

Council, 6th July 2017

Social Worker Risk Register & Risk Treatment Plan

Executive summary and recommendations

Introduction

- The Social Worker Risk Register and Risk Treatment plan is a document reflecting current and recent levels of risk recognised by risk owners, related to the project to migrate Social Workers in England to a new regulator. Social Work England
- 2. The Project risk register is separate from the Enterprise Risk Register and Risk Treatment plan
- 3. This Social Worker Risk Register and Risk Treatment plan is continually under review. Any changes are agreed at monthly EMT meetings. This document was updated following the recent meeting of the Audit Committee and a further review is timed following the parliamentary vote on the Queen's Speech. Residual risk is implicitly accepted for any current risk register unless otherwise indicated.
- 4. The Council are asked to decide how frequently they would like to see the SW England Risk Register.

Decision

The Council is requested discuss the document and decide how often they wish to see this risk register.

Background information

None

Resource implications

None

Financial implications

None

Appendices

None

Date of paper

27th June 2017

Issue Date:28/06/2017

Classification: Restricted until published to Council or Audit Committee

Risk Register & Risk Treatment Plan Social Workers in England

Marc Seale, Chief Executive & Registrar Report to Council, (End June 2017)





Issue Date:28/06/2017

Classification: Restricted until published to Council or Audit Committee

January 2017 Risk Assessment

Contents	Page
Contents page	4
Top HCPC risks	5
Changes since last published	7
Strategic risks	8
Operations risks	9
Communications risks	10
Corporate Governance risks	11
Information Technology risks	12
Partner risks	13
Education risks	14
Project Management risks	15
Quality Management risks	16
Registration risks	17
HR risks	18
Legal risks	19
Fitness to Practise risks	20
Policy & Standards risks	21
Finance risks	22
Information Security risks	23
Appendix i Glossary and Abbreviations	24
Appendix ii HCPC Risk Matrix	25
HCPC Risk Matrix terms detail	26
Appendix iii HCPC Strategic Objectives & Risk Appetite	27

"Top Risks" (High & Medium after mitigation)

Historic Risk Scores

				-	(****3*********************************					
	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)		Mitigation II	Mitigation III	CURRENT RISK SCORE	Apr-17			
S.15.1	Lost contribution caused by transfer of SW in England from HCPC to SW (England)	Finance Director	Medium term financial plan updated and reviewed as more detail of government's plans become available	Annual budget setting process and 6 and 9 month reforecast processes enable short term reductions in controllable costs	Break clauses in leases and other measures to minimise fixed costs; propose fee increase if necessary to cover balance of lost contribution	High	High			
S.8.1	Time Quality That communication around the content of the legislation is not forthcoming, leading to a lack of ability for HCPC to sufficiently prepare in time for the transfer	Government / DfE; Project Sponsor Project Lead	Early and frequent communication with D of E Project Team / Government departments to ensure that timeframes allocated to the transfer are adequate			High	High			
S.8.4	Time Quality That expectations around case progression, registrant application processing and course approval at the point of transfer are unrealistic given the timeframe assigned to the transfer process	Project Lead	Early expectation setting with the receiving organisation to manage a smooth transferral process			High	High			
S.1.3	Governments ambitious timetable leads to project failure.	HCPC Chief Executive & EMT	On going regular contact with Gvmt depts	Chair to write to Secs of State asking for further clarification		High	Medium			
S.1.4	Brexit reduces availability of governments legal advice to New Reg	HCPC Chief Executive / EMT	On going regular contact with Gvmt depts			High	Medium			
S.1.7	Lack of Parlimentary time impacts delivery of project requirements	HCPC Chief Executive & EMT	On going regular contact with Gvmt depts	Delay project if required by governement departments		High	New			
S.15.6	Funding shortfall for transfer project (pre- transfer)	Finance Director	Medium term financial plan updated and reviewed as more detail of government's plans becomes available	Annual budget setting process and 6 and 9 month reforecast processes enable short term reductions in controllable costs	Break clauses in leases and other measures to minimise fixed costs; propose fee increase if necessary to cover balance of lost contribution	Medium	Medium			
S.2.1	Operational costs increased due to loss of volume discounts and scalability opportunities	ЕМТ	Changes to supplier contracts	Fee rise to maintain service levels		Medium	Medium			
S.2.2	Changes to timetable for profession migration disrupt resource planned around specific date	EMT	Delay non time critical work to deliver Social Worker England project	Increase contractor resource		Medium	Medium			
S.5.1	New Regulator fails to deliver to timetable and our operations and performance are compromised (as awaiting trnsfer out of SW records)	Director of IT, Project Prtfolio Mgr	Share HCPC's migration expertise with new Regulator project team			Medium	Medium			
S.6.1	Loss of Registrants results in shortfall of SW Partners for existing or ongoing FTP cases, post transfer	Director of HR, Partner Mgr, Director of FTP	Outsource existing / ongoing SW cases to service provider post transfer	D of E funding of service provider	Outsourced contractors SLA	Medium	Medium			
S.7.2	Timing of HCPC's planned disengagement with approvals and monitoring of SW programmes disrupted by transfer delays	Director of Education	Reorganise visit and approval schedule to allow for ongoing SW work.	Obtain temporary contractor cover for required education processes		Medium	Medium			
S.1.5	Delay in transfer triggers significant political and media scrutiny (FOI requests etc)	HCPC Chief Executive & EMT	On going regular contact with Gvmt depts	Bespoke Communications plan for specific outcomes		Medium	Medium			
S.1.6	HCPC's working relationship with DoH is damaged through inability to deliver on time	HCPC Chief Executive & EMT	On going regular contact with Gvmt depts			Medium	Medium			

