Item No: 16

Meeting Date: **Wednesday 25th November 2026**

Glasgow City Integration Joint Board

Report By: **Kelda Gaffney, Depute Chief Officer, Operations and Governance and Chief Social Work Officer**

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Chief Social Work Officer Annual Report 2025/26

Purpose of Report:	To present the annual report from the Chief Social Work Officer for the year 2025/26, prepared in line with Scottish Government guidance.

Background/Engagement:	The requirement for every local authority to appoint a professionally qualified Chief Social Work Officer is contained within Section 3 of the Social Work (Scotland) Act 1968. This is one of a number of statutory requirements in relation to posts, roles or duties with which local authorities must comply. The Chief Social Work Officer (CSWO) is required to produce an annual report, following guidance for submission to the Scottish Government.

Governance Route:	The matters contained within this paper have been previously considered by the following group(s) as part of its development. HSCP Senior Management Team ☒ Council Corporate Management Team ☐ Health Board Corporate Management Team ☐ Council Committee ☒ Wellbeing, Equalities, Communities, Culture and Engagement City Policy Committee Update requested by IJB ☐ Other ☒

	Social Work Professional Governance Board Not Applicable ☐
Recommendations:	The Integration Joint Board is asked to: a) Note that the Chief Social Work Officer report attached at Appendix 1; and b) Note the report has been submitted to the Scottish Government.

Relevance to Integration Joint Board Strategic Plan:

Delivery of effective social care services is fundamental to supporting the vision and key aims of the IJB's Strategic Plan.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	Supports achievement of all National Health & Wellbeing Outcomes
Personnel:	None
Carers:	None
Provider Organisations:	None
Equalities:	None
Fairer Scotland Compliance:	None
Financial:	None
Legal:	Local authorities are required to appoint a professionally qualified Chief Social Work Officer under Section 3 of the Social Work (Scotland) Act 1968. The duties of the CSWO include production of the annual Chief Social Work Officer's Report, which is presented to the local authority and shared with the Scottish Government.
Economic Impact:	None
Sustainability:	None
Sustainable Procurement and Article 19:	None
Risk Implications:	None

Implications for Glasgow City Council:	This report must be considered by Glasgow City Council.

Implications for NHS Greater Glasgow & Clyde:	None.

Direction Required to Council, Health Board or Both	
Direction to:	
1. No Direction Required	☒
2. Glasgow City Council	☐
3. NHS Greater Glasgow & Clyde	☐
4. Glasgow City Council and NHS Greater Glasgow & Clyde	☐

1. Purpose of Report

1.1 To present the annual report from the Chief Social Work Officer for the year 2025/26, prepared in line with Scottish Government guidance.

2. Background

2.1 The requirement for every local authority to appoint a professionally qualified Chief Social Work Officer is contained within Section 3 of the Social Work (Scotland) Act 1968. This is one of a number of statutory requirements in relation to posts, roles or duties with which local authorities must comply. The Chief Social Work Officer (CSWO) is required to produce an annual report, following guidance for submission to the Scottish Government.

2.2 The Chief Social Work Officer (CSWO) is required to produce an annual report that outlines the activities and performance of social work services across the local authority. This report must be considered by the local authority and will be presented to the Wellbeing, Equalities, Communities, Culture and Engagement Policy Committee agenda on 12 November. The report must also be shared with the Scottish Government. The CSWO's role includes ensuring the provision of effective, professional advice to local authorities in relation to social work services and ensuring the delivery of safe, effective, and innovative practice. The report should cover the period from April 2025 to March 2026 and should reflect the challenges and achievements of social work services in Glasgow City during this period.

3. Recommendations

3.1 The Integration Joint Board is asked to:

a) Note that the Chief Social Work Officer report attached at Appendix 1; and
b) Note the report has been submitted to the Scottish Government.

Glasgow City IJB
Integration Joint Board

Appendix 1



CHIEF SOCIAL WORK OFFICER ANNUAL REPORT 2025-2026

NHS Greater Glasgow and Clyde

Glasgow City Council

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Foreword

It is a privilege to present the Annual Report as Chief Social Work Officer (CSWO) for Glasgow City. It reflects the commitment and professionalism of our social work workforce and the partners, carers, families and communities who work alongside us to improve lives across the city.

Social work plays a vital role in supporting and protecting children, adults and older people, upholding rights, managing risk and helping people achieve better outcomes. I remain immensely proud of the values, skills and integrity our staff bring to this work.

This year's report is written at a time of sustained and significant pressure across social work, social care and the wider public sector. Demand continues to grow in volume and co-morbidities. These pressures are not isolated to one part of the system, they are interconnected and cumulative, shaped by poverty, demographic change, housing pressures, increasing levels of risk, financial constraint and the impact of national legislative and policy expectations. The result is a system in which capacity is increasingly stretched and the choices required of public services are becoming more difficult.

Our workforce remains the foundation of social work and social care in Glasgow. Staff continue to show resilience and care in demanding circumstances, but recruitment, retention, workload, wellbeing and succession planning remain significant pressures. Supporting and developing our workforce is not separate from service improvement. It is central to safe, effective and compassionate practice. We must continue to invest in supervision, leadership, learning, professional confidence and staff wellbeing, while creating the conditions in which people can do their best work and feel valued for the contribution they make.

Constraints in care and support provision, including placements for children, community support, care at home, housing and services for people with complex needs, all affect flow across the system. This reinforces the need for effective commissioning, prevention and sustainable, outcomes focused community support.

Social work is rightly shaped by ambition for rights, inclusion, early intervention, trauma-informed practice and person-centered support. These ambitions align strongly with our values. However, the pace and scale of policy change, when not matched by sustainable resource, creates real challenges for implementation. This is particularly important in the context of Public Sector Reform. Reform must not simply be a requirement to reduce or redesign services. It must also be an opportunity to clarify purpose, improve outcomes, reduce duplication, use evidence more effectively and protect the statutory functions that sit at the heart of social work.

Our STEP Forward programme provides the framework to modernise services in Glasgow and improve their sustainability. It recognises that maintaining the status quo is not an option, and that we must continue to change, improve and modernise to protect the sustainability and quality of services for the future. STEP Forward offers the opportunity to reshape how we prioritise and deliver support, fulfil our statutory responsibilities, and make best use of the experience of our workforce, whilst the quality, safety and integrity of services remains paramount.

Strong professional governance and the statutory role of the Chief Social Work Officer are especially important when difficult decisions are required. Embedding the CSWO in the Executive Management Team, alongside an Assistant Chief Officer for Public Protection, has strengthened access to professional advice across the Health and Social Care Partnership, Integration Joint Board, Glasgow City Council and wider partnership structures. These arrangements provide assurance that social work values, standards and statutory responsibilities inform decisions, and are supported by constructive challenge, evidence and clear escalation where risk, quality or duties may be affected.

Despite the current challenges, there is much to celebrate. The report demonstrates the breadth and importance of social work in Glasgow and the positive difference services make by keeping people safe, promoting independence, challenging inequality and improving outcomes. The leadership team have invested significant time this year in developing a culture focused on shared values, performance that demonstrates positive outcomes, workforce planning that promotes mobility, opportunity and effective supervision, and whole system strategic thinking. I am proud to have been a part of this work and excited to see it develop over the coming year.

Looking ahead, my priorities are to strengthen professional governance, support the workforce, embed learning from scrutiny and improvement activity, and keep social work values at the centre of decision making. We will progress STEP Forward with integrity, balancing financial sustainability and best value with statutory responsibilities. The year ahead will require courage and integrity from all HSCP staff and leaders. I am confident in our ability to meet future challenges with compassion, professionalism and ambition.

I remain committed to championing social work, listening to our workforce and the people we support, and ensuring that statutory responsibilities, professional standards and shared values guide us.

I want to acknowledge the support and contribution of the HSCP Executive Management Team, Glasgow City Council, NHS Greater Glasgow and Clyde and all partner agencies across Glasgow, as well as communities, carers and people with lived and living experience. Our shared commitment to the people of Glasgow is what enables us to improve outcomes, reduce inequality and protect the vital services that our city relies on.

I also want to thank members of our Integration Joint Board for their continued commitment to social work and social care in Glasgow, and for the support they have given me in my role as Chief Social Work Officer over the past year.

Kelda Gaffney
Chief Social Work Officer



Glasgow's Population

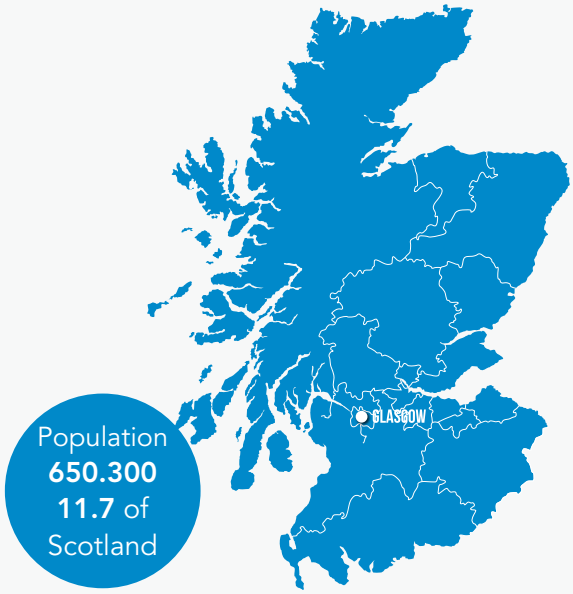
Glasgow City Population

650,300

Glasgow is the largest of Scotland's 32 local authority areas and accounts for **11.7%** of the country's total population.

