



EIJB REPORT

Savings and Recovery Programme 2023-24

Edinburgh Integration Joint Board

21 March 2023

Executive Summary

The purpose of this report is to present the proposed 2023-24 Savings and Recovery Programme for consideration in the approval of the 2023-24 Financial Plan.

Recommendations

It is recommended that the Edinburgh Integration Joint Board:

1. Agrees proposals 8 – 12, which form the Savings and Recovery Programme for 2023-24, as set out in this report and associated appendices.
2. Agrees the proposed plan to review and finalise IIAs for individual projects and the programme, set out in appendix 4.

Directions

Direction to City of Edinburgh Council, NHS Lothian or both organisations		
	No direction required	✓
	Issue a direction to City of Edinburgh Council	
	Issue a direction to NHS Lothian	
	Issue a direction to City of Edinburgh Council and NHS Lothian	

Whilst no direction is required, the financial impact of the 2022-23 Savings and Recovery Programme is inherent in the direction accompanying the 2022-23 Financial Plan paper presented in a separate paper to this meeting.

Report Circulation

1. This report has not been presented elsewhere.

Background

IJB Financial Position (Financial Gap)

2. The Edinburgh Integrated Joint Board (EIJB), like others across Scotland, operates within a complex environment. Health and social care services are under pressure due to tightening resources, increasing demands, workforce shortages leading to a requirement to prioritise.
3. We are faced with a significant disparity between the level of funding available, and the anticipated costs to deliver the IJB's delegated services at an expected level of outcomes. The combination of these factors threatens the sustainability of our health and social care system.
4. Following a combined budget offer of £809.4m from the City of Edinburgh Council and NHS Lothian, and the projected costs for delegated services totalling £856.4m the EIJB has an estimated £47m savings requirement going into 2023-24 as shown in table 1 below:

	Total £m
Indicative delegated budgets	809.40
Projected delegated costs	856.40
Savings requirement	£47.00

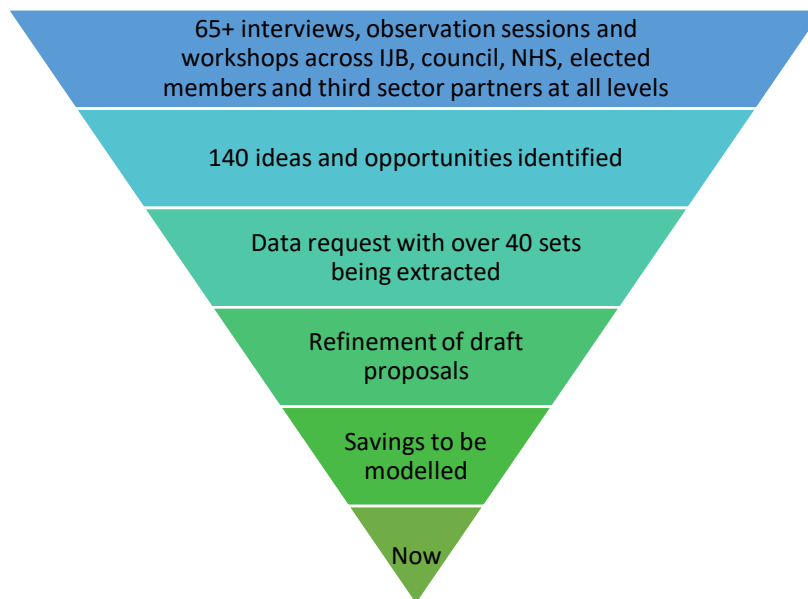
Table 1: Projected IJB savings requirement 2023-24

EIJB Savings and Recovery Programme

Developing the Savings Programme

5. The Savings Programme for 2023-24 has been developed in tandem with the Medium Term Financial Strategy for the EIJB. Engagement has taken place with stakeholders across the EIJB, Council, NHS Lothian, elected members and third sector partners. Workshop sessions, dedicated team discussions and utilisation of existing forums (e.g. budget holder meetings, Strategic and Operation Forums, Project Working Groups and Savings Governance Board meetings) have helped to inform options.

6. Picture 1, below, shows a summary of the process which has been applied in developing options for both the Savings and Recovery Programme 2023 – 24 and the Medium Term Financial Strategy.



Picture 1: Approach to developing options

7. Potential proposals have been refined through a process of peer and management review and in consultation with finance colleagues from both NHS Lothian and The City of Edinburgh Council.
8. Alongside this process, the EIJB members participated in four budget working group meetings and a Budget Question and Answer (Q&A) session, which have informed and shaped the development of the programme. Whilst not decision-making forums, the working group meetings and the budget Q&A session have provided opportunity for members to consider the proposed content of the 2023-24 Savings and Recovery Programme.
9. In 2020/21 a clear framework was agreed to support the delivery of a Savings and Recovery Programme. This is included at Appendix 1 and this framework has been applied to the 2023-24 Programme. The framework considers not only the requirement for immediate savings to ensure financial balance, but also supports a clear and structured approach for future years that aligns with our partners financial planning processes.

The 2023/24 Savings Programme

10. Within the 2023-24 Savings and Recovery Programme there are 12 savings projects and proposals which have been structured under three sections detailed in Table 2 below.

	Category	Description
1	<i>Operational/Grip and Control Proposals</i>	<ul style="list-style-type: none"> Operational projects/decisions, for example annual proposals that are part of an existing programme that will realise savings e.g. the Prescribing savings project that is managed through Lothian Prescribing Forum <p>OR</p> <ul style="list-style-type: none"> Projects that promote grip and control by ensuring effective financial management or implementation of policies, procedures & processes leading to efficiencies. <p>As a result, these have been identified as projects not requiring EIJB approval, but for which Project Overviews have been provided in Appendix 3.</p>
2	<i>Previously approved proposals</i>	Proposals under section 2 are projects that have previously been approved by the EIJB, but that will have an additional financial impact in 2023-24.
3	<i>New Proposals</i>	These are new projects that are presented to the EIJB for formal approval as part of the Savings and Recovery Programme for 2023 – 24.

Table 2: Programme framework categories

11. A summary of all proposals under these categories is included in Appendix 2. Proposals 8 -12 are presented for formal approval. Project overviews have been provided for all projects in Appendix 3.
12. To monitor progress and provide scrutiny, delivery of the programme will be overseen by the Savings Governance Board, chaired by the Chief Officer. Furthermore, a quarterly update report will be provided to the EIJB's Performance and Delivery Committee.

Integrated Impact Assessments (IIAs)

13. The significant and challenging financial landscape means the options presented may impact adversely on a combination of: service quality; the level of services provided; outcomes for people; and our ability to make or maintain performance improvements. However, it should be noted that these proposals should be considered in the wider context of the work and services commissioned by the EIJB (for which there is a total budget of c£850m), and through which there are opportunities to positively impact upon equality, human rights, the environment and the economy.

