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Glasgow City Integration Joint Board
Finance, Audit and Scrutiny Committee

IJB-FASC (M) 04-02-2026

Minutes of a hybrid meeting held at 9.30am on Wednesday 4th February 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
Bailie Hanif Raja	Councillor, Glasgow City Council (substitute for Bailie Ann Jenkins)

Non-Voting Members

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

In Attendance:

Steven Blair	Business Development Manager
Joanne Bradley	Service Manager, Families For Children
Gordon Bryan	Lead Head of Service, Operational & Technical Care Services, and Older People's Residential & Day Care
Jillian Campbell	Chief Internal Auditor
Amanda Clarke	Assistant Chief Officer, Finance
Craig Cowan	Head of Business Development / Standards Officer
Karen Dyball	Assistant Chief Officer, Children's Services
Mairead Fagan	Service Manager, Families For Children
Kelda Gaffney	Depute Chief Officer, Operations & Governance / Chief Social Work Officer
Duncan Goldie	Planning and Performance Manager
Julie Kirkland	Senior Officer, Governance Support
Rachel Mackay	Interim Head of Commissioning
Claire Maclachlan	Governance Support Officer (minutes)
Gillian Reilly	Interim Head of Service, Adult Services, Specialist Mental Health Services and Alcohol & Drugs Recovery Services
Grace Scanlin	Ernst & Young (External Auditor)
Liz Simpson	Head of Children's Services, Residential, Families for Children and Continuing Care and Aftercare
Robin Wallace	Head of Older People, Residential and Day Care Services

Apologies:

Bailie Ann Jenkins	Councillor, Glasgow City Council (Vice Chair)
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1. Declarations of Interest

There were no declarations of interest.

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2. Apologies for Absence

Apologies for absence are noted above.

3. Minutes

The minutes of 10th December 2025 were approved as an accurate record.

Item 19 – Internal Audit – Lessons learned from review of Huntington’s case – Private Minute Extract:

The Chair advised that the private minute extract had been circulated to Members, who were invited to propose any amendments. The extract was subsequently amended and reissued to Members.

Updates on the progress and outcomes of the actions will be presented by Auditors to a future Committee.

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 – Request for an update to a future FASC or Development Session on the Housing First model. Officers advised that this item has been added to the IJB Forward Planner as a topic for the April 2026 Development Session.

Action Ref No. 88 – Officers advised that the intention is to include updates on a 6-monthly basis for actions arising from Inspections and other similar third line functions. This is to ensure the Committee is sighted on any significant slippages. This will dovetail with executive governance arrangements to avoid duplication of effort. Officers confirmed that work is ongoing, with a meeting held with the Chief Social Work Officer (CSWO), and an update would be brought to the next Committee.

Members sought assurance regarding the internal processes overseeing the governance that arises from inspections. Officers advised that the quarterly assurance report to FASC captures this. Each care group has their own governance groups which feed into the overall care and clinical governance structure.

6. Glasgow City IJB Annual Audit Plan 2025-26

Grace Scanlin, Ernst & Young (EY), presented the Annual Audit Plan for 2025-26.

The Chair queried the reference to materiality on page 3, noting that it was stated as 2% in one section and 1% in another. Auditors confirmed that the correct figure is 1% and advised that this would be amended.

The 2023 cyber-attack on the Western Isles was referenced and Members asked whether GCIJB needed to take cognisance of this in terms of ensuring business continuity plans are robust. Auditors advised that cyber-security risk continues to increase and remains a key area of review with management. A report has been issued to all public bodies. The Depute Chief Officer, Finance and Resources added that within the Council, cyber security is managed by CGI, and assurances around cyber security matters are considered by the Council's Finance and Audit Scrutiny Committee.

The IJB Finance, Audit and Scrutiny Committee:

a) Noted the IJB Annual Audit Plan 2025-26.

