Item 3

5th November 2025

Glasgow City Council

Operational Performance and Delivery Scrutiny Committee

Report by Chief Executive

Contact: Cormac Quinn

STRATEGIC PLAN PERFORMANCE:

Grand Challenge 1: Reduce poverty and inequality in our communities

Mission 1: Tackle child poverty in our city using early intervention to support families
Mission 2: Meet the learning and care needs of children and their families before and through school
Mission 3: Improve the health and wellbeing of our local communities

Purpose of Report:

To report the performance of the Council Strategic Plan 2022-27 and the agreed Mission based approach.

Recommendations:

The committee is asked to:

- Consider and note the content of the report; and
- Consider any specific Commitments or actions that require officers to report back on with further detail or progress updates as part of the Committee's future work programme.

Ward No(s): Citywide: ✓

Local member(s) advised: Yes ☐ No ☐ consulted: Yes ☐ No ☐

1. Background

1.1 The Council Strategic Plan was agreed at Full Council on 27 October 2022 and the Operational Performance Delivery and Scrutiny Committee is tasked with monitoring the delivery of the Strategic Plan. The review of the Strategic Plan was completed and presented to Full Council in October 2024.

1.2 Following agreement at the Operational and Delivery Scrutiny Committee (OPDSC) in November 2022, a template has been issued to all Services. The template structures and supports scrutiny of the Strategic Plan and illustrates the crosscutting nature of the Missions, as Services work together to deliver the Council's priorities. The template is subject to review to ensure Service and Member feedback is incorporated.

2. Council Strategic Plan

2.1 The Strategic Plan has been structured into 4 Grand Challenges and their supporting missions. The Grand Challenges are:

1. Reduce poverty and inequality in our communities
2. Increase opportunity and prosperity for all our citizens
3. Fight the climate emergency in a just transition to a net zero Glasgow.
4. Enable staff to deliver essential services in a sustainable, innovative and efficient way for our communities

2.2 Each Grand Challenge is underpinned by Missions and Commitments. Services undertake the work to achieve the Commitments which in turn contributes to the goal of each Mission. This report focuses on:

Grand Challenge 1: Reduce poverty and inequality in our communities

Mission 1: Tackle child poverty in our city using early intervention to support families

Mission 2: Meet the learning and care needs of children and their families before and through school

Mission 3: Improve the health and wellbeing of our local communities

2.3 Council has agreed that the Strategic Plan will be subject to an annual review to reflect the volatility of outside pressures and budget constraints. There is a transparent change control process in place to assist this. The review of the Strategic Plan was completed and presented to Full Council in October 2024.

2.4 Council previously received updates on Grand Challenge 1 Mission 1, 2, 3 and 4 at their meetings on 3 May 2023, 13 September 2023, 7 February 2024 and 15 January 2025. and June 2025.

3. Commitments and Emerging Commitments

3.1 Work is in progress to deliver the Strategic Plan commitments across key areas includes areas such as:

- Continuing to deliver Glasgow Helps
- Supporting affordable and accessible school uniforms.
- Ensure digital inclusion for children and young people.
- Supporting people in Glasgow to achieve improved physical, mental and emotional health and wellbeing
- Promoting safe and equitable access to the right services in the right place at the right time for all
- Delivering the Health Improvement Strategy 2023-2028
- Working with service users and their carers to identify their needs and desired outcomes and empower them to make informed decisions
- Support people to live safely at home for as long as possible
- Progress on work to reduce homelessness

3.2 There is one emerging commitment from Education which has been developed as part of their Equality Outcomes around:

- Supporting marginalised groups, including refugees, asylum seekers and LGBTI+ young people

3.3 Some actions are noted as Amber and one as Red;

- End-of-Life Aid Skills for Everyone
- Reduce Delayed Discharges
- Progress work to reduce homelessness

- Support Housing First as a model and reduce use of temporary accommodation

3.4 Appendix 1 includes case studies on:

- Diversion from Prosecution (DfP),
- Home Care Leadership, Workforce and Culture and
- Development of Whole Family Wellbeing Fund in Primary Care (WFWF PC).

4. Next Steps

4.1 The Strategic Plan remains under review so as to allow for the consideration of emerging commitments. Where appropriate these commitments will be considered through the approval process for future inclusion in the Strategic Plan.

GRAND CHALLENGE 1 Reduce poverty and inequality in our communities					
MISSION 1: Tackle child poverty in our city using early intervention to support families					
Commitment 6: Continue to deliver the Glasgow Helps project					
Action	**Milestones (current)**	**Progress and Impact**	**Planned Activity/ Route to Green**	**Lead Service**	**RAG**
Citywide person-centred offer to support vulnerable citizens in Glasgow to access the 'right support in the right place at the right time'	Glasgow Helps embedded a new staffing structure to meet the needs of service users that increased partnership working with our Improving the Cancer Journey and Long Term Conditions Team. This ensured alignment in service delivery and exchange of best practice to improve the city's holistic support offer. Ongoing development of the Advice Pro system, to improve data quality and monitoring.	Glasgow Helps has continued to develop and refine its service offering to ensure it is best situated to meet the needs of people and partner organisations in Glasgow. Data and insights have been crucial to ensure the service reaches those most in need of support. Between October 2023 and end of August 2025, Glasgow Helps has: • Engaged with over **8000** individual clients • Made over **1000** unique referrals to **270** agencies and organisations operating in the city.	Continue to deliver the Glasgow Helps service, ensuring that it is responsive to the needs of citizens through continuous learning and staff training. Glasgow Helps is preparing to act as the key worker in several of the Demonstration of Change projects taking place in booster wards across the city. The service will provide support to the developing work of the Child Poverty Programme, reaching out to families and connecting them to meaningful coordinated support through Glasgow Helps.	CED	G

		• Registered over **11000** outcomes through our work with people. • Averaged around **220** inbound contacts per week (since January 2024) • Provided intensive case management support to **608** people and families. **100%** of respondents to feedback forms indicate they have a better understanding of services and supports available to them in their community as a result of the support they received. **100%** said that they would refer a friend or family member to the service.			
Commitment 7: Continue to work to maximise incomes for all low-income households, including those households in work.					
Action	**Milestones (current)**	**Progress and Impact**	**Planned Activity/ Route to Green**	**Lead Service**	**RAG**
HSCP Homeless Provision of supermarket vouchers to support clients leaving	£65,000 provided	• **£52,120.00 spent to date.** • **spent to date.** • 1,059 service users supported.	Financial Inclusion & Transformation Team to continue to monitor this fund until it's exhausted.	HSCP	G

homeless accommodation, building on outcomes of previous approach during Covid. This would assist with the purchase of basic items to facilitate sustaining their new tenancies.		• Average spend per person of £50.			
Pre-Loved Clothing Provide funding for pre-loved clothing to pilot a subsidised scheme for children's clothing.	£60 digital vouchers have been created for pre-loved clothing, enabling families to shop online, in-store, or receive deliveries.	• Project delivery commenced in July 2025 following completion of the tender process. • 1,463 clothing items distributed to 106 families, supporting 256 young people. • 64% of families supported were from booster ward areas. • Based on average retail costs, families collectively saved an estimated £6,273, with a carbon saving of 9.7 tonnes CO_2e.	Continue to monitor usage under the new £60 awards and ensure ongoing alignment with booster wards, where appropriate. Donation PODs will be reintroduced across GCC and ALEO sites to support specific pre-loved clothing requests.	CED	G

		• Voucher value was reduced from £100 to £60 per person this year, based on previous averages, to enable wider reach and support for more families and children.			
Scottish Welfare Fund The Scottish Welfare Fund continues to be an effective route to administer a cash first approach for citizens facing hardship. As the Cost-of-Living Crisis continues to bite then demand for the fund continues to significantly exceed spend.	£300,000 was transacted to CBS by internal budget transfer.	Money has been used to provide Crisis Grants and Community Care Grants that can be used for food, heating, removal costs and furniture.	Funding for this project has now been concluded.	CBS	G

HSCP (Health Visitors, Social Workers & Health Improvement Leads) Allocation to HSCP to further support cash first initiatives such as Section 22 payments.	£422,000 was transacted to Health Visitors and Social Workers for Section 22 payments. £78,000 was transacted to Health Improvement Leads for Alexander Rose Vouchers and Flat Pack Meals.	• £422,000 spent on Section 22 payments. • 96.5% of Alexander Rose vouchers spent. • £24,000 of flat pack meals administered	Funding for this project has now been concluded.	HSCP	G
Differabled and One Parent Family Scotland. 3rd Sector organisations provide support to families with disabled children.	Money Transacted to Differabled and OPFS to recruit workers to provide the support function.	• OPFS have generated £140,140.85 in client financial gains. • Differabled have helped 82 families and have generated £48,695.6 in client financial gains.	Funding for this project has now been concluded	Differabled & OPFS	G
HSCP Homeless Provision of an intensive package of support for these homeless citizens,	Funding has allowed the development of two additional hubs.	• Borron Street Hub has created benefit gains of Q4 £798,462.60. • Debts managed have totalled £40,129.60.	Funding for this project has now been concluded.	HSCP	G

including FI support alongside essentials for new tenancy to speed up move and ensure families feel more supported.		• Number of cases dealt with by the Homeless Social Care Worker is 27. • Number of referrals to Money and Debt Advice is 10. • Number of cases where homelessness was prevented is 4.			
Make a House a Home	Project has supported women and families affected by gender based abuse to move into a sustainable tenancy through providing up to £1,000 to provide items such as household essentials and safety measures. The project is in its final stages with 4% of funds now remaining.	Since the project was established, 263 families with 390 children have been supported to move into their new home, increase confidence and sustain their tenancy. The average support package amounts to £790.68 per family.	The project will be completed by end of this financial year and all monitoring information collated for a report on outcomes and impact.	CED	G
Financial Inclusion Support Officer in schools project across a selection of city schools	Project rolled out to 50 city schools: - 29 Secondary Schools - 20 Primary Schools - 1 Assisted Learning School	**Impact/Outcomes** 464 clients accessed the service of which 257 have been supported to secure approximately £856,959 in financial gains (April 2025 – June 2025)	Continuous ongoing service development which seeks to improve how the service is delivered in terms of job roles, systems and partnerships.	CED	G

	Consolidation of the Service following the 25/26 budget announcement of permanent funding.	**Debt Managed** 55 clients supported with a total of £189,566 debt managed (April 2025 – June 2025) **Poverty Drivers** Cost of Living - 13% of total financial gains Income from Social Security - 85% of total financial gains **Priority Groups*** 49% Lone Parent Families 20% Families which include a disabled adult or child 35% Families with 3 or more children 65% Minority Ethnic Families *Please note a client can appear in more than one priority group			

