

## Section 4 Integrated Impact Assessment

### Summary Report Template

Audit Risk level
------------------

(Risk level will be added by Equalities Officer)

Each of the numbered sections below must be completed

Interim report		Final report	X	(Tick as appropriate)
----------------	--	--------------	---	-----------------------

- 1. Title of plan, policy or strategy being assessed**  
Edinburgh Health and Social Care Strategic Plan

- 2. What will change as a result of this proposal?**  
This plan brings together the planning of health and social care functions within one integrated body, focused upon agreed shared priorities. This is intended to deliver better co-ordinated, integrated locality based services with increased co-production and partnership with communities.

- 3. Briefly describe public involvement in this proposal to date and planned**  
The Strategic Plan was produced in collaboration with the Strategic Planning Group (SPG) established by the Edinburgh Integration Joint Board (IJB). Membership of the SPG includes: four citizens with lived experience of using or caring for people who use health and social care services, third and independent sector organizations and professionals responsible for the delivery of Health and Social Care services.

The plan was also subject to a period of three months public consultation from August to October 2015. There were two main ways that people were made aware of the consultation and were able to respond. The first of these was through the City of Edinburgh Council Website. The draft Health and Social Care Strategic Plan was a featured consultation and individuals were able to respond through the website.

The second method was the identification of key audiences with an interest in

the plan. Trained facilitators also went out to relevant groups to discuss the draft Plan. Responses were either collated at that meeting or the group chose to consider their response and submit at a later date. All of the Neighbourhood Partnerships were visited by trained facilitators. Consultation meetings were held with groups of people who use health and social care services. There were four locality workshops for City of Edinburgh Council staff, NHS Lothian staff, third sector and independent sector staff and housing providers.

In line with the National Standards for Community Engagement, a circular, 'Analyse, Plan, Do, Review' methodology will be adopted to allow for continuous collaboration and adaptation to both plans and consultation methodology throughout the process.

#### 4. Date of IIA

Wednesday 24<sup>th</sup> February 2016

#### 5. Who was present at the IIA? Identify facilitator, Lead Officer, report writer and any partnership representative present and main stakeholder (e.g. NHS, Council)

Name	Job Title	Email
Angus McCann	Citizen member IJB & SPG member	
Christine Farquhar	Citizen member IJB & SPG member	
Dermot Gorman	Consultant in Public Health	<a href="mailto:dermot.Gorman@nhslothian.scot.nhs.uk">dermot.Gorman@nhslothian.scot.nhs.uk</a>
Eleanor Cunningham	Acting Strategic Policy and Performance Manager	<a href="mailto:eleanor.cunningham@edinburgh.gov.uk">eleanor.cunningham@edinburgh.gov.uk</a>
Kirsten Hay	Occupational Therapist/ Unison representative	<a href="mailto:kirsten.hay@edinburgh.gov.uk">kirsten.hay@edinburgh.gov.uk</a>
Lesley Blackmore	Strategic Development Manager: Lothian Community Health	<a href="mailto:lesley.blackmore@nhslothian.scot.nhs.uk">lesley.blackmore@nhslothian.scot.nhs.uk</a>
Simon Gray	Social worker	<a href="mailto:simon.gray@edinburgh.gov.uk">simon.gray@edinburgh.gov.uk</a>
Rene Rigby	Development Manager Scottish Care	<a href="mailto:rene.rigby@scottishcare.org">rene.rigby@scottishcare.org</a>
Ricky Henderson	Chair of SPG and Vice chair of IJB	<a href="mailto:ricky.herderson@edinburgh.gov.uk">ricky.herderson@edinburgh.gov.uk</a>
Wendy Dale	Strategic Commissioning Manager and plan author	<a href="mailto:wendy.dale@edinburgh.gov.uk">wendy.dale@edinburgh.gov.uk</a>
Liz Simpson Facilitator & Report	Senior Health Promotion Specialist, NHS Lothian	<a href="mailto:liz.Simpson@nhslothian.scot.nhs.uk">liz.Simpson@nhslothian.scot.nhs.uk</a>

