



**Stephen Brown (Chief Officer)**  
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Agenda Item:

## IJB Performance and Audit Committee

Wednesday, 3 December 2025, 10:00.

Council Chamber, Council Offices, School Place, Kirkwall.

## Minute

### Present

- Rona Gold, Non-Executive Director, NHS Orkney (via Microsoft Teams).
- Issy Grieve, Non-Executive Director, NHS Orkney (via Microsoft Teams).
- Councillor Lindsay Hall, Orkney Islands Council.
- Willie Neish, Carer Representative.
- Danny Oliver, Staff-side Representative, Orkney Islands Council.
- Councillor Jean Stevenson, Orkney Islands Council.
- Sam Thomas, Director of Nursing, Midwifery, AHPs and Chief Officer Acute, NHS Orkney.

### 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.
- Mohammed Sohail, Chief Finance Officer.
- Cathy Martin, Service Manager (Adult and Learning Disability Social Work)/Mental Health Officer (for Items 7 to 10).
- Helen Sievwright, Service Manager (Community Care) (for Items 7 to 10).
- Shaun Hourston-Wells, Policy and Performance Manager.
- Callan Hunter-Curtis, Public Protection Lead Officer (via Microsoft Teams).

## **Orkney Islands Council:**

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

## **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 Morven Gemmill, Steven Phillips, Suzanne Roos 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 25 September 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 Sam Thomas.

### **4. Matters Arising**

There had been previously circulated the Matters Arising Log from the meeting held on 25 September 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 two outstanding matters on the log; the first being whether there was the potential to bring financial performance reports to this Committee prior to taking them to the Integration Joint Board; the second being whether the full Risk Register for the Integration Joint Board should also come to the Performance and Audit Committee.

He continued that the delay in reaching decisions on these matters had been, in part, as a result of changes in the Chair and Chief Finance Officer roles. He confirmed that the Chair, the Chief Finance Officer and himself had recently met and had lengthy discussions regarding both matters. As the IJB members were now receiving full finance reports, as well as being provided with monthly updates, the decision taken by the Chair of the Performance and Audit Committee was that financial reports should continue to be presented to the Integration Joint Board only.

Regarding the Strategic Risk Register, it had been agreed with the Chair that, as the Strategic Risk Register encapsulated not only the strategic risks but the actions to try to mitigate them, the Strategic Risk Register would also continue to be presented to the Integration Joint Board only.

In response to Rona Gold's query regarding any potential impact of the two reports not coming to the Performance and Audit Committee, Stephen Brown advised that he did not think there would be any adverse effect and that the approach would streamline processes and would ensure that papers presented to the Integration Joint Board offered a more comprehensive overview. He continued that the challenges were recognised and the commitment to produce a monthly briefing for the full membership of the Integration Joint Board would keep members fully updated.

Rona Gold noted that financial plans were addressed within the external audit process and sought clarification that financial reporting would continue to be considered through audit papers rather than as separate reports. Stephen Brown confirmed that she was correct with her assumption, further clarifying that the annual accounts were also submitted to the Committee, all of which ensured continued scrutiny and oversight of financial matters by the Performance and Audit Committee.

Stephen Brown highlighted that there was a proposal that both matters be deleted from the log following this meeting, which members agreed.

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

## **5. External Audit Actions – Progress Report**

There had been previously circulated an update on progress with External Audit actions, for scrutiny.

Andrew Paterson informed members:

- That the purpose of the report was to present an update on progress being made with implementation of external audit actions.
- That external audit actions were now monitored through Orkney Islands Council's performance management system, Ideagen Risk Management.
- That Ideagen used a traffic light system to classify progress as follows:
  - Red indicated that the agreed action had passed the agreed implementation date or had experienced significant underperformance.
  - Amber indicated that the agreed action was experiencing minor underperformance with a risk of failure to meet its target.
  - Green indicated that the action was on target.
  - Blue indicated that the action had already been progressed to completion.
- That there were currently five recommendations on the system, three had been completed and two were still in progress, both of which were past the completion date.
- That the table on Page 3 of the report gave details of the status of the actions and the latest update provided by the action owners.
- That actions closed previously had already been reported to this Committee, so were not included in this report.

