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Agenda Item: 10.

Integration Joint Board

Date of Meeting: 19 June 2024.

**Subject: Orkney Health and Social Care Partnership
Annual Performance Report.**

1. Purpose

1.1. To present the Annual Performance Report for Members' approval.

2. Recommendations

The Integration Joint Board is invited to note:

2.1. That, in terms of section 42 of the Public Bodies (Joint Working) (Scotland) Act 2014, Orkney's Integration Joint Board (IJB) must prepare a performance report setting out an assessment of performance, during the reporting year to which it relates, in planning and carrying out of the integration functions, for the area of the local authority.

2.2. That the performance report must be published, and a copy provided to both NHS Orkney and Orkney Islands Council.

2.3. That the draft Annual Performance Report, attached as Appendix 1 to this report, is based on information collected by Public Health Scotland and the Scottish Government to highlight the performance of the Orkney Health and Social Care Partnership, in respect of the National Suite of Indicators, the Ministerial Steering Group Indicators (known as the Core Suite of Indicators), and National Health and Wellbeing Outcomes.

It is recommended:

2.4. That the Annual Performance Report 2023/24, attached as Appendix 1 to this report, be approved for submission to Scottish Government, and provided to both NHS Orkney and Orkney Islands Council.

2.5. That a further update will be published once all relevant national performance indicator results, as well as the financial information, have been made available.

3. Background

3.1. The IJB understands the importance of regular review and monitoring of the performance of commissioned services across NHS Orkney and Orkney Islands Council.

3.2. Performance Management is an integral part of operational management, and monitored quarterly, with any concerns highlighted to senior management and the Performance and Audit Committee, allowing for appropriate and timely responses.

3.3. The Annual Performance Report, attached as Appendix 1 to this report, is based on information collected by Public Health Scotland and the Scottish Government to highlight the performance of the Orkney Health and Social Care Partnership, in respect of the National Suite of Indicators, the Ministerial Steering Group Indicators (known as the Core Suite of Indicators), and National Health and Wellbeing Outcomes.

3.4. Owing to the non-publication of the results on many of the performance indicators by the national providers, such as Public Health Scotland and the Scottish Government, until at least July, as well as the unavailability of financial information, again until July, it is not possible to provide a final version of the Annual Performance Report during this meeting cycle.

3.5. To meet the legislative requirement of publishing an Annual Performance Report (APR) by the end of July 2024, it is proposed that the APR attached as Appendix 1 is approved for publication, and a further update is published when the relevant outstanding information has been made available.

4. Key Performance Highlights

4.1. The following highlights some findings directly related to the IJB's six Strategic Priorities.

4.2. **Strategic Priority 1: Unpaid Carers.** Last year saw the first Orkney Unpaid Carers Conference, an event that significantly raised the profile of unpaid carers in Orkney. This was followed, earlier this year, with publication of the partnership's new Orkney Carers' Strategy.

4.3. **Strategic Priority 2: Supporting Older People to Stay in Their Own Homes.** The Care at Home Service has seen an increase in the number of people using the service, from 128 people in April 2023, to 163 people in April 2024, whilst the number of hours of unmet need has reduced by more than 50%, over the same timeframe.

4.3.1. The Partnership's commitment to the use of technology to support people to remain in their homes is emphasised by an increase of 20% in the deployment of digital technology between April 2023 and April 2024.

4.4. **Strategic Priority 3: Community Led Support.** Opportunities to introduce the practices associated with Community Led Support (CLS) have been limited, mainly owing to a lack of staff resources.

4.4.1. However, both the Islands Wellbeing Project and the Community Link Practitioners initiative have provided a practical demonstration of how the ethos of CLS can support our communities in innovative ways.

4.5. **Strategic Priority 4: Mental Health and Wellbeing.** The service now has a total of four Mental Health Officers (MHOs), who were able to support around 100 people during the last year, whilst 40 people, assessed as not needing MHO intervention, were supported by a social worker from the Community Mental Health Team.

4.5.1. The Child and Adolescent Mental Health Service (CAMHS) has continued to grow, with the team now numbering 12.

4.5.2. In addition, several Third Sector organisations provide early support for people, thereby preventing the need for more formal mental health interventions.

4.6. **Strategic Priority 5: Early Intervention and Prevention.** A large number of initiatives involving infant feeding, health visitors, oral health, speech and language therapy, diabetic eye screening, neurological care, the School Nursing Team, and the Vaccination Service, amongst several others, continues to ensure that a preventative approach is reducing the need for later, more costly, services.

4.7. **Strategic Priority 6: Tackling Inequalities and Disadvantage.** As one of the over-arching Strategic Priorities, several initiatives addressed by other priorities ensure that services continue to be available to, and can be accessed by, all.

4.7.1. Specific examples include working with island communities to design models of care that are tailored to the community, effective, and sustainable, as well as contributing to funding for the Isles Wellbeing Project.

5. Contribution to quality

Please indicate which of the Orkney Community Plan 2023 to 2030 values are supported in this report adding Yes or No to the relevant area(s):

Resilience: To support and promote our strong communities.	Yes.
Enterprise: To tackle crosscutting issues such as digital connectivity, transport, housing and fuel poverty.	No.
Equality: To encourage services to provide equal opportunities for everyone.	Yes.
Fairness: To make sure socio-economic and social factors are balanced.	Yes.
Innovation: To overcome issues more effectively through partnership working.	Yes.
Leadership: To involve partners such as community councils, community groups, voluntary groups and individuals in the process.	Yes.
Sustainability: To make sure economic and environmental factors are balanced.	Yes.

6. Resource and financial implications

6.1. There are no resource or financial implications arising directly from this report.

7. Risk and equality implications

7.1. The ongoing review of performance and service development is part of the process of identifying, managing and mitigating risks to the IJB.

7.2. Regular Performance Reporting allows the Integration Joint Board to meet its legislative requirements as set out in The Public Bodies (Joint Working) (Scotland) Act 2014, and The Public Bodies (Joint Working) (Content of Performance Reports) (Scotland) Regulations 2014.

8. Direction required

Please indicate if this report requires a direction to be passed to:

NHS Orkney.	No.
Orkney Islands Council.	No.

9. Escalation required

Please indicate if this report requires escalated to:

NHS Orkney.	Yes.
Orkney Islands Council.	Yes.

10. Authors and contact information

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11. Supporting documents

11.1. Appendix 1: Orkney Health and Social Care Partnership Annual Performance Report 2023/24.

Annual Performance Report 2023/24

Orkney Integration Joint Board



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Foreword

I am delighted to present the latest annual performance report for the Orkney Integration Joint Board. As Chair of the Board, I would like to take the opportunity to thank fellow Board members and officers for their tireless work over the last year in ensuring that we continue to try and do the right thing for the people of Orkney. There is always much more for us to do and, hopefully, the report presents a balanced overview of the areas where we continue to make headway alongside some areas where we must still do better.

The quality of our island life can be significantly enhanced by the health and social care provision.

The quality of our island life can be significantly enhanced by the health and social care provision and the fact that many of us are living longer means that we require to retain a focus on how we support older people and also those who care for them. In addition, for parents and carers of people with physical and learning disabilities, mental health or addiction issues, it is vital that we find effective and creative ways of caring for the carers as well as those who require care.

With the ongoing cost of living crisis, reducing public sector investment and increased demand on mental health services it will be crucial that we continue to focus on our priorities in the coming year and build upon the progress made in 2023/24.

Rachael King, Orkney Integration Joint Board Chair



This is the third annual performance report of the Integration Joint Board since I arrived in Orkney three years ago.

The purpose of the report is to provide an insight into our progress over the last year, highlight areas of improvement, and capture the challenges we face in delivering the best quality health and care provision possible to the people of Orkney. I think this report does a really good job of doing all of this. In relation to our strategic priorities, we have made really good progress in some areas of work, for example, in developing how we engage with and support unpaid carers and in reducing unmet need for older people in relation to Care at Home Services.

It is testament to our existing staff teams across Orkney that we have managed to not only keep services operating but, in many instances, still managed to make improvements.



Our biggest challenge (albeit not unique to Orkney) remains our workforce gaps. There are nationwide issues in recruiting to the social care workforce and we also have a number of vacancies across our health services too, most notably within our Allied Health professions. It is testament to our existing staff teams across Orkney that we have managed to not only keep services operating but, in many instances, still managed to make improvements. There is, of course, still much to do and the financial challenges faced by all public sector bodies in the years ahead will be a real test of how we work with our communities and those who need our support.

We have already begun to engage with staff and communities in considering our new strategic plan which will run from 2025-2028. It will be vital for us to ensure that our priorities and our focus continue to be on the things that matter most to the people of Orkney. I look forward to developing the new plan in collaboration with as many of you as possible over the coming months.

Stephen Brown, Orkney Health and Social Care Partnership Chief Officer

Overview

The integration of health and social care allows us to improve the wellbeing of people who use these services, in particular people with complex needs that involve support from health services and social care services at the same time.

Scottish Government has set out nine National Health and Wellbeing Outcomes which describe the improvements that can be made by integrating health and social care. (You can read more about Scottish Government's National Health and Wellbeing Outcomes [here](#).) The outcomes are:

1. People are able to look after and improve their own health and wellbeing and live in good health for longer.
2. People, including those with disabilities or long-term conditions or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
3. People who use health and social care services have positive experiences of those services, and have their dignity respected.
4. Health and social care services are centred towards helping to maintain or improve the quality of life of people who use those services.
5. Health and social care services contribute to reducing health inequalities.
6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing.
7. People using health and social care services are safe from harm.
8. People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care, and treatment they provide.
9. Resources are used effectively and efficiently in the provision of health and social care services.

NHS Orkney and Orkney Islands Council established the Orkney Health and Social Care Partnership (HSCP) in 2016 to collaborate more closely on the National Health and Social Care Outcomes.

The Orkney Integration Joint Board (IJB) is responsible for planning, resourcing and monitoring health and social care services. The IJB is accountable to Scottish Government and is required to produce an Annual Performance Report to evidence progress towards their delivery.

You can read more about the IJB and its membership [here](#).

This Annual Report shows the progress made against the Strategic Priorities, set out in the Orkney HSCP Strategic Plan 2022 – 2025, for the year 1 April 2023 to 31 March 2024.

About Orkney

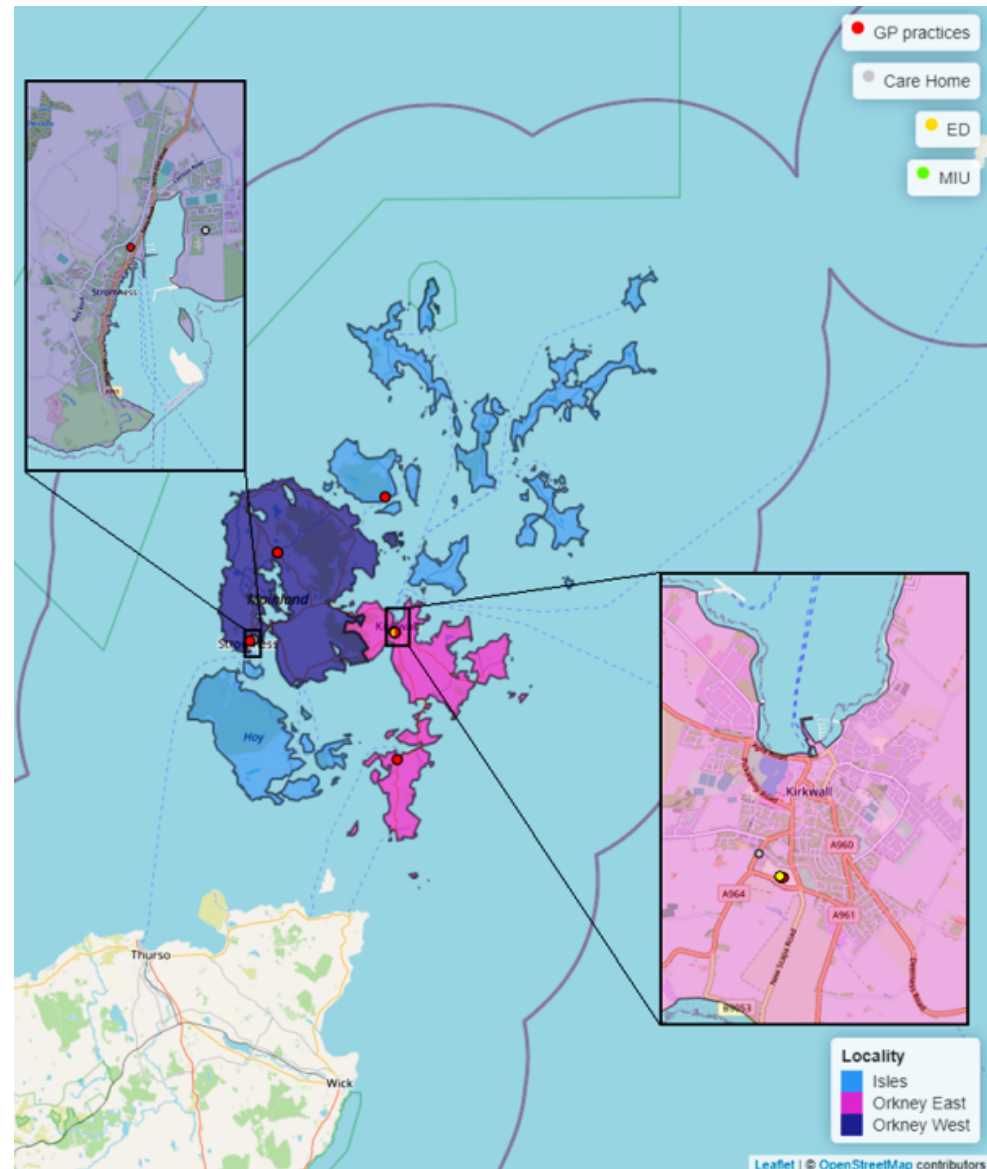
Our Localities

Scottish Government asks that IJBs divide the area for which they are responsible into at least two separate localities. Orkney is divided into three localities: the Isles, the West Mainland, and the East Mainland.

