

**Item No. 20**

**Meeting Date**

**Wednesday 11<sup>th</sup> June 2025**

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

**Report By:** Pat Togher, Chief Officer, Glasgow City HSCP

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**Independent National Whistleblowing Officer (INWO) Report and HSCP Response**

**Purpose of Report:**

The purpose of this report is to inform the IJB Finance, Audit and Scrutiny Committee about the report published by the Independent National Whistleblowing Officer (INWO) on [30<sup>th</sup> April 2025](#) and the HSCP's response to this.

**Background/Engagement:**

INWO carried out an investigation into a complaint it received concerning a decision to reduce specialist GP services at Hunter Street for people experiencing homelessness in Glasgow.

INWO published its final report on this investigation on [30<sup>th</sup> April 2025](#) with all 4 elements of the complaint being upheld. The report also asked the HSCP to implement a number of recommendations as a result of these findings.

**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 ☐  
 Update requested by IJB ☐  
 Other ☐  
 Not Applicable ☒

**Recommendations:**

The IJB Finance, Audit and Scrutiny is asked to:

a) Note the content of this report and attached briefing.

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<b>Relevance to Integration Joint Board Strategic Plan:</b>
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Although not directly relevant to the IJB's Strategic Plan, the INWO does make recommendations in relation to the Participation and Engagement Strategy and associated procedures for consultation and engagement, which would be applicable to ongoing and future activities in respect of the Strategic Plan.
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**Implications for Health and Social Care Partnership:**

<b>Reference to National Health &amp; Wellbeing Outcome:</b>	
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Outcome 3: People who use health and care services have positive experiences of those services, and have their dignity respected.
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Outcome 4: Health and social care services are centred on helping to maintain or improve the quality of life who use those services.
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Outcome 9: Resources are used effectively and efficiently in the provision of health and social care services.
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<b>Personnel:</b>	N/A
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<b>Carers:</b>	N/A
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<b>Provider Organisations:</b>	N/A
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<b>Equalities:</b>	The INWO's report includes recommendations in respect of the HSCP's duties under the Equalities Act 2010 and the undertaking of Equalities Impact Assessments.
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<b>Fairer Scotland Compliance:</b>	The INWO's report includes recommendations in respect of the HSCP's duties under the Equalities Act 2010 and the undertaking of Equalities Impact Assessments.
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<b>Financial:</b>	N/A
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<b>Legal:</b>	N/A
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<b>Economic Impact:</b>	N/A
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<b>Sustainability:</b>	N/A
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<b>Sustainable Procurement and Article 19:</b>	N/A
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<b>Risk Implications:</b>	Failure to carry out the recommendations set out by the INWO could result in reputational and legal risk to the IJB and HSCP, and could also result in future challenge in respect of statutory duties in respect of consultation and engagement.
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<b>Implications for Glasgow City Council:</b>	None.
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**Implications for NHS Greater Glasgow & Clyde:**

The INWO report is in respect of a function delegated to the IJB by NHS GGC and refers to the whistleblowing procedures within the Health Board.

**1. Purpose**

- 1.1. The purpose of this report is to inform the IJB Finance, Audit and Scrutiny Committee about the report published by the Independent National Whistleblowing Officer (INWO) on [30<sup>th</sup> April 2025](#) and the HSCP's response to this.

**2. Background**

- 2.1. INWO carried out an investigation into a complaint it received concerning a decision to reduce specialist GP services at Hunter Street for people experiencing homelessness in Glasgow. The practice was closed in April 2023.
- 2.2. The complaint to INWO followed an investigation of a whistleblowing concern raised with NHS Greater Glasgow and Clyde in 2023 which was not upheld at Stage 2 of their whistleblowing procedure which concluded in September 2023.
- 2.3. The INWO investigated 4 specific elements in respect of the complaint, these being that the HSCP unreasonably failed to:
- Follow a meaningful process of engagement and consultation with staff involved in the affected service prior to the decision
  - Carry out meaningful stakeholder consultation prior to the decision
  - Perform a full and timely assessment of risk and equalities impact
  - Take action to address long term risks associated with the decision
- 2.4. INWO published its final report on this investigation on [30<sup>th</sup> April 2025](#) with all 4 elements of the complaint being upheld. The report also asked the HSCP to implement a number of recommendations as a result of these findings. These are summarised in para 3.4 of this report and fully detailed in the INWO's report.

**3. HSCP Response**

- 3.1. The HSCP was given the opportunity to respond to the draft version of the INWO's report prior to its final publication, in line with INWO's procedures. The HSCP submitted this response to the INWO via NHS Greater Glasgow & Clyde on 18<sup>th</sup> March 2025, highlighting areas where the HSCP believed there was either factual error, mistake, or relevant comment.
- 3.2. Whilst this did result in some minor changes to the final report, it did not change the decision to uphold all 4 elements of the complaint that was investigated.

