

Audit Committee, 9 October 2014

Risk Register

Executive summary and recommendations

Introduction

The Risk register is updated on a rolling six monthly timetable. The version presented, will be used as the basis for department based presentations of risks for the next six months.

Decision

The Risk Register has been updated over summer 2014. Considerable changes have been recorded, particularly within the Finance area. Within the Projects area, some projects are completed, or renamed to indicate progression from review of processes, to a build status.

A simple Risk Assurance map is attached at the request of Audit Committee.

Background information

None

Resource implications

None if proposed solution is used

Financial implications

None if proposed solution is used

Appendices

Appendix 1 October Risk Register

Risk Register

Marc Seale, Chief Executive & Registrar
Report to Audit Committee, (Oct 2014)



Jul 2014 Risk Assessment

Contents	Page
Contents page	2
Top 10 HCPC risks	3
Changes since last published	4
Strategic risks	7
Communications risks	10
Continuing Professional Development (CPD) risks now in Registrations risks	
Corporate Governance risks	11
Education risks	14
Finance risks	22
Fitness to Practise risks	20
HR risks	18
Information Security risks	25
Information Technology risks	12
Legal risks	19
Operations risks	8
Partner risks	13
Pensions risks	24
Policy & Standards risks	21
Project Management risks	15
Quality Management risks	16
Registration risks	17
Appendix i Glossary and Abbreviations	26
Appendix ii HCPC Risk Matrix	27
HCPC Risk Matrix terms detail	28
Appendix iii HCPC Strategic Objectives	29
Appendix iv HCPC Assurance Mapping	30

THE HEALTH AND CARE PROFESSIONS COUNCIL

"Top 10" Risks (High & Medium after mitigation)

	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Mitigation I	Mitigation II	Mitigation III	CURRENT RISK SCORE
15.23	PSA full cost recovery model places excessive financial pressure on HCPC from April 2015 onwards (pre-mit 20)	Chief Executive & Finance Director	Communicate with Department of Health to understand potential models for cost recovery	Increase fees	Cut costs	High
2.7	Interruption to electricity supply (pre-mit 16)	Facilities Manager	Relocate to other buildings on site	If site wide longer than 24 hours invoke DR Plan	-	High
13.3	Tribunal exceptional costs (pre-mit 25)	FTP Director	Quality of operational processes	Accurate and realistic forecasting	Quality of legal advice	Medium
1.5	Loss of reputation (pre-mit 20)	Chief Executive	Quality of governance procedures	Quality of operational procedures	Dynamism and quality of Comms strategy	Medium
2.11	Basement flooding (pre-mit 16)	Facilities Manager	Flood barrier protection to prevent ingress	-	-	Medium
13.4	Rapid increase in number of allegations and resultant legal costs (pre-mit 16)	FTP Director	Accurate and realistic budgeting	Resource planning	-	Medium
15.24	Financial distress of trade suppliers causes loss of service (pre-mit 16)	Finance Director	Financial monitoring of key suppliers via Dun & Bradstreet	Escrow agreements	Alternative suppliers	Medium
12.1	Judicial review of HCPC's implementation of HSWPO including Rules, Standards & Guidance (pre-mit 15)	Chief Executive	Consultation. Stds determined by PLG's. Agreement by Council.	Appropriate legal advice sought	-	Medium

Risks listed in order of CURRENT RISK SCORE, then PRE_MITIGATION SCORE

Historic Risk Scores

Feb 2014 Risk	Sept 2013 Risk	Feb 2013 Risk	Sept 2012 Risk	Feb 2012 Risk	July 2011 Risk	Feb 2011 Risk	Sept 2010 Risk	Feb 2010 Risk
Low	Low							
High	High	High	High	High	High	High	High	High
Medium	Medium	Medium	High	High	High	High	High	High
Medium	Medium	Medium	Medium	Medium	Medium	Medium	Medium	Medium
Medium	Medium	Medium	Medium	Medium	Medium	Medium	Medium	Medium
Medium	Medium	Medium						
Medium	Medium	Medium	Medium	Medium	Medium	Medium	Medium	Medium
Medium	Medium	Medium	Medium	Medium	Medium	Medium	Medium	Medium

Changes since the previous iteration of HCPC's Risk Register

Category	Ref#	Description	Nature of change in this version
All Risk categories		Adjust financial levels within impact criteria	Values changed
		Add page of Strategic Objectives and appropriate codes	Added to end of document
		Add Assurance mapping document to end of risk register	Added to end of document
Strategic Risks	1.7	Failure to maintain HCPC culture	Transferred from GSCC Project
Operational Risks	2.15	Add risk at request of Audit Committee	Add risk around Partner Expenses fraud
Corporate Governance	4.4	Changes to detail around quorums	Description updated, Mitigation III removed
	4.9	Health & Safety of Council Members	
	4.14	Transition to smaller Council	REMOVED
	4.16	Failure to achieve support of Council member appointments from PSA	New
	4.17	Failure to meet requirements of the constitution order	New
IT	5.1	Update Mit I	Changed
	5.5	Update Likelihood to 5, update Mit I	Changed
Project Management	8.1	Fee rise delivered - risk suspended until next fee review	Changed
	8.13	Education system, review completed, move to bui;ld phase	Description changed
	8.14	HR & Partner review completed, move to build phase	Description changed
	8.15	Professional indemnity project completed	Risk removed
	8.16	Annotation of the register project completed	Risk removed
	8.18	Add Registrations Review project	New
HR	11.1	Modify name of risk mitigation and lower impact & likelihood	Edit name of Mitigation 1
	11.8	Edit Impact & Likelihood, lowering risk before mitigations	risk lowered
FTP	13.1	Mitigation II (insurance) removed as not cost effective	Mit III becomes Mit II, and new Mit III added
	13.6	Mitigation I changed	Edit Mit I
	13.8 & 9	Mitigation I changed, from Annual to Reforcasting	Edit Mit I
Finance Risks	15.1	Insufficient cash to meet commitments	Description of mitigations updated
	15.2	Unexpected rise in operating expenses	Impact score increased from 3 to 4; description of mitigations updated; legal costs insurance no longer a mitigation - was discontinued because it was poor vfm
	15.3	Major Project Cost Over-runs	Description of mitigations updated
	15.5	Inability to pay creditors	REMOVED. Risk described was inability to perform a basic function due to system failure. Removed because (a) occurrence unlikely because systems are well established; (b) if the risk occurred, it would probably be as a result of one of risks already recorded on the IT or Operations sections of the risk register, so inclusion in the Finance section was double counting, and those risks are already mitigated as described; (c) there would be a 1-2 week period in which problem could be resolved before there was any lasting impact
	15.6	Inability to collect from debtors	As per 15.5

