

Audit and Risk Assurance Committee

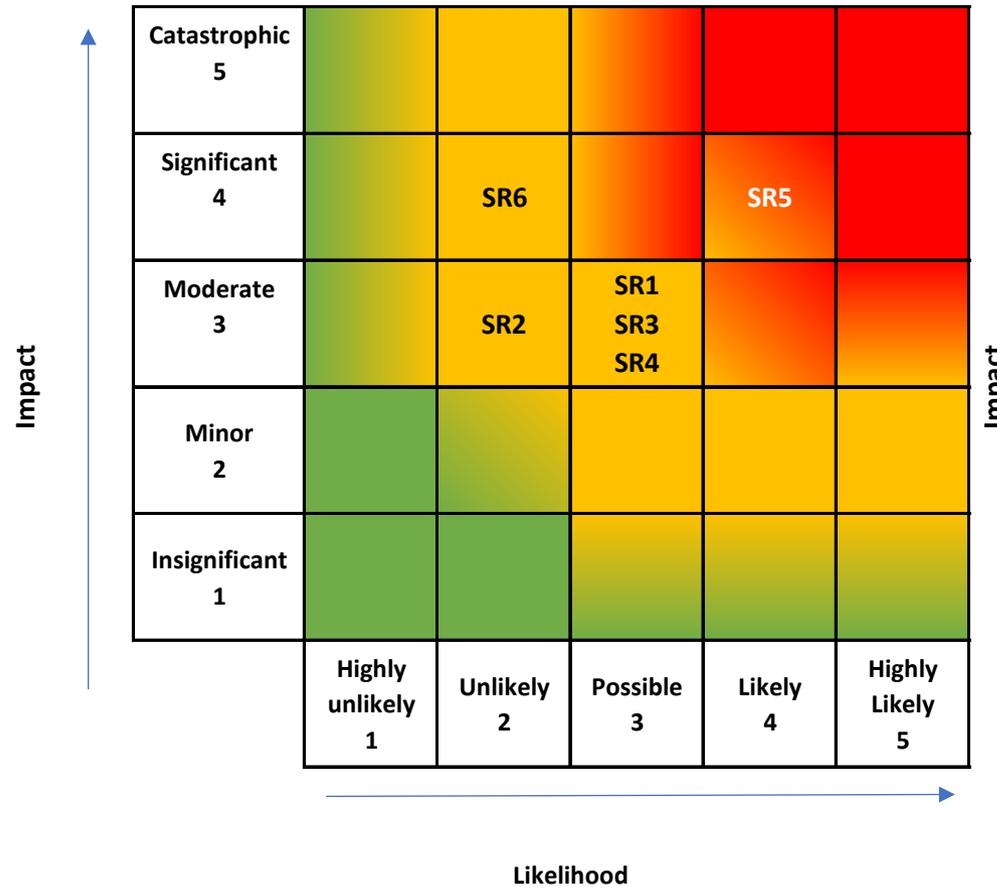
Meeting Date	11 March 2026
Title	Strategic Risk Register
Author(s)	Anna Raftery, Head of Assurance and Compliance
Executive Sponsor	Claire Amor, Executive Director of Corporate Affairs
<p>Executive Summary</p> <p>The presented report sets out the HCPC’s strategic risks as of February 2026.</p> <p>The register details:</p> <ul style="list-style-type: none"> • a description of how the risk relates to the HCPC’s risk appetite; • current mitigations in place; • progress on workplans, and how they mitigate the risk; and • a commentary box outlines the changes to the risk since the last iteration (November 2025). <p>Discussions have taken place with the Executive Leadership Team (ELT) regarding the delays to regulatory reform in relation to strategic risks 1 and 6. The ELT and the Head of Assurance and Compliance agreed that the delay itself does not inherently increase the risk as it is a potential treatment of many and we are not solely dependent on regulatory reform. There are other mitigations in place that mitigate the risk and lots of work we have done and are doing.</p> <p>This is the last iteration of the current approach to the strategic risk register. A new risk register will be presented to the Audit and Risk Assurance Committee (ARAC) in June 2026.</p>	
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 will be presented to the ARAC in June 2026.
Financial and resource implications	None as a result of this paper.

