

Moray Integration Joint Board

RISK POLICY

Version	Creation /Review date	Approved by MIJB	Date Implemented	Review Date
1.1	March 2016	31 March 2016	1 April 2016	April 2018
1.2	July 2018	APR 26/7/18	1 August 2018	July 2020
1.3	September 2020	MIJB 24/9/20	1 October 2020	April 2022
1.4	July 2026	MIJB 24/9/26	24 September 2026	September 2028

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Version 1.4
July 2026

Introduction and Purpose

The purpose of this policy is to support clear, proportionate and consistent oversight of risk by the Moray Integration Joint Board. It sets out the Board's approach to strategic risk management, risk appetite, escalation, assurance and reporting.

Effective risk management supports good governance, informed decision-making and delivery of the MIJB Strategic Plan. It helps the Board understand risks that may affect its statutory responsibilities, delegated functions, directions, financial sustainability, performance, quality of care and public accountability.

This is a Board-level policy focused on MIJB governance, assurance and strategic risk. It does not replace the operational risk management policies, systems or responsibilities of NHS Grampian or Moray Council.

Scope

This policy applies to the Moray Integration Joint Board, its committees, voting and non-voting members, the Chief Officer, Chief Financial Officer and senior officers supporting the Board's governance and assurance arrangements.

The policy applies to strategic risks that may affect delivery of the MIJB Strategic Plan, statutory responsibilities, delegated functions, directions, financial sustainability, public accountability and the Board's ability to provide effective oversight and assurance.

Day-to-day operational risks are managed through the relevant risk management policies, systems and governance arrangements of NHS Grampian and Moray Council. Operational risks should be escalated for MIJB oversight where they have a material impact on the Board's strategic objectives, delegated functions, resources, statutory duties, performance, quality of care or public confidence.

Definition of Risk and Risk Management

For the purposes of this policy, risk means the effect of uncertainty on objectives. Risk may relate to a threat, an opportunity, or a combination of both.

Risk management is the process of identifying, assessing, managing, monitoring and reporting risks in a way that supports informed decision-making and effective governance.

The MIJB's approach is informed by recognised risk management principles, including ISO 31000:2018, and is applied proportionately to the Board's strategic governance role.

Roles and Responsibilities

Moray Integration Joint Board

The MIJB is responsible for approving this policy and maintaining oversight of strategic risks that may affect delivery of its Strategic Plan, delegated functions, directions, financial sustainability and statutory responsibilities. It is also responsible for:

- Agreeing the Board's risk appetite and use it to support decision-making.
- Receiving assurance that strategic risks are being identified, reviewed and managed.
- Considering risks escalated through agreed governance routes where they have a material impact on MIJB objectives or public accountability.
- Using risk information to support scrutiny, prioritisation, resource decisions and the Annual Governance Statement.

Audit, Performance and Risk Committee

- Scrutinise the MIJB Strategic Risk Register and seek assurance on controls, actions and movement in risk levels.
- Consider whether risks are appropriately described, scored, owned and reviewed.
- Escalate matters to the MIJB where further Board oversight, decision or assurance is required.

Chief Officer

The Chief Officer is accountable to the MIJB for ensuring that appropriate arrangements are in place to identify, manage and report strategic risks to the Board.

The Chief Officer is responsible for ensuring that relevant operational risks are considered for escalation where they may materially affect MIJB objectives, delegated functions, resources, statutory duties, performance, quality of care or public confidence.

Chief Financial Officer

The Chief Financial Officer provides advice and assurance on financial risk, financial controls, financial sustainability and the use of resources. The Chief Financial Officer also supports the Board's internal control and annual accounts processes.

Voting and Non-Voting Members

Members are responsible for considering risk as part of Board and committee business. This includes seeking assurance, asking appropriate questions and taking account of risk when making decisions.

Senior Officers

Senior officers are responsible for identifying, reviewing and contributing to strategic risks within their area of responsibility. They must ensure controls, actions, target dates and assurance sources are clear and kept up to date.