Population Projections

- Glasgow's population has increased in recent years and is projected to continue growing. Between 2026 and 2036, Glasgow's population is projected to increase by more than **32,000** people (**4.8%**). Within this overall increase, a small decrease in the child population of **1.3%** is expected while the working age adult and older people population groups are expected to increase by **3.5%** and **18.1%** respectively.



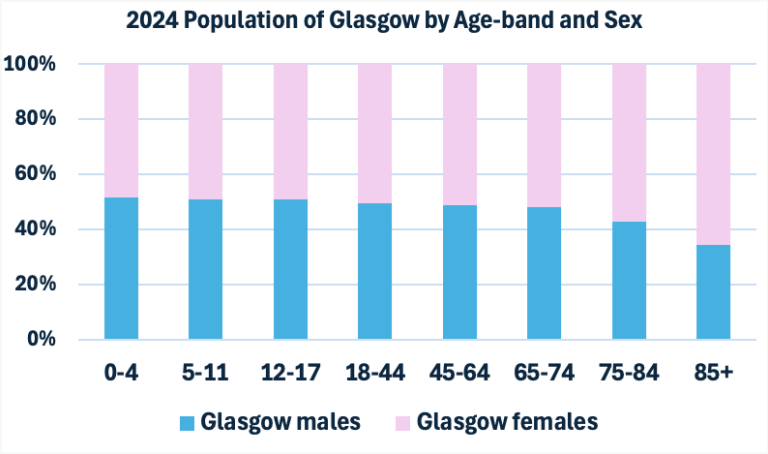
Population by Age-Band

Compared with Scotland as a whole, Glasgow has a lower proportion of children and older people and a higher proportion of working-age adults.

Glasgow	Scotland
17.1% are aged 0-17	**18.4%** are aged 0-17
68.9% are aged 18-64	**61.1** are aged 18-64
14% are aged 65+over	**20.5%** are aged 65+over

Population by Age Band and Sex

- Overall, **51.1%** of Glasgow's population is female and **48.9%** is male. Among children, boys make up a slightly higher proportion than girls. Among working-age adults, the proportions of men and women are similar. However, among older people, women make up a significantly higher proportion than men.

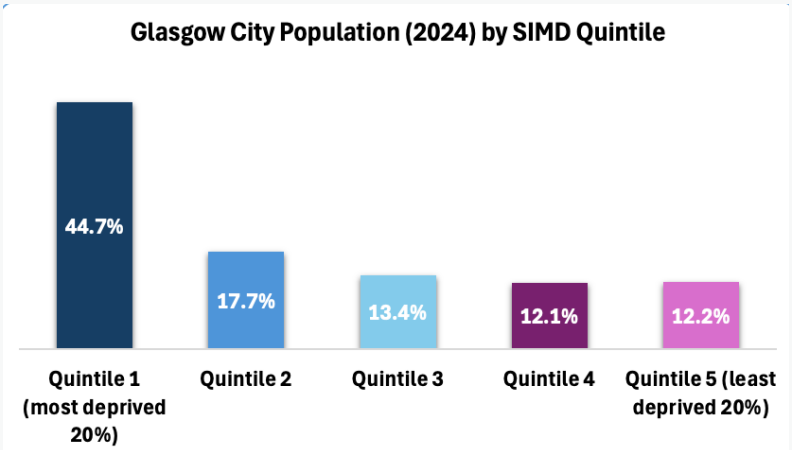


Ethnicity and Diversity

- Glasgow is more ethnically diverse than Scotland overall. More than a quarter of Glasgow residents (**27.2%**) are from a minority ethnic background, including people from non-Scottish or non-British white backgrounds, compared to **12.9%** of Scotland's population across all age groups.
- This proportion is even higher among children. In Glasgow, **31.4%** of school pupils are from a minority ethnic (non-white) background, compared to **13.3%** of pupils across Scotland. Pupils from non-Scottish or non-British white backgrounds are included within the white ethnic group, which accounts for **61.4%** of Glasgow school pupils and **84.1%** of Scottish school pupils.
- **2.7%** of Glasgow's population or almost **17,000** people aged 3+, have limited or no skills in English, more than double the percentage of **1.1%** for Scotland. More than **72,000** Glaswegians (**11.4%**) speak a main language other than English, Gaelic, Scots or Sign Language compared to **5.2%** of Scots.
- A quarter of Glasgow school pupils (**24.5%**) are new, early to or developing competence with English as a second language and just under a third (**31.2%**) have a main home language that is neither English, Gaelic, Scots, Doric nor Sign Language. There are **148** different languages used by Glasgow pupils.

Challenges

- Levels of poverty, deprivation, inequality and poor health in Glasgow are among the highest in Scotland. According to the Scottish Index of Multiple Deprivation (SIMD), **44.7%** of Glasgow residents live in the most deprived areas in Scotland, compared with around **20.0%** of Scotland's population overall (SIMD 1). This is the highest rate of any local authority area in Scotland.



- A fifth of Glasgow children aged 0-15 are living in (absolute) low-income families (**19.8%**), the highest rate of any local authority area in Scotland. This compares to just over a tenth (**12.3%**) of all children in Scotland. Within Glasgow, this rate ranges from **6.0%** for children living in Partick East/Kelvindale electoral ward to **38.9%** for those living in the Southside Central ward.
- Levels of poverty and deprivation are not spread evenly across Glasgow. The SIMD map here shows Glasgow's data zones ranked from the least deprived (lightest colour) to the most deprived (darkest colour), which shows significant variations across the city.
- People living in the most deprived areas are more at risk of the negative impacts of poverty and deprivation. Many people living in these areas experience less positive social, economic and health and wellbeing outcomes than people living in least deprived areas.

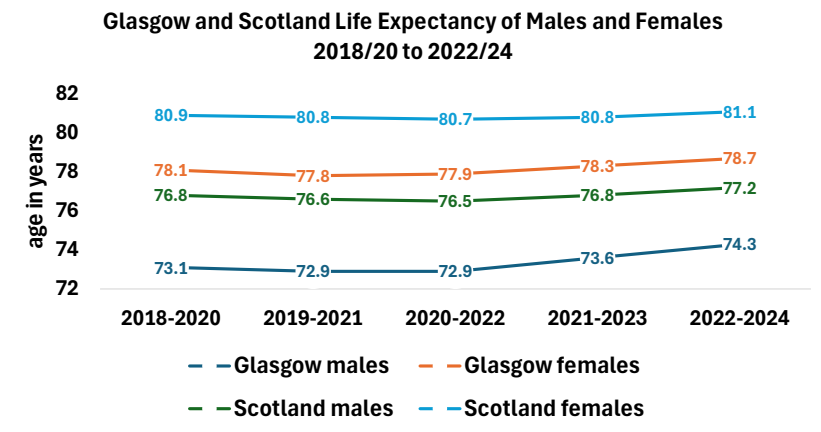


Mortality and Life Expectancy

Mortality and premature mortality rates for several major diseases are higher in Glasgow than across Scotland as a whole, including those for lung cancer and coronary heart disease. Rates of deaths attributable to smoking, alcohol or drug use and homelessness are also far higher for Glasgow than Scotland overall.

Life expectancy has increased for Glasgow people in the last two reporting periods, to **74.3** years for males and **78.7** years for females. These figures remain below the Scottish averages of **77.2** years for males and **81.1** years for females.

Healthy life expectancy is the number of years people are expected to live in good health. For Glasgow males this is **55.7** years and for females it is **56.1** years, both more than **3** years less than the Scottish averages of **59.1** years for males and **59.4** years for females.





Governance, Accountability and Statutory Functions

Role of the Chief Social Work Officer

Every local authority is required by section 3 of the Social Work (Scotland) Act 1968 to appoint a professionally qualified Chief Social Work Officer (CSWO). The role provides independent professional advice and assurance on the delivery of safe, effective and lawful social work services. It also ensures that social work values, professional standards and statutory responsibilities are reflected in strategic and operational decision making.

In Glasgow, the CSWO is a member of the Executive and Senior Management Teams, a statutory member of the Integration Joint Board and Chief Officers Group and chairs the Social Work Professional Governance Board. Positioning the role within executive leadership strengthens access to decision making, constructive challenge and escalation where quality, risk or statutory duties may be affected.

