



Stephen Brown (Chief Officer)
Orkney Health and Social Care Partnership
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Agenda Item: 7.

IJB Performance and Audit Committee

Wednesday, 18 March 2026, 14:00.

Council Chamber, Council Offices, School Place, Kirkwall.

Minute

Present

- Rona Gold, Non-Executive Director, NHS Orkney
- Issy Grieve, Non-Executive Director, NHS Orkney
- Councillor Lindsay Hall, Orkney Islands Council.
- Willie Neish, Carer Representative.
- Councillor Jean Stevenson, Orkney Islands Council.

Clerk

- Sandra Craigie, Committees Officer, Orkney Islands Council.

In Attendance

Orkney Health and Social Care Partnership:

- Stephen Brown, Chief Officer.
- Lynda Bradford, Head of Health and Community Care.
- John Daniels, Head of Primary Care Services.
- Darren Morrow, Head of Children, Families and Justice Services and Chief Social Work Officer (via Microsoft Teams).
- Mohammed Sohail, Chief Finance Officer (via Microsoft Teams).
- Shaun Hourston-Wells, Policy and Performance Manager.
- Diane Young, Service Manager – Mental Health Services (via Microsoft Teams), for Items 8 and 9.

Orkney Islands Council:

- Andrew Paterson, Chief Internal Auditor.
- Georgette Herd, Principal Solicitor.

NHS Orkney:

- Damian Reid, Interim Director of Finance.

Observing

- Susan Taylor, Committees Officer, Orkney Islands Council.

Chair

- Councillor Lindsay Hall, Orkney Islands Council.

1. Apologies

Apologies for absence had been intimated on behalf of Erik Knight, Cathy Martin, Danny Oliver, Steven Phillips, Sam Thomas and Louise Willis.

2. Declarations of Interest

There were no declarations of interest intimated in respect of items of business to be discussed at this meeting.

3. Minute of Previous Meeting

There had been previously circulated the draft Minute of the Meeting of the Performance and Audit Committee held on 3 December 2025 for consideration, checking for accuracy and approval.

The Minute was **approved** as a true record, on the motion of Councillor Jean Stevenson, seconded by Councillor Lindsay Hall.

4. Matters Arising

There had been previously circulated the Matters Arising Log from the meeting held on 3 December 2025, for consideration and to enable the Committee to seek assurance on progress, actions due and to consider corrective action, where required.

Stephen Brown advised members that there were no outstanding matters on the Log.

In response to Issy Grieve's query regarding the Financial Recovery Plan, Mohammed Sohail advised that this matter had been considered at a recent IJB Development Session but that due to time constraints it had not been possible to present the report at this meeting. It was hoped the report would be brought to the June meeting of the Performance and Audit Committee.

The Performance and Audit Committee thereafter scrutinised the Log and took assurance.

5. Terms of Reference

There had been previously circulated a report presenting revised Terms of Reference, for consideration.

Stephen Brown apologised for not providing members with the version of the Terms of Reference with tracked changes included so members could see what amendments were proposed. He thereafter highlighted the following amendments and additions:

- Section 2 – The date of the current committee membership had been added, as well as the membership updated to reflect recent appointments and changes.
- Section 3 – “Vice Chair” had been added to the heading, together with a paragraph stating that the Vice Chair would be nominated from the full membership of the Committee for a two-year period, commencing in May 2027.
- Section 8 – A section to scrutinise regular reports on financial activity to provide additional assurance to the IJB on financial matters, had been added.
- Section 9 – Added to ensure that the Terms of Reference would be reviewed every three years or earlier if required.

The Chair stated that, without having full sight of the proposed changes to the Terms of Reference in front of them, he felt that the updated version could not be approved. Rona Gold commented that since the proposed updates had been illustrated and explained by Stephen Brown so clearly, she was content to approve the updated version. This was agreed by the Committee.

The Performance and Audit Committee thereafter **approved** that the updated Terms of Reference for the Performance and Audit Committee, attached as Appendix 1 to the report circulated, be submitted to the Integration Joint Board, for consideration.

6. Internal Audit – Strategic Planning and Links with Localities

There had been previously circulated the Strategic Planning and Links with Localities Internal Audit Report, for scrutiny.

Andrew Paterson informed members:

- That the Public Bodies (Joint Working) (Scotland) Act 2014 required Integration Joint Boards to develop a Strategic Plan for delegated functions and budgets. This included dividing the area covered by the Board into localities and setting out arrangements for each as well as ensuring engagement with communities, service users, carers and staff in planning.
- That the objective of this audit was to review the Integration Joint Board’s strategic planning process and how it linked with the needs of individual localities and community groups.
- That the audit provided substantial assurance over the arrangements for strategic planning and links with localities.
- That the internal audit report included one medium priority recommendation regarding Local Place Plans. There were also four low priority recommendations regarding the Strategies, Policies and Plans Log, stakeholder engagement, promotion plans and performance reporting. There were no high priority recommendations.

