

Audit Committee, 4 March 2020

Social Worker Risk Register & Risk Treatment Plan

Executive summary and recommendations

Introduction

1. 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 is closing, with only one risk remaining open (Strategic Risk S1.1). The closed risks page has been removed.
3. The project was successful from HCPC's point of view. We remain in communication with SWE as and when they require our expertise or assistance.

Decision

No decision is required.

Background information

None

Resource implications

None

Financial implications

None

Appendices

None

Date of paper

25 February 2020

Risk Register & Risk Treatment Plan Social Workers in England

John Barwick, Interim Chief Executive & Registrar

Report to Audit Committee, (Mar 2020)



May 2019 Risk Assessment

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"Top Risks" (High & Medium after mitigation)

Historic Risk Scores

Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Mitigation I	Mitigation II	Mitigation III	CURRENT RISK SCORE	Feb-19	Nov-18	Sep-18	Jun-18	Mar-18	Nov-17	Sep-17	Apr-17		
S.1.1 Non financial impact of transfer on HCPC's culture	HCPC Chief Executive & SMT	Communications to managers and employees	Management openness and employees assistance scheme		Medium, decreasing	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
Operational	S2.2		Closed
Operational	S2.3		Closed
Operational	S2.4		Low / Closing
Communications	S3.24		Closed
Corporate Governance	S4.1		Closed
Information Technology	S5.1		Closed
Information Technology	S5.5		Closed
Information Technology	S5.6		Closed
Project Management	S8.1		Closed
Project Management	S8.2		Closed
Project Management	S8.5		Closed
Project Management	S8.6		Closed
Registration	S10.2		Closed
Registration	S10.3		Closed
Registration	S10.5		Closed
Legal	S12.1		Closed
Legal	S12.2		Closed
FTP	S13.3		Closed
FTP	S13.4		Closed
FTP	S13.5		Closed
Finance	S15.4		Closed
Information Security	S17.6		Closed
Information Security	S17.7		Closed

Closed Risks page removed

[Overview of Risk Management and Risk Treatment process](#)

Throughout the year existing r 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.

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Strategic

Ref	Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Risk Owner (Names)	Impact before mitigations Feb 2020	Likelihood before mitigations Feb 2020	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	mitigation plan deadline	Updates	Date Raised	Escalation	Mitigation completion date	RISK score after Mitigation October 2019	RISK score after Mitigation Sep 2019
1	Strategic		S.1.1	Impact of transfer on HCPC's culture and working practices	HCPC Chief Executive & SMT	John Barwick	3	4	12	Communications to managers and employees, inc sharing of information and consultation with Employee Forum	Management openness and employees assistance scheme	Papers being placed in council	Currently reducing risk but not at zero, remains low "Medium"	Regular updates and communications with employees also at the All employee meeting will give employees updates, the next one is on the 10th October 2019. Proactive engagement with Employee Forum and OMT with fortnightly meetings, supported by Intranet content.				Med	Med
	Strategic		S.1.2	HCPC's reputation damaged by new regulator's early failure to deliver service standards, blaming HCPC hand over	HCPC Chief Executive & SMT	John Barwick	3	3	9	Level of cooperation with new regulator (joint project boards meetings)	sharing risks, sharing fip data	PSA oversight inc joint meetings with SWE, DHSC, DIE and HCPC	CLOSED	Quarterly meeting now scheduled with SWE/DFE/DHSC and the PSA has been invited to regular briefings on the project. 27/03/2019: There have been two joint board meetings to review status and key decision making. 2/9/19: Next joint project board 6 October 2019 30/10/19 - increased frequency of meetings/dialogue between SWE and HCPC delivery teams including refinement of go-live plans to ensure data can be exported by HCPC and ingested by SWE in good time for the go-live date.				Low	Low
	Strategic		S.1.3	Delay in of ministerial approval of final go live date leads to project failure.	HCPC Chief Executive & SMT	John Barwick	3	4	12	Draft SW England key assumptions document, v1.0 16th May 2018. Transitional arrangement documents	On going regular contact with Gvmt depts. PSA meetings, infrastructure review authority	Cabinet office infrastructure review June/July 2019	CLOSED	Transitional arrangements now shared with DIE and SWE for approval. 16/05/2019: the project is less likely to fail. 2/9/19 - Ministerial announcement confirming 2 December go live. IPA review scheduled in October. 30/10/19 - IPA review has assessed SWE readiness as amber/green. Commencement regulations being put before ministers for approval.				Low	High
	Strategic		S.1.5	Delay in transfer triggers significant political and media scrutiny (FOI requests etc)	HCPC Chief Executive & SMT	John Barwick	3	3	9	On going regular contact with Gvmt depts	Bespoke Communications plan for specific outcomes	Joint comms planning with SWE and HCPC comms teams. Sharing risks	CLOSED	2/9/19 - Expected transfer date of 2 December now confirmed publicly. 30/10/19 - IPA review confirms SWE readiness as amber/green. Commencement regulations being advanced.				Med	Med
	Strategic		S.1.6	HCPC's working relationship with DHSC is damaged through inability to deliver on time	HCPC Chief Executive & SMT	John Barwick	3	4	12	On going regular contact with Gvmt depts	own project planning and contacting DHSC. Proactive dialog about transition scheme	meeting project deliverables	CLOSED	2/9/2019 - Ongoing regular dialogue with DHSC and DIE inc progress review meetings hosted by PSA.				Med	Med
	Strategic	merge with 1.2	S.1.8	Reputational damage to HCPC due to SW-E project failure	HCPC Chief Executive & SMT	John Barwick	3	3	9	Proactive prompting of SW-England project team of potential pitfalls based on HCPC experience	Level of cooperation with new regulator	Bespoke Communications plan for specific outcomes	CLOSED	Grant Thornton Auditors have reviewed HCPC project and we have invited the PSA to review the project. 2/9/2019 - BDO (Internal Audit) scheduled to undertake a review of the SWE transfer project. Scoping doc due w/c 2/9/19 30/10/19 - Internal audit complete. Assurance level amber/green. Some recommendations already actioned.				Med	Med
	Strategic	NEW	S.1.9	Risk that the Social Work England project may be cancelled by Government causing rapid change in HCPC operational requirements.	HCPC Chief Executive & SMT	John Barwick	4	1	4	On going monitoring of project progress and communications from government departments flag potential changes	Ongoing registration with HCPC until actual transfer date with limited shut down of activity until close to migration date	Data transfer scheme and Data Sharing agreement.	CLOSED	Data transfer scheme received on the 15th May. 2/9/2019 - Children and Social Work Act 2017 (Transitional and Savings Provisions) (Social Workers) Regulations drafted. 30/10/19 - Commencement regulations being put before ministers following October IPA review.				Low	NEW
	Strategic		S.1.11	SWE's inability to confirm on a new transfer date (Dec 2019 - Feb 2020) may impact HCPC's business as usual activities, resources and finance	HCPC Chief Executive & SMT	John Barwick	4	4	16	Data transfer scheme	PSA oversight of project	second grant request submitted to DIE	CLOSED	20/03/2019: additional grant submitted to DIE. 1. Additional fitness to practise costs due to the expected two month delay in the transfer date (£618K) 2. Costs incurred due to the transfer of social workers and uncertainties around the transfer date (£998K) 3. A proposal to increase FTP capacity in advance of transfer to help manage the number of open cases that will be transferred to SWE. (£673K) In addition, a contingency fund to cover any run down costs incurred following transfer is also proposed. The request reflects the additional income that HCPC will receive as a result of the two month delay. 08/04/2019: The latest update is that the request is being reviewed by the Government's internal auditors at the request of DIE. 16/05/2019: There is a PWC meeting on the 21st May 2/9/2019 - Grant Funding agreement has been varied to include additional £1,116,033 in respect of second grant request. Maximum grant available is now £3,516,033			01/09/2019	Med	High

