

NHS Greater Glasgow and Clyde	Paper No. 25/133
Meeting:	NHSGGC Board Meeting
Meeting Date:	30 October 2025
Title:	IJB Joint Report
Sponsoring Director:	Carron O'Byrne, Director of Whole System Flow
Report Author:	Carron O'Byrne, Director of Whole System Flow

1. Purpose

The purpose of the attached paper is to: provide the Board with information across the 6 IJBs and assurance on the whole system approach in relation to Unscheduled Care and Whole System Flow.

2. Executive Summary

The paper can be summarised as follows: The Board receives six individual IJB Leads reports outlining updates from recent IJB meetings. In recognition of the system-wide focus on Transforming Together and delivery of the Operational Improvement Plan (OIP), this paper provides an overview of key actions and themes relating to Unscheduled Care and Whole System Flow. It does not seek to replicate the full content of each IJB report, but instead highlights the collective areas of progress, risk and shared learning that demonstrate an integrated, whole-system approach to improving patient flow and the delivery of high-quality, person-centred care.

3. Recommendations

The NHS Board is asked to consider the following recommendations:

- Note the information within the report

4. Response Required

This paper is presented for assurance.

5. Impact Assessment

The impact of this paper on NHSGGC's corporate aims, approach to equality and diversity and environmental impact are assessed as follows:

- | | |
|------------------------|------------------------|
| • Better Health | <u>Positive</u> impact |
| • Better Care | <u>Positive</u> impact |
| • Better Value | <u>Positive</u> impact |
| • Better Workplace | <u>Positive</u> impact |
| • Equality & Diversity | <u>Positive</u> impact |
| • Environment | <u>Positive</u> impact |

6. Engagement & Communications

The issues addressed in this paper were subject to the following engagement and communications activity:

Information has been collected from the IJB Meetings held since the 21 August 2025 Board Meeting.

7. Governance Route

This paper has been previously considered by the following groups as part of its development:

Individual HSCP reports through IJB Meetings

8. Date Prepared & Issued

Prepared on: 15 October 2025

Issued on: 22 October 2025

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Meeting:	NHSGGC Board Meeting
Meeting Date:	30 October 2025
Title:	IJB Joint Report
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1. Introduction

In line with Public Sector Reform and the Transforming Together Strategy, it is essential that the Board maintains oversight of system performance and risk across Acute and Community services.

This paper draws together key themes from the six Integration Joint Board (IJB) reports, focusing on shared priorities for Unscheduled Care and Whole System Flow. It provides an update on delivery of the Operational Improvement Plan (OIP) and related programmes supporting delayed discharge, admission avoidance and community capacity, reflecting a single, system-wide approach to improving flow and quality of care.

2. Performance

Delivery of the £20.9 million OIP continues to progress across all six HSCPs and Acute Sectors. The programme remains focused on actions designed to strengthen patient flow through:

- early identification and management of discharge pathways
- reduction of bed days lost in acute sites
- admission avoidance at our front doors
- enhancement of community and intermediate care capacity

2.1 Performance and Audit Committee Learning

All IJB Performance and Audit Committees have now completed their Quarter 1 and 2 reviews. Common learning points include the importance of robust financial recovery plans, the need for recurring savings, and the positive impact of collaborative discharge planning and early intervention models. Each IJB's

Audited Accounts for 2024/25 were approved, providing assurance on governance and financial control, while recognising ongoing pressures in prescribing and workforce costs.

2.2 Operational Improvement Plan (OIP) Actions across HSCPs

Whole system working during the most recent reporting period has centered on strengthening joint discharge planning:

- Multi-Agency Planning meetings have been established between Acute and Social Work teams to review all patients identified as medically fit for discharge. Daily multidisciplinary follow-up ensures agreed actions are progressed, and barriers to discharge are addressed promptly.
- Dedicated community and step-down facilities, such as Hawthorn House and Meadowbank Unit, within Glasgow City, continues to support timely transfer of care. These services contributed to bed-day reductions during September
- 32 intermediate-care beds established through the OIP are being utilised across each HSCP to provide short-term community-based capacity with impacts demonstrated in September.
- Additional legal advice and guidance within Glasgow City has been introduced to assist families and carers in progressing guardianship applications, supporting more timely discharge for this patient group to support reduction of Adults with Incapacity (AWI) delays.
- A number of HSCPs have increased the presence of social-work staff within acute sites to enable earlier assessment, improved communication, and more consistent coordination of care arrangements.
- Expansion of the Home First Response Service (HFRS) with increased Allied Health Professional input. The service provides rapid assessment and short-term support in people's homes to prevent avoidable admission and enable earlier discharge.

Early indications from September performance monitoring show some impact in reducing acute bed days lost to delay, supported by closer collaboration between Acute services and HSCP. These actions remain under regular review through the Interface & Urgent Care governance structure as part of the wider Transforming Together delivery framework.

2.3 Integrated Discharge Team

A pilot for Integrated Discharge Teams (IDTs) has commenced across key acute sites. The model brings together nursing, allied health professional, social work, discharge coordination and flow roles into a single, co-located team with shared daily oversight of patients who are ready, or expected to be ready, for discharge within the next 72 hours.

The model involves ward nursing, AHPs, social work, discharge coordinators and flow staff having shared, daily oversight of patients expected to be ready for discharge within the next 72 hours.

The IDT model has been designed to:

- embed daily multi-agency discharge reviews at ward level
- create a single referral and triage route between acute and community teams
- utilise shared dashboards to track expected dates of discharge and outstanding actions
- strengthen escalation for patients experiencing delay beyond 14 days
- improve communication with families and community providers to support timely, person-centred transitions of care

This multi-agency approach is supporting the Home First ethos by promoting safe, timely and coordinated discharge. Early evaluation suggests improved visibility of discharge readiness, clearer accountability among teams, and a reduction in hand-offs between hospital and community staff.

The learning and impact assessment from the initial phase will inform further roll-out and will be overseen through the Whole System Flow Group and the Interface and Urgent Care Programme Board in collaboration with social work and HSCP colleagues.

2.4 Escalation & Decompression

A Whole System Escalation and Decompression workstream has been established to design and implement a coordinated, whole-system response to operational pressures. Its purpose is to ensure timely, consistent, and data-driven escalation and decompression actions between Health and Social Care Partnerships (HSCPs), Acute and external partners such as the Scottish Ambulance Service and NHS 24.

Key elements of this workstream are to:

- Develop a Whole System Escalation and Decompression Policy setting out common triggers, thresholds and actions (including HSCP & Acute)
- Establish a live Command Centre model within expansion of Flow Navigation Centre Plus (FNC+ Plus) to provide real-time system oversight and coordination.
- Implement standardised, data driven Escalation Huddles linking Acute and HSCP colleagues for rapid decision-making and decompression.
- Introduce an integrated escalation dashboard, combining acute, community, and partner data to support early identification of system risk.

Governance for this group has been established with HSCP representation, jointly chaired by a HSCP Chief Officer and an Acute Sector Director and will report into the Interface & Urgent Care Programme Board.

3. Risk

The principal risks identified through IJB and whole-system reporting remain consistent with those previously presented to the Board. The most significant continue to relate to financial sustainability, workforce availability, with delayed discharge performance remaining a significant challenge.

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All six IJBs report increasing financial pressure due to the continued reliance on non-recurring reserves and the limited scope for further in-year savings. Medium-term forecasts highlight potential funding gaps without sustained transformation and recurring efficiencies.

Specific financial risks include the cost implications of the Reduced Working Week, prescribing pressures particularly within primary care, and the increased cost of externally commissioned social-care provision.

