



Stephen Brown (Chief Officer)

Orkney Health and Care

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Agenda Item:

Orkney Integration Joint Board

Wednesday, 19 June 2024, 09:30.

Council Chamber, Council Offices, Kirkwall.

Minute

Present

Voting Members:

Orkney Islands Council:

Councillors P Lindsay Hall, Rachael A King and Jean E Stevenson.

NHS Orkney:

Rona Gold (via Microsoft Teams), Issy Grieve and Joanna Kenny (via Microsoft Teams).

Non-Voting Members:

Professional Advisers:

- Dr Kirsty Cole, General Practitioner representative, appointed by NHS Orkney.
- Darren Morrow, Chief Social Work Officer of the constituent local authority, Orkney Islands Council.
- Sam Thomas, Nurse representative, employed by NHS Orkney (via Microsoft Teams).
- Taiye Sanwo, Interim Section 95 Officer of the Integration Joint Board.
- Dr Louise Wilson, Secondary Medical Care Practitioner representative, employed by NHS Orkney (via Microsoft Teams).

Stakeholder Members:

- Morven Brooks, Third Sector Representative.
- Janice Annal, Service User Representative (via Microsoft Teams).
- Jim Love, Carer Representative (via Microsoft Teams).

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.
- Shaun Hourston-Wells, Acting Strategic Planning Lead.

Orkney Islands Council:

- James Wylie, Corporate Director for Education, Leisure and Housing.
- Andrew Groundwater, Head of Human Resources and Organisational Development.
- Erik Knight, Head of Finance (for Items 1 to 9).
- Veer Bansal, Solicitor.

NHS Orkney:

- Dr Anna Lamont, Medical Director (via Microsoft Teams) (for Items 2 to 10).

Not Present

- Ryan McLaughlin, Staff-side Representative, NHS Orkney.

Chair

- Councillor Rachael A King, Orkney Islands 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 at least 12 months.

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

- Non-voting Members:
 - Stephen Brown, Chief Officer of the Integration Joint Board.
 - Frances Troup, Head of Community Learning, Leisure and Housing, Orkney Islands Council.
 - Danny Oliver, Staff-side Representative, Orkney Islands Council.
- Orkney Health and Social Care Partnership:
 - John Daniels, Head of Primary Care Services.
 - Morven Gemmill, Associate Director of Allied Health Professions.

2. Appointments

There had been previously circulated a report regarding various appointments to the Integration Joint Board, for consideration and approval.

The Service Manager (Governance) advised that the Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Order 2014, read in conjunction with the Orkney Integration Scheme, regulated membership of the Board, as well as the term of appointment of the various members. Section 4 of the report detailed the various appointments and dates for re-appointments, together with the relevant appointing body. Following a request from Councillor Lindsay Hall at the previous meeting, section 4.2 of the report detailed the appointments of proxy members.

The Board thereafter noted:

2.1. That, in terms of the Orkney Integration Scheme, all appointments, with the exception of the Chief Officer, the Chief Finance Officer of the Board and the Chief Social Work Officer, who were members of the Board by virtue of the Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Order 2014 and the post they held, were for a period of two years.

2.2. That, in addition, individual Board appointments were made as required when a position became vacant for any reason, and that any member of the Board could be re-appointed for a further term of office.

2.3. That, on 24 April 2024, NHS Orkney appointed the following Non-Executive Director as a Voting Member:

- Rona Gold.

2.4. That, on 14 May 2024, the Council appointed the following elected members as Voting Members:

- Councillor Rachael King.
- Councillor Jean Stevenson.
- Councillor Lindsay Hall.

2.5. That, on 14 May 2024, the Council appointed Councillor Rachael King as Chair of the Board for the period to May 2025, and then Vice Chair of the Board for the period May 2025 to May 2026.

2.6. That, on 14 May 2024, the Council appointed the following elected members as proxy members:

- Councillor Ivan Taylor.
- Councillor Mellissa Thomson.
- Councillor Heather Woodbridge.

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 24 April 2024.

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

Jim Love joined the meeting (via Microsoft Teams) at this point.

