

Chief Social Work Officer Report for 2019 to 2020

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1. Governance and Accountability

1.1. Introduction

I am pleased to present the Chief Social Work Officer's (CSWO) annual report for Orkney Islands Council for 2019 - 2020 April to March. The role of CSWO was undertaken for the first part of 2019 - 20 by the substantive CSWO Mr Scott Hunter who left on 20.2.20 when Ms Lynne McIntosh and Ms Sharon-Ann Paget provided interim cover respectively, until my appointment as Interim CSWO on 30.6.20.

The CSWO report provides overview of social work services and information on statutory decisions made by the CSWO on behalf of the Council.

This year, given the workload implications caused by the COVID-19 pandemic, there is a reduced template to enable CSWOs to present shortened reports for local governance structures. This ensures local reporting arrangements continue whilst having due regard to current pressures being experienced across the sector.

1.2. The Role of the CSWO

The role of the CSWO was established to ensure the provision of appropriate professional advice in the discharge of a local authority's statutory functions as described in Section 5 (1B) of the Social Work (Scotland) Act 1968. It is expected that the CSWO will undertake the role across the full range of a local authority's social work functions to provide a focus for professional leadership and governance within these functions. The role provides strategic and professional leadership in the delivery of social work services.

There are also certain functions conferred by legislation directly on the CSWO by name and specific statutory responsibilities are discharged by the CSWO, mainly to decisions about the curtailment of individual freedom, the protection of individuals, and the public. This includes, for example, children in secure accommodation and welfare guardianship for adults. These decisions must be made by the CSWO or by a senior, professionally qualified social worker, to whom the responsibility has been delegated by the CSWO and for which the CSWO remains accountable.

In May 1995 the then Scottish Office explicitly recognised that the need for the role was driven by "the particular responsibilities which fall on social work services in that they affect personal lives, individual rights and liberties to an extent that other local authority services do not." (Circular: SWSG2/1995). Every local authority must have a professionally qualified CSWO as set out in Section 45 of the Local Government etc. (Scotland) Act 1994. The qualifications are set down in Regulations which state the CSWO must be registered as a Social Worker with the Scottish Social Services Council (SSSC).

The overall aim of the CSWO role is to ensure Orkney Islands Council and Orkney Health and Care (OHAC) receive effective, professional advice and guidance in the provision of all social work services, whether provided directly, in partnership with other agencies, or purchased on behalf of the local authority. The CSWO has a responsibility for overall performance improvement and the identification, management and reporting of corporate risks as they relate to social work services.

To fulfil these responsibilities, the CSWO has direct access to Elected Members, reporting directly to the Chief Officer of OHAC; and wider through the Integration Joint Board; the full Council as required; and has direct links to the Chief Executive of the Council and full membership of the Chief Officer's Group for Public Protection.

Elected Members have important leadership and scrutiny roles in Councils, and they must assure themselves that the quality of services are maintained and risks are managed effectively. The CSWO provides professional leadership and promotes values and standards of professional practice, ensuring that only Registered Social Workers undertake those functions reserved in legislation and meet the requirements of their regulatory body and the SSSC Codes of Practice.

Any social worker or social care professional may approach the CSWO for advice. Integration authorities: The Public Bodies (Joint Working) (Scotland) Act 2014 provides for the delegation of certain social work functions by a local authority to an integration authority e.g. a Health and Social Care Partnership.

In its 2016 report on Social Work in Scotland, Audit Scotland noted that the role of the CSWO has become increasingly complex with the introduction of Health and Social Care Partnerships. The CSWO's responsibilities in relation to local authority social work functions continue to apply to functions which are being delivered by other bodies under integration arrangements. The responsibility for appointing a CSWO cannot be delegated and must be exercised directly by the local authority itself.

The CSWO is a member of:

- The Integration Joint Board, comprising of members nominated and appointed by NHS Orkney and Orkney Islands Council (the CSWO is a co-opted non-voting member).
- OHAC's Senior Management Team comprising the Chief Officer and Senior Managers responsible for health and care services.
- Adviser to the Chief Officer Group (COG) for Public Protection. The Chief Officer Group provides leadership, governance and ensures local accountability for all aspects of public protection in the areas of child protection, adult protection, offender management (MAPPA processes for sexual and violent offenders), public protection, including MARAC processes in respect of risks of domestic abuse. Linking to Orkney Community Planning Partnership, the COG is responsible to Elected Members and Scottish Ministers.

