



**Sally Shaw (Chief Officer)**  
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Agenda Item: 3

## **Orkney Integration Joint Board**

Wednesday, 28 November 2018, 09:30.

Council Chamber, Council Offices, School Place, Kirkwall.

### **Minute**

#### **Present**

##### **Voting Members:**

- Davie Campbell, NHS Orkney.
- David Drever, NHS Orkney.
- Issy Grieve, NHS Orkney.
- Councillor Rachael A King, Orkney Islands Council.
- Councillor John T Richards, Orkney Islands Council.
- Councillor Stephen Sankey, Orkney Islands Council.

##### **Non-Voting Members:**

##### **Professional Advisers:**

- Dr Kirsty Cole, Registered GP, NHS Orkney.
- David McArthur, Registered Nurse, NHS Orkney.
- Pat Robinson, Chief Finance Officer.
- Sally Shaw, Chief Officer.
- Dr Louise Wilson, Registered Medical Practitioner not a GP, NHS Orkney (via teleconference).

##### **Stakeholder Members:**

- Gail Anderson, Third Sector Representative.
- Sandra Deans, Carer Representative.
- Fiona MacKellar, Staff Representative, NHS Orkney.

#### **Clerk**

- Hazel Flett, Senior Committees Officer, Orkney Islands Council.

## **In Attendance**

- Maureen Firth, Head of Primary Care Services, Orkney Health and Care.
- Andrew Groundwater, Head of HR and Performance, Orkney Islands Council (for Items 1 to 15).
- James Henry, Principal Social Worker (Children's Services), Orkney Health and Care.
- Katharine McKerrell, Solicitor, Orkney Islands Council.

## **Observing**

- Wilfred Weir, Executive Director of Education, Leisure and Housing, Orkney Islands Council (for Items 1 to 10).

## **Chair**

- David Drever, NHS Orkney.

## **1. Apologies**

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

- Janice Annal, Service User Representative.
- Ashley Catto, Human Resources Manager, NHS Grampian.
- Sally George, Staff Representative, Orkney Islands Council.
- Scott Hunter, Chief Social Work Officer, Orkney Islands Council.
- Danny Oliver, Substitute Staff Representative, Orkney Islands Council.
- Maureen Swannie, Interim Head of Children's Health Services and Service Manager, Children's Services, Orkney Health and Care.
- Frances Troup, Head of Housing, Homelessness and Schoolcare Accommodation Services, Orkney Islands Council.

## **2. Declarations of Interest**

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

## **3. Minute of Previous Meeting**

There had been previously circulated the draft Minute of the Meeting of the Integration Joint Board held on 3 October 2018.

Fiona MacKellar referred to the stress survey at the top of page 8 and confirmed that the survey related to NHS Orkney staff only.

Dr Kirsty Cole referred to membership of the Remote and Rural Sub-group on page 14 and confirmed that the Orkney representative was Dr Tony Wilkinson and not Dr Charlie Siderfin.

Subject to the points noted above, the minute was **approved** as a true record, on the motion of Councillor Rachael King, seconded by Davie Campbell.

## 4. Action Log

There had been previously circulated an Action Log which monitored progress against actions due and for the Board to consider corrective action where required.

Sally Shaw referred to action 14 and confirmed that consideration would be given as to how often the Primary Care Improvement Plan would be presented to the Board, given that it was a continually developing document.

With regard to action 19, Sally Shaw confirmed that, following OHAC being accepted as a pathfinder, Lynda Bradford and herself would be meeting with representatives from the Scottish Government in early December.

Pat Robinson referred to action 23, allocation breakdown, and confirmed that she was still awaiting information from one partner.

Sally Shaw advised that, in regard to action 24, Island Proofing, on further investigation, there was no back-up evidence in relation to self-directed support to suggest that it was having a negative effect in an island context.

Andrew Groundwater gave a progress update in relation to actions 27 and 28, relating to workforce planning, and advised that further detail was provided in the unapproved Minute of the Meeting of the Joint Staff Forum later on the agenda. Various actions had been agreed, with the staff side requesting a development session. The management side was collating information from various colleagues. No date had yet been identified for the development session, but it was likely to be January 2019. Although a draft workforce plan was due to be submitted to the meeting of the Board in March 2019, this timescale was now tight, due to the request for a development session and the various other groups which required to review the draft workforce plan. Regardless, a written report would be submitted to the Board meeting in March 2019. Fiona MacKellar advised that the date for the development session in January 2019 should be fixed as soon as possible, to give sufficient time for representatives and stewards who held clinics to manage their diaries.