	15.7	Registrant Credit Card record fraud/theft	Impact score reduced from 3 to 2; likelihood score increased from 1 to 2; description of mitigations updated
	15.8	Receipt of fee income as per collection schedule	As per 15.5
	15.10	Unauthorised payments to organisations	REMOVED. Fraud aspect of the risk covered in consolidated risk 15.13a. Mistake aspect of the risk covered in new risk 15.27
	15.11	Unauthorised payments to personnel	As per 15.10
	15.12	Unauthorised removal of assets (custody issue)	IT Director added as joint owner; impact score reduced from 3 to 2; description of mitigations updated
	15.13	Mis-signing of cheques (forgery)	REMOVED. Now covered in consolidated risk 15.13a
	15.14	Non compliance with FReM reporting	REMOVED. We have no complex accounting issues. Changes to the FReM are published well in advance of their effective date. We would always aim to comply. Any (unlikely) initial non-compliance would be discussed and corrected through the audit process
	15.15	Qualified opinion received by the Auditors on the Statutory Financial Statements	As per 15.14
	15.16	Late submission of the Annual Report, beyond sector standards	REMOVED
	15.18	PAYE/Nl/corporation tax compliance	Now includes Corporation tax; impact score reduced from 3 to 2; likelihood score increased from 2 to 3; description of mitigations updated
	15.19	Corporation tax compliance (tax due on investment income only)	Incorporated into 15.18
	15.20	Bank insolvency: permanent loss of deposits or temporary inability to access deposits	Likelihood score reduced from 2 to 1; description of mitigations updated
	15.21	Financial distress of key trade suppliers causes loss of business critical service	Scope of risk narrowed from all suppliers to key suppliers, therefore likelihood score reduced from 4 to 2. Description of mitigations updated
	15.22	Payroll process delay or failure	Impact score reduced from 5 to 2
	15.23	PSA full cost recovery model places excessive pressure on HCPC finances from April 2015 onwards	Likelihood score increased from 3 to 5; description of mitigations updated
	15.24	Failure to apply good procurement practice (contracts below OJEU threshold) leads to poor value for money and/or criticism	Redefining as risk relating to non-OJEU procurements (risk relating to OJEU procurements now recorded separately in 15.25), therefore impact score reduced from 4 to 2; description of mitigations updated
	15.25	Failure to adhere to OJEU Procurement and Tendering requirements leads to legal challenge and costs	Recording risk relating to OJEU procurements separately
	15.26	Budgeting error leads to overcommitment of funds	New
	15.27	Payment error leads to irrecoverable funds	New, though incorporates aspects of old risks 15.10 and 15.11
Pensions	16.2	Non compliance with pensions legislation	Scope of risk widened to cover all pensions, not just Capita Flexiplan scheme. HR Director added as joint owner; impact score reduced from 4 to 3; description of mitigations updated
	16.3	Increase in the Capita Flexiplan funding liability resulting from scheme valuation deficiency	Impact score reduced from 4 to 3; likelihood score reduced from 3 to 2; description of mitigations updated

Overview of Risk Management process

Throughout the year existing risks are continually monitored and assessed by Risk Owners against Likelihood, and Impact on HCPC, the effectiveness of mitigations and the levels of residual risk.

Future risks are also documented, evaluated and monitored against the same criteria.

Every six months these changes and additions to risks are updated in the risk register and formally documented by the Director of Operations or Head of Business Process Improvement, and the Top Ten Risks (High & Medium only after mitigation) are presented to the Audit Committee.

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Strategic

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
1	Strategic	1.1	HCPC fails to deliver SI Sec 6.2 & Health Bill Links to 7.1-7.4, 18.1, 8.1-8.3, 10.4, 10.5, 11.4, 15.9	Council	5	1	5	Delivery of HCPC Strategy	Publication of Annual Report	-	Low	Low
	Strategic	1.2	Unexpected change in UK legislation Links to 2.2, 46-44	Chief Executive	5	2	10	Relationship with Government depts	Enviromental scanning	-	Low	Low
	Strategic	1.3	Incompatible SI Sec 6.2 & Health Bill and EU legislation	Chief Executive	1	3	3	Monitoring of EU directives e.g. Professional Qualifications Directive	Membership of Alliance of UK Health Regulators on Europe (lobby group)	-	Low	Low
	Strategic	1.4	Failure to maintain a relationship with PSA (formerly CHRE)	Chief Executive & Chair	5	1	5	HCPC Chair and Chief Executive relationship with PSA	Communications	-	Low	Low
	Strategic	1.5	Loss of reputation	Chief Executive & Chair	5	4	20	Quality of governance procedures	Quality of operational procedures	Dynamism and quality of Comms strategy	Medium	Medium
	Strategic	1.6	Failure to abide by current Equality & Diversity legislation	Chief Executive	4	2	8	Equality & Diversity scheme	Implimentation of scheme for employees Implementation of scheme for partners	Equality & Diversity working group	Low	Low
	Strategic	1.7	Failure to maintain HCPC culture	Chief Executive	5	2	10	Behaviour of all employees	Induction of new employees	Internal communication	Low	NEW

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Operations

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
2	Operations	2.1	Inability to occupy premises or use interior equipment	Facilities Manager	4	2	8	Invoke Disaster Recovery/Business Continuity plan	Commercial combined insurance cover (fire, contents, terrorism etc)	-	Low	Low
	Operations	2.2	Rapid increase in registrant numbers Links to 1.2, 13.4	Chief Executive and EMT	3	5	15	Scaleable business processes and scalable IT systems to support them	Influence the rate at which new professions are regulated	-	Low	Low
	Operations	2.3	Unacceptable service standards Links to 9.1, 10.4	Director of Operations	5	4	20	ISO 9001 Registration, process maps, well documented procedures & BSI audits	Hire temporary employees to clear service backlogs	Detailed workforce plan to match workload.	Low	Low
	Operations	2.4	Inability to communicate via postal services (e.g. Postal strikes)	Facilities Manager	3	3	9	Use of other media including Website, newsletter & email and courier services	Invoke Disaster Recovery Plan	Collection of >80% income fees by DD	Medium	Medium
	Operations	2.5	Public transport disruption leading to inability to use Park House	Facilities Manager & Head Bus Proc	4	5	20	Contact employees via Disaster Recovery Plan process	Make arrangements for employees to work at home if possible	-	Low	Low
	Operations	2.6	Inability to accommodate HCPC employees Links to 5.2	Facilities Manager	4	3	12	Ongoing Space planning	Additional premises purchase or rented	-	Low	Low
	Operations	2.7	Interruption to electricity supply	Facilities Manager	4	4	16	Relocate to other buildings on site	If site wide longer than 24 hours invoke DR Plan	-	High	High
	Operations	2.8	Interruption to gas supply	Facilities Manager	1	2	2	Temporary heaters to impacted areas			Low	Low
	Operations	2.9	Interruption to water supply	Facilities Manager	2	2	4	Reduce consumption	Temporarily reduce headcount to align with legislation	Invoke DR plan if over 24 hrs	Low	Low
	Operations	2.10	Telephone system failure causing protracted service outage	Director of IT	4	3	12	Support and maintenance contract for hardware and software of the ACD and PABX	Backup of the configuration for both the ACD and PABX	Diverse routing for the physical telephone lines from the two exchanges with different media types	Low	Low
	Operations	2.11	Basement flooding	Facilities Manager	4	4	16	Flood barrier protection to prevent ingress	-	-	Medium	Medium
	Operations	2.12	Significant disruption to UK transport network by environmental extremes e.g. snow, rain, ash; civil unrest or industrial action; disrupts planned external activities	Director of Operations & Head Bus Proc	3	2	6	Use of alternate networks	Use of video or teleconferencing facility to achieve corum	Invoke Disaster Recovery/Business Continuity plan	Low	Low
	Operations	2.14 (formerly 11.5)	Health & Safety of employees Links to 4.9, 6.3	Chief Executive & Facilities Manager	5	4	20	Health & Safety Training, policies and procedures	H&S Assessments	Personal Injury & Travel insurance	Low	Low

