

REPORT TO: PERFORMANCE & AUDIT COMMITTEE – 21 MAY 2025

REPORT ON: DHSCP STRATEGIC RISK REGISTER UPDATE

REPORT BY: CHIEF FINANCE OFFICER

REPORT NO: PAC17-2025

1.0 PURPOSE OF REPORT

- 1.1 The purpose of this report is to update the Performance and Audit Committee in relation to the Strategic Risk Register and on strategic risk management activities in Dundee Health and Social Care Partnership

2.0 RECOMMENDATIONS

It is recommended that the Performance & Audit Committee (PAC):

- 2.1 Note the content of this Strategic Risk Register Update report.
- 2.2 Note the entry of a new risk on Increase in National Insurance (See Section 6).
- 2.3 Note the extract from the Strategic Risk register attached at Appendix 1 to this report.

3.0 FINANCIAL IMPLICATIONS

- 3.1 None

4.0 MAIN TEXT

- 4.1 The Dundee HSCP Strategic Risk Register is available to Dundee City Council Risk and Assurance Board through the Ideagen Risk Management system.
- 4.2 Operational Risks are reviewed by the Clinical Care and Professional Governance Forum with any significant areas of concern which may impact on the ability of the IJB to deliver its Strategic and Commissioning Plan reported to the PAC through the Clinical Care and Professional Governance Group's Chairs Assurance Report.
- 4.3 Operational Risks which should be escalated are identified through Senior Management meetings, the Clinical Care and Professional Governance Risk Forum and are reported through reports to the PAC or IJB as appropriate.

5.0 STRATEGIC RISK REGISTER UPDATE

- 5.1 There are currently six risks scoring at 20 or 25, which are High Risk Categories.
- 5.2 There are four risks which score at the maximum score of 25, these are: Staff Resource; Lack of Capital Investment in Health and Social Care Integrated Community Facilities (including Primary Care); Unable to Maintain IJB Spend; and Restrictions on Public Sector Funding.
- 5.3 Restrictions on Public Sector Funding remains as a score of 25. This is due to the scale of the cost pressure gap and public sector financial position.
- 5.4 The Unable to Maintain IJB Spend risk has remained at a score of 25 due to the challenging context in terms of financial pressures for the IJB.

- 5.5 The Staff Resource risk has remained at the highest score since 2021. The latest risk update highlights how staff resource impacts on the ability to progress the strategic plan actions. The implementation of the Safe Staffing Act is also demonstrating areas where staff resource is less than the standard. The impact of the half hour reduction of NHS workforce for Agenda for Change will also mean that across services available working week hours will reduce.
- 5.6 Lack of Capital Investment in Health and Social Care Integrated Community Facilities (including Primary Care) remains at the maximum of 25. The Scottish Government 2024/25 Capital Investment Resources available to LAs and NHS Boards has been severely restricted leading to minimal likelihood of resources being made available for community facilities.
- 5.7 The Primary Care Sustainability risk remains at a score of 20. The most recent update highlights the pressure on general practice due to increasing demand and complexity of health needs together with the increase in GP vacancies, and premises leasing.
- 5.8 Capacity of Leadership Team remains at a score of 16. This reflects the retirement of the Chief Officer. Control factors include response from partner bodies, review of team structure and sharing of management team duties.
- 5.9 Data Quality risk remains at a score of 16. The Data, Quality and Intelligence Team are working with operational staff to improve data quality. Forthcoming changes to IT systems include the move from Oracle to SQL for hosting Mosaic and the change from DCC IT system Citrix which will impact on reporting mechanisms. Quality, Data, and Intelligence Team are working with IT to improve reporting mechanisms and decide on most efficient and resilient reporting systems (e.g. Power BI, Crystal).
- 5.10 Increased Bureaucracy risk remains at a score of 16. This is due to the potential for additional bureaucracy through the Scottish Government Covid Enquiry and National Care Service development.
- 5.11 National Care Service risk remains at a score of 20 (Impact 4 x Likelihood 5). We are still not able to assess the impact of the National Care Service on the IJB's ability to carry out its Strategic Plan. The latest update highlights the withdrawal of Council Leaders support for the Scottish Government's revised National Care Service Bill.
- 5.12 The Viability of External providers risk remains at a score of 16 and the most recent update highlights the development of improved robust monitoring when risk is identified.
- 5.13 The Cost of Living Crisis risk remains at a score of 16. The latest update highlights the sub-analyses of Engage Dundee for a range of at risk groups.
- 5.14 Changes to IT Systems remains at a score of 16. The latest update highlights the risks caused by the implementation of O365 and the discrepancies between NHS and DCC implementation; the implementation of Morse and the lifespan of a software system used for prescribing in DDARS.

