

# 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

Supplementary Staffing

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

Care homes and LD services continue to utilise agency and/or bank staff to cover higher than average sickness absence, annual leave, and ongoing vacancies. This proposal aims to reduce our reliance on supplementary staff whilst maintaining safe staffing levels, quality of care, and workforce wellbeing. The current supplementary staffing spend in care homes was £3.29 million between April and September 2025 with a full year forecast of £6.5 million; and in LD services £2.47 million (Apr-Sep) with a full year forecast of £4.235 million.

The proposal will focus on reducing vacancies, managing sickness absence and ensuring that supplementary staffing is not used to cover planned annual leave. In care homes, the majority of supplementary staffing is used to manage vacancies, with the largest vacancy hours relating to social care assistants (33%), team leaders (33%) and ancillary staff (23%). However, a recent data exercise has indicated that the majority of cover is utilised for social care assistants at 68%. Filling half of all existing vacancies would result in a saving of £0.17m by reducing agency spend. Care home sickness absence costs an estimated £1.14m per year, with sickness absence ranging from 13.6% to 20.4%. Establishments have been inflated to allow for sickness cover, which should restrict agency use to vacancies only. Robust management to ensure supplementary staffing is not used for sickness absences should deliver savings in the region of £0.5 m in 26/27. Annual leave should follow suit. An initial target of reducing use of supplementary staffing for annual leave by 50% in 2026/27 would realise savings of £0.4m, which would be expected to rise to 100% in 2027/28 and a saving of £0.9m.

Spend to save: To support effective and efficient delivery of care home services, it is proposed that a management support team leader be recruited. This role would take responsibility for coordinating activity relating to recruitment, retention, absence and workforce planning in a consistent and forward-thinking manner. The cost of this post would be £0.055m, to be offset against the anticipated savings.

The total saving for care homes is therefore £1.08 million.

Use of supplementary staffing within the LD Service will also be reviewed. This service is progressing through an organisational review and the new structure is expected to be in place on 1 April 26. Supplementary staffing savings of approximately £100,000 have been identified. In order to support the initial restructure and to improve recruitment and retention, a fixed term post has been approved however, this post will not commence until the new change date of 1 April. This role will:

- Develop a streamlined, efficient rolling recruitment process
- Review current agency request, approval and authorisation process and develop an action plan to give greater scrutiny and agree levels of assurance
- Review staff rota processes to ensure maximum efficiency
- Work with data team to provide Team Leaders with accurate, timely data on the use of Supplementary staffing per service area.

The total anticipated saving for Supplementary Staffing across care homes and LD services is therefore £1.18 million.

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

None

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

No

**5. Date of IIA**

16 January 2026

**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
Neil Wilson	Corporate Strategic Lead – Workforce (SRO)	
Derek McEwan	Head of Service: Care Homes, Community Rehab and Tech	
Holly Hart	PMO Officer (Facilitator)	Sep 2024
Rhiannon Virgo	Corporate Strategic Lead – Finance (Scribe)	Feb 2020
Rachael Docking	Service Manager – Programmes	Feb 2020

<b>Jane Brown</b>	<b>Service Manager: Care Homes</b>	
<b>Anne-Marie Donaldson</b>	<b>Disability Services, Local Area Co-ordination Manager</b>	
<b>Emma Pemberton</b>	<b>Care and Support Manager, LD Service</b>	
<b>Stuart Millar</b>	<b>Care and Support Manager, LD Service</b>	
<b>Lynne Greenan</b>	<b>Business Support Team Manager, Care Homes</b>	
<b>Donna Robertson</b>	<b>Care Home Manager, Marionville Care Home</b>	
<b>Jackie Reid</b>	<b>Care Home Manager, Inchview Care Home</b>	
<b>Danni Burgess</b>	<b>Accountant</b>	
<b>Sara MacDonald</b>	<b>Senior Accountant</b>	
<b>Marion Reilly</b>	<b>Business Manager, Care Homes</b>	
<b>Karen Wright</b>	<b>Care Home Manager, Royston Care Home</b>	
<b>Elaine Heeps</b>	<b>Care Home Manager, Ferrylee Care Home</b>	
<b>Heather Gilfillan</b>	<b>EHSCP Staffside Lead</b>	
<b>Carla Dempster</b>	<b>Team Leader, DART</b>	
<b>Gwen Lawrence</b>	<b>Care Home Manager, Jewel House</b>	
<b>Stella Morris</b>	<b>Learning Disability Service Manager</b>	