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Operations

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
	Operations	2.15	Expenses abuse by Partners not prevented	Director of FTP, Director of Education, Head of Registration, Partner Manager	1	2	2	Clear and appropriate Partner Expenses policy	Sign off by "user" departments	Planned travel supplier only policy in near future	Low	

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Communications

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
3	Communications	3.1	Failure to inform public Article 3 (13)	Director of Comms	5	1	5	Delivery of communications strategy.	Delivery of aspects of communications workplan, specifically public information campaigns, multi media advertising, distribution of public information materials, and web.	-	Low	Low
	Communications	3.2	Loss of support from Key Stake holders including professional bodies, employers or government Links to 1.5	Director of Comms	5	3	15	Delivery of communications strategy, supporting the HCPC strategy	Delivery of aspects of communications work plan, specifically stakeholder activities	Quality of Operational procedures	Low	Low
	Communications	3.3	Inability to inform stakeholders following crisis	Director of Comms	4	1	4	Invoke Disaster Recovery Plan	Up to date Comms DR plan available	-	Low	Low
	Communications	3.4	Failure to inform Registrants Article 3 (13)	Director of Comms	5	1	5	Delivery of communications strategy	Delivery of aspects of communications workplan, specifically, Meet the HCPC events, campaigns, Registrant Newsletter, Professional media and conference attendance . Publications and web.	Quality of Operational procedures	Low	Low
	Communications	3.5	Publication of material not approved for release	Director of Comms	4	2	8	Delivery of communications plan	Adherence to operational plans (Social Media planner)	-	Low	Low

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Corporate Governance

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
4	Corporate Governance	4.1	Council inability to make decisions Links to 4.4	Director of Council & Committee Services, & Chair	3	1	3	Regular meetings, agendas and clear lines of accountability between Council and committees	Well researched and drafted decision papers at meetings	Attendance by external professionals as required	Low	Low
	Corporate Governance	4.2	Council members conflict of interest	Chair	4	4	16	Disclosure of members' interests to the Secretariat and ongoing Council & committee agenda item	Annual reminder to update Register of Interests	Member induction and training	Low	Low
	Corporate Governance	4.3	Poor decision-making eg conflicting advice or conflicting advice and decisions	Chair	4	1	4	Well-researched & drafted decision papers, Clear lines of accountability and scheme of delegation	Chair's involvement in the induction and relevant training of members	Attendance by external professionals, as required.	Low	Low
	Corporate Governance	4.4	Failure to meet Council/Committee quorums / failure to make quorate decisions Links to 4.1	Director of Council & Committee Services	4	3	12	Clear communication of expectations of Council members' duties upfront	Adequate processes notifying Council & committee members of forthcoming meetings prior to meeting including confirmation of attendance	Committee secretaries and chairs advised that inquorate meetings must not proceed	Low	Low
	Corporate Governance	4.5	Members' poor performance	Chair	4	1	4	Appointment against competencies	Annual appraisal of Council members	Removal under Sch 1, Para 9(1)(f) of the HSWPO 2001	Low	Low
	Corporate Governance	4.6	Poor performance by the Chair	Council	5	1	5	Appointment against competencies	Power to remove the Chair under Sch 1, Article 12(1) C of the HSWPO 2001	-	Low	Low
	Corporate Governance	4.7	Poor performance by Chief Executive	Chair	5	1	5	Performance reviews and regular "one to ones" with the Chair	Contract of Employment	-	Low	Low
	Corporate Governance	4.8	Improper financial incentives offered to Council members/employees	Chair and Chief Executive	4	2	8	Gifts & Inducements policy	Council member code of conduct	Induction training re: adherence to Nolan principles & Bribery Act 2010	Low	Low
	Corporate Governance	4.9	Failure to ensure the Health & Safety of Council Members ? Should this be HCPC wide? Links to 6.3, 11.5	Director of Council & Committee Services, Facilities Manager & Finance Director	4	2	8	Safety briefing at start of each Council or Committee meeting.	H&S information on Council Extranet	Personal Injury and Travel insurance	Low	Low
	Corporate Governance	4.10	Member recruitment problem (with the requisite skills) Links to 6.1, 11.13	Chair	4	2	8	Maintenance of a detailed role description for these positional applicants on to HCPC or its committees	Use of skills matrix in recruitment exercise	Induction of panel members	Low	Low
	Corporate Governance	4.11	Expense claim abuse by members	Director of Council & Committee Services	4	2	8	Members Code of Conduct (public office)	Clear and comprehensive Council agreed policies posted on the Council member Extranet and made clear during induction	Budget holder review and authorisation procedures	Low	Low
	Corporate Governance	4.12	Operationalise Section 60 legislation	Council	5	2	10	Scheme of delegation	MIS	EMT & CDT	Low	Low
	Corporate Governance	4.13	Failure to comply with DPA 1998 or FOIA 2000, leading to ICO action	Director of Council & Committee Services	3	3	9	Legal advice	Clear ISO processes	Department training	Low	Low
	Corporate Governance	4.15	Failure to adhere to the requirements of the Bribery Act 2010	Chair, & Director of Council & Committee Services	4	2	8	Suite of policies and processes related to the Bribery Act	Oversight of HCPC processes that could be vulnerable to bribery, by EMT and Internal Audit	Compliant processes designed for HCPC as a matter of course	Low	Low
New	Corporate Governance	4.16	PSA fails to recommend appointment of Council members to the Privy Council	Director of Council & Committee Services	1	5	5	Sign off of high level process by Council	PSA comments on advance notice of intent acted on appropriately	PSA informed of any deviations from agreed process at earliest opportunity	Low	New
New	Corporate Governance	4.17	Failure to meet requirements of the constitution order	Director of Council & Committee Services	3	1	3	Scrutiny of advance notice of intent	Targeted advertising strategy	-	Low	New