Workforce availability across social care, community nursing and allied health professions remains a key operational risk, with ongoing recruitment challenges and higher absence levels in some areas. These factors continue to affect care-at-home capacity and the pace of hospital discharge.

Delayed discharge remains a system risk, particularly in relation to Adults with Incapacity and complex-care pathways, however, it is important to note that a number of our partnerships have and continue to perform well in respect to delayed discharge.

Mitigation is being delivered through the Operational Improvement Plan, the Integrated Discharge Team pilot, and implementation of the Escalation and Decompression Framework.

Governance and assurance processes are well established through each IJB's Audit and Performance Committee and will be linked to the Interface & Urgent Care Programme Board for whole system oversight.

4. Engagement

A key element of the whole-system approach continues to be improving public understanding of alternative pathways for care, ensuring that people know how and where to access the most appropriate support without defaulting to emergency departments or unplanned admission.

Partnership working with care homes also remains a priority. All six IJBs report active collaboration between Acute and community teams to improve communication, promote consistent standards and support safe, timely discharge from hospital. Joint communication channels have been reinforced through integrated discharge arrangements and daily escalation huddles, helping to reduce readmissions and enable smoother transitions of care. Regular development sessions are now established across the Partnerships, bringing together senior leaders and operational teams to review system performance, share learning and agree collective priorities. These sessions continue to support informed decision-making and maintain strategic focus on areas of greatest impact, particularly around delayed discharge, workforce resilience, and whole-system flow.

All of this work is underpinned by robust community-based planning within each IJB, ensuring that resources are directed to where they will make the most difference, and that care is designed around the needs of local populations. The emphasis remains on prevention, early intervention, and sustainable delivery of services through strong collaboration between NHSGGC, HSCP's, and partner

organisations.

5. Recommendations

The Board are asked to note the update and provide feedback on detail required in future reports.

6. Appendix



2025 10 25
Inverclyde IJB Update



2025 10 25 East
Renfrewshire IJB Upd:



2025 10 25 West
Dun IJB Update for Nt



2025 10 25 East
Dunbartonshire IJB Uj



2025 10 25 Glasgow
City IJB Update for NF



2025 10 25
Renfrewshire IJB Upd:

NHS Greater Glasgow and Clyde	Paper No. 25/133
Paper Title:	East Dunbartonshire Integration Joint Board Report
Meeting:	Board Meeting
Date of Meeting:	30th October 2025
Purpose of Paper:	For Awareness and Assurance
Classification:	Board Official
Date of IJB	17th September 2025
Committee Chairperson:	Chair – NHS Non Exec, Libby Cairns Vice Chair & Elected Member – Councillor Calum Smith

1. Purpose of Paper

The purpose of this paper is to: inform the NHS Board on key items of discussion at the East Dunbartonshire Integration Joint Board (IJB) on 17th September 2025.

2. Recommendation

The Board is asked to note the key items of discussion at the most recent meeting of the IJB on 17th September 2025 as set out below, and seek further information or assurance as required.

3. Key Items of Discussion

Libby Cairns (Chair) thanked Councillor Calum Smith for his tenure as IJB Chair and the rotation to Vice Chair role.

The minute of the meeting of 26th June 2025 was reviewed and approved by members.

Derrick Pearce, Chief Officer addressed the Board and summarised the national and local developments since the last meeting of the Partnership Board. Details included:

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- ✚ Since the HSCP Board last met in June the HSCP has continued to participate in the NHSGGC Transforming Together agenda. We have operationalised the additional intermediate care capacity which is being financed by non-recurring funding. There has been no further investment from the programme into East Dun HSCP but discussions remain ongoing and will be subject to future reporting to the IJB as and when required.
 - ✚ The Scottish Government has published the latest drugs deaths data. While there was a welcome reduction in overall deaths in Scotland there was a notable spike in figures specific to East Dunbartonshire. In 2023/24 15 people in East Dunbartonshire lost their lives to drugs. A technical note will be issued in due course providing more detail relating to the increase and contributing factors.
 - ✚ In August our national children's inpatient psychiatric unit Ward 4 at the Royal Hospital for Children and our adolescent inpatient psychiatric unit at Skye House were visited on an announced basis by Healthcare Improvement Scotland and the Mental Welfare Commission. We anticipate having formal reports on both these visits in December 2025. Informal feedback provided was in line with our own understanding of the services and provided helpful insight into the experiences of our staff, patients and families.
 - ✚ The External Review of care and treatment in Skye House by the Royal College of Psychiatrists is ongoing and we expect this report in January 2026.
 - ✚ Work has continued to progress on the review of the health and social care partnership integration schemes across NHS Greater Glasgow and Clyde. Further work requires to be progressed on the financial framework and model underpinning hosted services and we now anticipate the revised schemes will be ready for presentation to the NHS Board, Councils and IJBs early in 2026.
 - ✚ Finally, members were asked to note that the Scottish Government has published the new national Strategy and Delivery Plan for Palliative Care and Care Around Dying. The HSCP is actively engaged in GGC work in this space. The Scottish Government also announced the release of additional investment in General Practice and the HSCP primary care team will work with local practices to consider how this investment can help support capacity and sustainability.
- Members noted and approved a report from David Aitken, Head of Adult Services/Chief Social Work Officer on the **Alcohol and Drug Partnership (ADP) Annual Report for 2025 and an update on the Medication Assisted Treatment (MAT) Standards progress and status for 2024/25.**
 - Karen Lamb, Interim Head of LD provided a report to members on the conclusion of the **Pineview Supported Living Service Review** and to make recommendations that deliver on the wider Learning Disability (LD) Review objective; to ensure learning disability services across East Dunbartonshire are

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sustainable, efficient and high quality. Members considered and approved the recommendations to be taken forward.

- Ali McCready, Chief Finance and Resources Officer presented members with an update report on **Financial Transformation 2025/26 – ‘Towards Sustainability’ Update**, asking members to note the extent of cost pressures and financial challenges for 2025/2026 and beyond. The paper provided the current status of the programme of service reviews underway. This report is a regular standing item presented at each meeting.
- Members noted a report presented by Alison Willacy, Planning, Performance and Quality Manager on the **Quarter 1 Performance Report** and the progress made against an agreed suite of performance targets and measures, relating to the delivery of the HSCP strategic priorities and national health and wellbeing outcomes, for the period April to June 2025 (Quarter 1).
- **The HSCP Corporate Risk Register**, was presented to members by Ali McCready. There are 21 live risks, 3 are considered to be very high risk (priority 1), 12 are considered to be high risk (priority 2) and 6 are considered to be a medium risk (priority 3). Detail was provided on the service risk register process, number and levels of risk that inform the Corporate Risk Register. Members reviewed and approved the Corporate Risk Register.
- Fiona Munro, Service Manager/Lead Allied Health Professional provided an update report to the Board on **Hospital Discharge Delays: Performance and Assurance**. Board members were assured that the daily scrutiny and robust process to manage delays reported continues, personally managed by the Chief Officer.
- A report on **Commissioned Services** was presented by Gillian Healey, Strategic Commissioning Manager, providing a high-level overview of the 2025/2026 budget for commissioned services and market dynamics which influence service costs. The report also provided an update on Un-Commissioned Spend, Employers National Insurance Contributions and implementation of the Scottish Living Wage. Board members noted this report.
- Ali McCready updated board members on the **Financial Performance on Budget 2025/26 – Month 4**. Following consideration members noted the projected outturn position; the continued actions by Chief Officer and management team to mitigate underlying cost pressures; the progress on achievement of savings plans and the anticipated reserves position as detailed in the report. Members duly approved budget adjustments and use of ear marked reserved outlined in the report.
- The Board noted the suite of minutes from the established governance groups, namely the Public Service User and Carer Group (PSUC), Performance Audit and Risk Committee, Clinical and Care Governance Group, Strategic Planning Group, and the Staff Partnership Forum detailing activities undertaken by each group.
- The Board noted the proposed agenda items for future meetings including Topic Specific Seminars, and Board Development sessions.