It makes sense for us to take this approach and work together with communities for planning and delivery purposes, as other services within Orkney Islands Council have plans and services based upon a locality model.

Orkney is divided into three localities: the Isles, the West Mainland, and the East Mainland.

The tables below give some information about the make-up of the population of the Orkney Islands, split across the three localities, and shows how they compare against the overall population of the HSCP, as well as giving a comparison with the whole of Scotland.



Indicators.	Data Type.	Time Period.	Isles Locality.	Orkney East Locality.	Orkney West Locality.	Orkney Islands HSPC.	Scotland.
Demographics.							
Total population.	Count.	2021.	2,788.	12,183.	7,569.	22,540.	5,479,900.
Gender ratio male to female.	Ratio.	2021.	1:0.94.	1,1.03.	1:1.02.	1:1.01.	1:1.05.
Population over 65.	%.	2021.	31.2.	22.5.	25.5.	24.6.	19.6.
Population in least deprived SIMD* quintile.	%.	2020.	0.	0.	0.	0.	20.
Population in most deprived SIMD* quintile.	%.	2020.	0.	0.	0.	0.	20.
Housing.							
Total number of households.	Count.	2022.	1,730.	6,221.	3,662.	11,613.	2,699,102.
Households with single occupant tax discount.	%.	2022.	31.1.	36.7.	32.3.	34.5.	38.5.
Households in Council Tax Band A-C.	%.	2022.	89.	62.2.	64.7.	67.	58.9.
Households in Council Tax Band F-H.	%.	2022.	0.52.	4.4.	3.2.	3.4.	13.7.
General Health.							
Male average life expectancy in years.	Mean.	2017 – 2021.	81.9.	78.3.	81.6.	79.9.	76.5.
Female average life expectancy in years.	Mean.	2017 – 2021.	80.9.	83.7.	83.3.	84.	80.7.
Deaths aged 15-44 per 100,000.	Rate.	2019 – 2021.	0.	66.6.	49.6.	55.7.	117.1.
Population with a long-term condition.	%.	2022/23.	27.5.	26.4.	25.5.	26.5.	21.7.
Cancer registrations per 100,000.	Rate.	2019 – 2021.	660.4	555.4.	567.7.	573.5.	630.3.
Anxiety, depression and psychosis per 100,000.	%.	2021/22.	19.2.	19.8.	16.4.	18.6.	20.1.

Source - PHS LIST Locality Profile December 2023.

Note: *SIMD – Scottish Index of Multiple Deprivation.

Orkney Health and Social Care Partnership.

Indicators.	Data Type.	Time Period.	Isles Locality.	Orkney East Locality.	Orkney West Locality.	Orkney Islands HSPC.	Scotland.
Lifestyle and Risk Factors.							
Alcohol-related hospital admissions per 100,000.	Rate.	2021/22.	794.1.	751.6.	431.6.	653.4.	611.1.
Alcohol-specific mortality per 100,000.	Rate.	2017 – 2021.	21.9.	10.6.	24.6.	17.4.	21.1.
Drug-related hospitalisations per 100,000.	Rate.	2019/20 - 2021/22.	54.	77.2.	87.9.	80.3.	228.4.
Bowel screening uptake.	%.	2019 – 2021.	66.1.	69.5.	69.8.	69.1.	65.6.
Hospital and Community Care.							
Emergency admissions per 100,000.	Rate.	2022/23.	6,528.	8,520.	7,544.	7,946.	10,367.
Unscheduled bed days per 100,000.	Rate.	2022/23.	60,689.	66,043.	69,415.	66,513.	77,178.
A and E attendances per 100,000.	Rate.	2022/23.	12,661.	35,221.	25,684.	29,228.	26,382.
Delayed discharges (65+) per 100,000.	Rate.	2022/23.	40,230.	45,069.	22,930.	36,588.	50,362.
Potentially Preventable Admissions per 100,000.	Rate.	2022/23.	1,004.	1,461.	1,189.	1,313.	1,638.
Hospital Care (Mental Health).							
Psychiatric patient hospitalisations per 100,000.	Rate.	2019/20 - 2021/22.	78.1.	137.8.	90.	113.8.	230.7.
Unscheduled bed days per 100,000.	Rate.	2021/22.	933.	8,011.	6,130.	6,504.	18,735.

Source - PHS LIST Locality Profile December 2022.

Key Achievements Over 2023/24

We were delighted to hold the Orkney Unpaid Carers' Conference, the first of its kind in Scotland. This day-long event saw over 100 people come together to hear about the challenges facing our unpaid carers, as well as planning how services can be improved for carers over the coming years.

The Carers' Conference led to the publication of the partnership's new Carers Strategy.

Kirkjuvagr House has been selected by the staff and residents of St. Rognvald House as the name for Kirkwall's new care home. Construction continues and will be completed by Spring 2025, with the residents and staff expected to move in shortly afterwards.

The new Children's Services Plan was approved by the Orkney IJB, NHS Orkney and Orkney Islands Council and was published in February 2024.

Key Challenges Over 2023/24

As in previous years, and in common with our colleagues across Scotland, our greatest challenge remains the recruitment and retention of our workforce, along with the impact this has on our ability to deliver services.

It is no secret that all public services, across the country, face significant pressures on the money they have to provide quality services to their communities. These pressures are occurring in tandem with unprecedented demand for services, not to mention the ongoing cost of living crisis.

Strategic Priorities

The Orkney HSCP Strategic Plan 2022 – 25 was approved in June 2022 and identified six priority areas to address the most pressing health and social care issues in Orkney:

1. Unpaid Carers.
2. Supporting Older People to Stay in Their Homes.
3. Community Led Support.
4. Mental Health and Wellbeing.
5. Early Intervention and Prevention.
6. Tackling Inequalities and Disadvantage.

You can read the Strategic Plan [here](#).

For each of our priority areas we asked a selection of services to provide some information about what their service has been doing, during the last year, to contribute towards our Strategic Priorities.

But this is by no means exhaustive: there are many other teams who contribute daily to supporting our communities.

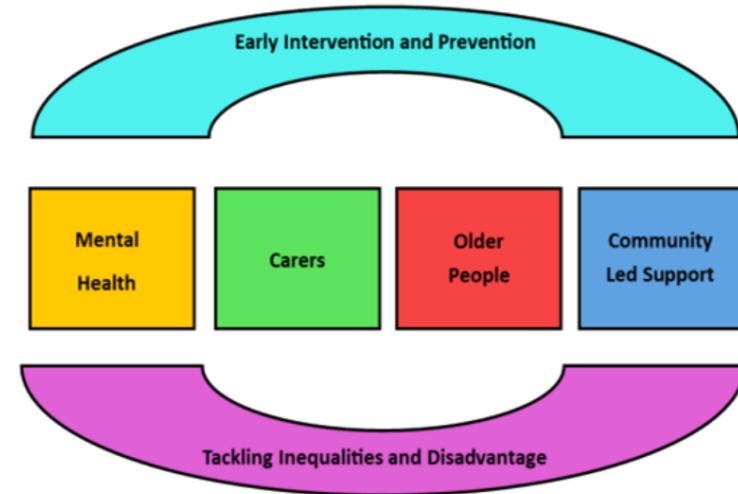
The Performance Management Framework 2021 – 2025 helps the Orkney IJB to assess how effective the Orkney HSCP is in achieving the objectives highlighted in the Strategic Plan 2022–25. (You can read more about the Performance Management Framework [here](#).)

We have also designed an Action Plan to help us measure our progress. Each of the Strategic Priorities includes several Milestones, or things we must achieve to deliver our objectives. Each of these Milestones also include at least one Action and a description of how that Milestone will be delivered.

We provide an update to the IJB's Performance and Audit Committee on the progress we have made, at each meeting, updating every Priority twice a year.

This all sounds a bit complicated, but the table at the beginning of each Strategic Priority description should make this a lot clearer.

Orkney Health and Social Care Partnership.



Key to Tables	Complete	On Target	Risk of Delay in Completion	Severe Risk of Delay in Completion
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Priority Area 1 – Unpaid Carers

Milestone	Action	Status
Hold an Orkney Carer Conference, where the essential role of unpaid carers in delivering social care support, in Orkney, will be highlighted and celebrated.	Hold the Carer Conference during Year One.	The Carer Conference was held in May 2023.
Consult and engage with unpaid carers, following the conference, learning what it is we need to do so that they feel supported in their lives.	Undertake a post-Carer Conference Survey.	The survey was completed in October 2023. The results were published alongside the new Orkney Unpaid Carers' Strategy, in March 2024.
Use the responses and information gained from carers through this engagement to draft a new Carer Strategy that properly reflects the needs and aspirations of unpaid carers.	Prepare and publish new Carer Strategy before the end of business year 2023/24.	The new Orkney Unpaid Carers' Strategy was presented to the IJB in February 2024 and published thereafter.
We will reach more people delivering care to family or friends, who have not sought carer services, and measure that number.	Increase the number of unpaid carers contacting Crossroads Care Orkney, for support, from 78, in 2022, by the end of 2024/25.	This Milestone will be updated at the end of 2024/25.

Scottish Government tell us there are around 800,000 unpaid carers in Scotland, providing support to their loved ones worth around £12.8 billion, whilst Oxfam Scotland analysis, in 2020, estimated this figure to be nearer £36 billion. Whichever is more accurate, these are staggering figures, especially if we consider that the Institute for Fiscal Studies calculated Scotland's social care budget, in 2022/23, at £4.3 billion. This means, of course, that unpaid carers account for between three and eight times the total national spend on social care.

Unpaid Care in Orkney is estimated to be worth £56 million.

So, what does all this mean for Orkney? Well, with a population of just over 22,000, this means there are around 3,500 unpaid carers in Orkney, which will include more than 100 young carers. Even if we assume the lower estimate for the value of unpaid care in Scotland, this means unpaid care in Orkney is worth around £56 million.

It is difficult to comprehend these enormous sums of money. Perhaps it is easier just to say that, without the care delivered every hour of every day, up-and-down the land, social care services would collapse.

What Have We Done During the Last Year?

We are currently supporting around 400 unpaid carers, meaning around 3,000 carers in Orkney are unaware of the services available to them, so we have worked hard this year to reach these "unknown carers".

There are an estimated 3,500 unpaid carers in Orkney.

Spreading the Message – The Unpaid Carer Conference. A continuous campaign of publicity, through social media, The Orcadian, and Radio Orkney, has delivered a much higher profile for unpaid carers in Orkney, and has ensured more people are aware of the support available to carers.

This publicity campaign culminated in the inaugural Orkney Unpaid Carers Conference, held in Kirkwall, in May 2023. We welcomed more than 150 delegates, including speakers from across Scotland, as well as key local folk, and, most importantly, unpaid carers from across Orkney.

Around 150 people attended the first Unpaid Carer Conference.



We heard how unpaid carers are the essential strand that hold social care services together, as well as some of the great ideas that are improving the support for carers. The conference was a great success, with excellent feedback from those that attended. (You can read about it [here](#).)

The main session of the afternoon was given over to speaking to carers, where we learned exactly what they felt were the most important ways that services could improve their lives. These conversations led directly to the priorities in the new Unpaid Carers' Strategy, launched earlier this year. (You can read the new strategy [here](#)).

Whilst the Conference was the highlight of the year, colleagues at Crossroads Care Orkney (the Third Sector organisation commissioned by Orkney Islands Council and NHS Orkney to deliver carer support services), as well as Age Scotland Orkney, have continued to speak to carers daily, ensuring they know how and where to get support.

*Crossroads received
76 new contacts in
2023*

There has been a consistent increase in the number of people contacting Crossroads Care Orkney and identifying as a carer, for the first time. There were 36 new contacts in 2021/22 (1 April to 31 March); 54 new contacts in 2022/23, and 76 new contacts in 2023/24.

Frontline Worker Training. We have been working with our partners at NHS Orkney to develop a training programme for all frontline workers, equipping them with the knowledge they need to recognise unpaid carers, as well as advise on where they can seek support. This programme will begin later this year.

What Will We Do During the Coming Year?

Carer Lead and Carer Support Worker. We have decided to create two new jobs: a Carer Lead and a Carer Support Worker. Both brand-new roles will mean that there are two staff who will spend all of their time working for the benefit of carers.

Support Assessments. We are working on the assessment process to make sure that our carers can get the help and support they need, more easily.

