

Integrated Impact Assessment – Summary Report

Each of the numbered sections below must be completed.
Please state if the IIA is interim or final.

1. Title of proposal

Proposal to cancel contract with Volunteer Edinburgh to support those with Additional Health Needs to Volunteer (Health and Well-being service)

2. What will change as a result of this proposal?

The service supports people with long term conditions, mental health issues, disabilities & other health and social care support needs to secure and sustain volunteering roles in their local community. The services also works with volunteer involving organisations (VIOs) to engage a more diverse & inclusive cohort of volunteers helping to increase community services, capacity and resilience.

Volunteer Edinburgh's Health and Well-being contract has provided the service for approximately 40 years. The current contract is a 5-year contract from 1 April 2024 with an option to extend for a further 36 months. The contract was awarded at £90,724 however a 10% cut was applied in 2024 reducing the contract value to £81,651.60.

The proposal is to disinvest from the contract as part of the block EIJB block contract savings proposals for 2025/26.

3. Briefly describe public involvement in this proposal to date and planned

There has been no public involvement to date regarding the proposal to disinvest from the contract.

Some EHSCP staff, service users, staff from organisations who work with the service and service users have been contacted for feedback on the service.

It should be acknowledged that in order to carry out data analysis of the service, service users were asked if their personal data could be shared for this purpose. For many this may have caused stress however they agreed to the request because they felt that the service is so valuable that they wanted to do what they could to help save the service.

4. Is the proposal considered strategic under the Fairer Scotland Duty?

No

5. Date of IIA

Tuesday 6 May 2025

6. Who was present at the IIA? Identify facilitator, lead officer, report writer and any employee representative present and main stakeholder (e.g. Council, NHS)

Name	Job Title	Date of IIA training
Marion Findlay	Director of Services, Volunteer Edinburgh	
Paul Wilson	Chief Officer, Volunteer Edinburgh	
Sarah Bryson	Strategic Planning and Commissioning Officer Facilitator	
Holly Hart	PMO EHSCP Note taker	September 2024
Craig Dutton	Head of Contract and Grants, Capital City Partnership	
Sarah Cleary	Health and Employability Service Manager, Volunteer Edinburgh	
Stuart Morrison	Employment and Training Advisor, EHSCP	
Joanna Eceiza	Contracts Officer, EHSCP	
Annmarie Mcgee	Wellbeing Worker, Jock Tamson's Gairden	
Katie Ewart	Occupational Therapist, Intensive Psychiatric Rehabilitation Service	
Alison Shepherd	Lead Occupational Therapist, CAMHS, NHS Lothian, CAHMS	
Aneta Cairney	Careers Advisor, Skills Development Scotland	
Walter Anderson	Local Area Coordination Assistant Team Leader	
Susan Robertson	Strategic Planning and Commissioning Officer, EHSCP	

7. Evidence available at the time of the IIA

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
Data on populations in need – where available use disaggregated data	Yes Draft Strategic Plan 2025-2028 - Edinburgh Health & Social Care Partnership https://services.nhslthian.scot/publichealth/wp-content/uploads/sites/105/2024/08/NHS-Lothian-Public-Health-and-Health-Policy-A-strengthened-approach-to-prevention-across-the-Lothian-health-and-care-system.pdf	<p>The Strategic Plan is currently in draft. It provides a summary of the context and needs of the various client groups who use this service.</p> <p>NHS Lothian Public Health: A strengthened approach to prevention across the Lothian health and care system 2024</p>
Data on service uptake/ access	Yes – Quarterly Reports submitted which include reports on KPIs. Not available online VE very happy to share paper or digital copies.	<p>Approximately 620 service users are supported to use this service each year. This includes service users who wish to volunteer but require “light-touch” support and those with higher level needs who require more intensive support; Volunteering Involving Organisations and support workers contacts. (2023/24)</p> <p>In addition to support workers, referrers include clinicians from NHSL & EHSCP (GPs, occupational therapists, CPNs etc). They receive advice, guidance & support to identify and nurture appropriate referrals to service &/ are signposted to other or additional specialist agencies. Volunteer involving organisations (VIOs) receive advice, guidance, training & support to accommodate & support needs of volunteers.</p> <p>467 referrer contacts 425 VIO contacts (2021-24)</p> <p>This study reports that those who have most to gain (in health benefits) by volunteering are the least likely to engage – demonstrating need for</p>

