

# East Lothian Health and Social Care Partnership Commissioning Strategy 2023-2025 – Summary Report (19.01.2023) Final

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Each of the numbered sections below must be completed

## 1. Title of proposal

East Lothian Health and Social Care Partnership (HSCP) Commissioning Strategy 2023-2025

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

The East Lothian HSCP Commissioning Strategy seeks to refocus approaches to commissioning, placing much greater emphasis on co-production, early intervention and prevention, and commissioning services closer to home. The commissioning intentions and key market messages are set out below.

### **Commissioning Intentions and Key Market Messages**

- We will work with communities, providers, advocacy bodies, carers, supported people and staff when it comes to commissioning, designing and developing services.
- We will refocus our commissioning on preventative and early intervention approaches that are outcome / recovery focussed and promote independence, participation and self-management.
- We will actively develop, support and promote community based service provision.
- We will endeavour to commission services which will provide support within an individual's own home, local community or in a homely setting.
- We will promote an outcome focussed approach to health and social care commissioning and attempt to move away from high scale and low cost delivery models which are primarily driven by profit margins. The Health and Social Care Partnership will promote collaboration and innovation when it comes to procurement.
- We are committed to ethical commissioning in terms of decisions that take into account factors beyond price, including fair work, terms and conditions, career pathways, trade union recognition and sustainability of services and the environment.

- Seek to address health inequalities and promote equity of access to services regardless of geography or population.
- Our commissioning strategy will support a healthy market across the board, which promotes improved outcomes and choice for supported people and carers.
- We will ensure that we remain compliant with all relevant legislation and national policy.

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

There has been no targeted engagement on the draft Commissioning Strategy at this point, as we were able to draw on feedback from service-users and providers through reviews and other interactions with us, and we were able to draw on extensive feedback gained during engagement on the IJB Strategic Plan 2022-25, carried out over a period of six months in 2022.

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

Yes.

**5. Date of IIA – 19.01.23**

**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
Marilyn McNeill	East Lothian IJB Service-User Representative	
Jess Wade	CEO, Carers of East Lothian (COEL)	
Allison Bell	ELHSCP MSK Service Lead and service-user/carer	
Jane Cunningham	Mental Health Strategy Officer, ELHSCP	

Name	Job Title	Date of IIA training
Maureen Allan	CEO, Volunteer Centre East Lothian (VCEL)	
Lucy Higginson	Equalities and Tackling Poverty Officer, East Lothian Council	
Christine Johnston	Planning and Performance Manage, ELHSCP	
Ashley Hardy	Strategy Officer, ELHSCP	
Andrew Main	Strategy Officer, ELHSCP (Lead Officer)	<b>April 2021</b>
Kelly Shade (via email)	CEO of EARS	
Jane Ogden-Smith	Equality and Engagement Officer, ELHSCP (Facilitator)	<b>Sept 2009 Dec 2021</b>

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

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
Data on populations in need	<ul style="list-style-type: none"> <li>• <a href="#">East Lothian Joint Needs Assessment Report 2022</a></li> <li>• <a href="#">East Lothian IJB Strategic Plan 2022-25</a></li> <li>• <a href="#">East Lothian Strategic Plan Engagement Feedback Report</a></li> </ul>	<p>The Joint Strategic Needs Assessment (JSNA) pulls together data about the demography of East Lothian and projected population growth, together with a wide range of information about the prevalence of health conditions, mental health and wellbeing, health inequalities and health and social care services being used. Within East Lothian, the life expectancy of males and females is predicted to increase by 2.4 and 1.8 years, respectively by 2042/43 (Figure 9), a trend shared by Scotland. Many of our services are already struggling to meet growing demand, particularly in services for older people and people experiencing poor mental health. With its emphasis on co-production and early intervention and prevention, the Commissioning Strategy seeks to find new ways of working with individuals and communities to promote better health earlier and for longer, enabling statutory services to focus on those in the greatest need. The focus on providing care closer to home aims to reduce both the emotional and financial impact on service-users/patients and carers. More information about this is available in the East Lothian IJB Strategic Plan 2022-25. The Strategic Plan Feedback report underlines how worried respondents were about being able to cope in old age, the impact of pressure on services on carers, and the appetite in communities for locally-based services co-produced with communities.</p> <p>Further information about the demography of East Lothian is expected from National Records of</p>

