



Stephen Brown (Chief Officer)
Orkney Health and Care
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Agenda Item: 3

Orkney Integration Joint Board

Wednesday, 10 December 2025, 09:30.

Council Chamber, Council Offices, Kirkwall.

Minute

Present

Voting Members:

Orkney Islands Council:

Councillors Rachael King, Jean Stevenson and Ivan Taylor (proxy for Lindsay Hall).

NHS Orkney:

Issy Grieve (via Microsoft Teams), Joanna Kenny and Fiona MacKay (proxy for Rona Gold) (via Microsoft Teams).

Non-Voting Members:

Professional Advisers:

- Stephen Brown, Chief Officer of the Integration Joint Board.
- Dr Kirsty Cole, General Practitioner representative, appointed by NHS Orkney.
- Dr Elvira Garcia, Secondary Medical Care Practitioner representative, (proxy for Dr Louise Wilson) (via Microsoft Teams).
- Darren Morrow, Chief Social Work Officer of the constituent local authority, Orkney Islands Council.
- Mohammed Sohail, Chief Finance Officer of the Integration Joint Board (via Microsoft Teams).
- Sam Thomas, Nurse representative, employed by NHS Orkney (via Microsoft Teams).

Stakeholder Members:

- Morven Brooks, Third Sector Representative.
- Ryan McLaughlin, Staff-side Representative, NHS Orkney (via Microsoft Teams).
- Willie Neish, Carer Representative.
- Danny Oliver, Staff-side Representative, Orkney Islands Council.

- Frances Troup, Head of Strategic Housing, Housing Operations and Homelessness.

Clerk

- Hazel Flett, Service Manager (Governance), Orkney Islands Council.

In Attendance

Orkney Health and Social Care Partnership:

- Lynda Bradford, Head of Health and Community Care.
- John Daniels, Head of Primary Care Services.
- Shaun Hourston-Wells, Policy and Performance Manager (for Items 13 to 17).

Orkney Islands Council:

- Gavin Mitchell, Head of Corporate Governance (for Items 11 and 12).
- Georgette Herd, Principal Solicitor.
- Paul Kesterton, Information Governance Officer (for Items 13 and 14).
- Susan Taylor, Committees Officer.

Observing

- Dave Harris, Director of People and Culture, NHS Orkney.

Not Present

Stakeholder Member:

- Sarah Kennedy, Carer Representative.

Chair

- Joanna Kenny, NHS Orkney.

1. Apologies

The Chair welcomed everyone to the meeting and reminded members that the meeting was being broadcast live over the Internet on Orkney Islands Council's website. The meeting was also being recorded, with the recording publicly available for listening to after the meeting for 12 months.

Apologies for absence had been intimated on behalf of the following:

- Voting members:
 - Rona Gold, NHS Orkney (Fiona MacKay deputising).
 - Councillor Lindsay Hall (Councillor Ivan Taylor deputising).
- Non-Voting Member:
 - Dr Louise Wilson, Secondary Medical Care Practitioner representative (Dr Elvira Garcia deputising).
- Melanie Barnes, Interim Director of Finance, NHS Orkney.

- Wendy Lycett, Interim Director of Pharmacy, Orkney Health and Social Care Partnership.
- Erik Knight, Head of Finance, Orkney Islands Council.

2. Appointments and Re-appointments

There had been previously circulated a report presenting various appointments and re-appointments to the Integration Joint Board for the Board to consider.

The Service Manager (Governance) advised that the report set out details of appointments and reappointments made by NHS Orkney, the temporary appointment of a Chief Finance Officer, and recommended appointment of additional members to the Performance and Audit Committee.

The Chair welcomed Fiona MacKay and Mohammed Sohail to their first meeting of the Integration Joint Board.

Issy Grieve advised that her tenure with NHS Orkney would end on 30 June 2026.

