

**Stephen Brown (Chief Officer)**

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Agenda Item: 7.

## **Performance and Audit Committee**

**Date of Meeting: 3 December 2025.**

**Subject: Registered Services within Orkney Health and Care – Inspection Assurance Report.**

### **1. Purpose**

1.1. To present the six-monthly assurance report on inspection activities for registered services within the Orkney Health and Social Care Partnership.

### **2. Recommendations**

The Performance and Audit Committee is invited to scrutinise:

2.1. The inspection activity for registered services within Orkney Health and Care, for the period 22 April 2025 to date, as detailed in section 4 of this report.

### **3. Background**

3.1. The Care Inspectorate is the national regulator for care services in Scotland and inspects services across Scotland to ensure services are meeting the right standards. There are a range of services the Care Inspectorate requires registration for, including the following:

- Childminding.
- Daycare of children.
- Care homes for adults.
- Care at home.
- Support Services.
- Housing Services.
- Adoption.
- Care homes for children.
- Fostering.
- Nursing agency.
- Offender accommodation.

- School care accommodation.
- Secure care.
- Adult Placement Services.

3.1.1. Further detail on the definitions of each of these services can be found [here](#). Any care service must be registered, or they cannot operate. The Care Inspectorate's website can be found [here](#).

3.2. The Care Inspectorate also works with partner agencies including Healthcare Improvement Scotland; His Majesty's Inspectorate of Constabulary in Scotland and Education Scotland to scrutinise how well different organisations in local areas work to support adults and children.

3.3. The Care Inspectorate routinely visits all care sector settings, and these can be either announced, announced (short notice) or unannounced visits.

3.4. The Care Inspectorate uses a six-point scale when evaluating the quality of performance across quality Indicators:

6.	Excellent.	Outstanding or sector leading.
5.	Very Good.	Major strengths.
4.	Good.	Important strengths, with some areas for improvement.
3.	Adequate.	Strengths just outweigh weaknesses.
2.	Weak.	Important weakness, priority actions required.
1.	Unsatisfactory.	Major weaknesses – urgent remedial action required.

## 4. Summary of Inspections

4.1. The table below details the services for which the Care Inspectorate has published its inspection findings in the period 22 April 2025 to date. The previous inspection results are shown within brackets.

Service	Inspection Publication Date	Grade				
		Wellbeing	Leadership	Staffing	Setting	Care and Support
Smiddybrae House.	22.04.25 (previously 02.09.22)	5 (4).	N/A (4).	4 (N/A).	5 (N/A).	5 (N/A).
Hamnavoe House.	25.06.25 (previously 23.10.23).	4 (4).	N/A (4).	3 (3).	5 (N/A).	N/A (N/A).

Service	Inspection Publication Date	Grade				
		Wellbeing	Leadership	Staffing	Setting	Care and Support
St Rognvald House.	15.07.25 (previously 03.04.25).	3. (N/A).	4. (N/A).	3. (3).	3. (N/A).	3. (N/A).
Orkney Responder Service.	05.08.25 (previously 21.12.22)	5 (5).	N/A (4).	4 (N/A).	N/A (N/A).	5 (N/A).

## 5. Smiddybrae House

5.1. An unannounced inspection was undertaken in relation to Smiddybrae House between 14 and 16 April 2025.

5.2. There was one recommended area for improvement within the inspection report, attached as Appendix 1. An action plan has been developed to maintain correct staffing levels and develop better feedback mechanisms to help inform service development. Supervisions/good conversations are regularly being undertaken with staff.

## 6. Hamnavoe House

6.1 An unannounced inspection was undertaken in respect of Hamnavoe House, between 23 and 25 June 2025.

6.2 There was one requirement within the inspection report, attached as Appendix 2, and two areas for improvement. The requirement has not yet been met however considerable work has been done and a report is being finalised. The service has developed an action plan regarding the two areas for improvement to address quality assurance processes and ensure training spaces are allocated as soon as available.

## 7. St Rognvald House

7.1. An unannounced inspection was undertaken in respect of St Rognvald House, between 7 and 15 July 2025.

7.2. There were no requirements for the service, but four areas for improvement have been identified in the inspection report, attached as Appendix 3. An action plan has been developed to address these recommendations with several actions already completed, including an overview of all mandatory induction training, weekly environmental checks meetings, and discussion around the development of a Health and Social Care standard or Code of Practice at staff meetings. The recommendations that good conversations be brought up to date and that regular supervisions are diarised for all staff are in still in progress. The report also

highlights that all the previous requirements have been met, albeit outwith the timescale.

## 8. Orkney Responder Service

8.1 An announced (short notice) inspection was undertaken in respect of Orkney Responder Service, between 27 July and 5 August 2025.

8.2 There were no requirements for the service, but there was one area for improvement identified in the inspection report attached as Appendix 4. To address this recommendation the service has recently implemented a new template for reflective practice sessions.

## 9. Contribution to quality

Please indicate which of the Orkney Community Plan 2025 to 2030 values are supported in this report adding Yes or No to the relevant area(s):

<b>Resilience:</b> To support and promote our strong communities.	Yes.
<b>Enterprise:</b> To tackle crosscutting issues such as digital connectivity, transport, housing and fuel poverty.	No.
<b>Equality:</b> To encourage services to provide equal opportunities for everyone.	Yes.
<b>Fairness:</b> To make sure socio-economic and social factors are balanced.	Yes.
<b>Innovation:</b> To overcome issues more effectively through partnership working.	No.
<b>Leadership:</b> To involve partners such as community councils, community groups, voluntary groups and individuals in the process.	No.
<b>Sustainability:</b> To make sure economic and environmental factors are balanced.	No.

## 10. Resource and financial implications

10.1. There are no immediate financial implications arising from the recommendations contained within this report.

## 11. Risk, equality and climate change implications

11.1. Addressing the recommendations, or requirements, contained within any Care Inspectorate Inspection Reports enables services to improve service delivery and can mitigate the risks service may face.

11.2. There are no other immediate risk, equality or climate change implications arising from the recommendations contained within this report.

## 12. Direction required

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

NHS Orkney.	No.
Orkney Islands Council.	No.

## 13. Escalation required

Please indicate if this report requires escalated to:

NHS Orkney.	No.
Orkney Islands Council.	No.

## 14. Authors and contact information

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## 15. Supporting documents

15.1. Appendix 1: Care Inspectorate Inspection Report – Smiddybrae House.

15.2. Appendix 2: Care Inspectorate Inspection Report – Hamnavoe House.

15.3. Appendix 3: Care Inspectorate Inspection Report – St Rognvald House.

15.4. Appendix 4: Care Inspectorate Inspection Report – Orkney Responder Service.