



**Gillian Morrison (Interim Chief Officer)**

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## **Orkney Integration Joint Board**

Wednesday, 30 September 2020, 09:30.

Microsoft Teams.

### **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:**

- Jim Lyon, Interim Chief Social Work Officer, Orkney Islands Council.
- David McArthur, Registered Nurse, NHS Orkney.
- Gillian Morrison, Interim Chief Officer.
- Pat Robinson, Chief Finance Officer.
- Dr Louise Wilson, Registered Medical Practitioner not a GP, NHS Orkney.

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

- Gail Anderson, Third Sector Representative.
- Janice Annal, Service User Representative.
- Fiona MacKellar, Staff Representative, NHS Orkney.
- Frances Troup, Head of Housing, Homelessness and Schoolcare Accommodation Services, Orkney Islands Council.

#### **Clerk**

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

## **In Attendance**

### **Orkney Health and Care:**

- Maureen Firth, Head of Primary Care Services.
- Maureen Swannie, Interim Head of Children's Health Services and Service Manager, Children's Services.
- Lynda Bradford, Interim Head of Health and Community Care.

### **Orkney Islands Council:**

- Katharine McKerrell, Solicitor.

### **NHS Orkney:**

- Christina Bichan, Chief Quality Officer (for Item 19).
- Gillian Coghill, Alzheimer Scotland Clinical Nurse Specialist (for Items 1 to 3).
- Meghan McEwen, Chair, NHS Orkney (for Items 1 to 13).

### **Life Changes Trust:**

- Anna Buchanan, Chief Executive Officer (for Items 1 to 3).
- Arlene Crockett, Director of Evidence and Influencing, Dementia Programme (for Items 1 to 3).

### **Age Scotland Orkney:**

- Gillian Skuse, Chief Executive (for Items 1 to 3).

## **Observing**

- Lorraine Stout, Press Officer, Orkney Islands Council.

## **Chair**

- Councillor Rachael A King, Orkney Islands Council.

## **1. Apologies**

No formal apologies for absence had been intimated.

## **2. Declarations of Interest**

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

## **3. Dementia Strategy**

There had been previously circulated a report presenting the outcome of the consultation process on the draft Orkney Dementia Strategy 2020 to 2025, together with a final draft strategy for consideration and approval.

Lynda Bradford advised that the draft strategy was presented to the June meeting and approved for consultation. The results of the consultation were appended in full; one issue raised was affordability within the current financial climate, however the strategy focussed on reshaping services, training and raising awareness. Any additional resource requirements would be the subject of future reports.

Gillian Coghill gave a detailed account of the process followed to date, including how the consultation had been undertaken. The strategy did not commit to budget growth; any cost implications would be picked up as actions and reported in due course. Saying that it was very difficult to pin down specific costs associated with dementia, given that the service remained within wider health and social care services, however it was acknowledged that maintaining the status quo method of service delivery would result in significant budgetary increases for statutory services.

The impact of COVID-19 was a necessary amendment to the strategy, as this had compounded the impact on those suffering from dementia. Carers had also seen a profound expansion in their role and support provided to them was recognised. Gillian Coghill referred to the separation from loved ones, both locally and nationally, although paid carers had strived to maintain communication. Government directive still limited residential care visiting and, in some cases, due to separation, recognition of loved ones had gone.

Gillian Coghill concluded by stating this was a five-year strategy, with some elements which would change. The Life Changes Trust had pledged £45k towards independent evaluation which, in turn, would provide evidence for performance monitoring. Adoption of the strategy provided a good foundation moving from rhetoric to reality. Early formation of the steering group to drive forward the actions was now critical.

Gillian Skuse reinforced that the strategy was a catalyst for change. Regarding the consultation process, which Board members thought would be challenging, given the circumstances, had proved very positive, with stakeholders wanting buy in and to get involved.

Anna Buchanan advised that the Life Changes Trust had a good overview of what was happening with dementia services across Scotland and reported that this strategy was an exemplar, with partnership working at the heart of the process. Arlene Crockett referred to the event she facilitated in Orkney in May 2019 and felt that the strategy took on board what stakeholders said they wanted.

