

**Stephen Brown (Chief Officer)**

Orkney Health and Social Care Partnership

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Agenda Item: 7.

## **Integration Joint Board**

**Date of Meeting: 2 July 2025.**

**Subject: Neurodevelopmental Provision.**

### **1. Purpose**

1.1. To update the Integration Joint Board on the current position relating to Neurodevelopmental provision in Orkney and, in particular, the assessment arrangements.

### **2. Recommendations**

**It is recommended:**

2.1. That the engagement of two sessions a week of Associate Specialist Doctor time to focus solely on neurodevelopmental assessment be approved.

2.2. That an additional 8B Psychology post to specialise in the neurodevelopmental assessment and support of adults be established.

### **3. Background**

3.1. Over the last few years, there has been a significant increase in demand for neurodevelopmental assessments for both adults and children. This trend is a national one and has raised concerns relating to the capacity of systems to manage the demand.

3.2. Orkney is no different to the rest of Scotland and, as the volume of demand increases, it has become evident that the current workforce capacity to manage the demand is insufficient. In addition, some of the pathways for assessment and support are less efficient than they could be.

3.3. As of May 2025, there were 191 children in Orkney awaiting a neurodevelopmental assessment. The average wait was 108 weeks, and the longest wait was five years. Neurodevelopmental assessments are required when there are emerging indicators of neuro-related conditions such as Autism, Attention Deficit and Hyperactivity Disorder (ADHD) or Foetal Alcohol Syndrome.

3.4. The current delay, experienced by some, is not an acceptable position and one that requires addressing in order to ensure that assessments are conducted timeously and that young people and their families receive the right support at the right time.

3.5. The approach to assessment for children is very much a multi-disciplinary one. It requires input from a variety of key professionals along the pathway including paediatric Occupational Therapy and Speech and Language, Educational Psychology, Health Visiting and School Nursing, as well as assessment by a Paediatrician. In some instances, particularly where there is potentially more than one underlying condition present, Psychiatry and Psychology input from within Child and Adolescent Mental Health Services (CAMHS) is required. There is limited capacity across all of these professions to manage the demand, and work is actively underway to streamline processes and maximise the resource that is available. This work is looking to develop a pathway that will ensure a single point of referral, multi-agency triage and prioritisation, and single assessment process.

3.6. The demand for adult neurodevelopmental assessments has grown hugely over the last few years. As children receive a diagnosis, it is not uncommon for the parent of a child to review their own life experience and interactions and, in many instances conclude that they too may have a similar condition that has been undiagnosed throughout their life. In addition, as awareness of autism and ADHD continues to grow, adults can often identify with some of the described traits and request assessment.

3.7. As of May 2025, there were 125 adults in Orkney awaiting assessment. That number has consistently risen over the last four years with only 26 adults requiring assessment in 2021. The current average wait for an adult assessment is 24 weeks with the longest wait being 80 weeks.

3.8. The assessment process for adults is not as multi-disciplinary in nature and in recent years, assessments have been spot-purchased by NHS Orkney from an external provider. The reason for this arrangement was predominantly due to having no specialist resource locally. Given the increasing volume, the Health and Social Care Partnership, via NHS Orkney, spent approximately £300,000 on commissioning of assessments in 2024/25.

## **4. Proposals for Increasing Capacity**

4.1. Due to a planned reduction in sessions provided by Child Psychology in CAMHS, equating to two fewer sessions each week, it is proposed that the funding freed up from this is recycled to, initially, introduce two additional Associate Specialist Doctor sessions. These sessions will focus specifically on neurodevelopmental assessments for children. The expertise required for this role is currently available and discussions have taken place.

4.2. In relation to the adult pathway, the spend on the commissioned assessments to date has been drawn from the Unplanned Activities (UNPACS) budget within Set-Aside. This budget would be consistently and significantly underspent without the costs of commissioned assessments. It is therefore proposed that £106,000 is permanently removed from the UNPACS budget to fund an additional Psychology

post to specialise in neurodevelopmental assessment and support for adults in Orkney.