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Operations

Ref	Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Risk Owner	Impact before mitigations Feb 2020	Likelihood before mitigations Feb 2020	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	Mitigation plan deadline	Updates	Date Raised	Escalation/Decision Group	Mitigation completion date	RISK score after Mitigation October 2019	RISK score after Mitigation Sep 2019
	Operations		S.2.1	Operational costs increased due to loss of volume discounts and scalability opportunities	SMT	SMT	2	3	6	Changes to supplier contracts	Potential fee rise to maintain service levels	submission of additional grant requests	CLOSED	27/03/2019: grant submitted on the 20th March. Fee rise has been approved. 2/9/2019 - Grant Funding agreement has been varied to include additional £1,116,033 in respect of second grant request. Maximum grant available is now £3,516,033. Re-tendering of FTP P&P contract underway			01/09/2019	low	Med
	Operations		S.2.2	Changes to transfer date disrupts to resource planning	SMT	SMT	3	3	9	Delay non time critical work to deliver Social Worker England project	Increase contractor resource	identification of arrangements to reduce premature staff turnover (retention allowances)	CLOSED	Requested confirmation of transfer date from the DfE 2/9/19 - Public ministerial confirmation of expected transfer date of 2/12/19. Further IPA review planned for October. 30/10/19- IPA review has given SWE readiness an amber/green rating. This reduces the likelihood of a change to the transfer date.				Med	Med
	Operations		S.2.3	Due to no clear govt timetable HCPC delays investment in internal projects	SMT	SMT	3	3	9	Ongoing close monitoring of problematic governmental timetable and objectives	Ongoing reprioritisation of project list		CLOSED	Requested confirmation of transfer date from the DfE 27/03/2019- there is a higher timetable plan. 2/9/19 - Public ministerial confirmation of expected transfer date of 2/12/19. Further IPA review planned for October. 30/10/19- IPA review given SWE readiness amber/green rating. Implementation of organisation reform programme has commenced				low	Med
	Information Technology	REASSIGNED 06/06/19 Previously an IT Risk - S.5.1	S.2.4	New Regulator fails to deliver to timetable and our operations and performance are compromised (as awaiting transfer out of SW records)	SMT	SMT	3	4	12	Share HCPC's migration expertise with new Regulator project team	Backfill resource		CLOSED	Requested confirmation of transfer date from the DfE. Transitional arrangements agreed and discussion with SWE around an early data transfer point to enable SWE to ingest data ahead of go live date. Dress rehearsals for data transfer are in progress. Final reconciliation of small cost anomalies.				Med	Med

