

Item No: 8

Meeting Date: Wednesday 10th May 2023

Glasgow City Integration Joint Board

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Report By:	Sharon Wearing, Chief Officer, Finance and Resources		
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Integration Joint Board 2023/24 Budget – EQIA Update			
Purpose of Report:	The purpose of this report is to provide an update on the Equality Impact Assessments undertaken in relation to budget savings proposals agreed in principle at the IJB in March, and to seek approval to implement the relevant savings.		
Background/Engage	The IJB report in March which approved the 2023/24 Budget included savings proposals which were agreed in principle subject to the full EQIA being completed. Due to the sensitivity of the reductions, it had not been possible to engage with service users to fully assess the impact and any further opportunities for mitigating action prior to the March IJB. It was agreed that this would be done and reported back to the IJB in May.		
Governance Route:	The matters contained within this paper have been previously considered by the following group(s) as part of its development.		
	HSCP Senior Management Team □		
	Council Corporate Management Team		
	Health Board Corporate Management Team □		
	Council Committee		
	Update requested by IJB ⊠		
	Other □ Not Applicable □		
	Not Applicable 🗀		

Recommendations:	The Integration Joint Board is asked to:
	 a) note the position in relation to EQIAs; and b) approve the implementation of the savings included within this report noting that equality impacts will continue to be monitored and reviewed in line with usual processes.

Relevance to Integration Joint Board Strategic Plan:

This report forms part of the overall budgets agreed by the Integration Joint Board for 2023-24 which outlines the financial pressures on health and social care services; and the measures we will take to address the financial challenges and the implications this has for the priorities outlined in the Strategic Plan.

Implications for Health and So	cial Care Partnership:		
Reference to National Health & Wellbeing Outcome(s):	The financial framework for the Partnership contributes to the delivery of the 9 national health and wellbeing outcomes that health and social care partners are attempting to achieve through integration.		
Personnel:	Staffing implications are highlighted where appropriate in the report.		
Carers:	Supporting carers to sustain them in their caring role remains a strategic priority for the HSCP. All of the budget measures proposed in the budget approved in March 2023 are informed by that commitment. Accordingly, no savings proposals had been brought forward in relation to carer support budgets.		
	However, it is prudent to assume that other savings proposals, including those within this report, will have a broader impact on carers across the city. Specifically, any measures that might result in a delay to accessing new or increased HSCP service input in relation to the person(s) they care for.		
Provider Organisations:	Provider organisations will have a role to play in relation to delivery of some of these savings and full engagement will take place with this sector.		
Equalities:	As part of budget development, proposals were subject to a preliminary Equality Impact Assessment to understand impacts, inform the development of the proposals, and to take steps to mitigate impacts identified, wherever possible. During this process, four options were identified as having the potential to have a significant negative		

	impact on protected groups. Due to the sensitivity of the reductions, it had not been possible to engage with service users to fully assess the impact and any further opportunities for mitigating action. For these proposals, we committed to further investigation to consider individual needs and opportunities for mitigation prior to agreeing implementation. This report provides an update on this and the full assessment can be accessed on our website.	
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Fairer Scotland Compliance:	As part of the assessment process, consideration was given to the potential impact on those living in poverty. Given the vulnerability of our service users and the levels of deprivation in Glasgow, we were mindful of any disproportionate impact. Overall, the expenditure on services within this budget supports the delivery of a Fairer Scotland, however some of the equality impact assessments have identified that there is potential for a disproportionate impact on those living in poverty, which may be cumulative, for those accessing multiple services.	
Financial:	The savings included within this report total £3.791m and are part of the balanced budget which was approved by the IJB in March for 2023/24. Delivery of these savings are required to remain in balance for 2023/24.	
Legal:	The Chief Finance Officer's duties in Scotland require a balanced budget to be set. This is established in s108(2) of the Local Government (Scotland) Act 1973 and s93(3) of the Local Government Finance Act 1992. Directions are being issued in line with the legislation.	
Economic Impact:	None	
_conomic impact	1	
Sustainability:	The savings included within this report are part of the balanced budget which was approved by the IJB in March for 2023/24. Delivery of these savings are required to secure services which are sustainable within the funding which has been available for 2023/24.	
Sustainable Procurement and Article 19:	None	
Risk Implications:	The IJB has a statutory duty to deliver a balanced budget within the funding allocations provided by Partner Bodies. To achieve this, decisions are required which will result in a number of services being reduced. It is recognised that this comes with a risk in relation to Partner Bodies being able	

	to meet their statutory obligations. There are no other options available to the IJB given the funding available and the pressures being faced.	
Implications for Glasgow City	The savings approved in this report for implementation	
Council:	require to be implemented to deliver a balanced budget.	
Implications for NHS Greater	None.	
Glasgow & Clyde:		
Direction Required to Council, Health Board or Both		
Direction to:		
1 No Direction Required		

Direction to:		
1. No Direction Required		
2. Glasgow City Council	\boxtimes	
3. NHS Greater Glasgow & Clyde		
4. Glasgow City Council and NHS Greater Glasgow & Clyde		

1. Purpose

1.1 The purpose of this report is to provide an update on the Equality Impact Assessments undertaken in relation to budget savings proposals agreed in principle at the IJB in March, and to seek approval to implement the relevant savings.