4. Issues for referral to Standing Committees of the Board or escalation to the NHS Board

There were no issues for referral to Standing Committees or escalation to the NHS Board.

5. Approved Minutes from IJB Meeting Held on 26th June 2025

The minutes of the meeting of 26th June 2025 were approved without amendment and can be accessed within the meeting papers via the following link

[East Dunbartonshire HSCP - Integration Joint Board 17.09.25](#)

6. Date of Next Meeting

The next meeting of the East Dunbartonshire IJB will take place on Thursday 13 November 2025

NHS Greater Glasgow and Clyde	Paper No. 25/133
Paper Title:	East Renfrewshire Integration Joint Board Report
Meeting:	Board Meeting
Date of Meeting:	30 October 2025
Purpose of Paper:	Assurance
Classification:	Board Official
Date of IJB:	24 September 2025
Committee Chairperson/Non-Executive Lead:	Mehvish Ashraf, IJB Vice Chair

1. Purpose of Paper

The purpose of this paper is to: inform the NHS Board on key items of discussion at the East Renfrewshire Integration Joint Board (IJB) which took place on [24th September 2025](#).

2. Recommendation

The Board is asked to note the key items of discussion at the recent meeting of the East Renfrewshire IJB as set out below and seek further information or assurance as required.

3. Key Items of Discussion

Chief Officer Update

The IJB noted the Chief Officer's update. The report highlighted strategic developments across the HSCP, including visible leadership initiatives like "Coffee with Alexis," to foster dialogue with staff and partners. Key updates included progress on the Combined Delivery Plan, governance improvements, and the development of a Digital and Technology Enabled Care Strategy. The report also emphasised the importance of person-centred care, showcased through a featured people story, and outlined next steps in financial recovery planning, prescribing cost mitigation, and service redesigns aligned with partnerships strategic priorities:

Keeping Our Promise, Living, Aging and Dying Well, Healthy Neighbourhoods, Valuing Our Workforce, and Sustainable Health and Care System.

People Story: Journey to Bloods

The IJB noted the people story. This presentation showcased a powerful example of person-centred care delivered by the Learning Disability Health Check Team. It described how a needle-phobic individual successfully underwent venepuncture through tailored, compassionate support and reasonable adjustments. The story illustrated the importance of flexibility, creativity, and time investment in learning disability practice. It also highlighted the broader impact of health checks, which have led to cancer diagnoses, access to screening, and safeguarding interventions.

Audited Annual Report and Accounts 2024/25

The IJB approved the audited annual report and accounts as remitted from the Performance and Audit Committee, authorised the Chair, Chief Officer and Chief Financial Officer to accept and sign the annual report and accounts on behalf of the IJB for submission to Audit Scotland and noted and commented on the summary overview of financial performance document for 2024/25 prior to publication on the IJB website. The report noted successful delivery of £8.593 million in savings, though recurring savings remain a challenge. Governance and leadership were rated positively, and the IJB committed to developing a realistic financial recovery plan to address a potential £32.6 million budget gap by 2029/30 on the basis of a flat cash budget settlement.

Shifting the Balance of Care to Community

The IJB noted the current position and note the opportunities/challenges with respect to shifting the balance of care for older adults in East Renfrewshire, noted that key deliverables and milestones set out in the report to support people to be discharged home on a timely basis and agree that 6 monthly updates including a balance performance scorecard will be presented to Integration Joint Board moving forward replacing the current Discharge without Delay presentation format. It emphasised prevention, early intervention, and integration of services.

Care at Home Redesign

The IJB approved the proposed future neighbourhood model for delivering care at home to enable progression to phase 2 of the programme, noted milestones towards implementation of phase 2, noted intention to tender for a 7 + 2 + 1 (10 year) framework for external care and wellbeing provision, focused on outcomes and around neighbourhoods of East Renfrewshire, note mitigations in relation to the current care at home overspend and requested that the Chief Officer provides a progress update in six months on the delivery of the milestones outlined in the report to the Integration Joint Board.

Annual Care Home Assurance Report

The IJB noted the robust processes in place to provide assurance in relation to provision of nursing leadership support and guidance to care homes in East Renfrewshire, noted the collaborative support structures in place to improve the health and wellbeing of care home residents and staff and ensuring care homes are fully integrated within the health and social care system. It highlighted strong practices in infection control, care planning, and workforce culture. The report also described the integrated support provided by multidisciplinary teams, including Care

Home Liaison Nurses, Advanced Nurse Practitioners, and Mental Health specialists, which contributed to reduced hospital admissions and improved resident outcomes.

Finance and Policy Implications for Foster Care, Kinship and Adoption

The IJB recognised the impact of legislative and policy change for the Health and Social Care Partnership and East Renfrewshire Council, approved the uplifted fostering, kinship and adoption fees and allowances which have been reviewed in line with the Scottish Recommended Allowances (SRA), approved the enhanced rate for children with complex needs. These updates align with the Promise and aim to improve outcomes for care-experienced children and young people.

Revenue Budget Monitoring Report 2025/26 (as at 31 July 2025)

The IJB noted the projected outturn for the 2025/26 revenue budget, noted that the Chief Officer and her management team continue to work on actions to deliver savings and mitigate cost pressures, approved the budget virement. The IJB noted a projected underspend of £0.212 million, though underlying pressures of £2.538 million persist, mainly due to prescribing costs. Savings delivery stands at 72.5%, with a shortfall of £1.2 million in health-related savings, again related to prescribing. The report detailed variances across services, including overspends in Intensive Services and Prescribing, and underspends in Children & Families and Finance & Resources. A Financial Recovery Plan and One-Year Delivery Plan are in development to address sustainability challenges.

4. Issues for referral to Standing Committees of the Board or escalation to the NHS Board

There were no issues for referral or escalation to other Standing Committees or the NHS Board.

The HSCP continue to look at every opportunity to continue to enable people to thrive, flourish and live well at best value.

5. Approved Minutes from IJB Meeting held on

At the September meeting, the minute of 13 August 2025 was approved. The minute from the September meeting will be discussed in November 2025. There is a full history of IJB meeting papers and agendas available on our website.

6. Date of Next Meeting

The next meeting of the East Renfrewshire IJB will take place on 19th November 2025.

NHS Greater Glasgow and Clyde	Paper No. 25/133
Paper Title:	Standing Committee Chair's Board Report
Meeting:	Board Meeting
Date of Meeting:	30 October 2025
Purpose of Paper:	Assurance
Classification:	Board Official
Name of Reporting Committee:	Glasgow City Integration Joint Board
Date of Reporting Committee:	24 September 2025
Committee Chairperson:	Paul Ryan

1. Purpose of Paper

The purpose of this paper is to: inform the NHS Board on key items of discussion at the Glasgow City Integration Joint Board (GCIJB).

2. Recommendation

The Board is asked to note the key items of discussion at the recent meeting of the Glasgow City IJB on [24 September 2025](#) as set out below and seek further assurance as required.

3. Key Items of Discussion

Glasgow City IJB Membership Update

The IJB approved the appointments of Kelda Gaffney to the new role of Depute Chief Officer, Operations and Governance and Chief Social Work Officer; and Stephen Fitzpatrick to the new role of Depute Chief Officer, Strategy, Innovation and Best Value. Both officers will join the IJB as professional advisors. The IJB also noted some membership changes and received an update on the progress with Carer and Service User Stakeholder Recruitment. The Chair welcomed Karen Turner to her first meeting of GCIJB.

