Audit and Risk Assurance Committee

Meeting Date	10 June 2026
Title	Strategic risk register June 2026
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Executive Summary

The presented report sets out the HCPC's strategic risks as of June 2026.

Twelve strategic risks have been identified:

- SR01 Delivery of Regulatory Requirements
- SR02 Organisational capacity
- SR03 Appropriate action from EDI data
- SR04 Internal EDI
- SR05 HCPC Culture
- SR06 FTP effectiveness – timeliness
- SR07 FTP effectiveness - case communication
- SR08 Financial sustainability
- SR09 Digital roadmap
- SR10 Cyber security event
- SR11 Responding to regulatory change
- SR12 Delays in funding NHS manager scheme

For each risk a description has been included, along with the key controls and mitigations that are currently in place to manage the risk.

Following feedback from the Audit and Risk Assurance Committee (ARAC) and the Council, the risk appetite and mitigation narrative have been added. We will also be adding dates for when we expect to reach our target risk scores, these are still being discussed and will be included from November 2026.

Further details of mitigating actions has been added to the risks to show the work underway. The risk scores for two risks have been increased, as well as their target risk scores, to better reflect the current situation:

	May-26	Aug-26	Change	Target
SR06 FTP effectiveness - timeliness	16	20	↑	12
SR07 FTP effectiveness - case communication	12	16	↑	9

Action required	The Committee is asked to review the information provided and seek clarification on any areas.
Previous consideration	This is a standing item considered at each meeting of the Committee.
Next steps	The next strategic risk register (SRR) will be presented to ARAC in November 2026
Financial and resource implications	The SRR highlights financial and resource risks faced, and how these are being mitigated.
Associated strategic priority/priorities	Relevant to all strategic priorities
Associated strategic risk(s)	All
Risk appetite	All
Communication and engagement	None as a result of this paper.
Equality, diversity and inclusion (EDI) impact and Welsh language standards	The SRR includes internal and external EDI risks and how they are being managed.
Other impact assessments	This paper includes the strategic risk management of potential cyber security events.
Reason for consideration in the private session of the meeting (if applicable)	Not applicable

