

Edinburgh Integration Joint Board Grant Review

Draft Integrated Impact Assessment

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

Edinburgh IJB Grant Review – funding recommendations

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

Existing Programme

In the current year of funding, 2018/19, grants were issued through 2 main programmes:

- the Health and Social Care main grant programme (£1,880,186) which supports services to specific service user groups, i.e. older people (£787,322), carers (£273,569), people with disabilities (£133,815), mental health issues (£70,218), and/or addictions (£97,073) and people with blood borne viruses (£252,843).
- the Health Inequalities Grant Programme (£1,754,573) which supports services delivering activities against four strategic objectives i.e.: enabling all adults to maximise their capabilities and have control over their lives; creating and developing healthy and sustainable places and communities; strengthening the role and impact of ill-health prevention and ensuring a healthy standard of living for all

In addition, four grants for specific purposes (£755,963) are funded through a combination of Social Justice Fund/Integrated Care Fund and Social Care Fund namely:

- Health inequalities communication
- Get up and Go
- LOOPS Hospital Discharge Project (£313,240)
- Third sector prevention investment fund (£414,450)

New Programme

The new programme focuses on **tackling inequalities and prevention and early intervention**, 2 of the 6 main priorities of the current and draft IJB Strategic Plan 2019–2022. These are further broken down to 7 priorities i.e.:

1. Reducing social isolation
2. Promoting healthy lifestyles
3. Improving mental wellbeing
4. Supported self-management
5. Information and advice
6. Reducing digital exclusion
7. Building strong, inclusive, and resilient communities

Within the overall programme there is a small grant fund for grants worth less than £25,000 and an innovation fund (circa £100,000 per annum).

The recommendations of the new programme come to a value of £4,596,718 in 2019/20 (total of £14,245,328 over 3 years).

Applications were open to any constituted and not-for-profit organisation. Grants are for up to 3 years funding. A new application form and assessment process were developed and guidance and training was available.

It has not been possible to determine financial amounts allocated against each priority as organisations take a comprehensive approach to achieving outcomes and can help meet more than one priority. Figures contained within this report should be considered as indicative only as direct comparison between current grant programme and new programme is not always possible.

An inevitable consequence of any grant review is that not all existing grant recipients will be successful in their funding bids. Further, the new programme was significantly oversubscribed.

For 2019–2022, a total of 66 grant awards are recommended (47 large grants and 19 small grants) with 16 being new awards (9 large and 7 small). 35 organisations which currently get grants were unsuccessful in their applications.

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

In the interests of good partnership working and to make best use of the knowledge, experience and creativity of the third sector, it was agreed that the development of the whole grant strategy and process for implementation, should be carried out in collaboration with the third sector. A stakeholder working group was set up at the outset of the process and was made up of representatives from CEC Communications, Contracts, Procurement; EAHP; EVOC; Penumbra/ CCPS;

EHSCP Locality Manager NW; Chief Finance Officer IJB, Strategic Planning; NHS Health Promotion and the Edinburgh Community Health Forum;

Two sets of engagement sessions, open to all potential funding organisations, were held (April 2018 and June 2018). Attendance at these was good with the total number of attendances being 148.

Feedback from these was used to guide and inform the development of the new programme. (see links to reports from those events in evidence table below).

Further briefing sessions were held in August to outline the grant process and timescales, and again, attendance was good.

Training sessions on completion of application forms were also provided and these were targeted at those more inexperienced in completing grant application forms.

4. Date of IIA

Monday 26th November 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
Suzanne Lowden	Strategic Planning and Commissioning Officer, Edinburgh Health and Social Care Partnership
Stephanie-Ann Harris	Strategic Development Manager, Edinburgh Community Health Forum
Liz Simpson (facilitator)	Senior Health Promotion Specialist, NHS Lothian Health Promotion Service
Sarah Bryson (facilitator)	Strategic Planning and Commissioning Officer, Edinburgh Health and Social Care Partnership