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	<p>**The Contribution of Volunteering to Scotland's Health & Wellbeing - Volunteer Scotland</p>	<p>support & capacity building for referrers & VIOs.</p> <p>The breakdown of client groups (of those who wish to volunteer) is approx: substance misuse (4%), autism (4%), physical disability (6%), mental health issues (68%), learning disability (12%), sensory impairment (4%), other (3%)</p> <p>All clients receiving intensive support are people with protected characteristics.</p> <p>It is estimated c70% have multiple barriers i.e. are people with 2 or more protected characteristics so experience disproportionate disadvantage.</p>
	<p>Keep Britain Working Review: Discovery - GOV.UK</p>	<p>The majority of this project's clients are in their "middle years" – the period of peak economic potential & target for return to paid employment initiatives.</p>
<p>Data on socio-economic disadvantage e.g. low income, low wealth, material deprivation, area deprivation.</p>	<p>Yes</p> <p>Poverty in Edinburgh – data and evidence, Edinburgh Poverty Commission, 2020 –</p> <p>Mind the Craic, EVOC, Aug 2020</p> <p>End Poverty in Edinburgh, CEC Progress Report, 2023</p> <p>Poverty Commission Edinburgh</p> <p>Special educational needs and their links to poverty Joseph Rowntree Foundation</p> <p>Racial inequality and mental health services in Scotland –</p>	<p>Evidence demonstrates that those in the groups listed above are more likely to be socially-economically disadvantaged.</p> <p>Disability is a key factor increasing the risk of poverty for any household. 23-25% of households with a disabled child or adult are in poverty, compared to 17% of those with no disabled resident.</p> <p>There are many sources of evidence which outline that people with learning disabilities and mental health are disproportionately impacted by poverty. Below are a range of report from different bodies which support this view:</p>

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	new report calls for action Mental Welfare Commission for Scotland	
	see-me-scottish-mental-illness-stigma-study-final-report-sep-2022.pdf	Engagement with people from all socio-economic backgrounds ensures participation among marginalised communities. Addresses issues of stigma, discrimination & wider engagement in civic society.
	Scottish Government mental health and wellbeing strategy: delivery plan 2023-2025 Mental health and wellbeing strategy: delivery plan 2023-2025 - gov.scot	Strategic outcomes include improved quality of life for people with mental health conditions, freedom from stigma and discrimination, better equipped communities to support people’s mental health & wellbeing and provision of opportunities to connect with others.
	What We Do Together: Exploring Volunteering Using the Concept of Associational Life - Volunteer Scotland	<p>Volunteering is acknowledged as key aspect of associational life in promoting community cohesion & addressing intersectional barriers.</p> <p>Resourced & supported volunteering can overcome barriers such as language issues, digital exclusion, transport and inaccessible information.</p> <p>Support for people with health conditions & disabilities to (re)enter employment & become economically active is government priority. Case management, pathways back to work & tailored support for people with long-term health conditions identified as key components</p>
	See preamble to the UN’s Universal Declaration on Human Rights and Fundamental Freedoms	Human rights are embedded in volunteering. Volunteers report that they have increased self-respect & are supported to treat others equally with dignity & fairness. In many cases the

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	http://www.un.org/en/udhrbook/pdf/udhr_booklet_en_web.pdf	work of volunteers helps people to be more independent and are empowered to make better choices. All of these values and outcomes fit with international human rights law.
Data on equality outcomes	Yes	<p>Case studies and client feedback are supplied from the Provider on a quarterly basis which demonstrate the positive outcomes achieved for those in equality groups who used the service delivered through the contract. An Impact Analysis of volunteers' experiences from those that have used the service is also attached - - This demonstrates the personal outcomes achieved through key themes including:</p> <ul style="list-style-type: none"> • Self-Esteem and Identity Transformation • Connection, Belonging, and Relationships • Growth, Learning, and Personal Development • Purpose and Contribution • Support, Trust, and Safety • Empowerment and Independence • Healing and Recovery • Risk-Taking and Personal Challenges <p>Feedback from EHSCP frontline staff is also available which reflect the value and cost effectiveness of the volunteer service.</p> <p>EHSCP staff reported that they saw improved confidence, motivation and skills in their clients, the clients established social and support networks, reduced reliance on support workers and carers with a result that</p>

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		<p>the need for packages of care was avoided.</p> <p>Feedback noted that the quality of service provided by VE was good. VE staff are always welcoming, take the time to understand clients' needs and find appropriate volunteer roles.</p> <p>For those service users that are successful in getting into volunteering (intensive support) (2021-22 83%; 2022-23 64%); 2023-24 52%) there is widespread evidence to demonstrate the benefits of volunteering, which concurs with the above, and includes:</p> <ul style="list-style-type: none"> • volunteering has been shown to help improve individuals' physical and mental health through reduced social isolation, reduced depression and anxiety and improved confidence, independence, self-worth and wellbeing. • Reports have demonstrated that volunteering has led to a reduction in dependency on prescribed medication. • Volunteering has been shown to reduce the need for support and crisis services. • Reports have demonstrated that volunteering has led to a reduction in the use of drugs and alcohol. • Volunteering also allows vulnerable individuals to make social connections, increase their ability to self-manage, increase independence, contribute to society and provide a feeling of self-worth. • Poverty can also be especially high for vulnerable/disabled people and they are more likely to not be in

