

Interim IIA Report – reduction to funding of local mental health organisations

Each of the numbered sections below must be completed
Please state if the IIA is interim or Final - Interim

1. Title of proposal

Proposal to make sustainable reduction to funding of local mental health organisations.

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

General Managers from across the Health and Social Care Partnership have been tasked with making proposals in terms of efficiencies on their budgets over the coming year.

In line with the Financial Recovery Plan a 5% reduction is proposed for all voluntary organisation that provide commissioned mental health services (listed below) on yearly contracts, or longer ones that are up for renewal. This is an overall average of 5% reduction rather than a 5% reduction for all (with the lowest being 4.5% and highest 10%).

Anam Cara.
CAPS Independent Advocacy.
EARS Advocacy Service.
Partners in Advocacy.
CHANGES.
Deaf Action.
Health in Mind.
Sight Scotland.
Stepping Out.
Volunteer Centre East Lothian.
Royal Voluntary Service.
First Steps.

This will combine in an overall reduction of support from mental health service organisations resulting in longer waiting lists and more people being in crisis. Potentially the smaller providers may be hardest hit and will be less able to provide local community support.

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

Discussion have taken place with providers and overall, the funding reduction should not affect the stability of the provider. There has been no full engagement on the proposal at this stage. Further discussion and engagement will take place following any decision on the proposal by the ELHSCP Integrated Joint Board.

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

Yes

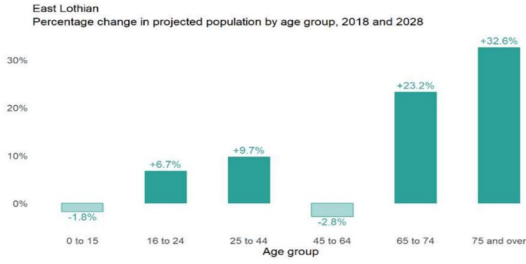
5. Date of IIA

13 March 2024 from 10am – 12pm over Ms Teams

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
Ogden-Smith, Jane (Facilitator)	Equalities and Engagement Officer, ELHSCP	Sept 2009, Dec 2022
Jane Cunningham (Lead Officer)	Strategic Planning and Commissioning Officer – Mental Health, ELHSCP	
Jane Crawford	CAPS Independent Advocacy	
Neil Munro	Project Support Manager ELHSCP	Sept 2023

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"> • East Lothian Joint Strategic Needs Assessment • East Lothian by numbers 	<p>Our population is changing. People are living longer</p> <p>Population Over the next 10 years, population growth will rise in East Lothian, especially in the over 65 year age group. See Graph 1 below.</p>  <table border="1"> <caption>East Lothian: Percentage change in projected population by age group, 2018 and 2028</caption> <thead> <tr> <th>Age group</th> <th>Percentage change</th> </tr> </thead> <tbody> <tr> <td>0 to 15</td> <td>-1.8%</td> </tr> <tr> <td>16 to 24</td> <td>+6.7%</td> </tr> <tr> <td>25 to 44</td> <td>+9.7%</td> </tr> <tr> <td>45 to 64</td> <td>-2.8%</td> </tr> <tr> <td>65 to 74</td> <td>+23.2%</td> </tr> <tr> <td>75 and over</td> <td>+32.6%</td> </tr> </tbody> </table> <p>Our population has grown at a higher rate in areas of higher deprivation, specifically within the 1st quintile (most deprived) to the 3rd quintile while the population has decreased in areas of lowest deprivation (4th and 5th quintiles).</p> <p>From 2018 to 2043, East Lothian's population is predicted to increase by a further 12.8% reaching a peak of 121,743 and will grow at faster rate than Scotland as a whole.</p> <p>Our resources are dwindling due to the impact of national austerity measures on public services, Brexit and recovery from Covid. We no longer have the ability to make capital investments. This, together with evidence from engagement, leads to placing much greater emphasis and resource into early intervention, intermediate care and other forms of support.</p>	Age group	Percentage change	0 to 15	-1.8%	16 to 24	+6.7%	25 to 44	+9.7%	45 to 64	-2.8%	65 to 74	+23.2%	75 and over	+32.6%
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Data on service uptake/access	As above															