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Information Technology

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
5	IT	5.1	Software Virus damage Links to 2.3, 10.2	Director of IT	4	5	20	Anti-virus software deployed at several key points. Application of security patches in a timely manner	Adherence to IT policy, procedures and training	Regular externally run security penetration tests.	Low	Low
	IT	5.2	Technology obsolescence, (Hard/SoftWare) Links to 2.6, 10.2	Director of IT	2	2	4	Delivery of the IT strategy including the refresh of technology.	Employ small core of mainstream technology with recognised support and maintenance agreements	Accurately record technology assets.	Low	Low
	IT	5.3	Fraud committed through IT services Links to 10.2 and 17.1	Director of IT	3	3	9	Appropriate and proportionate access restrictions to business data. System audit trails.	Regular, enforced strong password changes.	Regular externally run security tests.	Low	Low
	IT	5.4	Failure of IT Continuity Provision	Director of IT	4	3	12	Annual IT continuity tests	IT continuity plan is reviewed when a service changes or a new service is added	Appropriate and proportionate technical solutions are employed. IT technical staff appropriately trained.	Low	Low
	IT	5.5	Malicious damage from unauthorised access	Director of IT	4	5	20	Security is designed into the IT architecture, using external expert consultancy where necessary	Regular externally run security penetration tests.	Periodic and systematic proactive security reviews of the infrastructure. Application of security patches in a timely manner. Physical access to the IT infrastructure restricted and controlled.	Low	Low
	IT	5.6	Data service disruption (via utility action)	Director of IT	5	1	5	Redundant services	Diverse routing of services where possible	Appropriate service levels with utility providers and IT continuity plan	Low	Low

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Partners

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
6	Partners	6.1	Inability to recruit and retain suitable Partners Links to 4.10, 11.3, 7.3, 18.1	Partner Manager	3	3	9	Targetted recruitment strategy.	Appropriate fees for partner services and reimbursement of expenses.	Efficient and effective support and communication from the Partner team.	Low	Low
	Partners	6.2	Incorrect interpretation of law and/or SI's resulting in PSAHSE review	Director of FTP, Director of Education, Head of Registration, Partner Manager	2	4	8	Training	Legal Advice	Regular appraisal system	Low	Low
	Partners	6.3	Health & Safety of Partners Links to 4.9, 11.5	Partner Manager	3	2	6	H&S briefing at start of any HCPC sponsored event.	Liability Insurance	-	Low	Low
	Partners	6.4	Partners poor performance	Director of FTP, Director of Education, Head of Registration, Partner Manager	4	3	12	Regular training	Regular appraisal system	Partner Complaints Process & Partner Code of Conduct	Low	Low
	Partners	6.5	Incorrect interpretation of HSWPO in use of Partners	Director of FTP, Director of Education, Head of Registration, Partner Manager	3	2	6	Correct selection process and use of qualified partners	Daily Email notificaton of partner registrant lapse	-	Low	Low
	Partners	6.6	Adequate number and type of partner roles	Partner Manager, Director of FTP, Director of Education, Head of Registration	3	2	6	Regular review of availability of existing pool of partners to ensure requirements are met.	Annual forecasting of future partner requirements to ensure that they are budgetted for.	Staggered partner agreements across professions for Panel Member and Panel Chair to ensure adequate supply in line with the eight year rule.	Low	Low
	Partners	6.7	User departments using non-active partners	Partner Manager, Director of FTP, Director of Education, Head of Registration	3	3	9	Notification of partner resignations to user departments.	Current partner lists available to user departments on shared drive.	-	Low	Low
	Partners	6.8	Expense claim abuse by Partners	Partner Manager, Director of FTP, Director of Education, Head of Registration	2	2	4	Budget holder review and authorisation process	Comprehensive Partner agreement	Challenge of non standard items by, Finance department and Partner Department	Low	NEW

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Education

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
7	Education	7.1	Failure to detect low education providers standards	Director of Education	4	2	8	Operational processes (approval, monitoring and complaints about an approved programme)	Regular training of employees and visitors	Memorandums of understandings with other regulators (e.g. CQC and Care Councils)	Low	Low
			Links to 1.1, 4.3, 6.4									
	Education	7.2	Education providers refusing visits or not submitting data	Director of Education	3	2	6	Legal powers (HSWPO 2001)	Delivery of Education Dpt supporting activities as documented in regular work plan	-	Low	Low
			Links to 1.1									
	Education	7.3	Inability to conduct visits and monitoring tasks	Director of Education	4	2	8	Adequate resourcing, training and visit scheduling	Approvals & monitoring processes	Temporary staff hire to backfill or clear work backlogs	Low	Low
			Links to 1.1, 6.1, 11.2 & 11.3									
	Education	7.4	Loss of support from Education Providers	Chief Executive or Director of Education	5	2	10	Delivery of Education strategy as documented in regular work plan	Partnerships with Visitors and professional groups.	Publications, Newsletters, website content, inclusion in consultations and relevant PLGs, consultations with education providers	Low	Low
			Links to 1.1, 14.2									
	Education	7.5	Education database failure	Director of IT	3	2	6	Effective backup and recovery processes	In house and third party skills to support system	Included in future DR/BC tests	Low	Low
	Education	7.6	Loss or significant change to funding, commissioning and placement opportunities for approved programmes	Director of Education	3	2	6	Operational processes (approval, monitoring and complaints about an approved programme)	Partnerships with Visitors and professional groups.	Regular training of employees and visitors	Low	Low

THE HEALTH AND CARE PROFESSIONS COUNCIL

RISK ASSESSMENT July 2014

Project Management

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the on-going risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
8	Project Management	8.1	Fee change processes not operational by required date	Director of Finance Project Portfolio Manager	3	3	9	Project is managed as part of major projects portfolio & managed in accordance with HCPC Project Management process	Project progress monitored by EMT & stakeholders	-	Low	Low
			Links to 1.1, 15.3									
	Project Management	8.2	Failure to regulate a new profession or a post-registration qualification as stipulated by legislation	Project Lead Project Portfolio Manager	5	1	5	Project is managed as part of major projects portfolio & managed in accordance with HCPC Project Management process	Project progress monitored by EMT & stakeholders	Assess lessons to be learned from previous projects	Low	Low
			Links to 1.1, 15.3									
	Project Management	8.13	Failure to build a system to the the Education departments requirements	Director of Education Project Portfolio Manager	3	2	6	Project is managed as part of major projects portfolio & managed in accordance with HCPC Project Management process	Project progress monitored by EMT & stakeholders	Ensure robust testing including load	Low	Low
	Project Management	8.14	Failure to deliver a system to the HR & Partners departments requirements	Director of HR Project Portfolio Manager	3	2	6	Project is managed as part of major projects portfolio & managed in accordance with HCPC Project Management process	Project progress monitored by EMT & stakeholders	Project Initiation stage to pay particular attention to project scope and breadth/reach of project	Low	Low
	Project Management	8.17	Organisation wide resourcing may impact project delivery	EMT & Project Portfolio Manager	3	4	12	Manage resources accordingly	Accept changes to planned delivery		Med	Med
	Project Management	8.18	Registration processes review project	Director of Operations & Project Portfolio Manager	3	3	9	Project is managed as part of major projects portfolio & managed in accordance with HCPC Project Management process	Project progress monitored by EMT & stakeholders	Assess lessons to be learned from previous projects	Low	New