Issy Grieve, David Drever and Councillor Steve Sankey all agreed that the strategy was a comprehensive, well researched document, with the voice of the user group at the centre.

Regarding the steering group, which would play a key role, David Drever queried how this would interact with the IJB. Gillian Morrison advised that feedback from the stakeholder group would be fed through the Orkney Health and Care Senior Management Team and ultimately included in performance monitoring reported to the IJB.

In response to a query from Councillor Steve Sankey regarding carers feeling unsupported, Gillian Coghill advised that partners, including Age Scotland Orkney and the third sector, had worked collectively to ensure carers were supported, particularly during the COVID-19 pandemic. Although carers, particularly unpaid carers, had stepped up, it was an extremely challenging time, and the Hub had played a crucial role in contacting carers at home. All this learning would be used going forward.

Councillor Rachael King thanked the four presenters for all the work they had undertaken during development of the Dementia Strategy.

The Integration Joint Board noted:

**3.1.** That consultation had been undertaken on the draft Dementia Strategy, with the results of the engagement detailed, in full, in the Consultation Report, attached as Appendix 1 to the report circulated.

**3.2.** The final draft Dementia Strategy (Version 3), attached as Appendix 2 to the report circulated.

**3.3.** The final draft Orkney Dementia Strategy Summary Document, attached as Appendix 3 to the report circulated.

The Board **approved**:

**3.4.** The final draft Dementia Strategy 2020-2025, referred to at paragraph 3.2 above.

#### **4. Minute of Previous Meeting**

There had been previously circulated the draft Minute of the Meeting of the Integration Joint Board held on 24 June 2020, which was **approved** as a true record.

#### **5. Matters Arising**

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

Gillian Morrison brought members' attention to Item 14 – the update on the Children's Services Improvement Plan – and advised that, although a report was due at each meeting, a comprehensive update would be provided to the October Board meeting, so that the IJB was fully appraised of progress.

Regarding the Annual Performance Report, which was the subject of a separate report at this meeting, the Looked After Children review was comprehensively set out in that document, to give assurance to the IJB on progress with actions arising from the joint inspection of services for children and young people in need of care and protection.

David McArthur joined the meeting at this point.

In response to a query from Davie Campbell regarding appointment of a Lead Public Protection Nurse (reference: page 11 of previous minute), David McArthur agreed to provide information on that recruitment process outwith the meeting.

David Drever sought assurance on progress with filling the vacancies on the Board, particularly the carers' representative. Gillian Morrison confirmed that she was currently liaising with Olivia Tait from Crossroads, with a view to identifying a potential representative. Feedback suggested that a carer representative had been identified, and Gail Anderson had undertaken to liaise with that person.

Regarding the Council staff representative, the three recognised trade unions for Orkney Islands Council were currently in discussions to nominate a representative.

Gail Anderson advised that it would be useful to have a concise induction pack for those who wished to join the IJB.

## **6. Summary Report**

There had been previously circulated a summary report providing information on various topics, not included on the agenda for this meeting, to enable the Board to seek assurance on progress and to consider action, where required.

Gillian Morrison highlighted the following matters:

- As previously advised, a comprehensive progress update on the Action Plan arising from the joint inspection of services for children and young people in need of care and protection would be presented to the October meeting.
- Vaccination programme and changes to method of delivery this year, with recent announcements in the local media.
- Strategic Commissioning Implementation Plan (SCIP) – the seminar for the Kirkwall care facility had been prioritised and the Joint Strategic Needs Assessment would require updating prior to finalising the SCIP.
- Independent Review of Social Care.

With regard to the workforce plan, Fiona MacKellar was very concerned that no plan had been on the table for over two years. She appreciated that COVID-19 may have contributed to the delay, however the NHS staff representative should be involved from the outset. Gillian Morrison advised that, as she had only been in post for four weeks, she was slowly getting up to speed with progress on certain plans, strategies and policies. Research indicated that an OHAC Workforce Plan was drafted in 2017, although it did not appear to have been approved. It should be recognised that the IJB was not an employer, and both partner agencies, NHS Orkney and Orkney Islands Council, had their own workforce plans. A workforce plan for OHAC should add value rather than duplicate existing plans. Consequently, she had asked managers to identify key issues and any gaps, with a view to a draft workforce plan being circulated for discussion with the various governance committees. Partnership working was important for staff, not just in NHS Orkney, but also in the Council.

