

REPORT

Housing Based Support

Edinburgh Integration Joint Board

9 February 2024

Executive Summary	The purpose of this report is to provide the Edinburgh Integration Joint Board with a proposal to reduce the in-year financial deficit for 2023/24.
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Recommendations	<p>It is recommended that the Edinburgh Integration Joint Board:</p> <ol style="list-style-type: none"> 1. Approve the revised proposal, which now focuses on a senior review of Housing Based Support currently delivered on a case-by-case basis over a concentrated time-frame.
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Directions

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

1. A briefing note was issued on 22 December 2023 to all EIJB members, which highlighted the deterioration in the 2023/24 financial position for social care services which are delegated to the Edinburgh Integration Joint Board (EIJB). Specifically, that the projected year end shortfall had increased to £20.7m. Taking into account the total additional contributions agreed by The City of Edinburgh Council (the Council) of £14.5m, this reduced the deficit to £6.2m.
2. Housing Support Services (HBS) help people to manage their home and well-being. This can include help with issues such as claiming welfare benefits, completing

forms, managing a household budget, getting help from other specialist services, keeping safe, secure and reducing social isolation. This includes preventing admission to hospital or other settings. This support is non-personal care and is potentially chargeable through means-testing. In practice, Housing Support is often provided as part of a package of care which may include some services which are personal care.

3. Housing Support is central to supporting some individuals who require significant levels of support and supervision to safely maintain independence. The support is across all service user groups including older adults, mental health, learning disabilities, substance misuse and physical disabilities.
4. Table 1 sets out the distinction between Housing Based Support and Personal Care services.

Table 1

Examples of Housing Support	Examples of Personal Care
<ul style="list-style-type: none"> • Housework / Hoovering and Dusting • Financial Management / Paying Bills / Sorting Mail • Shopping • Organising and Decluttering • Running errands • Changing beds where there is no incontinence • Day services • Gardening • Transport • Psychological and emotional support • Maintaining a tenancy • Accessing community resources and activities • Reducing social isolation • Support and supervision 	<ul style="list-style-type: none"> • Help with personal hygiene/support to wash at the sink. • Toileting / Continence management. • Dry shaving • Hair washing • Bathing / Showering • Assistance with meal preparation • Assistance with eating • Changing bed if incontinent • Washing dishes after a meal • Cleaning shower / bath after personal care has taken place • Assistance with medication • Assistance getting in/out of bed • Help with dressing /undressing • Applying / removing Ted stockings • Stoma care • Oxygen care

5. Table 2 sets out the delivery of Housing Based Support (HBS) that is provided by the Edinburgh Health and Social Care Partnership (the Partnership) each week. It also shows information about the proportion of service delivery across different groups. 21,047 hours are provided weekly to 1,736 service users which amounts to £445k/week of financial commitment. Approximately 60% of those people receiving HBS also receive a care at home service for personal care. Some may be receiving additional services such as day service supports and overnight care.

Table 2

	All	>=60	<=20	All Others
Clients	1,736.00	70.00	1,491.00	175.00
Cost / Wk	445,091.66	122,228.85	199,267.34	123,595.47
Hours / Wk	21,047.68	5,950.00	9,171.00	5,926.68
Avg Cost / Wk	256.39	1,746.13	133.65	706.26
Avg Hours / Wk	12.12	85.00	6.15	33.87
Avg Rate / Hr	21.15	20.54	21.73	20.85
50% Reduction Saving / Wk	222,545.83	61,114.42	99,633.67	61,797.74

6. Much of this support, particularly at the lower end of provision, supports people with a range of aspects relating to independent living but should not be relating to any of the basic elements of daily living associated with the delivery of personal care such as continence, nutrition, hydration and medication prompts etc. Typically, individuals receiving less than 20hours per week are receiving support with managing their home environment, reducing social isolation, accessing activities, emotional support, companionship and attending to correspondence and attending appointments.
7. Individuals with greater levels of weekly support, should reflect a greater level of need. For example, this may relate to accessing activities and services that are essential to maintaining their safety and well-being. This may be related to services that keep service users and others safe as they require somebody to be present with them. A relatively small number of individuals (70) utilise over 60 hours per week (an average of 85) and account for approximately 25% of all commitment in this area.
8. Many of these individuals and associated services will be reviewed by current projects to ensure that the Partnership are delivering services that are proportionate to the needs of service users and meeting their outcomes. Whilst the Partnership are able to see savings through this approach which will have significant impact on

2024/25, it is not possible to now meet the in-year savings required due to the diminishing impact before the end of the financial year.