Glasgow City IJB Minutes

Subject to agreed amendment, the IJB approved the minutes of the meeting held on [25 June 2025](#).

Matters Arising – Decision to cancel meeting on 20th August 2025

The IJB received a briefing note provided by the Director of Legal and Administration in Glasgow City Council following a request for legal advice in relation to the motion presented at the IJB on 25th June 2025 to request pausing implementation of the cessation of a service provided by Scottish Huntington's Association. On receipt of this legal advice, the decision was taken, in consultation with the IJB Chair, to cancel the extraordinary IJB scheduled for 20th August 2025.

A further motion was circulated at the meeting on 24th September proposing that a Huntington's specialist service should continue in Glasgow beyond September 2025 and that work should be done to ensure a sustainable model for the future provision of specialist HD support across the health board area. Further legal advice was sought, and it was confirmed that the language used within the motion continues to have a financial requirement, and therefore the motion was deemed not competent.

Chief Officer Update

The Chief Officer provided a verbal update on the undernoted key areas:

Delayed Discharges

Delayed Discharges continue to prove a challenge to the whole system. After a brief surge over the summer the position has again stabilised at between 160-170 delays on any given day. There has been some progress with AWI, with a 14.3% reduction in AWI delays since early June. In addition, 6 of the longest 7, most complex delayed patients have plans in place to be discharged this month, releasing significant bed days back to the Acute system.

Homelessness

As at 2nd September 2025, 4,401 households were living in temporary accommodation across the city and 1,829 of these households were residing in unsuitable bed and breakfast/hotel type accommodation. This represents an increase of 143 households in temporary accommodation and an increase of 74 households in bed and breakfast/hotel accommodation since June 2025. To date in 2025/26, 43% of the total demand for homelessness assistance has been from refugee households (who are disproportionately more likely to require temporary accommodation). Refugee households make up 58.5% of the total number of households within temporary accommodation. A breakdown was provided on Rough Sleeper numbers which totalled 29 for week commencing 01/09/25, noting that this figure can fluctuate on a weekly basis.

Ongoing initiatives were also outlined which include an Executive Leadership Session with Chief Executives from RSLs across the city which will take place on 22nd October 2025. The WAYfinder service went live on 7th August 2025, marking a major transformation in how homelessness outreach services are delivered in the

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city. The HSCP continue to meet with the Scottish Government Housing Emergency Team through fortnightly deep dive sessions.

Mental Health Inpatients

Bed occupancy, including contingency pass beds, remains above 95%, with adult acute beds under particular strain. Some non-Glasgow wards are capped, reducing total beds by 22 across the mental health hospital estate. Concerted efforts to reduce bank staff use continue, including the use of daily huddles focused on safe staffing and bed management, and a comprehensive action plan led by the Chief Nurse and Assistant Chief Officer. Medical staffing is now in place for the Community Mental Health Acute Care Service; full implementation aims to lower hospital admissions by providing home-based treatment.

The Thistle – Safer Drug Consumption Facility (SDCF)

The oversight Board continues to meet on a 6-weekly basis, chaired by the Chief Officer, to provide governance and assurance, and maintain an overview of community engagement and emerging themes. Attendance figures continue to be available on the dedicated SDCF page on the HSCP website. Data up to end August 2025 highlights that:

- 418 individuals have accessed the service since opening. 77% of these individuals are male, 23% female.
- The service has been accessed over 6000 times with over 4000 injecting episodes.
- 56 medical emergencies are recorded, most of which have been managed internally.
- Trends around substances being used are monitored regularly, with cocaine continuing to be the most regularly injected drug.

Joint Inspection of Services for Children and Young People at Risk of Harm

The Care Inspectorate report was published on 12th August 2025, following the inspection process that took place from February to July 2025. In relation to the overall evaluation of the joint inspection the Care Inspectorate evaluated Glasgow Community Planning Partnership on Quality Indicator 2.1 as GOOD. The Care Inspectorate have requested a joint action plan that clearly details how the partnership will make improvements in the key areas identified by inspectors. The proposed improvement plan will be presented to both the Chief Officer Group and Child Protection Committee to ensure appropriate governance and quality assurance processes are in place.

Ernst & Young – Annual Audit Report 2024-25

The IJB noted the Annual Audit Report for 2024-25.

Audited Annual Accounts 2024-25

The IJB were informed of the completion of the audit of the Annual Accounts and approved for signature the audited Annual Accounts for the period 1st April 2024 to 31st March 2025.

Funding for the Delivery of the Primary Care Improvement Plan 2025-26

A report was presented to seek approval for the PCIP programme for 2025/26, based on funding of £22.674m. The IJB approved the proposed programme for the Primary Care Improvement Fund (PCIF) for 2025/26 as outlined in the report.

Glasgow City Integration Joint Board Budget Monitoring for Month 4 and Period 5 2025-26

A report was presented outlining the financial position of the Glasgow City Integration Joint Board as at 25th July 2025 for Council and 31st July 2025 for Health and highlighted any areas of budget pressures and actions to mitigate these pressures. The IJB approved the budget changes noted in the report.

Service Prioritisation - Update

The IJB received a report updating on the Service Prioritisation initiative, the work completed to date and next steps. Members considered and agreed the key principles and critical success factors to be used in the model; and instructed officers to provide regular updates on the model and the outcomes from Service Prioritisation reviews at each Board meeting.

Review of the Children's and Young People Mental Health Framework

An update was provided to the IJB on the funding arrangements for the Children and Young People's Mental Health and Wellbeing (CYPMH) Framework for 2026 onwards, following baselining of this previously annualised grant. The IJB noted the proposed expenditure of £1.843m per annum from 2026.

NHSGGC Primary Care Strategy Implementation

A report was presented to provide GCIJB with an update on the NHS Greater Glasgow and Clyde Primary Care Strategy 2024 – 2029. The IJB noted the progress on the delivery of the strategy and Primary Care Strategy Actions Tracker. They also noted the performance across the NHSGGC Primary Care Strategy in relation to the deliverables for year 1.

Care Reform Bill Update

The IJB received an update on the current position of the Scottish Government's National Care Service (Scotland) Bill, renamed the Care Reform (Scotland) Bill. Members noted the next steps and that the Scottish Government have established an interim National Care Service Advisory Board, on a non-statutory basis, to provide advice and suggest where improvements can be made to social care, social work and community health services to help ensure they are consistent, fair and high-quality across Scotland.

Horizon Scanning

A report was presented to provide a high level summary of potential future external developments that may impact on the Integration Joint Board's strategic objectives, budget or key operational activity. The IJB found the report helpful and noted it would be presented on a 6-monthly basis.

Glasgow City IJB and Committees 2026-27 Meeting Schedule

The IJB received the proposed meeting schedule for 2026/27.

Approvals under CO/CFO Delegated Authority on the grounds of urgency

The IJB noted the undernoted approvals by the Chief Officer and Depute Chief Officer, Finance and Resources on the grounds of urgency:

- National Care Home Contract Increase Agenda for Change -2025-26
- Application by Ashton Medical Practice to close their Cardonald Branch Surgery

4. Issues for referral to other Standing Committees or escalation to the NHS Board

There were no issues for referral to other Standing Committees or escalation to the NHS Board.

5. Date of Next Meeting

The next meeting of the Glasgow City IJB will take place on 26 November 2025.

NHS Greater Glasgow and Clyde	Paper No. 25/133
Paper Title:	Standing Committee Chair's Board Report
Meeting:	NHSGGC Board Meeting
Date of Meeting:	30 October 2025
Purpose of Paper:	Assurance
Classification:	Board Official
Name of Reporting Committee:	Inverclyde Integration Joint Board
Date of Reporting Committee:	8 September 2025
Committee Chairperson:	David Gould, NHSGGC Non-Executive Lead

1. Purpose of Paper

The purpose of this paper is to: inform the NHS Board on key items of discussion at the Inverclyde Integration Joint Board.

