# Glasgow City Integration Joint Board

**IJB(M)2026-05**

Minutes of a hybrid meeting held at 9.30am on Wednesday 23rd September 2026

**Present:**

| | | |
|---|---|---|
| **Voting Members** | Ian Bruce | Third Sector Representative (substitute for Fi Grimmond) |
| | Cllr Allan Casey | Councillor, Glasgow City Council |
| | Martin Cawley | NHSGG&C Board Member |
| | David Gould | NHSGG&C Board Member |
| | Cllr Chris Cunningham | Councillor, Glasgow City Council (Chair) |
| | Graham Haddock OBE | NHSGG&C Board Member (Vice Chair) |
| | Jamie Kinlochan BEM | NHSGG&C Board Member |
| | Bailie Norman MacLeod | Councillor, Glasgow City Council |
| | Lesley McDonald | NHSGG&C Board Member |
| | Cllr Elaine McDougall | Councillor, Glasgow City Council |
| | Morven McElroy | NHSGG&C Board Member (substitute for Ketki Miles) |
| | Marie McGinn | Carers Representative |
| | Michael McNamara | Service User Representative |
| | Davy Milligan | Carers Representative |
| | Cllr Jon Molyneux | Councillor, Glasgow City Council |
| | Bailie Hanif Raja | Councillor, Glasgow City Council |
| | Cllr Davena Rankin | Councillor, Glasgow City Council |
| | Cllr Lana Reid-McConnell | Councillor, Glasgow City Council |
| | Paul Ryan | NHSGG&C Board Member |
| | Karen Turner | NHSGG&C Board Member |
| **Non-Voting Members** | Duncan Black | Depute Chief Officer, Finance and Resources |
| | Josh Cairns | Staff Side Representative (NHS) |
| | Craig Cowan | Head of Business Development / Standards Officer |
| | Lorraine Cribbin | Interim Chief Nurse |
| | Stephen Fitzpatrick | Depute Chief Officer, Strategy, Innovation & Best Value |
| | Kelda Gaffney | Depute Chief Officer, Operations & Governance / Chief Social Work Officer |
| | Stuart Graham | Trade Union Representative (GCC) |
| | Dr Richard Groden | Clinical Director |
| | Jennifer Sheddan | Head of Housing, Neighbourhoods, Regeneration & Sustainability (GCC) |
| | Mark Sweeney | Independent Sector Representative (substitute for David Reilly) |
| | Pat Togher | Chief Officer |
| **In Attendance:** | Julie Kirkland | Senior Officer (Governance Support) |
| | Karen Lockhart | Assistant Chief Officer, Adult Services |
| | Grace Scanlin | Ernst & Young (External Auditor) |
| | Lynsey Smith | Assistant Chief Officer, Operations & Governance |
| | Jane Wong | Governance Support Officer – Minutes |
| **Apologies:** | Fi Grimmond | Third Sector Representative |
| | Clare Harrow | Acute Services Representative (NHSGGC) |
| | Ketki Miles | NHSGG&C Board Member |
| | David Reilly | Independent Sector Representative |

**Actions**

## 1. Glasgow City IJB Membership Update

Craig Cowan presented a report updating on changes to the membership of Glasgow City Integration Joint Board (GCIJB), including the Lead NHS role and resulting Vice Chair change effective from 1st September 2026, and to seek approval to appoint a new Chair of the Finance, Audit and Scrutiny Committee.

**The Integration Joint Board:**

**a) Noted the change to the Lead NHS Member on Glasgow City IJB, effective from 1st September 2026, outlined at paragraph 3.1;**
**b) Noted the change to the GCIJB Vice Chair as a result;**
**c) Approved the appointment of the Chair of the IJB Finance, Audit and Scrutiny Committee outlined at paragraph 4.2; and**
**d) Noted the update in relation to the extension of voting rights for IJB Members.**

## 2. Declarations of Interest

Martin Cawley made a declaration of transparency in Item 16: Transfer of Glasgow Drug and Alcohol Crisis and Residential Stabilisation Services to HSCP, in view of his former role as Chief Executive of Turning Point Scotland approximately 10 years ago.

Craig Cowan made a declaration of transparency in Item 13: STEP Forward Programme Reviews, as Head of Service responsible for the Welfare Rights Service.

Ian Bruce declared a connection to Item 13: STEP Forward Programme Reviews, in his capacity as a Third Sector representative.

