Dundee
Health & Social Care
Partnership

REPORT TO: **HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD – 10 DECEMBER 2025**

REPORT ON: **TAYSIDE IJBs RISK MANAGEMENT STRATEGY**

REPORT BY: **CHIEF OFFICER**

REPORT NO: **DIJB89-2025**

1.0   PURPOSE OF REPORT

1.1   This report provides the Integration Joint Board with an overview and seeks approval to endorse the revised Tayside IJBs Risk Management Strategy.

2.0   RECOMMENDATIONS

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

2.1   Notes and approves the revised Tayside Risk Management Strategy as attached as Appendix 1 of this report

3.0   FINANCIAL IMPLICATIONS

3.1   None

4.0   MAIN TEXT

4.1   In accordance with the Public Bodies (Joint Working) (Scotland) Act 2014, the Integration Joint Board (IJB) is required to maintain robust governance arrangements, including an effective approach to risk management. The existing Risk Management Strategy was last reviewed in February 2021. A scheduled review has now been completed to ensure continued alignment with best practice and to reflect changes in the operating environment.

4.2   This review has been undertaken collaboratively by NHS Tayside, the three Health & Social Care Partnerships (HSCPs) and Local Authorities to produce an updated strategy that promotes a consistent and comprehensive approach to risk management. The strategy applies to all functions delegated to the IJB under the integration schemes and aims to embed risk management within strategic planning and operational delivery.

4.3   The key objectives of the strategy are to:
- Increase awareness of risk and clearly define roles and responsibilities for managing it across the IJBs.
- Facilitate effective communication and sharing of risk-related information throughout the organisation.
- Minimise exposure to risk and potential loss through strong internal controls.
- Establish clear standards and principles for managing risk efficiently, including regular monitoring, reporting, and review.

4.4   The strategy adopts a positive and integrated approach to risk management. It covers all categories of risk that may impact the IJBs, including clinical and care risks, staff safety and

wellbeing, and strategic risks, both opportunities and threats, that could influence the achievement of long-term objectives.

4.5   Each IJB will develop a supporting Risk Management Framework that sets out how the strategy will be applied in practice. The framework will describe the processes, responsibilities, and governance arrangements that underpin risk management across the organisation. It will ensure that the principles outlined in the strategy are consistently embedded into day-to-day operations, strategic planning, and decision making. The framework will also reflect the unique context of each IJB, including its structure, delegated functions, and partnership arrangements.

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

This is a mandatory field and an explanation must be provided which covers the fields below. Please fill in and copy this table for each individual risk identified.

Risk 1 Description	Risk of not having robust risk management arrangements in place will undermine governance and quality of care
Risk Category	Governance / Quality of care
Inherent Risk Level	Likelihood (3) x Impact (5) = Risk Scoring 15 High Risk Level
Mitigating Actions (including timescales and resources)	The implementation of the strategy and developing framework
Residual Risk Level	Likelihood (2) x Impact (4) = Risk Scoring 8 Moderate Risk Level
Planned Risk Level	Likelihood (2) x Impact (3) = Risk Scoring 6 Moderate Risk Level
Approval recommendation	Given the implementation of the strategy the and the resultant moderate risk level this should be accepted

7.0   CONSULTATIONS

7.1   The Chief Finance Officer and the Clerk were consulted in the preparation of this report which has been developed in collaboration between the three Tayside Integration Joint Boards, the three Tayside local authorities and NHS Tayside.

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   DATE: 17 November 2025
Chief Officer

Risk Management Strategy

Integration Joint Boards

Version Number:	2	Owner:	Tayside Risk Management Group
Issue Date:	December 2025	Review Date:	April 2027

Version History

Version	Issue Date	Description	Author
1	June 2021	Strategy developed.	Tayside Risk Management Group
2	December 2025	Strategy reviewed and updated.	Tayside Risk Management Group

Contents

1. Executive Summary

This strategy outlines the approach to risk management for the Tayside Integration Joint Board's (IJB), supporting the delivery of integrated health and social care services in accordance with the Public Bodies (Joint Working) (Scotland) Act 2014. It sets out the principles, governance arrangements, and processes to ensure risks are effectively identified, assessed, managed, and monitored.

The Integration Joint Boards (IJBs) are committed to supporting a working environment where staff feel confident to explore new ideas, improve how services are delivered, and work towards shared goals. This is supported by the consistent use of a risk management framework to ensure decisions are made safely and responsibly.

