

Part 1 - Pre-Integrated Impact Assessment Screening.

NB For Dundee City Council Committees the Citrix Firm Step Process must be used.

This word document can be completed and information transferred to Firm Step if required.

Title of Report/Project/Strategy	Dundee Integration Joint Board Proposed Budget 2024/25
Lead Officer for Report/Project/Strategy (Name and Job Title)	Christine Jones, Acting Chief Finance Officer
Name and email of Officer Completing the Screening Tool	Kathryn Sharp Kathryn.sharp@dundeecity.gov.uk
List of colleagues contributing information for Screening and IIA	Dave Berry, Acting Chief Officer Christine Jones, Acting Chief Finance Officer Kathryn Sharp, Acting Head of Service, Strategy and Performance
Screening Completion Date	09 March 2024
Name and Email of Senior Officer to be Notified when Screening complete	Dave Berry Dave.berry@dundeecity.gov.uk

	Is there a clear indication that an IIA is needed? Mark one box only		
	X YES Proceed to IIA		
NO Continue with Screening Process		Continue with Screening Process	

Is the purpose of the Committee document the approval of any of the following Mark one box either Yes or No  NB When yes to any of the following proceed to IIA document.					
	Yes			No	
A major Strategy/Plan, Policy or Action Plan	Х	Proceed directly			Continue with
		to IIA			Screening Process
An area or partnership-wide Plan		Proceed directly		Χ	Continue with
		to IIA			Screening Process
A Plan, programme or Strategy that sets the		Proceed directly		Χ	Continue with
framework for future development consents		to IIA			Screening Process
The setting up of a body such as a		Proceed directly		Χ	Continue with
Commission or Working Group		to IIA			Screening Process
An update to a Plan		Proceed directly		Χ	Continue with
		to IIA			Screening Process

There a number of reports which do not <u>automatically</u> require an IIA. If your report does not automatically require an IIA you should consider if an IIA is needed by completing the checklist on following page.

These include: An annual report or progress report on an existing plan / A service redesign. / A report on a survey, or stating the results of research. / Minutes, e.g. of Sub-Committees. / A minor contract that does not impact on the wellbeing of the public. / An appointment, e.g. councillors to outside bodies, Senior officers, or independent chairs. / Ongoing Revenue expenditure monitoring. / Notification of proposed tenders. / Noting of a report or decision made by another Committee including noting of strategy, policies and plans approved elsewhere.



Dundee Integration Joint Board Integrated Impact Assessment

Only complete the checklist on the following page whenever your report does not <u>automatically</u> require an Integrated Impact Assessment otherwise delete the page prior to proceeding to IIA.



Part 1 (continued) Pre-Integrated Impact Assessment Screening.

Screening Checklist for IIA Completion. When yes to any of the following proceed to IIA document.

Mark one box only either Yes or No.

	Will the recommendations in the report impact on anyone in relation to any of the Protected							
	<b>Characteristics?</b> Age; Disability; Gender Reassignment; Marriage & Civil Partnerships; Pregnancy & Maternity; Race / Ethnicity; Religion or Belief; Sex; Sexual Orientation.							
7 (0)	No	Continue Screening Process	Х	Yes. Proceed to IIA.				
Wi	II the	recommendations in the report impact on Peop	le's l	Human Rights?				
For	more ii	nformation on Human Rights visit: <u>https://www.scottishhuman</u>	<u>rights.</u>					
Χ	No	Continue Screening Process		Yes. Proceed to IIA.				
Wi	II the	recommendations in the report impact on anyo	ne re	siding in a Community Regeneration Area				
(CI	RA)?	Within the 15% most deprived areas in Scotland according to	the 20	20 Scottish Index of Multiple Deprivation.				
	No	Continue Screening Process	X	Yes. Proceed to IIA.				
		recommendations in the report impact on anyo						
		nt families (especially single female parents); households with	a great	er number of children and/or young children; pensioner				
nou	_	s (single or couple)						
	No	Continue Screening Process	X	Yes. Proceed to IIA.				
		recommendations in the report impact on anyo						
or u	<del></del>	oyed and of working age; serious and enduring mental health;		, , ,				
	No	Continue Screening Process	<u> </u>	Yes. Proceed to IIA.				
		recommendations in the report impact on anyo		the following more vulnerable groups?				
Offe		and ex-offenders; looked after children and care leavers; care		V-a Duanadás HA				
\A/:	No	Continue Screening Process	X	Yes. Proceed to IIA.				
		recommendations in the report impact on any only education & skills; benefit advice / income maximisation; of						
	No	Continue Screening Process	<u> </u>	Yes. Proceed to IIA.				
		recommendations in the report on Climate Cha						
		greenhouse gases; adapting to the effects of climate change	. or Er	nergy efficiency & consumption; prevention, reduction,				
16-0	No	covery or recycling waste; sustainable procurement.  Continue Screening Process	ΤX	Yes. Proceed to IIA.				
\ <b>\</b> /i		recommendations in the report impact on Tran						
		transport provision; sustainable modes of transport.	sport	••				
, 100	No	Continue Screening Process	X	Yes. Proceed to IIA.				
Wi		recommendations in the report impact on the N						
		r water quality; biodiversity; open and green spaces.						
Χ	No	Continue Screening Process	1	Yes. Proceed to IIA.				
		recommendations in the report impact on the E	Built F					
X	No	Continue Screening Process		Yes. Proceed to IIA.				
	110	Continue Corconning F 100033		103.1100660 to IIA.				
1/1/1	hon n	a to avarithing in the above personing presses	V011	must contact 'Sonior Officer to be Netified				
		o to everything in the above screening process	-					
on	Com	pletion' and present a copy of this Screening t	ooi w	ип ыв кероп.				

on Completion' and present a copy of this Screening tool with IJB Report.

Otherwise proceed to IIA.

\* Transfer information into the Firm Step Process when report is progressing to Council Committee.

The following document includes all questions in DCC IIA- The Dundee City Council IIA Guidance document can be found <a href="here">here</a>.



PART 2- Assessment

**Integrated Impact Assessment Record** 

Report Author	Christine Jones	
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Document Title	Dundee Integration Joint Board Proposed Budget 2024/25		
IJB Report Number	DIJB10-2024		
Document Type	Budget proposal report		
New or Existing Document?	New		
Document Description	The purpose of the report is to advise the Dundee IJB of the implications of the proposed delegated budget for 2024/25 from Dundee City Council and the indicative budget from Tayside NHS Board, and to seek approval for the range of investments and expenditure proposed to set a balanced budget for Dundee Health and Social Care Partnership for 2024/25.		
Intended Outcome	To enable the Dundee IJB to set a balanced budget that supports the delivery of ambitions and priorities within their strategic commissioning framework, which aims to support improved health and wellbeing for people living within Dundee, including unpaid carers.		
Planned Implementation Date	1 April 2024		
Planned End Date	31 March 2025		
How the proposal will be monitored and how frequently	Financial monitoring reports are submitted to every meeting of the IJB. A range of other reports submitted to the IJB regarding service performance, improvement and change also contain information that reflects the impact of budgetary decisions.		
Planned IIA review dates	The impact of the budget will continue to be monitored and reported through the financial monitoring reports that are submitted to every IJB. Where there is any indication that planned expenditure in areas impacting equality and fairness is not being manged within the budget this will be identified. Further IIAs will be completed where required, particularly in relation to any reports and recommendations arising from planned service reviews.		
IIA Completion Date	12 March 2024		
Anticipated date of IJB	27 March 2024		
Summary of Activities undertaken as part of information gathering and assessment of potential			

Summary of Activities undertaken as part of information gathering and assessment of potential impacts including local involvement, research and meeting discussions.



Officer	People/groups	Activity/Activities	Date
Acting Chief Finance Officer / Acting Head of Service, Strategy and Performance	Strategy and Performance Team	Review of equality and fairness statistical information (local and national) and evidence aligned to expenditure and savings proposals.  This includes review of the IJB's Strategic Needs Assessment.	07 March 2024
		Additional statistical information regarding current profile of service use.	
Acting Head of Service, Strategy and Performance	Social Care Contracts Team	Review of list of contracts with external providers for adult health and social care services.	12 March 2024
Acting Chief Officer / Acting Chief Finance Officer	IJB members	Budget development sessions included questions and discussion regarding equality and fairness impacts of proposed savings.	17 January 2024, 14 February 2024, 06 March 2024
Heads of Service, Health and Community Care / Locality Manager / Associate Locality Managers		Operational managers have provided assessments of initial considerations in terms of proposed reviews of services, contracts and commitments.  Whilst the review process will include further, more detailed consideration of potential equality impacts, preliminary assessment of initial considerations has been incorporated into this IIA. An individual IIA will be required for any future report to the IJB containing the findings of such reviews, where any recommendation is being made regarding a change in service, contract or commitment.	14 February 2024 – 08 March 2024
Acting Head of Service, Strategy and Performance / Senior Officer	Members of the public  Members of the health and social care workforce  Unpaid carers  Third and independent sector health and social care providers	Range of engagement activities related to the development of the replacement strategic commissioning plan for the IJB and equality outcomes. This included a survey and a number of focus groups, as well as information gathered through consultation sessions related to primary care services.  Specific sessions were held with groups representing older people and unpaid carers.  Information from these sessions remains relevant to assessing equality impacts of the current budget proposals.  Ongoing engagement with above groups and intelligence reported and discussed at Strategic Planning Advisory Group, IJB and PAC who continue to monitor impact of plan and take appropriate actions when needed.	Throughout January and February 2023



#### **Equality and Fairness Impact Assessment Conclusion**

(complete after considering impacts through completing questions on next pages)

Overall the budget proposals have a range of both potential positive and negative impacts for protected and disadvantaged groups. However, all potential negative impacts have already been mitigated or will be subject to close monitoring, so that if they do arise in the future they will be recognised, escalated and resolved.

In broad terms the key budget proposals have been assessed as being likely to have the following overall impacts:

- Uprating of free personal care this has universally positive impacts for people in receipt of free personal care, and unpaid carers through their close connection to these people.
- Uplift to staff pay element of Adult Social Care Providers' Contract Value this will have positive impacts for people employed in the health and social care workforce. This is particularly so for females, older workers (aged 50 to 67 years) and for workers on lower incomes. Approximately 50% of all contracts with external providers of health and social care services will benefit from the uplift.
- Management of staff turnover and vacancy management this has potentially negative impacts for the workforce (predominantly females and older (50-67) year olds) as well as for employment opportunities. However, proposals in the budget relating to management of staff turnover reflect wider challenges in recruitment and retention for the health and social care sector within the UK. The proposal reflects the cumulative value of periods for which posts are vacant because they are unable to be filled despite ongoing recruitment activity. It does not reflect any policy decision to purposefully stop or slow recruitment to posts. Close monitoring of this area will continue throughout the year and be reported to the IJB regularly. This is also a continuation of an approach implemented in 2023/24 from which no specific equality and fairness impact concerns are known to have arisen to date.
- Redirection of existing budget underspends this presents a low risk of negative impacts, which
  can be mitigated via close financial monitoring. Redirection has only been recommended where
  there has been a sustained pattern of underspend over successive years and there are no known
  factors likely to disrupt this pattern during 2024/25. Although changes to operational service
  budgets will always have the potential to impact on service users, including protected and fairness
  groups, recommendations for reductions are in areas where risk of impact has been assessed as
  being very low. Financial monitoring at service level, through the senior management team and via
  reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage
  and subject to appropriate response.
- Maintenance of all non-direct social care external contract payments at 2023/24 level this has potential negative impacts for people who have the highest levels of health and social care need. Analysis of contract information has highlighted specific risks for services and supports to carers, advocacy, women's services (violence against women), drug and alcohol services, sensory services and contracts relating to service development and service user engagement (as these contracts will also not be eligible to receive the uplift to staff pay element of Adult Social Care Providers' Contract Value). However, there is a range of infrastructure in place to both support providers as they develop approaches to manage financial pressures and to monitor any potential negative impact on service delivery and outcomes for people (both collectively and individually across providers). Ongoing monitoring is clearly linked to Clinical, Care and Professional Governance arrangements which report regularly to the IJB. It is assessed that the potential negative impact can be mitigated through ongoing collaborative working with providers.
- Reduction in Care Home Placements this has been assessed as having no impact on protected groups or fairness groups, including for older people and people with a disability. Need and demand for care home placements has been reducing over a number of years, in response to policy to shift the balance of care, market changes and individual / family preferences. A reduction in placements has been projected for 2024/25, however personalised assessment and care planning will continue to ensure that care home placement is available to those people for which that is the best option to meet both their care and support needs and their individual choice / preference.



