Operations Directorate

2016 – 2017 work plan

1. Executive summary

The Operations Directorate is responsible for maintaining HCPC's Register of health and care professionals, managing the major projects undertaken within the organisation on behalf of the Executive Management Team (EMT), managing the HCPC estate, maintaining HCPC's Quality Management System, information security, risk and information analysis, business continuity and process improvement.

2015 – 16 activities

The **Registration** department continued to deliver registration processes efficiently and effectively within the department's service standards whilst taking over responsibility for the management of the Registration appeals processes. The department provided resource and expertise to assist with the delivery of 10 major projects.

The **Project Management** department managed the largest portfolio undertaken within the HCPC – 17 simultaneous projects including the initiation of 7 new projects. The highlights of the year were the initiation of the Registrations transformation and improvement project, the migration of the organisation onto Outlook and the delivery of the newly fitted out 405 Kennington Road building.

The **Facilities** department increased the HCPC estate by operationising the property at 405 Kennington Road.

The **Business Process Improvement** department gained ISO 27001 Information Security certification for the organisation in June 2015 and is on-track to obtain ISO 10002 Customer Satisfaction certification by March 2016.

2016 – 17 activities

The **Registration** department will be managing the renewal of 8 professions, including the HCPC's two largest professions - Social workers in England and Physiotherapists - whilst continuing to develop employees and processes to ensure the department builds upon the improvements of previous years. The department will be involved in fewer projects this year but will be making a significant contribution to the Registration transformation and improvement project.

The **Project Management** department is anticipating a slightly quieter year this year. Having said this, there are three major deliverables for the year that will significantly change the way the organisation operates – the delivery of the HR system, the delivery of the Partners management system and the delivery of the CPD element of the Registrations transformation and improvement project.

The **Facilities** department will renovate the interior of 186 Kennington Park Road and relocate employees around the HCPC estate.

The **Business Process Improvement** department will be focused on transitioning to the ISO9001:2015 standard. Following the attainment of ISO standards 27001 and 10002 last year, more internal and external audits will be conducted.

2. Operations

2.1.   This document sets out the priorities, resources and responsibilities of the Operations Directorate for the financial year 2016 – 2017 and provides a basis against which the work of departments within Operations can be planned and measured.

2.2.   The Operations Directorate is both proactive and reactive in its work so the priorities laid out in this document may change. The directorate continues to remain flexible in the delivery of its workplan. This document will be kept under review.

2.3.   The four departments within Operations are Registration, Business Process Improvement, Project Management and Facilities.

2.4.   The **Registration** department is responsible for maintaining HCPC's Register of health and care professionals.

2.5.   The **Project Management** department is responsible for managing the major projects undertaken within the organisation on behalf of the Executive Management Team (EMT).

2.6.   The **Facilities Management** department is responsible for managing the facilities, building refurbishments and Health & Safety for properties owned or leased by HCPC.

2.7.   The **Business Process Improvement** department maintains develops, and promotes the Quality Management System, information security, risk and information analysis, business continuity and process improvement. BPI is also response for ad-hoc business reporting and data extraction from business datasets.

3. Resources within Operations

3.1.   The Operations management team consists of five employees

Greg Ross-Sampson   Director of Operations

Claire Reed   Project Portfolio Manager

Richard Houghton   Head of Registration

Roy Dunn   Head   of Business Process Improvement

Vacant   Facilities   Manager

3.2.   There are no new or additional roles planned for 2016 – 2017.

4. Risks managed by Operations

Category	ISMS Risk	Ref	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jan 2016	Likelihood before mitigations Jan 2016	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jan 2016	RISK score after Mitigation Jul 2015
Operations		2.3	Unacceptable service standards	Director of Operations	5	4	20	ISO 9001 Registration, process maps, well documented procedures & BSI audits	Hire temporary employees to clear service backlogs	Detailed workforce plan to match workload.	Low	Low
Operations		2.12	Significant disruption to UK transport network by environmental extremes e.g . snow, rain, ash; civil unrest or industrial action; disrupts planned external activities	Director of Operations & Head Bus Proc	3	2	6	Use of alternate networks	Use of video or teleconferencing facility to achieve corum	Invoke Disaster Recovery/Business Continuity plan	Low	Low

5. Registration Department

5.1.   Providing a high level of customer service is crucial to the long term success of the Health and Care Professions Council (HCPC) and demonstrates our commitment to all of our stakeholders - registrants, members of the public, our employees, our suppliers and the members of our Council and Committees. As the standard of customer service increases in other service sectors such as financial services, telecommunications, local government, retail and leisure so does the service quality expectations of their customers. Similarly, HCPC's 'customers' will continue to have higher expectations of their own customer service experience which includes having a wider range of service delivery options and more choice of how they interact with us. Coupled with this increased expectation of service delivery is an increase in registrant number growth.   Registrant numbers have increased steadily over recent years and a 41% increase during 2012 – 2013, as a result of the transfer of regulation of social workers, which has increased the demand for these services.

5.2.   It is clear that we need to continue to develop our customer service delivery strategy that is based on the present and future needs and expectations of stakeholders. It is also important to maintain the positive, pride of workmanship, feeling of community, enjoyable and fun working environment that exists at HCPC as customer satisfaction generally moves in the same direction as employee satisfaction.

5.3.   As in previous years the Registration work plan has been completed with the following principles in mind:

5.3.1. Employing the best people in a good working environment and supporting them with ongoing training, reliable equipment and up-to-date systems;

5.3.2. Recognising individuals and teams by promoting from within wherever possible;

5.3.3. Encouraging everyone to enjoy rewarding careers; and

5.3.4. Providing job satisfaction.

5.4.   The continued investment in technology to reflect business rules and processes will speed up processing, improve job satisfaction and offer our customers more service delivery channels.

5.5.   It is important to remember that it is the continuation of a journey in Registration.

5.6. The Registration Department's main responsibilities are:

5.6.1. Processing application forms from individuals who have undertaken an approved course in the UK;

5.6.2. Processing applications for readmission to the Register;

5.6.3. Processing registrants registration renewal forms;

5.6.4. Processing international / EEA / temporary application forms;

5.6.5. Processing grandparenting application forms (currently no grandparenting window);

5.6.6. Managing registration appeals;

5.6.7. Processing incoming general correspondence including letters, requests for de-registration, change of addresses;

5.6.8. Coordinating continuing professional development (CPD) profile audits;

5.6.9. Replying to emails; and

5.6.10. Answering incoming telephone calls.

5.7. This work plan attempts to show how the standard operational work and the planned projects have been scheduled to ensure successful completion, given the resources and time table. The Registration Department is both proactive and reactive in its work so the requirements may change. The department will therefore need to be flexible in the delivery of its work plan in order to respond accordingly. This document will be kept under review.

6. Resources within the Registration Department

6.1. This work plan is based on a budget of £3,446, 833 which allows for a team of 60 registration employees. Registration Department resource requirements outlined in this document are based on the registrant statistics included in the 'Registration Numbers Forecast 2015 - 2020', which was presented to Council on the 24 September 2015.

6.2. The Registration Department organisational structure for 2016 - 2017 consists of

- A Head of Registration;

- Five Registration Managers;

- A Registration Operations Manager;

- A Registration Operational Planner;

- A Registration Quality Assurance Manager;

- A Registration Quality Assurance Advisor;

- A Registration Appeals Manager;

- Three Registration Appeals Co-ordinators;

- Five Team Leaders;

- A Registration Trainer;

- Two Registration Co-ordinators; and

- Thirty-eight Registration Advisors including two Apprentices.

6.3.   There are no new or additional roles planned for 2016 – 2017.

6.4.   The service teams will continue to provide front line customer service for the UK, international, CPD, grandparenting and renewal processes. There continues to be significant investment in cross training of Registration Advisors and this continues to allow the department to respond rapidly and effectively to the significant increases in demand that is received.

6.5.   The appeals team will manage appeals from the moment they are received, up until they are considered by an appeal panel - tasks previously undertaken by FTP colleagues in Case Management, Scheduling and Hearings. This includes considering the notice of appeal in line with the 'Appeal Rules', managing progression of the case, scheduling the appeal and attending the hearing.

