**	2. Reputation	Minimalist	Treat	19/04/2022	↔	**Early Warning Mechanism** 1. Negative publicity 2. Poor recruitment figures **Actions Planned** 1. Review of Comms & Marketing resource 2. Strategic Priority to raise profile 3. Campus Project 4. New website 5. Comms & Marketing Framework being developed	16/08/2022
3	04/11/2021	People	RISK: Not having agile, motivated, well-informed, or appropriately skilled workforce CAUSE: Demographics of workforce; national bargaining; Notiication of strike dates by EIS and notification of a ballot for strike action from UNISON - impact of strike action on employment relations; lack of / insufficient CPD; failure to attract talented individuals; failure to retain talented individuals; unable to predict needs of the future; affordability of job evaluation. EFFECT: Unable to compete with industry; staff ability to be innovative is restricted; unable to deliver curriculum in areas of student demand; morale; financial stability.	Dir. Human Resources		5	4	20	**Very High**	1. People Strategy 2. Representation in employers association 3. NJNC negotiator 4. OD framework 5. TU engagement 6. RPA 7. TRCC 8. Recruitment & Retention Policies & Procedures 9. Culture of empowerment 10. 3 Year Rolling Budgets	3	3	9	**High**	5. Workforce	Cautious	Treat	19/04/2022	↑	**Early Warning Mechanism** 1. Staff turnover 2. Absences 3. HR Heatmap **Actions Planned** 1. Workforce Planning 2. Continuous improvement programme	16/08/2022

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Risk Ref No	**Date Identified**	**Risk Title**	Risk Description	**Risk Owner**	**Responsible Person**	**IL**	**II**	**IR**	**IR**	**Controls and Mitigating Actions**	**RL**	**RI**	**RR**	**RR**	**Risk Appetite Category**	**Risk Appetite**	**Risk Treatment Approach**	**Date Reviewed**	**Movement in Period**	**Early Warning Mechanisms, Planned Next Steps & Future Action Required**	**Date of Next Review**
4	04/11/2021	Litigation / Compliance	**RISK:** Non-compliance with key legislative or regulatory requirements including COSHH **CAUSE:** Lack of awareness, understanding or training & development; poor compliance with established processes; not keeping up to date with changes in case law. **EFFECT:** Possible fines & litigation; reputational damage; implications for board accountability.	Dir of Corporate Services / & Dir Human Resources / H&S Manager		4	4	16	**Very High**	1. Policies & procedures 2. Members of national groups to keep aware of developments & upcoming changes. 3. Horizon scanning for changes to legislation or regulations. 4. Legal advice. 5. CPD programme. 6. Staff training. 7. Internal & external audit programme provides assurance. 8. External DPO. 9. Liaison as required with College insurance.	2	3	6	**Medium**	7. Legal & Compliance (including Health & Safety risks)	Averse	Treat	19/04/2022	↑	**Early Warning Mechanism** 1. Horizon scanning 2. HR Heatmap 3. Compliance metrics **Actions Planned** 1. RIDDOR Report to HSE. 2. COSHH Custodians appointed. 3. COSHH Audit undertaken over 2 days. 4. All departments and faculties directed to conduct reviews of their COSHH inventories/storage. 5. Deadline for legally mandated training brought forward. 6. WorkRite COSHH module made available to additional staff. 7. Six respirators ordered to enhance any future emergency response.	16/08/2022
5	04/11/2021	Curriculum Relevance	RISK: Curriculum doesn't meet current or future needs of students, employers, or community partners, or the economy CAUSE: Ageing workforce; lack of curriculum innovation; staff knowledge & expertise; People risk (Risk No. 3); employer engagement; outdated or lack of resources; unreliable information / data; growth of digital teaching / you tube. EFFECT: Diminishing recruitment; reputation; student achievement; reputation.	Vice Principal - Curriculum		4	4	16	**Very High**	1. Curriculum reviews 2. Staff training / CPD 3. Emp engagement 4. Schools engagement 5. Partners - HE 6. Labour market intelligence 7. Staff structures / PDR 8. Industry bodies 9. Student feedback 10. Collaboration with partners & colleges 11. Digital transformation	3	3	9	**High**	6. Student Experience	Open	Treat	19/04/2022	↔	**Early Warning Mechanism** 1. Recruitment & retention of students 2. Emp & student feedback 3. Success rates 4. HN Next Generation Monitoring **Actions Planned** 1. Strengthen CPD for staff 2. Strengthen Curriculum review 3. Digital / blended development 4. Targeted employer engagement 5. Creation of Centres of Excellence 6. Green Kelvin	16/08/2022
6	04/11/2021	Sustainable Funding	RISK: Inability to secure appropriate levels of funding to deliver objectives/Foundation Apprenticeship arrangements changing, re-distribution of credit activity for 2021-22, NI costs rising, inflation high, energy prices soaring. CAUSE: constraints of current funding structures & levels; budget cuts; Scot Gov / SFC funding models; constraints in public finances; non-compliance EFFECT: loss of income; inability to deliver financially sustainable budgets; med-long term sustainability at risk; impact on curriculum delivery; job losses	Vice Principal - Operations		4	4	16	**Very High**	1. 3 year budgets 2. Management accounting & budgetary control 3. Quarterly budgets & forecasting 4. TRCC 5. Compliance framework - review, monitor & control of funding obligations 6. Annual internal audit programme 7. Funding officer in Business Development team 8. Underlying cash position to agreed levels.	4	3	12	**High**	3. Financial	Cautious	Treat	19/04/2022	↔	**Early Warning Mechanism** 1. Negative variances 2. Quarterly reviews 3. Budget reviews 4. Nov SFC Nov cut-off 5. Credit delivery levels. **Actions Planned** 1. Enhancing business intelligence on funding streams 2. Building ALF 3. Curriculum planning 4. Identify alternative funding streams/Business Development Ambitions	16/08/2022

