Equality. Fairer Scotland. Children's Rights. Impact Assessment Report

Midlothian Integration Joint Board Financial Recovery Planning 2025/26: Commissioned Services

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Report authorised by:

Midlothian IJB Chief Officer:
Date: 24/03/2025

Description

Title of proposed work

Midlothian Integration Joint Board's Financial Recovery Planning 2025/26: Financial Recovery Planning 2025/26: Commissioned Services

Purpose/objective of proposed work

The Midlothian IJB Financial Recovery Planning sets out the action the Board is considering in order to set a balanced budget. It also describes how we will have to come together alongside people, communities, the Third and Independent Sector, and the services who provide care and support to agree how we can best achieve this and continue to contribute to people in Midlothian living well in their community.

One aspect of the Midlothian IJB Financial Recovery planning is to review commissioned services spend and **establish a new partner provider model** that is closely aligned with the strategic aims of the IJB, supports the delivery of key ambitions and increases opportunities for health equality across Midlothian**.**
This work will be undertaken in three phases:

- Phase 1: review all service contracts and establish where savings can be safely made,
- Phase 2: work with providers to design a new partner / provider model
- Phase 3: review and refresh the local governance, monitoring and evaluation framework for all commissioned spend.

For the purposes of this ECRIA, the purpose and scope of this work is related to Phase 1: the review of service contracts to identify potential savings as part of Midlothian IJBs Financial Recovery Planning to set a balanced budget for 2025/26.

A Contract Template has been developed for all existing Commissioned Providers. This is currently being populated to assesses the impact on commissioned providers of potential contract reductions. Once completed this will help to identify rationale, impact, risks assessments and mitigations. This will help inform the ECRIA and subsequent actions.

This will not affect the following areas which are deemed out of scope of this work.

- Statutory obligations
- Residential Placements funded via the National Care Home Contract.
- External Residential Placements
- Advocacy contracts (a separate review is underway).
- Carers funding (in recognition of the role unpaid carers play at a time of financial challenge).

Who will be affected by this proposed work

There is potential for this work to affect anyone living within the boundary of the Midlothian Health and Social Care Partnership's geographical footprint who receive a commissioned service to be affected by this work.
This work is at an early stage on planning. It is likely that other equality issues impacting groups of people with protected characteristics will be identified through consultation at appropriate points of the planning phases and of this programme of work. These will be addresses on an issue-by-issue basis.

All people may need to make use of health and social care services, and this could be at any time across their lifetime. However, we assume that the most vulnerable in our community are more likely to potentially experience disproportionate impacts, both positive and negative, of this Financial Recovery Plan.

Evidence

Evidence used:

A range of evidence will be considered throughout this project. Set out below are some high-level generic data and information for Midlothian that may help inform the work of the project. We will also include the most recent Midlothian JSNA. Further data and information will be gathered from current services through the commissioned services framework, including current work on data gathering on the Provider Framework.

This Midlothian Demographic Profile is based on the 2011 and 2022 census data, Midlothian Council Internal Data, the Joint Needs Assessment and other relevant data reports.

- On 30 June 2022, the population of Midlothian was 97,030. This is an increase of 1.4% from 95,690 in 2021. Over the same period, the population of Scotland increased by 0.5%.
- Compared with 2001, the number of dwellings in Midlothian has increased by 32.3%. This is the highest percentage change out of the 32 council areas in Scotland and a more rapid change than for Scotland as a whole (+17.3%).

Age

In terms of overall size, the 45 to 64 age group was the largest in 2021, with a population of 25,243. In contrast, the 75 and over age group was the smallest, with a population of 7,740.