## 6. Evidence available at the time of the IIA

Evidence	Available?	Comments: what does the evidence tell you?
Data on populations in need	Yes	The <a href="#">Joint Strategic Needs Assessment</a> (JSNA) contains detailed information on the population of Edinburgh, locality needs and health and social inequalities. Consultation revealed a need for more information on the LGBT and BME populations. The former has now been addressed. Updated versions of the JSNA will determine a fuller picture for BME groups.
Data on service uptake/access	Yes	There is strong demand for services, particularly from an ageing frail population, which services are struggling to meet. There are issues with the ability to recruit to vital posts such as GPs and care workers. This data is in the JSNA.
Data on equality outcomes	Yes	Considerable data on social and health inequalities showing significant inequalities throughout all parts of Edinburgh, not just in deprived communities, as well as inequalities for some non-geographic social groups (such as people with learning disabilities and carers).
Research/literature evidence	Yes	Contained within the JSNA in detail.
Public/patient/client experience information	Yes	Considerable consultation work has been undertaken to inform existing commissioning plans for specific service user groups e.g. <a href="#">‘Live well in Later Life’</a> and <a href="#">NHS Lothian’s Strategic Plan</a> ; this has in turn informed the relevant sections of the JSNA. Consultation has been conducted on the draft Strategic plan, with responses elicited from organisations, community groups and individuals. A detailed <a href="#">consultation report</a> has been produced.

<b>Evidence</b>	<b>Available?</b>	<b>Comments: what does the evidence tell you?</b>
Evidence of inclusive engagement of service users and involvement findings	Yes	Consultation has been conducted on the draft Strategic plan, with responses elicited from organisations, community groups and individuals. A detailed consultation report has been produced.
Evidence of unmet need	Yes	<p>Need to address:</p> <ul style="list-style-type: none"> <li>• health inequalities</li> <li>• delayed discharge</li> </ul> <p>Need to ensure that we can meet the pressures on the service – particularly from the increasing frail elderly population – within the context of recruitment difficulties to key posts and a tight financial situation.</p>
Good practice guidelines		Scottish Government guidance on writing strategic plans of the Integrated Joint Board
Environmental data		The impact of housing and environments on health are considered in the JSNA.
Risk from cumulative impacts		<p>The need for additional savings (since the writing of the draft strategic plan) of £15million in revenue funding from City of Edinburgh Council will have an impact.</p> <p>Cumulative impacts on individuals may come from the different organisations they rely on for support being affected by the current financial situation.</p>
Other (please specify)		
Additional evidence required		

7. **In summary, what impacts were identified and which groups will they affect?**

<b>Equality, Health and Wellbeing and Human Rights</b>	<b>Affected populations</b>
<p><b>Positive</b></p> <p>The central purpose of the plan is to improve the health and wellbeing of the population of Edinburgh, particularly those most likely to suffer poor health and wellbeing due to a particular condition or disability or due to being a member of a disadvantaged or marginalised group or community. It clearly sets out its values and positive intent to respect the principles of equality, human rights, independent living and treating people fairly.</p> <p>The plan recognises the imperatives that we tackle health inequality, create healthy and sustainable communities; prevent poor health and wellbeing outcomes; that all health and social care services are accessible, appropriate and inclusive to the needs of all and that consideration is given to barriers that can limit access for particular groups. To support these aims there is a strong emphasis throughout the plan on person centered care, engaging people and communities in “good conversations” along with workforce development. These approaches are key to achieving the goals of integration.</p> <p>There is ongoing work to support staff affected by the reshaping of health and social care services.</p> <p>There is also a need to strengthen links with Children’s Services and other sections of the council, e.g. criminal justice, housing, neighbourhood partnerships.</p> <p><b>Negative</b></p> <p>No direct negative impacts noted, however there is a risk that some vulnerable communities will be disadvantaged unless their needs are sufficiently understood and addressed by service providers. The plan acknowledges that there needs to be more detail within future iterations of the Joint Strategic</p>	<p>All, particularly those from marginalised or disadvantaged groups or communities, or affected by a particular condition or disability.</p>