6. Evidence available at the time of the IIA

Evidence	Available?	Comments: what does the evidence tell you?
<p>Data on populations in need:</p> <p>Joint Strategic Needs assessment (JSNA) and Topic Papers:</p>	<p>Yes</p>	<p>The JSNA and topic papers provide a comprehensive local picture of health and wellbeing needs in Edinburgh, using intelligence and analysis to determine:</p> <ul style="list-style-type: none"> • Current and future needs • What's working, what's not, and what could work better? • What are the major health inequalities and what can be done about them? • Unmet needs, including those of seldom-heard populations and vulnerable groups <p>See papers for detailed information re populations</p>
<p>Data on service uptake/access:</p> <p>Funding applications from this round and funding applications from current funding.</p> <p>Grants Review Interim Report Edinburgh Integration Joint Board – 18 May 2018 Item 5.7 - Grants Review Interim Report – Reports, 866.91 KB</p> <p>IJB Performance Report Annual Performance Report 2016_17</p>	<p>Yes</p> <p>Yes</p> <p>Yes</p>	<p>Provides an indication of the current numbers of service users for existing services provided through the grant programme</p> <p>The Grants Review Interim report provides:</p> <ul style="list-style-type: none"> • Analysis of current grant use • Identification of priorities for future funding • Operation of future grant programmes • Engagement with stakeholders <p>The IJB Performance report provides a review of the progress made during the first year of operation of the Edinburgh Integration Joint Board and the Edinburgh Health and Social Care Partnership</p>

Evidence	Available?	Comments: what does the evidence tell you?
<p>Evidence of inclusive engagement of service users and involvement findings</p> <p>Engagement events held on 26 April 2018. A Survey monkey was also carried out. The results are contained within the Grants Review Interim Report Edinburgh Integration Joint Board – 18 May 2018 Item 5.7 - Grants Review Interim Report – Reports, 866.91 KB</p> <p>Further engagement session held on June</p> <p>Briefing sessions held for applicants in September 2018 outlining process and timescales</p> <p>Training sessions for applicants held in September 2018</p>	<p>Yes Distribution and opportunity for feedback on draft reports</p> <p>Yes</p> <p>Yes</p> <p>Yes</p>	<p>See report: see feedback to Participants Report</p> <p>The findings from the engagement events are contained within the report and were used to further develop the proposals for the grant review.</p>
<p>Evidence of unmet need</p> <p>Some areas of unmet need exist and are evidenced in the various application forms. The ongoing development of the Strategic Commissioning Plans and the Locality Plans will give an indication of unmet needs</p>	<p>No</p>	<p>There has not been any collation of evidenced unmet need from the grant application forms.</p>
<p>Good practice guidelines: CEC Grant Process Good Practice Guidelines</p>	<p>Yes</p>	<p>Best Practice for grant management Outlines good practice for grant processes</p>
<p>Environmental data</p>	<p>No</p>	
<p>Risk from cumulative impacts</p>	<p>No</p>	

Evidence	Available?	Comments: what does the evidence tell you?
<p>Other (please specify)</p> <p>Review of grant programmes – report to the EIJB September 2017</p> <p>Grants review, scope, methodology and timescales – report to the EIJB November 2017</p> <p>Grants Review Interim Report – report to the EIJB 18 May 2018</p> <p>Proposals for the Health and Social Care Grants Review Programme 2019 – report to the EIJB 10 August 2018</p>	<p>Yes</p> <p>Yes</p> <p>Yes</p> <p>Yes</p>	<p>Review of grant programmes – report to the EIJB September 2017 http://www.edinburgh.gov.uk/</p> <p>Grants review, scope, methodology and timescales – report to the EIJB November 2017 http://www.edinburgh.gov.uk/</p>
<p>Additional evidence required</p>		

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

Equality, Health and Wellbeing and Human Rights Positive	Affected populations
<p>A move to 3-year funding will provide continuity for organisations and staff, help reduce staff turn-over and improve planning and services.</p>	<p>All groups</p>
<p>The review process has helped ensure that the successful grants are in alignment with the priorities of the new grant programme and will focus activities on tackling Inequalities and Prevention and Early Intervention</p>	<p>All groups</p>
<p>The introduction of a quality threshold in the grant allocation process has helped ensure that the quality of service provided through the grants will be efficient and effective in delivering positive outcomes for all groups of people</p>	<p>All groups</p>

