



**REPORT TO:** HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD – 18 FEBRUARY 2026

**REPORT ON:** STRATEGIC RISK MANAGEMENT ARRANGEMENTS

**REPORT BY:** CHIEF OFFICER

**REPORT NO:** DIJB7-2026

## **1.0 PURPOSE OF REPORT**

1.1 To submit the revised IJB Strategic Risk Management Framework for approval, and to update the Integration Joint Board on work completed to revise the content of the IJB's Strategic Risk Register and associated reporting arrangements.

## **2.0 RECOMMENDATIONS**

It is recommended that the Integration Joint Board (IJB):

2.1 Note the work undertaken by the Senior Management Team to review arrangements for strategic risk management.

2.2 Approve the revised Dundee IJB Strategic Risk Management Framework.

## **3.0 FINANCIAL IMPLICATIONS**

3.1 None

## **4.0 MAIN TEXT**

4.1 In September 2025, the IJB's Performance and Audit Committee noted work being undertaken by the Senior Management Team to review arrangements for recording, managing and reporting strategic risk across the IJB and Health and Social Care Partnership (article XII of the minute of the Performance and Audit Committee of the Integration Joint Board held on 24 September 2025 refers). This work has taken account changes in the IJBs own needs since its establishment in 2016, as well as recommendations made by Internal Audit and changes made in the corporate risk management systems in place within NHS Tayside and Dundee City Council. It has also directly addressed a number of outstanding recommendations and actions within the IJB's Governance Action Plan relating to risk management (with a focus on risk appetite, reporting and escalation).

4.2 As part of the review process the following actions have been completed:

- The IJB's Strategic Risk Management Framework has been fully updated. This has been informed by the risk management arrangements already in place within Perth and Kinross IJB. The revised Risk Management Framework is attached as Appendix 1 and is submitted to the IJB for approval.
- The Strategic Risk Register has been fully updated to ensure it is relevant and accurate. Risk categories and risk appetite, set by the IJB in 2025, have been incorporated into the

register (and also reporting formats – see below). The revised content is incorporated within the Strategic Risk Management report template attached as Appendix 2.

- The report template used to provide assurance reports on strategic risk management to the Performance and Audit Committee has been fully revised (again, based on arrangements already in place within Perth and Kinross IJB). This is attached as Appendix 2 and will be implemented from May 2026 onwards.
- A revised format for risk assessment section of IJB reports has been developed and will be implemented from March 2026 onwards. This is in response to a recommendation contained within the 2024/25 Dundee City IJB Internal Audit Annual Report (available at: [https://www.dundeecity.gov.uk/reports/agendas/ijb180625\(sup\).pdf](https://www.dundeecity.gov.uk/reports/agendas/ijb180625(sup).pdf)) which set out the need for IJB reports to be explicitly linked to strategic risks. The revised format will support report authors to clearly link and articulate the impact of report content to risks within the IJB's Strategic Risk Register. The revised format will be implemented from March 2026.

4.3 Taken together, these changes and improvements address six of eight actions in the IJB's Governance Action Plan that focus on strategic risk management. Work is continuing to address the final actions that relate to the development of an assurance plan for strategic risks that are shared with the corporate bodies (NHS Tayside and Dundee City Council) and further enhancement of reporting arrangements against the Risk Management Action Plan. An update on these aspects will be submitted to the Performance and Audit Committee in May 2026.

## 5.0 POLICY IMPLICATIONS

5.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

## 6.0 RISK ASSESSMENT

|  |  |
|--|--|
| <b>Risk 1 Description</b>  | The IJB does not have in place adequate risk management arrangements to support effective operation of governance functions.   |
| <b>Risk Category</b>   | Governance   |
| <b>Inherent Risk Level</b>   | Likelihood 3 x Impact 4 = Risk Scoring 12 (which is High risk level)   |
| <b>Mitigating Actions</b><br>(including timescales and resources ) | <ul style="list-style-type: none"> <li>• Strategic Risk Management Framework has been fully updated.</li> <li>• Strategic Risk Register has been fully updated and will now be maintained via the Health and Social Care Partnership Core Management Team.</li> <li>• The format for reporting to the Performance and Audit Committee has been fully update and will be utilised from May 2026 onwards.</li> <li>• A revised format for risk assessment section of IJB reports has been developed and will be implemented from March 2026 onwards.</li> <li>• Further work is planned to develop the interface for assurance regarding risk management of strategic risks shared with other partners, particularly NHS Tayside and Dundee City Council.</li> </ul> |
| <b>Residual Risk Level</b>   | Likelihood 2 x Impact 2 = Risk Scoring 4 (which is Moderate risk level)  |
| <b>Planned Risk Level</b>  | Likelihood 2 x Impact 2 = Risk Scoring 3 (which is Moderate risk level)  |
| <b>Approval recommendation</b>                                     | Given the impact of mitigating actions to reduce the level of risk as far as is reasonably practical, it is recommended that the risk should be accepted.  |

## 7.0 CONSULTATIONS

7.1 The Chief Finance Officer, Heads of Service Health and Community Care and the Clerk were consulted in the preparation of this report. The range of wider consultation and engagement is detailed in the Integrated Impact Assessment.

## 8.0 DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

| Direction Required to Dundee City Council, NHS Tayside or Both | Direction to:                          |   |
|--|--|---|
|  | 1. No Direction Required               | X |
|  | 2. Dundee City Council                 |   |
|  | 3. NHS Tayside                         |   |
|  | 4. Dundee City Council and NHS Tayside |   |

## 9.0 BACKGROUND PAPERS

9.1 None

Dave Berry  
Chief Officer

DATE: 30 January 2026

Kathryn Sharp  
Acting Head of Strategic Services

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**Dundee Integration Joint Board**  
**Strategic Risk Management Framework**  
**February 2026**

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## Introduction

Our ambition is that people in Dundee will have the best possible health and wellbeing, supported by health and social care services that:

- Help to reduce inequalities in health and wellbeing that exist between different groups of people.
- Are easy to find out about and get when people need them.
- Focus on helping people in the way that they need and want.
- Support people and communities to be healthy and stay healthy throughout their life through prevention and early intervention.

The [Plan for Excellence in Health and Social Care in Dundee](#) sets the strategic shifts that the IJB wishes to achieve to deliver this ambition. Effective risk management is an essential part of the arrangements that support the delivery of the plan. It allows the IJB to better understand risks that are or could impact on delivering their strategic shifts and ambitions, allowing them to make informed decisions, make best use of public resources, and better adapt to the challenges they experience both within the health and social care system, but also the wider operating environment.

All members of the IJB and supporting officers have an important role to play in establishing, implementing and maintaining systems for identifying, assessing and managing risks. The Tayside Risk Management Strategy provides a regional framework for strategic risk management, setting out roles and agreed arrangements to support the effective and consistent management of risk across Tayside. Aligned to the Tayside Strategy, the Dundee IJB Strategic Risk Management Framework provides a guide for proactive risk identification, assessment and management at a local level.

## Process

The risk management process is a continuous cycle that supports Dundee IJB to identify, assess and manage threats and opportunities impacting on their plan and ambition. It supports the IJB to assess and manage uncertainty and informs decision-making, all with the aim of ensuring the ambition and strategic shifts are delivered effectively.



### 1. Identify Risks

Recognise potential risks arising from strategic planning, operational activities, and engagement with stakeholders. This includes capturing threats and opportunities that could affect objectives.

### 2. Analyse Risks

Assess the *likelihood* and *impact* of each identified risk using agreed scoring criteria or a risk matrix. This ensures consistent comparison across the organisation.

### 3. Evaluate Risks

Compare analysed risks against the organisation's **risk appetite** to determine which risks require action and prioritisation.

### 4. Treat Risks

Decide on the most appropriate response—such as mitigating, reducing, transferring, accepting, or avoiding the risk—and implement proportionate control measures.

### 5. Monitor & Review

Continually review risk status, control effectiveness, and any changes in context. Maintain up-to-date registers and ensure regular reporting.

## **6. Communicate & Consult**

Ensure transparent communication and collaborative understanding of risks across partners and governance structures. Engagement supports coordinated, informed responses.

### **Context for Strategic Risk Management**

The starting point for strategic risk management is developing a clear understanding of what the IJB aims to achieve and how this fits into the wider environment, including the whole system of health and social care. Strategic risk management focuses on managing threats that might disrupt or delay the delivery of the IJB's ambition, priorities and strategic shifts. It can also support the IJB to maximise opportunities that might help or accelerate the delivery of their strategic plan.

Linking strategic risk management to the [Plan for Excellence in Health and Social Care in Dundee](#) provides a framework for prioritising risks, making decisions and allocating resources; making sure that risk management activity is focused on the areas that matter the most.

# Dundee Integration Joint Board

## Plan for excellence in health and social care in Dundee - 2023-2033

### Ambition

The Strategic Commissioning Framework will help the IJB reach their Ambition:

**People in Dundee will have the best possible health and wellbeing. They will be supported by health and social care services that:**



Help to reduce inequalities in health and wellbeing that exist between different groups of people.



Are easy to find out about and get when they need them.



Focus on helping people in the way that they need and want.