Issy Grieve expressed her delight that an Internal Audit of Strategic Planning had been undertaken and commented how useful it was to enable members to reaffirm areas where the Board was working well and highlighting areas for improvement.

Councillor Jean Stevenson commented that she also welcomed the report and noted the reference to Place Plans. She queried who would be responsible for the link between Place Plans and the Strategic Plan.

Stephen Brown advised that Heads of Service and lead officers within the Orkney Health and Social Care Partnership had engaged with Community Councils and other stakeholders. He confirmed that Shaun Hourston-Wells was the link with the Place Plans, as well as the link with the Strategic Plan, thereby avoiding duplication and ensuring that the Strategic Plan remained in alignment with the needs and priorities of local residents and groups.

Issy Grieve commented on the current Strategic Plan and acknowledged the amount of work Shaun Hourston-Wells had done in bringing the Plan to fruition.

Rona Gold commented that it was a positive report and audit, with clear recommendations. However, she queried whether this report should go to one of NHS Orkney's committees, for noting, as the delayed completion of the Joint Strategic Needs Assessment, which had been raised in the audit, rested with NHS Orkney.

In response, Stephen Brown advised that there was a need to be careful about not taking the same paper to a variety of committees and Boards, if it could be helped. He confirmed that the minute of this meeting would be fed back to the Integration Joint Board, and he would make sure that the key elements raised would be fed back to the Board.

Following scrutiny of the internal audit report, attached as Appendix 1 to the report circulated, reviewing the effectiveness of the strategic planning arrangements focusing on how locality needs and priorities were reflected in the Strategic Plan, the Performance and Audit Committee obtained assurance that action had been taken or agreed where necessary.

7. Registered Services within Orkney Health and Care

There had been previously circulated the six-monthly assurance report on inspection activities for registered services within the Orkney Health and Social Care Partnership, for scrutiny.

Darren Morrow informed members that the report covered inspection activity and improvement work for the period August 2025 to date. Three inspections were included in the report. Other inspections which had been undertaken within this period would be presented in the next six-monthly assurance report, as the reports had not yet been published.

He continued that the report outlined the grades awarded and previous comparisons to the last inspection undertaken, as well as outlining any areas which required development and provided assurance on plans in place to achieve progress.

He advised that staffing within the Care at Home service remained a challenge and gave assurance that work was underway to address these issues.

Regarding one of his own services raised within the report, he advised members that the Children's Respite Service had maintained its grade of 'very good' from its previous inspection.

In response to a question from Rona Gold, Darren Morrow confirmed that individual formal improvement plans were developed by each service after an inspection had taken place, where any of the requirements or areas for development that had been identified, as well as where roles and responsibilities, would be assigned and timescales for improvements tracked. He confirmed that this applied even when the grade awarded had been very good.

Issy Grieve commented that there was evidence of improvement and that the work of the teams concerned should be recognised.

Following scrutiny of the inspection activity for registered services within Orkney Health and Care, for the period August 2025 to date, as detailed in section 4 of the report circulated, the Performance and Audit Committee obtained assurance.

8. Strategic Plan Priorities – Progress Report

There had been previously circulated the regular update on progress made against the six Strategic Priorities, the associated Milestones, and Actions, for scrutiny.

Shaun Hourston-Wells advised that the Strategic Plan Delivery Plan 2025/26 outlined milestones and measures for each priority, The Delivery Tracker, which was attached as Appendix 1 to the report circulated, monitored performance, ensuring all six priorities were reviewed twice yearly.

He continued that, as this was the last update of the current Delivery Plan, all six Strategic Priorities had been included. To accommodate the final update, the definition of those Milestones and Actions that were marked yellow had been amended to “behind schedule or partially complete”.

A breakdown of the 26 actions contained within the Strategic Plan Delivery Plan 2025/26 was provided as follows:

- 9 – Blue – complete.
- 4 – Green – on schedule to be completed.
- 7 – Yellow – behind schedule or partially complete.
- 6 – Red – significant possibility of failure to deliver within the timeframe of the plan.

He confirmed that, in most cases, it was anticipated that those actions marked in red or yellow would be included in the new Strategic Plan Delivery Plan, together with descriptions of how and when those actions would be achieved.

Rona Gold commented that there had been positive improvements in care, carers and unpaid carers but queried whether the initial unpaid carer targets had been overly ambitious. She queried if there were underlying challenges for milestones and actions not being met and how the new Strategic Plan Delivery Plan would incorporate those challenges.