## 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	<p>Agency and bank spend from finance reports</p> <p>Sickness absence and annual leave hours recorded on rotas</p> <p>Vacancy hours are worked out on an establishment spreadsheet that managers update</p> <p>Annual Leave – paper records from managers and online HR systems</p> <p>Data gathering exercise directed by performance and evaluation team to demonstrate what the supplementary spend is used for</p>	<p>Care homes and LD services continue to utilise agency and/or bank staff to cover higher than average sickness absence, annual leave, and ongoing vacancies.</p> <p><b>Learning Disability services</b></p> <p><b>LD services:</b> Supplementary staffing spend in is: <b>Actual (Apr-Sept) - £2,470,283.77 / Full year forecast - £4,234,835.66</b></p> <p>The IJB commissions support for people with LD directly from EHSCP as well as from a range of specialist care at home and day service providers. Each year our services support around 2,000 people with LD</p> <p><u>Data on roles which may be impacted. This is from our renewed structure effective from 1/4/26:</u>            Care and Support Worker (Grade 4) – 268.75 FTE            Care and Support Practitioner (Grade 5) – 82 FTE            Care and Support Supervisor (Grade 6) – 48FTE</p> <p><b>Disability Services: 346 headcount, 329.31 FTE</b></p> <p>The primary impact will be on those working in the Care and Support Worker role however, some of those in the Practitioner and Supervisor roles may also be affected.</p> <p>At commencement of the new structure, vacancies are expected within Care and Support Worker and Practitioner roles. Figures cannot be confirmed whilst implementation is ongoing.</p> <p><b>Care homes</b></p> <p><b>Care Homes:</b> Supplementary staffing spend in is: <b>Actual (Apr-Sept) - £3,287,544.00 / Full year forecast - £6,500,000</b></p>

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
		<p data-bbox="786 308 2107 443">EHSCP currently operates seven care homes on behalf of the City of Edinburgh Council, looking after around 300 people each day. This accounts for only around 13% of all care home residents in the city. The other 2,200 live in privately-owned care homes that charge the IJB (or the resident themselves) for each bed used.</p> <p data-bbox="786 488 1279 515"><u>Data on roles which may be impacted:</u></p> <p data-bbox="786 523 1384 730">Team Leader Business Support Officer/Administrator Nurses Activity Leader Social Care Assistant/Worker Cook/Senior Cook/Kitchen/Domestic Assistant</p> <p data-bbox="786 775 1317 802"><b>Care homes: 453 headcount, 416.48 FTE</b></p>
Data on service uptake/access	Staffing establishments and vacancies across services	<p data-bbox="786 850 1160 877"><b>Learning Disability services</b></p> <ul data-bbox="835 887 1160 914" style="list-style-type: none"> <li>• 1522 LD service users</li> </ul> <p data-bbox="786 959 954 986"><b>Care homes</b></p> <ul data-bbox="835 995 1059 1023" style="list-style-type: none"> <li>• 971 residents</li> </ul>
Data on socio-economic disadvantage e.g. low income, low wealth, material deprivation, area deprivation.	<p data-bbox="371 1106 707 1169"><a href="#">Edinburgh Joint Strategic Needs Assessment (JSNA)</a></p> <p data-bbox="371 1214 752 1241"><a href="#">EIJB Strategic Plan 2025-2028</a></p>	<p data-bbox="786 1106 954 1133"><b>Care homes</b></p> <p data-bbox="786 1142 1895 1169">The overall population of Edinburgh is expected to grow by 7.7% between 2018 and 2030</p> <ul data-bbox="835 1179 2056 1241" style="list-style-type: none"> <li>• Each of the older population age groups in Edinburgh and Scotland are expected to grow by at least a fifth</li> </ul> <p data-bbox="786 1286 1155 1313"><b>Learning Disability services</b></p> <ul data-bbox="835 1323 2107 1386" style="list-style-type: none"> <li>• People with LD often experience poor health and have an average life expectancy around 20 years lower than the rest of the population.</li> </ul>