6.6.   Recruiting and retaining employees, in order to work effectively and proactively, continues to be a big challenge for the department and is likely to remain a risk for this financial year.

7. Registration priorities 2016 – 2017

7.1.   The main priority for the department is the day-to-day operation of the registration processes. The department will also be involved in a number of projects at both an operational and strategic level.

8. Registration main operational activities

8.1. There are 9 main service processes which generate the majority of the department's workload and the volumes for each process vary throughout the year with significant peaks and troughs in demand for any individual process. The department continues to ensure it delivers the best possible service to registrants, applicants and the public by cross training all Registration Advisors to deliver all registration processes efficiently and effectively within our service standards.

	Process	Service standards 2015 – 2016
1.	UK applications	*The Registration Department aims to respond to all UK application requests within ten working days of receipt. We aim to process all **complete** UK applications within ten working days of receipt, or inform the applicant within ten working days if their application is **incomplete**.*
2.	Readmissions	*The Registration Department aims to process all **complete** readmission applications within ten working days**.***
3.	International / EEA applications	*The Registration Department aims to verify completeness of all international and EEA applications and acknowledge receiving the application within 5 working days of receipt. The Registration Department aims to process **complete** applications within 60 working days of receipt.*
4.	Grandparenting applications	*The Registration Department aims to verify completeness of all Grandparenting applications and acknowledge receipt of the application within 5 working days. The Registration Department aims to process **complete** applications within 60 working days of receipt.*
5.	Continuing Professional Development (CPD) audits for the following professions in 2016 - 2017: • Physiotherapists; • Arts therapists; • Dietitians; • Chiropodists / podiatrists; • Hearing aid dispensers; • Operating department practitioners; • Social workers in England.	*The Registration Department aims to acknowledge receiving the CPD profile application within 5 working days of receipt. The Registration Department aims to process a **complete** CPD profile within 60 working days of receipt.*

6.	Renewal of registration	*The Registration Department aims to renew the registration of a Registrant with active direct debit set up, within ten minutes of the Registrant completing their renewal online account. The Registration Department aims to process a* **complete** *paper renewal form within 10 working days of receipt.*
7.	Postal correspondence	*The Registration Department aims to process postal correspondence within ten working days.*
8.	Emails	*The Registration Department aims to respond to 80% of all emails within one working day and all emails responded to within two working days.*
9.	Telephone call answering	*The Registration Department aims to answer 95% of all telephone calls.*

8.2. In addition, as from 11 January 2016 a dedicated Registration Appeals Team manages all Registration appeals processes.

9. Registration supporting activities

9.1. There are five activities which support the main Registration Department processes. Whilst these activities provide a solid and desirable foundation onto which to operate our main processes, at certain times of the year some of them do not take priority and some activities, if resources are stretched, may need to be revisited. The following paragraphs summarise these activities.

9.2. **Partner assessor recruitment, selection and training:** In 2016 – 2017 the department will work with the Partners Department to ensure Registration Assessor numbers are maintained and appropriate for the planned operational processes. This will include the selection, recruitment and training of new Registration Assessors to fill identified gaps.

9.3. Registration will also continue to assist the Partners Department with the delivery of the Registration Assessor performance appraisal system.

9.4. **Information systems (database and electronic records):** In 2016 – 2017, the department will work with the IT Department to both enhance and revise the registration IT systems. It is the current intention to implement the following changes to the registration IT systems this financial year:

• NetRegulate system refresh project – This project aims to upgrade key elements of the NetRegulate technical environment to improve the ability to support the system and to create a more flexible technical environment.

9.5.   **Liaison with stakeholders:** In 2016 – 2017, the department will continue to work with stakeholders (general public, professional bodies, and registrants) in the broad area of registration. The department will endeavour to support the Communications Department with representation at conferences, employer events and various presentations which also provides valuable experience for registration employees and the department as a whole.

9.6.   **Committee and Council work:** In 2016 – 2017, the department will continue to work with the Education and Training Committee and Council. Registration will ensure that they are kept up-to-date with operational performance and changes to existing processes and the introduction of new processes.

9.7.   **Improve Registration Department publications:** The department is responsible for producing a number of publications, including the Continuing Professional Development (CPD) biennial audit report, registration certificate, renewal form and the UK, international, grandparenting, readmission application forms and guidance notes. These documents are updated and reviewed regularly.

10.   Registration objectives in 2016 – 2017

A number of objectives have been identified that will require action and completion in 2016 – 2017.

10.1.   **Registration Objective – Improve quality of service:** Customer service is an important aspect of any organisation. The Registration Department will continue to build upon the foundations already in place and improve the service Registration deliver by ensuring that we:

10.1.1. Conduct, deliver and review the quality checks programme providing Registration Advisors with individual feedback in regular 1 to 1 meetings and enabling the department to identify any recurring process failures;

10.1.2. Conduct, deliver and review the call monitoring process to deliver individual feedback to Registration Advisors; and

10.1.3. Continue to facilitate a customer research programme to:

10.1.3.1. Gain an in-depth insight into the overall customer service experience from a registrant viewpoint;

10.1.3.2. Gain qualitative feedback on call handling quality;

10.1.3.3. Have a clear basis for making decisions about future service developments; and

10.1.3.4. Deliver improvements identified.

10.2. **Registration Objective – Effective capacity planning:** To ensure that Registration effectively plan the use of our resources, capacity planning will continue to be developed to accurately forecast workload.

10.3. **Registration Objective – Continue to improve application verification checks:** It is incumbent upon Registration to ensure the integrity of the Register, including improving how fraudulent or erroneous entry to the Register are prevented. Some processes are already in place for checking qualifications, identity and professional standing. Registration will aim to continue to improve our verification process by enhancing our verification database by continuing to store examples of valid worldwide competent authority contact details, education institution details and verification documentation.

10.4. **Registration Objective – Employee development :** Our employee development policy aims to ensure that right people are in the right role and investment is made in their recruitment, training and development by:

10.4.1. Arranging for all registration employees to gain an accredited customer service qualification;

10.4.2. Developing customer service training to improve skills to deal with more challenging situations;

10.4.3. Developing and delivering the long term training plan;

10.4.4. Continuing to review and develop the online learning management system which enables the Registration Department to deliver its training online; and

10.4.5. Continuing to cross train all Registration employees.

10.5. **Registration Objective – Develop external relationships with suppliers:** The Registration Department is reliant on a number of key suppliers in order to deliver and improve the service that it delivers. The department needs to continue to develop good working partnerships with these suppliers to ensure a seamless and improved service is delivered in a cost effective manner. The department needs to ensure:

10.5.1. Our new printing supplier, Xerox, prints all registration renewal forms, registration application forms, some publication material, letters and registrant certificates effectively and efficiently;

10.5.2. The Registration Department has the appropriate technical maintenance support for the telephony system and provide recommendations on how existing technology can be utilised more effectively;

10.5.3. Our office services supplier scans and copies all registration renewal and application forms effectively and efficiently; and

10.5.4. NHS Protect perform a robust fraud measurement exercise.

10.6. **Registration Objective - Manage projects within agreed timescales:** The following part of the document provides a summary of the projects that are planned or anticipated to be undertaken in the financial year 2016 - 2017. The project delivery timescales are driven by resource constraints (both internal and external), legislative deadlines, business need and government decisions. The Registration Department is heavily impacted by these factors and its work priority may change. This may impact the planned project work outlined in this document.

10.7. The Registration Department will contribute to a number of major projects over the coming financial year. The following projects have been approved for initiation in 2016 - 2017 dependent on resources being available within the organisation.

	Project name	Project Description
1	NetRegulate Changes 2016 - 2017	Changes to NetRegulate to enable HCPC to meet legislative requirements regarding the manner in which annotations are displayed on the online register.

10.8. The department will support the following ongoing major projects which will continue into financial year 2016 - 2017.

