

**OFFICIAL**

**Glasgow City Integration Joint Board  
Finance, Audit and Scrutiny Committee**

**IJB-FASC (M) 15-04-2026**

Minutes of a hybrid meeting held at 9.30am on Wednesday 15<sup>th</sup> April 2026.

**Present:**

**Voting Members**

Martin Cawley	NHSGG&C Board Member
Cllr Chris Cunningham	Councillor, Glasgow City Council
Graham Haddock OBE	NHSGG&C Board Member (Chair)
Ketki Miles	NHSGG&C Board Member
Cllr Jon Molyneux	Councillor, Glasgow City Council (Vice Chair)

**Non-Voting Members**

Duncan Black	Depute Chief Officer, Finance & Resources
David Reilly	Independent Sector Representative

**In Attendance:**

Steven Blair	Business Development Manager
Gordon Bryan	Lead Head of Service, Operational & Technical Care Services, and Older People's Residential & Day Care
Jillian Campbell	Chief Internal Auditor
Geraldine Collier	Assistant Chief Officer, Human Resources
Craig Cowan	Head of Business Development / Standards Officer
Duncan Goldie	Planning and Performance Manager
Julie Kirkland	Senior Officer, Governance Support
Claire Maclachlan	Governance Support Officer (minutes)
Emma McVey	Ernst & Young (External Auditor)
Caroline Sinclair	Assistant Chief Officer, Older People & Primary Care Services
Catherine Young	Principal Officer, Health & Safety

**Apologies:**

Amanda Clarke	Assistant Chief Officer, Finance
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**ACTION**

**1. Declarations of Interest**

Councillor Chris Cunningham, IJB Chair, raised a query regarding the appropriateness of the Chair or Vice Chair of the IJB being a member of the IJB Finance, Audit and Scrutiny Committee (FASC). Officers advised that best practice would be for the IJB Chair not to be a member of the FASC; however, this position is not currently documented and could be considered as part of the forthcoming review of IJB Standing Orders. The IJB Standards Officer confirmed that the FASC Terms of Reference preclude the Chair or Vice Chair from chairing the Committee, but do not prevent membership. Councillor Cunningham emphasised the importance of best practice being clearly noted within Standing Orders and in the absence of such provision, the rules as written should be followed and indicated an intention to continue as a member of FASC, with the matter to be fully considered during the review of the Standing Orders.

**2. Apologies for Absence**

Apologies for absence are noted above.

**3. Minutes**

The minutes of 4<sup>th</sup> February 2026 were approved as an accurate record.

**4. Matters Arising**

There were no matters arising.

**5. Rolling Action List**

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

Action Ref No. 85 – Officers advised that this action is now closed as the request for an update on the Housing First model is an item to be discussed at the IJB Development Session on 29<sup>th</sup> April 2026.

Action Ref No. 88 – Officers advised that this action will be discussed under item 13 presented today.

Action Ref No. 90 – Officers advised that this action is now closed as the Chair wrote to the relevant managers to formally thank and congratulate them on behalf of the Committee for their excellent inspection results.

**6. Internal Audit – High-Cost Care Arrangements**

Jillian Campbell presented a report providing details of the internal audit work undertaken in relation to High-Cost Care Arrangements.

Based on the audit work carried out, a reasonable level of assurance can be placed upon the control environment. The audit has identified some scope for improvement in the existing arrangements with two recommendations and one service improvement which management have accepted.

Members sought clarification on the overall number of high-cost care packages, including whether these were evenly distributed across care groups and how many related to out-of-authority placements. Auditors agreed to circulate this information to Members outwith the meeting.

Members highlighted the £221,180 per annum threshold for senior management approval and queried how the figure had been decided upon. Members also asked whether standardisation of that threshold should be set lower. Auditors advised that the figure was believed to be historic and confirmed that this would be clarified and noted the importance of standardisation as different care groups define it differently.

Auditors

Members discussed the review frequency for high-cost care packages, expressing concern regarding the proposal to extend reviews from every two years to four years as a temporary measure. They also suggested that the nature of packages differ and therefore defining by cost may not be the most appropriate measure. The Depute Chief Officer, Finance and Resources, provided assurance that judgements regarding care packages are not solely based on monetary values. Officers highlighted that high-cost care packages vary significantly across care groups, meaning that cost thresholds and review requirements may differ depending on the level and type of care and advised that, in practice, care packages are subject to ongoing operational oversight and assurance. Reviews take place more frequently than the proposed four year minimum period, particularly for the highest-cost packages and in service areas such as Specialist Children’s Services. Thresholds are considered through commissioning processes, with scrutiny from senior officers, and each package is assessed on an individual basis.

Auditors confirmed that while a minimum review requirement applies to all cases, review frequencies can vary. The Chair acknowledged the complexity of the issue but emphasised the need for shorter review timescales, particularly during transition between different care groups. Officers agreed that further work would be undertaken to clarify the definition of high-cost care packages and bandings of value, as well as review timelines, with a report back to the Committee to ensure appropriate oversight and assurance. Members requested that the report includes an update on work happening at a national level in this area.