Support people and communities to be healthy and stay healthy throughout their life through prevention and early intervention.

### Values

- Human rights
- Equality and fairness
- Whole life
- Collaborative working
- Innovative
- Compassionate
- Transparent
- Empowering
- Sustainability

### Strategic Priorities



#### Inequalities

**Support where and when it is needed most.**

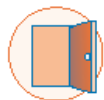
Targeting resources to people and communities who need it most, increase life expectancy and reduce differences in health and wellbeing.



#### Self Care

**Supporting people to look after their wellbeing.**

Helping everyone in Dundee look after their health and wellbeing, including through early intervention and prevention.



#### Open Door

**Improving ways to access services and supports.**

Making it easier for people to get the health and social care supports that they need.



#### Planning Together

**Planning services to meet local need.**

Working with communities to design the health and social care supports that they need.



#### Workforce

**Valuing the workforce.**

Supporting the health and social care workforce to keep well, learn and develop.



#### Working together

**Working together to support families.**

Working with other organisations in Dundee to prevent poor health and wellbeing, create healthy environments, and support families, including unpaid carers.

### Equality Outcomes

- 1 Improving the accessibility of information published by the IJB.
- 2 Increasing ways to listen, hear and learn what matters to people.
- 3 Finding ways to make sure IJB membership is diverse and reflects the overall population of Dundee.
- 4 IJB contributes to an improved culture within the workforce to actively challenge discrimination.

### Strategic Enablers

- Financial resources** £ funds provided to the IJB by Dundee City Council and NHS Tayside, as well as direct funding to other health and social care partners from the Scottish Government and other organisations.
- Health and social care workforce** employed by Dundee City Council, NHS Tayside and the third and independent sector.
- Property** owned by Dundee City Council, NHS Tayside and the third and independent sector.
- Digital** IT and technology provided by Dundee City Council and NHS Tayside, including IT equipment and systems and resources used to provide care and for people to look after their own health and wellbeing.

### How we will deliver changes

Dundee Health and Social Care Partnership Annual Delivery Plan

IJB Resource Framework

IJB Performance Framework

Dundee City Plan

To view the Strategic Commissioning Framework and further information please go to: [dundeehscp.com/planning-excellence-health-and-social-care](https://dundeehscp.com/planning-excellence-health-and-social-care)

## Risk Identification

Whilst anyone across the IJB and Health and Social Care Partnership can identify a potential strategic risk, the Core Management Team is responsible for the assessment of the risk and population of the Strategic Risk Register. The Core Management Team will ensure:

- **Strategic alignment:** identified risks are relevant to the IJB's overarching ambition, priorities and strategic shifts.
- **Comprehensive overview:** identified risks reflect all of the relevant aspects of the organisation and the external environment.
- **Prioritisation:** identified risks are assessed and prioritised based on their potential to disrupt or delay the delivery of the strategic plan.
- **Resource Allocation:** allocated resources effectively to mitigate risks.

In undertaking these responsibilities, the Core Management Team will also engage with the wider workforce to ensure that the identification, assessment, recording and management of risk is collaborative, inclusive and participative.

There are five different categories of risk that the IJB might experience. Each strategic risk will be considered under one of these categories (best fit):

|  |   |
|--|---|
| <b>Compliance / Legislative / Regulatory</b> | Risks relating to adherence to statutory duties, legislation, and regulatory frameworks governing health and social care services.                  |
| <b>Reputational</b>                          | Risks that could damage public confidence, stakeholder trust, or the Partnership's standing due to adverse publicity or perceived service failures. |
| <b>Performance / Quality</b>                 | Risks impacting the ability to deliver safe, effective, person-centred care and meet agreed performance standards.                                  |
| <b>Financial</b>                             | Risks to financial sustainability and resource allocation that could compromise service delivery or transformation plans.                           |
| <b>Workforce</b>                             | Risks associated with workforce capacity, capability, and wellbeing that affect the Partnership's ability to meet demand and strategic objectives.  |

Describing the risk clearly helps to ensure that risks are fully understood. Identifying the cause and effect of each risk supports the identification of effective risk management actions. Within the strategic risk register this is structured in the following way:

| Risk Description                  | Risk Category |
|-----------------------------------|---------------|
| There is a risk of                |               |
| Key Current Contributing Factors: |               |
| Resulting in:                     |               |

The Core Management Team are the risk owners for all strategic risks.

## Risk Analysis

Once risks have been identified their likelihood (or probability) and impact will be scored based on an analysis of how the risk will impact on the achievement of the IJB’s ambition, strategic priorities and strategic shifts. The overall risk scoring is determined by multiplying an individual likelihood score with an individual impact score.

$$\text{likelihood} \times \text{impact} = \text{risk score}$$

Through the risk management process risks are scored three times:

|                      |   |
|----------------------|---|
| <b>Inherent Risk</b> | The level of risk before anything has been done to manage or reduce it. This is the level of true exposure if no controls were in place.                  |
| <b>Residual Risk</b> | The current level of risk, taking into account controls or actions in place. Shows how effective current controls are — and whether more action is needed |

|                     |  |
|---------------------|--|
| <b>Planned Risk</b> | The predicted level of risk after all planned actions are implemented. |
|---------------------|--|

Risk likelihood is scored as follows:

| <b>CRITERIA FOR EVALUATING LIKELIHOOD</b> |  |                        |  |
|---|--|------------------------|--|
| <b>Likelihood</b>                         | <b>Description</b>   | <b>Numerical Value</b> | <b>Plain English</b>                                       |
| <b>1</b>                                  | Remote – where an occurrence is improbable or very unlikely                          | 1 in 20,000            | Never happened and doubt it will                           |
| <b>2</b>                                  | Unlikely – where an occurrence is possible but the balance of probability is against | 1 in 2,000             | Has happened before but unlikely                           |
| <b>3</b>                                  | Possible – where it is likely or probably that an incident will occur                | 1 in 200               | Will probably happen at some point in the future           |
| <b>4</b>                                  | Likely – where it is highly probable that an incident will occur                     | 1 in 20                | Has happened in recent past and will probably happen again |
| <b>5</b>                                  | Almost certain – where it is certain that an event will occur                        | 1 in 2                 | It's already happening and will continue to do so          |

| <b>RISK IMPACT ASSESSMENT</b> |  |  |   |  |   |
|-------------------------------|--|--|---|--|---|
| <b>Impact</b>                 | <b>Compliance /<br/>Legislative /<br/>Regulatory</b>   | <b>Reputational</b>  | <b>Performance /<br/>Quality</b>  | <b>Financial</b>   | <b>Workforce</b>  |
| <b>1<br/>Insignificant</b>    | No material impact; minor non-compliance easily rectified, no regulatory action.                             | No material impact; minor negative feedback, easily managed, no media or stakeholder attention                       | No material impact; minor service delivery shortfall, easily managed, no effect on outcomes or inspection results.  | No material financial impact; minor overspend easily managed within existing budgets, no effect on strategic priorities.                         | No material impact; minor staff absence or issue, easily managed, no effect on strategic priorities or staff wellbeing.   |
| <b>2<br/>Minor</b>            | Minor breach; may result in informal warning or advice, no significant consequences.                         | Minor adverse publicity or stakeholder concern; may result in informal queries, no lasting consequences.             | Minor service delivery issue; may require minor adjustment, no significant consequences for performance standards or outcomes.                              | Minor overspend or funding shortfall; may require minor budget adjustment, no significant consequences for strategic priorities.                 | Minor workforce issue (e.g. isolated absence, minor recruitment delay); may require minor adjustment, no significant consequences for strategic priorities or staff morale.         |
| <b>3<br/>Moderate</b>         | Noticeable breach; may require corrective action, possible regulatory scrutiny, limited reputational impact. | Noticeable negative media coverage or stakeholder dissatisfaction; may require formal response or corrective action. | Noticeable service delivery shortfall or failure to meet agreed standards; may require corrective action, limited impact on outcomes or inspection results. | Noticeable budget overspend or funding reduction; may require corrective action, limited impact on strategic priorities or transformation plans. | Noticeable workforce issue (e.g. increased turnover, skills gap, moderate staff absence); may require corrective action, limited impact on strategic priorities or staff wellbeing. |

|                      |  |  |   |   |  |
|----------------------|--|--|---|---|--|
|                      |  |  |   |   |  |
| <b>4<br/>Major</b>   | Significant breach; formal investigation, possible sanctions, reputational damage, service disruption.           | Significant adverse publicity, loss of stakeholder trust, formal investigation, or public criticism; requires coordinated management response.                     | Significant service delivery failure or inability to meet national health and social care outcomes; requires coordinated management response, potential disruption to service delivery. | Significant budget overspend, funding reduction, or inability to achieve savings targets; requires coordinated management response, potential disruption to strategic priorities. | Significant workforce issue (e.g. high turnover, staff burnout, industrial action); requires coordinated management response, potential disruption to delivery of strategic priorities and staff wellbeing.  |
| <b>5<br/>Extreme</b> | Severe breach; prosecution, substantial fines, loss of licence, major service failure, severe reputational harm. | Severe, sustained reputational harm; national media attention, loss of public confidence, regulatory intervention, or long-term damage to organisational standing. | Severe service failure; major impact on ability to deliver statutory services, poor inspection results, or inability to meet key outcomes.  | Severe financial breach; substantial overspend, loss of key funding, major service failure, or inability to deliver statutory services and strategic priorities.                  | Severe workforce issue (e.g. widespread burnout, mass resignation, prolonged industrial action); major service failure, inability to meet demand, severe impact on staff wellbeing and strategic priorities. |

Once a risk has been scored using the above system, it will be graded as shown below:

|            | LOW RISK | MODERATE RISKS | HIGH RISK | EXTREME RISK |    |    |
|------------|----------|----------------|-----------|--------------|----|----|
| LIKELIHOOD | 5        | 5              | 10        | 15           | 20 | 25 |
|            | 4        | 4              | 8         | 12           | 16 | 20 |
|            | 3        | 3              | 6         | 9            | 12 | 15 |
|            | 2        | 2              | 4         | 6            | 8  | 10 |
|            | 1        | 1              | 2         | 3            | 4  | 5  |
|            | 1        | 2              | 3         | 4            | 5  |    |
|            | IMPACT   |                |           |              |    |    |

Having a quantitative method for defining risks supports the Core Management Team and the IJB to prioritise and monitoring risk management actions.