- Return of additional investment from Prescribing this has been assessed as having no impact on protected groups or fairness groups, including older people, people with a disability, people with poor mental health and wellbeing and people who use drugs and alcohol (all of whom contribute to a significant proportion of prescribing activity). Prescribing volume and pricing growth has not increased at the rate expected during 2023/24, and this is anticipated to continue in 2024/25. The budget for this area has therefore been realigned to reflect projected spend in 2024/25 based on current information and does not represent a reduction in service / availability of medicines when they are required.
- Utilisation of reserves this has potential positive impacts for service users, particularly those who
  have the highest needs for health and social care services and poorest outcomes (older people,
  people with disabilities, people from the most deprived areas of Dundee, people who have mental
  health care and support needs and people who use drugs and alcohol). The proposal to utilise
  reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality
  of service delivery. The use of reserves has meant that the IJB is not considering savings proposals
  that might result in reduced availability, choice or levels of services.

Proposals made regarding reviews of services, contractual commitments and payments have been subject to a preliminary assessment of potential impacts at this time. This includes:

- Review of Day Care Services
- Review of Direct Payment Commitments
- Care at Home Contract Efficiency Review
- Review of Transport
- Review of Use of Physical Resources / Quality of Environment
- Review of Contractual Commitments
- Review of Residual Practical Support Service

Completion of impact assessment will form part of review processes as they are progressed during 2024/25. An individual IJB Integrated Impact Assessment will be required for any future report to the IJB containing the findings of such reviews, where any recommendation is being made regarding a change in service, contract or commitment. However, where possible preliminary assessment has been included within this Integrated Impact Assessment to indicate where reviews are considered to be likely to have an impact on specific groups within the population.

Please note that the following elements of the budget proposals have not been impact assessed as part of this IIA:

- Staff Pay increases these are decisions made by Dundee City Council and NHS Tayside (as part of wider national pay negotiation arrangements).
- Dundee City Council Review of Charges Additional Income this is a decision made by Dundee City Council.
- Additional Community Alarm Charge to DCC Housing this is a consequence of charging decisions taken by Dundee City Council.
- Reduced Employer Contribution Rate to DCC Pension Scheme this is a decision made by Dundee City Council.

For the above proposals the IJB has no decision-making role as the relevant functions have not been delegated; the budget proposals reflect the financial impact of decisions made elsewhere and which the IJB has no authority to change or refuse to implement. It is the responsibility of the decision-making body to consider responsibilities under the Public Sector Equality Duty in relation to equality impact assessment.

#### PART 2- Assessment (continued)

When assessing impacts throughout this document an explanation is required when a positive, negative or not known impact is selected. There may be positive and negative impacts for the protected group described. For not known this should indicate if further research is needed and if not, why not. When there is No Impact identified, no narrative is required.



# Dundee Integration Joint Board Integrated Impact Assessment Equality, Diversity & Human Rights Indicate Yes or No by marking Y or N in each Box

Age	Y/N	Explanation, assessment and any potential mitigations
Positive	Χ	Free personal care uprating – positive
No Impact	X	Free personal care is available to anyone aged over 16 years of age in
Negative	Χ	Scotland. The majority of people who receive free personal care are older
Not Known		adults. Uprating of personal care therefore has a direct positive impact.
		Redirect existing budget underspends – negative (mitigated)
		Redirections have been carefully planned to reflect changes in actual
		expenditure recorded historically across operational service budgets.
		Redirection has only been recommended where there has been a sustained
		pattern of underspend over successive years and there are no known
		factors likely to disrupt this pattern during 2024/25. Although changes to
		operational service budgets will always have the potential to impact on service users, including older people, recommendations for reductions are
		in areas where risk of impact has been assessed as being very low.
		Financial monitoring at service level, through the senior management team
		and via reporting to the IJB provides mitigation, as any budget variances will
		be identified at an early stage and subject to appropriate response.
		Maintenance of all non-direct social care external contract payments at
		<u>2023/24 level – negative (mitigated)</u> External providers of social care services are experiencing a range of costs
		pressures, primarily due to high rates of inflation driving increased staffing
		and other operating costs. Although it is proposed that providers will receive
		an uplift inline with national policy on Adult Social Care Pay, this does not
		respond to increased costs for other staffing groups and wider operating
		costs. Maintenance of all non-direct social care external contract payments
		at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments. The HSCP continues to
		have in place a range of mechanisms for supporting external providers as
		they manage budgetary pressures, including provider support via a
		dedicated Social Care Contract Team and investment in Scottish Care
		Independent Sector Lead. These resources will continue to be deployed to
		support providers in their efforts to manage pressures within budget and to mitigate any potential risks to quality or continuity of service provision. All
		contracted providers participate in regular contract monitoring
		arrangements, enabling any concerns to be addressed in a timely and
		proportionate way. Many providers are also subject to regulation and
		inspection requirements which provide an overview of any impact on service
		standards and quality. Both of these mechanisms are connected to the
		HSCP Clinical, Care and Professional Governance arrangements, which
		report regularly to the IJB. A range of provider forums are also in place and act as a forum through which providers can raise concerns and discuss
		solutions. A high proportion of people receiving services from these
		providers are older people (aged 65 and over), and therefore there is an
		indirect potential negative impact on them.
		Reduction in Care Home Placements – no impact
		Care Home placements for older people have been reducing for a number of years; this reflects the strategic intention to shift the balance of care to
		community settings set out in successive IJB strategic commissioning plans
		as well as in national policy and strategy. It also reflects changes in people's
		preferences and market conditions across the care home sector, particularly
		following the COVID-19 pandemic. The HSCP is projecting a further
		reduction in need and demand for care home placements in 2024/25 and



therefore a related decrease in the cost of placements. Actual in-year demand for placements will be monitored via operational management teams and any excess need / demand will be identified and managed accordingly. A personalised approach to assessment and care planning will continue to maintain access to care home placements for people whose need for support and personal preference indicates this is the most suitable provision for them.

#### Utilisation of reserves - positive

The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services. As older people are the largest proportion of people utilising health and social care services this will impact on them more significantly than other groups within the population.

#### Return of additional investment from prescribing – no impact

A significant proportion of prescribing activity in Dundee is directed to meet the health needs of older people. Prescribing volume and pricing growth has not increased at the rate expected during 2023/24, and this is anticipated to continue in 2024/25. The budget for this area has therefore been realigned to reflect projected spend in 2024/25 based on current information and does not represent a reduction in service / availability of medicines when they are required. Prescribing activity and spend is closely monitored via the Prescribing Management Group, with an overview provided to the IJB via regular budget monitoring reports. Any variation from projected spend will therefore be quickly identified and subject to appropriate action.

#### Service Reviews (preliminary assessment only)

It is anticipated that the following service reviews might have a direct impact on older people:

- Review of Day Care Services unknown potential impacts at this time. 40% of users are aged 65 years or over and 60% under 65 vears.
- Review of Direct Payment Commitments predicted no impact, as this represents a focus on ensuring unspent balances are returned rather than any underlying change in the provision of services and supports.
- Care at Home Contract Efficiency Review anticipated positive impact as review is to focus on maximising service user contact time.
   78% of people in receipt of homecare services are aged 65 or over.
- Review of Residual Practical Support Service unknown potential impacts at this time, however are anticipated to be of small scale due to limited size of service.

Impact assessment for affected groups will be completed as part of the forthcoming service review processes.

Disability	Y/N	Explanation, assessment and potential mitigations
Positive	X	Free personal care uprating – positive
No Impact	X	Free personal care is available to anyone aged over 16 years of age in
Negative	X	Scotland. Many people who receive free personal care are people with a
Not Known		disability. Uprating of personal care therefore has a direct positive impact.
		Redirect existing budget underspends – negative (mitigated)



Redirections have been carefully planned to reflect changes in actual expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including people who have a disability, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.

### Maintenance of all non-direct social care external contract payments at 2023/24 level – negative (mitigated)

External providers of social care services are experiencing a range of costs pressures, primarily due to high rates of inflation driving increased staffing and other operating costs. Although it is proposed that providers will receive an uplift inline with national policy on Adult Social Care Pay, this does not respond to increased costs for other staffing groups and wider operating costs. Maintenance of all non-direct social care external contract payments at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments. The HSCP continues to have in place a range of mechanisms for supporting external providers as they manage budgetary pressures, including provider support via a dedicated Social Care Contract Team and investment in Scottish Care Independent Sector Lead. These resources will continue to be deployed to support providers in their efforts to manage pressures within budget and to mitigate any potential risks to quality or continuity of service provision. All participate providers in regular contract monitoring contracted arrangements, enabling any concerns to be addressed in a timely and proportionate way. Many providers are also subject to regulation and inspection requirements which provide an overview of any impact on service standards and quality. Both of these mechanisms are connected to the HSCP Clinical, Care and Professional Governance arrangements, which report regularly to the IJB. A range of provider forums are also in place and act as a forum through which providers can raise concerns and discuss solutions. A significant proportion of people receiving services from these providers are people who have a disability, and therefore there is an indirect potential negative impact on them.

#### Reduction in Care Home Placements – no impact

Care Home placements have been reducing for a number of years; this reflects the strategic intention to shift the balance of care to community settings set out in successive IJB strategic commissioning plans as well as in national policy and strategy. It also reflects changes in people's preferences and market conditions across the care home sector, particularly following the COVID-19 pandemic. The HSCP is projecting a further reduction in need and demand for care home placements in 2024/25 and therefore a related decrease in the cost of placements. Actual in-year demand for placements will be monitored via operational management teams and any excess need / demand will be identified and managed accordingly. A personalised approach to assessment and care planning for people with a disability will continue to maintain access to care home placements for people whose need for support and personal preferences indicate this is the most suitable provision for them.



Utilisation of reserves - positive

The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services. As people with a disability are a significant proportion of people utilising health and social care services this will impact on them more significantly than other groups within the population.

#### Return of additional investment from prescribing – no impact

A significant proportion of prescribing activity in Dundee is directed to meet the health needs of people with a disability. Prescribing volume and pricing growth has not increased at the rate expected during 2023/24, and this is anticipated to continue in 2024/25. The budget for this area has therefore been realigned to reflect projected spend in 2024/25 based on current information and does not represent a reduction in service / availability of medicines when they are required. Prescribing activity and spend is closely monitored via the Prescribing Management Group, with an overview provided to the IJB via regular budget monitoring reports. Any variation from projected spend will therefore be quickly identified and subject to appropriate action.