The aim is to deliver safe, effective care and support for those who use health and social care services, while also ensuring a safe and positive environment for staff and others involved in service delivery.

Each IJB will develop a supporting Risk Management Framework that sets out how this strategy will be applied in practice. This framework will describe the processes, responsibilities, and governance arrangements that underpin risk management across the organisation. It will ensure that the principles outlined in this strategy are consistently embedded into day-to-day operations, strategic planning, and decision making. The framework will also reflect the unique context of each IJB, including its structure, delegated functions, and partnership arrangements.

2. Purpose and Scope

The purpose of this strategy is to embed a consistent and robust approach to risk management in relation to the planning of all functions that are delegated to the IJB as described in the integration schemes.

The key aims of this strategy are to:

- Raise awareness of risk and clearly define roles and responsibilities for managing it across the IJBs.
- Support effective communication and sharing of risk-related information throughout all areas of the organisation.
- Reduce the IJBs' exposure to risk and potential loss by implementing strong internal controls; and
- Set out clear standards and principles for managing risk efficiently, including regular monitoring, reporting, and review.

This strategy takes a positive and integrated approach to risk management. It applies to all types of risk that may affect the IJBs. It considers strategic risks, both opportunities and threats, which may influence the IJBs' ability to deliver their long-term objectives. These include factors such as risks arising in clinical and care settings, changes in policy, funding, workforce availability, safety and wellbeing, technological developments, and partnership working, all of which can either support or hinder the successful delivery of strategic and commissioning plans.

The IJBs are responsible for managing strategic risks associated with the delivery of the delegated functions. NHS Tayside and the relevant Local Authority remain responsible for managing operational and service risks associated with the delivery of services that support the delegated functions.

Strategic risks refer to factors that could either support or hinder the IJBs in achieving the outcomes and objectives set out in their Strategic Plans. These risks typically require oversight and direction from senior leadership, along with the development of appropriate actions and controls to manage them effectively.

Operational/Service level risks relate to the day-to-day delivery of health and social care services by the Local Authority and NHS Tayside, as commissioned through the IJBs Strategic Commissioning Plan and subsequent issuing of Directions. Responsibility for managing these risks lies with the statutory service providers, who do so within their own organisational risk management frameworks. These risks are overseen by the IJBs Chief Officer, acting in their role as Executive Director for Health & Social Care services within the Local Authority and NHS Tayside. However, where an operational risk has the potential to affect the delivery of the IJBs strategic objectives, it should be considered as part of the relevant strategic risk within the IJBs risk management framework.

3. Governance and Accountability

Risk management is overseen by the IJB and its appropriate standing committees. The Chief Officer is responsible for implementing the strategy, supported by the Chief Finance Officer and wider Senior Management Team. Risk owners are accountable for managing individual risks. Regular reporting and escalation procedures are in place.

Integration Joint Board and Standing Committees
Members of the IJB, including those serving on standing committees (i.e., Audit committees), are responsible for:
- Providing oversight of the IJBs risk management arrangements and seeking assurance that these are effective and proportionate.
- Receiving, reviewing, and scrutinising reports on strategic risks that may affect the delivery of the IJBs Strategic Commissioning Plan.
- Ensuring that all IJB and committee papers clearly outline relevant risks and, where appropriate, reference the IJBs Risk Register.
- Set and review the IJBs risk appetite.
- Align governance with national good practice.
- Strengthen governance by applying risk appetite effectively to support decision making, engaging stakeholders, and embedding risk culture.

Chief Officer
The Chief Officer holds overall responsibility for the IJBs risk management framework. They must ensure that appropriate and effective arrangements are in place, using the resources available through the partner bodies. The Chief Officer will keep the Chief Executives of the partner organisations informed of any significant or emerging risks that could affect the delivery of the Strategic Commissioning Plan or the reputation of the IJB and vice versa.

Chief Finance Officer
The Chief Finance Officer is responsible for identifying financial risks and proposing mitigating actions for consideration by the IJB and its committees. This role is aligned with statutory responsibilities under Section 95 of the Local Government (Scotland) Act 1973 and includes accountability for the financial governance of the IJB.