Carer-Friendly Employee Policies. We are working with Orkney Islands Council to ensure the Employee Policy is a carer-friendly policy. This will make sure carers who work for the Council (Orkney's largest employer) can balance their work and their caring responsibilities. This will be the first step in developing a carer-friendly accreditation scheme for employers across Orkney.

Orkney Health and Social Care Partnership.

Priority Area 2 – Supporting Older People to Stay in Their Homes

Milestone	Action	Status
Engage in the Getting It Right For Everyone (GIRFE) national pathfinder programme, with a focus in Orkney on Frailty and Ageing Well Project.	Number of hospital avoidance due to early intervention and support for people with frailty.	The Partnership has continued as a pathfinder for the GIRFE project. The local team has been testing the prototypes designed with older people with frailty, and a range of service providers. This phase of the project concludes in early June and the intention is that a toolkit will be launched, and that the Partnership will be an implementation site for that toolkit.
Support more older people to live safely at home for longer.	Reduction in rate of falls in older people population.	A snapshot of collective data from the three care homes in Orkney shows that in the 6-month period of April to June 2023 there was at the lowest 18 falls involving 13 residents and at the highest 55 falls involving 22 individuals. The Telecare Team responded to 22 individuals, across the communities, who had activated their falls monitor. Care at Home and Telecare teams continue to promote prevention of falls in line with the Care Inspectorate’s Preventing Falls booklet and, across all service areas, minimising falls is explored with the support of the Community Physio Falls Team. The Core Suite of Integration Indicators, issued by Public Health Scotland, indicate that in the year 202223, the falls rate per 1,000 population aged 65+ was 19.9, falling from 21.9 in the previously released figures, and versus a rate across the country of 22.5.
	Expand the range of technology that contributes to older people living safely at home.	The variety and choice of Telecare/Digital solutions on the market changes and improves at a great pace. Within the service, the Telecare/Digital equipment allocated to individuals is person-centred and based on a needs-led assessment. The referrals for Telecare equipment and peripherals have increased over the last 12 months, therefore it

Milestone	Action	Status
		<p>is important that the Telecare team remain current and up to date on new and different models and products, ensuring there is an extensive range of equipment and peripherals available to meet the varying needs of Orkney's population.</p> <p>From April 2023 to April 2024 there has been a 20% increase in the range of Telecare/Digital equipment that has been purchased to support people in Orkney.</p>
	<p>Increase in use of Telecare/Digital solutions to support early intervention and prevention and increase flexibility for individuals to remain at home.</p>	<p>In April 2023 there were 838 people using the service, increasing to 876 by April 2024, a 4.6% increase. Most of the referrals have been to offer practical solutions, enabling them to live meaningful lives and to offer peace-of-mind both to the user and their family. This has created a proactive, rather than reactive, approach to Telecare/Digital packages, and a more robust structure to early intervention and prevention.</p>
	<p>Waiting List of unmet need hours for Care at Home provision is reduced.</p>	<p>In April 2023, the Care at Home service introduced new Waiting List and Capacity management procedures to improve unmet need. In April 2023, the unmet need hours for Care at Home were 424½ hours. Those hours were a mix of new referrals and people with existing services requiring a further increase in their service.</p> <p>By December 2023, the unmet need hours were 117½ hours, a 72.3% reduction in the number of unmet need hours. For April 2024, the unmet need hours were 209.5 hours, a 50.6% reduction in unmet need hours over the entire year.</p>
	<p>The percentage of telecare users who have switched to digital from analogue is increased.</p>	<p>In April 2023, 98 people had switched from analogue to digital. In April 2024, that number had increased to 159; therefore, over the entire year, the increase from analogue to digital has been 61.6%.</p>

Milestone	Action	Status
		The analogue to digital project has worked hard over the last year in preparation for the full switchover, in December 2025. This was recognised, in March 2024, with the Bronze Accreditation Award by the Scottish Digital Office.
	Number of service users receiving Care at Home support is increased.	In April 2023, there were 128 people receiving Care at Home services, increasing to 163 by April 2024, an increase of 27.3% over the year.
	Number of Care at Home packages of 10 hours + rise to reflect the responsiveness to increased complexity/frailty and demonstrates flexibility to changing needs.	In April 2023, there were 39 people receiving more than 10 hours of care per week, increasing to 58, by April 2024, representing a 48.7% increase.

Whenever we hear from older people, we are told that they would prefer to stay in their own homes, in their own communities, for as long as possible, rather than move into supported accommodation, extra care housing, or residential care. Whilst we have invested significantly in improving supported accommodation, extra care housing, and residential care for our most frail and vulnerable older people, such as Hamnavoe House in Stromness, and the nearly completed new care facility in Kirkwall, Kirkjuvagr House, we recognise people want to receive support, wherever possible, at home.

Care at Home

The number of people receiving support in their own homes from our Care at Home service continues to increase significantly. In April 2023, there were 128 people receiving Care at Home services; this has increased by 27.3%, to 163, a year later.

The service has been trying to increase the number of people who receive packages of care exceeding 10 hours per week. This might seem a strange goal, but that means people are receiving care in their own homes, rather than in residential care. In April 2023, there were 39 people receiving more than 10 hours of care per week, By April of this year, this had increased by 48.7%, to 58 people.

The number of people receiving Care at Home services has increased by 27.3%, to 163, during the last year.

The hours of unmet care at home needs have halved during the last year.

Unmet Need. As of April 2023, the unmet need hours for Care at Home stood at 424½ hours. Those hours of unmet need were a mix of new referrals, as well as individuals receiving existing services, but requiring a further increase in their provision. However, by April of this year, this is now standing at 209½ hours, a reduction of 50.65% over the 12-month period.

Falls Reduction. The Care Inspectorate’s Care about Physical Activity Improvement programme has been shared across all our care homes, the Care at Home service, housing support, and other support services for older people, to equip our staff to promote “moving more”, as we know that our older people are less likely to suffer a fall if they are used to moving around regularly.

The Telecare Team responded to 22 individuals, across Orkney, who had activated their falls monitor.

Care at Home and Telecare teams continue to promote the prevention of falls in line with the Care Inspectorate’s Preventing Falls booklet and, across all service areas, minimising falls is explored with the support of the Community Physio Falls Team.

Our Responders helped 22 people, across Orkney, who activated their falls’ monitor.

Telecare and Mobile Community Responder Service

The Telecare equipment allocated to our service users is based entirely upon their individual needs, as equipment suitable for one person may be completely inappropriate for another.

The Telecare and Mobile Community Responder Service now supports 876 people.

The Telecare team maintain a knowledge of the most up-to-date models and products available, ensuring there is a comprehensive range of equipment and peripherals available to meet the varying needs of Orkney's population.

The commitment to keeping apace of technology resulted in a 20% increase in Telecare/Digital equipment purchased to support people in Orkney, between April 2023 and April 2024, whilst the service now supports 876 people, up from 838, in April 2023.

The service offers a range of practical solutions for our frail and older people, enabling them to live meaningful lives and to offer peace-of-mind, both to the user and their family. This has created a proactive, rather than reactive, approach to Telecare/digital packages, and a more robust structure to early intervention and prevention.

The Digital Switch. By April 2023, 98 people had switched from analogue to digital equipment. By April of this year, that number had increased to 159, an increase of 61.6%.

The analogue to digital project team has worked hard over the last year in preparation for the full switchover, in December 2025. This was recognised, In March 2024, with the Bronze Accreditation Award by the Scottish Digital Office.

The hard work to switch to digital earned the Telecare team the Bronze Accreditation Award.

Aging Well Service

One of our Aging Well Team was recently at the Picky Centre, assisting two of their recently graduated patients. Whilst she was there, 4 of the service's previous patients approached her and thanked her for assisting them to attend the class, saying they have been continuing to attend, ever since.

All of them said how beneficial the class had been to them, as well as how the class is continuing to improve their strength, their mobility, and their confidence. They were all so grateful for the opportunity to attend the classes, as well as the service the team provides, guiding them to further exercise opportunities.

Occupational Therapy

The Occupational Therapy (OT) service helps people to stay in their own homes, rather than having to move to residential accommodation.

OT loaned 41 wheelchairs to people in the last year.

The service has successfully implemented the Scottish Government initiative to supply people with short-term loan wheelchairs. They have made 41 wheelchair loans in the 12 months since the service commenced, in May 2023. They offer an initial maximum loan period of 6 weeks, which can be extended. People who need a wheelchair over a longer term are referred to the Mobility and Rehab Service.

In early 2024, the service provided environmental control technology to 4 people. Environment controls allow people with complex physical disabilities to control devices around the home, such as mobile phones, tablets and computers, door intercom systems, lights, and home entertainment equipment such as smart TVs and cable/satellite boxes. Environmental control devices can also be used to control community alarms, profiling beds, riser-recliner chairs, door openers, and other home automation equipment.

Home First

The Home First initiative looks to get people home from hospital as soon as possible, and referrals to the service have seen a big increase over the last 12 months. (You can read more about the Home First initiative in Orkney [here](#).) Some of the vacancies are still to be filled; however, they have recently recruited to the Social Work, Physio and Co-ordinator vacancies within the team. This will have a big impact on the service's ability to reable people and get them home. (You can read more about what reablement means [here](#).)

Moving with Dignity

The Moving and Handling OT, working with their colleagues from the Care at Home service, has continued to train and develop our workforce, with the skills and knowledge they need, to use new equipment and techniques to support people with significant problems with moving. Furthermore, they intend to arrange formal Moving with Dignity training, for 32 staff, within the year.

Rheumatology Service

The Rheumatology Service has been reconfigured following training from the Grampian Specialist Team. This will address the current waiting times and offer earlier preventative intervention.



Dementia

Some of the challenges the service faces in Orkney are the same as those across the country: people are often reluctant to seek diagnosis; a lack of Consultant Psychiatry services for older adults, and continuing difficulties with recruitment. These challenges are compounded by the impact the COVID-19 pandemic had for people with dementia, from which we are still slowly recovering.

But there is a lot of good news, too! We have made good progress with the aims of Orkney's Dementia Strategy 2020-2025. For example:

- We have recruited a GP with Special Interest to support diagnosis of dementia.
- There is immediate access to post-diagnostic support.
We deliver open-ended support, from immediately after diagnosis, and before treatment, and throughout the course of the illness.
- We provide carer support.
- We support or signpost people, with all aspects of dementia, from a single point of access to services.

We received funding from the Life Changes Trust to evaluate the Orkney Dementia Strategy, and this will be done over the coming months.

Dementia diagnosis rates prior to the COVID-19 pandemic were increasing but, inevitably, this reduced during the pandemic and was made worse by the lack of a consultant locum psychiatrist. .

Furthermore, we are planning to trial ½ a day a week of neuropsychological assessment. This will both support assessment and clarification on dementia diagnoses when the person's symptoms are especially complex.

We are also continuing in our efforts to provide older age consultant psychiatry.

The Partnership has recently recruited a GP with Special Interest to support dementia diagnosis in Orkney.

Dementia and Age Scotland Orkney.

[Age Scotland Orkney](#) delivered and assessed a pilot programme that involved something called Cognitive Stimulation Therapy (CST). (You can read more about CST [here](#).) Scottish Government funding is supporting continued therapy, and this has recently increased to two sessions per week.

The growing number of people attending has increased opportunities for social activity at the Age Scotland Orkney Dementia Hub in Kirkwall. The Hub continues to support a one-stop-shop for accessing support and services after diagnosis.

Furthermore, Age Scotland Orkney has been given funding to design and develop a dementia-friendly, all weather, outdoor garden space, within the grounds of their building in Victoria Street, in Kirkwall.

Age Scotland Orkney have also been busy delivering dementia awareness sessions to various community groups. This is providing information and advice, as well as promoting dementia-friendly communities and, importantly, reducing the stigma so often associated with dementia.

A New, Dedicated Dementia Nurse. The Orkney HSCP, Age Scotland Orkney, Dementia UK, and Dementia-Friendly Orkney recently got together to negotiate and agree support for a new nurse role. This supports people living with dementia, and their families, from diagnosis through to advanced dementia, and to grief and loss. This two-year post is funded by Dementia UK, the Orkney HSCP, Dementia Friendly Orkney, and is hosted within Age Scotland Orkney.

Innovative Befriending. Age Scotland Orkney has successfully secured funding to deliver innovative befriending. This will help people living with dementia, and their carers, to connect with other people, reducing isolation and loneliness.

Right Decisions App. Dementia information, advice and support, specific to Orkney, is now available on the Right Decisions App. This app is delivered from a national platform and is designed for both professionals and service users, and aims to help people to support themselves, whilst increasing efficiency and evidence-gathering for professionals.



The Isles. Plans are developing to link with people with dementia, in the isles, but these are in their infancy. Connections have been made with existing support and services, and the next step will be to work with isles-based colleagues to build services that are designed specifically for people in the isles.

A New Dementia Strategy. The current [Dementia Strategy](#) is reaching the end of its life, so the service is now considering its next steps. This will involve speaking to local people with dementia, along with their carers, and will also consider the content and direction of the new National Dementia Strategy, which includes a 10-year plan. (You can read the National Strategy [here](#).) This will also be supported by the formal evaluation of the current strategy, planned for later this year and early next year.

