

Stephen Brown (Chief Officer)

Orkney Health and Social Care Partnership

01856873535 extension: 2601

OHACfeedback@orkney.gov.uk



Agenda Item: 7

Performance and Audit Committee

Date of Meeting: 18 March 2026.

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

1. Purpose

1.1. To present the regular 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 Social Care Partnership, for the period August 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 undertaken inspection activity since August 2025 to date. The previous inspection results are shown within brackets.

Service	Inspection Publication Date	Grade				
		Wellbeing	Leadership	Staffing	Setting	Care and Support
Disability Support Resources Accommodation Service – Housing Support Service (Glaitness)	18.09.25. (previously 09.10.2023)	5 (5).	3 (5).	4 (N/A)	N/A (N/A).	4 (N/A).
Aurrida House.	24.09.25 (previously 31.10.22)	N/A (N/A).	N/A (N/A).	N/A (N/A).	N/A (N/A).	5 (5).

Service	Inspection Publication Date	Grade				
		Wellbeing	Leadership	Staffing	Setting	Care and Support
Care at Home.	08.12.25	4	N/A	3	N/A	4
	(previously 10.08.23)	(4).	(4).	(N/A).	(N/A).	(N/A).

5. Disability Support Resources Accommodation Service – Housing Support Service (Glaitness)

5.1. An unannounced inspection was undertaken in respect of Disability Support Resources Accommodation Service – Housing Support Service (Glaitness), between 15 and 18 September 2025.

5.2. Requirement

5.2.1. By 31 December 2025, the provider must ensure leadership is having a positive impact on staff who are well led and supported within their role.

5.2.2. To do this, the provider must, at a minimum:

- Ensure leaders have the skills, knowledge and experience to engage meaningfully with staff and take a collaborative approach to planning and delivering people’s care and support. This includes leaders adapting their leadership style to help motivate staff to deliver high-quality care and support.
- Ensure leaders role-model a team approach by acknowledging, motivating, encouraging and appreciating staff efforts and contributions while instilling a culture in which it is safe to challenge.
- Ensure leaders recognise the importance of sharing ideas in a relaxed and supportive environment and encourage equality of opportunity among staff.

5.2.3. This is to comply with Regulation 7(1)(c) of The Social Care and Social Work Improvement Scotland.

5.3. Action Taken

5.3.1. In October 2025, the Service Manager commissioned Orca Management Training to undertake specific leadership training with management, and in addition, Orca Management Training were commissioned to undertake sessions with the care team at Glaitness.

5.4. Areas for Improvement

5.4.1. There were four Areas for Improvement identified within this inspection focusing on self-evaluation, learning plans for staff, updating essential service user

related documentation and, an updated complaints procedure. Activity in each of these four areas is underway.

6. Aurrida House

6.1. An unannounced inspection was undertaken in relation to Aurrida House, Children's respite provision, between 24 and 25 September 2025.

6.2. The inspection concluded with no requirements or areas for improvement. The service has sustained an evaluation of very good since 2015. The Inspector commended compassionate and committed staff for providing 'invaluable support to children, young people and their families' and 'excellent collaborative working with partners'.

7. Care at Home

7.1. An unannounced Inspection was undertaken within the Care at Home Service between 28 November and 5 December 2025.

7.2. The Inspection concluded with no Requirements. There were three Areas for Improvement identified focusing on:

- Support plans being updated in line with service reviews.
- Medication policies and procedures.
- Further development of training plans for staff and ensuring supervisions, observations and team meetings are taking place in line with organisational policies.

7.3. The Care at Home Service has a robust Service Improvement Plan and it was acknowledged by the Care Inspectorate Officer, during the Inspection period, that a lot of good work has been undertaken despite the backdrop of service pressures and workforce challenges. It was further acknowledged the difficulties experienced in accessing relevant mandatory and refresher training however this topic was deemed an Area for Improvement.

8. Contribution to quality

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

Resilience: To support and promote our strong communities.	Yes.
Enterprise: To tackle crosscutting issues such as digital connectivity, transport, housing and fuel poverty.	No.
Equality: To encourage services to provide equal opportunities for everyone.	Yes.
Fairness: To make sure socio-economic and social factors are balanced.	Yes.
Innovation: To overcome issues more effectively through partnership working.	No.

Leadership: To involve partners such as community councils, community groups, voluntary groups and individuals in the process.	No.
Sustainability: To make sure economic and environmental factors are balanced.	No.

9. Resource and financial implications

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

10. Risk, equality and climate change implications

10.1. 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.

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

11. Direction required

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

NHS Orkney.	No.
Orkney Islands Council.	No.

12. Escalation required

Please indicate if this report requires escalated to:

NHS Orkney.	No.
Orkney Islands Council.	No.

13. Authors and contact information

13.1. Stephen Brown (Chief Officer), Integration Joint Board. Email: stephen.brown3@nhs.scot, telephone: 01856873535 extension 2601.

13.2. Darren Morrow (Head of Children, Families and Justice Services and Chief Social Work Officer), Orkney Health and Social Care Partnership. Email: darren.morrow@orkney.gov.uk, telephone: 01856873535 extension 2611.

14. Supporting documents

14.1. Appendix 1: Care Inspectorate Inspection Report - Disability Support Resources Accommodation Service.

14.2. Appendix 2: Care Inspectorate Inspection Report – Aurrida House.

14.3. Appendix 3: Care Inspectorate Inspection Report – Care at Home.