Councillor Steve Sankey referred to item 8, the update from the Chief Officer Group, which he thought was the first time feedback from that group had been reported to the IJB. He would make further comment when the Board discussed the Annual Performance Report, however he was still concerned about the level of self-evaluation, now proposed for adult protection, although he was pleased to see assistance being provided by the Independent Chair of the Public Protection Committee, Tam Baillie.

Being new in post, Gillian Morrison commented that, when compiling items for the agenda, she was curious as to the purpose of the Summary Report. Updates on operational matters should be contained within development sessions, with the Board considering strategic policy matters. Although the discussion on the Summary Report had been helpful, for example the workforce plan, she would prefer formal items requiring decisions on the IJB agenda, rather than progress updates. Given the sheer volume of work the team supporting the IJB had to prioritise, Gillian Morrison advised she would rather under promise and over deliver on certain matters and both partners had certainly been challenged during the COVID-19 pandemic. She suggested that the Summary Report be dropped from future agendas, with any items being picked up through the Matters Arising Log.

David Drever, Issy Grieve and Davie Campbell all agreed that, if the Matters Arising Log was more detailed, the Summary Report could be dispensed with going forward, as they were all conscious of the capacity and workload of officers servicing the IJB.

## **7. 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 14 July 2020, which the Board duly noted.

## **8. Audit Committee**

There had been previously circulated the approved Minutes of the Meetings of the Audit Committee held on 18 March and 24 June 2020, which the Board duly noted.

## **9. Directions**

There had been previously circulated a report presenting key actions in respect of Directions, together with a draft template, for consideration and approval.

Gillian Morrison advised that, in terms of legislation, integration authorities had a duty to develop a strategic plan for functions and budgets under their control. A mechanism was required in order to action the strategic plan and that mechanism came in the form of legally binding directions from the integration authority to either or both parties, namely NHS Orkney and Orkney Islands Council. Both parties were required to comply with any Direction from the integration authority – there was no provision to appeal, ignore, amend or veto a Direction; however, either party could ask for the Strategic Plan to be reviewed.

A draft template for Directions had been circulated. Current Directions, also circulated for information, had been reviewed and no change was proposed at this time. However, should the Board adopt the proposed template, all existing Directions would be transferred to the new template.

Councillor Steve Sankey welcomed the template and was surprised that the Scottish Government had not provided guidance on what information a Direction should contain. Saying that he welcomed recognition of how the Direction related to the Strategic Plan, and asked whether budget variances could be incorporated. Gillian Morrison advised that it would not be possible to highlight budget variances in a Direction, given that it was issued at the outset – any budget variances would be reported throughout the year, following normal protocol.

The Integration Joint Board noted:

**9.1.** That the current Directions, attached at Appendix 1 to the report circulated, had been monitored.

The Board **approved**:

**9.2.** The undernoted key actions within the 2020 Statutory Guidance relating to Directions:

- A standard covering report format will be introduced, which will include a brief section requiring the report author to decide and record if the report needs a Direction to be issued to the Health Board, the Local Authority or both, or that no Direction is required.
- There will be detail on the required delivery of the function and financial resources.
- The content of a Direction should be informed by the content of a report on the function(s) approved by the IJB and should be contained in the same report, using the standard format referred to at paragraph 9.3 below.
- Directions should be issued as soon as practicable following approval by the IJB, usually by the IJB Chief Officer to the Chief Executive of either the Health Board or the Local Authority, or both, each in their role as accountable officers to the relevant statutory body.
- A log of all Directions issued, revised, revoked and completed will be maintained. This log should be periodically reviewed by the IJB and used as part of performance management processes, including audit and scrutiny.

**9.3.** The proposed direction template, attached as Appendix 2 to the report circulated.

## **10. Expenditure Monitoring Outturn**

There had been previously circulated a report setting out the financial outturn position of Orkney Health and Care as at 31 March 2020, for scrutiny.