NHS Grampian and Moray Council

NHS Grampian and Moray Council retain responsibility for operational risk management within their respective policies, systems and governance arrangements. Partner risks should be brought to the attention of the MIJB where they may materially affect delivery of delegated functions, strategic objectives or public accountability.

Risk Management Approach

The MIJB will maintain a Strategic Risk Register to record, review and report the most significant risks to delivery of its objectives. Risks should be described clearly, assigned to a risk owner, scored consistently and supported by proportionate controls, actions and assurance.

The risk management approach should support practical discussion about what could prevent delivery, what controls are in place, what further action is needed, and what assurance is available to the Board.

Risk scoring should consider both likelihood and impact. The scoring matrix below should be used as a guide to support consistency, but professional judgement and the wider context should also be considered.

Likelihood	**Consequence / Impact**				
	Negligible	Minor	Moderate	Major	Extreme
Almost Certain	Medium	High	High	V High	V High
Likely	Medium	Medium	High	High	V High
Possible	Low	Medium	Medium	High	High
Unlikely	Low	Medium	Medium	Medium	High
Rare	Low	Low	Low	Medium	Medium

Risk Appetite

Risk appetite describes the level of risk the MIJB is prepared to accept in pursuit of its strategic objectives. It supports consistent decision-making and helps clarify when further action or escalation is required.
The MIJB's risk appetite may vary depending on the type of risk and the level of assurance available. The Board may be prepared to accept managed risk where it supports innovation, improvement and delivery of the Strategic Plan, but will normally have a lower appetite for risks relating to safety, statutory duties, financial sustainability, governance or public confidence.

- Strategic change and improvement: a balanced appetite where risk is understood, benefits are clear and controls are in place.

- Quality, safety and safeguarding: low appetite for unmanaged risks that may cause harm or reduce standards of care.
- Financial sustainability and use of public funds: low appetite for risks that threaten financial control, value for money or statutory duties.
- Governance, compliance and reputation: low appetite for risks that weaken accountability, transparency, public confidence or legal compliance.
- The Board should review risk appetite periodically and apply it when considering strategic decisions, major changes, resource allocation and risk escalation.

The Board may review and amend its risk appetite from time to time in response to changes in strategic priorities, operating conditions, assurance, legislation or the wider internal and external environment. Changes to the agreed risk appetite do not, in themselves, require amendment of this Policy.

Escalation and Reporting

Risks should be managed at the most appropriate level. Escalation to the MIJB should be based on strategic significance, materiality and the level of assurance required.

- The Strategic Risk Register should be reported to the Audit, Performance and Risk Committee for scrutiny and assurance. Matters requiring wider consideration, decision or escalation should be reported to the MIJB.

- Risks should be escalated where they may materially affect delivery of the MIJB Strategic Plan, delegated functions or directions.

- Risks should be escalated where they may affect statutory duties, financial sustainability, performance, quality of care, public confidence or the Annual Governance Statement.

- Risks should be escalated where existing controls are not effective, assurance is limited, or further Board-level decision-making is required.

Risk reporting should be clear, concise and focused on movement in risk score, key controls, gaps in assurance, overdue actions and decisions required.

Strategic Risk Register Governance

The MIJB Strategic Risk Register is the main tool for recording and reporting the Board's strategic risks. Each risk should include:

- a clear risk description;
- a named risk owner;
- current and target risk scores;
- existing controls and sources of assurance;
- planned actions, responsible leads and timescales;
- review dates and any change in risk position.

The Strategic Risk Register should be reviewed regularly by risk owners and reported through agreed governance routes. The frequency of reporting should be proportionate to the level of risk and the level of assurance required.

Risks should be updated when there is a significant change in context, controls, performance, legislation, finance, service delivery, inspection findings or assurance.

The Strategic Risk Register should support the preparation of the Annual Governance Statement by providing evidence of how significant risks have been identified, managed, scrutinised and reported.

Review of this Policy

This policy should be reviewed at least every three years, or sooner where there are significant changes to legislation, governance arrangements, the Integration Scheme, Standing Orders, the Strategic Plan or the Board's risk management arrangements.