

# Appendix 1 – Glasgow City Health & Social Care Partnership - Health and Care (Staffing) (Scotland) Act 2019: Annual Report

## Declaration

Name of local authority / integration authority: Glasgow City Health & Social Care Partnership

Report authorised by:

*Name: Rachel Mackay*

*Designation: Interim Head of Commissioning*

*Date: 13 May 2026*

Details of where the report will be published: [Governance Documents | Glasgow City Health and Social Care Partnership](#)

## Information Required

1. Please detail the steps you have taken as an organisation to comply with section 3(2) of the Health and Care (Staffing) (Scotland) Act 2019:
- 1.1 GCHSCP has included the following care services, as defined in the Health and Care (Staffing) (Scotland) Act 2019, that have been planned and secured within the relevant reporting period (April 2025 – March 2026). The data is presented both by Support Type (Table 1) and Standing Order Route (Table 2):

Table 1

Support Type	Number
Support service	4
Care home service	7
School care accommodation service	0
Nurse agency	0
Childcare agency	0
Secure accommodation service	0
Offender accommodation service	1
Adoption service	0
Fostering service	0
Adult placement service	1
Child minding	0
Day care of children	0
Housing support service	8

Table 2

Standing Order Route	Number
Direct award of social care contracts without prior advertisement	3
Extension/ modification of existing social care contracts	5
Care Home services contracts	4
Services outwith Glasgow other than care home services	2
Residential placements for looked after and accommodated children	3
Open Procurement	3

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Note: One Procurement delivered both Support Services and Housing Support Services and therefore the total on Table 1 is higher than Table 2.

- 1.2 In planning and securing these services, GCHSCP has taken account of the general principles of the Health and Care (Staffing) (Scotland) Act 2019. GCHSCP has also considered the duties relating to staffing imposed on care service providers by virtue of section 3(1) and sections 7 to 10 of the Health and Care (Staffing) (Scotland) Act 2019. These duties are applied throughout commissioning, procurement, approval, contract award and service mobilisation processes.
- 1.3 GCHSCP has robust governance processes in place, with each care service being subject to Glasgow City Council's Standing Orders on Contracts and the HSCP's Scheme of Delegation. Each service is subject to approval in line with the Scheme of Delegation and is supported by proportionate due diligence checks undertaken by Commissioning, Operational and Finance staff within GCHSCP to ensure that the proposed service meets the needs of service users and is sustainable. Where necessary, following approval through the HSCP's internal governance, submission to the Council's Contracts and Property Committee may also be required, in accordance with the Standing Orders Related to Contracts 2022.
- 1.4 Providers have notified the HSCP where additional staffing is required due to people requiring services having rising levels of complexity of need. In response, the HSCP has put in place processes to provide additional funding for specific additional supports, including staffing, as required.
- 1.5 As part of procurement and commissioning activity, providers are required to commit to delivering services with appropriate staffing levels and skill mix. This includes the provision of workforce planning information, proposed staffing structures, and assurance that staffing arrangements are sufficient to meet assessed service user needs safely and effectively. Commissioning staff engage with providers during service mobilisation to ensure that appropriate staffing is in place prior to service commencement. To support this approach GCHSCP has reviewed its approach to evaluating Fair Work First. This involved a significant increase in the overall weighting to 15% and the requirement that bidders submit evidence of their commitments under Fair Work First including a commitment to paying the Living wage and to invest in workforce development.
- 1.6 GCHSCP also requires commitment from bidders that arrangements are in place for staff training, induction, supervision and ongoing professional development. As standard, service specifications and contractual terms and conditions require providers to ensure that staff are appropriately trained and competent for their roles, and that training requirements are maintained throughout the life of the contract. For example, the Service Specification for the Flexible Purchasing Framework for Social Care Supports, which became operational in February 2026, requires that providers "must comply with their duties under relevant legislation and ensure that they are compliant with all clauses relating to staffing and training in the contract." Compliance with the duties on providers created by the Health and Care (Staffing) (Scotland) Act 2019 are specifically highlighted in the specification.

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- 1.7 Once in place, services are managed through the HSCP's Contract Management Framework. The Finance, Audit and Scrutiny Committee approved a review of the Contract Management Framework which improved scrutiny and ensured full alignment with the duties under the Health and Care (Staffing) (Scotland) Act 2019. Every contracted social care service is now required to confirm at least twice per year that they have "appropriate numbers of suitably qualified and competent staff at all times". Where a provider is unable to give this assurance, further investigation and risk assessment is undertaken. This supports ongoing assurance in relation to staffing, training and the delivery of safe and effective care.
- 1.8 Actions under the Contract management Framework are aligned to and support other activities that may identify issues related to staffing and lead to investigation and possible action. These include processes for ASP, CP, Service Concerns, and Whistleblowing.
- 1.9 GCHSCP Commissioning is undertaking a restructure to create dedicated resources for Strategic Commissioning, Procurement, and Contract Management teams. These new teams will improve the planning, securing and monitoring of social care services, by focussing staff resources where they are most needed.
2. Please detail any ongoing risks that may affect your ability to comply with the duty set out in section 3(2).
  - 2.1 The duties under the Act have been in force for two years and there is now a strong understanding of the Act and processes are aligned to its requirements. Work continues to further embed these duties into business as usual practice. In relation to the reporting duty, improved national guidance would support more consistent and effective reporting across social care.
  - 2.2 There remain well recognised financial pressures within the social care sector, which GCHSCP monitors as part of its commitment to ensuring the sustainability of commissioned services including any potential impact on providers' ability to maintain appropriate staffing levels and invest in training and workforce development. GCHSCP has introduced a Service Prioritisation approach to managing budget pressures which will provide a structured and evidence based approach to addressing the risks. GCHSCP is committed to transparent communication and engagement with providers and ensuring that outcomes of Reviews do not impact compliance with statutory duties under the Act.
  - 2.3 Recruitment and retention challenges within the social care workforce continue to present a significant risk. Long standing difficulties in attracting and retaining staff constrain the capacity of the provider market to respond flexibly to service demand and to consistently meet expectations around staffing levels, skill mix and continuity of care. This is further impacted by the increasing level of assessed need of individuals who require social care support.

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