## 3. Apologies for Absence

Apologies for absence were noted as above.

## 4. Minutes

The minutes of 24th June 2026 were approved as an accurate record.

## 5. Matters Arising

There were no matters arising.

## 6. Integration Joint Board Rolling Action List

Craig Cowan presented the Rolling Action List advising of the following.

Action Ref No. 86 – Officers to provide an update on the wider costs of people with refugee status. Information was provided at the IJB Development Session on 2nd September 2026. This action is now closed.

Action Ref No. 94 – Officers to provide a report to a future meeting outlining the overall picture of rough sleeping. Officers updated that this has been added to the IJB Forward Planner and a report will be presented in November 2026.

Action Ref No. 95 – Rapid Rehousing Transition Plan 2026-27 Spending Proposals – Officers to circulate link to Equality Impact Assessment (EQIA). The EQIA has been updated and published on the HSCP website. The link was circulated to IJB Members on 10th September 2026. This action is now closed.

Action Ref No. 96 - Delivery of the Primary Care Improvement Plan (PCIP) 2025-26 - The Chair agreed that further correspondence would be pursued with Scottish Government to highlight the importance of the CLW programme and the need for sustainable long-term funding. A letter has been sent to the Cabinet Secretary for Health and Care on 15th September 2026. This action is now closed.

## 7. Chief Officer Update

Pat Togher provided the Chief Officer Update, which is available on the HSCP website.

Members referred to the Scottish Government's Programme for Government and asked about the implications for HSCPs, including the proposed direction of travel, engagement with Ministers and civil servants, and whether any additional investment was anticipated.

The Chief Officer (CO) advised that engagement had already taken place between Chief Officers across Scotland and the Scottish Government, with a session with the Cabinet Secretary planned shortly. Chief Officers were seeking further detail on the rationale for the proposals. Further information would be circulated to IJB members when available. It was noted that there was a considerable amount of detail to work through, including the implications for statutory responsibilities, delivery of social care services and how social care would be defined. Officers would continue to engage with the Scottish Government and welcomed future dialogue on social care and the pressures being experienced.

In relation to the Homelessness update, Members noted that the slight reduction in applications was encouraging and asked whether any update was available following discussions with the Scottish Government. The CO reported that the Scottish Government had committed to stronger engagement on homelessness. Officers had submitted detailed information on Glasgow's position and had met with the Cabinet Secretary to highlight the pressures being experienced, including the potential impact of insufficient funding. A further meeting with the Chief Executive, Council Leader and Cabinet Secretary was scheduled that

week. The CO noted that the Scottish Government's commitment could not yet be confirmed in monetary terms.

Members noted that engagement with the Scottish Government was ongoing and welcomed the positive discussions to date. However, concern was expressed that no funding commitment had yet been confirmed, particularly given the proximity to the budget-setting process. Members referred to the Temporary Accommodation Strategy and asked what issues were being prioritised in discussions with the Scottish Government. Concern was also raised regarding the STEP Forward programme and its implications for homelessness prevention in the city.

The CO provided assurance that the HSCP was actively engaging with the Scottish Government and had submitted detailed reports, financial projections and information on the potential impact if the required funding was not received. It was noted that further projections and mitigations would be covered in Item 12, Financial Outlook Update, by the Depute Chief Officer for Finance and Resources. In relation to prevention, the CO noted the ongoing work to respond to homelessness presentations, including dedicated prevention work and revised commissioning activity. The STEP Forward programme, previously approved by the IJB, was described as an evidence-based and accountable approach to achieving best value and testing against critical success factors

The Council Trade Union Representative queried whether the 10-year Temporary Accommodation Strategy took sufficient account of increased homelessness presentations, the availability of permanent lets and the resulting risk of further backlog. Clarification was sought on whether modelling had been undertaken to assess the achievability of the plan, including the availability of social rented properties.

The CO advised that Registered Social Landlords (RSLs) had demonstrated a strong commitment to supporting the strategy. It was noted that delivery of the strategy was dependent on demand pressures, available supply, system capacity and community cohesion. Financial projections included a range of variables and potential unintended consequences, and the targets remained subject to change. Officers have provided figures to the Scottish Government setting out demand, available supply and the resulting shortfall, including residual costs. The CO expressed confidence that engagement with RSLs would continue, while recognising the ongoing challenge of matching demand with available accommodation.