14. To enable a properly informed decision-making process, potential impacts have been identified for each individual savings proposal. These impacts have been identified through the completion of Integrated Impact Assessments (IIAs), where appropriate.
15. For the proposal previously approved by the EIJB (Overnight Support), the associated IIA was reviewed and can be found on the EHSCP website: [Integrated Impact Assessments – Overnight Responder Service - Edinburgh Health & Social Care Partnership \(edinburghhsc.scot\)](https://www.edinburghhsc.scot/Integrated-Impact-Assessments-Overnight-Responder-Service)
16. For projects under Operational/ Grip and Control, either an IIA or an IIA statement has been completed. An IIA statement has been completed for projects where: it is considered that there will be no relevant impact on equality, human rights, the environment or the economy; where it is not possible to assess impact; or where an IIA is planned at a later date. IIAs and IIA statements have been published on the EHSCP website: [Integrated Impact Assessments - Edinburgh Health & Social Care Partnership \(edinburghhsc.scot\)](https://www.edinburghhsc.scot/Integrated-Impact-Assessments).
17. While a final IIA is a required document for a decision or approval, it should be noted that the IIAs completed for all proposals are evolving documents. IIA's will be kept under review and are required to be refreshed and updated as part of the ongoing assurance activities for each project within the programme. This is in recognition of the fact that further consultation and engagement with staff and stakeholders and gathering of further evidence, will inform options being proposed and the approach to implementation. Proposed dates to review individual IIA's has been provided in Appendix 4.
18. In addition to individual IIAs/IIA statements for each of the proposals, a cumulative programme IIA has been completed (Appendix 5). The cumulative IIA provides a cross-system overview of the impacts on all groups, to help ensure that no group or area is cumulatively, disproportionately impacted by the savings programme and that appropriate mitigating actions are identified. Like the individual proposal IIAs, the cumulative IIA will be reviewed and revised as projects develop and to reflect any additional impacts identified.
19. The completion of the cumulative IIA has highlighted that attention should be given to the impact on older people, those with a disability, low income families and carers and steps to mitigate against any negative impact, have been identified within the IIA recommendations and actions.
20. Ongoing risks associated with the individual proposals and programme will be monitored and managed via the Savings Governance Board and escalated through the agreed governance route as appropriate.

Financial Impact of Savings and Recovery Programme

21. The financial impact of 2023-24 Savings and Recovery Programme on the overall savings requirement is summarised in table 3 below.

<i>Savings and Recovery Programme</i>	£m
Savings Requirement	£47.00
1. Operational Grip and Control Proposals	£6.20
2. Previously Approved Proposals	£1.15
3. New Proposals	£4.10
Total savings	£11.45
Remaining Gap	£35.55

Table 3: Financial Impact of Savings Programme

22. The financial plan for 2023-24 currently remains unbalanced, with the proposed Savings and Recovery Programme not bridging the gap between anticipated income and expected costs. Assuming the proposals within the Savings and Recovery Programme are approved in full, a savings gap of £35.55m remains.

Medium Term Financial Strategy

23. Identification and development of savings proposals which are aligned with strategic intent and do not have significant detrimental impacts on service delivery is increasing difficult to achieve. There are few savings opportunities which can be delivered during the course of 2023-24 which will not impact to some degree on services and outcomes for individuals. It is recognised however, that in order to achieve financial balance, further proposals must be implemented both in-year and beyond and that these are likely to have more significant negative impacts.

24. Our Innovation and Sustainability programme has developed an alternative approach to evolve how we work with our staff and the people of Edinburgh to shape and reimagine the delivery of services within communities, within the funding available to us. The Innovation and Sustainability programme has been working to redesign systems to facilitate earlier interventions at lower costs with sustained outcomes supporting health and wellbeing.

25. Over recent months, further planning has been undertaken to widen the scope of the programme and place a firmer emphasis on the delivery of financial benefits. Development of a Medium-Term Financial Strategy (MTFS) is underway, which builds on the work to date and aims to transform and improve services whilst delivering significant financial efficiencies, enabling the sustainability of health and social care services in Edinburgh.

26. The MTFS will involve the planning and implementation of both tactical improvements and large-scale, strategic change and transformation over the next 5 years. Further information on this approach and the route to financial balance is included within a separate report on this agenda which sets out the Financial Plan for 2023-24.

Implications for Edinburgh Integration Joint Board

Financial

27. Are outlined in the main body of this report.

Legal / risk implications

28. The key risk to the EIJB is that the Savings and Recovery Programme proposals presented for approval today do not deliver sufficient level of savings to ensure a balanced budget. Further proposals, are currently being scoped as part of the Medium Term Financial Strategy and further details of this are provided in the separate Financial Plan report on this agenda.

Equality and integrated impact assessment

29. Integrated impact assessments have been undertaken, where appropriate, for both the individual savings proposals and the programme. Particular attention should be given to the impact on older people, those with a disability and carers and steps to mitigate against any negative impact have been identified within the IIA recommendations and actions.

Environment and sustainability impacts

30. Proposals under the Savings Programme will work where possible to support the NHS Lothian Sustainable Development Framework, CEC Sustainability Strategies and the Edinburgh 2030 net-zero carbon target.

31. There are no further specific implications arising from this report.

Quality of care

32. Integrated impact assessments have been undertaken for both the individual savings proposals and the programme.

Consultation

33. This report has been prepared with the support of the colleagues in the City of Edinburgh Council and NHS Lothian.

Report Author

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Background Reports

1. Integrated Impact Assessments and Integrated Impact Statements have been completed for all proposals which can be found on the EHSCP Website:
<https://www.edinburghhsc.scot/the-ijb/integrated-impact-assessments/>

Appendices

Appendix 1	2023-24 Savings Programme Structure
Appendix 2	2023-24 Savings and Recovery Programme - Detailed Table
Appendix 3	2023-24 Savings and Recovery Programme Project Overviews
Appendix 4	2023-24 Savings and Recovery proposed plan to review and finalise IIAs
Appendix 5	2023-24 Savings and Recovery Programme Cumulative IIA

Appendix 1: EIJB Savings Programme Structure

1. Previously approved proposals from 2022/23

2. Operational/ Grip & control projects that do not need EIJB approval (e.g Prescribing)

3. Projects under the Transformation Programme that will realise efficiencies

4. New proposals – that which will be presented for approval by EIJB as part of Financial Plan in March 2023

Appendix 2: 2023-24 Savings Programme - Detailed Table

Total Savings and Recovery Programme			£11.45M
No.	Title	Lead	Amount (£m)
Operational/ Grip and Control Projects			
1	Purchasing	Nikki Conway/ Deborah Mackle	£0.40
2	Prescribing	Anna Duff	£2.60
3	Community Equipment	Heather Tait	£0.20
4	Hosted and Set Aside	Moira Pringle	£2.80
5	Housing Support	Deborah Mackle	£0.45
6	Transport	Deborah Mackle	£0.15
Previously approved			
7	Overnight Support *		£1.15
New proposals			
8	Contract Uplifts	Moira Pringle	£0.20
9	Review Blood Borne Virus Investment	Moira Pringle	£0.20
10	Pentland Ward Investment	Moira Pringle	£1.10
11	Reduce Community Investment Fund	Linda Irvine-Fitzpatrick	£1.00
12	Reduced commissioned interim beds	Nikki Conway	£1.60
TOTAL			£11.45M

