# IIA Report – IIA for proposal to cut funding to East Lothian Independent Advocacy services

Each of the numbered sections below must be completed Please state if the IIA is Final

#### Interim

### 1. Title of proposal

IIA for proposal to cut funding to East Lothian Independent Advocacy services

## 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.

Commissioning for the three services for independent advocacy whose existing contract is due to come to an end at the end of March (Partners in Advocacy, CAPS and EARS) are now under review and we are proposing to make a reduction 4.5% of funding available for those three services. This equates to a saving of around £10,000 across the three services.

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

We have not been able to engage on the proposal to cut funding but we recently undertook engagement with service-users, staff and providers, together with desk research looking at information provided on service-users' views by providers to inform a strategic plan for advocacy services in East Lothian (August to September 2023).

The key findings of this work were:

- Service-users placed a high value on independent advocacy and felt that it had led to much improved outcomes for them
- Demand for independent advocacy outstripped supply
- More funding was needed to support independent advocacy
- More work was needed to raise awareness of independent advocacy
- Staff required more training about independent advocacy.

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

Yes

## 5. Date of IIA

13<sup>th</sup> March from 3-5pm via 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
Andrew Main	Strategic Planning & Commissioning Officer, ELHSCP Planning and Performance Team (Lead	March 2023
Jillian Peart	Officer) Senior Project Worker, ELC Transformation Team	
lain Templeton	Chief Officer, Partners in Advocacy	
Kelly Shade	Chief Officer, EARS	
Jane Crawford	Chief Officer, CAPS	
Paul Currie	General Manager, Strategic Integration, ELHSCP	
Lisa Shine	Quality Assurance Manager, Children's Services, ELC	
Kari-Ann Johnston	Lead Officer, the Promise, Children's Services, ELC	
Jane Ogden-Smith	Equalities and Engagement Officer (Facilitator/report writer)	September 2009 December 2022

7. Evidence available at the time of the IIA Evidence Available – Comments: what does the evidence				
Evidence	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> <li>Draft East Lothian Independent Advocacy Strategic Plan - Needs Assessment</li> <li>2024-02-08 - DRAFT East Lothian Indepenc</li> <li>East Lothian Strategic Joint Needs Assessment</li> <li>2011 Scottish Census</li> <li>2022 Scottish Census<sup>i</sup></li> </ul>	proposalThe following groups of people are currently able to source independent advocacy in East Lothian:• Learning Disability (Adults 16+)• Autism (Adults 16+)• Older People (65+) and Physical Disability (Adults 16+)• Mental Health (Adults 18+).Most of the advocacy commissioned and delivered aligns with statutory requirements (for example, Mental Health, Adults with Incapacity and Adult Support and Protection etc).Our needs assessment and engagement also showed that there were other groups, not eligible under statutory routes, who would benefit from access to advocacy, including: • parents of children living with poor mental health or with additional support needs • homeless people (not receiving IA through other statutory routes • refugees, asylum seekers and migrant workers.The responsibility for commissioning appropriate independent advocacy services to address these unmet needs lies with East Lothian Council rather than East Lothian Health and Social Care Partnership and these findings have been brought to the		
		attention of senior officers at the council and the Chief Social Work Officer (CSWO).		
Data on service	Draft East	The Needs Assessment and		
uptake/access	Lothian	engagement established that the		

## 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
	Independent Advocacy Strategic Plan - Needs Assessment 2024-02-08 - DRAFT East Lothian Indepenc	existing independent advocacy services in East Lothian are already running at full capacity and that there was unmet need.
Data on socio- economic disadvantage e.g. low income, low wealth, material deprivation, area deprivation.	<ul> <li><u>East Lothian</u> <u>Ward Profiles</u></li> <li><u>Scottish Index</u> <u>of Multiple</u> <u>Deprivation</u></li> </ul>	<ul> <li>Deprivation <ul> <li>East Lothian consists of 6 wards and 132 data zones, of which 8 data zones are in the 20% most deprived of Scotland.</li> <li>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</li> <li>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.</li> </ul> </li> <li>Due to the effects of intersectionality and the impact of health inequalities, people in these areas are likely to have much greater need for independent advocacy. Some may be receiving this through statutory routes but there will be others in need but not currently eligible or for whom there are no suitable commissioned services.</li> </ul>
Data on equality outcomes	Scottish Government	The Equality Evidence Finder brings together the latest statistics and
	<u>Equality</u> Evidence Finder	research for Scotland across different themes for age, disability, ethnicity,