7. Glasgow City Integration Joint Board Budget Monitoring for Month 9 and Period 10 2025-26

Amanda Clarke presented a report outlining the financial position of the Glasgow City Integration Joint Board as at 12th December 2025 for Council and 31st December 2025 for Health and highlights any areas of budget pressures and actions to mitigate these pressures.

The net expenditure is £1.815m greater than budget to date. The Integration Transformation Board (ITB) continues to meet to secure the delivery of in-year savings. The overall savings target for 2025-26 is £39.683m. At this stage of the year, it is anticipated that actual savings realised will be £35.208m, representing 89% of the target.

A review of outturns has been undertaken and projected spend has decreased from £6.9m to an overspend of £3.6m. This is largely due to a decrease in prescribing costs of £3.5m.

The Chair highlighted the continuing overspend within Adult Services as an area of concern, noting that the recovery plan had not yet delivered improvement. Officers advised that the overspend related to assumptions within the initial probable outturn, including the expected recruitment of newly qualified nurses. The overspend is predominantly due to bank usage of nursing staff required to maintain safe staffing levels within hospital wards. Approximately half of this spend relates to statutory cover such as annual leave, with the remaining costs linked to enhanced observations and continuous intervention requirements. The targeted 5% monthly reduction in these costs have been achieved and continue to be met.

Members noted that Mental Health continues to feature in financial discussions and asked how the work planned for the coming year, particularly

within the transformation programme, will help address the challenging deficit. Officers advised that the Mental Health Strategy focuses on shifting the balance of care, including reducing the number of inpatient wards. Significant work is underway on both the bed strategy and community-based requirements to support a shift into community settings. While admission rates have not increased, the length of stay has, and work is ongoing to strengthen discharge pathways. Officers also confirmed that the overall proportion of the budget affected equated to approximately 1%, and that this would need to be incorporated into the budget-setting process to address the associated pressures.

The Chair noted the projected overspend but highlighted that, despite this, the possibility of still delivering £4.9m to reserves was very encouraging and gave credit to the staffing teams for their continued hard work in managing the budget expenditure.

The IJB Finance, Audit and Scrutiny Committee:

a) Noted the contents of the report.

8. HSCP Performance Report Q2/3 2025-26

Duncan Goldie presented the Joint Performance Report for the Health and Social Care Partnership for Quarter 2/3 of 2025-26 for Adult Mental Health and Alcohol and Drugs only.

At Q2/3 for Adult Mental Health and Alcohol and Drugs, 45.45% of indicators were Green; 45.45% Red; and 9.1% 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 3 indicators since the last report. Of these, performance improved for 2 and declined for 1.

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 Adult Services (at Item 9).

9. Performance Presentations

Adult Services

Kelda Gaffney and Gillian Reilly delivered a presentation on Adult Services (Mental Health Services and Alcohol and Drug Recovery Services) performance. The presentation is available on the Glasgow City HSCP [website](#).

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Officers advised that they had met with Heads of Service and Service Managers to begin discussions on future performance reporting. This includes consideration of performance indicators for Learning Disability Services, Adults with Incapacity (AWI) work, and the development of more meaningful measures overall and work is currently underway.

There was a discussion regarding monitoring of delayed discharges within Mental Health inpatients and Officers acknowledged the complexity in this area, noting that multiple recording systems are used across Mental Health, Social Work, and Acute services. Work on improving diagnostic data has been ongoing for several years; however, manual audits have not been feasible due to the resource requirement. Work is underway to develop improved systems, including the forthcoming replacement of the current system.

Members sought clarification on the recent acute system resets and whether Mental Health Services had been included in the reset process and if the second reset had achieved outcomes comparable to the first. Officers confirmed that the system resets only applied to acute and advised that a dedicated group meets monthly to review the situation.