* Agreed at EIJB on 22 March 2022:

<https://democracy.edinburgh.gov.uk/ieListDocuments.aspx?CId=160&MId=6298&Ver=4>

Appendix 3: 2023-24 Savings and Recovery Programme Project Overviews

No.	01	Savings Proposal:	Purchasing	Lead:	Deborah Mackle & Nikki Conway
Proposal Summary (Scope)	<p>Ongoing programme of practice and process review and improvement to ensure fiscal control in the delivery of statutory obligations. To focus initially on effective debt recovery/debt management, particularly in relation to “Gross Funding” of residential care placements. Gross Funding is a type of funding where the Council agrees to pay the whole cost of an individual’s care home fee when they lack capacity, have been assessed as requiring residential care and where no access to funds has been established. The maximum rate paid for this placement should not exceed the National Care Home Contract rate (this is a national contract which is negotiated across Scotland and full engagement of Scottish Councils via COSLA) and should only be paid until the individual’s finances are established and the costs are then recovered. This proposal will ensure more effective systems and processes for that recovery.</p> <p>Further grip and control workstreams to be developed throughout the year.</p>			Financial Impact	
Impacts	<p>As this involves better application of existing policy and legislation and no reduction in service or change in policy, it is identified that an IIA is not required. An IIA Statement has been completed for this proposal which is located on the EHSCP website here: : Integrated Impact Assessments - Edinburgh Health & Social Care Partnership (edinburghsc.scot).</p>			<p><i>Full Year Target for 23/23 (£m)</i></p> <p style="text-align: center;">£0.40</p>	
Benefits & Disbenefits	<ul style="list-style-type: none"> • Consistency and equity in funding decisions, in line with existing charging policy and legislation • Appropriate debt recovery ensures funding is available to meet the needs of other citizens • Improved practice, systems and processes • Improved accountability for spend 			<p><i>Delivery Investment</i></p> <p style="text-align: center;">Nil</p>	
Risks/ Considerations	<ul style="list-style-type: none"> • Some people may no longer receive the same level of funding to access the same level of care and support previously provided, although this will be in line with agreed policy and legislation. 			Dependencies	<ul style="list-style-type: none"> • Development of the wider Medium Term Financial Strategy
				Strategic Alignment	<ul style="list-style-type: none"> • Making best use of capacity across the system • Managing our resources effectively

No.	02	Savings Proposal:	Prescribing	Lead:	Anna Duff
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Proposal Summary (Scope)	Each year, the NHS Lothian Primary Care Pharmacy team identify proposals aimed at delivering efficiencies in the primary care prescribing budget across NHS Lothian. The 23/24 NHS Lothian Primary Care Prescribing Plan builds on existing and established prescribing initiatives which promote cost effective prescribing without compromising patient care. The plan has been developed by the pharmacy team with appropriate stakeholder engagement. The aim of the scheme is to promote financial stability through implementation of a range of prescribing projects led by pharmacy and dietetic teams within general practice.
Impacts	A session to review and update the Integrated Impact Assessment is planned for April 23 and will be completed on a pan-Lothian basis. The previous IIA for prescribing is located on the EHSCP website here: : Integrated Impact Assessments - Edinburgh Health & Social Care Partnership (edinburghhsc.scot) .
Benefits & Disbenefits	<ul style="list-style-type: none"> • Supports delivery of financial stability through cost effective prescribing • Improves patient access to evidence-based medication and multidisciplinary medication review, minimising inappropriate polypharmacy and supporting self-care.
Risks/ Considerations	<ul style="list-style-type: none"> • Pharmacy and practice time to implement plan will be at the expense of other operational priorities and workstreams • Rising cost of medicines leading to greater pressure on prescribing budget

Financial Impact	
<i>Full Year Target for 23/24 (£m)</i>	£2.6
<i>Delivery Investment</i>	Nil
Dependencies	GP and stakeholder engagement is maintained to deliver efficiencies.
Strategic Alignment	<ul style="list-style-type: none"> • Prevention and early intervention • Person Centred Care • Making best use of capacity across the system • Right care, right place, right time • Managing our resources effectively

No.	03	Savings Proposal:	Community Equipment	Lead:	Heather Tait
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Proposal Summary (Scope)	<p>The Community Equipment Loans Service provides a range of equipment to enable people to live independently at home for as long as possible. This is a pan-Lothian service funded jointly on a recharge basis.</p> <p>This is a grip and control proposal which will involve the following:</p> <p>Phase 1: Review internal CELS processes, criteria for provision, stock control, SLAs and crisis delivery service, ensure tighter financial accountability via devolved budgeting and development of a clear communications strategy for equipment access.</p> <p>Phase 2: Improve the financial accountability to the 3 partnerships and at locality level.</p> <p>By devolving budgets support improved financial processes and access to data, allowing greater scrutiny and accountability against budgetary spend</p>
Impacts	<p>Devolved budgets: will lead to more sustained grip and control over spend and greater scrutiny and accountability against budgetary spend.</p> <p>Community Equipment Loan Model: review of equipment and criteria for Community Equipment; streamlining processes and introduction of a ‘future proofed’ strategy for provision of equipment, will support people to leave hospital, prevent admissions and support end of life care. Aligned to both the prevention and crisis intervention work streams.</p> <p>An IIA was completed in March 23 and is available on the EHSCP website here: : Integrated Impact Assessments - Edinburgh Health & Social Care Partnership (edinburghhsc.scot).</p>
Benefits & Disbenefits	<p>Benefits</p> <ul style="list-style-type: none"> • Consistency in assessment and associated equipment • Clearer and fairer processes • Improved systems and processes • Improved accountability and transparency of the process including decision making • Improved reporting, and audit trails
Risks/ Considerations	<p>Increase in raw material and equipment costs and supply chain delays may impact target-setting and delivery of identified savings</p>

Financial Impact	
<i>Recurring Savings for 23/24 (£m)</i>	£0.20
<i>Delivery Investment</i>	NIL
Dependencies	<ul style="list-style-type: none"> • Clinical teams based within localities carry out assessments and order equipment. Close working with these teams will be required to achieve efficiencies.
Strategic Alignment	<ul style="list-style-type: none"> • Prevention and early intervention • Person Centred Care • Managing our resources effectively