2. Service Quality and Performance

2.1. Criminal Justice

During 2019 - 2020 Justice Social Work Services experienced staff changes including the retirement of the Manager in May 2019 and the departure of the Community Justice Co-ordinator in August 2019. Despite depletion in staff membership, Justice Services continued to ensure an equitable service was delivered and following the recruitment process a Manager and Community Justice Co-ordinator were appointed in October 2019 and January 2020, respectively.

The Justice Team ensures those referred are appropriately assessed, supervised and risk managed. Responsibilities include the preparation of Court Reports and risk assessments to aid the Court in making effective sentencing decisions; reducing re-offending and protecting the public through supervision and management of offenders who are subject to community based disposals; plus the rehabilitation of offenders who have been subject to custodial sentences.

The service completed 82 Reports for Court purposes including, Criminal Justice Social Work Reports, 4 Supplementary Reports and 17 Reviews. The subject of the Reports comprised of 57 males and a small number of females and resulted in 7 custodial sentences and 59 Community Paybacks Orders, totalling 6,376 hours. Examples of the opportunities provided include:

- A young person subject of a Community Payback Order (CPO), between April 2019 and October 2019, who had work experience at a local resource. During the experience they increased the organisation's profile on social media by placing items for sale, increasing webpage traffic and sales.
- Criminal Justice Social Work and the Police Offender Management Unit Officer worked with the local college and a young person who had been convicted (subject to sex offender registration for a time limited period). Due to the stigmatisation of sexual offences this can impact negatively on immediate and long-term opportunities, however, the individual circumstances of this young person were considered by the professionals involved and as a result of the support provided, they were able to pursue their career choice via higher education.

2.2. Criminal Justice Staffing Complement:

- 1 FTE Service Manager.
- 1 FTE Qualified Social Worker.
- 1 Qualified Social Worker (1 day).
- 3 Part time Community Placement Supervisors, covering 1 full time post.
- 1 FTE Clerical Assistant.

2.3. Adult Social Work (2018 – 2020):

Type of Order/Intervention (Guardianship).	2018/19.	2019/20.
New welfare guardianship orders where the CSWO is the Guardian.	3.	4.
Total orders for which the CSWO is the Guardian.	12.	15.
Number of assessments made by Mental Health Officers in relation to applications for welfare guardianship including private and CSWO.	6.	40.
Number of private Guardians being supervised by officers of the Local Authority.	95.	63.

Type of Order/Intervention (Adults).	2017/18.	2018/19.	2019/20.
Mental health compulsory treatment.	9.	1.	0.
Emergency detentions.	13.	4.	7.
Short-term detentions.	3.	2.	3.
Other Mental Health officer assessments includes those not leading to detentions, assessments to extend and/or vary orders, social circumstances reports and reports for court disposals for mentally disordered offenders.	16.	50.	70.
Mental Health Tribunals.	8.	1.	0.

2.4. Adult Protection:

There were 72 Adult Protection/Police Vulnerable Persons Database (VPD) referrals from which following assessment and screening, no people were identified who required an Adult Protection Case Conference. Many of these referrals required no further action and many resulted in information sharing with GP Practices, the Community Mental Health Team and the provision of support from agencies such as Orkney Blide Trust and Age Scotland Orkney.

There were 146 Adult Protection/Police VPD referrals, an increase of 74 from the previous year. As a comparator island authority to Orkney Islands Council, Shetland Islands Council experienced a similar increase, possibly related to greater public awareness. The proportion of VPDs passed to Social Work Services depend on criteria set by Police Scotland and the Adult Protection Lead discusses VPDs with Hub staff to ensure the most appropriate approach. From the referrals received, 1 person continues to be managed under Adult Protection Procedures and there was 1 Adult Protection Case Conference.

All referrals are discussed weekly with the Highland Concern Hub to ensure effective information sharing and appropriate actions are taken.

2.5. Adult Social Work Staffing Complement:

- 0.47 FTE Principal Social Worker Adult Services (case holding as MHO).
- 1 FTE Senior Social Worker Practitioner (case holding) (MHO Trainee).
- 3 FTE Social Workers (one is a Mental Health Officer Trainee).
- 0.8 FTE SW – Vacant.
- 0.6 FTE Social Worker Trainee.
- 1 FTE Support Workers (2 Part-time posts).

2.6. Children and Families Social Work

2.6.1. Child Protection

3 Years Child Protection Registration Trend from April to March 2017 – 2020.

During the Year.	17/18.	18/19.	19/20.
No. Child Protection Registrations.	13.	13.	18.
No. of children de – registered.	10.	6.	5.
No. new registrations.	6.	10.	14.