Partner Bodies
NHS Tayside and the relevant Local Authority remain responsible for managing service/operational risks associated with the delivery of services that support the delegated functions, using their own organisational risk management frameworks. Their Chief Executives are responsible for ensuring that any strategic, operational, or service risks likely to impact the delivery of the IJBs Strategic Plan are communicated to the IJB. Partner bodies are responsible for providing formal assurance to the IJB on the effectiveness of their risk management arrangements. In turn, the IJB provides assurance to its partner bodies, and to other IJBs where it acts as Lead Partner, on its own risk management processes. These mutual assurances are reflected in each organisation's Annual Governance Statement.

Each IJB will share its Strategic Risk Register through the Tayside Risk Management Group, ensuring that strategic risks are communicated, monitored, and managed effectively and consistently across all Partnerships. Service-level and operational risks will continue to be managed through each HSCP's local governance arrangements.

4. Risk Management Process

The IJBs take a proactive and structured approach to risk management, recognising it as a key part of good governance and effective decision making. Risk management is embedded across all areas of service delivery and strategic planning, helping the IJBs to identify and respond to uncertainty, take informed risks, and make the most of opportunities.

A consistent risk management process is applied, supported by regular reporting, monitoring, and review. This ensures risks are not only identified and controlled but also used to inform planning and improve performance.

The IJBs adopt the following risk management process:
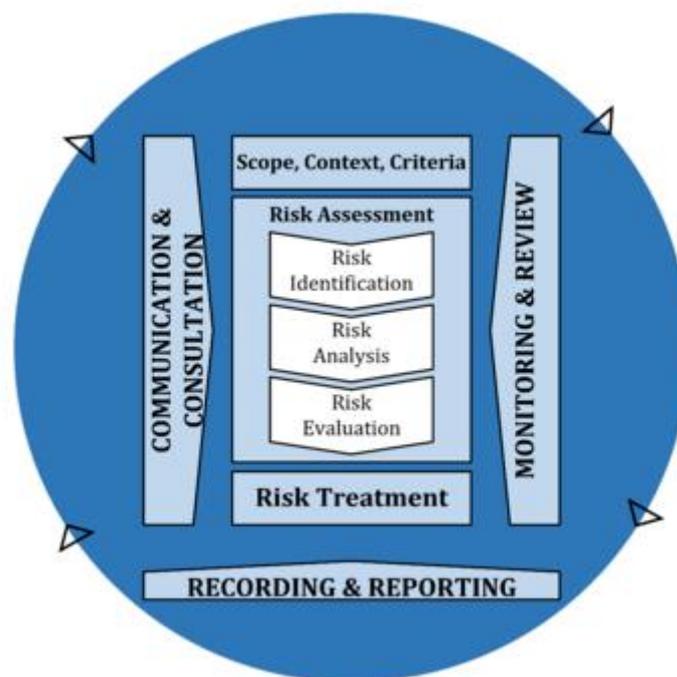
ISO 31000:2018(EN) Risk Management - Guidelines

- **Identify Risk** – through strategic planning, operational activity, and stakeholder engagement.
- **Analyse Risk** – use agreed scoring criteria to assess the likelihood and impact or each risk.
- **Evaluate Risk** – compare assessed risks against the IJBs defined risk appetite and tolerance levels to determine appropriate responses.
- **Treat Risk –** Implement proportionate controls to mitigate, reduce, accept, or avoid risks depending on their nature and potential impact.
- **Monitoring and Review** – maintaining up to date risk registers and performance reports, with regular review to reflect changes in context or control effectiveness.

- **Communication and Consultation** – ensuring open and transparent communication of risk information and engaging with partners to support shared understanding and coordinated responses.

The IJBs maintain a Strategic Risk Register and Partners maintain Operational/Service level registers for services that support the delegated services. Risks are recorded and managed via digital platforms.

Scoring criteria – this provides a consistent method for assessing the likelihood and impact of identified risks, typically using a risk matrix. This ensures that risks are evaluated in a structured and comparable way across all areas of the organisation.

Control Measures – this refers to the actions, processes, or safeguards that are in place to reduce the likelihood of a risk occurring or to minimise its impact if it does. These may include policies, procedures, training, system controls, or contingency plans. Each risk entry should clearly document the existing controls, assess their effectiveness, and identify any gaps where further action may be required.

Together, the scoring criteria and control measures support transparency, consistency, and accountability in how risks are assessed, managed, and monitored.