High Level Risk Summary	Risk Owner	Inherent Risk Score	Current Risk Score	Risk Appetite	Mitigating Actions 2026-27	MA Narrative	Risk movement	Target Risk Score
SR01 Delivery of Regulatory Requirements								
There is a risk that failure to deliver our statutory functions may impact patient safety and undermine public confidence. Key controls and mitigations: A 2026–27 QA workplan will review FTP, Registration and Education, alongside first-line controls. Centralised PSA coordination, and regular engagement. KPIs and performance is monitored and reported to ELT, Committees and Council. Monitoring demand and adjusting workforce levels as appropriate. Decision Review Group and Decision Assurance Group in FTP and Registration Appeals to critically consider hearing decisions and identify learning. More Rrobust English language requirements in place for international applicants and Phase 1 of changes to the international assessment model implemented in November 2025. Enhanced new record of assessment for CPD audits.	Deputy CEO & Executive Director of ERRS Executive Director of FTP & Tribunal Services	25 (I5xL5)	9 (I3xL3)	Regulation – Measured	•~~KPI review under way~~ - Complete •Implement Phase 2 changes for the new international assessment model. •Test third-party checks to better understand applicants' main qualifications. •Strengthening case management processes to support timely proportionate decision making. Investment in FTP from reserves, outsourced cases to ELP, external case update project, operational excellence in FTP support to be tendered. Reporting improvements in FTP to be comissioned •Implement the updated SETs (with supporting processes and guidance) for the QA of education programmes • Update processes and guidance to support new education and training standards.	The planned actions strengthen quality assurance, decision making, and regulatory processes across Registration, Education and Fitness to Practise. Implementation of Phase 2 of the international assessment model, enhanced qualification verification, improved case management processes and investment in FTP to improve performance in timliness and customer service, and updated education standards will provide greater consistency and assurance over regulatory decision making. Collectively, these actions are expected to reduce the likelihood of regulatory failure from possible to unlikely, enabling the risk score to reduce	→	6 (I3xL2)
SR02 Organisational capacity								
There is a risk that the our strategic ambition is not aligned with the realities of the organisation's financial and workforce capability and capacity, which may result in reduced workforce resilience, leading to diminished service performance and potential impacts on public protection. **Key controls and mitigations:** Workforce plan agreed and aligned with budgets and corporate plan. New talent acquisition approach being developed, including assessment centres for FTP roles. ELT scrutiny of business cases for new activity ensure that the capacity and capability requirements of new initiatives are carefully considered. Investment planning ensures strategic objectives are aligned with financial and resourcing constraints. 2026-2031 People Strategy launched focusing on: Living our values and purpose; Developing our potential; Creating the right conditions for success.	Executive Director of Resources	20 (I5xL4)	16 (I4xL4)	People – Open	•~~Launch new People Strategy~~ Launched •Implement workforce plans for recruitment and L&D, including recruitment to critical regulatory investigator roles in FTP •Complete establishment of new internal Legal Services Team in FTP •Recruit to new roles in HR agreed as part of workforce plan to enable recruitment and effective business partnering support to departments •Develop technology capability in accordance with workforce plan, to augment change and innovation capacity and capability •In light of FTP investment, the wider project portfolio has been re-prioritised to ensure organisational capacity. •Compliance for APDR completion is high, audit of quality of APDR returns being undertaken with any needed actions to be determined.	Delivery of the People Strategy, workforce plans, recruitment to critical roles, establishment of the internal Legal Services Team, strengthened HR capability, and development of technology skills will improve organisational resilience and ensure resources are aligned to strategic priorities. These actions will increase workforce capacity and capability, reducing the likelihood that strategic ambitions outpace organisational resources and supporting a reduction in risk. The requirement to initate the hospital managers project in Q4 and recruiting into this team with possible backfill needs in wider organisation poses a risk to capacity to be managed.	→	6 (I3xL2)
SR03 Appropriate action from EDI data								