Professional Governance and Assurance

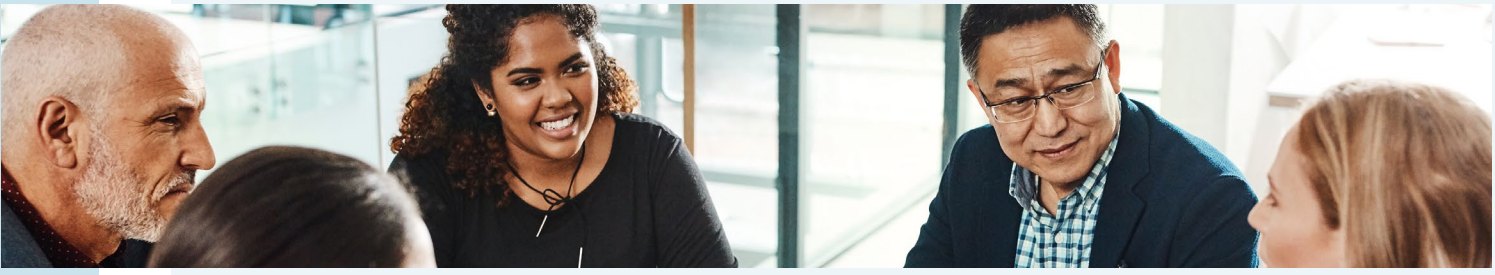
The Social Work Professional Governance Board provides oversight of practice, policy, audit, learning and development, regulated service inspection findings, research and workforce registration. Its membership connects senior leaders, frontline practitioners, universities and regulatory partners. During the year, the governance structure was strengthened through the introduction of a Safeguarding Board and a Public Protection Board, improving organisational oversight of safeguarding, public protection, risk, quality assurance and improvement. A governance framework was introduced to ensure oversight of out of authority placements across children and adult services.

Delivery of Statutory Functions

Assurance is maintained across child and adult protection, mental health, adults with incapacity, justice, corporate parenting, commissioned social care and regulated services.

During 2025/2026, particular attention was given to:

- strengthening professional governance, escalation and quality-assurance arrangements
- responding to inspection and learning review findings through governed improvement plans
- improving oversight of Adult Support and Protection and Adults with Incapacity duties
- maintaining effective MAPPA and wider public protection arrangements; and
- ensuring that service redesign and financial decisions are tested against statutory responsibilities, safety, quality and professional standards



Service Quality and Performance

Children's Services

As noted above, Glasgow City has the highest rate of deprivation, with approximately one-third (**32%**) of children aged 0 -15 living in poverty. The HSCP recognises the importance of improving families' confidence, resilience and self-sufficiency to improve longer term outcomes, and is working in partnership with the Child Poverty programme to develop seamless pathways into employability and childcare support, as well as other community-based projects.

Children's Services continued to shift the balance of care towards prevention, intensive family support and keeping children safely within their families and communities. Annual investment of £6.4 million in family support has contributed to a **62%** reduction since 2016 in the number of children accommodated in foster and residential care. Between April 2025 and March 2026, family support services worked with **532** families and **1,480** children and young people.

Headline	2025/2026 Position
Family Support Outcomes	At review and closure, 91% to 96% of families reported improvement across parenting confidence, wellbeing, routines, children's wellbeing and behaviour, and living conditions.
Children's Services Plan	The 2026 to 2029 plan was approved in June 2026 following engagement with children, young people, parents, carers and the workforce.
The Promise	Work progressed on child friendly planning, language and recording, sibling relationships, participation and influence, and a Glasgow Promise dashboard.
Residential Care	Children's Houses continued to achieve strong Care Inspectorate evaluations, with grades of 5 and 6 reported.
Fostering	A revised financial framework, nurture programme, learning pathways and safer caring materials are intended to strengthen recruitment, retention and placement stability.

Family Support and Prevention

The key principle for supporting families is to build trusting relationships in order to understand and manage risks to children and young people. Families supported by the Glasgow Intensive Family Support Service (GIFSS) receive an average of 9 hours of support per week, with 23 hours currently being offered to a family due to the nature of their needs. Larger families have received up to 36 hours of support and there was one example of a family receiving 60 hours of support due to the complexity of their needs.

Reporting at 'review' and 'closure' stages between April 2025 and March 2026 highlight that:

- 96% of families highlighted improved parenting skills and confidence
- 95% acknowledged a positive impact on parental/carer wellbeing
- 94% reported improved family routines
- 94% identified improved wellbeing in children/young people
- 93% recognised improved behaviour in children/young people
- 91% benefited from improved living conditions

Families regularly provide positive feedback about their experience of working with GIFSS practitioners, with some examples noted below:

> GIFSS have followed through with everything they said they would and built good relationships with our family.

> The weekends can be long for my child especially in today's current circumstances. Having someone to be able to spend some time out of the house at weekends has been amazing.

> Everything I have asked they have gone above and beyond and give alternatives, or find other agencies to give advice if it is not something they are 100% on.

Children's Services Plan and The Promise

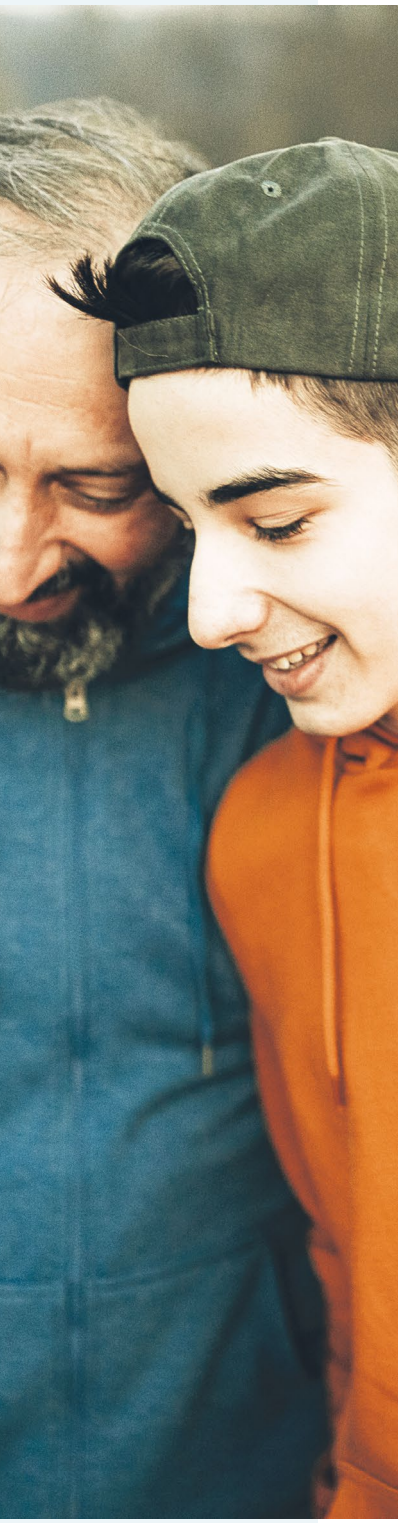
The Glasgow City Children's Services Plan 2026-2029 was developed with children, young people, parents, carers and the workforce. Engagement used trusted relationships, familiar settings and methods suited to age, communication and individual preference. Young people helped facilitate the final development session and influenced the wording and emphasis of its priorities. The plan focuses on child poverty and inequality; safety and protection; health, wellbeing and development; voice, participation and influence; and family, friendships and belonging.

Work to keep The Promise included extending the child-friendly My Meeting, My Plan model; improving the recording of sibling and other important relationships; testing a co-produced My Wellbeing Assessment; and developing clearer, trauma informed communication following planning meetings. Participation was strengthened through Young Champions, Promise Participation Workers, a Parent Participation Steering Group and a lived-experience steering group linked to service redesign.

Residential Care, Fostering and Family Connections

Residential services continues to promote nurture, belonging and family connection. Children's Houses continued to receive strong Care Inspectorate evaluations, with grades of 5 and 6 reported, reflecting the quality of nurturing, child-centered and trauma informed care. Leadership was also recognised externally, with some house managers asked by the Care Inspectorate to mentor managers in other houses outwith Glasgow.

Significant challenges exist in placement availability for children and young people across the country, with a noted gap in foster care provision. A revised foster carer financial framework in Glasgow will increase fees from October 2026 which aims to improve recruitment, retention and placement stability. Our leaders and staff have also continued to develop creative solutions to respond to children's needs. A children's house opened during the year to specifically enable a family to remain together, rather than the children being separated across different placements. In another example, residential carers supported siblings in their own home when a parent was unexpectedly admitted to hospital, allowing the children to remain in familiar surroundings while immediate arrangements were made.



A two-year learning and development strategy is extending nurture-informed practice, individual learning pathways and support for carers and practitioners. Revised safer caring materials separate adult guidance from child friendly participation materials and are being aligned with wider planning and review processes to reduce repetition for children.

Culture, Inclusion and Accommodation

Children's Services progressed a cultural inclusivity and sensitivity workstream with third sector and university partners. Engagement identified the importance of understanding power, building relationships over time, recognising cultural and religious context in assessment, improving consistency and reducing barriers to a more diverse workforce. The next phase includes engagement with children and families, clearer information about statutory services, workforce learning and improvements to assessment and language.

Young people were consulted about accommodation and support for unaccompanied asylum seeking young people. Their experiences informed plans to replace temporary student accommodation with more appropriate core-and-cluster provision and an arrival and welcome hub.

Celebration Event

The annual celebration event for children and young people with lived experience of care took place in October 2025, supported by Arts in the City. The event coincided with national 'Care Experience Week' to celebrate achievements of our children and young people, no matter how big or small, recognising that some smaller achievements are very significant and deserve to be recognised.

The event also celebrated Glasgow 850 to add to the party atmosphere, with Nutritional Support Workers from the children's houses providing favourite meals suggested by young people for lunch, and a later start to encourage more young people to attend. Talks and performances were scheduled throughout the day to showcase the range of young people's talents.