Communications

Ref	Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Risk Owner (Names)	Impact before mitigations Feb 2020	Likelihood before mitigations Feb 2020	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	mitigation plan deadline	Updates	Date raised	Escalation/ Decision group	Mitigation completion date	RISK score after Mitigation October 2019	RISK score after Mitigation Sep 2019
	Communications		S.3.1	Reputation damage Causes: 1. Choice of government to need a new and different way of regulating social work. 2. HCPC ineffective at communicating its commitment to the transfer or is seen as dragging its feet 3. SWE criticise HCPC whilst building the case for their existence and to demonstrate their different approach to regulation	Head of Communications, Project Portfolio Mgr	Roz Allison	2	3	6	Position statement & FAQs on website and ready for stakeholder engagement briefings	Close liaison with SWE communications teams and reminder of this as a concern. Any issues escalated and resolved rapidly		CLOSED	Positioning statement developed in case of media concern. Engagement by SMT with key external stakeholders. Regular meetings with SWE communications providing timely insight and messaging aligned.		SMT	Ongoing until end of project	Low	Low
	Communications		S.3.2	Confusion on which regulator to work with. Causes: 1. Social work students and registrants are confused as to where to register and delay registration 2. The public don't understand where to check the register or make a complaint	Head of Communications, Project Portfolio Mgr	Roz Allison	2	4	8	SW hub on HCPC website explaining the transfer and answering FAQs. Post transfer remove all social work references in text and tags within websites on date of transfer and adjust adwords	Clear communication to registrants of date of transfer and HCPC ceases to SW regulator. Send emails with updates (Newsletters)	Monitor social media comments and respond if required	CLOSED	Social work hub completed and updates shared in emails and news with strong engagement rates. Effective collaboration with SWE Comms on messaging and comms planning taking place. Go live communications plan agreed with SWE. Joint media and social media monitoring and collaboration on media enquiries taking place.		SMT	Ongoing until end of project	Low	Low
	Communications		S.3.3	Poor quality communications to all stakeholders. Cause: Lack of communications timeline built into transfer of regulatory service timeline which in itself is not agreed.	Head of Communications, Project Portfolio Mgr	Roz Allison	2	2	4	Build regulatory function transfer timeline into project plan once Transfer order finalised. Build communications timeline into the service transfer timeline ensuring appropriate dependencies are mapped			CLOSED	Go live comms plan agreed working with the project plan		SMT	Ongoing until end of project	Low	Low
	Communications		S.3.4	SWs complain that HCPC approach to regulation has been unacceptable through the transfer (particularly FTP, emotive, long gaps). Causes: 1. Lack of management expectations from HCPC 2. Lack of joining up of engagement between SWE and HCPC	Head of Communications, Project Portfolio Mgr	Roz Allison	2	4	8	Build and deliver detailed communications programme (ensure that registrants are supported, especially those with FTP proceedings)	Test communications approach and draft communications with FTP SW partners	Close liaison between regulatory function departments and communications teams between HCPC and SWE allowing joined up planning	CLOSED	Go live communications planning completed, working closely with regulatory function departments. The communications approach around the week-long shut down of systems and the closure of the registrant portal is being considered by the Project Board to ensure the approach meets our risk management requirements.		SMT	Ongoing until end of project	medium	med
	Communications		S.3.5	Service-user FTP complainants complain about poor process resulting from transfer. Cause: Lack of management expectation from HCPC	Head of Communications, Project Portfolio Mgr	Roz Allison	2	4	8	Build and deliver detailed communications programme (and ensure that we are supportive to registrants who are subject to FTP proceedings)	Test communications approach and draft communications with FTP Case Managers	Close liaison between regulatory function departments and communications teams between HCPC and SWE allowing joined up planning	CLOSED	Key changeover communications in preparation re FTP. Close planning between regulatory functions and comms team in HCPC and SWE under way		SMT	Ongoing until end of project	med	med
	Communications		S.3.6	Affected HCPC employees feel forgotten or disillusioned and decide to leave Causes: 1. Lack of coordination and control between HR teams 2. Lack of HR comms plan and careful dependency mapping so changes in other areas of the plan flag knock on impacts to HR comms elements 3. Lack of clarity of transfer date leaves affected employees and partners with feelings of a lack of job security 4. Parliamentary announcement of transfer date precedes proper engagement with affected employees and partners	Head of Communications, Project Portfolio Mgr, Director HR	Roz Allison	2	4	8	Continued close liaison between HR teams resulting in HR timeline and communications plan built into the project plan ensuring dependencies are mapped. Aim for clarity on FTCs 4 months prior to end of contract in this timeline	Communications prior to clarity recognise the emotional impact of the lack of certainty	Discussions with SWE, DIE and DHSC should make clear the need for employee engagement in advance of ministerial announcement if possible	CLOSED	Transfer date announcements and clarity on contractual implications coordinated. Further changes resulting in financial review need to be managed through as become clear. This will be managed through transformation communications rather than social work transfer comms.		SMT	Complete	med	med

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Corporate Governance

Ref	Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Risk Owner (Names)	Impact before mitigations Feb 2020	Likelihood before mitigations Feb 2020	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	mitigation plan date	Updates	Date raised	Escalation/ Decision group	mitigation completion date	RISK score after Mitigation Oct 2019	RISK score after Mitigation Sep 2019
	Corporate Governance		S.4.1	Changes to Council structure disrupts regular Council member recruitment cycle - appropriate transitional provisions legislation not created	Executive Director of Policy & External Communications, Information Governance Manager	Claire Amor	1	2	2	Obtain legal advice around interpretation of requirement	Work with DH to ensure the requirement is fulfilled	None	CLOSED					Low	Low

Partners

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	Partners		S.6.1	Loss of Registrants results in shortfall of SW Partners for existing or ongoing FTP cases, pre-transfer	Director of HR, Partner Manager, Head of FTP	Partner Mgr / Brian James	3	2	6	Outsource existing / ongoing SW cases to service provider post transfer	D of E funding of service provider	Outsourced contractors SLA		CLOSED				Med	Med