Commitment 8: Deliver Glasgow's Child Poverty Pathfinder (now Programme)					
Action	**Milestones (current)**	**Progress and Impact**	**Planned Activity/ Route to Green**	**Lead Service**	**RAG**
Working in collaboration with partners from across the public and third sector, address unacceptable levels of child poverty through systemic change.	Shift to Programme status from Pathfinder embedded. Phase 2 PID developed covering first 3 years of 10 year Local Outcome Improvement Plan Policy alignment within core strategic documents (Community Plan & Children's Services) and commenced work towards shared accountability framework Progress secured with data sharing to facilitate targeted activity Creation of aligned funding to support Whole Family	Continue to deliver against agreed programme of work and to identify learnings First iteration of citywide Performance Framework for family poverty presented to community planning and team from across partnership working on suite of measures Child Poverty Programme embedded in city Community Planning Structures and Council governance structures. Continue to review and refine structures Council structures suchas Public Service Reform Taskforce and Public Service Reform Steering Group implemented to support council response	Update programme documentation in the shape of a Child Poverty Strategy to reflect foundational learning over the first 18 months of Phase 2 of the programme Continue socializing and testing of Performance Framework to begin iteration process Continue to explore further data sharing permissions including with Scottish Social Security Confirm flexibility requests and agree interim measures, use learning and readiness work to inform further opportunities for flexibility to grow the aligned	CED	G

	Early Intervention and associated proposals for further funding flexibility Delivery of a suite of targeted Demonstration of Change projects in identified Booster Wards – 3 live (Southside Central, Govan & Calton)	**What is the progress?** Refined flexibility asks and commenced discussions on shared interim performance measures in lieu of finalised Framework Continue to progress the challenging arena of data sharing across partner agencies – notable progress with respect to DWP data Continue to focus on the importance of user voice in Service Redesign - working closely with CCI on the development and application of Innovation Framework <u>Southside Central -</u> focus on financial inclusion and capability as gateway to holistic support for families in deep poverty. Significant insights influencing Financial Inclusion Redesign	funding resource and agree investment Continue to deliver DoC activity, to capture learning to inform systemic change and provide opportunities to test the evolving Performance Framework Continue to support the development of the No Wrong Door network through opportunities to share practice, participate in co-design of new ways of working and to test these as well as informing and securing shared training needs Continue to deliver Demonstrations of Change in the Booster Wards and actively seek out at least one more booster ward.		

	Continue to develop our citywide No Wrong Door infrastructure and work with partners to shape new ways of working Ongoing evaluation as part of Practice Research Collaboration supported by academic partners	work,Work is underway to incorporate ESOL based on citizen and practitioner insight. Engaging with Glasgow Life re ESOL challenges and responses in Southside Central and across wider city <u>Govan -</u> Detailed data analysis in partnership with DWP alongside citizen and practitioner insight is supporting a more detailed scoping of approach for families on the cusp of poverty. Calton - funding secured from WFEIF to support the delivery of a programme to deliver sustainable employment and wider holistic support for families on the cusp of poverty. Investment in demonstration of change generating significant insights re community engagement, childcare, ESOL and Employability Drumchapel – extensive exploratory work uncovering			

		challenges for families in the ward and laying the path for collorative work across partners going forward No Wrong Door membership across the public, third and housing sector has grown to 211 participating services Activity underway to ensure NWD embedded within the DoC activity across the city NWD organisations have actively participated in work to shape collective approaches to supporting citizens and to make best use of city resources			

GRAND CHALLENGE ONE **Reduce poverty and inequality in our communities**					
MISSION 2: Meet the learning and care needs of children and their families before and through school					
Commitment. Support affordable and accessible school uniforms, including uniform banks and lease and hire schemes and work on cost of the school day work including administering school clothing grants.					
Action	**Milestones (current)**	**Progress and Impact**	**Planned Activity/ Route to Green**	**Lead Service**	**RAG**
Continue to work in partnership with a range of partners to increase the number of accessible uniform banks across establishments.	Continue to work in partnership with a range of partners to increase the number of accessible uniform banks across establishments.	Work with the providers to ensure wider access to clothing banks. Continue to promote the circular economy.	Continue to promote work with providers and the circular economy. Work within sustainability agenda.	ES	G
Prioritize anti-poverty policies and actions to improve wellbeing.	Monitor progress of Cost of the School Day Champions.	Continued work across the authority.	Continue to promote this work with establishments and encourage collaborative approaches.	ES	G
Support implementation of council policy on	Implement council policy.	A total of £2,028,263 was paid out for the summer holiday days, this equates to	Planned payments are planned for the October break and the Christmas and New Year. A total of	ES	G

Free School Meal holiday payments.		24,585 payments of £82.50 each based on 33 days.	55 days payments are planned for this academic year at £2.50 per child per day.		
Continue to support financial inclusion officers within Glasgow's schools and explore options to expand into early years.	Report on progress of Financial inclusion support officers (FISOs) in partnership with Glasgow Helps via Child Poverty Board.	Currently live in 50 schools (29 secondaries, 20 primaries and 1 ASL school) FI providers secured and monitoring arrangements agreed **<u>Impact/Outcomes</u>** 1,388 clients accessed the service of which 832 have been supported to secure approximately £5.27 million in financial gains (April 2024 – March 2025) **<u>Debt Managed</u>** 205 clients supported with a total of £718,382 debt managed (April 2024 – March 2025)	Continuous ongoing service development which seeks to improve how the service is delivered in terms of referral pathways, systems and partnerships.	ES	

		Poverty Drivers Cost of Living - 12% of total financial gains Income from Social Security - 86% of total financial gains **Priority Groups*** 46% Lone Parent Families 22% Families which include a disabled adult or child 37% Families with 3 or more children 64% Minority Ethnic Families *Please note a client can appear in more than one priority group			
Deliver the Glasgow Pathfinder project pilot on eligible 2-year-olds optimizing financial support to families using Council nurseries.	Review financial support optimization. Align work on the new Scottish Government/Department for Work and Pensions (DWP) data sharing	Ongoing. Members of ELC team now embedded in Fairer Futures programme a day per week. Work underway with Improvement Service	ELC Team to begin working with demonstration of change leads in 3 of the 10 booster wards.	ES	G

	project on eligible 2-year-olds with Pathfinder priorities.	focusing on eligible 2's uptake. Discovery phase of project complete.			
Support the Glasgow Helps Project including the referral pilot established in selected nurseries.	Support the evaluation and further development of the referral pilot.	Evaluation completed and model of delivering support reviewed along with Glasgow Helps.	Monitor implementation of new model and review on an ongoing basis	ES	G
Commitment. Ensure digital inclusion for children and young people.					
Action	**Milestones (current)**	**Progress and Impact**	**Planned Activity/ Route to Green**	**Lead Service**	**RAG**
Increase the number of schools recognized as centre of leadership and educational excellence for learning with technology.	Increase number of Primary and Secondary Establishments registered for Digital Schools Award. Further 10 Primary establishments achieving Digital Schools Award. Further 5 establishments nominated for Apple Distinguished Schools.	Schools continue to use DSA as pre-cursor to ADS. Schools are continuing to sign up for DSA but due to staffing changes don't always see it through. 4 schoolssuccessfully completed the self-evaluation and validation process from Aug '24 to June '25.	EdIS to push emphasis of DSA on self-evaluation and importance of looking inwards to evaluate position on integrating and applying technology to support pedagogy in schools. DDO and QIO (digital) to support this approach through engagement with schools during surgeries, DLoL Business Meetings, DC (termly)	ES	G

		3 Schools have since become Apple Distinguished Schools – 2 x primary 1 x secondary 1 x school withdrew from process due to change of HT. One other ASL school asked for a delay due to inspection.	meetings and informal supportive visits. DDO (Digital Development Officer) and QIO (digital) will continue to monitor schools through formal (QA Visits) and informal (DLoL Surgeries & DDO Support) visits and observations to identify next ADS.		
Strengthen the impact of Continuous Professional Learning with partners including Apple and XMA.	Increased number of Showbie and SeeSaw Ambassadors. 160 practitioners recognised as Apple Learning Coaches. Increased consistency across Learning Communities in use of preferred platforms: Showbie & SeeSaw.	Seesaw ambassadors' numbers no longer relevant due to direction of travel across the city in relation to platform use. DDO and QIO continue to highlight Showbie accreditation to Showbie schools & nurseries. Over 340 Showbie Pro teachers have registered with the platform along with over 25 establishments since Jan '25.	DDO and QIO will continue to highlight Showbie accreditation opportunities to users via the DLoL Business Meetings (termly) and via the dedicated Showbie Teams space for GCC schools. DDO and QIO (digital) worked with XMA and GCC Probationer QIO to develop comprehensive probationer CLPL	ES	G

		Apple Teacher programme for GCC Probationers continues into 2025/2026 session. Over 60 Apple Teachers were accredited in the last academic session. Increase in Apple Learning Coaches, 16 successful ALCs completed the programme last academic year and continue to support probationers in their establishments. Magma maths city wide roll out plan will be implemented from Oct ’25 through to June ’26. Read&Write city side roll out plan already taken in all Learning communities across the city. Next step to provide information around the ‘Free for Families’ programme.	sessions (12 x dedicated probationer sessions). DDO and QIO (digital) strengthened Apple Teacher Programme by including ECT (early careers teachers) in programme offered to new staff & probationers new to GCC schools. DDO working with Apple retail team to provide ‘Today at Apple’ sessions for all GCC teaching staff as part of extended partner programme. DDO and QIO (digital) working closely with Apple Edu to promote ALC (Apple Learning Coach) programme year on year. Promoting programme through dedicated ALC teams’ space.		

			DDO and QIO (digital) working with external partner – Magma Maths to deliver comprehensive CLPL / onboarding offering to all GCC schools in line with EdIS raising attainment in BGE strategy. Plan in place, commences end of Oct ’25 and concludes June ’26. Read&Write successful onboarding of schools completed. Over 130 teachers attended events across 9 days. Monthly follow up CLPL sessions to remain in place to support teachers using literacy support platform. ‘Free for Families’ programme developed in conjunction with Glasgow Life team who will		

			provide links to FLAG team to support roll out of programme. DDO to attend meeting with FLAG team to highlight programme.		
Strengthen the support which Digital Leaders of Learning offer to schools.	Digital Coordinator identified in every Learning Community. Improved community approach to strategy implementation leading to strengthened transitions, improved reporting and attainment.	Digital Coordinator numbers continue to rise, currently have 27 across the city – with some gaps filled by DC taking on two Learning Communities Implemented DLoL Surgery plan to strengthen support across school communities. Each week 1 surgery takes place from Oct to June, supporting Digital Leaders.	DDO and QIO (digital) using QA visits & DLoL Surgeries to identify further Digital Coordinators to fill gaps in some LCs. DDO and QIO (digital) continue to meet DCs once per term to provide up to date information and strategies that can be shared amongst DLoLs within LCs.	ES	G
Gather and respond to the views of staff on digital learning and teaching.	Action plan to respond to views from 2022 survey. Prepare questions for biennial digital survey for 2024.	Digital team already responded to views from 2024 survey by making changes to CLPL programme, connecting and strengthening partnerships with outside agencies and	DDO will revamp questionnaires / surveys and will share with QIO (digital) & wider Digital Strategy group (towards end of Nov ’25) prior to	ES	G

		internal GCC teams (GDSS, EAL, GPT) Bi-Annual surveys to be revamped ahead of Jan ’26 issue. AI sections need to be added to reflect changing landscape.	dissemination across the estate in Jan ’26.		
Consult with nursery staff and wider partners on the potential and appropriate use of digital technologies and learning strategies for the youngest children.	Create focus group to gather detailed views and considerations Create draft strategy for Early Learning and Childcare service.	Focus group created. Initial meetings taken place. Digital learning platforms reviewed.	Implementation of new digital learning profile beginning from October 2025. 27% of nurseries involved in pilot phase.	ES	