<p>Needs Assessment and in the plan about the issues for black and minority ethnic communities, including asylum seekers and refugees.</p> <p>Risks for additional impacts on informal carers (including young carers) were highlighted.</p> <p>The need to live within our means may mean particular services need to be deprioritised or reduced in future, however such decisions would require subsequent IIAs which will avoid any unintentional negative impacts.</p>	
---	--

<p><b>Environment and sustainability</b></p> <p><b>Positive</b></p> <p>The integration of health and social care and the shift towards more locality working aims to develop a more sustainable model of care, make best use of resources and build on local strengths and assets, bringing services closer to people in their own homes and communities.</p> <p>The plan also stresses the importance of tackling health inequalities and preventive approaches to reduce future demand, and recognises the requirement for a joined up approach with partners including other parts of the council, particularly the Edinburgh Community Planning Partnership, the Third Sector and communities themselves to maximise opportunities to create healthy and sustainable environments.</p> <p>Policies and procedures on health and safety risk assessment and infection control will need to adapt to hospital at home</p> <p><b>Negative</b></p> <p>The plan does not directly address wider environmental and sustainability issues such as climate change, however this was raised in the consultation in relation to future implications for health and wellbeing and there is work going on within the city on this agenda that will be important to connect with at different levels in different arenas.</p> <p>Potential increase in travel required by service providers to deliver more care at home, however co-location of services, increased locality working, use</p>	<p><b>Affected populations</b></p> <p>All, particularly those from disadvantaged or marginalised groups or communities or those affected by a particular condition or disability</p>
---	--

<p>of new and developing technologies and reduced transport to hospital could offset this.</p> <p>Future delivery plans, e.g. procurement and plans for new premises to implement the strategy of the IJB must avoid potentially negative environmental impacts and adhere to good practice to promote sustainability.</p>	
--	--

<p><b>Economic</b></p> <p><b>Positive</b></p> <p>The plan should have a positive impact on maximising income through improved partnership working at locality level, staff training on welfare rights and access to support for individuals through initiatives such as social prescribing,</p> <p>The IJB will ensure effective joint working with Children &amp; Families and support a Total Place approach to promote positive destinations for young people, improve literacy, numeracy and digital inclusion and help people to access jobs.</p> <p>Integration aims to have a positive impact in terms of access to and quality of services</p> <p><b>Negative</b></p> <p>There are workforce capacity challenges in certain areas and vacancies requiring to be filled.</p> <p>Levels of demand and pressures on existing resources will pose challenges in terms of meeting the aspirations set out in the plan. This underlines the need to give sufficient attention to the priorities of tackling inequalities and prevention. It is not clear in the plan how this will be achieved.</p> <p>Good practice guidelines must be followed to ensure any negative impact on unpaid carers.</p>	<p><b>Affected populations</b></p> <p>All.</p>
--	--

**8. Is any part of this policy/ service to be carried out wholly or partly by contractors and how will equality, human rights including children’s rights , environmental and sustainability issues be addressed?**

These issues will be a core part of any tendering process and will be a contractual requirement, which will be monitored.

- 9. Consider how you will communicate information about this policy/ service change to children and young people and those affected by hearing loss, speech impairment, low level literacy or numeracy, learning difficulties or English as a second language? Please provide a summary of the communications plan.**

In the first instance summary and Easy read versions of the Strategic Plan will be produced and made available via the Council and NHS Lothian websites. In the longer term a web version of the plan will be produced using graphics and allowing people to access as much or as little information as they require.