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
		gender, religion, sexual orientation, socio-economic status and transgender status. Although it cannot give us information at an East Lothian level, it does evidence the impacts of intersectionality and illustrates the additional needs of people in vulnerable groups.
Research/literature evidence	<ul> <li>Independent Advocacy Principles, Standards &amp; Code of Best Practice</li> <li>East Lothian IJB Strategic Plan 203-25</li> <li>East Lothian Dementia Strategy 2023-28</li> <li>East Lothian Carers Strategy 2023-28</li> </ul>	This is the key foundational document for independent advocacy in Scotland and its principles and standards informed the development of the East Lothian Independent Advocacy Strategic Plan.
Public/patient/client experience information	From service- user engagement and feedback supplied by providers from their service users – see East Lothian Independent Advocacy Feedback Report (contained in Strategic Plan document)	<ul> <li>This showed that:</li> <li>Service-users placed a high value on independent advocacy and felt that it had led to much improved outcomes for them</li> <li>Demand for independent advocacy outstripped supply</li> <li>More funding was needed to support independent advocacy</li> <li>More work was needed to raise awareness of independent advocacy</li> <li>Staff required more training about independent advocacy.</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	
	Implications for CAPS .pdf PDF Annual Report 2023.pdf W EARS IIA Response 13.3.24.docx	These areas have specific actions assigned to them in the action plan that accompanies the East Lothian Independent Advocacy Strategic plan. These would have to be revisited should the proposed cuts go ahead.	
Evidence of inclusive engagement of people who use the service and involvement findings	See above	See above	
Evidence of unmet need	<ul> <li>Draft East Lothian Independent Advocacy Strategic Plan</li> <li>Needs Assessment</li> <li>2024-02-08 - DRAFT East Lothian Indepenc</li> </ul>	<ul> <li>The East Lothian Independent Advocacy Strategic Plan identified some areas of concern for unmet need: <ul> <li>Young people – the group were concerned about the disparity in IA service-provision contracts for young people – some started at 16 and others only began at 18</li> <li>Young people –there is a rapidly growing number of school-aged young people who needed IA support for mental health but this was identified as a service gap as part of the needs assessment.</li> <li>Young people in the Child Protection system did not have the same access to independent advocacy as adults in the Adult Support and Protection process</li> <li>BME people – housing were having to advocate for refugees, asylum seekers and migrant workers and this was an area that needed further</li> </ul> </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
		development in terms of people in these groups accessing independent advocacy.
		Most of these gaps in provision are outwith the remit of ELHSCP, but they have been explored in the strategic plan, reflected upon in the IIA and these concerns are being relayed to East Lothian Council, who would be the commissioning body responsible for taking this element of commissioning independent advocacy services forward.
Good practice guidelines	Independent Advocacy Principles, Standards & Code of Best Practice	See entry under Research Literature and evidence
Carbon emissions generated/reduced data		ELHSCP works to an ethical commissioning strategy which is compliant with all relevant national policy and legislation, including the Climate Change Act 2009. It is committed to working in local settings in a person-centred and outcomes- focused way.
		The independent advocacy services we commission sometimes require advocates to travel across East Lothian to support service-users in their own home. Funding reduction may result in travel budgets being reduced and less face to face engagement with service users taking place. This would be a negative for those with learning disabilities, autism, sensory impairments and in a lot of circumstances older people who

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
		require face to face contact in order to communicate effectively.
		The resolution of this problem would be to improve East Lothian's public transport system which would benefit service-users and providers and help ELHSCP and ELC to meet climate change commitments.
Environmental data	n/a	
Risk from cumulative impacts	n/a	
Other (please specify)	n/a	
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
<b>Positive</b> The IIA Group could not identify any positives to the proposal and were keen for it to be recognised that this move went against ELHSCP's/East Lothian IJB's strategic intentions expressed in the IJB Strategic Plan around up-steaming and earlier intervention, and the intentions in the East Lothian Independent Advocacy Strategic Plan around improving access to advocacy services.	Learning Disability (Adults 16+), Autism (Adults 16+), Older People (65+), Physical Disability (Adults 16+), Mental Health (Adults 18), Physical Disability (Adults 16+); Mental Health (Adults 18).
The decision to remove £10,000 from independent advocacy services was short-sighted and would have significant consequences for vulnerable people, other third sector organisations and ELHSCP's own services, particularly social work and mental health, which would result in much greater expenditure long-term.	
Other local authorities, for example, Midlothian, were increasing funding to independent advocacy organisations in recognition of the key role they play. West Lothian already offers organisations substantially	