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Education

Ref	Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Risk Owner (Names)	Impact before mitigations Feb 2020	Likelihood before mitigations Feb 2020	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	Mitigation plan deadline	Updates	Date raised	Escalation/ Decision group	Mitigation completion date	RISK score after Mitigation Oct 2019	RISK score after Mitigation Sep 2019
	Education	CLOSED 31/10	S.7.1	Education providers are confused about which regulator they need to engage with prior to the transfer dated.	Head of Education	Brendon Edmonds	3	2	6	Proactive communications with NewReg to education providers			CLOSED	Risk closed as of 31/10/2019 as risk have been effectively mitigated and no issues running into the transfer				Low	Low
	Education	CLOSED 08/19	S.7.4	Lack of clarity and clear agreement around SWE data requirements leading to gaps around data transfer	Head of Education,	Brendon Edmonds	4	4	16	Ensure data requirements are documented and formally signed off by both HCPC and SWE.	Ensures the testing cycles for data migration are followed and agreed between HCPC and SWE		CLOSED	Risk closed as of 24/07/2019 based on a number of UAT carried out on data and shared with SWE for testing. GO-Live plans are now in place which reflect go-live activities based on snapshot of UAT cycles conducted.			03/12/2019	Med	Med
	Education	CLOSED 31/10	S.7.5	Multiple education systems related projects being operated (SWE transfer, Website, Education Systems upgrade) at the same time, affecting resources and systems availability to focus on data related activities for this project	Head of Education,	Brendon Edmonds	2	4	8	Effective project management planning and identification of shared critical pathways across projects	Pausing progress where required on lower priority projects		CLOSED	As this is about resourcing against multiple systems projects, the mitigation will remain live for the duration of the SW project. Risk closed as of 31/10/2019 as risk have been effectively mitigated and no issues running into the transfer			27/11/2019	Med	Med
	Education	CLOSED 08/19	S.7.6	Changes delivered by Education System Upgrade project require further changes to migrations tool developed to support data transfer.	Head of Education,	Brendon Edmonds	1	3	3	Capture same risk within Education Systems Major Project	Select migration approach which can accommodate changes to infrastructure/dataschema		CLOSED	Risk closed as of 24/07/2019 Primarily related to upgrade to SP 2016 having an impact. However this is now in place and testing has been done on this version.			03/06/2019	Med	Med

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Information Technology

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	Information Technology	Not an IT Risk? Move to Operations section?	S.5.1	New Regulator fails to deliver to timetable and our operations and performance are compromised (as awaiting transfer out of SW records)	Exec Director of IT & Resources, Project Portfolio Mgr	Guy Gaskin	3	4	12	Share HCPC's migration expertise with new Regulator project team	Backfill resource	SWE dress rehearsals	CLOSED	Requested confirmation of transfer date from the DfE				Med	Med
	Information Technology	Closed	S.5.2	Inability to meet the technology data migration timetable	IT, Infrastructure Manager	Jason Roth	3	4	12	HCPC to draft out principles document on arrangements/ plan for migration with suppliers in month of Set 2018	Early engagement with suppliers / clear requirements	Transfer scheme, data sharing agreement	CLOSED	Risk closed as of 30/10/2019 based on a number of UAT carried out on data and shared with SWE for testing. GO-Live plans are now in place which reflect go-live activities based on snapshot of UAT cycles conducted.				Med	Med
	Information Technology	Closed	S.5.3	HCPC may not transfer all of the data required by SWE. This may cause reputational damage to the HCPC.	IT, Infrastructure Manager	Jason Roth	4	3	12	An analysis of data held at the HCPC, and the data required by SWE will be reviewed jointly.	Transfer Agreement will be entered into. A-92-0004, A-92-0003/ data Sharing agreement	SWE sign off migration testing cycles	CLOSED	Risk closed as of 30/10/2019 based on a number of UAT carried out on data and shared with SWE for testing. GO-Live plans are now in place which reflect go-live activities based on snapshot of UAT cycles conducted.				Med	Med
	Information Technology	Closed	S.5.4	Suppliers may not respond in time HCPC's request to create export process	IT, Infrastructure Manager	Jason Roth	3	3	9	effective project planning/ open communication with SWE	Early engagement with suppliers	Issue escalation to senior management	CLOSED	All export processes have been received from suppliers.				Med	Med
	Information Technology		S.5.5	SWE may change their data requirements after tool has been created/ HCPC process are set in place with suppliers	IT, Infrastructure Manager	Jason Roth	4	3	12	SWE BA assigned to workshop requirements with HCPC teams, and HCPC will run a series on workshops with suppliers to review report, map out an export plan and a DTA before Dec 2018	Agreement of data requirements through transfer agreement and data shaing		CLOSED					Low	Med
	Information Technology		S.5.6	Export process may not be quick enough to allow an export at the final transition week/ weekend	IT, Infrastructure Manager	Jason Roth	4	3	12	Transfer Agreement details test cycles which identify performance	Migration performed for some systems using large cloud resources	Agreement with SWE for transition period	CLOSED					Low	Med

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Information Security

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	Information Security	Closed	S.17.3	Apparent loss of SW material in transit, arriving at HCPC after transfer of bulk records to new regulator	IT, Infrastructure Manager	Jason Roth	5	2	10	Communications plan prior to move to NewReg.	Interception at HCPC post room to specific named individual at HCPC	Robust internal processes	CLOSED	Robustly tested transfer process in place.				Low	Low
	Information Security	Assigned to Claire Amour	S.17.5	Removal of historic Social Worker information and inability to answer FOI requests results in ICO action (availability issues)	Exec Director of IT & Resources, Head of FTP, Hd of BPI, Head of Registration		2	3	6	Early redirection of all FOI requests to NewReg	Generation of FOI'able data table for reporting purposes.	Data transfer agreement, agreed between both parties	CLOSED					Low	Low
	Information Security		S.17.6	Loss of HCPC data or security breaches occur during UAT tests or extracts to SWE before GO-Live date	IT, Infrastructure Manager	Jason Roth	3	3	9	Early mitigation plans in place through the development of an IT principles agreement, and a full scale Data privacy impact assessment	Robust internal processes specifically targeted to hcpc IT teams and all external suppliers/ parties involved in handling data		CLOSED					Low	Low
	Information Security		S.17.7	Loss of HCPC data or security breaches occur during UAT tests or extracts to SWE during GO-Live date	IT, Infrastructure Manager	Jason Roth	3	3	9	Data Transfer agreement and Data Sharing Agreement	UAT data transfer	Robust internal processes (ISO 27001)	CLOSED					Low	

