



Item No. 11

Meeting Date: Wednesday 15th April 2026

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

Report By: Geraldine Collier, Assistant Chief Officer, Human Resources

Contact: Catherine Young, Principal Officer, Health and Safety

Phone: 07766776127

**Health and Safety Annual Report
January 2025 - December 2025**

Purpose of Report:	To provide the IJB Finance, Audit and Scrutiny Committee with an overview of the main Health & Safety challenges faced in 2025, performance and notable key issues, and the implications for the HSCP.
---------------------------	--

Background/Engagement:	<p>This is the sixth Annual Report for Health & Safety provided to the IJB Finance, Audit and Scrutiny Committee.</p> <p>Two Management Systems continue to be used in the governing of Health & Safety as part of the partnership: Glasgow City Council’s and NHS GG&C’s. Both employers have a duty of care for the health and safety of all HSCP employees, service users and others who may be affected by their operations, acts, and omissions.</p>
-------------------------------	---

Governance Route:	<p>The matters contained within this paper have been previously considered by the following group(s) as part of its development.</p> <p>HSCP Senior Management Team <input type="checkbox"/></p> <p>Council Corporate Management Team <input type="checkbox"/></p> <p>Health Board Corporate Management Team <input type="checkbox"/></p> <p>Council Committee <input type="checkbox"/></p> <p>Update requested by IJB <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p> <p>Not Applicable <input checked="" type="checkbox"/></p>
--------------------------	---

OFFICIAL

Recommendations:	The IJB Finance, Audit and Scrutiny Committee is asked to: a) Note the findings made within this report and the data attached; and b) Note the main challenges faced throughout the year, and current service and future developments.
-------------------------	--

Relevance to Integration Joint Board Strategic Plan:
<p>Good Health & Safety management and improvement is key to the operation of the IJB/HSCP in meeting its relevant statutory requirements. GCHSCP strives to prevent employees from harm whilst at work, as well as service users whilst engaging with services, and others whilst in our care, so far as is reasonably practicable.</p> <p>GCC and NHSGGC have a duty to ensure that employees have the correct information, instruction, and training to enable them to carry out their work safely and that others are not impacted by our acts or omissions.</p> <p>Accident and incident reduction, and subsequently minimising injury, lost time and attributable absence is crucial, as is the prevention both civil and criminal prosecution.</p> <p>This work in particular supports Partnership Priority 5 – A Healthy, Valued and Supported Workforce.</p>

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	This report is relevant in supporting GCHSCP in achieving all nine health and wellbeing outcomes, however outcomes 7, 8 and 9 are directly related.
--	---

Personnel:	All employees throughout GCHSCP have responsibilities for Health & Safety. All managers have a responsibility for contributing to the management and ongoing improvement of this.
-------------------	---

Carers:	N/A
----------------	-----

Provider Organisations:	N/A
--------------------------------	-----

Equalities:	N/A
--------------------	-----

Fairer Scotland Compliance:	N/A
------------------------------------	-----

Financial:	The report contains potential financial implications for the Health and Social Care Partnership. Criminal and Civil proceedings which may be attributed to accidents and incidents at work may have financial costs associated.
-------------------	---

Legal:	Failure to adhere to Health & Safety law and comply with the requirements of GCC and NHS GG&C Health &
---------------	--

OFFICIAL

OFFICIAL

	Safety Management systems have the potential to have criminal and civil legal implications to the organisations.
Economic Impact:	N/A
Sustainability:	N/A
Sustainable Procurement and Article 19:	N/A
Risk Implications:	<p>The effective management of Health & Safety is pertinent in managing the risks associated with the operations and services operated by the HSCP. This includes ensuring that all those acting on behalf of the HSCP continue to have the relevant information, instruction, and training to enable them to carry out their job safely, and ensuring all reasonably foreseeable hazards are assessed, with suitable and sufficient control measures in place.</p> <p>Failure to effectively manage health and safety may result in accidents, injury, ill-health, workplace fatalities, and both civil and criminal prosecutions.</p> <p>There are moral, legal, and financial obligations to manage health and safety, whilst continuing to maintain the reputation of GCHSCP.</p>
Implications for Glasgow City Council:	<p>Glasgow City Council have the legal responsibility to manage the health and safety of their employees as well as those who may be affected by their operations. Failure to manage this effectively may result in accident and incidents, potential legal and financial implications, in addition to having an impact on the reputation of Glasgow City Council.</p>
Implications for NHS Greater Glasgow & Clyde:	<p>NHS GG&C have the same legal responsibility for the management of health and safety. Failure to manage this effectively may result in accidents and incidents, legal and financial implications, in addition to reputational impact.</p>

1. Purpose of the report

- 1.1. The purpose of this report is to provide the IJB Finance, Audit and Scrutiny Committee with an overview of the main Health & Safety challenges faced in 2025, data on performance and future planning.

OFFICIAL

- 1.2. This report will provide overview from both the Glasgow City Council and NHS Health and Safety teams, outlining the functioning of their health and safety management systems throughout 2025. It will give an overview of the challenges, work completed, and the focus for the coming year.

2. GCC Social Work Services Activity Jan - Dec 2025

2.1. Management Standards

The review of all Health and Safety Management Standards (the policies and procedures outlining how the service complies with their legal Health and Safety duties), continued in 2025 and 10 Management Standards were updated in line with current processes and regulations.

These where:

- Control of Substances Hazardous to Health
- Electricity
- Gas
- Smoke Free Workplace
- Working at Height
- Lone Working
- Incident Reporting and Investigation
- Manual Handling
- New and Expectant Mothers
- Vibration

All Management Standards are now up-to-date and will be subject to a 3-yearly review or update in line with changes in process, regulation, or best practice guidelines.

Throughout the year the team continued to drive compliance and improvement throughout the service through pro-active monitoring and engagement with key stakeholders and staff.

2.2. Commissioning - 2026 Framework

The Framework for Social Care Support underwent review in 2025. As part of this process the Health and Safety Team worked closely with commissioning to develop the Service Specification and deliver a Talking Tender session to providers. The team also carried out a significant number of Health and Safety evaluations within a tight timeframe. This was a considerable undertaking to ensure that commissioning deadlines were achieved. The 2026 Flexible Purchasing Framework is now live.

2.3. Communication Strategy

The 2025 communication plan was implemented and included monthly Safety Spotlights designed to deliver targeted messaging for staff with specific roles and responsibilities. Key topics covered included duties of employer and employees' duties, accident reporting and seasonal guidance such as working in warm weather and winter weather preparedness. This approach will continue throughout 2026.

OFFICIAL

2.4. Audit and Fire Risk Assessment Compliance

The team continued to deliver their annual Audit and Fire Safety Risk Assessment program to ensure ongoing compliance was managed and monitored across the service. Focus has remained on residential premises, where enhanced oversight is essential to meet legislative requirements and support service delivery.

