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1. PURPOSE

The aim of this procedure to describe the Risk Management process used in CLS. This SOP describes a mechanism for identifying, analysing, and mitigating potential risks to the organisation.

2. SCOPE

This SOP applies to any aspect of the business – academic or operational – where risk may need to be assessed. Consideration of risk extends, but is not limited, to:

- Maintaining academic integrity
- Avoidance of academic or other fraud
- Planning to ensure adequacy of provision of services.

3. RESPONSIBILITIES

All CLS personnel have responsibility to initiate and/or take part in risk assessment exercises as required by the business.

4. PROCEDURE

4.1 Overview

Risk management is a systematic process for the identification, assessment, control, and review of risks that may be applied to any number of processes in a business. For example, risk may need to be assessed to ensure that CLS does not engage in activities or partnerships that might undermine the integrity of the training and education offered, or any educational awards that learners may obtain via CLS.

Risk may also need to be assessed in the event of changes, e.g., addition of alternative modes of delivery.

4.2 Process Flow

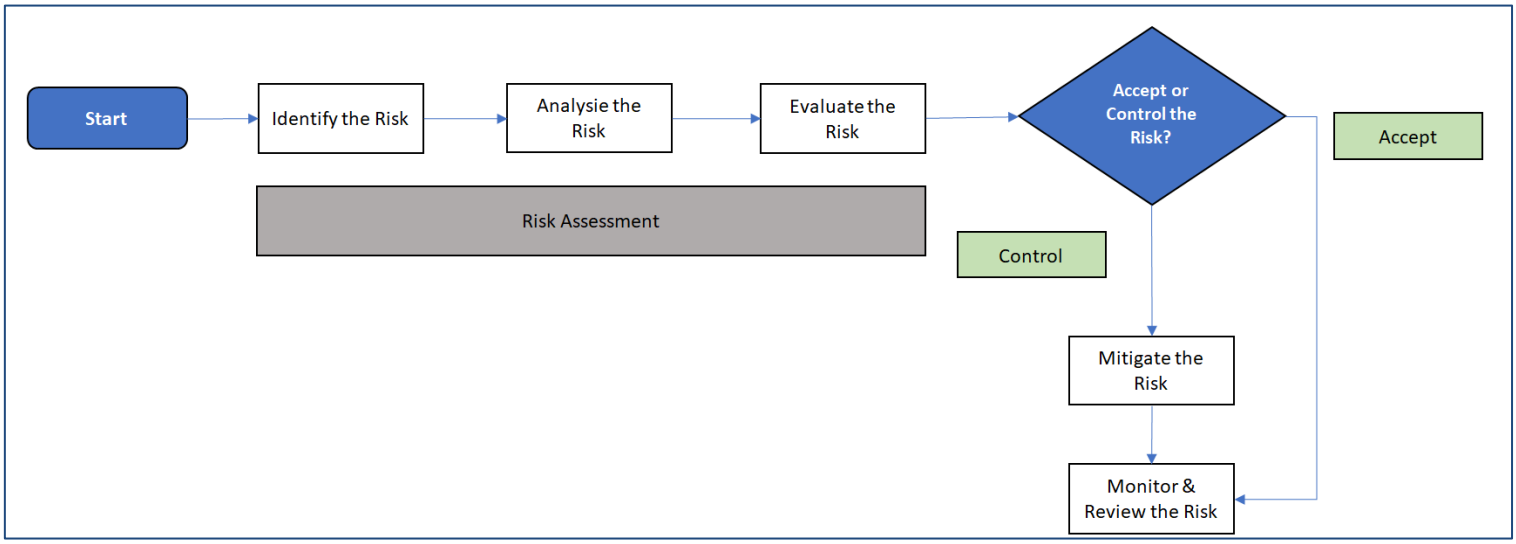

Figure 1: CLS Risk Management process flow.

Figure 1 outlines a high-level flow chart describing the risk management process. Supporting questions for each step is described below. Section 4.3 provides examples of methodologies that can be utilised in the process:

4.2.1 Assess the Risk(s)

a) **Ask: "What might go wrong?"**
b) Identify sources of risk/potential failure modes
c) Get input from various sources to leverage different perceptions, knowledge, and experience

4.2.2 Analyse the Risk(s)

a) Ask: "What is the likelihood that it will go wrong?" (occurrence)
b) Ask: "What are the consequences if it does?" (severity)
c) Ask: "How can we detect if it does go wrong?" (detectability)
d) Determine the likelihood, consequence, and detectability of each of the identified risks

4.2.3 Evaluate Risk(s)

a) Each Risk is assessed in relation to the probability of occurrence and the potential impact in the event of occurrence. Both dimensions are ranked as High, Medium, or Low.
b) Output is then determined using the grid shown below in **figure 2.**
c) Actions to mitigate risks that cannot be accepted are then identified.

