

Section 4 Integrated Impact Assessment

Summary Report Template

Each of the numbered sections below must be completed

Interim report		Final report	
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(Tick as appropriate)

1. Title of plan, policy or strategy being assessed

Wayfinder Graded Support Model

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

Wayfinder is a redesign of rehabilitation services for service users with complex mental health needs. Wayfinder is a whole system approach and includes:

- A single point of access
- One agency co-ordinating care for individuals
- Integration of health and social care services.

Wayfinder provides a range of accommodation and support to meet the needs of the service users with complex mental health needs. Different levels of support are provided at different times, and based on need. Links are made with wider services which are available to the general population and service users are encouraged to become more involved with local communities.

The service takes a person-centred approach to service provision and aims to create opportunities for service users to engage in meaningful activities.

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

The Wayfinder Graded Support Model has been co-produced over a 3-year period (2012-2015) with clinicians, social workers, service user and carers and their representatives and third sector organisations including support and accommodation providers.

Stakeholders agreed the 3 main elements of the model:

- **Graded Support:** Feeling safe and secure wherever you live, ensuring people have the right support in the right place at the right time.
- **Person Centred Choice:** Understanding and supporting the person's needs and managing risks, recognising people's assets and working towards their goals and aspirations. Ensuring they have the support from mental health services they require to stay well and live their life.
- **Meaningful Days:** Addressing daily living skills and engaging in activities; building skills to look after yourself and your home, building social connections and participating in work opportunities.

Thresholds to describe what people will need in the 6 grades of support, based on standardised assessments that identify people's needs, abilities and aspirations have been agreed, along with interventions that support developing skills, engaging in social, leisure, volunteering and work activities and managing mental health.

Feedback from service users is a regular agenda item at the Wayfinder Monitoring and Evaluation Group.

4. Date of IIA

Wednesday 21 March 2018

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

Name	Job Title
Michele Harrison	Research Fellow, Wayfinder Partnership
Colin Beck	Strategy and Quality Manager
Sarah Bryson (facilitator)	Policy Officer
Claire De Soldenhoff	Support Manager, Penumbra
Debbie McLachlan	Support Manager, Penumbra

Laurels	Team Leader
Lindsay Horsburgh	Team Leader
Marion Findlay	Director of Services, Volunteer Edinburgh
Aileen Sinclair	Service Manager, Carr Gomm
Cat Young	Assistant Programme Manager

6. Evidence available at the time of the IIA

Evidence	Available?	Comments: what does the evidence tell you?
Data on populations in need	Y	<p>People with complex mental health needs make up 10% of all adults requiring mental health services (Killaspy 2016). They will typically have a diagnosis of schizophrenia, psychotic or bipolar disorder with over a 1 year duration, which significantly impacts on their self-care, social and cognitive functioning (Cook and Chambers 2009).</p> <p>As a result, this group of service users have significant difficulty with organising their daily life, being motivated to complete daily living activities and participate in social, work and leisure activities.</p> <p>People frequently have less rights and access to housing and employment and feel marginalised, isolated, and disconnected from society.</p> <p>Across the total population of people receiving social care services in the City of Edinburgh, 52% are male and 48% are female; ethnicity was identified as White 97.3% or other ethnic background 2.7%. Total number of people in the 18-64 age range receiving social care services is 5,110, 20% of these are people with mental health needs (1,010). (Scottish</p>

Evidence	Available?	Comments: what does the evidence tell you?
		<p>Government: Social Care Survey data 2016/2017).</p> <p>The REIS study (Harrison et al. 2014) collected data from 193 participants across inpatient and supported accommodation environments. Participant group was made up of 30.5% female, 67% male and 1.5% were transgender.</p> <p>The mean age of participants was 45 (SD 13.9), with ages ranging from 17 to 75. Participants were diagnosed with Schizophrenia (69%), affective disorder (9%), organic disorder of psychological development (3.5%) and unspecified health condition (3.5%).</p>
Data on service uptake/access	Y	There are currently 217 service users in mental health support and accommodation in CEC.
Data on equality outcomes		
Research/literature evidence	Y	<ul style="list-style-type: none"> • The aim of the Wayfinder Partnership is to enable service provision for this group of people to be recovery orientated, evidence based and aspirational by ensuring the places people live and the people who work with them support their rehabilitation. • The Wayfinder Graded Support Model was developed as part of the partnership. This was informed by <ul style="list-style-type: none"> ○ stakeholder engagement over a 3 year period (clinicians based in hospital and community services, service user representatives, carer representatives, third sector organisations including those

Evidence	Available?	Comments: what does the evidence tell you?
		<p>that provide support and accommodation services).</p> <ul style="list-style-type: none"> ○ Systematic review of literature, research with the service user group to understand their perspectives of recovery (Bredski et al. 2015) and research to understand current support and accommodation environments commissioned in CEC (Harrison et al. 2014) ● A stakeholder event in August 2013 agreed the following 3 areas as important in supporting people's rehabilitation and recovery. <ul style="list-style-type: none"> ○ Feeling safe and secure wherever you live (Graded Support); ensuring the person has the right support in the right place at the right time. ○ Understanding and supporting the person's needs and managing risks (Person Centred Choice); recognising people's assets and working towards their goals and aspirations. Ensuring they have the support from mental health services they require to stay well and live their life. ○ Addressing daily living skills and engaging in activities (Meaningful Days); building skills to look after yourself and your home, building social connections and participating in work opportunities. ● These were used to create the Wayfinder Graded Support Model and describe the differing types of living