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
		<ul style="list-style-type: none"> <li>• Over 95% of people with LD have at least one other health condition, with many having both physical and mental health problems.</li> <li>• A lack of suitable housing for people with LD is a chronic challenge. This leads to poorer outcomes for people and can restrict their independence.</li> <li>• It can lead to people with LD who have high levels of need remaining in hospital for years at a time even though they are medically well. This is because there is no suitable environment for them to be discharged to.</li> </ul>
Data on equality outcomes	<a href="#">Equality act 2010 - guidance</a>  <a href="#">Fairer duty Scotland: Guidance for public bodies</a>	<p><b>Learning Disability services – Equalities Data</b></p> <p><u>Gender</u>  Male 59.20%  Female 40.80%</p> <p><u>Ethnicity</u>  White [No Further Detail] - 34.56%  White - Scottish - 28.91%  Not Known - 21.35%  Not Disclosed - Less than 5%  White – Other - Less than 5%  White - Other British - Less than 5%  Pakistani, Pakistani Scottish Or Pakistani British – Less than 5%  Mixed Or Multiple - Less than 5%  Other Ethnic Background – Any - Less than 5%  White – Polish - Less than 5%  African, African Scottish Or African British - Less than 5%  Bangladeshi, Bangladeshi Scottish Or Bangladeshi British - Less than 5%  Chinese, Chinese Scottish Or Chinese British - Less than 5%  Indian, Indian Scottish Or Indian British - Less than 5%  Black, Black Scottish Or Black British - Less than 5%  Caribbean, Caribbean Scottish Or Caribbean British - Less than 5%  Arab, Arab Scottish Or Arab British - Less than 5%</p>



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
		<p>Episcopalian            Less than 5%</p> <p>Buddhist                Less than 5%</p> <p>Pagan    Less than 5%</p> <p><u>Sexual Orientation</u></p> <p>Not Recorded - 99.80%</p> <p>Prefer Not To Answer - Less than 5%</p> <p>Heterosexual/Straight - Less than 5%</p> <p><u>Has a Disability?</u></p> <p>No                        79.43%</p> <p>Yes                        10.78%</p> <p>Unknown                9.79%</p> <p><b>Care homes – equalities data</b></p> <p><u>Gender</u></p> <p>Female 60.35%</p> <p>Male    39.65%</p> <p><u>Ethnicity</u></p> <p>Not Known - 40.37%</p> <p>White – Scottish - 33.06%</p> <p>White [No Further Detail] - 14.32%</p> <p>White - Other British- 6.18%</p> <p>Not Disclosed - Less than 5%</p> <p>White – Other - Less than 5%</p> <p>Other Ethnic Background – Any - Less than 5%</p> <p>Mixed Or Multiple - Less than 5%</p> <p>African, African Scottish Or African British - Less than 5%</p> <p>Caribbean, Caribbean Scottish Or Caribbean British - Less than 5%</p>