	Project name	Project Description	Projected completion date
1	HR & Partners systems build	Building and deploying a new system/s for the HR and Partners department.	December 2016

	Project name	Project Description	Projected completion date
2	Stakeholder Relationship Management System	The development and build better stakeholder contact management processes to enable effective communication with external HCPC stakeholders.	May 2016
3	Registration Transformation and Improvement Build Project	A project to deliver a new operating model for the Registration Department, including processes, systems and interactions with other areas around the organisation. The first phase of this three phase project has now commenced. Design is underway for the CPD proof of concept and sprint cycles will commence shortly.	June 2020 Phase 1 – November 2016
4	Professional Qualifications Directive Implementation Project	A project to determine how the HCPC remains compliant with the changing European Directive.	TBC
5	PCI Security Standards Compliance	Review of our obligations under the PCI/DSS (payment processing) legislation plus implementation of any changes that we need to make to our technology.	May 2016

11. Equality & Diversity within Registration

11.1. As part of the HCPC equality and diversity scheme the Registration Department will continue to scrutinise and screen all processes and work to identify and, where possible, mitigate any adverse impact to some groups, compared to others.

12. Registration activities in 2017 – 2018

12.1. 2017 – 2018 will be a year in which the Registration Department continues to undertake our established activities and improve our processes and service delivery. Taking on new professions that are anticipated up to 2018 and contributing to the project to transfer the responsibility of regulating social workers will have a significant impact on the workload of the Registration Department.

12.2. The Registration Department will continue with the Registration transformation and improvement project to implement long term strategic changes and develop a system replacement.

12.3. Although currently unknown the government may require HCPC to regulate additional groups.

13.   Registration activities in 2015 - 2016

13.1. It would be useful to review the activities contained in the work plan which was submitted one year ago as part of the background which has formed the basis of this new work plan. Six objectives were set and the progress of each is detailed below:

13.2. **Registration Objective – Improve quality of service:** This objective was met. A quality checks programme was in operation with call monitoring, application entry and renewal processing checks undertaken and feedback given to Registration Advisors. A Registration Department satisfaction survey was conducted which provided an in depth insight into the overall service experience from a registrant viewpoint.

13.3. **Registration Objective – Effective capacity planning:** This objective was met. Specialist contact centre planning training has enabled the development of the capacity planning process with the Registration forecasting model built to the FAST standard. . This has enabled the Registration Department to deliver improved performance over the past twelve months and effectively plan the workload.

13.4. **Registration Objective – Continue to improve application verification checks:** This objective was met. Over the last year Registration have continued to focus on verifying the identity, qualifications and registration of international applicants. Some activities are outlined below:

13.4.1. The Registration Department has continued to populate the verification database by continuing to store examples of valid worldwide competent authority contact details, educational institutions and verification documentation;

13.4.2. NHS Protect have continued to undertake a fraud measurement exercise and will be presenting the results in 2016 – 2017.

13.5. **Registration Objective – Employee development:** This objective was met. All new employees have continued to have the opportunity to attend a customised customer service training programme. There continues to be a long term training plan in place to ensure that cross training of all registration

employees continues. An online learning management system is available. There were also a number of internal promotions within the department during the year.

13.6. **Registration Objective – Develop external relationships with suppliers**: This objective was met. The department has developed close partnerships with its key suppliers and is currently in the process of transferring all printing and mailing requirements to Xerox.

13.7. **Registration Objective – Manage projects within agreed timescales** : The progress the department made against each of the planned projects in 2015 – 2016 is detailed below:

13.7.1. **SAGE & PRS Upgrade** – A project to upgrade to the latest version of SAGE and to an updated purchase order system. This project was completed and closed in January 2016;

13.7.2. **Domino to Exchange Migration** – To replace the Lotus Notes mail, contacts and calendar services with Microsoft Exchange/Outlook. This project was delivered and closed in August 2015;

13.7.3. **NetRegulate Changes 2014 - 2015** - A yearly project to implement small to medium sized developmental changes into the NetRegulate system. It was determined that the business case for these changes was no longer valid and the project was closed;

13.7.4. **HR & Partners systems build** – Building and deploying a new system/s for the HR and Partners department. The work on this project has been split into two parts – the development of the HR system and the development of the Partners system. The HR system is due to be delivered in September 2016 and the Partners system in October 2016;

13.7.5. **Stakeholder Relationship Management System** – The development and build of a stakeholder contact management system to enable effective communication with external HCPC stakeholders. Requirements gathering has been completed but due to the issues with installing the system on the Education environment, a decision has been taken to delay the implementation of a technology solution and to concentrate on the business process re-engineering. The project will be de-scoped accordingly;

13.7.6. **Registrations process and systems review** - A review of the Registration Department processes and systems, identifying requirements for replacement processes and systems and identifying third party suppliers. The business case for the build project was presented to the EMT and received approval. This project was therefore closed;

13.7.7. **Professional Qualifications Directive Implementation Project** - A project to determine how the HCPC remains compliant with the changing European Directive.

13.7.8. **Telephone Credit Card Automation and hosting change** - A project to change our telephone credit card processing systems to remain within technology support. This project is due for completion in March 2016;

13.7.9. **Opening the register for Public Health Specialists** - A project to open a part of the register for Public Health Specialists. A decision by the Department of Health was taken to no longer continue with opening the register for Public Health Specialists and the project was closed;

13.7.10. **Fees Review** – Review of current registrant fees and implementation of any agreed changes. The fees were successfully increased and the project has been closed.

14. Risks managed by the Registration Department

14.1. The Registration Department manages those organisation risks that are primarily concerned with:

- Customer service failures;

- Inability to detect fraudulent applications;

- Backlog of registration applications;

- Mistakes in the registration process leading to liability for compensation to the registrant or applicant; and

- CPD processes not effective.

14.2. Risk register

R	Category	Ref	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jan 2015	Likelihood before mitigations Jan 2015	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jan 2015	RISK score after Mitigation Jul 2014
10	Registration	10.1	Customer service failures	Director of Operations, Head of Registration	5	4	20	Accurate staffing level forecasts	Adequate staff resourcing & training	Supporting automation infrastructure eg call centre systems, NetRegulate system enhancements, registration re-structure	Low	Low
			Links to 11.1, 11.2									
	Registration	10.2	Protracted service outage following a NetRegulate Registration system failure	Director of IT	5	3	15	Effective backup and recovery procedures	Maintenance and support contracts for core system elements.	Annual IT Continuity tests	Low	Low
			Links to 5.1-5.3 and 17.1									
	Registration	10.3	Inability to detect fraudulent applications	Director of Operations, Head of Registration	5	2	10	Financial audits, system audit trails	Policy and procedures supported by internal quality audits	Validation of submitted information, Education & ID checks	Low	Low
			Links to 9.1, 17.1 and 17.2									
	Registration	10.4	Backlogs of registration and applications	Director of Operations, Head of Registration	4	3	12	Continually refine model of accurate demand-forecasting, to predict employees required to prevent backlogs, and service failures	Process streamlining	Maintain required employee attendance and time keeping to service applicants and registrants	Low	Low
			Links to 1.1									
	Registration	10.5	Mistake in the Registration process leading to liability for compensation to Registrant or Applicant	Director of Operations, Head of Registration	5	2	10	Audits by Registration Management, system audit trails, external auditors	Professional indemnity insurance. Excess £2.5K. Limit £1M. (Doesn't cover misappropriation of funds)	Policy and procedures supported by ISO quality audits and process controls/checks	Low	Low
18	CPD	10.6 (18.1-7.5)	CPD processes not effective	Director of Operations, Head of Registration	4	2	8	Well documented processes	Appropriately trained members of the registrations team	Monitor and regulator feedback to the Education & Training Committee	Low	Low
			Links to 1.1									

14.3. Risk matrix

HCPC Risk Register no.	Activity	Lead
2.3, 1.5, 10.1, 10.4	Manage the Registration Department's main operational processes within service standards	RH,CH,AL,CF,JW, DA, PR, NB
6.1	Partner assessor recruitment, selection and training	CF,AL,NB
10.1	Information systems enhancements and revisions	RH,CH,AL,CF,JW, DA, PR,NB
3.2	Liaison with stakeholders	RH,CH,AL,CF,JW, DA,PR,NB
4.1	Committee and Council work	RH,CH,AL,CF,JW, DA,PR,NB
10.5, 1.5	Improve Registration Department publications	RH,CH,AL,CF,JW, DA,PR,NB

RH - Richard Houghton, Head of Registration

CH - Claire Harkin, Registration Operations Manager

AL – Anna Lubasinska, Registration Manager

CF – Christopher French, Registration Manager

JW – James Wilson, Registration Quality Assurance Manager

DA – Dushyan Ashton, Registration Manager

PR – Paul Robson, Registration Manager

NB – Natalie Berrie, Registration Manager

14.4. Activities outlined in this work plan also help mitigate organisation risks managed by other departments.

15. Project Management Department

15.1.   The department manages the major projects undertaken within the
organisation on behalf of the EMT.

15.2.   The decision as to which projects should be initiated in this financial year was
made by the EMT in November 2015.

