Risk Assessment

Area	SP - Strategic Plan		Date	01/10/204	Assessment number	SP/O1
Staff responsible	P		Review Date	01/10/2024		
Task			**OBJECTIVE ONE - INFRA STRUCTURE**			

Risk Number	Risk Description	Effects/ Impact on	Existing controls	Risk Rating			Further action required/ action plan	By Whom	Date	Cross reference categories	Risk with Mitigation	Update
				Impact (I)	Likelihood (L)	Rating						
1	Failure to monitor the Committee structure	Maintaining OFS registration, GOsC and iO professional registration and status. The ability of the the college to deliver its services. The ability to recruit students and patients,	Governance ongoing action plan and internal QA processes. External auditing processes e.g. GOsC, University and OfS	High (4)	Unlikely (1)	High (4)				SP 1. & 1.2	Low	
2	Failure to provide the technological resources to support course delivery and data collection as it applies to the College moving forward.	Inability to deliver educational packages in the creative and flexible way required to meet future needs and trends. Inability to provide the administrative tasks to support the College workforce and business expectations.	•Electronic hand-in system • Student only laptops. •Use of on line platforms to contact, support and deliver services to students and staff. • Electronic services to collet data for the college community.	High (4)	Possible (2)	High (8)	Monitor impact of increased online delivery (blended lerning) 2024 -25	SLT/AMMNT		SP 1.3	Medium	
3	Failure to provide administrative, learning and clinical spaces that are resourced and monitored to meet health & safety requirements and are deemed fit for purpose.	Student and patient recruitment & continuity. The ability of the the college to deliver its Education and services as legislated by external agents.	Long term leases/ SLAs, monitored ongoing alternative options and annually reviewed. Risk Assessments monitored through a rigorous internal quality assurance porcess and committee. Health and Safety external audit. External QA agencies.	High (4)	Possible (2)	High (8)					Low	
4	Failure to recruit & retain a viable and appropriately skilled human resouce base, able to meet the business needs of the institution	Staff quality and numbers. Ability to deliver, develop and embedd curriculum. Failure to provide the administrative services required for business continuity.	Pay structure, appraisal system with staff development. Flexible employment to encourage part time staff.	High (4)	Possible (2)	High (8)				1.5	Low	
5	Failure of Estates strategy in planning and meeting space requirements for classroom, clinic and administration across the campuses	Student and patient recruitment & continuity. The ability of the the college to deliver its Education and services as legislated by external agents. (Infrastructure Working Group)IWG	Long term leases/ SLAs, monitored ongoing alternative options and annually reviewed. Risk Assessments monitored through a rigorous internal quality assurance porcess and committee. Health and Safety external audit. External QA agencies.	High (4)	Possible (2)	High (8)				SP 1.6	Low	
6	Failure to meet and manage human resources. (patients for the clinics and student numbers as they apply to teaching & clinical spaces)	Student and patient recruitment & continuity. The ability of the the college to deliver its Education and services as legislated by external agents.	Marketing strategy and recruitment processes for patients and students- actively monitored annually. Progress reported back via College's Internal Quality Processes (Committee Structures)	High (4)	Possible (2)	High (8)	Ongoing number monitoring (monthly data againt targets to CSC) Monitor new marketing strategy against KPIs 2024-25			SP 1.6	Medium	Nov 2024 Data / performance shared formally at CSC meeting

The Collegeo Of Osteopaths
Risk Assessment
16/01/20257. Risk Assessments - Strat Plan Oct 2024.xlsx

O:\Human Resources\Kerrie (confidential work)\MIsc PH\2024-5 academic year\Risk Management 2024 -25\RAs 2024 -25\7. Risk Assessments - Strat Plan Oct 2024.xlsx

	Risk Assessment									

Area	SP - Strategic Plan	Date	01/11/2024	Assessment number	SP/02

Staff responsible	SQM & HoE	Review Date	01/11/2025

Task	**OBJECTIVE TWO - SUPPORT & ENGAGEMENT**

Risk Number	Risk Description	Effects/ Impact on	Existing controls	Risk Rating			Further action required/ action pla	By Whom	Date	Cross reference categories	Risk with Mitigation	Update
				Impact (I)	Likelihood (L)	Rating						
1	Failure to produce an effective communication strategy for all key stake holders, students, staff and patients.	Recruitment and retention of all human resources within the college. Consistent and up to date communication to all external agencies and stakeholders. The College's professional standing with external bodies including regulators and the Higher Education community	The strategic plan 2021 - 2026. Our communication strategy and action plan.	Medium (3)	Possible (2)	Medium (6)				SP 2.1	Low	
2	Failure to deliver and maintain Staff Development opportunities	Quality of workforce, staff turnover and ability for the College to deliver its services. Loss of credibility within the sector.	Appraisal Process & monitoring with staff development needs identified. College link to H.E. partner institutions & their staff development packages. College internal training eg staff development day/ section training agendas.	Medium (3)	Possible (2)	Medium (6)				SP 2.2	Low	
3	Failure to address and provide appropriate student support	Loss of professional and educational credibility with GOsC, OFS & validating H.E institution	Middle management student support roles (cross-college and specialist support). Hardship loans and process to financially support e.g. LSAs.	Medium (3)	Possible (2)	Medium (6)				SP 2.3	Low	