There is a risk that inadequate collection, exploration, and understanding of EDI data leads to incomplete analysis, allowing bias within processes and decision-making to go undetected, and resulting in disproportionate outcomes with associated legal and reputational risk. **Key controls and mitigations:** EDI data held for 99% of registrants. EDI Impact assessments in place for all new projects. EDI Data sets are published on registrant protected characteristics, and analysis undertaken to understand if our regulatory decisions are fair. EDI data is requested as part of the online portal for FTP complainants. Data Governance Group is in place to actively drive a data culture across the organisation. Data Governance Lead & Senior Data Analyst Business Partner in post to ensure accountability.	Deputy CEO & Executive Director of ERRS	20 (I5xL4)	9 (I3xL3)	Data – Open	•Redevelop some aspects of EDI data collection, particularly around place of work and reasons for leaving •Continue data profiling across the key regulatory domains (Registration, Education and FTP), identifying data quality issues and working with data stewards to resolve them •Develop EDI Strategy for 2026-2031 •Scope a patient panel and/or a digital network of lived experience across our registrants and service users to help support our work.	Improvements to EDI data collection, data quality, analysis and governance will strengthen the organisation's ability to identify, understand and address potential disparities in regulatory outcomes. The development of a new EDI Strategy and increased engagement with service users and registrants will further support evidence-based decision making. Together, these actions are expected to reduce the likelihood of undetected bias and discriminatory outcomes, reducing the risk	→	6 (I3xL2)
SR04 Internal EDI								
There is a risk that insufficient identification and response to perceived inequities in staff experience may lead employees to feel they are not treated fairly, equitably, or recognised, resulting in reduced morale and engagement, and increasing the risk of discrimination issues and a weakened organisational culture. **Key controls and mitigations:** Organisational workforce plan which focuses on career development opportunities updated regularly. Hybrid working approach enables a balanced approach to optimising working patterns and productivity, taking appropriate account of individual and team circumstance. Training for aspiring managers, managers, operational managers and Leads, and senior leadership. Pay award annually, and pay review completed on a three year cycle. Annual gender, ethnicity and disability pay gaps report (last published April 2026). 2026-2031 People Strategy launched focusing on: Living our values and purpose; Developing our potential; Creating the right conditions for success.	Executive Director of Resources	20 (I5xL4)	12 (I4xL3)	People – Open	•~~Launch new People Strategy~~ - Launched •Implement workforce plan including recruitment to critical new operational roles priorities, drawing on wider talent pool •New Talent Acquisition approach, including more rigorous assessment centres for recruitment to FTP roles, drawing on widest possible talent pool •ELT review of pay gap data •Update/Refresh the behavioural framework in line with the updated values. •Graduate programme, apprenticeship workforce upskilling	The new People Strategy, workforce planning initiatives, broader recruitment approaches, review of pay gap data, behavioural framework updates and targeted development opportunities (eg aspiring to management) will help create a more inclusive and equitable employee experience. By improving organisational understanding of workforce needs and strengthening opportunities for progression and engagement, these actions are expected to reduce both the impact and likelihood of workforce inequality concerns, reducing the risk	→	4 (I2xL2)
SR05 HCPC Culture								
There is a risk that a lack of consistent leadership in fostering values, accountability, and performance culture may undermine organisational effectiveness, impacting decision quality, workforce engagement, and the delivery of credible regulation. **Key controls and mitigations:** Quarterly Pulse Survey sent to whole organisation for completion. All free text comments are reviewed by ELT. Ways of Working Policy in place. Annual all staff development day, and monthly all staff briefings led by CEO. Clear speaking up pathways, including Freedom to Speak Up Guardians, formal and informal support form HR, SLT and ELT availability, all detailed in the Speaking Up and Whistleblowing policy. 2026-2031 People Strategy launched focusing on: Living our values and purpose; Developing our potential; Creating the right conditions for success.	CEO	16 (I4xL4)	12 (I3xL4)	People – Open	•Continue developing and updating our workforce planning and succession planning frameworks •Setting up a new Employee Experience Working Group, which will bring together the key teams that can have an impact on the overall employee experience - first two meetings have taken place, embedding •Aspiring to Management programme, HR essentials, MDP (if numbers), OLDP, bespoke internal leadership upskilling, Beyond Barriers Programme •Enhanced internal communications and engagement, including monthly AEBs and annual all-employee development day. •Compliance for APDR completion is high, audit of quality of APDR returns being undertaken with any needed actions to be determined.	Enhanced workforce and succession planning, the introduction of an Employee Experience Working Group, expanded leadership development programmes, and improved internal communication arrangements will strengthen leadership capability, employee engagement and organisational accountability. These actions will support a more consistent and positive organisational culture, reducing the likelihood and impact of cultural weaknesses affecting organisational effectiveness and reducing the risk	→	4 (I2xL2)