The Board noted:

2.1. That NHS Orkney had made the following appointments to the Integration Joint Board for the period to November 2027:

- Joanna Kenny, Voting Member.
- Issy Grieve, Voting Member (noting that her tenure ended on 30 June 2026).
- Rona Gold, Voting Member.
- Davie Campbell, Proxy Member.
- Fiona MacKay, Proxy Member.

2.2. That NHS Orkney had also advised that Joanna Kenny would remain as Chair of the Integration Joint Board until May 2027.

2.3. That Mohammed Sohail had been appointed to the post of Chief Finance Officer for a period of one year.

The Board **resolved**:

2.4. That the following members be appointed to the Performance and Audit Committee:

- Danny Oliver.
- Willie Neish.

3. Declarations of Interest

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

4. Minute of Previous Meeting

There had been previously circulated the draft Minute of the Meeting of the Integration Joint Board held on 3 September 2025.

In response to a question from Councillor Rachael King seeking assurance that the action on progressing pathways was back on track, Lynda Bradford advised that this matter had been referred to the Alcohol and Drugs Partnership to take forward and a report would be forthcoming in due course.

The Minute was thereafter **approved** as true record.

5. Minute of Special Meeting

There had been previously circulated the draft Minute of the Special Meeting of the Integration Joint Board held on 25 September 2025.

After a question from Councillor Rachael King, Stephen Brown undertook to provide specific details regarding requests for Self-Directed Support provision from ferry-linked isles residents via a briefing.

After a question from Issy Grieve, Lynda Bradford advised that snagging works on the new Kirkwall care facility were nearing completion, although there was not yet a specific date for handover. The Care Inspectorate were on site this week to approve the building and it was hoped the facility would be ready in early 2026.

The Minute was thereafter **approved** as true record.

6. Matters Arising Log

There had been previously circulated a log providing details on matters arising from previous meetings, together with a list of regular reports for consideration and to enable the Board to seek assurance on progress, actions due and to consider corrective action, where required.

Stephen Brown advised that a number of actions had now progressed to completion and would be removed from the log following this meeting.

In respect of matters arising from the previous meeting, Stephen Brown again expressed his thanks to Janice Annal for her many years of service on the Board as the Service User representative. The vacancy had been advertised with multiple expressions of interest received to the extent that a selection process would now be required. Stephen Brown suggested that, together with the Chair and Vice Chair of the Board, he would consider a suitable process with a view to submitting recommendations to the next Board meeting in February 2026.

With reference to Actions 10 and 11 – Guardianship Agreements and Delayed Transfer of Care – Stephen Brown highlighted that a lack of formal arrangements for the care of patients with limited capacity was causing unnecessary distress and slowing down the transfer of care process. Lynda Bradford advised that a local radio and press campaign was planned for December 2025, and Dementia UK would be launching a promotion in February 2026, coinciding with Free Wills month. Lynda Bradford continued that, locally, further promotional work would be undertaken, including in partnership with local solicitors, to highlight the benefits of having Power of Attorney and Guardianship arrangements in place.

The Chair accepted the earlier verbal update from Lynda Bradford regarding progress on the new Kirkwall care facility but asked that a paper be submitted to the next meeting.

In response to a query from Issy Grieve on whether the Board was limited to one Service User representative, Stephen Brown advised that previously, the Board had agreed to appoint two Carer representatives. For the Service User representative, he was in the fortunate position of having more than two people interested, hence the proposal for a process to consider those interested and come forward with recommendations to the next meeting.

Councillor Jean Stevenson was glad to hear about the campaign regarding guardianship arrangements and queried what percentage of delayed discharges were due to lack of appropriate agreements. Stephen Brown advised that approximately 15% of current delayed care transfers were caused by a lack of formal arrangements being in place.

Regarding Action 2 – Local Government Benchmarking Framework – Councillor Rachael King thanked officers for the briefing note which explained the rationale on how the family groups were arranged and was struck that the main criteria was deprivation and not geography, resulting in Orkney being just outwith the top quartile. It should be acknowledged that this was far from perfect when comparing rural and/or island communities with larger authorities.

