

Risk register – October 2015

Business Plan work stream	Risk description	Risk source	Risk rating LxI=R	Risk averse area	Mitigating actions	Assurance mechanisms
1.1 Pre-registration education and training	<ul style="list-style-type: none"> Quality of initial education and training falls below required standards 	External	1x2=L	✓	<ul style="list-style-type: none"> Quality Assurance process Training and appraisal of assessors Ongoing engagement with OEIs Course closure review process 	<ul style="list-style-type: none"> ERSC oversight of QA reports, Annual Reports, closure plans ERSC biannual review of QAA process
	<ul style="list-style-type: none"> Initial education does not reflect current healthcare practice and expectations 	External	2x2=M		<ul style="list-style-type: none"> Guidance for Osteopathic Pre-registration Education Professionalism Working Group looking at supplementary guidance Ongoing engagement with OEIs 	<ul style="list-style-type: none"> ERSC oversight of activity
	<ul style="list-style-type: none"> OEI graduates do not exhibit appropriate behaviours and values 	External	2x2=M		<ul style="list-style-type: none"> Student fitness to practise work Professionalism work Ongoing engagement with OEIs Professional values programme 	<ul style="list-style-type: none"> ERSC oversight of activity
	<ul style="list-style-type: none"> Course or institution ceases to function 	External	3x1=M		<ul style="list-style-type: none"> Ongoing engagement with OEIs to alert us to possibility and to put in place plans to move students if necessary 	<ul style="list-style-type: none"> ERSC oversight of Annual Reports (including financial data) and relationships with OEIs
1.2 Confidence in the register	<ul style="list-style-type: none"> Registration data is inaccurate or individuals are wrongly registered 	Internal	2x2=M	✓	<ul style="list-style-type: none"> Registration manual Good character assessment framework Data quality checks Improvements to online tools Review of EU/international registration 	<ul style="list-style-type: none"> ERSC and Council oversight of activity Internal audit reports to Audit Committee
	<ul style="list-style-type: none"> Register is not effectively used by patients or promoted by registrants 	External	2x1=L		<ul style="list-style-type: none"> Improvements to register functionality Promoting your registration campaign 	<ul style="list-style-type: none"> Council oversight via Communications Annual Report
	<ul style="list-style-type: none"> Illegal practice goes unchecked or increases 	Internal	1x2=L	✓	<ul style="list-style-type: none"> S32 enforcement policy Publicity around prosecutions Post-removal website checks 	<ul style="list-style-type: none"> Council oversight of Regulation reports and dashboard

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Business Plan work stream	Risk description	Risk source	Risk rating LxI=R	Risk averse area	Mitigating actions	Assurance mechanisms
	<ul style="list-style-type: none"> Registration assessments do not prevent registration of ineligible applicants 	Internal	1x2=L	✓	<ul style="list-style-type: none"> Training and appraisal of assessors Moderation meetings with GOsC staff Registration review 	<ul style="list-style-type: none"> ERSC Chair/member appraisal of assessors Oversight of registration review by ERSC
1.3 Transition into practice	<ul style="list-style-type: none"> New graduates are unable to meet ongoing standards for registration 	External	2x2=M		<ul style="list-style-type: none"> Quality Assurance process Ongoing engagement with OEIs Mentoring project 	<ul style="list-style-type: none"> ERSC oversight of QA reports Council oversight of ODG activity
	<ul style="list-style-type: none"> Newly registered international applicants are unable to meet ongoing standards for registration 	External	2x2=M	✓	<ul style="list-style-type: none"> Transition into practice support work 	<ul style="list-style-type: none"> ERSC oversight of policy development and implementation
	<ul style="list-style-type: none"> Lack of support for improved mentoring among registrants 	External	2x1=L		<ul style="list-style-type: none"> Engagement with OEIs, regional groups and others in profession 	<ul style="list-style-type: none"> Council oversight of ODG activity
1.4 Continuing fitness to practise (revalidation)	<ul style="list-style-type: none"> Registrants fail to engage with proposed process 	External	2x2=M		<ul style="list-style-type: none"> Communication and engagement activity 	<ul style="list-style-type: none"> OPC and Council oversight of CFtP process
	<ul style="list-style-type: none"> Profession lacks capacity to implement new proposals 	External	2x2=M		<ul style="list-style-type: none"> Communication and engagement activity Dialogue with regional groups, OEIs and other bodies 	<ul style="list-style-type: none"> OPC and Council oversight of CFtP process
	<ul style="list-style-type: none"> Unable to obtain PSA/DH buy-in to proposals 	External	2x2=M		<ul style="list-style-type: none"> Engagement with key organisations Effectiveness of regulation research 	<ul style="list-style-type: none"> OPC and Council oversight of CFtP process
	<ul style="list-style-type: none"> Inadequate resources available for current and future work 	Internal	2x2=M		<ul style="list-style-type: none"> Use of reserves for set up costs Budget strategy and reserves policy 	<ul style="list-style-type: none"> OPC and Council oversight of CFtP process
	<ul style="list-style-type: none"> Need for new legislation 	External	2x2=M		<ul style="list-style-type: none"> Engagement with DH 	<ul style="list-style-type: none"> OPC and Council oversight of CFtP process