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9	Quality Management.		S9.1	Loss of ISO 9001:2015 Certification Links to 2.3, 10.3	CISRO	Head of BPI Roy Dunn	4	3	12	Regular & internal audits	QMS standards applied across HCPC	Management buy - in	CLOSED					Low	Low
	Quality Management.	I A7.1.2	S9.2	Employees non-compliance with established Standard Operating Procedures	SMT	SMT	5	2	10	Culture, follow procedures and report errors	Standard Operating Procedures and prevention of overwriting systems	Extend ISO systems as required, regular audits	CLOSED					Low	Low
	Quality Management.		S9.3	Increase in service complaints from existing SW registrants creates backlog	Head of Quality, Complaints Manager	Paul Robson/ Paula Lescott	3	2	6	Comms plan in place with regular updates for social workers about the impact of the transfer	Previous experience of Social Worker feedback styles	Governance administrator able to cover admin side of complaints if necessary, OMT and SMT complaints on a regular basis	CLOSED					Low	Low
		New	S9.4	Increased turnover of contractor staff, threatens adherence to existing processes	Heads of Departments	Brian James, Richard Houghton and Brendon Edmonds	2	3	6	Culture, follow procedures and report errors	increase level of internal auditing		CLOSED					medium	

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HR

Ref	Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Risk Owner (Names)	Impact before mitigations Feb 2020	Likelihood before mitigations Feb 2020	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	Mitigation plan deadline	Updates	Date raised	Escalation/ Decision group	Mitigation completion date	RISK score after Mitigation Oct 2019	RISK score after Mitigation Sep 2019
	HR	CLOSED	S.11.1	Adverse impact on wellbeing and performance of employees concerned about long term future of their role	Director of Human Resources & Org Dev, specific departmental managers	Ben Spittles	2	2	4	Regular updates and communications with employees	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	CLOSED	10/19 - Not a risk solely related to SWE project. Ongoing change may still be unsettling but wider organisational issue rather than solely as a result of this project.				Low	Low
	HR	CLOSED	S.11.3	High turnover of employees due to uncertainty leads to resourcing challenges	Director of Human Resources & Org Dev, specific departmental managers	Ben Spittles	2	2	4	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	CLOSED	10/19 - Not a risk solely related to SWE project. Ongoing change may still be unsettling but wider organisational issue rather than solely as a result of this project.				Low	Low
	HR	CLOSED	S.11.4	Unavailability or resignation of subject matter experts causing impact to productivity of work/ project timelines or milestones	Director of Human Resources, Specific Departmental managers, Heads of Unit	Ben Spittles	3	3	9	Provision of agency temps and employees on fixed term contracts to provide additional capacity. Department of health funding to increase temporary support	Proactively identify subject matter experts and key employees for targeted retention	Fixed term employees offered permanent contracts if a permanent opportunity becomes available	CLOSED	11/19 - Now one month to transfer, if key employee leave now, will be required to work notice periods which will take them beyond transfer date.				Low	Low
	HR	CLOSED	S.11.5	Possible impact on HCPC staff being made redundant without clarity on transfer to SWE	Director of Human Resources & Org Dev, specific departmental managers	Ben Spittles	1	1	1	Impact on HCPC staff numbers May cause productivity and moral issues with department Ongoing conversations with SWE to clarify on possibility of staff willing to transfer to SWE after GO-live date. Update 07/09/18: SWE has recruited a Head of People and Change to manage its HR, training and development. New contact will engage with Teresa Haskins to discuss recruitment and COSOP.	Align timing of HCPC consultation process and SWE recruitment processes for roles included in COSOP arrangements. Likely May - Jul 2019.	HCPC signpost employees to SWE vacancies	CLOSED	10/19 - COSOP not applicable as not reduction in permanent roles which fall in to scope. May be structural changes within HCPC but these will be post transfer.				Low	Low
	HR	CLOSED	S.11.6	SWE keen to advertise new posts, need to ensure there are vacancies for employees moving. Low risk for HCPC due to numbers and it being the responsibility of SWE, but something to be aware of.	Director of Human Resources & Org Dev, specific departmental managers	Ben Spittles	1	1	1	n/a			CLOSED	10/19 - As above COSOP not applicable.				Low	Low

Legal

Ref	Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Risk Owner (Names)	Impact before mitigations Feb 2020	Likelihood before mitigations Feb 2020	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	Mitigation plan deadline	Updates	Date raised	Escalation/ Decision group	Mitigation completion date	RISK score after Mitigation Oct 2019	RISK score after Mitigation Sep 2019
	Legal		S.12.1	Poorly drafted legislation around transfer leaves HCPC with unsupported requirements	Exec Director of Policy & External Relations, SMT	Jacqueline Ladds	4	1	4	Proactive involvement with DoE / DH legislators	Experienced HCPC legal advisors		CLOSED					Low	Low
	Legal		S.12.2	Helpful legislation changes not wrapped up in legislation supporting transfer to new Regulator	Exec Director of Policy & External Relations, SMT	Jacqueline Ladds	3	2	6	Proactive involvement with DoE / DH legislators	Experienced HCPC legal advisors		CLOSED					Low	Low