## Evaluating Risk

**Risk appetite** is the amount of risk that the IJB is willing to seek or accept in the pursuit of its long-term objectives.

Setting risk appetite supports the IJB to:

- Make informed decisions.
- Reduce uncertainty.
- Improve consistency across governance mechanisms and decision-making.
- Support performance improvement.
- Focus on priority areas.
- Inform spending reviews and resource prioritisation.

Dundee IJB has an approved Risk Appetite Statement (Appendix 1). The risk appetite in relation to the five risk categories are shown below:

| Risk Category                         | Risk Appetite |
|---------------------------------------|---------------|
| Compliance / Legislative / Regulatory | Minimal (2)   |
| Reputational                          | Open (4)      |
| Performance / Quality                 | Cautious (3)  |
| Financial                             | Cautious (3)  |
| Workforce                             | Open (4)      |

The three risk appetites in the statement, translate onto the risk scoring matrix as follows:

|            |   | MINIMAL        |       |          |       |         |    |
|------------|---|----------------|-------|----------|-------|---------|----|
| Likelihood | 5 | Almost certain | 5     | 10       | 15    | 20      | 25 |
|            | 4 | Likely         | 4     | 8        | 12    | 16      | 20 |
|            | 3 | Possible       | 3     | 6        | 9     | 12      | 15 |
|            | 2 | Unlikely       | 2     | 4        | 6     | 8       | 10 |
|            | 1 | Rare           | 1     | 2        | 3     | 4       | 5  |
|            |   | Insignificant  | Minor | Moderate | Major | Extreme |    |
|            |   | 1              | 2     | 3        | 4     | 5       |    |
|            |   | Impact         |       |          |       |         |    |

Any residual risk score 12 or above (above the black line) is outwith appetite.

| CAUTIOUS   |   |                |               |       |          |       |         |
|------------|---|----------------|---------------|-------|----------|-------|---------|
| Likelihood | 5 | Almost certain | 5             | 10    | 15       | 20    | 25      |
|            | 4 | Likely         | 4             | 8     | 12       | 16    | 20      |
|            | 3 | Possible       | 3             | 6     | 9        | 12    | 15      |
|            | 2 | Unlikely       | 2             | 4     | 6        | 8     | 10      |
|            | 1 | Rare           | 1             | 2     | 3        | 4     | 5       |
|            |   |                | Insignificant | Minor | Moderate | Major | Extreme |
|            |   |                | 1             | 2     | 3        | 4     | 5       |
|            |   |                | Impact        |       |          |       |         |

Any residual risk score 16 or above (above the black line) is outwith appetite.

| OPEN       |   |                |               |       |          |       |         |
|------------|---|----------------|---------------|-------|----------|-------|---------|
| Likelihood | 5 | Almost certain | 5             | 10    | 15       | 20    | 25      |
|            | 4 | Likely         | 4             | 8     | 12       | 16    | 20      |
|            | 3 | Possible       | 3             | 6     | 9        | 12    | 15      |
|            | 2 | Unlikely       | 2             | 4     | 6        | 8     | 10      |
|            | 1 | Rare           | 1             | 2     | 3        | 4     | 5       |
|            |   |                | Insignificant | Minor | Moderate | Major | Extreme |
|            |   |                | 1             | 2     | 3        | 4     | 5       |
|            |   |                | Impact        |       |          |       |         |

Any residual risk score of 25 (above the black line) is outwith appetite.

## Treating the Risk

Based on risk scores and appetite there are six response options available to the IJB and Core Management Team:

|               |  |
|---------------|--|
| <b>Accept</b> | Acknowledge that the risk exists, but decide not to take any action.<br><br>This is appropriate for low-impact, low-probability risks where the cost of mitigation outweighs the potential benefit.  |
| <b>Avoid</b>  | Remove the risk by deciding not to proceed with an activity.<br><br>For example, if a particular project is very high risk and the risk cannot be mitigated it might be decided to cancel the project. Alternatively, the decision may be made to carry out the activity in a different way. |
| <b>Reduce</b> | Identify mitigating actions or controls to reduce risk.<br><br>These actions should be monitored on a regular basis to ensure that they are effective. Mitigating actions, once in place, will become control measures for the risk.   |

|                 |  |
|-----------------|--|
| <b>Transfer</b> | Another party bears or shares all or part of the risk.<br><br>For example, this could include transferring out an area of work or by using insurance.                              |
| <b>Share</b>    | Distribute the risk among multiple parties.<br><br>This often involves partnerships, joint ventures, or collaborations where the responsibility (and impact) of a risk is divided. |
| <b>Enhance</b>  | Take account to increase the likelihood or positive impact of a desirable outcome.   |

## Risk Reporting, Monitoring and Governance

Regular risk reporting and monitoring ensures ongoing oversight and an up-to-date understanding of the risk environment. It provides timely and reliable information about risk exposure so that well-informed decisions can be made. As risk owners, it ensures the Core Management Team's accountability, in essence, that they are fulfilling their roles and responsibilities and ensures that the approach is dynamic and responsive.

Therefore, all identified risks, and any associated actions must be monitored and reviewed on an ongoing basis. The frequency of reporting and monitoring will depend on the priority of the risk. This is irrespective of whether the risk is within or outwith appetite.

The Core Management Team is responsible for the day-to-day maintenance and monitoring of the strategic risk register, including making key decisions about how to manage these risks. They will consider it at each of their monthly meetings, recording their decisions. This will include a focused review of specific risks at a minimum frequency as set-out below:

| <b>Risk Level and Score</b> | <b>Frequency of Core Management Team Review</b> |
|-----------------------------|---|
| <b>Low Risks</b>            | As a minimum annually                           |
| <b>Moderate Risks</b>       | As a minimum 6-monthly                          |
| <b>High Risk</b>            | As a minimum quarterly                          |
| <b>Extreme Risks</b>        | As a minimum 2-monthly                          |

Regular consideration and review of risks by the Core Management Team will inform strategic risk register reports to the IJB's Performance and Audit Committee.

The Performance and Audit Committee's has delegated responsibility from the IJB for reviewing the adequacy and effectiveness of the systems and processes in place to manage strategic risks. A strategic risk register report will be submitted to every meeting of the Performance and Audit Committee (four times per year) and an annual