5. Risk Appetite

Risk Appetite is an important part of the IJBs approach to managing uncertainty. It sets out the level of risk the IJB is willing to accept in pursuit of its strategic objectives and helps guide decisions about which risks can be accepted, which require active management, and when escalation is appropriate.

Rather than avoiding risk altogether, the IJB recognises that some level of risk is necessary to deliver meaningful change and improvement. A clearly defined risk appetite supports informed decision-making, encourages consistency across governance processes, and helps focus attention on priority areas.

To have an effective Risk Management Framework the IJB must set a risk appetite. When setting its appetite, the IJB will consider a range of factors, including the nature of health and social care services, the expectations of statutory partners, the operating environment, and the IJBs own capacity to manage risk. It may also define an optimal or target range within which it aims to operate, allowing for flexibility while maintaining control, this is referred to as Risk Tolerance.
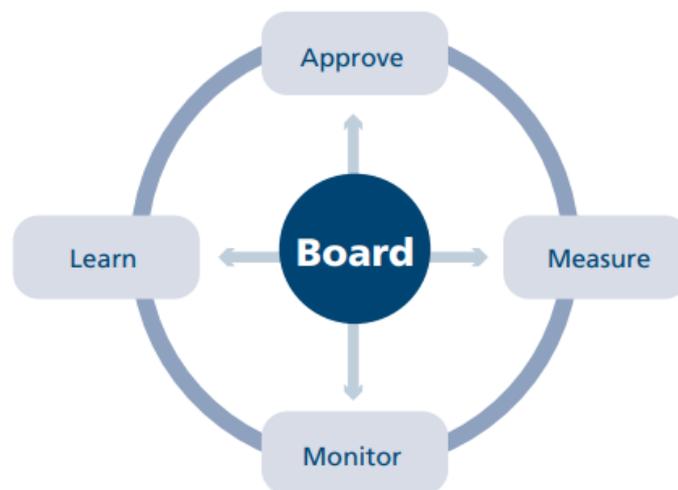

Figure 13 - Governing a Risk Appetite

The Institute of Risk Management Risk Appetite & Tolerance Guidance Paper Figure 13

Governance of Risk Appetite

For a risk appetite process to be meaningful and effective, it must be supported by strong governance. The IJB recognises that risk appetite is not a one-off statement, but a living part of its decision-making and assurance processes. As such, it requires ongoing oversight, challenge, and refinement.

Governance of the risk appetite process should focus on four key areas:

Approval – The IJB, or its standing committee, is responsible for approving the risk appetite statement and ensuring it reflects the organisation's strategic aims, values, and responsibilities.

Measurement – There must be regular and consistent assessment of how the IJB is operating within its stated appetite, with evidence that the framework is being applied in practice.

Monitoring – The IJB will review any breaches of appetite or tensions arising from its implementation. A complete absence of such issues may indicate that the framework is not being used meaningfully.

Learning – The IJB will reflect on how the risk appetite framework is working in practice, using this insight to strengthen its application and embed it more fully into governance and culture.

This approach ensures that risk appetite remains relevant, proportionate, and aligned with the IJBs evolving context and responsibilities.

6. Risk Tolerance

Risk tolerance is the range of risk an organisation is comfortable operating within. It sets the limits for what's acceptable and often includes an optimal or target range that allows some flexibility while keeping control. If risk moves outside that range, action is needed to bring it back.

7. Training and Culture

Effective implementation of this strategy relies on ensuring that those involved in IJB activities have the skills, confidence, and capacity to manage risk well. This includes being able to make sound judgements, learn from experience, and identify opportunities to strengthen systems and processes.

Training plays a key role in embedding a positive risk culture and supporting the development of risk management maturity across the IJB. Senior Management Teams will regularly review training and development needs and work with partner bodies to identify and access appropriate opportunities. This applies to both officers and IJB members, as relevant to their roles.

Most risk-related training will be delivered through existing resources available via the risk management functions of the partner bodies. This includes training that reflects the integrated nature of service delivery.

8. Monitoring and Reporting

Effective risk management is essential to achieving the IJBs strategic objectives. Risks must be identified, assessed, and monitored over time to reflect changes in context,

likelihood, and impact. Given the complexity and evolving nature of the environment in which the IJB operates, a flexible and proportionate approach is required.

Each IJB will set out its own arrangements for monitoring and reporting within its local risk management framework, ensuring these processes are aligned with its governance structures.