<p>60 organisations which currently receive grant funding have been successful in their funding applications (23 older people, 2 blood borne viruses, 4 carers, 2 disabilities, 1 addictions, 1 mental health and 27 Health inequalities) and will continue to provide valuable, wide ranging services which will help achieve positive health outcomes for all users and tackle inequality.</p>	<p>All groups</p>
<p>A number of community health organisations which provide services to improve health outcomes, quality of life and reduce health inequalities in areas of deprivation, have received increased levels of funding, which will result in the provision of a range of additional services and benefits.</p>	<p>All groups/those vulnerable to poverty</p>
<p>The provision of welfare advice services will be co-produced across the city and provide the opportunity for a more efficient, city-wide, joined up service</p>	<p>Those vulnerable to poverty</p>
<p>Sixteen new recipients are now recommended for funding (9 large and 7 small) including:</p>	
<ul style="list-style-type: none"> • provision of service to improve health outcomes for disadvantaged youths who face multiple challenges. (Venture Scotland) 	<p>Young adults</p>
<ul style="list-style-type: none"> • services to allow those with mental health problems participate in therapeutic art and music projects to achieve positive health and well-being outcomes. (Om Music Sanctuary and Art In Healthcare) 	<p>Those with mental health problems</p>
<ul style="list-style-type: none"> • support to assist those with autism to seek diagnosis and provide post-diagnostic support. (Autism Initiatives) 	<p>Disabled people</p>
<ul style="list-style-type: none"> • provision of advocacy, information, advice and befriending services to Syrian men. (Multi-Cultural Family Base) 	<p>BME/men</p>
<ul style="list-style-type: none"> • organisation to improve health outcomes for disabled people through music making activities to benefit; mental health and wellbeing; physical coordination and social inclusion. (Drake Music) 	<p>Disabled people</p>
<ul style="list-style-type: none"> • organisations working with people who have been homeless or vulnerable to becoming homeless to prevent social isolation and homelessness and improve life chances. (Gowrie Care) 	<p>Those facing poverty</p>

<ul style="list-style-type: none"> • organisation targeted at those with addictions and blood borne viruses to support them to live independently, positively engage with health and community services and improve wellbeing and quality of life (Rowan Alba Limited, Positive Help) • several organisations which take a preventative approach to improving health outcomes for older people and reduce loneliness and social isolation by connecting them with their community including Befriending Through Gardening, Senior Men’s Group, Golden Years Community Connecting Service and The Open Door • an organisation to provide opportunities for parents to gain confidence and resilience resulting in positive mental health for perinatal women. (Home Start) • building community capacity through a community kitchen to connect and engage with all people to reduce social isolation and gain confidence. (Bridgend Farmhouse) • community-based listening/counselling support for those who are bereaved to help improve their mental well-being (Cruse Bereavement) 	<p>Those with blood borne viruses or addictions</p> <p>Older people Older men</p> <p>Women</p> <p>All groups</p> <p>All groups</p>
<p>Negative</p> <p>A number of organisations which currently get grant funding were not successful in their application (numbers noted below). This however does not necessarily mean that the project will be unable to continue. Grant awards were made on the basis that the grant would end in March 2019. Organisations have known for a number of years that a review will be carried out and, have been encouraged over recent years, to become more financially sustainable and seek additional sources of funding. The negative impacts noted below, have assumed that the projects will not continue however this will not be the case for many.</p> <p>There are 35 organisations which currently get grants and were unsuccessful in their applications (approx. £1.87m). These cover a range of activities targeted at improving health outcomes for; older people (10 projects); carers (6); those with disabilities (2); addictions (1) and mental health problems (1) reducing health inequalities (13) and projects funded through the Health</p>	<p>All Groups</p>