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																																								
		<p>White – Irish -Less than 5%</p> <p>Chinese, Chinese Scottish Or Chinese British - Less than 5%</p> <p>White – Polish - Less than 5%</p> <p>Pakistani, Pakistani Scottish Or Pakistani British - Less than 5%</p> <p>Arab, Arab Scottish Or Arab British - Less than 5%</p> <p><u>Age Range</u></p> <table data-bbox="786 523 1077 587"> <tr> <td>65 or over</td> <td>81.57%</td> </tr> <tr> <td>Under 65</td> <td>18.43%</td> </tr> </table> <p><u>Marital Status</u></p> <table data-bbox="786 667 1290 1054"> <tr> <td>Not Recorded</td> <td>49.64%</td> </tr> <tr> <td>Single</td> <td>13.90%</td> </tr> <tr> <td>Married</td> <td>13.39%</td> </tr> <tr> <td>Not Disclosed/Not Known</td> <td>8.96%</td> </tr> <tr> <td>Widowed</td> <td>7.83%</td> </tr> <tr> <td>Divorced</td> <td>Less than 5%</td> </tr> <tr> <td>Separated</td> <td>Less than 5%</td> </tr> <tr> <td>Unknown</td> <td>Less than 5%</td> </tr> <tr> <td>Cohabiting</td> <td>Less than 5%</td> </tr> <tr> <td>Married/Cohabiting</td> <td>Less than 5%</td> </tr> <tr> <td>Civil Partnership</td> <td>Less than 5%</td> </tr> </table> <p><u>Religion</u></p> <table data-bbox="786 1134 1361 1374"> <tr> <td>Not Recorded</td> <td>44.90%</td> </tr> <tr> <td>Not Known</td> <td>22.04%</td> </tr> <tr> <td>Not Disclosed</td> <td>13.18%</td> </tr> <tr> <td>Church Of Scotland</td> <td>11.64%</td> </tr> <tr> <td>Roman Catholic</td> <td>Less than 5%</td> </tr> <tr> <td>None (Atheist Or Agnostic)</td> <td>Less than 5%</td> </tr> <tr> <td>Other Christian</td> <td>Less than 5%</td> </tr> </table>	65 or over	81.57%	Under 65	18.43%	Not Recorded	49.64%	Single	13.90%	Married	13.39%	Not Disclosed/Not Known	8.96%	Widowed	7.83%	Divorced	Less than 5%	Separated	Less than 5%	Unknown	Less than 5%	Cohabiting	Less than 5%	Married/Cohabiting	Less than 5%	Civil Partnership	Less than 5%	Not Recorded	44.90%	Not Known	22.04%	Not Disclosed	13.18%	Church Of Scotland	11.64%	Roman Catholic	Less than 5%	None (Atheist Or Agnostic)	Less than 5%	Other Christian	Less than 5%
65 or over	81.57%																																									
Under 65	18.43%																																									
Not Recorded	49.64%																																									
Single	13.90%																																									
Married	13.39%																																									
Not Disclosed/Not Known	8.96%																																									
Widowed	7.83%																																									
Divorced	Less than 5%																																									
Separated	Less than 5%																																									
Unknown	Less than 5%																																									
Cohabiting	Less than 5%																																									
Married/Cohabiting	Less than 5%																																									
Civil Partnership	Less than 5%																																									
Not Recorded	44.90%																																									
Not Known	22.04%																																									
Not Disclosed	13.18%																																									
Church Of Scotland	11.64%																																									
Roman Catholic	Less than 5%																																									
None (Atheist Or Agnostic)	Less than 5%																																									
Other Christian	Less than 5%																																									

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
		<p>Other Religion                      Less than 5%</p> <p>Jewish                                      Less than 5%</p> <p>Muslim                                      Less than 5%</p> <p><u>Sexual Orientation</u></p> <p>Not Recorded                      99.79%</p> <p>Heterosexual/Straight      Less than 5%</p> <p><u>Has a Disability?</u></p> <p>Unknown                      51.70%</p> <p>No                                      44.18%</p> <p>Yes                                      Less than 5%</p> <p><b>Workforce</b></p> <p><b>HSHHC Care Homes</b></p> <p><u>Gender:</u></p> <ul style="list-style-type: none"> <li>• Female – 345</li> <li>• Male – 107</li> <li>• Total – 452</li> </ul> <p><u>Ethnicity:</u></p> <ul style="list-style-type: none"> <li>• A – White - 229</li> <li>• (blank) 147</li> <li>• D - African, Scottish African or British African - 49</li> <li>• C - Asian, Scottish Asian or British Asian - 16</li> <li>• F - Other ethnic group - 7</li> <li>• E - Caribbean or Black - 5</li> <li>• B - Mixed or multiple ethnic groups – 5</li> <li>• Total – 452</li> </ul>

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
		<p><u>Religion:</u></p> <ul style="list-style-type: none"> <li>• (blank) - 316</li> <li>• None - 47</li> <li>• Roman Catholic - 27</li> <li>• Other Christian (Please specify)- 27</li> <li>• Church of Scotland - 14</li> <li>• Prefer not to say - 11</li> <li>• Muslim (Please specify school or denomination) - 8</li> <li>• Another religion (Please specify) - 0</li> <li>• Buddhist - 0</li> <li>• Hindu - &lt;5</li> <li>• Sikh - &lt;5</li> <li>• Grand Total – 452</li> </ul> <p><u>Disability</u></p> <ul style="list-style-type: none"> <li>• No Info - 205</li> <li>• (blank) - 143</li> <li>• No condition - 89</li> <li>• Prefer not to say - 8</li> <li>• Long-term illness, disease or other condition – 0</li> <li>• Other condition - &lt;5</li> <li>• More than one health problem or disability - &lt;5</li> <li>• Mental health condition - 0</li> <li>• Deafness or partial hearing loss - &lt;5</li> <li>• Physical disability - &lt;5</li> <li>• Blindness or partial sight loss - 0</li> <li>• Learning disability - 0</li> <li>• Grand Total – 452</li> </ul>