## 5. Contribution to quality

Please indicate which of the Orkney Community Plan 2025 to 2030 values are supported in this report adding Yes or No to the relevant area(s):

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

## 6. Resource and financial implications

6.1. The proposals outlined within this report present no additional budgetary pressure on the Integration Joint Board. Indeed, the appointment of a permanent additional Psychologist to undertake neurodevelopmental assessments for adults presents the opportunity to significantly reduce our costs whilst creating expertise locally.

6.2. Removing part of the UNPACS budget to fund the Psychology post does come with some risk. The budget is there to fund activities and interventions that may be required to be purchased via another Board area or third-party provider. Although the demand for this has been very low over the last few years, these activities are by their very nature, impossible to anticipate or plan for. Nevertheless, the challenge currently being faced in meeting existing demand in neurodevelopmental activity, arguably outweighs the concern about future unknown demands.

## 7. Risk, equality and climate change implications

7.1. There are no significant risk, equality or climate change implications arising as a result of the proposals contained within this report.

7.2. The waiting times for adults and young people requiring neurodevelopmental assessment and support continues to be far longer than is acceptable. The proposals are intended to reduce these waits and improve the experience of both children and adults within Orkney currently struggling with neurodivergence.

7.3. An Equality Impact Assessment and an Island Communities Impact Assessment are attached as Appendices 2 and 3 respectively to this report.

## 8. Direction required

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

NHS Orkney.	Yes.
Orkney Islands Council.	No.

## 9. Escalation required

Please indicate if this report requires escalated to:

NHS Orkney.	No.
Orkney Islands Council.	No.

## 10. Authors and contact information

10.1. Stephen Brown (Chief Officer), Integration Joint Board. Email: [stephen.brown3@nhs.scot](mailto:stephen.brown3@nhs.scot), telephone: 01856873535 extension 2601.

## 11. Supporting documents

11.1. Appendix 1: Draft Direction to NHS Orkney.

11.2. Appendix 2: Equality Impact Assessment.

11.3. Appendix 3: Island Communities Impact Assessment.



## Integration Joint Board Direction Template.

<b>Reference</b>	2025.01 – Neurodevelopment Provision.
<b>Date direction issued</b>	Date of Meeting.
<b>Date direction in effect from</b>	Date to be determined by Integration Joint Board.
<b>Direction issued to</b> (delete as appropriate)	NHS Orkney.
<b>Does this direction supersede, amend or cancel a previous direction – If yes, include reference number(s)</b> (delete as appropriate)	No.
<b>Service area covered by direction</b>	Health and Community Care, Allied Health Professions and Children, Families and Justice Services
<b>Detail of Direction</b>	<p>The Integration Joint Board approves the following:</p> <ul style="list-style-type: none"> <li>• Engagement of two sessions a week of Associate Specialist Doctor time to focus solely on neurodevelopmental assessment.</li> <li>• Creation of an additional 8B Psychology post to specialise in the neurodevelopmental assessment and support of adults.</li> </ul>
<b>Budget allocated for this direction</b>	<p>The proposals outlined within the Neurodevelopmental Provision report present no additional budgetary pressure on the Integration Joint Board. Indeed, the appointment of a permanent additional Psychologist to undertake neurodevelopmental assessments for adults presents the opportunity to significantly reduce our costs whilst creating expertise locally.</p> <p>Removing part of the UNPACS budget to fund the Psychology post does come with some risk. The budget is there to fund activities and interventions</p>

	that may be required to be purchased via another Board area or third-party provider. Although the demand for this has been very low over the last few years, these activities are by their very nature, impossible to anticipate or plan for. Nevertheless, the challenge currently being faced in meeting existing demand in neurodevelopmental activity, arguably outweighs the concern about future unknown demands.
<b>Outcome(s) to be achieved, including link to Strategic Plan</b>	The appointment of both the Associate Specialist Doctor and creation of an 8B Psychology post will contribute positively to the Early Intervention and Prevention Strategic Priority as well as assist completion of one of the actions within the Strategic Plan Delivery Plan 2025/26.
<b>How will this be measured</b>	Recruitment of an Associate Specialist Doctor and creation of an 8B Psychology post and a reduction in the waiting times for both children and adults.
<b>Date of direction review</b>	Annual, unless required otherwise.