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Project Management

Ref	Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the on-going risk)	Risk Owner (Names)	Impact before mitigations Feb 2020	Likelihood before mitigations Feb 2020	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	Mitigation plan deadline	Updates	Date raised	Escalation/ Decision group	Mitigation completion date	RISK score after Mitigation Oct 2019	RISK score after Mitigation Sep 2019
	Project Management		S.8.1	Time Quality That communication around the content of the transfer order is not forthcoming, leading to a lack of ability for HCPC to sufficiently prepare in time for the transfer	Project Sponsor Project Lead	John Barwick	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	stakeholder plan (internal/ external). Preparing material before the announcement of go live date	joint comms between SWE and HCPC teams	CLOSED	UPDATE: 09/08/2018 - We now know that legislation is approved by parliament. However we are still waiting for confirmation to publically announce the final GO-Live date.				medium	High
	Project Management		S.8.2	Quality That stakeholder management is poorly undertaken by HCPC	PMO	HCPC PMO	3	3	9	Clear identification of stakeholders and early allocation of responsibility within the project team			CLOSED	UPDATE: 09/08/2018 - Internal and External Comms plan and Stakeholder engagement plan/ Matrix is being produced by PMO				Med	Med
	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 Lead	John Barwick	3	4	12	Early expectation setting with the receiving organisation to manage a smooth transferral process			CLOSED					Med	Med
	Project Management		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 Lead	John Barwick	3	4	12	Early expectation setting with the receiving organisation to manage a smooth transferral process	Create a clear set of plan for the transfer of data (systems, method, approach)		CLOSED	UPDATE: Within the data sharing agreement (Annex 3) outlines the method of transfer from HCPC to SWE. HCPC and SWE carried out a number of tests in using a process of using either Azure File or Blob Storage. SWE has confirmed the use of Blob storage as the preferred system for transferring data.				Med	Med
	Project Management		S.8.7	Cost That the cost of the project will exceed HCPC expectations	Project Sponsor	John Barwick	3	2	6	Experience of HCPC with inbound transfers helps predict outbound costs			CLOSED	UPDATE: HCPC decision to extend resources past September are based on the following terms: There are two groups of people, the first (A) are those currently funded by the DfE grant and those that (B) that are not and are mostly due to end their contracts at the end of September. In terms of those in group (A) – the project can at its discretion extend those resources to the end of Feb 2020. In terms of those in group (B) – their extension is based on agreements dependent post the final approval of the 2nd funding request which is currently under evaluation by PWC. A decision is expected by the DfE / DoHSC by the 16 May 2019.				Low	Low
	Project Management		S.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	SMT	SMT	5	2	10	Monitoring of budget and work plans	Experience of HCPC's SMT	Experience of HCPC project management	CLOSED	Experience of HCPC project management				Med	Med
	Project Management	give to Marc	S.8.9	Transfer Order fails to enable the delivery of SWE project requirements	HCPC BDB/ Government / D o E	John Barwick	5	5	25	Engagement of DoE for the need of a transferral order	Experience of HCPC's SMT		CLOSED	UPDATE: HCPC has held a number of joint meetings with the DfE, PSA, DHSC and SWE to discuss progress updates, the status of the data export build plan, the announcement of the transfer date and collaborative working to achieving a Transfer Scheme and Data Sharing agreement.				Low	Low

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Registrations

Ref	Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Risk Owner (Names)	Impact before mitigations Feb 2020	Likelihood before mitigations Feb 2020	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	Mitigation deadline	Updates	Date raised	Escalation/ Decision group	Mitigation completion date	RISK score after Mitigation Oct 2019	RISK score after Mitigation Sep 2019
	Registration		S.10.1	Poor control of timescale results in applications for Registration being sent to HCPC when we are no longer responsible for profession	Head of Registration & Head of Communications	Richard Houghton / (Jacqueline Ladds) Roz Allison	2	4	8	Extensive Comms campaign to university third year students at HCPC approved courses	Filter applications for registration at Post Room, log names & postcodes, and securely return to applicant		CLOSED	UPDATE 01/10/19 - Communication plan agreed between HCPC/SWE				Low	Low
	Registration		S.10.2	Continuation of SW regulation beyond published dates caused resource shortfall in Reg Dept	Head of Registration & Executive Director of Regulation	Richard Houghton / John Barwick	3	2	6	Upscale resources with contractors in short term	Different contracts are ending at different times/ can extend fix term contracts of needed		CLOSED	UPDATE: 09/08/2018 - Discussions with HCPC HR and SWE have commenced to explore ideas on how to mitigate this risk as well as agree on details for timescales for transfer and how this impacts staff count at HCPC				Low	Low
	Registration		S.10.3	Limited remit of New Reg functions results in Gvmt request for HCPC to maintain register for unknown period of time, splitting functions	Head of Registration & Executive Director of Regulation	Richard Houghton / John Barwick	2	2	4	Design specific shared regulation processes between SWE & HCPC	Upscale resources with contractors in short to medium term. Changes to NetRegulate implemented in short term.	Regular communication with SWE and HCPC	CLOSED	UPDATE 31/10/2019 - HCPC aiming to reduce work in progress to a minimum which will mitigate the impact of this risk.				Low	Low
	Registration	REASSIGNED 05/06/19 Previously registered under information security (S.17.4)	S.10.4	Delay in deleting SW data to archive status or other exporting impacts delivery of other functionality to NetRegulate, damages integrity of data	Head of Registration	Richard Houghton	3	3	9	Proactive modification of internal deadlines based on evolving requirements.	Project prioritisation process		CLOSED					Low	Low
	Registration	REASSIGNED 06/06/19 Previously registered under information security (S.8.4)	S.10.5	Time Quality That expectations around registrant application processing at the point of transfer are unrealistic given the timeframe assigned to the transfer process	Head of Registration	Richard Houghton	3	3	9	Early expectation setting with the receiving organisation to manage a smooth transferral process			CLOSED	UPDATE: 09/08/2018 - Early dialogue with consultants for FTP. Similar workshop will be developed for Education and Registration functions to determine and agree on transitional arrangements. Update 12/03/2019: Transitional arrangements for each of the regulatory functions have now been agreed between HCPC and SWE. These now provide more definitive timetables and shared understanding of time required to effect a smooth transition. SWE has also indicated that they are preparing to receive more work in progress. Update 31/10/19 - Regular meetings occurred with SWE and clear timelines agreed, which have been shared with the internal teams.			low	High	