## 8. Ernst & Young - Annual Audit Report 2025-26

Grace Scanlin presented the Annual Audit Report 2025-26.

The Auditor advised that the report was scrutinised and approved for onward submission to the IJB by the IJB Finance, Audit and Scrutiny Committee at its meeting on 9th September 2026.

There were no adjusted or unadjusted differences arising from the audit which require to be reflected in the financial statements. Effective arrangements for financial management; vision, leadership and governance; and use of resources were highlighted however financial sustainability remains a red risk overall. The Auditor confirmed that the Scottish Government's reform proposals did not affect the audit conclusions and noted the challenging financial environment, including the recurring funding gap and the importance of the STEP Forward programme in supporting financial sustainability.

The Depute Chief Officer for Finance and Resources thanked the Auditors, Amanda Clarke and Emma Keggans for their work in achieving a clean audit within the required timescale.

**The Integration Joint Board:**

**a) Approved the contents of the report.**

## 9. Audited Annual Accounts 2025-26

Duncan Black presented a report to provide an update on the completion of the audit of the Annual Accounts.

The Audited Annual Accounts 2025-26 were scrutinised and approved for onward submission to the IJB by the IJB Finance, Audit and Scrutiny Committee at its meeting on 9th September 2026. It was noted that the Audited Annual Accounts had received a clean audit opinion from Ernst & Young, with no changes from the unaudited accounts reported to Committee in June.

**The Integration Joint Board:**

**a) Approved for signature the Audited Annual Accounts for the period 1st April 2025 to 31st March 2026.**

## 10. GCHSCP Unscheduled Care Delivery Plan 2026-27 – Glasgow Royal Infirmary (GRI) Project

Lynsey Smith presented a report that sets out Glasgow City Health and Social Care Partnership's (GCHSCP) proposed next steps in the Glasgow Royal Infirmary Project of the Unscheduled Care Delivery Plan for 2026-2027 and seeks the IJB's approval for the associated investment.

The IJB meeting of 24 June 2026 approved the GRI Project to the point it had been developed at the time of writing. The report acknowledged that the portion of the funding that was uncommitted at the time, totalling £765,000 of the available £1M, would be used to resource further developments or tests of change that the ongoing data analysis and engagement identified. This report now proposes to utilise that remaining funding to develop stage 4 in the process, the development of an integrated case management model for GRI repeat attenders.

Members queried whether recruitment delays had impacted delivery of the wider project. Members also sought clarification on the proposed use of the remaining funding allocation. Officers advised that support was being delivered through Health and Social Care Connect while recruitment progressed. Analysis had identified a target cohort of individuals with complex needs and frequent Emergency Department (ED) attendances and was shaping an integrated outreach model, including its staffing, skills mix and links with ED clinicians.

Members observed the importance of identifying the nature of the issue before committing resources and requested a breakdown of the proposed staffing model when available. Officers confirmed that the project was significantly further advanced than six months previously and that a breakdown of the proposed team structure, skills mix and staffing requirements would be shared with Members.

Members acknowledged that not all data was yet available and queried whether presentations to the Emergency Department relating to mental health crisis were emerging as a significant factor within the data. Officers confirmed that mental health-related issues featured within the complex needs identified. The model would seek to address gaps in support by connecting individuals with appropriate services and strengthening coordination for those already engaged with services.

Members asked whether the performance monitoring arrangements would be able to demonstrate the impact of the intervention, including any cost avoidance within acute services, and whether this could support future resource allocation decisions. Officers advised that the project manager now in place would oversee the pilot and test of change activity. Performance data, including changes in attendance patterns, would be used to assess impact, build the evidence base and inform future decisions on the intervention.

The Chair proposed approval of recommendation (b) subject to further detail being provided of the staffing structure when agreed. Officers

**The Integration Joint Board:**

**a) Noted the progress that has been made delivering the GRI Project as part of the wider GCHSCP Unscheduled Care Action Plan (Appendix 1);**
**b) Approved the use of the remaining uncommitted £765,000 from the £1 million GRI allocation to develop and deliver the test of change GRI Integrated Case Management model outlined in this report;**
**c) Agreed to carry forward the appropriate funding into the year 2027 – 2028 to enable this service to be delivered up to 31 March 2028; and**
**d) Noted that performance reporting will be regularly undertaken within the service and will be reported quarterly to NHSGGC and, as and when required, to the IJB.**

## 11. IJB Risk Management Policy and Strategy Review

Craig Cowan presented a report setting out the outcome of the review of the IJB's Risk Management Policy and Strategy and to seek approval of the updated Policy and Strategy. This includes approval of the revised strategic risk taxonomy and the proposed risk appetite level for each of the nine strategic risk categories. The report explains the reasons for the review, the approach and engagement undertaken, the options appraisal process used to develop the revised taxonomy, and the principal areas of continuity and change.