2.6.2. Looked After Children

1 April 2019 to 31 March 2020.

	Apr 19.	May 19.	Jun 19.	Jul 19.	Aug 19.	Sep 19.	Oct 19.	Nov 19.	Dec 19.	Jan 20.	Feb 20.	Mar 20.
Looked after at home.	11	11	12	13	12	12	12	11	10	4	5	5
Looked after away from home.	27	27	26	25	25	25	25	24	24	25	27	26
Total.	38	38	38	38	37	37	37	35	34	29	32	31

2.6.3. Number of Children Referred to Reporter and Children’s Hearings (3 Years Trend)

	2017/18.	2018/19.	2019/20.
No. Children Referred to.	122.	155.	133.
No. Children’s Hearings Held.	78.	70.	83.

2.6.4. Children and Families Staffing Complement:

- 1 FTE Principal Social Worker/Service Manager.
- 1 FTE Operational Manager.
- 1 FTE Senior Social Work Practitioner.
- 8 FTE Children and Families Social Workers.
- 2.8 FTE Fostering and Adoption Social Workers.
- 1 FTE Senior Family Support Worker.
- 1.67 FTE Family Support Workers.
- 2.83 FTE Temporary Family Support Workers.

2.6.5. Junction Visit to Orkney

In August 2019 the Junction: Young People, Health and Wellbeing Project (an award-winning organisation which takes a holistic approach to young people’s health and wellbeing) carried out a “needs assessment” with professionals throughout Orkney Health and Care. Themes identified were explored by care experienced young people from Edinburgh City Youth Café. Six young people and two staff members met with young people across Orkney asking for their experience of the themes identified:

Do they feel current services meet their needs?

To which they informed:

- Services like youth cafes need more resourcing due to limited opening times and services.
- Transport is limited and expensive, making access to services tricky as bus timetables make access very difficult – raised at the Youth Debate with Elected Members in November 2019.

When they are worried, concerned or know something is not right, who if not their parents or carers, would they go to for help with this?

To which they informed:

- Information about sexual health, drugs, alcohol and mental health is poor for young people and they can only go on-line and are not sure if information is correct or up to date.

Is Orkney the best place to live?

To which they informed:

- Life is quiet most of the time but when times do get loud, they get really loud! Young people feel very safe in their community, everyone is looking out for each other but on the downside it's so small everyone knows your business and things often get hugely exaggerated and blown out of all proportion – one young male says “you kinda trade privacy for a community around you”.
- In their spare time young people liked to go walking around the island, play sports and hang out with friends nothing very different from peers elsewhere but they themselves admit they are a lot more innocent than say their equivalents on the mainland as they don't have the same exposure to external factors if you like sports or music, there is lots to do.
- As it is not a big place you can usually meet up with lots of friends.
- It's a beautiful place.

From the above feedback the following actions were taken:

- School nurses have been updated on sexual health information and drop-in arrangements have been set up in discreet rooms in schools.
- Orkney Alcohol and Drugs Partnership (ADP) and guidance staff from Kirkwall Grammar School were approached to develop an on-line tool for all young people in Orkney. Initially consultation was to be carried out by the schools – by young people, for young people, with content help from ADP.
- Action for Children contract awarded for Emotional Wellbeing service – will be housed within schools and community-based resource, for example, Youth Café and Community Learning and Development staff to reach young people not accessing services.

2.6.6. Key Challenges:

As with the previous year, Orkney Health and Care continues to face three significant barriers and challenges all which can impact on each other:

- Recruitment and Retention.

- Capacity.
- Funding and Resourcing.

In order to deliver high quality Social Work and Social Care services to the local community we need to recruit and retain; capable, strong, resilient professional, suitably qualified staff. We have been experiencing high levels of staff turnover and sickness, particularly in Children and Families services which has impacted on the staff team and disrupted the continuity of care and support for our children, young people and families. Recruitment from within our local communities remains a challenge due, amongst other things, to:

- The size of our population;
- The varied career choices available from which to choose; and
- Challenges of dual-relationships in island and rural communities.

Suitable candidates, with the required qualifications and experience, are often located out with Orkney requiring additional time to find suitable accommodation in Orkney to allow people to relocate. The lack of accommodation can often result in offers of employment falling through especially over the summer months. Going forward we are developing a Social Worker Trainee Programme for existing employees which may help to address some of these challenges, excluding the challenges of dual-relationships.