Classification: Restricted until published to Council or Audit Committee

Classificat	tion: Restricted until published to Council of	or Audit Committee		T	1			 · · · · · · · · · · · · · · · · · · ·	 1	
	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)		Mitigation II	Mitigation III	CURRENT RISK SCORE	Apr-17			
S.1.1	Non financial impact of transfer on HCPC's culture	HCPC Chief Executive & EMT	Communications to managers and employees	Management openness and employees assistance scheme		Medium	Medium			
S.8.2	Quality That stakeholder management is poorly undertaken by HCPC	Project Lead	Clear idenitification of stakeholders and early allocation of responsibility within the project team			Medium	Medium			
S.8.3	Quality That expectations around the data that will be transferred is unachievable given any HCPC systems and data limitations	Project Manager	Accept the risk and manage expecations within the receiving organisation as best as possible			Medium	Medium			
S.8.5	Time Quality That due to inexperience the receiving organisation is unco-operative or unclear in stipulating their data requirements, which would lead to delays in HCPC preparations	Project Manager	Early expectation setting with the receiving organisation to manage a smooth transferral process			Medium	Medium			
S.8.6	Time Quality That there are delays in implementing technology solutions in the receiving organisation which could have a knock on effect to HCPC preparations for data transfer	Project Manager	Early expectation setting with the receiving organisation to manage a smooth transferral process			Medium	Medium			
5.8.8	HCPC's non-Social Worker England projects delayed due to poorly constrained or slipping time scales of Social Worker England project & conflicting commitments	ЕМТ	Monitoring of budget and work plans	Experience of HCPC's EMT	Experience of HCPC project management	Medium	Medium			
S.13.1	Retain legacy FTP cases without clear case transfer and funding arrangements in place	Director of Fitness to Practice, Director of Finance	Cost allocation and overhead charging method agreed with DfE prior to transfer	Request additional funding for specific cases	Reforecasting budget processes and resource allocation	Medium	Medium			
S15.3	Social workers may cancel direct debit instructions for their HCPC fees in 2018-19 due to their previous experience of a double registration fee hit when transferring from the GSCC to HCPC in 2012, causing a shortfall in income and additional work.	Finance Director, Head of Registration	Communications plan to support ongoing payment prior to transfer to new regulator	Ongoing regular contact with DH and DfE		Medium	Medium			
S15.4	Cost of work leading up to the transfer and/or cost of any functions undertaken on behalf of SWE after the transfer not fully covered by DH / DfE grant, including related overheads	HCPC Accounting Officer	Early discussions woth DoH & D oE w.r.t. cost of transfer	Undertake fully funded activities only		Medium	Medium			