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1.5 Fitness to practise	<ul style="list-style-type: none"> Legal challenges to ftp and/or registration processes 	External	3x1=M	✓	<ul style="list-style-type: none"> Quality assurance process Training for non-execs and staff Regulation and Registration manuals FtP and registration reports to Council Recruitment and training of new Legal Assessors 	<ul style="list-style-type: none"> Council oversight of Regulation and registration reports and dashboard PSA audits
	<ul style="list-style-type: none"> Complaint progression is not effective or timely 	Internal	2x2=M	✓	<ul style="list-style-type: none"> Quality Assurance process Regulation and registration manuals FtP and Registration reports to Council 	<ul style="list-style-type: none"> Council oversight of Regulation and registration reports and dashboard
	<ul style="list-style-type: none"> Complaint volumes and complexity exceed resource capacity 	External/Internal	3x2=H	✓	<ul style="list-style-type: none"> Financial reserves available to meet any surge Implementation of threshold criteria Engagement with ASA/CAP on advertising complaints 	<ul style="list-style-type: none"> Council and Audit Committee oversight
2.1 Continuing fitness to practise (CPD)	<ul style="list-style-type: none"> Registrants fail to engage with best practice 	External	2x1=L		<ul style="list-style-type: none"> Communication and engagement activity 	<ul style="list-style-type: none"> ERSC/OPC and Council oversight
	<ul style="list-style-type: none"> Inadequate resources available for current and future work 	Internal	2x1=L		<ul style="list-style-type: none"> Budget strategy and reserves policy 	<ul style="list-style-type: none"> Council and Audit Committee oversight
2.2 Osteopathic practice standards	<ul style="list-style-type: none"> Registrants fail to engage with standards 	External	2x2=M	✓	<ul style="list-style-type: none"> Communication and engagement activity Provision of learning resources Continuing fitness to practise development Values work 	<ul style="list-style-type: none"> ERSC/OPC and Council oversight
	<ul style="list-style-type: none"> Inadequate resources available for current and future work 	Internal	2x1=L		<ul style="list-style-type: none"> Budget strategy and reserves policy 	<ul style="list-style-type: none"> Council and Audit Committee oversight
2.3 Quality and patient care	<ul style="list-style-type: none"> Partners unable to commit to required work or disengage with process 	External	2x1=L		<ul style="list-style-type: none"> Engagement with partners 	<ul style="list-style-type: none"> Council oversight of ODG activity
	<ul style="list-style-type: none"> Inadequate resources available for current and future work 	External/Internal	1x1=L		<ul style="list-style-type: none"> Budget strategy and reserves policy Engagement with partners 	<ul style="list-style-type: none"> Council oversight of ODG activity