Commitment. Develop targeted campaigns and communications to raise awareness of misogyny, and to combat sexual harassment within our schools.					
Action	**Milestones (current)**	**Progress and Impact**	**Planned Activity/ Route to Green**	**Lead Service**	**RAG**
Continue to support events and days of acknowledgement to raise awareness, mainstream and embed equalities practice.	Build awareness of citywide practice. Progress and evaluate Career-long Professional Learning linked to protected characteristics.	**Mentors Against Violence Programme** continuing across most secondary establishments. Social Inclusion Officer continuing to provide training and support to schools. This initiative is empowering young people within our schools to assume leadership roles in challenging gender-based violence. **Equally Safe At School Initiative** has been launched at Secondary School City Business Meeting, raising awareness across the estate. This has raised awareness of whole	**Mentors Against Violence Primary Pilot Early Intervention Programme** -currently being trialed in South Learning Community. This will be evaluated with a view to extending wider across the education estate. Mandatory professional learning for SLT and key staff across all secondary schools. 2 x Webinars planned for October 2025.	ES	G

		school approaches to Gender -based violence.			
Commitment: Support marginalised groups, including refugees, asylum seekers and LGBTI+ young people, through the Education Equalities Working Group (EEWG) which has been established to direct strategic equalities work across all areas of Education Services. Continue to work with LGBTI+ Youth Scotland and Time for Inclusive Education campaign on inclusive education including consent education.					
Action	**Milestones (current)**	**Progress and Impact**	**Planned Activity/ Route to Green**	**Lead Service**	**RAG**
Empower the Education Equalities Working group (EEWG) to take forward work planned developments and opportunities for professional learning related to all characteristics and intersectionality.	Review current practice against all protected characteristics. Action plans updated to include refreshed focus as appropriate.	**Digital Discourse Initiative** Working collaboratively with colleagues form TIE, a professional e-learning offer has now been launched with CP Co-coordinators and all school staff. Initial awareness raising has supported staff across Glasgow schools to understand the digital literacy skills needed to confront online misinformation and discrimination.	**Digital Discourse Initiative – 3 X Learning Communities** Glasgow Education Services and the EEWG will now collaborate with TIE colleagues as a pilot local authority to develop and trial additional educational resource materials related to the Digital Discourse This will include workshops led by TIE's Education Officer, as well as lesson plans for teachers to use and provide feedback on.	ES	G

			Sessions designed for parents and carers will also be delivered.		

GRAND CHALLENGE ONE Reduce poverty and inequality in our communities					
MISSION 3: Improve the health and wellbeing of our local communities					
Commitment 1. Work with partners to promote and support people in Glasgow to achieve improved physical, mental and emotional health and wellbeing whilst reducing inequalities and the impact of deprivation.					
Action	**Milestones (current)**	**Progress & Impact**	**Planned Activity / Route to Green**	**Lead Service**	**RAG**
Deliver the activity outlined in the Health Improvement Strategy 2023-2028	Implement NHSGGC Early Years Mental Health Improvement Framework	Progress and performance will be undertaken and reported on by the HSCP at appropriate intervals. Draft framework developed by multi disciplinary, multi agency working group following a tabletop review of evidence and policies. The framework was then open to consultation throughout July to September 2023. An Equality Impact Assessment has been published. Framework was approved and published in February 2024 and a policy mapping exercise also published to aid with implementation.	Lead the implementation of an NHSGGC Early Years Mental Health Improvement Framework	HSCP	G
	Continue to develop actions designed to prevent suicide and impact on self-harm	Glasgow City Suicide Prevention Partnership created a summary version of their local action plan to reduce suicide. The refined summary action plan will help guide suicide prevention work over the coming year.	Continue to invest in the city's suicide prevention partnership and will support the forthcoming national strategy for self-harm.	HSCP	G

		Over the last year, an expanded membership of the multi agency, sensitive and confidential approach to locations of concern has included representation from roads and transport. Alongside partners from NHS, rail, waterways, housing, Police Scotland and Samaritans the inclusion of roads infrastructure facilitates a collaborative approach to surveillance and working to influence change to mitigate harm as part of the national guidance on action to address suicides at locations of concern. The partnership around locations of concern works alongside broader community education and training and engagement programmes with examples such as: • **Applied Suicide Intervention Skills Training (ASIST):** a two day in-person workshop which increases participants' willingness, confidence and capacity to provide suicide first aid. • **World Suicide Prevention Day – 'Changing the Narrative':** engagement with a wide range of partners and communities to 'change the narrative' on suicide including Partick Thistle Football Club. Player/Manager, Brian Graham, who created a video for social media, speaking about the importance of starting conversations around suicide. The video was shared on the Glasgow City HSCP X page on the morning of World Suicide Prevention Day and has been viewed over 16,000 times.	In 2025/26, the GCSPP remains dedicated to expanding its reach and impact through continued training, awareness initiatives and support networks.		

		• '**Chalk the Walk**': 9 youth organisations took part in a '*Chalk the Walk'* campaign. Young people were provided with chalk and asked to help shine a light on suicide prevention by 'chalking the walk' with images and messages of hope, resilience and suicide awareness and prevention. • **Send Silence Walking and Let's Get TALKing**: this campaign encouraged individuals to start the conversation and engage in open, honest discussions about suicide. • **Tree of Hope:** Unpaid Work supervision staff within Community Justice Glasgow crafted and created a Tree of Hope, situated in Parkhead Forge Shopping Centre for the month of September. The tree symbolised the voices of individuals across the North East and encouraged suicide safer communities. A suicideTALK session was also delivered to Community Payback Order clients and Unpaid Work Supervision Staff.			
	Support mental well-being of groups most at risk by life circumstances and isolated by discrimination	Progress and performance will be undertaken and reported on by the HSCP at appropriate intervals. A Compassionate Distress Response Service was established following a need identified by the Multiagency Distress Collaborative. This service responds within an hour for OOH or same day for in hours referrals for those 16+ to help access the right supports. Last year nearly 5000 referrals were made.	Develop programmes to advocate and support the mental well-being of groups most at risk by their life circumstances and isolated by discrimination. The Mental Health Strategy Refresh will be updated to the NHS Board and IJBs	HSCP	G

		Mental Health Strategy Refresh has gone through public consultation with plans to implement following approval of the outcomes of the engagement by the Board's Corporate management team in 25/26. Full implementation of new pathways will likely move into 26/27. Implementation Next Phase Mental Health Strategy Enhancing Community Services Next Steps in Implementing Mental Health Strategy - Enhancing Community Services and Community Engagement	respectively throughout implementation.		
Work on implementing the Mental Health Strategy to ensure a range of mental health supports are available in the community.	Expand computerized Cognitive Behavioral Therapy	Complete - cCBT services have been migrated from *Beating the Blues* to the *SilverCloud* platform and this allows people to complete in their own time at their own pace. This is based on cognitive behavioural therapy (CBT), mindfulness and positive psychology. *SilverCloud* is both interactive and flexible. At regular intervals (approximately every 3 weeks) increased support is available to encourage and guide people through the modules and sign-post to resources within the programme that may be particularly relevant to people.	Complete	HSCP	G
	Develop Bipolar Hub	A submission for further funding after pilot was not supported following review of the service delivered. The service catered for a small number of individuals providing physical health care reviews and medication	Unable to expand due to funding decision. Patients are either attending the hub or getting needs met locally.	HSCP	G

		monitoring but was not able to expand to achieve the planned reach of the overall service, as patients were choosing not to travel to a central location and remained being seen in their locality community mental health teams. The transition back for the small number that used the service latterly was supported by health services and Bipolar Scotland	Completed as far as possible.		
Develop and deliver a range of programmes across the HSCP to reduce and mitigate the impact of poverty and health inequalities in the city.	Deliver Glasgow Local Child Poverty Action Plan	Staff within GCHSCP are actively engaged in developing and delivering on the child poverty agenda. This has included: • Financial Advocacy service for women in the Special Needs in Pregnancy (SNIP's) pathway • The Healthier Wealthier Children (HWC) service • Health Visiting and Glasgow City Family Nurse Partnership staff to make Section 22 destitution payments to enable a more flexible, needs-led response to financial hardship, fuel poverty and destitution. • Community Link Workers (CLW's) service. • A Cost of Living Guide was developed for use by HSCP services and third sector organisations. • Whole Family Wellbeing Fund The Whole Family Wellbeing Fund in Primary Care (WFWF PC) programme is embedded in twelve Deep End Practices across	Contribute to the delivery of the annual Glasgow Local Child Poverty Action Plan	HSCP	G

		Glasgow City. The enhanced elements included as part of the programme are: • Family Finance Advisors (FFA) will work with families to support with financial capability. • Family Wellbeing Workers (FWW) embedded into the Multi-Disciplinary Team, sitting alongside the Community Link Worker programme. • Thrive Under 5 (Tu5) - FWWs support families to access food pantry shops and/or meal packs within their local areas, including providing vouchers for cooking utensils • Community Grants Fund – supporting organisations to apply for funding to further enhance family activities available. • Youth Health Service - Additional staff capacity provided through this programme will support with an increase in referrals to the service from FWWs. • Specialist Trauma Support Services			
	Access to financial advice and welfare rights advice	The Scottish Government's investment has embedded Welfare Rights services in 84 GP practices across 21 GP clusters in Glasgow City, primarily serving deprived communities to enhance financial stability, reduce health inequalities, and improve patient well-being. The initial two-year funding ended in January 2024, followed by an extension until March 2025, However, due to limited funding, some practices have been operating at reduced	A slightly reduced WAHP service will continue to be offered via 79 GP practices until March 2026. A full report on all Welfare Rights and Money Advice Performance for 2024-25 can be found here Welfare Rights and Money Advice	HSCP	G

		capacity since April 2024. Despite these constraints, the service has continued in 79 general practices across 82 sites within the available budget. In 2023-24, 4,466 patients were referred to the service resulting in 11,165 individual welfare rights and money advice cases. Clients achieved over £9.2 million in financial gains. Additionally, £1.7 million in debt was managed, £1.1 million in non-housing debts and £600k in housing-related debts, respectively. The Welfare Rights and Money Advice Performance Report 2024/25 was presented to the IJBs FASC in Oct 2025.	Performance Report 2024-25 Welfare Rights - Public Engagement Activity		
Contribute to work with public health colleagues in other HSCPs in the Greater Glasgow and Clyde area to reduce reliance on harmful substances.	Develop recommendations from Glasgow Alcohol and Drug Services review	The ADRS Review has concluded, and the staffing and service model were approved at the IJB, which will support delivery of MAT Standards and National Mission Priorities. Full implementation of the MAT standards in community settings has been achieved. Public Health Scotland Report on national benchmarking linked below National benchmarking report on the implementation of the medication assisted treatment (MAT) standards: Scotland 2024/25 - National benchmarking report on implementation of the medication assisted treatment (MAT) standards - Publications - Public Health Scotland	Implement the recommendations of the Glasgow Alcohol and Drug Services review An update paper was taken to the IJB in January 2025 on the ADRS Review and implementation of the MAT Standards IJB Report	HSCP	G