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7	04/11/2021	Student Experience	**RISK:** Poor student experience **CAUSE:** Poor physical environment; quality of teaching; lack of teaching skills or resources; lack of support services, impact of industrial action and impact of COVID/long COVID on absence rates. **EFFECT:** Impact on retention of students; reputational damage among possible future students; financial instability; performance outcomes affected; relationship with employers; failure to deliver Government ambitions	Vice Principal - Curriculum		4	4	16	Very High	1. Curriculum quality assurance 2. Quality framework 3. Curriculum Planning 4. Student feedback 5. Engagement with Student association 6. Learning & support services/in campus services 7. CPD for staff 8. Investment in estate 9. Planned & routine maintenance 10. Operational planning process has Student Engagement at heart 11. GTCS Strategy	3	3	9	High	6. Student Experience	Open	Treat	19/04/2022	↔	**Early Warning Mechanism** 1. Student numbers metrics 2. Student destination **Actions Planned** 1. Campus Project 2. Retention improvement plan 3. Quality system review & development 4. Business Intelligence reporting & monitoring 5. Learner engagement 6. GTCS Strategy 7. Student Association Questionnaires/Feedback and addressing any complaints	16/08/2022
8	04/11/2021	Environment	**RISK:** College fails to meet targets in relation to sustainability, e.g. Net Zero **CAUSE**: Lack of resources to implement; lack of skills to implement; sustainability is not embedded within curriculum; cannot access funding; limited by pace of industry **EFFECT**: Do not meet targets; impact on future generations; reputation with students, future students, community & government affected	Vice Principal - Operations / Director of Corporate Services		4	4	16	Very High	1. Public Sector Climate Change Report completed annually. 2. Funding to recruit Environmental Manager secured from the SCIO for 2 years. 3. Individual appointed and start date awaited. 4. Environmental Manager will raise environmental awareness & access funding streams. 5. Green Kelvin initative is a key strategic priority. 6. Awareness raising activity paramount.	3	3	9	High	8. Environmental Sustainability	Minimalist	Treat	19/04/2022	↔	**Early Warning Mechanism** 1. PSCC metrics **Actions Planned** 1. Recruitment of Environmental Manager - start date awaited 2. Implementation of Green Kelvin action plan 3. CPD 4. Curriculum changes	16/08/2022
9	04/11/2021	Digital Transformation	**RISK:** Inability to deliver Digital Transformation Strategy & Programme **CAUSE:** Lack of resources to implement; lack of skills to implement; user skills insufficient; poor change or project management **EFFECT:** Reputation with students & staff affected; operational effectiveness reduced; student experience deteriorates	Vice Principal - Curriculum / Director of Digital Services		4	4	16	Very High	1. Strategy & Programme 2. Staffing structure to support delivery 3. Increased resources to implement 4. Staff training & awareness 5. New software 6. Website tendering 7. Increased devices available to staff & students 8. Programme management / governance	2	3	6	Medium	4. Digital	Cautious	Treat	19/04/2022	↔	**Early Warning Mechanism** 1. Missed deadlines / milestones **Actions Planned** 1. Implementation of programme: further development of business intelligence for learning & teaching development 2. Continuation of staff training	16/08/2022
10	04/11/2021	Student Recruitment & Retention	**RISK:** Fail to Recruit or Retain Sufficient students or learners **CAUSE:** Effectiveness of admissions process; monitoring of information; lack of identity; ineffective marketing; curriculum offer does not meet student needs **EFFECT:** Students do not get access to quality learning & teaching; class sizes are not sustainable; reduced funding; additional expenditure; COVID-19 mental health challenges; impact on PI's/sucess rates.	Vice Principal - Curriculum		5	4	20	Very High	1. Admissions process 2. Marketing 3. Monitoring attendance & performance 4. Wellbeing Lead appointed to engage with student body. 5. Wellbeing Officers appointed. 6. Keep warm events. 7. Student Support Services Manager appointed.	3	4	12	High	6. Student Experience	Cautious	Treat	19/04/2022	↔	**Early Warning Mechanism** 1. Student recruitment metrics 2. Drop out metrics **Actions Planned** 1. Campus Re-investment Project running to improve student experience. 2. Student focussed teams.	16/08/2022
11	04/11/2021	Cyber Risk	**RISK:** A widespread cyber-attack breaches college defence **CAUSE:** A malicious breach of college systems possibly caused by: user error / lack of training or education; lack of patch management; failure of perimeter security; poor development practices; lack of investment in protection **EFFECT:** Loss of business critical systems; college reputation damaged / loss of credibility; impact on individual people (data subjects); possible fines or litigation; cost to repair or restore; impact on students / student experience	Vice Principal - Curriculum / Director of Digital Services		5	5	25	Very High	1. Automated patch management 2. Mandatory training for all college employees 3. Firewall & DNS protection 4. MFA (multi-factor authentication) controls 5. Safelinks 6. Information security policy 7. Anti-virus & malware scans 8. Development frameworks 9. Knowledge sharing with peers 10. Cyber security insurance 11. Disaster Recovery / Business Continuity Plan in place - including backups 12. Crisis comms training attended on cyber attacks.	3	4	12	High	2. Reputation	Minimalist	Treat	19/04/2022	↔	**Early Warning Mechanism** 1. Monitoring of key systems performance & availability 2. Log management / monitoring 3. Monitoring of open source cyber intelligence, websites etc. **Actions Planned** 1. Review need for zero-trust architecture 2. Review how embedded mandatory training is for all staff	16/08/2022