Item 07

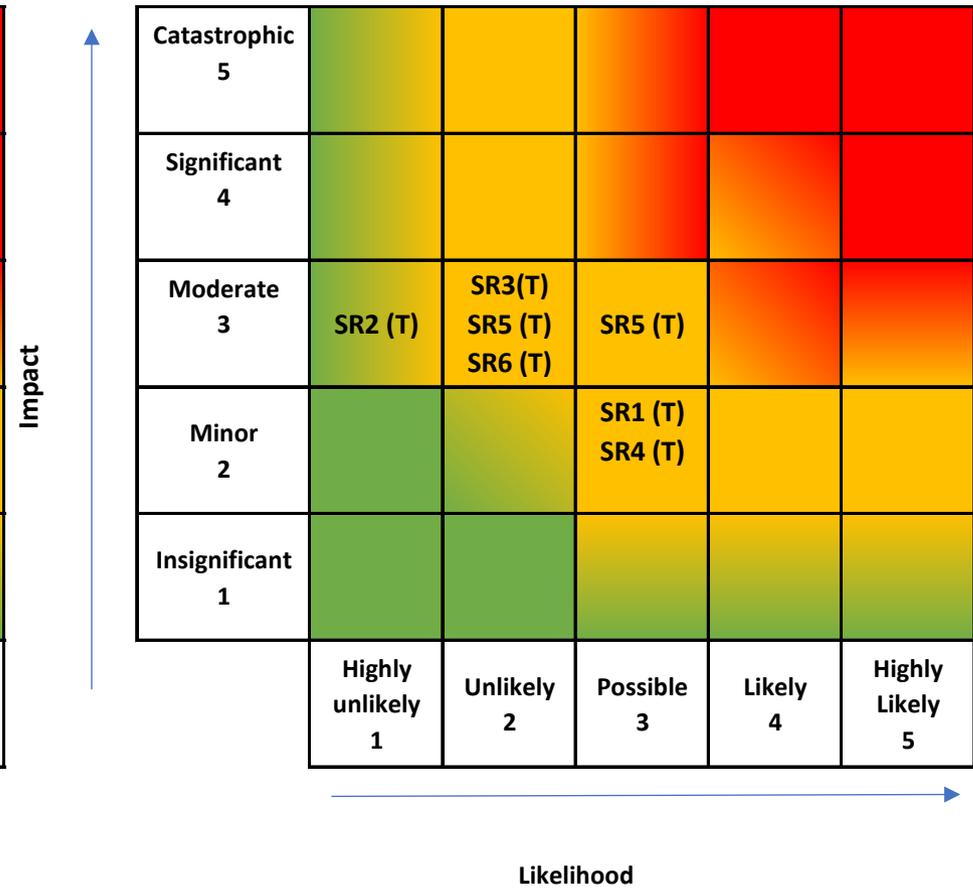
Associated strategic priority/priorities	Continuously improve and innovate Build a resilient, healthy, capable and sustainable organisation
Associated strategic risk(s)	All
Risk appetite	All
Communication and engagement	None as a result of this paper.
Equality, diversity and inclusion (EDI) impact and Welsh language standards	This paper includes the assurance of HCPC EDI as related to regulatory and business practices.
Other impact assessments	This paper includes the assurance of HCPC data and sustainability as related to regulatory and business practices.
Reason for consideration in the private session of the meeting (if applicable)	Not applicable

HCPC Strategic Risks				
Summary of strategic risks				
Strategy	Strategic Risks - from November 2024	Risk Description	Feb-26	Target Risk*
1 - Continuously improve and innovate - To improve our performance against PSA standards of good regulation and to innovate across all our regulatory functions to provide an enhanced user experience.	1. We are unable to deliver our regulatory requirements affectively in a changing landscape, effecting our ability to protect the public.	Not delivering or meeting: Informed registration decision making; Proportionate and fair FTP decision making; Engaged Education decision making; PSA Standards of Good Regulation; Appropriately managed improvement programmes in regulatory areas; Consideration of EDI needs, including accessibility of functions and fairness of decision making.	9	6
2 - Promote high quality professional practice - Enable our professions to meet our standards so they are able to adapt to changes in health and care practice delivery, preventing harm to service users.	2. Our standards do not reflect current practice and/or they are not understood by registrants and our stakeholders.	Relates to: Quality and suitability of our standards and guidance in setting a threshold for safe & effective practice which protects the public. How effectively we communicate our regulatory expectations. The effectiveness of our professionalism and upstream regulation work. Effective and informed consultation process, including enhanced EDI consideration.	6	3
3 - Develop insight and exert influence - Learning from data and research to inform our decision making and share insights to protect, promote and maintain the health, safety and well-being of the public.	3.a Quality of our data leads to assumptions or gaps in understanding, and therefore inadequate or uninformed decision making. 3.b We are unable to maximise our use of the data we hold to share insights to protect, promote and maintain the health, safety and well-being of the public.	This includes our effectiveness in collecting, maintaining, and utilising the data we need to be an intelligence driven regulator and the effectiveness of our insight and intelligence work. It relies heavily on the work of the digital transformation and IT team and includes operational reporting in the Corporate Services team. It also relies on regulatory teams inputting information.	9	6
4 - Be visible, engaged and informed - We regulate, take and communicate decisions which are informed by a deep understanding of the environment within which our registrants, employers and education providers operate.	4. We are unable to effectively build trust, engage with and influence our stakeholders reducing our ability to understand their perspectives and regulate effectively.	This includes how effectively we engage with our stakeholders and our credibility with them and how well we play our part in the wider system. It includes our EDI practice externally, the ability to respond and influence external drivers for change.	9	6
5 - Build a resilient, healthy, capable and sustainable organisation - Employees feel valued and supported, and fully able to contribute. The organisation is resilient and able to quickly adapt to changes in the external environment.	5.a The resources we require to achieve our strategy are not in place or are not sustainable. 5.b Our organisational values are not reflected at all levels of the organisation, leading to staff not feeling supported/trusted/listened too.	This risk includes not securing the resources we need to be effective and / or not being efficient and effective in our use of our resources (resources include financial, knowledge, skills, culture, infrastructure). The development of our culture, people and physical assets, our continued financial viability and the significant failure of key business processes.	16	9
6 - Promoting the value of regulation - The public, registrants, students and employers understand the value and importance of regulated health and care professionals.	6. We do not sufficiently or appropriately promote our work leading to opportunities to enhance our regulatory activity being missed and the benefits of regulatory reform remaining unrealised due to: a) the role of regulation in the delivery of high-quality care is underestimated by the public, registrants, students and employers. b) our ability to protect the public is under-recognised by policy makers and influential stakeholders.	This risk includes the HCPC's capacity and capability to engage and influence regulatory reform effectively to ensure its benefits are realised, as well as the HCPC being viewed by government as a priority regulator for reform.	8	6