2.5. Care Home Refurbishments

The team played a key role in supporting management through the extensive refurbishment of Riverside Care Home, which required monthly assessment of fire risk strategies to ensure the smooth management of the project alongside the operation of the care home. Victoria Gardens Care Home also underwent a smaller scale refurbishment of some bedrooms. These works have now concluded, and the team will continue to support management within both homes as they return to full capacity.

2.6. Succession Planning

As highlighted in last year's report, the team continues to progress the development of the first Trainee Health and Safety Advisor role – a post designed to support long-term succession planning within the service. The role combines structured workplace experience within externally accredited qualifications to create a clear development pathway.

2.7 The Trainee has now successfully achieved the National Examination Board in Occupational Safety and Health (NEBOSH) General Certificate, progressing more quickly than anticipated within the development framework. They are now successfully contributing to core team functions, including training delivery, statistical analysis, the development of building risk assessments and have taken on additional responsibilities such as monitoring health and safety within the Area Services.

3. **NHSGGC H&S Team Activities Jan – Dec 2025**

3.1 The Safety Health and Wellbeing (SHaW) Task Calendar

The SHaW Task calendar provides a structured framework for the owners of Health and Safety Management Manuals to work through four activities per month which are designed to maintain compliance with the range of legal and policy related responsibilities placed on Directors, Chief Officers, Managers and Employees of NHSGGC.

Compliance with the Task Calendar continues to be an area of focus. We have streamlined and reduced the number of departments and are seeing improvement in the use of this functionality. We will continue to work to improve this further throughout 2026.

3.2 Self-audits

Glasgow City HSCP have completed 546 self-audits. This brings an average Self Audit score of 94%. Table 1 shows the breakdown by audit type.

OFFICIAL

Row Labels	Sum of Count	Average of Totals
SHaW - Slips, Trips & Fall Self-Audit	27	100
SHaW - Skin Health - Self-Audit	29	99
SHaW - Moving & Handling Self-Audit	39	97
SHaW - Self harm- Ligation Risk Self-Audit	54	97
SHaW - Sharps Audit - Self-Audit	41	97
SHaW - PPE - Self-Audit	46	96
SHaW - Violence Reduction Self-Audit	146	95
SHaW - COSHH Self-Audit	55	94
SHaW - DSE Self-Audit	66	87
SHaW - First Aid - Self-Audit	43	82
Grand Total	546	94

Table 1

3.3 Revised Stress Guided Conversation Toolkit.

This continues to be a proactive and reactive tool to support managers work with employees who are absent or indicating intentions to be so due to work-related stress.

NHSGGC Health & Safety Policy was reviewed and launched and with the launch of 'Once for Scotland' policies the current policies for Stress, Violence and Aggression, Lone Workers and Control of Substances Hazardous to Health (COSHH) are also being reviewed and developed into a SHaW Standard. This streamlines our policies and ensures that arrangements and responsibilities within the GGC policies are strengthened by becoming a SHaW Standard.

3.4 Self-Harm and Suicide Prevention

The GGC Suicide Risk & Design Standards Group have taken the learning points from the Dykebar suicide in 2020 and incorporated into the NHSGGC Suicide Reduction Strategic Action Plan. All activities with that plan have now been delivered.

A significant financial investment has been made by NHSGGC to allow Capital Planning projects to continue and remove foreseeable risks relating to ligature points. This phased programme of works also allows the identified wards in our Mental Health settings to be upgraded and modernised. The wards that have been upgraded so far include Leverdale Ward 4A, 4B and 3B. We are currently on site at Leverdale Ward 3A and rolling into Armadale Ward in Stobhill Hospital and Dykebar Hospital South Ward. These are planned to be completed by August 2026.

These works will continue through to 2027, and the next wards being considered using a risk-based approach are Leverdale Intensive Psychiatric Care Unit, Portree and Struan Wards in Stobhill Hospital. These works also link in with the use of the Nairn Ward which continues to be used to decant ward for those who are to be upgraded.

A secondary programme of ligature reduction works is also in place to remove fixed and mobile ligature points in our Emergency Departments. The ligature reduction works are located at the QEUH / RHC / RAH / IRH & GRI hospitals and at three of the hospitals (The IRH / RAH & GRI), the works include the public WCs located within the patient waiting areas.

4. Accident and Incidents GCC (Jan – December 2025)

4.1 Location and causes of incidents

In 2025, 307 incidents were recorded where the injured or affected person was a GCC employee. This figure does not include incidences of violence (see 4.3). These figures demonstrate an overall 28% increase in incidents from 2024 and Children’s Residential and Home Care Services have seen the largest rise in incidents table 2 outlines the breakdown of incidents by care sector.

There were twice as many incidents reported in Children’s Residential Services compared to 2024. This increase is primarily associated with incidents involving children under seven years of age and related behaviours, including staff providing supportive interventions and occurrences of horseplay not including violence.

As previously reported, the large proportion of the workforce operating outdoors in varying weather conditions continues to contribute to the risk of slips and trips leading to falls, with most incidents occurring within our Home Care Service. Falls whilst ascending and descending also predominately arise in Home Care, often when staff are entering or leaving Services Users homes. Whilst some incidents are slips and trips others are attributable to loss of footing or missed steps, often linked to brief lapses in concentration. Slip and fall incidents account for 50% of all incidents reported Care Services with two-thirds occurring between Nov - Jan.

Table 2

GCC Employee Incidents	2024	2025	Variance
Childrens Residential	20	40	↑
Home Care	131	171	↑
Older People Residential	32	40	↑
Homelessness, CJ & Asylum	7	6	↓
Community Equipment Store	2	8	↑
TaSS	0	2	↑
Alarm Response Centre	5	8	↑
OP Day Care	8	11	↑
South Area Services	0	4	↑
North West Area Services	5	3	↓
North East Area Services	6	4	↓
Centre Services	2	3	↑
Outdoor Resource Centre	3	0	↓
Totals	221	307	↑

↓ Denotes decrease in no. of incidents ↑ Denotes increase in no. of incidents - Denotes no change in no. of incidents

The top 4 causes of incidents remain consistent with previous years; slips, trips, and falls, injured whilst moving and handling people, falls whilst ascending and descending and collision with object/fixture.

Figure 1 shows the trend of these incidents over the past 3 years.