Evidence	Available – detail source	<b>Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal</b>
		Scotland at the end of 2023, when the first 2021 Census information becomes available, which will also help us to identify communities where there is currently unmet need. This will be used to inform the specification of individual projects that come forward under the auspices of the Commissioning Strategy.
Data on service uptake/access	<ul style="list-style-type: none"> <li>• <a href="#">East Lothian Joint Needs Assessment Report 2022</a></li> <li>• <a href="#">East Lothian Strategic Plan Engagement Feedback Report</a></li> </ul>	The JSNA pulls together data on service use across the range of health and social care services in East Lothian and this is supplemented by information on access to services and barriers to access is explored in the Strategic Plan Feedback Report. Information from service-user reviews and carers ASCPs is also instructive.
Data on socio-economic disadvantage e.g. low income, low wealth, material deprivation, area deprivation.	<ul style="list-style-type: none"> <li>• <a href="#">East Lothian Joint Needs Assessment Report 2022</a></li> <li>• <a href="#">East Lothian Poverty Commission Report 2017</a></li> </ul>	<p>In 2017, The East Lothian Poverty Commission established that:</p> <ul style="list-style-type: none"> <li>• 1400 households accessed homelessness services</li> <li>• 1145 households claimed crisis grants</li> <li>• 30% of East Lothian children live in poverty</li> <li>• 15,000 households are in fuel poverty.</li> </ul> <p>The cost of living crisis and the impact of Covid has led to a dramatic rise in the use of foodbanks – from around 1,500 referrals a year in 2017 to 500 a month (December 2022). This has both short and longer term impacts on health and wellbeing for the growing numbers of people affected.</p>
Data on equality outcomes	<ul style="list-style-type: none"> <li>• <a href="#">East Lothian Joint Needs Assessment Report 2022</a></li> </ul>	The JSNA draws on The Scottish Survey Core Questions (SSCQ) which collates responses to the Scottish

Evidence	Available – detail source	<b>Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal</b>
		<p>Crime and Justice Survey, the Scottish Health Survey and the Scottish Household Survey into a single source.</p> <p>We are waiting on more specific information from the 2021 Census from National Records of Scotland to give a more detailed picture, but this is unlikely to be available until the end of 2023.</p>
Research/literature evidence	<ul style="list-style-type: none"> <li>• <a href="#">Independent Review of Adult Social Care (2021)</a></li> <li>• <a href="#">National Care Service Bill (2022)</a></li> <li>• <a href="#">A Fairer Scotland for Older People (2019)</a></li> <li>• <a href="#">Keys to Life Strategy (2019 – 2021)</a></li> <li>• <a href="#">Mental Health Strategy (2017 – 2027)</a></li> <li>• <a href="#">Alcohol and Drug Strategy (2018)</a></li> <li>• <a href="#">Learning / Intellectual Disability and</a></li> </ul>	<p>The author of the Commissioning Strategy drew on a wide range of literature, with particular emphasis on the changing landscape in health and social care, rising levels of demand, a wide range of equalities issues, the impact of Covid on communities and service-users, and the impact of poverty.</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
	<ul style="list-style-type: none"> <li>• <a href="#">Autism Plan (2021)</a></li> <li>• <a href="#">Mental Health Transition and Recovery Plan (2020)</a></li> </ul> <p>Local</p> <ul style="list-style-type: none"> <li>• <a href="#">East Lothian Integration Joint Board Strategic Plan 2019 – 2022</a></li> <li>• East Lothian Integration Joint Board Strategic Plan 2023 – 2025</li> <li>• <a href="#">East Lothian Plan 2017 – 2027</a></li> <li>• <a href="#">East Lothian Local Housing Strategy 2018-2023</a></li> <li>• Midlothian and East Lothian Drugs and Alcohol Partnership Delivery Plan 2020 – 2023</li> <li>• East Lothian Council Sustainable Procurement Charter</li> <li>• <a href="#">East Lothian Council Corporate Procurement</a></li> </ul>	