No.	04	Savings Proposal:	Hosted and Set Aside	Lead:	Moira Pringle
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Proposal Summary (Scope)	Hosted services are operationally managed by a HSCP or business unit within NHS Lothian on behalf of two or more of the Lothian IJBs. Similarly set aside services are acute, hospital based and are operationally managed by NHS Lothian on behalf of all 4 IJBs. Operational business units within NHS Lothian are expected to breakeven and demonstrate 3% efficiency savings on a yearly basis. Each business unit will develop savings plans locally and some of these will involve services hosted on behalf of IJBs. The development, implementation and monitoring of these schemes will take place in accordance with local arrangements. Several proposals have been identified via this route and are reflected in the NHS Lothian financial plan
Impacts	An Integrated Impact Assessment (IIA) will be conducted alongside the review to ensure any potential equalities, human rights, environmental or economic impacts, are appropriately considered and mitigated. Due consideration will be also given to equalities regarding proposed changes to service delivery resulting from the review. The IIA will be updated to reflect this in recognition that this should be an ongoing part of any service review. Currently, there is no anticipated impact on staff.
Benefits & Disbenefits	Impacts and benefits will be assessed at local business unit level, the share of any savings realised will be allocated to Edinburgh IJB based on the existing NHS Lothian mechanisms for attributing expenditure to IJBs.
Risks	These are assessed locally and monitored through local governance arrangements

Financial Impact	
<i>Full Year Target for 23/24 (£m)</i>	£2.80
<i>Delivery Investment</i>	Nil
Dependencies	These are assessed locally and monitored through local governance arrangements.
Strategic Alignment	<ul style="list-style-type: none"> • Best use of capacity across the system • Managing our resources effectively

No.	5	Savings Proposal:	Housing Support	Lead:	Deborah Mackle
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Proposal Summary (Scope)	<p>There are a number of individuals across the city who receive housing support as part of their package of care. Housing support is a chargeable service. There are 3 identified workstreams to be developed as part of this proposal:</p> <ul style="list-style-type: none"> • Reviewing data to ensure that housing support is correctly coded and therefore charged appropriately; • Reviewing packages of care to ensure that housing support tasks address a critical or substantial need and should continue; and • Where ongoing housing support is appropriate, exploring alternative commissioning approaches. Housing support is currently provided via a range of home care providers and there may be opportunities to source more cost effective alternatives, potentially via third sector organisations.
Impacts	<p>An IIA has been completed and is available on the EHSCP website here: : Integrated Impact Assessments - Edinburgh Health & Social Care Partnership (edinburghhsc.scot) This will be reviewed and updated as the project progresses.</p> <p>Potential impacts could include: Possible cessation or reduction of service for individuals; Service being delivered by alternative organisations; Charges being applied.</p>
Benefits & Disbenefits	<p>Benefits:</p> <ul style="list-style-type: none"> • Grip and control to ensure that housing support being provided is appropriate and meets a currently eligible need; • Equity and fairness in application of charging policies ; • Effective and efficient commissioning to ensure best value • Potential growth within community sector and better links with community organisations • Free up capacity within home care providers to support more people with personal care <p>Disbenefits:</p> <ul style="list-style-type: none"> • May adversely impact service users who have come to rely on this kind of support if the level of their service is reduced or removed Potential business impact for current providers if the same level of demand is not needed •
Risks/ Considerations	<p>A full assessment of all risks, considerations and issues will be carried out as part of the development of this proposal</p>

Financial Impact	
<i>Full Year Target for 23/24(£m)</i>	£0.45
<i>Delivery Investment</i>	Nil
Dependencies	<ul style="list-style-type: none"> • Community mobilisation • One Edinburgh
Strategic Alignment	<ul style="list-style-type: none"> • Person Centred Care • Best use of capacity across the system • Managing our resources effectively

No. 06**Savings Proposal:****Community Transport****Lead:****Deborah Mackle**

Proposal Summary (Scope)	The community transport programme within the City of Edinburgh Council is working towards greater usage of group transport, investing additional funds in Public Social Partnership models with the third sector. This will replace existing individual taxi journeys for those whose needs can be appropriately met by a group transport alternative. It is also introducing new “flexi route” software to ensure more intelligent route planning and scheduling of transport. The EHSCP is already working in partnership with CEC colleagues to deliver better grip and control around transport within localities. The resulting efficiency is estimated to be £0.15m.
Impacts	An IIA Statement has been completed for this proposal which is located on the EHSCP website here: : Integrated Impact Assessments - Edinburgh Health & Social Care Partnership (edinburghhsc.scot/) .
Benefits & Disbenefits	Benefit: <ul style="list-style-type: none"> Increased opportunities for people through widening networks and capacity building Increased scope for innovative alternatives to transport eg travel training, use of technology and for increasing independence amongst current taxi users Disbenefits: <ul style="list-style-type: none"> A move to group transport may involve longer journeys for some individuals. This change would only be made where it is clear that an individual’s needs can be appropriately met in this way. It is recognised that not all people currently in receipt of taxi travel will be suitable for transition.
Risks/ Considerations	Some risk that transport users and carers may resist any change. Mitigated through clear and appropriate engagement and communication.

Financial Impact	
<i>Full Year Target for 23/24(£m)</i>	£0.15
<i>Delivery Investment</i>	Nil
Dependencies	Dependencies with the City of Edinburgh Council’s transport programme and Medium Term Financial Plan. This proposal forms part of the wider approach to identify efficiencies across the transport infrastructure.
Strategic Alignment	<ul style="list-style-type: none"> Tackling Inequalities Person Centred Care Best use of capacity across the system Managing our resources effectively

No.	07	Savings Proposal:	Overnight Support	Lead:	Mark Grierson
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Proposal Summary (Scope)	A new contract has been arranged to provide night-time responder services for those individuals with an assessed need for overnight support. This contract has capacity to support 30 new service users in 23/24, with the saving representing the difference between the average cost per person of the responder service (£3800 per annum), compared with the average cost per person of a traditional sleepover service (£40,900 per annum). The responder service would be used only where it has been assessed that an individual's needs can be appropriately met by this service.
Impacts	An Integrated Impact Assessment was completed when this contract was first established and is available on the EHSCP website here: : Integrated Impact Assessments - Edinburgh Health & Social Care Partnership (edinburghhsc.scot) This IIA has been reviewed and remains relevant.
Benefits & Disbenefits	<p>Benefits</p> <ul style="list-style-type: none"> • Greater independence and less intrusion for those requiring support during night time hours, while still providing assurance of response if/when required • Substantially cheaper than traditional sleepover services <p>Disbenefits</p> <ul style="list-style-type: none"> • Perception that support delivered by technology presents more risks
Risks/ Considerations	<ul style="list-style-type: none"> • Risk that full saving is not delivered if there are insufficient service users identified whose needs can be appropriately met in this way.