Priority Area 3 – Community Led Support

Milestone	Outcome	Status
Community Engagement Officer recruited.	Staff member in post.	Funding for the post has to be identified.
Explore options to develop Community Led Support (CLS) across Orkney using a co-designed approach. (Aligned with Orkney Islands Council's Delivery Plan)	Co-designed project plan developed by end September 2024.	Health and social care officers are working with colleagues from other services, within the Council, to develop multi-service approaches to CLS.



Community Led Support
an NDTI programme

Community Led Support (CLS) in Orkney had initially developed through embracing connections, co-production, and collaboration. (You can read a full introduction to CLS [here](#).) Our Blethers had taken place in Kirkwall and St Margaret's Hope, but weather (for a Sanday Blether) and the COVID-19 pandemic caused us to halt our programme, as well as further planning.

A lack of resources during the last few years has meant it has not been possible to build on the early success of the initiative; nonetheless, CLS remains at the heart of the Partnership's planning, and remains as one of the 6 Strategic Priorities in the Strategic Plan 2022-25.

In the meantime, however, the partnership has been working with colleagues from the Third Sector and the NHS to introduce two initiatives that deliver the intentions of CLS.

Island Wellbeing Project

The Island Wellbeing Project is a partnership between Voluntary Action Orkney (VAO), Highlands and Islands Enterprise (HIE), The Orkney Health and Social Care Partnership, and the Development Trusts of Hoy, Sanday, Shapinsay, Stronsay, Westray and Rousay, Egilsay and Wyre.

The project is managed and administered by VAO and is currently funded by Esmee Fairbairn Trust, The Tudor Trust, the Integration Joint Board, and the Island Development Trusts.

Orkney Health and Social Care Partnership.

On each of the project islands, the Development Trusts employ a Community Wellbeing Coordinator. Their role is to support the development of community-led initiatives and provide generalised one-to-one support. This dual role means coordinators can respond to the immediate needs of the community, whilst developing long-term capacity.

Over the last year the Community Wellbeing Coordinators have supported 197 individuals over 773 separate support sessions, helping them with signposting to financial, physical and mental wellbeing support, and social activities. They have also supported 36 groups, with hundreds of attendees, such as yoga groups, chair-based exercise, lunch clubs, knitting groups, and family fun activities.



The Island Wellbeing Project also has a role in promoting the interests of people who live in the isles. A notable achievement this year was the development of a set of case studies regarding care provision. The Community Wellbeing Coordinators have contact with, and offer support to, island residents who have care needs. The project wanted to provide feedback to their partners in the statutory and Third sectors who have a remit in care provision, to highlight some of the unique challenges that island residents with care needs face. These case studies have been very well received and further discussions with the Orkney Planning Partnership are expected, over the coming months, to help tackle some of the areas highlighted.

The Wellbeing Coordinators have supported 197 people over the last year.

The project also engaged in consultation with NHS Orkney to support development of their new Corporate Strategy. This has resulted in the work of the Community Wellbeing Coordinators being highlighted throughout the new strategy.

The project has also been looking to the future, with maintaining the project a priority. An Options Appraisal, which was conducted by Robert Gordon University, has been completed. The project partners will be considering the recommendations of the appraisal over the coming months, so that they can identify and build an operating model that will make sure the Island Wellbeing Project continues for years to come.

Community Link Practitioners

Community Link Practitioners (CLPs) in Orkney work within GP Practices and are part of the practice team. Funded by the Primary Care Improvement Plan, and employed by VAO, they provide the crucial role of bridging the gap between GP Practices and communities.

Orkney Health and Social Care Partnership.

Working one-to-one with clients referred from the GP Practices, CLPs perform a varied role. This can include linking clients with community groups, services and resources available locally, and nationally, to support people with issues such as debt, housing, social isolation, loneliness, and low mood.

The CLPs have the time to explore what issues are really important to each individual. Often the person is very vulnerable, and they work to empower them until they are in a position to engage successfully with support services.

CLPs work closely with GPs and other health professionals, and this can help reduce the workload on GPs by focusing on the client's non-medical issues. CLPs often act as a bridge between the client (with their permission) and the GP, highlighting issues that the GP is unaware of.

During the last year, the CLP Team has worked with 293 people in the GP Practices of Heilendi, Skerryvore, Daisy Villa, Dounby, Stromness, Westray, and Papa Westray.

The CLPs have worked with 293 clients during the last year.

Priority Area 4 – Mental Health and Wellbeing

Milestone	Action	Status
Develop a Suicide Prevention Plan.	Suicide Prevention Plan published.	Being progressed via the Suicide Prevention Task Force group.
Establish a Psychiatric Liaison Service.	Psychiatric Liaison Service model developed and IJB approval sought.	At present it has not been possible to identify funding to enable this to be progressed.
Deliver a high performance against Child and Adolescent Mental Health Services (CAMHS) and Psychological Therapies (PT) Heat targets.	High performance against Child and Adolescent Mental Health Services (CAMHS) and Psychological Therapies (PT) HEAT targets.	Both CAMHS and PT continue to perform very well against the national HEAT targets, often achieving 100% of patients being seen within the 18-week target time.
Deliver a reduction in the overall patient impact as a result of staffing the mental health transfer bed.	Reduce the overall patient impact as a result of staffing the mental health transfer bed.	Whilst each patient is risk assessed in relation to staffing requirements, the reality is that most patients require 2 staff members to be present. A meaningful reduction will only be achieved when the Psychiatric Liaison team is in place.

Mental Health Officer

We have four Mental Health Officers (MHO) who provide a service 24 hours per day, 365 days per year, in addition to their main jobs, and who fulfil the statutory responsibilities of the Council. These include:

- Undertaking statutory duties under the Mental Health (Care and Treatment) (Scotland) Act 2003.
- Protecting health, safety, welfare, finances, and property.
- Safeguarding of rights and freedom.
- Duties to the Court.

Orkney Health and Social Care Partnership.

- Public protection in relation to mentally ill offenders.

Approximately 100 people required support by MHOs from the Adult Social Work team, whilst 40 people who did not require a MHO were supported by a Social Worker from the Community Mental Health Team.

Type of Order and Intervention (Adults)	2019/20	2020/21	2021/22	2022/23	2023/24
Mental Health Compulsory Treatment Orders.	0	6	*	*	7
Short-term detentions	*	*	*	20	9
Emergency detentions	7	7	16	12	11
Other MHO assessments (those not leading to detentions, assessments to extend or vary orders, and social circumstances reports)	7	23	62	62	56
Mental Health Tribunals	*	6	*	*	8

Please note that * indicates a number less than 5, which cannot be published.

Psychological Therapies Service

The Psychological Therapies (PT) Service provides a range of psychological services to all age groups in Orkney, including Children and Adolescents, and Adults and Older Adults, to alleviate distress, improve mental health and promote psychological wellbeing.

In addition to direct individual and group psychological assessment and treatment, staff in the service also have a consultative role, providing teaching, and supervision for others employed in psychological interventions in Orkney HSCP and in NHS Orkney, and support service evaluation. The aim of these services is to intervene early and prevent disease escalation, tackle inequalities and those previously disadvantaged, as well as reducing psychological distress, and enhancing psychological wellbeing for people in Orkney.

Child and Adolescent Mental Health Services (CAMHS)

CAMHS has been undertaking Save a Life Suicide and Awareness Training for all administrators. This will ensure staff can direct service users to the correct professional and services.

Orkney Health and Social Care Partnership.

The CAMHS team has grown to 12 over the last year, with staff able to provide new features to their service, enhancing the lives of children and young people.

The service has recruited a Medical Secretary to support consultants, GPs, and psychologists, to arrange appointments, as well as deliver data collation. This will ensure reduced patient waiting times, and deliver accurate, up-to-date data recording.

CAMHS is also in the process of increasing routes into the service, via Mental Health services. This will allow patients, staff, and users, to access services more effectively.

Orkney Blide Trust



[Orkney Blide Trust](#) is a charity that provides support for those who currently have, or who have had, experience of mental ill health. Orkney HSCP commissions services from the Orkney Blide Trust.

They open every day (365 days) and, in 2023/24, welcomed 86 new members / service users (80 in 2022/23 and 55 in 2021/22) and had 240 members at the end of March 2024 (187 in 2022/23; 160 in 2021/22). On average they welcomed around 700 members (650 in 2022/23 and 550 in 2021/22) and professionals to their premises each month. Orkney Blide Trust provided a counselling service,

available to anyone in Orkney over the age of 16 on Saturday and Thursday evenings.

Blide welcomed 86 new members and service users during the last year, and now has 240 members.

Members were supported informally and in one-to-one meetings at their premises in Kirkwall and in the community by the Housing Support Service and Befriending projects. The Trust organised a range of active, therapeutic, and purposeful activities as requested by members to support their mental health recovery.

This year, Orkney Blide Trust had a new 'Men in Mind' project with groups of members working together to build from scratch a garden shed for the Blide. The service for Care Experienced Young People (age 16 to 25) went from strength to strength and made positive connections with the Community Learning and Development (CLD) team and the LGBTQ+ community as well as with other organisations outside of Orkney.

The Orkney Distress Brief Intervention service (DBI) also grew significantly over this year, providing timely and compassionate support to over 120 people from our local community who were in distress and had come into contact with the Police. One person commented:

“Before being recommended for the DBI programme I was at an all-time low to the point of considering suicide. Having someone to talk to really helped allowing me to express how I was feeling and realise suicide was not the answer. I was offered support and guidance on how to deal with my anxiety. I would like to think that other people with the same feelings I had at the time could also benefit from DBI.”

Over the past year, Blide have received really positive feedback from their members and other people about the support they provide to the community, and have been overwhelmed by the generosity of local businesses, organisations, and individuals, who have fundraised and donated to them.

Priority Area 5 – Early Intervention and Prevention

<i>Milestone</i>	<i>Action</i>	<i>Status</i>
Create additional frontline resource in Speech and Language Therapy.	Waiting times for assessment and treatment reduced.	The service recruited a new speech and language therapist, joining the Children and Young People team in February. This post will add resilience to the service and support improvement in meeting the needs of children and young people, together with plans to review the service. Adult Speech and Language therapy continues to have no substantive service owing to recruitment difficulties. Creative recruitment options are being actively explored.
Embed a new Neuro-developmental assessment pathway.	Neuro-Developmental Pathway (NDP) waiting times improve.	Working with all relevant partners, planning work is underway to look at the current pathway and proposals for a single NDP pathway. A proposed integrated pathway will be ready to trial, as a test of change, by August 2024.
Increased provision of family support provision across Orkney (linking to Whole Family Wellbeing Fund Project).	Whole Family Wellbeing (WFW) Support project plan and outcomes agreed by end March 2024.	WFW project now sits with Community Learning and Development (CLD), and funding has been transferred. A plan with intended outcomes has been agreed. Agreement has been given, from Scottish Government and the Council, to carry over all unused funds to date. Recruitment is in progress. Service Managers from Children's Health and Children's Social Work are co-leaders for the project, with CLD and Education.
A collective agreement from partners to collaborate on a whole system approach to physical activity, with	An Orkney Systems-Based Approach to Physical	Partner commitment to Whole System Approach for Physical Activity in Orkney has been confirmed. Understanding of the Orkney Landscape for Active Workplaces, Active Places of Learning, Active Sport

<i>Milestone</i>	<i>Action</i>	<i>Status</i>
a working group established to take this approach forward.	Activity – Action Plan developed.	& Recreation and Active Places & Spaces. A Whole System Approach Working Group has been established.
Continue to improve oral health and opportunities for routine oral care through delivery of population and targeted oral health programmes (e.g. Childsmile, Caring for Smiles, Open Wide, National Dental Inspection Programme (NDIP)).	Report on delivery and reach of oral health improvement programmes.	The Childsmile Programme continues to provide and support toothbrushing and fluoride varnish programmes in nurseries and schools, in the county. Some vacancies in toothbrushing supervisor posts have limited toothbrushing activity over the past few months, but recruitment is underway. Caring for Smiles training is provided to care home and Care at Home staff. Training has been delivered at Selbro Centre for Care at Home and Hamnavoe House staff. Annual oral health screening is underway in care homes. The National Dental Inspection Programme inspections for 2024, focusing on P1 children's oral health, will be completed shortly.

Prevention and early intervention are vital to all our priorities. We want people to be aware of their health and wellbeing, and take responsibility for themselves, whatever their age or background.

Communities and their local environment play a pivotal role in promoting and delivering good health, and providing opportunities for people to be active, to be involved, and to connect with others.

Speech and Language Therapy

There is a brand-new Speech and Language therapist supporting our children and young people.

The Speech and Language Therapy has recently recruited to a new full-time role that will support children and young people. This is a welcome additional investment in the service and will help to improve waiting times. It will also assist in delivering both universal and targeted services, partnership working, and underpins the Partnership's commitment to Getting it Right for Every Child (GIRFEC). (You can read more about GIRFEC [here](#)).

Infant Feeding Team

The infant feeding leads, health visitors and maternity staff have worked together to achieve the Gold Standard of the UNICEF Baby Friendly Initiative. Their success has been recognised worldwide, with a case study of their journey published by UNICEF online. (You can read about this [here](#).)