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Quality Management

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
9	Quality Management.	9.1	Loss of ISO 9001:2008 Certification	Director of Operations, Head of Business Improvement	4	3	12	Regular & internal audits	QMS standards applied across HCPC	Management buy - in	Low	Low
			Links to 2.3, 10.3									
	Quality Management.	9.2	Employees non-compliance with established Standard Operating Procedures	EMT	5	2	10	Culture, follow procedures and report errors	Standard Operating Procedures and prevention of overwriting systems	Extend ISO systems as required	Low	New

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Registrations

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
10	Registration	10.1	Customer service failures	Director of Operations, Head of Registration	5	4	20	Accurate staffing level forecasts	Adequate staff resourcing & training	Supporting automation infrastructure eg call centre systems, NetRegulate system enhancements, registration re-structure	Low	Low
			Links to 11.1, 11.2									
	Registration	10.2	Protracted service outage following a NetRegulate Registration system failure	Director of IT	5	3	15	Effective backup and recovery procedures	Maintenance and support contracts for core system elements.	Annual IT Continuity tests	Low	Low
			Links to 5.1-5.3 and 17.1									
	Registration	10.3	Inability to detect fraudulent applications	Director of Operations, Head of Registration	5	2	10	Financial audits, system audit trails	Policy and procedures supported by internal quality audits	Validation of submitted information, Education & ID checks	Low	Low
			Links to 9.1, 17.1 and 17.2									
	Registration	10.4	Backlogs of registration and applications	Director of Operations, Head of Registration	4	3	12	Continually refine model of accurate demand-forecasting, to predict employees required to prevent backlogs, and service failures	Process streamlining	Maintain required employee attendance and time keeping to service applicants and registrants	Low	Low
			Links to 1.1									
	Registration	10.5	Mistake in the Registration process leading to liability for compensation to Registrant or Applicant	Director of Operations, Head of Registration	5	2	10	Audits by Registration Management, system audit trails, external auditors	Professional indemnity insurance. Excess £2.5K. Limit £1M. (Doesn't cover misappropriation of funds)	Policy and procedures supported by ISO quality audits and process controls/checks	Low	Low
18	CPD	10.6 (18.1-7.5)	CPD processes not effective	Director of Operations, Head of Registration	4	2	8	Well documented processes	Appropriately trained members of the registrations team	Monitor and regulator feedback to the Education & Training Committee	Low	Low
			Links to 1.1									

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

HR

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
11	HR	11.1	Loss of key HCPC employees	Chair, Chief Executive and EMT	3	2	6	Organisation succession plan held by HR Director. Succession planning generally.	Departmental training (partial or full) and process documentation	-	Low	Low
	HR	11.2	High turnover of employees Links to 11.3	HR Director	3	2	6	Remuneration and HR strategy	Regular performance reviews	Exit interview analysis	Low	Low
	HR	11.3	Inability to recruit suitable employees Links to 4.10, 6.1, 11.2, 11.8	HR Director	2	2	4	HR Strategy and adequate resourcing of the HR dept	Careful specification of recruitment adverts and interview panel selection	Hire skilled temporary staff in the interim	Low	Low
	HR	11.4	Lack of technical and managerial skills to delivery the strategy Links to 1.1	Chief Executive	4	3	12	HR strategy and goals and objectives (buy in the skills v staff upskilling on the job v training)	Training needs analysis & training delivery.	Some projects or work initiatives delayed or outsourced	Low	Low
	HR	11.6	High sick leave levels	EMT	2	3	6	Adequate staff (volume and type) including hiring temporary staff	Return to work interviews and sick leave monitoring	Regular progress reviews	Low	Low
	HR	11.7	Employee and ex-employee litigation	HR Director	4	3	12	Regular one on one sessions between manager and employee and regular performance reviews.	HR legislation and HR disciplinary policies	Employee surveys, Exit Interviews	Low	Low
	HR	11.8	Employer/employee inappropriate behaviour Links to 11.3	HR Director	2	2	4	Whistle blowing policy, Code of Conduct & Behaviour.	Other HR policy and procedures	Employee Assistance programme	Low	Low
	HR	11.9	Non-compliance with Employment legislation includes Auto enrolment pensions	HR Director	5	2	10	HR Strategy	Obtain legislation updates and legal advice	HR policies and Manager training	Low	Low

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Legal

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
12	Legal	12.1	Judicial review of HCPC's implementation of HSWPO including Rules, Standards & Guidance Links to 1.2, 14.1, 14.2	Chief Executive	5	3	15	Consultation. Stds determined by PLG's. Agreement by Council.	Appropriate legal advice sought	-	Medium	Medium
	Legal	12.2	Legal challenge to HCPC operations	Chief Executive	4	4	16	Legal advice and ISO	Communications	-	Low	Low

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Fitness to Practise

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
13	Fitness to Practise	13.1	Legal cost over-runs	FTP Director	4	4	16	Contractual and SLA arrangements with legal services providers(s)	Quality of operational procedures	Quality assurance mechanisms	Low	Low
			Links to 13.4, 15.2									
	Fitness to Practise	13.3	Tribunal exceptional costs	FTP Director	5	5	25	Quality of operational processes	Accurate and realistic forecasting	Quality of legal advice	Medium	Medium
	Fitness to Practise	13.4	Rapid increase in the number of allegations and resultant legal costs	FTP Director	4	4	16	Accurate and realistic budgeting	Resource planning	-	Medium	Medium
			Links to 13.1									
	Fitness to Practise	13.5	Witness non-attendance	FTP Director	4	2	8	Vulnerable witness provisions in the legislation	Witness support programme	Witness summons	Low	Low
	Fitness to Practise	13.6	Employee/Partner physical assault by Hearing attendees	FTP Director	5	5	25	Risk Assessment Processes	Adequate facilities security	Periodic use of security contractors and other steps	Low	Low
	Fitness to Practise	13.7	High Number of Registration Appeals	FTP Director & Director of Operations, Head of Registrations	3	5	15	Training and selection of Registration Assessors, so reasoned decisions are generated	Quality of operational processes	-	Low	Low
	Fitness to Practise	13.8	Backlog of FTP cases	FTP Director	3	4	12	Reforecasting budget processes	Monthly management reporting	Quality of operational processes	Low	Low
	Fitness to Practise	13.9	Excessive cases per Case Manager workload	FTP Director	3	4	12	Reforecasting budget processes	Monthly management reporting	-	Low	Low
			13.2 moved to 12.2									
	Fitness to Practise	13.10	Protracted service outage following a Case Management System failure	Director of IT	5	3	15	Effective backup and recovery procedures	Maintenance and support contracts for core system elements	Annual IT continuity tests	Low	Low