15.3.   Should additional projects arise during the financial year, they will be
processed through the prioritisation process by the EMT and if approved will
be included in the delivery programme for the year. This may be at the
expense of projects currently approved for initiation.

16. Equality & Diversity Scheme and projects

16.1.   An equality and diversity assessment of each major project is undertaken as
part of the initiation process

17. Human resources within the Project Management Department

17.1.   The Project Management Department consists of five and a half employees:

Claire Reed	Project Portfolio Manager
Martha Chillingworth	Senior Project Manager
Tim Kitchener	Senior Project Manager
Robyn Schnuir	Project Manager
Peter Ovia	Project Manager (contract until June 2016)
Alex Loder Half	(part) time Administrative support

18. Project Management role descriptions

18.1.   **Project Portfolio Manager**

Overall accountability for the Project Management function at HCPC. The position is
responsible for:

- The delivery of the major projects undertaken with the organisation

- The management of the project portfolio to ensure there are adequate resources within the organisation and that all dependencies between projects are understood and managed

- Reporting to EMT and Council on the status of the portfolio

18.2. **Senior Project Manager**

Responsible for the delivery of the most complex projects / small programmes within the portfolio

18.3. **Project Manager**

Responsible for the delivery of the major projects within the portfolio

18.4. **Administrative support**

A role shared with IT providing administrative support to the projects e.g. invoice processing, meeting administration.

18.5. The salaries for these positions are held within the Operations budget.

19. Financial resources for major projects

19.1. This work plan assumes an operating budget of £1,357,298 and a capital budget of £2,438,289, totalling £3,795,587.

20. The figures are based on a combination of firm budgets set for projects that are currently initiated and start up budgets that have been estimated by conducting basic research with third party suppliers and by drawing on data from previous projects.
Project management activities in 2015-16

	Project Name	**Status**	**Comments**
	Existing projects		
1	Education System Build	In progress	The main system is in production and is operational. Work continues on developing items identified post go-live and on integrating the system with Net Regulate and the HCPC website.
2	SAGE & PRS Upgrade	Closed	
3	Domino to Exchange Migration	Closed	

	Project Name	Status	Comments
4	NetRegulate Changes 2014-15	Closed	
5	HR & Partners systems build	In progress	The HR system will be released into production in September 2016 and the Partners system will be released into production in October 2016.
6	Stakeholder Relationship Management System	In progress	Due to technical complexities, a decision has been taken to de-scope the implementation of a system and to ensure that business processes are first put in place to enhance our stakeholder relationship knowledge exchange.
7	Registrations process and systems review	Closed	
8	FTP Changes 2014-15	Did not initiate	
9	Professional Qualifications Directive Implementation Project	In progress	The systems are now in place and the project will close in March 2016
10	Telephone Credit Card Automation and hosting change	In progress	The final work is being undertaken and the project will close in March 2016
11	Opening the register for Public Health Specialists	Closed	
	New projects		
7	Registrations transformation and improvement project	In progress	The first phase of this three phase project has now commenced. Design is underway for the CPD proof of concept and sprint cycles will commence shortly.
8	Fees review	Closed	
9	PCI / DSS	In progress	The audit of our current processes is scheduled for March 2016
	Projects approved mid-year		

	Project Name	Status	Comments
16	Establishing the Health and Care Professions Tribunal Service	In progress	
17	405 Kennington Road fit out	Closed	

21.   Project management activities in 2016-17

21.1.   Ongoing major projects

The following major projects will continue into financial year 2016-17.

	Project name	Project Description	Projected completion date	Project budget	2016 -17 budget
1	Education System Build	Building and deploying a new system for the Education department	May 2016	1,296,511	15,000
2	HR & Partners systems build	Building and deploying a new system/s for the HR and Partners department	December 2016	698,900	469,841
3	Registrations transformation & improvement project Phases 1 & 2	Building and deploying a new system for the Registrations department	June 2020 Phase 1 – November 2016	4,175,777	1,353,707
4	PCI / DSS	To identify, assess and remedy any PCI DSS compliance weaknesses	May 2016	75,000	50,000
5	Establishing the Health and Care Professions Tribunal Service	To create a greater degree of independence in the adjudication of fitness to practise cases	April 2017	178,426	170,713

22.   Major projects to initiate in 2016-17

22.1.   The following projects have been approved for initiation in 2016-17 dependent on resources being available within the organisation.

	Project name	Project Description	Project budget	2015 -16 budget
1	HCPC website review and build	A review of high-level requirements, processes, systems and purpose of the HCPC's current website. Followed by the build, test and implementation a new website	691,640	415,490
2	Net Regulate changes 16-17	Changes to Net Regulate to enable HCPC to meet legislative requirements regarding the manner in which annotations are displayed on the online register	82,000	82,000
3	FTP process and systems review project	Review of the business requirements for the FTP case management system and a fit-gap analysis against the current system	200,600	115,600
4	186 Kennington Park Road renovation	Design and implementation of plans to renovate the interior of 186 Kennington Park Road The project will comprise the following: - Appointment of architects and consultants to undertake a feasibility study for the new design of the building including gaining all relevant permissions - A competitive tender for a contractor to undertake the re-modelling and refurbishment - Depending on the approach taken for the build, a competitive tender for the project management and oversight of the re-modelling and refurbishment work - Re-modelling and refurbishment works. The intention is that the re-modelling and refurbishment works will commence prior to the end of the financial year.	1,037,997	1,037,997

23. Project Management supporting activities

23.1. In addition to the management of the major projects the department will also undertake the following activities.

23.1.1. **Continued development of Project Management Office (PMO) processes:** As the size and complexity of the portfolio increases, increased due diligence relating to project approval is required to ensure consistency in project approval across the organisation.

A number of new processes will be written and implemented to ensure that this is achieved.

23.1.2. **Continued development of quality assurance processes:** To ensure that the projects within the portfolio are managed to similar standards, quality assurance processes will be written and implemented.

24. Provisional portfolio timeline

	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
HR & PARTNERS SYSTEMS BUILD												
NET REG CHANGES 16-17												
REGISTRATIONS TRANSFORMATION AND IMPROVEMENT PROJECT PHASE 1 (CPD)												
REGISTRATIONS TRANSFORMATION AND IMPROVEMENT PROJECT PHASE 2 (REPLACEMENT OF NET REGULATE & ONLINE RENEWALS)												
FTP CMS REVIEW												
ESTABLISHING THE HEALTH & CARE PROFESSIONS TRIBUNAL SERVICE												
HCPC WEBSITE REVIEW & BUILD												
EDUCATION SYSTEM BUILD												
PCI SECURITY STANDARDS COMPLIANCE												