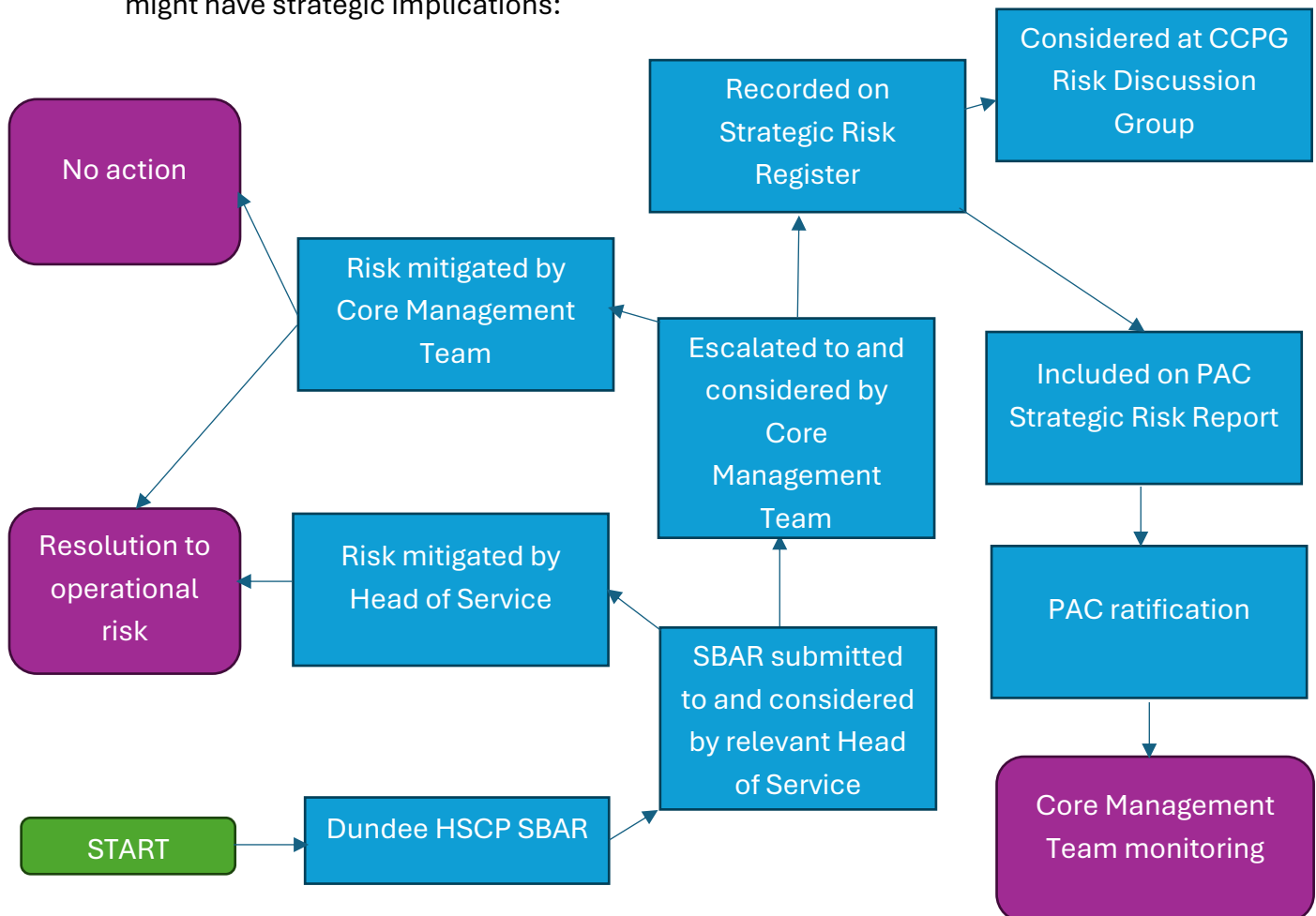
report regarding risk management arrangements will also be submitted directly to the IJB.

The IJB’s Chief Internal Auditor provides an objective assessment of the IJB’s internal controls and risk management process. They may also make recommendations regarding improvements required to improve arrangements.

The Clinical Care and Professional Governance Risk Discussion Group facilitates the interface between the strategic risk register of the IJB and the operational risk register of the Health and Social Care Partnership. This can include identifying operational risks that require to be escalated, as well as reviewing operational risk on the basis of changes made to the IJB strategic risk register by the Core Management Team.

## Escalation

The process below provides a structured approach to escalating operational risks that might have strategic implications:



## Appendix 1 - Dundee IJB, Risk Appetite Statement

### Introduction

Risk appetite is an essential part of effective governance and strategic commissioning with the IJB. By defining and regularly reviewing its risk appetite, the IJB can make informed decisions that align with its ambition and strategic priorities. Risk appetite establishes a clear threshold for risk tolerance, which guides decision-making processes. Risk appetite is the level of risk that the IJB is willing to seek or accept in pursuit of its long-term objectives, and before any action is determined to be necessary in order to reduce the risk.

### Risk Categories and Appetites

|                                       | Avoid | Minimal | Cautious | Open  | Willing |
|---------------------------------------|-------|---------|----------|-------|---------|
|                                       | 0-5   | 6-10    | 11-15    | 16-20 | 21-25   |
| Compliance / Legislative / Regulatory |       | MINIMAL |          |       |         |
| Reputational                          |       |         |          | OPEN  |         |
| Performance / Quality                 |       |         | CAUTIOUS |       |         |
| Financial                             |       |         | CAUTIOUS |       |         |
| Workforce                             |       |         |          | OPEN  |         |

| Risk Category                         | Appetite | Category Definition  | Risk Appetite  |
|---------------------------------------|----------|--|--|
| Compliance / Legislative / Regulatory | Minimal  | Risks relating to adherence to statutory duties, legislation, and regulatory frameworks governing health and social care services.   | Want to be very sure Dundee IJB would win any challenge.   |
| Reputational                          | Open     | Risks that could damage public confidence, stakeholder trust, or the Partnership's standing due to adverse publicity or perceived service failures. Examples: Negative media coverage, stakeholder dissatisfaction, failure to deliver on strategic commitments. | Appetite to take decision which may expose the Dundee IJB to additional scrutiny, but only where appropriate steps have been taken to minimise exposure. |

| Risk Category         | Appetite | Category Definition  | Risk Appetite   |
|-----------------------|----------|--|---|
| Performance / Quality | Cautious | Risks impacting the ability to deliver safe, effective, person-centred care and meet agreed performance standards.<br>Examples: Service delivery shortfalls, failure to meet national health and social care outcomes, poor inspection results.      | Willing to take some risk in relation to performance, including mandatory targets, standards, benchmarking ranking or the quality of care and support /service user outcomes that will offer potential increased benefits to staff, service users and the organisation. Want to be reasonably sure performance standards, clinical or professional practice are not breached. |
| Financial             | Cautious | Risks to financial sustainability and resource allocation that could compromise service delivery or transformation plans.<br>Examples: Budget overspends, funding reductions, inability to achieve savings targets.                                  | Prepared to accept the potential for some variance in budget lines. Value and benefits considered, not just cheapest price. Resources allocated in order to capitalise on opportunities.  |
| Workforce             | Open     | Risks associated with workforce capacity, capability, and wellbeing that affect the Partnership's ability to meet demand and strategic objectives.<br>Examples: Recruitment and retention challenges, skills gaps, staff burnout, industrial action. | Innovative in taking risks in relation to Workforce/Staff Engagement that will offer potential higher benefits to staff, service users and the organisation.  |

### Review and Monitoring

The Risk Appetite Statement will be reviewed annually to ensure that it remains reflective of and aligned to the IJB's strategic priorities and the changing risk environment. The review process will consider changes in the internal and external

environment, including changes in legislation, policy and demand. It will include identifying and assessing any emerging risks.

## **Dundee Integration Joint Board**

### **Strategic Risk Register**

**Last updated: 30 January 2026**

**Please refer to Dundee IJB Strategic Risk Management Framework for supporting information regarding risk identification, analysis and evaluation.**



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| Table 1: IJB Strategic Risk Register - Summary View |   |                        |                     |                  |            |          |
|---|---|------------------------|---------------------|------------------|------------|----------|
| Risk Ref.   | Risk Title  | Risk Score No Controls | Risk Score Controls | Appetite         | Risk Level | Movement |
| 1 IJB   | <b>Financial Sustainability</b><br>There is a risk of the IJB being unable to maintain financial sustainability.  | 25                     | 25                  | Outwith appetite | Extreme    |          |
| 2 IJB   | <b>Workforce Capacity</b><br>There is a risk of insufficient capacity and capability within the health and social care workforce to deliver the IJB's strategic priorities and shifts.                    | 16                     | 12                  | Within Appetite  | High       |          |
| 3 IJB   | <b>Property Infrastructure</b><br>There is a risk of the configuration, condition and effective use of property being inadequate to support the delivery of integrated health and social care priorities. | 20                     | 20                  | Outwith appetite | Extreme    |          |
| 4 IJB   | <b>Public Sector Reform</b><br>There is a risk of significant volume and scale of public sector reform, both in the short and long-term.  | 20                     | 16                  | Outwith appetite | Extreme    |          |
| 5 IJB   | <b>Increased Service Demand</b>   | 20                     | 16                  | Outwith appetite | Extreme    |          |

| Table 1: IJB Strategic Risk Register - Summary View |   |                        |                     |                  |            |          |
|---|---|------------------------|---------------------|------------------|------------|----------|
| Risk Ref.   | Risk Title  | Risk Score No Controls | Risk Score Controls | Appetite         | Risk Level | Movement |
|   | There is a risk of unsustainable increased demand for health and social care services and supports due to changing sociodemographic of Dundee's population.                                   |                        |                     |                  |            |          |
| 6 IJB   | <b>External Provider Sustainability</b><br>There is a risk of instability in the market of external providers of health and social care services and supports (third and independent sector). | 16                     | 12                  | Within appetite  | High       |          |
| 7 IJB   | <b>Data Quality</b><br>There is a risk that data quality and availability is insufficient to full assess performance, outcomes and impacts to support whole systems decisions.                | 16                     | 12                  | Within appetite  | High       |          |
| 8 IJB   | <b>Digital Infrastructure</b><br>There is a risk of digital infrastructure being inadequate to support the delivery of modern   | 20                     | 16                  | Outwith appetite | Extreme    |          |

| Table 1: IJB Strategic Risk Register - Summary View |   |                        |                     |                 |            |          |
|---|---|------------------------|---------------------|-----------------|------------|----------|
| Risk Ref.   | Risk Title  | Risk Score No Controls | Risk Score Controls | Appetite        | Risk Level | Movement |
|   | integrated health and social care priorities.   |                        |                     |                 |            |          |
| 9 IJB   | <b>Information Governance</b><br>There is a risk of information governance and security arrangements being inflexible to support the delivery of integrated health and social care priorities.                                    | 16                     | 12                  | Within appetite | High       |          |
| 10 IJB  | <b>Engagement</b><br>There is a risk of the work of the IJB being insufficiently supported and informed by communication and engagement with stakeholders.  | 20                     | 12                  | Within appetite | High       |          |
| 11 IJB  | <b>Whole System Collaboration</b><br>There is a risk of the co-ordination of whole system planning and commissioning being insufficient to enable integration of health and social care services and improve outcomes for people. | 16                     | 12                  | Within appetite | High       |          |