5. Matters Arising

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

In respect of matters arising from the previous meeting on 24 April 2024, Lynda Bradford provided the following updates:

- Action 2 – Scrutiny Committees – The meetings of the Strategic Planning Group and the Joint Staff Forum held on 20 May and 6 June 2024 respectively, were both inquorate.
- Action 4 – Daisy Villa Practice – A letter was issued on 26 April 2024 to Drs Catriona and Simon Kemp thanking them for their service.
- Action 5 – Revised Job Description template – Considerable work had been undertaken, and the template was expected to be shared that week.

Regarding outstanding actions from previous Board meetings, Lynda Bradford provided the following updates:

- Action 2 – Risk Appetite – No immediate update, work would progress following a presentation.
- Action 4 – Joint Staff Forum – As the meeting was inquorate, the action would be carried forward to a future meeting.
- Action 6 – Proposed Mental Health Model of Care – Work was ongoing to identify a budget for this work, which had become increasingly pressing.
- Action 7 – Additional Investment – As the Chief Officer was unable to attend the meeting, no update was available.
- Action 10 – Unpaid Carers Strategy – Comprehensive update provided, with officers present to answer any further questions.
- Action 11 – Financial Recovery Plan – On agenda as part of the budget paper.

Dr Kirsty Cole sought confirmation on Action 5 – Public Health Annual Report – regarding whether the Board would be content to wait a further 12 months for comparative data on the transfer of vaccination services. Dr Louise Wilson stated that the annual report contained three years of data but that comparative data going back further could be provided, either after the meeting or to the next meeting of the Board. Dr Kirsty Cole highlighted the importance of comparative data being provided to the Board due to the significant change in service delivery. Dr Louise Wilson confirmed that uptake data could be provided however, the vaccination team sat within Stephen Brown's remit. Lynda Bradford confirmed that she would speak to the new Head of Primary Care Services, with a view to further information being made available in line with the next meeting of the Board.

Councillor Rachael King noted the ongoing discussions around Action 9 – Climate Change Duties Reporting. Shaun Hourston-Wells confirmed there were no further updates.

Issy Grieve noted the inquorate meetings and encouraged an increase in attendance. Councillor Rachael King agreed, adding that actions from those meetings could not be carried forward if they were inquorate.

The Board scrutinised the Log and took assurance.

6. Joint Clinical and Care Governance Committee

There had been previously circulated the unapproved Minute of the Meeting of the Joint Clinical and Care Governance Committee held on 3 April 2024, together with the Chair's Assurance Report, to enable the Board to seek assurance.

Rona Gold highlighted the following matters:

- Patient Experience Improvement Plan – Approved integration of the Care Opinion into patient experience reporting.
- Mental Health Assurance Report – Discussion around the information presented, including the impact on staff and patients regarding transfer beds, and an increase in requests for diagnosis of ADHD and ASD.
- Work was ongoing to address the volume of reports coming to the Committee, as members wanted to ensure they could adequately scrutinise reports.
- The proposed new Medical Director report capturing all relevant assurance items across their portfolio.

Councillor Rachael King sought assurance that any solutions related to the mental health assurance report would return to the Joint Clinical and Care Governance Committee, and therefore the Integration Joint Board, which was confirmed by Rona Gold.

Councillor Rachael King queried whether the data referred to in section C16 of the Minute would be split to show information for the Mainland and ferry linked islands. Dr Anna Lamont responded that work was underway to identify how to present the data, which would be separated into the various areas. There had been reports previously not available to the IJB, and she planned to share extracts through the Joint Clinical and Care Governance Committee.

The Board scrutinised the Minute 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 14 March 2024, to enable to Board to seek assurance.

As none of the three co-Chairs of the Joint Staff Forum were able to attend, Lynda Bradford highlighted some of the main points of discussion around workforce and service pressures, including recent appointments, including Darren Morrow and John Daniels. The recruitment incentives programme had gone live. Challenges with community nursing recruitment continued. Updates had also been provided on finance and the National Care Service.