Here's what the team had to say:

“Our goal was to develop robust systems of working to encourage staff to collaborate innovatively across services. The Baby Friendly culture and ethos underpins all our work, and our staff feel proud to provide responsive and compassionate care. Celebrating improvements, big and small, and having the recognition that mothers, babies, and their families, here in Orkney, feel supported, listened to, and cared for, is hugely satisfying. We're proud to maintain 100% skin-to-skin rates and have seen breastfeeding rates improve from 61% in 2011 to 73% in 2021.

Our Board Chair and Guardian is a passionate advocate for Baby Friendly and has championed this within our Health and Social Care Partnership. This has been a strength at a time when social care services have undergone improvements. This has meant that even during the pandemic when services were offered in different ways, we could continue to improve and develop.

Continuing to strengthen leadership around Baby Friendly and collaborating closely with community organisations are key priorities for the NHS Orkney team.

Achieving Sustainability has meant focusing on why infant feeding matters and how it improves health and wellbeing. It has provided us with an incredible opportunity to recruit a network of community volunteer peer supporters, truly putting our community at the heart of our Baby Friendly work. Now, we would like to reach even further, developing links with more peer supporters and third sector organisations to build on the hard work and innovation that led to us to GOLD.

Developing leadership and ensuring staff and volunteers feel valued, respected, and cared for, and that families receive high-quality, compassionate, and evidence-based care across services is important to create an Orkney-wide Baby Friendly culture”.

Health Visiting

The Health Visiting Team support families by delivering Bookbug. (You can read more about Bookbug [here](#).)

Orkney Health and Social Care Partnership.

Recently, a member of the team in Dounby pulled together an inter-generational Bookbug session which brought together children and their parents, and residents of the local care home.

The sessions were attended by more than 75 people and were received positively by both young and older generations.

Our Health Visiting team work with families to support the health and wellbeing of young children until they start school. Support in this early period of a child's development reduces the likelihood that intervention will be needed in later life.

We work with the Midwifery teams in Orkney, Aberdeen (and other areas if needed) and many other service providers including the wider Children's Health Services, Childsmile, early years services such as nurseries and Third Sector agencies such as [Home-Start Orkney](#), Orkney Foodbank, Women's Aid Orkney and the Social Work team.



We use a number of support methods and favour the [Solihull Approach](#) which helps parents adapt to how they react to their children and see things from their perspective. Our role is to actively listen and, in many instances, allow the parents to find solutions themselves. There are a range of strategies to enhance parent/child relationships and activities are designed to encourage a reflective style of parenting that leads to more sensitive and effective parenting. Parents are helped to understand how they can influence their relationship with their child through play.

We provided classes in baby massage in various locations. Baby massage promotes bonding and can enhance the release of hormones, including growth hormones and can spark neurons in the brain to grow and improve mental processing.

Use of the [NHS Orkney Health Visitors](#) Facebook page has helped to promote what we do and improve community engagement.

We manage the service where trained volunteers provide confidential one-to-one support to women with infant feeding challenges. The volunteers also facilitate a weekly drop-in group in Kirkwall and a weekly 'baby walk' which includes free entry at the end of the walk to the soft play facilities at the Picky Centre, Kirkwall.

Orkney Health and Social Care Partnership.

Vaccination Service

The Vaccination Service took over responsibility for vaccinating babies, from Heilendi, as well as Skerryvore, Dounby, and Daisy Villa GP Practices, in April 2023. Previously, the practices had dealt with appointment-setting. This saw NHS Orkney using the national Scottish Immunisation and Recall System (SIRS) to make appointments, and contact patients and their families, for the first time. There were some teething problems, but the system is now fully operational.

July 2023 saw us upload the first list of patients to the national booking portal, for the start of the Winter 2023 Covid/Flu Programme, which started in September. Stromness Surgery and the isles continued to vaccinate their own patients. Around 900 patients were invited, with Orkney having the enviable uptake of 66.3%, against a national average of 56.6%.

The start of the School Flu programme was also in September, beginning with primary schools, followed by the secondary schools.

There has been ongoing discussion around a more suitable venue for the service. The interim solution has seen two clinical areas and an office base set up in the reception and waiting area of what was previously In Patient 1, at The Balfour.

The uptake of covid/flu vaccinations in '23 was 66.3%, vs 56.6% nationally.

The Spring 2024 Covid Programme kicked-off at the beginning of April with around 3,300 people invited. The practitioners have also made just under 200 home visits.

Work has also been ongoing to plan the capacity, eligibility, and scheduling of the new Respiratory Syncytial Virus (RSV) vaccination programme, which is due to begin in August 2024.

Diabetic Eye Screening

As part of the national programme, our [Diabetic Eye Screening service](#) checks people over 12 years of age, who have type 1 or type 2 diabetes, for diabetic retinopathy and maculopathy. (You can read more about diabetic retinopathy and maculopathy [here](#).) If left untreated, these conditions can result in serious eyesight damage, or even blindness.

Of the eligible population, 884 people have been screened, a take-up of 85.8%.

The service has had continued success with our Optical Coherence Tomography service. (This is a non-invasive medical imaging technique, using light waves, to produce images of the back of the eye). They have seen 146 of their high-risk patients in 2023/24, with 7 patients being referred to Eye Clinic for treatment. This has saved 139 appointments for eye clinic over the year.

They have introduced a new SMS/Text reminder service and are gathering mobile phone numbers and consent. The service is hoping that, in the coming year, this will show a reduction in the number of people failing to make their appointments.

The eligible screening population is 1,355, of which they have screened 884 in the past year, a take-up rate of 85.8%. Furthermore, all Key Performance Indicators have been met and exceeded, once again.

Amongst the new projects for the year ahead, they will be introducing a patient portal for online self-booking, which will make the process more user friendly, efficient, and accurate.

School Health

The School Health team offer Sleep Action, previously known as Sleep Scotland, to all school age children in Orkney. (You can read more about Sleep Action [here](#).)

Sleep Action is Scotland's oldest sleep charity supporting thousands of people to have healthy sleep. The charity provides a sleep support line and training for professionals to become sleep counsellors. In the School Health team, all three staff members are trained to deliver Sleep Action, offering advice and support on good sleep practices.

All the School Health Team are trained to deliver Sleep Action.

For children in primary schools, the team meet with the parent/carer, in their home, to complete an assessment, and for young people in secondary schools, they meet with them individually, at school. Since April 2023, they have met with 11 young people who have identified they require support with their sleep regime.

Through their work in the schools, the team have also signposted a number of people to the phone line and website for tips and advice.

Neurological Services

There are named points of contact at NHS Orkney for people affected by Multiple Sclerosis (MS), Motor Neurone Disease (MND) and Parkinson's Disease (PD). These services offer comprehensive assessments and reviews, to guide plans for treatment, care and support, which are developed by shared decision making, with the person and their family/carers always at the centre of this process.

All MS, MND, and Parkinson's Disease patients have a named point of contact in the service.

This approach helps the service to identify opportunities for:

- Improved symptom management.
- Reduction of risks.
- Early intervention.
- Reduction in, or avoidance of, hospital admission.
- Supporting people to live as meaningful a life as possible.

Teamwork and communication with other services and agencies, both local and national, is at the centre of this approach, and local clinicians, working within neurology, are exploring how they can expand and enhance this, to make sure everyone receives the same high-quality services.

Priority Area 6 – Tackling Inequalities and Disadvantage

Milestone	Action	Status
Secure the sustainability of the Islands' Wellbeing Project and Island Co-ordinators.	IJB funding to be sought and secured for Wellbeing Coordinators, to continue beyond October 2023.	Complete - The IJB, through additional investment, agreed to fund the request from VAO to continue the Islands' Wellbeing Coordinators.
Develop targeted, creative, and appropriate community-based responses to support oral health improvement, based on Community Challenge fund model, supporting positive oral health behaviour and access to dental services when needed. The Board will monitor dental access needs throughout Orkney and be ready to respond to increased demand and changes in delivery.	Report on growth of activities to support oral health improvement in community, e.g. visits to toddler, community groups in Orkney.	<p>2023/24 has seen toddler group visits to more than half of toddler groups in Orkney, and book bug groups reaching out to parents of young children with advice on oral health, and access to dental services.</p> <p>Childsmile Team works with early years team, nurseries and schools to reach families and groups needing extra support.</p> <p>Subgroup of the Child Healthy Weight Steering group is exploring healthy eating and healthy weight for young children and have supported developing guidance for parents for nursery aged children.</p> <p>Oral Health staff are participating in the HENRY healthy lifestyle for young families training for practitioners taking place in January - March 2024. This training explores supporting families positively to develop healthy lifestyle habits.</p> <p>The Public Dental Service is currently experiencing a challenging time in staffing and recruitment. This is being closely managed, and monitored at this time, to ensure that the best service can be provided for patients.</p>

Milestone	Action	Status
Work with islands communities to co-design and develop models of care and services that are tailored, effective and sustainable.	First three islands (Papa Westray, Eday and North Ronaldsay) will have plans developed and actioned by March 2024.	Partially Complete - Papa Westray work completed, and update of outputs provided to the Orkney Partnership Board. Work with North Ronaldsay continues. Work with Eday complete as far as possible at present due to challenges with community representation.

Tackling inequalities and disadvantage is something that links with all the other five priorities. Potentially all may be affected by the inequalities and disadvantages that some people in our community experience.

We will continue to address this by:

- Working to keep children, young people, and vulnerable adults safe.
- Making sure everybody can access the service or treatment that they might need.
- Working to remove barriers to accessing services.
- Partnering with other agencies and services to address financial hardship.
- Working with our partners to ensure Orkney is a safe and happy place to live for everyone.

Most of the previous sections include many examples of services that also fit this priority area.

The Isles

Once again, we want to specifically mention the challenges people in the isles face in accessing some services. We have made considerable effort to bring services to the isles, and will continue to do so, although this is not always possible. Often, this will mean isles residents' have to travel to Kirkwall, or the Scottish mainland, to use our services.

Some of the examples, below, show how we are trying to address this. We will continue to try to identify more opportunities to take services to the isles, as well as using technology to reduce the need to travel and arranging mainland-based appointments around convenient travel schedules.

Orkney Health and Social Care Partnership.

Oral Health

The Oral Health Team works with partners throughout Orkney to reach out to more vulnerable families. The Childsmile Team regularly visits community groups including local toddler and young families nurture groups to provide oral health advice and support. We regularly team up with the Early Years' Education Team, Homestart, and BookBug, to reach out to families.

The latest National Dental Inspection Report 2023 shows that we have a small cohort of children with obvious decay experience. Reaching and supporting these children and families to help improve oral health routines and access dental treatment where required is a priority.

The team also links up with UHI Orkney and, in particular, targeted and intensive intervention for vulnerable people during their transition into adulthood.

No Health Without Oral Health

Oral health is important to general health, and we work to promote No Health Without Oral Health as a value for all. The link between poor oral health and many illnesses is becoming well known. This includes poorer outcomes for people with diabetes or heart disease and further links, recently identified, between gum disease and dementia.

We provide oral health products for the local Foodbank on a regular basis and make sure that these are available in schools for any child who requires extra for home. These are also provided to care homes and hospital wards to support daily oral care. The Dental Department is signed up to provide alcohol brief interventions and smoking cessation advice. We are very aware of the impact of life circumstances, and now the cost of living, on health and wellbeing, and we endeavour to make sure that good daily oral care can be easier for everyone.

School Nursing

The School Nursing team regularly visit schools in the Isles to try to ensure equity of provision for our children and young people.

Financial Performance and Best Value

The IJB agrees a budget and commissions a range of services within the functions delegated to it. IJB financial governance includes:

- Approval of high-level strategies and plans.
- Quarterly financial monitoring reports.
- Publication of the annual Statement of Accounts.

The IJB was responsible for £61,273,000 in 2023/24.

In 2023/24 the IJB controlled the direction of £61,273,000 of financial resource to support the delivery of its strategic objectives. The table, below, shows the contributions from each organisation:

NHS Orkney	NHS Orkney Set Aside	Orkney Islands Council	Orkney IJB
£26,860,000	£7,953,000	£26,460,000	£61,273,000

The Scottish Government requires Public Authorities to assess whether Best Value has been achieved in terms of the planning and delivery of services. (You can read more about Scottish Government’s definition of Best Value [here](#).) This should include, where applicable, identification of whether there were opportunities for further efficiencies. Best Value ensures that we have services in place that are efficient, economic, are sustainable, and that deliver improved outcomes for Orkney.

Audit and Inspection Reports

The IJB's Performance and Audit Committee (PAC) met on the following dates over 2023/24 and discussed the subjects, below, that relate to this report. You can read each report by clicking on the links, below:

28 June 2023

[Safeguarding Adult Support and Protection - NHS audit carried out by Azets.](#)

[Joint Working - NHS audit carried out by Azets.](#)

[Performance Management – IJB audit carried out by Azets.](#)

[Internal Audit Annual Report and Opinion by IJB Chief Internal Auditor.](#)

6 December 2023

[External Audit Annual Report by KPMG.](#)

13 March 2024

[Internal Audit Strategy and Plan by IJB Chief Internal Auditor.](#)

[Direct Payments – Orkney Islands Council audit carried out by the Council's Audit Team.](#)

Inspection of services

Health and social care services delivered by statutory providers, such as the Council and NHS Orkney, and non-statutory providers, such as Crossroads and Age Scotland Orkney, are monitored and inspected in a range of ways to give assurance about the quality of care. (You can read more about what a statutory provider is [here](#).) Orkney IJB is required to report details of inspections carried out relating to the services for which they are responsible.