OFFICIAL

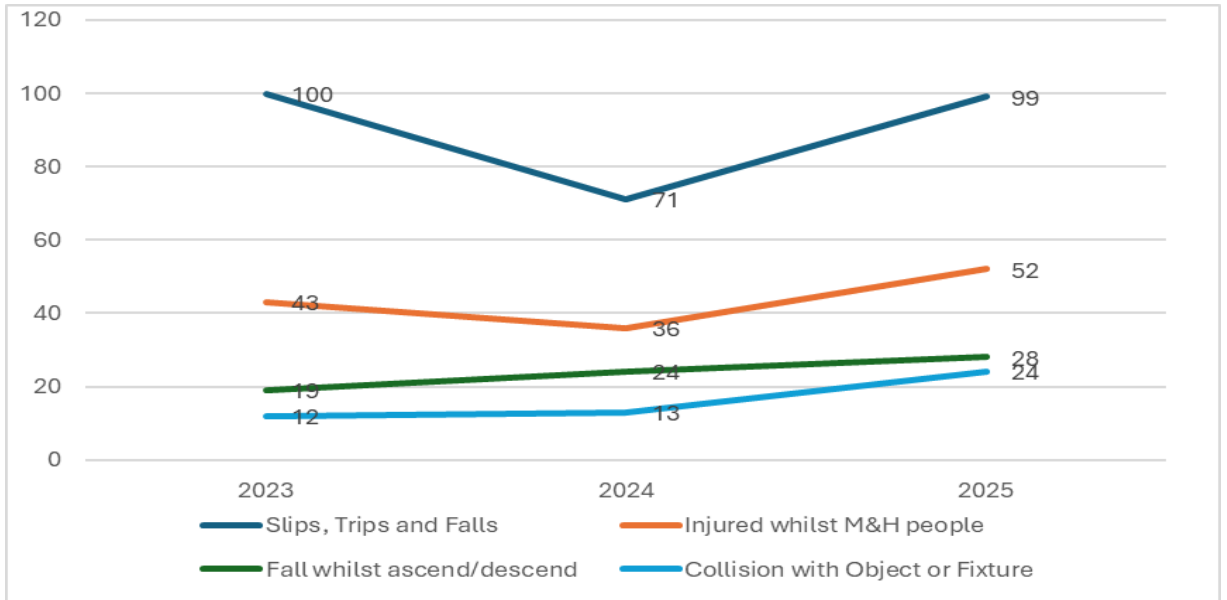


Figure 1

4.2 RIDDOR Reportable Incidents

A total of 32 incidents were reported to the Health and Safety Executive (HSE) where the injured person was an employee under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR). These were reportable either through resulting in an absence over 7 days, or for a Specified Major Injury. Figure 2 demonstrates the trend over the last three years.

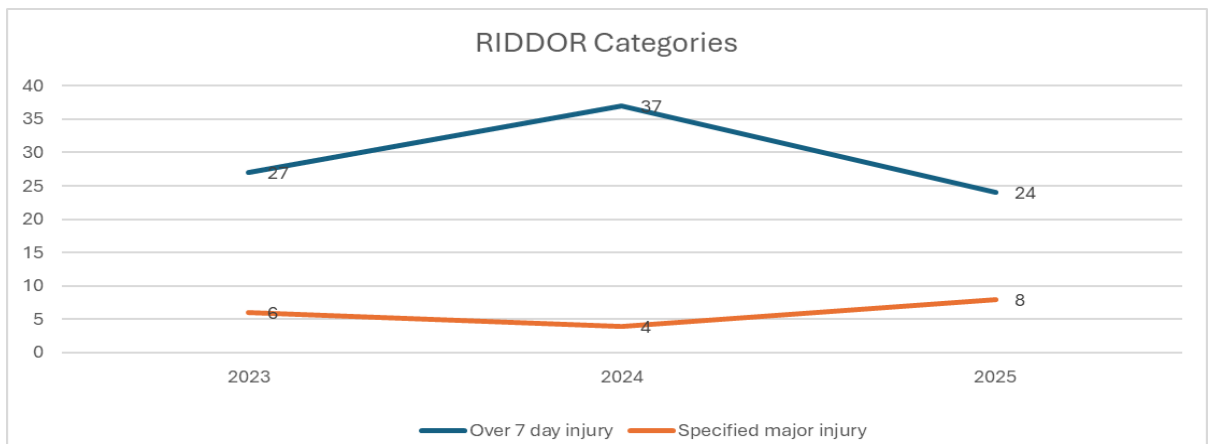


Figure 2

Figure 3 outlines the type of incidents that resulted in a RIDDOR reportable event.

Physical Violence remains the leading type of incident, however, there has been a considerable reduction in the number of violence-related incidents compared to 2024. This reduction is predominately within Children’s Residential and links to the Nurture Approach being undertaken in the service.

Slip, Trip and Fall along with Falls whilst Ascending or Descending, are the next most common incident type with a notable increase in Falls whilst Ascending or Descending. More than half of these fall-related incidents occurred during the winter months and were associated with periods of inclement weather.

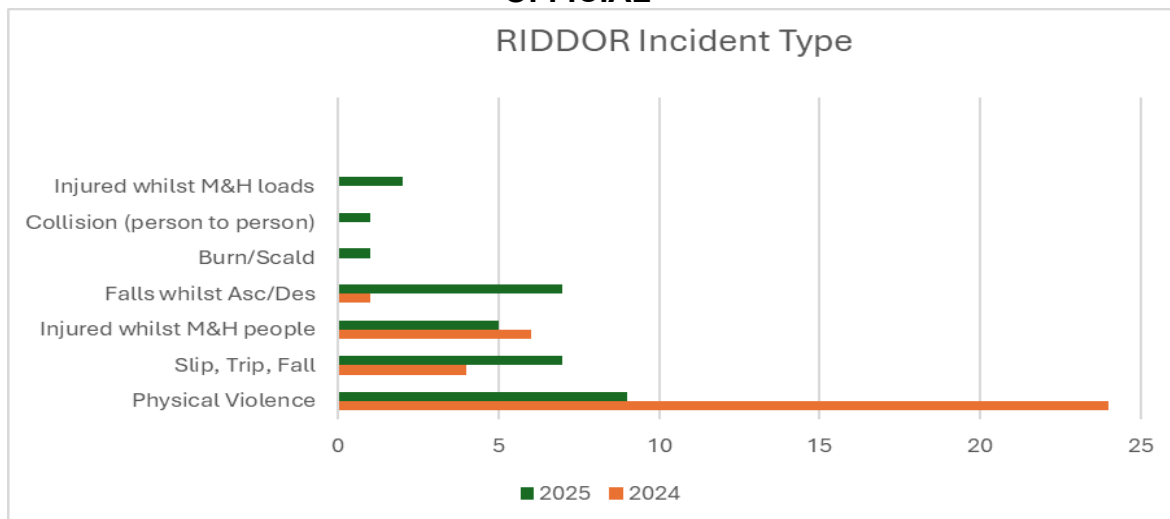


Figure 3

4.3 Violence

1337 Incidences of Violence were recorded where the employee was deemed to be the affected person: an overall reduction in 141 from last year. Table 3 demonstrates violent incidents by area, and the variance from 2024.