25. Risks managed by the Project Management Department

THE HEALTH AND CARE PROFESSIONS COUNCIL

RISK ASSESSMENT & RISK TREATMENT PLAN Jan 2016

Project Management

R	Category	ISMS Risk	Ref	Description	Risk owner (primary person responsible for assessing and managing the on-going risk)	Impact before mitigations Jan 2016	Likelihood before mitigations Jan 2016	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jan 2016	RISK score after Mitigation Jul 2015
8	Project Management		8.1	Fee change processes not operational by required date	Director of Finance Project Portfolio Manager	3	3	9	Project is managed as part of major projects portfolio & managed in accordance with HCPC Project Management process	Project progress monitored by EMT & stakeholders	-	Low	Low
				Links to 1.1, 15.3									
	Project Management		8.2	Failure to regulate a new profession or a post-registration qualification as stipulated by legislation	Project Lead Project Portfolio Manager	5	2	10	Project is managed as part of major projects portfolio & managed in accordance with HCPC Project Management process	Project progress monitored by EMT & stakeholders	Assess lessons to be learned from previous projects	Low	Low
				Links to 1.1, 15.3									
	Project Management		8.13	Failure to build a system to the Education departments requirements	Director of Education Project Portfolio Manager	3	4	12	Project is managed as part of major projects portfolio & managed in accordance with HCPC Project Management process	Project progress monitored by EMT & stakeholders	Ensure robust testing including load	Low	Low
	Project Management		8.14	Failure to deliver a system to the HR & Partners departments requirements	Director of HR Project Portfolio Manager	3	4	12	Project is managed as part of major projects portfolio & managed in accordance with HCPC Project Management process	Project progress monitored by EMT & stakeholders	Project Initiation stage to pay particular attention to project scope and breadth/reach of project	Low	Low
	Project Management	I	8.17	Organisation wide resourcing may impact project delivery	EMT & Project Portfolio Manager	3	4	12	Manage resources accordingly	Accept changes to planned delivery		Med	Med
	NEW Project Management		8.19	Failure to build a system to the Registrations department's requirements	Director of Operations & Project Portfolio Manager	5	4	20	Project is managed as part of major projects portfolio & managed in accordance with HCPC Project Management process	Project progress monitored by EMT & stakeholders	Ensure robust testing including load	Low	Low

26. Facilities Department

26.1. The department manages the facilities, building refurbishments and Health & Safety on behalf of the EMT for properties owned or leased by HCPC.

27. Resources within Facilities Management Department

27.1. The Facilities Management department consists of eight employees.

Vacant	Facilities Manager
Robert Pope	Facilities Supervisor
Abubacarr Jagana	Facilities Officer
Charlotte Bennett	Facilities Officer
Olivia Tilmuth	Receptionist
Sylvia Armstrong	Receptionist
Claire Travers	Receptionist
Amanda Isaac	Receptionist

The salaries for these positions are held within the Facilities budget.

27.2. The department is repressible for managing the HCPC premises at 184 Kennington Park Road, 186 Kennington Park Road, 405 Kennington Road and 33 Stannary Street.

28. Financial resources for Facilities Management activities

28.1. This work plan assumes an operating budget of £1,485,738. The figures are based on a combination of firm budgets following basic research from third party suppliers and by drawing data from current financial year.

29. Facilities Management activities in 2016 – 17

29.1. The following work streams will take place in financial year 2016-17.

	Work stream	Description
1	Review Health & Safety policy and procedures	Carry out gap analysis of current policy and procedures against best practice and current legislation

	Work stream	Description
2	Carpet replacement	Replace carpets in high traffic areas
3	Painting	Redecorate high traffic areas of 184 Kennington Road
	Restack	Relocate employees following the refurbishment of 186 Kenning ton Park Road

29.2. The department will support the following major project in financial year 2016 - 2017.

	Major Project	Description
1	186 Kennington Park Road renovation	Design and implementation of plans to renovate the interior of 186 Kennington Park Road

30.   Facilities Management activities in 2015 – 16

	Work stream	Description	Status
1	Review Health & Safety policy and procedures	Carry out gap analysis of current policy and procedures against best practice and current legislation	On-going
2	Additional Receptionist	Recruit Receptionist to cover 186 Kennington Park Road	Complete
3	405 Kennington Road	Operationalise the property at 405 Kennington Road	Complete
5	Replace lamps with LED's	Replace halogen spotlights with LED's	Complete
6	Recycling cabinets	Replace current recycling cabinets with those of Herman Miller model plus remove all waste bins	Complete
7	Carpet replacement	Replace carpets in high traffic areas	On-going

31. Equality and Diversity within Facilities

31.1. As part of the HCPC equality and diversity scheme the Facilities Department will continue to scrutinise all processes to identify and, where practicable, mitigate against any adverse impact to any groups compared to others.

32. Risks managed by the Facilities Department

Category	ISMS Risk	Ref	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jan 2016	Likelihood before mitigations Jan 2016	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jan 2016	RISK score after Mitigation Jul 2015
Operations	I	2.1	Inability to occupy premises or use interior equipment	Facilities Manager	4	4	16	Invoke Disaster Recovery/Business Continuity plan	Commercial combined insurance cover (fire, contents, terrorism etc)	-	Low	Low
Operations		2.4	Inability to communicate via postal services (e.g. Postal strikes)	Facilities Manager	3	3	9	Use of other media including Website, newsletter & email and courier services	Invoke Business Continuity Plan	Collection of >80% income fees by DD	Medium	Medium
Operations		2.5	Public transport disruption leading to inability to use Park House	Facilities Manager & Head Bus Proc	4	5	20	Contact employees via Business Continuity Plan process	Make arrangements for employees to work at home if possible	-	Low	Low
Operations	I	2.6	Inability to accommodate HCPC employees	Facilities Manager	4	3	12	Ongoing Space planning	Additional premises purchase or rented	-	Low	Low
Operations	I	2.7	Interruption to electricity supply	Facilities Manager	4	4	16	Relocate to other buildings on site	If site wide longer than 24 hours invoke BCM/DR Plan	-	High	High
Operations		2.8	Interruption to gas supply	Facilities Manager	1	2	2	Temporary heaters to impacted areas	-	-	Low	Low
Operations		2.9	Interruption to water supply	Facilities Manager	2	2	4	Reduce consumption	Temporarily reduce headcount to align with legislation	Invoke DR plan if over 24 hrs	Low	Low
Operations	I	2.11	Basement flooding	Facilities Manager	4	4	16	Flood barrier protection to prevent ingress	-	-	Medium	Medium
Operations		2.14 (formerly 11.5)	Health & Safety of employees	Chief Executive & Facilities Manager	5	4	20	Health & Safety Training, policies and procedures	H&S Assessments	Personal Injury & Travel insurance	Low	Low

33. Business Process Improvement Department

33.1. Business Process Improvement (BPI) maintains, develops and promotes the Quality Management System, Information Security, Risk and information analysis, Business Continuity and process improvement. BPI is also responsible for ad-hoc business reporting and data extraction from business datasets. The diagram below provides an overview of how the different aspects of BPI work are related.

Business Process Improvement
A disparate range of activities that link and support the organisation

- Risk Management (ISO 31000)?
- Process Mapping & Re-engineering
- Quality Compliance Auditing
- ISO 9001 Quality Management
- Provisional ISO10002: Complaints
- ISO 27001 Information Security
- Disaster Recovery / Business Continuity
- Reporting, monthly & ad-hoc; plus statistical FOI
- Information Security & DR training and testing
- Registration Numbers Forecasting
- Paper Archive & Retention

34. Human resources within Business Process Improvement

34.1. The Business Process Improvement Department consists of 2 full time employees.

Roy Dunn   Head of Business Process Improvement

Kayleigh Birtwistle   Quality Compliance Auditor

34.2. All BPI employees must be trained to carry out internal ISO 9001 and ISO 27001 audits. Both current employees are also trained in Lean Six Sigma Green Belt.

34.3. Currently BPI cover for the Operations Business Reporting role not recruited for in 2014-15.

35. Business Process Improvement activities in 2016-17

35.1. **Maintain ISO 9001:2008 (quality management system) certification and increase quality control activities. Working toward migration to ISO9001:2015**

35.2. [HCPC Risk Register reference: 2.3 & 9.1]

35.3. Business Process Improvement aim to undertake an average of four audits per month over 2016-17. This will be a combination of planned departmental process audits, risk based audits, multi-department audits and supplier audits. It should be noted that following BSI's increased level of audit, BPI have also increased the depth and coverage of audits. Outputs from internal audits are in a modified format, following feedback from EMT.

35.4. Near Miss Reports may substitute for departmental audits, if applicable.

35.5. The ISO9001:2008 standard has been replaced with a new, revised standard (ISO 9001:2015). The new standard moves away from "Plan, Do, Check, Act" cycle to a more risk based approach. Preventive Action has been removed as a specific requirement, with increased reliance on Risk Management. Several sections of HCPC' quality management system will need to be refreshed to align to the new standard. This is a substantive piece of work that will impact all department's content in the QMS. It is difficult to exactly define the scope of the work required.

35.6. Scope of audits will be increased to include assessment of information security controls against the ISO 27001 information security standard. These will include the assessment of departmental assets lists, the nature of threats and vulnerabilities determined, and ensuring the risk scores are appropriate.