Regarding the Unpaid Carers Milestones and Actions, Shaun Hourston-Wells agreed that the results had been disappointing and explained that the actions and milestones had been set shortly after the first carers' conference when there was a high level of confidence about what might be delivered within the timeframe. This confidence had not translated into the expected high levels of contact by carers with Social Work or

Crossroads. He confirmed that, having spoken with colleagues at Crossroads, it had been agreed that, unless there was a nationwide change to the profile of carers, targets for the new Delivery Plan would have to be adjusted.

He continued that the target number of carer assessments had not been met. However, there was a lack of recording and measurement capability within existing systems and anecdotal evidence suggested that far more assessments had taken place than recorded data would indicate. He further advised that the new Delivery Plan, which was currently under development, included an action for the PARIS system that would record all information.

Shaun Hourston-Wells further advised that, as he had been undertaking the duties of the Carer Lead, in addition to his own responsibilities, he had only been able to give limited time to the role. However, he was now happy to advise that a Carer Lead had been appointed to the role and was expected to start in post in the near future.

Rona Gold thanked Shaun Hourston-Wells for his explanation and commented that it was important for targets to be ambitious. She further commented that she looked forward to seeing the impact of the new Carer Lead.

Councillor Jean Stevenson asked if carer assessment information could be recorded manually until the PARIS system updates were implemented.

Shaun Hourston-Wells confirmed himself and Cathy Martin, who was a member of the Carer Strategy Group, were working together on a way to enable the information to be captured. He further confirmed that the IT specialists were confident that the PARIS updates would be possible and implemented within as short a timescale as possible.

Lynda Bradford advised that sometimes care assessments were offered but refused and this refusal was not always recorded. She continued that when care packages were reviewed a carer's assessment may be offered but not recorded.

Following a further query from Councillor Jean Stevenson regarding whether there was any feedback on implementation of the MORSE electronic patient record system, Diane Young advised that MORSE was now live in the Community Mental Health Team with Community Psychiatric Nurses using the system. Allocation of appointments and diary management were much improved, and reporting systems were in the process of being moved over. Child and Adolescent Mental Health Services was expected to be added within six weeks and the adult psychiatrists would begin using the system in the near future.

Issy Grieve commented that the actions from the previous plan had been ambitious and that workforce issues continued to be challenging. She asked if areas for improvement and recommendations from the 2025 Plan would be carried forward to future plans. Shaun Hourston-Wells confirmed that that would be the case.

Following scrutiny of progress made against all the Strategic Priorities, as outlined at section 4.3 and detailed in the Strategic Plan Delivery Tracker, attached as Appendix 1 to the report circulated, the Performance and Audit Committee obtained assurance that those Priorities were being progressed and delivered.

9. Date and Time of Next Meeting

The Committee noted that the next meeting would be held in the Council Chamber on Wednesday, 24 June 2026 at 14:00.

10. Conclusion of Meeting

There being no further business, the Chair declared the meeting concluded at 14:45.

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Chair's Assurance Report to the Integration Joint Board

Title of Report:	Performance and Audit Committee.	Date of Meeting:	18 March 2026.
Prepared By:	Cllr Lindsay Hall.	Presented By:	Cllr Lindsay Hall.
Purpose:	To present the unapproved minutes from the Performance and Audit Committee meeting on 18 March 2026.		

Positive Assurances:	Decisions Made:
<ul style="list-style-type: none">• Terms of Reference: The amended Terms of Reference was presented which now includes additional scrutiny and assurance on financial matters for the Integration Joint Board.• Internal Audit – Strategic Planning and Localities: The audit showed substantial assurance in relation to strategic planning arrangements and links with localities. There was no high priority recommendations identified.• Care Inspectorate Inspections: There has been continued improvement across services. Positive performance has been maintained in key areas, including services graded as “very good”.• Strategic Plan Priorities Progress: It was reported that nine actions had been completed with a further four on track for completion within the timescales.	<ul style="list-style-type: none">• Terms of Reference: There was agreement that the revised Terms of Reference should be submitted to the Integration Joint Board for consideration.
Areas of Concern or Key Risks to Escalate:	Major Actions:

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<ul style="list-style-type: none">• Financial Recovery Plan: It was advised that the Draft Plan has been delayed and will be brought to the next Integration Joint Board meeting.• Strategic Plan Priorities Progress: A number of actions within the Strategic Plan Delivery Plan were identified as behind schedule (seven) or at significant risk of non delivery within planned timescales (six). Assurance was provided that these actions will be carried forward into the revised Strategic Plan Delivery Plan with mitigating actions identified. These include actions in relation to unpaid carers, Care at Home provision and Mental Health and Wellbeing.	None.
Comments on Effectiveness of the Meeting:	
The meeting provided robust scrutiny of reports with constructive discussion on strategic priorities and assurance processes. The meeting was well attended and with active engagement from members.	