The event was an absolute success and as CSWO, I could not be prouder of our young people and all of their achievements.

Other Service Developments

- the Ask and Act pilot strengthened links with Registered Social Landlords, secured seven additional tenancies for young people and supported earlier action on rent arrears to prevent homelessness
- the housing protocol was refreshed, staff training and a young person's toolkit were developed, and feedback from young people with experience of homelessness informed the work
- Family Connections Assessment and Planning continued to support sibling relationships and permanence planning

- the annual celebration event for care-experienced children and young people recognised achievement and showcased young people's talents
- STEP Forward reviews began to consider how services can remain sustainable, evidence outcomes and continue to meet statutory duties and the priorities of the Children's Services Plan and Glasgow's Promise Plan

Priorities For 2026/2027

- deliver the joint children's services improvement plan and strengthen multi-agency quality assurance
- implement and monitor the Children's Services Plan, with a strong focus on poverty, prevention and early intervention
- progress cultural competence and workforce diversity work
- implement the revised foster carer financial framework and expand nurture-informed practice
- embed learning from the Family C Learning Review and joint inspection, testing whether improvement is making a difference in practice

Adult Services

Adult Services continued to strengthen integrated practice, access, performance oversight and pathways for people with complex needs. Work during the year combined service redesign with a stronger focus on consistent assessment, professional judgement, legal compliance and measurable improvement.

Headline	2025/2026 Position
Learning Disability	Day Service redesign confirmed the continuing need for specialist provision for people with profound, multiple and complex needs. Transition pathways and Dynamic Support Register oversight were strengthened.
Mental Health	Work focused on patient flow, discharge, bed management, governance and preparation for a citywide mental health summit. Demand for acute beds, psychological therapies, Mental Health Officer activity and neurodevelopmental assessment remain challenging.
Alcohol And Drug Recovery	Review recommendations continued to be implemented through revised workforce and multidisciplinary models. Reported access performance showed 92% of people entering treatment within three weeks.
Performance	Adult Performance Improvement Groups, quarterly reporting and dashboard development have improved scrutiny of workforce, complaints, delayed discharge, finance and service performance.



Learning Disability

A comprehensive review and redesign of our two Learning Disability Day Services took place during 2025/2026. This included an initial scoping exercise to examine the strengths and gaps within existing third sector day service provision across Glasgow and identified a continued requirement for specialist provision for adults with Profound and Multiple Learning Disabilities (PMLD) and those with complex support needs

The Glasgow Learning Disability Clinical Care and Governance Forum continued to strengthen consistency, integrated working and equitable access across multidisciplinary teams and citywide day services.

Transition pathways from children's to adult services were revised jointly by health and social work. The new process supports earlier planning, reduces duplication and helps identify suitable services and placements.

Dynamic Support Registers strengthened oversight of people at risk of admission, delayed discharge or placement breakdown, and supported progress in reducing delayed discharge.

Ongoing challenges exist in securing suitable housing and specialist support for people with complex needs. These continue to be addressed through partnership working, service redesign and commissioning activity

Recruitment and retention difficulties across social care providers continue to impact community capacity and discharge planning.

Mental Health

This year has focused on patient flow, discharge, bed management, governance, more effective integration and preparation for a citywide mental health summit. Work on the Mental Health Strategy confirmed the criticality of social work services in supporting flow and careplanning, with the introduction of a case conferencing process for people who are delayed in our mental health hospitals. A multi-disciplinary discharge team model is being developed, modelled on the success of the hospital social work team that respond to acute delayed discharges.

A citywide mental health summit is planned for Spring 2027, bringing together HSCP staff, managers, clinical leaders, elected members, IJB members, partner agencies and people with lived experience to develop a shared understanding of pressures, gaps and future priorities.

A review of the Mental Health Officer structures and performance has concluded, with recommendations being progressed to strengthen our statutory responsibilities through the Mental Health (Care and Treatment) (Scotland) Act 2003 and Adults with Incapacity (Scotland) Act 2000, under a single management structure. There is also an urgent need to increase consent in the application of Emergency Detention Certificates and improvement work, supported by the Mental Welfare Commission, will implement positive learning from other local authority and NHS Board areas that demonstrate good performance in this area.

Investment in mental health awareness, prevention and community-based wellbeing initiatives remains critical and this year saw important Mental Health Awareness Week activity and promotion of digital self-management resources.

The Mental Health Network have supported valuable input across the year from people with lived experience of mental health services, to inform both strategic and operational developments. Meaningful engagement with people who use our services means genuinely listening, being open to influence and change, and working with people with lived and living experience as partners.

Alcohol and Drug Recovery Services

It was particularly welcoming to see the social work role in addressing drug harms acknowledged in the Programme for Government. Glasgow's alcohol and drug services have been fully integrated for nearly twenty years and provide a positive example of progressive services that span, and invest in, harm reduction, care and treatment and recovery. Implementation of the Alcohol and Drug Recovery Services review continued this year through revised workforce and multidisciplinary models, and with a focus on maximising independence. Workforce changes include the addition of social workers, alongside social care workers, senior addiction practioners and nursing staff as care managers.

Glasgow City has achieved full implementation of the Medication Assisted Treatment Standards in community settings and continues to demonstrate strong assurance across the wider National Specification for Alcohol and Drug Services. Improvement activity is focused on strengthening integrated mental health and substance use pathways, family support pathways and the development of emerging services such as drug checking. Performance reporting indicates that 92% of people enter treatment within three weeks.

The Thistle (Safer Drug Consumption Facility) has been operational since January 2025, with over 800 individuals registering with the service and over 16,000 injecting episodes recorded. The service however offers more than a safer injecting space – staff provide wound care, personal care and injecting advice to reduce harm, alongside social work contribution to managing need and risk. There has been more than 1450 onward referrals to a range of services including housing services and community teams. The Thistle is delivered by an integrated team including social workers and social care harm reduction workers with lived experience, a new role that has proven invaluable in building relationships with people who are often the most marginalised in our city.

As the chair of our Alcohol and Drug Partnership, I can assure that all partners are committed to promoting recovery and compassion throughout strategic directions and operational delivery. One of Glasgow's greatest strengths is its vibrant recovery community. Our city has a proud tradition of people supporting people, sharing lived experience and creating opportunities for others to thrive. Peer support continues to transform lives, offering understanding, encouragement and a sense of belonging that cannot be underestimated.

As the national drug-related statistics are released last, it is important to acknowledge the people we have sadly lost, and the families and communities affected. Far too many people continue to lose their lives to drugs and alcohol, and social work have a vital role in addressing stigma and supporting people to believe that recovery is possible.

Pressures and Priorities

Demand growth, increasingly complex need, housing shortages, provider recruitment and retention, and the cost of complex support packages continue to affect capacity. Mental health services face persistent pressure from acute bed demand, psychological therapy waits, Mental Health Officer workload and rising demand for neurodevelopmental assessment and treatment. Priorities are to strengthen community support, promote independence and maintain equitable, legally compliant decision making.

Older People and Care Services

Older People and Care Services continued to support people to remain independent, return home from hospital and receive safe, high quality care. Progress during 2025/2026 included stronger integrated assurance across commissioned care homes, significant activity in Care at Home and Telecare, improved residential occupancy and continued development of workforce, quality and digital systems.

Headline	2025/2026 Position
Care at Home	Approximately 81,274 visits were delivered each week. Of 3,369 people completing reablement, 45.8% required no ongoing support and 54.2% transferred to mainstream services on reduced hours.
Community Alarms and Telecare	More than 8,700 people were supported. More than 8,500 digital connections were in place by year end.
Home Care Inspection	Evaluations included 'Very Good' for health and wellbeing and 'Good' for staffing and personal planning. Improvement plans are being progressed.
Residential and Day Care	Residential occupancy increased from 92.1% in 2025 to 95.6% for January to July 2026. No requirements were raised at the five care homes inspected.
Enhanced Care Service	The two short-stay units completed 128 admissions. Evaluation identified positive experience and system benefits, but also longer than intended stays and the need for dedicated social work input.

Self-Directed Support and Assessment

The revised Support Needs Assessment was implemented across adult and older people's services. It brings strengths, needs, risks, protective factors and intended outcomes into one assessment process, reduces duplication and provides a clearer basis for professional judgement and defensible decision making. Bespoke strengths based practice training supported the cultural and practice change required, while carers' strengths and needs were more explicitly incorporated within assessment.

Self-Directed Support governance and practitioner forums continued to develop, alongside Strengths Based Practice learning and citywide resource allocation arrangements. The aim is to improve consistency, promote choice and control and ensure that allocation decisions remain equitable and sustainable.

Supporting Unpaid Carers

Unpaid carers make a vital contribution to the wellbeing and independence of vulnerable citizens. Supporting them to sustain their role while protecting their own wellbeing remains a key HSCP priority. The HSCP meets its duties under the Carers (Scotland) Act 2016 through assessment, support planning, information, advice and preventative services.

Embedding carers' strengths and needs within the wider Support Needs Assessment provides a more holistic view of the caring relationship, recognising carers as partners in care with their own rights and support needs.

Commissioned third sector services provide information, advice, emotional and wellbeing support, short breaks and community resources that reduce isolation, build resilience and help carers sustain their responsibilities.