6.0 NEW RISKS

- 6.1 New Strategic Risks around Increase in National Insurance, Prescribing Costs, and Fire Safety Referrals have been included in the Strategic Risk Register.

7.0 ARCHIVED RISKS

- 7.1 No risks have been archived since the last report.

8.0 POLICY IMPLICATIONS

- 8.1 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.

9.0 RISK ASSESSMENT

9.1 No risk assessment is necessary for this report.

10.0 CONSULTATIONS

10.1 The Chief Officer, Acting Head of Strategic Services and the Clerk were consulted in the preparation of this report.

11.0 BACKGROUND PAPERS

11.1 None

Christine Jones
Acting Chief Finance Officer

DATE: 23 April 2025

Clare Lewis-Robertson
Lead Officer (Strategic Planning and Business Support)

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Description	Lead Director/Owner	Current Assessment			Status	Date Last Reviewed
		L	C	Exp		
Unable to maintain IJB Spend IJB is unable to maintain spend within allocated resources which could lead to being unable to deliver on the Strategic & Commissioning Plan. Latest update An update of the financial recovery plan for delegated health and social care services for 2024/25 was presented to the IJB on the 11.12.2024 Control factors <ul style="list-style-type: none"> Financial monitoring systems Increase in reserves Management of vacancies and discretionary spend MSG and external audit recommendations Savings and Transformation Plan Financial Recovery Plan 	Dundee HSCP Chief Finance Officer	5	5	25	→	23.04.24
Restrictions on Public Sector Funding Continuing restrictions on public sector funding will impact on Local Authority and NHS budget settlements in the medium term impacting on the ability to provide sufficient funding required to support services delivered by the IJB. This could lead to the IJB failing to meet its aims within anticipated timescales as set out in its Strategic and Commissioning Plan. Latest Update Budget Outlook paper was presented to the IJB on the 11.12.24. Given the scale of the cost pressure gap and public sector financial position, the risk has been escalated to a score of 25 Control factors <ul style="list-style-type: none"> Budgeting Arrangements MSG and external audit recommendations Savings and Transformation Plan Financial Recovery Plan	Dundee HSCP Chief Finance Officer	5	5	25	→	23.04.24
Staff Resource The volume of staff resource required to develop effective integrated arrangements while continuing to undertake existing roles / responsibilities / workload of key individuals may impact on organisational	Dundee HSCP Chief Officer	5	5	25	→	23.04.24

<p>priorities, operational delivery to support delivery of effective integrated services. Corporate processes in partner bodies can lead to delays in recruitment. Market conditions can impact on ability to appoint suitable staff in a timely way. Impact on levels of staff absence impact on staff resource.</p> <p>Latest update</p> <p>Ability to progress strategic plan actions are impacted by staff resource available and proposed future budget reductions will exacerbate this.</p> <p>Implementation of safe staffing act is demonstrating the levels of staffing operationally.</p> <p>Impact of half hour reduction of NHS workforce for Agenda for Change will mean that across services available working week hours will reduce.</p> <p>Control factors</p> <ul style="list-style-type: none"> • Additional focus on Absence Management • Development of new models of care • Organisational Development Strategy • Recruitment • Safe Staffing Act recording tools • Service Redesign • Workforce plan • Workforce wellbeing actions. 						
<p>Lack of Capital Investment in Community Facilities (including Primary Care)</p> <p>Restrictions in access to capital funding from the statutory partner bodies and Scottish Government to invest in existing and potential new developments to enhance community-based health and social care services.</p> <p>Latest update</p> <p>This continues to be an extreme risk. Scottish Government 2024/25 Capital Investment Resources available to LAs and NHS Boards has been severely restricted leading to minimal likelihood of resources being made available for community facilities</p> <p>Control factors</p>	<p>Dundee HSCP Chief Officer and Chief Finance Officer</p>	5	5	25	→	23.04.24