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- 3.3. Following publication of the final report on 30<sup>th</sup> April 2025, the HSCP prepared a briefing (dated 7<sup>th</sup> May 2025) to the Health Board and External Stakeholders acknowledging and accepting the INWO's decision and recommendations. This briefing has (at time of writing) been shared with the Chief Executive and Chairperson of NHS Greater Glasgow and Clyde. This is attached as Appendix 1.
- 3.4. The HSCP has also committed to carrying out the recommendations identified by the INWO and has been carrying out work to address these within the timescales set out in the final report. These are summarised in the table below:

Recommendation	Action taken/planned	Deadline
The HSCP ensure the principles in their Participation and Engagement Strategy are being met in practice.	Principles and key requirements of the Participation and Engagement Strategy and HSCP's Consultation and Engagement Guidelines to be subject of report and presentation to HSCP SMT on 11th June 2025. Consultation and Engagement Guidelines to be reviewed and updated to include changes arising from updated Planning with People guidance issued by Scottish Government and COSLA. Engagement with Health Improvement Scotland on 22nd May 2025 to clarify implementation requirements of Planning with People also subject of report to SMT on 11th June 2025.	23-Jun-25
Decision makers should be aware of their responsibilities under the Equalities Act 2010 and the need to complete timely equalities impact assessments.	Principles and responsibilities of decision makers under the Equalities Act 2010 and EQIA process and timescales to be subject of presentation to SMT on 11th June 2025. IJB members received a briefing on this at its development session in February 2025. HSCP's Equalities Lead Officer has prepared briefing document for response to INWO setting out actions already carried out by HSCP in respect of training and governance arrangements.	23-Jun-25
The HSCP seeks to fully understand the impact of the service closure on patient health.  The ongoing health needs of those experiencing homelessness are understood and services adjusted as required.	A commissioning proposal for the recommended Health Needs Assessment, which includes scope and resource requirements, has been prepared by the HSCP's Clinical Director ahead of the 25 June 2025 deadline. This proposal also commits to the assessment being completed by the 28 October 2025 deadline.	25-Jun-25 and 28-Oct-25

- 3.5. The report will also be subject to discussion and consideration, led by the Chief Officer, at the IJB's Development Session scheduled for 18<sup>th</sup> June 2025.

## 4. Recommendations

- 4.1. The IJB Finance, Audit and Scrutiny is asked to:
- a) Note the content of this report and attached briefing.

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**Briefing for Health Board and External Stakeholders**

**Subject:** Response to the INWO Final Public Report (Case Ref: 202306732)

**Date:** 7 May 2025

**From:** Pat Togher, Chief Officer (Glasgow City HSCP)

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**Introduction**

This briefing outlines the HSCP's response to the findings of the Final Public Report (Case Ref: 202306732). The report, published by the Independent National Whistleblowing Officer (INWO), addresses the handling of a whistleblowing concern related to the closure of a small, specialist GP service for people experiencing homelessness and some other complex needs in Glasgow. The HSCP acknowledges the findings and is committed to continuous improvement in service delivery, stakeholder engagement, and risk management.

**Acknowledgement of Continuous Improvement**

The HSCP recognises the need for ongoing enhancement of its processes and services. The report highlighted several areas where improvements are necessary, particularly in engagement, consultation, and risk assessment. The HSCP is committed to addressing these issues and the recommendations in the report has already begun implementing changes to ensure better outcomes for service users.

**Equality Impact Assessment (EQIA)**

The HSCP acknowledges the importance of conducting timely and comprehensive Equality Impact Assessments (EQIAs). The report found that the EQIA for the GP service closure was completed late which is not in line with best practices. Moving forward, the HSCP has already integrated EQIA into its budget-setting process as a standard tool. This ensures that all significant decisions are assessed for their impact on equality from the outset, with the EQIA findings presented to the Integrated Joint Board (IJB) members along with budget proposals, and made public on the HSCP's website ([Equalities Impact Assessments | Glasgow City Health and Social Care Partnership](#)) to ensure transparency and accountability. Whilst the EQIA was completed late, it is available on the above website.

**Planning With People Guidance**

Planning With People guidance ([planning-people-community-engagement-participation-guidance-updated-2024.pdf](#)) was updated in May 2024 and provides an excellent opportunity for the HSCP to refine its engagement processes. This guidance will be instrumental in improving how the HSCP involves stakeholders, including service users, in decision-making processes. The HSCP is engaging with Health Improvement Scotland to identify the most effective way to incorporate the updated guidance into its consultation and engagement practices.

## **Safety and Risk Management**

The HSCP places a high priority on safety and risk management. In response to the report's findings, and in addition to the recommended actions, the HSCP will conduct further risk assessment and management in addition to that which was done at the time of the service change in 2023 and subsequent to this. A follow-up review of a sample of service users affected by the GP service closure will take place. Where possible, this review will seek their views and determine if any Serious Adverse Event Reviews (SAERs) or clinical risks and incidents occurred during the transition process. This proactive approach aims to provide additional assurance to the IJB, NHS GGC and INWO beyond the existing risk assessment and management processes, and to identify and mitigate any potential risks to service users.

## **Areas for Improvement**

The report has prompted the HSCP to reflect on how it can better utilise its existing resources. One significant area of focus is the response to the increase in homelessness following the closure of the homelessness GP practice. The HSCP has adapted by reconfiguring its support services for this vulnerable population and this will be reflected upon in light of the findings of the report.

The HSCP takes the support needs of people experiencing homelessness seriously and is committed to ensuring they receive the necessary care and assistance. Our goal is to sustain a service that supports vulnerable people in their communities through access to primary care and community services, and to provide the required expertise and input via the Complex Needs Service and other services which include addictions and mental health services.

The report has also given the HSCP the opportunity to reflect on our engagement with staff throughout this service change, and it remains our continued aspiration to undertake effective staff consultation and engagement throughout any and all service and workforce change activity.

The HSCP is committed to implementing the recommendations as set out in the report, and the Chief Officer will establish an Implementation Group to this end and aim to commission an independent chair ensuring the necessary transparency and oversight.

## **Conclusion**

The HSCP is dedicated to learning from the findings of this report and implementing changes to improve its services. By integrating EQIA into the budget-setting process, adopting the Planning With People guidance, prioritising/reflecting on safety and risk management measures, the HSCP aims to provide better outcomes for all service users. The HSCP remains committed to continuous improvement and ensuring that the needs of the most vulnerable populations are met with compassion and efficiency.