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		<p>employment. Volunteering can be a route into employment and out of poverty.</p> <ul style="list-style-type: none"> • People with disabilities and additional health support needs are at greater risk of poor general health and well-being and may face greater barriers to accessing services than people without. • The provision of the contract demonstrates good use of resources as demonstrated below. • Volunteers can bring a valuable contribution to the running of third sector services and help build resilient communities. <p>Others are supported into training, com education or other support services and some supported to access emergency support.</p> <p>It could be argued that the contract also brings benefits to the EHSCP through cost savings (cost avoidance). This is materialised from estimated direct savings due to the reduced need for care and support workers/packages of care due to improved mental and physical health since beginning to volunteer. Other cost savings would also be materialised due to savings through the reduced need for medication, reduced need for GP visits and avoidance of need for hospital stays.</p> <p>This saving for EHSCP staff resource and reduced financial savings will help free up resources which can be spent on other individuals with critical or substantive needs.</p>
	**Self-appraisals of service users March 2025	84% report improved health & wellbeing; 33% report less

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	https://www.surveymonkey.com/results/SM-U18e4cuYYbgTdpZLplbRSg_3D_3D/	dependence on drugs, alcohol, crisis services & prescribed medication; 66% report improved physical fitness & stamina
	<p>**Festival City Volunteers - Evaluation March 2020 original.pdf</p> <p>**» Festival City Volunteers</p> <p>**Evaluation Support Scotland blog</p>	<p>This service co-designed & delivered the Festival City Volunteer Programme, based on 5 Ways to Wellbeing, which demonstrated strong wellbeing & empowerment outcomes.</p> <p>See p11 “Emily’s Story” – case study of service user referred by occupational therapist.</p>
Research /literature evidence.	<p>Yes</p> <p>Social Return on Investment analysis of the health and wellbeing impacts of Wildlife Trust programmes.</p> <p>UK Social Value Bank Demonstrating Social Value HACT</p> <p>Exploring the Effects of Volunteering on the Social, Mental, and Physical Health and Well-being of Volunteers: An Umbrella Review - PMC</p> <p>Association of volunteering with mental well-being: a lifecourse analysis of a national</p>	<p>This demonstrates that a SROI value of £6.88 for every £1 invested, for people with low wellbeing at baseline, who were part of a targeted programme.</p> <p>HACT analysis of this service reports a social value of £87,750 p.a. for individuals engaged in volunteering & experiencing a sense of belonging in their neighbourhood.</p> <p>An additional social value of £65,740 p.a. per individual is reported when examining the benefits to confidence, relief from depression & anxiety, and feeling in control of one’s life.</p> <p>This study demonstrates the effects of volunteering on the social, mental and physical health and well-being of volunteers, and investigates the interactions between outcomes and other factors as moderators or mediators of any identified effects.</p> <p>This study examines the association of volunteering with mental well-being among the British population across the life course.</p>

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	<p>population-based longitudinal study in the UK BMJ Open</p> <p>Volunteering support in mental health care: evaluating health and social outcomes through population based-research and qualitative perspectives - MRC DTP</p>	<p>This study investigates the impact of volunteering in health and social outcomes.</p>
	<p>**The Contribution of Volunteering to Scotland's Health & Wellbeing - Volunteer Scotland</p> <p>**The-Effect-of-Volunteering-on-Health-Wellbeing.pdf Volunteering, Health & Wellbeing - Volunteer Scotland</p> <p>**Exploring the Benefits and Challenges of Volunteering: Participatory Action research with People with Lived Experience of Mental Illness Microsoft Word - HeatherHunter PhD FINAL DEC 2020.docx</p> <p>** » Volunteering Together: Inclusive Volunteering and Disabled People</p> <p>Volunteering on Prescription Volunteering-on-Prescription.pdf</p> <p>Volunteering and Disability Volunteering-and-Disability-Report.pdf NHS Greater Glasgow and Clyde Health and Wellbeing Survey 2017/2018: Cross-Sectional Analysis - Volunteer Scotland</p>	<p>A wide range of literature and academic research demonstrates that volunteering is integral to the health and wellbeing of individuals. A number of these studies (marked by asterix **) have directly drawn on & examined the experiences of individuals supported by this service.</p> <p>Key themes from research include:</p> <p>1 Enhanced mental health and wellbeing</p> <ul style="list-style-type: none"> • Reduced depression and anxiety: volunteering is linked to improved mood and fewer depressive symptoms. • Recovery journeys: individuals often transition from being “helped” to becoming the “helper,” reducing reliance on medication and formal services. • Increased sense of purpose: meaningful community involvement boosts optimism and self-worth. <p>2 Improved physical health outcomes</p> <ul style="list-style-type: none"> • Lower risk of hypertension: volunteers over 50 who serve 200+ hours a year show reduced blood pressure.

