

## Section 4 Integrated Impact Assessment

### Summary Report Template

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

(Risk level will be added by Equalities Officer)

Each of the numbered sections below must be completed

Interim report	√	Final report	
----------------	---	--------------	--

 (Tick as appropriate)

**1. Title of plan, policy or strategy being assessed**

East Lothian Integrated Joint Board, Strategic Plan 2016-19, A Second Draft, September 2015

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

The integration and development of adult health and social care services which will support the delivery of a new model of care to meet current and future challenges within East Lothian.

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

- February 2015 [First Consultation Draft of the Strategic Plan](#), and the [East Lothian Integration Scheme Consultation Draft](#),
- December 2015 – Public consultation – Strategic Plan (*planned*)

**4. Date of IIA**

17<sup>th</sup> November 2015

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

Name	Job Title	Date of IIA training	Email
Lesley Crozier	Corporate Equality, Diversity & Human Rights Officer, Mid & East		<a href="mailto:lesley.crozier@midlothian.gov">lesley.crozier@midlothian.gov</a> <a href="mailto:lcrozier@eastlothian.gov.uk">lcrozier@eastlothian.gov.uk</a>

	Lothian Councils (facilitator)		
Sue Muir	Team Leader, NHS Lothian Health Promotion Service (facilitator)		<a href="mailto:Sue.muir@nhslothian.scot.nhs.uk">Sue.muir@nhslothian.scot.nhs.uk</a>
Carol Lumsden	Strategic Planning, East Lothian CHP		<a href="mailto:Carol.lumsden@nhslothian.scot.nhs.uk">Carol.lumsden@nhslothian.scot.nhs.uk</a>
Philip Conaglen	Public Health Consultant, NHS Lothian		<a href="mailto:Philip.conaglen@nhslothian.scot.nhs.uk">Philip.conaglen@nhslothian.scot.nhs.uk</a>
Martin Higgins	Senior Health Policy Officer, NHS Lothian		<a href="mailto:Martin.higgins@nhslothian.scot.nhs.uk">Martin.higgins@nhslothian.scot.nhs.uk</a>
Emma Dempsey	Senior Health Promotion Specialist, NHS Lothian Health Promotion Service		<a href="mailto:Emma.dempsey@nhslothian.scot.nhs.uk">Emma.dempsey@nhslothian.scot.nhs.uk</a>
Meriel Deans	Public and Community Involvement Co- ordinator, NHS Lothian		<a href="mailto:meriel.deans@nhs.net">meriel.deans@nhs.net</a>
Julia White	Strategy and Policy East Lothian Council		<a href="mailto:jwhite@eastlothian.gov.uk">jwhite@eastlothian.gov.uk</a>
Veronica Campanile	Policy Officer, Corporate Policy and Improvement, East Lothian Council		<a href="mailto:vcampanile@eastlothian.gov.uk">vcampanile@eastlothian.gov.uk</a>
Paul Currie	Strategic Planning NHS Lothian		<a href="mailto:paul.currie@nhslothian.scot.nhs.uk">paul.currie@nhslothian.scot.nhs.uk</a>
Elaine Johnston	Changes		<a href="mailto:elaine@changeschp.org.uk">elaine@changeschp.org.uk</a>

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

Evidence	Available?	Comments: what does the evidence tell you?

<b>Evidence</b>	<b>Available?</b>	<b>Comments: what does the evidence tell you?</b>
Data on populations in need	Yes	Needs assessment, East Lothian by Numbers, Action tables
Data on service uptake/access	Limited availability	Information available for some but not all commissioned Services
Data on equality outcomes	Yes	East Lothian Council Equality Outcomes and Mainstreaming progress  Reports 2015 & NHS Lothian Mainstreaming Equality Report 2015 & Equality & Rights Action Plan 2013 -17
Research/literature evidence	Yes	Needs assessment, improvement of Services re Integration reference in Strategic Plan
Public/patient/client experience information	Partially available	Evaluation of Services ongoing  Service updates
Evidence of inclusive engagement of service users and involvement findings	Partial	Feedback from 1 <sup>st</sup> consultation available via East Lothian Health and Social Care Council website
Evidence of unmet need	Partial	Gaps highlighted in needs assessment and Strategic Plan. The broad thrust of the plan is appropriate. There could be clearer articulation of who has the highest health needs and what they are and how this has been used to inform the plan itself.
Good practice guidelines	n/a	
Environmental data	Nil	
Risk from cumulative impacts		
Other (please specify)	Nil	
Additional evidence	No	