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						INHERENT ASSESSMENT					RESIDUAL ASSESSMENT										
Risk Ref No	Date Identified	Risk Title	Risk Description	Risk Owner	Responsible Person	IL	II	IR	IR	Controls and Mitigating Actions	RL	RI	RR	RR	Risk Appetite Category	Risk Appetite	Risk Treatment Approach	Date Reviewed	Movement in Period	Early Warning Mechanisms, Planned Next Steps & Future Action Required	Date of Next Review
12	13/12/2022	COVID-19 - Ongoing Implications	**RISK:** Ongoing negative impact of COVID-19 on all aspects of College operations. **CAUSE:** COVID/Long COVID ~~New virus strains~~ causing higher/ongoing levels of staffing absence due to illness/self-isolation. Staff members at work feeling under increased pressure. Individuals living in a constant state of fear for circa 2 years has resulted in mental health deterioration/issues related to anxiety/lack of confidence. Return to study/work/hybrid model causing feelings of unease. PCR testing/social distancing ending which may cause further unease. **EFFECT:** Loss of business, reduced student learning experience, higher than normal drop out rates/absence; high costs for staff cover, college reputation damaged/loss of credibility; very negative impact on different groups of people.	Principal & CEO / Chair		4	4	16	**Very High**	1. Discussions taking place about a hybrid model of working to enable people to start to think about this. 2. Enhanced cleaning regime remains in place throughout the campus buildings. 3. Social distancing ending ~~in place.~~ 4. Rooms ventilated if at all possible; upgrade to ventilation system at Springburn Campus. 5. Relatively low numbers of people in campus buildings/hybrid working will ensure this is still low, however, there are no campus restrictions. 6. Scottish Government COVID aware signage in place. 7. Anti-virus hand sanitiser and wipes available across the entire campus. 8. Masks available. 9. ~~External signage.~~ 10. ~~LFD tests available.~~ 11. Wellbeing high on the agenda for the College student and staff population.	3	3	9	**High**	1. Policy	Cautious	Treat	19/04/2022	↓	**Early Warning Mechanism** 1. Monitoring of Scottish Government messages 2. Management/monitoring of staffing situations 3. Monitoring of positive test cases/health issues **Actions Planned** 1. Keeping abreast of Scottish Government's guidance 2. Keep a close watch on staffing levels and cover required 3. Enhanced cleaning regime to remain in place	16/08/2022
13	19/04/2022 NEW RISK	Strike Action	**RISK:** Negative impact of teaching strike action on students coupled with the threat of action short of strike action (marking of assessments) with an additional threart of support staff strike action to follow. **CAUSE:** Teaching staff are requesting a better pay offer than they have received. This is a national matter and is being handled at a national level. At present there are 14 days of teaching strike action underway. **EFFECT:** Very negative impact on students who are only beginning to return to on-campus teaching. Lack of confidence in Colleges to provide the FE Training they require as strike action is an ever present threat and has been for many years. Drop out rates increase which has a negative effect on funding and PI's. Opportunity for HE institutions to deliver course requirements. Strike action could have a very detrimentall effect on the sector as a whole. Students may submit a "failure to educate" claim.	SMT (national matter)	This is a national matter.	5	5	25	**Very High**	1. Principal and Director of HR involved in national talks. 2. Meetings taking place at national level to attempt to resolve the situation. 3. Monitoring of impact on teaching delivery and identification of potential mitigations for lost learning. 4. College support staff offering whatever help they can to students.	4	4	16	**Very High**	6. Student Experience	Open	Treat	19-Apr-22		**Early Warning Mechanism** 1. Monitoring of Scottish Government/national Employer Association messages. 2. Senior management attending Employer Association meetings as required. 3. Principal and Director of HR involved in national discussions. 4. Monitoring staff particiaption levels in strike activity. **Actions Planned** 1. Keeping abreast of all related documentation/discussions. 2. Keep a close watch on effect on student population and identify potential mitigations to recover lost learning.	16/08/2022

Glasgow Kelvin College - Fire Risk Assessment February 2022 – Action Plan by Campus

Campus:	East End							
Category 5: Means of Escape								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Do the fire resisting door sets meet the appropriate standard?	On 1st floor level there is an office suite with entry from both atrium and escape corridor therefore crossing over two compartments.	The door in the corridor does not have a self-closing device fitted. As this door is not required it is recommended that it be kept locked shut to maintain means of escape.	Medium		18/03/2022	G Lawson	Door locked and signage added to both sides	07/03/2022
Do the fire resisting door sets meet the appropriate standard?	The fire doors have a large gap between the doors and the frame which may prevent the intumescent seals being effective.	The doors should be adjusted to ensure that there is no more than a 3mm gap between the hinge edge, leading edge, and the top of the door frame.	Medium		18/03/2022	Joiner Technician	**Ongoing**	
Category 10: Management								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Have employees received appropriate fire safety awareness training?	Fire marshals/wardens training overdue.	Employees expected to fulfil a role of a fire marshal/warden will require comprehensive training from a competent person/organisation to cover all of their additional responsibilities. It should be remembered that for each fire marshal/warden required a deputy should be trained to cover any absences. In addition, a fire marshal/warden should take no longer than one minute to search a designated area.	Medium		18/03/2022	G Lawson	**Training underway – New East End Fire Wardens trained**	
Category 11: Signs and Signals								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Are there adequate and suitable fire safety signs and notices displayed in the appropriate places throughout the premises?	Fire action notices have not Been provided.	Fire action notices must be installed in all the common areas within the building and adjacent to the fire alarm call points. They are to contain the relevant information to aid a safe escape from the building.	Low		17/05/2022	G Lawson	All signs replaced or updated	07 March 2022
Are there adequate and suitable fire safety signs and notices displayed in the appropriate places throughout the premises?	A number of fire action notices were found to be defaced or incomplete.	The notices should be completed in full with the location of the assembly point and the number to call in an emergency.	Low		17/05/2022	G Lawson	All signs replaced or updated	07 March 2022