#### Service Reviews (preliminary assessment only)

It is anticipated that the following service reviews might have a direct impact on people who have a disability:

- Review of Direct Payment Commitments predicted no impact, as this represents a focus on ensuring unspent balances are returned rather than any underlying change in the provision of services and supports.
- Care at Home Contract Efficiency Review anticipated positive impact as review is to focus on maximising service user contact time.
   50% of people who currently receive services have a physical disability, 6% have a learning disability and 5% have a mental health condition.
- Review of Transport unknown potential impacts at this time.
   However, part of the review's aim is to have a transparent and equitable approach to the provision of transport.
- Review of Use of Physical Resources / Quality of Environment anticipated positive impact as review is to focus on offering an improved quality of environment.
- Review of Contractual Commitments unknown potential impacts at this time.
- Review of Residual Practical Support Service unknown potential impacts at this time, however are anticipated to be of small scale due to limited size of service.

Impact assessment for affected groups will be completed as part of the forthcoming service review processes.

Gender Reassignment	Y/N	Explanation, assessment and potential mitigations
Positive		At the present time there is not sufficient data available to assess the
No Impact		demand for and use of delegated health and social care services by people
Negative		who have undergone gender re-assignment and therefore the impact of the



		Joint Board Integrated impact Assessment
Not Known	X	budget on them as a specific group is not able to be accurately assessed at this time.
		Over 2023/24 a programme of work has been undertaken to make connections with transgender and non-binary people who live, work or provide unpaid care within Dundee, with the aim of better understanding their needs, preferences and experiences of health and social care services and supports. This includes in relation to people who are planning to, are going through or have undergone gender reassignment. This work is continuing into 2024/25 and will be reported, as appropriate, via the Strategic Planning Advisory Group and IJB.
Marriage & Civil Partnership	Y/N	Explanation, assessment and potential mitigations
Positive		None of the budget proposals are considered to have any direct or indirect
No Impact	Χ	relevance to this protected characteristic.
Negative		
Not Known		
Race & Ethnicity	Y/N	Explanation, assessment and potential mitigations
Positive		At the present time there is not sufficient data available to assess the
No Impact		demand for and use of delegated health and social care services by black
Negative Not Known	X	and ethnic minority people, and therefore the impact of the budget on them as a specific group is not able to be accurately assessed at this time. It is
		known through wider research evidence that black and minority ethnic people experience inequalities in health and social care needs and outcomes, for example they were at a higher risk of death during the pandemic. Although it could be reasonable to theorise that proposal such as utilising reserves to maintain the range, choice and quality of health and social care services will benefit the 5% of the population of Dundee who describe their ethnicity as either Asian, African or Caribbean, further data is required to accurately assess impact.
Religion & Belief	Y/N	Explanation, assessment and potential mitigations
Positive		None of the budget proposals are considered to have any direct or indirect
No Impact	Χ	relevance to this protected characteristic.
Negative		
Not Known		
Sex	Y/N	Explanation, assessment and potential mitigations
Positive	Χ	Free personal care uprating – positive (females)
No Impact	Χ	Free personal care is available to anyone aged over 16 years of age in
Negative	Χ	Scotland. The majority of people who receive free personal care are older
Not Known		adults. Due to differences in life expectancy between males and females in Dundee, a higher proportion of people aged 65 and over are females. Uprating of personal care therefore has a direct positive impact on females in particular.  Adult Social Care Pay Uplift – positive (females) It is known that across Scotland 80% of adult social care staff are female.
		Pay uplifts for adult social care providers therefore has a significantly greater impact on females than males.  Redirect existing budget underspends – negative (mitigated) Redirections have been carefully planned to reflect changes in actual
		expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained



pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, both male and female, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.

### Maintenance of all non-direct social care external contract payments at 2023/24 level – negative (mitigated) (females)

External providers of social care services are experiencing a range of costs pressures, primarily due to high rates of inflation driving increased staffing and other operating costs. Although it is proposed that providers will receive an uplift inline with national policy on Adult Social Care Pay, this does not respond to increased costs for other staffing groups and wider operating costs. Maintenance of all non-direct social care external contract payments at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments. The HSCP continues to have in place a range of mechanisms for supporting external providers as they manage budgetary pressures, including provider support via a dedicated Social Care Contract Team and investment in Scottish Care Independent Sector Lead. These resources will continue to be deployed to support providers in their efforts to manage pressures within budget and to mitigate any potential risks to quality or continuity of service provision. All providers participate in regular contract monitoring arrangements, enabling any concerns to be addressed in a timely and proportionate way. Many providers are also subject to regulation and inspection requirements which provide an overview of any impact on service standards and quality. Both of these mechanisms are connected to the HSCP Clinical, Care and Professional Governance arrangements, which report regularly to the IJB. A range of provider forums are also in place and act as a forum through which providers can raise concerns and discuss solutions. A high proportion of people receiving services from these providers are older people (aged 65 and over) of which a greater proportion are female than are male, and therefore there is an indirect potential negative impact on them.

#### Reduction in Care Home Placements – no impact (females)

Due to differences in life expectancy between males and females in Dundee, a higher proportion of people aged 65 and over are females. Care Home placements for older people have been reducing for a number of years; this reflects the strategic intention to shift the balance of care to community settings set out in successive IJB strategic commissioning plans as well as in national policy and strategy. It also reflects changes in people's preferences and market conditions across the care home sector, particularly following the COVID-19 pandemic. The HSCP is projecting a further reduction in need and demand for care home placements in 2024/25 and therefore a related decrease in the cost of placements. Actual in-year demand for placements will be monitored via operational management teams and any excess need / demand will be identified and managed accordingly. A personalised approach to assessment and care planning will continue maintain access to care home placements for people whose need for support and preference indicates this is the most suitable provision for them.

Utilisation of reserves - positive



The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services. As older people are the largest proportion of people utilising health and social care services this will impact on them more significantly than other groups within the population. Due to differences in life expectancy between males and females in Dundee, a higher proportion of people aged 65 and over are females.

### <u>Management of staff turnover (continuation of 2023/24 and in-year management) – negative (mitigated) (females)</u>

As 87% of the DHSCP workforce is female any actions to manage staff turnover will disproportionately impact upon them. However, proposals in the budget relating to management of staff turnover reflect wider challenges in recruitment and retention for the health and social care sector within the UK. The proposal reflects the cumulative value of periods for which posts are vacant because they are unable to be filled despite ongoing recruitment activity. It does not reflect any policy decision to purposefully stop or slow recruitment to posts. The DHSCP will continue to work with NHS Tayside, Dundee City Council, Trade Unions and national bodies on a range of recruitment and retention initiatives with the aiming of improving the staffing position across the workforce, however in the meantime it is reasonable to assume some posts will be vacant for periods of time and that the value associated with that can be utilised to contribute to a balanced budget. Potential negative impact will also be mitigated through ongoing monitoring of expenditure against budget, reported to the IJB at each meeting. If the recruitment and retention position significantly improves, impacting the actual value of vacancies, this will be escalated through that report (where necessary a further impact assessment will be completed to accompany any proposals to address this issue). The Partnership's Workforce Planning Group also receives data about recruitment, retention and vacancies and will monitor the position on an ongoing basis, escalating any matters of concern to the senior leadership team. This is also a continuation of an approach implemented in 2023/24 from which no specific equality and fairness impact concerns are known to have arisen to date.

#### Return of additional investment from prescribing – no impact (females)

Due to differences in life expectancy between males and females in Dundee, a higher proportion of people aged 65 and over are females. A significant proportion of prescribing activity in Dundee is directed to meet the health needs of older people. Prescribing volume and pricing growth has not increased at the rate expected during 2023/24, and this is anticipated to continue in 2024/25. The budget for this area has therefore been realigned to reflect projected spend in 2024/25 based on current information and does not represent a reduction in service / availability of medicines when they are required. Prescribing activity and spend is closely monitored via the Prescribing Management Group, with an overview provided to the IJB via regular budget monitoring reports. Any variation from projected spend will therefore be quickly identified and subject to appropriate action.

#### Service Reviews (preliminary assessment only)

It is anticipated that the following service reviews might have a direct impact on female service users (primarily because they are a greater proportion of all older people):



Review of Day Care Services - unknown potential impacts at this time. Review of Direct Payment Commitments – predicted no impact, as this represents a focus on ensuring unspent balances are returned rather than any underlying change in the provision of services and supports. Care at Home Contract Efficiency Review - anticipated positive impact as review is to focus on maximising service user contact time. At the present time 62% of people receiving care at home services are female. Review of Residual Practical Support Service – unknown potential impacts at this time, however are anticipated to be of small scale due to limited size of service. Across all of the above there are potential impacts for both members of the public who receive services and members of the workforce (as the majority of the social care workforce is female). Impact assessment for affected groups will be completed as part of the forthcoming service review processes. Y/N Sexual **Explanation**, assessment and potential mitigations Orientation Positive None of the budget proposals are considered to have any direct or indirect

Describe any Human Rights impacts not already covered in the Equality section above.

relevance to this protected characteristic.

None identified

No Impact Negative Not Known

PART 2- Assessment (continued)

**Fairness & Poverty Geography –** Describe how individuals, families and communities are affected in each area-particular consideration is needed where there are previously identified areas of deprivation.

Mark either Yes or no (Y or N) in each box

Χ

Y or N	Area		
Y/N	Strathmartine (Ardler, St. Mary's & Kirkton)		
Χ	Positive		
	No Impact		
Χ	Negative		
	Not Known		
Y/N	Lochee (Lochee Beechwood, Charleston & Menzieshill)		
Χ	Positive		
	No Impact		
Χ	Negative		
	Not Known		
Y/N	Coldside (Hilltown, Fairmuir & Coldside)		
X	Positive		
	No Impact		
X	Negative		
	Not Known		

Fairness Explain Impact / Mitigations / Unknowns (Note: this section of the record asks for a single, collective narrative for each of positive, negative, or not known given as a response in one or more areas)

<u>Redirect existing budget underspends – negative</u> (mitigated)

Redirections have been carefully planned to reflect changes in actual expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including those who live in areas of multiple deprivation, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial



Dundee Integration Joint Board I				
Y/N	Maryfield (Stobswe	<i>  </i>	&	City
	Centre)			
X	Positive			
	No Impact			
Χ	Negative			
I	Not Known			
Y/N	North East (Whitfield, O'Mains)	, Fin	try (	& Mill
Χ	Positive			
	No Impact			
Χ	Negative			
	Not Known			
Y/N	East End (Mid Craigie	, Lii	nlatl	hen &
	Douglas)			
X	Positive			
	No Impact			
X	Negative			
	Not Known			
Y/N	The Ferry			
Χ	Positive			
	No Impact			
	Negative			
	Not Known			
Y/N	West End			
X	Positive			
	No Impact			
Χ	Negative			
	Not Known			

monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.