David Drever referred to action 19 and noted the work of Sally Shaw to achieve the pathfinder status and the potentially exciting initiative. Sally Shaw advised that this was a new department within the Scottish Government looking at tech-enabled care, including infrastructure support. There were many reasons for not taking part, however, the question was turned around and it was suggested that a remote and rural area should be tested, as tech-enabled care might not be the right solution in every case. Sally Shaw had also discussed with Gail Anderson regarding the potential for using Facetime as one method of reducing social isolation. This could also be a potential solution to avoid unnecessary travel from the islands to the mainland for people accessing services.

Councillor Stephen Sankey referred to action 25, whereby at the previous meeting the Board had received, but not approved, the budget for the current financial year. Referring to item 10 on the agenda for today's meeting, Councillor Sankey noted that the service was currently projecting a deficit in the region of £1 million, as well as £1 million on the set aside budget, and queried whether the Chief Officer was receiving any pressure from the Scottish Government to have a formally approved budget. Sally Shaw advised that the Scottish Government had indicated they would be "disappointed" if the Board could not approve its budget.

The Board noted the status of actions contained in the Action Log.

## **5. Audit Committee**

There had been previously circulated the unapproved Minute of the Meeting of the Audit Committee held on 26 September 2018, to enable the Board to seek assurance on performance.

Councillor Stephen Sankey, Chair of the Audit Committee, referred to External Audit's recommendations regarding the lack of medium to long term financial planning and treatment of the previous year's overspend. Medium to long term financial planning was currently being addressed and Councillor Sankey confirmed that he had today e-mailed both Chief Executives and the Chief Officer regarding treatment of the previous year's overspends.

The Board noted the unapproved Minute of the Meeting of the Audit Committee held on 26 September 2018 and took assurance.

## **6. Clinical and Care Governance Committee**

There had been previously circulated the unapproved Minute of the Meeting of the Clinical and Care Governance Committee held on 10 October 2018, to enable the Board to seek assurance on performance.

Issy Grieve confirmed that, although Chair of the Clinical and Care Governance Committee, she did not chair this meeting.

The Board noted the unapproved Minute of the Meeting of the Clinical and Care Governance Committee held on 10 October 2018 and took assurance.

## **7. Joint Staff Forum**

There had been previously circulated the unapproved Minute of the Meeting of the Joint Staff Forum held on 23 October 2018, to enable the Board to seek assurance on performance.

Fiona MacKellar gave a short summary of the main points discussed, including workforce planning and use of the iMatter survey for Council staff.

The Board noted the unapproved Minute of the Meeting of the Joint Staff Forum held on 23 October 2018 and took assurance.

Dr Louise Wilson joined the meeting at this point via teleconference.

## **8. Chief Officer Groups**

The Chief Officer Groups of the Adult Protection Committee and the Child Protection Committee had met on 7 November 2018.

Sally Shaw apologised for the lack of a written report and agreed to issue a members' briefing on the main points of discussion on Scott Hunter's return to work following leave. However, to provide assurance, Sally Shaw advised she was not aware of any significant issues.

Fiona MacKellar left the meeting at this point.

## **9. Strategic Planning Group**

There had been previously circulated the unapproved Minute of the Meeting of the Strategic Planning Group held on 20 November 2018, to enable the Board to seek assurance on performance.

Councillor Rachael King, as Chair of the Strategic Planning Group, presented the unapproved minutes and highlighted that the overspend referred to in Item 4, Finance update, should be £944,000.

Sally Shaw referred to the different projects and governance and suggested that, with a membership of 34, the Strategic Planning Group might not be the optimum size to conduct business. It was therefore proposed to establish three programme boards for the following projects:

- Tech Enabled Care.
- Community Led Support.
- Strategic Commissioning.

Above that, an executive group would oversee progress. Accordingly, the SCP Authors' Group had been put in abeyance as the projects would shape the Strategic Commissioning Plan. Pat Robinson was currently working on a draft medium term financial plan, which would sit below the Strategic Commissioning Plan.

Regarding the timescale for production of the new Strategic Commissioning Plan, a draft framework would be considered by the Strategic Planning Group on 8 January 2019, before submission to the various groups, with a view to going live from 1 April 2019.

Sally Shaw then provided further information regarding community led support and the phrase "front door", which originated in the Borders and referred to rural communities and where they could access information – rather than traditional meeting places, an example was a group meeting up regularly in Wetherspoons. The suggestion for a local project was a "peedie blether".