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
	<p><a href="#">Strategy 2017-2022</a></p> <ul style="list-style-type: none"> <li>• East Lothian Council Procurement Strategy 2022-23 to 2027-28</li> <li>• <a href="#">NHS Lothian Procurement Policy</a></li> <li>• <a href="#">NHS Lothian Community Benefits in Procurement Procedure</a></li> <li>• <a href="#">NHS Lothian Ethical Procurement Policy</a></li> <li>• East Lothian Council / ELHSCP Transitions Policy</li> </ul>	
Public/patient/client experience information	<ul style="list-style-type: none"> <li>• <a href="#">East Lothian Strategic Plan Engagement Feedback Report</a></li> <li>• <a href="#">Planning for an ageing population feedback report</a></li> </ul>	Both reports provide feedback from services users about concerns around access to services, fears about provision in later life and a desire for earlier intervention and prevention and much more co-production of services and support with local communities.
Evidence of inclusive engagement of people who use the service and involvement findings	<ul style="list-style-type: none"> <li>• <a href="#">East Lothian Strategic Plan Engagement Feedback Report</a></li> </ul>	During these engagements we held a range of meetings with older people, people living on a low income, carers, BSL users, people with experience of substance dependency, veterans and



Evidence	Available – detail source	<b>Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal</b>
	<ul style="list-style-type: none"> <li>• <a href="#">Planning for an ageing population feedback report</a></li> </ul>	<p>people with lived experience of the justice system.</p> <p>Attempts to engage with communities who have English as another Language (for example, the Polish Community) have been less successful but we are now working with colleagues in East Lothian Council's Equalities and ESOL teams to look at how we can build relationships with these groups, both in terms of providing accessible information about services and encouraging representation and participation in engagement.</p> <p>There is no LGBT forum in East Lothian so we have made contact with LGBT Health in Edinburgh and are exploring avenues for growing representation in East Lothian. We are also looking into setting up a staff network, which we hope to take forward with East Lothian Council HR. Greater involvement of equalities groups is essential for co-production.</p>
Evidence of unmet need	<ul style="list-style-type: none"> <li>• <a href="#">East Lothian Strategic Plan Engagement Feedback Report</a></li> <li>• <a href="#">Planning for an ageing population feedback report</a></li> </ul>	<p>Both of these reports identify issues that people have with accessing services, particularly GP, dentistry and home care. The Strategic Plan Feedback report also identifies issues that prevent people with protected characteristics/in vulnerable groups face in accessing services; in particular, BSL users, people with substance dependency, people living on a low income and people with lived experience of the Justice system. These issues can lead to them feeling unable to engage with services which impacts on their health and mental health.</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
		For the reasons outlined in the section above, we are less able to gauge unmet need in minority ethnic/ethnic minority communities and work is being undertaken to address this.
Good practice guidelines	<ul style="list-style-type: none"> <li>• <a href="#">NHS Lothian Procurement Policy</a></li> <li>• <a href="#">NHS Lothian Community Benefits in Procurement Procedure</a></li> <li>• <a href="#">NHS Lothian Ethical Procurement Policy</a></li> <li>• <a href="#">Independent Review of Adult Social Care (2021)</a></li> <li>• <a href="#">National Care Service Bill (2022)</a></li> </ul>	We are bound by the procurement processes of East Lothian Council and NHS Lothian. Our approach to commissioning in this strategy draws heavily on the recommendations of the Independent Review of Adult Social Care report and take account of what we know of the forthcoming National Care Service Bill.
Carbon emissions generated/reduced data		Not applicable
Environmental data		Not applicable
Risk from cumulative impacts		Not applicable
Other (please specify)		-
Additional evidence required		-