Maintenance of all non-direct social care external contract payments at 2023/24 level – negative (mitigated)

External providers of social care services are experiencing a range of costs pressures, primarily due to high rates of inflation driving increased staffing and other operating costs. Although it is proposed that providers will receive an uplift inline with national policy on Adult Social Care Pay, this does not respond to increased costs for other staffing groups and wider operating costs. Maintenance of all nondirect social care external contract payments at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments. The HSCP continues to have in place a range of mechanisms for supporting external providers as they manage budgetary pressures, including provider support via a dedicated Social Care Contract Team and investment in Scottish Care Independent Sector Lead. These resources will continue to be deployed to support providers in their efforts to manage pressures within budget and to mitigate any potential risks to quality or continuity of service provision. All contracted providers participate in regular contract monitoring arrangements, enabling any concerns to be addressed in a timely and proportionate way. Many providers are also subject to regulation and inspection requirements which provide an overview of any impact on service standards and quality. Both of these mechanisms are connected to the HSCP Clinical, Care and Professional Governance arrangements, which report regularly to the IJB. A range of provider forums are also in place and act as a forum through which providers can raise concerns and discuss solutions. A high proportion of people receiving services from these providers are people with the highest health and social care needs and who live in areas of multiple deprivation, and therefore there is an indirect potential negative impact on them.

#### <u>Utilisation of reserves - positive</u>

The IJB's strategic needs assessment clearly demonstrates that health and social care needs and outcomes are very closely associated with deprivation; with people from the most deprived areas having the highest levels of needs and poorest outcomes. The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services. As people from the most deprived areas of Dundee (SIMD 20%) have the greatest level of needs for services and supports this

proposal also has a greater direct positive impact on them than for other groups within the population.

#### Service Reviews (preliminary assessment only)

It is anticipated that the following service reviews might have a direct impact on fairness and poverty geography:

- Review of Day Care Services unknown potential impacts at this time. At this time 43% of people who receive day care services reside in SIMD 1 (most deprived) areas.
- Care at Home Contract Efficiency Review anticipated positive impact as review is to focus on maximising service user contact time. At this time 43% of people who receive day care services reside in SIMD 1 (most deprived) areas.
- Review of Transport unknown potential impacts at this time.
- Review of Use of Physical Resources / Quality of Environment - unknown potential impacts at this time.

Impact assessment for affected groups will be completed as part of the forthcoming service review processes.



## Dundee Integration Joint Board Integrated Impact Assessment Household Group- consider the impact on households and families may have the following people included.

Y/N	Looked After Children	Explanation, assessment and any potential mitigations
1714	& Care Leavers	Explanation, assessment and any potential initigations
	Positive	None of the budget proposals are considered to have any direct or
Χ	No Impact	indirect relevance to this fairness group.
	Negative	indirect relevance to this fairness group.
	Not Known	
Y/N	Carers	Explanation, acceptant and notantial mitigations
X		Explanation, assessment and potential mitigations
	Positive	Free personal care uprating – positive Free personal care is available to anyone aged over 16 years of
X	No Impact Negative Not Known	age in Scotland. The majority of people who receive free personal care are older adults. Through their close connection to older people, uprating of personal care therefore has an indirect positive impact.
		Redirect existing budget underspends – negative (mitigated) Redirections have been carefully planned to reflect changes in actual expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on unpaid carers, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.
		Maintenance of all non-direct social care external contract payments at 2023/24 level – negative (mitigated)  External providers of social care services are experiencing a range of costs pressures, primarily due to high rates of inflation driving increased staffing and other operating costs. Although it is proposed that providers will receive an uplift inline with national policy on Adult Social Care Pay, this does not respond to increased costs for other staffing groups and wider operating costs. Maintenance of all non-direct social care external contract payments at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments. The HSCP continues to have in place a range of mechanisms for supporting external providers as they manage budgetary pressures, including provider support via a dedicated Social Care Contract Team and investment in Scottish Care Independent Sector Lead. These resources will continue to be deployed to support providers in their efforts to manage pressures within budget and to mitigate any potential risks to quality or continuity of service provision. All contracted providers participate in regular contract monitoring arrangements, enabling any concerns to be addressed in a timely and proportionate way. External provision includes services specifically contracted to meet the needs of unpaid carers, and there is an indirect potential negative impact on them.
		Utilisation of reserves - positive The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of

		service delivery. The use of reserves has meant that the IJB is not
		considering savings proposals that might result in reduced availability, choice or levels of services, including services and supports for unpaid carers. The potential impact of this proposal on protected and disadvantaged groups is outlined in other sections of the impact assessment. However, through their close connection to people within these groups unpaid carers might also be positively impacted by this proposal.
		Service Reviews (preliminary assessment only)
		It is anticipated that the following service reviews might have a direct impact on carers:
		<ul> <li>Review of Day Care Services - unknown potential impacts at this time.</li> </ul>
		<ul> <li>Care at Home Contract Efficiency Review - anticipated positive impact as review is to focus on maximising service user contact time.</li> </ul>
		<ul> <li>Review of Transport - unknown potential impacts at this time.</li> </ul>
		<ul> <li>Review of Use of Physical Resources / Quality of Environment - unknown potential impacts at this time</li> <li>Review of Contractual Commitments - unknown potential impacts at this time.</li> </ul>
		<ul> <li>Review of Residual Practical Support Service - unknown potential impacts at this time, however are anticipated to be of small scale due to limited size of service.</li> </ul>
		Impact assessment for affected groups will be completed as part of the forthcoming service review processes.
Y/N	Lone Parent Families	Explanation, assessment and potential mitigations
3.4	Positive	None of the budget proposals are considered to have any direct or
X	No Impact Negative	indirect relevance to this fairness group.
	INCUALIVE	
Y/N	Not Known Single Female with Children	Explanation, assessment and any potential mitigations
Y/N X	Not Known Single Female with Children Positive	Adult Social Care Pay Uplift – positive
X	Not Known Single Female with Children Positive No Impact	Adult Social Care Pay Uplift – positive  It is known that across Scotland 80% of adult social care staff are
	Not Known  Single Female with Children  Positive No Impact Negative	Adult Social Care Pay Uplift – positive  It is known that across Scotland 80% of adult social care staff are female. Pay uplifts for adult social care providers therefore have a
X	Not Known Single Female with Children Positive No Impact	Adult Social Care Pay Uplift – positive  It is known that across Scotland 80% of adult social care staff are female. Pay uplifts for adult social care providers therefore have a significantly greater impact on females than males.
X	Not Known  Single Female with Children  Positive No Impact Negative	Adult Social Care Pay Uplift – positive It is known that across Scotland 80% of adult social care staff are female. Pay uplifts for adult social care providers therefore have a significantly greater impact on females than males.  Management of staff turnover (continuation of 2023/24 and in-year)
X	Not Known  Single Female with Children  Positive No Impact Negative	Adult Social Care Pay Uplift – positive It is known that across Scotland 80% of adult social care staff are female. Pay uplifts for adult social care providers therefore have a significantly greater impact on females than males.  Management of staff turnover (continuation of 2023/24 and in-year management) – negative (mitigated)
X	Not Known  Single Female with Children  Positive No Impact Negative	Adult Social Care Pay Uplift – positive It is known that across Scotland 80% of adult social care staff are female. Pay uplifts for adult social care providers therefore have a significantly greater impact on females than males.  Management of staff turnover (continuation of 2023/24 and in-year)
X	Not Known  Single Female with Children  Positive No Impact Negative	Adult Social Care Pay Uplift – positive It is known that across Scotland 80% of adult social care staff are female. Pay uplifts for adult social care providers therefore have a significantly greater impact on females than males.  Management of staff turnover (continuation of 2023/24 and in-year management) – negative (mitigated) As 87% of the DHSCP workforce is female any actions to manage staff turnover will disproportionately impact upon them. However, proposals in the budget relating to management of staff turnover
X	Not Known  Single Female with Children  Positive No Impact Negative	Adult Social Care Pay Uplift – positive It is known that across Scotland 80% of adult social care staff are female. Pay uplifts for adult social care providers therefore have a significantly greater impact on females than males.  Management of staff turnover (continuation of 2023/24 and in-year management) – negative (mitigated) As 87% of the DHSCP workforce is female any actions to manage staff turnover will disproportionately impact upon them. However, proposals in the budget relating to management of staff turnover reflect wider challenges in recruitment and retention for the health
X	Not Known  Single Female with Children  Positive No Impact Negative	Adult Social Care Pay Uplift – positive  It is known that across Scotland 80% of adult social care staff are female. Pay uplifts for adult social care providers therefore have a significantly greater impact on females than males.  Management of staff turnover (continuation of 2023/24 and in-year management) – negative (mitigated)  As 87% of the DHSCP workforce is female any actions to manage staff turnover will disproportionately impact upon them. However, proposals in the budget relating to management of staff turnover reflect wider challenges in recruitment and retention for the health and social care sector within the UK. The proposal reflects the
X	Not Known  Single Female with Children  Positive No Impact Negative	Adult Social Care Pay Uplift – positive It is known that across Scotland 80% of adult social care staff are female. Pay uplifts for adult social care providers therefore have a significantly greater impact on females than males.  Management of staff turnover (continuation of 2023/24 and in-year management) – negative (mitigated) As 87% of the DHSCP workforce is female any actions to manage staff turnover will disproportionately impact upon them. However, proposals in the budget relating to management of staff turnover reflect wider challenges in recruitment and retention for the health and social care sector within the UK. The proposal reflects the cumulative value of periods for which posts are vacant because they are unable to be filled despite ongoing recruitment activity. It
X	Not Known  Single Female with Children  Positive No Impact Negative	Adult Social Care Pay Uplift – positive It is known that across Scotland 80% of adult social care staff are female. Pay uplifts for adult social care providers therefore have a significantly greater impact on females than males.  Management of staff turnover (continuation of 2023/24 and in-year management) – negative (mitigated) As 87% of the DHSCP workforce is female any actions to manage staff turnover will disproportionately impact upon them. However, proposals in the budget relating to management of staff turnover reflect wider challenges in recruitment and retention for the health and social care sector within the UK. The proposal reflects the cumulative value of periods for which posts are vacant because they are unable to be filled despite ongoing recruitment activity. It does not reflect any policy decision to purposefully stop recruitment
X	Not Known  Single Female with Children  Positive No Impact Negative	Adult Social Care Pay Uplift – positive It is known that across Scotland 80% of adult social care staff are female. Pay uplifts for adult social care providers therefore have a significantly greater impact on females than males.  Management of staff turnover (continuation of 2023/24 and in-year management) – negative (mitigated) As 87% of the DHSCP workforce is female any actions to manage staff turnover will disproportionately impact upon them. However, proposals in the budget relating to management of staff turnover reflect wider challenges in recruitment and retention for the health and social care sector within the UK. The proposal reflects the cumulative value of periods for which posts are vacant because they are unable to be filled despite ongoing recruitment activity. It

		it is reasonable to assume some posts will be vacant for periods of time and that the value associated with that can be utilised to contribute to a balanced budget. Potential negative impact will also be mitigated through ongoing monitoring of expenditure against budget, reported to the IJB at each meeting. If the recruitment and retention position significantly improves, impacting the actual value of vacancies, this will be escalated through that report (where necessary a further impact assessment will be completed to accompany any proposals to address this issue). The Partnership's Workforce Planning Group also receives data about recruitment, retention and vacancies and will monitor the position on an ongoing basis, escalating any matters of concern to the senior leadership team. This is also a continuation of an approach implemented in 2023/24 from which no specific equality and fairness impact concerns have arisen to date.
		Service Reviews (preliminary assessment only)  It is anticipated that the following service reviews might have a direct impact on single females with children, as women are the majority of the health and social care workforce:
		<ul> <li>Review of Day Care Services - unknown potential impacts at this time.</li> <li>Care at Home Contract Efficiency Review - unknown potential impacts at this time.</li> <li>Review of Contractual Commitments - unknown potential impacts at this time.</li> <li>Review of Residual Practical Support Service - unknown potential impacts at this time.</li> </ul>
		Impact assessment for affected groups will be completed as part of the forthcoming service review processes.
Y/N	Young Children and/or Greater Number of Children	Explanation, assessment and potential mitigations
X	Positive No Impact Negative	None of the budget proposals are considered to have any direct or indirect relevance to this fairness group.
	Not Known	
Y/N	Retirement Pensioner (s)	Explanation, assessment and potential mitigations
X	Positive	Free personal care uprating – positive
X	No Impact	Free personal care is available to anyone aged over 16 years of
X	Negative Not Known	age in Scotland. The majority of people who receive free personal care are older adults. Uprating of personal care therefore has a
	INOU KITOWIT	direct positive impact.
		Redirect existing budget underspends – negative (mitigated) Redirections have been carefully planned to reflect changes in actual expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including older people, recommendations for reductions are in areas where



risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.