Integrated Care Home Quality Assurance Team

Established during the COVID-19 pandemic, the Care Home Quality Assurance Team provides integrated health, social work and commissioning oversight of quality, risk, safeguarding and contract compliance across Glasgow's commissioned care homes. Recent commissioning changes formalised these arrangements by bringing Older People Commissioning, Social Work Quality Assurance and Care Home Health staff into one service, now called the Integrated Care Home Quality Assurance Team (ICHQAT). The shared management and multidisciplinary approach have strengthened governance and responses to quality, safety and safeguarding concerns.





ICHQAT oversees Glasgow's 61 older people's care homes, where more than 90% of places are provided by private or third sector organisations. It's remit now also includes adult care homes and a further 290 commissioned beds. The team combines intelligence from health, social work and commissioning and works closely with the Care Inspectorate to identify concerns and provide timely support.

Care At Home and Reablement

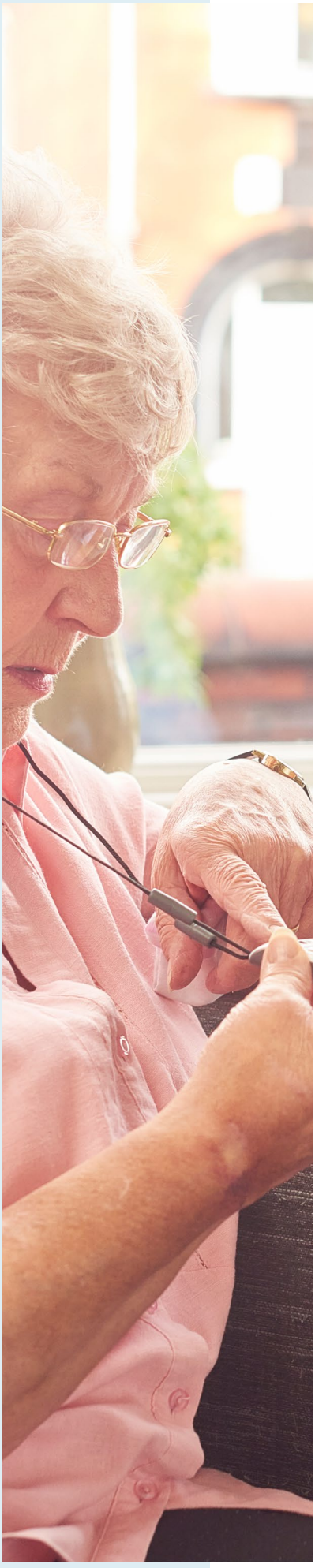
Care at Home delivered approximately 81,274 visits each week, around 4.23 million visits across the year, and received 10,314 referrals. Hospital discharge accounted for 8,626 referrals, including significant numbers of people new to the service. Reablement remained central to supporting people home and maximising independence. Of 3,369 people completing reablement, 45.8% required no further service and 54.2% moved to mainstream support on reduced hours.

Workforce and quality improvement included a refreshed Home Carer induction programme, updated reablement training, succession pathways from Home Carer to Care Coordinator, a Learning and Development Governance Group and continued oversight of Scottish Social Services Council registration. A Care Service Exchange Forum and wider stakeholder engagement are informing a refreshed participation framework.

Community Alarms and Telecare

Community Alarms and Telecare supported more than 8,700 people to live safely at home. The Alarm Receiving Centre handled 303,093 incoming calls and responder teams attended 27,887 requests for assistance, including 7,367 falls-related incidents. On average, 97.3% of life critical calls were answered within 60 seconds, while 99.4% of emergency call-outs were attended within 45 minutes.





The analogue-to-digital migration programme was completed for standard and enhanced connections, with more than 8,500 digital connections in place by year end. The service also reviewed falls detectors and enhanced equipment, moved consultation activity to a digital format and reissued more than 2,300 recycled items of equipment. In the 2025 consultation, 94.2% of respondents agreed or strongly agreed that a Community Alarm helped them live safely at home.

Inspection Performance

Home Care was rated 'Very Good' for health and wellbeing and 'Good' for staffing and personal planning across all three areas; North West quality assurance was also 'Good'. Improvement plans are being monitored through established governance.

Care Inspectorate activity confirmed strong performance across the five directly provided care homes, with wellbeing rated 'Very Good' and no requirements raised.

Residential and Enhanced Care

Average residential occupancy increased from 92.1% in 2025 to 95.6% for January to July 2026 as rooms reopened following the Riverside capital programme.

The Enhanced Care Service established two 15-bed short-stay units at Hawthorn House and Meadowburn to support people medically fit for discharge from hospital. Between July 2025 and May 2026, 128 admissions and 107 discharges were recorded. Feedback from people and families was positive, describing a more homely environment and staff who focused on what mattered to them. The service received the HSCP Award for Innovation in 2025.

Evaluation also identified areas for improvement. Average stays were longer than intended, with delays linked particularly to social work allocation and wider pathway issues. Priorities for the second year include dedicated social work input, closer working with Allied Health Professionals and better use of rehabilitation, assistive technology, Care at Home and Day Care as alternatives to long-term placement.

Performance Improvement and Pressures

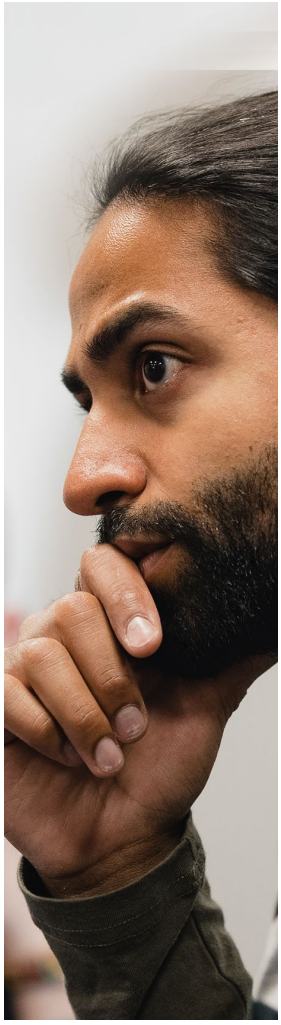
Performance and data quality have become a more consistent part of team and governance discussions, including preparation for a new case recording system. Strengths include completion of carers' assessments, future-care planning and joint work to meet delayed-discharge targets.

A key area of digital innovation has been the development of the Right Decision App. This work will provide non-PC facing staff with instant access to policies, procedures, guidance and service information through their work issued iPhones, ensuring staff can access up to date information at the point of need. The platform will also provide opportunities to improve communication, reduce reliance on paper based guidance and support future development of stakeholder facing information resources.

Pressures include rising demand and complexity of need, increasing Adult Support and Protection activity, sickness absence, recruitment in key grades, care provider capacity and shortages of suitable community and housing support. These pressures require continued prioritisation, workforce development and service redesign while maintaining statutory duties, safety and quality.

Priorities for 2026/27

- continue to embed the revised Support Needs Assessment and strengths-based practice
- strengthen integrated care home assurance, safeguarding and provider improvement
- progress Home Care improvement plans, digital systems and workforce succession pathways
- develop the next phase of the Enhanced Care Service, including dedicated social work input and stronger rehabilitation pathways
- progress Day Care and wider STEP Forward reviews through governance and engagement
- maintain focus on performance, data quality, attendance, recruitment and community capacity.



Justice Services

Justice Services continued to strengthen public protection, community based alternatives, rehabilitation and throughcare. Progress during 2025/2026 included strong MAPPA performance, specialist service development, additional prison social work capacity and preparation for new national systems.

Headline	2025/2026 Position
MAPPA	Glasgow met six of eight national indicators, including 100% compliance for case reviews, pre-release level 3 meetings and consideration of disclosure.
Specialist Services	Women's services, the Caledonian Team and a new Public Protection Team strengthened trauma informed support, domestic abuse responses and management of people subject to MAPPA.
Community Sentences	Unpaid Work expanded meaningful placements delivering community benefit, while a supported bail accommodation model was developed as an alternative to remand.
Throughcare	Four social workers and a team leader were funded at HMP Barlinnie; inspection recognised effective risk assessment and case management alongside capacity pressures.

MAPPA

Multi-agency Public Protection Arrangements continued to support public safety, with six cases notified to the Strategic Oversight Group and no further review required after consideration. Glasgow will be an early adopter of the national MAPPS system ahead of its planned 2028 implementation.

Specialist and Community-Based Services

Tomorrow's Women and Martha's Mammies continued to support women with complex needs, while the Women's Problem Solving Court is being formally evaluated. The Caledonian Team developed a domestic abuse strategy and increased support for women and children. Unpaid Work strengthened community placements that build skills, confidence and local connections. A new supported bail accommodation pilot will provide intensive support for up to 20 people whose housing instability and complex needs contribute to remand decisions.

Prison Social Work, Throughcare and Risk Practice

Additional staffing at HMP Barlinnie responded to rising demand. Prison and community teams also supported emergency release arrangements through coordinated risk assessment, accommodation and health planning. Practitioner and steering groups, alongside work with the Risk Management Authority, are strengthening risk assessment, quality assurance and professional confidence.