Sex

In 2022, there were more females (51.7%) than males (48.3%) living in Midlothian. There were also more females (51.4%) than males (48.6%) living in Scotland overall.
Reference: National Records of Scotland Midlothian Council Area Profile (nrscotland.gov.uk)

Disability

in Midlothian 9.7% of people self-identified as living with a long-term health problem or disability that limits their day-to-day activity, and has lasted, or is expected to last, at least 12 months, which is below the Scotland percentage of 10.8%.
In Midlothian in 2023, records show that:

• 3,179 adults (18 and over) known to the Adults and Social Care team have physical disability recorded as their primary care group,
• 1,200 people are recorded as wheelchair users, and
• 5,681 people have a blue badge.
Reference: Midlothian Council Internal Data: Mosaic, accessed Feb 2023

In 2021/22, Scotland and Wales had the highest proportion of disabled people (both 26%), compared with the UK average of 24% [UK Parliament Research Briefing]. Analysis based on the Scottish Household Survey 2015 showed that there were around 87,340 households with a wheelchair user in Scotland (3.6% of all households). In 2021, Scottish Government reported that there were 235,779 live Blue Badges in Scotland.

785 adults with a Learning Disability are known to Social Care services in Midlothian.
Reference: Midlothian Council Internal Data: Mosaic, accessed Feb 2023.

Based on the Learning Disability Statistics Scotland (LDSS) 2019 report, there were 23,584 adults with a Learning Disability known to local authorities across Scotland. This national dataset is collected by Public Health Scotland but has not been published since 2019, so a more recent comparison is not possible.

Midlothian has a higher prevalence rate of adults with a Learning Disability known to Social Care (6.3 per 1,000) in comparison to the Scottish average (5.2 per 1,000). In Midlothian, 66.4% of adults with learning disabilities lived in mainstream accommodation without support. This is slightly greater than in the whole of Scotland where it was 61.8% in 2019.
[Reference: Scottish Commission for Learning Disability, 2019].

Gender reassignment

The 2022 census included a question on trans status or history for the first time. This was a voluntary question for people aged 16 and over.
For Scotland as a whole, the census found that 19,990 people were trans or had a trans history. This equates to 0.44% of people aged 16 and over. Almost half (46.1%) of trans people were aged 16 to 24 with around a quarter (26.0%) aged 25 to 34.
In Midlothian, the majority (n= 74,094) of people aged 16 and over, stated that they are not trans and do not have a trans history. The number of people who stated that they either are trans or have a trans history was 230.
[Reference: Scotland Census 2022 – National Records of Scotland scotlandscensus.gov.uk]

Marriage & civil partnership

Marriages have declined in Midlothian, from 701 in 2005 to 319 in 2021. Civil Partnerships have also declined since being introduced in 2005, averaging 5 per year from 2006-2014 and recording 5 in total from 2015-2021.
[Reference: Marriages and Civil Partnership - Time Series Data | National Records of Scotland (nrscotland.gov.uk)]

Pregnancy & maternity

In 2021, there were 1,071 births in Midlothian. This is an increase of 9.4% from 979 births in 2020.
In Midlothian, the standardised birth rate increased from 10.8 per 1,000 population in 2020 to 11.7 in 2021. In comparison, the rate in Scotland overall increased from 8.6 to 8.7. In 2021, Midlothian was the council area with the highest standardised birth rate.
Reference: National Records Scotland
Midlothian Council Area Profile (nrscotland.gov.uk)

Race

The 2022 census shows that the majority of people in Midlothian are White (including White Scottish, Other White British, White Irish, White Gypsy/Traveler, White Polish and Other White):

- White Total: 92,527
- Asian, Asian Scottish, Asian British Total: 2219
- African Total: 474
- Caribbean or Black Total: 95
- Other ethnic groups total: 562

Reference: Scotland Census 2022 – National Records of Scotland (scotlandscensus.gov.uk)

Religion and Belief

In 2011 in Midlothian the most common religion was Church of Scotland (33.7%), followed by Roman Catholic (9.8%), other Christian (4%), Muslim (0.6%), other religion (0.5%). 45.2% of people reported no religion and 6.2% didn't state their religion.
Reference: 2011 Census National Records of Scotland

Sexual orientation

Census data relating to sexual orientation was also included as a voluntary question for the first time in 2022. It found that there were 183,860 LGB+ people in Scotland, 4.0% of people aged 16 and over.
In 2019, 90% of people aged 16 and over in Midlothian identified as Straight/Heterosexual. 1205 people identified as Gay or Lesbian, 990 identified as Bisexual, and 238 identified as 'Other sexual orientation'
Reference: Scotland Census 2022 – National Records of Scotland Council Area 2029 by Sexual orientation by Age (scotlandscensus.gov.uk)