Campus:	Easterhouse							
Category 2: Sources of Ignition								
Question	**Non Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Are all electrical installations and appliances correctly installed and maintained?	There is unsafe use of extension leads. Daisy chaining	These appliances are to be used in accordance with manufacturers' instructions or alternatively, additional power sockets provided in this area.	Medium	T04	18/03/2022	ICT	Extensions piggybacked to each other instead of buying in the appropriate length of cabling. Extension removed. The photo provided did not match the room indicated on the site map. Recommend all staff are reminded not to set up any extensions this way.	22/03/22
Are all electrical installations and appliances correctly installed and maintained?	There was no evidence of periodic inspections of the lift installations.	If evidence of an inspection is unavailable, a competent person is to inspect the lift installations and records maintained.	Low	Lift	17/05/2022	Kone	The lifts are maintained monthly by Kone and annually by Ashdale for our insurance company. Paperwork uploaded to the electronic logbook.	22/03/22
Category 3: Sources of Fuel								
Question	**Non Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Are house keeping arrangements satisfactory?	An area of concern was the overall condition of the staff work room on the 3rd Floor which was untidy with significant amounts of combustible materials poorly situated.	The poor housekeeping here could result in greatly assisting fire spread should one occur therefore a general clean up is required.	Low	Staff workrooms and offices	17/05/2022	Management / Lecturing staff	Management to instruct faculty staff to clear their individual areas.	Ongoing
Category 5: Means of Escape								
Question	**Non Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Do the fire resisting door sets meet the appropriate standard?	Ineffective self closing devices.	Repair or replace the self-closing device/s to ensure fire door/s close fully into their frame/s against the door stops.	Medium	First Floor Corridor	18/03/2022		Parts are on order. Estimated repair to be carried out on the 4th April 2022.	
Do the fire resisting door sets meet the appropriate standard?	The intumescent cold smoke seals installed to prevent the spread of smoke and fire between compartments are missing.	The missing intumescent cold smoke seals must be replaced to ensure that the spread of smoke and fire is restricted.	Medium	G06	18/03/2022	Estates	The seal is not missing and will still work if there is a fire. The small soft insert has been ordered. 22.03.2022	
Category 7: Fire Detection and Warning								
Question	**Non Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Is the fire alarm system routinely tested, inspected	No up to date record of inspection and maintenance in accordance with BS 58391.	The fire alarm system must be inspected and maintained by a competent certificated organisation in accordance with BS 58391.	Medium	Ground floor	18/03/2022	Estates / Securigroup	Estates test the system weekly and Securigroup maintain the system. Copy of contract uploaded to electronic logbook.	22.03.2022

and maintained in accordance with current guidance?								
Category 8: Emergency Lighting								
Question	**Non Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Is the emergency lighting system routinely tested, inspected and maintained in accordance with current guidance?	Not inspected and maintained in accordance with BS 52668.	The emergency lighting system must be inspected and maintained by a competent certified organisation in accordance with BS 52668.	Medium		18/03/2022	Thomas Smith Electrical	The whole system is checked on a four year rotation, meeting with the regulations. Checks are completed monthly, annually & 5 yearly.	22.03.2022
Is the emergency lighting system routinely tested, inspected and maintained in accordance with current guidance?	No monthly emergency lighting tests are recorded.	The emergency lighting system should be tested monthly and records maintained, in accordance with BS 52668.	Medium		18/03/2022	Thomas Smith Electrical	Al lighting tests are recorded. Last paperwork uploaded to the electronic logbook.	22.03.2022
Category 10: Management								
Question	**Non Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Have employees received appropriate fire safety awareness training?	Fire marshals/wardens training overdue.	Employees expected to fulfil a role of a fire marshal/warden will require comprehensive training from a competent person/organisation to cover all of their additional responsibilities. It should be remembered that for each fire marshal/warden required a deputy should be trained to cover any absences. In addition, a fire marshal/warden should take no longer than one minute to search a designated area.	Medium		18/03/2022	H&S Manager	**Training will be scheduled prior to the Summer break.**	
Are house keeping arrangements satisfactory?	Inappropriate use of rooms/space.	The room/space should be utilised for the purpose for which it was designed.	Medium		18/03/2022	Faculty housekeeping		
Are house keeping arrangements satisfactory?	The furniture and furnishings present is not compliant with current standards and/or damaged thereby exposing its foam interior.	The noncompliant/damaged furniture/furnishings should be removed or repaired to ensure compliance with the Furniture and Furnishings (Fire) (Safety) Regulations 1988 as amended.	Low	Common room	17/05/2022	Students Association / Estates	The room has been taken out of use and the furniture has now been removed for disposal.	22.03.2022