Financial Impact	
<i>Full Year Target for 23/24(£m)</i>	£1.15
<i>Delivery Investment</i>	Nil
Dependencies	There may be dependencies with the LD Pathways Review. These will be monitored and managed throughout the lifecycle of the project.
Strategic Alignment	<ul style="list-style-type: none"> • Person Centred Care • Best use of capacity across the system • Managing our resources effectively

No.	08	Savings Proposal:	Contract Uplifts	Lead:	Moira Pringle
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Proposal Summary (Scope)	<p>The Scottish Government provides additional funding to IJBs to meet the costs of uplifting contracts, however the funding provided for 23-24 does not fully meet the projected costs. This has happened in previous years and the shortfall accounts for c£4m of the IJB's budget gap.</p> <p>It is proposed that where there are specific funding streams in place which are not part of baseline funding arrangements, that these funding streams pick up the additional cost pressure relating to contract uplifts from any identified slippage or non-committed funds. This includes Thrive, The Edinburgh Alcohol and Drug Partnership (EADP) and Carers funding. It is proposed that this is monitored throughout the year and that the contract uplift pressure would only be applied to these funding streams where there is sufficient flexibility to do so without affecting any existing commitments. This is in line with the approach taken for other increased costs associated with these funding streams (eg pay awards).</p>
Impacts	<p>An IIA Statement has been completed for this proposal which is located on the EHSCP website here: : Integrated Impact Assessments - Edinburgh Health & Social Care Partnership (edinburghhsc.scot).</p>
Benefits & Disbenefits	<p>Benefits:</p> <ul style="list-style-type: none"> No adverse impacts on any existing plans or commitments within these funding streams <p>Disbenefits:</p> <ul style="list-style-type: none"> Slippage which is used to fund contract uplifts would not be available for investment in other new priorities
Risks/ Considerations	<ul style="list-style-type: none"> If no available slippage in year from these funding streams, then there is a risk that this savings cannot be delivered

Financial Impact	
<i>Full Year Target for 21/22 (£m)</i>	<i>£0.20</i>
<i>Delivery Investment</i>	<i>Nil</i>
Dependencies	EADP Carers Strategy Thrive
Strategic Alignment	<ul style="list-style-type: none"> Best use of capacity across the system Managing our resources effectively

No.	9	Savings Proposal:	Blood Borne Virus Investment	Lead:	Moira Pringle
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Proposal Summary (Scope)	<p>Prior to the pandemic the IJB invested c£0.6m in bed-based blood borne virus (BBV) services provided at Milestone House. Demand for these beds reduced over time, as advances were made in treatment. During the pandemic, the facility at Milestone House was repurposed and it became an intermediate care unit. Following evaluation of this service a business case to make this change permanent has now been agreed.</p> <p>The associated costs are funded from a number of sources – the baseline BBV monies, a charitable foundation and the Edinburgh Drug and Alcohol Partnership. This in turn allows a saving of £0.2m to be delivered from the baseline BBV monies.</p>
Impacts	<p>An IIA Statement has been completed for this proposal which is located on the EHSCP website here: : Integrated Impact Assessments – Edinburgh Health & Social Care Partnership (edinburghhsc.scot).</p>
Benefits & Disbenefits	<ul style="list-style-type: none"> No impact on service delivery model as intermediate care business case is full funded
Risks/ Considerations	<ul style="list-style-type: none"> The proposal assumes no additional community based BBV services are required – some risk if a greater need for this emerges Funding for intermediate care unit only supported for a 5 year period – future funding source may need to be identified

Financial Impact	
<i>Full Year Target for 22/23 (£m)</i>	£0.20
<i>Delivery Investment</i>	Nil
Dependencies	Establishment of intermediate care facility at Milestone House
Strategic Alignment	<ul style="list-style-type: none"> Managing our resources effectively

No.	10	Savings Proposal:	Pentland Ward Closure	Lead:	Moira Pringle
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Proposal Summary (Scope)	<p>Pentland Ward was a Hospital Based Continuing Complex Care (HBCCC) ward located on the Royal Edinburgh hospital site, delivering older peoples' mental health inpatient service. In October 2022, due to difficulties in recruitment of registered nurses, a decision was taken to merge it with Canaan ward, thereby closing Pentland on a recurring basis.</p> <p>The annual cost of running Pentland was £1.1m, as the service is delegated the Integration Joint Board has a decision on how to invest this funding. As part of the Savings and Recovery Programme 2023-24, it is proposed that this recurring funding is taken as a saving.</p>
Impacts	<p>Since no plans were in place to agree how the £1.1m could be invested, it is not possible to assess the impacts of this decision. It is accepted that there is an opportunity cost attached to the loss of the funding, as it will no longer be available to support delivery of strategic objectives, however specific impacts cannot be assessed. An IIA Statement has been completed for this proposal which is located on the EHSCP website here: : Integrated Impact Assessments – Edinburgh Health & Social Care Partnership (edinburghhsc.scot).</p>
Benefits & Disbenefits	<ul style="list-style-type: none"> • Opportunity cost – if the funds are taking as a saving, we are unable to use it to deliver on our strategic ambitions.
Risks/ Considerations	<ul style="list-style-type: none"> • If alternative funding cannot be identified for new community infrastructure, then there is a risk that people could potentially remain in inappropriate hospital settings for longer

Financial Impact	
<i>Full Year Target for 22/23(£m)</i>	£1.10
<i>Delivery Investment</i>	Nil
Dependencies	<ul style="list-style-type: none"> • Bed Based Review • Home First • Mental health commissioning
Strategic Alignment	<ul style="list-style-type: none"> • Managing our resources effectively

No.	11	Savings Proposal:	Community Investment	Lead:	Linda Irvine-Fitzpatrick
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Proposal Summary (Scope)	<p>The EIJB has set aside £1m of recurring funding for community investment and to support activity around the community mobilisation project. This is in addition to its community grants programme.</p> <p>As part of our Community Mobilisation project and to support the aims of the Edinburgh Pact, various commitments have been made via the Community Mobilisation project over a 3 year period to fund projects and tests of change. Slippage from previous years and the availability of winter funding means that there is sufficient flexibility to honour these commitments, but remove the recurring £1m funding with effect from 23-24.</p>
Impacts	<p>This proposal represents a loss of opportunity rather than a direct impact on community services. It is recognised that the £1m funding could have supported further activity in the community sector to support our strategic aims and ambitions. However, it is not possible to accurately articulate the impacts, as the funding had not been allocated to specific initiatives on a recurring basis. An IIA Statement has been drafted and is located on the EHSCP website here: : Integrated Impact Assessments - Edinburgh Health & Social Care Partnership (edinburghhsc.scot).</p>
Benefits & Disbenefits	<ul style="list-style-type: none"> • Projects already committed to under the Community Mobilisation project can still be delivered in line with existing plans and commitments • Opportunity cost from loss of investment in future activity
Risks/ Considerations	<p>Some risks to the wider Community Mobilisation workstream and the ability of third and community sector organisations to continue to resource partnership working approaches in future, in line with the Edinburgh Pact</p>

Financial Impact	
<i>Full Year Target for 23/24(£m)</i>	£1.00
<i>Delivery Investment</i>	Nil
Dependencies	<ul style="list-style-type: none"> • Community Mobilisation • Edinburgh Pact • Three Conversations
Strategic Alignment	<ul style="list-style-type: none"> • Managing our resources effectively