Evidence	Available?	Comments: what does the evidence tell you?
required		

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

Equality, Health and Wellbeing and Human Rights	Affected populations
<p><b>Positive</b></p> <p>It is considered that the draft East Lothian Strategic Plan will meet the goals of the general public sector equality duty as well as enabling people to have more control of their social/work environment. Further, this plan may contribute to reducing differences in status between different groups of people as well as promoting participation, inclusion, dignity and control over decisions. It is also hoped that this plan will help reduce crime and fear of crime including hate crime and will go some way to promote healthier lifestyles.</p> <p><b>Negative</b></p> <p>It is not clear how this plan will contribute to improve community capacity and the plan although contributing to reduce crime there no explicit mention of the wider hate crime issue, links should be made to NHS/LA policy which incorporate sufficient elements relating to their corporate approaches to hate crime, and relevant staff education/support. Further, it is considered that the plan will have a negative impact on minority ethnic people, refugees and asylum seekers, the LGBT community, and that a greater focus on the impact on health and wellbeing is required with regard to those at risk of falling into poverty.</p>	<p>All population groups</p> <p>Those at risk of falling into poverty</p> <p>Minority ethnic people, refugees and asylum seekers, the LGBT community.</p>

Environment and Sustainability	Affected populations
--------------------------------	----------------------

<p><b>Positive</b></p> <p>The plan outlines approaches which should contribute towards helping to improve housing quality.</p> <p><b>Negative</b></p> <p>It is not clear what the impact of care at home may have on reduction of greenhouse gas emissions. An unintended consequence of these plans maybe that the use of cars is increased. In addition, there is a gap in the plan with regard to plans for future climate change that needs addressed, and links need to be made to LANHS corporate plans in relation to biodiversity. Finally, the plan does not go into any detail regarding sustainable forms of transport. There could be greater clarity about the role of/commitment from the IJB in promoting public and green space at its sites and premises e.g. community gardens, cycle paths, footpaths, designing for physical activity and so on.</p>	<p>All population groups</p>
--	------------------------------

<p><b>Economic</b></p> <p><b>Positive</b></p> <p>The transitional section of the plan describes approaches which should help to reduce income inequality and help young people into positive destinations. An indirect link to helping people to access jobs is apparent within the plan, and a positive impact noted with regard to improving local employment opportunities if local commissioning of care services is used. Plans described should also have a positive impact in terms of the improvement of quality and access to services.</p> <p><b>Neutral</b></p> <p>There is a neutral impact with regard to improving literacy and numeracy and local employment opportunities</p>	<p><b>Affected populations</b></p> <p>All population groups</p>
---	---

<b>Negative</b>	
-----------------	--

None.

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

Yes.

Sub-contractors and smaller organisations must have a commitment to mainstream equality, diversity and human rights in accordance with current equality, human rights, environmental and sustainability legislation. As a result, organisations or individuals should either have an equalities, human rights, environmental and sustainability policy or agree to comply with the LA/NHS policies.

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

Easy read and summary version of the plan to be made available for consultation. Alternative formats to be developed for the final version but if requested at consultation stage these will be made available. An engagement /consultation plan has been developed using the People's Voice Planning Record.

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

No

**11. Additional Information and Evidence Required**

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

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

The plan outline relates to the adult population of East Lothian. [Questions posed by the group;

1. Is there any specific need identified or lack of service provision in East Lothian?

Section 3 – *East Lothian by Numbers* has information on minority ethnic groups and should be referenced within the plan.

Section 5 – At the moment, the document (from section 6 onwards) perhaps focuses on social care client groups to the detriment of a whole population focus. A wider portrait of population need within the Plan would highlight why integration will be beneficial in terms of universal services tailored to local population need. There are thousands of people in East Lothian who will receive and need universal IJB commissioned services: ‘routine’ GP contact for adults with coughs, colds, infections aches and pains, repeat prescriptions and so on; people needing sexual and reproductive health services. The largest population group that will receive more specialist IJB services will be people living with long-term conditions. It might be worth describing this population group and its needs in more detail. Describing these population groups in the document provides an opportunity to stress the importance of prevention, self management and holistic, person-centred models of care especially in relation to long term conditions.