Classification: Restricted until published to Council or Audit Committee
Changes since the previous iteration of HCPC's Risk Register

Category	Ref#	Description	Nature of change in this version
Strategic	S.1.3	Governments ambitious timetable leads to project failure.	Increase impact to 3, pre & post mitigation risk increased. Mit ii added
	S.1.4	Brexit reduces availability of governments legal advice to New Reg	Increase likelihood to 3, pre & post mitigation risk increased
		Lack of Parlimentary time impacts delivery of project requirements	

Overview of Risk Management and Risk Treatment process

Throughout the year exisiting Risk Register & Risk Treatment Plan

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 recorded.

Individual risks are linked to the current Statement of Applicability by the ISO27001 Clauses noted in the ISMS Risks column on each page. Strategic Objectives are linked to individual risks where applicable.

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Strategic

Ref	Category	ISMS Risks	Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations June 2017	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
1	Strategic		S.1.1	Non financial impact of transfer on HCPC's culture	HCPC Chief Executive & EMT	3	4	12	Communications to managers and employees	Management openness and employees assistance scheme		Med	Med
	Strategic		S 1 2	HCPC's repution tainted by new regulator's early failure to deliver service standards, blaming HCPC hand over	HCPC Chief Executive & EMT	3	3	9	Level of cooperation with new regulator			Low	Low
	Strategic		S.1.3	Governments ambitious timetable leads to project failure.	HCPC Chief Executive & EMT	3	5	15	On going regular contact with Gvmt depts	Chair to write to Secs of State asking for further clarification		High	Med
	Strategic			Brexit reduces availability of governments legal advice to New Reg	HCPC Chief Executive / EMT	4	3	12	On going regular contact with Gvmt depts			High	Low
	Strategic		S.1.5	Delay in transfer triggers significant political and media scrutiny (FOI requests etc)	HCPC Chief Executive & EMT	3	4	12	On going regular contact with Gvmt depts	Bespoke Communications plan for specific outcomes		Med	Med
	Strategic			HCPC's working relationship with DoH is damaged through inability to deliver on time	HCPC Chief Executive & EMT	3	4	12	On going regular contact with Gvmt depts			Med	Med
	Strategic	NEW	S.1.7	Lack of Parlimentary time impacts delivery of project requirements	HCPC Chief Executive & EMT	4	3	12	On going regular contact with Gvmt depts	Delay project if required by governement departments		High	

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Operations

Ref	Category	ISMS Risks	Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations June 2017	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
	Operations		S.2.1	Operational costs increased due to loss of volume discounts and scalability oportunities	ЕМТ	2	3	6	Changes to supplier contracts	Fee rise to maintain service levels		Med	Med
	Operations		S.2.2	Changes to timetable for profession migration disrupt resource planned around specific date	ЕМТ	3	3	9	Delay non time critical work to deliver Social Worker England project	Increase contractor resource		Med	Med

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Communications

Ref	Category	ISMS Risks Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)		Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
	Communications	S.3.1	Failure of New Regs Comms programme damages HCPC's reputation	Director of Communications, Project Portfolio Mgr	2	3	6	HCPC's Comprehensive, bespoke Comms plan for stakeholders	D of E funding	Low	Low
	Communications		Public protection damaged due to lack of clarity around regulator to contact		2	4	8	HCPC's Comprehensive, bespoke Comms plan for public	D of E funding	Low	Low
	Communications	S.3.3	Negative comms concerning HCPC from New Reg to justify existence	Director of Communications, Project Portfolio Mgr	2	2	4	HCPC's Comprehensive, bespoke Comms plan for public		Low	Low

Classification: Restricted until published to Council or Audit Committee

THE HEALTH AND CARE PROFESSIONS COUNCIL

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Corporate Governance

Ref	C	Category	ISMS Risks	Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations June	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
		Corporate overnance		S.\$.1	Changes to Council structure disrupts regular Council member recruitment cycle - appropriate transitional provisions legislation not created	Committee Services &	1	2		Obtain legal advice around interpretation of requirement	Work with DH to ensure the requirment is fulfilled	None	Low	Low