The Board noted the unapproved Minute of the Meeting of the Strategic Planning Group held on 20 November 2018 and took assurance.

Fiona MacKellar rejoined the meeting during discussion of this item.

## **10. Financial Monitoring**

### **Revenue Expenditure Monitoring Statement to 30 September 2018**

There had been previously circulated a report setting out the financial position of Orkney Health and Care as at 30 September 2018, for scrutiny.

Pat Robinson advised that, as at 30 September 2018, the financial position was indicating a budget underspend of £161,000. Although the base budget included a 3% pay increase for Council employees, this had not yet been agreed. The estimated cost of the backpay, from 1 April to 30 September 2018, was £208,700 which, if paid, would change the current underspend position to an overspend of £47,700.

Regarding the table on page 3, the line indicating Integration Funding (£451,000) related to funding received by NHS Orkney in relation to integration functions and should be included in one of the service line budgets. The main overspending areas remained and a meeting would be held shortly to further discuss the set aside budget. The Recovery Plan, attached as Annex 1, included unidentified savings of £1.026 million.

Councillor Rachael King referred to the unbudgeted staffing costs within Primary Care and queried what those consisted of. Maureen Firth confirmed that these related to GP practice cover costs, such as golden hellos, sickness cover and maternity cover. These costs were only known when the GP practices submitted their claims. Pat Robinson advised that additional funding of £342,000 had been received in respect of cost pressures within primary care services and, although currently showing an underspend position, this additional funding could also be used to reduce other overspending budget areas.

Councillor Stephen Sankey referred to the Recovery Plan, which failed to address the medium to long term, with no immediate answer on how to address the projected overspend outturn position. As Chair of the Audit Committee, this made him nervous, and he suggested that it could only be solved once the Scottish Government recognised that health and social care was inadequately resourced. Sally Shaw concurred, stating that under-resourced was different from overspending. Budget areas could fluctuate; however a needs-led service was trying to be met with a finite budget.

Councillor John Richards referred to the introduction of charges for services within the Recovery Plan and whether these had been applied. Pat Robinson advised that, although the increased charges in relation to frozen meals had been applied, new charges in respect of telecare and day care services had not yet been implemented, therefore additional resource would be required from the Council in the interim. Sally Shaw advised that this matter had been delayed due to the requirement to undertake consultation.

The Board noted:

**10.1.** The revenue expenditure monitoring report.

**10.2.** The financial position of Orkney Health and Care, as at 30 September 2018, indicating a current underspend of £161,000.

**10.3.** The forecast overspend position as at 31 March 2019, of £957,000, based on current spending patterns.

The Board **approved**:

**10.4.** The Recovery Plan, attached as Annex 1 to the report circulated.

The Board **agreed**:

**10.5.** To escalate this matter to both NHS Orkney and Orkney Islands Council.

## **11. Performance Monitoring**

There had been previously circulated a report which set out performance of services, commissioned by the Integration Joint Board, for the period 1 April to 30 September 2018, for scrutiny.

Sally Shaw highlighted indicators within the Strategic Commissioning Plan, attached as Appendix 1 to the report, showing as Red, as detailed in section 5 of the covering report. With regard to Appendix 2, Sally Shaw advised that further work was required in this respect, as, without good data, improvement could not be progressed. She was currently seeking advice from colleagues at Robert Gordon's University with a view to establishing baseline evaluative data on which performance would then be rated.

The Board noted the performance, as detailed in Appendices 1 and 2 to the report circulated.

## **12. Budget Setting Process**

There had been previously circulated a report setting out the budget setting processes of NHS Orkney and Orkney Islands Council, for information.

Pat Robinson advised that the processes for budget setting were challenging, with the NHS trialling a medium term framework with a three year budget planning cycle, although this was not so clear for social care within the Council, which operated on a one year budgeting cycle. However, it had been acknowledged that baseline budgets be revisited, as "overspends" were the actual cost of the services, being needs-based and statutorily required, regardless of the budget situation. The budget timelines for both organisations were set out in section 6.

Fiona McKellar referred to section 5.3 of the covering report and queried what was meant by "flexible staff resources in all areas of service delivery". Sally Shaw advised that this did not relate to terms and conditions, but working patterns and staff working in a more generalist manner, but did not mean a social worker being asked to take on nursing duties, taking an extreme example.