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Fitness to Practise

Ref	Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Risk Owner (Names)	Impact before mitigations Feb 2020	Likelihood before mitigations Feb 2020	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	Mitigation plan deadline	Updates	Date raised	Escalation/ Decision group	Mitigation completion date	RISK score after Mitigation Oct 2019	RISK score after Mitigation Sep 2019
	FTP		S.13.1	Retain legacy FTP cases without clear case transfer and funding arrangements in place	Head of Fitness to Practice, Director of Finance	Brian James, Jameela Khan	3	2	6	Cost allocation and overhead charging method agreed with DIE prior to transfer	Request additional funding for specific cases	Reforecasting budget processes and resource allocation	CLOSED	29/10/19: this risk can now be reduced or closed off, as we have secured resources, and have a firm plan. The only factor that may affect the transfer would be an IT failure to transfer or digest case information.				Med	Med
	FTP		S.13.2	Maintain FTP function for unknown period of time, rather than project delay	Head of Fitness to Practice, Director of Finance	Brian James, Jameela Khan	4	2	8	Cost allocation and overhead charging method agreed with DIE prior to transfer	Reforecasting budget processes and resource allocation	Request additional funding for specific cases	CLOSED	29/10/19: this risk can now be reduced or closed off, as we have secured resources, and have a firm plan. The only factor that may affect the transfer would be an IT failure to transfer or digest case information.				Low	Low
	FTP		S.13.3	HCPC's increasing number of cases, increases the complexity of the work done to prepare for the data transfer and the time and volume of data being transferred.	Head of Fitness to Practice, Director of Finance	Brian James, Jameela Khan	4	2	8	Request registrants funds to help monitor the case load	Joint project to agree data transfer UAT will test assumptions.		CLOSED	29/10/19: this risk can now be reduced or closed off, as we have secured resources, and have a firm plan. The only factor that may affect the transfer would be an IT failure to transfer or digest case information.				Med	Med
	FTP	REASSIGNED 06/06/19 Previously registered under project management (S.8.4)	S.13.4	Time Quality That expectations around case progression at the point of transfer are unrealistic given the timeframe assigned to the transfer process	Head of Fitness to Practice	Brian James,	3	3	9	Early expectation setting with the receiving organisation to manage a smooth transferral process			CLOSED	Update 29/10/19: we are working with SWE closely, and providing weekly updates on cases. We have transferred some cases to them, so they are familiarising themselves. As such the risk is minimal. UPDATE: 09/08/2019 - Early dialogue with consultants for FTP. Similar workshop will be developed for Education and Registration functions to determine and agree on transitional arrangements. Update 12/03/2019: Transitional arrangements for each of the regulatory functions have now been agreed between HCPC and SWE. These now provide more definitive timetables and shared understanding of time required to effect a smooth transition. SWE has also indicated that they are preparing to receive more work in progress.				low	High
	FTP	NEW	S.13.5	SWE request to deviate from sharing data by the technical platform and parameters outline within the DSA	Head of Fitness to Practice	Brian James,	3	3	9	HCPC to seek advice from BDB (legal Teams) if there are any legal implications that could occur if HCPC entertained this notion.	Conduct a test to ensure the approach and method of using MS teams is secure before finalising/ approving on method of transfer for final week of GO-live		CLOSED	29/10/19: this risk remains at the same level. we have had some short notice and new requests for additional or different data. This may continue in the next 4 weeks. UPDATE 02/10/2019: Based on SWE's request on using MS teams to share the manual updates during the final week of the migration, BDB has reviewed this approach and the frequency and has come to the conclusion that this approach would pose a very high risk to the HCPC at this stage in the project. It is not ideal for both parties to derogate from the DSA which does clearly state to be recommended best practice by the ICO.				low	High