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

Equality, Health and Wellbeing and Human Rights	Affected populations
<p><b>Positive</b></p>	<p>The group welcomed the focus on community and co-production and the shift away from a culture of ‘doing to’ to one of ‘doing with’.</p> <p>Supporting people to remain at home longer/community based services/preventative approach was also seen as lessening the strain on current services to provide crisis work/last minute intervention and delayed discharge work.</p> <p>They felt that the move towards co-production would result in services that were more sensitive to the needs of people in different localities.</p> <p>The shift away from eligibility criteria was also seen as positive, as was an end to silo-working and much greater emphasis on partnership working, which would enable a holistic/person-centred approach for service users and carers.</p> <p>Early intervention and prevention would also deliver better health and wellbeing for people, enabling them to live independently in their communities for longer and reducing their need for intervention by statutory services.</p> <p>The IIA group were generally supportive of move to promote an outcomes-focused approach to health and social care commissioning and attempts to move away from high scale and low cost delivery models which are primarily driven by profit margins but they were unable to assess the impact until new services were commissioned under this model. However, generally this key</p>

<b>Equality, Health and Wellbeing and Human Rights</b>	<b>Affected populations</b>
	<p>market intention would be difficult to impact assess until individual projects were commissioned and subject to their own engagement and IIAs.</p> <p>The IIA Group was supportive of seeking to address health inequalities and promote equity of access to services regardless of geography or population.</p> <p>The group was also supportive of the intention of the commissioning strategy to support a healthy market across the board, which promotes improved outcomes and choice for supported people and carers.</p> <p>The group was supportive of the commissioning strategy's aims to ensure that it remained compliant with all relevant legislation and national policy.</p>
<b>Negative</b>	<p>When co-producing we should bear in mind that formal community groups contain little or no representation from people with English as second language, people with disabilities and people living on a low income.</p> <p>Similarly, with engagement, there is under-representation of people in vulnerable groups and people with certain protected characteristics. Therefore, there was the potential for co-production not to represent the needs of an entire locality and not to meet the needs of everyone in a community equally. They were also concerned about the impact on people who lived outside local communities, for example, gypsy travellers, and observed that there were no networks in place locally to take account of their needs.</p>

Equality, Health and Wellbeing and Human Rights	Affected populations
	<p>However, at the same time, there was a need to ensure that anyone representing these less heard-from communities was truly able to represent the views of their community and that representation was not a tokenistic gesture.</p> <p>There was also a concern that there wasn't sufficient capacity to ensure that the appropriate level of engagement with a wide range of groups (including those less heard from) was undertaken routinely and felt there was a need to continuously improve engagement with a wide range of people, using a wide range of appropriate engagement formats and external agencies, when necessary.</p> <p>The group also felt that the language we use at meetings is difficult for community members to understand and that this should be understood when co-production was being taken forward.</p> <p>They also observed that each locality in East Lothian was different and that the commissioning strategy should make sure that they didn't take a generalised approach – one community's needs would vary radically from that of its neighbours.</p> <p>The group noted that organisations often still tended to take a silo-working approach rather than one that was joined up, which meant both duplication of provision and people in vulnerable groups being missed, when information wasn't being shared. They also worried that this led to people's situation not being dealt with holistically, which meant that other critical contributors to health and wellbeing which were the domain of other partners, for example, housing, might be overlooked.</p>

Equality, Health and Wellbeing and Human Rights	Affected populations
	<p>The group felt that there was a potential risk of carers being overlooked and that if services they relied on were no longer available, carers would be left to pick up the pieces and their own needs might remain unseen and unmet. As the majority of carers were women, should commissioning for carers services be viewed through a gendered lens?</p> <p>Some worried that care closer to home wasn't necessarily always a boon for carers. Care not so close to home offered periods of respite for carers during the day.</p> <p>The group also wondered about the impact of care closer to home on people who didn't have a home because of lack of a permanent address (for example, homeless people and women fleeing domestic abuse).</p> <p>They felt that there was a need to tease out what care closer to home meant in more detail.</p> <p>With early intervention and prevention, again the group worried about how the needs of people not fully integrated into their community would experience these. How would their cultural and language needs be reflected in early intervention and prevention services? How would we address the needs of the LGBT people in terms of premises, toilets etc? The group also raised the issue of young men contemplating suicide as a key issue and wondered how the strategy would take account of their needs.</p> <p>They also noted that there needed to be a much better understanding of what early intervention and prevention was about, particularly with more vulnerable groups, for example, older people,</p>