**Table 1: IJB Strategic Risk Register - Summary View**

| <b>Risk Ref.</b> | <b>Risk Title</b> | <b>Risk Score<br/>No Controls</b>           | <b>Risk Score<br/>Controls</b> | <b>Appetite</b> | <b>Risk Level</b> | <b>Movement</b>   |
|------------------|-------------------|---|--------------------------------|-----------------|-------------------|---|
|                  |                   | <b>&lt; &gt; No change in risk exposure</b> |                                |                 |                   | <b>↑ Increase in risk exposure      ↓ Decrease in risk exposure</b> |

| Risk Ref: 1 IJB   |   | Risk Title: Financial Sustainability |   |
|---|---|--------------------------------------|---|
| <b>Residual Score:</b><br>Outwith appetite  | <b>Risk Category:</b><br>Financial                  | <b>Risk Appetite:</b><br>Cautious    |   |
| <b>Risk Response:</b><br>Reduce   | <b>Related to Achievement of Strategic Priority</b> |                                      | For PAC a graphic of the risk matrix showing inherent and residual risk levels and risk appetite will be inserted here. |
| <b>Last Review:</b><br>February 2026  | Inequalities  | X                                    |   |
| <b>Next Review:</b><br>April 2026   | Self-Care   | X                                    |   |
|   | Open Door   | X                                    |   |
|   | Planning Together                                   | X                                    |   |
|   | Workforce   | X                                    |   |
|   | Working Together                                    | X                                    |   |
| <b>Risk Description:</b><br>There is a risk of the IJB being unable to maintain financial sustainability.   |   |                                      |   |
| <b>Key Contributing Factors:</b> <ul style="list-style-type: none"> <li>◆ No provision made for demographic growth within 25/26 budget.</li> <li>◆ Delayed delivery of savings and transformation proposals contained within the 25/26 budget.</li> <li>◆ Ongoing restrictions on public sector funding impacting on budget settlements for Dundee City Council, NHS Tayside and, subsequently, the IJB.</li> </ul>   |   |                                      |   |
| <b>Resulting in:</b> <ul style="list-style-type: none"> <li>◆ Compromised ability to deliver strategic priorities and shifts at scale and pace set out within IJB's Strategic Commissioning Framework.</li> <li>◆ Poorer outcomes for people with health and social care needs, both in the short and long-term.</li> <li>◆ Reputational damage associated with inability to deliver a balanced budget.</li> <li>◆ IJB reserve levels have reduced below that set out within the Reserves Policy.</li> <li>◆ Impact on financial viability of external providers (third and independent sector).</li> <li>◆ Financial risk to Dundee City Council and NHS Tayside associated with risk sharing provisions within the Integration Scheme.</li> </ul> |   |                                      |   |

| <b>Current Mitigating Actions</b>   | <b>Control Type</b>    |
|---|------------------------|
| Financial monitoring systems and controls   | Detective              |
| 2025/26 Financial Recovery Plan   | Corrective             |
| 2026/27 budget development process  | Preventive             |
| 5-Year Financial Framework  | Preventive             |
| Transformation programmes   | Preventive             |
| Financial forecasting and analysis  | Detective              |
| Senior Management Team Budget Delivery Group  | Preventive             |
| Engagement with Council, NHS Tayside, Scottish Government and national networks           | Detective / Preventive |
| Regular financial reporting aligned to management, partners and IJB                       | Preventive             |
| Regular meetings of CFO with NHS Tayside and Dundee City Council Directors of Finance     | Preventive             |
|   |                        |
| <b>Planned Mitigating Actions</b>   | <b>Control Type</b>    |
| Review of the IJB's Strategic Commissioning Plan, and subsequently the HSCP Delivery Plan | Directive              |
|   |                        |
|   |                        |

| Risk Ref: 2 IJB  |   | Risk Title: Workforce Capacity |   |
|--|---|--------------------------------|---|
| <b>Residual Score:</b><br>Within appetite  | <b>Risk Category:</b><br>Workforce                  | <b>Risk Appetite:</b><br>Open  |   |
| <b>Risk Response:</b><br>Reduce and Share  | <b>Related to Achievement of Strategic Priority</b> |                                | For PAC a graphic of the risk matrix showing inherent and residual risk levels and risk appetite will be inserted here. |
| <b>Last Review:</b><br>February 2026   | Inequalities  |                                |   |
| <b>Next Review:</b><br>April 2026  | Self-Care   |                                |   |
|  | Open Door   |                                |   |
|  | Planning Together                                   |                                |   |
|  | Workforce   | X                              |   |
|  | Working Together                                    |                                |   |
| <b>Risk Description:</b><br>There is a risk of insufficient capacity and capability within the health and social care workforce to deliver the IJB's strategic priorities and shifts.  |   |                                |   |
| <b>Key Contributing Factors:</b> <ul style="list-style-type: none"> <li>◆ Complex governance arrangements for the health and social care workforce impacts clarity of leadership and accountability.</li> <li>◆ Financial sustainability challenges necessitate reduction in overall workforce numbers.</li> <li>◆ Inadequate capacity within senior leadership structure to effectively support workforce planning.</li> <li>◆ Inadequate specialist workforce planning capability and capacity, including specialist modelling and projection capability and capacity (service demand and workforce).</li> <li>◆ Inability to access workforce data from individual employers and to collate, analyse and report integrated workforce data (from NHS Tayside, Dundee City Council and commissioned services).</li> <li>◆ Misalignment between health and social care priorities and those of employing organisations (NHS Tayside, Dundee City Council and third and independent sector).</li> <li>◆ Policy and regulatory changes across multiple stakeholders (national, regional and local).</li> <li>◆ Poor communication with stakeholders, including members of the workforce.</li> <li>◆ Resistance to change from stakeholders, including members of the workforce.</li> </ul> |   |                                |   |

|  |                         |
|--|-------------------------|
| <b>Resulting in:</b>   |                         |
| <ul style="list-style-type: none"> <li>◆ Lack of capacity to deliver savings and transformation activity required to implement strategic priorities and shifts, and to support financial sustainability.</li> <li>◆ High absence levels, low morale and poor health and wellbeing within the workforce.</li> <li>◆ Poorer outcomes for people with health and social care needs, both in the short and long-term.</li> </ul> |                         |
| <b>Current Mitigating Actions</b>  | <b>Control Type</b>     |
| Implementation of Health and Care (Staffing) (Scotland) Act 2019   | Detective               |
| Enhanced focus on absence management   | Corrective              |
| Workforce plan, including action plan and risk register  | Directive               |
| Workforce wellbeing actions  | Corrective              |
| Clinical Care Governance Forum   | Detective               |
| Professional Leadership: nursing, AHP and social work  | Preventive              |
|  |                         |
| <b>Planned Mitigating Actions</b>  | <b>Control Type</b>     |
| Actions within the Workforce Plan still to be delivered (Plan, Attract, Employ, Train, Nurture)  | Corrective / Preventive |
|  |                         |
|  |                         |

| Risk Ref: 3 IJB  |   | Risk Title: Property Infrastructure |   |
|--|---|-------------------------------------|---|
| <b>Residual Score:</b><br>Outwith appetite   | <b>Risk Category:</b><br>Performance / Quality      | <b>Risk Appetite:</b><br>Cautious   |   |
| <b>Risk Response:</b><br>Reduce and Share  | <b>Related to Achievement of Strategic Priority</b> |                                     | For PAC a graphic of the risk matrix showing inherent and residual risk levels and risk appetite will be inserted here. |
| <b>Last Review:</b><br>February 2026   | Inequalities  | X                                   |   |
| <b>Next Review:</b><br>April 2026  | Self-Care   | X                                   |   |
|  | Open Door   | X                                   |   |
|  | Planning Together                                   | X                                   |   |
|  | Workforce   | X                                   |   |
|  | Working Together                                    | X                                   |   |
| <b>Risk Description:</b><br>There is a risk of the configuration, condition and effective use of property being inadequate to support the delivery of integrated health and social care priorities.  |   |                                     |   |
| <b>Key Contributing Factors:</b> <ul style="list-style-type: none"> <li>◆ Restrictions on access to capital funding via NHS Tayside and Dundee City Council for investment in both existing and new property developments.</li> <li>◆ Financial sustainability challenges necessitate reduction in scale of property portfolio and maintenance programme in both NHS Tayside and Dundee City Council.</li> <li>◆ Lack of dedicated workforce capacity to focus on implementation of property strategy and interface with corporate bodies.</li> <li>◆ Property is not a delegated function to the IJB, therefore restricting levers and actions directly available to mitigate risks.</li> <li>◆ Lack of integrated public sector property strategy for Dundee.</li> </ul> |   |                                     |   |
| <b>Resulting in:</b> <ul style="list-style-type: none"> <li>◆ Underutilisation of some property with potential to support service integration and delivery - hotspots include Kingsway Care Centre, Royal Victoria Hospital and Constitution House.</li> <li>◆ Poor quality of service delivery and office environment for health and social care services / workforce, impacting on service user and workforce experience.</li> <li>◆ Impact on staff morale within sites with significant maintenance issues.</li> </ul>   |   |                                     |   |