Pat Robinson presented the detail of the expenditure monitoring outturn report, noting that COVID-19 had caused minimal disruption or financial impact in the previous financial year (2019/20). The annual accounts had been scrutinised and approved by the Audit Committee, at its meeting held on 17 September 2020, and the external auditor, Audit Scotland, had provided an unqualified audit certificate.

The Integration Joint Board noted:

**10.1.** The revenue expenditure outturn statement in respect of Orkney Health and Care for financial year 2019/20, set out in section 5.1 of the report circulated, which indicated a breakeven position.

**10.2.** That an additional contribution of £165,700 in respect of Outwith Orkney Placements was received from Orkney Islands Council at the year end.

**10.3.** That the efficiency target of £130,000 applied by NHS Orkney would be reinstated in financial year 2020/21.

## **11. Financial Monitoring**

There had been previously circulated a report setting out the financial position of Orkney Health and Care as at 30 June 2020, for scrutiny.

In contrast to the expenditure monitoring outturn report, Pat Robinson reported that COVID-19 had had a significant financial impact in the current financial year to date, with an overspend of £864k as at 30 June 2020. The forecast overspend as at 31 March 2021 was currently estimated at £2.2 million, which should be recognised alongside the 3-year savings target of £4.2 million. Additional and extraordinary costs incurred as a result of COVID-19 were being recorded separately and reported regularly to the Scottish Government, through NHS Orkney. The expenditure monitoring report to the next Board meeting would provide further detail on costs attributed to COVID-19 and reimbursements received to date – it should be noted, however, that full reimbursement was probably unlikely.

Janice Annal suggested that long term sickness resulted in a double hit, in that staff still required to be paid, however agency staff were also required to maintain services and, inevitably costs were higher, as accommodation was also required. She further suggested that more work was required on recruiting and retaining staff, including “growing our own” and reducing reliance on agency staff. Gillian Morrison confirmed that this issue had recently been discussed at the Council’s Orkney Health and Care Committee and the service priority remained local recruitment. Lynda Bradford concurred and advised that a campaign relating to a career in social work and social care would run during the last week of October.

The Integration Joint Board noted the financial position of Orkney Health and Care as at 30 June 2020, as follows:

- A current overspend of £864,000.
- A forecast year end overspend of £2,266,000 based on current activity and spending patterns.
- That a savings target of £4,200,000 had applied for the three-year period 2020 to 2023, of which only £144,000 had been identified to date.

## **12. Set Aside Budget**

There had been previously circulated a report presenting details of the set aside budget delegated from NHS Orkney to the IJB for financial year 2020/21, for consideration and approval.



In introducing the item, Pat Robinson reminded members that the set aside budget was not new or additional funding and related to acute hospital care. Previously, it was thought that set aside, also known as unscheduled care, did not apply locally, given that the health board and integration authority boundaries were coterminous, and was more appropriate whereby functions carried out by a health board were provided to two or more authorities. However, in 2018, clarification was received from both the Scottish Government and external audit that the IJB required to have strategic oversight of the set aside budget. In order to obtain a greater understanding of the complex arrangements associated with the set aside budget, it was proposed to establish a group, comprising the hospital sector director and finance leads, together with the Chief Officer and Chief Finance Officer.

Annex 2 to the report circulated provided more detail of the set aside budget delegated from NHS Orkney to the IJB for financial year 2020/21.

Councillor Steve Sankey highlighted two sections in the report which he had concerns with, namely:

- Paragraph 7.2 stated that, since establishment of the IJB, spend had always exceeded budget which, in his opinion, immediately set the IJB up to failure.
- Paragraph 4.6 stated that none of the six key steps outlined in statutory guidance had been taken locally.

Pat Robinson advised that the draft Direction to NHS Orkney, attached as Appendix 1 to the report circulated, stated that the services must be delivered within the financial envelope, namely the budget of £7.7 million delegated to the IJB. As suggested, officers would work through the six key steps in order to obtain a better understanding and thereafter for the IJB to manage the budget directly.

On a general point, Issy Grieve advised that the Board had no option but to accept. The figures for this year should, however, be caveated, in that Orkney had not had the usual number of tourists and patients had also been moved out of the hospital, in response to preparation for COVID-19.