Lynda Bradford responded to a question from Issy Grieve, stating that the approach to distributing the iMatter survey to social care staff was less integrated than previously. This year integrated teams were included, but those who sat in Council roles only were not. She did not have the detail of the rationale available, so agreed to bring it back. Joanna Kenny added that the decision was taken to enable NHS Orkney to focus on their improvement for the year, so the joint teams could still action together. Their individual input was not sought at the time, but it would be an option going forward. Councillor Rachael King recognised the challenges around data, but felt it was important as an integrated team to work towards integrated improvements.

Councillor Lindsay Hall queried whether discussions were taking place about community nursing in the ferry linked isles. Lynda Bradford advised that nursing on the isles sat with the Head of Primary Care Services but believed the shortages had not been as acute as on the Mainland. Councillor Lindsay Hall noted that community nursing would be different on the isles due to the population and geographical differences, but still believed there were challenges which should be discussed. Lynda Bradford agreed to get feedback on the issue. Sam Thomas added that conversations had been taking place, including attempts to recruit into vacant positions and looking at the model of care.

Councillor Rachael King reiterated the importance of ensuring meetings were quorate, given that matters agreed by the Joint Staff Form had not been able to be taken forward.

The Board scrutinised the Minute and took assurance.

8. Revenue Expenditure Outturn

There had been previously circulated a report presenting the revenue expenditure outturn position for financial year 2023/24, for scrutiny.

Taiye Sanwo advised that the outturn position for 2023/24 remained draft, as the figures had not yet been audited, however the total combined overspend was £5.609 million. At the time of writing, NHS Orkney had not yet confirmed whether additional funding would be made available to cover that element of the overspend. Options for the overspend on Council services were set out in section 2.8 of the report, with the confirmed action being to provide additional resource which would be recovered in future years, should an underspend be achieved.

Section 4 of the report provided further details on the main areas of significant variance, including the following:

- Overspend of £1.028 million in the Children and Families services, mainly due to spend on agency staff and Outwith Orkney Placements for young people.
- Overspend of £2.264 million within Elderly services, again mainly due to continued reliance on agency staff due to recruitment issues and long-term sickness absence within residential care.
- Overspend of £817,000 in Disability services.
- Overspend of £554,000 within Care at Home service.

Taiye Sanwo continued by advising that the IJB could not rely on funding being received from the two partners at year end, so financial recovery plans needed to be considered.

Although the set aside budget had overspent, NHS Orkney had provided additional funding of £1.933 million to achieve a year end balanced position.

Annex 1 provided the detail of the IJB's reserves, indicating a balance as at 31 March 2024 of £2.718 million.

Councillor Lindsay Hall queried what level the additional resources, referred to in section 2.9 of the report, might be. Erik Knight responded that this related to resources required to fund the service, namely the shortfall of £3.9 million on commissioned services. These variances were known throughout the year, namely agency spend and Outwith Orkney placements. Options were set out in the Integrated Resources Advisory Group Financial Guidance, including a possible loan arrangement. However, that did not seem appropriate and therefore senior officers proposed that, if the IJB was able to deliver an underspend in the future, this should not be retained in reserves, but recovered by the Council. Erik Knight confirmed that additional resources had been made available to the IJB to ensure breakeven at the end of the financial year, and that the transaction would be shown in the statutory accounts for both organisations.

Rona Gold referred to the healthcare purchasing contracts detailed in the table at section 5.1, and sought further information as to why revised charges from other health boards would occur, when would the IJB know this would happen, and if information had previously been presented to the IJB on the topic.

The Board agreed that the public be excluded from the meeting in respect of discussions on the matter raised by Rona Gold, on the grounds that it involved the disclosure of exempt information as defined in paragraphs 3, 6 and 9 of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973 as amended.

Following discussion, it was agreed that colleagues within NHS Orkney should provide responses to the specific matters raised by Rona Gold in relation to service level agreements with other health boards, including potential risk relating to unplanned spend and how that received appropriate governance, which should be submitted to the Board in due course.

The Board then returned to public session.

Dr Louise Wilson advised that, while it was appropriate to focus on overspends, it was as important to consider underspends, and referred specifically to the Alcohol and Drugs Partnership, which could have a knock-on effect for other services given that the partnership delivered preventative services.