- ◆ Compromised ability to deliver strategic priorities and shifts at scale and pace set out within IJB's Strategic Commissioning Framework.
- ◆ Short-notice disruption to workforce when required to vacate office spaces, impacting on morale.

| Current Mitigating Actions   | Control Type            |
|--|-------------------------|
| IJB Property Strategy  | Corrective / Preventive |
| Remedial actions to address property maintenance at Kingsway Care Centre | Corrective              |
| GP Property Strategy   | Corrective / Preventive |
|  |                         |
|  |                         |
|  |                         |
| Planned Mitigating Actions   | Control Type            |
| Scottish Government Whole System Planning requirements                   | Corrective / Preventive |
| SFT Workstream   | Preventive              |
|  |                         |

| Risk Ref: 4 IJB   |  | Risk Title: Public Service Reform   |  |   |
|---|--|---|--|---|
| <b>Residual Score:</b><br>Outwith appetite  | <b>Risk Category:</b><br>Compliance / Legislative / Regulatory | <b>Risk Appetite:</b><br>Minimal  |  |   |
| <b>Risk Response:</b><br>Reduce   | <b>Related to Achievement of Strategic Priority</b>            | For PAC a graphic of the risk matrix showing inherent and residual risk levels and risk appetite will be inserted here. |  |   |
| <b>Last Review:</b><br>February 2026  | Inequalities   |   |  | X |
| <b>Next Review:</b><br>April 2026   | Self-Care  |   |  | X |
|   | Open Door  |   |  | X |
|   | Planning Together  |   |  | X |
|   | Workforce  |   |  | X |
|   | Working Together   | X   |  |   |
| <b>Risk Description:</b><br>There is a risk of significant volume and scale of public sector reform, both in the short and long-term.   |  |   |  |   |
| <b>Key Contributing Factors:</b> <ul style="list-style-type: none"> <li>◆ Significant volume of ongoing national reform specifically focused on health and social care, including the establishment of the National Care Service Advisory Board and associated features of the Care Reform (Scotland) Act 2025</li> <li>◆ Lack of clarity regarding the detail arrangements / requirements of new legislative, strategic and policy initiatives for health and social care.</li> <li>◆ Insufficient capacity within the Partnership workforce to consistently and comprehensively identify and engage with consultation mechanisms informing national developments and reform.</li> <li>◆ National consultation mechanisms are not considered to be robust (concerns regarding both methodologies and transparency / impact).</li> <li>◆ Legislative and policy change outwith health and social care but that impacts on IJB functions does not always take sufficient account of the IJB governance arrangements.</li> <li>◆ Changes have included a significant increase in reporting / oversight requirements, adding additional pressures into local systems.</li> </ul> |  |   |  |   |
| <b>Resulting in:</b>  |  |   |  |   |

- ◆ Reactive, rather than proactive / planned, response to significant changes in national strategy and policy.
- ◆ National strategy and policy not sufficiently reflecting local needs and requirements, including the needs and preferences of people who use health and social care services.
- ◆ Potential for misalignment between national strategy and policy and local arrangements.
- ◆ Potential for breach of statutory duties or non-compliance with other regulatory frameworks or national oversight / reporting mechanisms.

| Current Mitigating Actions  | Control Type           |
|---|------------------------|
| Annual Delivery Plan for Dundee Health and Social Care Partnership  | Corrective             |
| Officer membership of range of national networks and professional bodies  | Detective              |
| Interface with NHS Tayside and Dundee City Council regarding communication of national legislative changes  | Detective              |
|   |                        |
|   |                        |
|   |                        |
| Planned Mitigating Actions  | Control Type           |
| Ongoing review of the IJB's Strategic Commissioning Framework   | Directive              |
| Restructure of Strategic Planning and Business Support Team, including increased capacity at interface with national planning and policy arrangements | Preventive / Detective |
|   |                        |

| Risk Ref: 5 IJB  |   | Risk Title: Increased Service Demand |  |
|--|---|--------------------------------------|--|
| <b>Residual Score:</b><br>Outwith appetite   | <b>Risk Category:</b><br>Performance / Quality      | <b>Risk Appetite:</b><br>Cautious    |  |
| <b>Risk Response:</b><br>Reduce  | <b>Related to Achievement of Strategic Priority</b> |                                      | <b>For PAC a graphic of the risk matrix showing inherent and residual risk levels and risk appetite will be inserted here.</b> |
| <b>Last Review:</b><br>February 2026   | Inequalities  | X                                    |  |
| <b>Next Review:</b><br>April 2026  | Self-Care   | X                                    |  |
|  | Open Door   | X                                    |  |
|  | Planning Together                                   |                                      |  |
|  | Workforce   |                                      |  |
|  | Working Together                                    |                                      |  |
| <b>Risk Description:</b><br>There is a risk of unsustainable increased demand for health and social care services and supports due to changing sociodemographic of Dundee's population.  |   |                                      |  |
| <b>Key Contributing Factors:</b> <ul style="list-style-type: none"> <li>◆ Key demographic factors include: ageing population and associated health needs (such as dementia), increased number of young people living into adulthood with complex health and care needs, diabetes and obesity.</li> <li>◆ Cost of living continues to impact on both service users and workforce health and wellbeing.</li> <li>◆ Members of the public consistently report challenges identifying and accessing relevant health and social care supports, leading to escalating need and crisis intervention.</li> <li>◆ Lack of capacity, intelligence and analytical tools to undertake required needs and demand forecasting to facilitate effective forward planning.</li> <li>◆ No financial provision with 2025/26 budget to meet additional costs associated with rising demand due to sociodemographic factors.</li> </ul> |   |                                      |  |
| <b>Resulting in:</b> <ul style="list-style-type: none"> <li>◆ Compromised ability to deliver strategic priorities and shifts at scale and pace set out within IJB's Strategic Commissioning Framework.</li> </ul>  |   |                                      |  |

- ◆ Poorer outcomes for people with health and social care needs, both in the short and long-term.
- ◆ Widening health and wellbeing inequalities within Dundee's population.
- ◆ Impact on staff morale and wellbeing.

| Current Mitigating Actions  | Control Type            |
|---|-------------------------|
| Focus on health inequalities within IJB Strategic Commissioning Framework and supporting strategic plans.   | Directive               |
| Inequalities focused initiatives – Health Inequalities Engine Room, Linlathen Local Fairness Initiative, Fairness Leadership Panel                                      | Corrective              |
| Targeted service provision  | Corrective              |
| Co-production and engagement with communities   | Detective / Corrective  |
| Commissioning investment in early intervention, direct access services to reduce escalation of need and support prevention within Mental Health and Learning Disability | Preventive              |
| Transformation programmes   | Preventive              |
| Joint Strategic Needs Assessment and ongoing data analysis  | Detective               |
| Planned Mitigating Actions  | Control Type            |
| Ongoing review of the IJB's Strategic Commissioning Framework   | Directive               |
| Improvements to public information and access to services   | Corrective              |
| Dundee Partnership Whole Family Wellbeing Initiative  | Corrective / Preventive |

| Risk Ref: 6 IJB   |   | Risk Title: External Provider Sustainability |   |
|---|---|--|---|
| <b>Residual Score:</b><br>Within appetite   | <b>Risk Category:</b><br>Performance / Quality      | <b>Risk Appetite:</b><br>Cautious            |   |
| <b>Risk Response:</b><br>Reduce   | <b>Related to Achievement of Strategic Priority</b> |  | For PAC a graphic of the risk matrix showing inherent and residual risk levels and risk appetite will be inserted here. |
| <b>Last Review:</b><br>February 2026  | Inequalities  |  |   |
| <b>Next Review:</b><br>May 2026   | Self-Care   |  |   |
|   | Open Door   |  |   |
|   | Planning Together                                   | X  |   |
|   | Workforce   | X  |   |
|   | Working Together                                    |  |   |
| <b>Risk Description:</b><br>There is a risk of instability in the market of external providers of health and social care services and supports (third and independent sector).  |   |  |   |
| <b>Key Contributing Factors:</b> <ul style="list-style-type: none"> <li>◆ Reduced public sector funding across the health and social care sector, resulting in financial pressures for external providers.</li> <li>◆ Impact of IJB savings plans contained within 2025/26 budgets.</li> <li>◆ Impact of inflation and other increased operating costs (such as changes to National Insurance Contributions).</li> <li>◆ Challenges within the workforce market for providers, including recruitment and retention issues associated with terms and conditions.</li> <li>◆ Changes to national immigration legislation and policy impacting workforce supply.</li> <li>◆ Many levers to mitigate risk regarding external provider viability / sustainability are outwith the IJB's direct control and are part of national decisions and arrangements.</li> </ul> |   |  |   |
| <b>Resulting in:</b> <ul style="list-style-type: none"> <li>◆ High number of providers reporting financial losses from 2024/25 onwards, and / or significantly reduced reserve levels.</li> <li>◆ Short notice default / exit from contracts not considered to be financially viable resulting in disruption of service for service users.</li> <li>◆ Potential unplanned closure of services, with possibility of limited alternative providers within the marketplace.</li> </ul>   |   |  |   |

