

Question	Lead Executive	Response
<b>Public – Question and Answer Session</b>		
<p><b>It is interesting to hear that the old Balfour will be redeveloped. As the old Balfour site is surrounded by residential properties on most sides, can you tell us how NHS Orkney plans to engage with those residents and ensure their opinions are considered in the redevelopment? With particular consideration for those residents to be communicated with prior to public announcements.</b></p>	<p>Melanie Barnes Interim Director of Finance</p>	<p>Yes, we will absolutely be consulting with local residents regarding the demolition and redevelopment of the old Balfour site.</p> <p>We are at very early stages and have only just, last month, confirmed funding to carry out pre-demolition surveys and then demolition following those. We will keep residents engaged with plans for demolition and will try to ensure the pre-demolition surveys are as unobtrusive as possible. We will liaise with residents once we start planning the actual demolition to again try to keep it as unobtrusive as possible</p> <p>We regard to the re-development, we will have a full consultation process, and we hope to be engaging (talking and listening) to local residents next year. For reassurance, we have not commenced any planning for what while happen to the site once its demolished.</p>
<p><b>There are unacceptably long waits to access community mental health services in Orkney and across all of Scotland – what is being done about this?</b></p>	<p>Stephen Brown Chief Officer - IJB</p> <p>Ms Maree Todd Scottish Government</p>	<p>In common with the rest of Scotland demand for mental health services continues to rise.</p> <p>Following national investment in 2021, both Child and Adolescent Mental Health Services and Psychological Therapies here in Orkney were able to recruit significantly to new posts with the result that both teams consistently meet the waiting times targets.</p> <p>The waiting time target for access to the drug and alcohol service is also met consistently.</p>

		<p>The challenge however remains for general adult psychiatry and old age psychiatry. From 1<sup>st</sup> August 2025 we have had the equivalent of 1 (Whole Time Equivalent, WTE) of Consultant Psychiatrist in post in blended roles.</p> <p>The psychiatrists, Service Manager, Team and CMHT Team Leader are currently reviewing the wait list for adult psychiatry and are working to reduce this and increase adult psychiatrist capacity.</p> <p>At present, routine wait times are approximately 18 months for adult psychiatry however following triage many patients are treated as urgent.</p> <p>Following the introduction of assessment clinics the average wait for Community Psychaitric Nursing is now 6 weeks.</p> <p>Whilst we cannot access old age psychiatry we do have a GP with special interest in dementia with a waiting time of 6-8 weeks for an initial appointment and diagnostic tests</p> <p>We are also in the process of increasing the capacity of services through the establishment of a new Psychiatric Liaison Service. Recruitment is underway for the service which we hope to have fully up and running early in 2026.</p>
<b>Is cancer healthcare in Scotland ageist, leaving elderly patients to experience age-based biases, assumptions they may not want treatment and a lack of a holistic</b>	Ms Maree Todd Scottish Government	

<p><b>approach to their care, particularly those with co-morbidities?</b></p> <p><b>In Orkney specifically, is there access to a holistic geriatric service for elderly patients that can understand the complex issues facing elderly patients and their families when diagnosed with multiple conditions?</b></p>	<p>Sam Thomas Executive Director Nursing, Midwifery, AHP's and Chief Officer Acute Services</p>	<p>Although NHS Orkney currently does not employ a substantive consultant geriatrician. We currently have a locum consultant geriatrician who is based in Orkney with a specific focus on comprehensive geriatric assessment both supporting families, patients and clinical colleagues. We are in the process of developing a sustainable frailty model.</p>
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