THE HEALTH AND CARE PROFESSIONS COUNCIL

RISK ASSESSMENT July 2014

Policy & Standards

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
14	Policy & Standards	14.1	Incorrect process followed to establish stds/guidance/policy eg no relevant Council decision	Policy & Stds Director	4	2	8	Legal advice and sign off sought on processes	Appropriately experienced and trained members of Policy team.	Quality mgt system & processes	Low	Low
			Links to 12.1									
	Policy & Standards	14.2	Inappropriate stds/guidance published eg stds are set at inappropriate level, are too confusing or are conflicting	Council/committees	4	1	4	Use of professional liaison groups, and Council and committees including members with appropriate expertise	Appropriately experienced and trained members of Policy team.	Consultation with stakeholders & legal advice sought	Low	Low
	Policy & Standards	14.3	Changing/evolving legal advice rendering previous work inappropriate	Policy & Stds Director	4	2	8	Use of well-qualified legal professionals. Regular reviews.	Legal advice obtained in writing.	Appropriately experienced and trained members of Policy team and others eg HR.	Low	Low
	Policy & Standards	14.4	Inadequate preparation for a change in legislation (Health Professions Order, or other legislation affecting HCPC)	EMT	3	1	3	EMT responsible for remaining up to date relationships with government depts and agencies.	HCPC's 5 year planning process	Legal advice sought	Low	Low
	Policy & Standards	14.5	PLG member recruitment without requisite skills and knowledge	Policy & Stds Director HCPC Chair, Director of Council & Committee Services(?)	4	1	4	Skills and knowledge identified in work plan	Recruitment policy	Council Scrutiny of PLG result	Low	Low
			Lnks to 4.10									
	Policy & Standards	14.6	Loss of Corporate Memory	Policy & Stds Director	3	3	9	Maintain appropriate records of project decisions	Appropriate hand over and succession planning	Department training	Low	New

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Finance

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
15	Finance	15.1	Insufficient cash to meet commitments	Finance Director	5	1	5	Reserves policy specifies minimum cash level to be maintained throughout the year. Cash flow forecast prepared as part of annual budget and 5 year plan assesses whether policy minimum level will be met.	Regular cash forecasts and reviews during the year	Fee rises and DoH grant applications as required.	Low	Low
	Finance	15.2	Unexpected rise in operating expenses	EMT	4	1	4	Budget holder accountability for setting budgets and managing them. Timely monthly reporting and regular budget holder reviews held. EMT review of the monthly variances year to date.	Six and nine month reforecasts with spending plan revisions as feasible and appropriate. FTP costs mainly incurred towards the end of the lifecycle of a case, so increase in case pipeline would give early warning of rise in FTP costs.	Capped FTP legal case costs.	Low	Low
			Link to 13.1									
	Finance	15.3	Major Project Cost Over-runs	Project Lead / EMT	4	2	8	Effective project specification including creating decision points. Effective project management and timely project progress reporting (financial and non financial).	Project budgets have 15% contingency. Project exception reports including revised funding proposal is presented to EMT for approval.	EMT review of the project spending variances to date	Low	Low
	Finance	15.7	Registrant Credit Card record fraud/theft	Finance Director	2	2	4	Compliance with PCI standards.	Limited access to card information	Professional Indemnity & fidelity (fraud) insurance for first £250k of loss	Low	Low
			Links to 5.3									
	Finance	15.9	Mismatch between Council goals & approved financial budgets	Chief Executive	4	2	8	Close and regular communication between the Executive, Council and its Committees.	Adequate quantification of the budgetary implications of proposed new initiatives	Use of spending prioritisation criteria during the budget process	Low	Low
			Links to 1.1									
	Finance	15.12	Unauthorised removal of assets (custody issue)	Facilities Manager & IT Director	2	2	4	Building security including electronic access control and recording and CCTV. IT asset labeling & asset logging (issuance to employees)	Fixed Asset register itemising assets. Job exit procedures (to recover HCPC laptops, blackberries, mobile phones etc). Regular audits. Whistleblowing policy.	Computer asset insurance.	Low	Low
	Finance	15.13a	Theft or fraud	Finance Director	3	2	6	Well established effective processes, incl segregation of duties and review of actual costs vs budgets.	Regular audits; whistleblowing policy	Professional Indemnity & fidelity (fraud) insurance for first £250k of loss	Low	Low
			Incorporates aspects of previous risks 15.10 and 15.11									
	Finance	15.18	PAYE/NI/corporation tax compliance	Finance Director	2	3	6	Effective payroll process management at 3rd party. Finance staff attend payroll & tax updates	Signed disclosure forms indicating tax category status for all Council and Committee members. Professional tax advice sought where necessary, including status of CCM's and partners	PAYE Settlement Agreement in place with HMRC relating to Category One Council and Committee members.	Low	Low
	Finance	15.20	Bank insolvency: permanent loss of deposits or temporary inability to access deposits	Finance Director	5	1	5	Investment policy sets "investment grade" minimum credit rating for HCPC's banks and requires diversification - cash spread across at least two banking licences			Low	Low
	Finance	15.21	Financial distress of key trade suppliers causes loss of business critical service	Finance Director	4	2	8	Financial health of new suppliers above OJEU threshold considered as part of OJEU PQQ process. Ongoing financial monitoring of key suppliers through Dun & Bradstreet reports	Escrow agreements	Alternative suppliers where possible, eg transcription services framework	Medium	Medium