No.	12	Savings Proposal:	Reduce commissioned interim beds	Lead:	Nikki Conway
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Proposal Summary (Scope)	<p>55 Interim Beds were commissioned in 2021, utilising funding from the Scottish Government, to assist with system pressures and provide additional bed capacity during the pandemic and to ease flow from hospital through the winter months. This funding will cease from 31 March 2023. Pressures remain in the system and as at the end of February 23, 46 of these beds were occupied.</p> <p>This proposal would involve ongoing commissioning of 45 beds, a reduction of 10.</p>
Impacts	<p>An IIA was completed in March 23 and is available on the EHSCP website here: : Integrated Impact Assessments - Edinburgh Health & Social Care Partnership (edinburghhsc.scot).</p> <p>Some people may be delayed in hospital for longer than previously due to the reduction in interim bed capacity, however, every effort will be made to find suitable solutions. There may also be an impact on people waiting to access a hospital bed. The reduction in capacity within the system may cause some impacts relating to flow, with a corollary impact on staff supporting affected individuals. However, the proposal may increase capacity within the private sector. Focus will be on finding appropriate longer term care to avoid the need for people to move twice.</p>
Benefits & Disbenefits	<p>Benefits:</p> <ul style="list-style-type: none"> • Reduction in number of beds will ease the unfunded budget pressure • Care home capacity within the private sector will increase for self-funders <p>Disbenefits:</p> <ul style="list-style-type: none"> • Risks exist to flow and capacity, delayed discharge performance may deteriorate • There will be a reduction in capacity for reablement, therapy and support in a homely setting
Risks/ Considerations	<p>A full assessment of all risks, considerations and issues will be carried out as part of the development of this proposal, however, there are risks associated with the reduction in capacity and the impact on flow and delayed discharge performance.</p>

Financial Impact	
<i>Full Year Target for 23/24(£k)</i>	£1,600
<i>Delivery Investment</i>	Nil
Dependencies	<ul style="list-style-type: none"> • One Edinburgh • Bed-Based Review • Home First
Strategic Alignment	<ul style="list-style-type: none"> • Person Centred Care • Best use of capacity across the system • Managing our resources effectively

Appendix 4 2023-24 Savings and Recovery proposed plan to review and finalise IIAs

Project Number	SRO	Project Name	IIA Status on EHSCP site	Recommendation	IIA Proposed Review date
1	Nikki Conway/ Deborah Mackle	Purchasing	IIA Statement - Published	Statement completed and published. No further action required at this time.	-
2	Anna Duff	Prescribing	IIA Completed - Published	IIA completed in 22/23. Pan-Lothian IIA review session scheduled for April 23 to update as required.	Apr-23
3	Heather Tait	Community Equipment	IIA Completed – Published	IIA completed in March 23 and published. To be kept under review as plans develop and updated.	Jun-23
4	Moira Pringle	Hosted and Set Aside	IIA Statement - Published	No further action at this time. March 21 IIA statement reviewed and still relevant.	-
5	Deborah Mackle	Housing Support	IIA Completed - Published	IIA completed in March 23. To be kept under review and updated as plans develop.	Jun-23
6	Deborah Mackle	Community Transport	IIA Statement - Published	IIA statement published. No further action required at this time. Keep under review.	Jun-23
7	Mark Grierson	Overnight Support	IIA Completed - Published	IIA completed in February 2022 when contract for responder service was developed. Reviewed and still appropriate. IIA will be kept under review.	Jun-23
8	Moira Pringle	Contract Uplifts	IIA Statement - Published	IIA statement published. No further action required at this time, but will be monitored throughout the year.	Jun-23
9	Moira Pringle	Blood Borne Virus Service	IIA Statement – Published	IIA Statement published. No further action required at this time.	-
10	Moira Pringle	Pentland Ward closure	IIA Statement – Published	Statement published. Final. No further action required.	-
11	Linda Irvine-Fitzpatrick	Community Investment	IIA Statement – Published	Statement published. Final. No further action required.	-
12	Nikki Conway	Interim Bed Reduction	IIA Completed - Published	IIA completed in March 2023 and published. Will be kept under review and updated as plans develop.	Jun-23

Appendix 5 2022-23 Savings and Recovery Programme Cumulative IIA

**Integrated Impact Assessment
Summary Report Template**

Each of the numbered sections below must be completed

Interim report		Final report	✓	(Tick as appropriate)
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- 1. Title of plan, policy or strategy being assessed**
Edinburgh Integration Joint Boards (EIJB's) Savings Programme 2023/24 – Cumulative Integrated Impact Assessment
- 2. What will change as a result of this proposal?**

We have a legal duty to set a balanced budget each year. To meet our commitment to a fairness test for key decisions and our legal obligations under the Equality Act 2010, we carry out integrated impact assessments (IIAs or Impact Statements) of proposals that will result in a change to services or policies in the next financial year.

It is recognised that the opportunities for developing and effectively delivering significant savings proposals within a single financial year has become increasingly challenging and brings risk to performance and quality outcomes. In the current financial climate, the delivery of further savings will depend on complex funding, workforce and service change and redesign initiatives, that extend past a single financial year. To address this, we need to evolve our thinking and adopt a longer term, strategic approach. As a result, we are developing our medium term financial strategy (MTFS), which will address sustainability in the longer term and avoid the need to relentlessly develop savings programmes that lead to inefficient "salami slicing". Effectively the MTFS is a set of longer term transformation change projects, expected to deliver improved care and financial benefits as part of a multi-year programme.

However, the planning and implementation of such large-scale, strategic change takes time and many of the financial benefits will only be realised over a number of years. It is important to recognise that this is a long-term approach, and as such there is still a requirement to deliver savings in the short term. Therefore, a savings and recovery programme has been developed for 2023/24 to help bridge the transition to this new approach.

The savings proposals have been developed, to where possible help:

- Achieve a balanced budget
- Improve efficiencies in service delivery
- More effectively target resources
- Minimise negative impacts on service delivery and outcomes for individuals.

This Cumulative IIA provides an opportunity to review collectively, the equality impact of the proposals on the population of Edinburgh. It provides a level of assurance that a robust consideration of potential impacts has taken place. As well as providing an overarching strategic perspective of how projects link together, this process is helping to ensure that work is not progressing in silos. The IIA also highlights any interdependencies between projects and work streams, within the savings programme and the EHSCPs wider transformation schemes of work.

As well as the impact of individual proposals, it is essential to consider how our overall plan could affect people. In this report, we have tried to consider the emerging cumulative impacts of our proposals from several perspectives. The information and evidence used to inform this cumulative analysis draws on the individual IIAs produced for proposals that will change services in 2023-24.

Summaries of the proposals will available on the City of Edinburgh Council website from the 13th March 2023 when papers will be published in advance of the EIJB meeting on the 21st March 2023.

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

The Saving Recovery Programme is currently undergoing option approval. Several budget workshops involving EIJB members, including elected members and non-executive NHS Board members have taken place.

The proposals align as far as possible with the intentions of the strategic direction laid out within the EIJB Strategic Plan, though it is recognised that the current challenging financial situation means that some savings proposals may not be without impact.