Socio-economic Deprivation

In 2020, Midlothian had 8.7% share of 20% most deprived data zones. This means that there are 20 Local Authorities with a higher share of the 20% most deprived data zones.
Reference: Scottish Government, 2023
Whilst all areas in the most deprived 20% were around Dalkeith, Mayfield, Easthouses and Gorebridge, areas in the most deprived 20-30% were spread more widely including Thornybank, Penicuik and Newtongrange.
Reference: Midlothian HSCP, Joint Needs Assessment, Inequalities - Midlothian Health and Social Care Partnership, May 2024.

Summary of the ECRIA:

The composition of the group who undertook this ECRIA consisted of the Head of Service, and the Midlothian HSCP Transformation Programme Lead.

Further work is required but identified below are initial thinking on:

Benefits

- Improved Accessibility: This review can help identify and address barriers that protected groups may face in accessing services, ensuring inclusivity.
- Tailored Support: By understanding and revisiting the specific needs of these groups, services can be adapted to provide more personalised and effective support.
- Equality of Opportunity: This review can help ensure that services are delivered fairly, promoting equal opportunities for all, regardless of their characteristics.
- Compliance with Legal Obligations: Midlothian HSCP will ensure compliance with statutory and regulatory requirements and any redesign of provision will ensure this remains. But reviews help ensure compliance and prevent discrimination.
- Commissioned Provider Engagement: Work has started in 2024 with all commissioned providers to look communicate and update on the need to look at efficiencies and costs from the HSCP.
- Better Outcomes: This review can contribute to improved health, well-being, and quality of life for protected groups by addressing their unique challenges.

Major concerns –may impact on commissioned providers. These are initial high-level assessment of major concerns and further work is required.

- Potential for Commissioned Providers to hand back current contracts. This would provide increased pressure on Midlothian HSCP workforce and ability to provide specialist service provision.
- Potential for Commissioned Providers to be unable to continue with similar Financial sustainability pressures being levied by all Lothian HSCPs where the commissioned providers operates in more than one partnership area.
- Levels of funding being received from NHS Lothian and Midlothian Council over the next 5-10 years and the annual statements make longer term financial planning and sustainability challenging.
- The ambition to move care 'closer to home' has the potential to increase the reliance on unpaid carers, the majority of whom are women.

Minor concerns

Further work required

Recommendations

A Contract Template has been developed for all existing Commissioned Providers. This is currently being populated to assesses the impact on commissioned providers of potential contract reductions. Once completed this will help to identify rationale, impact, risks assessments and mitigations. This will help inform the ECRIA and subsequent actions.

This ECRIA was reviewed by Nick Clater, Head of Adult Services and Chief Social Work Officer (CSWO) and following agreement, submitted to Midlothian IJB. The specific recommendations follow in the next section.

Making a difference

What changes will you make to your proposal based on the results of this impact assessment?

We are not at the stage to be able to set out the changes we will require to make.

A Contract Template has been developed for all existing Commissioned Providers. This is currently being populated to assesses the impact on commissioned providers of potential contract reductions. Once completed this will help to identify rationale, impact, risks assessments and mitigations.

The completion of the Contract Templates will help inform more detailed impact assessments and allow us to consider changes we may be required to make within the current contract reduction proposals.

Once we have undertaken the work identified above, this will help to better understand and explain the impact on equality for those who are accessing our services and subsequently what actions and mitigations we can put in place. We will then be able to more clearly any changes to the proposals based on a more detailed impact assessment.

Changes	What difference this will make
Ensure review methodology adopts the following principles • Protect core care • No blanket reductions or applying a set % of reduction indiscriminately across all commissioned services • Review contract delivery and performance first • Consider alternative delivery where it makes sense to do so	This will ensure • No loss of statutory care funding • A considered approach to identifying financial savings • Looking for savings where commissioned services are not providing what has been commissioned i.e., where there is capacity that is paid for, but not delivered. • Promote redesign and transformation to improve equality

Sharing with decision-makers

This ECRIA, proposed changes and mitigations will be shared with all members of Midlothian IJB for final review and agreement.