2. Recommendation

The Board is asked to note the key items of discussion at the recent meeting of the Inverclyde Integration Joint Board on 8th September 2025 as set out below and seek further assurance as required.

3. Key Items of Discussion

Items for Action

Item 4. Financial Monitoring Report 2025/26 Period 3

The Board agreed the Period 3 financial monitoring report, noting an overall overspend as at 30th June of £0.115m (Social Care overspend £0.659m, Health Underspend £0.543m). It was noted that should this level of overspend continue, it could be contained through appropriate use of reserves.

Item 5. HSCP Annual Performance Report 2024/25

The Board were presented with the HSCP Annual Performance Report (APR) for 2024/25. The APR is the first report against the 2024-27 Strategic Partnership

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Plan and demonstrates examples of positive performance and progress towards achieving the identified Strategic Priorities.

The Board approved the APR for publication and submission to Scottish Government

Item 6. HSCP Strategic Partnership Plan – Strategic Priorities 2022-25

The Board were asked to approve a change in wording to the 4 strategic priorities. These changes were identified through local engagement with communities and stakeholders and help strengthen the HSCPs approach of collaboration and empowerment of local people.

The proposed changes were agreed by the Board.

Items for noting and routine decisions

Item 7. Strategic Partnership Plan: Outcomes Framework - Update

The board were presented with the HSCPs draft Outcomes Framework. The Board noted the progress of the Outcome Framework and its ongoing development.

Item 8. Closure of Inverclyde Centre – Transition Planning

The board were presented with a progress report on the closure of the Inverclyde Centre and were asked to endorse the Decommissioning and Transition Plan.

The Board noted the works that are taking place to ensure closure of the centre by January 2026.

Item 9. IJB Directions Annual Report – 2024/25

The board received a summary report on the Directions issued by IJB to Inverclyde Council and NHS Greater Glasgow and Clyde between September 2024 and August 2025.

The Board noted the contents of the report.

Item 10. Clinical and Care Governance Annual Report 2024-25

The board received a summary report on the annual activity of the HSCP's Clinical and Care Governance Group.

The report was noted by the Board

Item 11. NHS Greater Glasgow and Clyde Primary Care Strategy Implementation

The board were presented with a progress update on the NHS GGC Primary Care Strategy (2024-29), highlighting the year-one performance towards implementation and the ongoing efforts to progress the plan.

The report was noted by the board.

Item 12. Housing Contribution Statement 2024/25

The Board were provided with a revised Housing Contribution Statement (HCS) (2024-25) and the year 1 progress report. This revision follows a review of actions by Housing Strategy Services. The year-one progress report provided an overview progress made against the Housing Contribution Statement

The revised statement and year-one report were noted by the board.

Item 13. Request by New Surgery Kilmacolm to close Langbank Branch Surgery and Dispensary

A proposal to close the Langbank Branch Surgery and Dispensary by New Surgery Kilmacolm was presented to the Board. The paper highlighted the extensive consultation process to inform the decision and potential impacts and mitigations.

The proposal was noted by the board, with agreement to support the decision made by New Surgery Kilmacolm to close the branch surgery.

Item 14. Chief Officer's Report

IJB received a report from HSCP Chief Officer. The report highlighted the following:

- An update on delayed discharges
- The social media platform promoted by Inverclyde's Health Visiting Team,
- Progress towards the HSCPs Grow Your Own initiative.

Then content of the report were noted.

Item 15. Minute of Meeting of Inverclyde Integration Joint Board Audit Committee – 24th March 2025

The board noted the minute of the IJB Audit Committee of 24th March 2025

Exempt Information

Item 16. Approval for Employment Release Under Voluntary Early Retirement

The Board were presented with a proposal in relation to the release of employees through the Voluntary Early Retirement Scheme.

The proposal was agreed by the Board.

Item 18. Governance of HSCP Commissioned External Organisations Services

Report received on the Governance of HSCP Commissioned Services. The report advised on the completion of the closure of Glenfield Care Home with all residents now being transferred to other care homes.

IJB noted the report.

4. Issues for referral to other Standing Committees or escalation to the NHS Board

None Identified.

5. Date of Next Meeting

The next meeting of the Inverclyde Integration Joint Board will take place on 17 November 2025.

NHS Greater Glasgow and Clyde	Paper No. 25/133
Paper Title:	Standing Committee Chair's Board Report
Meeting:	NHSGGC Board Meeting
Date of Meeting:	30 October 2025
Purpose of Paper:	Assurance
Classification:	Board Official
Name of Reporting Committee:	Renfrewshire Integration Joint Board
Date of Reporting Committee:	19 September 2025
Committee Chairperson:	Margaret Kerr

1. Purpose of Paper

The purpose of this paper is to: inform the NHS Board on key items of discussion at the Renfrewshire Integration Joint Board (IJB).

2. Recommendation

The Board is asked to note the key items of discussion at the recent meeting of the Renfrewshire IJB on 19 September 2025 as set out below and seek further assurance as required.

3. Key Items of Discussion

3.1 Membership Update

This report set out recent changes to the Board's membership following decisions made by NHSGGC. At Friday's meeting, the Clerk outlined:

Following revised NHS Board member roles approved at the NHS Board meeting on 21 August 2025, Karen Turner will no longer serve as a voting member of the Renfrewshire IJB.

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Karen will be replaced as a voting member by Jamie Kinlochan, who has been appointed for a period of three years.

In line with the IJB's governance arrangements, Health Board voting members were invited to nominate one of their number to sit on the Audit, Risk & Scrutiny Committee, to replace the outgoing Karen Turner. Jamie Kinlochan was nominated and seconded for this position.

Members noted:

- The appointment of Jamie Kinlochan as a Health Board voting member.
- That Jamie Kinlochan will also join the Audit, Risk & Scrutiny Committee from its next meeting.

3.2 Chief Officer's Report

This regular report provided an update on the wide range of local operational and national developments since the last meeting. At Friday's meeting, the new Chief Officer Billy McClean outlined:

- **A review of Renfrewshire's Palliative Care Strategy**, with a proposed 18-month extension to allow completion of Year 3 actions and alignment with the forthcoming national strategy and the next IJB Strategic Plan.
- **Renfrewshire's continued strong performance on delayed discharges**, maintaining the lowest rate in Scotland as of August 2025 and ranking first for standard delays and sixth for Code 9 delays in the April–June period.
- **An update on CAMHS**, including continued 100% performance against waiting time targets, the impact of a new waiting list team, and the permanent appointment of the Education Advisor (CAMHS) role following a successful pilot.
- **Renfrewshire's position on drug-related deaths**, with a 5% increase in 2024 and continued delivery of all Medication Assisted Treatment (MAT) standards. The ADP is progressing a wide-ranging improvement programme including trauma-informed training, enhanced surveillance, and targeted work on cocaine use.
- **Renfrewshire HSCP's contribution to NHSGGC's Transforming Together Programme**, including shaping virtual hospital pathways and supporting capital planning at the Royal Alexandra Hospital.

Key national policy updates included:

- **The Health and Social Care Service Renewal Framework 2025–2035**, setting out a 10-year vision for transformation, with principles focused on prevention, people, community, population planning, and digital innovation.
- **Scotland's Population Health Framework 2025–2035**, which prioritises embedding prevention and improving healthy weight, and calls for whole-system collaboration across sectors.
- **Audit Scotland's workforce report**, highlighting challenges in recruitment, retention, wellbeing, and digital integration, and calling for improved workforce planning and staff engagement.