Regarding Action 4 – Climate Change Duties Reporting – although Councillor Rachael King queried how this would be tracked, if removed from the Matters Arising Log, noting that the Development Session had been cancelled at short notice. Stephen Brown advised that this was an area which could feature in the public service reform agenda as streamlining reporting. Also, the next annual report was due for submission very shortly, so the issue would not go away. Councillor Rachael King was content for its removal from the Matters Arising Log, given the potential for discussion through the public service reform agenda.

After a question from Councillor Rachael King on Action 7 – Adaptations – Lynda Bradford advised that there was a finite annual budget for adaptations which was normally at capacity, although there was the ability to carry forward budget and/or work not completed in one financial year to the next. As indicated in the Matters Arising Log, a briefing would be issued shortly.

Moving to the Regular Reports section, Councillor Rachael King noted that the Integrated Workforce Plan was due to be reported by February 2026 and asked whether this was on track. Stephen Brown confirmed that it would be the end of March, possibly into April 2026, before the updated plan was complete and, with workforce issues being one of the biggest issues, it was important to get it right, hence the proposed revised timeline.

Referring to the timeline for the Unpaid Carers Strategy, Councillor Rachael King highlighted the changing landscape, including new legislation, as well as the recent carers conference, and queried whether waiting until 2027 to review the strategy was appropriate. Stephen Brown advised that the strategy was constantly under review and, should there be any substantial changes required, this would be brought to the Board. However, it might be appropriate to provide an annual update highlighting any issues or slippages, and suggested that the first annual update be reported in April 2026, being one year since the strategy had been launched.

Lynda Bradford added that unpaid carers' needs was also one of the six priorities of the Strategic Plan, with monitoring of the Delivery Plan another route where issues were tracked and reported.

Stephen Brown highlighted the number of actions on the log and suggested that, in future, focus should be limited to actions at or past the target date.

Having **scrutinised** the log, the Board took assurance.

7. Joint Clinical and Care Governance Committee

There had been previously circulated the approved Minutes of the Meetings of the Joint Clinical and Care Governance Committee held on 3 July and 20 August 2025, together with the Chair's Assurance Reports, to enable the Board to seek assurance.

In Rona Gold's absence, Councillor Jean Stevenson, Vice Chair of the Joint Clinical and Care Governance Committee, and Chair of the Meeting held on 20 August 2025, presented the approved Minutes, and highlighted the matters outlined in the Chair's Assurance Reports. The Meeting held on 20 August 2025 had focussed solely on the Clinical Services Review Implementation Plan.

Councillor Rachael King highlighted the time taken for approved Minutes being submitted to the Board for assurance purposes, particularly when the Board received unapproved Minutes from its other sub-groups. The Chair suggested that, in this particular case, it may be related to NHS Orkney's governance processes and asked Stephen Brown to raise the matter with the Head of Corporate Governance at NHS Orkney, which he agreed to action.

After a question from Councillor Rachael King, Sam Thomas advised that only a small percentage of funding for unscheduled care was recurrent making advance planning difficult. If Key Performance Indicators (KPIs) were met and demand for services could be proven to be consistent, the funding situation could improve and there was a contingency plan in place should funding be withdrawn.

Councillor Rachael King referred to the process for pre-operative assessments for patients referred to the Golden Jubilee in Glasgow and queried how that would work in light of the proposed east/west regional planning being considered by the Scottish Government. Sam Thomas advised that regional planning was still in its early stages and, as the Golden Jubilee was also a National Treatment Centre, she did not envisage any changes to existing arrangements. However, she advised that a paper would be submitted to the Board, and other governance committees, raising awareness of the national planning framework in due course.

Having **scrutinised** the approved Minutes of the Meetings of the Joint Clinical and Care Governance Committee held on 3 July and 20 August 2025, together with the Chair's Assurance Reports, the Board took assurance.

8. Strategic Planning Group

There had been previously circulated the approved Minute of the Meeting of the Strategic Planning Group held on 2 September 2025, together with the Chair's Assurance Report, to enable the Board to seek assurance.