Table 3

Area of Business	2024	2025	Variance
Children’s Residential	702	597	↓
Home Care	250	271	↑
Older People Residential	383	304	↓
Homelessness, CJ & Asylum	53	70	↑
Community Equipment Store	1	1	-
TaSS	1	5	↑
Alarm Response Centre	9	9	-
OP Day Care	14	14	-
South Area Services	30	25	↓
North West Area Services	13	20	↑
North East Area Services	17	21	↑
Centre Services	3	0	↓
Outdoor Resource Centre	2	0	↓
Totals	1478	1337	↓

↓ Denotes decrease in no. of incidents ↑ Denotes increase in no. of incidents - Denotes no change in no. of incidents

Children’s Residential Services have continued to deliver a Nurture Framework, incorporating nurturing principles such as the importance of transitions, understanding behaviour as a form of communication and promoting wellbeing. Since its introduction in 2023, there has been a notable reduction in violent incidents within Children’s Residential Services.

Figure 4 indicates the breakdown in the type of violent incidents across GCC for 2025.

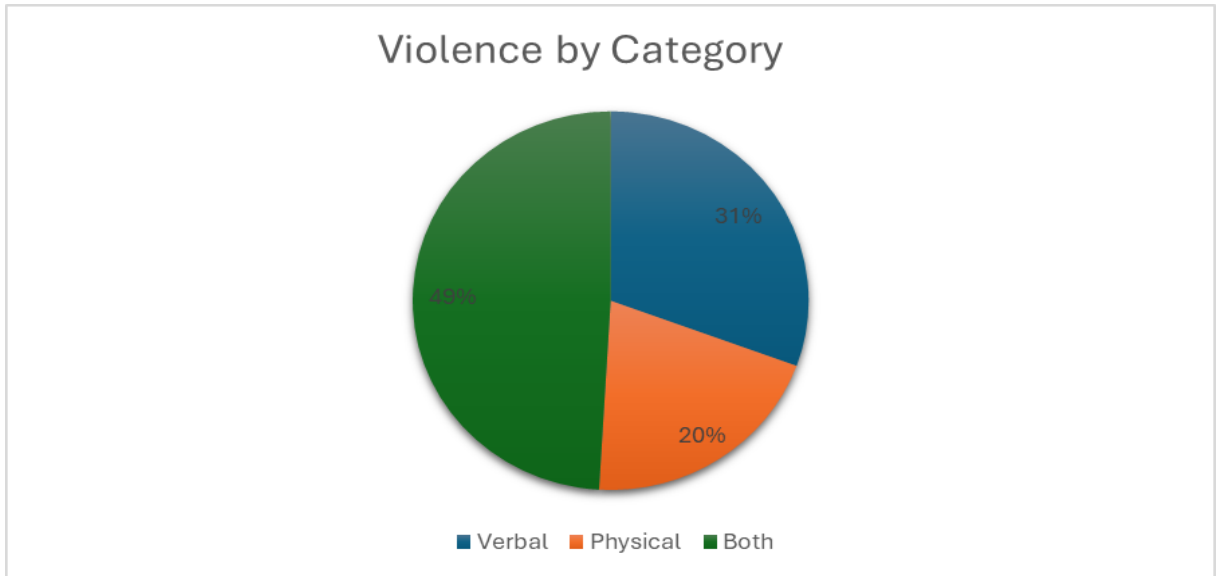


Figure 4

4.4 Fire and False Alarms

In 2025, a total of 133 False Alarms and 33 Fire Events were recorded. False alarms occurred predominantly within Children’s Residential premises, with the leading cause as malicious or deliberate activation of the fire alarm. The reasons for false alarms and fire events remain consistent with previous years and the overall number of fire events continues to show a declining trend.

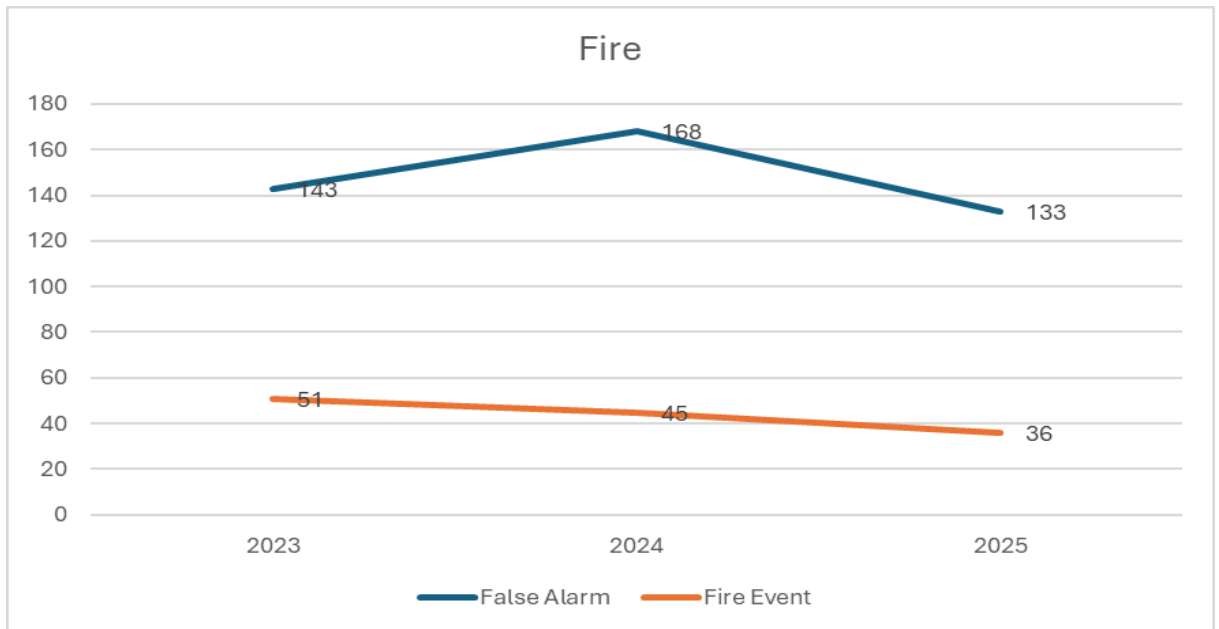


Figure 5

4.5 Incident Reporting System

HandS Incident Reporting System User briefings and Managers briefings continue to be delivered via Microsoft Teams, with 39 sessions carried out throughout the year. These short, focused sessions continue to strengthen engagement with managers and staff reinforcing the importance of incident reporting, the key information that must be recorded, and how to manage these incidents. A total of 234 staff members have attended these sessions.