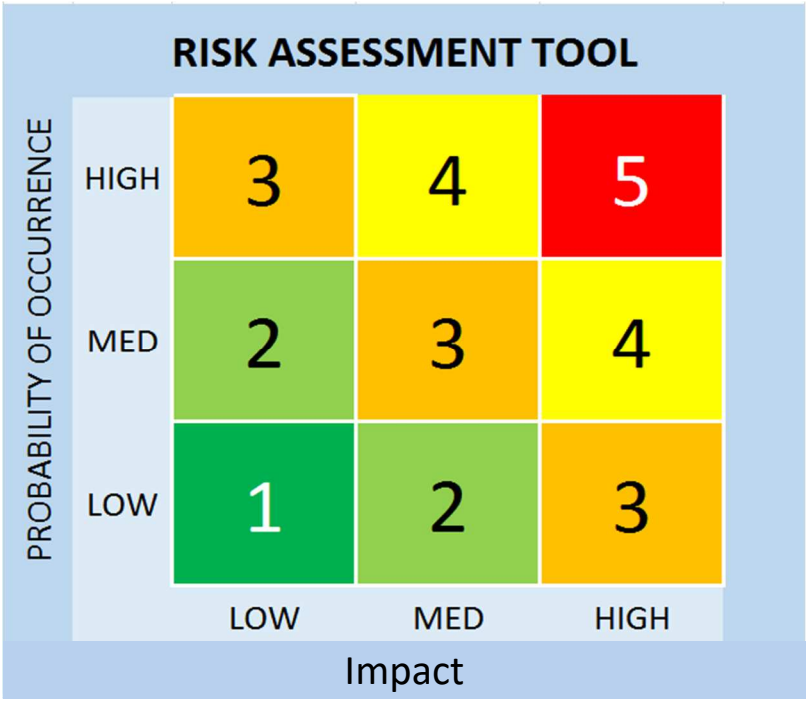

Figure 2: Risk assessment grid

4.2.4 Decision:

a) For each Risk ask: "Can the risk be accepted as is, or does it need to be controlled/mitigated in some way?"

4.2.5 Control the Risk

a) Risk Acceptance.
b) Accept risk without any mitigating measures.
c) Risk Reduction:
   - Purpose to eliminate the risk or reduce it to an acceptable level.
   - Assess if any new risks are introduced because of risk control measures.

4.2.6 Risk Monitoring & Review

a) Ongoing monitoring and review of risks to maintain knowledge in an up-to-date status.

4.2.7 logging Risks in the Risk Register Database

a) All identified risks shall be logged in the risk register database the interface of which is shown below in Figure 3. The database document ref is REC-67

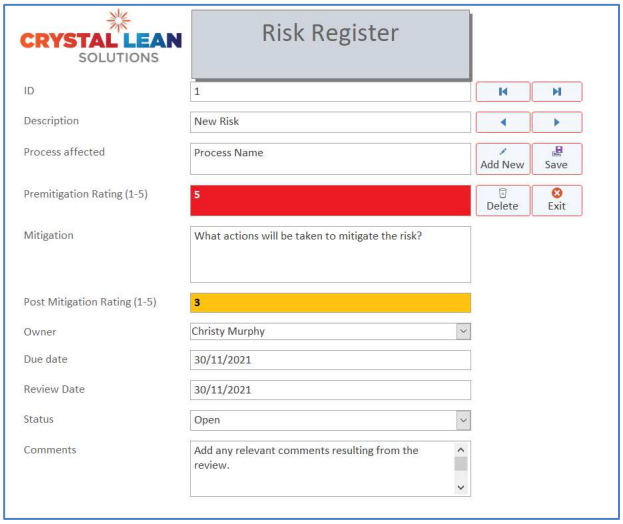

Figure 3: Risk Register database interface REC-67

4.3 Methodologies

The following are examples of methods which may be used in assessment of risk as an input to the risk register:

- Flowcharts
- Failure Mode and Effect Analysis (FMEA)
- Failure Mode, Effect and Criticality Analysis (FMECA)
- Fault Tree Analysis (FTA)
- Hazard Analysis and Critical Control Points (HACCP)

5. ABBREVIATIONS AND DEFINITIONS

5.1 Abbreviations

Abbreviation	Description
FMEA	Failure Mode and Effect Analysis
FMECA	Failure Mode, Effect and Criticality Analysis
FTA	Fault Tree Analysis
HACCP	Hazard Analysis and Critical Control Points

5.2 Definitions

Term	Definition
Risk	The combination of the probability of occurrence of a hazardous or harmful situation and the impact should the harm occur.

6. RELATED DOCUMENTS

Doc ID	Title
QG1-V2	Statutory Quality Assurance Guidelines developed by QQI for use by all Providers.
QP.10-V3	Policy on Quality Assurance Guidelines.
QG2-V2	Statutory Quality Assurance Guidelines developed by QQI for Independent/Private Providers coming to QQI on a Voluntary Basis.
REC-67	Risk Register

7. SOP HISTORY

Revision #	Reason for Revision
1	Original Version

8. DOCUMENT APPROVALS

Role	Name	Signature and Date
Author	Maria Ryan	Maria Ryan 24/02/2022
Approver	Christy Murphy	Christy Murphy 24/02/2022