Gillian Morrison asked the Board to consider that the intention of the legislation was for the IJB to co-ordinate services provided from the set aside budget, with a view to making a difference locally. The recommendation at paragraph 3.7 of the covering report provided a period of one year for officers to tease out all the issues, including determining an average budget in light of recent spending, in order that consensus could be reached. Thereafter, the spirit of the legislation would be met in time.

The Integration Joint Board noted:

**12.1.** That inpatient hospital services/budgets provided within the Balfour Hospital and capacity in the delegated specialties used in hospitals located in other Health Board areas would form the set aside portion of the hospital budget.

**12.2.** That the Board of NHS Orkney approved formal delegation of the set aside, otherwise known as unscheduled care, to the Orkney IJB on 28 May 2020, using the calculation detailed in section 5.3 of the report circulated.

**12.3.** That, since establishment of the Integration Joint Board, the set aside budget had experienced significant overspends and additional resources were required from NHS Orkney to achieve a balanced position.

The Board **resolved**:

**12.4.** That the set aside budget be received from NHS Orkney in accordance with legislative requirements.

**12.5.** That a Direction for financial year 2020/21 be given to NHS Orkney delegating the associated budget received to provide those services highlighted within Annex 2 to the report circulated.

**12.6.** That NHS Orkney be required to report to the Integration Joint Board, on a quarterly basis, on delivery of those services within the set aside budget.

**12.7.** That, during the current financial year, the Chief Finance Officer of the IJB and the Director of Finance, NHS Orkney, work through the six steps, highlighted at section 4.5 of the report circulated, with a view to ascertaining an accurate budget figure for set aside.

### **13. Annual Performance Report**

There had been previously circulated a report highlighting information on performance within Orkney Health and Care for 2019/20, for scrutiny.

Gillian Morrison introduced this item by thanking the Public Health Scotland Local Intelligence Support Team, for providing information on indicators, as well as strategic managers within Orkney Health and Care for compiling the annual performance report. However, local measures still required to be developed in order to further understand the effectiveness in delivering the Strategic Plan and to plan for future services. Development of further local measures would commence, following recruitment to the vacant post of Planning and Performance Officer.

Maureen Swannie advised members that, although the Annual Performance Report would normally be published no later than three months after the end of the period to which the annual report related, following the impact of COVID-19, Scottish Government had agreed to extend that period. Consequently, the Board agreed that the local annual performance report be published no later than 30 October 2020.

Although the APR referred to some good performance, there were also areas for improvement, including children's services. Section 5 of the covering report provided a summary of performance. Key challenges for the reporting year were highlighted and some elements were still missing, such as an interrogation of the data, although this should be resolved following appointment to the vacant post of Planning and Performance Officer.

The APR told the Orkney Health and Care story and, although some formatting and typographical errors had been picked up, these would be corrected and issued as a briefing note, prior to submission to Scottish Government.

Councillor Steve Sankey sought clarification on the decreasing percentage of care services graded good or better in Care Inspectorate inspections (NI 17 on page 51). Lynda Bradford suggested that, with the small number of services and care facilities inspected, one poor grading could have a significant effect on the percentage figures. One example was the inspection of services at St Peter's House, where the environment received a poor grading. The Care Inspectorate had since indicated that it would be re-inspecting the new Hamnavoe House in the near future to address that matter.

Councillor Steve Sankey then referred to the joint inspection of services for children and young people in need of care and protection, and, although identified as the first key challenge on page 12, the detail of the inspection did not appear until page 45. It was well known that the main outcome from the joint inspection report was lack of leadership, and he suggested this should feature more prominently in the APR – the Board should not be afraid to unequivocally state there was an issue.

Gillian Morrison reminded members that, although it was placed at the top of the agenda for key challenges, the inspection report was published in February 2020 and the APR related to the reporting period 1 April 2019 to 31 March 2020. However, she took on board to articulate more the point raised by Councillor Sankey, as the service had worked on the Improvement Plan since the inspection report had been published.

Issy Grieve congratulated the team on bringing together all the information in such a short time, and highlighted that there was nothing which the Board was not familiar with. However, she was not comfortable with the term "Orkney Health and Care" when it was the health and social care partnership's report. Gillian Morrison advised that any change from Orkney Health and Care would require a policy decision, given that that was the name adopted for the integrated service. However, she undertook to add this to the work plan and consult with staff and the community. It could also be considered as part of the statutory review of the Integration Scheme.