High Level Risk Summary	Risk Owner	Inherent Risk Score	Current Risk Score	Risk Appetite	Mitigating Actions 2026-27	MA Narrative	Risk movement	Target Risk Score
SR06 FTP effectiveness - timeliness								
There is a risk that FTP improvement programmes may not achieve the required improvements in case timeliness to meet PSA Standard 15, resulting in associated performance and reputational impacts. **Key controls and mitigations:** Creation of in-house legal team to increase our capacity to manage frontloaded investigations in-house. Increase in headcount in last year to ensure capacity, capability and resilience to meet increasing demand. Senior leadership oversight of oldest cases on monthly basis. Senior leadership monthly oversight of high risk cases with ELPs.	Executive Director of FTP & Tribunal Services	25 (I5xL5)	20 (I5xL4)	Regulation – Measured	•Review of Threshold Policy to support case progression and close cases safely at the earliest opportunity. •Improve case load management, ensuring effective prioritising of cases and embedding good case management practices to assist with case progression, including special case handling. •Process improvements in approach to listing final hearings to support the development of a more efficient listing process. •Significantly increase the capacity of frontloaded cases managed in-house for cases at all stages of the process. •Using the opportunity of new contracts with ELPs and new internal legal team to review our approach to contract management and oversight	The review of the Threshold Policy, improvements to case management, hearing listing processes, increased in-house legal capacity, and enhanced oversight of external legal providers will improve the efficiency and timeliness of case progression. These actions are designed to reduce delays, improve throughput, and support sustained compliance with PSA standards. Score increased on further reflection of the current risk and realistic target risk. This is driven by the increase in case volumes and the need to resource up to meet this demand.	↑	12 (I4xL3)
SR07 FTP effectiveness - case communication								
There is a risk that a lack of effective and timely communication with case parties may prevent the regaining of PSA Standard 18, potentially impacting compliance, service quality, and stakeholder confidence. Key controls and mitigations: Lay advocacy service in place to provide independent, lay advocacy for members of the public. Working with Communicourt to provide an intermediary service for registrants and witnesses with communication needs to participate in hearings. FTP Process Factsheets and improved tone of voice on all templates. Registrant support service in conjunction with CiC, to provide free, independent and confidential support and advice to registrants involved in the FTP process.	Executive Director of FTP & Tribunal Services	25 (I5xL5)	16 (I4xL4)	Regulation – Measured	•Development of customer service first line checks in FTP, with advice and support from QA Programme Lead - In place, first round to take place Q3 •QA audit to be completed in Q3 2026-27 •Strengthen management practices to support pre-Investigating Committee teams in operational delivery and improved customer service •Develop our approach to supporting witnesses. Continuation of improvements to the support and guidance we provide to witnesses throughout the FTP process •Increased headcount to create capacity to consistently meet our customer service expectations •Changes to case management system to automate reminders for case updates, and provide reporting on updates to support team manager oversight •Review of best practice guidance for teams on customer service •FTP employees undertaking customer service training Oct 26 •FTP all employee development day will be themed on customer service Nov 26 •Regular case updates to external parties being outsourced for a period until internal resource can meet demand expected Q4. •FTP performance excellence board established to provide governance oversight of FTP improvement investment	The introduction of customer service quality checks, targeted audits, strengthened management practices, enhanced witness support, additional staffing capacity and improved case management system functionality will improve the consistency, quality and timeliness of communication with case parties. These actions will help restore confidence in the FTP process and support compliance with PSA standards, reducing the risk. Score increased on further reflection of the current risk and realistic target risk. This is driven by the increase in case volumes and the need to resource up to meet this demand.	↑	9 (I3xL3)
SR08 Financial sustainability								
There is a risk that financial pressures and limits on fee flexibility may undermine sustainability, affecting delivery, regulatory performance, and public protection. **Key controls and mitigations:** Budgeting and financial processes are followed, with audit oversight and Finance challenge aligned to ELT principles. Business change challenge is applied to investment benefits, supported by a Medium-Term Financial Strategy and efficiency plan. Integrated investment planning ensures strategic objectives are aligned with financial forecasts and affordability constraints. All investments are subject to ELT approval, with ongoing reporting of budget and milestones, and monthly financial reviews with Finance.	Executive Director of Resources	25 (I5xL5)	16 (I4xL4)	Financial – Measured	•Improve financial reporting speed and accuracy via Workday Adaptive Planning, to enable early and accurate identification of risks and opportunities and mitigations. •Strengthen financial business partnering arrangements to ensure effective financial management across organisation. •Track and report regularly on delivery of investment programme and benefits, to enable early action if project deliverables and planned benefits risk not being realised. •Implement project accounting using Business Central dimensions to improve financial management of projects. •Launch consultation on fees, conduct analysis and produce consultation outcome document; ensure that system is correctly configured to apply new fees if approved. •Maintain medium term financial plan as basis for tracking longer term risks and opportunities and scenario planning. •In light of FTP investment, the wider project portfolio has been re-prioritised to	Enhanced financial reporting, stronger business partnering, improved oversight of investment delivery, project accounting improvements, fee consultation activity and ongoing medium-term financial planning will strengthen financial management and forecasting capability. These actions will improve the organisation's ability to identify and respond to financial pressures at an earlier stage, reducing both the likelihood and impact of financial sustainability challenges and reducing the risk	→	6 (I3xL2)
SR09 Digital roadmap								
There is a risk that we fail to realise the potential benefits of innovation in ways of working and maintaining the resilience of our core processes, as a result of insufficient governance and assurance over the pace of transformation and gaps in capacity and skills, leading to reduced effectiveness. **Key controls and mitigations:** Most technology initiatives are part of the major investment programme using formal project management, a continuous improvement process is in place to support improvements to existing systems, effective business continuity planning	Executive Director of Resources	16 (I4xL4)	12 (I4xL3)	Compliance – Measured	•Develop a new Digital and AI Strategy aligned to the new Corporate Strategy. •Explore further opportunities to derive value from AI and automation, including an assessment of the technical, financial and legal requirements needed to expand the use of Copilot. •Undertake a process to secure the right long-term strategic partnership model for CRM and Business Central. •Advisor to Council on tech innovation in place. •Role for an internal IT innovation Lead being scoped.	The development of a Digital and AI Strategy, exploration of automation opportunities, and establishment of long-term strategic technology partnerships will strengthen governance, capability and delivery confidence across the digital transformation agenda. By providing clearer prioritisation, improved oversight and enhanced technical capacity, these actions are expected to reduce the likelihood that transformation objectives are not realised, reducing the risk	→	8 (I4xL2)