35.7. Two external audits by British Standards Institute (BSI) are due to take place in the financial year.

35.8. BSI's 2 day external audit in October 2016 will include a range of functions, which will be determined at the close of the April 2016 audit.

35.9. The QMS ISMS migration from the Lotus notes based system to SharePoint must take place before QMS can be transitioned to ISO9001:2015 This may be a potential break on moving to the new standard.

35.10. The BPI team will co-ordinate with other areas of assurance work around HCPC (Registrations, Education, FTP) to ensure consistency of approach and statistical support for our activities.

35.11. **Improve HCPC's information security and maintain ISO 27001:2013 (information security) certification**

35.12. [HCPC Risk Register reference: 2.1, 5.3, 15.7, 17.2, 17.5; 17.6; 17.7; 17.8; 17.9 Information Security] (Note some Information Security risks have been renumbered)

35.13. HCPC achieved certification in June 2015. The ISO 27001 standard was substantially revised in 2013 and no changes are predicted for three to five years. We have an existing Information Security Management System (ISMS) from initial ISO 27001 certification. The processes and policies around information security must be revalidated by the EMT on at least an annual basis. This is scheduled for February / March each year, although may take place earlier, should circumstances within HCPC change. Additional policy and processes will be mapped out over time as they are required.

35.14. It should be noted that work on increasing security (outside the ISO27001 process) will continue. This is necessarily ad-hoc and reactive for the most part, outside any budgeted projects. This includes discrete work with other departments, contractors and suppliers. Building security in particular impacts the overall access to our paper and computer based information assets.

35.15. Work will continue with the Information Governance Manager (IGM) within the Secretariat function to classify and monitor breaches of information security. The Head of BPI acts as an alternate when the IGM is off site.

35.16. Monitoring of access levels to the computer network will be undertaken when the appropriate tools have been obtained.

35.17. Privacy Impact Assessments within the Projects area will be monitored to attempt to predict major changes in how security is addressed within the business. Access models for registrants will also be risk assessed.

35.18. **Purchase information security awareness training software for employees, contractors, partners and Council/Committee members.**

35.19. [HCPC Risk Register reference: 2.1, 5.3, 15.7, 17.2, 17.4, 17.5, 17.7] (Note some Information Security risks have been renumbered)

35.20. A replacement online training solution will be sourced and customised to educate and test employees, contractors, partners and Council/committee members on their responsibilities in regards to information security.

35.21. On-going training of employees, contractors, partners and Council members is a prerequisite to ISO 27001 (information security) certification. Annual training is also indicated as best practise by the Information Commissioners

Office. This will also require input from other departments to help tailor the training to their specific needs. Objectives relating to training are included in the ISO27001 management process. 85% of employees and Partners must pass the prescribed information security training to meet our ISO 27001 objectives.

35.22. An "all employee" presentation concerning security and or risk will take place in the late spring as the new "Computer Based Training" training system is rolled out. This will of course be required to reflect our Equality & Diversity policy.

35.23. Additionally, small scale internal training resources for use around the organisation will be produced in house as required.

35.24. New employees and contractors will be asked to complete a small internally designed Information Security for new starters, as they are employed.

35.25. Specific training around ongoing risk assessments of information security assets will be required for risk owners.

35.26. An ongoing programme of risk assessment around the organisation must be established, with a minimum frequency of an annual cycle. The risk register, which captures high level risks is updated on a six monthly basis.

35.27. **Migrate the Quality Management System, QMS; Information Security Management System, ISMS and Complaint and Customer Service management system CCMS to a new stable platform.**

35.28. The existing management systems have been on the current platform since 2007/8 and the base technology used is no longer supported by the vendor. A long term plan to move the organisations intranet to Microsoft SharePoint is under discussion between the Communications and IT departments. Minor demonstrations of the technology have been provided by the Communications dept. However the QMS, ISMS, CCMS will require additional workflow functionality to adequately replace the current system. Issues have been located with the occasional loss of documents or loss of document control in the Lotus Notes system..

35.29. Specific QMS/ISMS functionality will be required to be added to the SharePoint implementation to meet our requirements.

35.30. **Maintain business continuity (disaster recovery) readiness**

35.31. [HCPC Risk Register reference 2.1, 2.5, 17.7]

35.32. HCPC will carry out an annual disaster recovery / business continuity test with a predefined scenario undertaken by EMT, CDT or other parts of the business, with the assumption that some members are unavailable.

35.33. HCPC's hardcopy business continuity plan is now available via the on line service Shadow Planner from our existing Disaster Recovery / Business Continuity vendor. This service avoids the requirement to have hardcopy of the plans available at all times, and improves our flexibility to different scenarios. The first Business Continuity test will take place with this technology, this financial year. Some hardcopies of the plan will be retained at the Disaster Recovery site, and other locations, as back up.

35.34. The plan will be updated to reflect options around using combinations of our buildings to maintain the business without recourse to the DR recovery site, should partial building shutdowns or access issues arise. This will be an ongoing consideration as the business develops.

35.35. BPI will audit a sample of the EMT's expenses in line with the policy agreed at Audit Committee. Two members of the EMT represents a sample of 2/9 = 22% which will provide adequate oversight. This does not include the Chief Executives expenses, which are already publically available.

35.36. Five year rolling registrant forecast, update and maintenance.

35.37. The Registrant forecast will be updated with end of financial year totals after April 2016. A modified model following the FAST standard is being designed and tested. This will include more control around incomplete year inputs.

35.38. The effectiveness of model assumptions will be monitored as the Allied Health Professions and Social Work professions potentially change over the coming years. The undergraduate funding model for many of our AHPs has been changed, requiring students to take out loans as with other degree programmes. This may impact the numbers entering UK programmes leading to registration, and lead to shortfalls a few years down the line. The model may thus require change to reflect this impact on UK applications for registration.

36. Equality and diversity within Business Process Improvement

36.1. Equality & Diversity processes are monitored within Quality audits and we will continue to scrutinise all processes and sampled work to identify and where possible assist in mitigation of any adverse impact to some groups compared to others.

37. Financial resources for Business Process Improvement

	Work stream	Description	Estimated cost
1.	Enhance Quality Management expertise in BPI	BSI Diploma in Quality Management x 2	£4475
2.	Information Security Awareness training and validation	Online training packages for; employees and contractors members and partners. Ad-hoc internal efforts	Up to £15,000
3.	Selective archive destruction	Carton and content secure destruction at Mine site.	£3.61 per carton at Deepstore
4.	Reporting & Assurance technology	Software for analyzing statistical data using Anova algorithm (not progressed in 2015-16)	£1000 per seat. 2 required in BPI
5.	FAST training	Training around the FAST format for spreadsheets	£2,500
6.	Document Control	Delivering a document control tagging solution for Word, Excel	Up to £5000
7.	Ad-hoc Information Security enhancements as required by adhering to the standard	Replacement transit cases, exact requirements to be refined, by user departments; other items as determined by Stage 1 & Stage 2 BSI audits for ISO27001	

38. Certification within Business Process Improvement

38.1. The basic minimum skill set to be maintained in the BPI function is as follows;

Course or certification required	No. of people required with this qualification within BPI	Current people with qualification within BPI	Minimum additional training required with existing resource
ISO 9001internal auditor (required)	2	2	0

ISO 9001 lead auditor (required)	1	1	0
ISO 27001 internal auditor (or ISO9001 internal auditor plus CISMP) (required)	2	2	0
ISO 27001 lead auditor (required)	1	1	0
Certificate in Information Security Management Principles (CISMP)	1	2	0
Practitioner Certificate in Information Risk Management (desirable for ISO 27001)	1	1	0
Lean Six Sigma Green Belt certification (desirable for Assurance auditing)	1	2	0

38.2.   This combination of taught skills and certifications, along with a level of business analysis enables the BPI department to work across the whole of HCPC in various capacities. We will aim to ensure capability is maintained, by aiming slightly above the minimum level of training required.