So, rather than tag the Callum, Hannah and Scott profiles to the end of section 5, we would suggest introducing these people at the start of this section and then using them to illustrate the impact of the newly integrated, person-centred service: ‘Support to live well with long term conditions’ could be illustrated with reference to Hannah quite easily, for example; the range of specialist support and services for older people like Scott can also be explained; and the challenges of working with people like Callum who have complex, chaotic lives and access and need support from a range of places can be illustrated clearly. Focusing on people would also allow content to be added about how more holistic partnerships between the IJB, third sector and non-health and care partners (community planning partners) can help support people to live with long-term conditions and age actively and healthily while getting support at various times when needed. Many people will also access community resources not directly provided by the IJB to get the type of support they need in these instances. Although, details need to be finalised, the emphasis on partnership with third sector could be strengthened at this point too. The section on Current EL strategies could be shortened (make some of the content an Appendix?) and key topics woven throughout the document.

Information should be in a format that makes it available to all groups.

LGBT, BME, Transgender the plan broadly covers this group but the specific health and social care issues are not recognised

We would recommend that the plan features refugees and asylum seekers recognising that this population may increase in East Lothian in the future. We suggest the authors consider including a sentence stating that East Lothian IJB

welcomes refugee and asylum seekers and will develop /adapt services appropriately to accommodate.

Section 11 – performance indicators section should acknowledge that we may need some new ways of measuring what really matters to people receiving care. While we cannot magic these into existence for April 2016, integration won't have happened if we carry on measuring what we currently count.

Section 12 - cultural competency of health and social care services need to be included perhaps in workforce development?

How will IJB articulate criminal justice work with East Lothian Partnership? Can this be expanded in the narrative?

OD plan in development, needs to include staff from, public, 3<sup>rd</sup> and independent sectors.

**13. Specific to this IIA only, what actions have been, or will be, undertaken and by when? 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 contact details)	Deadline for progressing	Review date
Recommendations will be considered by the IJB Strategic Planning Group and incorporated into the final version of the Strategic Plan where agreed and appropriate within the scope of the Integration Joint	Carol Lumsden Carol.lumsden@nhslothian.scot.nhs.uk	March 2016	April 2018



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 contact details)	Deadline for progressing	Review date
Board and its delegated functions. The final version of the Strategic Plan will be published by 1 <sup>st</sup> April 2016.			

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

[This will be monitored through the IJB performance framework](#)

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

*David Small*

David Small, Chief Officer, East Lothian IJB, 8<sup>th</sup> January 2016

**16. Publication**

Send completed IIA for publication on the relevant website for your organisation. [See Section 5](#) for contacts.

## **Section 5 Contacts**

- **East Lothian Council**

Please send a completed copy of the IIA to [equalities@eastlothian.gov.uk](mailto:equalities@eastlothian.gov.uk) and it will be published on the Council website shortly afterwards. Copies of previous assessments are available via

[http://www.eastlothian.gov.uk/info/751/equality\\_diversity\\_and\\_citizenship/835/equality\\_and\\_diversity](http://www.eastlothian.gov.uk/info/751/equality_diversity_and_citizenship/835/equality_and_diversity)

- **Midlothian Council**

Please send a completed copy of the IIA to [zoe.graham@midlothian.gov.uk](mailto:zoe.graham@midlothian.gov.uk) and it will be published on the Council website shortly afterwards. Copies of previous assessments are available via

[http://www.midlothian.gov.uk/downloads/751/equality\\_and\\_diversity](http://www.midlothian.gov.uk/downloads/751/equality_and_diversity)

- **NHS Lothian**

Completed IIAs should be forwarded to [impactassessments@nhslothian.scot.nhs.uk](mailto:impactassessments@nhslothian.scot.nhs.uk) to be published on the NHS Lothian website and available for auditing purposes. Copies of previous impact assessments are available on the NHS Lothian website under Equality and Diversity.

- **City of Edinburgh**

Complete impact assessments should be forwarded to the Equalities Officer.

- **West Lothian Council**

Complete impact assessments should be forwarded to the Equalities Officer.