It is the job of the Care Inspectorate to look at the quality of care in Scotland, ensuring it meets high standards, whilst Healthcare Improvement Scotland (HIS) provides assurance to the public about the quality and safety of healthcare, through the scrutiny of NHS hospitals and services.

During 2023/24 there were 18 inspections of care services, undertaken by the Care Inspectorate, whilst there were no inspections of hospital services. The aim is to have all regulated services graded at good or above (scores 4, 5 or 6). Those areas marked with 'N/A' were not included within the remit of the inspection.

The following table provides a list of those services inspected during the last year, along with the reported grading.

Service.	Last Inspection Date.	Grade.				
		How well do we support people's wellbeing	How good is our leadership?	How good is our Staff Team?	How good is our setting?	How well is our care planned?
Adoption Services.	23.10.23	2.	2.	3.	N/A.	N/A.
Adult Placement Service.	23.10.23	4.	2.	3.	N/A.	3.
Braeburn Court (Housing Support Service).	14.07.23	3.	3.	3.	N/A.	3.
Care at Home Service.	10.08.23	4.	4.	N/A.	N/A.	N/A.
Care at Home (Housing Support Service).	10.08.23	4.	4.	N/A.	N/A.	N/A.

Service.	Last Inspection Date.	Grade.				
		How well do we support people's wellbeing	How good is our leadership?	How good is our Staff Team?	How good is our setting?	How well is our care planned?
Crossroads Orkney.	11.10.23	5.	4.	N/A.	N/A.	N/A.
Disability Resources Support Accommodation (Glaitness).	09.10.23	5.	5.	N/A.	N/A.	N/A.
Fostering Service.	23.10.23	2.	2.	3.	N/A.	3.
Glaitness Centre (Support Service).	09.10.23	5.	5.	N/A.	N/A.	N/A.
Hamnavoe House.	23.10.23	4.	4.	N/A.	N/A.	N/A.
Kalisgarth and Very Sheltered Housing.	06.07.23	4.	3.	N/A.	N/A.	N/A.
Kalisgarth Day Centre.	06.07.23	5.	3.	N/A.	N/A.	N/A.
Lifestyles Service.	08.11.23	5.	5.	N/A.	N/A.	N/A.
Rendall Road	20.10.23	3	N/A.	N/A.	N/A.	N/A.
St Rognvald House.	20.11.23	4.	4.	4.	4.	4.
Sunnybrae Centre.	14.12.23	3.	3.	3.	N/A.	N/A.
West Mainland Day Centre.	31.10.23	5.	4.	N/A.	N/A.	N/A.
Women's Aid Orkney.	14.05.23	5.	5.	5.	N/A.	5.

Local Government Benchmarking Framework

The Local Government Benchmarking Framework (LGBF) brings together a wide range of information about how all Scottish councils perform in delivering services to local communities. It breaks down the information into four family groups of eight, depending on which performance figures, or metrics, are being looked at.



The Adult Social Care Services information, which falls in the People Services group of metrics, is grouped by affluence of each partnership, as shown in the table below:

People Services.	Children, Social Work and Housing Indications.			
	Family Group 1.	Family Group 2.	Family Group 3.	Family Group 4.
	East Renfrewshire.	Moray.	Falkirk.	Eilean Siar.
	East Dunbartonshire.	Stirling.	Dumfries and Galloway.	Dundee City.
	Aberdeenshire.	East Lothian.	Fife.	East Ayrshire.
	City of Edinburgh.	Angus.	South Ayrshire.	North Ayrshire
	Perth and Kinross.	Scottish Borders.	West Lothian.	North Lanarkshire.
	Aberdeen City.	Highland.	South Lanarkshire.	Inverclyde.
	Shetland Islands.	Argyll and Bute.	Renfrewshire.	West Dunbartonshire.
Orkney Islands.	Midlothian.	Clackmannanshire.	Glasgow City.	

The least deprived Partnerships are shown on the left, the most deprived on the right.

Orkney Health and Social Care Partnership.

The metric for Self-directed Support spending on adults aged 18 and over, SW02, is split based upon how rural HSCPs are, with rural partnerships to the left, and urban partnerships to the right:

Children, Social Work and Housing Indicators.				
People Services.	Family Group 1.	Family Group 2.	Family Group 3.	Family Group 4.
	Eilean Siar.	Perth and Kinross.	Angus.	North Lanarkshire.
	Argyll and Bute.	Stirling.	Clackmannanshire.	Falkirk.
	Shetland Islands.	Moray.	Midlothian.	East Dunbartonshire.
	Highland.	South Ayrshire.	South Lanarkshire.	Aberdeen City.
	Orkney Islands.	East Ayrshire.	Inverclyde.	City of Edinburgh.
	Scottish Borders.	East Lothian.	Renfrewshire.	West Dunbartonshire.
	Dumfries and Galloway.	North Ayrshire.	West Lothian.	Dundee City.
	Aberdeenshire.	Fife.	East Renfrewshire.	Glasgow City.

Of the 11 indicators reported by the Improvement Service, seven were updated. Indicators SW04a, b, c, and d were not updated for this reporting period, and have not been included in this report.




Four indicators showed a drop in national ranking, one ranking position stayed the same, and two measures showed an improvement in ranking.








The table on the next page shows Orkney Health and Social Care Partnership’s performance in the 11 Adult Social Care Services metrics, compared with the other Health and Social Care Partnerships, and compares the ranking with the previous year. Position 1 of 32 would be considered top performer with 32 of 32 as the worst.

Since we published the 2022/23 report, Public Health Scotland (PHS) and the Improvement Service have adjusted some of the reported indicators. Because of this, Orkney’s position in some measures for the previously reported period has changed. This is

Orkney Health and Social Care Partnership.

reflected in the table with an asterisk after the Previous Rank indicating a number that has been updated by the Improvement Service.

An upward arrow  indicates improvement in ranking, an arrow pointing side to side  indicates no movement, while a downward arrow  indicates deterioration in ranking.

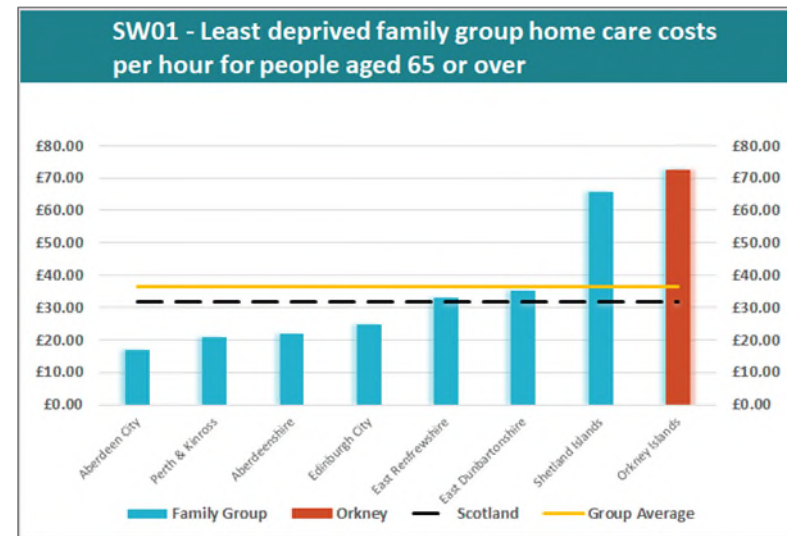
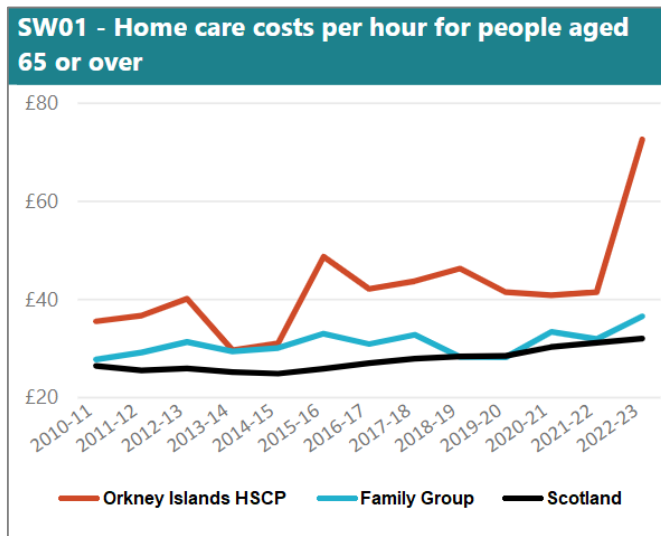
No.	Measure.	Direction of travel.	Previous Rank.	Most Recent:	
				Rank.	Year.
SW01.	Home care costs per hour for people aged 65 or over.		28 ^{*)} .	31.	2022/23.
SW02.	Self-directed support (direct payments & managed personalised budgets) spend on adults 18+ as a percentage of total social work spend on adults 18+.		15 ^{*)} .	16.	2022/23.
SW03a.	The percentage of people aged 65 and over with long-term care needs who are receiving personal care at home.		11.	29.	2022/23.
SW05.	Residential cost per week per resident for people aged 65 or over.		31.	31.	2022/23.
SW06.	Rate of readmission to hospital within 28 days per 1,000 discharges.		1 ^{*)} .	3.	2022/23.
SW07.	Proportion of care services graded 'good' or better in Care Inspectorate inspections.		32.	30.	2022/23.
SW08.	Number of days people spend in hospital when they are ready to be discharged, per 1,000 population (75+).		15 ^{*)} .	9.	2022/23.

^{*)} Figure adjusted since publication of the 2022/23 Annual Performance Report.

Source: [Improvement Service](#).

SW01 - Home care costs per hour for people aged 65 and over.

Since publication of last year's report, PHS has adjusted the cost per hour to be in line with other Government reporting. As a result, the hourly cost has increased slightly across all reporting periods, with 2021/22 increasing from £38.71 to £41.31. The ranking for SW01 for 2021/22, was updated from 29th to 28th out of 32 HSCPs.



Compared with last year's reporting period (2021/22) the hourly cost increased from £41.31 to £72.46 – a 75% increase compared with the previous period.

Orkney HSCP went from an updated rank of 28th to 31st out of 32 HSCPs nationally and dropped from seventh to eighth in the Family Group, with an hour's home care costing around twice as much as the group and national averages, which stand at £31.85 for the family group and £36.38 for the national average.

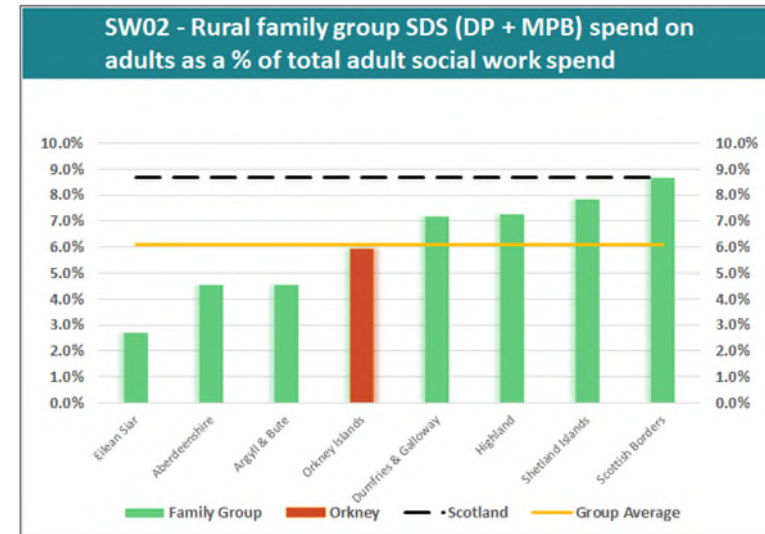
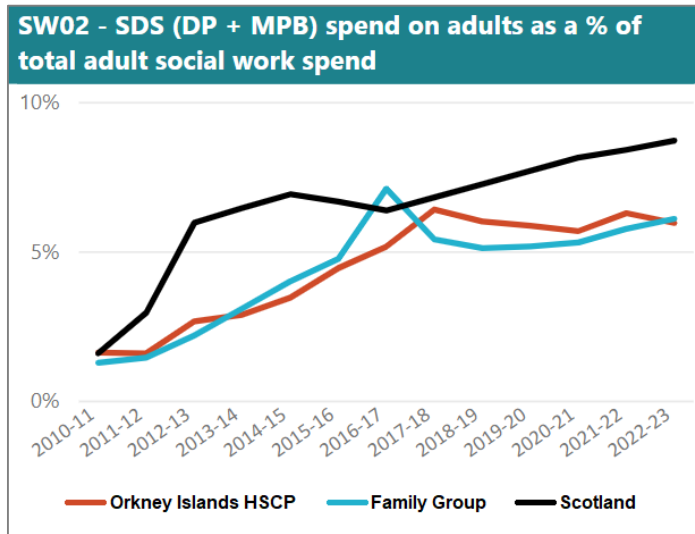
Our Chief Officer, Stephen Brown, notes:

“We are currently heavily reliant on agency staff and this, principally, is responsible for the rising hourly costs seen over the last 12 months.”