Rona Gold queried when completion dates for the financial recovery plan and the medium to long-term plan, which were marked as ongoing on the progress report, could be expected.

Stephen Brown introduced Mohammed Sohail, the interim Chief Finance Officer, who had recently taken up post. He confirmed that the draft Financial Recovery Plan would be brought back early in the New Year.

Regarding the medium to long-term financial plan, he advised that, due to staffing changes and uncertainty surrounding recent and forthcoming UK and Scottish budgets, it had not been possible to establish a clear framework for the medium to long-term financial plan. He further commented that, while an exact date could not yet be confirmed, completion was anticipated by June 2026.

Rona Gold appreciated the challenging situation and requested that, when officers were updating the system, target dates were added so members knew when to expect it. Stephen Brown confirmed that future updates would include target dates and details of responsible officers.

Following a query from Issy Grieve, Stephen Brown gave assurance that the draft Financial Recovery Plan would be circulated to members well in advance of any formal meetings.

Regarding the longer term 10-year financial plan, Mohammed Sohail commented that a 10-year financial plan would be dependent on assumptions and spending commitments, noting that its reliability would only be as strong as those underlying assumptions.

The Chair stressed the need for timely and comprehensive financial information to ensure that any recovery plan approved was realistic and sustainable, given current financial constraints.

The Performance and Audit Committee thereafter scrutinised progress made, to date, in completing External Audit Actions, as detailed in Appendix 1 to the report circulated, and obtained assurance that issues found during external audits were being actioned and followed up.

## **6. Internal Audit Actions – Progress Report**

There had been previously circulated an update on progress with Internal Audit actions, for scrutiny.

Andrew Paterson informed members:

- That the purpose of the report was to present an update on progress being made with implementation of internal audit actions.
- That the Global Internal Audit Standards in the UK Public Sector required the Chief Internal Auditor to monitor and ensure that management actions had been effectively implemented.
- That the progress of actions was monitored through Orkney Islands Council's performance management system, Ideagen Risk Management using the same traffic light system as the external audit actions.

- That the table detailed that there were nine actions in total, three of which had been completed and, of the remaining six, four had passed the agreed completion date.
- That there were no outstanding actions from previous years' audits.
- That the table on Page 3 gave a breakdown, providing an indication of which audits the actions were associated with and when the audits were performed. It also provided more detail on individual actions, owners and target dates, as well as the current position with implementation of the actions.

Rona Gold queried when Orkney Islands Council's Communications Strategy would be completed and what was the impact of its absence on outstanding actions. Stephen Brown was unable to confirm when the Strategy would be available and acknowledged that there were no Communications representatives present to provide an update. However, he did confirm that work on the Strategy was ongoing and that he would follow up with Communications colleagues outwith the meeting and provide members with an expected timeline.

He continued that, despite the absence of a formal Strategy, collaboration between NHS Orkney and Orkney Islands Council's Communications teams had improved, with the teams working more closely together and continuing discussions on shared issues.

Issy Grieve expressed concern regarding the length of time this action had been outstanding, noting that it had been pending for nine months and was originally due for completion in March 2025. She further noted that NHS Orkney's Communications Strategy was already in place and that the Council's Strategy would be broadly similar. She sought reassurance from the Service Managers present that effective communication was taking place within teams and that staff were being kept well informed.

Lynda Bradford confirmed that senior managers and lead professionals met frequently to discuss key matters, which was then cascaded to teams. She gave assurance that, notwithstanding the absence of a formal Communications Strategy, effective communication within teams was taking place. She further acknowledged that communication could be more challenging in certain areas, such as Care at Home, due to limited electronic engagement. However, alternative mechanisms were in place to ensure staff were informed.