| <b>Current Mitigating Actions</b>  | <b>Control Type</b>                 |
|--|-------------------------------------|
| Social Care Contracts Team, including contract monitoring and provider relationship investment | Detective / Corrective / Preventive |
| Scottish Cares Lead role and co-ordinated engagement with providers                            | Detective / Corrective / Preventive |
| Engagement with national negotiation and engagement mechanisms (i.e. Scotland Excel)           | Detective / Preventative            |
| Fair Work developments   | Preventative                        |
|  |                                     |
|  |                                     |
|  |                                     |
| <b>Planned Mitigating Actions</b>  | <b>Control Type</b>                 |
| Development of provider risk assessment framework and register                                 | Detective                           |
|  |                                     |
|  |                                     |

| Risk Ref: 7 IJB   |   | Risk Title: Data Quality          |  |
|---|---|-----------------------------------|--|
| <b>Residual Score:</b><br>Within appetite   | <b>Risk Category:</b><br>Performance / Quality      | <b>Risk Appetite:</b><br>Cautious |  |
| <b>Risk Response:</b><br>Reduce   | <b>Related to Achievement of Strategic Priority</b> |                                   | <b>For PAC a graphic of the risk matrix showing inherent and residual risk levels and risk appetite will be inserted here.</b> |
| <b>Last Review:</b><br>February 2026  | Inequalities  | X                                 |  |
| <b>Next Review:</b><br>May 2026   | Self-Care   |                                   |  |
|   | Open Door   |                                   |  |
|   | Planning Together                                   | X                                 |  |
|   | Workforce   |                                   |  |
|   | Working Together                                    |                                   |  |
| <b>Risk Description:</b><br>There is a risk that data quality and availability is insufficient to full assess performance, outcomes and impacts to support whole systems decisions.   |   |                                   |  |
| <b>Key Contributing Factors:</b> <ul style="list-style-type: none"> <li>Reduction in overall workforce capacity, particularly admin and clerical capacity, reducing focus on accurate maintenance of information systems.</li> <li>Overly complex processes and recording systems which do not enable accurate recording of information.</li> <li>Lack of management and leadership capacity to exercise effective oversight of data quality issues.</li> <li>Lack of investment in tools to enable collation and viewing of data across the wider system and encourage access, oversight and focus on data quality.</li> <li>Lack of culture of shared ownership / responsibility for data quality.</li> <li>Some aspects contributing to this risk are not delegated functions to the IJB (including some admin and clerical support and digital functions), therefore limiting levers and actions directly available to mitigate impacts.</li> </ul> |   |                                   |  |
| <b>Resulting in:</b> <ul style="list-style-type: none"> <li>Limited and / or unreliable data being available to inform service and strategic planning and performance and quality monitoring.</li> </ul>  |   |                                   |  |

- Inability to accurately and rapidly identify service users to inform resilience responses.
- Potential workforce risk due to inaccurate information relating to safety and lone working.
- Loss of income to the Partnership due to inaccurate / missed charging for services, contributing to financial sustainability risks.
- Potential reputational risk of publication / provision of inaccurate data.
- Additional capacity being required to continuously monitor and manage data quality issues including the preparation of statutory information returns, redirecting resource from tasks more directly associated with delivery of strategic priorities and shifts.

| Current Mitigating Actions   | Control Type           |
|--|------------------------|
| Review of health and social care billing processes.                    | Detective / Corrective |
| Data quality reports regularly produced and provided to some teams     | Detective              |
| Data quality checks completed prior to submission of statutory returns | Corrective             |
|  |                        |
|  |                        |
|  |                        |
|  |                        |
| <b>Planned Mitigating Actions</b>                                      | <b>Control Type</b>    |
|  |                        |
|  |                        |
|  |                        |

| Risk Ref: 8 IJB  |   | Risk Title: Digital Infrastructure |   |
|--|---|------------------------------------|---|
| <b>Residual Score:</b><br>Outwith appetite   | <b>Risk Category:</b><br>Performance / Quality      | <b>Risk Appetite:</b><br>Cautious  |   |
| <b>Risk Response:</b><br>Reduce and Share  | <b>Related to Achievement of Strategic Priority</b> |                                    | For PAC a graphic of the risk matrix showing inherent and residual risk levels and risk appetite will be inserted here. |
| <b>Last Review:</b><br>February 2026   | Inequalities  |                                    |   |
| <b>Next Review:</b><br>April 2026  | Self-Care   |                                    |   |
|  | Open Door   | X                                  |   |
|  | Planning Together                                   | X                                  |   |
|  | Workforce   | X                                  |   |
|  | Working Together                                    |                                    |   |
| <b>Risk Description:</b><br>There is a risk of digital infrastructure being inadequate to support the delivery of modern integrated health and social care priorities.   |   |                                    |   |
| <b>Key Contributing Factors:</b> <ul style="list-style-type: none"> <li>• Number and complexity of IT systems, and lack of interoperability of digital systems.</li> <li>• Financial sustainability challenges necessitate reduction in scale of digital developments and maintenance programme in both NHS Tayside and Dundee City Council.</li> <li>• Lack of dedicated workforce capacity and capability to focus on implementation digital developments within the HSCP.</li> <li>• Digital is not a delegated function to the IJB, therefore restricting levers and actions directly available to mitigate risks.</li> <li>• Lack of digital delivery plan to bridge the gap between digital strategies of Dundee City Council and NHS Tayside, and support implementation in integrated functions.</li> <li>• Lack of integrated public sector digital strategy for Dundee.</li> </ul> |   |                                    |   |
| <b>Resulting in:</b> <ul style="list-style-type: none"> <li>• Use of inefficient manual process and / or workarounds by the workforce (e.g. double input to both social work and health professionals' systems.)</li> <li>• Reputational damage both from a public and employer of choice perspective / loss of credibility due to inability to keep-up with modern digital expectations.</li> </ul>   |   |                                    |   |

- Inefficiencies detract from capacity available to deliver strategic shifts and priorities at scale and pace described within IJB's Strategic Commissioning Framework.
- Impact on staff morale and wellbeing.
- Impact on service user experience, including initial access to services and need to share information multiple times with different services / teams.
- Impact on ability to effectively co-ordinate integrated information sharing and working resulting in potential for poorer outcomes for people with health and social care needs.

| Current Mitigating Actions   | Control Type            |
|--|-------------------------|
| Digital Strategy Group with representation from NHS Tayside and Dundee City Council  | Corrective / Preventive |
| Participation in Digital Maturity Assessment process being led by Dundee City Council                                      | Detective               |
|  |                         |
|  |                         |
|  |                         |
|  |                         |
|  |                         |
| Planned Mitigating Actions   | Control Type            |
| Digital Delivery Plan  | Corrective / Preventive |
| Increase in digital implementation and workforce development capacity within the HSCP workforce                            | Corrective              |
| Investment of Transformation monies to fund digital developments for Community Nursing and other community-based services. | Corrective              |

| Risk Ref: 9 IJB  |   | Risk Title: Information Governance  |  |   |
|--|---|---|--|---|
| <b>Residual Score:</b><br>Within appetite  | <b>Risk Category:</b><br>Performance / Quality      | <b>Risk Appetite:</b><br>Cautious   |  |   |
| <b>Risk Response:</b><br>Reduce and Share  | <b>Related to Achievement of Strategic Priority</b> | For PAC a graphic of the risk matrix showing inherent and residual risk levels and risk appetite will be inserted here. |  |   |
| <b>Last Review:</b><br>February 2026   | Inequalities  |   |  |   |
| <b>Next Review:</b><br>May 2026  | Self-Care   |   |  |   |
|  | Open Door   |   |  |   |
|  | Planning Together                                   |   |  | X |
|  | Workforce   |   |  | X |
|  | Working Together                                    |   |  |   |
| <b>Risk Description:</b><br>There is a risk of information governance and security arrangements being inflexible to support the delivery of integrated health and social care priorities.  |   |   |  |   |
| <b>Key Contributing Factors:</b> <ul style="list-style-type: none"> <li>• Different information governance and security risk tolerance and standards in place within Dundee City Council and NHS Tayside.</li> <li>• Workforce employment arrangements are barrier to staff accessing information required to fulfil their roles.</li> <li>• Increasing number of Subject Access Requests, Freedom of Information requests and complaints activity related to information governance issues, without specific workforce capacity to respond to this.</li> <li>• Changes to digital systems have impacted on ability to share and store information in a secure but accessible way.</li> <li>• Increase in cybersecurity threats experienced across the public sector.</li> </ul> |   |   |  |   |
| <b>Resulting in:</b> <ul style="list-style-type: none"> <li>• Impact on workforce morale.</li> <li>• Inability to share information in an efficient and effective way, redirecting resource from tasks more directly associated with strategic priorities and shifts.</li> <li>• Delays in responding to information requests, with associated reputational impact and risks of regulatory action.</li> </ul>  |   |   |  |   |