The complexity of Mental Health Services, particularly in relation to 28-day inpatient stays and the interface with Alcohol and Drug Related Services (ADRS) was highlighted and Members questioned how individuals presenting with alcohol or drug-related issues are reflected within current Key Performance Indicators (KPIs), particularly those relating to access to treatment, and if KPIs need refined going forward to capture meaningful outcomes. Officers advised that performance is described as an indicator of how effectively treatment supports individuals, noting that the HSCPs performance is strong across the 10 Medication Assisted Treatment (MAT) standards. These standards measure both the quality of treatment and duration of engagement, as well as the extent to which people are supported to access their preferred treatment option. There is also significant work undertaken in outreach, including responses to non-fatal overdoses. KPIs are being discussed at the Performance and Governance Group and Officers are developing recommendations for ADRS.

Members highlighted The Thistle's first year of operation and asked how its success is being measured meaningfully. Officers confirmed that success will be measured against the original business case, with a core focus on reducing harms arising from injecting behaviours, including blood-borne virus transmission and wider community impacts. An independent evaluation is underway and will assess benefits both for the city and partner agencies. The independent evaluation will conclude in March 2027. Officers highlighted that The Thistle has recently reached 600 individuals within its first year, exceeding expectations, and provided assurance that all relevant outcomes are being monitored.

With regards to the Performance presentations going forward, Members asked if updates could include timeframes and investments that officers are targeting improvements at. The Chair confirmed this would be picked up on the review of performance going forward.

10. Fostering and Adoption Services – Care Inspectorate Activity

Mairead Fagan and Joanne Bradley presented a report informing of the outcome of the inspection of Glasgow City HSCP's Fostering, Adult Fostering, and Adoption Services and the action plan created as a result of the inspection.

Officers advised that Inspectors could specify requirements (which are mandatory) and can also highlight areas for improvement. The Fostering Service and the Adult Fostering Service have four requirements and three areas for improvement. These are the same for both services. The Care Inspectorate set a deadline for completion of 3 of the requirements as 31st January 2026 and one requirement for 30th June 2026 but with a recognition that work would begin but not necessarily be completed within that timeframe.

The Adoption Service had no requirements with one area for improvement which is to update the current procedures and work is already underway with this.

A robust and detailed action plan has been developed and is being implemented to address identified requirements and areas for improvement across the Fostering and Adult Fostering Services.

Members highlighted the ongoing national crisis relating to the recruitment of foster carers and questioned if the payment structure has an impact on this. Officers acknowledged the challenges and competing with purchased agencies. Foster carers report that the increase in the cost of living has significantly impacted on them and there is a need to increase fees in line with inflation. Work continues to identify solutions to support current carers and to improve retention. Glasgow has an ageing population of foster carers and recruitment remains a key priority for the service.

Given the tight timescales on the Care Inspectorate requirements, Members sought assurance on when these would be completed, noting the completion date of 31st January 2026. Officers advised that they met with the Care Inspectorate and they have been updated in relation to progress in meeting the timescales for completion.

Members highlighted the importance of reviewing and updating the payment arrangements for foster carers, noting that such structures are only effective when kept current, and questioned what influence could be brought to the Scottish Government on this issue. Officers advised that the Scottish Government has issued recommendations in relation to allowances, but not fees. Proposals are currently being developed to help alleviate the pressures

within the system and work is also underway to clarify the commissioning landscape for fostering across the region, with the aim of making the process as straightforward as possible for prospective foster carers.

The IJB Finance, Audit and Scrutiny Committee:

- a) Noted the Fostering, Adult Fostering and Adoption inspection findings; and**
- b) Noted the Fostering and Adult Fostering service action plan.**

11. Children's Residential Services – Care Inspectorate Activity

Liz Simpson presented a report providing an overview of Care Inspectorate activity in relation to directly provided Residential Children's Services in the City and update the committee on developments in the past year.

Officers advised that of the 8 inspections that took place, 6 services received grades of 'very good', with 4 of the services maintaining grades of 5 and the other 4 services seeing an increase in their grades to either 'good' or 'very good'.