The IJB Risk Management Policy and Strategy Review was scrutinised and approved for onward submission to the IJB by the IJB Finance, Audit and Scrutiny Committee at its meeting on 9th September 2026.

The Chair commended the Short Life Working Group and officers for the significant work undertaken in reviewing and developing the revised Risk Management Policy and Strategy and asked that members' thanks be conveyed to all involved.

Members welcomed the comprehensive report, acknowledging the considerable effort invested and noting that the revised taxonomy and framework provided a clearer understanding of strategic risks, interdependencies and emerging challenges.

Members commented that the framework would support future strategic discussions, including work relating to mental health and other cross-cutting service areas, by providing a common language and approach to considering risk. Discussion also took place on the application of risk appetite, with members highlighting the importance of ensuring that it informs rather than inhibits innovation and service improvement.

Officers advised that the proposed three-year implementation period reflected the scale of the work required to embed the framework across governance, performance and decision-making arrangements, and emphasised that risk appetite, risk scores and tolerance levels were intended to support informed judgement and proportionate decision-making rather than act as barriers to new approaches.

**The Integration Joint Board:**

a) **Noted the approach taken to review and refresh the IJB Risk Management Policy and Strategy, including the engagement undertaken with IJB members and options appraisal undertaken by the Short Life Working Group;**
b) **Noted the outcome of the Finance, Audit and Scrutiny Committee's consideration of the revised framework on 9th September 2026, including its consideration of comments made by members at the IJB Development Session on 2nd September 2026;**

c) **Agreed the revised mapped alignment risk taxonomy comprising the nine strategic risk categories set out in the updated Policy and Strategy (Appendix 1);**
d) **Agreed the proposed risk appetite level for each of the nine strategic risk categories, as set out in the Risk Appetite Statement and Matrix (Appendix 1);**
e) **Approved the updated IJB Risk Management Policy and Strategy, including its appendices, for implementation from October 2026; and**
f) **Noted the phased implementation arrangements and that progress will be monitored and reported through the IJB's Finance, Audit and Scrutiny Committee.**

## 12. Financial Outlook Update *(for information)*

Duncan Black presented a report that provides a high-level update to the financial outlook as at September 2026.

The Depute Chief Officer for Finance & Resources outlined the medium-term financial outlook. Members were reminded of the approved financial strategy and the importance of delivering planned savings through the STEP Forward programme.

In the current year, delays in delivering STEP Forward savings were contributing to budget pressures. Officers were continuing to develop mitigating actions, and maintaining momentum within the programme was considered critical to achieving the required savings and informing future budget planning.

Members noted that revised assumptions regarding pay and pension costs were being considered as part of financial planning and could affect the outlook.

Officers highlighted the ongoing financial risk associated with homelessness services and emphasised the need for continued monitoring of demand and funding arrangements. Meaningful discussions with the Scottish Government are ongoing regarding financial support, although no confirmed contribution has yet been received. It was noted that any requirement for the IJB to meet a significant share of these pressures would present a substantial challenge to the financial strategy and long-term sustainability of the organisation.

In response to Members' questions regarding employer pension contribution rates, Officers advised that any changes remained subject to approval by the Strathclyde Pension Fund Committee and the decision would provide greater certainty for budget planning.

The Council Trade Union Representative sought clarification on why temporary accommodation costs were projected to continue rising when demand appeared to be approaching a peak and potentially beginning to decline. Concern was expressed about the potential financial responsibility falling to the IJB.

Officers acknowledged the important point and explained that the projections were based on the consistent demand trend at the time. However, changes

between March and August suggested a possible shift in demand. Officers are monitoring the position closely and undertaking further analysis to distinguish if this is a sustained trend from normal month-to-month fluctuations. If demand continues to fall, the projected pressure would be expected to reduce. Longer-term forecasting remained challenging because both demand and price were affected by wider circumstances in the city, including the limited availability of accommodation and the resulting use of bed and breakfast accommodation. Mitigation included working with Registered Social Landlords (RSLs) to increase the supply of suitable accommodation.