Campus:	Springburn							
Category 2: Sources of Ignition								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Are all electrical installations and appliances correctly installed and maintained?	There is unsafe use of extension leads.	These appliances are to be used in accordance with manufacturers' instructions or alternatively, additional power sockets provided in this area. Daisy chain	Low	432	17/05/2022	Finance Staff	In progress (Desk area has insufficient floor plug blocks to accommodate 4 working desks - MT met with I Gordon who will ask the electrician to look at this area)	Ongoing
Category 3: Sources of Fuel								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Are house keeping arrangements satisfactory?	The standard of housekeeping regarding combustible materials in the staff work area is inadequate.	Ensure adequate storage areas are provided and that housekeeping within these areas is of an acceptable standard.	Medium	Staffrooms	18/03/2022	Teaching Staff	Have been notified to clear	Ongoing
Category 5: Means of Escape								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Do the fire resisting door sets meet the appropriate standard?	Fire doors are fouling against the frame/dragging on the floor surface and are not closing completely against the door stops.	All fire doors and associated self closing devices should be maintained to ensure they close fully into their frames.	Medium		18/03/2022	Joiner Technician	Ongoing	
Do the fire resisting door sets meet the appropriate standard?	Ineffective self closing devices.	Repair or replace the self closing device/s to ensure fire door/s close fully into their frame/s against the door stops.	Medium		18/03/2022	Joiner Technician	Ongoing	
Do the fire resisting door sets meet the appropriate standard?	The fire doors have a large gap between the doors and the frame which may prevent the intumescent seals being effective.	The doors should be adjusted to ensure that there is no more than a 3mm gap between the hinge edge, leading edge and the top of the door frame.	Low	Ground Floor Music Corridor	17/05/2022	Joiner Technician	Ongoing	
Do the fire resisting door sets meet the appropriate standard?	It was noted during the visit that there were several issues regarding the proper function of fire doors and these are highlighted in the action plan.	It is vital that fire doors operate correctly, especially those surrounding the atrium therefore a regular inspection regime should be set up and any defects corrected.	Medium		18/03/2022	Joiner Technician	Ongoing	
Are house keeping arrangements satisfactory?	Combustible materials are located/stored in the escape routes.	Items that are a source of fuel or are combustible and likely to increase the fire loading or spread of fire, should not be located on any corridor, stairway or circulation space that will be used as an escape route. Therefore, the combustible materials stored in the escape routes must be removed.	Medium		18/03/2022	Estates	Tiles removed	2/03/22

Question	Non-Conformity	Recommendations	Risk Level	Location	Required Completion Date	Person/s Responsible	Progress/Comments	Date Completed
Are house keeping arrangements satisfactory?	The escape route is obstructed.	The items obstructing the escape route must be removed immediately.	Medium	Student Hub ground floor	18/03/2022	Estates	Area out of bounds to all staff and students	16/02/2022
Category 7: Fire Detection and Warning								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Is there an adequate method for raising the alarm and detecting a fire present in the premises?	Manual call point damaged in games room	Contractor to be contacted to repair manual call point. The MCP should be protected against impact damage in this area.	Low	Games Hall ground Floor	17/05/2022	CHUBB Fire	Call point has been replaced	3/3/22
Category 8: Emergency Lighting								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Is the emergency lighting system routinely tested, inspected and maintained in accordance with current guidance?	No record of annual inspection and maintenance in accordance with BS 52668.	The emergency lighting system must be inspected and maintained by a competent certified organisation in accordance with BS 52668.	Medium		18/03/2022	Tommy Smith	The whole system is checked on a four year rotation, meeting with the regulations. Checks are completed monthly, annually & 5 yearly.	Ongoing
Category 10: Management								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Have employees received appropriate fire safety awareness training?	Fire marshals/wardens training overdue.	Employees expected to fulfil a role of a fire marshal/warden will require comprehensive training from a competent person/organisation to cover all of their additional responsibilities. It should be remembered that for each fire marshal/warden required a deputy should be trained to cover any absences. In addition, a fire marshal/warden should take no longer than one minute to search a designated area.	Medium		18/03/2022	Geoff Lawson	Training will be scheduled prior to the Summer break.	Ongoing
Are house keeping arrangements satisfactory?	The furniture and furnishings present is not compliant with current standards and/or damaged thereby exposing its foam interior.	The noncompliant/damaged furniture/furnishings should be removed or repaired to ensure compliance with the Furniture and Furnishings (Fire) (Safety) Regulations 1988 as amended.	Low	1st floor bridge between main building and workshops	17/05/2022	Estates	Sofa removed and disposed	11/03/22

Campus:	West							
Category 2: Sources of Ignition								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Are all heating appliances correctly installed, adequately protected and maintained?	There is no record of appropriate servicing and maintenance of the gas appliances.	Gasfired boilers and other appliances, should be subject to periodic inspection and maintenance by a competent Gasafe engineer in accordance with the Gas Safety (Installation and Use) Regulations 1998 (GS(IU)R 98). Records are to be maintained.	Medium		18/03/2022	G Lawson	Records of boiler maintenance are kept in the Estates office for viewing. Richard Irvin FM Limited are the company who carry out all boiler maintenance	23/02/2022
Are all electrical installations and appliances correctly installed and maintained?	There is unsafe use of extension leads.	These appliances are to be used in accordance with manufacturers' instructions or alternatively, additional power sockets provided in this area.	Medium		18/03/2022	E McWilliam	Extension cable has been removed	23/02/2022
Category 7: Fire Detection and Warning								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Is the fire alarm system routinely tested, inspected and maintained in accordance with current guidance?	No record of inspection and maintenance in accordance with BS 58391.	The fire alarm system must be inspected and maintained by a competent certificated organisation in accordance with BS 58391.	Medium		18/03/2022	G Lawson	Chubb Fire services inspect our system on a 25% scale per visit x4 per year. all records are kept for viewing in our Campus Office.	17/02/2022
Category 8: Emergency Lighting								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Is there an adequate method for illuminating the escape route and safety equipment in the premises?	The existing escape lighting system is damaged/defective. No visible charging light.	A competent person is to survey the existing system and repair/replace luminaries as required.	Medium		18/03/2022	Estates	**Requires survey by electrician**	
Is the emergency lighting system routinely tested, inspected and maintained in accordance with current guidance?	No monthly emergency lighting tests are recorded.	The emergency lighting system should be tested monthly and records maintained, in accordance with BS 52668.	Medium		18/03/2022	G Lawson	Monthly tests are carried out, Records kept in campus office for viewing.	09/03/2022
Category 10: Management								
Question	**Non-Conformity**	**Recommendations**	**Risk Level**	**Location**	**Required Completion Date**	**Person/s Responsible**	**Progress/Comments**	**Date Completed**
Are management and employees fully aware of the fire safety features provided and their purpose?	The record of the maintenance of fire safety measures was not kept up to date.	A fire precautions logbook is provided and should be maintained to include details of fire instructions, fire training, fire drills; and testing, inspection and maintenance of alarm and detection systems, portable firefighting equipment, fixed firefighting installations and emergency lighting systems.	Medium		18/03/2022	G Lawson	Logbook has been updated for viewing.	18/03/2022