- **The Care Reform (Scotland) Act 2025**, which introduces new statutory duties for IJBs, Local Authorities, and Scottish Ministers, including rights to breaks for carers, digital care records, and ethical commissioning provisions.

Members noted:

The range of local HSCP updates and national policy developments provided.

3.3 In-year Budget Monitoring Report

This report provided an update on the financial position as of 31 July 2025 and the projected year-end position for 2025 / 26. At Friday's meeting, the following points were outlined:

- A year-end overspend of £6.18 million is projected. This figure represents an improvement from the £8.99 million forecast in March 2025. The figure includes planned transfers to earmarked reserves for Mental Health, PCIP, and ADP funding.
- Key cost pressures include increased demand and complexity in Care at Home and Adult Care Placements, prescribing costs, and staffing pressures in Mental Health services due to enhanced observations and reduced working hours.
- Recruitment and retention challenges persist across several service areas, with vacancy management measures helping to mitigate some of the overspend.
- Prescribing costs remain volatile, with a projected overspend of £650k. Market conditions have temporarily eased financial pressure, but risks remain due to unsustainable pricing and potential supply chain disruptions.
- A proposed transfer of £3.37 million to earmarked reserves to support delivery of a balanced budget, using the non-recurring superannuation reduction for local government.
- Financial sustainability concerns continue, with general reserves projected to be fully depleted by 2027 / 28. External auditors have highlighted the urgent need for recurring savings and service redesign through the Sustainable Futures programme.
- A mid-year assessment of budget pressures for 2026 / 27 - 2027 / 28 will be presented at the November IJB meeting, with further updates following the Scottish Government's budget announcement.

Members approved:

- The proposed transfer to earmarked reserves to support budget balance.

Members noted:

- The in-year financial position and projected year-end overspend.
- The financial risks and sustainability challenges facing the IJB.

3.4 IJB Audited Annual Accounts 2024 / 25

This is an annual report which provided a comprehensive overview of Renfrewshire's financial performance and governance arrangements for the year ending 31 March 2025. At Friday's meeting, Sarah outlined:

- The audited Annual Accounts for 2024 / 25, which received an unqualified audit opinion from Ernst & Young LLP, confirming compliance with statutory accounting requirements.

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- A final year-end overspend of £3.979m, improved from the original forecast of £10.7m, due to vacancy management, discretionary spend controls, and enhanced budget scrutiny.
- Drawdown of £8.92m from reserves, including £6.236m from earmarked reserves and £2.684m from general reserves, with a remaining general reserve balance of £3.854m (1% of net budget).
- Continued financial sustainability concerns, with reserves projected to be fully depleted by 2027/28.
- Delivery of £6.042m in recurring savings through Phases 1 and 2 of the Sustainable Futures programme, with a further £13.8m approved for delivery over the next three years.
- Strong performance in delayed discharges, maintaining Renfrewshire's position as the best performing HSCP in Scotland for the third consecutive year.
- Positive inspection outcomes, including "very effective" ratings for Adult Support and Protection services.
- Recognition of staff achievements, including national awards and support through the Staff Development Fund.
- Progress on strategic priorities, with 74 of 103 Year 3 deliverables completed, and a refreshed Strategic Plan 2025–27 now in place.
- Ongoing risks, including prescribing volatility, workforce pressures, and the need for recurring savings to ensure long-term financial sustainability.

Members approved:

- The audited Annual Accounts for 2024 / 25 for signature.

Members noted:

- The financial performance, governance arrangements, and strategic achievements outlined in the report.

3.5 Sustainable Futures: consideration of final proposals and wider programme update

During the meeting, voting members were asked to consider two proposed changes to the range of proposals initially put forward.

The first was a motion, tabled by Paul Ryan from NHSGGC, which said:

Motion

This motion asks the IJB to review the proposals with an aim to redesign the Childsmile Community and Practice programme, in light of

- The concerns raised by National Childsmile Executive team, the Oral Health Directorate and the British Dental Association
- The high level of risk identified with only limited mitigation.

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- The disproportionate impact on those children and families in lower socioeconomic groups
- The potential increase in the number of children requiring teeth removed under anaesthesia

and bring back a paper to a future IJB meeting.

This motion assumed the approval of all other proposals that were initially put forward.

The second change came in the form of an amendment, tabled by Cllr Jacqueline Cameron, which said:

Amendment

“While the IJB supports the strategic direction of travel of Sustainable Futures and the need for a transformational approach to deliver change, the IJB rejects the current tranche of proposals with the exception of proposal 9 (Redesign of District Nursing and Care At Home Overnight Service).

We are concerned that the impact of these proposals will result in greater costs for the IJB and are misaligned with the prevention and early intervention agenda.

Given that the UK budget has been delayed which will impact on the timing of the Scottish Government budget, it remains to be clarified if IJB’s will receive further funding in the future.”

Voting

Members were asked to choose to support either the ‘motion’ or the ‘amendment’. Eight votes were cast and the outcome was a tied vote, with four votes cast for each option.

The IJB Chair does not have a casting vote in this scenario, but must make a decision on how to move forward.

I made the decision not to arrange a special meeting to come back for a decision on this matter.

As a result of the tied vote, all proposals - with the exception of the Redesign of District Nursing and Care at Home Overnight Service, which is approved - **were neither approved nor rejected by the IJB.**

This means that the matter falls for these proposals and the related services will continue to operate as they currently do without any changes at this time.

3.6 2025 / 26 Performance Scorecard and Strategic Delivery Plan

This report provided an update on the development of the 2025 / 26 Performance Scorecard and the Strategic Delivery Plan for 2025 - 27. At Friday’s meeting, Frances Burns outlined:

- **The proposed 2025 / 26 Performance Scorecard**, which continues to monitor progress against national, board-level, and local indicators aligned to the IJB’s refreshed Strategic Plan themes.

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- **Minor changes to the Scorecard** for 2025-26, included the addition of new indicators (such as provision of take-home naloxone kits, dementia post-diagnostic support, and staff engagement) and a revised indicator for adult carer support plans. Targets have been updated where possible to reflect recent trends and operational challenges.
- **A total of 53 indicators** are included in the Scorecard, with 31 assigned targets. Performance will continue to be monitored using a red, amber, green (RAG) status and direction of travel.
- **The Strategic Delivery Plan for 2025 - 27** sets out SMART deliverables aligned to the Strategic Plan's objectives. These consider ongoing operational challenges, capacity constraints, and the financial planning programme (Sustainable Futures).
- **Progress on deliverables** will be reported annually, with a review scheduled for April 2026 to identify completed actions, required revisions, and any new priorities.
- **Performance updates** for the Scorecard will be presented to the IJB twice yearly: mid-year in January 2026 and as part of the Annual Performance Report in June 2026.

Members approved:

- The draft 2025 / 26 Performance Scorecard.
- The 2025 - 27 Strategic Delivery Plan.

Members noted:

- That performance updates will be presented twice yearly for the Scorecard and annually for the Strategic Delivery Plan.

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3.7 Quality, Care and Professional Governance Annual Report 2024 / 2025

This report provided assurance on the delivery of safe, effective, and person-centred care across Renfrewshire HSCP, highlighting key governance activities, learning, and improvements over the past year. At Friday's meeting, Pauline Robbie outlined that strong governance arrangements remain in place, with regular oversight through a range of multidisciplinary groups, robust incident reporting, and a focus on continuous improvement.

In Summary:

- Incident management: 3,597 incidents were reported in 2024/25 (a slight decrease from last year), with violence/aggression and slips/trips/falls remaining the most common categories. Actions to address these include targeted training, improved risk assessments, and quality improvement initiatives.
- Significant Adverse Event Reviews (SAERs): 12 SAERs were commissioned, with learning shared across teams and actions taken to improve communication, escalation, and risk assessment. No SAERs met the original NHSGGC timeframes, but new oversight arrangements are in place to improve timeliness.