Pressures and priorities

Demand, workforce capacity, accommodation instability and complex risk continue to affect delivery. Priorities for 2026/2027 are to prepare for MAPPS, improve MAPPA compliance, embed specialist public protection and domestic abuse arrangements, expand meaningful community placements, test supported bail accommodation and strengthen prison to community transitions and risk practice.



Homelessness Services

Homelessness Services continued to manage significant housing pressure while strengthening safeguarding, prevention, outreach and pathways into settled housing. Although applications reduced in 2025/2026, demand from refugee households and use of temporary accommodation increased substantially.

Headline	2025/2026 Position
Demand	8,053 homelessness applications were received, 5% fewer than in 2024/2025; applications from households granted leave to remain increased to 3,529.
Temporary Accommodation	4,832 households were in temporary accommodation at March 2026, including 2,375 in hotel or bed and breakfast accommodation, a 48% year-on-year increase.
Settled Housing	A record 3,636 social housing lets were secured for homeless households, representing around 56% of citywide turnover.
Service Redesign	WAYfinder launched as an integrated outreach service, while the ten-year Temporary Accommodation Strategy and All In for Glasgow redesign progressed through co-production and partnership engagement.

Safeguarding and Temporary Accommodation

Regular welfare visits, needs assessments, care management and audit arrangements support households in hotels and bed and breakfast accommodation. An audit commissioned through the Social Work Professional Governance Board provided assurance that safeguarding visits were attempted in over 90% of cases. These arrangements identify vulnerability and connect people promptly with health, social work and third sector support.

Prevention, Outreach and Service Redesign

The ten year Temporary Accommodation Strategy was developed with people who have lived experience of homelessness and housing partners. The All In for Glasgow programme reviewed supported accommodation across homelessness, mental health and justice services. WAYfinder provides named worker, trauma-informed support for people at risk of homelessness, rough sleeping, in temporary accommodation or moving to settled housing.

Pressures and Priorities

The main pressures are the scale and duration of temporary accommodation, reliance on hotels and bed and breakfast placements, refugee household demand and shortages of suitable settled and supported housing. Priorities for 2026/2027 are to implement the Temporary Accommodation Strategy, reduce unsuitable accommodation, embed WAYfinder, progress supported accommodation redesign, strengthen safeguarding and prevention, and maintain partnership action to increase settled housing supply.

Health and Social Care Connect

Health and Social Care Connect (HSCC) is the main access point for Children and Families, Adult, Older People, Homelessness and Occupational Therapy services. During 2025/2026 it expanded towards a more integrated whole system model, focused on prevention, early intervention, independence and timely statutory responses.

Headline	2025/2026 Position
Demand Management	HSCC retained and closed around 70% of referrals, reducing work passed to locality teams, although referral rates have more than doubled since the service began.
Access and Triage	New referral and initial assessment forms, a robust triage system and improved digital information support faster and more appropriate responses.
Prevention	Stronger links with third sector services, eviction prevention activity and the Tenant Hardship Fund supported people to remain independent and sustain tenancies.
Governance and Workforce	A Power BI dashboard, comprehensive induction arrangements and bespoke Adult Support and Protection training strengthened performance oversight and staff capability.

Integrated access and early intervention

Wellbeing conversations, support needs enquiries and improved housing and education referral routes help people receive the right response at the right time. Wider use of third sector resources and the ALISS directory supports community based alternatives and independence.

Service improvement and innovation

A professional phone line with Glasgow Royal Infirmary Emergency Department and the Acute Assessment Unit is being tested to improve checks, referrals and signposting and reduce inappropriate presentations. Near Me and text responses are also being developed to provide more flexible and consistent communication.

Homelessness prevention

Section 11 eviction notices are now routed through HSCC to support earlier intervention. The Tenant Hardship Fund prevented eviction for 126 families and 30 single people by addressing rent arrears.

Pressures and priorities

Demand continues to grow while resources remain constrained. Priorities for 2026/2027 are to embed the whole system model, refine triage and statutory pathways, strengthen third sector and acute hospital links, expand digital access, use performance data to drive improvement and maintain a strong focus on prevention and independence.

Public Protection

Child Protection

Learning, scrutiny and improvement

The learning from the Family C Review has been a particularly significant and sobering focus for Glasgow. Our thoughts remain first and foremost with the children affected - their experiences must remain at the centre of our response and strengthen our collective determination to improve. I should also make clear that all Learning Reviews are equally important, critical to our learning and to improving our practice.

The Family C review findings are being taken forward through a multi-agency improvement plan governed by the Child Protection Committee. We have a responsibility to ensure due diligence in responding to the review's recommendations and to test the impact of change through audit, quality assurance, reflection and sustained multi-agency improvement. Immediate responses from Social Work include a commitment to a three year audit plan, investment in additional governance and learning and development officers, revised dissent processes and a review of decision making structures. Significant progress has been made since the period at which the review timeline ends, including a focus on children's voices and a substantial increase in health visiting resource.

A multi-agency joint inspection of services for children and young people at risk of harm was completed in 2025, with the report published in August 2026. It assessed safety, wellbeing, participation, leadership and partnership working using case records and engagement with children, families, staff and leaders. The inspection was evaluated as 'Good'. Strengths included collaborative leadership, effective third sector family support, nurturing relationships that helped children feel safer and heard, innovative responses to poverty and a strong family support strategy. Areas for improvement included ensuring timely and consistent support, strengthening inter-agency referral discussions, assessments and plans, improving children's and families' participation through advocacy and interpreting support, and responding more effectively to criminal exploitation and emerging community risks. The Child Protection Committee is developing a multi-agency action plan informed by follow up focus groups.

The National Minimum Dataset shows broadly stable Child Protection activity over the three years to March 2026. The number of children on the Child Protection Register fluctuated between 224 and 265 and stood at 246 in the latest quarter, while inter-agency referral discussions ranged from 2,748 to 3,380 and reached 3,235. Conversion to Child Protection Planning Meetings remained stable at 8%–13%.

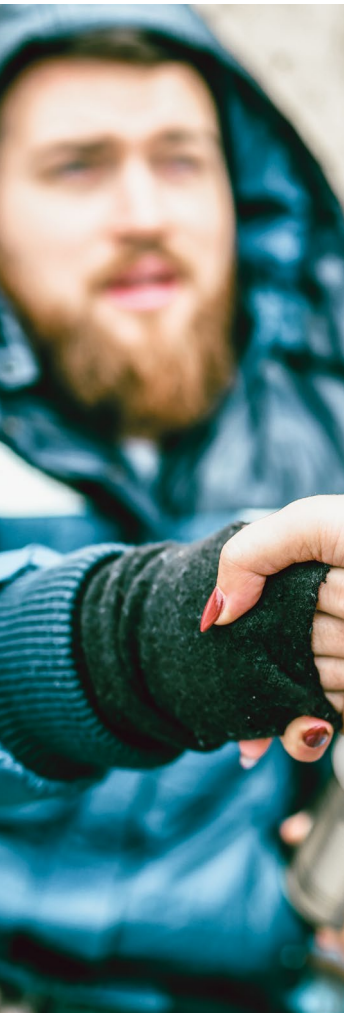
Neglect remained the leading concern, followed by domestic abuse and parental mental health. Reduced family risk was the main reason for deregistration, and children aged 5–11 formed the largest group on the Register.

Improvement work includes updated Young Person Support and Protection procedures, refreshed Female Genital Mutilation Guidance, and audits of long term registration and outcomes for young people supported through protection procedures.

Glasgow also continues to participate in the Home Office Devolved Decision Making Pilot, strengthening local responses to children at risk of exploitation and trafficking.







Adult Support and Protection (ASP)

Adult Support and Protection activity continued to rise in 2025/2026, with 13,531 referrals - 12.4% more than the previous year and almost double the 2019/2020 figure. All referrals progressed to section 4 inquiries; 543 led to formal investigation and risk assessment, 610 case conferences were held and 163 new protection plans were commenced. No Protection Orders were used, although staff continue to receive guidance on all available legal and protective measures.

Care homes remained the largest referral source at 31%, followed by NHS services, Police Scotland, third sector organisations and housing providers. Physical harm and self neglect were the most frequently recorded concerns, reflecting the breadth and complexity of risk within the system.

Improved recording practices have strengthened consistency with national reporting categories and reduced use of the general "other" harm category.

Quality improvement work included redesigning the multi-agency audit programme, extending the successful Interagency Referral Discussion pilot, progressing citywide use of the Care Home Risk Matrix, and strengthening training and workforce development to support consistent practice.

What do adults at risk of harm have to say about our ASP intervention?

> It is helpful to explain things a few times to help me understand and ask me about it to ensure I understand.

> I felt the service was excellent, everyone I had dealings with has been really good. Nothing I feel in fact that could be improved on.

> I got a lot of help from all the different agencies who were involved in making changes for me. These changes have improved my life.

> I wasn't too sure what a case conference was and what it entailed. It definately was an eye opening experience. One negative feedback and hopefully it can be used to improve other Case Conferences, is to seek family member's opinion to the end so that family members can hear what's going on with other parties, as I felt I was put on the spot.

Adults with Incapacity

The annual Adults with Incapacity 2025/2026 return demonstrates the significant scale of statutory activity undertaken across Glasgow City in respect of the Adults with Incapacity (Scotland) Act 2000.