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Finance

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
	Finance	15.22	Payroll process delay or failure	Finance Director	2	2	4	Outsourced to third party. Agreed monthly payroll process timetable (with slack built in). If process delayed, payment may be made by CHAPS (same day payment) or cheque.	Hard copy records held securely. Restricted system access.		Low	Low
	Finance	15.23	PSA full cost recovery model places excessive financial pressure on HCPC from April 2015 onwards	Chief Executive & Finance Director	4	5	20	Communicate with Department of Health to understand potential models for cost recovery	Increase fees	Cut costs	High	Low
			Model not yet finalised by DH or PSA									
	Finance	15.24	Failure to apply good procurement practice (contracts below OJEU threshold) leads to poor value for money and/or criticism	Finance Director & Procurement Mgr	2	2	4	Approved procurement policy. Legal advice on ISO9001 compliant process design.	Internal monitoring of Tendering and contract process use.	New suppliers process as "backstop" to failure.	Low	Low
	Finance	15.25	Failure to adhere to OJEU Procurement and Tendering requirements leads to legal challenge and costs	Finance Director & Procurement Mgr	4	3	12	Robust OJEU specific processes agreed by legal advisors	Legal oversight of OJEU related material created by HCPC	Legal oversight of OJEU scoring and supplier communication	Low	NEW
	Finance	15.26	Budgeting error leads to overcommitment of funds	Finance Director	4	2	8	Income and FTP costs are budgeted for on FAST standard models. Payroll costs are budgeted for post by post. Cautious assumptions used in relation to income and payroll.	Budgets are prepared by departments and then reviewed by Finance. Budgets for coming year baselined vs current year budget and forecast	Budgets are discussed/challenged by EMT at annual pre-budget setting review	Low	NEW
	Finance	15.27	Payment error leads to irrecoverable funds	Finance Director	3	2	6	Extensive use of preferred suppliers with bank account details loaded into Sage.	System controls over changing payee bank details	Payment signatory reviews of payment runs	Low	NEW

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Pensions

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
16	Pensions	16.2	Non compliance with pensions legislation	Finance Director and HR Director	3	2	6	HCPC pension scheme reviewed for compliance with pensions legislation including auto enrolment	HR and Finance staff briefed on regulations	Advice from payroll provider. Seek specialist pensions legal advice as required.	Low	Low
	Pensions	16.3	Increase in the Capita Flexiplan funding liability resulting from scheme valuation deficiency	Finance Director	3	2	6	Plan is closed to new members so there is only a limited set of circumstances that could give rise to an increase in the liability	Initial employer contributions to the Plan deficit were set on prudent basis	Monitor the performance of the Plan through periodic employers' meetings	Low	Low

THE HEALTH AND CARE PROFESSIONS COUNCIL
RISK ASSESSMENT July 2014

Information Security

Ref	Category	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jul 2014	Likelihood before mitigations Jul 2014	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jul 2014	RISK score after Mitigation Jan 2014
17	Information Security	17.1	Electronic data is removed inappropriately by an employee	Director of IT	5	3	15	Employment contract includes Data Protection and Confidentiality Agreement	Adequate access control procedures maintained. System audit trails.	Laptop encryption. Remote access to our infrastructure using a VPN. Documented file encryption procedure	Low	Low
			Links to 5.3									
	Information Security	17.2	Document & Paper record Data Security	EMT; Head of Business Improvement	5	3	15	Use of locked document destruction bins in each dept. Use of shredder machines for confidential record destruction in some depts e.g. Finance.	Data Protection agreements signed by the relevant suppliers. Dept files stored onsite in locked cabinets. Training where appropriate (Employees & Partners)	Regarding Reg Appln forms processing, employment contract includes Data Protection Agreement	Low	Low
			Links to 15.7									
	Information Security	17.3	Loss of electronic data	EMT, Director of IT and Director of Operations	5	3	15	Access is restricted to only the data that is necessary for the performance of the services.	Effective system processes including secure data transfer and remote access granted only on application and through secure methods. Training where appropriate Employees & (Partners)	Data Processor agreements signed by the relevant suppliers.	Low	Low
	Information Security	17.4	Data received from third parties	Director of Ops, and Director of FTP	5	2	10	Read only, password protected access by a restricted no of FTP employees to electronic KN data.	Registrant payments taken in compliance with Payment Card Industry (PCI) Security standards ie with quarterly PCI testing.	Ensure third party data providers e.g. professional bodies provide the data password protected/encrypted/door to door courier/registered mail/sign in sign out as appropriate.	Low	Low
	Information Security	17.5	Loss of physical data despatched to and held by third parties for the delivery of their services	Director of Ops and Hd of Business Process Improv	5	3	15	Data Protection/Controller agreements signed by the relevant suppliers. Use of electronic firewalls by suppliers.	Use of transit cases for archive boxes sent for scanning or copying and sign out procedures.	-	Low	Low
	Information Security	17.6	Loss of Registrant personal data by the registration system (NetRegulate) application support provider in the performance of their support services (specific risk).	Director of IT and Director of Operations	5	3	15	Access to and export of Registrant data is restricted to only that which is necessary for the performance of the services.	Effective system processes including secure data transfer and remote access granted only on application and through secure methods.	Data processor side letter specifying obligations and granting a limited indemnity.	Low	Low

Appendix i

Glossary & Abbreviations

Term	Meaning
AGM	Annual General Meeting
CDT	Cross Directorate Team (formerly HCPC's Middle Management Group)
CPD	Continuing Professional Development
EEA	European Economic Area, = European Economic Union, plus Norway, Iceland, plus for our purposes Switzerland
EMT	HCPC's Executive Management Team
EU	European Economic Union (formerly known as the "Common Market")
Europa Quality Print	Supplier of print and mailing services to HCPC
FReM	Financial Reporting Manual
FTP	Fitness to Practise
GP	Grandparenting
HSWPO	Health and Social Work Professions Order (2001)
HR	Human Resources
HW	Abbreviation for computer hardware
Impact	The result of a particular event, threat or opportunity occurring. Scored between 1 least effect on HCPC and 5 maximum effect on HCPC.
ISO	International Standards Organisation (the global governing body for the Quality standards used by HCPC)
ISO 9001:2008	The ISO Quality Management Standard used by HCPC.
IT	Information Technology
Likelihood	Used to mean Probability of the event or issue occurring within the next 12 months
MIS	Management Information System
MOU	Memorandum of Understanding
NetRegulate	The bespoke computer application used to manage the application, registration and renewal processes, and publish the online register
OIC	Order in Council
OJEU	Official journal of the European Union
Onboarding	The process of bringing a new profession into statutory regulation from HCPC's viewpoint
OPS	Operations
PSA	Formerly (CHRE), renamed Professional Standards Authority for Health and Social Care in the 2012 legislation.
PLG	Professional Liason Group
Probability	Likelihood, chance of occurring. Not the "mathematical" probability. Scored between 1 least likely and 5 most likely to occur within the next year.
QMS	Quality Management System, used to record and publish HCPC's agreed management processes
Risk	An uncertain event/s that could occur and have an impact on the achievement of objectives
Risk Owner	The person or entity that has been given the authority to manage a particular risk and is accountable for doing so.
Risk Score	Likelihood x Impact or Probability x Significance
SI	Statutory Instrument
Significance	Broadly similar to Impact
SSFS	Scheme Specific Funding Standard, a set of standards relating to pensions services
STD	Standards
SW	Abbreviation for computer software
VPN	Virtual Private Network, a method of securely accessing computer systems via the public internet