9. An option that has been subject to close consideration by the Chief Officer is that the Partnership immediately reduce the delivery of Housing Based Supports by 50% to some service users with lower needs between 19 February and 31 March 2024. To have the desired effect, this would have to be enacted at very significant pace. This approach would mean that the Partnership would not make any change to the determination of eligible need for service users receiving this support. It would also mean that no service user has a complete cessation of service. This has been explored primarily as a short-term arrangement with the intention of securing financial stability with minimal impact on services users. This was proposed to help protect services for those with the greatest level of need and to ensure that a minimum level is maintained for all.
10. Following consultation with the Chair and Vice-Chair of the EIJB, this proposal was subject to consultation with members of the EIJB on 31 January 2024. This was due to the time-imperative nature which could realise savings of £600k in year if implemented from 19 February 2024.
11. The above proposal contains a number of inherent risks including significant resistance from service users, carers, providers, our staff group and other key stakeholders. There is also the potential for inequity in the approach given similar services will be provided through Direct Payments and Individual Support Funds which would be problematic to apply a similar broad approach. The potential for unintended negative consequences cannot be underestimated. Some of these services will be 'lifeline' in nature and risk to individuals will be increased by reducing service provision. Taking such a universal approach prohibits a person-centred, case-by-case approach and an individual may come to harm as a consequence. Some service users may be subject to legislation such as the Mental Health Act, Adults with Incapacity Act or Adult Support & Protection which would require particular consideration.
12. Following the consultation process described above alongside consideration of the specific legal advice available, it has been concluded that a revised approach is required.
13. An alternative proposal, therefore, is that the Partnership continues with the programme of reviews but to assist in the acceleration of this process that there is a senior review of Housing-Based Support currently delivered on a case-by-case basis over a concentrated timeframe. This will identify where there is the necessary available evidence within assessments and case file recording that the provision of

this service may be disproportionate to the level of assessed need and the ability to immediately determine an interim alternative level of provision pending further review. This is to ensure that decision-making regarding eligibility criteria and service provision levels are proportionate to need, consistent with the approach across the Partnership and can be corrected where necessary. All cases subject to such an interim determination will be followed-up by a full review process to ensure proportionate provision is secured for the future.

14. There are 90 providers who may be affected by this proposal across the third sector and private organisations. This may have an impact and disruption to provider finances and workforce. If implemented, it may not be possible to resume previous service levels again due to the impact of the decision on organisations and their associated staff.
15. Some of the risks associated with the proposal could be mitigated by clear communication with providers and affected service users. This would also require external and internal communications will inform the wider public of the approach. This would require significant management and other staffing resource which would impact on other service priorities.
16. There is also a risk of reputational and organisational damage associated with this proposal. However, every effort will be made to ensure clear and open dialogue with provider partners and service users including the issuing of a letter explaining the reduction to any service.
17. The senior review process would initially focus on the 933 people receiving between 4 and 26 hours of housing-based support a week.

Implications for Edinburgh Integration Joint Board

Financial

18. The financial impact of this approach on 2024/25 expenditure is difficult to determine as it will be dependent on the outcomes identified for each individual and their circumstances. A possible benefit in the region of £200-400k in-year effect has been identified. However, any decisions will be made in the context of the statutory duties and obligations incumbent on the Local Authority and the Partnership.

Legal / risk implications

19. Under Section 12 of the Social Work Scotland Act it is the duty of the Local Authority (delegated to the IJB) to promote social welfare. It must do this by making available advice, guidance, and assistance on such a scale as may be appropriate for their area. This approach is designed to ensure that the available assistance is on an

appropriate scale which includes application of the eligibility criteria. This approach is a departure from face-to-face reviews only that have been pursued previously.

20. This approach will take into account the views and needs of individuals that have been previously recorded. Any decisions regarding permanent future provision will be made following a full review that includes the views of service users and others such as their carers will follow any adjustment to service provision. To ensure that the principles and expectations as Social Care (Self-Directed Support) (Scotland) Act 2013 and Carers (Scotland) Act 2016 are adhered to any decisions regarding permanent service level provisions will include full participation.
21. Implementation of the proposal will bring with it some reputational and organisational risks. It may be met with resistance and discontent from a range of stakeholders including service users, providers, informal carers, and other stakeholders.
22. This revised proposal carries considerably less risk across a range of measures than the initial one set out. However, it is also likely to have a more limited financial impact.