Gail Anderson queried whether services provided by the third sector which were also inspected by the Care Inspectorate should be included in the performance report. Gillian Morrison advised that the purpose of the annual performance report was to report on delegated functions, therefore it related to any service which was delegated to the IJB from the Council and NHS Orkney.

Councillor John Richards referred to key issue 4 on page 23, in relation to Looked After and Accommodated Children and Young People, in that there was no independent oversight of looked after children placements. Jim Lyon advised that work required to be undertaken in this respect, particularly with regard to external placements. The service required to take on greater responsibility for monitoring and one way this could be achieved was to incorporate feedback on performance and outcomes through the procurement process for such placements.

Following scrutiny, the Integration Joint Board **approved** the Annual Performance Report 2019/20, attached as Appendix 1 to the report circulated, for submission to the Scottish Government and provided to both Orkney Islands Council and NHS Orkney.

## **14. Review of Integration Scheme**

There had been previously circulated a report presenting a process for review of the Integration Scheme, for consideration and approval.

The Integration Joint Board considered the information in the report and the attached letter from the Chief Executives of Orkney Islands Council and NHS Orkney, with regard to the statutory process of reviewing the Orkney's Integration Scheme.

The Board noted:

**14.1.** The outcome of the 2020 review undertaken in line with Scottish Government guidance due to the impact of COVID-19, as set out in section 5 of the report circulated.

**14.2.** That, if following the detailed review, Orkney Islands Council or NHS Orkney sought to change the current Integration Scheme, the Interim Chief Officer and the Chief Executives of Orkney Islands Council and NHS Orkney would work with the Joint Discussion Forum to agree a common approach and consult formally with the public, following which Orkney Islands Council and NHS Orkney must decide whether any changes to the Integration Scheme are necessary or desirable.

The Board **approved**:

**14.3.** A more detailed review of the Integration Scheme to be commenced by March 2021.

## **15. Enhancing Wellbeing in Our Island Communities**

There had been previously circulated a report presenting the evaluation of the research project, Enhancing Wellbeing in Our Island Communities, which explored the possibility for community led innovation in care in the non-linked isles of Orkney, for consideration.

Gail Anderson advised that the Enhancing Wellbeing in Our Island Communities project had developed from an earlier research project looking at how community led care solutions could be developed in the smaller islands. Voluntary Action Orkney and other partners had applied for funding from the Aspiring Communities Fund, resulting in the appointment of part-time co-ordinators on five islands – Sanday, Stronsay, Shapinsay, Rousay (with Egilsay and Wyre) and Hoy. VAO had employed a Project Manager and a Project Evaluator. The role of the co-ordinator was dual purpose – focussing on 1:1 support and advice for individuals on the islands, and on the development and support of services in the islands to meet the needs of the residents.

The project focussed on older people and aimed to increase access to activities and information, as well as influence services. Partnerships and networks were enhanced to avoid duplication; however, the evaluation suggested the project was still at too early a stage to assess whether it had eased pressure on statutory services. There was, however, a clear commitment to the role of co-ordinator in the islands, with best practice being shared and helping to reduce isolation.

Funding had been secured to extend the project to March 2022, allowing the project to extend to the full community and not just older people.

There was general agreement that the project showed true innovation, with a diverse nature of outcomes which could inspire a wide impact on services. There was also the link with Community Led Support, with the Sanday Co-ordinator involved in arranging Blethers on that island.

Dr Louise Wilson commented that, although an interesting evaluation, it focussed on qualitative rather than quantitative data. Gail Anderson advised that gathering information had been challenging, resulting in a recommendation from the evaluation being to strengthen procedures to allow the co-ordinators to collate the necessary information. This was now in place and would be reported going forward.

The Integration Joint Board noted the evaluation report of the project, 'Enhancing Wellbeing in Our Island Communities'.

## **16. Reappointment of Standards Officer**

There had been previously circulated a report advising of the statutory requirement to appoint a Standards Officer and making recommendations for appropriate nominations for Standards Officer and Deputies, for consideration and approval.