“Dual-relationships” in this context refers to Social Workers also being close neighbours, members of the same clubs, social organisations, wider community and family groupings, school communities, community councils, and direct and extended family members, as the people they are employed to serve. Issues can present in the form of professional boundaries, ethical considerations, barriers to family and professional roles, remote working and conflicts of interest.

The challenges of dual-relationships in rural settings are unavoidable and the smaller the setting the more likely the challenge. These challenges can impact on the personal lives of Social Workers and Social Care staff (as well as all staff working in local authorities and health care settings) and present an additional dynamic in Social Work and Social Care operations, recruitment and retention.

These intrinsic staffing challenges were intensified by COVID-19 restrictions on staff moving from other geographical locations, staff being off due to underlying health conditions or shielding. However, 2 newly qualified Social Workers were welcomed into the Children and Families Social Work Team and funding was secured to begin work with Action for Children in partnership with Orkney Health and Care and Education Services to address service gaps in early support and assistance (early intervention) and whole family work within the community. This work is scheduled to begin in October 2020.

Secondly, the capacity of small councils and health and social care partnerships can present challenges for undertaking the range and scope of all requirements expected of

any such organisations. Operating in such smaller care and health systems can present, challenges and opportunities, which can hinder or enhance innovation and transformation. Here the small-scale nature, for example, of our operational Social Work services can lead to speedy and effective new service delivery models and practice being introduced and embedded.

It can also mean a small number of distinct lead officers are involved in delivering a range of diverse and complex change initiatives including: drafting, reviewing and updating, policies, guidelines, protocols and procedures; new working practices; evidence-based research approaches; new legislation; and social policy changes, while at the same time running safe and effective, front line services while managing increased demand.

Balancing strategic planning and operational delivery is a challenge generally and is intensified in rural and island settings particularly when faced with the staffing issues mentioned above.

The third challenge facing Social Work and Social Care services relates to the climate of public funding including savings requirements within the context of the above mentioned 2016 report on Social Work in Scotland, by Audit Scotland, which highlighted the challenges of available resource and funding set against public demand and expectation.

Successful management of demand, amongst other things, depends on the development of preventative and community-led approaches to ensure support is received in the right way, at the right time, thus reducing the demand for urgent and high-intensity support later. Changing service delivery models often brings anxiety for our communities and we must ensure effective communication of the:

- Changes required and why;
- Benefits sought; and
- To reassure our people we are continuing to meet their needs with a greater focus on their strengths, family and community supports.

During the COVID-19 restrictions, staff maintained weekly face to face contact with children and young people on the Child Protection Register and risk assessed families not on the register based on immediate need and risk to maintain continuity of care. Families were, where possible, contacted either by phone or MS Teams to ensure consistency of service delivery. Families were linked with additional support services via the Emergency Hub including educational hubs, additional financial support, support with food, and practical help and advice.

Staff teams were required to adjust their working practices to an **electronic system**, which previously had limited roll out, which they managed with determination and flexibility.

2.6.7. Service Improvements within Children's Services: Joint Inspection of Children's Services

A Joint Inspection of Children and Young People in need of Care and Protection in Orkney took place between August and October 2019. The conclusion of the inspection report states that the inspection partners cannot be confident the Orkney Partnership will be able to make the necessary improvements without additional support and expertise. Work has been progressing to develop a robust action plan which will deliver the recommendations from the report and will be routinely reported to the relevant committees. This included exploration of bringing in additional staff resources to provide extra support, experience and capacity, to deliver the identified improvements.

3. Resources

The main financial issues reported throughout the year were:

3.1. Children and Families

There were minor underspends within the service due to not having a full complement of Intensive Foster Carers due to recruitment challenges. The requirement for throughcare and aftercare costs was less than anticipated, as a person led service, it fluctuates depending on the needs of young people at any particular time. The Children and Adolescent Mental Health Service (CAMHS) also had a vacancy which contributed to the service having an overall underspend.

3.2. Older People

Significant staff absences have resulted in double running costs with reliance on agency staff to ensure the service remains within staffing levels as agreed with the Care Inspectorate. Due to a reduction in the requirement of high cost packages of care this enabled this budgetary area to balance.

3.3. Disability

There continues to be overspends within this service due to care placements out with Orkney, with increased supported living rates.

3.4. Home Care

The introduction of Self-Directed Support was to enable choice and flexibility in how people receive their care and should not incur additional costs. However, there is an inability to reduce the current, limited, in-house service provision. An Internal Audit report was presented to Orkney IJB Audit Committee on 19 November 2019 which highlighted 8 recommendations which will strengthen policies and procedures. In addition, the demand continues to grow, largely as a result of keeping people at home for longer and to keep hospital admissions to a minimum length of stay.