Evidence	Available?	Comments: what does the evidence tell you?
		<p>environment and multiagency support that would be required to support service users at different stages of their recovery.</p> <ul style="list-style-type: none"> Standardised Assessment tools have been used to create thresholds to support decision making about what grade of support a person requires.
Public/patient/client experience information	Y	<p>Stories of Changing Lives III: service users who moved to Grade 5 support and accommodation as part of the Progressing on Both Fronts pilot have experiences captured as part of this project. http://rehpatientscouncil.org.uk/wp-content/uploads/2017/10/REH-Patients-Council-Stories-Of-Changing-Lives-III.pdf</p> <p>Evaluation of Progressing on Both Fronts pilot (provision of Grade 6 and 5 support and accommodation by a multiagency team)</p> <p>Collective advocacy provided by the REH Patients Council regularly meets with service users at Firrhill and on the rehabilitation wards at the Royal Edinburgh Hospital.</p> <p>Reported benefits</p> <ul style="list-style-type: none"> Joint working between partners has enabled an increased variety and choice of activities of interest to be provided to service users at both sites. Service users' comments have included appreciating improved living environments, enjoying being able to personalise their rooms at Firrhill, having a new-found sense of independence and freedom and appreciating having a range of staff

Evidence	Available?	Comments: what does the evidence tell you?
		working with them to meet different needs.
Evidence of inclusive engagement of service users and involvement findings	Y	Service user representation via collective advocacy from the initiation of the Wayfinder Partnership which has informed development of the Wayfinder Graded Support Model and how services are delivered and monitored. Also informed research specific to Wayfinder (see above, Bredski et al. 2015)
Evidence of unmet need		
Good practice guidelines		
Environmental data		
Risk from cumulative impacts		
Other (please specify)		
Additional evidence required		

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

Equality, Health and Wellbeing and Human Rights	Affected populations
<p>Positive</p> <p>The majority of psychosis onset happens between the ages of 18 and 24. Early input, which can be provided through Wayfinder, can reduce future needs.</p> <p>There are currently 30,000 students in Edinburgh and much outreach work is done to raise awareness – 2 people from Edinburgh College sit on the partnership and</p>	<p>Young People</p> <p>Young People</p>

<p>there are links with Children and Families including work with schools.</p> <p>A number of transgender people receive a service. The person-centred approach which Wayfinder provides allows any issues which may arise to be dealt with on a case by case basis.</p> <p>It is recognised that those with a hearing impairment/loss become more isolated and suffer proportionally more mental health issues. The person-centred approach of the service and the use of digital solutions can help deal with this and other physical disability issues.</p> <p>The provision of non-denominational spiritual care is very good in the Royal Edinburgh Hospital and is continued to be supported in residential and tenancy accommodation through Wayfinder. For example, in one case the chaplain comes to review meetings.</p> <p>The service works to improve family relationships and uses the core and cluster method of parenting. The Edinburgh Corporate caring plan covers this and there is cross-over between the services.</p> <p>Negative</p> <p>Service provision can vary for service users when they reach 65 and they may be moved from their current accommodation.</p> <p>It is acknowledged that a physical disability could delay the process for a patient getting a service and can be a challenge however the service works with disability groups as required</p> <p>It is recognised that services are not geared up to be fully culturally competent. Challenges arise in both service provision and awareness raising for those who do not have English as a first language.</p>	<p>Transgender people</p> <p>Those with physical disabilities</p> <p>People with different religious beliefs.</p> <p>Young people and children</p> <p>Older people</p> <p>People with a physical difficulty</p> <p>Non-English speakers</p>
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<p>Environment and Sustainability</p> <p>Positive</p> <p>Healthier lifestyles are encouraged and promoted as part of the day to day business of Wayfinder</p> <p>The PSP has includes a greenspace aspect to the Programme. Garden projects take place e.g. Redhall House.</p> <p>Patch working reduces the need to travel. The aim of the service is to shift to community based services which should reduce the overall transport emissions.</p> <p>The quality of housing is recognised as important in the service users' recovery.</p> <p>Negative</p> <p>There are issues for rural areas as service providers do not get paid for travelling time. It is therefore difficult to provide a service to rural areas, especially for short visits, as it is difficult for the service provider to cover costs.</p>	<p>Affected populations</p> <p>All</p>
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<p>Economic</p> <p>Positive</p> <p>Measures are taken to increase employability of patients including placed in work and experiences. Links are made to education, employment and volunteering. The aim is to get back to “normal” living and employment.</p> <p>Access to benefits advice is provided.</p> <p>Negative</p> <p>Although steps are taken to increase the employability of service users, employment is difficult due to the charging system.</p> <p>Major issues exist around the viability of services as funding to providers is restricted and there are issues</p>	<p>Affected populations</p> <p>All</p>
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around living wage, pay, sleep-overs, status etc.	
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Working conditions and pay are currently an issues for staff across the service.	
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8. Is any part of this policy/ service to be carried out wholly or partly by contractors and how will equality, human rights including children’s rights , environmental and sustainability issues be addressed?