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<p>Data on socio-economic disadvantage e.g. low income, low wealth, material deprivation, area deprivation.</p>	<ul style="list-style-type: none"> • ONS Facts and Figures about people in East Lothian • NRS 2011 Census (out of date and awaiting information from NRS from 2022 Census) • Scottish Government Equalities Evidence Finder (by extrapolation) 	<p>Scottish Index of Multiple Deprivation</p> <p>East Lothian consists of 6 wards and 132 data zones, of which 8 data zones are in the 20% most deprived of Scotland.</p> <ul style="list-style-type: none"> • People living in the most deprived areas are statistically more likely to experience health inequalities. This means lower life expectancy, higher rates of disease, more long-term illness. • People living in the least deprived areas have a life expectancy 8 years (males) and 4.8 years (females) higher than those in the most deprived areas • The areas of highest deprivation in East Lothian are largely to the west of the county specifically in areas in Musselburgh, Tranent and Prestonpans. There are also pockets of deprivation in Haddington and Dunbar. • Around 95% of people in East Lothian living in the community live within an urban setting and 5% live in more rural settings.
<p>Data on equality outcomes</p>	<ul style="list-style-type: none"> • ONS Facts and Figures about people in East Lothian • NRS 2011 Census (out of date and awaiting information from NRS from 2022 Census) • Scottish Government 	<p>Our information about BME people living in East Lothian is poor as we are still awaiting information on this from the 2022 NRS Scottish Census (these are expected in the summer of 2024). We do know that we have Ukrainian and Syrian refugees, a Polish community, a South Asian community, migrant workers and asylum seekers in East Lothian. As the council does</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
	Equalities Evidence Finder (by extrapolation)	<p>not facilitate a local equality network, we rely on statistics about use of translation and interpretation services and ethnicity recorded in education statistic to try to understand more about these communities, how many there are and where. Our own records show little uptake of our services by people in these groups and we are reaching out to the South Asian, Polish and Ukrainian communities to understand more about potential barriers to accessing services.</p> <p>We have also been engaging with the Deaf community around their needs for support from specialist workers who sign (BSL).</p>
Research/literature evidence	<ul style="list-style-type: none"> • Mental Health and Wellbeing Strategy 2023-25 - Scottish Government • Mental health and wellbeing – PHS • Why mental health is important to Scotland's future – Scottish Mental Health Partnership 	Community-based and operated mental health services play a key role in early intervention and also reduce pressures on clinical and statutory services
Public/patient/client experience information	<ul style="list-style-type: none"> • Reporting from statutory complaints procedure (including comments and compliments) • Patient Experience data 	Although there are complaints, most are resolved early in the statutory complaints procedure with very few requiring oversight from the SPSO. As well as complaints, there is a significant number of compliments for the quality of care for service-users and their carers and families, mainly to do with sensitivity, quality of support

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
	Care Opinion (East Lothian search)	and commitment to person-centred care. Care Opinion feedback in relation to East Lothian tends to centre on health services but there are some about care homes and assessment and these are positive.
Evidence of inclusive engagement of people who use the service and involvement findings	None at this stage	
Evidence of unmet need		There is much anecdotal evidence of unmet need but insufficient research has been carried out locally to quantify this.
Good practice guidelines	<ul style="list-style-type: none"> • Mental Welfare Commission Good Practice Guidance • Mental Health Legislation and Guidance – Scottish Government • Good Mental Health for All - PHS 	
Carbon emissions generated/reduced data	n/a	
Environmental data	n/a	
Risk from cumulative impacts	n/a	
Other (please specify)	n/a	

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
Additional evidence required	n/a	

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> <p>The IIA Group could not identify any positives to the proposal and noted that this would be in contradiction to the ELHSCP's/East Lothian IJB's strategic objectives expressed in the IJB Strategic Plan.</p> <p>Strategic Objectives of:</p> <ul style="list-style-type: none"> - Develop Services that are Sustainable and Proportionate to Need. - Deliver New Models of Community Provision, Working Collaboratively with Communities. - Focus on Prevention and Early Intervention. - Enable People to have More Choice and Control and Provide Care Closer to Home. - Keep People Safe From Harm. - Address Health Inequalities <p>The decision to reduce funding from local mental health services would greatly impact on the population of East Lothian and likely result in longer waiting lists and more people being in crisis before seeking any support.</p> <p>Smaller providers may be hardest hit and will be less able to provide any local community support.</p> <p>Increased costs to the system where more people are requiring the more expensive NHS outpatient or hospital admissions and may also receive less support for recovery.</p>	<ul style="list-style-type: none"> • People with protected characteristics (age; disability, including physical or learning disability, sight or hearing loss; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex, and sexual orientation) • Carers • Children, young people and care experienced people of any age • People who do not have English as a first language, do not speak or read English, or have a low level of literacy • Deaf people who use BSL • Gypsy Traveller and Roma people • People who are homeless • People with substance dependency • People with lived experience of the justice system