Question	Non-Conformity	Recommendations	Risk Level	Location	Required Completion Date	Person/s Responsible	Progress/Comments	Date Completed
Have employees received appropriate fire safety awareness training?	Fire marshals/wardens training overdue.	Employees expected to fulfil a role of a fire marshal/warden will require comprehensive training from a competent person/organisation to cover all of their additional responsibilities. It should be remembered that for each fire marshal/warden required a deputy should be trained to cover any absences. In addition, a fire marshal/warden should take no longer than one minute to search a designated area.	Medium		18/03/2022		Training will be scheduled prior to the Summer break.	

Appendix 3

Date of Incident	11 March 2022	**Report No.**	001-2022

RIDDOR reportable?	Yes ☒ No ☐	**Ref No.**	DangerOcc-8C135E011C - submitted 14 March 2022

Investigation Team	Geoff Lawson, Health & Safety Manager	**Signature(s)**	
	Peter Brown, Director Planning, Performance & Curriculum		
		Date	

Summary of Investigation Findings
The summary should outline the event(s), who was involved, what happened, the scope of the investigation, the analysis and outcomes and any recommendations to prevent or minimise the recurrence of the accident / incident.
At approximately 8:55am on Friday 11th March 2022, Iain Baird (IB, Jewellery Technician, BCDI Faculty) opened the door from the second floor corridor into Room 213 (Jewellery Workshop) at Springburn Campus (see Documents - D25). He immediately noticed a 'bleach-like' smell and on entering the room to investigate noticed fumes eminating from a small metal cabinet (see Documents - D3) located by the window. Shortly after, his line-manager David Webster (DW, Curriculum Manager, BCDI Faculty), arrived on scene and took charge of the incident. Kathleen Duncan (KD, Jewellery Lecturer) was sent to first floor science technicians office (room 120) to seek assistance from Elaine MacDougall (EM, Senior Science Technician, ECS Faculty) for a suspected Nitric Acid leak in the Jewellery Workshop. EM collected a spillage kit and a large quantity of Sodium Hydrogen Carbonate (commonly known as baking soda or bicarbonate of soda) to neutralise the suspected Nitric Acid. EM and KD returned up the stairs to the second floor and as they opened the door were met with an acrid smell. EM attempted to enter Room 213 but decided that the fumes were too great and that a suitable mask or respirator was required. EM instructed the Jewellery staff to evacuate the adjoining room (215) and close the fire doors to contain the fumes. EM and KD then went to reception to meet Graham Phee (GP, Senior Facilties Officer, Estates and Facilities Department) in order to find some respirators. None where found and EM and GP then returned to Room 213 with FP3 face-masks. On return to the second floor it was apparent that the fumes were very strong and EM suspected that the incident was becoming more serious. On re-entry to room 213, fumes were visible eminating from the small metal cabinet next to the windows. GP could feel a stinging sensation on his lips and tongue through the FP3

mask and following a short breather outside in the corridor, returned to the cabinet to assist EM.

EM attempted to neutralise the 'acid' with the Sodium Hydrogen Carbonate, but because of the location of the tray of chemicals in the cupboard was unable to 'dump' the quantity required to achieve this. Aware that the FP3 maks were probably inadequate EM realised that time was running out before putting herself at risk.

She noticed quite a large volume of liquid in the tray but did not attempt to lift it out of the cabinet. She was not able to determine what type of chemical had leaked or what chemical it was reacting with.

At this point they both returned to the corridor to consult and EM advised GM that the Scottish Fire and Rescue Service (FRS) should be contacted for advice and assistance and to evacuate the building.

On their way back to reception, GP swiftly briefed senior management on the incident before returning to the Facilities office to phone Springburn Fire station, which he did at 9:18am. The Fire Officer at the stations advised GP to dial 999, as this would ellicit a more comprehensive, risk-based response. He called 999 at 9:21am and on completion of the call, activated the call point to evacuate the building at 9:24am.

The FRS arrived at Springburn Campus at 9:28am

As the FRS Incident Commander debussed, Derek Smeall (DS, Principal) approached and passed on the information that had been relayed to him by GP. He then beckoned over DW who provided a more detailed explanation of the incident.

After approximately one hour, Senior Management began to direct staff and students, who were able to leave the site, either for home or another campus.