5 Accident and Incidents for NHS GG&C (Jan-Dec 2025)

5.1 The total number of recorded incidents involving NHS GG&C employees only in 2025 was 2866, which is an increase of 11% from 2024. Violence remains the most common type of incident accounting for 2291 incidents. Incidents involving sharps are also notable, reflecting the high level of work activity involving needles, a further breakdown of these incidents is shown in 5.3.

Table 4 highlights the year-on-year incidents per Glasgow City HSCP sectors.

	2024	2025	Variance
Glasgow City HSCP - Corporate	42	53	-21%
Glasgow City HSCP - North East Sector	748	866	-14%
Glasgow City HSCP - North West Sector	807	936	-14%
Glasgow City HSCP - South Sector	965	1011	-5%
Total	2562	2866	-11%

Table 4

5.2 Violence and Aggression

Figure 5 demonstrates 3500 verbal and physical abuse incidents recorded against employees, people and others relating to Violence and Aggression in 2025 in Datix. This includes patient on patient violence, making this the most common type of incident reported. This is an increase of 431 reported incidents from 2024.

There have been increases in incidents across four of the top five wards. The largest rises were recorded in Cuthbertson House (+134), Jura Ward (+120) and Portree Ward (+62). Banff Ward experienced a smaller increase of 18 incidents, while Intensive Psychiatric Care Unit was the only area to show an improvement, reporting 9 fewer incidents than last year.

Regarding incident types, 2025 seen notable increases compared to 2024, including:

- 104 incidents where patients physically assaulted staff,
- 99 threats of physical violence
- 79 incidents of verbal abuse
- 55 incidents of inappropriate behaviour
- 46 incidents were patients physically assaulted other individuals

In 2025 the Acute Violence Reduction (AVR) Team delivered Breakaway Skills training to 55 staff. Although Sandyford does not require physical skills training in accordance with it's their Training Needs Analysis (TNA), the AVR Team provided a series of personal safety and incident-reporting awareness sessions to Sandyford during 2025. The staff group trained predominately included district nursing and treatment rooms, dental staff, and police custody staff, reflecting the areas where Breakaway skills were assessed as most operationally necessary.

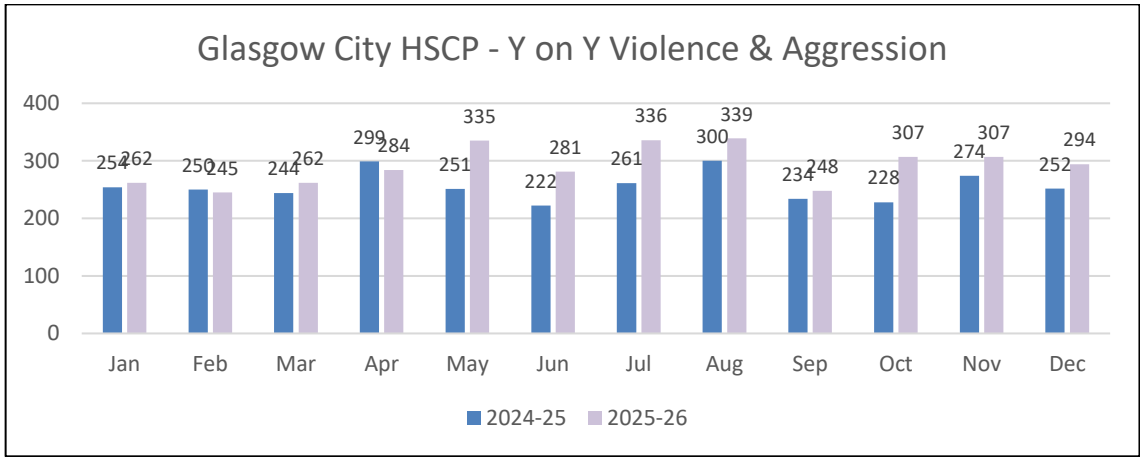


Figure 5

5.3 Sharps

Sharps is the word used to describe equipment used to treat patients which have the risk of puncturing the skin. The main type of “Sharps” injuries are related to the storage, use and disposal of needlesticks.

Figure 6 highlights an increase in sharps incidents by 22 from 2024.

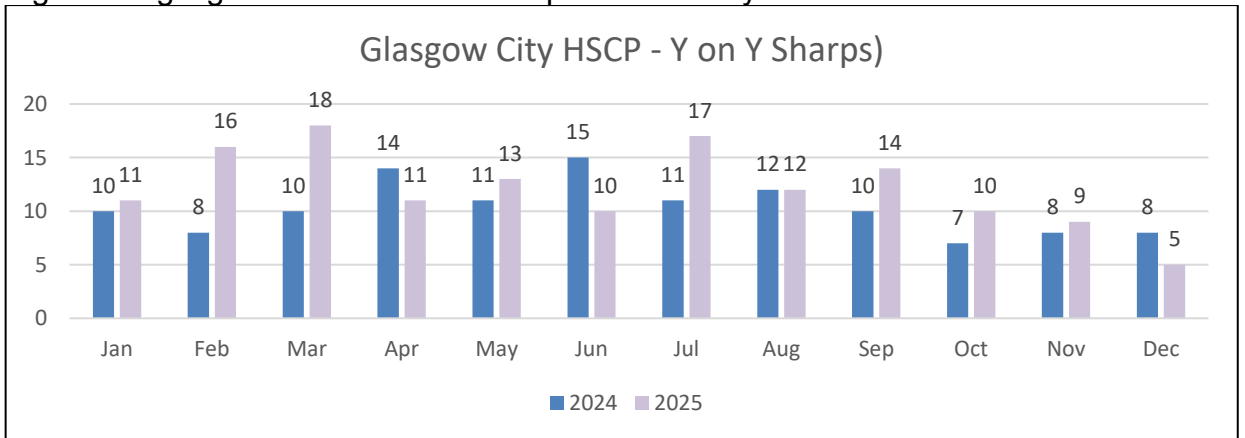


Figure 6

5.4 Falls

Falls incidents capture all patients and staff falls at work, and in 2025 the total amount of employee and patient falls was 1426 - an increase in 26 falls from 2024.

