

## Council, 2 July 2014

# Risk Management Strategy and processes at HCPC

Executive summary and recommendations

#### Introduction

A risk management strategy and associated processes are documented. The strategy and process was considered by the Audit Committee at its meeting on 24 June 2014.

#### Decision

Council is asked to review and approve the strategy and process.

#### **Resource implications**

None

## **Financial implications**

None

## Date of paper

23 June 2014

# **Risk Management Strategy & Process at HCPC**

#### Risk Management Strategy

Risk management shall provide a structured, repeatable and coherent approach to identifying, assessing and managing risk. A process for regularly updating and reviewing the assessment based on new developments or actions taken will be maintained. Risk management shall address the following on a continuous basis;

- Active risk and opportunity planning
- Preparing for uncertainty

Risk management shall be traceable to the strategic objectives of HCPC, and the annual departmental work plans, thus providing a top down and bottom up process.

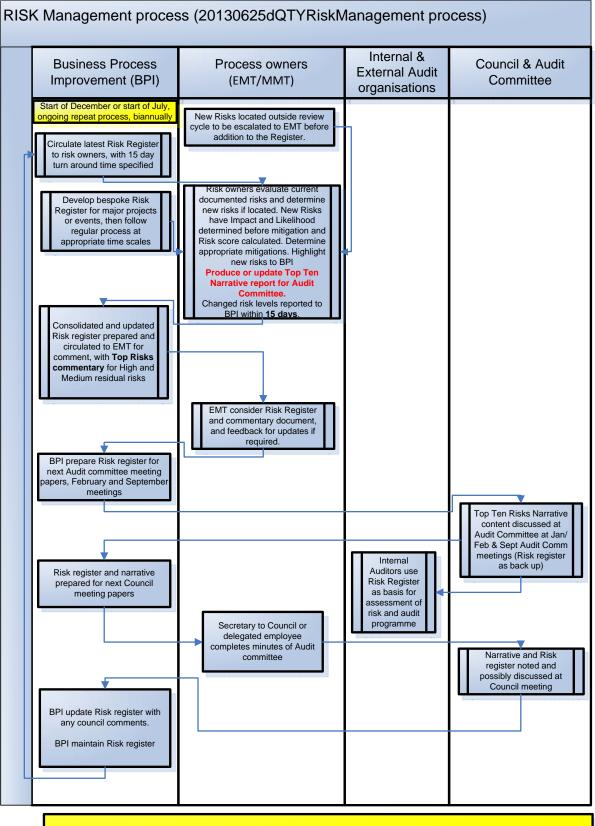
Risk management effort will be related to the scale of HCPC, and the risks implicit in regulation of health and care workers.

#### **Risk Management Processes**

1. A risk appetite is defined by the Council on a four year cycle. The current appetite is as follows;

HCPC has an **averse** appetite to risk in that we;

- a. Identify all relevant risks
- b. Mitigate those risks to an appropriate level
- c. Invest mitigation resources in proportion to the level of risk
- 2. Risk Management is broken down into operational areas, which in part map to departments or directorates at HCPC.
- 3. Risk owners at HCPC are Council, Chair of Council, Chief Executive & Registrar, members of EMT or Managers of departments.
- 4. Risks are assessed on an on going basis by risk owners.
- 5. Periodic planned review of risks, are input into the corporate risk register which is published to the Audit Committee and Council on a rolling 6 monthly basis.
- 6. Common agreed quantitative impact scales will be used consistently across the organisation.
- 7. Common, agreed quantitative likelihood scales are will be used consistently across the organisation.
- 8. Multiple mitigations are to be held for all risks where possible.
- 9. Realised risks are subsequently assessed against the appropriate risk register entry to assess the effectiveness of the Risk Management process.
- 10. Historic realisation of risks, may be used to inform the forward looking risk register where appropriate.
- 11. A core document, the "Risk Register" holds all the key information required to manage the organisational risks at any one time.
- 12. The Risk Register will be used by the internal audit function to suggest areas of interest for audit.
- 13. Major projects have their own risk registers managed by the Project management team, but risk assessed by the Project Board
- 14. Very high profile project risks may be managed by the Business Process Improvement function at the request of the Chief Executive & Registrar. These risk registers may be confidential to the Audit Committee or Council
- 15. Internal Audit contractors will be appointed for no more than four years.
- 16. Internal Audit contractors will not also be appointed as External Auditors.



The Risk Register is a spread sheet based product used to track corporate level risks on an on going basis. The Top Ten Risks narrative, is a textural product, listing the Top Ten or all High to Medium residual level risks after mitigations.