Monitoring the impact

As this work is at an early stage, we are not able to set this out. Once further work has been undertaken in relation to evidence being gathered, we will be in a clearer position to set out what data/information we have and what more we require to gather. This will direct us as a project team to know what we require to monitor and measure.

What information will you start or continue to collect and report on?	What impact are you measuring
A Contact Template has been developed for all existing Commissioned Providers. This is currently being populated to assesses the impact on commissioned providers of potential contract reductions. Once completed this will help to identify rationale, impact, risks assessments and mitigations.	The completion of the Contract Templates will help inform more detailed impact assessments and allow us to consider changes we may be required to make within the current contract reduction proposals.

Impact on equality & socio-economic disadvantage

Negative impacts

Using the evidence you have collected, explain if your proposal could be discriminatory and/ or put a group of people sharing one of these characteristics at a disadvantage for a reason connected to that characteristic.
Note – answer yes/ no and if yes provide brief reasons.

At this early stage of planning, we do not have agreed proposals. This also means we do not know what commissioned providers or clients will be impacted upon. Therefore, the responses below are only, at this stage, highlighting for us, as the Project Team, areas where there may be discrimination and to ensure we consider and action this further

Relevant group	Could your work result in unlawful discrimination?	Could your work put people at a disadvantage/ make their lives worse?
People in different age groups	No	A proposed reduction in the current funding package for commissioned services may result in a decrease of those commissioned services and therefore potentially those in receipt of such services. But we will be compliant and continue to provide statutory care within our legislative framework.
Disabled people	No. Further work required to be able to completely respond.	by overprotective and discriminatory attitudes.

Relevant group	Could your work result in unlawful discrimination?	Could your work put people at a disadvantage/ make their lives worse?
Trans and non-binary people	No. Further work required to be able to completely respond.	
People who are pregnant or on maternity leave	No Further work required to be able to completely respond.	
People from different ethnic backgrounds	No. Further work required to be able to completely respond.	. ○ Residential Placements funded via the National Care Home Contract. ○ External Residential Placements ○ Advocacy contracts (a separate review is underway). ○ Carers funding (in recognition of the role unpaid carers play at a time of financial challenge).
People with religious or protected beliefs	No. Further work required to be able to completely respond	

Relevant group	Could your work result in unlawful discrimination?	Could your work put people at a disadvantage/ make their lives worse?
Men and women [This may include carers, because many are women.]	No. Further work required to be able to completely respond.	
People who are heterosexual, lesbian, gay or bisexual	No. Further work required to be able to completely respond	
People who are married or in a civil partnership [only in employment situations]	No. Further work required to be able to completely respond	
Care experienced people	No. There is no legal protection from discrimination on basis of care experience. Further work required to be able to completely respond	
People experiencing health inequalities caused by socio-economic disadvantage [This may include people living in different or difficult circumstances such as people experiencing homelessness, who are in prison or	No. There is no legal protection from discrimination on basis of socio-economic disadvantage. Further work required to be able to completely respond	

Relevant group	Could your work result in unlawful discrimination?	Could your work put people at a disadvantage/ make their lives worse?
are ex-offenders, people with addictions and people involved with prostitution. Note – travel costs have a particular impact on people experiencing poverty.]		
People experiencing employment inequalities caused by socio-economic disadvantage	No. There is no legal protection from discrimination in employment on basis of socio-economic disadvantage. Further work required to be able to completely respond	
Carers	No There is no legal protection from discrimination on basis of caring responsibilities. Women continue to have the majority of caring responsibilities and can be put at a particular disadvantage in connection with this. This may be unlawful indirect sex discrimination. Further work required to be able to completely respond	

Positive impact

Using the evidence you have collected, explain if and how your proposal could have a positive impact on reducing inequalities experienced by groups of people sharing these characteristics.
Note – answer yes/ no and if yes provide brief reasons.

At this stage of the planning process, our goal would be to advance equality of opportunity for the Midlothian population, but we need to better understand if this is variable across different relevant groups.

The work being undertaken with the Review of Commissioned Providers and the gathering of risks/impact assessments and mitigations will help inform this work further.