<p>Development of IJB Property Strategy</p> <p>Joint working with Partner Bodies over alternative opportunities</p> <p>Reshaping non-acute care project</p>						
<p>National Care Service</p> <p>The recent legislation published on the establishment of the National Care Service sets out plans to introduce Local Care Boards with the abolition of Integration Joint Boards</p> <p>Latest update</p> <p>National Care Service (Scotland) Bill - draft Stage 2 amendments were posted in June 2024 with a 'Call for Views'. There is recognition by Scottish Government that work is needed to confirm which legislative approach would best deliver the intended changes. COSLA issued a statement on 27th September 2024 to advise that Council Leaders have withdrawn support for the Scottish Government's revised National Care Service Bill. It is currently anticipated that Integration Joint Boards will reform to become local Care Boards. The degree of uncertainty about future arrangements and timing for implementation of planned changes means there is a significant level of risk for IJB's</p>	Dundee HSCP Chief Officer	4	5	20	→	23.04.24
<p>Primary Care Sustainability</p> <p>Continued challenges around the sustained primary care services, arising from recruitment, inadequate infrastructure including IT and location, and inadequate funding to fully implement the Primary Care improvement plan.</p> <p>Latest update</p> <p>Sustainability of General Practice: If there continues to be huge pressure on general practice due to increasing demand and complexity of health needs together with the increase in GP vacancies due to retirement and recruitment and retention issues then we will be unable to meet the health needs of the population.</p> <p>Current Controls: Implementation of MOU under GMS 2018. Programme of work around sustainability encompassing GP strategy and GP premises strategy. Improved access to other services within primary care that support general practice. Informing patients about those services. Informing Reception Teams on service availability and access, further developing care navigation across all practices. Monitoring position through sustainability survey.</p> <p>Planned Controls: There is further work to be done to understand critical components of this risk including premises, funding, other services and staff groups (e.g. ANPs, nurses).</p>	Dundee HSCP Chief Officer	4	5	20	→	23.04.24

<p>If GP practices requests for lease assignation cannot be considered as a result of a lack of an agreed processes for practices, HSCPs and NHS Tayside regarding leases acquisition, including defining the necessary governance arrangements, then this will have a negative impact on GP partner recruitment and retention.</p> <p>Current Controls: GP Premises Strategy developed. Process in place in Dundee HSCP to consider local requests in the context of the property strategy. RAG process defined. Planned Controls: Draft process developed. Draft paper for submission to ELT (proposed Nov 2024) to be agreed across all four parties for consideration and approval of lease acquisition</p>						
<p>National Insurance Increase</p> <p>The increase in National Insurance contributions poses a financial risk particularly to third sector organisations. These organisations which often operate on tight budgets and limited funding streams face additional financial strain. This could lead to reduced capacity to deliver essential services, weakening the partnership's ability to meet its strategic objectives and compromising care delivery to vulnerable populations.</p> <p>Control Factors are being developed</p>	Dundee HSCP Chief Officer and Chief Finance Officer	4	4	16	→	23.04.24
<p>Cost of Living Crisis</p> <p>Cost of living and inflation will impact on both service users and staff, in addition to the economic consequences on availability of financial resources. This is likely to have a significant impact on population health and the challenge this will present to the IJB in delivering its strategic priorities.</p> <p>Latest update</p> <p>Sub-analyses of Engage Dundee have been undertaken for a range of at-risk groups including carers and long-term sick and disabled. Findings have been fed into a range of SPGs to identify appropriate actions.</p> <p>Developments include a new mental health and wellbeing section on the NHST website linking people to a service directory, including money/benefits advice, and self-help materials.</p> <p>Public Health has led on the production of a mental health promotion leaflet, which is being co-produced with partners, communities and</p>	Dundee HSCP Chief Officer and Chief Finance Officer	4	4	16	→	23.04.24