High Level Risk Summary	Risk Owner	Inherent Risk Score	Current Risk Score	Risk Appetite	Mitigating Actions 2026-27	MA Narrative	Risk movement	Target Risk Score
SR10 Cyber security event								
There is a risk that insufficient cyber security vigilance and defence mitigations may lead to an incident that disrupts services, compromises data, and impacts financial sustainability, compliance, confidence, and reputation. **Key controls and mitigations:** Combination of ISO27001 & Cyber Essentials Plus to maintain good level of control as a baseline. Deployment of E5 security solutions to enhance protection capabilities. Multi-factor authentication in place, SMS MFA decommissioned. Ongoing NIST-aligned assessment of assets, threats, and mitigations. Regular penetration testing to identify and address vulnerabilities	Executive Director of Resources	20 (I5xL4)	15 (I5xL3)	Compliance – Measured	•Maintain HCPC's cyber security defences, deploying new security solutions and improvements where required. •Maintain ISO 27001:2022 and deliver recertification audit in March 2027 •Implementing zero trust network •Implementing Data Loss Prevention controls	Continued investment in cyber security controls, ISO 27001 certification, implementation of a zero-trust network architecture and deployment of Data Loss Prevention controls will strengthen HCPC's ability to prevent, detect and respond to cyber threats. While the potential impact of a major cyber incident remains significant, these actions will substantially reduce the likelihood of occurrence, lowering the risk	→	10 (I5xL2)
SR11 Responding to regulatory change								
There is a risk that insufficient resources to deliver both regulatory reform and the NHS manager barring system concurrently may result in ineffective implementation of reforms and potential reputational damage, limiting the organisation's ability to ensure regulation remains fit for the modern healthcare landscape. **Key controls and mitigations:** Communications and strategic engagement, including parliamentarians and cross-party engagement, on regulatory reform. The Government have confirmed in a Written Ministerial Statement, its commitment to reforming the regulation of healthcare professionals across the UK and delivering legislation relating to the Health and Care Professions Council in this Parliamentary period. High level plan and associated costs for regulatory reform developed.	CEO Deputy CEO & Executive Director of ERRS	25 (I5xL5)	16 (I4xL4)	Reform – Open	•Co-ordinate our input to regulatory reform, including response to DHSC consultation on GMC legislation. •Develop detailed plan and refine associated costs for HCPC reform when timeline is clearer for HCPC's reform. •Chair and CEO meeting with Director General on approach to HM project September 26, legislative change will be discussed. •Pursuing strategic S.60 legislation changes short of regulatory reform to alleviate some pressure on FTP system in line with changes to other regulators legislation in recent years.	Coordinated engagement with government, regulators and stakeholders, alongside the development of detailed implementation plans and refined cost estimates, will improve organisational readiness for regulatory reform. These actions will support clearer resource planning and more effective programme delivery, reducing uncertainty and lowering the likelihood of implementation challenges.	→	8 (I4xL2)
SR12 Delays in funding NHS manager scheme								
There is a risk that delays in securing government funding, or funding levels falling short of requirements, may delay the initiation of the programme to establish effective oversight of NHS managers, leading to rushed implementation, reputational damage, and potential risks to public safety. **Key controls and mitigations:** Clear articulation of funding required. Redline on using registrant fees to fund this scheme. Work not commenced by HCPC and will not commence until funding from Government is in place.	CEO Deputy CEO & Executive Director of ERRS	25 (I5xL5)	20 (I5xL4)	Reform – Open	•Co-ordinate and deliver Communication and engagement plans related to NHS Managers. •Continued engagement with DHSC. •DHSC have issued a 'letter of comfort' on the HM funding for Q4 FY26-27, this has enabled recruitment to the project team to commence planning, conversation ongoing on full programme funding agreement. •Chair and CEO meeting with Director General on approach to HM project September 26. • Governance structure between HCPC and DHSC team discussed, to be	Ongoing engagement with DHSC and delivery of targeted communications and stakeholder engagement activities will maintain clarity regarding HCPC's requirements for project initiation. Finding for Q4 confirmed and governance structures more progressed, reduing the score liklihood. While the organisation cannot directly control government funding decisions, these actions will improve preparedness and reduce implementation uncertainty when full programme funding is confirmed. HCPC remains clear that registrant money will not be used to fund any aspect of the hospital managers project.	→	8 (I4xL2)