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Information Technology

Ref	Category	ISMS Risks	Ref # Descript	pe m	Risk owner (primary erson responsible for assessing and nanaging the ongoing risk)	Impact before	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
	Information Technology		New Regulator fails timetable and our o performance are co (as awaiting transferecords)	operations and Dir	irector of IT, Project ortfolio Mgr	3	4	12	Share HCPC's migration expertise with new Regulator project team			Med	Med

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Partners

Ref Category	ISMS Risks	Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations June 2017	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	Mitigation June 2017	RISK score after Mitigation Jan 2017
Partners Added by RPD		3.0.1	Loss of Registrants results in shortfall of SW Partners for existing or ongoing FTP cases, post transfer	Director of HR, Partner Manager, Director of FTP	4	3	12	Outsource existing / ongoing SW cases to service provider post transfer	D of E funding of service provider	Outsourced contractors SLA	Med	Med

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Education

Ref	Category	ISMS Risks	Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jan 2017	RISK score after Mitigation Jan 2017
	Education		S.7.1	Education providers disengage from HCPC processes before the tranfer to new Regulator	Director of Education	3	2	6	Proactive communications with NewReg to education providers			Low	Low
	Education		S.7.2	Timing of HCPC's planned disengagement with approvals and monitoring of SW programmes disrupted by transfer delays	Director of Education	3	3	9	Reorganise visit and approval schedule to allow for ongoing SW work.	Obtain temporary contractor cover for required education processes		Med	Med
	Education		S.7.3		Director of Education, Director of Finance	2	2	4	Additional grant from DoH England	Obtain temporary contractor cover for required education processes		Low	Low

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Project Management

Ref	Category	ISMS Risks	Ref # Description	Risk owner (primary person responsible for assessing and managing the on-going risk)	Impact before mitigations June 2017	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
	Project Management		S.8.1 Time Quality That communication around the content of the legislation is not forthcoming, leading to a lack of ability for HCPC to sufficiently prepare in time for the transfer	Project Sponsor Project	4	4	16	Early and frequent communication with D of E Project Team / Government departments to ensure that timeframes allocated to the transfer are adequate			High	High
	Project Management		S.8.2 Quality That stakeholder management is poorly undertaken by HCPC	Project Lead	3	3	9	Clear idenitifcation of stakeholders and early allocation of responsibility within the project team			Med	Med
	Project Management		S.8.3 Quality That expectations around the data that will be transferred is unachievable given any HCPC systems and data limitations	Project Manager	2	3	6	Accept the risk and manage expecations within the receiving organisation as best as possible			Med	Med
	Project Management		S.8.4 Time Quality That expectations around case progression, registrant application processing and course approval at the point of transfer are unrealistic given the timeframe assigned to the transfer process	Project Lead	4	4	16	Early expectation setting with the receiving organisation to manage a smooth transferral process			High	High
	Project Management		S.8.5 Time Quality That due to inexperience the receiving organisation is unco-operative or unclear in stipulating their data requirements, which would lead to delays in HCPC preparations	Project Manager	3	4	12	Early expectation setting with the receiving organisation to manage a smooth transferral process			Med	Med
	Project Management		Time Quality That there are delays in implementing technology solutions in the receiving organisation which could have a knock on effect to HCPC preparations for data transfer		3	4	12	Early expectation setting with the receiving organisation to manage a smooth transferral process			Med	Med
	Project Management		S.8.7 Cost That the cost of the project will excede HCPC expectations	Project Sponsor	3	2	6	Experience of HCPC with inbound transfers helps predict outbound costs			Low	Low
	Project Management		HCPC's non-Social Worker England projects delayed due to poorly constrained or slipping time scales of Social Worker England project & conflicting commitments		5	2	10	Monitoring of budget and work plans	Experience of HCPC's EMT	Experience of HCPC project management	Med	Med
	Project Management		S.8.9 Impact and effectivness of Transfer Order fails to deliver project requirements	Government / D o E	5	5	25	Engagement of HCPC legal advisors with drafting of order.	Experience of HCPC's EMT		Low	Low

THE HEALTH AND CARE PROFESSIONS COUNCIL RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Quality Management