2. Background

- 2.1. The IJB report in March which approved the 2023/24 Budget included savings proposals which were agreed in principle subject to the full EQIA being completed. Due to the sensitivity of the reductions, it had not been possible to engage with service users to fully assess the impact and any further opportunities for mitigating action prior to the March IJB. The proposals impacted are listed below and for these it was agreed that fuller engagement would be undertaken with service users, taking into consideration their individual needs and opportunities for mitigation on a case by case basis and presented to the May IJB prior to agreeing implementation.
- 2.2. The following savings fall into this category:
 - Reduction in Self Directed Support Budget (Adults and Older People)
 - Reduction in Older People Day Care Services to Monday to Friday only
 - Review of Purchased/In-House Supported Living Services
 - Reduction in Care at Home and Mainstream Home Care Service.

3. Update on EQIA's

Reduction in Self Directed Support Budget (Adults and Older People)

- 3.1 This proposal will reduce the Self-Directed Support Budget by 2% across Adult and Older People's services. The savings will be achieved through a number of options including:
 - Option 1 Apply an efficiency savings target to commissioned service provider budgets for 2023/24. A process will be initiated with providers to support delivery of this target, which will include measures to mitigate risk, along with the promotion of shared learning and good practice.
 - Option 2 Proceed with a rebalancing of GCHSCP's direct payments budget in 2023/24. This will take into account historic underspends / budget surpluses and, through robust case reviews, seek to re-divert funding to areas of greatest care need, as well as contributing to the savings agenda.
- 3.2 In submitting this EQIA, officers acknowledge the absence of engagement with service user representatives, community organisations and providers. This in no way is a reflection of the importance GCHSCP places on engagement. Moreover, it is a recognition that untargeted or 'rushed' engagement may raise unnecessary concerns with many vulnerable service users. The most important engagement activity will be through the individual interactions with each service user at future care assessments and case reviews.
- 3.3 This proposal has the potential to have a significant negative impact on equality as the service is directly targeted at people who have been assessed as having a critical need for support and is a statutory obligation. Service users are; 57% male, 43% female over a range of ages, 11% under 18 years, 66% aged 19 64 years and 23% over 65 years. 11% are children and their families, 43% have a learning disability, 13% have a long-term mental health condition and 14% have a physical disability. It is recognised that a disproportionate number of carers are female, potentially on low incomes. A reduction in provision or increase in waiting list will have an impact on carers as well as service users. There is also potential for socio economic impact for those who are unable to meet the change in service provision.
- 3.4 Mitigation action has been identified, however, given the scale of the reduction it is not anticipated that this can be achieved without having an impact on protected groups:
 - A process will be initiated with commissioned service providers to support delivery of this target, which will include measures to mitigate risk, along with the promotion of shared learning and good practice.
 - Rebalancing Direct Payments will take into account historic underspends / budget surpluses and, through robust case reviews, seek to re-divert funding to areas of greatest care need, as well as contributing to the savings agenda. This will be considered on a case by case basis, taking into consideration individuals' needs and any unmet need.

- Initiating a process with service user representatives, community organisations and providers on measures that could further mitigate risk and guide implementation.
- Explore any additional measures that may be necessary to support service users, including development of supporting toolkits for frontline staff.
- At an individual basis legal guardians and carers will be fully involved and it may be necessary to bring in independent advocacy services to support understanding and participation, particularly those with a learning disability.
- Opportunities will be taken to explore if people may be entitled to other benefits or income, with referrals made to appropriate agencies.
- 3.5 It is acknowledged that this programme is at an early stage and this assessment reflects the current position. Work will continue to refine the EQIA as necessary and as options develop and undertake a review of progress and impact after 6 months, in line with usual practice, with the findings / updated EQIA published as an addendum to the original EQIA.
- Reduction in Older People Day Care Services to Monday to Friday Only

 It is proposed to reduce service provision in 4day care units for older people from 6/7day services to Monday-Friday only. Service users currently accessing weekend services will be offered services at other times. This will result in a reduction of 8 Full Time Equivalent posts. The service is currently provided to 24 people on weekends; 72% are 80 years old or above and 100% are aged 60 or above. 13% are wheelchair users, 16% have a significant visual impairment, 15% have a significant hearing impairment, 10% have been diagnosed with a mental health issue and 65% have a dementia diagnosis. Therefore, groups most likely to be impacted are older disabled people.
- 3.7 To mitigate the impact on service users, one on one engagement was undertaken to support aligning current service users to available days during the week. The consultation established current attendance patterns, whether alternative arrangements would be required as assessed, whether a Carer's Assessment would be required and opportunity to raise any concerns. Key findings and mitigating actions include:
 - 92% attend the centre on other days and the majority feel they would also benefit from an alternative, for which they've expressed a preference. Current vacancies would allow for this provision to happen in the service that they're currently receiving support.
 - 20% of service users identified that they would require alternative care at the weekend and have been referred to Care at Home, as required.
 - One carer commented that there was disappointment as it would affect their respite.
- 3.8 Ongoing work will be required to monitor the impact of this reduction, including supporting existing and new service users and their carers through this change.