Officers

**The IJB Finance, Audit and Scrutiny Committee:**

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

**7. Internal Audit – Follow-up Report (01 September 2025 – 28 February 2026)**

Jillian Campbell presented a report updating on the implementation of previously agreed recommendations.

The Chair raised concerns regarding delays to a number of high-priority recommendations and the repeated revision of target dates, questioning how realistic target dates were at the point of setting and how long it was acceptable for high-priority actions to be delayed.

Auditors acknowledged these concerns, advising that target dates reflected management’s best estimates and noting factors outwith the IJB’s control. Auditors confirmed they continue to work closely with management to promote realistic timescales and monitor progress, providing assurance that the associated risks are understood and remain under close review.

**The IJB Finance, Audit and Scrutiny Committee:**

- a) **Noted the updated position in relation to outstanding recommendations, and**
- b) **Noted that the Chief Internal Auditor will submit further reports on the status of any future recommendations.**

## **8. Glasgow City IJB Internal Audit Plan 2026-27**

Jillian Campbell presented the 2026-27 Internal Audit plan for the Glasgow City Integration Joint Board.

The proposed areas for inclusion in Glasgow City IJB Internal Audit Plan for 2026/27 are:

- Service Prioritisation,
- Performance Management

Flexible capacity has also been included within the plan which can be drawn down to address specific issues/risks that arise during the year.

Members sought clarification on whether the Service Prioritisation (SP) audit would focus on adherence to governance arrangements rather than specific samples. Auditors advised that it would become clearer as the year progresses, and they will look at areas that have been taken through the process and whether they are compliant with the governance arrangements. In relation to the audit of performance management, this will be dependent on the new arrangements bedding in.

The areas previously covered by Internal Audit were noted and the Chair confirmed that the Audit team consult the FASC Chair and Vice Chair when determining areas for inclusion within the plan.

**The IJB Finance, Audit and Scrutiny Committee:**

- a) **Approved the Internal Audit Plan for 2026/27;**
- b) **Approved the Internal Audit Mandate and Charter for 2026; and**
- c) **Noted the responsibilities of the Finance, Audit and Scrutiny Committee as detailed in the Audit Charter.**

## **9. HSCP Performance Report Q3 2025-26**

Duncan Goldie presented the Joint Performance Report for the Health and Social Care Partnership for Quarter 3 of 2025-26.

At Q3, 57.8 of indicators were Green; 37.8% Red; and 4.4% Amber. The indicators which are Red are summarised in the report, with those which have been Red for two or more successive quarters marked in bold. There has been a change in RAG status for 16 indicators since the last report. Of these, performance improved for 8 and declined for 8.

Members considered each of the exceptions within the report where the indicators have been Red for more than two successive quarters.

Within Adult Mental Health Psychological Therapies, Members noted the decline for South and North West, particularly that North West is disproportionately affected by reduced clinical capacity and questioned how quickly these issues will be resolved. Officers agreed to take this offline and circulate a response to Members.

Officers

Members highlighted the Red indicators relating to Adult Mental Health Hospital average length of stay, noting that these have remained Red since November 2023. The impact of system pressures and capacity constraints within community services, including neurodiverse referrals, was also highlighted and Members requested a deeper dive at a future date. Officers advised that this work is being actively progressed as part of the Mental Health Strategy, and includes a focus on bed occupancy, staffing costs, and overall demand. While expenditure remains overspent, it was noted that costs are reducing, supported by significant senior management oversight. Officers confirmed that further updates will be brought to the Committee when the Adult Mental Health performance presentation is delivered.

Continued concerns regarding sickness absence levels within Health and Social Work were raised, noting that these remain stubbornly high and Members discussed the effectiveness of HR processes around absence management, and questioned whether these are being consistently applied by all managers. Officers confirmed that processes are being applied by all managers but acknowledged ongoing pressures arising from high demand and limited HR capacity. Approval has recently been given at Board level for 10 additional FTE posts to support this area as part of a spend-to-save initiative, which is expected to assist delivery of the Attendance Action Plan which will be brought to the next Committee.

Members also raised concern regarding NHS staff standard induction completion, reported at 26%. Officers explained that this Red indicator reflects manual recording issues rather than non-completion of induction, with reliance on manual intervention impacting performance data. The Chair emphasised the need for assurance that induction has been completed and accurately recorded. Officers agreed and committed to reviewing recording mechanisms and access issues to provide assurance to the Committee and improve performance monitoring going forward.

There was a discussion regarding Social Work Subject Access Requests (SARs) performance, particularly the impact of statutory timescales and the significant historical backlog, much of which has exceeded statutory deadlines. Officers explained that while new SARs are being reported through the statutory KPIs, operational focus is currently directed towards addressing the historical backlog, resulting in new cases being given less focus as a matter of course. Members queried whether the KPI adequately captured the true level of activity and hidden workload. Officers confirmed that this indicator

is driven by the statutory requirement and so is the right measure but acknowledged that separate reporting on the backlog is provided through Council FASC processes and is not currently included within this Committee's performance framework. Officers agreed to circulate the latest report that was presented to the Council FASC and also confirmed that backlog data is being actively tracked, with a target to clear the backlog by March 2027. Officers agreed to consider how this information could be better captured either within the performance report or through separate reporting.