Fiona McKellar advised that any change to working patterns would require staff involvement. David McArthur confirmed that there would be no arbitrary change. What was being considered was transformational change, with the staff side being heavily involved and driven by them, given that they understood working practices and patterns best. Fiona McKellar thanked David McArthur for the assurance given.

The Board noted:

**12.1.** That the budget for financial year 2018/19 was received but not approved, due to unrealistic savings targets and continued significant budget pressures to meet statutory need.

**12.2.** The budget timeline for the partners as illustrated within section 6 of the report circulated.

**12.3.** That, based on the timescales provided by the partner bodies, the Integration Joint Board would be presented with the 2019/20 budget for approval on 27 March 2019.

### **13. Financial Regulations**

There had been previously circulated a report presenting revised Financial Regulations, for consideration and approval.

Pat Robinson advised that, although the Financial Regulations were still fit for purpose and no major review was required, an anomaly had been discovered between the Financial Regulations and the terms of reference for the Audit Committee. It was therefore proposed to amend the Financial Regulations to bring them into line with the approved delegation. If the amendment was approved, the proposed timeline for approval of the 2018/19 financial statements was set out in section 5 of the report circulated.

As Chair of the Audit Committee, Councillor Stephen Sankey advised that he was content with the proposals.

The Board noted:

**13.1.** That the Financial Regulations, approved on 21 March 2016, had been reviewed and, although no major amendments were proposed, an anomaly with the Terms of the Reference of the Audit Committee had been highlighted.

**13.2.** The proposed amendments to the Financial Regulations, as detailed in section 4.6 of the report circulated, in order to address the anomaly with the Terms of the Reference of the Audit Committee.

The Board **approved**:

**13.3.** The revised Financial Regulations, attached as Appendix 1 to the report circulated.

The Board **agreed**:

**13.4.** To escalate this matter to both NHS Orkney and Orkney Islands Council.

### **14. Extraordinary Packages of Care**

There had been previously circulated a report setting out revised governance and processes attached to high cost packages of care, for information.

Sally Shaw advised that, as a result of a recommendation from an Internal Audit of governance processes surrounding extraordinary packages of care, a revised governance process and procedure note had been drafted. The document sought to address the audit recommendations and clarified the various roles, including the Chief Social Work Officer, the Chief Finance Officer and the Head of Finance, Orkney Islands Council, to ensure best value principles were adhered to. It was further proposed to submit an annual report in respect of high cost packages of care to appropriate committees of Orkney Islands Council as well as to the Integration Joint Board.

As Chair of the Council's Monitoring and Audit Committee, Councillor John Richards advised that the audit was part of the Council's annual plan, as there had been concerns regarding governance and, in particular, a lack of reporting back to elected members on whether the high cost packages of care delivered value for money.



Although the process was largely effective, the audit had picked up some deficiencies which were now addressed by the proposed governance process and procedure note.

Dr Louise Wilson queried the role of the Clinical and Care Governance Committee, particularly in relation to the annual report. Sally Shaw confirmed that, although this was “social care” funding, the Clinical and Care Governance Committee had a dual purpose and agreed to raise this matter with Scott Hunter.

The Board noted:

**14.1.** That, on 27 September 2018, the Council’s Monitoring and Audit Committee considered an internal audit on the governance processes surrounding out of Orkney placements which noted that the processes and procedures in relation to out of Orkney packages of care provided reasonable assurance that they were adequately controlled and managed.

**14.2.** That, while the audit identified areas of good practice, it also identified governance issues surrounding Extraordinary Packages of Care.

**14.3.** The proposed governance process and procedure in relation to Extraordinary Packages of Care, attached as Appendix 1 to the report circulated, which had been developed in order to address the audit action point referred to at paragraph 14.2 above.

## **15. Corporate Parenting**

There had been previously circulated a report setting out current and future plans relating to corporate parenting responsibilities, for information.

James Henry advised that corporate parenting was no longer an individual or team responsibility but a shared responsibility across the community. He brought members’ attention to the statistical outcomes for care experienced children and young people on page 4 of NHS Orkney’s Corporate Parenting Action Plan and, although a sobering note, should be used as motivation and for corporate parents to use their power and influence.

Dr Kirsty Cole referred to the table on page 6 of NHS Orkney’s Corporate Parenting Action Plan and, in particular, reference to health visitors and school nurses as the named lead for various actions and queried what happened children not in education. James Henry advised that the GIRFEC approach was used and systems were in place to identify such children. He was reasonably confident there were none locally, although, if a child had never been in education, the local authority had no responsibility to that child, only if the child had been removed from education. It was agreed that this required to be referenced.