Up to this point it was still believed that a 2 litre bottle of Nitric Acid had leaked and was emiting fumes and there were other unidentied containers within the same cabinet

It was subsequently determined that the cause of the fumes was a chemical reaction between 'Lacomit' Remover and 'Lacomit' Varnish, stored in two corroded containers held within the small metal cabinet in Room 213 (see Documents - D4)

Approximately two hours into the incident the FRA Incident Commander informed the Principal that:

- there was a lack of clarity around the bottles found in the vicinity
- some chemicals in the immediate vicinity were stored in 'vinegar and coca-cola bottles'
- in his opinion, chemical storage was of a standard that was "not acceptable"
- a report would be made to the Health and Safety Executive (HSE)

FRA operations, including specialist continued throughout the day and resulted in the small metal cabinet and content being removed from the room to an external place of safety at the back of the campus (the content in a large COSHH locker (see Documents - D1 & D2) and the cabinet in the gas bottle storage area (D3). All content were made safe before removal from the building and will all be permanently disposed of in accordance with current regulations.

At approximately 3pm the FRA had completed operations on campus and departed.

At an urgent SMT meeting convened by the Principal at 9am on Monday 14th March, the Health and Safety Manager (Geoff Lawson) and the Director Planning, Performance & Curriculum were verbally directed to commence a full investigation into all circumstances leading up to, during and after the incident at Glasgow Kelvin College's Springburn Campus

on the morning of Friday 11th March 2022. A follow-up email from the Principal formalisied this directive (see Documents - D26). A RIDDOR report was submitted to HSE on Monday 14th March 2022 (see Documents D24)

Investigation Analysis	
What was / were the event(s) which contributed to the accident / incident?	1. Cabinet containing COSHH material (including 'Lacomit' Varnish and Remover) used by staff member who left the college on 29 September 2015. Materials had lain undisturbed in the interveneing 6 and a half years. 2. 'Lacomit' product containers had deteriorated over time, such that the leaks substances reacted causing the fumes noted during the incident 3. COSHH forms (Safety Data Sheets and Assessments) for products held in cabinet were not present as these had not been identified as present on campus in the departmental inventory 4. Departmental staff's unfamiliarity with historically stored COSHH items and unused storage furniture 5. Safety inspection form (HS002) contains inadequate COSHH review process
What was / were the identified or possible cause(s) of the accident / incident?	1. A 'personal' cabinet used to store COSHH materials which were then not disposed of following that staff members departure in 2015. 2. Inadequate College-wide and departmental COSHH internal audit and review process 3. Incomplete safety inspection process which failed to identify unused, undisturbed COSHH materials 4. Absence of a comprehensive procedure clearly identifying differing COSHH hazards (oxidising, flammable etc) and ensures a safe, hazard specific and adequate storage solution in accordance with COSHH regulations 5. Absence of documented departmental COSHH roles and responsibilities 6. Lack of familiarity/clarity of content of all departmental storage
Which of the identified or possible cause(s) is / are within the control of the workplace?	1. Use of 'personal' storage for COSHH items. 2. Robust 'off-boarding' process for staff departure 3. Internal and external COSHH audit and review processes 4. Storage procedures (which clearly identify differing COSHH hazards (oxidising, flammable etc) and ensures a

	safe, hazard specific and adequate storage solution in accordance with COSHH regulations) 5. Roles and responsibilities 6. Inventory review
What corrective action(s) / solution(s) could be implemented to eliminate or reduce the risk of the identified cause(s)?	See recommendations

Investigation Outcomes	
Outline any controls that were put into place immediately after the accident / incident to eliminate or reduce the risk of recurrence of the incident. (Outline the controls and who was responsible for implementing them).	
Control measures immediately implemented	1. All materials/substances involved in incident made safe and removed from building by FRS 2. All departments and faculties directed to conduct immediate review of their COSHH inventories and storage solutions 3. Deadline for legally mandated training advanced from 30 March 2022 to 20 March 2022 4. WorkRite COSHH module made available to additional staff 5. Six respirators ordered to enhance emergency response 6. Communication to all staff advising of incident and subesquent actions taken 7. RIDDOR report submitted
Name(s) of person(s) who implemented them.	Geoff Lawson in coordination with Senior Management Team

Recommendations
Outline recommended corrective action(s) (i.e. solutions) to prevent the recurrence of the accident / incident (number the recommendations from the most effective to the least effective i.e. Hierarchy of Controls).
1 Identify all staff with exposure or potential exposure to COSHH materials in the course of their duties and provide immediate access to the WorkRite COSHH module 2 College-wide review of ALL COSHH materials held. Rationalise requirements and stocks 3 All faculites and departments to review COSHH inventories, rationalising their requirements and stocks held 4 All faculties and departments review their storage processes and update to College best practice (colour coded, hazard specific and iaw COSHH regulations) 5 Following faculty and departmental inventory reviews, dispose of all excess, out of date or no longer required stock arranging a college-wide waste uplift 6 Review adequacy of all COSHH storages, enhancing or replacing as necessary 7 Consider provision of a purpose-built storage area for all chemicals located outside each building with one person having overall control 8 Set up central COSHH inventories for each campus, stating exact quantities, locations of all hazardous substances - live documents for easy editing (potential for use of CMS as method) 9 Draft plans of all rooms containing COSHH materials/substances, posting completed plan on the outside of relevent storage or work area. Duplicate copies to be provided to a Master log held at each campus reception for use by FRS in an emergency. Plans should contain storage layout etc, specific hazards (flammable etc.), approximate quantities, specific emergency actions (as per SDS) 10 As a matter of urgency nominate a 'COSHH Custodian' for each Faculty and Department 11 Provide immediate internal training for each nominated 'COSHH Custodian' covering revised and updated college COSHH ordering, storage, use and disposal procedures 12 In addition, provide 'COSHH Custodians' with immediate access to specific external COSHH qualification course with set expectation for training to be completed within four weeks 13 Where relevant replace any metallic COSHH locker trays with impermeable ones 14 Review, update and communicate college COSHH emergency procedures 15 Provide emergency respiratory equipment to Springburn and East End campuses (to be reviewed on completion of inventory reviews at ALL campuses) providing relevant training for identified staff (COSHH Custodians, Estates Staff, Managers etc.) 16 With immediate effect implement twice-annual internal Safety inspection/COSHH audits 17 On completion of implementation of recommendations 1 to 16, engage external subject matter expert (SME) to conduct full audit of College COSHH procedures