There were no requirements were identified in 7 out of the 8 services, and the themes from these reports reflected the work undertaken by the services to improve and enhance support for children and young people living in the houses. An action plan has been produced for the service where actions were identified to address areas for improvement, and all actions have been completed within timescale.

Members highlighted the age profile of young people across the children's houses and emphasised the importance of strong leadership and investing in learning and development to achieve greater consistency across all services. Officers confirmed that the service continues to support the implementation of the Nurture Framework which is a key programme for staff. This training is designed to ensure that Leadership teams have the skills and knowledge they need to manage services, lead change and support the delivery of great care. In relation to the age profile, Officers confirmed this ranges from 4 to 21 and homes are registered to support young people up to age 20, with care continuing until the day before a young person's 21st birthday. The Care Inspectorate are notified if a young person over 21 remains in placement. Officers added that they would prefer not to place younger children in a group living environment and they are moved on quickly where possible.

The Chair welcomed the positive report, highlighting that this was a testament to the staff and the quality of care provided. It was agreed that a letter from the Chair would be issued to the managers of the Children's Houses to formally thank and congratulate them on behalf of the Committee.

Chair

The IJB Finance, Audit and Scrutiny Committee:

- a) **Noted findings of this report in respect of care inspectorate grades awarded to provided children’s houses;**
- b) **Noted the ongoing use of key question 7 to support inspection processes within children’s residential services; and**
- c) **Noted information relating to service developments and challenges, and future developments.**

12. Older People’s Residential Services – Care Inspectorate Activity

Robin Wallace presented a report advising of the outcome of the inspections of Riverside Care Home, Victoria Gardens Care Home, and Orchard Grove Care Home, provided by Glasgow City HSCP, which were undertaken by the Care Inspectorate in June, July, and October 2025, respectively.

Officers highlighted that no actions plans were required to be submitted to the Care Inspectorate following these inspections.

The Chair welcomed the positive report, noting that all three care homes had received strong evaluations with no requirements identified, and that this was a testament to the staff and the quality of care provided. It was agreed that a letter from the Chair would be issued to the managers of the care homes to formally thank and congratulate them on behalf of the Committee.

Chair

The IJB Finance, Audit and Scrutiny Committee:

- a) **Noted the audit findings in respect of three directly provided HSCP residential care homes; Riverside Care Home, Victoria Gardens Care Home, and Orchard Grove Care Home, and trends in relation to grades awarded.**

13. Community Alarm and Telecare Service – Annual Audit Carried out by Technology Enabled Care Services Association (TSA)

Gordon Bryan presented a report advising of the outcome of the annual Technology Enabled Care Services Association (TSA) Quality Standards Framework Maintenance audit of the Community Alarm & Telecare Service (February 2025), and to present the improvement action plan that has resulted in full compliance and successful reaccreditation.

The audit identified one specific area which was not met - consistently meeting the KPI for alarm calls answered within 60 seconds (TM28). The TSA target is set at a rate of 97.5%. TSA required an improvement action plan to directly address this risk through enhanced KPI monitoring, targeted staff support, resource allocation during peak times, and the deployment of digital solutions such as the “Responder App” which allows real time deployment and monitoring of Responder Teams attending to service users within their own homes.

Since implementing the improvement plan, call handling performance has improved significantly and these improvements provide assurance that operational risks related to delayed emergency response have been effectively mitigated and that service resilience has been strengthened, with no further actions required from TSA.

Officers highlighted, at present, there is no legal requirement for Community Alarm and Telecare providers to be a member or an accredited member of TSA. Following strategic review and Social Work Governance approval, the decision has been taken to discontinue TSA accreditation and move to being a member organisation only.