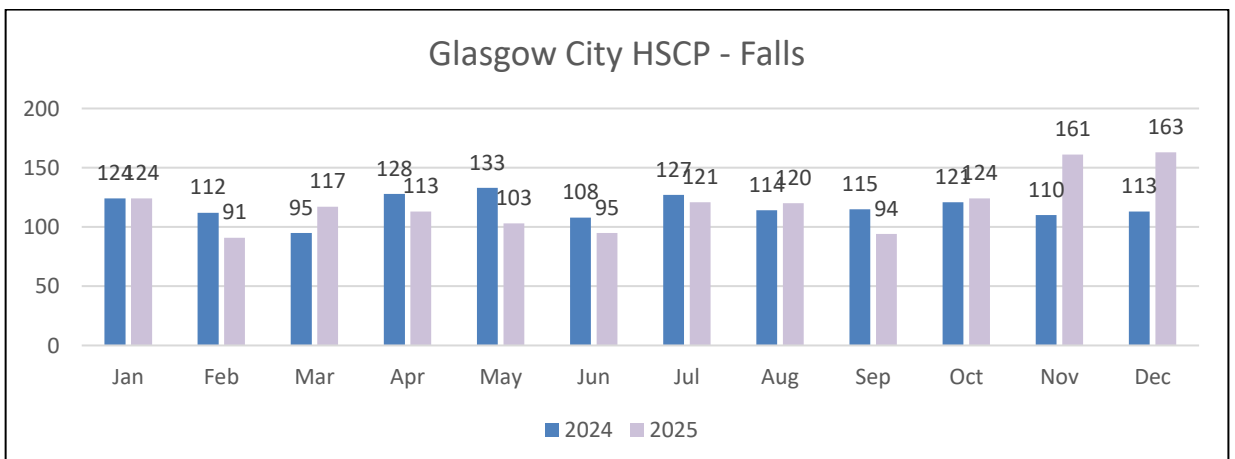


Figure 7

5.5 Moving and Handling

There have been 28 Moving and Handling incidents in 2025, an increase of 2 incidents from 2024.

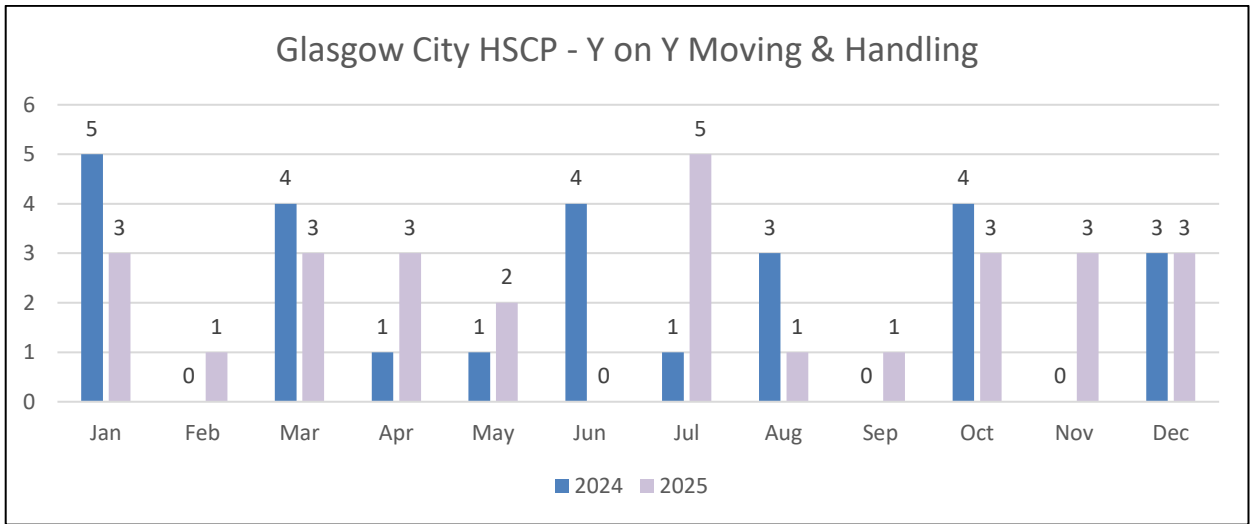


Figure 8

5.6 RIDDOR

Figure 9 demonstrates the 29 RIDDOR reportable incidents that were reported to the HSE in 2025 matching 29 from 2024.

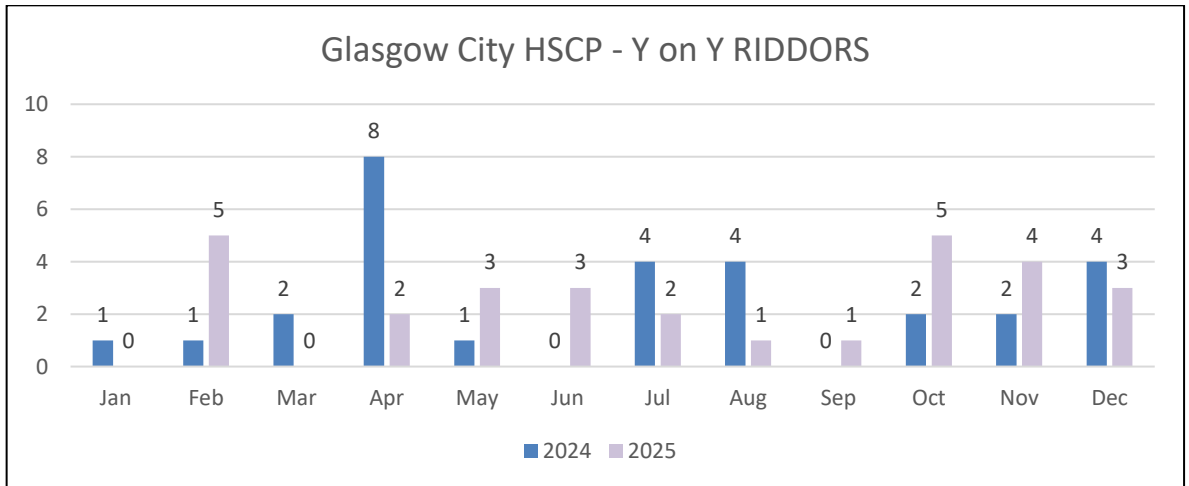


Figure 9

6 **Notable Incidents & Enforcing Authority Involvement GCC**

6.1 There have been no notable incidents which have involved any investigations by the HSE in 2025.

7. **Notable incidents & Enforcing Authority Involvement NHS GG&C**

7.1 There have been no notable incidents which have involved any investigations by the HSE in 2025.

OFFICIAL

8 Audits and Fire Safety Risk Assessments GCC

8.1 In 2025, 24 audits were carried out by the Health and Safety Team most of which were within the residential homes.

8.2 All audits are scored, and targeted improvement areas have been established for each service sector. The average scores before manager’s response, and after manager’s response are outlined in the table below.

	Audit compliance 2025		2024
	Before Managers Response	After Managers Response	After Managers Response
Children's Residential	80%	91%	82%
Homelessness Residential	94%	98%	94%
Older People's Residential	79%	87%	93%
Older People Day Care	84%	93%	83%
Overall Average Score	84%	92%	88%

Table 5

8.3 The figures in Table 5 demonstrate an overall improvement in average scores from audits from 2024. In 2024 the average score ‘Before Managers Response’ was 79%, and ‘After Managers Response’ was 88%. This is positive reassurance that there have been improvements across the service in managing health and safety.