Councillor Rachael King, Chair of the Strategic Planning Group, commented on the positive assurances highlighted in the Chair's Assurance Report, namely staff commitment and multi-disciplinary working.

After a question from Issy Grieve querying the timescale for receipt of the report regarding Brinkies wing at Hamnavoe House, Stephen Brown advised that this was behind schedule, noting the significant challenges around revenue budget required to open the facility, as well as the staff resource, but anticipated a report would be presented to the Board in February 2026.

In response to a query from Dr Kirsty Cole regarding increasing dependency levels within care homes, the impact on primary care services and whether any discussion around mitigations had taken place, Lynda Bradford advised a Project Initiation Document (PID) was currently being developed to look at the care home estate, the staffing model for which was out of date, noting that there was currently no nursing home facility available in Orkney. Once the PID was complete, the project was expected to take approximately two years to complete and Lynda Bradford undertook to provide the Board with regular updates.

Having **scrutinised** the approved Minute of the Meeting of the Strategic Planning Group held on 2 September 2025, together with the Chair's Assurance Report, the Board took assurance.

9. Joint Staff Forum

There had been previously circulated the unapproved Minute of the Meeting of the Joint Staff Forum held on 19 September 2025, together with the Chair's Assurance Report, to enable the Board to seek assurance.

Stephen Brown, the Co-Chair who chaired the Meeting of the Joint Staff Forum on 19 September 2025, highlighted ongoing leadership capacity issues, however positive recruitment outcomes had been achieved in the All Age Nurse Led Psychiatric Liaison team and the Children and Families team. The Trade Unions recognised the challenges faced with the Financial Recovery Plan and that the overall message required to be one of realism. Stephen Brown confirmed that meetings had been consistently quorate for over a year and thanked Trade Union colleagues for ensuring that happened.

After a question from Councillor Rachael King regarding honest communication with the public, Stephen Brown gave assurance that financial challenges continued to be highlighted locally and nationally at every opportunity, including meetings with Community Council representatives. The consistent message was that the finite budget did not meet current demand.

Danny Oliver commented that, in his opinion, the honest communication to the public should not be one of advising that services would be cut at the same time advocating improvement. Previous papers had set out challenges across the system, including respite care and delayed discharge. There was a clear need for additional resource, and the sums in the Financial Recovery Plan could not be achieved.

Having **scrutinised** the unapproved Minute of the Meeting of the Joint Staff Forum held on 19 September 2025, together with the Chair's Assurance Report, the Board took assurance.

10. Performance and Audit Committee

There had been previously circulated the approved Minute of the Meeting of the Performance and Audit Committee held on 25 September 2025, together with the Chair's Assurance Report, to enable the Board to seek assurance.

In the absence of the Chair of the Performance and Audit Committee, Councillor Lindsay Hall, Stephen Brown highlighted the main areas of business, including the Annual Audit Report and the final accounts, as well as the Strategic Plan Delivery Plan tracker.

Having **scrutinised** the approved Minute of the Meeting of the Performance and Audit Committee held on 25 September 2025, together with the Chair's Assurance Report, the Board took assurance.

11. Revenue Expenditure Monitoring

There had been previously circulated a report presenting the revenue expenditure position as at 30 September 2025, for scrutiny.

Mohammed Sohail related the following main financial issues:

- The full year projected overspend for financial year 2025/26 for delegated services was £2.8m, but increased to £5.1m when the NHS Orkney historic savings target of £2.4m was included.
- The historic savings target of £2.4m needed to be removed if possible.
- There was a risk that, should service commitment activity continue in the same pattern, the year-end outturn position would be a significant overspend, in excess of £3m, which the Financial Recovery Plan should address.
- It was not realistic for the budget to remain the same as the outturn position last year, given that it did not account for pay awards and increasing demand for services, which limited the possibilities of a balanced budget ever being achieved.
- The full year forecast projection was based on a detailed review of spend activity and the potential impact of recovery plans to reduce spend in the current financial year.

