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Agenda Item: 10

Integration Joint Board

Date of Meeting: 18 February 2026.

Subject: Community Nursing Service Update.

1. Purpose

1.1. To provide an update on the current workforce position within the Community Nursing Service, the challenges experienced over recent years, the actions taken to stabilise the service and the forward plan for a sustainable, integrated Community Nursing Service model. The paper summarises staffing improvements, leadership changes, training activity, and future structural considerations.

2. Recommendations

The Integration Joint Board is invited to note:

2.1. The significant progress made in stabilising Community Nursing Service staffing and leadership.

2.2. The planned development of an integrated mainland Community Nursing Service structure, including the proposal to move to one substantive Band 7 leadership post following completion of current secondments.

2.3. That a full establishment review will be reported to the Board later in 2026.

It is recommended:

2.4. That the Board supports continued investment in training, development, and skill-mix changes to improve service resilience within the Community Nursing Service.

2.5. That the Board endorses ongoing work to review compensatory rest arrangements in line with national guidance.

3. Background

- 3.1. Over the past three years, Community Nursing Service has experienced sustained workforce pressures linked to long-term sickness, retirements, relocations, and unfilled vacancies. This created a prolonged period of instability, reduced leadership capacity and an over-reliance on bank and agency staff. Continuity of care was affected, and team morale declined.
- 3.2. Leadership capacity was particularly impacted by the loss of a 1.0 FTE Band 7 post in the East Team and a reduction of the West Team Band 7 hours to 0.6 FTE. This required the Band 8a Clinical Nurse Manager to absorb significant operational responsibility.
- 3.3. Staff feedback and iMatter results highlighted frustration, isolation, and reduced confidence in decision-making structures. East and West Teams increasingly operated in isolation rather than as a combined service.
- 3.4. Despite these pressures, the service continued to maintain high-quality patient care due to strong staff commitment.
- 3.5. Over the last six months, significant work has been undertaken to improve service sustainability and team morale.

4. Current Workforce and Leadership Position

- 4.1. Two Band 7 fixed-term development posts have now been appointed from existing Band 6 staff, each working three days per week and aligned to East and West. These appointments represent a significant progression toward reestablishing consistent leadership, reducing dependence on temporary staffing arrangements.
- 4.2. This distribution has been intentionally designed to strengthen integration across Community Nursing. Historically, the East and West Teams have operated with a degree of separation; placing a Band 7 in each area will help establish clearer communication, more consistent working practices, and a more cohesive, joined up service. Working collaboratively, both postholders will support the development of the Community Nursing Service and drive forward innovative ideas to ensure the service remains sustainable and responsive to the future needs of the Orkney community.
- 4.3. An interim Band 8a Clinical Nurse Manager (seconded until October 2026) provides improved leadership continuity and operational oversight.
- 4.4. Collectively, the changes to team leadership ensure a more sustainable and resilient workforce model. This has already contributed to increased team confidence, improved communication, and clearer pathways for decision-making.

5. Vacancy Position

- 5.1. Substantive vacancy factor has reduced from 46% to 23% in the past six months. This is further reduced to 13% when adjusted to include 2 FTE long term agency placements:

- Agency contracts conclude in March 2026.
- Recruitment actions now underway:
 - Two Band 6 fixed-term posts to backfill seconded Band 7s.
 - Two Band 5 posts, one for each team.

5.2. Once posts are filled and backfilled, the expected vacancy factor will further reduce to approximately 9%.

6. Skill-Mix Development

6.1. Engagement with staff and the Royal College of Nursing supported conversion of longstanding vacant Registered Nursing posts into Health Care Support Worker roles to create a more sustainable skill-mix.

6.2. This skill-mix aligns with common Community Nursing Service models nationally and supports long-term workforce resilience.

7. Future Model and Leadership Structure

7.1. Following completion of the secondments, the intention is to move to a single integrated mainland Community Nursing Service team with a single Band 7 leadership post.

7.2. Remaining hours will be repurposed and considered through the upcoming establishment review.

8. Training and Development

8.1. For Band 6 staff stepping up into Band 7 roles - A structured framework, supported by clearly defined competencies, has been implemented to provide a robust mechanism for evidencing learning and demonstrating progression throughout the duration of the secondment.

8.2. Senior staff continue to provide structured on-the-job support to build community nursing capability.

8.3. The Clinical Education Facilitator provides dedicated training for new staff and supports consistent Band 5 development.

8.4. A District Nurse development post will be considered later in 2026.

9. Compensatory Rest Review

9.1. Work is underway to update compensatory rest arrangements in line with national guidance and Working Time Regulations. This work includes staff-side engagement, risk assessment, and development of a safe, sustainable model.

10. 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):

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.

11. Resource and financial implications

11.1. All actions described are delivered within existing workforce budgets and approved Community Nursing Service funding lines.

11.2. Recruitment to Band 5 and Band 6 posts, alongside reduced agency spend, is expected to improve financial sustainability.

11.3. Any changes proposed following the establishment review will return to the Board with financial detail.

12. Risk, equality, and climate change implications

12.1. Operational risks relate to workforce stability, leadership continuity, and recruitment, which are mitigated by the actions described in Section 4.

12.2. There are no climate change implications.

12.3. Equality and island communities impact assessments will be completed as part of the Community Nursing Service establishment review later in 2026.

13. Direction required

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

NHS Orkney.	No.
Orkney Islands Council.	No.

14. Escalation required

Please indicate if this report requires escalated to:

NHS Orkney.	Yes.
Orkney Islands Council.	No.

15. Authors and contact information

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