9 Audits and Fire Safety Risk Assessments NHS GGC

9.1. SHaW Audits

These are undertaken by the four members of the SHaW team who are aligned to Glasgow City HSCP. They have completed 98 bringing an average score of 86%.

Row Labels	Sum of Count	Average of Totals
SHaW - COSHH Audit	2	100
SHaW - First Aid - Audit	1	100
SHaW - Lone Working Audit	3	100
SHaW - Skin Health Audit	1	100
SHaW - Moving & Handling Audit	15	96
SHaW - Slips, Trips & Falls Audit	17	86
SHaW - Sharps Audit	14	85
SHaW - Violence Reduction Audit	21	83
SHaW - Safety Management Audit	5	82
SHaW - DSE Audit	13	77
SHaW - Self Harm- Ligature Risk Audit	4	68
Grand Total	96	86

Table 5

To understand the range between the average scores of the Self Audits and SHaW Audits, it requires at local level a deeper look into the actual scores of the audit type. As an example, there is a range of 29% between the two types of audits for SHaW and Self-Harm – Ligature risk audit. Bearing in mind the questions, guidance and scoring are replicated in each audit type.

10. Training GCC

10.1. Course attendance

A total of 73 training courses were carried out by the Health and Safety Team in 2025. 687 people were trained as part of this, an average of 9 people per course.

A review of the training needs is scheduled for 2026 and the findings of this will inform revisions to the programme to ensure it continues to align with service requirements and support staff competence.

10.2. Course non-attendance

A total of 282 attendees failed to attend scheduled training courses, an average of 4 non-attendees per course. This is a slight increase from the average 3 non-attendees per course in 2024.

The introduction of the Bookwhen booking system has strengthened the monitoring and management of course attendance, enabling proactive cancellation of courses where uptake is low, reducing the need for last-minute adjustments or cancellations.

Increased visibility of booking trends has supported responsive planning of the training programme, including the scheduling of additional courses when existing courses have reached capacity.

11. Training NHS GG&C

11.1. Figure 10 shows sharps training compliance across the year and the gradual incremental improvement from 71% in January 2025, compared with 75% at the end of the year. Additional month on month improvements are predicted in all HSE training as the year progresses.

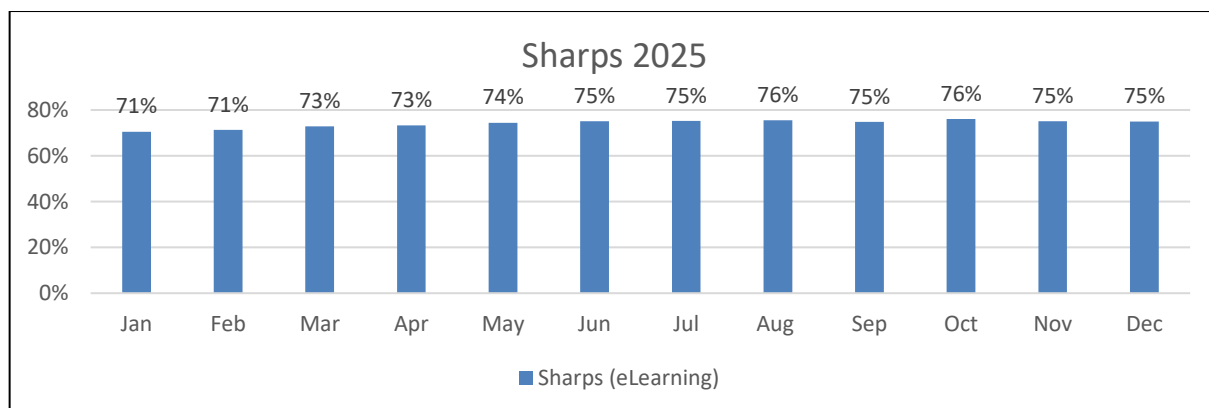


Figure 10

11.2. Similar to above, compliance for Falls training has also seen improvement across the year from 66% in January 2025 to 72% in December 2025.

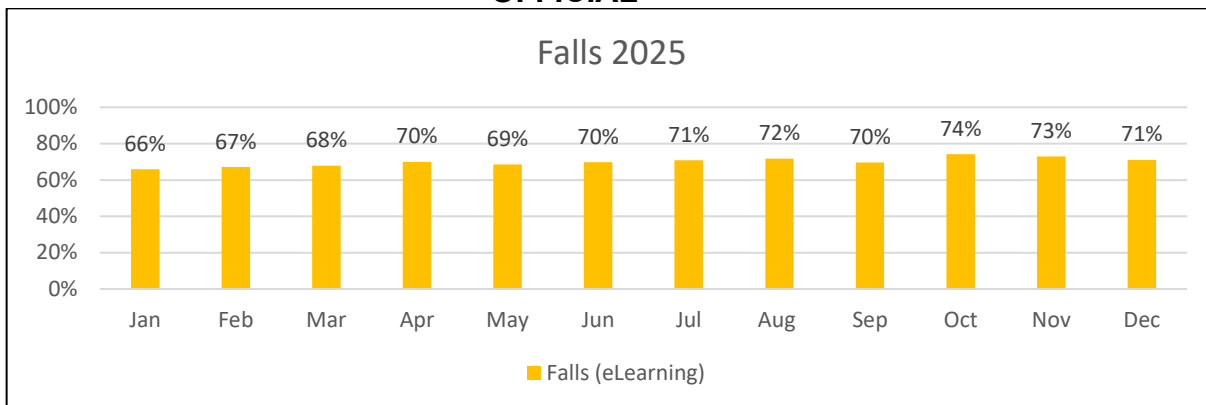


Figure 11

11.3 Moving and Handling (competency assessment) training compliance has seen a reduction in compliance across the year. Starting the year at 71% and dipping in April when large cohorts expired, gradually improving to 64% across the remainder of the year. This is an area of focus for all teams to improve compliance over the course of 2026/27