4. Date of IIA: 8th March 2023

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	IIA role	Job Title	Date of IIA training
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Moira Pringle	Lead Officer	Chief Finance Officer	
Sarah Bryson	Facilitator	Planning & commissioning Officer	Nov 2017
Nancy Brown	Report writer	Finance Programme Manager	Scheduled for 22 Mar 2023
Rhiannon Virgo	Contributor	Project Manager	Feb 2020
Jessica Brown	Contributor	Innovation and Sustainability Senior Manager	
Peter Pawson	Contributor	Interim Director for Savings and Transformation	
Deborah Mackle	Contributor	Locality Manager - South West Edinburgh	
Nikki Conway	Contributor	Locality Manager – South East Edinburgh	
Dr Linda Irvine Fitzpatrick	Contributor	Strategic Programme Manager for Mental Health and Wellbeing	
Denise McInerney	Note Taker	Executive Assistant	Scheduled for 22 Mar 2023

6. Evidence available at the time of the IIA

The purpose of the cumulative IIA is to consider potential cumulative impacts arising from the various budget proposals. The individual IIAs have considered and noted the appropriate evidence in relation to the corresponding budget proposal. The table below only notes the overarching evidence.

Evidence	Available?	Comments: what does the evidence tell you?
Data on populations in need: <i>Joint Strategic needs Assessment City of Edinburgh HSCP (2020)</i>	Yes	Provides current and projected data on the wider population in the City of Edinburgh (Population and demographics - Edinburgh Health & Social Care Partnership (edinburghhsc.scot))

Evidence	Available?	Comments: what does the evidence tell you?
<p><i>Edinburgh HSCP Joint Strategic Needs Assessment: Health and Care Needs of People from Minority Ethnic Communities (April 2018)</i></p>	Yes	<p>Provides an understanding of what contributes to poor health and wellbeing and the barriers and challenges to seeking and obtaining support (many being interrelated).</p> <p>Actions highlighted as needed to address these include:</p> <ul style="list-style-type: none"> • Staff training including cultural sensitivity • Recognition of the role of the Third Sector • Effective community engagement • Developing effective approaches to prevention including overcoming isolation. <p>https://www.edinburghhsc.scot/wp-content/uploads/2020/03/JSNA-Health-Needs-of-Minority-Ethnic-Communities-Edinburgh-April-2018.pdf</p>
<p><i>Edinburgh Integration Joint Board Strategic Plan (2019-2022)</i></p>	Yes	<p>Details the Strategic direction of the EHSCP https://www.edinburghhsc.scot/wp-content/uploads/2020/01/Strategic-Plan-2019-2022-1.pdf</p>
<p>Data on service uptake/access</p>	No	See individual IIAs
<p>Data on equality outcomes:</p> <p><i>Individual Savings Proposals IIAs</i></p>	Yes	<p>Completed/Interim IIAs and IIA statements for the 2022/23 savings programme proposals (will be available here: https://www.edinburghhsc.scot/the-ijb/integrated-impact-assessments/) and provide details of identified impacts that may come from the implementation of the proposed changes:</p> <ol style="list-style-type: none"> 1. Purchasing (Statement) 2. Prescribing (IIA) 3. Community Equipment (IIA) 4. Hosted and Set Aside (Statement) 5. Contract Uplifts (Statement) 6. Community Transport (Statement) 7. Learning Disability Overnight (IIA) 8. Review Blood Borne Virus Investment (statement) 9. Pentland Ward Closure (Statement) 10. Community Investment funding (Statement) 11. Commissioned Interim Beds (IIA)

Evidence	Available?	Comments: what does the evidence tell you?
		12. Housing Support (IIA)
Research/literature evidence	No	See individual IIAs
Public/patient/client experience information	No	See individual IIAs
Evidence of inclusive engagement of service users and involvement findings <i>Edinburgh Integration Joint Board Strategic Plan (2019-2022)</i>	Yes	See individual IIAs Details consultation completed with stakeholders about the EIJB Strategic Plan: https://www.edinburghhsc.scot/wp-content/uploads/2020/01/Strategic-Plan-2019-2022-1.pdf <u>The Strategic Plan</u> is currently being refreshed and engagement is underway. An interim IIA for the new Strategic Plan is scheduled for late March 23.
Evidence of unmet need <i>Edinburgh Integration Joint Board Strategic Plan (2019-2022)</i>	Yes	See individual IIAs Details the health needs and priorities for the people of Edinburgh https://www.edinburghhsc.scot/wp-content/uploads/2020/01/Strategic-Plan-2019-2022-1.pdf
Good practice guidelines	No	See individual IIAs
Environmental data	No	See individual IIAs
Risk from cumulative impacts <i>Savings Programme Cumulative IIA Evidence Document</i>	Yes	Health and social care services face a challenging time, with the impacts and consequences of the Covid pandemic still evident and ongoing problems with recruitment and retention of key workforce groups, increasing risk and impacting service delivery and quality. The EHSCP has made performance improvements in key areas over the last 12 months, in relation to delayed discharge, unmet need and waits for assessment. However, backlogs and waiting lists still exist in some areas. There is some risk that any savings proposals which impact on capacity and flow through the system could make it more difficult to make and maintain performance improvements.

Evidence	Available?	Comments: what does the evidence tell you?
		<p>Several of the savings proposals represent an “opportunity cost” where funding that could have been made available to support development of community infrastructure has instead been taken to the bottom line as a recurring saving. While it is not possible to accurately assess the specific impacts of such proposals, since no specific plans for investment had been developed, it is recognised that without alternative funding being identified, this will impact on our ability to invest in services and initiatives that would help to deliver on some of the ambitions set out in the EIJB Strategic Plan.</p> <p>Impacts identified within each individual budget proposal IIA have been considered to undertake this cumulative impact assessment.</p>
Other (please specify)		<p>The Independent Review of Adult Social Care https://www.gov.scot/groups/independent-review-of-adult-social-care/</p> <p>A National Care Service for Scotland: Consultation A National Care Service for Scotland: consultation - gov.scot (www.gov.scot)</p>
Additional evidence required		