### <u>Maintenance of all non-direct social care external contract</u> payments at 2023/24 level – negative (mitigated)

External providers of social care services are experiencing a range of costs pressures, primarily due to high rates of inflation driving increased staffing and other operating costs. Although it is proposed that providers will receive an uplift inline with national policy on Adult Social Care Pay, this does not respond to increased costs for other staffing groups and wider operating costs. Maintenance of all non-direct social care external contract payments at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments. The HSCP continues to have in place a range of mechanisms for supporting external providers as they manage budgetary pressures, including provider support via a dedicated Social Care Contract Team and investment in Scottish Care Independent Sector Lead. These resources will continue to be deployed to support providers in their efforts to manage pressures within budget and to mitigate any potential risks to quality or continuity of service provision. All contracted providers participate in regular contract monitoring arrangements, enabling any concerns to be addressed in a timely and proportionate way. Many providers are also subject to regulation and inspection requirements which provide an overview of any impact on service standards and quality. Both of these mechanisms are connected to the HSCP Clinical, Care and Professional Governance arrangements, which report regularly to the IJB. A range of provider forums are also in place and act as a forum through which providers can raise concerns and discuss solutions. A high proportion of people receiving services from these providers are older people (aged 65 and over), and therefore there is an indirect potential negative impact on them.

#### Reduction in Care Home Placements - no impact

Care Home placements for older people have been reducing for a number of years; this reflects the strategic intention to shift the balance of care to community settings set out in successive IJB strategic commissioning plans as well as in national policy and strategy. It also reflects changes in people's preferences and market conditions across the care home sector, particularly following the COVID-19 pandemic. The HSCP is projecting a further reduction in need and demand for care home placements in 2024/25 and therefore a related decrease in the cost of placements. Actual in-year demand for placements will be monitored via operational management teams and any excess need / demand will be identified and managed accordingly. A personalised approach to assessment and care planning will continue to maintain access to care home placements for people whose need for support and personal preference indicates this is the most suitable provision for them.

Utilisation of reserves - positive

The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services. As older people are the largest proportion of people utilising health and social care services this will impact on them more significantly than other groups within the population.

#### Return of additional investment from prescribing – no impact

Due to differences in life expectancy between males and females in Dundee, a higher proportion of people aged 65 and over are females. A significant proportion of prescribing activity in Dundee is directed to meet the health needs of older people. Prescribing volume and pricing growth has not increased at the rate expected during 2023/24, and this is anticipated to continue in 2024/25. The budget for this area has therefore been realigned to reflect projected spend in 2024/25 based on current information and does not represent a reduction in service / availability of medicines when they are required. Prescribing activity and spend is closely monitored via the Prescribing Management Group, with an overview provided to the IJB via regular budget monitoring reports. Any variation from projected spend will therefore be quickly identified and subject to appropriate action.

#### Service Reviews (preliminary assessment only)

It is anticipated that the following service reviews might have a direct impact on older people:

- Review of Day Care Services unknown potential impacts at this time.
- Review of Direct Payment Commitments predicted no impact, as this represents a focus on ensuring unspent balances are returned rather than any underlying change in the provision of services and supports.
- Care at Home Contract Efficiency Review anticipated positive impact as review is to focus on maximising service user contact time.
- Review of Residual Practical Support Service unknown potential impacts at this time, however are anticipated to be of small scale due to limited size of service.

Impact assessment for affected groups will be completed as part of the forthcoming service review processes.

Y/N	Unskilled Workers and	Explanation, assessment and any potential mitigations
	Unemployed	
	Positive	Management of staff turnover (continuation of 2023/24 and in-year
	No Impact	management) - negative (mitigated)
Χ	Negative	Proposals to manage staff turnover could impact on employment
	Not Known	opportunities within the health and social care sector for unemployed people. However, proposals relate to wider challenges in recruitment and retention for the health and social care sector within the UK. The proposal reflects the cumulative value of periods for which posts are vacant because they are unable to be filled despite ongoing recruitment activity. It does not reflect any policy



Dui	idee iiitegration som	it Board integrated impact Assessment
		decision to purposefully stop recruitment to posts. The DHSCP will continue to work with NHS Tayside, Dundee City Council, Trade Unions and national bodies on a range of recruitment and retention initiatives with the aiming of improving the staffing position across the workforce, however in the meantime it is reasonable to assume some posts will be vacant for periods of time and that the value associated with that can be utilised to contribute to a balanced budget. Potential negative impact will also be mitigated through ongoing monitoring of expenditure against budget, reported to the IJB at each meeting. If the recruitment and retention position significantly improves, impacting the actual value of vacancies, this will be escalated through that report (where necessary a further impact assessment will be completed to accompany any proposals to address this issue). The Partnership's Workforce Planning Group also receives data about recruitment, retention and vacancies and will monitor the position on an ongoing basis, escalating any matters of concern to the senior leadership team. This is also a continuation of an approach implemented in 2023/24 from which no specific equality and fairness impact concerns have arisen to date.
Y/N	Serious & Enduring Mental Health	Explanation, assessment and potential mitigations
X	Positive	Redirect existing budget underspends – negative (mitigated)
X	No Impact	Redirections have been carefully planned to reflect changes in
Χ	Negative	actual expenditure recorded historically across operational service
		been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including people with poor mental health and wellbeing, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.
		Maintenance of all non-direct social care external contract payments at 2023/24 level – negative (mitigated)  External providers of social care services are experiencing a range of costs pressures, primarily due to high rates of inflation driving increased staffing and other operating costs. Although it is proposed that providers will receive an uplift inline with national policy on Adult Social Care Pay, this does not respond to increased costs for other staffing groups and wider operating costs. Maintenance of all non-direct social care external contract payments at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments. The HSCP continues to have in place a range of mechanisms for supporting external providers as they manage budgetary pressures, including provider support via a dedicated Social Care Contract Team and investment in Scottish Care Independent Sector Lead. These resources will continue to be deployed to support providers in their efforts to manage pressures within budget and to mitigate any potential risks to quality or continuity of service



monitoring arrangements, enabling any concerns to be addressed in a timely and proportionate way. Many providers are also subject to regulation and inspection requirements which provide an overview of any impact on service standards and quality. Both of these mechanisms are connected to the HSCP Clinical, Care and Professional Governance arrangements, which report regularly to the IJB. A range of provider forums are also in place and act as a forum through which providers can raise concerns and discuss solutions. A proportion of people receiving services from these providers are people with poor mental health and wellbeing, and therefore there is an indirect potential negative impact on them.

#### Reduction in Care Home Placements – no impact

Care Home placements for older people have been reducing for a number of years; this reflects the strategic intention to shift the balance of care to community settings set out in successive IJB strategic commissioning plans as well as in national policy and strategy. It also reflects changes in people's preferences and market conditions across the care home sector, particularly following the COVID-19 pandemic. The HSCP is projecting a further reduction in need and demand for care home placements in 2024/25 and therefore a related decrease in the cost of placements. Actual in-year demand for placements will be monitored via operational management teams and any excess need / demand will be identified and managed accordingly. A personalised approach to assessment and care planning will continue to maintain access to care home placements for people whose need for support and personal preference indicates this is the most suitable provision for them. This will include for older people with serious mental ill health, such as dementia.

#### Utilisation of reserves - positive

The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services. As people with mental health care and support needs are a significant proportion of people utilising health and social care services this will impact on them more significantly than other groups within the population.

#### Return of additional investment from prescribing – no impact

A significant proportion of prescribing activity in Dundee is directed to meet the health needs of people with poor mental health and wellbeing. Prescribing volume and pricing growth has not increased at the rate expected during 2023/24, and this is anticipated to continue in 2024/25. The budget for this area has therefore been realigned to reflect projected spend in 2024/25 based on current information and does not represent a reduction in service / availability of medicines when they are required. Prescribing activity and spend is closely monitored via the Prescribing Management Group, with an overview provided to the IJB via regular budget monitoring reports. Any variation from projected spend will therefore be quickly identified and subject to appropriate action.



Service Reviews (preliminary assessment only) It is anticipated that the following service reviews might have a direct impact on mental health and wellbeing: Review of Day Care Services – unknown potential impacts at this time. Review of Direct Payment Commitments - predicted no impact, as this represents a focus on ensuring unspent balances are returned rather than any underlying change in the provision of services and supports. Review of Transport - unknown potential impacts at this time. However, part of the review's aim is to have a transparent and equitable approach to the provision of transport. Review of Use of Physical Resources / Quality of Environment - anticipated positive impact as review is to focus on offering an improved quality of environment. Review of Contractual Commitments - unknown potential impacts at this time. Review of Residual Practical Support Service – unknown potential impacts at this time, however are anticipated to be of small scale due to limited size of service. Impact assessment for affected groups will be completed as part of the forthcoming service review processes. Y/N Homeless **Explanation, assessment and potential mitigations** Redirect existing budget underspends – negative (mitigated) Χ Positive No Impact Redirections have been carefully planned to reflect changes in actual expenditure recorded historically across operational service Χ Negative budgets. Redirection has only been recommended where there has Not Known been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including people who are homeless or at risk of homelessness, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response. Maintenance of all non-direct social care external contract payments at 2023/24 level – negative (mitigated) External providers of social care services are experiencing a range of costs pressures, primarily due to high rates of inflation driving increased staffing and other operating costs. Although it is proposed that providers will receive an uplift inline with national policy on Adult Social Care Pay, this does not respond to increased costs for other staffing groups and wider operating costs. Maintenance of all non-direct social care external contract payments at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments. The HSCP continues to have in place a range of mechanisms for supporting external providers as they manage budgetary

pressures, including provider support via a dedicated Social Care Contract Team and investment in Scottish Care Independent



Sector Lead. These resources will continue to be deployed to support providers in their efforts to manage pressures within budget and to mitigate any potential risks to quality or continuity of service provision. All contracted providers participate in regular contract monitoring arrangements, enabling any concerns to be addressed in a timely and proportionate way. Many providers are also subject to regulation and inspection requirements which provide an overview of any impact on service standards and quality. Both of these mechanisms are connected to the HSCP Clinical. Care and Professional Governance arrangements, which report regularly to the IJB. A range of provider forums are also in place and act as a forum through which providers can raise concerns and discuss solutions. A proportion of people receiving services from these providers are people who are homeless (and have related health and social care needs such as poor mental health and / or drug and alcohol use), and therefore there is an indirect potential negative impact on them.

#### Utilisation of reserves - positive

The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services, including services and supports for homeless people.

See also sections on mental health, drug and alcohol and offenders as there is known to be greater levels of these health and social care needs within the homeless / at risk of homeless population.