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
		<p><u>Sexuality</u></p> <ul style="list-style-type: none"> <li>• (blank) 329</li> <li>• Heterosexual or Straight - 113</li> <li>• Prefer not to say - &lt;5</li> <li>• Gay or Lesbian - &lt;5</li> <li>• Bisexual - &lt;5</li> <li>• Other sexual orientation - 0</li> <li>• Grand Total – 452</li> </ul> <p><b>HSSPD Strategy Planning and Quality (Disabilities)</b></p> <p><u>Gender:</u></p> <ul style="list-style-type: none"> <li>• Female – 217</li> <li>• Male – 129</li> <li>• Total – 346</li> </ul> <p><u>Ethnicity:</u></p> <ul style="list-style-type: none"> <li>• A – White - 190</li> <li>• (blank) - 60</li> <li>• D - African, Scottish African or British African - 70</li> <li>• C - Asian, Scottish Asian or British Asian - 8</li> <li>• F - Other ethnic group - 9</li> <li>• E - Caribbean or Black - &lt;5</li> <li>• B - Mixed or multiple ethnic groups – &lt;5</li> <li>• Total – 346</li> </ul> <p><u>Religion:</u></p> <ul style="list-style-type: none"> <li>• (blank) - 185</li> <li>• None - 44</li> <li>• Roman Catholic - 35</li> <li>• Other Christian (Please specify)- 31</li> </ul>

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
		<ul style="list-style-type: none"> <li>• Church of Scotland - 14</li> <li>• Prefer not to say - 16</li> <li>• Muslim (Please specify school or denomination) - 12</li> <li>• Another religion (Please specify) - 5</li> <li>• Buddhist - &lt;5</li> <li>• Hindu - &lt;5</li> <li>• Sikh - 0</li> <li>• Grand Total – 346</li> </ul> <p><u>Disability</u></p> <ul style="list-style-type: none"> <li>• No Info - 166</li> <li>• (blank) - 55</li> <li>• No condition - 89</li> <li>• Prefer not to say - 4</li> <li>• Long-term illness, disease or other condition – 11</li> <li>• Other condition - 5</li> <li>• More than one health problem or disability - &lt;5</li> <li>• Mental health condition - 5</li> <li>• Deafness or partial hearing loss - &lt;5</li> <li>• Physical disability - &lt;5</li> <li>• Blindness or partial sight loss - &lt;5</li> <li>• Learning disability - &lt;5</li> <li>• Grand Total – 346</li> <li>•</li> </ul> <p><u>Sexuality</u></p> <ul style="list-style-type: none"> <li>• (blank) - 196</li> <li>• Heterosexual or Straight - 125</li> <li>• Prefer not to say - 13</li> <li>• Gay or Lesbian - 8</li> <li>• Bisexual - &lt;5</li> </ul>

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
		<ul style="list-style-type: none"> <li>• Other sexual orientation &lt;5</li> <li>• Grand Total - 346</li> </ul> <p><b>Total</b></p> <p><u>Gender</u>  Female - 562  Male - 236  Grand Total - 798</p> <p><u>Ethnicity</u>  A – White - 419  (blank) - 207  D - African, Scottish African or British African - 119  C - Asian, Scottish Asian or British Asian - 24  F - Other ethnic group -16  E - Caribbean or Black - 7  B - Mixed or multiple ethnic groups - 6  Grand Total - 798</p> <p><u>Religion</u>  (blank) - 501  None - 91  Roman Catholic - 62  Other Christian (Please specify)- 58  Church of Scotland - 28  Prefer not to say - 27  Muslim (Please specify school or denomination) - 20  Another religion (Please specify) - 5  Buddhist - &lt;5  Hindu - &lt;5</p>