During 2025/2026, significant progress was made in strengthening governance, performance and assurance arrangements in relation to the Adults with Incapacity (Scotland) Act 2000. An Adults with Incapacity Governance Group was established to provide strategic oversight and drive a programme of improvement activity relating to the Council's statutory duties under the Act.

A key focus of the year was the development of Glasgow City's first Adults with Incapacity Minimum Dataset and associated Performance and Assurance Framework. This work has established a more structured approach to monitoring welfare guardianship activity, supervision arrangements, transfers, investigations, case conferences and wider statutory functions under the Act.

Substantial work was undertaken to standardise local arrangements. This included the development of an AWI Practice Framework, revised recording and reporting processes, refreshed guidance relating to the use of Section 13ZA of the Social Work (Scotland) Act 1968, and the redesign of operational processes relating to welfare guardianship supervision and oversight.



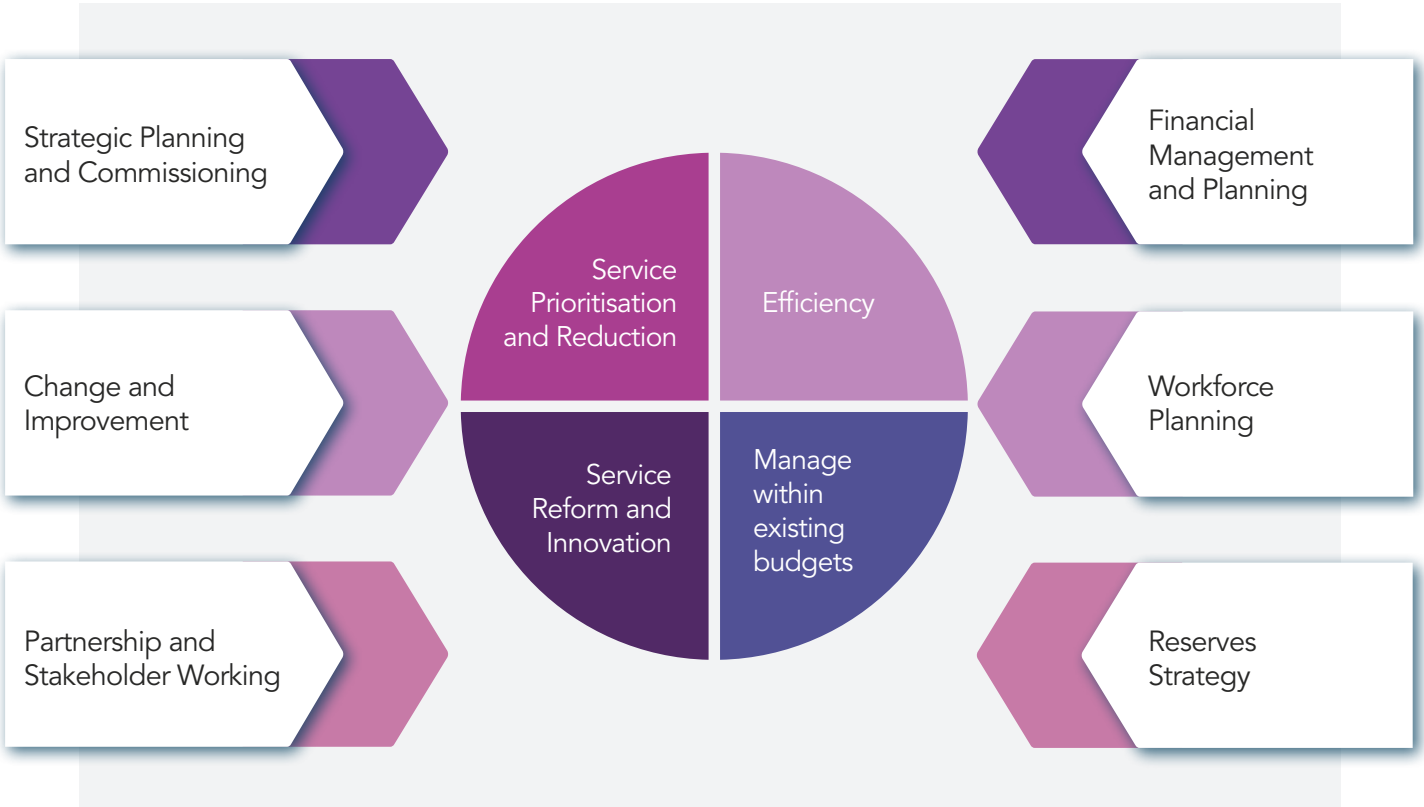
Resources

Glasgow City IJB delivers a range of services to its citizens and in 2025/2026 had funding of £1.9 billion. It has been recognised for a number of years that funding settlements are not keeping pace with the increasing demand and inflationary pressures being faced within the social care system. The range of pressures and uncertainties which contributes to this challenging environment include:

- inflationary pressures linked to pay and contractual commitments and global markets for prescribing;
- national commitments such as uplifts for social care providers;
- implications of the Home Office Asylum Seeking decisions;
- local pressures linked to demand as a result of demographic, deprivation, and health; and
- implication of changes to employer superannuation rates for Council employees from 2026/2027.

The financial outlook for 2026/2027 to 2028/2029 estimates a funding shortfall of £103 million over the next three financial years. This is based on the best estimates available and sensitivity analysis has been undertaken to highlight the implication of changes to underlying assumptions.

Our **Medium-Term Financial Outlook** has 4 core components which collectively support the transformational change required to deliver financial balance whilst delivering safe and sustainable services. This strategy is set out in the diagram below and cannot be delivered without working closely with all our partners and stakeholders to secure a future which is sustainable and meets the needs of our communities. This is underpinned by strategic planning and commissioning, robust financial management, a prudent reserves policy and work force planning to ensure our resources are used in the most effective way to deliver services and the vision for the IJB.



The IJB has a strong reputation in delivering savings which is evidenced by the delivery of 95% of our £39.683m savings programme for 2025/2026. However, the scale of the financial challenge in future years is such that a more fundamental review of service provision is required to ensure that decisions can be taken on shaping future service provision. In response, the IJB has agreed the development of the STEP Forward programme. A comprehensive model derived from the HM Treasury Green Book has been developed, coupled with a robust governance structure. The IJB has restructured to reflect the importance of this programme and relevant teams have attended detailed training on the application of the model. The STEP Forward programme commenced the first tranche of reviews in quarter 4 2025/2026 with the programme being subject of future updates to the IJB.

The IJB has a clear strategy to support delivery of the Strategic Plan and also to ensure the IJB remains financially sustainable over the medium term. The IJB also understands the key risks and uncertainties linked to delivery and has clear actions in place to mitigate these. We will continue to work closely with all our partners and stakeholders to secure a future which is sustainable and meets the needs of our communities and we remain committed to this as we move forward into 2026/2027.

Commissioning

Externally purchased services account for approximately £450m of the HSCP's social care budget. Effective commissioning of social care services combined with robust and proportionate contract management continue to be critical to the delivery of our Strategic Plan. We are aware of the challenges that face the social care sector in the City and identify areas of development to work in partnership and in collaboration with our partner providers, as detailed in our annual Commissioning Development Plan.

Commissioning is represented within social work governance, ensuring purchased services receive appropriate oversight. During 2025/2026, restructuring created the Integrated Care Home Quality Assurance Team, bringing social work, nursing and commissioning together to strengthen whole system assurance, contract compliance, safeguarding and implementation of national care home requirements.

Redesign of building based and complex needs services continued, supported by engagement and service design work. Glasgow also contributed to national ethical commissioning activity and continued to lead shared learning through the Social Work Scotland Contracts and Commissioning Practice Network.

Fair Work First was strengthened by increasing its tender weighting from 5% to 15% and requiring providers to evidence delivery against each criterion. The Contract Management Framework was refreshed with providers to provide proportionate assurance, complement regulatory and statutory processes and avoid duplication.

Bi-annual Provider Service Returns continue to inform risk assessment and strategic oversight. New questions on Skilled Worker sponsorship will support contingency planning with providers that have significant reliance on Health and Care Worker visas.

Workforce

As of 1st August 2026, Social Work Services' head count was 7,234, with a whole time equivalent (WTE) of 6249. The combined workforce within the HSCP was head count 12,315 and WTE is 10,669, including the NHS staffing. The breakdown of staff across care groups and between Council and Health Board is shown in the table below.