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- Public protection: Multi-agency inspections rated Renfrewshire's support for children and adults at risk of harm as "very good" or "sector leading," with recommendations for further improvement in multi-agency chronologies and lived experience representation.
- Contract monitoring: 41 monitoring visits and 1,657 significant events were managed by the Contracts and Commissioning Team, ensuring quality and compliance in externally commissioned services.
- Risk management: The HSCP continues to strengthen its risk management approach, with refreshed risk networks and active participation in local and national forums.
- Audit and inspection: All services achieved "Green" or "Gold" compliance in core audits, with improvements in care planning and protection for children and adults.
- Patient experience: Complaints decreased by 18% compared to last year, with ongoing work to improve complaint handling and use feedback for service improvement. The report includes positive feedback from service users and carers across a range of services.
- Quality improvement: Examples include new digital tools in podiatry, a fibro scanning pilot in ADRS, and ongoing work to improve mental health and learning disability services.
- Recognition and awards: Staff and teams were recognised for excellence, including the CIRCLE Recovery Hub and the Assertive Outreach Team.

Members noted:

- The assurance provided on safe and effective service delivery, and the examples of learning and improvement highlighted in the report.

3.8 Renfrewshire ADP Annual Reporting Survey 2024/25

This report provided an overview of Renfrewshire Alcohol and Drug Partnership's (ADP) progress in delivering the National Mission Action Plan and local priorities during 2024 / 25. At Friday's meeting, John Goldie, the Independent Chair outlined:

- **Robust surveillance and data systems** are in place, including real-time monitoring of drug deaths, near-fatal overdoses, and alcohol-specific deaths, with multi-agency groups reviewing trends and informing local action.
- **Harm reduction services** are widely available, including naloxone distribution, Hepatitis C testing, injecting equipment provision, and strengthened pathways for near-fatal overdose response.
- **Implementation and maintenance of Medication Assisted Treatment (MAT) Standards** continues, with ongoing work to address barriers such as workforce capacity, data collection, and engagement with GPs. It was highlighted that in terms of MAT Standards, Renfrewshire is performing well above average, with the second highest performance score nationally.
- **Stigma reduction initiatives** have been developed, including films, toolkits, and multi-agency action groups, with lived and living experience embedded in governance and service design.

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- **Whole family support** is provided through the Children Affected by Parental Alcohol and Drug Use (CAPADU) group and third sector partners, with a refreshed approach to align with the Whole Family Framework.
- **Prevention and education activities** are delivered across all age groups and settings, including schools, community outreach, and targeted campaigns.
- **Improved access to residential rehabilitation and detox services**, with revised pathways and oversight groups in place to support referrals and address waiting times.
- **Workforce wellbeing** is supported through flexible working, training, supervision, and reflective sessions, with a focus on trauma-informed practice.
- **Lived and living experience** is central to ADP decision-making, with formal mechanisms for feedback and participation at all levels, including board membership and advisory groups.
- **Justice partnerships** are active, with support for people in the justice system through advocacy, harm reduction, and tailored residential services.
- **Financial reporting** is robust, with funding from the health board and other sources, and regular reporting to the IJB and ADP leadership.

Members noted:

- The breadth of activity delivered by the ADP in 2024 / 25, the ongoing challenges in reducing drug and alcohol harms, and the commitment to continuous improvement and partnership working.

3.10 NHSGGC Unscheduled Care Transformation Plan Investment

This report provided an update to IJB members on work that has been ongoing with partners across NHSGGC since November 2024 to develop a whole system plan to improve acute unscheduled care performance, specifically with focus on reducing unplanned emergency department (ED) presentation, admission and delayed discharges from hospital.

Following the submission of initial proposals in December 2024, subsequent negotiations have resulted in final proposals and outline funding of £20.9m across NHSGGC being agreed by the Scottish Government. This funding is subject to a number of conditions which must be met before the funding is made permanent.

Renfrewshire's share of the funding is just under £577,000 for an initial 12 month period with a focus on expanding intermediate care with the establishment of 5 beds and expansion of the Home First Response Service (HFRS) to a 7-day model, alongside the separate development of a Hospital at Home service in Renfrewshire.

Members:

- Approved the proposed investment in unscheduled care activity.

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- Noted that a further report would be brought to the IJB at a future meeting should the funding be made permanent.

4. Issues for referral to other Standing Committees or escalation to the NHS Board

5. Date of Next Meeting

The next meeting of the Renfrewshire Integration Joint Board will take place on 28 November 2025.

NHS Greater Glasgow and Clyde	Paper No. 25/133
Paper Title:	West Dunbartonshire Integration Joint Board Report
Meeting:	NHSGGC Board Meeting
Date of Meeting:	30 October 2025
Purpose of Paper:	For Awareness and Assurance
Classification:	Board Official
Date of IJB	30 September 2025
Committee Chairperson:	Chair – Michelle Wailes

1. Purpose of Paper

The purpose of this paper is to inform the NHS Board of key items of discussion which took place at the West Dunbartonshire Integration Joint Board (IJB) on the 30 September 2025.

2. Recommendation

The NHS Board is asked to consider the following recommendation: To note the items for discussion at the meeting of the West Dunbartonshire Health and Social Care Partnership (HSCP) Board (IJB) which took place on the 30 September 2025.

3. Key Items of Discussion

The key agenda items considered at the HSCP Board on 30 September 2025 were:

VERBAL UPDATE FROM CHIEF OFFICER

The Chief Officer provided a verbal update on the recent business of the Health and Social Care Partnership.

The Chief Officer highlighted endemic challenges relating to delayed discharges, including care home quality and staffing challenges. The impact of the recent moratoriums and Large-Scale Investigation have compounded the challenge. The Chief Officer reported

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that as of 30 September 2025 there were 46 acute delayed discharges. Clearly this was particularly concerning given the start of the winter period and the significant improvement that had been made in performance in the previous 12 months.

The Chief Officer continued to describe the progress of developing savings proposals. She was pleased to report there have been improvements in staff absence, particularly within the NHS. Staff absence continues to be a key focus for improvement alongside the wellbeing of staff.

ADULT CARER ASSESSMENT AND SUPPORT PLAN PROCESS AND THE SHORT BREAKS PROCESS REVIEW UPDATE

This report updated the Board on the outcome of the Adult Carer Assessment and Support Plan (ACASP) process review, and the Short Breaks process review undertaken, and presented the redesigned Short Breaks process framework, which aims to address key challenges observed in previous process and improve service access, equity, and efficiency for unpaid carers across West Dunbartonshire.

After discussion and having heard further explanation in answer to Members' questions, the Board agreed: -

- (1) to approve proposal two, namely, to allocate two nights for carers with a 'considerable' rating and three nights for those with a 'critical' rating on adult carer assessment and support plan sections. This would mean a maximum possible score of 21 nights for someone who is critical in every area of the Adult Carer Assessment and Support Plan;
- (2) to endorse the implementation of the redesigned Short Breaks process; and
- (3) to instruct Officers to provide a six-month update on the redesign impact.

HOME CARE REVIEW UPDATE

This report provided an update on the Care at Home service. This included the progress and impact of the Redesign project, Care Inspectorate inspection in April 2025 and financial sustainability.

After discussion and having heard further explanation in answer to Members' questions, the Board agreed to note the content of the report and to bring the report back in the first quarter of 2026 for a further update.

WHAT WOULD IT TAKE: UPDATE

This report provided an update on the implementation of the What Would It Take Strategy in Children and Families Services.

After discussion and having heard further explanations in answer to Members' questions, the Board agreed to note the content of this report.