Relevant group	**Can your work advance equality of opportunity?** [reduce disadvantage, meet needs, increase participation]	**Can your work foster good relations?** [reduce prejudice + increase tolerance]
People in different age groups	No	Further consideration required.
Disabled people	No	Further consideration required.
Trans and non-binary people	No	Further consideration required.

Relevant group	Can your work advance equality of opportunity? [reduce disadvantage, meet needs, increase participation]	Can your work foster good relations? [reduce prejudice + increase tolerance]
People who are pregnant or on maternity leave	No	Further consideration required.
People from different ethnic backgrounds	No	Further consideration required.
People with religious or protected beliefs	No	Further consideration required.
Men or women [This may include carers, because many are women]	No	Further consideration required.
People who are heterosexual, lesbian, gay or bisexual	No	Further consideration required.
Care experienced people	No	Further consideration required.

Relevant group	Can your work advance equality of opportunity? [reduce disadvantage, meet needs, increase participation]	Can your work foster good relations? [reduce prejudice + increase tolerance]
People who experience health inequalities caused by socio-economic disadvantage [This may include people in different or difficult circumstances, such as people experiencing homelessness, who are in prison or ex-offenders, people with addictions and people involved with prostitution. Note – travel costs have a particular impact on people experiencing poverty.]	No	Further consideration required.
People who experience employment inequalities caused by socio-economic disadvantage. [This may include people in different or difficult circumstances, such as people experiencing homelessness, who are in prison or ex-offenders, people with addictions, ex-	No	Further consideration required.

Relevant group	Can your work advance equality of opportunity? [reduce disadvantage, meet needs, increase participation]	Can your work foster good relations? [reduce prejudice + increase tolerance]
service personnel/veterans and people involved with prostitution. Note – travel costs have a particular impact on people experiencing poverty.]		
Carers	No	Further consideration required.

Impact on UNCRC rights

Guidance pages 23-25

If your proposal does not affect children and young people do not complete this section.

If your proposal affects children and young people up to age 18, use the evidence you have collected to explain how your proposal could impact Children's Rights. Not all UNCRC rights may apply to your proposal. If this is the case, simply say 'Neutral.'

UNCRC right	Is your work compatible with this right?	How will your work progress this right?	Are any groups of children particularly impacted
1 – we must make sure everyone under 18 years old can enjoy all UNCRC rights	Neutral		
2 – we must make sure all UNCRC rights apply to every child without discrimination.	Neutral		
3 – we must make sure the best interests of the child are a top priority in all decisions and actions that affect the child.	Neutral		
4 - we must create systems that promote and protect UNCRC rights.	Neutral		

UNCRC right	Is your work compatible with this right?	How will your work progress this right?	Are any groups of children particularly impacted
5 – we must respect the rights and responsibilities of parents and carers to provide guidance and direction to their child as they grow up, recognising the child's capacity to make their own choices.	Neutral		
6 – we must do everything we can to ensure that children survive and develop to their full potential.	Neutral		
7 – we must respect the right to be registered at birth, to have a name and nationality and as far as possible for children to know and be cared for by their parents.	Neutral		
8 – we must respect and protect children's right to an identity and prevent a child's name, nationality or family relationships from being changed unlawfully.	Neutral		
9 – we must not separate children from their parents against their will unless it is in their best interests and uphold the right to stay in contact with both parents, unless this could cause them harm.	Neutral		

UNCRC right	Is your work compatible with this right?	How will your work progress this right?	Are any groups of children particularly impacted
10 – we must respond quickly and sympathetically if a child or their parents apply to live together in the same country. The right to visit and keep in contact with both parents if they live in different countries.	Neutral		
11 – we must do everything we can to stop children being taken out of their own country illegally by their parents or other relatives, or being prevented from returning home.	Neutral		
12 – we must respect the right for children to express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously.	Neutral		
13 – we must make sure every child is free to express their thoughts and opinions and to access all kinds of information, as long as it is within the law.	Neutral		
14 – we must respect children's right to think and believe what they choose and also to practise their religion as long as they are not stopping other people from their rights. We must respect the rights	Neutral		