		The majority of the Review recommendations have been completed, and those outstanding are on track to be completed. A further update can be found here - Implementation of ADRS Review and MAT Standards - Shared Care Model			
	Implementation of the 10 Medication Assisted Treatment (MAT) Standards	Full implementation of the MAT standards in community settings has been achieved. Public Health Scotland Report on national benchmarking linked below National benchmarking report on the implementation of the medication assisted treatment (MAT) standards: Scotland 2024/25 - National benchmarking report on implementation of the medication assisted treatment (MAT) standards - Publications - Public Health Scotland	Complete	HSCP	G
	Extend the WAND initiative	Mobile Harm Reduction Service now operational, funded by the National Mission, provided by Turning Point Scotland. Two vans moving between locations morning and afternoon, providing WAND. Two Accuveins purchased by ADP to support harm reduction work by the staff.	Complete Steering group meets 8 weekly with Alcohol and Drug Partnership (ADP) and Glasgow Alcohol and Drug Services (GADRS) representation	HSCP	G
	Continue tobacco smoking cessation service	Glasgow City Community Quit Your Way Service: Smoke Free App: "carrying out a test of change for the 'Smoke Free App' to trial the use and effectiveness with Glasgow City. This provides free access to support via	Ongoing as Business as Usual. Deliver protection programmes to reduce	HSCP	G

		the app which might appeal to some clients due to the 24/7 access to advice and support."	uptake, exposure and cessation services for tobacco smoking.		
Commitment 2. Work with service users and their carers to identify their needs and desired outcomes and empower them to make informed decisions about the lives they live and supports they choose to receive.					
Action	**Milestones (current)**	**Progress & Impact**	**Planned Activity / Route to Green**	**Lead Service**	**RAG**
Implement 'navigation hubs' to support patients seeking access to urgent / unscheduled care.	Promote alternatives to A&E	Board-wide and local programmes to identify most appropriate service for people to call or attend. Includes information on role of community pharmacy / Opticians and other community services	Use NHS24 as a mechanism to access GP Out of Hours, triage and direction to minor injuries, community pharmacy and other alternatives to Accident & Emergency	HSCP	G
Identify opportunities to improve the HSCP's Self-Directed Support (SDS) SW policies, processes and procedures to increase the effectiveness of SDS in empowering individuals to have a greater say and greater control	Further develop Self Directed Support	Glasgow City Council Personalisation and Self-directed Support (SDS) Practice Guidance for Staff has been updated to take account of the changes to practice, policies, and Scottish Government guidance. A SDS Step-By-Step Guide has also been developed to assist staff in navigating the updated SDS processes and procedures. A SDS Awareness GOLD eLearning Module has also been created for social work staff in Children & Families, Adults & Older People and Carer Services. The aim of the course is to provide information about the Social Care (Self-directed Support) (Scotland) Act 2013 and raise awareness of its purpose, statutory principles, and the range of duties under the Act.	Identify development opportunities to promote the use and effectiveness of SDS in enabling service users to meet their personal outcomes. The SDS Operational Group will monitor implementation and roll-out of updated guidance and staff training. It will also keep the guidance under review to determine whether any further updates are necessary at a future point.	HSCP	G

in the services they access to meet their personal outcomes.		A paper was approved by the IJB in September 2024 -linked below. The approach for GC HSCP is prioritising resources for individuals with substantial and critical needs, applying strength-based assessments, and promoting reablement and independence. It does not involve changes to existing eligibility criteria or policies but aims to improve the application of these criteria and streamline access to social care services. Review of Access to Social Care Support	Roll out of the approach began in Oct 2024 and monitoring continues.		
Support patients and service users to exercise greater control over their support journey	Implement Patient Initiated Follow Up (PIFU)	PIFU has been identified as a central component of the NHS GG&C Board wide Mental Health Strategy. The Strategy has been subject to review and a refreshed Strategy is approved at the Health Board and IJB in September 2023. Several initiatives have been completed and implemented including Patient Initiated Follow Up (PIFU). Mechanics are in place for referrals and services need to improve awareness and encourage uptake. Mental Health Strategy Refresh has gone through public consultation with plans to implement following approval of the outcomes of the engagement by the Board's Corporate management team in 25/26. Full implementation of new pathways will likely move into 26/27.	Complete Continue to improve awareness and encourage uptake.	HSCP	G

		Implementation Next Phase Mental Health Strategy Enhancing Community Services Next Steps in Implementing Mental Health Strategy - Enhancing Community Services and Community Engagement			
Explore options with our partners to identify training and development opportunities that would support our staff to support people across the city to make informed decisions about their care and support.	Develop further Partnership Working	Progress and performance will be undertaken and reported on by the HSCP at appropriate intervals. The HSCP is engaged in a tests of change programme to develop and increase the use of Technology Enabled Care and Support. Resource materials have been co-produced (including with Glasgow Disability Alliance) such as an 'easy read' information booklet and two short videos that explained the social work and TECS assessment processes. MH and Disabilities Commissioning both have live test of change programmes in place for two newly commissioned supported living services across the Glasgow. MH Commissioning have a test of change of across 2 SAMH supported accommodation testing the introduction of TEC: Wayforward is service delivering individual support across 25 flats – these are dispersed across the 3 locations in the City. Broomhill, Maryhill and Govan. From this service 8 people have been identified as requiring TEC to enhance	Work will continue to 'grow' and develop those TECs and responder services to ensure people have the opportunity to benefit from those solutions, where appropriate. The HSCP will be undertaking an ongoing programme of awareness raising and training with our staff to ensure they are informed and confident about TECS solutions currently available.	HSCP	G

		support; St Peter's, Partick service – is 7 flats with office base in block will be the next phase. Future Purchasing Arrangements to replace the 2019 Framework- Consider TECS being a key component of all future lots, including Children Affected by Disability, decision around this being a requirement or development request for providers to be agreed. NW TECS Project currently suspended pending BM Options appraisal report to consider future of SOL Connect Responder Service. Proposed shift to a TECS first approach to sleepover provision as part of Access to Social Care.			
	Implement a trauma informed practice approach	Trauma Informed approaches to service delivery and the rollout of STILT training is included within the commitments of the IJB Workforce Plan (approved in November 2022) and the revised IJB Strategic Plan (approved June 2023). Public Protection, Complex Need, Homelessness and Asylum is well embedded in the delivery of the Trauma Informed Support framework. Service representation clearly defined. Ongoing participation in STILT sessions with recent STILT session delivered to key leaders and the promotion of Trauma Informed Support. Psychologist post attached to CN has delivered staff reflection sessions and offered guidance and support to staff within the CN service, locality and residential Homelessness services and	Continue to implement a trauma informed practice approach and rollout of the Scottish Trauma Informed Leadership Training Training dates continue to be available in 2025/26.	HSCP	G

		Asylum staff along with purchased services. Delivery implementation plan well underway with key Service Management oversight. Also aligned to Homelessness staff within HSCC.			
	End-of-Life Aid Skills for Everyone	Progress and performance will be undertaken and reported on by the HSCP at appropriate intervals. Learning & Development currently work with various partners to provide development and advanced qualifications - The Thistle Foundation to deliver strengths-based training to support the Maximising Independence agenda. Stirling University Postgraduate qualification available to staff in Child Protection, AFKAS (association of fostering, kinship and adoption Scotland) enable staff to support in planning children's futures and Strathclyde University for the Postgraduate Mental Health Officer qualification is available for Social Workers.	Explore access to training provided by the Prince and Princess of Wales Hospice on End-of-Life Aid Skills for Everyone.	HSCP	A
Strengthen early support and intervention for children and young people in line with the aspirations of The Promise and ensure they are key partners in deciding upon	Whole Family Wellbeing Fund	Progress and performance will be undertaken and reported on by the HSCP at appropriate intervals. The Whole Family Wellbeing Fund in Primary Care (WFWF PC) programme is embedded in twelve Deep End Practices across Glasgow City. The enhanced elements included as part of the programme are:	Continued investment in the Whole Family Wellbeing Fund will be critical in securing more effective family support for children and young people and supporting the implementation of the Universal Pathway. The primary care pilot programme will test ways of	HSCP	G

the support they want and need		• Family Finance Advisors (FFA) will work with families to support with financial capability. • Family Wellbeing Workers (FWW) embedded into the Multi-Disciplinary Team, sitting alongside the Community Link Worker programme. • Thrive Under 5 (Tu5) - FWWs support families to access food pantry shops and/or meal packs within their local areas, including providing vouchers for cooking utensils • Community Grants Fund – supporting organisations to apply for funding to further enhance family activities available. • Youth Health Service - Additional staff capacity provided through this programme will support with an increase in referrals to the service from FWWs. • Specialist Trauma Support Services Whole Family Wellbeing Fund Chief Social Work Officer Annual Report 2023-24 A report for 2024/25 will be presented to the IJB in November 2025.	strengthening more integrated support for patients with family complexity affecting their primary care presentations within deprived practices. Full details can be found on the HSCP website and in the paper approved by the IJB in January 2025		
Continue the development and delivery of Earlier Intervention	Promote comprehensive family support services.	Progress and performance will be undertaken and reported on by the HSCP at appropriate intervals.	Continue to implement the Family Support Strategy for 2024-2030 Family Support Strategy	HSCP	G