Equality and integration impact assessment

23. An Integrated Impact Assessment was completed on 5 February 2024 in relation to this revised approach. An interim report based on the assessment is included with the paper.

Environment and sustainability impacts

24. There are no environment and sustainability impacts arising from this report.

Quality of care

25. It is clear by the nature of the proposal, that there is the potential for a negative impact on the quality of care provided. However, the proposal will also ensure the protection of continued delivery of service to the greatest number of eligible individuals.

Consultation

26. An initial proposal was subject to a range of consultation including with the EIJB Chair, Vice-Chair and all voting members of the EIJB. Consultation has also been held with the HSCP Executive Team and Locality Managers. This proposal reflects a revised approach as a result.

Report Author

Pat Togher

Chief Officer, Edinburgh Integration Joint Board

Appendix 1

Contact for further information:

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Email: matt.kennedy@edinburgh.gov.uk

Telephone:

Appendices

Appendix 1 Integrated Impact Assessment completed on Monday 5th
February 2024.

Interim Integrated Impact Assessment – Summary Report

Each of the numbered sections below must be completed

This is an interim IIA report.

1. Housing Support Services

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

A briefing note was issued to the Edinburgh Integration Joint Board (EIJB) on 22nd December 2023 which highlighted the deterioration in the 2023/24 financial position for social care services which are delegated to the Edinburgh Integration Joint Board (IJB). Specifically, that the projected year end shortfall had increased to £20.7m. Taking into account the total additional contributions agreed by the City of Edinburgh Council (the Council) of £14.5m, reduced this to £6.2m. There are limited mitigations against this and an urgent need to develop proposals to bring this back into balance by the end of March 2024. One area of service provision where there is potential for greater efficiency of use of resources is Housing Based Support.

The proposal is that the HSCP continues with the programme of reviews but to assist in the acceleration of this process that there is a senior review of Housing-Based Support currently delivered on a case-by-case basis over a concentrated time-frame. This will identify where there is the necessary available evidence within assessments and case file recording that the provision of this service is disproportionate to the level of assessed need and the ability to immediately determine an **interim alternative level** of provision pending further review. This is to ensure that decision-making regarding eligibility criteria and service provision levels are proportionate to need and can be corrected where necessary. All cases subject to such an interim decision will be followed-up by a full review process to ensure proportionate provision is secured for the future.

Any interim decision will take into account the views and needs of individuals that have been previously recorded. Any decisions regarding permanent future provision will be made following a full review that includes the views of service users and others such as their carers will follow any adjustment to service provision.

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

There has not been any public involvement in this proposal to date. The EIJB has been informally engaged on this matter and a report is due to be presented to the EIJB on Friday 9th February.

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

No.

5. 5 February 2024.

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
Mike Massaro-Mallinson	Service Director Operations	
Deborah Mackle	Locality Manager SW	
Nikki Conway	Locality Manager SE	
Katie Bryce	NW MH SM Manager	
Anna Duff	Locality Manager NW	
Matt Kennedy	PSWO	
Jane Perry	Independent Providers rep	
Hannah Cairns	Chief AHP	
Sarah Bryson	Strategic Planning and Commissioning Officer	
Jayne Kemp	Strategic Planning and Commissioning Officer	
Rene Rigby	Independent Sector Lead	
Rhiannon Virgo	Project Manager Innovation & Sustainability	
Gosia Szymczak	Project Manager Innovation & Sustainability	
Jessica Brown	Innovation & Sustainability Senior Manager	
Emma Gunter	Contracts Officer	
Bridie Ashrowan	EVOC	