UNCRC right	Is your work compatible with this right?	How will your work progress this right?	Are any groups of children particularly impacted
and responsibilities of parents to guide their child as they grow up.			
15 – we must respect the right to meet with other children and join groups and organisations as long as this does not stop other people from enjoying their rights.	Neutral		
16 – we must respect the right to privacy and protecting the child's private, family and home life, including protecting children from unlawful attacks that harm their reputation.	Neutral		
17 – we must ensure children have access to reliable information from a variety of sources, and help to protect children from materials that could harm them.	Neutral		
18 – we must support parents by creating support services for children and giving parents the help they need to raise their children.	Neutral		
19 – we must do everything we can to protect children from all forms of violence, abuse, neglect and bad	Neutral		

UNCRC right	Is your work compatible with this right?	How will your work progress this right?	Are any groups of children particularly impacted
treatment by their parents or anyone else who looks after them.			
20 – we must give children who cannot be looked after by their immediate family special protection and assistance, that is continuous and respects their culture, language and religion.	Neutral		
21 – the process of adoption must be safe, lawful and prioritises children's best interests.	Neutral		
22 – if a child is seeking refuge or has refugee status, we must provide them with appropriate protection and assistance (within our remit/ functions) to help them enjoy UNCRC rights.	Neutral		
23 – we must do all we can to support disabled children and their families to enjoy their right to live a full and decent life with dignity and as far as possible independence and to play an active part in the community.	Neutral		

UNCRC right	Is your work compatible with this right?	How will your work progress this right?	Are any groups of children particularly impacted
24 – we must provide good quality health care and education on health and well-being so that children can stay healthy.	Neutral		
25 – we must make sure children who have been placed away from home for the purpose of care or protection (e.g. in hospital) can have a regular review of their treatment, the way they are cared for and their wider circumstances.	Neutral		
26 – Governments must provide social security, including financial support and other benefits to families in need of assistance.	Neutral		
27 – we must help families (within our remit, functions) who cannot afford to, to provide their child with a standard of living that is good enough to meet their physical and social needs and support their development.	Neutral		
28 – every child has the right to an education and discipline in schools must respect children's dignity and their rights.	Neutral		

UNCRC right	Is your work compatible with this right?	How will your work progress this right?	Are any groups of children particularly impacted
29 – education must develop every child's personality, talents and abilities to the full and encourage child's respect for human rights, as well as respect for their parents, their own and other cultures and the environment.	Neutral		
30 – we must respect that every child has the right to learn and use their language, customs and religion of their family, whether or not these are shared by the majority of the people in the country where they live.	Neutral		
31 – we must respect the right of every child to relax, play and take part in a wide range of cultural and artistic activities.	Neutral		
32 – we must protect children from economic exploitation and work that is dangerous or might harm their health, development or education.	Neutral		
33 – we must protect children from the illegal use of drugs and from being involved in the production or distribution of drugs.	Neutral		

UNCRC right	Is your work compatible with this right?	How will your work progress this right?	Are any groups of children particularly impacted
34 – we must protect children from all forms of sexual abuse and exploitation.	Neutral		
35 – we must protect children from being abducted, sold or moved illegally to a different place in or outside their country for the purpose of exploitation.	Neutral		
36 – we must protect children from all other forms of exploitation (e.g. by the media, or for medical research)	Neutral		
37 – we must not torture or cause suffering or other cruel or degrading treatment or punishment. Children should be detained only as a last resort and for the shortest time possible. They must be treated with respect and care and be able to keep in contact with their family.	Neutra		
38 – we must do everything we can to protect and care for children affected by war and armed conflicts.	Neutral		

UNCRC right	Is your work compatible with this right?	How will your work progress this right?	Are any groups of children particularly impacted
39 – we must provide special support to help children who have experienced neglect, abuse, exploitation, torture or who are victims of war to recover their health, dignity, self-respect and social life.	Neutral		
40 – we must treat a child accused or guilty of breaking the law with dignity and respect.	Neutral		
41 – we must comply with national laws and standards that go further than UNCRC rights.	Neutral		
42 – we must actively work to make sure children and adults know about UNCRC.	Neutral		