Family Support Services.		The Glasgow Family Support Strategy for 2024-2030 was approved by the IJB at its meeting in May 2025 and the strategy was published in June 2025.			
Work to promote safe access for women to healthcare facilities that provide abortion services, and support the case for legislative action to introduce buffer zones.	Develop and deliver an accessible, patient-centred, equitable, centralised abortion care service across Greater Glasgow and Clyde.	Progress and performance will be undertaken and reported on by the HSCP at appropriate intervals.	Develop and deliver an accessible, patient-centred, equitable, centralised abortion care service across Greater Glasgow and Clyde. Currently there is legislation going through Parliament regarding the introduction of buffer zones Introduced | Scottish Parliament Website Updates will follow national guidance. The Abortion Services (Safe Access Zones) (Scotland) Bill was passed through the Scottish Parliament in June 2024 and became an Act in July 2024.	HSCP	G
Commitment 3. Support people to live safely at home for as long as possible and continue the move away from traditional service delivery models to those which enable people to access services and supports in their local communities					
Action	**Milestones (current)**	**Progress & Impact**	**Planned Activity / Route to Green**	**Lead Service**	**RAG**
Continue our maximising independence work, work with disability	Review approach to access to social care support	Engagement activity has been undertaken with external partners GCIL, GCVS and Glasgow Disability Alliance to discuss the approach to accessing services to ensure a more fair and equitable means to provide	Revised approach to accessing services to be presented to the IJB for approval.	HSCP	G

organisations, and embed human rights in social care policy and practice.		services within the resources available to the HSCP. A paper was approved by the IJB in September 2024 -linked below. The approach for GC HSCP is prioritising resources for individuals with substantial and critical needs, applying strength-based assessments, and promoting reablement and independence. It does not involve changes to existing eligibility criteria or policies but aims to improve the application of these criteria and streamline access to social care services. Review of Access to Social Care Support	Further engagement with stakeholders to support implementation of the approach, raise awareness and ensure staff are supported to work with individuals to assess need and identify/access appropriate supports. Approach began October 2024. Monitoring ongoing.		
Continue to expand the access to and use of technology-based supports to enable people to live independently in their own homes with supports appropriate to their needs.	Move away from analogue telecare platforms	The transition from analogue to digital technology is in its final stages, marking a significant milestone in modernising the service. Glasgow City HSCP has already switched 3,250 service users to digital telecare units, ensuring improved connectivity, signal reliability, and response times. The transition process is being conducted through a new digital Alarm Receiving Centre (ARC) platform, in conjunction with upgraded digital equipment.	Complete the programme to switch the technology used by recipients of technology enabled care services from analogue to digital telecare platforms Full A2D transformation target is end of 2026.	HSCP	G
	Further use of Technology Enabled Care and Support	MH and Disabilities Commissioning both have live test of change programmes in place for two newly commissioned supported living services across the Glasgow. MH Commissioning have a test of change of across 2 SAMH supported accommodation testing the introduction of TEC: Wayforward is service delivering individual support across	Integration of the consideration of Technology Enabled Care and Support (TECS) as a core element of the assessment process	HSCP	G

		25 flats – these are dispersed across the 3 locations in the City. Broomhill, Maryhill and Govan. From this service 8 people have been identified as requiring TEC to enhance support; St Peter's, Partick service – is 7 flats with office base in block will be the next phase. Future Purchasing Arrangements to replace the 2019 Framework- Consider TECS being a key component of all future lots, including Children Affected by Disability, decision around this being a requirement or development request for providers to be agreed. NW TECS Project currently suspended pending BM Options appraisal report to consider future of SOL Connect Responder Service. Proposed shift to a TECS first approach to sleepover provision as part of Access to Social Care.			
Focus on a range of initiatives to reduce delayed discharges by removing barriers to patients leaving acute settings who are fit to return to their communities with the appropriate	Reduce Delayed Discharges	Intermediate Care services within GCHSCP have continued improving existing discharge pathways, reducing delays, and supporting patient-centred rehabilitation. As an essential component of the health and social care system, Intermediate Care provides transitional support between hospital and home location. Improvements include: • a shift towards planned discharges, ensuring that individuals are transferred from hospital to	Joint planning with partners across Greater Glasgow and Clyde to sustainably reduce delays in discharging people from acute settings through targeting resources to key high volume. Participation in Test of Change at QEUH, and renewed focus to implement Choices Protocol where families may delay	HSCP	

supports in place.		Intermediate Care with clear discharge goals and a structured rehabilitation pathway. • closer collaboration with hospital-based discharge teams and acute sector colleagues, ensuring that key elements such as medications, transport, and placement coordination are addressed in advance, mitigating last-minute delays. • the expansion of the Discharge to Assess (D2A) model, ensuring that individuals who no longer require hospital care but need additional assessment time can transition to Intermediate Care settings quickly and safely. • Hospital at Home Service commenced 27th January • Call Before you convey service, providing support to care homes at weekends and public holidays. Further improvements have been made in commissioning arrangements and care home engagement, tackling one of the most persistent barriers to timely discharge. Focus on reducing AWI delayed discharges. Hospital at Home and Call Before You Convey – Progress Report - May 2025	discharge planning due to lack of availability in Care Home of choice The HSCP Chief Officer is leading a whole system improvement programme inclusive of Acute Sector Directors, Health Board Director of Flow and Scottish Government representatives, focused on reducing the relatively high number of AWI-related delays in the city. Activity includes commissioning the Red Cross to support more discharges home and additional legal capacity to monitor and enable private guardianship applications.		
Support people to live safely and	Reduce Delayed Discharges	Progress and performance will be undertaken and reported on by the HSCP at appropriate intervals.	Continue implementation and review of the Discharge to assess process, using	HSCP	G

independently at home and continue the move away from traditional service delivery models to those which enable people to access services and supports in their local communities as active members of their communities.		A significant development in 2024/25 has been the expansion of the Discharge to Assess (D2A) model, ensuring that individuals who no longer require hospital care but need additional assessment time can transition to Intermediate Care settings quickly and safely. This has been supported by daily Intermediate Care huddles, where multidisciplinary teams review patient progress, identify barriers to discharge, and take action to expedite transitions. This proactive approach has improved service efficiency and ensured that Intermediate Care remains a fluid and responsive service The development of an Improvement programme working across Demand / Activity / Capacity & Queue to improve overall performance, reduce length of stay, and increase availability of beds by reducing delays. Hospital at Home – the original service was subject to a review and re focus in November 2024 and will be replaced by a new community led services that will deliver against both the aims of the original Hospital @ Home and Glasgow's Care Home Call Before You Convey test-of change from Winter 2024. A paper is due for consideration of the IJB in May 2025, paper not available at this time. Hospital at Home Model	care home placements to undertake patient assessment outwith acute settings. Develop Additional Referral Pathways and Interventions - Additional Hospital at Home pathways / Call before you Convey / enhanced support to Care Homes. Approval sought from IJB May 2025. Continue the use of Intermediate Care & Discharge to Assess, and collaboration with HSCP owned residential beds to improve pathways and reduce delays.		

		Throughout 24/25, Intermediate Care services within GCHSCP have continued improving existing discharge pathways, reducing delays, and supporting patient-centred rehabilitation. As an essential component of the health and social care system, Intermediate Care provides a transitional support between hospital and their home location, which allows individuals to recover, regain independence, or transition into long-term care settings. This year has seen notable progress in addressing delayed discharges, increasing service efficiency, and improving patient experience. While demand for Intermediate Care remains high, strategic developments have contributed to more structured discharge planning, improved integration with hospital discharge teams, and enhanced engagement with care homes, families, and social care services. A weekly multi-disciplinary meeting was introduced, bringing together homelessness services, social care, addictions, and complex needs teams to coordinate a holistic approach to discharge planning. This has enabled more effective transitions, ensuring that individuals have access to both appropriate care and stable accommodation.			
Support people to live safely and	Reduce Delayed Discharges	A working group has been established with membership from across the partnership, communities, housing and commissioning to	Implement a 7-day discharge model, supporting acute planning to deliver 7-	HSCP	A

independently at home and continue the move away from traditional service delivery models to those which enable people to access services and supports in their local communities as active members of their communities.		reduce delays and barriers to home environments/communities for patients requiring environmental cleans, and ensure appropriate support is in place. The HSCP does facilitate weekend discharges to home care, intermediate care and care homes. Numbers remain modest but dialogue remains ongoing with Acute colleagues to increase referrals for weekend discharge. A whole system approach is required to enable a successful 7 day discharge model.	day discharge and including 7-day admission and discharge within intermediate care home placements. Aim for a shift from patients being delayed by identifying a planned day of discharge to support actions underway. The HSCP does facilitate weekend discharges to home care, intermediate care and care homes. Numbers remain modest but dialogue remains ongoing with Acute colleagues to increase referrals for weekend discharge. The systematisation of PDD remains a strategic priority for both the Scottish Government and NHSGGC Board. However, this has not been achieved. The HSCP is supportive of PDD and will continue to support Acute in its efforts towards implementation.		

Support people to live safely and independently at home and continue the move away from traditional service delivery models to those which enable people to access services and supports in their local communities as active members of their communities.	Reduce Delayed Discharges	GCHSCP South Locality teams have been running an innovative service that supports and improves patients' health and wellbeing while keeping them in their own homes for longer and reducing the need to be admitted to hospital. As at Oct 22, 594 acute hospital bed days were saved through a test of change, which provides hospital level treatment to patients with acute illnesses in their own homes. **Implementation of Zebra printers –** Positive staff survey / reduced time travelling / reduced risk of invalid samples due to timing **Development of Referral pathways – SAS / AAU** – Increasing referrals from both pathways evidenced by patient data, case studies to support further development **Scale up to Total South and all NW GPs feeding into QE** – All GPs now on line to refer from defined postcode / practices – evidence of GP referrals which will be further enhanced through implementation of communication strategy, including production of info video to support GP referral (in production) **Implementation of QR code to support GP referral** – Established to promote ease of referral and ensure patients meet criteria – reduced level of declined referral **Implementation of IV anti-biotic protocol** – Established and provided as part of business as usual interventions – evidence of level of intervention increasing from clinical review	Review and development of referral pathways; Planning for test of electronic prescribing; Planning for implementation of digital nursing notes; Repeat patient and referrer qualitative surveys – previous responses showing high level of satisfaction; Explore potential for further use of point of care or digital options to support clinical care; Revisit overall communications strategy to support referrals and liaison with patients and families	HSCP	G

		Implementation of blood transfusion protocol – Established and cases commenced to utilise pathway **Increase to 15 bed capacity** – Established – regularly retained at 15 beds. Moving towards increase to 20 bed capacity based on staffing capacity / availability of senior decision makers **Establishment of framework for scale up – workforce / financial and outline implementation plan – approved by CMT** – Framework established – awaiting decisions around recurrent funding and increased funding to enable development to system wide level			
Support people to live safely and independently at home and continue the move away from traditional service delivery models to those which enable people to access services and supports in their local communities as active members of their communities.	Progress strategy to focus on importance of mental well-being in recovery from pandemic	An overall update of all Health Improvement Activity can be found in the HI Annual Report linked below. Health Improvement Annual Report 2023-24 A new Annual Report will be due in November 2025 As part of the recommendations from the Socially Connected Glasgow Strategy, including one related to charitable funding arrangements a newly refreshed Funders in Glasgow Forum has been established. Membership consists of a number of national, local and Glasgow funders with the aim to work collectively together to maximise impact and reduce duplication of services across the city.	Support the implementation of the "A Socially Connected Glasgow" strategy	HSCP	G