<b>Equality, Health and Wellbeing and Human Rights</b>	<b>Affected populations</b>
	<p>people with substance dependency, people with lived experience of the justice system. People in these groups might be less able to take up these services or and might be overlooked in planning because their views were currently under-represented in mainstream engagement and consultation (less so with older people).</p> <p>There were also issues around how these services were communicated to people, both in terms of information in other languages and formats and cultural appropriateness.</p> <p>There were a number of issues that the commissioning strategy should take account of in relation to rural areas, including poor public transport making services, even those being delivered closer to home, difficult to access. This was exacerbated by low incomes in rural areas, which could make the use of private transport or taxis to access services unaffordable.</p> <p>While the group welcomed a more community-based approach and care closer to home, they worried that issues in the labour market for health and social care would make it difficult for the commissioning strategy to deliver its aims, which might impact more on vulnerable groups, for example, carers.</p> <p>They also welcomed the commitment to longer-term funding for projects as being really important in increasing the life and uptake of projects for everyone in a community, but again were concerned that pressures on funding might make this difficult to deliver, resulting in services disappearing just as people were beginning to rely on them.</p>

<b>Equality, Health and Wellbeing and Human Rights</b>	<b>Affected populations</b>
	The group welcomed the focus on partnership working in the strategy, but worried what would happen when projects with very different ethos, values and ways of working were obliged to work together, and the potential negative impact this might have for the people they supported.

<b>Environment and Sustainability including climate change emissions and impacts</b>	<b>Affected populations</b>
<b>Positive</b>	<b>N/A (as this would only become apparent when developing services, and this should be reflected in their own individual IIAs</b>
<b>Negative</b>	<b>As above</b>

<b>Economic</b>	<b>Affected populations</b>
<b>Positive</b>	<b>N/A (as this would only become apparent when developing services, and this should be reflected in their own individual IIAs</b>
<b>Negative</b>	<b>As above</b>



**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?**

Yes. These issues will be covered by the ethical commissioning approach of the strategy and delivered through procurement and contractual arrangements.

**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.**

The Commissioning Strategy will be published online on the East Lothian Council web site, with pages providing a summary of the key messages, which can be translated by the Translate/Recite Me function into a wide range of community languages. It will include a message that the full commissioning strategy will be available in community languages and communication formats on request. It may be promoted on social media in English and other community languages.

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

N/A (as this would only become apparent when developing services, and this should be reflected in their own individual IIAs).

**12. Additional Information and Evidence Required**

Not at this juncture but as individual commissions come forward.

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

<b>Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)</b>	<b>Who will take them forward (name and job title)</b>	<b>Deadline for progressing</b>	<b>Review date</b>
Establish a baseline for ethnic groups in East Lothian (from 2023 Census data) and other sources.	Jane Ogden-Smith, Equalities and Engagement Officer	Spring 2023	Feb 2024
Develop better links with minority ethnic and ethnic minority communities	Jane Ogden-Smith, Equalities and Engagement Officer	Spring 2023	Feb 2024
Encourage Local Area Partnerships, Community Councils and Health and Wellbeing Subgroups have more representation for ethnic minority/minority ethnic groups, people living on low income, people with disabilities, learning disabilities, LGBT and other vulnerable groups	East Lothian Council Equalities Team/Connected Communities	Spring 2023	Ongoing
Ensure paper versions of information are also available and information in community languages and other formats	Communications Team	As part of strategy development	2024
Ensure that people are aware of the capacity to have information in other formats, for example, translated, in Braille or rendered as BSL videos.	All ELHSCP and third sector staff working with carers	Ongoing	2024

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

Financial pressures and labour market.

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

Through user uptake data and user experience information, IIAs and evaluations.

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

**Name**



Laura Kerr, General Manager, Planning and Performance, ELHSCP

**Date**

16 March 2023

**17. Publication**

Completed and signed IIAs should be sent to:  
[jogden-smith@eastlothian.gov.uk](mailto:jogden-smith@eastlothian.gov.uk) to be published on the Council website  
([www.eastlothian.gov.uk/elhscp](http://www.eastlothian.gov.uk/elhscp))