Members expressed concern regarding the increasing involvement of the private sector in providing temporary accommodation. They highlighted the importance of exploring long-term capital investment and opportunities to expand direct provision, noting that reliance on short-term funding arrangements could limit longer-term strategic solutions. Officers advised that discussions with the Scottish Government were focused on longer-term measures to address demand pressures, including alternatives to bed and breakfast accommodation and increased provision through RSLs. Identifying and securing suitable accommodation remains challenging.

Members noted the potential for an extraordinary IJB to consider the implications if there is no certainty around funding for homelessness pressures and questioned how this would impact on services, and the actions required to support longer-term financial sustainability. The Depute Chief Officer advised that, should significant financial pressures materialise, early consideration of mitigation measures would be required rather than waiting for the next budget-setting cycle.

The Chief Officer highlighted the scale of the challenge and advised that, in the absence of additional funding, difficult decisions may be required across a range of non-statutory and discretionary services. Members noted the seriousness of the position.

**The Integration Joint Board:**

**a) Noted the 2026/27 in year position;**
**b) Noted the updated financial projections that will inform budget planning for 2027/28; and**
**c) Noted the projected pressures on the homelessness budget and potential for an extraordinary IJB meeting in October.**

## 13. STEP Forward Programme Reviews

Stephen Fitzpatrick presented a report to seek the IJB's approval for STEP Forward review recommendations in relation to the HSCP's Welfare Rights and Older People's Day Care Services; and redesign and associated savings proposals of the HSCP's Enhanced Drug Treatment Service (EDTS) and Complex Needs Service (CNS) and their replacement by a combined successor service.

The Chief Officer reminded members that the report represented the first tranche of STEP Forward recommendations for formal decision and reflected the strategic approach previously requested and agreed by the IJB. The programme had been established to move away from historical percentage reductions and introduce a more transparent, evidence-based approach to service prioritisation. Members were advised that the programme applied consistent critical success factors, including strategic fit, best value, affordability and achievability. The Chief Officer emphasised that significant learning had been gained throughout the review process and that extensive engagement with staff, Trade Unions, service users and other stakeholders had informed the recommendations presented to the Board. While the approach had evolved in response to feedback, the scale of the financial challenge facing the HSCP remained significant, and difficult decisions would continue to be required to support long-term financial sustainability.

Officers advised the STEP Forward methodology had been developed to provide a standardised framework for assessing services and identifying priorities. Members heard that the approved budget included a £20 million service prioritisation savings target, £10m delivered in year, and that delivery of these savings remained challenging within the required timescales. Officers highlighted that reviews had been undertaken as part of the agreed strategic approach rather than through blanket reductions.

Officers acknowledged the significant workforce implications associated with the proposals. Assurance was provided that implementation would be managed through established organisational change processes, including workforce planning, redeployment support and ongoing engagement with staff representatives.

The Chair advised that the service areas covered by the report would be considered separately.

**Welfare Rights Service**

The Welfare Rights Service review was considered by the Executive Steering Group (ESG) on 14 September 2026 as part of Tranche 1 of the STEP Forward programme. ESG endorsed the preferred option for progression to formal IJB decision-making. The preferred option is to redesign and reduce the current Welfare Rights Service so that it is more clearly focused on core HSCP functions, targeted support to HSCP service users and those most vulnerable to financial hardship.

Members noted the volume of correspondence received from stakeholders and members of the public. Members recognised the value placed on the service and the positive outcomes achieved through welfare advice, income maximisation and support for vulnerable citizens. Officers outlined that the preferred option would focus the service on core HSCP functions and support for HSCP service users, while reducing or ceasing activity in areas which overlapped with other welfare rights providers such as pensioner poverty, training, certain appeals activity and private rented sector work. The proposal would deliver recurring

savings of approximately £1.028 million while retaining targeted income maximisation and locality-based welfare rights support for those most vulnerable to financial hardship. Officers further advised that the proposal sought to reduce duplication with other advice providers across the city and better align the service with the broader financial inclusion landscape.

Concern was expressed that, while there was significant welfare rights provision across the city, specialist training and advice expertise could be lost, and questions were raised regarding the impact on income maximisation services and the rationale for the proposal.