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	<p>7 steps to wellbeing through volunteering: How to link to social prescribing</p> <p>Key findings from Time Well Spent 2023 NCVO</p> <p>The social value of volunteering in Scotland – Technical Report</p> <p>Adult Mental Health, Major Conditions and Social Prescribing: A Rapid Review</p> <p>Volunteering Is the Best Kept Secret for Mental Health</p> <p>** Volunteering & self-management Members' Business - Scottish Parliament: 29th October 2015 (printed script of discussion available from VE)</p> <p>Volunteering may be good for body and mind - Harvard Health</p> <p>Volunteering linked to fall in depression Society The Guardian</p> <p>A prospective study of volunteerism and hypertension risk in older adults.</p> <p>Impact Volume 14, Number 2 Why Bother? How Persons with Disabilities Benefit as Volunteers Institute on Community Integration Publications</p> <p>14183-Mental-Health-DRLL-Report-A4-Rev7.pdf</p>	<p>• Delayed disability progression: studies suggest that being newly involved in volunteering can slow the development of physical disability in older adults.</p> <p>3 Social connection and reduced isolation</p> <ul style="list-style-type: none"> • Stronger networks: volunteering fosters friendships and mutual support, mitigating loneliness (especially post-retirement, bereavement, or unemployment). • Community cohesion: An asset-based approach views people as active citizens, strengthening solidarity and social capital. <p>4 Pathway to skills, confidence, and employment</p> <ul style="list-style-type: none"> • Skill-building: volunteering provides practical, transferrable skills (e.g., communication, teamwork, organisation) that enhance employability. • Inclusive opportunities: For those with mental health challenges or disabilities, volunteering reintroduces structure, routine, and social engagement. <p>5 Tackling health inequalities</p> <ul style="list-style-type: none"> • Reaching seldom-heard groups: properly funded volunteer programmes can overcome barriers such as discrimination,

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	<p>(Microsoft Word - Five ways to well-being the evidence.doc; d80eba95560c09605d_uzm6b1n6a.pdf)</p> <p>A glass half-full - how an asset approach can improve community health and wellbeing</p> <p>Volunteering and health benefits in general adults: cumulative effects and forms - PubMed</p> <p>» Volunteer wellbeing: what works and who benefits?</p> <p>2007 The Health Benefits of Volunteering: A Review of Recent Research</p> <p>Relation of Volunteering and Subsequent Changes in Physical Disability in Older Adults The Journals of Gerontology: Series B Oxford Academic</p> <p>Motivations and experiences of volunteers and patients in mental health befriending: a thematic analysis - PubMed</p> <p>The therapeutic power of volunteering Advances in Psychiatric Treatment Cambridge Core</p> <p>Effectiveness of a peer-support community in addiction recovery: participation as intervention - PubMed</p>	<p>language issues, and inaccessible information.</p> <ul style="list-style-type: none"> • Socio-economic inclusion: evidence shows volunteering broadens participation among marginalised communities, helping to reduce social isolation and stigma. <p>6 Preventative and cost-effective</p> <ul style="list-style-type: none"> • Long-term savings: investment in prevention and community support is more cost-effective than addressing crises later. • Easing demand on health services: early interventions via volunteering help to lower reliance on GP visits, A&E, and specialist mental health services. <p>7 Alignment with national policy and frameworks</p> <ul style="list-style-type: none"> • Supporting government strategies: programmes like A Connected Scotland and Equally Well highlight the need for volunteering and community-based support. • Five ways to wellbeing: volunteering aligns with Connect, Give, Be Active, Keep Learning, and Take Notice. <p>8 Empowerment and personal growth</p> <ul style="list-style-type: none"> • Self-management: volunteering fosters independence, enabling participants to break cycles of isolation, addiction, or repeated hospital admissions.