Heat map of strategic risks - residual



Heat map of strategic risks - target



Risk score over time						
	SR 1	SR 2	SR 3	SR 4	SR 5	SR 6
Target	6	3	6	6	9	6
Mar-26	9	6	9	9	16	8
Nov-25	9	6	9	9	16	8
Sep-25	9	6	9	9	10.5	8
May-25	9	3	9	9	10.5	8
Feb-25	9	3	9	9	12	8
Nov-24	9	3	12	9	12	8

Strategic Risk 1. We are unable to deliver our regulatory requirements effectively in a changing landscape, effecting our ability to protect the public.	
Risk Summary	Not delivering or meeting: Informed registration decision making; Proportionate and fair FTP decision making; Engaged Education decision making; PSA Standards of Good Regulation; Appropriately managed improvement programmes in regulatory areas; Consideration of EDI needs, including accessibility of functions and fairness of decision making.

Date	Risk Owner																
Feb-26	Executive Director of Education, Registration & Regulatory Standards Executive Director of FTP & TS																
	<table border="1"> <thead> <tr> <th></th> <th>Impact</th> <th>Likelihood</th> <th>Risk Score</th> </tr> </thead> <tbody> <tr> <td>Inherent risk</td> <td>5</td> <td>x</td> <td>5</td> </tr> <tr> <td>Current Risk</td> <td>3</td> <td>x</td> <td>9</td> </tr> <tr> <td>Target risk</td> <td>2</td> <td>x</td> <td>6</td> </tr> </tbody> </table>		Impact	Likelihood	Risk Score	Inherent risk	5	x	5	Current Risk	3	x	9	Target risk	2	x	6
	Impact	Likelihood	Risk Score														
Inherent risk	5	x	5														
Current Risk	3	x	9														
Target risk	2	x	6														

Change
No

Current Risk Influencers	
✓	The 2024-25 PSA performance report published June 2025 shows we met 17 of 18 standards.
✓	Engaging with regulatory reform programme, informed we are the priority regulator for reform. Section 60 priorities are agreed with Council.
✓	Proactive approach to AI usage to support delivery of key processes
✓	Decision to withdraw approval of an education programme. Lessons learned exercise underway.
✗	NHS Manager barring scheme - Further clarity and planning needed to manage this new approach to regulation.
✗	Not realising all opportunities of AI and technological advances.
✗	Number of new FTP cases received increasing
✗	Tone of voice work still to be conducted in the wider organisation
✗	PSA is consulting on revised Standard of Good Regulation which will go live in 2026.
✗	High number of corporate complaints due to delays in the international application process, indication that this is reducing
✗	NHS 10 year plan in England changes models of care, impacting education and training. Workforce element of this plan due in Spring 2026

Risk Appetite	
Regulation = Measured; Influence & Leadership = Seeks	
The risk appetite target level within tolerance if below red/amber. We are confident that our standards and guidance are fit for purpose and so this risk is currently within risk appetite. To maintain that control onward reviews are essential to ensure standards are constantly kept under review to maintain relevance to changing practice and the wider health sector.	
Current risk level is within risk appetite	

Mitigations in place	
Second line QA plan for 2025-26 to review success of improvements in Fitness to Practise (FTP), Registration and Education in addition to first line QA activity in place, such as the FtP DRG and panel member feedback following each hearing.	Centralised PSA coordination. Participation in inter-regulatory working groups to share good practice and discuss common issues, this is also provided through the use of a panel of legal providers for FTP matters with experience of how
Wide range guidance on HCPC's regulatory processes available on our website.	other Monitoring regulatory performance through performance reporting and KPIs.
Modern education QA model. Regular feedback sought and acted upon to improve process application and stakeholder experience. Education provider self-service portal in place improving experience of education stakeholders.	Use of technology and AI to support delivery of regulatory functions. (e.g plagiarism checks, redaction of FTP bundles)