Although there were additional resources received in 2019/20 (£26,000) for Free Personal Care for all under 65s who require it, regardless of condition (Frank's Law), the resources received have been insufficient to cover this additional commitment. This could also see a further increase in demand for personal care services.

The revenue expenditure outturn statement in respect of Social Care for financial year 2019 to 2020, had a breakeven position as shown in the table below:

Indicative Budget.	Additional Allocations.	Reduction in Funding.	Full Year Budget.	Full Year Spend.
£000.	£000.	£000.	£000.	£000.
19,552.	388.	0.	19,940.	19,940.

The additional allocations can be broken down as follows to allow a breakeven position:

Budget Summary.	£000.
Original Net Budget.	19,552.
Redetermination – Appropriate Adults.	2.
Contribution from Outwith Orkney Placements Fund.	166.
Contingency Budget – Residential Child Care.	324.
2020/21 Savings Taken in 2019/20.	-1.
Re-align Central Administration Apportioned Costs.	-103.
Revised Net Budget .	19,940.

Due to the timing of COVID-19 there was minimal disruption or additional costs within financial year 2019/20.

It was agreed there should be a three-year savings target which would give Orkney Integration Joint Board a set figure to work towards over a three-year period. In total, there is a savings target of £4.2 million to be achieved by the end of 2022-23.

To date there has not been any significant savings identified and the Senior Management Team is evaluating savings proposals.

The following Table shows the savings which have been applied by each partner:

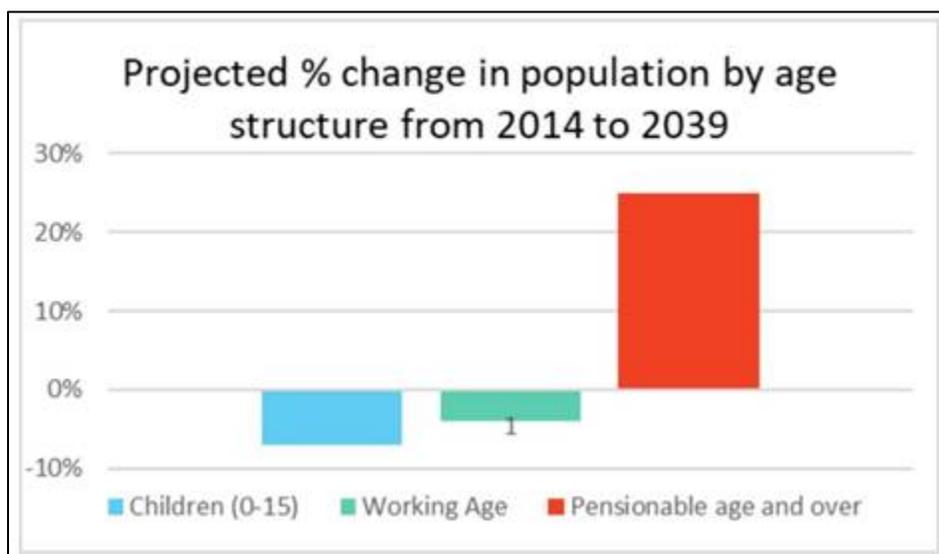
NHS Orkney.	Orkney Islands Council.	Total.
£000.	£000.	£000.
2,400.	1,800.	4,200.

Due to medical advances and improved quality of care, individuals who require or are in receipt of care packages to meet their complex care needs (long-term care or continuing care) have substantial and continuing health and social care provision. This can be the result of chronic illness, disabilities or following hospital treatment. Social

Care services have shown an increasing requirement for specialist input as individuals have the rightful expectation to receive care whilst in their own homes.

Although this challenge is not unique to Orkney, our older population is increasing faster than the national average. In addition, significant numbers of our working age population are leaving the islands and so fewer people are available to provide the care and support required with the predicted levels of chronic illness and disabilities. This is highlighted in NHS Orkney's Transforming Services Strategy, which states 'if nothing else changes in the way we deliver care, this means that for every 10 people over 85 currently accessing health and social care services, there will be 31 people over 85 accessing it by 2033.