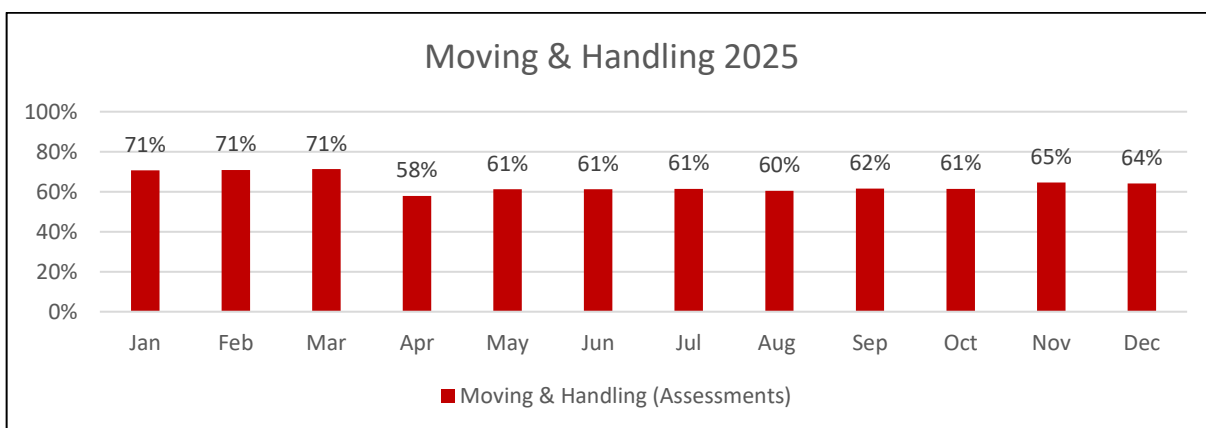


Figure 12

11.4 Ligature Risk

This is a new metric introduced by GGC which has now been incorporated into the existing suite of training compliance measures. Compliance has only been measured since November 2025, and as of December 2025 sits at 63%

11.5 The NHS GGC Board expects that all staff who are in scope must complete the full range of training. The completion of training has also been captured as part of the SHaW Roles and Responsibilities documents with the requirement to achieve 100% compliance and performance is reflected in the dedicated monthly Digital Safety Health and Wellbeing Performance Storyboards.

11.6 To support the improvement in training compliance, NHS GGC Workforce Information team provides the names of the employees who are in scope and those who have not completed the training for Sharps, Falls, Moving & Handling and Ligature Risk.

11.7 Table 7 shows the annual average compliance score against all 9 training modules throughout the year. All modules continue to have compliance scores above 80%. Fire Safety Statutory/Mandatory training is the lowest scoring 84.10% and Info Governance the highest at 92%

OFFICIAL

Glasgow City HSCP

Statutory Mandatory Training January - December 2025

Month	Module								
	Equality & Diversity	Fire Safety	Health & Safety	Infec. Control	Info Governance	Manual Handling	Public Protection	Security & Threat	Violence & Aggression
Jan-25	90.5%	82.6%	91.1%	89.9%	91.0%	90.5%	88.9%	90.5%	90.9%
Feb-25	90.5%	82.3%	91.2%	89.9%	91.2%	90.5%	88.9%	90.4%	91.0%
Mar-25	91.0%	84.2%	91.6%	90.4%	92.1%	91.1%	89.5%	90.9%	91.5%
Apr-25	90.5%	84.3%	91.5%	89.8%	91.6%	90.6%	89.0%	90.7%	91.2%
May-25	90.9%	85.4%	91.6%	89.8%	91.9%	90.9%	89.5%	90.6%	91.4%
Jun-25	91.1%	85.2%	91.5%	89.8%	92.0%	90.7%	89.3%	90.4%	91.3%
Jul-25	91.1%	84.6%	91.6%	90.1%	92.5%	91.1%	89.9%	90.5%	91.5%
Aug-25	91.1%	84.2%	91.5%	90.2%	92.6%	91.2%	89.5%	90.4%	91.8%
Sep-25	90.3%	83.1%	90.5%	89.4%	91.8%	90.4%	88.5%	88.1%	90.8%
Oct-25	89.6%	83.5%	89.6%	88.8%	91.4%	90.0%	87.8%	87.5%	90.2%
Nov-25	89.1%	83.2%	89.6%	88.7%	91.6%	89.7%	87.3%	86.8%	90.1%
Dec-25	89.2%	83.6%	89.8%	88.7%	91.9%	89.8%	87.2%	87.3%	90.3%
Average	90.40%	84.10%	91%	90%	92%	91%	89.10%	90%	91%

Table 7

12. Priorities for GCC in 2026

12.1. A review will be undertaken of the arrangements in place that supported implementation of the Scottish Fire and Rescue Service (SFRS) Call Challenge process aimed at reducing unwanted fire alarm activations. This will include an assessment of the training provided to staff and the effectiveness of local fire safety management systems.

Following a recent fire event in the City Chambers the team will also work closely with Senior Management, staff and Trade Unions to ensure that robust arrangements are in place and that all relevant staff have the information required to fully implement local fire procedures.

12.2. Service Risk Assessment Working Groups will continue throughout 2026. The Health and Safety Team will provide ongoing support and guidance to Senior Management and staff within the working groups to ensure that suitable and sufficient risk assessment are in place across all areas of the service and accurately reflect the work carried out. Clear and up-to-date action-monitoring plans arising from these assessments will ensure that required actions are identified, prioritised and progressed appropriately.

12.3. The team will progress with the H&S communication strategy to enhance communication with all employees on key risks and addressing commonly asked questions, or commonly noted compliance gaps, this will include consideration of alternative methods of communication to ensure these communications reach all staff groups including those non-pc facing workers.

12.4. The H&S team will work with HR Colleagues and service areas to implement a programme of Occupational Stress Risk Assessments. These will be rolled out across the key service areas incorporating lessons learned from the pilot in Care Services. The team will support services to identify work-related stressors and where possible, develop and implement further mitigations or support.

OFFICIAL

It is anticipated that this will demonstrate the organisation's commitment to prevent work-related stress, promote workplace health and wellbeing and contribute to a reduction in any related absence.

13. Priorities for NHS GGC in 2026

- 13.1. The team will seek to promote the growth of the Health and Safety Culture by aligning Board processes with the HSCP structures to assist increasing the levels of compliance through the completion of the tasks within the SHaW Task Calendar, high-risk audit programme and use of the self-audits.
- 13.2. A new system called Positive Engagement Conversations (PECs) is being finalised. This is aimed at improving the Health and Safety Culture by providing senior leaders and managers the facility of recording conversations they have with staff on safe acts, unsafe acts, safe conditions or unsafe conditions. The objective is these conversations will be recorded and available to review on the dedicated PECs page of the Digital Health and Safety Storyboard.
- 13.3. There will be a continued focus on supporting and upskilling HR colleagues in the use of the Stress Guided Conversation toolkit. This proactive and reactive approach will support managers in the use of the toolkit with the aim to reduce the volume of psychological absence relating to anxiety, stress and depression through early intervention.
- 13.4. The service will strive to improve the competence of our workforce through completion of training programmes. This includes Stat Mandatory training and any other related Health and Safety training such as Risk Assessment, Violence Reduction and Control of Substances Hazardous to Health (CoSHH).
- 13.5. The team will work to expand on the digital journey simplifying how Safety Health and Wellbeing is managed by exploring how our current IT platforms can be utilised to reduce duplication.

14. Recommendations

- 14.1 The IJB Finance, Audit and Scrutiny Committee is asked to:
 - a) Note the findings made within this report and the data attached; and
 - b) Note the main challenges faced throughout the year, and current service and future developments.