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2.4 Professional standards and values	<ul style="list-style-type: none"> Partners unable to commit to required work or disengage with process 	External	2x1=L		<ul style="list-style-type: none"> Internal Francis programme board and ongoing activities beyond completion of Action Plan Engagement with partners 	<ul style="list-style-type: none"> Council oversight
	<ul style="list-style-type: none"> Inadequate resources available for current and future work 	External/Internal	1x1=L		<ul style="list-style-type: none"> Budget strategy and reserves policy Engagement with partners 	<ul style="list-style-type: none"> Council oversight
3.1 Service quality	<ul style="list-style-type: none"> Operational activities subject to legal challenge 	External	3x1=M	✓	<ul style="list-style-type: none"> Quality assurance process Regulation and Registration manuals 	<ul style="list-style-type: none"> ERSC/OPC and Council oversight PSA audits
	<ul style="list-style-type: none"> Failure of IT infrastructure 	External	1x3=M	✓	<ul style="list-style-type: none"> SLAs with IT providers and regular review meetings Maintenance and service contracts Business continuity planning 	<ul style="list-style-type: none"> Audit Committee oversight Council oversight
	<ul style="list-style-type: none"> Business continuity failure (non-IT) 	External	1x3=M	✓	<ul style="list-style-type: none"> Business continuity planning Maintenance and service activities 	<ul style="list-style-type: none"> Council oversight Audit Committee oversight
	<ul style="list-style-type: none"> Failure to deal effectively with information governance requirements 	Internal	2x2=M	✓	<ul style="list-style-type: none"> Information governance framework Training for staff Non-executive briefings 	<ul style="list-style-type: none"> Audit Committee oversight
	<ul style="list-style-type: none"> Loss of confidence in quality of service provision 	External	1x3=M	✓	<ul style="list-style-type: none"> Service standards and monitoring User surveys 	<ul style="list-style-type: none"> Council oversight
3.2 Engagement	<ul style="list-style-type: none"> Stakeholders fail to engage with activity 	External	2x2=M		<ul style="list-style-type: none"> Communication and Engagement Strategy 	<ul style="list-style-type: none"> Council oversight
	<ul style="list-style-type: none"> Inadequate resources available for current and future work 	Internal	1x1=L		<ul style="list-style-type: none"> Budget strategy and reserves policy 	<ul style="list-style-type: none"> Council oversight
3.3 Governance	<ul style="list-style-type: none"> Governance processes subject to legal challenge or complaints 	External	2x2=M	✓	<ul style="list-style-type: none"> Governance handbook and policies/review Appointment processes Induction and training Council review of performance 	<ul style="list-style-type: none"> RaAC oversight PSA oversight

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	<ul style="list-style-type: none"> Unsuccessful or incomplete reconstitution of Council 	External/Internal	2x2=M	✓	<ul style="list-style-type: none"> Liaison with DH on reconstitution PSA approved appointment process Induction programme 	<ul style="list-style-type: none"> RaAC oversight PSA oversight
	<ul style="list-style-type: none"> Loss of confidence in work of the GOsC 	External	1x3=M	✓	<ul style="list-style-type: none"> Performance evaluation Engagement with registrants 	<ul style="list-style-type: none"> Council oversight PSA Performance Review
	<ul style="list-style-type: none"> Breakdown in internal financial controls 	Internal	1x2=L	✓	<ul style="list-style-type: none"> Internal financial controls Information governance framework 	<ul style="list-style-type: none"> External annual audit/Key Issues Memorandum Audit Committee oversight
	<ul style="list-style-type: none"> Failure to meet Equality Act or employment duties 	Internal	1x2=L	✓	<ul style="list-style-type: none"> Equality and diversity policy and plan Dedicated HR resource and staff handbook 	<ul style="list-style-type: none"> Council oversight of equality and diversity policy RaAC oversight of HR policies
	<ul style="list-style-type: none"> Adverse audit or Performance Review report from PSA 	External	1x3=M	✓	<ul style="list-style-type: none"> Established internal Performance Review processes Internal audits of fitness to practise 	<ul style="list-style-type: none"> Council oversight of reports/action plans
3.4 Value for money	<ul style="list-style-type: none"> Poor control of costs resulting in fee increases 	Internal	1x3=M	✓	<ul style="list-style-type: none"> Procurement rules and monitoring processes Quarterly financial updates 	<ul style="list-style-type: none"> Audit Committee Publication of contract data (new requirement in 2014 from ICO)
	<ul style="list-style-type: none"> Loss of confidence in financial management 	Internal	1x2=L	✓	<ul style="list-style-type: none"> Internal financial controls Quarterly financial updates Audit process 	<ul style="list-style-type: none"> External annual audit/Key Issues Memorandum Audit Committee
3.5 Legislative reform	<ul style="list-style-type: none"> Inability to improve processes due to lack of new legislation 	External	2x2=M		<ul style="list-style-type: none"> Engagement with, Department of Health and other regulators 	<ul style="list-style-type: none"> Council oversight

Risk ratings

Likelihood		Impact	
1	Less likely than not to occur or not expected to occur	1	Single area of business subject to disruption
2	May or may not occur	2	Disruption to whole business or single area unable to function effectively
3	Expected to occur or more likely than not to occur	3	Whole business unable to function effectively

Risk level score (Likelihood x Impact)	Overall risk rating
1-2	Low
3-4	Medium
6-9	High