Lynda Bradford highlighted that some of the underspend was due to staff vacancies, which had subsequently resulted in a reduction in services and/or activity. The service was back on track with staffing, so it was not expected to be an issue going forward.

Issy Grieve requested that the Chief Officer have a conversation with the interim Director of Finance at NHS Orkney to discuss whether the £2.4 million savings target, set prior to the pandemic, was still relevant. Taiye Sanwo confirmed that the £2.4 million savings target was also included in the 2024/25 budget setting and agreed that the conversion should be had.

Councillor Rachael King sought clarity on section 2.3, that the overspend position from NHS Orkney commissioned services was £1.666 million and whether this would be the amount that would be carried forward into the next year or if it would remain as £2.4 million. Taiye Sanwo confirmed that it would remain as £2.4 million. The £1.666 million was the overspend position for NHS Orkney commissioned services for 2023/24, made up of over and under-spends on different services but the actual savings target set against the budget was £2.4 million. If £2.4 million had not been removed from the budget, then an estimated underspend of £734,000 would have been reported.

The Board noted:

8.1. The draft revenue expenditure outturn statement in respect of the Orkney Health and Social Care Partnership, excluding Set Aside, for financial year 2023/24, as detailed in section 4.1 of the report circulated.

8.2. That, for financial year 2023/24, the draft outturn position for the Integration Joint Board (IJB) was an overspend position of £5.609 million. The total approved budget was £67.612 million and the draft outturn spend was £73.221 million.

8.3. That the overspend position comprised:

- NHS Orkney (NHSO) commissioned services – £1.666 million.
- Orkney Islands Council (OIC) commissioned services – £3.943 million.

8.4. That the entirety of the NHSO overspend, £1.666 million, could be attributed to the £2.4 million savings target set prior to the pandemic, which, although not met, had been applied to the budget by NHSO.

8.5. That, at the time of writing the report, confirmation was still awaited from NHSO regarding approval of additional payment from the Board of NHSO to cover the overspend outlined above, namely £1.666 million.

8.6. The revenue expenditure outturn statement in respect of the Set Aside budget for financial year 2023/24, as detailed in section 5 of the report circulated, which indicated a year end balanced position.

8.7. That additional funding of £1.993 million was received via NHSO to achieve a year end balanced position for Set Aside services.

8.8. The options available to OIC, as stated in paragraph 4.3.1.4 of the Integrated Resources Advisory Group Finance Guidance, namely:

- Make additional one-off payments to the Integration Joint Board; or
- Provide additional resources to the Integration Joint Board which were then recovered in future years, subject to scrutiny of the reasons for the overspend and assurance that there was a plan in place to address that.

8.9. That the Council had agreed “subject to scrutiny of the reasons for the overspend and assurance that there is a plan in place to address the overspend, to provide additional resources to the IJB which are then recovered in future years where an underspend position is achieved”.

9. Budget for 2024/25

There had been previously circulated a report presenting the funding allocations from NHS Orkney and Orkney Islands Council for financial year 2024/25, for consideration and approval.

Taiye Sanwo advised that the report referred to the overspend from 2023/24, as well as confirmation that the allocation from NHS Orkney was reduced by £2.4 million, namely the savings target identified prior to the pandemic. For Orkney Islands Council commissioned services, there were reductions in employer pension contribution rates and the overall staff budget to reflect vacancy management, as well as indicative savings targets for the next three financial years. The total baseline budget for 2024/25 was set at £66.706 million, with confirmation received from both partners of their individual allocations.

In respect of NHS Orkney funding, key messages contained within the letter from the Director of Health and Social Finance, Digital and Governance, Scottish Government, attached as Annex 1 to the report circulated, were summarised in section 6.1. Despite the budget uplifts outlined in that letter, the indicative budget from NHS Orkney was based on a 0% uplift on the recurring budget, excluding Cash Limited Dental and Non-Cash Limited. Reserves carried forward from 31 March 2024 totalled £2.715 million, and were mainly earmarked for specific services.

Orkney Islands Council's budget uprating assumptions were detailed in section 6.2.2 of the report. Additional funding had been received through the finance settlement to deliver the payment of £12 per hour minimum pay settlement for adult social care workers in commissioned services via agreed contract uplifts. Ongoing use of agency and locum staff required to be addressed.