Equality, Health and Wellbeing and Human Rights	Affected populations
	<ul style="list-style-type: none"> • Women experiencing/fleeing domestic violence/abuse • Refugees, asylum seekers, migrant workers and people who have been trafficked • People in geographical areas or communities (for example, rural communities, peripheral communities in towns) • People living on a low income/socio-economic impact (Fairer Scotland) • Veterans (Armed Forces Covenant) • People living with effects of trauma (for example, from adverse childhood experiences, people experiencing/recovering from physical or mental abuse, recovering from serious accidents, and victims of crime)
<p>Negative</p> <ul style="list-style-type: none"> • All the protected characteristic groups and other vulnerable people will be affected by a reduction in support. Getting access to support at an early stage close to their location will be more difficult. People will need to travel further distances to receive the support needed. Travel can be seen as a barrier and people may choose not to travel and therefore only reaching out when they are in crises. • Many older people, particularly in more affluent areas of East Lothian, experience high levels of social isolation due to lack of family support and poor access to community networks. Reducing mental health support within the local community is a key factor for many in this group. 	<p>All vulnerable groups listed above, older people, people with disabilities, carers, LGBT+, communities, ELHSCP staff. Also, considerations under Fairer Scotland Duty and impact of intersectionality.</p>

Equality, Health and Wellbeing and Human Rights	Affected populations
<ul style="list-style-type: none"> • There will be a large impact on disabled people as they generally require support from other support services who are also having to reduce the support they can provide. This impacts on carers and families which may lead to their own mental health exacerbating and requiring access to mental health support that isn't available locally. • The Gypsy Traveller community has specific issues with access to services and reducing funding to providers will only increase this difficulty. • Young people from the LGBT+ community in East Lothian are well supported with their mental health through support networks at school. Once they leave school there is a real gap for Adult LGBT+ from a number of different support services. By reducing services to mental health provision will increase this. • A reduction in funding will reduce the opportunity for providers to develop new models of community provision particularly aimed at the older (over 65) and younger age groups (16 to 17). • A reduction in service and support will have a knock-on effect for other support services, such as independent advocacy. • A reduction in community lead groups where people came together to share experience that helps with their resilience and confidence may lead to people having increased mental health issues and requiring more from these support services. 	
<ul style="list-style-type: none"> • People in the community who are vulnerable to falling into poverty who can no longer access support locally will have to travel by public transport, taxi or by car. This can put more strain on a person and increase any mental health issues they are currently having. • It may no longer be viable for smaller local groups to provide community activities that people access to make connections, join in activities and find support. Therefore, increase the number of people requiring access to mental health support. 	

Equality, Health and Wellbeing and Human Rights	Affected populations
<ul style="list-style-type: none"> • Carers will be impacted by the support services no longer being available to offer any support or short-term respite to the person(s) they care for. This will affect their own mental health and further add to the number of people looking for support for themselves in order that they can carry on caring. • People who are homeless, at risk of being homeless and those living in temporary accommodation will be impacted. They may already be in receipt of support with their mental health and wellbeing and the removal of access to local services and community groups will only heighten this. • People who may use or have used substances to cope when things get too much for them will be impacted with the reduction of community support and have the potential to relapse. 	
<ul style="list-style-type: none"> • Not having access to local support at an early stage will have a huge impact with people having to travel further distances to receive the support needed. Travel can be seen as a barrier and people may choose not to travel for support and therefore only reaching out when they are in crises. • People in rural and semi-rural communities have much poorer access to services and public transport, any reduction in local support and services greatly increases this access. 	
<ul style="list-style-type: none"> • Evidence suggests that people who do not have English as a first language experience a range of problems to do with accessing services. Some providers in East Lothian work particularly well with the Polish and Ukrainian community, amongst others. Any reduction in funding will affect what support they are able to provide to these groups. • There are a large number of veterans within East Lothian who use the support services available. There is no veteran centre within East Lothian that provides support particularly younger veterans in 30-40 age bracket trying to start a new life as a civilian. Veterans will look to attend community 	