Officers

**The IJB Finance, Audit and Scrutiny Committee:**

- a) **Noted the performance report;**
- b) **Considered the exceptions highlighted in section 4.4 of the report;**  
and
- c) **Reviewed and discussed performance with the Strategic Lead for Older People, Carers and Unscheduled Care (at Item 10).**

**10. Performance Presentations**

**Older People, Carers and Unscheduled Care Services**

Gordon Bryan and Caroline Sinclair delivered a presentation on Older People, Carers and Unscheduled Care Services performance. The presentation is available on the Glasgow City HSCP [website](#).

The Chair highlighted the Unscheduled Care performance, noting that short-term funding is limiting the ability to achieve additionality and sustain improvements. Officers explained that Unscheduled Care funding is allocated from the Scottish Government on an annual basis and any agreed activity must therefore be delivered as time-limited, annually funded projects. This necessitates advertising posts on one-year contracts only, which are less attractive to potential applicants, and as a result, services are often required to rely on overtime, bank, and other temporary staffing solutions. Officers noted that these constraints make it difficult to build momentum and deliver sustained impact against performance targets.

**11. Health and Safety Annual Report – January 2025-December 2025**

Geraldine Collier and Catherine Young presented a report providing an overview of the main Health & Safety challenges faced in 2025, performance and notable key issues, and the implications for the HSCP.

Officers highlighted the review of all Health and Safety management standards with a focus on training and encouraging reporting across the workforce. The Chair sought clarification that Officers are confident that the metrics in relation to accident and incidents relate to increased reporting rather than an increase in incidents. Officers advised that many of the Red indicators were attributable to enhanced reporting practices and increased complexity across care sectors, including challenges associated with

supporting very young children. Improved staff awareness and reporting has strengthened the organisation's ability to manage risk more effectively. Officers highlighted the ongoing challenges within services, including high levels of incidents within care services, with slips, trips and falls accounting for approximately 77% of incidents and confirmed that these trends continue to be closely monitored, with additional training being progressed. Improvements are anticipated over the next year, and further positive impact is expected as service improvements became embedded.

**The IJB Finance, Audit and Scrutiny Committee:**

- a) Noted the findings made within the report and the data included; and**
- b) Noted the main challenges faced throughout the year, and current service and future developments.**

**12. Strategic Plan Monitoring Report (April 2026)**

Craig Cowan presented a report updating on progress with implementation of the Strategic Plan 2023-26.

Officers highlighted that the Strategic Plan Monitoring arrangements for 2023-26 have now concluded. The Committee will continue to receive quarterly performance "deep dives" per service area and will receive regular updates on the Service Prioritisation (SP) Programme as part of the governance arrangements, as the programme progresses. This will generate additional activities aligned with strategic priorities and the governance for the programme includes separate monitoring and oversight arrangements by the programme's Executive Steering Group and IJB.

Members noted the rationale for concluding the Strategic Plan monitoring arrangements but acknowledged the value of the 'demonstrating impact' section and queried whether this could be incorporated into the Service Prioritisation reporting process. Officers advised that alignment with the SP process would be challenging but agreed to keep this under consideration. Officers suggested that demonstrating impact could be incorporated within deep dive performance presentations for each service area, and noted that similar material, including case studies, are included in the Performance Report.

**The IJB Finance, Audit and Scrutiny Committee:**

- a) Noted the content of the report and attached Strategic Plan Monitoring Report; and**
- b) Noted that the Strategic Plan Monitoring arrangements for 2023-26 have now concluded.**

**13. Inspection and Audit Reporting Routes**

Craig Cowan presented a report providing an update regarding an open action on the Rolling Action List (RAL) to provide assurance that inspections and other third line functions are reported to FASC to ensure the Committee has oversight of any recommendations and requirements.

The Chair advised that he is supportive of the approaches that avoid additional work on officers but emphasised the importance of ensuring that actions are robustly recorded to prevent issues being overlooked. It was also noted that exception reporting focuses primarily on underperformance and questioned whether it would be beneficial for the Committee to also be informed of achievements. Officers advised that reporting would align with the Committee's preferences and confirmed that updates on progress could be incorporated within existing reports. The Chair suggested that the approach be reviewed after the first year to assess effectiveness.

Members suggested looking at with a risk lens and Officers agreed to consider this at that the next IJB Risk Policy Short Life Working Group.

**The IJB Finance, Audit and Scrutiny Committee:**

- a) Noted the contents of the report; and**
- b) Agreed to close the open Rolling Action List entry.**

**14. Committee Work Plan 2026-27**

Craig Cowan presented a report providing a summary of the proposed work programme for the IJB FASC for the period April 2026 to March 2027.

**The IJB Finance, Audit and Scrutiny Committee:**

- a) Noted the content of the report and attached Work Plan (Appendix 1); and**
- b) Considered any other areas for inclusion in the Work Plan.**

**15. Next Meeting**

The next meeting was noted as Wednesday 10<sup>th</sup> June 2026 at 9.30am.