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
		<p>Sikh - &lt;5 Grand Total - 798</p> <p><u>Disability</u> No Info - 371 (blank) - 198 No condition - 178 Prefer not to say - 12 Long-term illness, disease or other condition - 11 Other condition - 8 More than one health problem or disability - 6 Mental health condition - 5 Deafness or partial hearing loss - &lt;5 Physical disability - &lt;5 Blindness or partial sight loss - &lt;5 Learning disability - &lt;5 Grand Total - 798</p> <p><u>Sexuality</u> (blank)- 525 Heterosexual or Straight - 238 Prefer not to say - 16 Gay or Lesbian - 11 Bisexual - 7 Other sexual orientation - &lt;5 Grand Total - 798</p>
Research/ literature evidence	n/a	

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
Public/patient/client experience information	n/a	Anecdotally we know that service users prefer consistency so using supplementary staff can be disruptive to the service user and the services permanent staff
Evidence of inclusive engagement of people who use the service and involvement findings	Not at this stage	
Evidence of unmet need	Vacancy lists across services and staffing establishments Risks: <ul style="list-style-type: none"> <li>• Continuity of care issues.</li> <li>• Staff burnout and morale concerns.</li> <li>• Budget overspend.</li> <li>•</li> </ul>	Mitigation Strategies: <ul style="list-style-type: none"> <li>• Recruitment campaigns and retention incentives.</li> <li>• Enhanced training and support for permanent staff</li> <li>• Longer term, part of Strategic Workforce Planning</li> <li>• Enhanced monitoring and review</li> </ul>
Good practice guidelines	<a href="#">Health and care (Staffing) (Scotland) Act 2019</a>	The Health and care (Staffing) (Scotland) Act 2019 will come into effect from 1 April 2024 and will support health and social care providers to staff safely and effectively.  <u>Working Time Regulations</u> UK Working Time Regulations (WTR) set limits on working hours, ensuring rest and breaks, typically capping adult work at an average of 48 hours/week (with opt-out), while guaranteeing daily/weekly rest,

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
	<p><a href="https://orb.edinburgh.gov.uk/downloads/file/1583/working-time-payments-guidance">https://orb.edinburgh.gov.uk/downloads/file/1583/working-time-payments-guidance</a></p> <p><a href="#">Working time payments – The City of Edinburgh Council Intranet</a></p>	<p>20-minute breaks for shifts over 6 hours, and paid annual leave, rooted in the <a href="#">European Working Time Directive</a> but now UK law, covering aspects like night work and rest for young workers.</p> <p><b>Key Provisions:</b></p> <ul style="list-style-type: none"> <li>• <b>48-Hour Week:</b> Adults generally cannot work more than 48 hours on average, calculated over a 17-week period, though workers can opt out.</li> <li>• <b>Rest Breaks:</b> <ul style="list-style-type: none"> <li>○ <b>Daily:</b> 11 consecutive hours rest between working days.</li> <li>○ <b>Weekly:</b> One day off per week, or two days per fortnight.</li> <li>○ <b>Rest Break (Shift):</b> A 20-minute break if working over 6 hours.</li> </ul> </li> <li>• <b>Night Work:</b> Limits average night work to 8 hours in 24 hours for those regularly working at night.</li> <li>• <b>Young Workers (Under 18):</b> Stricter limits of 8 hours/day, 40 hours/week, with no averaging.</li> <li>• <b>Paid Leave:</b> Entitlement to 5.6 weeks of paid annual leave.</li> </ul> <p><a href="#">Working time payments – The City of Edinburgh Council Intranet</a></p> <p><b>Who can claim</b></p> <ul style="list-style-type: none"> <li>• Any individual whose regular work pattern requires them to provide a service outside of the normal working hours - 7.00am to 9.00pm.</li> <li>• Part time staff can claim unsocial hours payments, where applicable, in addition to any additional hours worked up to the equivalent working week of 36 hours.</li> </ul> <p><b>Who can't claim</b></p> <p>Full time employees working overtime are not eligible to claim any unsocial hours payments, this includes weekend hours or night hours when claiming overtime.</p> <p><b>Payment types</b></p> <p>There are two types of working time payments, both will be paid at the same time if you're eligible for them</p> <ol style="list-style-type: none"> <li>1. Disruption</li> <li>2. Unsocial hours.</li> </ol>