Areas of Development	Progress 2025-26	Mitigation
Registration Assessment model	Following the successful implementation of phase 1 changes to the international application assessment process in November 2025, we have now commenced our phase 2 which focusses on the quality and consistency of our tests of competence. Phase two began in December 2025 and we are midway through a pilot of a new internal quality assurance approach to ensure compliance with our operating procedures and guidance for the delivery of tests of competence. We are also working with our assessors to develop a profession specific, peer review quality assurance framework looking at the quality of tests and test decisions from a professional/clinical perspective. We expect these first stages of phase 2 of this work to be completed by the end of March 2026 and the learning from this will inform the work that continues into next financial year.	A more balanced approach to international assessments will give more confidence in decision, and reduce delay complaints.
Customer contact	Implementation of new telephony system went live in November 2025. Phase 2 has started with completing current state assessment and agreeing objectives (goals and targets that the new operating model will achieve). Definition of the to-be state (high-level requirements) currently in progress and due to complete Q4. Implementation planning due to be completed post completion of the target operating model in Q4, implementation will continue in Q2-Q3 2026-27.	More accessible and available communication through an improved customer contact services allows us to support people through their regulatory processes more effectively.
Partners transformation work	All partner contracts have been issued and signed by all partners. New payroll system, pension plan, partner portal functionality and internal payment pathways changes implemented and communicated from 1 October. First payroll in November 2025 across all three regulatory functions. Phase two of the project considers the implementation of timesheets for partners. KPI and QA development continues. Technical and system enhancements are currently being explored.	A new model for how we approach and manage our partners will allow us to have more confidence in their performance.
FTP Legal Services	The embedding of FTP Legal is complete and ongoing, and now includes new resource and teams not forecasted as of Q1 this year. A research database is live and in use. Procurement for dictation software and e-signature tool is nearly completed and both on track to be implemented in March 2026. A business case was approved by ELT in October 2025 for phase 2. Currently undertaking foundational work to revise and streamline current operational processes to prepare for transition into new operating model for listing of final hearings. We expect transition to start in Q4 of 2026-27.	FTP's continued improvement in performance, while also developing new approaches to delivering regulatory duties, ensures that FTP decision making is fair, proportionate, and of good quality.
FTP Case Progression and Quality	The operating model for non-frontloaded cases has now been live for 6 months. We are now seeing the first cases investigated under the new model concluding. Early indications show an improvement in timeliness of these cases. With the number of cases increasing the department are looking how to continue to develop the streaming model further. The increased referrals is presenting a real challenge for casework allocation and progression. The team are managing and monitoring with close oversight, with risk prioritisation at triage.	
Adjudication and Tribunal Services	New fact sheets for witnesses throughout the process end to end will go live in February 2026. Phase 2 will focus on consistency of support we provide across the directorate and any additional support we can provide for vulnerable witnesses. Using the recommendations from the Witness to Harm project and how we support witnesses involved in sexual misconduct cases. We are aiming for this to be implemented by March 2026.	

Reporting period commentary
The PSA audit of FTP cases completed at the end of 2025. The PSA will hold their first panel to assess our performance in March 2026. We have been given the opportunity to comment on the audit findings and will review the assessment for factual accuracy ahead of this initial panel.
The implementation of the new telephony went live in November 2025. Phase 2 of this project has begun and will continue in parallel with the implementation of a single CRM and updates to our website and portals to active a cohesive and consistent approach to customer contact and stakeholder engagement. By having connected and consistent support for our stakeholders we can ensure we are effectively delivering our regulatory requirements and protecting the public.
The growth of FTP Legal Services and planned new operating model for listing final hearings will support more effective management of the most risky or complex cases. In doing so this will allow us to manage the changing landscape of fitness to practise, and consistent increase of cases.