Section 9 outlined the individual elements of the budget for 2024/25 as follows:

- NHS Orkney – £29.639 million.
- Set Aside – £8.639 million.
- Orkney Islands Council – £28.698 million.

Significant risks remained given the outturn position for 2023/24, resulting in the need for rigorous monitoring, as well as reports being regularly brought to the Board.

On the motion of Councillor Rachael King, seconded by Issy Grieve, the Board agreed that the public be excluded from the meeting in respect of discussion of matters contained in Annex 6 of the report circulated, on the grounds that it involved the disclosure of exempt information as defined in paragraphs 3, 6 and 9 of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973 as amended.

Officers responded to various queries regarding the detailed content of Annex 6, which Erik Knight clarified was the draft Recovery Plan which had been submitted to, but not approved by, the Board, at an earlier meeting in 2024, and his understanding was that savings identified therein were not reflected in the 2024/25 budget setting process. Councillor Rachael King thanked Erik Knight for his helpful observation and requested that, when the Recovery Plan was resubmitted to the Board, representatives from the Finance teams of both Orkney Islands Council and NHS Orkney should be present, in addition to the Chief Finance Officer of the Board.

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.

The Board then returned to public session.

Issy Grieve thanked the Finance team for the comprehensive report, noting its significance given that the Strategic Plan was coming to an end, with the next iteration most likely requiring a different financial plan.

The Board noted:

9.1. That the draft outturn position for the IJB for 2023/24 was an overspend position of £5.609 million, namely total spend of £73.221 million against the approved budget of £67.612 million.

9.2. That the total overspend position comprised the following:

- NHSO commissioned services – £1.666 million.
- OIC commissioned services – £3.943 million.

9.3. That, although no additional recurring savings target had been set against the NHSO delegated service budgets for 2024/25, the IJB was expected to deliver, as a minimum, £2.4 million of the unachieved recurring savings for NHSO commissioned services over the next five years, which commenced in 2023/24 on its delegated budgets.

9.4. That, within services commissioned to OIC, savings in respect of a reduction in its employer's pension contribution rates (£335k) and a 1% reduction in staff budgets (£216k) to reflect vacancy management had been applied to the budget for 2024/25.

9.5. That, for OIC commissioned services, to assist in achieving balanced budgets for 2025/26, 2026/27 and 2027/28, indicative efficiency targets of £469k, £704k and £938k respectively had been set.

9.6. That, in addition to the budgetary targets set out above, the OIC commissioned services had also been tasked with taking affirmative action to return to operating within its approved revenue budget.

9.7. That a robust Financial Recovery Plan, based on the proposals outlined in Annex 6 to the report circulated, would be submitted to the Board on a regular basis as previously requested, in order to provide assurance that there were plans to reduce spending.

The Board **resolved:**

9.8. That the baseline budget for financial year 2024/25, amounting to £66.706 million, as detailed in Annexes 2 to 4 of the report circulated, be approved, noting that the increases were in line with Scottish Government requirements as explained in sections 6.1.2 and 6.2.3 of the report circulated.

9.9. That work must be undertaken with both partners with the aim of delivering savings in order to deliver a balanced outturn position.

Due to ongoing connectivity issues, Jim Love left the meeting during discussion of this item.

10. Annual Performance Report

There had been previously circulated a report presenting the Annual Performance Report for 2023/24, for consideration and approval.

Shaun Hourston-Wells referred to the statutory duty to produce the annual performance report and advised that, due to the non-publication of the results on many of the performance indicators by national providers until at least July 2024, as well as the unavailability of some financial information, it was not possible to provide a final version. To meet the legislative requirements to publish an annual performance report by the end of July, it was proposed that the report, as submitted, be approved for publication, noting that an updated version would be published when the outstanding information was available. Key performance highlights were summarised in section 4 of the report.

Councillor Rachael King thanked officers for the report and noted the frustrations regarding unavailability of some of the data. She was pleased with the theme of integration which ran throughout the report.