Orkney Health and Social Care Partnership.

SW02 – Self-directed Support spend on adults aged 18+ as a percentage of total social work spend on adults aged 18+.

The data for this indicator were updated to stay in line with other Government reporting, and as a result, Orkney’s national ranking for Self-directed Support spend was adjusted from 13th to 15th since we reported it in the 2022/23 performance report.



Based on the newly assigned ranking of 15th place, Orkney HSCP dropped one place in the national rankings to 16th, with a reduction in the percentage spent on Self-directed Support from 6.3 to 5.9%, dropping slightly below the family group average of 6.1 percent, and well below the national average of 8.7%.

The family grouping for this metric is based on rurality rather than deprivation – something that was overlooked in last year’s Annual Performance Report but has now been corrected.

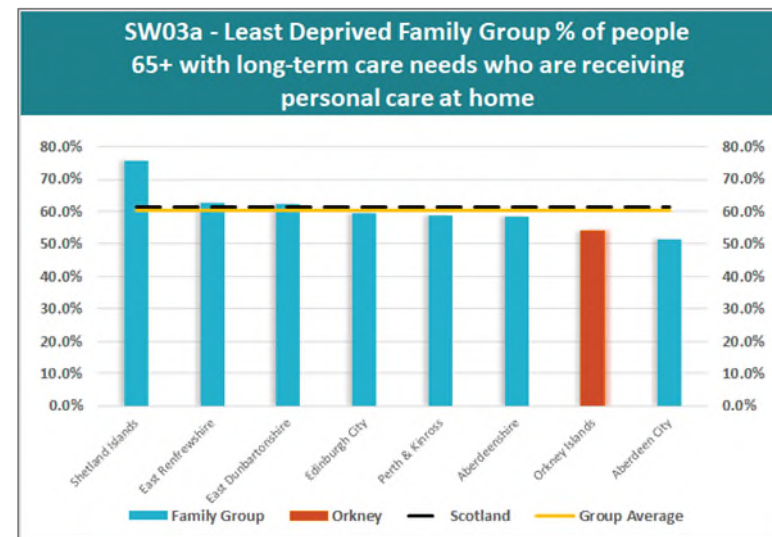
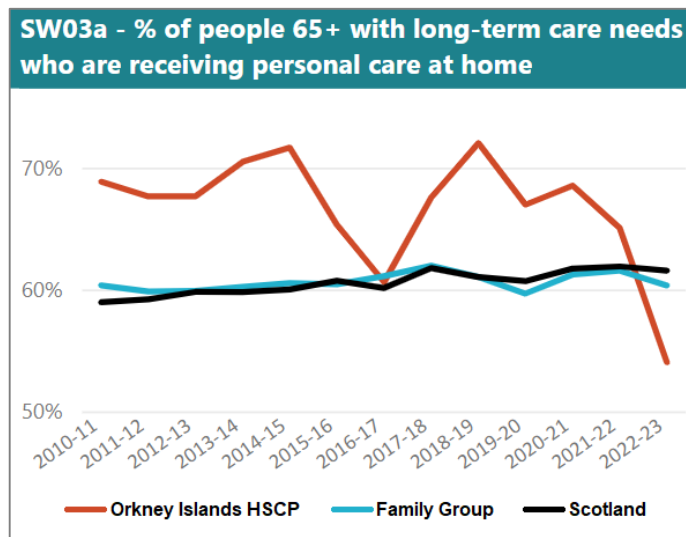
Orkney HSCP ranks fourth within the family group, which represents no change in ranking compared to the previously reported period.

Our Chief Officer, Stephen Brown, notes:

“During 2023/24, we have undertaken a review of our Self-Directed Support processes and mechanisms through Internal Audit. An action plan has now been drawn up, and moving into 2024/25, we will deliver on those actions, to improve the uptake of Self-Directed Support.”

SW3a – Percentage of people aged 65 and over with long term care needs receiving personal care at home.

The percentage of people aged 65 and over with long term care needs who are receiving personal care at home has decreased sharply from 65% in 2021/22 to 54 percent in 2022/23. Consequently, Orkney HSCP has dropped from 11th to 29th in the national rankings for this metric.



Orkney HSCP has moved from second to seventh place in the family group, with only Aberdeen City providing personal care to a smaller proportion of people with long term care needs.

Our Chief Officer, Stephen Brown, notes:

“We recognise that the service was under extreme pressure during 2022/23. Significant work has been ongoing since, and

Orkney Health and Social Care Partnership.

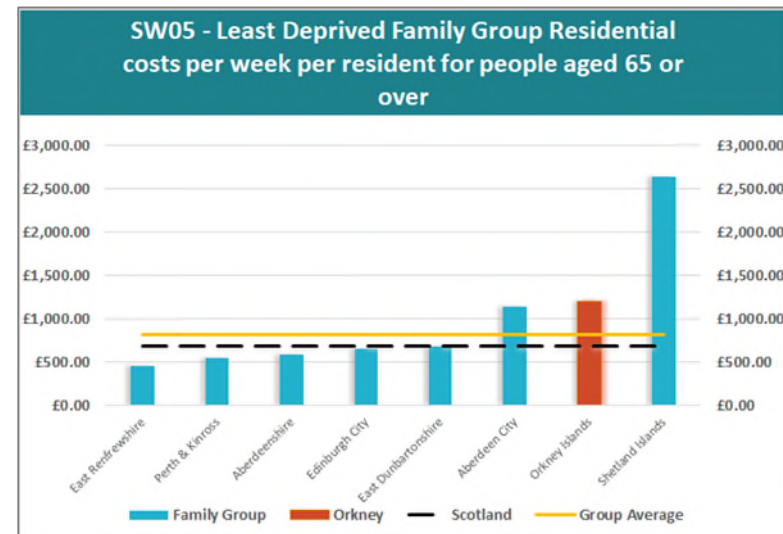
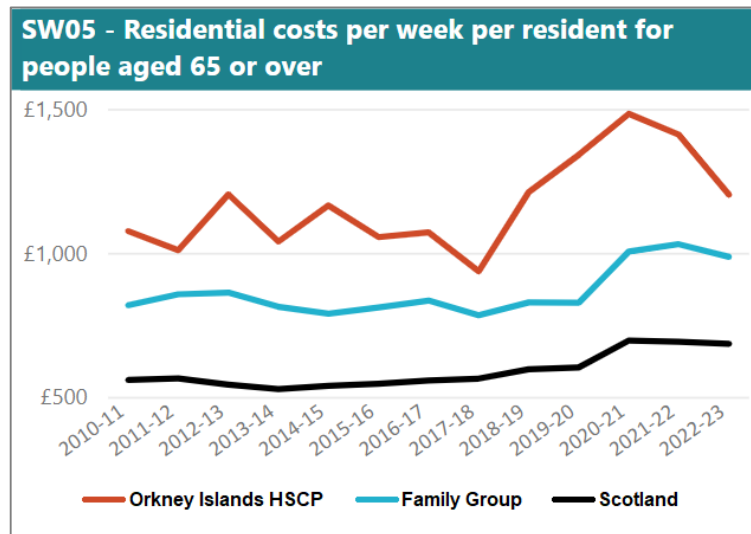
unfortunately, due to the lag in the production of the figures, it is difficult to see the progress that has been made to date. We are hopeful that this will be reflected in future years.”

SW05 - Residential costs per week per resident for people aged 65 or over.

The weekly cost for a week’s residential care at one of Orkney HSCP’s care homes has increased significantly since 2017/18, when a week’s care cost £935.

Although currently lower than the maximum of £1482 per week in 2020/21, the cost for 2022/23 is still 28.6% higher than that in 2017/18 at £1202 per week.

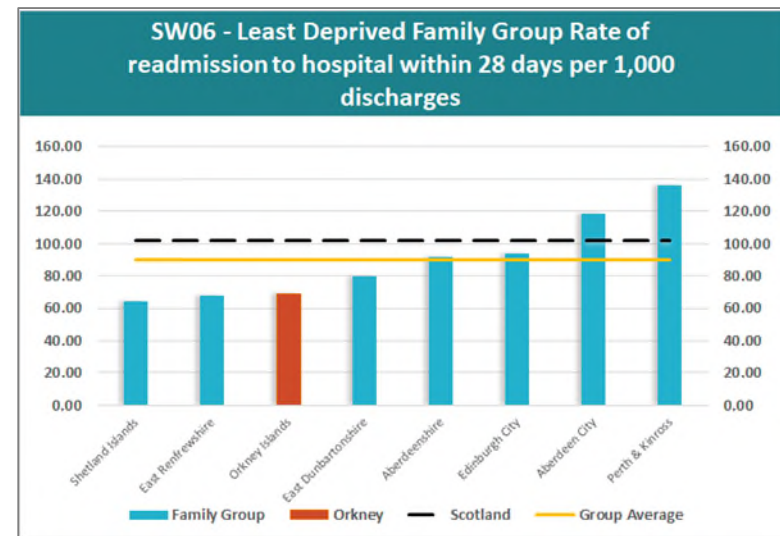
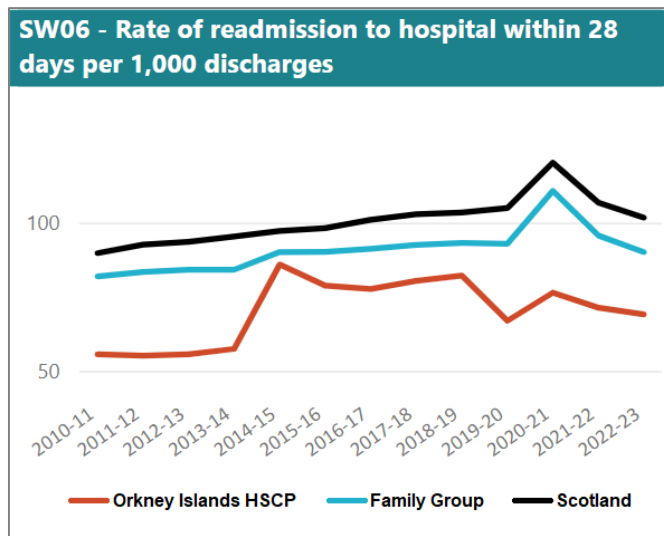
Orkney’s national ranking remained the same, at 31st out of 32 HSCPs. Shetland remains the most expensive HSCP for a week’s residential care with £2647 per week, while Dumfries and Galloway remains the least expensive, at £443 per week.



SW06 – Rate of re-admission to hospital within 28 days from discharge per 1,000 discharges.

The national ranking for the re-admission rate for Orkney HSCP was updated from second to first position when compared with what was reported in last year's Annual Performance Report. This is due to an adjustment made to the national reporting by Public Health Scotland.

For the year 2022/23, the rate has remained below both the family group and national averages. However, despite the rate reducing from 71.3 per 1,000 discharges to 69.0, the partnership's national ranking has dropped from first to third, with East Renfrewshire and Shetland Islands overtaking Orkney Islands to take second and first place respectively.



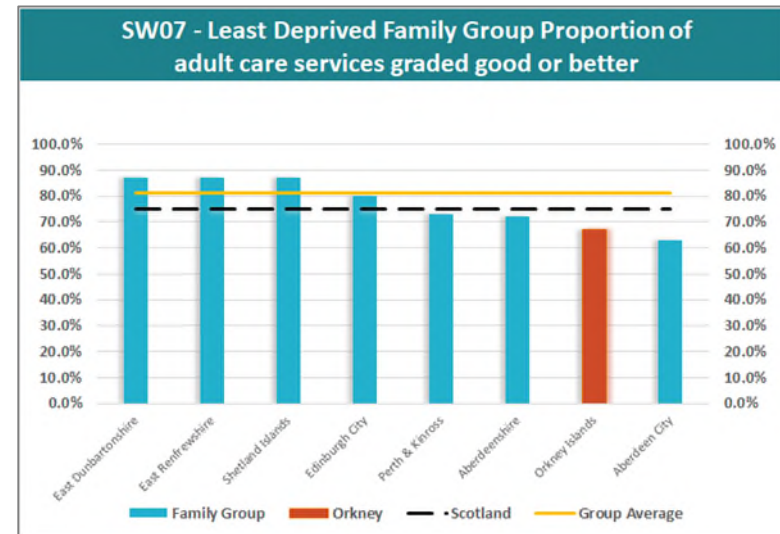
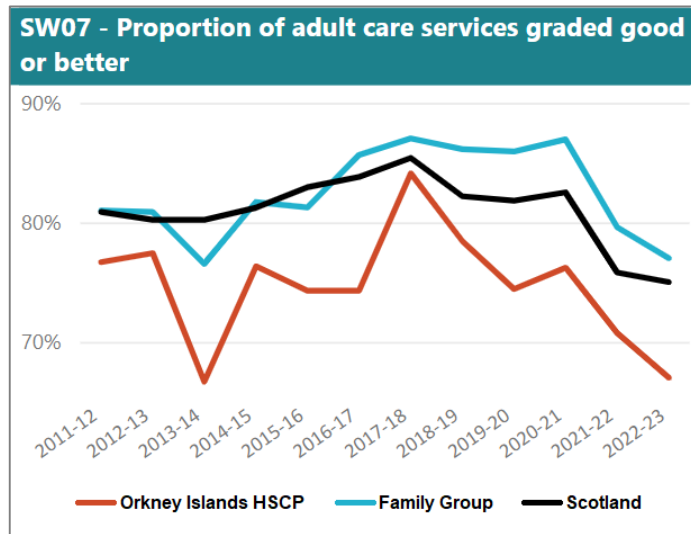
The family group for this indicator reflects what happened in the national rankings, with Orkney dropping from its updated first position to third and being overtaken by East Renfrewshire in second place and Shetland Islands in first place.