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	<p>Volunteering if you have a learning disability Mencap 'It's like the light's come back on': connecting care service users with their communities Social care The Guardian</p>	<ul style="list-style-type: none"> Strength-based approach: volunteers discover and utilise their strengths, challenging perceptions of incapacity or helplessness. <p>9 Enhancing social prescribing initiatives</p> <ul style="list-style-type: none"> Natural fit: volunteering and social prescribing both offer low-cost, impactful ways to boost physical and mental health. Smoothen transitions: individuals can progress from service users to active contributors, forging healthier and more supportive community networks.
	<p>** WAVE: Ways to a Volunteering Experience (2018) **</p> <p>The Volunteer Recovery Support for Adolescents (VRSA) Experiment: Recruiting, Retaining, Training, and Supervising Volunteers to Implement Recovery Monitoring and Support Services - PMC</p>	<p>Programme of young peoples' engagement (delivered collaboratively for 20+ years by this service and clinicians from NHSL CAMHS) reports impact on self-esteem, social self-efficacy & social connectedness</p>
	<p>Volunteering is Prospectively Associated with Health Care Use Among Older Adults - PMC</p> <p>Voluntary work for the physical and mental health of older volunteers: A systematic review - PMC</p> <p>The health advantage of volunteering is larger for older and less healthy volunteers in Europe: a mega-analysis - PMC</p>	<p>Studies demonstrates that older adults who volunteered spent 38% fewer nights in the hospital compared to non-volunteers. This suggests that volunteering may contribute to better health outcomes, potentially leading to decreased hospital admissions.</p> <p>Similar studies indicated that volunteers were more likely to utilize preventive health services, such as flu shots and cholesterol tests. This proactive approach to health care may help in early detection and prevention</p>

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		of illnesses, reducing the need for more intensive medical interventions later.
Public/patient/client experience information	Yes	<p>Quarterly reports submitted over the years include case studies and quotes from people who have used this service and demonstrate positive experiences.</p> <p>Additional extensive bank of quotes & personal testimonies available on request</p>
Evidence of inclusive engagement of people who use the service and involvement findings	<p>No</p> <p>Yes</p> <p>Participation: its impact on services and the people who use them Iriss</p>	<p>Service users were asked permission for their details to be shared with EHSCP with the purpose of examining impact of disinvestment. This prompted engagement with these service users on potential service changes.</p> <p>Service users engaged in varied & multiple ways over many years, ensuring their views, skills & experiences influence service design & delivery e.g. contribution to creation & delivery of buddy service, promoting service to user groups & general public (through presentations, blogs, cartoons etc), doing research, compiling resources.</p> <p>Initiatives involving volunteers in health & social care settings have reported reductions in A&E visits, hospital admissions, and social care costs. These outcomes suggest that integrating volunteer efforts into care models can alleviate pressure on health services</p>
Evidence of unmet need	Draft Strategic Plan 2025-2028 - Edinburgh Health & Social Care Partnership	<p>The service provider is working at full capacity for the current funding level. There is however additional demand - this is managed by the Provider.</p> <p>There <u>is</u> a gap in provision for young people with support needs particularly</p>

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		<p>of young people approaching transition from school.</p> <p>This is identified as an action in the draft Strategic Plan: “Help people to access volunteering opportunities and paid employment.”</p> <p>There is also an identified action in the draft Strategic Plan: “Support access to volunteering and employment opportunities (including those with Learning difficulties)”</p>
Good practice guidelines	VolunteerWiki - The go-to place for volunteer involving organisations	Co-designer & regular contributor to national “go to” resource for practice guidelines on volunteer engagement
Carbon emissions generated /reduced data	n/a	
Environmental data	n/a	
Risk from cumulative impacts	<p>Yes</p> <p>Savings Programme 25/26, EIJB 25 March 2025</p>	<p>There will be cumulative impacts from other savings proposals, in particular the grants savings. Many services are at risk of closing. Should this happen a number of volunteers will require to be “re-homed” (all those with additional support needs will be harder to transition). In addition, many organisations must make savings to remain sustainable. (due to funding cuts and ongoing increase e.g. NI, electricity increases, cost of living increases). This puts pressure on volunteer co-coordinators within organisations or those who have volunteer co-ordination as part of their role meaning that the organisation will be less able to take on volunteers, especially those with additional support needs.</p>

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Other (please specify)		
Additional evidence required		