<b>Evidence</b>	<b>Available – detail source</b>	<b>Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal</b>
Carbon emissions generated/ reduced data	N/A	
Environmental data	N/A	
Risk from cumulative impacts	Cumulative IIA	A cumulative IIA will be carried out to identify impacts of the Savings Programme as a whole.
Other (please specify)	.	
Additional evidence required		

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

<b>Equality, Health and Wellbeing and Human Rights and Children’s Rights</b>	<b>Affected populations</b>
<p><b>Positive</b>            This proposal should have a positive impact on older people in both care homes and LD services if longstanding vacancies are filled. This would mean a more resilient and robust team to support people in our care, and an improved level of continuity in staffing, which is beneficial to all.</p> <p>93% of LD service users are under the age of 65. This cohort will benefit from the proposal as they will be able to build up long-term relationships with a stable staff group.</p> <p>No differential impacts were identified depending on a person’s sex, sexuality, gender identity, religion, marital status, ethnicity or any other protected characteristic. The proposal was considered to have a positive impact on all people within the services.</p> <p>Continuity of staffing makes it easier for carers and families to build relationships with permanent staff, which will be a positive impact.</p> <p>One major positive impact of this proposal will be on staff as workloads reduce as vacancies are filled.</p> <p>The development of a system for managing annual leave should help with approving leave requests without causing issues and requiring supplementary staffing. There is likely to be a positive impact on staff through reduced administration of agency/bank etc – managers spend a lot of time organising supplementary staffing, calling agencies, inducting new staff etc. Recruiting permanent staff frees up this time.</p> <p>This proposal has a positive impact on our duty to promote participation, inclusion, dignity and control over decisions. Staff will feel like they have a greater voice in developing the service and people using the service</p>	<p><b>Older people and people with learning disabilities</b></p> <p><b>Young people</b></p> <p><b>All</b></p> <p><b>Carers and families</b></p> <p><b>Staff</b></p> <p><b>All service users and staff</b></p>

<b>Equality, Health and Wellbeing and Human Rights and Children’s Rights</b>	<b>Affected populations</b>
will have an increased chance to build stronger relationships with care staff.	
<p><b>Negative</b>  Reducing agency staff could negatively impact unpaid carers/service users if longstanding agency staff with whom they had built a relationship left. This can be mitigated by the opportunity to build new relationships with new permanent staff members.</p> <p>Changes in staffing may be more difficult to communicate to people with low literacy. This can be mitigated by careful planning for transitions, such as using tested tools and techniques eg talking mats, EasyRead versions of documentation, and by introducing new staff in a planned transition.</p> <p>Staff may find it more difficult to travel to rural areas of the city. This applies to both agency and permanent staff. This may be a negative impact for staff, and it may also mean that fewer vacancies are filled in more rural areas, increasing reliance on agency staff in those locations. This may have a negative impact on service users as they would not benefit from a stable permanent staff group. This can be mitigated in part by the current practice of placing new staff in the closest care home to their own home where possible. Staff are also encouraged to car share for travel.</p> <p>As we recruit and fill posts, rotas and shift patterns will be reviewed to ensure staff coverage is equal, which may mean some staff moves. While this may have a positive impact eg working with more colleagues, it may also be negative for staff whose location is changed. Any location moves will be discussed with the members of staff affected on a case-by-case basis, which will allow for any mitigations to be considered where appropriate.</p> <p>Opportunities for staff to pick up bank, agency or overtime will reduce, which will negatively impact some staff (potentially small numbers). This may have a financial impact. Mitigation: part-time staff could request increase in hours, however, this would be considered in light of overall establishments and it may not always be possible to approve all requests.</p>	<p><b>Unpaid carers, service users</b></p> <p><b>Service users and carers with low literacy</b></p> <p><b>People living in more rural areas; staff working in rural areas</b></p> <p><b>Staff</b></p>