Councillor Stephen Sankey, although welcoming the report, queried whether reporting through the Orkney Partnership provided sufficient scrutiny. James Henry advised that he would seek clarity from Scott Hunter on proposed reporting and governance routes, as corporate parenting was a shared responsibility, particularly for senior officers and members to challenge and scrutinise performance.

Issy Grieve referred to the Scottish national statistics referred to earlier and queried whether local statistics were similar. James Henry advised that a briefing was issued quarterly and, in future, national statistics would be compared with local statistics. He did not believe they were significantly different, however meaningful performance measures were required.

The Board noted:

**15.1.** Progress in relation to meeting statutory Corporate Parenting duties, as outlined in section 4.4 of the report circulated.

**15.2.** The NHS Orkney Corporate Parenting Plan, attached as Appendix 1 to the report circulated, which contained many actions that fell under the responsibility of services within Orkney Health and Care.

**15.3.** That, in response to a request from Scottish Government on how health boards and local authorities were meeting their corporate parenting responsibilities, NHS Orkney and Orkney Islands Council clarified the ambition to have one overarching plan for Orkney.

**15.4.** The proposal to establish a Corporate Parenting Board, comprising elected members and senior officers from across the community planning partnership, which would assume responsibility for the following:

- Ensuring scrutiny of performance in matters affecting looked after children and care leavers.
- Improving outcomes and responding to the views of looked after children and care leavers in matters affecting them.
- Production of an annual report for the Orkney Partnership Board.

The Board **agreed**:

**15.5.** To support establishment of a Corporate Parenting Board, reporting through the Orkney Partnership.

David McArthur left the meeting during discussion of this item and rejoined the meeting at this point.

## **16. Carers' Strategy**

There had been previously circulated a report presenting the draft Carers' Strategy and Action Plan for consideration and approval to proceed to stakeholder consultation.

Sally Shaw advised that, although fairly late in the timeframe, mainly due to capacity, the draft strategy was submitted for approval for consultation. This was a sector which social care could not function without. Page 6 of the draft strategy set out new duties and powers from the Carers (Scotland) Act 2016. With regard to the carer assessment, there was misunderstanding with the terminology, in that many carers thought they were being assessed on their ability to be a carer, whereas it was actually a plan on how they could be supported in their role as a carer.

Sandra Deans wholeheartedly supported development of the strategy. She advised that lots of things required to be addressed and felt that the strategy was quite generic in format. She also queried where the funding to develop and progress the strategy would come from, given that the allocation to Orkney, although resulting in a baseline increase of £289,000, was not specific in how it was allocated.

Councillor Stephen Sankey went further and queried whether there were any unintended consequences of the new legislation and how the service intended to plan for any unknown liabilities.

Sally Shaw advised it was difficult to answer, although a service pressure bid had been made to the budget setting process. The Act made clear that the Council could not charge for services, therefore no charge was made for respite care for the carer. An important thread of the Act was to plan with the carers and to come up with innovative solutions.

Councillor John Richards suggested that this would not be an easy group to reach and queried how the consultation process would be undertaken – would it be through public meetings or a questionnaire? Sandra Deans also referred to the Carers' Strategy Group and what stage it was at.

Sally Shaw advised that she was waiting for the strategy to be approved for public consultation and would then draw up terms of reference for the Carers' Strategy Group, with a proposed membership.

The Board **agreed** that the draft Carers' Strategy 2019 to 2022 and associated Action Plan, as circulated, be approved for stakeholder consultation.

Councillor Stephen Sankey left the meeting at this point.

## **17. NHS in Scotland**

There had been previously circulated a report presenting Audit Scotland's report, published in October 2018, entitled NHS in Scotland 2018, for consideration and scrutiny.

Pat Robinson presented the report, advising that, locally, 50% of the health budget was transferred to the Board. She highlighted the main points arising from the national audit report of particular interest to the Board.

David Drever referred to section 8 of the covering report whereby the Cabinet Secretary had announced in October 2018 that all territorial boards' outstanding loans would be written off at the end of the current financial year and queried the situation locally. David McArthur confirmed that NHS Orkney had no outstanding loans and Pat Robinson advised that the report was only in relation to health spending, not local authority spend.

Councillor Rachael King referred to section 4.5 of the covering report and the significant impact locums had on the budget and whether anything could be done innovatively. David McArthur advised that a robust process was followed before a locum was appointed. Further, should NHS Orkney continue with a consultant led service, locum cover would continue. However, once locums were appointed, every effort was made to entice them to stay in Orkney and commit to a permanent post.