Ref	Category	ISMS Risks	Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations June 2017	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
9	Quality Management.		S9.1	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.	I A7.1.2	S9.2	Employees non-compliance with established Standard Operating Proceedures	ЕМТ	5	2	10	Culture, follow procedures and report errors	Standard Operating Procedures and prevention of overwriting systems	Extend ISO systems as required	Low	Low
	Quality Management.		S9.3		Director of Council and Committee Services, Complaints Manager	3	2	6	Comms plan in place with regular updates for social workers about the impact of the transfer	IF LEVIOUS EXPELIENCE OF SOCIAL WOLKER	Secretariat administrator able to cover admin side of complaints if necessary	Low	Low

THE HEALTH AND CARE PROFESSIONS COUNCIL RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Registrations

Ref	Category	ISMS Risks Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations June 2017	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
	Registration Added by RPD	S.10.1		Head of Registration & Director of Communications	2	3	6	extensive Comms campaign to university third	Filter applications for registration at Post Room, log names & postcodes, and securely forward to new Regulator		Low	Low
	Registration	S.10.2	Continuation of SW regulation beyond published dates caused resource shortfall in Reg Dept	Head of Registration & Director of Operations	3	2	6	Upscale resources with contractors in short term			Low	Low
	Registration	S.10.3	Limited remit of New Reg functions results in Gymt request for HCPC to maintain register for unknown period of time, splitting functions	Head of Registration & Director of Operations	3	2	6	Design specific shared regulation processes between NewReg & HCPC	Upscale resources with contractors in short to medium term. Changes to NetRegulate implimented in short term.		Low	Low

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Ref	Category	ISMS Risks	Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations June 2017	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
	HR		5.11.1	Adverse impact on wellbeing and performance of employees concerned about long term future of their role	Director of Human	3	3	9	Regular updates and communications with	Retention strategy including hiring new employees on fixed term contracts, focus on engagement, wellbeing and development, change management training and briefings for managers	Employee Assistance programme	Low	Low
	HR		S.11.2	HCPC and new regulator disagree on application of COSOP causing uncertainty for employees	Director of Human Resources	2	2	4		with new regulator and Department of	New employees recruited on fixed term contracts to manage expectations	Low	Low
	HR		S.11.3	High turnover of employees due to uncertainty leads to resourcing challenges	Director of Human Resources, specific departmental managers	4	3	12	Agency temps and employees on fixed term contracts engaged to provide additional capacity.	Department of health funding to increase temporary support	Fixed term employees offered permanent contracts if a permanent opportunity becomes available	Low	Low

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Legal

Ref	Catego	ory	ISMS Risks	Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations June 2017	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
	Lega	al				Director of Policy & Stds, EMT	4	1	4	Proactive involvement with DoE / DH legislators	Experienced HCPC legal advisors		Low	Low
	Lega	al le		C 12 2		Director of Policy & Stds, EMT	3	2	6	Proactive involvement with DoE / DH legislators	Experienced HCPC legal advisors		Low	Low

THE HEALTH AND CARE PROFESSIONS COUNCIL RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Fitness to Practise

Ref	Category	ISMS Risks	Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations June 2017	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	Mitigation June 2017	RISK score after Mitigation Jan 2017
	FTP		S.13.1	Retain legacy FTP cases without clear case transfer and funding arrangements in place	Director of Fitness to Practice, Director of Finance	3	2	6	Cost allocation and overhead charging method agreed with DfE prior to transfer		Reforecasting budget processes and resource allocation	Med	Med
	FTP		S.13.2	Maintain FTP function for unknown period of time, rather than project delay	Director of Fitness to Practice, Director of Finance	4	2	8	Cost allocation and overhead charging method agreed with DfE prior to transfer	Reforecasting budget processes and resource allocation	Request additional funding for specific cases	Low	Low

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Policy & Standards

Re	f	Category	ISMS Risks	Ref#		Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
		Policy & Standards			N/A									