Strategic risk 2. Our standards do not reflect current practice and/or they are not understood by registrants and our stakeholders.	
Risk Summary	Relates to: Quality and suitability of our standards and guidance in setting a threshold for safe & effective practice which protects the public; How effectively we communicate our regulatory expectations; The effectiveness of our professionalism and upstream regulation work; Effective and informed consultation process, including enhanced EDI consideration.
Current Risk Influencers	
✓	Thorough public consultation for all standards reviews, including proactive implementation guidance, workshops, and guidance to prepare stakeholders for any changes.
✗	Three country resource in place in the Professional Liaison team. Head of service will start in April 2026 and the search for a new PLC for Scotland is ongoing.
✗	NHS 10 year plan in England changes models of care and ways of working that have to be considered in how our standards and guidance is interpreted by registrants
✗	Changing expectations of our professions' practice as a result of pressures on services, tech or societal events.
Mitigations in place	
Public consultation process in place, including equality impact assessments (EIAs) to capture the EDI element.	Policy enquiries function available to support understanding and application of our standards.
Engagement with key stakeholders/experts for widescale profession specific changes to standards, including the EDI forum.	Regulatory approach to advanced practice defined and agreed by Council.
Guidance provided on meeting our standards, #mystandards webinar series available of YouTube.	Professionalism Liaison service in place influencing employers, using knowledge to effect change through engagement and advice.
Dedicated website hubs for registrants, students, employers, members of the public, education providers.	Policy and Communication teams at full complement. Head of Head of Comms, Engagement & Public Affairs in place.
Reporting period commentary	
By commissioning a review of our draft safeguarding guidance, and seeking service user feedback on their experiences, we can ensure our guidance is reflective of current practice and informed by experience. AHP advanced practice webinars are now completed and work is underway with GOsC to develop joint material in order to support AHP in understanding their role in advanced practice. Due to the vacancies in the Professional Liaison and Outreach department the risk likelihood has increased, bringing the overall risk rating to medium. Recruitment has been successful and the post holders will in in place early in the new financial year	
Date	Feb-26
Risk Owner	Executive Director of Education, Registration & Regulatory Standards Executive Director of Corporate Affairs
Inherent risk	Impact: 5, Likelihood: x, Risk Score: 25
Current Risk	Impact: 3, Likelihood: x, Risk Score: 6
Target risk	Impact: 3, Likelihood: x, Risk Score: 3
Risk Appetite	Regulation = Measured; Influence & Leadership = Seeks Current risk level has increased from 3 to 6, and therefore is outside risk appetite. To maintain that control onward reviews are essential to ensure standards are constantly kept under review to maintain relevance to changing practice and the wider health sector.
Current risk level is outside risk appetite	
Areas of Development	Progress 2025-26
SETs review	SETs consultation launched 17 November, closing 16 February. Initial analysis tabled for ETC (March) and on track for Council to consider revised standards in Summer 2026. Safeguarding guidance has been drafted following on from the SCPEs. Commissioned the Patients Association to review and seek service user feedback on their experiences of safeguarding and the draft guidance. Next steps to engage with external stakeholders.
Scope of practice	Update paper to ETC (Sept 2025) - 3700 professionals registered interest in advanced practice webinars, worked collaboratively with GOsC to develop joint materials, including online resources and signposting. Webinar engagement sessions now completed and work now underway with GOsC to develop joint materials. Update paper will go to ETC in March 2026.
Professional Liaison Service	We are using new data and indicators as they become available and are published. We use this to then tailor our approach. We are flexible enough to use intelligence and data sources to inform our decisions. New head appointed and will start in April. Professional liaison consultant for Scotland recruitment launched in January 2026. New ways of delivering education and content part of workplan for next year.
Mitigation	
Thorough consultation with a wide range of stakeholders gives us confidence our standards are proportionate and accessible	
Supporting registrants and employers to understand scope of practice supports upstream regulation	
Utilising the source of stakeholder feedback received by the professional liaison service provides insight to registrants understanding of the standards.	

Strategic risk 3.a Quality of our data leads to assumptions or gaps in understanding, and therefore inadequate or uninformed decision making.
3.b We are unable to maximise our use of the data we hold to share insights to protect, promote and maintain the health, safety and well-being of the public.

Risk Summary This includes our effectiveness in collecting, maintaining, and utilising the data we need to be an intelligence driven regulator and the effectiveness of our insight and intelligence work. It relies heavily on the work of the digital transformation and IT team and includes operational reporting in the Corporate Services team. It also relies on regulatory teams inputting information.

Date	Risk Owner
Feb-26	Executive Director of Education, Registration & Regulatory Standards Executive Director of Resources

	Impact	Likelihood	Risk Score
Inherent risk	5	x	4
Current Risk	3	x	3
Target risk	3	x	2

← Change No

Current Risk Influencers	
✓	Registrant datahub has been published, providing detailed insight into the population of our registrants.
✓	IT team delivered successful first modules of new data platform, supporting EDI reporting, meeting the needs of the HEE data sharing project and improving access to core registration data.
✓	FTP data model build nearing completion, Registration data model design being developed
✓	Automation of reporting data continues
✓	20%+ measured improvements in data quality for all three regulatory functions achieved during 2025
✓	Data governance work has now become established as Business As Usual as part of the Insight & Analysis function.
✗	Quality and completeness of underlying data causing delays to analysis as significant cleansing work required. Data Governance Lead working with Ops teams to resolve and mitigate against continued imputing of new bad quality data.

Risk Appetite
Data = Open
Risk appetite is within tolerances with improved confidence of the quality of our data, and advancing of our reporting capabilities.
Current risk level is within risk appetite

Mitigations in place	
Publication of FtP, Education and Registration information and datasets through annual reports and FOI requests.	Interactive data hub launched 21 May 2025
Insights and Intelligence Framework agreed, setting out priorities and approach for data analysis.	Renewals data dashboard accepted report now in place agreeing renewals counts of actuals and previous windows.
Dedicated resource for Analysis and Intelligence and Data Engineer in place. Data Governance Lead and Senior Data Analyst Business Partner both in post	New data governance structure in place, led by the Information & Technology Governance Board with three groups feeding into that including the Data Governance Group.