Head Count and WTE by Care Groups						
Staff Group	Head Count		WTE		Totals	
	SW	NHS	SW	NHS	Head	WTE
Adult Services	505	2698	475.2	2420.8	3,203	2,896
Care Services	3518	0	2776.1	0.0	3,518	2,776
Children Services	1096	710	1016.7	589.8	1,806	1,607
Finance & Resources	977	110	917.6	104.8	1,087	1,022
Older People & Primary Care	313	1202	295.0	1000.9	1,515	1,296
Operations & Governance	825	361	768.3	303.8	1,186	1,072
Totals	**7,234**	**5,081**	**6248.9**	**4420.1**	**12,315**	**10,669**

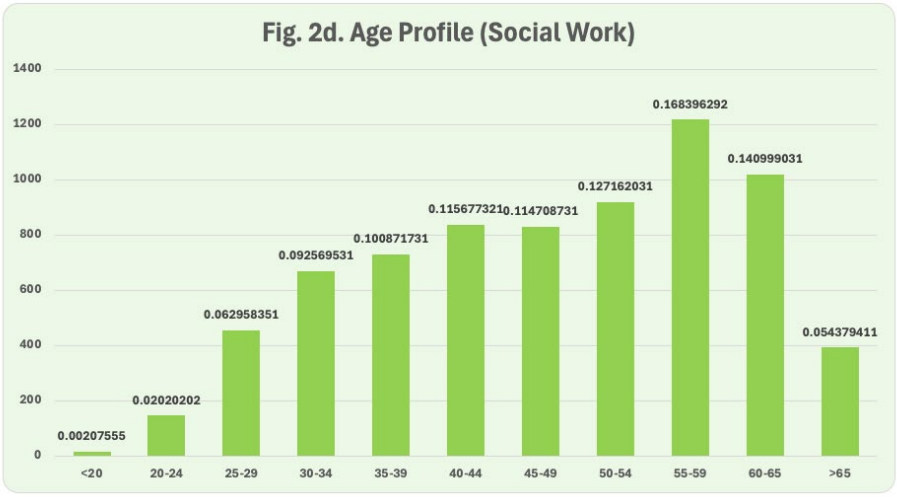
The HSCPs latest **Workforce Plan** and associated action plan covering the period 2025-2028 was agreed at the partnerships Integration joint Board on 21st January 2026.

The plan takes account of the Scottish Government's requirements in the National Workforce Strategy for Health and Social Care in Scotland. It includes an associated Action Plan, with actions set out in relation to the HSCP's Strategic Priorities and the 5 Pillars of the Workforce Journey – Plan, Attract, Train, Employ and Nurture. Underpinning the Plan are commitments to promote the HSCP as a great place to work; to support and nurture our workforce; to look after staff mental and physical wellbeing; and to offer rewarding and fulfilling roles and development opportunities.

Workforce Challenges

A risk for Social Work Services over the next 5 years is the ageing workforce as 50% of the workforce is aged over 50. There are mitigations in place with a succession planning group and services have local workforce planning groups. Glasgow City Council has a Flexible Retirement guidance in place which allows employees who meet criteria to retire flexibly allowing them to reduce grade or hours and access pension. In addition, we have improved our recruitment campaigns to attract and recruit younger people and there is work underway to explore skills retraining for workers in Care Services who may struggle to do a frontline manual job until age 67.

Age Profile – Social Work Services (GCHSCP - council staff)





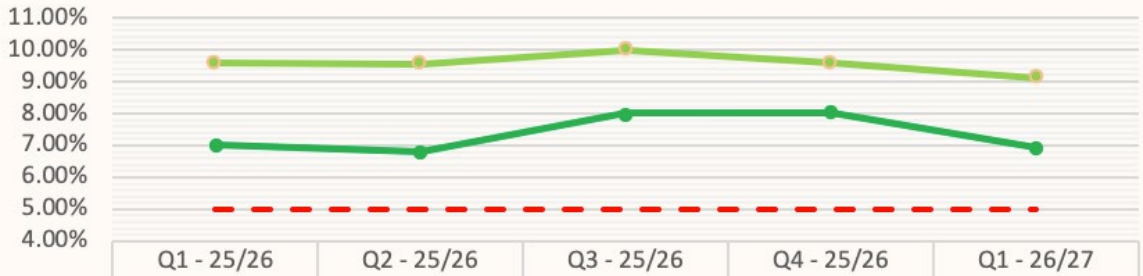
Turnover

HSCP turnover in August 2026 is 9.70%. Although the ageing workforce is noted as a risk factor, we are not currently seeing a high number of retirals impacting on turnover rates. In Home Care and Older Peoples Residential services turnover rates are higher at 12.46% and 10.32% respectively, however this is well below the average for the care sector in Scotland. Turnover for Social Workers in the period was 7.24% and therefore represents a relatively stable workforce, which is likely supported by the capacity for internal movement across care groups. The leadership team have been developing a Mobility process to support people to move across service areas as part of their professional development.

Supporting Attendance

Social Work Workforce Sickness Absence at Q1 2026/27

Fig. 2a: % Sickness Absence (Social Work)



	Q1 - 25/26	Q2 - 25/26	Q3 - 25/26	Q4 - 25/26	Q1 - 26/27
Social Work	9.60%	9.55%	10.00%	9.60%	9.10%
GCC	7.00%	6.80%	8.00%	8.04%	6.92%
Target	5.00%	5.00%	5.00%	5.00%	5.00%

Sickness absence performance within social work remains above Glasgow City Council's overall figure. However, in Q1 2025/2026 the gap has narrowed by 0.4% compared to the same period the previous year. The rolling 12-month trend for Social Work demonstrates a sustained reduction in absence levels, with Quarter 1 2026/27 recording the lowest figure within the rolling year and the lowest quarterly absence rate since Quarter 1 2021/22.

To further support continued improvement, the 2026/2027 Supporting Attendance Action Plan has been implemented and includes proactive measures aimed at reducing sickness absence and promoting employee health and wellbeing.

Recruitment and Retention

Recruitment pressures remain concentrated in frontline services, although application levels and retention are generally positive. During 2025/2026, 17 social work recruitment campaigns attracted an average of 58 applications, while Home Carer adverts averaged 381 applications. Recruitment and career pathways are being strengthened through links with education providers, apprenticeships, trainee routes and targeted candidate engagement.

The Skilled Worker visa scheme supports more than 186 employees across services including Home Care and Older People's Residential Services. Recruitment processes are also adapting to increased use of AI-generated applications through engagement events that promote informed and role specific applications.

Learning and Development

Learning and Development activity across Glasgow continues to be monitored through the Social Work Professional Governance Board where initiatives and projects are discussed proactively.

We continue to support social workers to study postgraduate professional qualifications such as the MHO award and post graduate in Child Protection and Welfare, with the HSCP meeting the cost of the qualification and providing staff protected time for attendance and study. There is ongoing direct delivery of the SVQ programmes for Care Services to support staff meet registration requirements for SSSC. SVQ's in care and the HNC are also used to support workforce and succession planning.

We have a range of courses and learning opportunities, both mandatory and developmental, and continue to deliver on trauma informed and trauma skilled and this is supported by additional learning materials and e-learning modules.

Our learning and development approach is designed to prepare for changes to the work environment brought about by developments in practice, changing legislation, advances in technology and national strategies. Our Practice Teachers work in partnership with professional bodies to support social work programmes and provide practice placements for social work students (approx. 75 every academic year). Placement opportunities for HNC (Social Care) are also provided in our care homes and this also supports workforce planning. Following accreditation from SSSC, we now deliver the Professional Development Award in Practice Learning internally, both to our own staff and other HSCPs in the west of Scotland.

A Graduate Apprenticeship route to achieving the BA in Social Work was introduced this year. 11 social care workers across a range of services will start the programme in September 2026 and a further 10 social care workers will be identified for 2027. This will support the recruitment and retention challenges outlined above and offers an opportunity to develop our own workforce, retaining the valuable skills and knowledge that these staff bring.

Newly qualified social workers are supported through mentoring and coaching by a dedicated Senior Learning & Development Officer, which has enabled us to contribute to the recent SSSC review of the NQSW programme. Additionally, a successful Modern Apprenticeship programme continues in our Older People Day Care Centres where trainees develop a blend of on-the-job practical learning whilst gaining a SVQ qualification, with most trainees to date securing permanent employment.

Furthermore, various management training programmes are offered each year for staff who wish to develop their leadership and coaching skills and develop greater insight and awareness of their management style and approach. 20 managers achieved the K318 leadership qualification in 2025 with a further 20 starting in September 2026.

A new supervision policy for social work staff will be available from October 2026. Short briefings will be provided via webinar for all staff and managers across the HSCP. 10 sessions should be delivered by the end of 2026, with the recorded webinar moving onto the staff updates in January 2027.

Following a further launch of PCR (performance, coaching and review), a short one-hour brief for manager and staff was delivered, and as at August 2026, 1500 staff have attended the briefings, with bespoke sessions being delivered as and when required.

The e-learning team also supported the development of over 40 new e-learning programmes in 2025, with another 29 in 2026. These support a variety of service areas as well as blended approaches to learning

Looking Ahead

The year ahead will require Glasgow's social work services to respond to rising demand and need, financial constraint, workforce pressures and major reform. The central challenge is to modernise and prioritise services without losing sight of rights, relationships, prevention, statutory duties and the quality and safety of practice.

Our priorities for 2026/2027 are to strengthen professional governance, public protection oversight and escalation; deliver and test improvement arising from learning reviews, inspections, audits and feedback; and progress STEP Forward through transparent, evidence based and values led decision making, that balances financial sustainability with statutory responsibilities.

We will continue to support prevention, early intervention, community support and technology; improve data quality and performance intelligence, including preparation for a new case-recording system; and work with partners and communities to address poverty, inequality, housing pressures and increasingly complex need.

Supporting the workforce will remain fundamental, with continued focus on recruitment, retention, supervision, leadership, succession planning, mobility, learning and wellbeing. Our staff are our greatest asset and will be recognised as such. Lived and living experience, alongside the insight of staff, carers and communities, will continue to shape improvement and help ensure that change makes a measurable difference to people's lives.