Review of Purchased/In-House Supported Living Services

- This proposal has been paused for 2023/24 to allow for a review of Purchased/In-House Supported Living Services, to be undertaken. An equality impact assessment will be undertaken as part of the development of any recommendations and made available as part of decision making.
- 3.10 Savings for 2023/24 will be released from underspend in purchased supporting living service. It is anticipated that, with current demand, the service will continue to meet the level of support required and there will not be an immediate impact.

Reduction in Care at Home and Mainstream Home Care Services

- 3.11 This proposal has the potential to have a significant negative impact on equality as the service is directly targeted at vulnerable groups including frail elderly. Care at Home is a statutory service which currently provides approximately 93,000 visits a week to support 5,000 people with daily care and support tasks to enable them to live well at home. The service users are predominantly female (64.1%), older people (79% are over 70 years old and 51% are over 80 years old) and 28% have a disability and/or long-term condition. The service is currently provided to those that are assessed as having substantial or critical need. 38% of the service users are discharged directly from hospital to the service. There is also potential for socioeconomic impact for those who are unable to meet the change in service provision.
- 3.12 This saving will be delivered by introducing a capacity-based model of provision and a waiting list for those with substantial need which would directly impact on this frail elderly vulnerable group. This will impact on hospital discharge activity whereby patients may be delayed before returning home.
- 3.13 The waiting list will affect new service users who wish to access the service via a community referral or discharge from hospital. As these people have not been identified as requiring a service as yet, no consultation with them is possible. Consultation with existing Care at Home service users (50% of which are over the age of 80) would induce a degree of anxiety and worry that their service was going to be affected by service transformation as the budget position and planned reductions in expenditure are in the public domain and have been featured by news outlets. There has already been an increase in unease and upset that the level of service current service users are receiving may change as a result of financial pressures. This was felt to be unfair and wouldn't lead to insight regarding the proposed changes. However, the output from the services' annual consultation with all service users and staff was used to inform the assessment and will be used as a baseline to monitor the implementation of this saving.
- 3.14 There are limited opportunities to mitigate the impact as the overall capacity for Care at home shall be reduced whilst demand is anticipated to grow by 7% by 2023. Mitigation will include:

- New Service users will be provided assessment for support through a reablement approach, whilst engaging service users with other sources of supports within the community such as technology enabled care, equipment provision, 3rd sector supports, or other statutory services such as supports for unpaid carers.
- Information will be provided for existing service users to prevent anxiety around the business as usual assessment and review process.
- Care assessments and reviews will continue to be based on meeting an individual's assessed needs.
- Opportunities will be taken to explore if people may be entitled to other benefits or income, with referrals made to appropriate agencies.
- It is anticipated that there will be a natural turnover, which will allow for new service users to be accommodated into the service, as hours fluctuate on a monthly basis through reablement and reassessment.
- 3.15 Ongoing work will be required to monitor the equality and socio-economic impact of this reduction. Further work is required to assess the impact of reducing the capacity in this area of Care at Home service in relation to staffing. Redesign will be required in relation to hospital discharge pathways and the current reablement model, and an EQIA will form part of this process.

Next Steps

- 3.16 The IJB has a statutory duty to deliver a balanced budget within the funding allocations provided by Partner Bodies. To achieve this, decisions are required which will result in a number of services being reduced. It is recognised that this comes with risk and has implications for service users and their families. There are no other options available to the IJB given the funding available and the pressures being faced.
- 3.17 Therefore this report recommends to the IJB that these savings are approved for implementation. Work will continue to support service users through any change or transition as outlined above. The EQIAs will be reviewed and monitored in line with usual process.

4. Recommendations

- 4.1. The Integration Joint Board is asked to:
 - a) note the position in relation to EQIAs.
 - approve the implementation of the savings included within this report noting that equality impacts will continue to be monitored and reviewed in line with usual processes.



Direction from the Glasgow City Integration Joint Board

1	Reference number	100523-8
2	Report Title	IJB 2023/24 Budget – EQIA Update
3	Date direction issued by Integration Joint	10 May 2023
	Board	
4	Date from which direction takes effect	10 May 2023
5	Direction to:	Glasgow City Council only
6	Does this direction supersede, revise or	No
	revoke a previous direction – if yes, include	
	the reference number(s)	
7	Functions covered by direction	Self-directed support budgets for adults and older people; Day Care Services
		for older people; purchased/in-house supported living services; care at home
		and mainstream home care service.
8	Full text of direction	Glasgow City Council is directed to implement the savings outlined in this
		report, in support of the balanced budget approved by the IJB on 22 March
		2023.
9	Budget allocated by Integration Joint Board	The budget of £527,231,500 delegated to Glasgow City Council includes the
	to carry out direction	savings included within this paper.
10	Performance monitoring arrangements	The budget will be monitored through standard budget monitoring
		arrangements.
11	Date direction will be reviewed	1 April 2024