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

<p>Equality, Health and Wellbeing and Human Rights</p> <p><i>An overview of the individual IIAs highlights that the main groups of people who may be impacted by the proposals, both positively and negatively, are older people, people with disabilities and carers..</i></p> <p>Positive The savings proposals take a person-centred/human right and assets-based approach as far as is possible, and are guided by the values, priorities, and guiding principles of the EIJB’s Strategic Plan</p> <p>There will be an opportunity to help ensure choice, control and equality of outcomes for people. Service provision will be based on needs rather than people’s expectations, with priority given to the most vulnerable.</p> <p>Priority will be given to the most vulnerable and a focus on ensuring equity of access across the population</p> <p>In order to deliver savings and improvements required, all services cannot continue to be delivered as they currently are. Those affected (either positively or negatively) will more likely be older people, people with disabilities and carers due to the inherent demographics of service users.</p> <p>There is an opportunity to incorporate technological solutions to aid and provide flexible access to service delivery.</p> <p>Changes will provide a level of support which we can afford, that achieves current and future sustainability.</p> <p>It is important that the rationale behind any service changes are clearly communicated to staff and that the required support, training, skills, policies and procedures are put in place.</p> <p>Important to ensure consistency, equity and fairness in application of charging policies and debt recovery policies, with effective and efficient commissioning to ensure best value.</p> <p>Negative Savings will be made through efficiencies and improved effectiveness, which may result in some people not</p>	<p>Affected populations</p> <p>All people who receive services – more of which are older people, people with disabilities and carers</p> <p>All people who receive services – more of which are older people, people with disabilities and carers</p> <p>All people who receive services</p> <p>All people who receive services</p> <p>All people who receive services</p> <p>All people who receive services</p> <p>All staff</p> <p>All people who receive services</p>
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<p>receiving the same support to that which they currently receive or would expect to.</p> <p>Some services may be delivered through a different approach, or through different providers, which may cause anxiety, disruption and stress, particularly to those most vulnerable (including their unpaid carers), and a perceived sense of loss. This must be recognised and alleviated through considered planning and good communication.</p> <p>Cumulative impact of proposals, if not carefully managed and monitored, could affect flow through the system and result in people spending more time in inappropriate care settings such as hospital, negatively affecting outcomes for individuals.</p> <p>Anxiety and stress due to perceived or actual financial and/or safety concerns with obtaining and receiving care.</p> <p>Steps will be taken to ensure those with poor health literacy skills, language difficulties and those with limited or no digital skills or with less online access are taken into account and not disadvantaged whilst developing any technology enabled services or any move to a more self-managed care approach</p> <p>Staff</p> <p>Positive Clear operational and organisational policies and procedures will protect and help support staff in their roles and provide a level of confidence.</p> <p>Clear performance measures to support expectations and understanding of roles and responsibilities within and across teams and individuals.</p> <p>Any shift in service provision/service re-prioritisation will require a degree of investment in skills development and support for staff which will help increase staff morale.</p> <p>Flexible approaches to working are likely to lead to digital investment to support the workforce, enabling them to deliver services in a different way, providing opportunities for innovation and skills development.</p> <p>Negative The changes may bring additional stress and a sense of loss if staff feel that they are not able to provide the services which they think people are entitled to.</p>	<p>Those with poor literacy skills; those for whom English is not as a first language, and those with less access to digital technology</p> <p>All Staff</p> <p>All staff</p> <p>All Staff</p> <p>All Staff</p> <p>All staff</p>
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<p>Any change of service provision may also lead to increased levels of stress and anxiety for staff as they undertake challenging conversations with citizens (including people in receipt of services, families and unpaid carers). Changes to service provision may lead to a rise in the number of complaints which may also be stressful/anxiety provoking and can place a considerable time burden on staff.</p>	<p>All staff</p>
<p>Staff shortages, recruitment and retention issues has continued to impact the physical and mental health and wellbeing of the current workforce. With less personnel in posts, overall workloads have increased. This has resulted in increased anxiety and stress in staff associated with a lack of capacity to provide safe and optimal care services on an ongoing and sustained basis. Delivery of identified savings proposals could increase workload for some groups of staff involved in implementation.</p> <p>Steps will be taken to ensure staff are supported and any impacts are minimised.</p>	<p>All staff</p>

<p>Environment and Sustainability including climate change emissions and impacts</p>	<p>Affected populations</p>
<p>Positive</p> <p>The EIJB commitment to influencing and encouraging an environmentally responsible approach to the provision of health and social care services in Edinburgh wherever possible, through its strategic aims and decision-making processes</p> <p>Both NHS Lothian and City of Edinburgh Council have carbon reduction plans as part of their responsibilities linked to the Climate Change Act.</p> <p>Staff are encouraged to travel sustainably.</p> <p>Reduction in travel using technology and digital staff scheduling solutions. Ensures any changes proposed will support the NHS Lothian Sustainable Development Framework, CEC Sustainability Strategies and the Edinburgh 2030 netzero carbon target.</p>	<p>ALL</p>
<p>Negative</p>	

Economic	Affected populations
<p>Positive The aims to make better use of resources through furthering the integration health and social care, with more joined up working and better systems and processes to reduce duplication of effort.</p> <p>There are good quality jobs available in health and social care. The EIJB is committed to further development of workforce planning.</p>	
<p>Negative Any reduction in external commissioning may lead to a reduction in third sector and independent staffing. This impact should be limited as there is a recognised shortage of care staff across most organisations.</p> <p>Any reduction in investment in third sector projects and innovations may reduce the ability to leverage additional benefit and place greater pressure on statutory services in the longer term.</p>	<p>All those that access services and staff in third/ independent sector</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?

Procurement processes and contract documents will consider how potential contractors will address equality, human rights, environmental and sustainability issues including how contractors will support the implementation of relevant sustainability strategies referred to in this document.

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 communications plans/ strategies will include specific information for patients, unpaid carers, staff and wider stakeholders compliant with;

- UK Government guidance on Accessible Communication formats (2021); and
- The Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018.

Consideration will also be given to health literacy and the use of different mediums and channels for sharing information.

Feedback from ongoing communication with stakeholders will inform the wider Savings Programme.

- 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.

The Savings Programme 2023-24 Cumulative IIA will be reviewed and updated to reflect any identified impacts in each of the individual IIA's.

- 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
Relevant leads for savings proposals should progress any specific actions identified in individual IIAs	Savings Proposal Leads	Ongoing	Ongoing
Overarching report re delivery of the savings programme to be provided to Savings and Governance Board (SGB) monthly	Finance Programme Manager	Monthly	June 2023
Ongoing reporting to EIJB bimonthly	Chief Finance Officer (with support from the Finance Programme Manager)	Bi-Monthly	June 2023
Training and support for staff is provided where changes in process or approach is required.	Savings proposal leads – where pertinent to their proposal	Ongoing	Ongoing
Procedures and policies should be clearly set out and available.	Savings proposal leads – where	Ongoing	Ongoing

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
	pertinent to their proposal		
The rationale for the changes should be clearly communicated to staff including the over-riding financial position.	Savings proposal leads	Ongoing	Ongoing
Proposals to be implemented in line with appropriate strategies and relevant workstreams, taking account of dependencies.	Savings proposal leads	Ongoing	Ongoing

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?

An overarching view on delivery of the savings programme, including monitoring of activity and spend, will be provided at the monthly Savings Governance Board, chaired by EHSCP's Chief Officer. Bi-monthly reports will also be provided to the EIJB and quarterly reports provided to the Performance and Delivery Committee.

Existing NHS Lothian & CEC finance reporting processes will also be utilised as appropriate. Where appropriate there will be ongoing consultation with staff, patients, and carers about any change

16. Sign off by Head of Service

Name: Moira Pringle, Chief Finance Officer

Date: 9 March 2023

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/