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

Equality, Health and Wellbeing and Human Rights and Children’s Rights	Affected populations
<p>Positive There were no positive outcomes identified.</p>	N/A
<p>Negative</p> <p>The service is used by people with long term health conditions, mental health issues and disabilities who will be impacted by any loss of this service. Many are affected by serious and enduring mental health issues and face multiple & complex barriers.</p> <p>There are many people who are impacted to a greater extent as they hold <i>at least</i> one protected characteristic and frequently more than one. VE provides support to individuals and to Volunteering Involving Organisations to secure and maintain volunteer placements for people with disabilities who may otherwise be overlooked or unfairly dis-included from taking part.</p> <p>The service supports individuals to move from being a receiver of services to being a provider of services and enables them to contribute to society.</p> <p>The positive outcomes associated with volunteering will be lost for the service users as, although a database of volunteer opportunities and other support services will be available, VE provides expertise, resources, experience and capacity to understand and navigate the process of finding, securing & sustaining volunteer</p>	<p>N/A</p> <p>People with disabilities</p>

Equality, Health and Wellbeing and Human Rights and Children's Rights	Affected populations
<p>roles that suit an individual. This support is unavailable elsewhere.</p> <p>It was noted that the service provided is a unique model, with no equivalent available.</p> <p>There will be nothing to replace this service if it is lost.</p> <p>The positive outcomes which will be lost include:</p> <ul style="list-style-type: none"> • Improved mental and physical health. • Reduced social isolation. • Reduction in dependency and the need for medication • Improved confidence, self-management, independence, connections and self-worth and wellbeing • Reduced need for support and crisis services • Reduction in the use of drugs and alcohol • Increased community resilience • Provision of valuable community services provided by volunteers <p>Below are further examples of the impact that this service has had on the lives of people and communities served.</p> <p>Volunteering as result of VE support provided a positive opportunity, social connections and hope to a blind young social worker who lost her job due to deteriorating sight and helped her to discover a new career path.</p> <p>A woman with severe mental health and suicidal ideation found meaningful volunteering opportunities with VE's support. Constructive activity enabled her to live a meaningful life and work from home.</p> <p>An elderly retired man experienced improved mental health and reduction of depressive episodes as a result of VE's support to engage in volunteering.</p> <p>A veteran with CPTSD found a reason to live through volunteering and built up a support group. This reduced the need for repeat hospital and GP visits.</p>	<p></p> <p></p> <p></p> <p></p> <p>People with disabilities</p> <p></p> <p>Older people/ People with disabilities</p> <p>Disabled/Veterans</p>

Equality, Health and Wellbeing and Human Rights and Children's Rights	Affected populations
<p>An individual identified difficulties with reading and writing as a result of their volunteering but started to feel safe to ask for help and access numeracy and literacy classes alongside volunteering that compliments the training practical support.</p> <p>Isolated students at risk of developing mental illness, addiction and dropping out of studies have been given purpose and a place to be through volunteering.</p> <p>VE referrals are often essential in helping people create a new stronger healthier identity for themselves after being in addiction recovery or being released from prison. Discovery of new communities, settings and activities means meeting people and making new connections to contribute socially and economically again.</p> <p>A young trans woman was able, with the help of VE, to report bullies to the police and take them to court. VE's intervention and support was invaluable as it based on a trusting relationship. This made a big difference to her damaged self-worth caused by the bullying.</p> <p>Many individuals who volunteer and are in receipt of state benefits have been supported to retain their benefits when their entitlement has been assessed by DWP. This service works closely with DWP to ensure that job centre and DWP staff recognise that individuals who are unable to hold employment but are able to volunteer are fairly treated and that their entitlement to benefits is not jeopardised. This service has advocated for people at appeal hearings.</p> <p>Regularly VE refers volunteers to debt advice services. Trust is built up and allows connections to be made with services for additional support.</p> <p>The service supports people from areas of high deprivation and it was highlighted that they may be differentially impacted.</p> <p>The service is used by young and middle-aged people. The community garden noted that they often have several men who are out of work because of various health issues including autism for example. They noted that over time, they have learned new skills and</p>	<p>People with low literacy/numeracy skills/vulnerable to poverty</p> <p>People in their middle years/students</p> <p>Transgender</p> <p>People in receipt of benefits/vulnerable to poverty</p> <p>People in middle age/disabilities</p>