The IJB Finance, Audit and Scrutiny Committee:

- a) Noted the outcome of the TSA Quality Standards Framework audit and the achievement of full compliance;**
- b) Endorsed the improvement action plan implemented to address the KPI for alarm call handling and other identified areas; and**
- c) Noted the decision to no longer proceed with accreditation.**

14. Mental Welfare Commission Local Visits 2025

Kelda Gaffney presented the findings from the Mental Welfare Commission local visit reports to mental health inpatient wards in Glasgow City, published during the period 1st January 2025 to 31st December 2025.

The Chair noted that there were 76 recommendations in total and sought assurance on the level of confidence in delivering these. Officers confirmed that action plans are in place to address each recommendation to ensure all actions are progressed.

Members reflected on the complexity of the issues discussed today in relation to robust pathways for mental health services, noting that substantial assurance has been provided by Officers, reinforcing the commitment to delivering the best possible service to patients.

The IJB Finance, Audit and Scrutiny Committee:

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

15. Social Care Purchased Services – Review Activity 2025

Rachel Mackay presented a report advising of the activity of the HSCP Commissioning Team in respect of Service Reviews of social care purchased services in 2025 and planned activity for 2026.

The Chair highlighted the Older People 24-hour service reviews and asked for further detail on the reason for the delays and a timescale for concluding. Officers advised that the unit supports very complex adults and is dependent

on several types of social work reviews. Assurance was provided that this is nearing completion.

Members asked for clarity on where decisions are made when the outcome of a review leads to the decommissioning of a service. Officers advised that some contracts come to a natural end, and others relate to individuals where services are put in place to meet care needs for a specific time. These are agreed at the HSCP Business Meeting under delegated authority arrangements. The Depute Chief Officer, Finance and Resources added that a review is being undertaken following an audit recommendation to ensure the process is operating appropriately.

The IJB Finance, Audit and Scrutiny Committee:

- a) Noted the contents of the report; and**
- b) Noted that service reviews are only one element of the significant efforts undertaken to ensure high-quality provision of social care and support for the city.**

16. Clinical and Professional Quarterly Assurance Statement

Kelda Gaffney, Chief Social Work Officer (CSWO), presented the quarterly clinical and professional assurance statement for the period 1st October 2025 – 31st December 2025.

The CSWO highlighted that she was incredibly proud of the positive inspection reports and noted thanks to the teams involved.

The Chair thanked Officers for the comprehensive report and the assurance it provides to FASC.

The IJB Finance, Audit and Scrutiny Committee:

- a) Considered and noted the report.**

17. Risk Management Quarterly Update – Q3 2025-26

Steven Blair presented a report updating on the status of the IJB's risk register and to highlight key operational risks being managed in the Glasgow City Health and Social Care Partnership. The report covers the review carried out in respect of changes to risk in Quarter 3 (1 October 2025 to 31 December 2025).

Officers advised that there were no existing risk scores that increased and 1 existing risk score decreased on the IJB register during Q3. The risk that decreased was in relation to prescribing expenditure, noting that as at 31st October 2025 lower unit price combined with lower volume growth and delivery of actions in the prescribing savings plan has resulted in significantly improved projections, currently towards an underspend, therefore reducing

this risk. This is still being treated cautiously, and savings and efficiency actions continue.

The Chair highlighted that one additional piece of work remained outstanding from the IJB Risk Management Policy & Strategy Review Short-Life Working Group (SLWG) relating to the risk taxonomy (i.e. risk domains/categories) as part of its work to update the risk and strategy. It was confirmed that the Committee requires to approve the work before it proceeds to the IJB Development Session and then to the IJB for final approval.

The IJB Finance, Audit and Scrutiny Committee:

- a) Noted the contents of the report;**
- b) Noted the risks on the IJB Risk Register at the end of Quarter 3 2025-26; and**
- c) Noted the update from the IJB Risk Policy Short Life Working Group.**

18. Next Meeting

The next meeting was noted as Wednesday 15th April 2026 at 9.30am.

The Chair advised that Bailie Ann Jenkins is standing down from the IJB and the Vice Chair role on the Committee and wished her well and thanked her for her contributions.