# Y/N Drug and/or Alcohol X Positive X No Impact X Negative Not Known

### **Explanation, assessment and any potential mitigations**Redirect existing budget underspends – negative (mitigated)

Redirections have been carefully planned to reflect changes in actual expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including people who use drugs and alcohol, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.

### Maintenance of all non-direct social care external contract payments at 2023/24 level – negative (mitigated)

External providers of social care services are experiencing a range of costs pressures, primarily due to high rates of inflation driving increased staffing and other operating costs. Although it is proposed that providers will receive an uplift inline with national policy on Adult Social Care Pay, this does not respond to increased costs for other staffing groups and wider operating costs. Maintenance of all non-direct social care external contract payments at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments.



The HSCP continues to have in place a range of mechanisms for supporting external providers as they manage budgetary pressures, including provider support via a dedicated Social Care Contract Team and investment in Scottish Care Independent Sector Lead. These resources will continue to be deployed to support providers in their efforts to manage pressures within budget and to mitigate any potential risks to quality or continuity of service provision. All contracted providers participate in regular contract monitoring arrangements, enabling any concerns to be addressed in a timely and proportionate way. Many providers are also subject to regulation and inspection requirements which provide an overview of any impact on service standards and quality. Both of these mechanisms are connected to the HSCP Clinical, Care and Professional Governance arrangements, which report regularly to the IJB. A range of provider forums are also in place and act as a forum through which providers can raise concerns and discuss solutions. A proportion of people receiving services from these providers are people who use drugs and alcohol, and therefore there is an indirect potential negative impact on them.

#### <u>Utilisation of reserves - positive</u>

The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services, including drug and alcohol services.

#### Return of additional investment from prescribing – no impact

A significant proportion of prescribing activity in Dundee is directed to meet the health and treatment needs of people who use drugs and alcohol. Prescribing volume and pricing growth has not increased at the rate expected during 2023/24, and this is anticipated to continue in 2024/25. The budget for this area has therefore been realigned to reflect projected spend in 2024/25 based on current information and does not represent a reduction in service / availability of medicines when they are required. Prescribing activity and spend is closely monitored via the Prescribing Management Group, with an overview provided to the IJB via regular budget monitoring reports. Any variation from projected spend will therefore be quickly identified and subject to appropriate action.

Y/N	Offenders and Ex Offenders	- Explanation, assessment and any potential mitigations
	Positive	None of the budget proposals are considered to have any direct or
Χ	No Impact	relevance to this fairness group.
	Negative	
	Not Known	See sections on mental health and drug and alcohol as there is known to be greater levels of these health and care needs amongst people involved in community justice processes.

PART 2- Assessment (continued)

Soci	Socio-Economic Disadvantage- consider if the following circumstances may be impacted			
Y/N	<b>Employment Status</b>	Explanation, assessment and any potential mitigations		
	Positive	Management of staff turnover (continuation of 2023/24 and in-year		
	No Impact	management) – negative (mitigated)		



- Dui	AT C	
Χ	Negative	Proposals to manage staff turnover could impact on employment
	Not Known	opportunities within the health and social care sector for unemployed
		people. However, proposals relate to wider challenges in recruitment and
		retention for the health and social care sector within the UK. The proposal
		reflects the cumulative value of periods for which posts are vacant because
		they are unable to be filled despite ongoing recruitment activity. It does not
		reflect any policy decision to purposefully stop recruitment to posts. The
		DHSCP will continue to work with NHS Tayside, Dundee City Council,
		Trade Unions and national bodies on a range of recruitment and retention
		initiatives with the aiming of improving the staffing position across the
		workforce, however in the meantime it is reasonable to assume some
		posts will be vacant for periods of time and that the value associated with
		that can be utilised to contribute to a balanced budget. Potential negative
		impact will also be mitigated through ongoing monitoring of expenditure
		against budget, reported to the IJB at each meeting. If the recruitment and
		retention position significantly improves, impacting the actual value of
		vacancies, this will be escalated through that report (where necessary a
		further impact assessment will be completed to accompany any proposals
		to address this issue). The Partnership's Workforce Planning Group also
		receives data about recruitment, retention and vacancies and will monitor
		the position on an ongoing basis, escalating any matters of concern to the
		senior leadership team. This is also a continuation of an approach
		implemented in 2023/24 from which no specific equality and fairness
		impact concerns have arisen to date.
		impact concerns have ancom to date.
Y/N	Education & Skills	Explanation, assessment and any potential mitigations
1714	Positive	None of the budget proposals are considered to have any direct or indirect
- V	No Impost	
X	No Impact	relevance to this fairness group.
X	Negative	relevance to this fairness group.
	Negative Not Known	
Y/N	Negative Not Known Income	Explanation, assessment and any potential mitigations
	Negative Not Known	
Y/N	Negative Not Known Income	Explanation, assessment and any potential mitigations
Y/N	Negative Not Known Income Positive No Impact	Explanation, assessment and any potential mitigations  Adult Social Care Pay Uplift – positive
Y/N X	Negative Not Known Income Positive No Impact Negative	Explanation, assessment and any potential mitigations  Adult Social Care Pay Uplift – positive Pay uplifts for adult social care providers will directly increase incomes for
Y/N X	Negative Not Known Income Positive No Impact	Explanation, assessment and any potential mitigations  Adult Social Care Pay Uplift – positive  Pay uplifts for adult social care providers will directly increase incomes for those people employed in the sector.
Y/N X	Negative Not Known Income Positive No Impact Negative	Explanation, assessment and any potential mitigations  Adult Social Care Pay Uplift – positive Pay uplifts for adult social care providers will directly increase incomes for those people employed in the sector.  Management of staff turnover (continuation of 2023/24 and in-year)
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Y/N X	Negative Not Known Income Positive No Impact Negative	Explanation, assessment and any potential mitigations  Adult Social Care Pay Uplift – positive Pay uplifts for adult social care providers will directly increase incomes for those people employed in the sector.  Management of staff turnover (continuation of 2023/24 and in-year management) – negative (mitigated) Proposals in the budget relating to management of staff turnover reflect wider challenges in recruitment and retention for the health and social care sector within the UK. The proposal reflects the cumulative value of periods for which posts are vacant because they are unable to be filled despite ongoing recruitment activity. It does not reflect any policy decision to purposefully stop recruitment to posts which could negatively impact on income. The DHSCP will continue to work with NHS Tayside, Dundee City Council, Trade Unions and national bodies on a range of recruitment and retention initiatives with the aiming of improving the staff positioning across the workforce, however in the meantime it is reasonable to assume some posts will be vacant for periods of time and that the value associated with that can be utilised to contribute to a balanced budget. Potential negative impact will also be mitigated through ongoing monitoring of expenditure against budget, reported to the IJB at each meeting. If the recruitment and retention position significantly improves, impacting the actual value of vacancies, this will be escalated through that report (where necessary a further impact assessment will be completed to accompany any proposals



Dur	idee integration J	oint Board Integrated Impact Assessment
		senior leadership team. This is also a continuation of an approach implemented in 2023/24 from which no specific equality and fairness impact concerns have arisen to date.
Y/N	Fuel Poverty	Explanation, assessment and any potential mitigations
	Positive	None of the budget proposals are considered to have any direct or indirect
Χ	No Impact	relevance to this fairness group.
	Negative	
	Not Known	
Y/N	Caring Responsibilities (including Childcare)	Explanation, assessment and any potential mitigations
Χ	Positive	Free personal care uprating – positive
V	No Impact	Free personal care is available to anyone aged over 16 years of age in
X	Negative Not Known	Scotland. The majority of people who receive free personal care are older adults. Through their close connection to older people, uprating of personal care therefore has an indirect positive impact.
		Redirect existing budget underspends – negative (mitigated) Redirections have been carefully planned to reflect changes in actual expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on unpaid carers, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.
		Maintenance of all non-direct social care external contract payments at 2023/24 level – negative (mitigated)  External providers of social care services are experiencing a range of costs pressures, primarily due to high rates of inflation driving increased staffing and other operating costs. Although it is proposed that providers will receive an uplift inline with national policy on Adult Social Care Pay, this does not respond to increased costs for other staffing groups and wider operating costs. Maintenance of all non-direct social care external contract payments at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments. The HSCP continues to have in place a range of mechanisms for supporting external providers as they manage budgetary pressures, including provider support via a dedicated Social Care Contract Team and investment in Scottish Care Independent Sector Lead. These resources will continue to be deployed to support providers in their efforts to manage pressures within budget and to mitigate any potential risks to quality or continuity of service provision. All contracted providers participate in regular contract monitoring arrangements, enabling any concerns to be addressed in a timely and proportionate way. External provision includes services specifically contracted to meet the needs of unpaid carers, and there is an indirect potential negative impact on them.
		Reduction in Care Home Placements – negative (mitigated) Care Home placements have been reducing for a number of years; this reflects the strategic intention to shift the balance of care to community settings set out in successive IJB strategic commissioning plans as well as

in national policy and strategy. It also reflects changes in people's preferences and market conditions across the care home sector, particularly following the COVID-19 pandemic. The HSCP is projecting a further reduction in need and demand for care home placements in 2024/25 and therefore a related decrease in the cost of placements. Actual in-year demand for placements will be monitored via operational management teams and any excess need / demand will be identified and managed accordingly. A personalised approach to assessment and care planning will continue to maintain access to care home placements for people whose need for support and personal preference indicates this is the most suitable provision for them. This will include an approach to assessment and care planning that appropriately involves unpaid carers in both the assessment and planning for the cared for person, but also in relation to their own caring needs.

#### Utilisation of reserves - positive

The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services, including services and supports for unpaid carers. The potential impact of this proposal on protected and disadvantaged groups is outlined in other sections of the impact assessment. However, through their close connection to people within these groups unpaid carers might also be positively impacted by this proposal.

#### Service Reviews (preliminary assessment only)

It is anticipated that the following service reviews might have a direct impact on unpaid carers:

- Review of Day Care Services unknown potential impacts at this time.
- Care at Home Contract Efficiency Review anticipated positive impact as review is to focus on maximising service user contact time.
- Review of Transport unknown potential impacts at this time.
- Review of Use of Physical Resources / Quality of Environment unknown potential impacts at this time
- Review of Contractual Commitments unknown potential impacts at this time.
- Review of Residual Practical Support Service unknown potential impacts at this time, however are anticipated to be of small scale due to limited size of service.

Impact assessment for affected groups will be completed as part of the forthcoming service review processes.

Y/N	Affordability & Accessibility of Services	Explanation, assessment and any potential mitigations
Χ	Positive	Free personal care uprating – positive
	No Impact	Free personal care is only available to people aged 65 or over in Scotland.
Χ	Negative	Uprating of personal care therefore has a direct impact on the affordability
	Not Known	of services for that specific group.
		Redirect existing budget underspends – negative (mitigated)



Redirections have been carefully planned to reflect changes in actual expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including on the accessibility of services, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.