39.   Business Process Improvement activities in 2015 - 16

39.1.   **ISO9001:2008 : Maintenance and raising the profile of Quality**

39.1.1. [Risks 2.3, 9.1 Quality Management]

39.1.2. HCPC's ISO9001: 2008 quality management system has been audited by BSI in April and November 2015 and continues to meet the ISO 9001 standard. HCPC is now audited for 4 days per year, as opposed to two days per year. This is based on UKCAS feedback to our certification body.
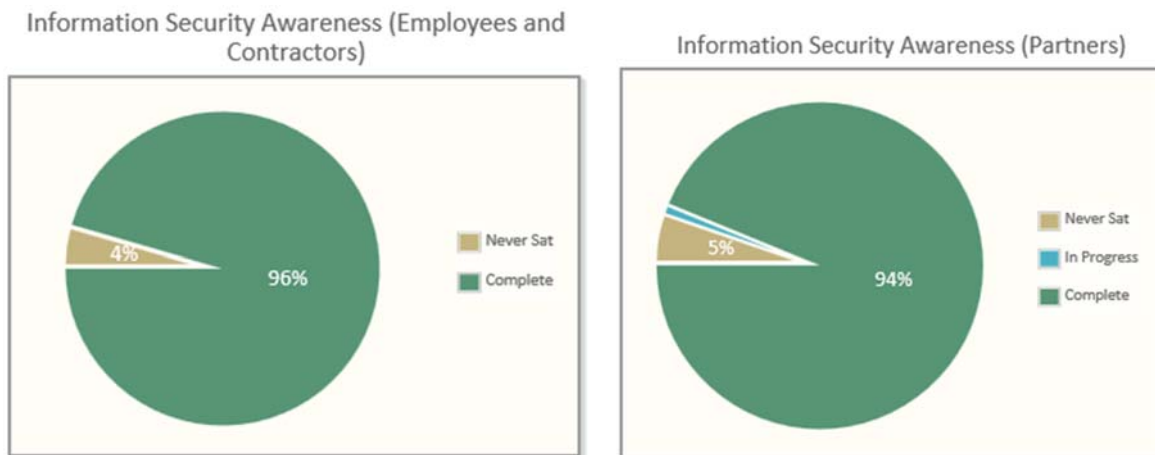
39.1.3. Business Process Improvement averaged three internal audits every month over 2015-16 through a combination of departmental audits, risk based audits, multi-department audits and Near Miss Reports. Information Security audits were also carried out at potential supplier sites. Some ISO 9001 audits delivered leads for Assurance auditing work.

39.1.4. Two key unplanned supplier audits undertaken in December 2015 were around evaluating the new owner of an existing supplier that may carryout work on our behalf, and a potential new supplier outside the UK, which would handle employee and Council member PII. These audits looked at business processes, and information security.

11.1.5 Information Security training for employees, Council members and Partners.

11.1.6 [Risks 2.1, 5.3, 15.7, 17.2, 17.4, 17.5; 17.6; 17.7; 17.8; 17.9 Information Security]

11.1.7 A computer based training package (CBT) package (Alurna) was selected in 2014 for use within HCPC. A level of customisation including voice over was required to meet our needs. At the end of the packages availability the results were as follows which met our targets of 85% completion for each group. However, a great deal of time and effort was expended on supporting Partners in the IT issues they faced when attempting to access the material over a range of IT devices. Training 650 Partners took 6 email shots, numerous password resets and hundreds of tickets to the BPI department. This used a substantial amount of BPI resource, and delayed other activities. Completion of the prescribed CBT package is a requirement for all employees and Partners. Results are indicated below.

Information Security Awareness (Employees and Contractors)

Never Sat 4%
Complete 96%

Information Security Awareness (Partners)

Never Sat 5%
In Progress
Complete 94%

11.1.7 Selection of the CBT package for the next round of training was completed in February 2016. We will be using the popular Bob's Business content which has been updated since we last used it two years ago. Rollout is planned for April and May 2016 with employees and a few months later for Partners and Council Members.

39.2. **Improvement to Quality Management System software**

39.2.1. [Risks 2.3, 9.1, Unacceptable service standards, maintenance of ISO registration]

39.2.2. Although the service to place HCPC's Quality Management System (QMS) on the BSI Entropy platform had commenced, the migration was terminated when the supplier (BSI) changed its access model, effectively requiring HCPC employees to log in to the service each time they used it. This is not compatible with our requirement that the service appears as it would on our intranet. A credit was provided to our BSI account. A

replacement QMS service will now be required, and a SharePoint based QMS is likely in the next financial year. However, this does place additional pressure on the BPI function with the increased number of audits and processes to monitor, until that replacement is delivered. The current QMS has required repair by the IT department on a number of occasions.

39.3. **ISO27001 standard**

39.3.1. [Risks 2.1, 5.3, 15.7, 17.1, 17.2, 17.3, 17.4; 17.5; 17.6; 17.7; 17.8; 17.9 Information Security]

39.3.2. The creation of an ISO27001 Information Security Management System (ISMS) with our existing Quality Management System was completed, and is compatible with latest version of ISO27001. Documentation was signed off by EMT in February 2015. Some of this documentation is not public.

39.3.3. A presentation to all employee meetings around "Information classification and how to protect it" was made in February 2015.

39.3.4. HCPC went through the Stage 1 certification audit on March 2015, with one Observation around cardboard packaging in the server room, one Observation around sign off of objectives for information security and one Opportunity for improvement, around removing bins next to desks.

39.3.5. HCPC went through the Stage 2 certification audit on May 2015, with one non-conformance around not logging a previous Observation, and one minor non-conformity around Physical security (Tidy Desk Policy) not being effectively implemented.

39.3.6. HCPC was officially certified on 12th June 2015

39.3.7. HCPC's certification lasts until 11th June 2018, assuming no major non-conformance is located and unresolved.

39.3.8. HCPC's EMT evaluated our existing ISO27001 policy & process documents in March, as part of the annual validation, prior to our next surveillance audit in April 2016

39.3.9. vsRISK in support of the ISO27001 project

39.3.10. [Risks 2.1, 5.3, 15.7, 17.1, 17.2, 17.3, 17.4; 17.5; 17.6; 17.7; 17.8; 17.9 Information Security]

39.3.11. vsRisk is used to store detailed information on information assets. This will be substantially rationalised and updated, if the QMS, ISMS migration project is completed.

39.4. **ISO10002 standard**

39.4.1. [Risks 2.3, 9.1, Unacceptable service standards, maintenance of ISO registration]

39.4.2. The Customer service and complaints function (non FTP) dealing with HCPC's service standards and performance has been in place for a number of years. ISO9001 contains elements of customer service and complaints management, but an enhanced level of certification is available around this process.

39.4.3. Toward the end of the ISO27001 Stage 2 audit, the Chief Executive & Registrar suggested that he would like to have our Customer service and complaints function certified to the relatively new standard, ISO10002. This would be a relatively small project (compared to ISO27001) and no specific budget or resources had been applied in the 2015/16 work plan. This project would be progressed by Business Process Improvement, and the Complaints and Customer Service Manager, Ruth Cooper, in the Secretariat department.

39.4.4. An initial gap analysis was carried out internally by the BPI function, and it was determined that with some effort, we should be able to certify to the standard in the 2015/16 financial year. An external consultant was located with BSI's assistance, and existing documentation reviewed, and updated where required.

39.4.5. The Stage 1 audit took place on 16th Feb 2016.

39.4.6. The Stage 2 audit will take place on March with three auditor days work. Results of the audit are yet to be recoded.

39.4.7. The Registration dept project to look at new registration IT systems will require a complete refresh of the reporting processes and software sometime in the future. Work has begun to document key company and departmental reports, to ensure they can be replicated from any new system that is procured or developed.

39.5. **Disaster Recovery / Business Continuity – on-going development, testing and training**

39.5.1. [Risks 2.1, 2.5, Business Continuity]

39.5.2. HCPC EMT have used the ShadowPlanner application on mobile devices at the Council away day in Wales, October 2015 to prove the mobile access concept. The full plan has now been input to the ShadowPlanner website, and testing on new mobile devices is underway. New mobile devices are being rolled out to the EMT at the end of the 2015-16 Financial year. When devices are proven to be fully compatible with ShadowPlanner, EMT & CDT training will take place.