Risk Assessment

Area	SP - Strategic Plan		Date	01/11/2024	Assessment number	SP/O3
Staff responsible	SQM & HoE		Review Date	01/11/2025		
Task						

OBJECTIVE THREE - TEACHING & LEARNING

Risk Number	Risk Description	Effects/ Impact on	Existing controls	Risk Rating			Further action required/ action plan	By Whom	Date	Cross reference categories	Risk with Mitigation	Update
				Impact (I)	Likelihood (L)	Rating						
1	Failure to appropriately manage the programme and delivery in line with University regulations, sector expectations and professional body benchmarks	Loss of 'currency' in the market place due to; loss of course validation & registration. Loss of College business including the clinical service to the community .	Monitoring via internal QA (committee structure) externally by GOsC, university, external examiners and OFS. Systems and processes to respond to student, staff and patient input.	High (4)	Possible (2)	High (8)				SP 3.1 -3.5	Low	
2	Failure to meet the assessment requirements for the delivery of the programme and have strategies in place to address to address unforseen/environmental changes outside of the institutions control e.g. the pandemic / economic crisis	Loss of 'currency' in the market place due to; loss of course validation, registration and College business including the clinical service to the community .	Monitoring via internal QA (committee structure) externally by GOsC, university and external examiners and OFS. Systems and processes to respond to student, staff and patient input.	High (4)	Possible (2)	High (8)				SP 3.2	Low	
3	Failure to provide the support required to enhance & recognise the achievement of students on the course. Including recognising value added	Loss of professional and educational credibility with GOsC, OFS & validating H.E institution.	Monitoring via internal QA (committee structure) externally by GOsC, university and external examiners and OFS. Systems and processes to respond to student, staff and patient input.	Medium (3)	Possible (2)	Medium (6)				SP 3.3	Low	
4	Failure to monitor clinical attainment & monitor students professional progression on the programme to ensure the development of competent and well-rounded professionals	Loss of professional and educational credibility with GOsC, OFS & validating H.E institution.	Monitoring via internal QA (committee structure) externally by GOsC, university and external examiners and OFS. Systems and processes to respond to student, staff and patient input.	High (4)	Medium (2)	High (8)				SP 3.3 & 3.4	Low	
5	Enhancement of resources									SP 1.4		

Risk Assessment

Area	SP - Strategic Plan		Date	01/11/2024		Assessment number	SP/O4
Staff responsible	SQM & HoE		Review Date	01/11/2025			
Task			**OBJECTIVE FOUR - Access & Progression**				

Risk Number	Risk Description	Effects/ Impact on	Existing controls	Impact (I)	Likelihood (L)	Rating	Further action required/ action plan	By Whom	Date	Cross reference categories	Risk with Mitigation	Update
					Risk Rating							
1	Failure to effectively manage the marketing requirements of the College (planning strategy & day-today management)	College business (educational and clinical services) Resources eg patients for college clinics and students for the College's programmes.	Marketing strategy, Strategic plan, external marketing agents. (Currently day-to-day management i.e. social media & website updates are outsourced)	High (4)	Possible (2)	High (8)	Induction and monitoring of new marketing lead to work with KPI of new Marketing plan			SP 4.1	Low	New role recruited to start Jan 2025
2	Failure to provide incentives to support access to the College and increase the diversity of of those able to study and achieve on the programme	Student and patient recruitment & continuity. College's standing within the H.E. community. Failure to attract the College's niche market students.	College student Marketing strategy. Only OEI delivering in the north. Part time flexible delivery, broad criteria for access & student support strategy.	Medium (3)	Possible (2)	Medium (6)				SP 4.2	Low	
3	Failure to include patient feedback into the service and delivery of the programme to enhance patient outcomes and students professional development	Loss of valuable resource and delivery updates to improve service delivery. Loss of touch with service users, possible reputational damage and standing within H.E. and health community.	Communication strategy and Strategic Plan. PM's processes for gaining patient feedback including focus groups and feedback questionnaires.	Medium (3)	Possible (2)	Medium (6)				SP 4.3	Low	
4	Failure to provide progression opportunities for graduates and enhance the College's professional standing in the profession and to the public.	Lost opportunity to market the college, support graduate professional development and the profession. Support the College's planned postgraduate offer	Subsidised CPD activities, clinic marketing on College website, social media activity and communication with alumni.	Medium (3)	Possible (2)	Medium (6)	Continue to develop alumni relationships through sheduled events and activities	SLT/MMNT		SP 4.4	Medium	**Dec 2024 Task included in new osteopathic Lead role to start Jan 2025**