### Maintenance of all non-direct social care external contract payments at 2023/24 level – negative (mitigated)

External providers of social care services are experiencing a range of costs pressures, primarily due to high rates of inflation driving increased staffing and other operating costs. Although it is proposed that providers will receive an uplift inline with national policy on Adult Social Care Pay, this does not respond to increased costs for other staffing groups and wider operating costs. Maintenance of all non-direct social care external contract payments at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments. The HSCP continues to have in place a range of mechanisms for supporting external providers as they manage budgetary pressures, including provider support via a dedicated Social Care Contract Team and investment in Scottish Care Independent Sector Lead. These resources will continue to be deployed to support providers in their efforts to manage pressures within budget and to mitigate any potential risks to quality or continuity of service provision. All contracted providers participate in regular contract monitoring arrangements, enabling any concerns to be addressed in a timely and proportionate way. Many providers are also subject to regulation and inspection requirements which provide an overview of any impact on service standards and quality. Both of these mechanisms are connected to the HSCP Clinical, Care and Professional Governance arrangements, which report regularly to the IJB. A range of provider forums are also in place and act as a forum through which providers can raise concerns and discuss solutions. As services manage budgetary pressures there is some risk that changes to service models will impact the accessibility of services for people with health and social care needs and unpaid carers.

#### Utilisation of reserves - positive

The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services.

#### Service Reviews (preliminary assessment only)

It is anticipated that the following service reviews might have a direct impact on affordability and accessibility of services:

- Review of Day Care Services unknown potential impacts at this time.
- Review of Direct Payment Commitments predicted no impact, as this represents a focus on ensuring unspent balances are returned



rather than any underlying change financial payments or service accessibility.

- Review of Transport unknown potential impacts at this time.
- Review of Use of Physical Resources / Quality of Environment unknown potential impacts at this time.
- Review of Contractual Commitments unknown potential impacts at this time.
- Review of Residual Practical Support Service unknown potential impacts at this time, however are anticipated to be of small scale due to limited size of service.

Impact assessment for affected groups will be completed as part of the forthcoming service review processes.

Y/N	Connectivity / Internet Access	Explanation, assessment and any potential mitigations
	Positive	None of the budget proposals are considered to have any direct or indirect
Χ	No Impact	relevance to this fairness group.
	Negative	
	Not Known	
Y/N	Income / Benefit Advice / Income Maximisation	Explanation, assessment and any potential mitigations
Χ	Positive	Adult Social Care Pay Uplift – positive
	No Impact	Pay uplifts for adult social care providers will directly increase incomes for
Χ	Negative	those people employed in the sector.
	Not Known	
		management) – negative (mitigated) Proposals in the budget relating to management of staff turnover reflect wider challenges in recruitment and retention for the health and social care sector within the UK. The proposal reflects the cumulative value of periods for which posts are vacant because they are unable to be filled despite ongoing recruitment activity. It does not reflect any policy decision to purposefully stop recruitment to posts which could negatively impact on income. The DHSCP will continue to work with NHS Tayside, Dundee City Council, Trade Unions and national bodies on a range of recruitment and retention initiatives with the aiming of improving the staffing position across the workforce, however in the meantime it is reasonable to assume some posts will be vacant for periods of time and that the value associated with that can be utilised to contribute to a balanced budget. Potential negative impact will also be mitigated through ongoing monitoring of expenditure against budget, reported to the IJB at each meeting. If the recruitment and retention position significantly improves, impacting the actual value of vacancies, this will be escalated through that report (where necessary a further impact assessment will be completed to accompany any proposals to address this issue). The Partnership's Workforce Planning Group also receives data about recruitment, retention and vacancies and will monitor the position on an ongoing basis, escalating any matters of concern to the senior leadership team. This is also a continuation of an approach implemented in 2023/24 from which no specific equality and fairness impact concerns have arisen to date.



Y/N	Employment Opportunities	Explanation, assessment and any potential mitigations
	Positive	Management of staff turnover (continuation of 2023/24 and in-year
	No Impact	<u>management) – negative (mitigated)</u>
Χ	Negative	Proposals to manage staff turnover could impact on employment
	Not Known	opportunities within the health and social care sector for unemployed people. However, proposals relate to wider challenges in recruitment and retention for the health and social care sector within the UK. The proposal reflects the cumulative value of periods for which posts are vacant because they are unable to be filled despite ongoing recruitment activity. It does not reflect any policy decision to purposefully stop recruitment to posts. The DHSCP will continue to work with NHS Tayside, Dundee City Council, Trade Unions and national bodies on a range of recruitment and retention initiatives with the aiming of improving the staffing position across the workforce, however in the meantime it is reasonable to assume some posts will be vacant for periods of time and that the value associated with that can be utilised to contribute to a balanced budget. Potential negative impact will also be mitigated through ongoing monitoring of expenditure against budget, reported to the IJB at each meeting. If the recruitment and retention position significantly improves, impacting the actual value of vacancies, this will be escalated through that report (where necessary a further impact assessment will be completed to accompany any proposals to address this issue). The Partnership's Workforce Planning Group also receives data about recruitment, retention and vacancies and will monitor the position on an ongoing basis, escalating any matters of concern to the senior leadership team. This is also a continuation of an approach implemented in 2023/24 from which no specific equality and fairness impact concerns have arisen to date.



Explanation, assessment and any potential mitigations

Y/N

Education

	Positive	None of the budget proposals are considered to have any direct or indirect	
Χ	No Impact	relevance to this fairness group.	
	Negative	ŭ '	
	Not Known		
Y/N	Health	Explanation, assessment and any potential mitigations	
Χ	Positive	Free personal care uprating – positive	
Χ	No Impact	Free personal care makes a direct contribution to improving health	
Χ	Negative	outcomes for people aged 65 and over.	
	Not Known		
		Redirect existing budget underspends – negative (mitigated) Redirections have been carefully planned to reflect changes in actual expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including on health outcomes, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.	
		Reduction in Care Home Placements – no impact Care Home placements for older people have been reducing for a number of years; this reflects the strategic intention to shift the balance of care to community settings set out in successive IJB strategic commissioning plans as well as in national policy and strategy. It also reflects changes in people's preferences and market conditions across the care home sector, particularly following the COVID-19 pandemic. The HSCP is projecting a further reduction in need and demand for care home placements in 2024/25 and therefore a related decrease in the cost of placements. Actual in-year demand for placements will be monitored via operational management teams and any excess need / demand will be identified and managed accordingly. A personalised approach to assessment and care planning will continue to maintain access to care home placements for people whose need for support and personal preference indicates this is the most suitable provision for them.	
		Maintenance of all non-direct social care external contract payments at 2023/24 level – negative (mitigated)  External providers of social care services are experiencing a range of costs pressures, primarily due to high rates of inflation driving increased staffing and other operating costs. Although it is proposed that providers will receive an uplift inline with national policy on Adult Social Care Pay, this does not respond to increased costs for other staffing groups and wider operating costs. Maintenance of all non-direct social care external contract payments at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments. The HSCP continues to have in place a range of mechanisms for supporting external providers as they manage budgetary pressures, including provider support via a dedicated Social Care Contract Team and investment in Scottish Care Independent Sector Lead. These resources will continue to be	
		deployed to support providers in their efforts to manage pressures within	
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budget and to mitigate any potential risks to quality or continuity of service provision. All contracted providers participate in regular contract monitoring arrangements, enabling any concerns to be addressed in a timely and proportionate way. Many providers are also subject to regulation and inspection requirements which provide an overview of any impact on service standards and quality. Both of these mechanisms are connected to the HSCP Clinical, Care and Professional Governance arrangements, which report regularly to the IJB. A range of provider forums are also in place and act as a forum through which providers can raise concerns and discuss solutions. As services manage budgetary pressures there is some risk that changes to service models will impact the accessibility and positive impact of services for people with health and social care needs and unpaid carers.

#### Utilisation of reserves - positive

The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services or poorer health outcomes.

#### Return of additional investment from prescribing – no impact

Prescribing volume and pricing growth has not increased at the rate expected during 2023/24, and this is anticipated to continue in 2024/25. The budget for this area has therefore been realigned to reflect projected spend in 2024/25 based on current information and does not represent a reduction in service / availability of medicines when they are required. Prescribing activity and spend is closely monitored via the Prescribing Management Group, with an overview provided to the IJB via regular budget monitoring reports. Any variation from projected spend will therefore be quickly identified and subject to appropriate action.

#### Service Reviews (preliminary assessment only)

It is anticipated that the following service reviews might have a direct impact on health outcomes:

- Review of Day Care Services unknown potential impacts at this time.
- Review of Direct Payment Commitments predicted no impact, as this represents a focus on ensuring unspent balances are returned rather than any underlying provision of services and supports.
- Care at Home Contract Efficiency Review anticipated positive impact as review is to focus on maximising service user contact time.
- Review of Transport unknown potential impacts at this time.
- Review of Use of Physical Resources / Quality of Environment anticipated positive impact as review is to focus on offering an improved quality of environment, which is likely to have a positive impact of health outcomes.
- Review of Contractual Commitments unknown potential impacts at this time.
- Review of Residual Practical Support Service unknown potential impacts at this time, however are anticipated to be of small scale due to limited size of service.

Impact assessment for affected groups will be completed as part of the forthcoming service review processes.



Y/N	Life Expectancy	Explanation, assessment and any potential mitigations	
X	Positive	Redirect existing budget underspends – negative (mitigated)	
Χ	No Impact	Redirections have been carefully planned to reflect changes in actual	
X	Negative Not Known	expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including on life expectancy, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.  Utilisation of reserves - positive The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services or in the longer-term poorer life expectancy.	
		Return of additional investment from prescribing – no impact	
		Prescribing volume and pricing growth has not increased at the rate expected during 2023/24, and this is anticipated to continue in 2024/25. The budget for this area has therefore been realigned to reflect projected spend in 2024/25 based on current information and does not represent a reduction in service / availability of medicines when they are required. Prescribing activity and spend is closely monitored via the Prescribing Management Group, with an overview provided to the IJB via regular budget monitoring reports. Any variation from projected spend will therefore be quickly identified and subject to appropriate action.	
		Service Reviews (preliminary assessment only)	
		It is anticipated that the following service reviews might have a direct impact on life expectancy:	
		Care at Home Contract Efficiency Review - anticipated positive impact as review is to focus on maximising service user contact time.	
		<ul> <li>Review of Use of Physical Resources / Quality of Environment - anticipated positive impact as review is to focus on offering an improved quality of environment, which is likely to have a positive impact of health outcomes.</li> <li>Review of Contractual Commitments - unknown potential impacts</li> </ul>	
		at this time.  Impact assessment for affected groups will be completed as part of the	
		forthcoming service review processes.	
Y/N	Mental Health	Explanation, assessment and any potential mitigations	
X	Positive	Redirect existing budget underspends – negative (mitigated)	
X	No Impact	Redirections have been carefully planned to reflect changes in actual	
X	Negative	expenditure recorded historically across operational service budgets.	
	Not Known	Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no	



known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including people with poor mental health and wellbeing, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.

### Maintenance of all non-direct social care external contract payments at 2023/24 level – negative (mitigated)

External providers of social care services are experiencing a range of costs pressures, primarily due to high rates of inflation driving increased staffing and other operating costs. Although it is proposed that providers will receive an uplift inline with national policy on Adult Social Care Pay, this does not respond to increased costs for other staffing groups and wider operating costs. Maintenance of all non-direct social care external contract payments at 2023/24 levels will mean that providers will be required to manage cost pressures within existing contractual payments. The HSCP continues to have in place a range of mechanisms for supporting external providers as they manage budgetary pressures, including provider support via a dedicated Social Care Contract Team and investment in Scottish Care Independent Sector Lead. These resources will continue to be deployed to support providers in their efforts to manage pressures within budget and to mitigate any potential risks to quality or continuity of service provision. All contracted providers participate in regular contract monitoring arrangements, enabling any concerns to be addressed in a timely and proportionate way. Many providers are also subject to regulation and inspection requirements which provide an overview of any impact on service standards and quality. Both of these mechanisms are connected to the HSCP Clinical, Care and Professional Governance arrangements, which report regularly to the IJB. A range of provider forums are also in place and act as a forum through which providers can raise concerns and discuss solutions. As services manage budgetary pressures there is some risk that changes to service models will impact the accessibility and positive impact of services for people with mental health and wellbeing needs and unpaid carers.