As indicated in the graph, over time, the readmission rate of 69 for Orkney HSCP is below the national rate of 102 and the group average of 90.

SW07 – Proportion of care services graded ‘good’ or better in Care Inspectorate inspections.

Orkney HSCP’s rank for the proportion of adult care services graded as good or better improved slightly from 32nd to tie with Fife HSCP as 30th out of 32 HSCPs despite a reduction in the proportion rated good or better from 71 to 67%.

Of the 32 HSCPs, 24 showed a decline in the proportion of adult care services graded good or better, which allowed the improvement in ranking for Orkney Islands HSCP.

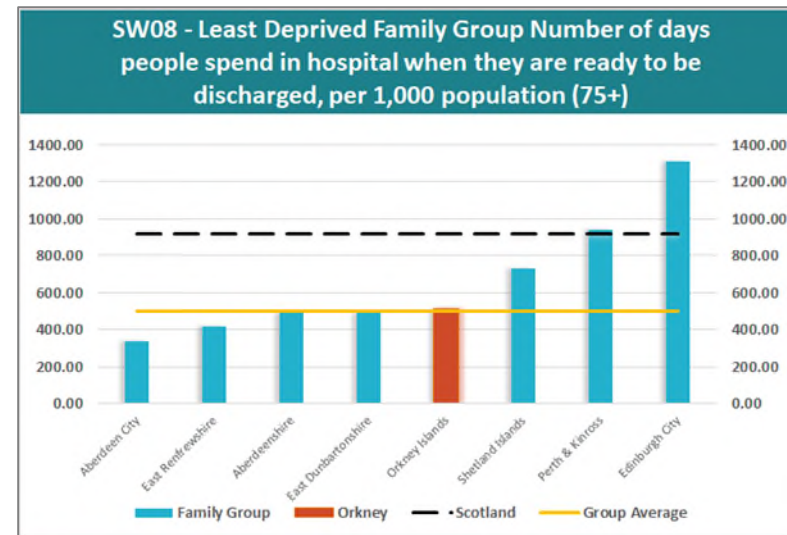
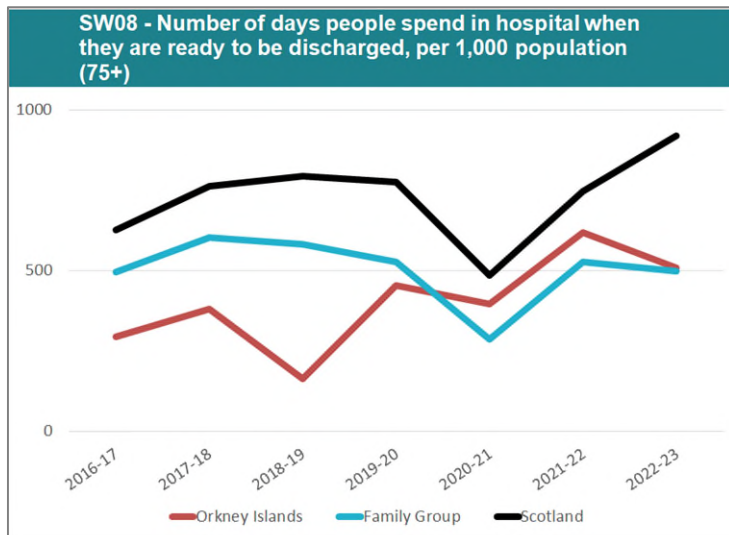


The family group picture mirrors Orkney HSCP’s climb in ranking, from eighth to seventh of eight partnerships, and like the national rankings, three quarters of partnerships showed a reduction in performance. Aberdeen City, which showed a 15% reduction in performance between 2021/22 and 2022/23 has dropped from fifth to eighth in the family group.

SW08 – Number of days people spend in hospital when they are ready to be discharged, per 1,000 population aged over 75.

The number of days spent in hospital by people aged over 75, who are ready to be discharged in Orkney HSCP reduced slightly from 619 days per 1,000 population in 2021/22 to 510 in 2022/23, just above the family group average of 499 days per 1,000 population aged over 75, and well below the national average of 919.

The ranking for this indicator was adjusted since publication of last year's report. This resulted in Orkney now being ranked 15th instead of 12th for 2021/22. Despite this, Orkney's national ranking improved from 15th to ninth out of 32 HSCPs.



Orkney HSCP's position in the family group was revised from sixth to seventh between last year's report and this year's issue. From the new position, Orkney's ranking improved to fifth out of eight partnerships.

The number of days spent in hospital when ready for discharge is the highest in Edinburgh City, at 1,310 days per 1,000 population, while Aberdeen City has the lowest number of days, at 336 per 1,000 population.

Health and Wellbeing Indicators

Nine National Health and Wellbeing Outcomes have been set by the Scottish Government and each IJB uses these outcomes to set their local priorities.

Underpinning the National Health and Wellbeing Outcomes sits a core suite of integration indicators, which all HSCPs report their performance against. These National Indicators (NI) have been developed from national data sources to ensure consistency in measurement.

There are 23 indicators but four of them (indicators 10, 21, 22 and 23) have not yet been finalised for reporting. Indicators 1 to 9 are based on the Scottish Health and Care Experience Survey (HACE) commissioned by the Scottish Government. The survey is carried out every two years.

The primary source of data for indicators 12 through to 16 are Scottish Morbidity Records which are nationally collected discharge-based hospital records. Following recommendations made by PHS and communicated to all HSCPs, the most recent reporting period available is calendar year 2022; this ensures that these indicators are based on the most complete and robust data currently available.

National indicators 1 – 9 as reported for 2021/22

Indicator	Title	Orkney	Scotland	Orkney West	Isles	Orkney East
NI – 1.	Percentage of adults able to look after their health very well or quite well.	93%.	91%.	94%.	93%.	92%.
NI – 2.	Percentage of adults supported at home who agreed that they are supported to live as independently as possible.	90%.	79%.	...	...	...
NI – 3.	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided.	62%.	71%.	...	...	...
NI – 4.	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated.	57%.	66%.	...	...	...
NI – 5.	Percentage of adults receiving any care or support who rate it as excellent or good.	91%.	75%.	...	...	...

Indicator	Title	Orkney	Scotland	Orkney West	Isles	Orkney East
NI – 6.	Percentage of people with positive experience of care at their GP practice.	88%.	67%.	89%.	92%.	86%.
NI – 7.	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life.	81%.	78%.	...	...	...
NI – 8.	Percentage of carers who feel supported to continue in their caring role.	43%.	30%.	41%.	43%.	42%.
NI – 9.	Percentage of adults supported at home who agreed they felt safe.	85%.	80%.	...	...	...

Please note that results for questions have been suppressed where there were fewer than 20 responses as they may be unrepresentative and may risk identifying respondents.

The data shown here is the same as reported in last year's Annual Performance Report, showing the results of the outcome questionnaire held in 2021/22. Updated figures for these indicators are not yet available for 2023/24.

National Indicators 11 – 20, reported for year indicated

Indicator	Title	Orkney (previous data)	Orkney	Scotland rate	Year of latest data
NI – 11.	Premature mortality rate per 100,000 persons.	453.	393.	442.	2022.
NI – 12.	Emergency admission rate (per 100,000 population).	9,657.	9,538.	11,273.	2022/23.
NI – 13.	Emergency bed day rate (per 100,000 population).	93,235.	86,572.	119,806.	2022/23.
NI – 14.	Emergency readmissions to hospital within 28 days of discharge (rate per 1,000 discharges).	121.	69.	102.	2022/23.
NI – 15.	Proportion of last 6 months of life spent at home or in a community setting.	91.0%.	90.9%.	88.9%.	2022/23.
NI – 16.	Falls rate per 1,000 population aged 65+.	21.9.	19.9.	22.5.	2022/23.
NI – 17.	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections.	77.9%.	70.7%.	75.8%.	2021/22.
NI – 18.	Percentage of adults with intensive care needs receiving care at home.	55.7%.	69.5%.	64.8%.	2023.
NI – 19.	Number of days people spend in hospital when they are ready to be discharged (per 1,000 population).	336.	1,002.	902.	2023/24.
NI – 20.	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency.	26.8%.	20.1%.	24.0%.	2019/20.

Source: Public Health Scotland Core Suite of Integration Indicators

Orkney HSCP Localities data for National Indicators 12 to 16 between 2015/16 and 2022/23.

Data for these indicators are not yet available at locality level for 2022/23. The numbers will be added when they become available; in the meantime, the year has been marked as 'N/A' for these indicators.

NI – 12 – Emergency admission rate for adults (per 100,000 population).

Locality.	2015/16.	2016/17.	2017/18.	2018/19.	2019/20.	2020/21.	2021/22.	2022/23.
Isles.	10,545.	8,964.	10,286.	11,582.	9,718.	8,290.	10,800.	N/A
Orkney East.	12,604.	9,994.	11,214.	11,682.	11,142.	10,592.	10,874.	N/A
Orkney West.	8,839.	8,990.	7,881.	8,909.	8,310.	8,749.	9,880.	N/A

NI – 13 – Emergency bed day rate for adults (per 100,000 population).

Locality.	2015/16.	2016/17.	2017/18.	2018/19.	2019/20.	2020/21.	2021/22.	2022/23.
Isles.	97,560.	75,326.	77,300.	94,123.	86,508.	82,335.	72,375.	N/A
Orkney East.	94,882.	89,217.	92,465.	80,502.	99,108.	72,696.	89,419.	N/A
Orkney West.	87,380.	83,784.	74,743.	89,594.	73,323.	71,394.	82,770.	N/A

NI – 14 – Emergency readmissions to hospital within 28 days of discharge (per 1,000 discharges).

Locality.	2015/16.	2016/17.	2017/18.	2018/19.	2019/20.	2020/21.	2021/22.	2022/23.
Isles.	63.	76.	85.	75.	69.	65.	73.	N/A
Orkney East.	90.	76.	86.	85.	73.	85.	74.	N/A
Orkney West.	67.	81.	67.	81.	54.	66.	65.	N/A

NI – 15 – Proportion of last 6 months of life spent at home or in a community setting.

Locality.	2015/16.	2016/17.	2017/18.	2018/19.	2019/20.	2020/21.	2021/22.	2022/23.
Isles.	93%.	90%.	92%.	93%.	88%.	92%.	94%.	N/A
Orkney East.	90%.	92%.	91%.	88%.	90%.	92%.	92%.	N/A
Orkney West.	94%.	92%.	90%.	91%.	91%.	94%.	92%.	N/A

NI – 16 – Falls rate per 1,000 population aged 65+.

Locality.	2015/16.	2016/17.	2017/18.	2018/19.	2019/20.	2020/21.	2021/22.	2022/23.
Isles.	13.	13.	13.	10.	5.	10.	6.	N/A
Orkney East.	27.	23.	19.	21.	22.	17.	16.	N/A
Orkney West.	20.	21.	15.	11.	16.	17.	18.	N/A

Looking Forward

The provision and delivery of health and social care services continues to be profoundly affected by significant demographic changes, both in Orkney and throughout the rest of the country. In 2018, the number of people aged 75 and over was 2,345 (10% of the population), but is predicted to increase to 20% of population, by 2043. Over this period, demand for care services for older people will inevitably increase.

These anticipated increases in demand sit within a landscape of a reducing working population: the number of people aged 16-65 is forecast to fall by 1,656. It is, therefore, inevitable that innovative and creative solutions for delivering services will be needed to ensure appropriate care for an increasing number of service users, by a decreasing number of staff.

Technology will, of course, deliver some solutions, but initiatives such as Community Led Support will undoubtedly be needed to ensure people receive the care and support they need, especially within the context of an increasingly challenging financial environment.

The Scottish Government's plans for delivery of the National Care Service continue apace, and services will continue to adapt and evolve to meet these new challenges.

The term of our current Strategic Plan ends in 2025, and work will begin shortly to compose our new plan, paying particular attention to our existing Strategic Priorities and their relevance to our community.

In the meantime, all six Priorities will continue to be a focus for us, and we will endeavour to work with and alongside our communities and partner organisations to achieve our delivery aims.

Contact Us

If you need this document in another format or language, please contact us at OHACfeedback@orkney.gov.uk or telephone 01856873535 (extension 2601).

Jeśli potrzebujesz tego dokumentu w innym formacie, skontaktuj się z nami pod adresem OHACfeedback@orkney.gov.uk lub telefonicznie 01856873535 (rozszerzenie 2601).

Якщо вам потрібен цей документ в іншому форматі або мовою, будь ласка, зв'яжіться з нами за адресою OHACfeedback@orkney.gov.uk або телефоном 01856873535 (збільшення 2601).

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Please tell us your story - good or bad - about your experience of Orkney HSCP services.

www.careopinion.org.uk.

For further information:

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