39.5.3. In June 2015 a major failure of the local water infrastructure resulted in road flooding around Kennington Park Road, resulting in the cancellation of Fitness to Practise hearings, a relocation of a Council Meeting, and temporary closure of the organisation. The Business continuity process was activated, and temporary flood barriers built from sand bags and plastic sheeting, to protect the front entrances and basements. Temporary routing of power from the rear buildings allowed the IT services to be maintained whilst the buildings were evacuated. The Disaster Recovery site was put on standby, but stood down without being used after 24 hours. Approximately 1 ½ business days were lost in total. This type of event is listed on our Risk Register. More permanent mitigations around flood barriers and fail over power supplies to the server room are planned.

39.5.4. vsRISK in support of the ISO27001 project

39.5.5. [Risks 2.1, 5.3, 15.7, 17.1, 17.2, 17.3, 17.4; Data Security]

39.5.6. This system is used to track the information assets used by HCPC. This is an essential requirement of the ISO27001 standard. Threats and vulnerabilities and mitigations / controls must be tracked long term by HCPC to achieve and maintain this standard. The programme has been upgraded, and stores detailed information on information assets and associated risks. This information is to be updated in future.

40. Additional items undertaken

40.1. Business Process Improvement have also been involved in the following major items.

40.2. The output from the Near Miss reporting process has been summarized for the Audit Committee. A substantial amount of effort was required in researching some near miss reports.

40.3. Providing ad-hoc advice on Information Security for projects around the organisation

40.4. The tender process for Registrations department printing has restarted in 2015/16. Input and scoring for the Security Print procurement effort in the Registrations department. Risks around being a smaller customer of a larger supplier have been noted within the project.

40.5. Increasing level of FOI reporting required by HCPC's stakeholders and the public continues to add a significant burden to the amount of ad hoc reporting required.

40.6. Input to IT department project to increase the security of network printing within HCPC

40.7. All employee presentation on Classification of Information Assets (a knowledge required by ISO27001) was made in February 2015

40.8. HCPC rolled out a Tidy Desk policy. This was supported by a "Deskie" competition, to encourage tidy desks within the office, and protect sensitive information.

40.9. On going, ad-hoc tidy desk audits have been carried out around the organisation before the start of the business day (7.15am onwards)

40.10. Risk Assurance mapping demonstrated to the Audit Committee

40.11. Support business departments in the ISO27001 process

40.12. Data extracts for CPD feedback campaign for Policy & Standards Department with the University of Durham.

40.13. Data extracts for Communications Department mailings

40.14. Data extracts for Registrations Department identity and qualifications work with NHS Protect.

40.15. Multiple specific data extracts for Partners Department for prospect mailings

40.16. New Partner training days were attended to provide specific training around information security for Partners.

40.17. The Quality Compliance Auditor assisted in the recruitment of the Assurance & Development Officer, Hearings Officer in FTP and Freedom of Information Officer role in the Secretariat department.

40.18. A cross organisation meeting took place between all parts of the organisation undertaking aspects of quality assurance. Some common understanding was found, and further meetings will take place around terminology and methods.

40.19. Information Security champions were trained in risk assessment, spotting hidden patterns and awareness around information security. The usual chocolate prizes were provided.

41. Risks managed by the Business Process Improvement Department

Category	ISMS Risks	Ref	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jan 2016	Likelihood before mitigations Jan 2016	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jan 2016	RISK score after Mitigation Jul 2015
Operations		2.12	Significant disruption to UK transport network by environmental extremes e.g. snow, rain, ash; civil unrest or industrial action; disrupts planned external activities	Director of Operations & Head Bus Proc	3	2	6	Use of alternate networks	Use of video or teleconferencing facility to achieve corum	Invoke Disaster Recovery/Business Continuity plan	Low	Low
Operations		2.5	Public transport disruption leading to inability to use Park House	Facilities Manager & Head Bus Proc	4	5	20	Contact employees via Business Continuity Plan process	Make arrangements for employees to work at home if possible	-	Low	Low

Category	ISMS Risks	Ref #	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jan 2016	Likelihood before mitigations Jan 2016	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jan 2016	RISK score after Mitigation Jul 2015
Quality Management.		9.1	Loss of ISO 9001:2008 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	9.2	Employees non-compliance with established Standard Operating Proceedures	EMT	5	2	10	Culture, follow procedures and report errors	Standard Operating Procedures and prevention of overwriting systems	Extend ISO systems as required	Low	Low

Category	ISMS Risks	Ref	Description	Risk owner (primary person responsible for assessing and managing the ongoing risk)	Impact before mitigations Jan 2016	Likelihood before mitigations Jan 2016	Risk Score = Impact x Likelihood	Mitigation I	Mitigation II	Mitigation III	RISK score after Mitigation Jan 2016	RISK score after Mitigation Jul 2015
Information Security	I	17.1	Loss of information from HCPC's electronic databases due to inappropriate removal by an employee	EMT, Director of IT and Director of Operations	5	3	15	Access is restricted to only the data that is necessary for the performance of the services. Employment contract includes Data Protection and Confidentiality Agreement	Adequate access control procedures maintained. System audit trails. Training where appropriate.	Laptop encryption. Remote access to our infrastructure using a VPN. Documented file encryption procedure . Maintain ISO27001	Low	Low
			Links to 5.3. Incl old 17.6									
Information Security	I	17.2	HCPC Document & Paper record Data Security	EMT; Head of Business Improvement	5	3	15	Use of locked document destruction bins in each dept. Use of shredder machines for confidential record destruction in some depts e.g. Finance.	Data Protection agreements signed by the relevant suppliers. Dept files stored onsite in locked cabinets. Training where appropriate (Employees & Partners)	Regarding Reg Appln forms processing, employment contract includes Data Protection Agreement	Low	Low
			Links to 15.7									
Information Security	I	17.3	Unintended release of electronic or paper based information by external service providers.	EMT, Director of IT and Director of Operations	5	3	15	Access is restricted to only the data that is necessary for the performance of the services.	Effective system processes including secure data transfer and remote access granted only on application and through secure methods.	Data Processor agreements signed by the relevant suppliers. Maintain ISO27001	Low	Low
Information Security	I	17.4	Inappropriate data received by HCPC from third parties	Director of Ops, and Director of FTP	5	2	10	Read only, password protected access by a restricted no of FTP employees to electronic KN data.	Registrant payments taken in compliance with Payment Card Industry (PCI) Security standards is with quarterly PCI testing.	Ensure third party data providers e.g. professional bodies provide the data password protected/encrypted/door to door courier/registered mail/sign in sign out as appropriate.	Low	Low
Information Security	I	17.5	Loss of physical data dispatched to and held by third parties for the delivery of their services	Director of Ops and Hd of Business Process Improv	5	3	15	Data Protection/Controller agreements signed by the relevant suppliers. Use of electronic firewalls by suppliers.	Use of transit cases for archive boxes sent for scanning or copying and sign out procedures.	-	Low	Low
Information Security	I	17.6	Loss of Registrant personal data by the registration system (NetRegulate) application support provider in the performance of their support services (specific risk).	Director of IT and Director of Operations,	5	3	15	Access to and export of personal data is restricted to only that which is necessary for the performance of the services.	Effective system processes including secure data transfer and remote access granted only on application and through secure methods.	Data processor side letter specifying obligations and granting a limited indemnity.	Low	Low
Information Security	I	17.7	Incorrect risk assessment of Information Assets	Hd of Business Process Improv & Asset Owners	4	2	8	Identification and collection of information risk assets	Regular audit and review of information risk assets by Hd of BPI	Regular identification and review of information risk assets by Hd of BPI	Low	Low
Information Security	I	17.8	Loss of personal data by an HCPC Contractor, Partner, Council or Committee member.	EMT	5	3	15	Access to and export of personal data is restricted to only that which is necessary for the performance of the services.	Effective system processes including secure data transfer and remote access granted only on application and through secure methods. Training where appropriate.	Maintain ISO27001	Low	Low
Information Security	I	17.9	Loss of ISO 27001:2013 Certification	Hd of Business Process Improv & Asset Owners	5	4	20	Culture, follow procedures, report errors, training and awareness as required	Standard Operating Procedures and prevention of overwriting systems	Extend ISO systems as required	Med	Med