Areas of Development	Progress 2025-26	Mitigation	Reporting period commentary
Research	We have been delayed in going out to tender as one particular provider we were in discussions with is no longer able to undertake the work. The Invitation to tender document is complete and will be released in Q4.	This research will give us insight on areas we should/could address as a regulator	The work of the Data Governance Lead has led to measurable improvements in data quality across all three regulatory functions, though this work is never complete. A new Data Governance page has also gone live on the intranet, making sure all relevant information are available and accessible to those who need them. With the new data governance structure in place there is more effective oversight through the Information & Technology Governance Board and Data Governance Group. The framework ensures data owners and stewards have been trained and are working to a set of role specific principles.
Data quality and infrastructure	Workforce profiles published as per plan (Q1); retention report and dashboard were published on the HCPC website at the end of September. The data hub launched in Q2. The Learner progression to registration dashboard will be published Q4 to allow for 1 year follow up for all 2024 graduates.	By continuing to improve the quality of our data and reporting capabilities we can be confident in the reporting we share	
Insights and Analytics	The FTP EDI supplementary report will now be published in Q4, main findings were presented to Council (and published in the Council papers) and at the all-staff briefing in December. The CPD insights analysis is postponed to Q4 for quality assurance purposes as we test an alternative analytical tool and also to align publication with CPD Week in March. We continue to collaborate and share our data across the sector. We have worked with Disclosure Scotland to help them clean their data set, and there is a meeting upcoming with NHS England to discuss linking to electronic staff records.	By sharing our data openly and providing more in depth analysis we are directly able to influence the health, safety and wellbeing of the public.	

Strategic risk 4. We are unable to effectively build trust, engage with and influence our stakeholders reducing our ability to understand their perspectives and regulate effectively.	
Risk Summary	This includes how effectively we engage with our stakeholders and our credibility with them and how well we play our part in the wider system. It includes our EDI practice externally, the ability to respond and influence external drivers for change.

Date	Risk Owner				
Feb-26	Executive Director of Corporate Affairs				
	Executive Director of Education, Registration & Regulatory Standards				
	Impact	Likelihood	Risk Score	<div style="border: 1px solid black; padding: 5px; text-align: center;"> Change No </div>	
Inherent risk	5	x	5		25
Current Risk	3	x	3		9
Target risk	3	x	2		6

Current Risk Influencers	
✓	Collaboration with NHS employers to reach out to attendees of joining the UK workforce upstream events, contributing to the wider workforce agenda.
✓	Strategic Relationship Lead in place and actively managing and supporting relationship managers' network. Relationship management model in place. Engagement management group established to support more targeted forward planning for engagement.
✗	Three country resource in place in the Professional Liaison team. Head of service will start in April 2026 and the search for a new PLC for Scotland is ongoing.

Risk Appetite
Influence & Leadership = Seeks
We have an built a strong engagement plan with our stakeholders, particularly building a more positive and transparent relationship with the Professional Bodies Forum.
In order to meet target, this risk is also dependent on being able to deliver stakeholder expectations such as more automated processes.
Current risk level is within risk appetite

Mitigations in place	
ELT relationship building and liaison with key stakeholders particularly Government Departments, professional bodies, other regulators, unions.	Policy statement on approach to MOUs in place, a number of MOUs agreed with key stakeholders.
Personal engagement plans for Chair & Chief Executive in place. Engagement management group meets regularly to monitor and plan engagement. Operational level relationship manager engagement for key stakeholders in place across HCPC.	Professional body forum in place, including regular meetings both virtually and in person.
EDI strategy and action plan informed by independent audit of EDI practice. EDI stakeholder forum & internal EDI employee forum.	Public consultation process in place, including equality impact assessments (EIAs) to capture the EDI element.

Areas of Development	Progress 2025-26	Mitigation	Reporting period commentary
Developing the HCPC's next Corporate Strategy	July 2025 marked the launch of our initial stakeholder engagement via online survey, nearly 900 responses received from a range of stakeholders. Have completed focus groups, workshops and meetings throughout September 2025 across stakeholder groups including professional bodies, education providers, registrants, the public and our employees. The draft of the new strategic aims and values is complete, and work is underway to finalise the delivery and comms plan ahead of launch in April 2026.	An informed approach to forming the new corporate strategy allows us to ensure our next strategy is robust and proportionate	The new corporate strategy has been drafted and is on track to be presented to Council for final approval. Throughout the development of this strategy we have been committed to listening and learning form all our stakeholders, both internally and externally. These insights have had a direct impact on the final strategic aims and values. Through the delivery of this strategy over the next five years we hope to continue to build trust and credibility through action.
Equality, Diversity and Inclusion	As HR continue to develop their networks, the work of ensuring that requirement for network remains suggests we may be able to combine functions. The publication of the FTP EDI report is on track to repeat and builds on the 23/24 report as outlined in risk 3, subject to the new timescales for Q4 completion. Contribution to the development of the next Corporate Strategy to ensure EDI is embedded throughout	Continuing to show commitment to EDI through actions not only builds trust and credibility, but ensures our future strategy is appropriately informed.	
Stakeholder engagement	Engagement has been targeted towards corporate strategy development. A refreshed engagement plan has been developed and is now being delivered. Engagement with Patients via the Patients Association has been held around our next corporate strategy and the SETs review.	Stakeholder engagement being accessible and informative helps us build relationships and understand their perspectives	
Strengthening our communication capabilities	Good progress with resourcing and recruitment plan with several roles now in post and final phase in progress. Communications activity in progress on SETs consultation. Web platform upgrade project in progress with completion anticipated in early Q4. Brand refresh project in progress and will be implemented from end of Q4.	As above	

Strategic risk 5.a The resources we require to achieve our strategy are not in place or are not sustainable.
5.b Our organisational values are not reflected at all levels of the organisation, leading to staff not feeling supported/trusted/listened too.