<p>services users. This will be targeted at the digitally excluded, linking in with local community centres and foodbanks/ larders.</p> <p>A multi-agency Engine Room has been formed to develop interim indicators to link work at a local and service level to the city's strategic objective of reducing inequalities in health, and assess whether services are being provided in an equitable manner.</p> <p>The HSCP is involved in the city's Local Fairness Initiatives and Employability Pathfinder. Tests of change are being explored with GP practices in the North-East and East End to raise awareness of community supports.</p> <p>Control Factors</p> <ul style="list-style-type: none"> Engage Dundee Fairness and Equality Workstreams Focus of Services identifying those most vulnerable 						
<p>Viability of External Providers</p> <p>Financial instability / potential collapse of key providers leading to difficulty in ensuring short / medium term service provision. * Inability to source essential services</p> <ul style="list-style-type: none"> * Financial expectations of third sector cannot be met * Increased cost of service provision * Additional burden on internal services * Quality of service reduces <p>Latest update</p> <p>Contracts Team are currently looking at improved interface with contract/finance teams to ensure more robust monitoring when risk is identified - this part of internal audit recommendations.</p> <p>Control factors</p> <ul style="list-style-type: none"> Consistent engagement with service providers Internal audit review to partnership's approach to viability of external providers Potential Local or Scottish Government Intervention Robust Contract Monitoring Co-ordination to provider services 	Dundee HSCP Chief Officer	4	4	16	→	23.04.24

Escalation of Property Safety Issues The Health and Social Care Partnership faces a significant strategic risk due to the due to the ability of the partner bodies to effectively repair and maintain critical health and social care infrastructure, crucial for the safe delivery of care and other essential support services Latest update Current areas of concern highlighted are at Kingsway Care Centre and RVH. Control factors include Property Rationalisation programme and escalation of these issues by Chief Officer.	Dundee HSCP Chief Officer	4	4	16	→	23.04.24
Capacity of Leadership Team Capacity of management team Latest update Several factors have contributed to the increase in likelihood for this risk, including the retirement of the Chief Officer. The leadership team continue to be impacted by workload pressures of the wider workforce recruitment challenges. This is likely to be exacerbated as preparations for the intro of the NCS develop over the coming period. The implementation of the new Leadership structure on a permanent basis will consolidate and provide clarity to roles. Control factors <ul style="list-style-type: none"> • Response from Partner bodies • Review of Senior Management Team Structure • Sharing of Management Team duties 	Dundee HSCP Chief Officer	4	4	16	→	23.04.24
Data Quality Data Quality of information on Mosaic case recording system is not accurate leading to difficulties in providing statutory government returns and accurate billing for billable services delivered. Latest Update Strategy and Performance research team are working with operational staff to improve data quality.	Service Manager	4	4	16	→	23.04.24