Officers emphasised that the proposals had been developed using the agreed STEP Forward methodology and were focused on HSCP service users. It was noted that income maximisation activity would be retained within the proposed model and that welfare rights work linked to income maximisation represented the majority of service activity. Officers further advised that, while the HSCP was not required to provide all welfare rights functions currently delivered, the proposal recognised the continuing value of welfare rights support to service users and would retain targeted provision for those most vulnerable to financial hardship.

Members welcomed the retention of income maximisation services but expressed concern regarding the proposed reduction in pensioner poverty work, training and locality support. Questions were raised about how unmet demand would be managed and whether sufficient capacity existed within the wider advice sector to absorb activity no longer delivered by the HSCP.

Officers advised that income maximisation for HSCP service users, including older people, would remain a core function of the service. While difficult decisions were required, specialist welfare rights expertise would be retained and appeals support for HSCP service users would continue. Activity previously provided to non-HSCP service users would be redirected to funded third sector advice providers, while training needs would be supported through wider HSCP resources and professional development arrangements.

Members highlighted the importance of early intervention and poverty prevention and sought assurance that service users would be effectively signposted to alternative sources of support. Officers advised that discussions were ongoing with corporate colleagues and commissioned services regarding the wider impact of the proposals. It was noted that Glasgow's financial inclusion network was well established and that transition arrangements and system impacts would be considered through implementation planning.

The Council Trade Union Representative raised concerns regarding the adequacy of the Equality Impact Assessment (EQIA), application of the Fairer Scotland Duty, workforce modelling and the transparency of the options appraisal process. It was suggested that insufficient information had been provided to enable full scrutiny of the methodology, scoring and staffing assumptions underpinning the proposal. Concerns were also expressed regarding the potential impact on pensioner poverty and benefit uptake.

Officers advised that the Fairer Scotland Duty was embedded within the HSCP's EQIA methodology and that assurance had been provided by the HSCP's strategic lead that the assessment met legislative requirements. Officers further advised that engagement had taken place with Healthcare Improvement Scotland and that the proposal did not require a formal Planning with People process.

Officers stated that the options appraisal had followed the agreed STEP Forward methodology and Green Book principles, progressing from a long list of options to a shortlisted appraisal process. They advised that the workforce modelling and staffing assumptions had been set out through the review process and that they remained satisfied with the proposed approach.

Members acknowledged the significant financial challenges facing the IJB and the need for difficult decisions but raised concerns about the evidence available to support the proposals. These included the workforce model, rejection of the staff and trade union counterproposal, consultation timescales, the capacity of the third sector to absorb additional demand, the potential impact on communities and related services, and whether the proposed mitigations adequately addressed the loss of specialist expertise. Members stressed the importance of robust evidence, transparency and meaningful engagement in implementation and future reviews.

Officers advised that the counterproposal had been assessed against the STEP Forward critical success factors and was not considered to demonstrate best value. They confirmed that the review followed the agreed methodology and Green Book principles, was supported by appropriate due diligence and complied with statutory consultation requirements. The proposals were intended to clarify the HSCP's role within the wider financial inclusion system while retaining income maximisation and locality support for vulnerable HSCP service users. Officers acknowledged lessons learned, advised that longer engagement periods will be built in (up to 6 weeks) for future reviews and confirmed that feedback and mitigations would continue to inform implementation, although management did not intend to reopen the review.

Members sought further understanding of the options considered and the reasons why certain options had been discounted. Officers advised that a range of options had been assessed through the review process and that welfare rights services were not a statutory function. While recognising the value of the service, officers indicated that a more detailed discussion on the methodology and options appraisal process could be provided at a future development session.

The Third Sector Representative advised that they had confidence in the review methodology and considered that engagement with the third sector had been sufficient, noting that the views of third sector organisations were well understood through the engagement undertaken. Officers thanked the Representative for their comments and acknowledged the learning arising from the discussions held throughout the review process.

Following a vote, recommendation (a) was agreed by 13 votes to 6, with 1 abstention.

**Older People's Day Care Service**

The Older People's Day Care Services review was considered by the Executive Steering Group on 14 September 2026 as part of Tranche 1 of the STEP Forward programme. ESG endorsed the preferred option for progression to formal IJB decision-making, which is to move from the current ten-centre model to a reduced Four Centre Community Hub model. This option would retain directly provided day care provision whilst consolidating capacity into fewer sites and reshaping the service around a more sustainable operating model.