Commitment 4. Work in partnership with communities and other services to ensure that people, particularly the most vulnerable, are kept safe from harm and that risks are identified, reduced and managed appropriately.					
Action	**Milestones (current)**	**Progress & Impact**	**Planned Activity / Route to Green**	**Lead Service**	**RAG**
Review provision of emergency accommodation for homeless households leaving hospital.	Progress work to reduce homelessness	Review of emergency accommodation complete	To ensure access to accommodation that meet people's needs and minimises delayed discharge for homeless households.	HSCP	G
Progress initiatives that prevent and reduce the risk of homelessness	Progress work to reduce homelessness	GCHSCP's Homelessness Services, have continued to fund the Private Rented Sector (PRS) Hub. The PRS Hub have developed strong and effective working relationships with partner organisations to support tenants in the PRS, particularly families with children, many of whom are living in poverty due to the impact of welfare reform. The Hub has played a key role in the prevention of homelessness which is the focus of the RRTP. The HSCP's Homelessness Service has also developed three Prevention and Resettlement Hubs with 12 housing associations. Through this joint working with housing associations we to continue to improve joint working and the early identification of households at risk of homelessness in order that appropriate	Improve access to housing support for households at risk of homelessness and households within private rented accommodation. The Council will continue to improve online housing and homelessness advice and information to allow citizens to make informed decisions regarding their housing options.	HSCP	G

		community-based services can be put in place that will assist people to sustain their tenancies.			
	Progress work to reduce homelessness	A scoping exercise was undertaken on the feasibility of developing a Flexible Homelessness Prevention Budget. Following the scoping exercise it was agreed to delay the development of any pilot until 2025/26 until the Scottish Government has published their plans for Homelessness Prevention funding aligned to Housing (Scotland) Bill 2024 and the new homelessness prevention duties. Delaying the development of any flexible prevention budget will allow the HSCP to determine if the approach aligns with the Scottish Government's revised approach to homelessness prevention activities. In addition, the delay will allow the HSCP to assess if there will be the budget to seek Scottish Government funding for any pilot. Applications for help with rent arrears through the Tenant Hardship Fund have been reopened. Working directly with Housing Associations, The Scottish Government funding will help to sustain tenancies for people at risk of homelessness where the rent arrears have occurred due to financial hardship.	Development and implementation of the Flexible Homelessness Prevention Fund.	HSCP	A
	Progress work to reduce homelessness	Following the successful pilot of the Rapid Rehousing Fund we have mainlined the approach through Scottish Government	Continue to provide funding that can be used flexibly to support small scale grants	HSCP	G

		RRTP funding. The purpose of this funds to allow quicker move on from bed and breakfast accommodation for single person households who often must wait for a Scottish Welfare Fund (SWF) award prior to moving into their settled let. The fund will be available to support the purchasing of items such as small, portable cookers, fold down beds etc. which will allow individuals to move into their tenancies whilst awaiting their SWF award which takes an average of 25 days.	to people at risk of homelessness in order to sustain their existing accommodation.		
	Progress work to reduce homelessness	The new housing support service Wayfinder became operational in August 2025. Wayfinder services will provide advice and practical assistance to people at risk of homelessness or as they seek to secure a settled tenancy in the community.	Continue to work with Wayfinder providers to extend the support to housing association tenants at risk of homelessness	HSCP	G
Support the Glasgow Alliance to End Homelessness and their work to improve homelessness services in Glasgow, support Housing First as a model and reduce use of temporary accommodation.	Progress work to reduce homelessness	Given the increased demand on Homelessness Services, largely resulting from the streamlined asylum decision making process, Glasgow City Health and Social Care Partnership has been required to rapidly increase its use of temporary accommodation. None the less, Glasgow continues to prioritise prevention strategies with a noted 9% reduction in applications in 25/26. This is achieved through Housing Options assessments delivered via Health & Social Care Connect and Community Homeless Teams. It is envisaged that a new digital framework within HSCC, introduced in August 25, will also assist with prevention.	Following the review of the Temporary Accommodation Strategy in 2024/25 the HSCP will now work with stakeholders to implement the revised strategy. Implementation of the strategy will see a transformation in the delivery of homeless temporary accommodation. We continue to work with colleagues in the RSL sector to extend the number	HSCP	R

*Note from HSCP regarding the original action agreed - The Alliance to End Homelessness is no longer an entity as it unfortunately did not achieve the objectives originally hoped for. Coming from this was the “All in for Glasgow” approach which subsequently developed the Wayfinder Model of Housing support which includes Housing First tenancies. Planning for phase 2 is now underway to look at purchased Homelessness supported accommodation.		Homelessness Service are working with colleagues in Neighbourhoods, Regeneration and Sustainability (NRS) to identify vacant properties within the city which can be used as temporary accommodation to ensure the HSCP continues to meet its statutory duties. In the short term, Homelessness Services have increased the provision of bed and breakfast/hotel accommodation households in this type of accommodation. Glasgow's Housing Emergency	of people accommodated in permanent tenancies with Housing First support.		
Implementation of Glasgow City IJB’s first Domestic Abuse Strategy.	Support victims of domestic violence	The Domestic Abuse Strategy was approved by the IJB in March 2023. Safe & Together training has been delivered to Children and Families teams (south), and to selected staff from all services in	Implementation complete	HSCP	G

		Glasgow. Over 300 staff members from across the city received online half-day overview training, including staff attending the city-wide MARAC, and all grades of staff from Justice services, NORM, ADRS, Police, Police Custody Health Care, Homelessness services, Adult services, Older People services, Children's services. 75 places were offered specifically to South Children Services for the 4-day core training. These places were extended to Justice services in South, NORM and the Caledonian team making 101 in all. There was also manager training (3 days) that was largely made up of south managers in different parts of the service either child protection or with a significant interface with child protection – 40 places in all. Adult services and Older People's services planned a series of domestic abuse awareness briefing sessions for staff. Around 300 members of staff signed up to attend. The briefings offer an understanding of the Domestic Abuse Strategy and aim to support staff in improving their responses to people who suffer domestic abuse by discussing all available and suitable domestic abuse trainings. Through these briefings, staff are afforded time for reflection and discussion around the issues raised and their own opinions and experiences.			

	Support victims of domestic violence	Review of the Gender Based Violence (GBV) service and role of the GBV workers in each locality to improve effectiveness of support provided to their service users. New ADRS Skill mix model approved September 2024	New skill mix model approved by IJB September 2024	HSCP	G
Support local and national efforts and a public health, evidence based approach to tackling drug deaths.	Support the Scottish Government's ambition to enable the consistent delivery of safe, accessible, high-quality drug treatment and deliver initiatives and priorities to tackle the harm caused by alcohol and drugs in the city.	The Safe Drug Consumption Facility is situated in Hunter Street Health and Social Care Centre and is well known to the target population and key partners. It opened in January 13th 2025. Since opening to end of April 2025, The Thistle has been used 2731 times by 461 individuals. Nursing staff within the Using Space have supervised more than 4767 injecting episodes, with people injecting cocaine, heroin or both. There have been 60 medical emergencies with which staff have been able to respond. February 2025 update to the IJB The Thistle - Service Data https://glasgowcity.hscp.scot/news/thistle-exceeds-expectation-latest-figures-provided Home Office Licence has been approved for a Drug Checking Service to be established in Hunter Street Health and Care Centre, introducing a new harm reduction service to	Evaluation and community engagement ongoing. The Thistle - Safer Drug Consumption Facility - Engagement Update to IJB Public Engagement Committee Secure final funding from Scottish Government/Corra to procure necessary equipment.	HSCP	G

		Glasgow City. Drug checking is a confidential and discreet service where a small drug sample may be handed in for testing and following analysis trained staff will provide harm reduction advice and support to individuals, based on test results. The service aims to reduce individual level harm but also provide drug trend information to inform early warning systems and reduce population level harms.	Work with the national laboratory to finalise pathways.		
Recognise gambling harms as a public health issue.	Provide the information and supports required to those who are experiencing or are at risk of experiencing harm in our city to ensure protection from harm	GCHSCP Health Improvement in partnership with Public Health Scotland commissioned a Glasgow-based creative arts organisation to co-create a collection of fully anonymised composite stories and posters that reflect the realities and experiences of gambling exposure, participation, risks and harms for people in Glasgow. These stories are based on real people's stories and have been told by people with lived experience of gambling harms and aim to raise awareness and tackle stigma. The resource is entitled; and available here *Whats at Stake; Glasgow's Stories of Harms and Recovery*	Continue to work with colleagues and partners to explore the impact of online harms and young people's digital life on their health and wellbeing outcomes.	HSCP	

Commitment 5. Work to promote safe and equitable access to the right services in the right place at the right time for all with particular awareness of the needs of protected or marginalised communities					
Action	**Milestones (current)**	**Progress & Impact**	**Planned Activity / Route to Green**	**Lead Service**	**RAG**
Connect people and those they care for to the right supports, in the right place and at the right time through more straightforward and timely signposting and information for those looking for support within their communities.	Embed Health and Social Care Connect service	Phase 1 of Health and Social Care Connect was launched in November 2022, including the following social work services: Children and families, Homelessness and adults and older people. The introduction of the Support Enquiry in front of online referral form is now up and running for Adults and Older People with improvements to the online form encouraging the public and professionals to use. The message on the IVR system has been updated in line with the Support Enquiry aiming to Maximise Independence and encourage the use of 3rd sector services and community resources. Information for new HSCC Web site is under way across care groups. A review of the resource directory info will be included in the ALISS directory which is currently being developed. The Proportionate Assessment tool used in AOP and OT has been reviewed and improved in line with MI language	Monitor and review the Health and Social Care Connect service	HSCP	G
	Launch Alcohol and Drug	A pathway has been developed for Health and Social Care Connect and Glasgow Alcohol and Drug Recovery Services	A review of Health and Social Care Connect will progress discussions on	HSCP	G

	Recovery Services	(GADRS), and regular liaison meetings are established. People referred to the HSCP for alcohol and/or drug issues will continue to be referred directly to ADRS as a treatment service and MAT Standards require a same day response. HSCC staff have been trained in harm reduction to address immediate risk. Launch of HSCC for Alcohol and Drug Recovery Services and some community services is not proceeding as MAT standards require same day response from GADRS. Expansion of Health and Social Care Connect to move to an integrated service will include consideration of ADRS service provision	expansion to include a range of health services as a first point of contact. This will include Alcohol and Drug Recovery Services for consideration. In the meantime, ADRS continue to operate same day screening and treatment response where indicated, alongside outreach work to engage individuals and mitigate risk. Individuals are linked to relevant HSCP, third sector and recovery supports timeously through outreach services and treatment and care reviews.		