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Finance

Ref	Category	ISMS Risks	Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations June 2017	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
	Financial		S15.1	Lost contribution caused by transfer of SW in England from HCPC to SW (England)	Finance Director, EMT	5	4	20	Medium term financial plan updated and reviewed as more detail of government's plans becomes available	Annual budget setting process and 6 and 9 month reforecast processes enable short term reductions in controllable costs	Break clauses in leases and other measures to minimise fixed costs; propose fee increase if necessary to cover balance of lost contribution	High	High
	Financial		S15.2	Transfer of SW to SWE substantially reduces HCPC cash balance, since up to £5m of cash balance has been SW fees received in advance. Combined with deficits incurred after transfer due to lost contribution, liquidity may become an issue	Finance Director, EMT	5	2	10	Medium term financial plan updated and reviewed as more detail of government's plans becomes available	Arrange borrowing facility with bank if required		Med	Med
	Financial		S15.3	Social workers may cancel direct debit instructions for their HCPC fees in 2018-19 due to their previous experience of a double registration fee hit when transferring from the GSCC to HCPC in 2012, causing a shortfall in income and additional work.	Finance Director, Head of Registration	4	3	12	Communications plan to support ongoing payment prior to transfer to new regulator	Ongoing regular contact with DH and DfE		Medium	Medium
	Financial		S15.4		HCPC Accounting Officer	4	3	12	Early discussions woth DoH & D oE w.r.t. cost of transfer	Undertake fully funded activities only		Medium	Medium
	Financial		S15.5	If the transfer date slips past 1 December 2018, special fee arrangements may need to be made for social workers, requiring extra admin/systems effort and costs	Finance Director	3	3	9	Ongoing regular contact with DH and DfE			Low	Low
-													+

RISK ASSESSMENT & RISK TREATMENT PLAN June 2017

Information Security

Ref	Category	ISMS Risks	Ref#	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations June 2017	Likelihood before mitigations June 2017	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation June 2017	RISK score after Mitigation Jan 2017
	Information Security		S.17.1	Loss of electronic SW registrant information by new regulator during transfer process	Government / New Regulator	5	1	5	HCPC-IT deliver data extract in highly secure manner, encrypted, password protected			Low	Low
	Information Security		S.17.2	Loss of paper SW applicant / registrant information by new regulator during transfer process	Government / New Regulator	5	1	5	Use of couriers, with signatures, to pre-named parties only.	ISO27001 compatible processes used		Low	Low
	Information Security		0 17 0	transit, arriving at HCPC after	Director of IT, Director of FTP, Hd of BPI / Dir Ops, Head of Registration	5	2	10	Communications plan prior to move to NewReg,	Interception at HCPC post room to specific named individual at HCPC	Robust internal processes	Low	Low
	Information Security		S.17.4	delivery of other functionality to	Director of IT, Hd of BPI / Dir Ops, Head of Registration. Project Portfolio Mgr	3	3	9	Proactive modification of internal deadlines based on evolving requirements.	Project prioritisation process		Low	Low
	Information Security		S.17.5	iniornation and mability to answer	Director of IT, Director of FTP, Hd of BPI / Dir Ops, Head of Registration	2	3	6	Early redirection of all FOI requests to NewReg	Generation of FOI'able data table for reporting purposes.		Low	Low

Issue Date:28/06/2017

Classification: Restricted until published to Council or Audit Committee

Glossary & Abbreviations

Term Meaning

AGM Annual General Meeting

BCP / BCM Business Continuity Plan / Business Continuity Management (Disaster Recovery and associated processes)

CCM's Council & Committee Menbers

CDT Cross Directorate Team (formerly HCPC's Middle Management Group)

CPD Continuing Professional Development

DH Departments of Health in Home countries

DfE Department for Education

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

ISMS Information Security Management System (ISMS) risk

Impact The result of a particular event, threat or opportunity occuring. 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. ISO 27001:2013 The ISO Information Security Standard used by HCPC.

IT Risk Register & Risk Treatment Plan

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

New Reg New bespoke regulator for Social Workers in England

OIC Order in Council

OJEU Official journal of the European Union

Onboarding The process of bringing a new profession into statuatory 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.