Equality, Health and Wellbeing and Human Rights	Affected populations
<p>groups not specific to their circumstance as a veteran given some of the stigma around being a veteran. Reducing local community groups that veterans can attend where they can receive support and also information on other local support services, such as dealing with homelessness will diminish and increase the burden on other services.</p> <ul style="list-style-type: none"> • If the smaller grassroots mental health community organisations who provide an invaluable service to their local communities disappear there's no new ones springing up and there's no funding for new startups. They will be gone for good. • The reduction in funding will further increase pressure on mental health practitioners effecting morale, staff sickness, recruitment and provision of high quality service provision. <p>Mitigation</p> <ul style="list-style-type: none"> • ELHSCP to fully support the organisations and make sure we are engaging with them and looking at opportunities and ideas together. Being open and transparent and ensuring organisation are aware of this situation and that discussions begin 3 months prior to any contract renewal. • Continue to do what is already being done as well as possible while at the same time looking at the processes, what can be stopped, what can be done better. • ELHSCP will work with providers to assess impact and support providers to alter service delivery. • Consider the challenges and looking at what is provided together and try to strengthen this through partnership working. Supporting those organisations with service development with what can realistically continue to be provided. 	

Environment and Sustainability including climate change emissions and impacts	Affected populations
Positive n/a	
<p>Negative</p> <ul style="list-style-type: none"> • A reduction in funding to local mental health organisations will increase travel if there are no local services available. • The loss of community groups has potential to reduce impact on climate change where those attending discuss everyday life such as what and how much they recycle, potential car sharing to activities and events and making good environmental choices. • Local gardening schemes where those attending grow and eat their own food and what benefit this has in terms of sustainability and the environment. Along with the mental health and wellbeing benefits of being outside with nature. 	All vulnerable groups listed above, older people, people with disabilities, carers, LGBT+, communities, ELHSCP staff. Also, considerations under Fairer Scotland Duty and impact of intersectionality.

Economic	Affected populations
<p>Positive</p> <p>Local mental health and community group support can lead to income maximisation and other improvements to their health and wellbeing.</p>	All
<p>Negative</p> <p>The reduction to budgets and financial restrictions limits the number of services that can be funded and therefore the number of people who can be supported in East Lothian. Many of the people who need local mental health support and can't get it will experience poorer health and lead to crisis intervention.</p> <p>Mitigation: ELHSCP is using Integrated Impact Assessment to identify adverse impacts of funding reductions and will report these to its core funders, East Lothian Council and NHS Lothian as part of its budget settlement process.</p>	Anyone in need of mental health support from all the affected groups noted above.

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?

ELHSCP commissions services in line with ELHSPC’s Ethical Commissioning Strategy, East Lothian Council’s Procurement Strategy and national good practice. Together, these set out a commitment to equality, human rights (including children’s rights), environmental and sustainability issues.

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

Communications will be planned should this proposal be accepted with service-users, potential service-users, staff and partners. They will be produced in accessible formats taking into account the needs of people who do not have English as a first language or low literacy levels.

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

Early discussions have taken place with providers.

There is potential that a number of providers may no longer be able to provide support networks and community groups. Providers will be supported through this and alternative options or modelling discussed.

There is an impact to human rights and these are:

UNCHR – Article 25

1. Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the

event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.

2. Motherhood and childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same social protection.

ECHR (tenuous):

Article 14 - Prohibition of discrimination

You have these rights regardless of your skin colour, sex, language, political or religious beliefs, or origins.

UNCRC:

- Article 9 (separation from parents) Children must not be separated from their parents against their will unless it is in their best interests (for example, if a parent is hurting or neglecting a child). Children whose parents have separated have the right to stay in contact with both parents, unless this could cause them harm.
- Article 18 (parental responsibilities and state assistance) Both parents share responsibility for bringing up their child and should always consider what is best for the child. Governments must support parents by creating support services for children and giving parents the help they need to raise their children.

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
ELHSCP will use Integrated Impact Assessment to identify adverse impacts of budget reductions and will report these to its core funders, East Lothian Council and NHS Lothian.	Jane Ogden-Smith, Equalities and Engagement Officer	Ongoing	March/April 2024
ELHSCP will continue to raise the issues around public	Various ELHSCP officers	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
transport with East Lothian Council.			

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?

By final Integrated Impact Assessment.

16. Sign off by Head of Service

Name Laura Kerr

Date 21 March 2024



17. Publication

Completed and signed IIAs should be sent to:
jogden-smith@eastlothian.gov.uk for publication on the ELHSCP [IIA Database](#) on www.eastlothian.gov.uk