Members sought clarification on the estate and demand assumptions underpinning the proposal, including the location and geographical coverage of the community hubs, the viability of retaining a fifth hub across multiple sites, the future use of buildings no longer required and whether capacity would meet future demand, particularly for people living with dementia. Concerns were also raised about the pace of implementation and the cumulative impact on socially isolated older people and those who rely on several services.

Officers advised that locality needs, service use and demand patterns had informed the proposed model and that capacity was expected to meet assessed need. Hub provision would be maintained across localities where possible, with a five-hub model remaining an option during implementation. The model would strengthen links with wider HSCP, rehabilitation and community services, while options for underused buildings would be considered through established Council processes.

Members sought assurance that transport capacity and journey times would not create undue barriers to accessing day care provision. Officers advised that transport arrangements and their impact on service users, families and carers would be central to implementation and transition planning. Hub provision would be sited within localities, with journey times kept under review and continuity of provision maintained throughout the transition.

The Council Trade Union Representative challenged the review assumptions and whether sufficient information and time had been available to scrutinise the proposals. Concerns were also raised about workforce issues, implementation timescales and the cumulative impact on community, residential and nursing care services.

Officers advised that the figures and assumptions had been tested through the STEP Forward process, which had been subject to scrutiny and due diligence, and that they remained confident in the proposed model. Current evidence did not indicate that the proposals would directly increase demand for residential, nursing or community support services.

The Carers Representative expressed concern that insufficient focus had been given to the impact of the proposals on carers and service users, particularly given the pressures experienced by unpaid carers. Questions were raised regarding the engagement undertaken with carers and carers' organisations. Officers advised that engagement had been undertaken in line with the engagement approach agreed by the IJB, although timescales had limited the extent of wider consultation activity. Information had been shared with carers and relevant stakeholders, and it was noted that further engagement with carers and families would form a key part of the implementation process and transition planning.

Following a vote, recommendation (b) was agreed by 13 votes to 6.

**Enhanced Drug Treatment Service and Complex Needs Service**

Both the Enhanced Drug Treatment Service (EDTS) and Complex Needs Service (CNS) were subject to STEP Forward reviews that were subsequently suspended in response to a formal grievance from NHS Staff Side submitted on 15 July 2026. By that date both reviews had reached the appraisal panel stage of the STEP Forward process, which identifies a single preferred option for formal statutory consultation with affected HSCP staff. However, due to the Staff Side grievance both reviews have remained paused since then. Nonetheless the preferred options identified by the appraisal panel are presented as options for the IJB to consider outwith STEP Forward as part of the broader budget balancing options to be considered by the IJB over the remainder of the 2026/27 financial year.

Members expressed concern about the impact of the proposals on service users, the pace of the process and the uncertainty created. They emphasised that service users, including people with lived and living experience of substance use, staff, trade unions and clinical representatives should be meaningfully involved in co-designing the successor service. Members also sought assurance that the redesign would be governed appropriately, focus on improving outcomes and be based on assessed need rather than constrained by the indicative reinvestment budget. A further update to a future meeting was requested.

The Chair clarified that the proposed reinvestment figure was indicative rather than a fixed ceiling. Officers confirmed that the final model and resource requirements would be determined through the redesign process, taking account of current and anticipated complexity and demand, and that service-user engagement would be central to that work.

The NHS Staff Side Representative noted that the grievance remained ongoing and emphasised the importance of staff involvement and co-design. Concerns were raised about the impact on vulnerable service users, particularly those who do not routinely engage with mainstream services, and the risk that reduced outreach provision could increase demand on emergency, homelessness, addiction and other support services. Reference was also made to the Scottish Government's emphasis on prevention and early intervention, and clarification

was sought on whether further investment could be directed to outreach services.

Officers advised that they could not comment on the grievance or its outcome but confirmed that it did not prevent the IJB from considering the recommendations. They acknowledged the complexity of the client group and advised that the successor service would retain key elements of existing provision, including heroin-assisted treatment and assertive outreach, while seeking to improve sustainability, recovery pathways and value. The redesign would be informed by learning from existing services and continued engagement with staff, trade unions, clinicians and people with lived experience.

Members highlighted changing patterns of drug use and suggested that wider strategic consideration be given to drug-related harms and service provision across Glasgow. Officers advised that recent developments, including the introduction of the Thistle Service and other targeted initiatives, had changed the support landscape. Discussions had taken place with Scottish Government officials about the future direction of alcohol and drug services, and services would continue to be kept under strategic review.