<p>Forthcoming changes to IT systems include the move from Oracle to sql for hosting Mosaic and the change from DCC IT system Citrix which will impact on reporting mechanisms.</p> <p>Quality, Data and Intelligence team are working with IT to improve reporting mechanisms and decide on most efficient and resilient reporting systems (e.g. Power BI, Crystal).</p>						
<p>Increased Bureaucracy</p> <p>Governance mechanisms between the IJB and partners could lead to increased bureaucracy in order to satisfy the assurance arrangements required to be put in place.</p> <p>Latest update</p> <p>Potential for additional bureaucracy through Scot Gov Covid enquiry and National Care Service development.</p> <p>Control factors</p> <ul style="list-style-type: none"> • Support and roles • Work with partner bodies to streamline report requirements for respective accountabilities 	Dundee HSCP Chief Officer	4	4	16	→	23.04.24
<p>Changes to IT Systems</p> <p>There are significant changes coming to IT systems across DHSCP. These include move from Citrix to AWS. There are also moves from hosting Mosaic, Case Management system from Oracle to sql and issues arising from changes to reporting. There are also difficulties in ensuring access to information on Sharepoint between DCC and NHST. Hybrid working is being affected by these challenges. Morse is being implemented in NHST.</p> <p>Latest Update</p> <p>Changes to IT Systems remain to cause challenges for DHSCP workforce. This includes differences in implementation of O365 across DCC and NHST.</p> <p>Implementation of Morse in NHST is also ongoing.</p> <p>The IT system used by DDARS for prescribing is coming to its end of life and another solution is yet to be identified.</p> <p>The company that owns Vision, used by NHS, is going into administration, and there is uncertainty around this.</p>	Dundee HSCP Chief Officer	4	4	16	→	23.04.24
<p>Information Governance</p> <p>Capacity and ability to comply with increasing number of Subject Access Requests in DCC leading to potential action from Information Commissioner</p>		3	4	12	→	23.04.24

<p>Latest Update</p> <p>A year-on-year increase in Subject Access Requests has meant that this is causing a significant impact on staff who undertake this task. In addition, changes to IT mean that manual redaction is no longer secure and must be undertaken by a specific software that only certain staff have access to. The move away from Sharefile to o365 file sharing has caused issues for securely sharing large amounts of electronic documents with external requesters. Risk that we will not comply with Data Protection rules and face action from Information Commission.</p> <p>Control factors</p> <ul style="list-style-type: none"> • Posts identified in Strategy and Performance section to undertake these tasks. Recruitment processes to begin in next six months. 						
<p>Category One Responder</p> <p>Additional responsibilities associated with Category 1 responder status are not supported by additional resources from Scottish Government and existing resources are not sufficient to meet statutory duties.</p> <p>Latest update</p> <p>Risk to remain on register due to finalisation of list of available DHSCP senior staff to manage rest centres, and to include Category One Responder duties in the next revision of the IJB Standing Orders in 2025. It is anticipated that once these actions are completed this risk will be able to be deactivated.</p>	Head of Health and Community Care	2	4	8	→	23.04.24
<p>Employment Terms</p> <p>Differing employment terms could expose the partnership to equality claims and impact on staff morale.</p> <p>Latest Update</p> <p>Management continue to have an overview of where issues arise within integrated teams with differing employment terms, and continue to assess and review within integrated teams.</p>	Dundee HSCP Chief Officer	3	3	9	→	23.04.24
<p>Governance Arrangements being Established fail to Discharge Duties</p> <p>Clinical, Care & Professional Governance arrangements being established fail to discharge the duties required.</p> <p>The IJB's Governance arrangements were assessed as weak/unsatisfactory.</p>	Dundee HSCP Chief Officer	2	4	8	→	23.04.24

<p>Latest update</p> <p>Reports from CCPG to the PAC consistently provide a level of reasonable assurance of good and sound governance. leading to a reduction in the likelihood of this risk occurring.</p> <p>This risk will be revisited when we receive the Internal and External Audit governance report conclusions, with a view to potentially archiving.</p> <p>Control factors</p> <ul style="list-style-type: none"> • Development of IJB Member Governance development sessions • Implement Governance Action Plan • Review of processes established 						
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New Risks for entry

Prescribing Costs						
Fire Safety Referrals						

Archived

None						
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Risk Status	
↑	Increased level of risk exposure
→	Same level of risk exposure
↓	Reduction in level of risk exposure
x	Treated/Archived or Closed

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