Risk Summary
 This risk includes not securing the resources we need to be effective and / or not being efficient and effective in our use of our resources (resources include financial, knowledge, skills, culture, infrastructure).
 The development of our culture, people and physical assets, our continued financial viability and the significant failure of key business processes.

Date	Risk Owner
Feb-26	Executive Director of Resources

	Impact	Likelihood	Risk Score
Inherent risk	5	x	5
Current Risk	4	x	16
Target risk	3	x	9

← Change No

Current Risk Influencers	
✓	Budget factors in projected future benefits of investments, to be validated at project initial phase and tracked to ensure deliver.
✓	We ended 2024-25 with a surplus budget and meeting our reserves policy of realisable net assets
✓	Latest fee rise in effect from 29 April 2025.
✓	People strategy in place: BDO audit shows good progress. Performance against KPIs good - sickness absence and turnover reducing. APDR participation for 2024-2025 was 100%.
✓	Two Speak Up Guardians in place from senior leadership. Annual report due to ARAC in March 2026
✓	Carbon baseline for HCPC now established with action plan for improving sustainability being developed with expert input and involvement of ELT and SLG.
✓	Publication of gender, ethnicity and disability pay gaps report 2024 (published 27/04/25)
✓	Fee levels under review for future sustainability.
✗	Income/cost pressures of the increase to FTP cases, while the number of registration applications has come down.
✗	Not realising all opportunities of AI and technological advances, not being deployed safely or ethically.
✗	Forecasting model insufficient, need to consider a wider range of impacts.
✗	Two large programmes of work - hospital managers and reg reform will have significant financial impact
✗	Rising inflation increases HCPC costs and HCPC employees cost of living pressures; impacts mitigated by budgeting, pay review and efficiency plans as part of benefits realisation.

Risk Appetite
 Financial = Measured; People = Open

Due to the continuing increase in FTP applications and legal cost, and the number of international registration applications significantly decreasing, the impact and likelihood have both increased. This brings the risk score up to 16, reflecting it is significant and likely.

The FTP Legal Services project to manage more frontloaded cases in house will directly mitigate the increasing legal costs. Regular review of the registrant forecast will support informed financial planning
 Flexible resourcing in place in registration, and we have reduced the resource in the department in line with application numbers.

Current risk level is outside risk appetite

Mitigations in place	
Adherence to budgeting and financial management and reporting processes which are subject to internal and external audit e.g. NAO. Finance business partner challenge and budget setting principles agreed by ELT to challenge the business on efficiency	Adherence to HR processes in relation to recruitment, annual performance development review and learning and development for employees. All HR policies have been updated in the last 12 months
Business change function provides challenge on benefits outcomes of investment in new areas of work or enhancements to existing processes. Medium-Term Financial Strategy in place incorporating an efficiency action plan.	Adherence to Partner processes in relation to recruitment, onboarding and Partner Code of Conduct (updated Jan 2024)
All employees are set goals and objectives and undertake annual performance review which includes an assessment against our values (Fair, Compassionate, Inclusive, Enterprising) promoted through all employee performance system and seeks to identify	Effective IT system design maintaining confidentiality, integrity and availability of data. Digital transformation strategy provides roadmap for improving our IT systems.
HR includes a central learning and development function for employees, which runs an annual learning and development plan for commonly identified skill and knowledge needs in addition to annual compliance training in areas such as data protection,	Maintenance of ISO27001 Information Security standard which is subject to external audit / Regular independent security assessments of key IT infrastructure. Maintenance of business continuity infrastructure and processes.
Employee Forum acts as a consultation group for organisational change.	ELT monthly monitoring of productivity of all departments through detailed performance reporting. KPIs reported to Committees and Council for oversight of performance and progress in meeting agreed milestones for corporate plan.

Areas of Development	Progress 2025-26	Mitigation	Reporting period commentary
Delivering the technology roadmap	New contact centre solution went live in November 2025. Phase 2 scope currently being agreed. Development of a Single CRM supporting stakeholder engagement including complaints and FOI with continue in 2026-27 All remaining significant data and systems now migrated into the cloud. Procurement underway to select a partner to redesign our network.	The tech roadmap gives us a multi year plan to develop our digital and tech capabilities.	The technology roadmap continues to progress, with the new telephony system going live in Nov 2025. As each stage progresses we build further resilience to the pace of technological change. This continues to be a long term programme of work, allowing each part to be built on the last, ensuring a strong foundation. We continue to receive a high level of applications for roles and are generally able to recruited appropriately into these roles. In Q3 and early Q4 HR conducted workforce and succession planning with all departments to ensure each team is supported in having appropriate and sustainable recourse and training.
People strategy	Recruitment activities continue to be of priority. 27 new campaigns in Q3, 1,556 applications received, 83 new CVs added to our talent network pool and 38 job offers made. Workforce planning underway. People Strategy workshops with selected staff and the Employee Forum have taken place. Qualitative and quantitative feedback has been analysed. A new People Strategy is now being developed. Q3 Pulse survey complete and will assess the feedback on speaking up. Speaking up and listening opportunities continue to be underway as part of the quarterly pulse surveys and meetings with the employee forum group.	The people strategy ensures we are recruiting and retaining high quality employees. It also supports the wellbeing of our staff.	
Improving financial sustainability and resilience	Discussions on fees held with Council at its meetings in October and December 2025. On track for next consultation as per timeline, subject to Council approval. Invoice automation processing successfully completed as per schedule. Recently gone live with FP&A software (Workday Adaptive Planning) - after validation and testing, will be rolled out for financial reporting purposes (budgets, forecasts, financial planning, etc.).	Resilient financial capabilities improves the sustainability of the HCPC	
Improving our environmental sustainability	As part of phase 1, professional design team have provided technical advice and costed options. Aiming for implementation in February and March and into Q1 of 2026-27, following ELT review of options. The team is working with finance to schedule implementation of EMS within test environment, Original timeline delayed. The procurement policy has been updated to include sustainable procurement as per schedule.	As a modern and conscientious organisation our environmental sustainability plan ensures we are in line with requirements.	