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><i>Joint Strategic needs Assessment City of Edinburgh HSCP (2020)</i></p> <p><i>Edinburgh HSCP Joint Strategic Needs Assessment: Health and Care Needs of People from Minority Ethnic Communities (April 2018)</i></p> <p><i>Edinburgh Integration Joint</i></p>	<p>Provides current and projected data on the wider population in the City of Edinburgh (Population and demographics - Edinburgh Health & Social Care Partnership (edinburghhsc.scot))</p> <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>Details the Strategic direction of the EHSCP https://www.edinburghhsc.scot/wp-content/uploads/2020/01/Strategic-Plan-2019-2022-1.pdf</p> <p>Public Health Scotland – demand for care at home services across Scotland Social care - Demand for Care at Home Services 25 April 2023 - Social care - Demand for Care at Home Services - Publications - Public Health Scotland</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><i>Board Strategic Plan (2019-2022)</i></p> <p>Public Health Scotland Data</p>					
<p>Data on service uptake/access</p>	<p>Internal data</p>	<p><u>Table 1: provides examples of housing support tasks and personal care tasks</u></p> <table border="1" data-bbox="824 592 2060 1278"> <thead> <tr> <th data-bbox="824 592 1402 651">Examples of Housing Support</th> <th data-bbox="1402 592 2060 651">Examples of Personal Care</th> </tr> </thead> <tbody> <tr> <td data-bbox="824 651 1402 1278"> <ul style="list-style-type: none"> • Housework / Hoovering and Dusting • Financial Management / Paying Bills / Sorting Mail • Shopping • Organising and Decluttering • Running errands • Changing beds where there is no incontinence • Day services • Gardening • Transport • Psychological and emotional support • Maintaining a tenancy • Accessing community resources and activities • Reducing social isolation • Support and supervision </td> <td data-bbox="1402 651 2060 1278"> <ul style="list-style-type: none"> • Help with personal hygiene/support to wash at the sink. • Toileting / Continence management. • Dry shaving • Hair washing • Bathing / Showering • Assistance with meal preparation • Assistance with eating • Changing bed if incontinent • Washing dishes after a meal • Cleaning shower / bath after personal care has taken place • Assistance with medication • Assistance getting in/out of bed • Help with dressing /undressing • Applying / removing Ted stockings • Stoma care • Oxygen care </td> </tr> </tbody> </table>	Examples of Housing Support	Examples of Personal Care	<ul style="list-style-type: none"> • Housework / Hoovering and Dusting • Financial Management / Paying Bills / Sorting Mail • Shopping • Organising and Decluttering • Running errands • Changing beds where there is no incontinence • Day services • Gardening • Transport • Psychological and emotional support • Maintaining a tenancy • Accessing community resources and activities • Reducing social isolation • Support and supervision 	<ul style="list-style-type: none"> • Help with personal hygiene/support to wash at the sink. • Toileting / Continence management. • Dry shaving • Hair washing • Bathing / Showering • Assistance with meal preparation • Assistance with eating • Changing bed if incontinent • Washing dishes after a meal • Cleaning shower / bath after personal care has taken place • Assistance with medication • Assistance getting in/out of bed • Help with dressing /undressing • Applying / removing Ted stockings • Stoma care • Oxygen care
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Appendix 1

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Public/patient/client experience information	VOCAL Carer's Survey 2021	Insert presentation title here (vocal.org.uk) Views of carers within Edinburgh and Midlothian																																																																				

Appendix 1

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
Evidence of inclusive engagement of people who use the service and involvement findings		Care Inspectorate inspections for individual providers – available on Care Inspectorate website here: Welcome to the Care Inspectorate

Appendix 1

Carbon emissions generated/reduced data	Not available	
Environmental data	Not available	
Risk from cumulative impacts	23/24 Savings and Recovery Programme IIA report	Sets out the cumulative impacts of the existing in-year savings & recovery programme. https://www.edinburghhsc.scot/wp-content/uploads/2023/06/Cumulative-IIA-Savings-Programme-23-24_Phase-2_final.pdf
Other (please specify)		
Additional evidence required		<p>Additional evidence was suggested during the session which may provide further insight. It was agreed that this would be pulled together for the final IIA. This may include:</p> <ul style="list-style-type: none"> • Engagement from One Edinburgh in particular homecare service surveys • Evidence of unmet need. • Edinburgh Learning Disability Advisory Group insight • IIAs from One Edinburgh • LGBT housing report (RR to forward) • 24/25 savings IIA – scheduled for 4th Mar 2024 to be added in once available.

Appendix 1

		<ul style="list-style-type: none">• Unmet need lists, although it was acknowledged that it might not be possible to distinguish between those awaiting personal care and those awaiting housing support.
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8. In summary, what impacts were identified and which groups will they affect?