Issy Grieve acknowledged that teams with the Orkney Health and Social Care Partnership did make significant efforts to communicate effectively with staff wherever possible.

Stephen Brown commented that Communications colleagues would acknowledge that the delay in delivering the Strategy had been significantly longer than anticipated. He informed members that, at a recent Council leadership event, internal communications had been discussed including identifying what worked well, such as the NHS weekly briefing, as well as addressing challenges with electronic communications, confirming that the discussions would inform development of an Internal Communications Strategy.

The Chair sought assurance that the Communications Team would be approached and that progress would be made on development of the Strategy. Stephen Brown was happy to give this assurance.

The Performance and Audit Committee thereafter scrutinised progress made, to date, in completing Internal Audit actions, as detailed in Appendix 1 to the report circulated, and obtained assurance that issues found during internal audits were being actioned and followed up.

## **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 22 April to 30 November 2025. Four inspections had been undertaken, three in local care home services and one on the local responder service. He confirmed that overall, the findings were positive, with several "Good" and "Very Good" ratings awarded.

He noted that following the initial inspection of St Rognvald House and the Care Inspectorate's reinspection, progress had been recognised, with specific commendation being given for the leadership approach.

He continued that staff limitations within social care remained a challenge and expressed appreciation for the hard work and dedication of social work staff and management.

Councillor Jean Stevenson asked for an update on Hamnavoe House regarding staffing levels, referring to section 6.2 and Appendix 2 of the report circulated, where 24 September 2025 had been set as the target date for staffing arrangements and training to be complete.

Lynda Bradford confirmed that, unfortunately, the target date had not been met. However, most of the work had been completed but the main issue was the staffing complement, confirming that, across the three care homes, there was currently a 40% vacancy rate which was significantly impacting progress.

Issy Grieve commented that, having experienced less-than-satisfactory inspection reports in previous years, she would like to congratulate and thank the teams for the reports presented today. She continued that the number of unannounced inspections across multiple areas in a short timeframe represented a huge amount of work and achieving the positive outcomes was commendable.

Lynda Bradford thanked her for her comment and confirmed that she would ensure the feedback was passed on to the teams.

The Chair commented that staffing challenges were affecting every service within Orkney Islands Council, as well as NHS Orkney, with insufficient people of working age seeking employment, and fewer still wishing to enter care-related roles. He continued that it should be placed on record that innovative action was required to address this position.

Danny Oliver commented that he found it difficult to scrutinise reports without seeing actions plans developed for them and queried whether it was standard practice that the Performance and Audit Committee did not receive sight of them and would it be possible to include them in future.

Darren Morrow gave assurance that there were action plans for every service following an inspection by the Care Inspectorate which could be included with future reports.

Stephen Brown advised that, if all action plans came to Committee, that would make the process overly operational and time consuming. He gave assurance that each inspection report already included a review of the previous action plan, showing completed actions and any outstanding items. This approach enabled the Committee to scrutinise progress without reviewing every individual action plan.

Danny Oliver further highlighted ongoing staffing challenges which were impacting services and queried where current work on recruitment and retention now sat.

Lynda Bradford advised that, following a meeting of registered managers earlier in the year, a comprehensive review of care homes was being initiated which would cover staffing models, rotas and dependency levels, as these were interconnected. She continued that a PID (Project Initiation Document) was in the final development. The review was expected to span approximately two years and would require additional resources beyond current capacity.

Danny Oliver queried how the review of recruitment incentive schemes and staff retention fitted with the wider care home review and whether those would be considered together.

Stephen Brown advised that staffing challenges were being discussed extensively across all levels, including corporate leadership, senior management forums, and with Scottish Government representatives. He continued that recent engagements with senior leaders had confirmed these issues were not unique to Orkney but were compounded by local factors, including a reduced working age population and an increasing older population. While innovative approaches had been trialled, there was a need to reset and consider further options. Planned additional housing was expected to support recruitment and retention, alongside addressing other factors such as childcare. He concluded that these discussions were ongoing and integral to ensuring sustainable and safe services.