<p>Improvement Fund (2).</p> <p>In particular, there is a reduction in the number of projects and amount of funding which is dedicated to providing older people's services. Of the 33 projects which currently provide services only for older people, 23 will continue to get grant funding (previously funded at approx. £1.6m) and 10 will not (£0.8m). 4 new projects directed at older people will be funded. (£125,344) (figures should be taken as indicative only as direct comparison between current grant programme and new programme is not possible)</p> <p>This may result in a reduced number of day care services, lunch clubs, support to connect older people to community services and support for older people from minority and ethnic groups (3 projects which also provide advice)</p> <p>It should be noted that in addition to the 27 successful organisations targeted at older people, many of the other successful organisations will provide universal services which will be of considerable benefit to older people and provide specific activities for older people.</p> <p>One organisation which provides welfare advice for those with disabilities will not be funded.</p> <p>Six applications submitted in relation to carers, which currently receive funding, were unsuccessful in their applications and 4 current and 1 new project were successful. This may create a gap in service provision and result in poorer health outcomes for carers.</p> <p>There is a reduction in drug awareness and education provision, however this service is mainly directed at schoolchildren and so the majority of those benefitting from the service are outwith the scope of the IJB.</p> <p>Funding for neighbourhood/community centres in the north-west Edinburgh, which provide a wide range of locally based services and help enhance health and well-being, will no longer be provided. A project to support community capacity and health activities in the north-east will also no longer receive funding.</p> <p>The core funding application for the community health organisation in the north west of the city was unsuccessful in its application which may result in a</p>	<p>Older people</p> <p>Older People</p> <p>Older people/ minority ethnic people</p> <p>Those with disabilities</p> <p>Carers</p> <p>Vulnerable young adults</p> <p>Those in/vulnerable to falling into poverty</p> <p>Those vulnerable to falling into poverty</p>
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<p>significant loss of health and well-being services in this locality</p> <p>A current service aimed at alleviating deprivation and isolation, providing information and advice and to promoting positive health and well-being to minority ethnic people living in Edinburgh was unsuccessful in their funding applications.</p> <p>A current project which supports women with mental health issues, or showing signs of dementia, from black and minority ethnic was unsuccessful</p> <p>Projects which deliver a range of creative activities to engage, inspire and improve mental health and well-being of people living in areas of deprivation, were unsuccessful however alternative art and music projects have been successful.</p> <p>Postnatal depression counselling service in parts of the south of the city was unsuccessful in its application which may result in the loss of counselling services and poorer mental health outcomes for vulnerable women</p> <p>Timebank project in North Edinburgh which helps build social capital and community networks was unsuccessful in its application.</p> <p>An organisation to work with people with epilepsy and affected by epilepsy in Edinburgh is no longer funded through this programme however the project is part of a National organisation.</p> <p>An organisation which works with the BSL community to prevent poor health and wellbeing outcomes will no longer be funded.</p>	<p>Minority Ethnic people</p> <p>Minority Ethnic/women</p> <p>Those vulnerable to falling into poverty/those with mental health issues</p> <p>Women</p> <p>Those vulnerable to falling into poverty</p> <p>Disabled people</p> <p>BSL users</p>
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<p>Environment and Sustainability</p> <p>Positive</p> <p>The priorities of the grant programme promote healthy lifestyles and strong, inclusive and resilient communities and the successful funding applicants will work to achieve this.</p> <p>Funding has been awarded to a befriending through</p>	<p>Affected populations</p> <p>All groups but especially those who are socially disadvantaged</p> <p>Older people</p>
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<p>gardening project which will encourage attractive, green space.</p> <p>Funding has been awarded to Changeworks, Heat Heroes which will help improve energy efficiency and reduce greenhouse gas emissions</p> <p>The community transport project will continue to be funded which will help reduce carbon emissions.</p> <p>Various new and continuing local projects which use volunteers and help build community cohesion and social sustainability, will continue.</p> <p>Negative</p> <p>A number of greening projects will no longer be funded, including the community garden project.</p> <p>Various current local projects which use volunteers and help build community cohesion and social sustainability, will continue.</p>	<p>Those in poverty/all groups</p> <p>Older people</p> <p>All groups</p> <p>All groups</p> <p>Those in poverty</p>
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<p>Economic</p> <p>Positive</p> <p>The move to 3-year funding should improve the stability of employees' jobs. It will also help provide continuity of service delivery.</p> <p>The reduction of health inequalities continues to be a priority.</p> <p>The provision of welfare advice services will be co-produced across the city and provide the opportunity for a more efficient, city-wide, joined up service</p> <p>Freshstart and Venture Scotland projects will help young people move into positive destinations.</p> <p>The introduction of a quality threshold during the assessment process helped ensure that the quality of services will be improved.</p> <p>Funding to 16 new organisations may create new jobs and volunteer opportunities.</p> <p>Negative</p> <p>35 organisations which are currently funded will no longer be funded. Some of these organisations will continue to</p>	<p>Affected populations</p> <p>All groups</p> <p>Those in poverty/all groups</p> <p>Those in poverty/disable people</p> <p>Vulnerable young people</p> <p>All groups</p> <p>All groups</p> <p>Staff/volunteers</p>
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<p>operate, however, it may lead to the closure of some of the organisations and subsequent loss of jobs and volunteering opportunities.</p> <p>A significant number of service users may be adversely affected by these decisions.</p>	<p>All groups</p>
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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?