Gillian Morrison advised of the legislative requirement for the IJB to appoint a Standards Officer, who had responsibility for advising and guiding members of the Board on issues of conduct and propriety. The officer also acted as the liaison officer between the IJB and the Standards Commission for Scotland, with the latter being required to endorse any appointment as Standards Officer.

The current appointments, made in March 2019, were due to expire, therefore the report made recommendations for reappointment of the Standards Officer, together with the appointment of two deputies, for a period of three years.

Councillor Steve Sankey wished it placed on public record the excellent legal advice provided by the Solicitor to the IJB.

The Integration Joint Board:

**16.1.** Formally nominated, for approval by the Standards Commission for Scotland, Gavin Mitchell, Head of Legal Services, Orkney Islands Council, as the Standards Officer of the Integration Joint Board, for a further period of three years until September 2023.

**16.2.** Formally nominated, for approval by the Standards Commission for Scotland, Katharine McKerrell, Solicitor, Orkney Islands Council, and Georgette Herd, Solicitor, Orkney Islands Council, as Depute Standards Officers of the Integration Joint Board, for a period of three years until September 2023.

**16.3.** Tasked the Chief Officer with writing to the Standards Commission for Scotland with the relevant information.

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

The Board noted that the next meeting was scheduled to be held on Thursday, 29 October 2020, at 09:30. Given ongoing COVID-19 restrictions, it was agreed this meeting be held virtually by Microsoft Teams.

For 2021, the Board agreed to move from quarterly meetings to bimonthly meetings. Subject to confirmation of dates, Board meetings would be held in February, April, June, August, October and December.

Frances Troup left the meeting at this point.

## **18. Disclosure of Confidential Information**

The Board agreed that the public be excluded from the remainder of the meeting as the business to be considered involved the disclosure of confidential information of the class described in Section 50A(3)(a) of the Local Government (Scotland) Act 1973 as amended.

## **19. Remobilisation Plan**

Under section 50A(3) 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 confidential information.

There had been previously circulated a report presenting the Remobilisation Plan for consideration and endorsement.

Christina Bichan advised that, in line with the national document, Re-mobilise, Recover, Re-design: The Framework for the NHS Scotland, for dealing with the immediate and long-term impact of COVID-19, and in response to the Director of Planning, NHS Scotland, NHS Orkney had developed the Remobilisation Plan as circulated. The document, which had been submitted to the Scottish Government on 31 July 2020 in draft, was a dynamic document which was being further developed and refined in response to the ongoing changes to NHS Orkney's operating environment. Consequently, this presented a significant opportunity to capitalise on the increased appetite for change, innovation and new models of delivery and to transform the approach to improving health and wellbeing in Orkney.

A letter to NHS Board Chief Executives from the Director of Planning within the Health and Social Care Directorate of the Scottish Government, dated 3 July 2020, set out a requirement for the planning period to be extended to the remainder of the financial year, with a focus on the three priorities of the Re-mobilise, Recover and Re-design framework as follows:

- Moving to deliver as many normal services as possible, as safely as possible.
- Ensuring necessary capacity to deal with the continuing presence of COVID-19.
- Preparing health and care services for the winter season, including replenishing stockpiles and readying services.

Issy Grieve advised that this was not the first iteration NHS Orkney representatives had seen, and queried whether the section on adult community and social care services, at section 16 on page 45 of the Plan, covered the breadth expected in relation to Homecare. Christina Bichan advised this was still work in progress and, in comparison to the first draft, she had worked closely with Lynda Bradford to expand that section in order to fully understand the trends within that service. As with winter planning, officers were taking a fresh look with representative groups and continuously developing and improving documentation.

Councillor Rachael King emphasised the final paragraph on page 29 of the Plan, whereby the challenges of providing services to, and the fragility of, smaller islands was acknowledged. Referring back to the Annual Performance Report, all services were inter-linked and relied on each other.

The Integration Joint Board endorsed the draft Remobilisation Plan, attached at Appendix 1 to the report circulated.

## **20. Conclusion of Meeting**

There being no further business, the Chair declared the meeting concluded at 12:50.