Strategic risk 6. We do not sufficiently or appropriately promote our work leading to opportunities to enhance our regulatory activity being missed and the benefits of regulatory reform remaining unrealised. This can manifest in two primary ways:
 a) the role of regulation in the delivery of high-quality care is underestimated by the public, registrants, students and employers.
 b) our ability to protect the public is under-recognised by policy makers and influential stakeholders.

Risk Summary This risk includes the HCPC’s capacity and capability to engage and influence regulatory reform effectively to ensure its benefits are realised, as well as the HCPC being viewed by government as a priority regulator for reform.

Date	Risk Owner
Feb-26	Executive Director of Education, Registration & Regulatory Standards Executive Director of Corporate Affairs

	Impact	Likelihood	Risk Score
Inherent risk	4	x	5
Current Risk	4	x	2
Target risk	3	x	2

← Change No

Current Risk Influencers	
✓	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.
✓	DHSC have confirmed that the HCPC is a priority for regulatory reform along with NMC, though timeline not yet confirmed
✓	Collaboration with stakeholders such as NHS England provides organisational experience for greater cross organisational collaboration on workforce as aimed for in regulatory reform. Positive and wide-reaching engagement with HCPC stakeholders on regulatory reform.
✗	HCPC funding challenges risk being unable to scale up to meet needs of regulatory reform due to parliamentary approval of fees and associated long process to achieve this.
✗	NHS Manager barring scheme - Further clarity and planning needed to manage this new approach to regulation.
✗	Government leadership changes, and challenges in the health landscape could impact on the progression of regulatory reform due to other priorities.
✗	The impact of the wider health regulator landscape, e.g. NMC culture and whistleblowing reports, GMC times article, etc.

Risk Appetite
Reform = Open
Current risk is within appetite.
The target risk will be reached if the outcome of regulatory reform and the longer-term regulatory landscape review compliments and endorses the multi profession regulation model. Risk reduction also requires greater clarity on timing of HCPC’s reform and confidence that funding and resources in place realise the opportunity of reform.
Current risk level is within risk appetite

Mitigations in place	
Communications and strategic engagement, including parliamentarians and cross-party engagement, on regulatory reform supported by Luther Pendragon.	Participation in cross regulator analysis of draft legislation and other regulatory themes, HCPC’s comments on draft legislation have been provided.
HCPC engagement on Health and Social Care Bill led to positive change.	Funding and resource required for progression of regulatory reform quantified within budget as a financial risk. Assessment of de-prioritisation of other development work undertaken to create capacity for regulatory reform.
Some dedicated policy resource in place.	HCPC medium term financial plan in place to seek to make provision for regulatory reform. Consultation expected to launch Sept 22.

Areas of Development	Progress 2025-26	Mitigation	Reporting period commentary
Education	We have published insight from our assessments from four academic years, including the 2024-25 academic year. This information is future proofed and will be updated yearly with findings from our assessments.	Supporting understanding of the value that regulation adds	We continue to actively engage with the DHSC’s regulatory reform work as well have the Westminster forum on the future of regulation.
Registrant health and wellbeing	The Head of Professional Liaison role has been appointed and will start April 2026. A review our progress against and the impact of the registrant health and wellbeing strategy will form part of new post holder’s role once in post and so will be undertaken as part of the plans for the next financial year.	As a companionate regulator, supporting our registrants health and wellbeing can positively impact patient safety	
New registrants transition to UK practise	Employer insights newsletter around supporting international registrants published in July 2025. Joining the UK workforce sessions delivered in January and February 2026 to support international registrants who registered in 2025.	Supporting registrants new to UK practice supports addressing the workforce crisis	
Shaping the future of regulation	Continue to raise the benefits to patient safety and the quality of care that regulatory reform will bring when meeting with stakeholders and responding to relevant departmental consultations Ongoing engagement and contribution to the DHSC’s regulatory reform work Engaging with DHSC and share feedback and position statements on the draft GMC order. This is moving at fast pace. DHSC is looking to consult on GMC order in December Chair engaging with Westminster forum on the future of regulation.	Increased engagements with wider stakeholders ensure understanding the value of our work, encouraging support for reg reform changes	