The Chair agreed that clarity on the historic savings target set by NHS Orkney needed to be achieved.

Fiona MacKay referred to the over and underspends highlighted in the report and queried whether there was a relationship and/or interdependency. Given the position within the financial year, she further queried whether there would be any improvement by the end of March 2026. Mohammed Sohail advised that there was no Recovery Plan in motion and actionable for change in the current financial year. Stephen Brown advised that there was no obvious correlation between areas of over or underspend.

Issy Grieve commented that the Board was in an unusual position, in that colleagues in Orkney Islands Council were able to provide some assistance from reserves to balance the budget at year end. The Board had its own reserves and she queried whether they could be used at year end.

Mohammed Sohail advised that some of the reserves were restricted and could only be used to counter areas of overspend within that specific area. If a realistic budget was not set, the Board would always have a budget overspend position at year end. Discussions were required on baselining budgets to avoid ending up with artificial overspends.

In response to a further query from Issy Grieve on the Scottish Government's view around Integration Joint Boards holding reserves, Stephen Brown advised that there was no current indication that reserves would be recouped by Scottish Government. However, there were some pockets of funding which had been claimed back by the Scottish Government or a smaller allocation provided in the following year. Stephen Brown continued that, where it was legitimate to do so, reserves would be used to offset any year end overspend.

After a question from Councillor Jean Stevenson regarding the underspend in Community Nursing, John Daniels advised the Board that teams were under pressure but that a Team Lead position had been advertised and that the two long-term agency staff members would be in post until March 2026. An update would be provided to the Board in February 2026.

Councillor Rachael King referred to realistic baseline budgeting and queried how the Board ensured that happened, given that integration had been operating in Orkney longer than elsewhere. Mohammed Sohail advised that he had received staff planning numbers, as well as some basic budgeting assumptions, and would have a further conversation with the Council's finance team.

After a comment from Danny Oliver, Darren Morrow believed that there would be a significant rise in requests for Self-Directed Support from children and young people and that a budget would therefore be required, based on assessed need. Councillor Rachael King referred to the previous discussion around Self-Directed Support from isles residents and asked for a deep dive into current demand and existing budget. Stephen Brown advised that this matter would be discussed through the Strategic Planning Group in the first instance.

The Board noted:

11.1. The financial position of the Orkney Health and Social Care Partnership as at 30 September 2025 as follows:

- A current overspend of £1,129k in relation to Orkney Islands Council commissioned services, which was an adverse movement of £686k on the Quarter 1 position.
- The position in relation to NHS Orkney commissioned services was an underspend of £524k if the £2,400k historic savings target was stripped out. Including six-months share of the historic savings target resulted in NHS Orkney commissioned services having an overspend of £676k.
- Set Aside services required an additional £890k budget to match the actual spend.
- The full year projected variance on delegated services was £5,134k, comprising £3,935k overspend on Orkney Islands Council commissioned services and £1,199k overspend on NHS Orkney commissioned services.

11.2. The balance within the earmarked reserves/holding account of £3,505k, as detailed in Annex 1 to the report circulated.

12. Public Service Reform

There had been previously circulated a report presenting a proposed Routemap to Reform for public services in Orkney for submission to the Scottish Government, for consideration.

Stephen Brown highlighted the following:

- The Scottish Government's Programme for Government 2025/26 included a pledge, by the end of the current Parliament, to publish preferred models for Single Authority Models in Argyll and Bute, Orkney and the Western Isles that had been developed jointly by local government and health and which enabled a shift towards prevention. This would include a plan and timeline for implementation, with at least one area transitioning to shadow arrangements.
- Officers from Orkney, Argyll and Bute, and the Western Isles had worked together, recognising the financial challenges.
- Locally, it was recognised that more could be done by unifying and better utilising resources, including contracting out and delivering locally, bringing together public services to maximise resource and increase resilience.
- Management of the three organisations in Orkney (Orkney Islands Council, NHS Orkney and the Integration Joint Board) did not believe that the "single authority model" was the best option for Orkney, particularly since that option had been discussed previously and had not progressed.
- Engagement with Scottish Government officials and Ministers on the proposed Routemap, which provided details on the key principles to take forward, had taken place.
- Assurance was provided that this was not about creating a single body in Orkney to manage all public services; the Routemap created real opportunities to reform public services.
- The Scottish Government expected the three areas (Argyll and Bute, Orkney and the Western Isles) to submit their proposals by 12 December 2025.
- Locally, the Routemap was considered by Council on 9 December, by the Board at this meeting and would be considered by the Board of NHS Orkney on 11 December 2025.
- Officers were not expecting any challenge from the Scottish Government on the proposals.
- The Council had been offered funding of £300k from the Scottish Government, which would be used initially to recruit two temporary members of staff.

The Chair welcomed the Routemap, which was a high level strategic document, rather than specific detail, and provided an opportunity to reduce duplication across the three organisations.

Fiona MacKay also expressed her support for the Routemap, including the principles, and was in agreement not to look at structures. Taking the recent Clinical Services Review as an example, this provided a clear opportunity for closer working and shared services, as it was apparent that small teams were fragile and would be more sustainable if they could work jointly and/or across boundaries.

Danny Oliver suggested there were contradictions in the Routemap and referred to the combined annual deficit of £26m. In his opinion, the Scottish Government saw public service reform as a way to reduce the workforce and spending – saving billions and cutting the workforce by a percentage each year. The Routemap suggested that any savings would be reinvested in frontline service and sought assurance that would happen. Gavin Mitchell advised that there was high level duplication across the three organisations, with the Routemap proposing to cut across that and produce savings which could then be directed to frontline services. The proposed Routemap had been the subject of positive feedback from Scottish Government officials and there was nothing to suggest that redirecting savings would not happen.

After a further question from Danny Oliver regarding the wording at section 1.6 of the proposed Routemap, which could be interpreted as outsourcing support services, potentially internationally, as well as nationally, Stephen Brown advised that, on initial drafting, the language could set alarm bells ringing. However, there were cost and operational benefits from national and regional collaboration, particularly in health services, for example it made operational sense for NHS Orkney to be part of a national IT system to ensure safe transfer of patient records, however locally, both organisations required to ensure their IT systems were secure, particularly from cyber threats, and this was where the Routemap was proposing closer working. When discussing the proposed Routemap with staff representatives, it was made very clear that this was about making public service delivery in Orkney more efficient and was not about outsourcing. Gavin Mitchell advised that, although the four principles had been agreed, this was on the understanding that regional and national models, which facilitated standardisation of processes and were working well, should remain.

Morven Brooks added her support for the Routemap, as well as the opportunity to review commissioning and Service Level Agreements with Third Sector providers, and looked forward to being included in ongoing discussions.

The Board noted:

12.1. The work undertaken by the Integration Joint Board and its partners to date in progressing work around the Public Service Reform agenda.

The Board **resolved**:

12.2. That the proposed Routemap to Reform for public services in Orkney, attached as Appendix 1 to the report submitted, be approved.

12.3. That the Chief Officer be authorised to agree Memoranda of Understanding with the Scottish Government and other relevant agencies confirming that no action would be taken in respect of any decisions or measures taken, including local reallocation of resources, that were in accordance with the Routemap to Reform even if they did not necessarily align with existing legacy systems or processes.

13. Appointment of Chief Internal Auditor

There had been previously circulated a report setting out recommendations for the appointment of a Chief Internal Auditor for the Integration Joint Board, for consideration.

Mohammed Sohail gave the following highlights:

- The Council's appointment as the Board's Internal Auditor was due to end on 31 March 2026, noting the proposal to rotate the Internal Audit function every five years, in accordance with best practice and external auditor appointments.
- Options as set out in the report, comprising buying in a service or utilising NHS Orkney's internal audit service.
- The estimated internal audit time required for the Integration Joint Board of approximately 20 days which could potentially be met from within the contingency allocation available within the overall audit plans of NHS Orkney, subject to approval by the Board of NHS Orkney.
- Should the recommendation be approved, this would require escalation to NHS Orkney, so that they could accommodate this within their internal audit plan, which would be submitted to the first meeting of the Performance and Audit Committee in financial year 2026/27.