Equality, Health and Wellbeing and Human Rights	Affected populations
<p>Positive</p> <ul style="list-style-type: none"> • It was noted that people are initially likely to see this proposal very negatively, but where there has been an overprescription of this type of care, we need to correct this. As a consequence, people may be able to gain more independence in the longer term, which would have positive impacts on outcomes for individuals. • A fairer distribution of housing-based support, right-sized according to need will free up capacity to address unmet need in the longer term. 	<p>Older people; Disabled people (includes physical disability, learning disability, sensory loss, long-term medical conditions, mental health problems); young people (particularly those in transition from children’s to adults services)</p>
<p>Negative</p> <ul style="list-style-type: none"> • Younger adults and those in middle years may see more of an impact than older people as older people are more likely to receive higher volumes of personal care and lower volumes of housing support, with the opposite applying to younger adults. • The potential impacts of a reduction in housing support will depend on the kind of tasks being provided. Where support is focused more in emotional and wellbeing support, there may be risk of increased social isolation however we would seek to mitigate this by connecting people into local community resources and alternatives. This in turn could lead to increased pressure on these services. • Potential increased risk of people struggling to maintain a tenancy, it will be important to ensure that any follow up reviews seek to ensure people are accessing universal supports and also accessing any benefits they may be entitled to. • There may be an increased risk of hoarding, although the proposed approach would identify those at particular risk of this and ensure appropriate mitigation is in place (which may include removing them from the scope of any proposed reductions). • Where housing support is focused on helping people to develop skills, there may be a risk that this will be compromised because the time available to devote to this 	<p>Older people; Disabled people (includes physical disability, learning disability, sensory loss, long-term medical conditions, mental health problems); young people (particularly those in transition from children’s to adults services)</p>

Equality, Health and Wellbeing and Human Rights	Affected populations
<p>have skills to do that and that they are being supported by their managers. There might be a need to do realignment of work.</p> <p>All negative impacts can be mitigated to a large extent by the implementation approach set out – cases will be considered by a senior assessor before any decision to reduce service is taken. An individual assessment of risk and need (desktop assessment) will be applied to each case.</p>	<p>Staff</p>

Environment and Sustainability including climate change emissions and impacts	Affected populations
<p>Positive</p> <p>No specific impacts were identified.</p>	<p>N/A</p>
<p>Negative</p> <p>No specific impacts were identified.</p>	<p>N/A</p>

Economic	Affected populations
<p>Positive</p>	
<p>Negative</p> <ul style="list-style-type: none"> • There could be significant impacts on some providers of commissioned housing-based support services. Reductions in commissioned hours will reduce the income these providers receive and this could lead to viability risks for their business. Some providers may not be able to continue to operate, leading to a loss of capacity within the market. We are aware of a small number of providers who have focused primarily on housing-based support rather than personal care, and the impacts for these businesses will be greater. • There are risks for the staff who work for affected providers. If providers do not have sufficient income, they may be unable to continue to pay their staff and jobs may be at risk as a result. • Staff who work via the Home Office visa scheme may be particularly at risk. There is a risk that even a temporary 	<p>Business community, specifically providers of housing based support and their staff.</p>

Economic	Affected populations
<p>reduction in hours could lead to the loss of staff, which would make it difficult to recruit up to the required numbers again once the need for service increases.</p> <ul style="list-style-type: none"> • Communication with providers throughout this period is very important. 	

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?

Decisions on any reduction in service provision will be made internally.

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.

A full communications plan is in development and will form part of the implementation of this proposal.

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.

This is an interim report. A number of items of additional evidence are detailed within the evidence table. This IIA report will be updated once those have been gathered.

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

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and job title)	Deadline for progressing	Review date
Gather additional evidence as outlined in the evidence table above and update IIA report.	Mike Massaro-Mallinson	19/02/24	12/02/24
Continue to engage with EVOC regarding potential impacts on third sector and options for mitigating risks posed to individuals who may see their support reduced.	Mike Massaro-Mallinson	31/03/24	
Develop detailed communications plan which sets out how we will keep service users and providers informed, with particular reference to those who may require accessible communications and for non-English speakers.	Mike Massaro-Mallinson	19/02/24	12/02/24
Additional data analysis to ensure we understand as much as possible about the circumstances of those receiving housing-based support and their protected characteristics ahead of any decision-making about potential reductions in service.	Mike Massaro-Mallinson	19/02/24	12/02/24
Continue to monitor the total cumulative impact of this change along with existing programmes.	Mike Massaro-Mallinson	31/03/24	

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?

Monitoring of this proposal will rest with the Executive Management Team and may include (though is not restricted to):

- Monitoring complaints and challenges to decisions to reduce support
- Monitoring any cases where support is reduced but the decision subsequently needs to be reversed.
- Monitoring impacts on the provider market and sustainability of individual providers.
- Monitoring impacts on our own staff.

16. Sign off by Head of Service

Name: Mike Massaro-Mallinson

Date: 5 February 2024

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/