Danny Oliver acknowledged the extensive work and discussions which were underway to address staffing challenges but expressed concern about the absence of a clear, consolidated action plan.

The Chair reiterated the importance of encouraging partial retirement among older employees to retain skills within Council services. He noted that initiatives to support this approach had been raised with HR and could help mitigate staffing pressures, although demographic constraints, such as the limited working-age population in Orkney, remained a significant challenge.

The Performance and Audit Committee thereafter scrutinised progress of the inspection activity for registered services within Orkney Health and Care, for the period 22 April to date, as detailed in section 4 of the report circulated, and obtained assurance.

## **8. Strategic Plan Priorities – Progress Report**

There had been previously circulated the regular update on progress made against three of 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. The three Strategic Priorities, detailed on pages 1 to 3 of Appendix 1 were:

- Supporting Unpaid Carers.
- Supporting People to Age Well.
- Mental Health and Wellbeing.

The previous three priorities were on pages 7 and 8 of the Appendix and a progress update would be presented to the next meeting of the Performance and Audit Committee.

He continued that, while the report itself posed no direct risk, failure to progress actions could jeopardise the delivery of strategic priorities. Any delay or risks identified in the tracker would be addressed by the service and reported to the Committee.

Following a request from Councillor Jean Stevenson for an update on the utilisation of Brinkies Wing, Hamnavoe House, Lynda Bradford confirmed that this had been discussed at the Strategic Planning Group and a formal report on its future use would be presented in the next meeting cycle.

Councillor Jean Stevenson noted that social work assessment waiting times had improved, reducing from eight weeks to four weeks. Regarding the introduction of MORSE (a mobile electronic patient record application), she queried what had caused the delay as the system was now not expected until 2026.

Lynda Bradford explained that the delay was due to co-ordination issues between NHS Orkney and NHS Grampian. MORSE was hosted by Grampian but these issues were nothing major or concerning. She added that despite the delay, the mental health team had made significant progress by identifying and developing the necessary templates. She confirmed that the go-live date was now expected to be March 2026.

Following a further query from Councillor Jean Stevenson regarding the All Age Nurse Led Psychiatric Liaison Team, Lynda Bradford confirmed that the Team Lead had been appointed and the other nursing jobs were currently open to advert with interviews for the positions to be in December or January. She further confirmed that the Team Lead had been creating all the necessary governance documents.

In response to a query from Issy Grieve, Stephen Brown confirmed that the Strategic Planning Group was aware of the population health framework although a dedicated session had not yet taken place. He confirmed that the current delivery tracker covered one year at a time but future actions under prevention would be more detailed and longer term.

Rona Gold queried whether, despite its slight delay, the MORSE electronic patient records system was still on track. Lynda Bradford confirmed it was and that it aimed to go live mid-March 2026 with a short testing period and would then proceed fully.

Following a further query from Rona Gold regarding Mental Health Practitioner roles and recruitment being paused, John Daniels confirmed that the review related to Primary Care Improvement Plan regulation and mental health practitioner roles were not part of that regulation. He confirmed that a paper would be going to the Integration Joint Board which would address gaps and help decide service priorities but confirmed that for now recruitment remained paused and would be updated after the Integration Joint Board meeting.

Rona Gold queried whether, as the action was currently paused, it was still considered on schedule. John Daniels confirmed that it was still on track for June 2026, provided the pause was lifted soon and recruitment challenges addressed.

In response to a query from Rona Gold regarding increasing the number of sessions using Near Me, Lynda Bradford confirmed that there was confidence that the 90% target would be achieved but added that some patients would always require face to face appointments which could affect the numbers.