18 As a matter of urgency implement any additional recommendations subsequently received from the Health and Safety Executive (HSE)

19 On completion of external COSHH audit, engage external SME to conduct full H&S Management audit

20 Nominate one Fire Warden to meet FRS crew on arrival, escorting them into the buidling and direct them to the Evacuation Controller

21 Add an additional prompt to Evacuation Checklist to ensure adequate cogniscience of evacuee welfare, including deferral to Senior Management after 1 hour

22 Update the incident report form (HS001) to include section for COSHH/spillages etc.

23 Investigate transition to 'Just in time' COSHH inventories - buying when required and disposing of what's not needed?

24 Investigate feasibility of promotion of Techician to Senior Technician (COSHH Custodian) (Peter?)

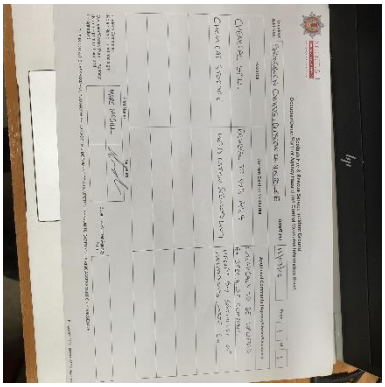
25 Outright ban on COSHH storage in anything other than a designated COSHH locker (no personal holdings)

26 Ensure all COSHH materials/substances are contained within proprietary containers (i.e. no coca cola or vinegar bottles etc)

27. Safety Inspection Form (HS002) needs to be amended to enhance COSHH review process

28. All lockers should be labelled accurately. All non-COSHH lockers to be clearly marked 'COSHH FREE'

Additional Information and Notes
N/A

Evidence (specify / attach as appropriate)		
Photographs or sketches of the scene	1.	2.
	3.	4.
	5.	6.
		

Physical items (e.g. equipment, parts, fragments, substances)	COSHH items from incident awaiting disposal
Clinical (e.g. samples of breath, urine or blood)	Not applicable
Environmental (e.g. samples from air, water, soil)	Not applicable
Documents	D1. Photo 20220314_134155. Content of cabinet D2. Photo 20220314_134200. Content of cabinet, wide angle. D3. Photo 20220314_153656. Metal cabinet and additional content. D4. Photo 'Lacomit' containers D5. Fire Service Information Sheet D6. Photo Fire and Rescue Incident Commanders notebook D7. BDCI Safety Inspections 2014-2019 D8. Safety Inspection 23 February 2015 D9. Safety Inspection 30 November 2015 D10. Safety Inspection 4 March 2016 D11. Safety Inspection 20 May 2016 D12. Safety Inspection 10 June 2016 D13. Safety Inspection 26 October 2016 D14. Safety Inspection 21 October 2017 D15. Safety Inspection May 2018 D16. Safety Inspection September 2018 D17. Safety Inspection December 2018 D18. Safety Inspection April 2019 D19. Safety Inspection October 2019 D20. Safety Inspection March 2020 D21. Safety Inspection November 2020 D22. Safety Inspection 22 October 2021 D23. Scottish Fire and Rescue Service Incident Ground Occupier/Owner/Partner Agency Hazard and Control Measures Information Sheet dated 11 March 2022 D24. RIDDOR Report - DangerOcc-8C135E011C, date 11 March 2022 D25. PowerPoint Floor Plan D26. email H&S Incident of 11 March 22 investigation

	D27. Incident Report Form (HS001) D28. Safety Inspection Form (HS002) D29. Health and Safety Control Manual (HSCM) Section 9.7 - COSHH
Data print outs	DP1. COSHH Management System (CMS) Jewellery CMS_Inventory 11 March 2022 DP2. CMS User_Stats dated 16 March 2022 DP3. Public Health England Nitric Acid Toxicological Overview DP4. 'Lacomit' Remover SDS_printed 14 March 2022 DP5. 'Lacomit' Varnish SDS_printed 14 March 2022 DP6. David Webster WorkRite Training Summary @ 11 March 2022 DP7. Gordon Stewart WorkRite Training Summary @ 11 March 2022 DP8. Iain Baird WorkRite Training Summary @ 11 March 2022 DP9. James Davidson Workrite Training Summary @ 11 March 2022 DP10. Kathleen Duncan WorkRite Training Summary @ 11 March 2022
CCTV footage	None available
Interviews (person / people involved and witnesses)	WS1. Witness Statement Graham Phee WS2. Witness Statement Elaine MacDougall WS3. Witness Statement Iain Baird WS4. Witness Statement David Webster WS4a. Initial Report David Webster WS5. Witness Statement Derek Smeall WS6. Witness Statement Grant McAleese WS7. Witness Statement Andy Allan WS8. Witness Statement Steven Crawford