Councillor Lindsay Hall asked whether consideration of the mental health and wellbeing of staff was contained within Strategic Priority 4: Mental Health and Wellbeing. Lynda Bradford responded that there was no specific reference, although both NHS Orkney and Orkney Islands Council supported staff, including counselling services and sign posting to additional support. She agreed that it could be considered for inclusion in future reports. As the Chair of the Strategic Planning Group, Issy Grieve committed to staff mental health and wellbeing being included in the next iteration of the Strategic Plan. Councillor Rachael King noted that the Third Sector was an equally valuable partner, and their staff were as important. Darren Morrow advised that, within the Children and Families team, he was reviewing staff supervision to ensure sessions were at the frequency required, as it was an important way to monitor staff health and wellbeing within challenging roles. In addition, group supervision was being considered for high trauma cases, to allow for peer review and reflection, and could be widened out to include partners such as the Education service and the Third Sector. Morven Brookes encouraged clinical supervision for the Community Link Practitioners.

Issy Grieve focused on Priority Area 4 – Mental Health and Wellbeing – as she felt that some of the areas should have been marked as red in the RAG scale. Lynda Bradford confirmed that they should be marked red and it was agreed that the report be updated accordingly.

Councillor Jean Stevenson commented that it was heartening to see that the Community Link Practitioners covered so many GP practices and queried whether there was a need for more. Morven Brookes confirmed that they were currently in the process of reviewing the Isles Wellbeing project, given that the funding for that project ended next year. She advised that early discussions pointed towards the potential to look at Community Wellbeing Co-ordinators becoming Community Link Practitioners, thereby strengthening that role within the ferry linked isles.

Rona Gold echoed support on the integrated nature of the report. The innovative suggestions around adding features online, from text messaging for appointment reminders, being able to book appointments online and the use of apps were all positive features. She felt there had been good examples of work with vulnerable families and children. However, the report missed opportunities to discuss what was being done with people living with long term health conditions, particularly women on the isles. Shaun Hourston-Wells responded that her points could be included in future versions.

Issy Grieve queried why the number of days people spent in hospital when they were ready to be discharged had trebled (National Indicator 19). Lynda Bradford advised that, previously delayed discharge mostly related to challenges in finding care home beds, however the position now was more mixed. This included community care packages and powers not being in place, noting that guardianship agreements could take several months to complete. Sam Thomas added they were working closely across the whole system to improve the situation. Issy Grieve also noted that emergency readmissions (National Indicator 14) had halved over the same period, which she felt should be congratulated and acknowledged.

Dr Louise Wilson sought to understand the green RAG status at Priority Area 5 – Embed a new Neuro-developmental assessment pathway. Lynda Bradford agreed that it was too early for the milestone to be green. Councillor Rachael King confirmed that there may need to be a focused look at the RAG statuses within the report. Darren Morrow updated that he was actively involved in the pathway, and that a service level agreement had recently been agreed which would allocate time to paediatricians to the neuro-development pathway. Next steps had been identified.

Councillor Jean Stevenson raised the issue of lack of awareness of guardianship, which caused long delays in discharges or transfers. She felt the topic needed to be discussed with the public. Lynda Bradford agreed and advised that it was a topic that had recently been brought up with both Chief Executives. Councillor Rachael King also agreed that it was an important topic, and one she had raised at a national level. It was agreed to explore ways to communicate the matter and that an action be added to the Matters Arising Log. Lynda Bradford suggested a communications piece after the summer period.

Joanna Kenny referred back to the massive increase in delayed discharges, noting that it was not the fault of the people or agencies involved in the service, however there needed to be a way to tackle the source of the problem. Sam Thomas responded that it was a topic that needed dedicated focus, given that the situation would probably worsen over the years. There had been constraints in relation to staff recruitment. One issue to be addressed was preventing hospital admission in the first place. She discussed how partners were mapping out quick wins, which would be reported through the Joint Clinical and Care Governance Committee and the IJB in its own right. Councillor Rachael King commented that she was heartened by the whole system viewpoint. While there were pressures across the services, the journey for people requiring support was what should be important.