No, service provision to be provided through grants

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.

A communication plan is to be prepared.

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.

N/A

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

Although a number of current organisations were unsuccessful in their funding applications, it does not necessarily mean that the organisation will close nor that the service will end. Grant holders have known that their current grant award is to end in March 2019 and that a grant review would be carried out. Over recent years, organisations have been encouraged to be more financially sustainable and seek alternative sources of funding and many have been extremely successful in doing so. It should be emphasised that within Section 7, negative impacts have been noted however many of the projects will indeed continue to operate without funding through this programme and the negative impacts will not materialise.

The possible negative impacts in relation to older people services, noted in Section 7 above had been recognised during the interim IIA and so the moderation group were mindful of this during the moderation process. Where possible, older people services projects, which fell above the quality threshold, were allocated funding when possible, particularly those ones that would leave a gap in service provision for example, the Queensferry Church project.

An inevitable consequence of any grant review is that not all existing grant recipients will be successful in their funding applications, particularly when a budget saving is attached. It will therefore not be able to mitigate against all the identified differential outcomes on groups of people with protected characteristics. Consideration however should be given to the following in respect of the negative outcomes in relation to older people.

- The MATT Group, who meet daily to discuss the discharge of patients, should be encouraged to utilise on-line information and help steer patients to participate in appropriate community services on release from hospital.
- Consideration should be given to the implications which ending funding to unregistered day services may have on the registered services. This, and any gaps in provision of service, should be considered as part of the Older People's Day Services Review.

A number of carer services were unsuccessful in their application and any gaps in carer provision should be considered as part of the development of the Carers' Strategy

Any gaps in service provision which may arise, should be considered as part of the development of the Strategic Commissioning Plans.

There may be some loss of service provision which is aimed at alleviating deprivation and isolation for specific minority ethnic groups living in Edinburgh. The current service users of these organisations should be encouraged to participate in services provided by other providers and encourage cultural bridging.

Unsuccessful applicants should be directed to information sites containing information regarding alternative funding sources and advice.

Information/training sessions will be developed and support provided.

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
Discussions should take place with the MATTs, as indicated above	Grant Review Steering Group Moira Pringle	March 2019	
Discussions should take place with those carrying out the older people day services review, as indicated above	Grant Review Steering Group Moira Pringle	March 2019	
Discussion should take place with those developing the Carer Strategy to try and ensure any gaps in carer provision is addressed through the Carer Strategy	Grant Review Steering Group Moira Pringle	March 2019	
Any gaps in service provision which may arise, should be considered as part of the development of the Strategic Commissioning Plans.	Grant Review Steering Group Moira Pringle		
Unsuccessful applicants should be directed to web-sites containing information regarding alternative funding sources and advice.	Grant Review Steering Group Moira Pringle	December 2018	
Information/training sessions will be developed and consultancy support provided for grant applicants.	Grant Review Steering Group EVOC	March 2019	

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

A grants evaluation process is to be set up and this will be considered as part of this process.

15. Sign off by Head of Service/ Project Lead

Name

Date

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.