The National Records of Scotland has produced population projections for Orkney (2018). As illustrated in the Table below, the older age group is projected to increase by 37.4% whilst the working age group will decrease. This will have a significant impact on how we deliver services in the future:



4. Workforce

As detailed above, there continues to be significant difficulties in recruiting to and in retention of, certain posts within our Social Work and Social Care services. With a limited labour pool available and increasing demand, recruitment within our Adult Social Care services is an continual activity. During 2019 we needed to recruit agency Social Care staff to Orkney for brief periods of time to ensure ongoing safe delivery of service. It is likely this will continue and may also be required in Children and Families services which have similarly been affected by staffing gaps.

4.1. Staff Development

Core and “specialist training” has been delivered across Orkney Health and Care Partnership throughout the year including targeted training, to upskill staff as required.

In September 2019, Dr Dan Hughes, Dyadic Developmental Psychotherapist, came to Orkney for ‘A Day with Dan Hughes’ to provide workshops for Social Workers, Family Support Workers, Foster Carers, Education staff, NHS staff working with children, and Third Sector staff. Attendance was extremely high and the inputs were very well received.

The last Quarterly Child and Adult Protection training of the year was held in the Pickaquoy Centre in February 2020 and feedback from the participants was very positive.

In October 2019, representatives of Barnardo’s came to Orkney to deliver Child Sexual Exploitation awareness sessions for social work staff, children, young people, and parents, and to deliver “train the trainer” training, which Orkney Health and Care coordinated in partnership with Police Scotland.

Following this, in early 2020, work commenced with Children and Families services, and Orkney Rape and Sexual Assault Service, the Preventions and Interventions Officer, Police Scotland, and the Orkney Health and Care Training Co-ordinator to plan the delivery of continuing “Identifying and Responding to Child Sexual Exploitation” training as an addition to the Child and Adult Protection Training. Unfortunately, the COVID-19 crisis meant this was temporarily put on hold in March 2020 before any sessions could be delivered. At this stage, the sessions will be able to commence in early 2021.

Social Work development days were delivered in late 2019 with various themes including Rural Social Work Practice.

In addition to regular training Social Care staff received: Basic First Aid; Practical Medication; Studio 3; and Epilepsy. Many received specialist training such as Food Hygiene and Dementia Awareness, and in February 2020 People Handling “Train the Trainer” training was delivered to increase the number of trainers available. Risk Assessment Refreshers more than tripled and existing trainers were given refresher training.

On several occasions, trainers went to the isles to make it easier for Home Carers and Kalisgarth Care staff, to access training without the need to travel to Kirkwall. Social Work staff can access training sessions open to all Orkney Health and Care staff.

The following table provides details of Social Care training Qualifications:

Qualification.	Number of Sponsored.
HNC Social Service and Healthcare (Children and Young People).	1.
SVQ 4 Health and Social Care (Adults).	1.
SVQ 3 Health and Social Care (Adults).	5.
SVQ 3 Social Service and Healthcare (Children and Young People).	3.
SVQ 2 Health and Social Care (Adults).	19..
CPD Leading and Managing Care Services.	2.
PDA Health and Social Care Supervision.	1
Total.	32.

5. COVID 19

Early indications of impact on workforce and services include the following:

- Staff engaged in meetings via MS Teams, and essential Social Work and Social Care staff attending workplaces and undertaking front-line duties including seeing vulnerable children, young people, adults and families.
- Staff redeployed for emergency responses whilst maintaining statutory service delivery within Scottish Government COVID-19 guidance.
- Emergency hubs staffed seven days a week – staff and volunteers redeployed to deliver services from the Hub.
- Development and dissemination of Interim Inter-agency Child Protection Guidelines and Child Protection Procedures COVID-19 specific.
- Staff capacity further stretched within a small system where staff already have multiple roles and responsibilities.
- Caring for People weekly meetings with partners to discuss and co-ordinate emergency responses.
- Many staff self-isolated or shielding impacted on remaining staff levels.
- Infrastructure for remote working was limited and had to be rapidly upscaled.
- Development and roll out of a Person at Risk Database for all vulnerable citizens using services.
- Young people actively engaging with on-line Children’s Hearings more than office based.

Key Priorities for Recovery:

- Service Operational Recovery Team weekly meetings – identify priorities for de-commissioning emergency response services, scaling back and opening up services in line with Scottish Government COVID-19 advice.
- Planned moves of staff back to substantive posts as services re-open.
- Continued delivery of statutory services which had been prioritised throughout the emergency phase.
- Lessons to be learned activity to prepare for further emergency responses should this be required.

Jim Lyon.
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Orkney Islands Council/Orkney Health and Care.

Date: 30 September 2020.