## Equality Impact Assessment

The purpose of an Equality Impact Assessment (EqIA) is to improve the work of the Integration Joint Board (Orkney Health and Social Care Partnership) by making sure it promotes equality and does not discriminate. This assessment records the likely impact of any changes to a function, policy, or plan by anticipating the consequences, and making sure that any negative impacts are eliminated, or minimised, and positive impacts are maximised.

<b>1. Identification of Function, Policy or Plan</b>	
Name of function / policy / plan to be assessed.	Neurodevelopmental Provision.
Service / service area responsible.	Health and Community Care, Allied Health Professions, Children, Families and Justice Services and Primary Care Services.
Name of person carrying out the assessment and contact details.	Shaun Hourston-Wells.
Date of assessment.	25 June 2025.
Is the function / policy / plan new or existing? (Please indicate also if the service is to be deleted, reduced, or changed significantly).	New.

<b>2. Initial Screening</b>	
What are the intended outcomes of the function / policy / plan?	The creation of an Associate Specialist Doctor and an additional 8B Psychology post to specialise in the neurodevelopmental assessment and support of adults.
State who is, or may be affected by this function / policy / plan, and how.	Anyone who may seek diagnosis of a Neurodevelopmental condition.
Is the function / policy / plan strategically important?	No.

How have stakeholders been involved in the development of this function / policy / plan?	There has not been direct involvement of service user stakeholders in the development of this proposal, although professional stakeholders have endorsed this proposal.
Is there any existing data and / or research relating to equalities issues in this policy area? Please summarise. E.g. consultations, national surveys, performance data, complaints, service user feedback, academic / consultants' reports, benchmarking (see equalities resources on OIC information portal).	No.
Is there any existing evidence relating to socio-economic disadvantage and inequalities of outcome in this policy area? Please summarise. E.g. For people living in poverty or for people of low income. See <a href="#">The Fairer Scotland Duty Interim Guidance for Public Bodies</a> for further information.	No.
Could the function / policy have a differential impact on any of the following equality strands?	(Please provide any evidence – positive impacts / benefits, negative impacts, and reasons).
1. Race: this includes ethnic or national groups, colour and nationality.	No.
2. Sex: a man or a woman.	No.
3. Sexual Orientation: whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.	No.
4. Gender Reassignment: the process of transitioning from one gender to another.	No.
5. Pregnancy and maternity.	No.
6. Age: people of different	Yes. There is specific provision in these proposals



ages.	for both adults and children.
7. Religion or beliefs or none (atheists).	No.
8. Caring responsibilities.	No.
9. Care experienced.	No.
10. Marriage and Civil Partnerships.	No.
11. Disability: people with disabilities (whether registered or not).	No.
12. Socio-economic disadvantage.	No.

### 3. Impact Assessment

Does the analysis above identify any differential impacts which need to be addressed?	No.
How could you minimise or remove any potential negative impacts?	N/A.
Do you have enough information to make a judgement? If no, what information do you require?	Yes.

### 4. Conclusions and Planned Action

Is further work required?	No.
What action is to be taken?	N/A.
Who will undertake it?	N/A.
When will it be done?	N/A.
How will it be monitored? (e.g. through service plans).	N/A.

Signature:



Date: 25 June 2025.

Name: Shaun Hourston-Wells.

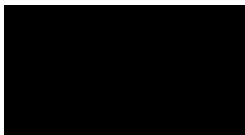



## Island Communities Impact Assessment

The purpose of an Island Communities Impact Assessment (ICIA) is to improve the work of the Integration Joint Board by making sure it considers whether the impact of any policy, strategy or service on an island community is likely to be significantly differently from its effect on other communities (including other island communities).

PRELIMINARY CONSIDERATIONS	Responses
Please provide a brief description or summary of the policy, strategy, or service under review for the purposes of this assessment.	Neurodevelopmental provision.
STEP 1 - Develop a clear understanding of your objectives	Responses
What are the objectives of the policy, strategy, or service?	To reduce waiting times for neurodevelopmental assessments.
Do you need to consult?	No. Professional stakeholders have endorsed this proposal.
How are islands identified for the purpose of the policy, strategy, or service?	The non ferry-linked isles, although there is no specific provision in the proposal for those living in the non-ferry linked isles.
What are the intended impacts/outcomes and how do these potentially differ in the islands?	To reduce waiting times for neurodevelopmental assessments. There are no identified differences for those in the isles.
Is the policy, strategy, or service new?	Yes.
STEP 2 - Gather your data and identify your stakeholders	Responses
What data is available about the current situation in the islands?	None. People in the isles access mental health services, including neurodevelopmental assessments, in the same way as those in the Mainland. It should be noted, however, that residents of the isles will likely need to travel to the Orkney Mainland receive these services
Do you need to consult?	No.
How does any existing data differ between islands?	N/A.
Are there any existing design features or mitigations in place?	No.
STEP 3 - Consultation	Responses
Who do you need to consult with?	N/A.
How will you carry out your consultation and in what timescales?	N/A.