#### Utilisation of reserves - positive

The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services or poorer health and wellbeing outcomes. As people with mental health care and support needs are a significant proportion of people utilising health and social care services this will impact on them more significantly than other groups within the population.

#### Return of additional investment from prescribing – no impact

A significant proportion of prescribing activity in Dundee is directed to meet the health needs of people with poor mental health and wellbeing. Prescribing volume and pricing growth has not increased at the rate expected during 2023/24, and this is anticipated to continue in 2024/25. The budget for this area has therefore been realigned to reflect projected spend in 2024/25 based on current information and does not represent a reduction in service / availability of medicines when they are required. Prescribing activity and spend is closely monitored via the Prescribing

		Management Group, with an overview provided to the IJB via regular budget monitoring reports. Any variation from projected spend will therefore be quickly identified and subject to appropriate action.  Service Reviews (preliminary assessment only)  It is anticipated that the following service reviews might have a direct impact on mental health and wellbeing:  Review of Day Care Services – unknown potential impacts at this time.  Review of Direct Payment Commitments - predicted no impact, as this represents a focus on ensuring unspent balances are returned rather than any underlying change in the provision of services and supports.  Review of Transport - unknown potential impacts at this time. However, part of the review's aim is to have a transparent and equitable approach to the provision of transport.  Review of Use of Physical Resources / Quality of Environment - anticipated positive impact as review is to focus on offering an improved quality of environment.  Review of Contractual Commitments - unknown potential impacts at this time.  Review of Residual Practical Support Service – unknown potential impacts at this time, however are anticipated to be of small scale due to limited size of service.  Impact assessment for affected groups will be completed as part of the forthcoming service review processes.
Y/N	Overweight / Obesity	Explanation, assessment and any potential mitigations
Χ	Positive	Redirect existing budget underspends – negative (mitigated)
	Positive No Impact	Redirections have been carefully planned to reflect changes in actual
X	Positive	
	Positive No Impact Negative Not Known	Redirections have been carefully planned to reflect changes in actual expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including people who are overweight / obese, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and
	Positive No Impact Negative Not Known	Redirections have been carefully planned to reflect changes in actual expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including people who are overweight / obese, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.  Utilisation of reserves - positive The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services or poorer health and wellbeing outcomes. This includes maintaining services and supports that make a contribution to tackling overweight / obesity.  Explanation, assessment and any potential mitigations
X	Positive No Impact Negative Not Known	Redirections have been carefully planned to reflect changes in actual expenditure recorded historically across operational service budgets. Redirection has only been recommended where there has been a sustained pattern of underspend over successive years and there are no known factors likely to disrupt this pattern during 2024/25. Although changes to operational service budgets will always have the potential to impact on service users, including people who are overweight / obese, recommendations for reductions are in areas where risk of impact has been assessed as being very low. Financial monitoring at service level, through the senior management team and via reporting to the IJB provides mitigation, as any budget variances will be identified at an early stage and subject to appropriate response.  Utilisation of reserves - positive The proposal to utilise reserves aims to enable the IJB to set a balanced budget whilst also maintaining levels and quality of service delivery. The use of reserves has meant that the IJB is not considering savings proposals that might result in reduced availability, choice or levels of services or poorer health and wellbeing outcomes. This includes maintaining services and supports that make a contribution to tackling overweight / obesity.



	Negative	
	Not Known	
Y/N	Neighbourhood Satisfaction	Explanation, assessment and any potential mitigations
	Positive	None of the budget proposals are considered to have any direct or indirect
Χ	No Impact	relevance to this fairness group.
	Negative	
	Not Known	
Y/N	Transport	Explanation, assessment and any potential mitigations
	Positive	None of the budget proposals are considered to have any direct or indirect
Χ	No Impact	relevance to this fairness group.
	Negative	
	Not Known	Service Reviews (preliminary assessment only)
		It is anticipated that the following service reviews might have a direct impact on transport:
		<ul> <li>Review of Day Care Services - unknown potential impacts at this time.</li> </ul>
		<ul> <li>Review of Transport - unknown potential impacts at this time.</li> </ul>
		Impact assessment for affected groups will be completed as part of the forthcoming service review processes.

#### PART 2- Assessment (continued)

	ronmont Climate Ch		
	Environment- Climate Change		
Y/N	Mitigating	Explanation, assessment and any potential mitigations	
	<b>Greenhouse Gases</b>		
	Positive	None of the budget proposals are considered to have any direct or indirect	
Χ	No Impact	relevance to this factor.	
	Negative		
	Not Known		
Y/N	Adapting to the Effects of Climate	Explanation, assessment and any potential mitigations	
	Change		
		None of the budget proposals are considered to have any direct or indirect	
X	Change	None of the budget proposals are considered to have any direct or indirect relevance to this factor.	
X	Change Positive		



# **Dundee Integration Joint Board Integrated Impact Assessment**PART 2- Assessment (continued)

Res	esource Use		
Y/N	Energy Efficiency and	Explanation, assessment and any potential mitigations	
	Consumption		
	Positive	None of the budget proposals are considered to have any	
X	No Impact	direct or indirect relevance to this factor.	
	Negative		
	Not Known	Service Reviews (preliminary assessment only)	
		It is anticipated that the following service reviews might have a direct impact on energy efficiency and consumption:	
		<ul> <li>Review of Day Care Services - unknown potential impacts at this time.</li> <li>Review of Transport - unknown potential impacts at this time.</li> </ul>	
		<ul> <li>Review of Use of Physical Resources / Quality of Environment - unknown potential impacts at this time.</li> </ul>	
		Impact assessment for affected groups will be completed as part of the forthcoming service review processes.	
Y/N	Prevention, Reduction, Re-use, Recovery, or Recycling of Waste	Explanation, assessment and any potential mitigations	
	Positive	None of the budget proposals are considered to have any	
X	No Impact	direct or indirect relevance to this factor.	
	Negative		
	Not Known		
Y/N	Sustainable Procurement	Explanation, assessment and any potential mitigations	
	Positive	None of the budget proposals are considered to have any	
Χ	No Impact	direct or indirect relevance to this factor.	
	Negative		
	Not Known		

Tran	Transport		
Y/N	Accessible Transport Provision	Explanation, assessment and any potential mitigations	
	Positive	None of the budget proposals are considered to have any	
Χ	No Impact	direct or indirect relevance to this factor.	
	Negative		
	Not Known	Service Reviews (preliminary assessment only)	
		It is anticipated that the following service reviews might have a direct impact on accessible transport:	
		<ul> <li>Review of Day Care Services - unknown potential impacts at this time.</li> <li>Review of Transport - unknown potential impacts at this time.</li> </ul>	
		Impact assessment for affected groups will be completed as part of the forthcoming service review processes.	
Y/N	Sustainable Modes of Transport	Explanation, assessment and any potential mitigations	
	Positive	None of the budget proposals are considered to have any	
Χ	No Impact	direct or indirect relevance to this factor.	



Negative	
Not Known	Service Reviews (preliminary assessment only)
	It is anticipated that the following service reviews might have a direct impact on sustainable transport:
	<ul> <li>Review of Day Care Services - unknown potential impacts at this time.</li> <li>Review of Transport - unknown potential impacts at this time.</li> </ul>
	Impact assessment for affected groups will be completed as part of the forthcoming service review processes.

Nati	ural Environment	
Y/N	Air, Land and Water Quality	Explanation, assessment and any potential mitigations
	Positive	None of the budget proposals are considered to have any
X	No Impact	direct or indirect relevance to this factor.
	Negative	
	Not Known	
Y/N	Biodiversity	Explanation, assessment and any potential mitigations
	Positive	None of the budget proposals are considered to have any
X	No Impact	direct or indirect relevance to this factor.
	Negative	
	Not Known	
Y/N	Open and Green Spaces	Explanation, assessment and any potential mitigations
	Positive	None of the budget proposals are considered to have any
X	No Impact	direct or indirect relevance to this factor.
	Negative	
	Not Known	

Buil	Built Environment		
Y/N	Built Heritage	Explanation, assessment and any potential mitigations	
	Positive	None of the budget proposals are considered to have any	
Χ	0 1 1	direct or indirect relevance to this factor.	
	Negative		
	Not Known		
Y/N	Housing	Explanation, assessment and any potential mitigations	
	Positive	None of the budget proposals are considered to have any	
Χ	No Impact	direct or indirect relevance to this factor.	
	Negative		
	Not Known	Service Reviews (preliminary assessment only)	
		It is anticipated that the following service reviews might have a direct impact on housing:	
		<ul> <li>Review of Use of Physical Resources / Quality of Environment – unknown impacts at this time.</li> </ul>	
		Impact assessment for affected groups will be completed as part of the forthcoming service review processes.	



PART 2- Assessment (continued)

There is a requirement to assess plans that are likely to have significant environmental effects.

SEA provides economic, social and environmental benefits to current and future generations.

Use the <u>SEA flowchart</u> to determine whether your proposal requires SEA.

Strategic Environmental Assessment- SELECT One of the following statements		
X	No further action is required as it does not qualify as a Plan, Programme or Strategy as defined by the Environmental Assessment (Scotland) Act 2005	(No further response needed)
	It has been determined that the proposal will have no or minimal environmental effects. The reason(s) for this determination are set out in the following SEA pre-screening determination section	SEA Pre-Screening Determination: Explain how you made the determination that the Plan, Programme or Strategy will have no or minimal negative environmental effect:
	Screening has determined that the proposal is unlikely to have any significant environmental effects. The reason(s) for this determination are set out in the Screening Report, a copy of which will be available to view at www.dundeecity.gov.uk/cplanning/sea	Insert the 'Summary of Environmental Effects' from your SEA screening report
	Screening has determined that the proposal is likely to have significant environmental effects and as a consequence an environmental assessment is necessary. A Scoping Report, which will determine the scope of the environmental assessment is being prepared for submission to the statutory Consultation Authorities for consideration	Insert the 'Summary of Environmental Effects' from your SEA screening report
	Screening determined that the proposal was likely to have significant environmental effects and as a consequence an environmental assessment was necessary. An Environmental Report has been prepared for submission to the statutory Consultation Authorities together with a draft Plan, Programme or Strategy for consideration. A copy of the Environmental Report will be available to view at <a href="https://www.dundeecity.gov.uk/cplanning/sea">www.dundeecity.gov.uk/cplanning/sea</a>	Environmental Implications: Describe the implications of the proposal on the characteristics identified:
		Proposed Mitigating Actions: Describe any mitigating actions which you propose to take to overcome negative impacts or implications:

A copy of this document (or when no IIA is needed, the screening tool) must accompany relevant draft IJB Reports at IJB Pre-Agenda stage and at IJB. It should accompany IJB papers and should be published with relevant IJB Report.

Following IJB agreement of report contact <u>Joyce.barclay@dundeecity.gov.uk</u> to post IIA on DHSCP website.

#### **NB Corporate Risk- is addressed in IJB reports**

Administrative Use	Provide a link to relevant IJB Agenda for IJB Report including Agenda	
	record page numbers where report is found.	