

Risk Assessment

Area	SP - Strategic Plan	Date	16.06.22	Assessment number	SP/O1
Staff responsible	P	Review Date	16.06.23		

Low
Medium
High

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 Launch in 2021 and successful monitor from this point the new Committee structure for the College	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 action plan and internal QA processes. External auditing processes e.g. GOSC, University and OFS	High (4)	Unlikely (1)	High (4)	Feedback according to action plan.	BoG and SMT	October 2021 December 2021 March 2022	SP 1. & 1.2	Low	October deadlines met.
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.	<ul style="list-style-type: none"> •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)	Monitoring of Operoo and Telehealth	SMT	July 2022	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 resource 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 update, appraisal system with staff development. Flexible employment to encourage part time staff.	High (4)	Possible (2)	High (8)	Current research into enhancement methods for part time workers (Perkbox.)	Bursar and Principle	April 2022	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.	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)	Infrastructure Working Group agenda (Stoke)	IWG	July 2022	SP 1.6	Medium	
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 Colleges Internal Quality Processes (Committee Structures)	High (4)	Possible (2)	High (8)	<ul style="list-style-type: none"> •Recruit internal marketing staff (new structure.) •Decide and include consultancy package required according to marketing cycle. 	SMT	•Jan 2022 •June 2022	SP 1.6	Medium	

Risk Assessment

Area	SP - Strategic Plan	Date	16.06.22	Assessment number	SP/02
Staff responsible	REG & HoE	Review Date	16.06.23		

Low
Medium
High

Task	OBJECTIVE TWO - SUPPORT & ENGAGEMENT
------	---

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 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)	Monitoring of communication strategy and Strategic Plan	C&SC (BoG and SMT)	July 2022	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	16.06.22	Assessment number	SP/O3
Staff responsible	REG & HoE	Review Date	16.06.23		
Task	OBJECTIVE THREE - TEACHING & LEARNING				

Low
Medium
High

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 1	Low	
2	Failure to meet the assement requirements for the delivery of the programme and have strategies in place to address to address unforeseen/environmental changes outside of the institutions control e.g. the pandemic	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 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	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)					Low	
5	Enhancement of resources									Cross reference 1.4		

Risk Assessment

Area: SP - Strategic Plan Date: 16.06.22 Assessment number: SP/04

Staff responsible: REG & HoE Review Date: 16.06.23

Task: OBJECTIVE FOUR - Access & Progression



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 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)	Recruit to new internal marketing posts to remove outsourcing need for day-to-day elements.	SMT	January 2022	SP 4.1	Low	
2	Failure to provide incentives to support access to the College and increase the diversity 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. Processes for gaining patient feedback including annually scheduled focus groups and feedback questionnaires.	Medium (3)	Possible (2)	Medium (6)	Gather feedback from cross site focus groups and internal QA processes and produce and monitor resulting action plan.			SP 4.3	Medium	
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)	1.Develop current alumni relationships & gather PG wish list. 2. Engage with University on PG offer			SP 4.4	Medium	