Interestingly, younger non-consultant doctors were wanting to come back to Orkney to work.

The Board noted:

**17.1.** That, in October 2018, Audit Scotland published NHS in Scotland 2018, a national audit report setting out why immediate action was required and identifying the financial and performance position of the NHS in Scotland in 2017/18.

**17.2.** The recommendations arising from the national audit report relating to integration authorities as detailed in section 6.1 of the report circulated.

The Board **endorsed**:

**17.3.** The Chief Officer and the Chief Finance Officer working with NHS Orkney colleagues to ensure there was an enhanced detailed understanding of both current and future pressures in respect of funding and expenditure relating to services delegated to the integration authority.

## **18. Mental Health**

There had been previously circulated a report setting out how a framework, to underpin development of mental health services in Orkney, will be developed, for consideration and approval.

Sally Shaw advised that the report sought approval to progress the next steps in developing mental health services across Orkney. The report had already been submitted to the Board of NHS Orkney on 25 October 2018 and subsequently approved.

Councillor Rachael King welcomed the report as she had been pushing for some time for all mental health issues to be co-ordinated. The report set out a good starting point, by drawing all the various strands of work together, but momentum required to be maintained in order to achieve something special for the community.

With regard to a timeline, Sally Shaw anticipated a draft strategy by summer 2019.

The Board **endorsed** the proposed “next steps” as follows:

**18.1.** To write a full project plan outlining:

- Process for engaging with the key stakeholders identified in the previous consultation. This will include those with lived experience, from a variety of setting/ service areas and should also include family members and carers including young carers.
- Development of an overarching ‘blue print’ which should be aspirational and will be recognised as generational in approach.
- Aligned to the national strategy, development of a local implementation strategy which considers the Orkney context, priorities and current resources.

**18.2.** The ‘blue print’ and the local strategy will provide a series of linked strategies that will sit under the developing Orkney Strategic Plan.

**18.3.** For all locally based community services, the strategy will be fed into the Strategic Commissioning Implementation Plan and help inform both the medium and long term financial strategies.

**18.4.** The Service Level Agreement with NHS Grampian for outwith Orkney, inpatient services to be reviewed, as stated in terms of compliance, quality and financial efficiency.

**18.5.** There are some specialist bed-based services which NHS Orkney purchase. These also need to be reviewed using the same approach as those services purchased from NHS Grampian.

## **19. Winter Plan**

There had been previously circulated a report presenting the NHS Orkney and Orkney Health and Social Care Partnership Winter Plan 2018/19, for consideration and approval.

David McArthur advised that all health boards were expected to prepare a winter plan, in consultation and based on national guidance. The winter plan as presented set out conditions to provide resilience. Being a remote and rural organisation, there was no back-up or critical mass from a larger, neighbouring board. The winter plan had been submitted in draft to the Scottish Government, with feedback suggesting greater clarity was required on planning. A sum of £45,000 had been allocated towards winter planning and notionally allocated 50/50 between primary and community care services. "Hot spots" locally included "mad Friday", the Ba', Christmas Day and Boxing Day, with the Christmas Day 2017 Ba' having a significant impact. NHS Orkney had also significantly increased flu' vaccinations. This additional information and use of allocation, together with business continuity, had subsequently been approved by the Scottish Government.

Dr Kirsty Cole referred to the additional funding and queried the 50/50 split. David McArthur confirmed this was a notional split and funding would be targeted where required.

Councillor John Richards referred to page 18 of the Winter Plan whereby reference was made to 30% of families in Orkney being in fuel poverty. The latest housing survey suggested this figure was 60%+ and suggested the report writer contact Luke Fraser in the Council's Housing service to confirm and, if necessary, amend the figures.

Councillor Rachael King was heartened to see the co-operation from independent contractors and their willingness to support out of hours cover during the holiday period. With regard to the staff vaccination scheme, she queried whether this was all staff. David Drever advised that the matter of social care staff being included had been raised at the Board of NHS Orkney.

David Drever concluded by stating the winter plan was comprehensive, predictive and had taken all activities into account.

The Board **approved** the Winter Plan 2018/19, as circulated.

## **20. Date and Time of Next Meeting**

It was agreed that the next meeting be held on Wednesday, 27 March 2019 in the Council Chamber, Council Offices, Kirkwall.

## **21. Conclusion of Meeting**

There being no further business, the Chair declared the meeting concluded at 11:40.