Equality, Health and Wellbeing and Human Rights	Affected populations
more than East and Midlothian. MELDAP have uplifted their local funding for the provision of independent advocacy to adults (18+) who are affected by drug and alcohol use.	
<ul> <li>Negative <ul> <li>All the protected characteristic groups and other vulnerable people share a whole range of disadvantage and exclusions from society, and stigma, and advocacy is very important in protecting their rights and dignity. There are some high-level points to be made about advocacy and its role in delivering these important aspects of human rights. It adversely impacts people who are the most vulnerable.</li> <li>It actually creates costs for mainstream services by removing early intervention and allowing situations to escalate to costly crisis interventions. One crisis intervention could negate the £10,000 over the course of a couple of days or two or three unscheduled hospital stays.</li> <li>If we are making marginal savings, we need to recognise that down the line that impacts on beds, bed utilisation and delays in hospital.</li> <li>It impacts on people where there is intersectionality of protected characteristics and other life circumstances.</li> <li>All independent advocacy agencies present were already attempting to deal with an ever-growing demand for their services and some, like CAPS, were already operating a waiting list for nonstatutory work.</li> <li>EARS is already struggling to meet demand and this will mean that for the first time in its existence it will have to operate a waiting list.</li> <li>It may also mean that clients who come to EARS via a statutory route (for example, through the Mental Health Act) will have to be prioritised over</li> </ul></li></ul>	All vulnerable groups listed above; carers, LGBT people, people in child and adult protection proceedings, communities, parents of children in the Children's Hearing System, ELHSCP staff. Also, considerations under Fairer Scotland Duty and impact of intersectionality.

Equa	lity, Health and Wellbeing and Human Rights	Affected populations
	other service-users whose needs, while not statutory, are still as pressing, or they will have to opt for a first-come, first-serviced approach.	
•	It would impact on EARS and other agencies' level of staffing, having an impact on their staff team and a knock-on effect for current and potential service-users, because cuts in staffing	
•	mean cuts in caseloads. It may also have an impact on delayed discharge, because a lot of EARS' work in East Lothian relates to this.	
•	EARS is already struggling to deliver services in East Lothian because of issues with East Lothian's geography and poor public transport.	
•	It will cut down on EARS' ability to deliver services face-to-face, which is a key element for many service-users.	
•	Partners in Advocacy (PIA) has workers who work both in East and Midlothian – the disparity in funding between East and Midlothian HSCPs resulting from ELHSCP's decision to reduce funding would impact on that – in real terms, that might mean working with 37 less people in East Lothian next year.	
•	PIA has one male independent advocate working in East Lothian and one independent advocate who is female working in Midlothian – they are able to swap over when a service-user wishes to have a male or female worker. This may not be possible if the cuts go ahead. And the impacts would be felt in East and Midlothian.	
•	The funding cut would impact on areas of the greatest areas of deprivation in East Lothian. Two-thirds of the people that PIA currently support are from Musselburgh, Tranent and Prestonpans, the areas that include datazones of the highest deprivation according to SIMD.	