What questions will you ask when considering how to address island realities?	N/A.
What information has already been gathered through consultations and what concerns have been raised previously by island communities?	None. However, accessing to these assessments will improve for those in the isles, alongside Mainland residents.
Is your consultation robust and meaningful and sufficient to comply with the Section 7 duty?	N/A.
<b>STEP 4 – Assessment</b>	<b>Responses</b>
Does your assessment identify any unique impacts on island communities?	No. However, isles' residents will likely need to travel to the Orkney Mainland to receive the proposed services.
Does your assessment identify any potential barriers or wider impacts?	No.
How will you address these?	It is likely that accessing this service will require attendance in the Orkney Mainland.
<p><b>You must now determine whether, in your opinion your policy, strategy, or service is likely to have an effect on an island community that is significantly different from its effect on other communities (including other island communities).</b></p> <p>If your answer is <b>NO</b> to the above question, a full ICIA will NOT be required, and <b><u>you can proceed to Step SIX</u></b>. If the answer is <b>YES</b>, an ICIA must be prepared, and <b><u>you should proceed to Step FIVE</u></b>. To form your opinion, the following questions should be considered:</p> <ul style="list-style-type: none"> <li>• Does the evidence show different circumstances or different expectations or needs, or different experiences or outcomes (such as different levels of satisfaction, or different rates of participation)?</li> <li>• Are these different effects likely?</li> <li>• Are these effects significantly different?</li> <li>• Could the effect amount to a disadvantage for an island community when compared to other islands in Orkney (especially the Mainland)?</li> </ul>	
<b>STEP 5 – Preparing your ICIA</b>	<b>Responses</b>
In Step Five, you should describe the likely significantly different effect of the policy, strategy, or service:	
Assess the extent to which you consider that the policy, strategy, or service can be developed or delivered in such a manner as to improve or mitigate, for island communities, the outcomes resulting from it.	
Consider alternative delivery mechanisms and whether further consultation is required.	
Describe how these alternative delivery mechanisms will improve or mitigate outcomes for island communities.	

Identify resources required to improve or mitigate outcomes for island communities.	
<b>STEP 6 - Making adjustments to your work</b>	<b>Responses</b>
Should delivery mechanisms/mitigations vary in different communities?	No.
Do you need to consult with island communities in respect of mechanisms or mitigations?	No.
Have island circumstances been factored into the evaluation process?	Yes. Although it is conceded that isles' residents will likely need to travel to the Orkney Mainland to access the proposed services.
Have any island-specific indicators/targets been identified that require monitoring?	No.
How will outcomes be measured on the islands?	N/A.
How has the policy, strategy, or service affected island communities?	The affect on island communities will be the same as those in the Mainland, i.e. improved access to services, albeit with the same issues around travelling.
How will lessons learned in this ICIA inform future policy making and service delivery?	We will continue to seek ways to mitigate the need for isles' residents to travel to the Orkney mainland to access services.
<b>STEP 7 - Publishing your ICIA</b>	<b>Responses</b>
Have you presented your ICIA in Easy-Read Format?	No.
Does your ICIA need to be prepared in Gaelic, or any other language?	No.
Where will you publish your ICIA, and will relevant stakeholders be able to easily access it?	It will be published alongside the associated the report and Equality Impact Assessment.
ICIA completed by:	Shaun Hourston-Wells.
Position:	Policy and Performance Manager
Signature:	
Date complete:	25 June 2025.
Who will sign-off your final ICIA and why?	Stephen Brown, Chief Officer.
Signature:	
Date approved:	25 June 2025.