Appendix ii

HCPC RISK MATRIX

IMPACT	Public Protection	Financial	Reputation								
	Catastrophic 5	Catastrophic 5	Catastrophic 5	5	10	15	20	25			
	Significant 4	Significant 4	Significant 4	4	8	12	16	20			
	Moderate 3	Moderate 3	Moderate 3	3	6	9	12	15			
	Minor 2	Minor 2	Minor 2	2	4	6	8	10			
	Insignificant 1	Insignificant 1	Insignificant 1	1	2	3	4	5			
KEY				Negligible 1	Rare 2	Unlikely 3	Possible 4	Probable 5			
<div style="background-color: red; color: black; padding: 5px; text-align: center;">>11 High Risk: Urgent action required</div> <div style="background-color: yellow; color: black; padding: 5px; text-align: center;">6-10 Medium Risk: Some action required</div> <div style="background-color: lightgreen; color: black; padding: 5px; text-align: center;"><5 Low Risk: Ongoing monitoring required</div>				Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.	Only small chance of occurring in the lifetime of the strategy.	May well occur during the lifetime of the strategy.	Likely to happen at some point during the next one or two years.	“Clear and present danger”, represented by this risk - will probably impact on this initiative - sooner rather than later.	Strategic		
				Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.	Not likely to occur during the lifecycle of the programme or project.	May occur during the life of the programme or project.	Likely to happen in the lifecycle of the programme or project.	Likely to occur in the lifecycle of the project, probably early on and perhaps more than once.	Programme / Project		
				Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.	Does not happen often - once every six months.	May well happen on a monthly basis.	May well happen on a weekly basis.	The threat is likely to happen almost every day.	Operational		
LIKELIHOOD →											

RISK MATRIX DEFINITIONS

IMPACT TYPES

IMPACT	IMPACT TYPES		
	Public Protection	Financial	Reputation
	Catastrophic 5	Catastrophic 5	Catastrophic 5
	A systematic failure for which HCPC are ultimately responsible for, exposes the public to serious harm in cases where mitigation was expected.	Unfunded pressures greater than £1 million	Incompetence/ maladministration or other event that will destroy public trust or a key relationship
	Significant 4	Significant 4	Significant 4
	A systematic failure for which HCPC are ultimately responsible for, exposes more than 10 people to harm in cases where mitigation was expected.	Unfunded pressures greater than £50,000 £250k - £1 million	Incompetence/ maladministration that will undermine public trust or a key relationship for a sustained period or at a critical moment.
	Moderate 3	Moderate 3	Moderate 3
A systemic failure for which HCPC are ultimately responsible for exposes more than 2 people to harm in cases when mitigation was expected.	Unfunded pressures greater than £8,000 £50,000 - £250,000	Incompetence/ maladministration that will undermine public trust or a key relationship for a short period. Example Policy U-turn	
Minor 2	Minor 2	Minor 2	
A systemic failure which results in inadequate protection for individuals/individual communities, including failure to resolve celebrity cases.	Unfunded pressures over £2,000 between £20,000-£50,000	Event that will lead to widespread public criticism.	
Insignificant 1	Insignificant 1	Insignificant 1	
A systemic failure for which fails to address an operational requirement	Unfunded pressures over £1,000 Unfunded pressures over £10,000	Event that will lead to public criticism by external stakeholders as anticipated.	

LIKELIHOOD AREAS

LIKELIHOOD	LIKELIHOOD AREAS		
	Strategic	Programme / Project	Operational
	Probable 5	Probable 5	Probable 5
	"Clear and present danger", represented by this risk - will probably impact on this initiative - sooner rather than later.	Likely to occur in the life-cycle of the project, probably early on and perhaps more than once.	The threat is likely to happen almost every day.
	Possible 4	Possible 4	Possible 4
	Likely to happen at some point during the next one or two years.	Likely to happen in the life-cycle of the programme or project.	May well happen on a weekly basis.
	Unlikely 3	Unlikely 3	Unlikely 3
May well occur during the lifetime of the strategy.	May occur during the life of the programme or project.	May well happen on a monthly basis.	
Rare 2	Rare 2	Rare 2	
Only small chance of occurring in the lifetime of the strategy.	Not likely to occur during the lifecycle of the programme of project.	Does not happen often - once every six months.	
Negligible1	Negligible1	Negligible1	
Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.	Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.	Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.	

HCPC Strategic Objectives 2009 - 2015

code

SO1.GG	Objective 1: Good governance To maintain, review and develop good corporate governance
SO2.EBP	Objective 2: Efficient business processes To maintain, review and develop efficient business processes throughout the organisation
SO3.Com	Objective 3: Communication To increase understanding and awareness of regulation amongst all stakeholders
SO4.Evid	Objective 4: Build the evidence base of regulation To ensure that the organisation's work is evidence based
SO5.IPA	Objective 5: Influence the policy agenda To be proactive in influencing the wider regulatory policy agenda
SO6.HmCty	Objective 6: Engagement in the four countries To ensure that our approach to regulation takes account of differences between the four countries

Key Business Risk areas Assurance Map	AREA C. Management Control & Reporting				AREA B. Functional oversight / Governance	AREA A. Independent review / Assurance / Regulatory oversight										
	Systems Controls	Operational Risk Management	Inter-departmental Quality Assurance	Near Miss Reporting	EMT	Council	Audit Committee	Internal Auditors	External Auditors (NAO)	External Legal Advice	Quality Management System ISO9001	Information Security Management ISO27001	PSA	Penetration Testing	PCI-DSS	Parliamentary oversight
Strategic risks						x	x	x		x						x
Communications		x	x	x	x	x	x	x	x	x	x		x			
Continuing Professional Development	x	x	x	x	x		x			x						
Corporate Governance			x	x	x	x	x	x	x	x	x		x			x
Information Security	x	x	x	x	x		x	x			x	x		x		
Education	x	x	x	x	x	x	x	x		x	x		x			
Finance	x	x	x	x	x	x	x	x	x	x	x	x			x	x
Fitness to Practise	x	x	x	x	x	x	x	x		x	x		x			x
HR	x	x	x	x	x	x	x	x		x	x	x				
Information Technology	x	x	x	x	x	x	x	x	x	x	x	x		x		
Legal				x	x	x	x	x		x			x			x
Operations	x	x	x	x	x	x	x	x	x	x	x					x
Partner	x	x	x	x	x	x	x	x			x	x	x			
Pensions				x	x	x	x	x		x						
Policy & Standards			x	x	x	x	x	x		x	x		x			x
Project Management	x	x	x	x	x	x	x	x	x	x		x				
Quality Management	x	x	x	x	x	x	x	x		x			x			
Registration	x	x	x	x	x	x	x	x		x	x		x			x