The Service User Representative highlighted the potential human impact of the proposals and emphasised the need for the IJB to give due consideration to the risks and consequences for vulnerable service users, particularly those who may be affected by changes to established support arrangements. Officers acknowledged the complexity of the issues under consideration and advised that the review had sought to balance a range of competing needs and priorities. It was noted that recent findings relating to drug-related deaths would continue to inform strategic planning alongside the STEP Forward programme.

Members expressed concern regarding the level of uncertainty surrounding the proposals and sought clarification on the financial implications of approving or rejecting the recommendations, including the impact on the wider financial recovery programme. Officers advised that the recommendations reflected the conclusion of the review process and associated savings assumptions. It was noted that approval would provide a clear direction of travel, whereas rejection would create additional financial pressures and require alternative recovery measures.

Members referenced correspondence received from the Minister for Mental Wellbeing, Public Health, Sport, Alcohol and Drugs regarding Glasgow Enhanced Drug Treatment Service and welcomed the Minister's engagement however requested that a response is sent on behalf of the IJB to outline discomfort around the decisions the IJB requires to take and to seek clarification on the Scottish Government's response to rising drug-related deaths and funding support available to public services. Chair/Officers

Members suggested that when presenting future STEP Forward service reviews to the IJB that separate reports are presented for each service area.

Following discussion, the Chair (Cllr Chris Cunningham) moved that recommendation (c) be rejected and proposed the alternative resolution below. The motion was seconded by Graham Haddock.

c) *Approve to progress the redesign and associated savings proposals relating to the Enhanced Drug Treatment Service and Complex Needs Service, and the creation of a new combined successor service subject to service redesign being completed in accordance with Staff Partnership trade union requirements, co-design with people with lived and living experience with input from clinical expertise and a further paper to come back to the next (25 November 2026) IJB meeting to approve the redesigned service, in the order of a £1.2m budget, thereby ensuring the delivery of heroin assisted treatment.*

Members agreed to reject recommendation (c) outlined in the report and move to the resolution. Following a vote, the Board agreed the resolution by 12 votes to 7.

**The Integration Joint Board:**

**a) Approved the preferred Core Functions options for the Welfare Rights Service;**
**b) Approved the preferred Four Community Hub option for the Older People's Day Care Service; and**
**c) Approve to progress the redesign and associated savings proposals relating to the Enhanced Drug Treatment Service and Complex Needs Service, and the creation of a new combined successor service subject to service redesign being completed in accordance with Staff Partnership trade union requirements, co-design with people with lived and living experience with input from clinical expertise and a further paper to come back to the next (25th November 2026) IJB meeting to approve the redesigned service, in the order of a £1.2m budget, thereby ensuring the delivery of heroin assisted treatment.**

## 14. STEP Forward Programme Update

Stephen Fitzpatrick presented a report to update the IJB on progress with the STEP Forward programme since the IJB meeting on 24th June 2206.

Officers advised that a substantive review would be presented to the first IJB meeting in 2027, following the first 12 months of the Executive Steering Group (ESG), and noted that Internal Audit would continue throughout the programme.

Members expressed concern that the level of detail provided on the ESG review decisions being presented for noting made scrutiny difficult and requested fuller information to support due consideration of future proposals.

Members also noted that reports of this complexity required sufficient time for detailed consideration and suggested extending the time of future IJB meetings where necessary.

**The Integration Joint Board:**

a) **Noted the update on the STEP Forward programme; specifically noting the review outcomes approved by Executive Steering Group on 11th August 2026; and**
b) **Approved the timescales for the proposed review of governance set out at section 6.3.**

## 15. Mental Health Strategy Update

Item deferred to the next IJB in November 2026.

## 16. Transfer of Glasgow Drug and Alcohol Crisis and Residential Stabilisation Services to HSCP

Item and associated motion deferred to the next IJB in November 2026.

## 17. Update from Chair of Public Engagement Committee (19 August 2026)

Item deferred to the next IJB in November 2026.

## 18. Update from Chair of Finance, Audit and Scrutiny Committee (9 September 2026)

Item deferred to the next IJB in November 2026.

## 19. Glasgow City IJB – Future Agenda Items

Item deferred to the next IJB in November 2026.

## 20. Glasgow City IJB and IJB Committees 2027-28 Meeting Schedule

Item deferred to the next IJB in November 2026.

## 21. Next Meeting

The next meeting will be held at 9.30am on Wednesday 25th November 2026.