The Board noted:

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

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

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

The Board **resolved**:

10.4. That, subject to the RAG statuses being reviewed and amended, if necessary, the Annual Performance Report 2023/24 as circulated be approved for submission to Scottish Government, and provided to both NHS Orkney and Orkney Islands Council.

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

11. Children's Services Plan Annual Report 2023/24

There had been previously circulated a report presenting the Children's Services Plan Annual Report for 2023/24, for consideration and approval.

James Wylie introduced the report, providing legislative context in relation to children's services planning and reporting.

The plan contained four priority areas and six key performance indicators, identified from the Local Government Benchmarking Framework, against which performance was monitored in order to allow comparison of outcomes to the rest of Scotland. Four sub-groups had developed key priorities for children and young people. The progress report detailed a number of outcome measures, as well as action taken, or to be taken, to achieve those outcomes.

It was acknowledged that there was a need to improve the measurement of impacts against the priorities for children, young people and their families. The next meeting of the strategy group would look at merging plans and reports associated with children's services and child poverty issues with a view to streamlining bureaucracy, and freeing up time for staff to action the improvement agenda.

Councillor Lindsay Hall commented on wording around putting money in the pockets of families, in relation to poverty, and felt it would be better to focus on the offer of resources to families. James Wylie agreed to consider the wording.

Issy Grieve queried if there was anything the IJB could do in support of reducing the number of looked after children in Orkney. Darren Morrow responded that it was important to acknowledge that there had been a significant decrease in looked after children in Orkney. This needed to be considered alongside the number of children subject to child protection plans. There had been a significant amount of work within the Children and Families team over the previous 18 months in respect of developing rehabilitation home pathways. Earlier intervention and wrap around support for children and their families on a voluntary basis was preferable, rather than having to instigate statutory services.

Morven Brookes commented on the limited mention of Third Sector organisations that had been involved in delivering support, and provided some examples. James Wylie took the comments on board and advised they should have been passed on previously through the strategy group. Morven Brookes confirmed that she had raised this previously, also noting that she was unable to attend every meeting of the strategy group. James Wylie apologised for it not being included in the report and accepted that this was a collective priority.

Rona Gold felt the introduction and inclusion of the context around children and young people's experiences in Orkney was very effective. However, she felt the report missed chances to discuss the equity of services across Orkney. The inclusion of more information regarding the Third Sector could mitigate this omission. James Wylie responded that the actual report was drafted in haste and was very much a working document, which would be built on over time, with the next iteration detailing the points highlighted.

Councillor Jean Stevenson thanked James Wylie and the other officers for the report, as it showed good results. James Wylie thanked her for her comments and reiterated that there was significant work across the sectors to help children and young people. He felt there was a very dedicated staff group, going above and beyond and would pass back relevant comments to those staff.

Joanna Kenny returned to Councillor Lindsay Hall's query around the wording of putting money in the pockets of parents. She felt there was a lot more to disadvantage than just money, particularly in terms of the ferry linked isles and young carers. She requested that more challenges around disadvantage could be identified. James Wylie responded that it was something he expected the strategy group to be considering for the next update to the plan.

The Board noted:

11.1. That responsibility for children's services planning rested with the Local Authority and its relevant Health Board, working collaboratively with other members of their Community Planning Partnership as well as with children, young people and their families.

11.2. That Orkney's Children's Services Plan 2023-26, prepared by the Orkney Children's Services Strategic Partnership, was approved by the IJB on 21 February 2024 insofar as it related to the remit of the Board.

11.3. That the Local Authority and its relevant Health Board must publish annual reports on the extent to which children's and related services had been provided in accordance with their Children's Services Plan.

The Board **resolved**:

11.4. That the Children's Services Plan Annual Report 2023/24, attached as Appendix 1 to the report circulated, be approved insofar as it related to the remit of the Integration Joint Board.

12. Date and Time of Next Meeting

It was agreed that the next meeting be held on Wednesday, 4 September 2024 in the Council Chamber, Council Offices, Kirkwall.

Remaining dates for 2024 (all meetings scheduled for 09:30):

- 6 November 2024.

13. Conclusion of Meeting

There being no further business, the Chair declared the meeting concluded at 11:50.