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Finance

Ref	Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Risk Owner (Names)	Impact before mitigations Feb 2020	Likelihood before mitigations Feb 2020	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	Mitigation plan deadline	Updates	Date raised	Escalation/ Decision group	Mitigation completion date	RISK score after Mitigation Oct 2019	RISK score after Mitigation Sep 2019
	Financial		S15.1	Lost contribution caused by transfer of SW in England from HCPC to SW (England)	Finance Director, SMT	Gordon Dixon / SMT	5	5	25	Short Term Financial Plans are being re-worked with a Turnaround Lens			CLOSED				TBC	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, SMT	Gordon Dixon / SMT	5	4	20	Short Term Financial Plans are being re-worked with a Turnaround Lens	Arrange borrowing facility with bank if required		CLOSED	Update 25/03/2019 We are developing a three month rolling cash forecasting model to manage payment cycle and income more effectively			TBC	Med	Med
	Financial	Closed 10/19	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	Gordon Dixon / Richard Houghton	4	3	12	Only cash received in advance will be transferred to SWE. Data cleansing exercise is being undertaken to increase accuracy of data.	Last SW DD has been completed.		CLOSED	UPDATE: 28/11/18: We are likely to see the effect of these in December, once social workers completes their renewal. So we should be able to update on this risks then.			TBC	Medium	Medium
	Financial		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 / DIE grant, including related overheads	HCPC Accounting Officer	Gordon Dixon	4	3	12	Operational risks to be managed within the DIE grant amounts.	Budget already assigned for back fill		CLOSED				TBC	Medium	Medium
	Financial		S15.6	DH fails to reimburse HCPC incurred costs	HCPC Accounting Officer & Finance Director	Gordon Dixon	1	1	1	Monthly DH billing for incurred costs	Project planning, defines when costs to be incurred		CLOSED					Low	Low
	Financial	Closed 10/19	S15.7	SW fail to renew in 2018 (in attempt to avoid potential double fee charge as in GSCC to HCPC transfer) causing financial shortfall	HCPC Accounting Officer & Finance Director	Gordon Dixon	2	3	6	Only cash received in advance will be transferred to SWE. Data cleansing exercise is being undertaken to increase accuracy of data.	Final SW DD completed		CLOSED	UPDATE: 28/11/18: We are likely to see the effect of these in December, once social workers completes their renewal. So we should be able to update on this risks then. 18/02/19: Likelihood should be increased to 3 – early indication suggest that lapse rate is at 6.4% compared to 4% forecasted. We are reviewing the number of readmissions from SW as they may come back on in January. 26/03/2019: since the 1st December 2018 until 25th March we have received approximately 1,794 readmission forms from social workers.			TBC	Low	low
	Financial	Closed 10/19	S15.8	HCPC must establish and agree a way to recover costs from SWE regarding PSA levies that would apply to the Social Worker regulation after the transfer date, otherwise there will be an operational budget impact to the HCPC (issue name / description).	Finance Director	Gordon Dixon	3	3	9	Agree a reduced levy, or refund from the PSA based on the transition date (unlikely)	Retain money to cover PSA costs when we transfer the balance of Social Worker fees		CLOSED	UPDATE: 28/11/18: In August, Marc informed finance and the SMT that we will pay the 100% full PSA levy cost for FY2019/20 and claim the money back from DoH or DIE when the social workers leave the register. Marc will inform HCPC finance when more information is known. Update Update :25/03/2019 Plans in place to recover the rebate from Psa. Already factored in budget			TBC	Low	Low
	Financial		S15.9	SWE/ DIE failure to make timely payments towards scheduled grant claims for SW project	Finance Director	Gordon Dixon	3	3	9	Escalate issues to internal HCPC project board and DIE authorisation group.	Look at penalties in contract for default/late payments to cover cost through interest percentage on fees claimed	Cash receipts have been occurring on time for grants claims	CLOSED				TBC	Low	Low

Policy & Standards

Ref	Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Risk Owner (Names)	Impact before mitigations Feb 2020	Likelihood before mitigations Feb 2020	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	Mitigation plan deadline	Updates	Date raised	Escalation/ Decision group	Mitigation completion date	RISK score after Mitigation Oct 2019	RISK score after Mitigation Sep 2019	
	Policy & Standards			N/A									CLOSED							
													CLOSED							

Glossary & Abbreviations

Term	Meaning	ISO27001 Term	Meaning
AGM	Annual General Meeting	ISO27001:2013 A5	Security Policy Management
BCP / BCM	Business Continuity Plan / Business Continuity Management (Disaster Recovery and associated processes)	ISO27001:2013 A6	Corporate Security Management
CCM's	Council & Committee Members	ISO27001:2013 A7	Personnel Security Management
CDT	Cross Directorate Team (formerly HCPC's Middle Management Group)	ISO27001:2013 A8	Organizational Asset Management
CPD	Continuing Professional Development	ISO27001:2013 A9	Information Access Management
DH	Departments of Health in Home countries	ISO27001:2013 A10	Cryptography Policy Management
DfE	Department for Education	ISO27001:2013 A11	Physical Security Management
EEA	European Economic Area, = European Economic Union, plus Norway, Iceland, plus for our purposes Switzerland	ISO27001:2013 A12	Operational Security Management
EMT	HCPC's Executive Management Team (closed down May 2018, responsibilities taken over by SMT & OMT)	ISO27001:2013 A13	Network Security Management
EU	European Economic Union (formerly known as the "Common Market")	ISO27001:2013 A14	System Security Management
FReM	Financial Reporting Manual	ISO27001:2013 A15	Supplier Relationship Management
FTP	Fitness to Practise	ISO27001:2013 A16	Security Incident Management
GP	Grandparenting	ISO27001:2013 A17	Security Continuity Management
HSWPO	Health and Social Work Professions Order (2001)	ISO27001:2013 A18	Security Compliance Management
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 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.		
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		
OMT	Operation Management Team 2019 onwards		
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.		
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		
SMT	Senior Management Team		
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		

HCPC RISK MATRIX

IMPACT

	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 Unfunded pressures greater than £1 million	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

>11 High Risk: Urgent action required
6-10 Medium Risk: Some action required
<5 Low Risk: Ongoing monitoring required

	Negligible 1	Rare 2	Unlikely 3	Possible 4	Probable 5
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.	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.
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.	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 life-cycle of the programme or project.	Likely to occur in the life-cycle of the project, probably early on and perhaps more than once.
Operational	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.

LIKELIHOOD

RISK MATRIX DEFINITIONS

IMPACT TYPES

LIKELIHOOD AREAS

IMPACT

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 £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 £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 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 £10,000	Event that will lead to public criticism by external stakeholders as anticipated.

LIKELIHOOD

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.
Negligible 1	Negligible 1	Negligible 1
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.

HGPC Strategic Priorities 2018 - 2020

code

SP1.Perf	Strategic priority 1: Improve our performance to achieve the Professional Standards Authority's Standards of Good Regulation
SP2.Com	Strategic priority 2: Ensure our communication and engagement activities are proactive, effective and informed by the views and expectations of our stakeholders
SP3.Adapt	Strategic priority 3: Ensure the organisation is fit for the future and is agile in anticipating and adapting to changes in the external environment
SP4.Evid	Strategic priority 4: Make better use of data, intelligence and research evidence to drive improvement and engagement

HGPC 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