Commitment 6. Ensure that Glasgow's carers, including young carers, foster carers and kinship carers are supported to provide the best possible care, and achieve the health, wellbeing and financial stability that enables them to reach their full potential					
Action	**Milestones (current)**	**Progress & Impact**	**Planned Activity / Route to Green**	**Lead Service**	**RAG**
Continue to give voice to those with lived experience of being and unpaid carer by ensuing young carers voices are being heard within health and social care decision making structures.	Continue to support carers	An HSCP officer with a primary role in supporting and advocating for the interests of carers has been identified as a non-voting Member of the IJB and Member of the Public Engagement Committee. In May 2025 the IJB approved an approach to Stakeholder Recruitment including those representing Carers. Recruitment continued thereafter and new stakeholders are awaiting the approval and induction to become members of the IJB. These members will also be asked to join PEC to further represent carers.	Support carer representation on the Integration Joint Board and Public Engagement Committee Approve and Induct stakeholder representatives.	HSCP	G
Develop a package of funding supplements and benefits access that assists children and young people to be sustained within their extended families and school community.	Continue to support carers	In November 2023 the IJB approved the Scottish Recommended Allowances for kinship and fostering services as agreed by COSLA and the Scottish Government seeking IJB agreement to implement the payment of the proposed allowances backdated to 1st April 2023.	Kinship carers allowance package	HSCP	G

CASE STUDY	
Commitment	Work to promote safe and equitable access to the right services in the right place at the right time for all with particular awareness of the needs of protected or marginalised communities.
Action	Connect people and those they care for to the right supports, in the right place and at the right time.
Milestone	Diversion from Prosecution to provide early intervention to reduce likelihood of further offending behaviour.
Case study title	Diversion from Prosecution (DfP)
RAG Rating	
Synopsis (100 words)	Diversion from Prosecution is a process by which the Procurator Fiscal refers an individual to their Local Authority as a means of addressing the underlying causes of alleged offending behaviour. This can be done instead of commencing court proceedings (or before final decision is taken in relation to court proceedings).
The challenge	Glasgow City HSCP Partnership Priority 4 – Strengthening Communities to Reduce Harm Commitment – The HSCP will be working well with partner agencies and service providers across the city to recognise and address potential areas of risk and harm early and ensuring the appropriate response is available and applied.
The solution	Diversion from Prosecution is one of a range of direct measures which are available to the Procurator Fiscal Service in Scotland. Which measure is used will depend on the facts and circumstances of each case and what prosecutors consider to be in the public interest. The benefits of a successful Diversion from Prosecution are that it: • Provides the individual with an opportunity to obtain support to deal with any issues or needs that may have contributed to the alleged offending behaviour. • Provide early intervention to reduce likelihood of further offending behaviour. • Provides a swift resolution and reduces contact with the criminal justice system for all involved. • Prevent stigmatisation of the individual, by avoiding a criminal conviction which may impact on life chances. Within Glasgow HSCP, Justice Social Work operates a distinct Diversion from Prosecution team that manages all diversion assessment requests from Crown Office and Procurator Fiscal Service. The team also case manages any individual who has been assessed as suitable for diversion and requires ongoing

	support / intervention. The assessment process is focussed on the needs of the individual and does not seek to assess the risk of harm / further offending. Subsequently, any intervention plan is focussed on the individuals' needs and may result in direct work being done with the individual, or support being provided by other services either within the HSCP or the voluntary sector. In 2024-25 a total of 847 diversion assessment requests were received by the service. Of these approximately 61% were male and 39% female. 332 individuals were assessed as suitable for diversion by the team, 88 were assessed as unsuitable and 376 assessments were unable to be submitted (due to non-engagement by the individual referred). In the same time frame 325 diversion cases were successfully completed by the team, with the same gender split noted. Of these cases the following needs / issues were identified; 34% mental health needs, 32% drug use issues, 24% alcohol issues with the remainder requiring support with a range of issues including employability, finances and relationships. The team recently conducted an internal audit of our processes and procedures and are in the process of making some changes to our assessment processes. We are currently experiencing a high level of non-engagement with the diversion assessment process with over half of the assessment requests being returned to Crown Office and Procurator Fiscal Service (COPFS) as a result of clients not engaging with the assessment. It is hoped that by changing some of our processes we can expect to see this improve over the next 12 months.
The impact (including cost savings/income generated if applicable)	Client A was referred into the Diversion team following being charged with 3x S38 Criminal Justice and Licensing (Scotland) Act 2010 and Police Assault. Client A advised that the incident occurred due to excessive alcohol consumption at the time which had increased due to bereavement. This resulted in becoming involved with Criminal Justice, breakdown in relationships and Client A developing pancreatis despite his young age. Client A agreed to explore supports during the period of Diversion with the goal of maintaining sobriety. A referral was made to Glasgow Council on Alcohol for one-to-one counselling in regard to both alcohol use and bereavement issues. Further supports were explored such as AA, coping strategies when feeling triggered and positive use of time. Upon completion of Diversion, Client A had been sober for 18 weeks, was regularly attending GCA, AA and had returned to work part time. He had also began exploring college courses to plan for his

	future and noticed a significant improvement in his health and relationships with family. Client B was referred into the Diversion team following being charged with assault (child). Client B advised the incident occurred due to a breakdown in her marriage which she reported had been coercive and abusive, resulting in stress and difficulties with her children's behaviour. Client B agreed to engage with supports put in place via Children & Families Social Work and to explore further supports during the period of Diversion. A number of referrals were made throughout the Diversion period to attempt to support the family and make positive changes moving forward. These supports included; Family Group Decision Making to discuss contact with the children and conflict between the parents. Central Parenting Team to work with Client B regarding managing challenging behaviour in teenagers. Women's Aid to support her emotional wellbeing and emotional support services for her son to discuss his feelings and issues. It also became apparent Client B had suffered emotional trauma throughout her marriage and a referral was made to Lifelink for one-to-one counselling. Further advice and guidance regarding civil child contact proceedings was provided and she was also given advice regarding reactions and behaviour previously when contact conflict issues arose and she began implementing this advice. Upon completion of Diversion, Client B was more confident in navigating child contact and contact with her ex-partner, the relationship with her son had improved, she was more emotionally regulated due to counselling and Children & Families Social Work closed the case due to reduced risk and no further concerns.
How is the new approach being sustained?	In addition to some internal changes, we are also anticipating the launch of newly revised national Diversion from Prosecution guidelines. This document will include the main principles of the diversion process for all key agencies including Police Scotland, COPFS and Justice Social Work. It will also introduce a pathway for diversion for more complex cases to be considered / assessed. Following on from these multi-agency guidelines, an updated guidance document will be circulated for Justice Social Work to try and ensure consistent practice across the country.
Lessons learned:	We are currently experiencing a high level of non-engagement with the diversion assessment process with over half of the assessment requests being returned to COPFS as a result of clients not engaging with the assessment. It is hoped that by changing some of our processes we can expect to see this improve over the next 12 months.
Contact:	Jill Scoular

Links to relevant documents:	Strategic Plan Monitoring Report October 2025

CASE STUDY	
Commitment	Support people to live safely at home for as long as possible and continue the move away from traditional service delivery models to those which enable people to access services and supports in their local communities
Action	Support people to live safely and independently at home and continue the move away from traditional service delivery models to those which enable people to access services and supports in their local communities as active members of their communities.
Milestone	Glasgow City HSCP Partnership Priority 5 – A Healthy Valued and Supported Workforce Commitment – Our workforce will be committed to meeting the Vision and priorities of the Integration Joint Board by working in an innovative, progressive and transformational way to support people to live as independent a life as they can
Case study title	Home Care Leadership, Workforce and Culture
RAG Rating	
Synopsis (100 words)	The effective delivery of Home Care services across Glasgow is fundamentally reliant on a skilled, motivated, and well-supported workforce. As the largest Home Care service in Scotland, with 98% of services delivered in-house, Glasgow City HSCP recognises the critical role of staff in maintaining high-quality care provision.
The challenge	In 2024, the service continued to face sector-wide recruitment and retention challenges. Despite this, Home Care maintained a retention rate of 94.51%, with an attrition rate of 12.35% as of February 2025.
The solution	To enhance recruitment efforts, the service transitioned from large-scale city-wide events to sector-based recruitment initiatives in the North East, North West, and South localities. This targeted approach resulted in increased interest in Home Care careers within GCHSCP. Recognising the importance of effective collaboration, Home Care worked closely with Human Resources (HR) and Learning and Development colleagues to ensure the recruitment of suitable candidates (18% increase) and the ongoing professional development of existing staff. This partnership facilitated the review and update of statutory training courses, including the home carer induction programme and workbook, ensuring alignment with best practices and regulatory requirements. Currently, 96% of the home care workforce is registered with the Scottish Social Services Council (SSSC), with the remaining 4%

	on track to complete registration within the required timeframe. Key workforce development initiatives included coaching conversations and compassionate leadership training to foster a positive cultural and behavioural shift across the service.
The impact (including cost savings/income generated if applicable)	<u>Training and Professional Development:</u> Given the complexity of training a workforce of over 2,500 staff members, Home Care implemented a range of measures to enhance learning and development opportunities. Engagement sessions and Trade Union consultations contributed to the expansion of online Gold Courses, improving the accessibility to training whilst ensuring sufficient time allocation for staff and their development. <u>Leadership Development and Workforce Planning:</u> To strengthen succession planning and leadership capability within Home Care, a new Reablement Line Manager training programme was introduced in 2024. This initiative aims to equip managers with the necessary skills and knowledge to support staff effectively, fostering a culture of professional development and continuous improvement. Additionally, Home Care has continued to assess training needs for management and leadership roles, leading to the development of a tailored in-house programme designed to enhance career progression, and opportunities for home carers. To ensure consistent communication and knowledge-sharing, the '3-Minute Brief' initiative was introduced. This regular communication provides updates on new legislation, internal policy changes, and training opportunities, ensuring staff remain informed and compliant with evolving regulatory standards. The service also reinforced the importance of adherence to Scottish Social Services Council (SSSC) guidelines on continued professional learning, emphasising shared responsibility between the organisation and employees in maintaining high professional standards. The service launched a dedicated email address for staff to request assistance around SSSC registration and meeting their qualification requirements.
How is the new approach being sustained?	<u>Operational Resilience and Workforce Sustainability:</u> Home Care services operate across four-time bands from 07:30 to 22:00, with overnight care available for high-risk service users. Currently, 60.35% of care is delivered after 4 pm and on weekends, requiring a workforce of 1,195 home carers per shift

	and 270 vehicles citywide to ensure service delivery meets the needs of service users. Given the increasing complexity of care conditions, and the skill level required by the care services workforce; sustainability remains a strategic priority. Home Care continues to explore innovative recruitment and retention strategies, including a 2024 'Test of Change' pilot to refine the hiring process. This pilot involved replacing the traditional values-based assessment with initial telephone interviews, scored on skills and competencies, followed by face-to-face interviews for shortlisted candidates. The aim is to streamline recruitment and ensure the selection of the most suitable candidates. A significant development in 2024 was the introduction of a Home Care Coordinator Succession Planning initiative. This structured career development programme is designed to provide home carers with clear pathways for professional growth, leadership opportunities, and targeted training. By nurturing internal talent, the initiative aims to foster a highly motivated workforce dedicated to delivering high-quality care. Since commencing this program, over 20 home carers have moved to supervisory roles across the service. The recruitment, training, and workforce development initiatives undertaken in 2024 have reinforced the sustainability and effectiveness of the Home Care service. Through collaborative efforts with HR and Learning and Development colleagues, the service has successfully enhanced training provision, improved recruitment efficiency, and strengthened leadership capabilities. As the Home Care service continues to evolve, the commitment to workforce development remains steadfast, ensuring staff are equipped with the skills, knowledge, and resources required to deliver outstanding care. By fostering a professional and supportive environment, the Home Care service will continue to build a resilient workforce dedicated to meeting the needs of service users across Glasgow City.
Lessons learned:	The recruitment, training, and workforce development initiatives undertaken in 2024 have reinforced the sustainability and effectiveness of the Home Care service. Through collaborative efforts with HR and Learning and Development colleagues, the service has successfully enhanced training provision, improved recruitment efficiency, and strengthened leadership capabilities.
Contact:	Jill Scoular
Links to relevant documents:	Strategic Plan Monitoring Report October 2025

CASE STUDY	
Commitment	Work with service users and their carers to identify their needs and desired outcomes and empower them to make informed decisions about the lives they live and supports they choose to receive.
Action	Strengthen early support and intervention for children and young people in line with the aspirations of The Promise and ensure they are key partners in deciding upon the support they want and need
Milestone	Whole Family Wellbeing Fund
Case study title	Development of Whole Family Wellbeing Fund in Primary Care (WFWF PC)
RAG Rating	
Synopsis (100 words)	The Scottish Government Primary Care Division have awarded Glasgow City funding to deliver the Whole Family Wellbeing Fund in Primary Care (WFWF PC) and the proposal for delivery in 12 Deep End GP Practices and localities was accepted by the Scottish Government. A WFWF GP Steering Group was established with representatives from Head of Health Improvement and Equalities, and includes membership from General Practice, Children's Services, the Child Poverty Pathfinder team (GCC), Health Improvement, the Third Sector, the Scottish Government Primary Care Division and Glasgow Life. This group reports into the Children's Services Executive Group (CSEG).
The challenge	Reduce poverty and inequality in our communities
The solution	Population Data was analysed across the city using many different sources including health data on teenage birth rates, minority group populations, deprivation data, practice populations and Deep End GP Practice intelligence. This data was used to guide the distribution of the WFWF PC resource, while considering the enhanced support elements which would support the identified families.