Following a query from Danny Oliver regarding the goal to increase service users receiving Care at Home, Helen Sievewright confirmed that there were currently 49 people on the waiting list and that the waiting list and capacity were reviewed daily. She further confirmed that recruitment was ongoing, with 30 Care at Home Assistant vacancies currently being advertised. She further confirmed that incentives such as the “Golden Hello” and “Refer a Friend” would continue. She concluded that service users fluctuated but she was confident that they were on track to reach 180 service users, despite variability.

In response to a query from Rona Gold regarding whether there was any monitoring data on the suicide prevention app, Callan Hunter-Curtis confirmed that Google Analytics showed that the app averaged 5-6 users per week, with spikes during community events. He confirmed that usage was limited as the app was web-based rather than in app stores. However, improvements were planned to increase accessibility.

Stephen Brown noted that the Community Planning Partnership’s Suicide Prevention Task Force would publish a full review of its actions, including the App usage, by April 2026 and confirmed that the results would be shared with the Integration Joint Board.

Darren Morrow highlighted that the Growing up in Orkney website was being established to provide signposting for children, young people and their families to a wide range of services, including mental health, wellbeing and community supports.

Callan Hunter-Curtis confirmed the website’s redevelopment and noted its role in improving communication both internally and externally. He continued that, as well as the potential uses detailed above, the site would launch an additional section called Protect Talk which was aimed at professionals.

The Performance and Audit Committee thereafter scrutinised progress made against the three Strategic Priorities, as outlined at section 4.2 and detailed in the Strategic Plan Delivery Tracker, attached as Appendix 1 to the report circulated, and 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, 18 March 2026 at 14:00.

## **10. Conclusion of Meeting**

There being no further business, the Chair declared the meeting concluded at 11:17.

**Stephen Brown (Chief Officer)**

Orkney Health and Social Care Partnership

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## Chair's Assurance Report to the Integration Joint Board

<b>Title of Report:</b>	Performance and Audit Committee.	<b>Date of Meeting:</b>	3 December 2025.
<b>Prepared By:</b>	Cllr Lindsay Hall.	<b>Presented By:</b>	Cllr Lindsay Hall.
<b>Purpose:</b>	To present the unapproved minutes from the Performance and Audit Committee meeting on 3 December 2025.		

<b>Positive Assurances:</b> <ul style="list-style-type: none"><li><b>External Audit:</b> Three of the five actions are now complete, with the other two progressing.</li><li><b>Care Inspectorate Inspections:</b> Four inspections delivered positive findings of 'Good' and 'Very Good' with action plans in place for all services inspected.</li><li><b>Strategic Plan Priorities:</b> Social Work assessment waiting times has improved from eight to four weeks, recruitment for the All Age Nurse Led Psychiatric Liaison Team posts is underway, Near Me usage target is on track to be met.</li></ul>	<b>Decisions Made:</b> <ul style="list-style-type: none"><li><b>Care Inspectorate Inspections:</b> Inspection Action Plans will not be provided to Committee but summary progress will continue to be included within inspection reports.</li></ul>
<b>Areas of Concern or Key Risks to Escalate:</b> <ul style="list-style-type: none"><li><b>Workforce Pressures:</b> A recurring and significant risk across services. Care home staffing rate is at 40% vacancy rate as well as a large number currently on the waiting list.</li><li><b>Internal Audit:</b> Concerns were raised at the length of delay on the Council's Communication Strategy.</li></ul>	<b>Major Actions:</b> <ul style="list-style-type: none"><li><b>Internal Audit:</b> An update on the Council's Communication Strategy progress will be provided.</li><li><b>Care Home Review:</b> A review is underway which will cover staffing models, rotas and dependency levels.</li></ul>

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<ul style="list-style-type: none"><li><b>Strategic Plan Priorities:</b> There are delays in Morse Implementation due to inter-Board coordination issues, the recruitment of Primary Care Mental Health Practitioners has been paused, subject to regulatory review and there has been limited uptake on the SOS suicide prevention app.</li></ul>	
<b>Comments on Effectiveness of the Meeting:</b>	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 all members.