The Board **resolved** that NHS Orkney's Chief Internal Auditor be appointed as the Chief Internal Auditor of the Integration Joint Board for a five-year period commencing 1 April 2026.

14. Freedom of Information and Publication Scheme

There had been previously circulated an updated Freedom of Information Policy and Publication Scheme, together with an Equality Impact Assessment and an Island Communities Impact Assessment, for consideration.

Shaun Hourston-Wells highlighted the following:

- The Integration Joint Board was a Scottish public authority for the purposes of Freedom of Information (FOI) legislation and was therefore required to respond to information requests.
- Integration Joint Boards were expected to have their own FOI Policy and a Publication Scheme in which the public could see what information was and was not available, any applicable charges and how to contact the Board for assistance. The Publication Scheme was also required to explain how unpublished information may be accessed.
- Following review by the Council's Information Governance Officer, both the FOI Policy and associated Publication Scheme were considered relevant and remained fit-for-purpose within the context of current legislation and no substantive changes were proposed.

The Board **approved** the Freedom of Information Policy and the Publication Scheme, attached as Appendices 1 and 2 respectively to the report circulated.

15. Date and Time of Next Meeting

It was agreed that the next meeting be held on Wednesday, 18 February 2026 in the Council Chamber, Council Offices, Kirkwall.

The following dates for 2026 were also approved:

- 22 April 2026.
- 17 June 2026.
- 2 September 2026.
- 25 November 2026.

16. Exclusion of Public

On the motion of Joanna Kenny, seconded by Councillor Rachael King, the Board agreed that the public be excluded from the remainder of the meeting as the business to be considered involved the disclosure of exempt information of the classes described in the relevant paragraphs of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973 as amended.

17. Primary Care Improvement Plan Regulation in Orkney

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraphs 1, 6, 8, 9 and 10 of Part 1 of Schedule 7A of the Act.

Dr Kirsty Cole highlighted that she was a GP working in an independent practice in Orkney, which would apply equally to anyone else appointed as the non-voting adviser to the Integration Joint Board. While she had an interest in this item, she did not believe that it was a conflict of interest and indicated that she had points to make in relation to the report which would be helpful for the Board to hear.

There had been previously circulated a report presenting an overview of Primary Care Improvement Plan (PCIP) regulation in NHS Scotland, a detailed assessment of Orkney's current position in relation to the regulations and options for improving the current position, together with an Equality Impact Assessment and an Island Communities Impact Assessment, for consideration.

John Daniels advised that the PCIP was introduced in July 2018 to support the General Medical Services contract. Locally, the allocation was never sufficient to fully implement the PCIP as the Scottish Government intended. Further, the PCIP was never fully realised locally due to recruitment issues.

John Daniels advised that Orkney received just under £1m per annum, or 0.5% of the NRAC allocation, which was insufficient to cover the cost of delivering the PCIP and would never deliver the fully regulated services. The NRAC distribution inherently disadvantaged a small board, particularly one covering a population of approximately 22k, with services to be delivered by all GP practices, including across the isles.

John Daniels confirmed that the PCIP was a national plan and although a Memorandum of Understanding had been agreed, he was not aware of any detailed discussions with small remote and rural Boards, prior to its implementation, or whether an Island Communities Impact Assessment had been undertaken.

John Daniels advised that decisions concerning regulatory compliance were the responsibility of the Board.

The Board **resolved** what action should be taken with regard to improving local compliance with the PCIP.

The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.

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Darren Morrow, Mohammed Sohail and Ryan McLaughlin left the meeting during discussion of this item.

18. Conclusion of Meeting

There being no further business, the Chair declared the meeting concluded at 12:46.