	The programme elements were designed to support the WFWF outcomes: • Reduce number of Children living away from their family • Increase Healthy Activity and Access to good Services/Supports • Improve Access to Monies and Increase Financial Capability • Improve Family Wellbeing and Health • Reduce Inequalities. The Steering Group developed the range of elements linked to the programme using the evidence in terms of what was needed for families in Glasgow City, including a deep dive on Community Link Worker Case Studies with a family focus gathered randomly along with 'Everyone's Children' network Report, Leave No one Behind and ongoing Place Based Communities work. The twelve GP Practices were selected based on the data capture, ability and willingness to support the programme and they all have an existing Community Link Worker. The new programme was then developed to reflect the existing working practices. The following are key parts of the programme: • Health Improvement Lead and a Public Health Data Analyst team to co-ordinate and contract monitor the programme • Part-time Family Wellbeing Workers embedded in twelve GP practices • Small fund to release practice staff for joint learning and development • Funding for mitigation and wellbeing supports for patients and some surrounding community elements • Community Fund for small organisation community delivery • Evaluation by external commissioned partner. The operational components of the programme began delivery in October 2024, and it will run until the end of March 2026, with the Health Improvement Team monitoring development of all of the contract elements. The Whole Family Wellbeing Fund in Primary Care (WFWF PC) programme is embedded in twelve Deep End Practices across Glasgow City, to provide interventions directly accessed from primary care for families. Families are offered a wraparound bespoke service of supports including financial capability, access to health specific ESOL classes, read and play sessions and specialist trauma support services.

	As part of this work, the Glasgow City HSCP Health Improvement Team have commissioned a partner, Includem, to deliver this programme in the twelve Deep End GP Practices across Glasgow City. This covers seven neighbourhood areas. Includem staff employ 6 full time Family Wellbeing Workers who work part time across two practices, and have received over 90 referrals since the inception of the service in mid-November 2024. The programme has been well received in the selected GP Practices with Family Wellbeing Workers being embedded into the Multi-Disciplinary Team, sitting alongside the well evidenced, robust Community Link Worker programme. Through the WFWF PC programme, the enhanced elements included as part of the programme are: • **Family Finance Advisors** (FFAs) - they have been employed as part of the wider Welfare Advice Health Partnerships (WAHP) currently operating in some GP Practices. FFAs will work with families identified through this programme to support with financial capability. • **Thrive Under 5 (Tu5**) – this is a pre-5 early intervention project to enable a healthy weight in children under five. Tu5 is delivered as a whole systems approach to tackling child poverty as it recognises the barriers in place preventing families from providing a healthy lifestyle for their family be that low income, food insecurity, access to affordable/healthy foods, being able to take part in community physical activities or having the skills/equipment to cook healthily at home. FWWs support families to access food pantry shops and/or meal packs within their local areas, including providing vouchers for cooking utensils which is alos part of this programme. • **Glasgow Life (GL) –** FWWs make referrals via the Live Well, community-based service, within Glasgow Life, to liaise on the appropriate service for the family member(s). The services specifically available through the WFWF PC programme are: - English for Speakers of Another Language (ESOL) (with a health specific focus) - Connecting families through library services such as book gifting, baby's first visit, sharing stories etc.

	- Community play including additional support needs play sessions, access to sports clubs/gym/swim - Children's Club budget (supporting children and young people to access equipment/transport/membership to a specific club/activity). • **Community Grants Fund –** Organisations working within the seven neighbourhood areas where the GP Practices are based were supported to apply for funding to further enhance family activities available within these areas. Funding has now been granted, and the majority of these additional community supports will start from March 2025. • **Youth Health Service –** Additional staff capacity provided through this programme will support with an increase in referrals to the service from Family Wellbeing Workers. • **Specialist Trauma Support Services** – Healing for the Heart, Moira Anderson Foundation and Glasgow & Clyde Rape Crisis offer enhanced visibility, capacity building and service provision across the seven neighborhood areas mentioned above. Cruse Scotland offer capacity building to partner agencies across the identified areas on bereavement and loss.
The impact (including cost savings/income generated if applicable)	**<u>Case study showing support from Family Wellbeing Worker linking family to supports</u>** Referral was made by GP for a family with three children following a recent hospital admission due to respiratory illness. GP outlined difficult housing conditions and was keen for this to be assessed further to explore actions which could improve the physical health of the children. Family Wellbeing Worker visited and assessed the families housing conditions. Significant dampness was identified within the family home with this being the likely cause of the recurrent respiratory illnesses. Dehumidifiers were purchased via the Includem Young Person Fund to try and provide an immediate reduction in the level of dampness. Contact was made to speak with their housing officer on behalf of the family to explore longer term permanent solutions to the dampness. Referral was also made to GEMAP to access further independent housing advice and money advice.

	The Housing Association is now in frequent contact with the family and are visiting the family home to undertake their own assessment. At this time, they have agreed to provide thermal wallpaper and extractor fans. The family will have additional independent housing and financial advice via GEMAP. Overall positive outcomes achieved for the whole family unit. **Case Study: Money Matters Financial Inclusion Pathway** **Title: Couple with dependents require disability benefit support and debt assistance** Client and husband have 4 children and were struggling financially due to a limited self-employed income and client unable to work due to poor health. Client previously applied for Adult Disability and was refused. Due to their son's health issues, the client required assistance with disability benefits as well as managing energy debt of £1400 and rent arrears of £200. Money Matters assisted the client in completing a benefit check, ensuring client is receiving all correct entitlement in line with circumstances. Client was supported in building a case for Adult Disability Redetermination which was successful, awarding Standard Rate Daily Living. Identified client's son could be eligible for child disability payment and this was successfully awarded, Middle Rate Care, Low-Rate Mobility. Money Matters went over client's income and expenses and assisted her with budgeting and looking at affordability in debt repayment, initially with rent and client was able to make payments of £20 per month towards the arrears. Client was also advised on energy support including submission of an energy grant which was successful, client received £1300 towards her debt. Advisor supported the client in setting up Direct Debit for the remainder and client is now better able to make better financial choices and having access to services in her area. Engaging with the Thrive Under 5 network has meant they have access to the local community pantry, meal packs as well as a kitchen utensil voucher. Outcomes Realised: Income maximisations check-up completed; received budgeting support; increased income for family with young children; support with Rent arrears, assisted with repayment plan. Adult Disability Payment Total Gain (including backdate) - £5,477.40; Child Disability Payment Total Gain (including backdate) - £7,297.20; Universal Credit Update Total Gain - £4,759.44; Travel Card - £500 Cooking Equipment voucher- £20.00; East End Flat Pack Meals - £80.00;

	Ruchazie Pantry - £244.00; Energy Grant Award, Debt Cleared - £1,300. **Case Study - Family Finance Advisors (FFA)** A 22-year-old single mother living with her mum and younger sister in social housing reached out for financial advice. She is a first time mum and had just gone on maternity leave, and with her income dropping to Statutory Maternity Pay she required support to manage her finances effectively. Referred by her GP practice, she met with a Family Finance Adviser for an initial chat. Through the initial assessment it was identified that with her income now lower, she was likely eligible for Universal Credit, Scottish Child Payment, and the Best Start Grant. She was referred to the Welfare Advice and Health Partnership Advisor in her GP Practice to check her entitlements and get support with applications. During their conversations, they also went over her spending habits and found that while she was aware of her income, she struggled with budgeting and often bought things on impulse. She was given tips on managing her money, like setting a weekly or monthly budget, making a shopping list before going to the store, and checking her bank statements regularly. She was also asked to put together a budget and go through an Action Plan Journal before their next meeting. At their follow up sessions, she felt more confident about handling her finances. She had started using a shopping list, which helped her stick to her planned purchases. She was given extra budgeting resources and introduced to online money management tools. They also talked about savings options for her baby, including Children's ISAs. Together, they set some new financial goals with deadlines, and the Family Finance Advisor planned to check in at future appointments to track her progress. The support she received made a big difference in how she managed her money. She got better at budgeting, cut back on impulse spending, and took charge of her financial future. She was really grateful for the help and felt ready to handle her finances on her own. This case showed how well the WAHP and FFA projects worked together to help her become more financially independent.
How is the new approach being sustained?	The operational components of the programme began delivery in October 2024, and it will run until the end of March 2026, with the Health Improvement Team monitoring development of all of the contract elements.
Lessons learned:	
Contact:	Jill Scoular
Links to relevant documents:	Strategic Plan Monitoring Report October 2025

5. Recommendations

5.1 The Committee is asked to:

- Consider and note the content of the report;
- Consider any specific Commitments or actions that require officers to report back on with further detail or progress updates as part of the Committee's future work programme.

6. Policy and Resource Implications

Resource Implications:

Financial:	None, all services have been formally agreed by Council as part of the annual budget process
Legal:	
Personnel:	
Procurement:	

Council Strategic Plan:	Grand Challenge 1: Reduce poverty and inequality in our communities

Equality and Socio-Economic Impacts:

Does the proposal support the Council's Equality Outcomes 2021-25? Please specify.	Not applicable as this is a performance report.
What are the potential equality impacts as a result of this report?	No significant impact

Please highlight if the policy/proposal will help address socio-economic disadvantage.	Not applicable as this is a performance report.

Climate Impacts:

Does the proposal support any Climate Plan actions? Please specify:	Not applicable as this is a performance report.
What are the potential climate impacts as a result of this proposal?	Not applicable as this is a performance report.
Will the proposal contribute to Glasgow's net zero carbon target?	Not applicable as this is a performance report.

Privacy and Data Protection Impacts:	No Impact
If Yes, please confirm that a Data Protection Impact Assessment (DPIA) has been carried out	

7. Recommendations

7.1 The committee is asked to:

- Consider and note the content of the report; and
- Consider any specific Commitments or actions that require officers to report back on with further detail or progress updates as part of the Committee's future work programme.