	May-26	Aug-26	Change	Target
SR01 Delivery of Regulatory Requirements	9	9	→	6
SR02 Organisational capacity	16	16	→	6
SR03 Appropriate action from EDI data	9	9	→	6
SR04 Internal EDI	12	12	→	4
SR05 HCPC Culture	12	12	→	4
SR06 FTP effectiveness - timeliness	16	20	↑	12
SR07 FTP effectiveness - case communication	12	16	↑	9
SR08 Financial sustainability	16	16	→	6
SR09 Digital roadmap	12	12	→	8
SR10 Cyber security event	15	15	→	10
SR11 Responding to regulatory change	16	16	→	8
SR12 Delays in funding NHS manager scheme	20	20	→	8

Heat map of strategic risks - current

	Highly unlikely 1	Unlikely 2	Possible 3	Likely 4	Highly Likely 5
Catastrophic 5			SR10	SR06 SR12	
Significant 4			SR04 SR05 SR09	SR02 SR07 SR08 SR11	
Moderate 3			SR01 SR03		
Minor 2					
Insignificant 1					

Heat map of strategic risks - target

	Highly unlikely 1	Unlikely 2	Possible 3	Likely 4	Highly Likely 5
Catastrophic 5		SR10			
Significant 4		SR09 SR11 SR12	SR06		
Moderate 3		SR01 SR02 SR03 SR08	SR07		
Minor 2		SR04 SR05			
Insignificant 1					