Q Quality Management System (QMS) Risk

QMS Quality Management System, used to record and publish HCPC's agreed management processes
Risk Any 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

SW (England) Name of the new Social Work regulator in England

VPN Virtual Private Network, a method of securely accessing computer systems via the public internet

ISO27001 Term	Meaning
ISO27001:2013 A5	Security Policy Management
ISO27001:2013 A6	Corporate Security Management
ISO27001:2013 A7	Personnel Security Management
ISO27001:2013 A8	Organizational Asset Management
ISO27001:2013 A9	Information Access Management
ISO27001:2013 A10	Cryptography Policy Management
ISO27001:2013 A11	Physical Security Management
ISO27001:2013 A12	Operational Security Management
ISO27001:2013 A13	Network Security Management
ISO27001:2013 A14	System Security Management
ISO27001:2013 A15	Supplier Relationship Management
ISO27001:2013 A16	Security Incident Mangement
ISO27001:2013 A17	Security Continuity Management
ISO27001:2013 A18	Security Compliance Management

Enc 09b - Social Work risk register

App i Glossary & Abbreviations

IMPACT

HCPC RISK MATRIX

HCPC RISK MATRIX Public Protection	Financial	Reputation						
Catastrophic 5 A systematic failure for which HCPC are ultimately responsible for, exposes the public to serious harm in cases where mitigation was expected.		Catastrophic 5 Incompetence/ maladministration or other event that will destroy public trust or a key relationship	5	10	15	20	25	
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.	Significant 4 Unfunded pressures £250,000 -£1 million	Significant 4 Incompetence/ maladministration that will undermine public trust or a key relationship for a sustained period or at a critical moment.	4	8	12	16	20	
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.	Moderate 3 Unfunded pressures £50,000 - £250,000	Moderate 3 Incompetence/ maladministration that will undermine public trust or a key relationship for a short period. Example Policy U-turn	3	6	9	12	15	
Minor 2 A systemic failure which results in inadequate protection for individuals/individual communities, including failure to resolve celebrity cases.	Minor 2 Unfunded pressures £20,000 - £50,000	Minor 2 Event that will lead to widespread public criticism.	2	4	6	8	10	
Insignificant 1 A systemic failure for which fails to address an operational requirement	Insignificant 1 Unfunded pressures over £10,000	Insignificant 1 Event that will lead to public criticism by external stakeholders as anticipated.	1	2	3	4	5	
KEY	•		Negligible1	Rare 2	Unlikely 3	Possible 4	Probable 5	
>11 High Risk: Urgent action required			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
6-10 Medium Risk: Some action required			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 of 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 life-cycle of the project, probably early on and perhaps more than once.	Programme / Project
<5 Low Risk: Ongoing monitoring required			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

App ii HCPC Risk Matrix Enc 09b - Social Work risk register

IMPACT TYPES

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

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.

IMPACT

App ii Risk Matrix defns

LIKELIHOOD

DOCUMENT CONTROL:Enc 09b - Social Work risk register

Issue Date:28/06/2017

Classification: Restricted until published to Council or Audit Committee HCPC Strategic Objectives 2016 - 2020

code

SO1.GG	Objective 1: Good governance
001.00	To maintain, review and develop good corporate governance
	Specific risks; 4.1 to 4.17 inclusive
SO2.EBP	Objective 2: Efficient business processes
	To maintain, review and develop efficient business processes throughout the organisation Specific risks; 1.1; 1.2; 1.2; 2.3; 4.1; 4.5; 4.6; 4.7; 4.12; 9.2
SO3.Com	Objective 3: Communication
	To increase understanding and awareness of regulation amongst all stakeholders
	Specific risks; 3.1; 3.2; 3.3; 3.4; 3.5
SO4.Evid	Objective 4: Build the evidence base of regulation
	To ensure that the organisation's work is evidence based Specific risks; 14.2
SO5.IPA	Objective 5: Influence the policy agenda
	To be proactive in influencing the wider regulatory policy agenda Specific risks; 1.2; 1.5
SO6.HmCty	Objective 6: Engagement in the four countries
	To ensure that our approach to regulation takes account of differences between the four countries Specific risks;

HCPC has an averse appetite to risk in that we;

- a. Identify all relevant risks
- b. Mitigate those risks to an appropriate levelc. Invest mitigation resources in proportion to the level of risk

App iii Strat Obj Enc 09b - Social Work risk register