- Risk averse behaviours and practices which in themselves limit information sharing and quality of services / response to health and social care needs.

| Current Mitigating Actions   | Control Type           |
|--|------------------------|
| Approval of information sharing protocol between Dundee City Council and NHS Tayside for Dundee HSCP | Directive / Preventive |
| Regular management reporting of performance against statutory requirements                           | Detective              |
| Information governance learning and development resources and guidance                               | Preventive             |
|  |                        |
|  |                        |
|  |                        |
| Planned Mitigating Actions   | Control Type           |
|  |                        |
|  |                        |
|  |                        |

| Risk Ref: 10 IJB  |   | Risk Title: Engagement        |   |
|---|---|-------------------------------|---|
| <b>Residual Score:</b><br>Within appetite   | <b>Risk Category:</b><br>Reputational               | <b>Risk Appetite:</b><br>Open |   |
| <b>Risk Response:</b><br>Reduce   | <b>Related to Achievement of Strategic Priority</b> |                               | For PAC a graphic of the risk matrix showing inherent and residual risk levels and risk appetite will be inserted here. |
| <b>Last Review:</b><br>February 2026  | Inequalities  |                               |   |
| <b>Next Review:</b><br>May 2026   | Self-Care   |                               |   |
|   | Open Door   |                               |   |
|   | Planning Together                                   | X                             |   |
|   | Workforce   | X                             |   |
|   | Working Together                                    | X                             |   |
| <b>Risk Description:</b><br>There is a risk of the work of the IJB being insufficiently supported and informed by communication and engagement with stakeholders.   |   |                               |   |
| <b>Key Contributing Factors:</b> <ul style="list-style-type: none"> <li>• Workforce capacity and capability to plan and deliver communication and engagement across all relevant functions and with all stakeholders.</li> <li>• Restricted capacity of stakeholders to participate in communication and engagement processes, including service users and members of the public (competing priorities).</li> <li>• Multiple needs and requirements to ensure that processes and materials are effective and accessible for all stakeholders (one size fits all approach is not sufficient).</li> <li>• Insufficient acknowledgement and support of contributions, particularly the contributions of those participating on an unpaid basis.</li> <li>• Communication is not a delegated function to the IJB, therefore restricting levers and actions available to directly mitigate risks.</li> <li>• Limited visibility of IJB members and other leaders across all stakeholder groups.</li> </ul> |   |                               |   |
| <b>Resulting in:</b>  |   |                               |   |

- Strategic plans and service developments being ineffective in meeting local needs and preferences, resulting in poorer outcomes for people with health and social care needs.
- Reduced confidence and credibility of the IJB with stakeholders.
- Lack of realistic and shared expectations relating to strategic priorities and shifts, as well as availability and quality on services and supports.
- Potential challenges to decisions made by the IJB that were not properly informed by engagement and understanding of needs and impacts.

| Current Mitigating Actions  | Control Type            |
|---|-------------------------|
| Focused engagement activity in place across a number of key processes / services - strategic plan, budget development, carers strategic plan, mental health and wellbeing strategic plan. | Preventive              |
| Joint work with Dundee Partnership, Dundee City Council and NHS Tayside to make best use of all available engagement information.   | Corrective              |
| Ongoing recruitment to IJB Service User representative role.  | Preventive              |
| Support available from Healthcare Improvement Scotland to support engagement in relation to service change.   | Preventive              |
| Participation in Area Partnership Forums and other mechanisms to support workforce communication and engagement   | Preventive              |
| IJB visits to health and social care teams and services   | Preventive              |
|   |                         |
| Planned Mitigating Actions  | Control Type            |
| Implementation of approach to service user and carer representative recruitment, support and development for the IJB.   | Preventive / Corrective |
| Restructure of Business Support and Strategic Planning Team, including increased capacity to support communication and engagement   | Corrective              |
|   |                         |

| Risk Ref: 11 IJB   |   | Risk Title: Whole System Collaboration |   |
|--|---|--|---|
| <b>Residual Score:</b><br>Within appetite  | <b>Risk Category:</b><br>Performance / Quality      | <b>Risk Appetite:</b><br>Cautious      |   |
| <b>Risk Response:</b><br>Reduce and Share  | <b>Related to Achievement of Strategic Priority</b> |  | For PAC a graphic of the risk matrix showing inherent and residual risk levels and risk appetite will be inserted here. |
| <b>Last Review:</b><br>February 2026   | Inequalities  |  |   |
| <b>Next Review:</b><br>May 2026  | Self-Care   |  |   |
|  | Open Door   |  |   |
|  | Planning Together                                   |  |   |
|  | Workforce   |  |   |
|  | Working Together                                    | X                                      |   |
| <b>Risk Description:</b><br>There is a risk of the co-ordination of whole system planning and commissioning being insufficient to enable integration of health and social care services and improve outcomes for people.   |   |  |   |
| <b>Key Contributing Factors:</b> <ul style="list-style-type: none"> <li>• Scale and complexity of network of relevant health and social care and community planning partners, including complexity of governance arrangements for health and social care.</li> <li>• Limited strategic commissioning and planning capacity within the HSCP and other partner organisations.</li> <li>• Differing planning requirements and processes used by different partners, driven by legislative requirements and national policy, funding and reporting arrangements.</li> <li>• Differing cultures and priorities across partner organisations.</li> <li>• Redesign of Mental Health and Learning Disability Services under the Whole System Change Programme and related scrutiny reports.</li> </ul> |   |  |   |
| <b>Resulting in:</b> <ul style="list-style-type: none"> <li>• Compromised ability to deliver strategic priorities and shifts at scale and pace set out within IJB's Strategic Commissioning Framework</li> <li>• Poorer outcomes for people with health and social care needs, both in the short and long-term</li> <li>• Impact on service user experiences of service delivery.</li> </ul>   |   |  |   |

- Inefficient use of total public sector resource due to duplication of effort and / or conflicting plans and unintended consequences.
- Increased potential for disintegration of health and social care services.

| <b>Current Mitigating Actions</b>   | <b>Control Type</b>     |
|---|-------------------------|
| Participation in joint strategic planning groups for health and social care   | Preventive              |
| SPAG as key site for co-ordination of planning  | Preventive              |
| Participation in Community Planning Partnership   | Preventive              |
| Representation on national groups that influence planning arrangements and requirements (i.e. HSCS)                                 | Preventive              |
| Visibility and governance in relation to Tayside-wide Mental Health and Learning Disability Whole System Change Programme           | Detective               |
| Influence the delivery of new models of care and whole system change programme to promote & safeguard better outcomes               | Preventive              |
| Participation in Protecting People Committees   | Preventive              |
| <b>Planned Mitigating Actions</b>   | <b>Control Type</b>     |
| Ongoing review of the IJB's Strategic Commissioning Framework   | Detective               |
| Participation of Chief Officer and others in Mental Health WSPC and work to develop single mental health strategic plan for Tayside | Preventive / Corrective |
| Explore collaborative opportunities with other partners including Angus and Perth & Kinross IJBs                                    | Corrective              |
| Continued focus on strengthening participation in and work of the SPAG  | Corrective              |
| Restructure of Strategic Services, including increased capacity at interface with national planning and policy arrangements         | Corrective              |

| Table 2: Overview of Changes in Risk Scoring |                                  |               |        |        |        |        |        |        |        |        |        |        |        |
|--|----------------------------------|---------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Risk   | Risk Title                       | Inherent Risk | Feb 26 | Mar 26 | Apr 26 | May 25 | Jun 26 | Jul 26 | Aug 26 | Sep 26 | Oct 26 | Nov 26 | Dec 26 |
| 1 IJB  | Financial Sustainability         | 25            | 25     |        |        |        |        |        |        |        |        |        |        |
| 2 IJB  | Workforce Capacity               | 16            | 12     |        |        |        |        |        |        |        |        |        |        |
| 3 IJB  | Property Infrastructure          | 20            | 20     |        |        |        |        |        |        |        |        |        |        |
| 4 IJB  | Public Sector Reform             | 20            | 16     |        |        |        |        |        |        |        |        |        |        |
| 5 IJB  | Increased Service Demand         | 20            | 16     |        |        |        |        |        |        |        |        |        |        |
| 6 IJB  | External Provider Sustainability | 16            | 12     |        |        |        |        |        |        |        |        |        |        |
| 7 IJB  | Data Quality                     | 16            | 12     |        |        |        |        |        |        |        |        |        |        |
| 8 IJB  | Digital Infrastructure           | 20            | 16     |        |        |        |        |        |        |        |        |        |        |
| 9 IJB  | Information Governance           | 16            | 12     |        |        |        |        |        |        |        |        |        |        |
| 10 IJB                                       | Engagement                       | 20            | 12     |        |        |        |        |        |        |        |        |        |        |
| 11 IJB                                       | Whole System Collaboration       | 16            | 12     |        |        |        |        |        |        |        |        |        |        |