<b>Equality, Health and Wellbeing and Human Rights and Children’s Rights</b>	<b>Affected populations</b>
<p>There is a potential negative impact on staff approaching retirement. Applications for flexible retirement might be declined as there will be fewer opportunities to draw on agency to cover. Mitigation: all flexible working requests to be considered on case by case basis. If recruited to full establishment, this may turn out to be a small impact.</p> <p>Length of recruitment timescales will impact use of supplementary staffing. This could result in reduced savings. Mitigation: the recruitment of team leader posts in care homes and LD should allow for forward planning of recruitment to ameliorate lengthy processes, and to flex focus of savings if required.</p>	

<b>Environment and Sustainability including climate change emissions and impacts</b>	<b>Affected populations</b>
<p><b>Positive</b></p> <p>None identified</p>	
<p><b>Negative</b></p> <p>None identified</p>	

<b>Economic</b>	<b>Affected populations</b>
<p><b>Positive</b></p> <p>Improved quality of services resulting from increased staffing continuity, allowing for a more highly trained workforce.</p> <p>More balanced budget for EHSCP as a result of the significant anticipated cost saving. This will enable the EHSCP to look after our most vulnerable residents and ensure best value across services.</p> <p>Increased recruitment will help to support local businesses and people. Job fairs are likely to attract people from colleges and local areas. Local recruitment has been successful in the past – more bespoke local</p>	<p><b>All</b></p> <p><b>All</b></p> <p><b>Local businesses, jobseekers.</b></p>

<b>Economic</b>	<b>Affected populations</b>
recruitment meets the needs of the service and improves quality.	
<p><b>Negative</b></p> <p>A reduction in agency use may have a negative impact on local businesses who currently provide agency workers.</p> <p>There may be a negative impact on providers as agency income reduces. However, providers may react by lowering rates to entice us to keep spending.</p> <p>Mitigation: We will give reasonable notice to providers when we reduce agency utilisation. We will also continue to use supplementary staffing in specific circumstances, so there will still be an income stream for providers.</p> <p>If the EHSCP recruits staff from agencies on the Scotland Excel contract, we can incur a hiring fee. There is a potential for increased costs and therefore reduced savings if this is pursued. This can be mitigated through clear understanding of individual agency agreements and monitoring for any impacts.</p>	<p><b>Local businesses, agency staff</b></p> <p><b>Providers, including local businesses</b></p> <p><b>Agency staff</b></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?**

This service is currently carried out partly by agency or bank staff, however, this proposal will encourage a move towards increased internal recruitment. Any external staff working within care homes and LD services are given full induction and training to ensure they are aware of their duties regarding equalities, human rights, environmental and sustainability issues.

**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.**

All affected residents will be informed of any staff changes in a way commensurate with their needs on a case-by-case basis.

**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.**

No

**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:**

<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 job title)</b>	<b>Deadline for progressing</b>	<b>Review date</b>
Ensure that robust tracking and monitoring arrangements are in place to assess both the delivery of financial savings, but also any escalating risks or impacts.	Neil Wilson, Corporate Strategic Lead – Workforce	May 2026	June 2026
Establish a regular review process to ensure that this IIA is updated appropriately	Rhiannon Virgo, Corporate Strategic Lead – Finance	January 2027	May 2027
Develop clear comms plan to ensure that all staff are aware of proposed changes and have a forum for regular updates; that all providers and agencies are notified; that all agency staff are kept informed of changes pertaining to them; and to ensure that sickness absence management is communicated effectively.	Stella Morris/Emma Pemberton (LD Services)  Gail James (Service Manager, Care Homes)  Neil Wilson, Corporate Strategic Lead – Workforce	April 2026	June 2026

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

No

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

The SRO will develop appropriate benefit, risk and issue monitoring to ensure that any unforeseen impacts are captured.

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

**Name: Derek McEwan**

**Date**

**17. Publication**

Completed and signed IIAs should be sent to:

[integratedimpactassessments@edinburgh.gov.uk](mailto:integratedimpactassessments@edinburgh.gov.uk) to be published on the Council website [www.edinburgh.gov.uk/impactassessments](http://www.edinburgh.gov.uk/impactassessments)

**Edinburgh Integration Joint Board/Health and Social Care**

[sarah.bryson@edinburgh.gov.uk](mailto:sarah.bryson@edinburgh.gov.uk) to be published at [www.edinburghhsc.scot/the-ijb/integrated-impact-assessments/](http://www.edinburghhsc.scot/the-ijb/integrated-impact-assessments/)