Yes, and will be considered as part of the tendering process.

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

[The Edinburgh Health and Social Care Partnership Communications and Engagement Plan 2016-19](#)

[The Edinburgh Health and Social Care Partnership Communications Action Plan](#)

10. Does the policy concern agriculture, forestry, fisheries, energy, industry, transport, waste management, water management, telecommunications, tourism, town and country planning or land use? If yes, an SEA should be completed, and the impacts identified in the IIA should be included in this.

No

11. Additional Information and Evidence Required

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

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

Continuity of service provision for those reaching 65 should be considered as part of the wider Outline Commissioning and Strategic Plan. Some service providers allow over 65s to stay in the same accommodation until they can no longer physically manage. Anecdotally, some people dread turning 65 as they may have to move. Part of the reason for moving older people is that a change in skills base is often required to look after older people.

Recruitment of care staff with different backgrounds and language skills should be further promoted. This will help address the issues for service users who do not have English as a first language. Consideration to be given to carrying out work with schools to encourage different ethnic minorities into the care industry.

Make more use of volunteers, particularly those who speak another language and are qualified however are waiting for their qualifications to be ratified in this country.

Continue work through agencies and schools to make the industry attractive to all cultures and help create a diverse work-force.

The work carried out by housing locality teams to attract local and diverse workforce should be considered and learnt from.

Awareness of the service can be raised at Chat Cafes (for those who do not have English as a first language).

Further consideration needs to be given to overnight stays.

The use of SDS and the potential opportunity to avoid the benefits trap and charges for the service, should be more fully considered.

13. Specific to this IIA only, what actions have been, or will be, undertaken and by when? Please complete:

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and contact details)	Deadline for progressing	Review date
Consider continuity of service provision for those reaching 65.	As part of the OSCP (Outline Strategic Commissioning Plan) – Colin Beck	October 2018	October 2019
Recruitment of care staff with different backgrounds and language skills	As part of the OSCP (Outline Strategic Commissioning Plan) and the	October 2018	October 2019

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and contact details)	Deadline for progressing	Review date
	Workforce Development Plan – Colin Beck		
Promote appropriate volunteer opportunities through Wayfinder to those who approach VE’s public services & specialist employability services, particularly to those who speak other languages as well as English	VE	October 2018	October 2019
Continue work with agencies and schools to encourage different ethnic minorities into the care industry.	The Wayfinder partnership – Colin Beck	October 2018	October 2019
Raise awareness of mental health and the service through Chat Cafes	The Wayfinder Partnership – Colin Beck	October 2018	October 2019
Review the work carried out by housing locality teams to attract local and diverse workforce with a view to emulating for the care service	The Wayfinder Partnership – Colin Beck	October 2018	October 2019
Further consider overnight stays	As part of the OSCP (Outline Strategic Commissioning Plan) and the Workforce Development Plan – Colin Beck	October 2018	October 2019
Consider the use of SDS and the implications for charging/employment	As part of the OSCP (Outline Strategic	October 2018	October 2019

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and contact details)	Deadline for progressing	Review date
	Commissioning Plan) and the Workforce Development Plan – Colin Beck		

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

To be considered through the Wayfinder monitoring and Evaluation Group

15. Sign off by Head of Service/ Project Lead



Name: Colin Briggs, Chief Strategic & Performance Officer (Interim)

Date: 08/08/2018

16. Publication

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

Section 5 Contacts

- **East Lothian Council**

Please send a completed copy of the IIA to equalities@eastlothian.gov.uk and it will be published on the Council website shortly afterwards. Copies of previous assessments are available via http://www.eastlothian.gov.uk/info/751/equality_diversity_and_citizenship/835/equality_and_diversity

- **Midlothian Council**

Please send a completed copy of the IIA to zoe.graham@midlothian.gov.uk and it will be published on the Council website shortly afterwards. Copies of previous assessments are available via http://www.midlothian.gov.uk/downloads/751/equality_and_diversity

- **NHS Lothian**

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

- **The City of Edinburgh Council**

Completed impact assessments should be forwarded to Strategyandbusinessplanning@edinburgh.gov.uk to be published on the Council website.

- **City of Edinburgh Health and Social Care**

Completed and signed IIAs should be sent to Sarah Bryson at sarah.bryson@edinburgh.gov.uk

- **Edinburgh Integration Joint Board**

Completed and signed IIAs should be sent to Sarah Bryson at sarah.bryson@edinburgh.gov.uk

- **West Lothian Council**

Complete impact assessments should be forwarded to the Equalities Officer.