2024/25 ANNUAL REPORT ON THE AUDIT AND PERFORMANCE COMMITTEE

This report provided assurance that the annual review of the work of the Audit and Performance Committee throughout 2024/25 demonstrated effectiveness and fulfilled its role and responsibilities in line with CIPFA good practice guidance.

Having heard the Chief Financial Officer in further explanation, The Board agreed: -

- (1) to consider and accept the Audit and Performance Committee Chair's Annual Report on the effectiveness and work of the Committee for 2024/25; and
- (2) to recognise that future improvements to the Audit and Performance Committee would be shaped to consolidate its support to the HSCP Board.

AUDITED ANNUAL ACCOUNTS

This report presented for consideration and approval the audited Annual Accounts for the year ended 31 March 2025.

After discussion and having heard the Chief Financial Officer in further explanation and in answer to Members' questions, the Board considered the audited Annual Accounts for the period 1 April 2024 to 31 March 2025 and approved for final signature by the Chair, Chief Officer and Chief Financial Officer.

2025/26 FINANCIAL PERFORMANCE PERIOD 5 REPORT

This report provided an update the financial performance as at period 5 to 31 August 2025 and a projected outturn position to 31 March 2026.

After discussion and having heard the Chief Financial Officer in further explanation, the Board agreed: -

- (1) to note the updated position in relation to budget movements on the 2025/26 allocation by West Dunbartonshire Council and NHS Greater Glasgow and Clyde Health Board and approve the direction for 2025/26 back to our partners to deliver services to meet the HSCP Board's strategic priorities;
- (2) to note the reported revenue position for the period to 31 August 2025 is reporting an adverse (overspend) position of £1.083m (1.24%);
- (3) to note the projected outturn position of £2.599m overspend (1.20%) for 2025/26 including all planned transfers to/from earmarked reserves;
- (4) to note the impact of recovery planning actions taken to date by the Senior Management Team to address the projected overspend;
- (5) to note the update on the monitoring of savings agreed for 2025/26;
- (6) to note the current reserves balances and the impact the projected overspend has on unearmarked balances;
- (7) to note the update on the capital position and projected completion timelines; and

- (8) to note the impact of several ongoing and potential pressures on the reported financial position for 2025/26, as well as on the previously identified budget gaps for 2026/27 and 2027/28.

RECORDS MANAGEMENT FRAMEWORK

This report provided an update including details of the most recent Progress Update Review (PUR) undertaken and submitted to the Public Records (Scotland) Act Assessment Team.

After discussion and having heard further explanation, the Board agreed to note the detail given about the Progress Update Review in relation to the Records Management Plan.

Minutes

The approved minutes of previous HSCP Board meetings together with all the relevant background papers can be found via the following link: [HSCP Board Meeting Papers - West Dunbartonshire HSCP \(wdhscp.org.uk\)](https://wdhscp.org.uk/HSCP-Board-Meeting-Papers)

Supplementary Information

West Dunbartonshire HSCP Board Audit and Performance Committee 23 September 2025

The key agenda items considered at the HSCP Board Audit and Performance Committee on 23 September 2025 were:

PROPOSED ANNUAL AUDIT REPORT 2024/25

A report was submitted by the Chief Financial Officer presenting for review, the formal responses to information requests to those charged with governance and senior management from the external auditor Forvis Mazars.

The Committee agreed:

- (1) to provide assurance to Forvis Mazars that the responses made in the information requests to those charged with governance and senior management remain unchanged since their submissions in June and August respectively;
- (2) the contents of the proposed Annual Audit Report to the Board and the Controller of Audit for the financial year ended 31 March 2025;
- (3) to note the expected audit opinion of an unqualified audit, without modification on the financial statements;
- (4) the key messages, the recommendations and agreed management actions; and
- (5) to provide assurance to the HSCP Board that after consideration of both this proposed annual audit report and management's letter of representation, the 2024/25 accounts can be approved.

AUDITED ANNUAL ACCOUNTS 2024/25

A report was submitted by the Chief Financial Officer providing an update on completion of the audit of the Annual Accounts for the year ended 31 March 2025.

The Committee agreed:

- (1) the audited Annual Accounts for 2024/25; and
- (2) to remit the audited Annual Accounts and the associated Annual Audit Report from our external auditor, Forvis Mazars, to the September HSCP Board for approval and signature.

INDICATIVE INTERNAL AUDIT STRATEGY AND PLAN

A report was submitted by the Chief Internal Auditor, providing the indicative Internal Audit Strategy and Plan for 2025-2026. The committee agreed to approve the Plan.

CLINICAL AND CARE GOVERNANCE REPORT – QUARTER 1

A report was submitted by the Chief Nurse, providing Committee with oversight and assurance about the progress made in strengthening assuring and improving the quality of health and social care.

The Committee agreed: -

- (1) to note the content of the report and the extent to which it provides assurance to Board members on care quality.
- (2) to note the activities related to oversight, assurance of care quality, and related improvement efforts; and
- (3) to note the risks escalated to the NHSGGC Primary Care Clinical Governance Forum for their information and assessment of potential additional risk mitigation strategies.

QUARTER 1 PERFORMANCE REPORT

A report was submitted by the Head of Strategy and Transformation, providing information to ensure effective monitoring and reporting on the delivery of services and on the programme of work as set out in the new West Dunbartonshire HSCP Strategic Plan 2023-2026: Improving Lives Together.

The Committee agreed: -

- (1) to note the content of the HSCP Quarterly Performance Report 2025/26 Quarter One and performance against the Strategic Plan 2023 - 2026 by exception; and
- (2) to note that due to timing issues this report presents partial Quarter One data.

QUARTER 1 REGULATED SERVICES REPORT

A report was submitted by the Head of Strategy and Transformation, providing an update on Care Inspectorate inspection reports for externally commissioned registered services, located within West Dunbartonshire and internally provided services by West Dunbartonshire Council whose service delivery is carried out by the HSCP.

The Committee agreed: -

- (1) to note the content of this report and its appendices; and
- (2) to note the format of this report to ensure it provides sufficient clarity and transparency of information relating to regulated services externally commissioned by the HSCP and regulated services provided by the HSCP on behalf of the Council.

HEALTH CARE STAFFING ACT ASSURANCE REPORT

A report was submitted by the Chief Nurse, reporting on the legal responsibilities conferred on integration authorities and health boards and provides assurance regarding West Dunbartonshire HSCPs level of compliance with the duties and guiding principles within the Health Care Staffing Act.

The Committee agreed: -

- (1) to note that the Act affects Health and Care services differently, with separate reporting requirements and timescales;
- (2) to note health services delegated to West Dunbartonshire HSCP report to NHS Greater Glasgow and Clyde (NHSGGC) via Quarterly Internal Assurance Reports which inform NHSGC's Annual Report to Scottish Government;
- (3) to note the overall level of compliance for delegated health services in West Dunbartonshire HSCP Quarter 1 (2025) Internal Assurance Report is assessed as reasonable (Appendix 1 of the report);
- (4) to note that Integration Authorities have a duty to publish and report annually to Scottish Government for all care services registered with The Care Inspectorate, in the financial year they are first planned or secured by the Integration Authority, on the steps taken by the organisation to comply or mitigate risks regards Section 3(2) of the Act;
- (5) to note the reasonable level of assurance provided by West Dunbartonshire HSCP in their annual report submitted to Scottish Government 30th June 2025 (Appendix 2 of the report); and
- (6) to publish the annual report submitted to Scottish Government by West Dunbartonshire HSCP on 30th June 2025 (Appendix 2 of the report).

4. Date of Next Meeting

The next meeting of the West Dunbartonshire HSCP Board is 25 November 2025.