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To: Glasgow City IJB Members

From: Pat Togher, Chief Officer, Glasgow City HSCP

Date: 23rd September 2026

Subject: Chief Officer Update – GCIJB 23-09-26

Delayed Discharges

Since the last meeting, it has continued to be busy in our acute system with some really notable pressures particularly in the first half of September, but we have been able to sustain our performance under 160 and the number on 21st September was 143.

We really want to keep up our strong commitment to performance in this area and have proposed a revised set of targets to NHSGGC, of 155 from 1 October 2026 and, should we prove able to sustain that, a further stretch target of 150 from 1 March 2027 after the winter period. To deliver this we've set out what enablers need to be in place, from continued Unscheduled Care funding to things like co-location of staff at the QEUH, and our proposals were well received by our NHSGGC colleagues.

Focussed work has continued on reducing Adults with Incapacity (AWI) delays and it currently sits very close to the 55 reported at the last meeting but when we analyse the data in detail, we can see a reduction over time in the past 18 months and a reduced number of hospital bed days lost to these types of delays. So, while we remain off the target of 40 that was previously set, we are still making good progress.

Homelessness

In the first 5 months of 2026/27, demand for homelessness services has reduced by 3.5% with the number of applications made between April – August falling from 3,224 in 2025/26 to 3,112 in 2026/27. As noted in previous updates, this reduction has been largely driven by a reduction in the number of applications from refugee households which have reduced, over the same period, from 1,394 applications in 2025/26 to 1,105 in 2026/27 - a reduction of 21%.

Glasgow has also witnessed reductions in the use of temporary accommodation with 4,791 households currently residing in temporary accommodation – falling slightly from 4,850 households at the time of the previous update in June 2026. In relation to hotel/bed and breakfast accommodation, there has also been a small reduction from 2,230 households to 2,167 over the same period. Whilst both these reductions in

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demand, and the use of temporary accommodation are welcome, it is too early to draw any definitive conclusions over whether this may be a longer-term trend.

The number of rough sleepers remains relatively steady with 27 individuals noted as sleeping rough in the week beginning 7th September 2026, down from 29 the previous week. The reasons for rough sleeping remain varied with 4 individuals noted as having No Recourse to Public Funds and other households refusing the offer of support at this time. Homelessness Services, alongside colleagues in the Simon Community, continue to offer advice and support where required.

Ongoing initiatives:

- Glasgow continues to work closely with the Scottish Government on the city's housing emergency using the Housing Emergency Action Plan to explore solutions and mitigations, as well as exploring areas where the Scottish Government can offer practical and policy support.
- Homelessness Services continue to work closely with Registered Social Landlords across the city, maintaining strong partnership arrangements and regular engagement in the face increasing public concern and protests relating to housing allocations.

Mental Health Inpatients

Mental Health inpatient services continue to experience significant pressure in relation to delayed discharges across both General Adult and Older People's Mental Health services. Encouragingly, there has been some improvement during September, with overall delayed discharges reducing from 56 recorded in August to 46 currently. This reflects ongoing work across Health and Social Care teams to improve discharge planning, strengthen patient flow, and reduce unnecessary lengths of stay.

In addition to the delayed discharge position outlined below, there are currently three people with a learning disability recorded as delayed discharges within General Adult mental health beds. Ongoing work is underway with the three learning disability delays in partnership with East Renfrewshire.

Delayed Discharge Position

Month	General Adult	OPMH	Total
June	26	26	52
July	27	28	55
August	22	34	56
Current (September)	19	27	46

Improvement Activity

A range of improvement actions continue across Mental Health services to address delayed discharge performance and support timely transitions from hospital care:

- Regular whole-system review of delayed discharge cases to identify and unblock barriers preventing discharge.

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- Strengthened partnership working between inpatient teams, community mental health services, social work services, housing providers, and commissioned services to support earlier discharge planning.
- Continued focus on reducing the number of people awaiting community-based supports, accommodation, or care arrangements where these are contributing to delays.
- Targeted work on our reporting systems capturing delays, using Trakcare through inpatients, community mental health services, social work services and commissioning systems.
- Ongoing scrutiny through Mental Health operational governance arrangements, with performance reviewed regularly to identify areas requiring additional support or escalation.
- Targeted work to improve patient flow and bed utilisation across General Adult and Older People's Mental Health services, helping ensure inpatient capacity remains available for those requiring admission.
- Continued oversight of individuals with highly complex needs, including those requiring specialist accommodation or tailored community support packages before discharge can safely proceed.

Overall Position

Whilst delayed discharge numbers remain higher than desired, recent reductions demonstrate some positive movement. The focus remains on sustaining this improvement trajectory, reducing avoidable delays, improving outcomes for individuals awaiting discharge, and ensuring inpatient beds are available for those requiring specialist mental health care. The Mental Health management team will continue to monitor performance closely and progress improvement actions in partnership with NHS, HSCP, housing and third-sector colleagues.