The Strategic Plan will provide the basis for ongoing engagement with citizens about the planning and delivery of health and social care services with materials being tailored to specific audiences including those with specific communication needs.

- 10. Is the policy a qualifying Policy, Programme or Strategy as defined by the Environmental Impact Assessment (Scotland) Act 2005? (see Section 4)**

No.

- 11. Additional Information and Evidence Required**

**If further evidence is required, please note how it will be gathered. If appropriate, mark this report as interim and submit updated final report once further evidence has been gathered.**

More detail required on issues for black and minority ethnic communities and specifically for refugees and asylum seekers.

The JSNA Development Group will hold a workshop involving key stakeholders from minority ethnic groups to inform the next iteration of the JSNA. There will also be improved monitoring of recoding of the ethnic groups of people using health and social care services in order to help evidence impact.

- 12. Recommendations (these should be drawn from 6 – 11 above)**

The Integrated workforce strategy and plan should include cultural competency around all aspects of equality and diversity and the use of tools such as “teach back” to support staff in the delivery of high quality person centered care.

Raising awareness of issues such as fuel poverty and welfare reform and enabling access to health promotion training should also be part of the integrated workforce plan to equip staff with the knowledge and approaches that will enable them to support individuals appropriately and to implement preventive approaches and tackle inequalities.

Greater emphasis should be placed on understanding the issues for minority ethnic communities, including refugees and asylum seekers through the development of the JSNA and as part of delivery plans.

Account should be taken of disability, language barriers, literacy, numeracy and digital exclusion to enable equitable access to information.

The impact of redesigned services on different sections of the population should be monitored through the new performance framework

Links with community planning and other sections of the council should be maintained and strengthened to maximise efforts to achieve improved health and wellbeing for all.

**13. Specific to this IIA only, what actions have been, or will be, undertaken and by when? Please complete:**

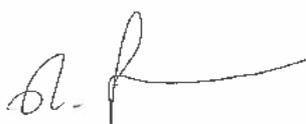
<b>Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)</b>	<b>Who will take them forward (name and contact details)</b>	<b>Deadline for progressing</b>	<b>Review date</b>
Ensure that the updated JSNA addresses issues for minority ethnic communities, including refugees and asylum seekers and that this is taken into account in relevant delivery plans.	IJB Performance Lead	31/12/16	31/3/17
Take account of literacy and numeracy, disability and any language barriers in the design of material to support people and through the provision of interpreting and translation services.	Strategic Planning, Service Design and Innovation Manager and Communications manager	30/6/16	31/3/17
Staff training to include cultural competency around all aspects of equality and diversity; the use of tools e.g. "Teach back" to support staff in the delivery of high quality person centered care. Also promote access to health promotion training to equip staff with the knowledge and skills to support individuals to address health inequalities and deliver preventive approaches.	Workforce leads within the Council and NHS Lothian under direction from the Integration Joint Board	31/12/16	31/3/17
Monitor the impact of redesigned services through the integrated performance framework	IJB Performance Lead	31/12/16	31/3/17

<b>Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)</b>	<b>Who will take them forward (name and contact details)</b>	<b>Deadline for progressing</b>	<b>Review date</b>
Maintain and strengthen links between the Health and Social Care Partnership other sections of the Council such as Criminal Justice, Homelessness and Children and Families	Strategic Planning, Service Design and Innovation Manager	31/12/16	31/3/17
Strengthen links with Neighbourhood Partnerships to address wider influences on health (e.g. community safety, transport, housing)	Strategic Planning, Service Design and Innovation Manager	31/12/16	31/3/17

**14. How will you monitor how this policy, plan or strategy affects different groups, including people with protected characteristics?**

This will be part of the performance monitoring framework, which is currently in development. Adherence to the action plan above will be monitored through the Strategic Planning Group.

**15. Sign off by Head of Service**



**Name: Rob McCulloch-Graham  
Chief Officer, Edinburgh Health and Social Care Partnership**

**Date; 13 March 2016**