Equality, Health and Wellbeing and Human Rights and Children’s Rights	Affected populations
<p>improved their self-esteem and some are moving towards employment.</p> <p>The resultant gap due to the loss of the VE service will put more pressure on CAMH and other mental health staff who are already under pressure and stretched.</p> <p>There were concerns that young people could fall off a cliff edge at the point of transition and if there was nowhere to progress to, they could end up back at their GP who will refer back to CAMHS (waiting list) or to adult mental health services.</p> <p>The ongoing support which clients receive through VE and their volunteering roles can be invaluable in stopping clients from slipping back into decline. It may have been a long process for the individual/statutory service working together to get to a stage where they might consider volunteering. Volunteering is an opportunity to put the learning (e.g. from therapy) into practice in a supported environment.</p> <p>This is reflected in Jock Tamson’s Gairden which is an example of ongoing support provided through volunteering - the host organisation noted that many people with health issues have “found their place” and feel supported to continue their recovery and avoid slipping.</p> <p>It was also noted that the experience, knowledge and support provided by the VE service for those who have suffered from strokes, would be difficult to find elsewhere. The volunteering role provides an opportunity to test their abilities and build confidence in a supported setting.</p> <p>Often, the support provided by statutory services can only be provided in a clinical setting. Example given of a person with stroke using volunteering to test their abilities to return to work. Loss of this service will remove the opportunity.</p>	<p>Young people/Disabilities</p> <p>Disabled people</p>
<p>There is increasing numbers of people transitioning into adulthood post covid with mental health issues and are not “ready” to contribute to society - the VE service has provided a missing stepping stone.</p>	<p>Young people/Disabilities</p>

Equality, Health and Wellbeing and Human Rights and Children's Rights	Affected populations
<p>It was noted that the benefits of the service aren't just for the young person (being seen by VE), and that many young people have parents with mental illness who benefit too.</p> <p>The loss of the service will also have an impact on unpaid carers as supported volunteering roles provide respite for the carer. The carers themselves can also seek volunteering opportunities. Volunteer Edinburgh (VE) enabled an elderly woman with learning disabilities and mental health issues into a volunteer placement and this provided respite for her carer husband.</p> <p>In addition, the benefits of the volunteering for the cared for person, as noted above, will help reduce dependency on the unpaid carer.</p> <p>Although other support services may be available in Edinburgh, it has been highlighted that VE provides a range of resources and capacity that alternative services cannot provide.</p> <p>For many, the mitigation to refer to statutory services will not apply as these vulnerable people face too many barriers to access the support required to reach these services. This may be mental barriers, stigma or ability for services to accommodate to allow people to take part.</p> <p>People with mental health issues, often with chaotic and undiagnosed conditions, are significant users of the services and although their basic needs may be met elsewhere, there will not be an equivalent support service available and so they may be excluded from volunteering.</p> <p>It was noted that it can take weeks & months of VE's time to achieve a successful volunteering outcome and that people would be lost without this service.</p> <p>VIOs noted concern that GPs and support workers may flood their organisations with unsupported and inappropriately matched volunteers (roles not tailored to their needs) which may result in a bad experience and negatively impact on their health rather than positively.</p>	<p>Unpaid carers/women</p> <p>Disabled people</p> <p>People with disabilities</p>

Equality, Health and Wellbeing and Human Rights and Children's Rights	Affected populations
<p>There is a risk that disinvestment in this service will increase pressure on other voluntary services.</p> <p>VIOs noted that there are many volunteers who they would not have taken on without the support of VE and these people are now providing a valuable contribution to their service. The value of this service provision was emphasised. An example noted included a lunch club for those who are frail or have dementia, which is run by three Health and Well-being volunteers alongside one manager. Without the support of the volunteers, the club would not function.</p> <p>Closure of the VE service could lead to an increase in interactions with Social Care Direct, increased referrals to statutory provision and increased waiting lists for statutory services.</p> <p>There will be an impact on staff as redundancies will be required.</p>	<p>Staff</p>

Environment and Sustainability including climate change emissions and impacts	Affected populations
<p>Positive</p> <p>None given.</p>	<p>N/A</p>
<p>Negative</p> <p>Many of the volunteers work within community gardens. As well as the social and psychological benefits this brings, as outlined above, the gardens provide a place for promoting greenspace, encouraging nature in urban areas, providing clear air and protect and enhance biodiversity.</p> <p>Volunteers have also accessed bikes as a result of the volunteering related bike schemes which reduced carbon footprint, reduces reliance of fuel consumption, transport emissions and reduces air and noise pollution.</p> <p>Volunteers have also learnt to use public transport and reduce their use of car/taxi travel with support buddies.</p>	<p>All protected characteristics listed above are likely to be referred to these schemes including the use of greenspaces and bike schemes.</p> <p>In particular there is a high volume of men who are referred to the gardens projects as well as adults with additional support needs.</p>