Equa	lity, Health and Wellbeing and Human Rights	Affected populations
•	While Midlothian were increasing their funding to independent advocacy organisations, City of Edinburgh were also looking at cuts, and the combined effect of these with East Lothian's, would have an impact across all the services they were able to offer.	
•	It is not clear that ELHSCP is paying due regard to its statutory obligations to deliver independent advocacy under legislation. Those impacted would be people under mental health legislation, including people with learning disabilities. The cuts would lead to people requiring but now not being able to access independent advocacy being further marginalised and would negatively	
•	<ul> <li>impact on their human rights.</li> <li>The cuts could adversely impact people requiring independent advocacy because they were involved in an Adult Support and Protection process (for example, older people at a care home that was under Large Scale Investigation).</li> </ul>	
•	It might impact on children in the Children's Hearings system as CAPS might no longer have the capacity to support parents in this process. This in turn impacts on the child/young person and the potential for them to stay safely at home. This may also have mental health impacts for all involved.	
•	Even though the decision to reduce funding is viewed in terms of impact on ELHSCP service- users, it cannot be viewed this simply. Reductions in one funding stream can impact on the organisations' abilities to deliver across all their activities. For example, CAPS is working in a small way in East Lothian with people with LGBT issues and this could be impacted by the proposed reduction in funding.	
•	It may impact on parents of children who are in the child protection process, who may also	

Equa	lity, Health and Wellbeing and Human Rights	Affected populations
	warrant independent advocacy for mental health reasons, adversely impacting parents and children and home life.	
•	Inspection requirements include access to independent advocacy.	
•	The decision to reduce funding to independent advocacy services is counter to the objectives of the East Lothian Independent Advocacy Strategic Plan, and also impacts on the East Lothian Dementia Strategy and the East Lothian Carers Strategy.	
•	The decision to reduce funding to Independent Advocacy organisations flies in the face of intentions around preventative commissioning (IJB Strategic Plan).	
•	The proposal will also impact on other services, for example, local mental health organisations who are also facing cuts in their funding, so they will also be dealing with increased demand with less funding.	
•	When there's going to be less available in the community, it's even more important that people are able to access that support to make sure that they are having the voice heard, their rights met and fulfilled.	
•	In terms of carers, anything that impacts the individual cared for impacts the carer.	
•	Reduction in spend on other avenues of community support (for example, mental health, sensory loss) will increase the need for independent advocacy.	
•	There may be an impact on people who require independent advocacy in legal situations.	
•	The role that independent advocates supply is irreplaceable and certainly cannot be supplied by other professionals, for example, social workers, who because of their involvement with service- users (as assessors, potential	

Equality, Health and Wellbeing and Human Rights	Affected populations
providers/commissioners of services) cannot be independent.	
<b>Mitigations</b> The group could see no way of mitigating the impact of reductions in funding.	

Environment and Sustainability including climate change emissions and impacts	Affected populations
<b>Positive</b> n/a	
Negative n/a	

Economic	Affected populations
<b>Positive</b> Independent Advocacy helps people to have their needs understood by public bodies. This can lead to income maximisation and other improvements to their health, wellbeing and material condition.	All
<b>Negative</b> The continuing budget cuts and financial restrictions limit the number of services that can be funded and thus the number of people who can be supported. Many of the people who need independent advocacy support and can't get it will experience poorer socio-economic outcomes due to an inability to have themselves heard and understood in official situations. <b>Mitigation:</b> ELHSCP is using Integrated Impact Assessment to identify adverse impacts of budget cuts and will report these to its core funders, East Lothian Council and NHS Lothian as part of its budget settlement process.	Anyone in need of independent advocacy because of a protected characteristic or vulnerability.

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.

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 <u>Strategic Environmental Assessment</u> (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

None

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 cuts 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

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 continue to raise	Various ELHSCP	Ongoing	
the issues around public	officers		
transport with East Lothian			
Council.			

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

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

By additional IIAs.

## 16. Sign off by Head of Service



Name – Laura Kerr, General Manager, Planning and Performance, ELHSCP

Date – 21st 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

<sup>i</sup> Scotland's 2022 Census has so far delivered data on:

- Population by age and sex at Scotland and Local Authority level (rounded)
- Number of households at Scotland and Local Authority level (rounded).

We are still awaiting:

- Population by age and sex at all geographies down to output area (unrounded)
- Number of households at all geographies down to output area (unrounded)

We are also waiting for data on output areas. Output areas are made up of approximately 50 households. Information will be released at this level for:

- Ethnic group, national identity, language and religion
- Armed Forces veterans
- Sexual orientation and trans status or history
- Demography and migration
- Housing
- Education, labour market and travel to work
- Health, disability and unpaid care.

This information should be available by May 2024. However, it means that we still have to work with data from the 2011, which is very out-of-date. This is an unsatisfactory situation.