Environment and Sustainability including climate change emissions and impacts	Affected populations
<p>Again, this has a positive environmental impact and without these referrals from Volunteer Edinburgh, and without this contract there will be an increased environmental impact in the future.</p> <p>In addition to the direct environmental benefit that the maintenance of gardens and greenspaces bring, the referrals made via Volunteer Edinburgh allow people to build their physical strength and mobility – reducing falls risks and increasing ability to work further. Many volunteers with additional support needs are referred by Volunteer Edinburgh to get involved with these local community gardens and practical environmental projects as they provide practical roles with varying levels of socialisation, as needed.</p> <p>Mitigations for this may be that the schemes could still be available but it will not be possible for the same level of referrals to be made or to reach a similar range of people.</p>	

Economic	Affected populations
Positive	N/A
<p>Negative</p> <p>Volunteer Edinburgh provides access to services which include developing digital literature by helping clients access both equipment and training. There are also volunteering programmes which provide practical experience to develop these skills.</p> <p>There are a number of referrals made by Volunteer Edinburgh to food banks and Edinburgh CAP Card Scheme. This is as a result of the cost of living crisis and without these referrals there would be a negative economic impact for those who would otherwise be in receipt of these services.</p> <p>Volunteers don't get paid but regularly benefit economically through access to clothing, food, household furnishings and access to transport (bikes) through schemes they are involved with.</p> <p>Volunteer Edinburgh supports local businesses by referring to volunteers to be placed within Social</p>	<p>All protected characteristics listed have the opportunity to be referred to one of the VE schemes and therefore the removal of this service would impact all listed characteristics.</p>

Economic	Affected populations
<p>Enterprises and move on into paid work as a result – furthering their economical contribution to society.</p> <p>Income from employment would also be lost. Firstly, directly for staff employed via Volunteer Edinburgh and also for the people who are referred to a range of local employment opportunities. Volunteer Edinburgh help young people into positive destinations, help people access jobs (volunteer and paid) and improve working conditions and reasonable adjustments for any protected characteristics which may be required. Volunteer Edinburgh have accessed funding for employability skills training, have referred onto Edinburgh Employability Projects and linked clients into further education.</p> <p>Individuals far from employment will lose inspiration, encouragement and support to take the first steps in building confidence & basic skills which will improve their employability. They will remain very far from employment.</p> <p>Concerns were raised that people would have no alternative place for support without this service.</p> <p>Many individuals in receipt of benefits have been able to keep their benefits because of their volunteering. DWP recognise that individuals may not be able to work but are doing as much as they could as a volunteer – this has been factored into appeal hearings. Regularly VE refers volunteers to debt advice services. Trust is built up and allows connections to be made with services for additional support.</p> <p>Without this trusting relationship people will be less likely to be signposted to specialist services</p>	

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

N/A

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

If this proposal is to be accepted, there would need to be a robust communications and engagement plan to communicate with these groups. As highlighted in the evidence table, there are a number of people using this service who fall under these protected characteristics who would need to be informed as well as staff members.

- 11. Is the plan, programme, strategy or policy likely to result in significant environmental effects, either positive or negative? If yes, it is likely that a Strategic Environmental Assessment (SEA) will be required and the impacts identified in the IIA should be included in this. See section 2.10 in the Guidance for further information.**

N/A

- 12. 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.

- 13. Specific to this IIA only, what recommended actions have been, or will be, undertaken and by when? (these should be drawn from 7 – 11 above) Please complete:**

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and job title)	Deadline for progressing	Review date
If proposal is accepted then an exit strategy and communication plan will need to be prepared	VE/EHSCP		
If no service is available, clients will be referred to statutory services	As appropriate		
Updates to evidence table to be incorporated	EHSCP		

14. Are there any negative impacts in section 8 for which there are no identified mitigating actions?

Yes as it is not possible to entirely mitigate against the impact of the proposed reduction investment in Volunteer Edinburgh. It has been identified that the mitigations proposed, which include referring people to statutory services instead, will be unable to provide a directly similar service. Also, people may not qualify for these services and therefore there will be a loss in provision.

Every effort will be made to ensure that services are still available and people are not impacted however, where the mitigation is to signpost to alternative services, there may not be sufficient capacity in those services to meet the additional need.

There is also an unmitigated economic impact for Volunteer Edinburgh in relation to possible staff redundancies as well as impact on statutory services.

15. How will you monitor how this proposal affects different groups, including people with protected characteristics?

16. Sign off by Head of Service

Name: Andrew Hall, Service Director for Strategy

Date: 14/08/2025

17. Publication

Completed and signed IIAs should be sent to:

integratedimpactassessments@edinburgh.gov.uk to be published on the Council website www.edinburgh.gov.uk/impactassessments

Edinburgh Integration Joint Board/Health and Social Care

sarah.bryson@edinburgh.gov.uk to be published at www.edinburghhsc.scot/the-ijb/integrated-impact-assessments/