



REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD – 21st JUNE 2023

REPORT ON: FAIRER WORKING CONDITIONS IN HOME CARE UPDATE

REPORT BY: CHIEF OFFICER

REPORT NO: DIJB30-2023

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to update the Integration Joint Board regarding ongoing work to consistently implement good practice principles for fairer work with commissioned providers of care at home services.

2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB):

- 2.1 Note the content of this report, including the good practice principles for fairer work that have been identified (section 4.3).
- 2.2 Note the progress that has been achieved to date and the approach to working in partnership with commissioned providers to consistently implement these principles across the care at home workforce.
- 2.3 Note the significant benefits evidenced as resulting from this work (sections 4.4-4.7).
- 2.4 Approve the proposal to extend the good practice principles for fairer work into the 2023/24 commissioning contracts.

3.0 FINANCIAL IMPLICATIONS

3.1 The financial implications of implementing the fairer working still require further analysis and the full benefits are difficult to quantify at this development stage. The reduction in avoidable admissions and delayed discharges due to improvements in social care unmet need through for example better use of downtime can only be analysed over a 1-2 year period. Cost savings due to the integrated approach of using providers and OTs more effectively and less reliance on social care due to the preventative approach, will also only be evidenced over this period. These however will be offset by the additional cost of paying care providers on a planned care basis rather than actuals.

4.0 MAIN TEXT

4.1 This report relates to a previous report submitted to the IJB, Report No DIJB5-2022 (Article XII of the minute refers) which details the good practice principles and the outcome of a baseline audit carried out of the then 13 providers of which 12 responded. A test of change was carried out to directly address the first element identified in section 4.3, as the findings showed only 50% of providers paid staff for the full shift. Any downtime due to cancellations, admissions or unallocated time between support visits remained unpaid, as providers could only pay staff what the Partnership paid the provider. Those who did pay full shift costs either reported reducing training or other costs to compensate.

4.2 The Dundee Health and Social Care Partnership recognises the vital contribution of the social care workforce to the health and wellbeing of the population and the importance of working with

providers to achieve fairer working conditions. This is also supported nationally through the Fair Work in Social Care Group, led by the Scottish Government and involving a range of stakeholders including COSLA, care providers, Scotland Excel, Trade Unions and professional led bodies such as Health and Social Care Scotland. This group has been pivotal in advancing pay levels and conditions for social care staff. Having fully supported the living wage across this workforce this report outlines progress to date in implementing fairer working conditions and proposed next steps.

- 4.3 The Partnership has worked with stakeholders, including staff side representatives, and identified a number of areas which are considered to be good practice:
- Providers should pay staff the living wage for the whole shift including travel and training.
 - An enhanced rate should be paid for weekends, public holidays and antisocial hours.
 - Provider should not use zero-hour contracts, although it is recognised that sessional work can be mutually beneficial to some staff and employers. Where staff are not recruited on a sessional basis they should be offered a guaranteed hours contract.
 - Travel as part of work should be funded by the provider.
 - Staff should be provided with the equipment they need to undertake their role and should not incur any additional cost for this, e.g. uniform/phone etc.
 - Staff should be provided with the training they need to complete their role and should not incur a cost from this. Attendance should be paid for mandatory training including induction.
 - Staff should not be asked to pay for any checks associated with safe recruitment procedures.
 - Providers should recognise Trade Unions who have membership within their employment.
 - Reasonable provision should be made to support workers to achieve SVQ qualifications and career progression.
- 4.4 When designing the test of change it was important to ensure any paid downtime between duties was used to best effect, improving outcomes for the people using our services. The Test of change commenced in October 2022- March 2023, with feedback and data collation monitoring progress, outcomes and impact on unmet need. This test was carried out in conjunction with another test of change linking the Resource Matching Unit with an Enablement Support Worker and the Independent Living Review Team. As such it is not possible to accurately quantify how much of the unmet need was addressed by each test but to date we have achieved approximately a 30% reduction in unmet need during this period, despite the impact of winter pressures and COVID-19, in turn supporting the reduction in delayed discharges.
- 4.5 It was agreed this process needed to be developed in partnership with providers and a steering group was set up jointly led by the contract manager, contract team and our Independent Sector Lead for Scottish Care. In the testing phase commissioned partners were invited to be flexible with how best to use any downtime to meet service users outcomes within agreed parameters of: enablement such as learning how to use technology to self-manage their condition or set reminders for medication, reablement such as practice to regain skills or build confidence following discharge or a fall, enhanced support to prevent deterioration such as additional support with nutrition and hydration or additional visits to prevent admission to hospital or a care home, and training.
- 4.6 Feedback was received from 21 service users, 171 staff members and 19 organisations (22 now provide services within Dundee but 3 already paid full shift costs and did not wish to affect the data so did not respond, one of the respondents also pay full shift costs). Of the 19 who responded only 12 are providing regular services within Dundee and included in the dataset for financial purposes. All feedback was very positive and highlighted access to rapid support, reduced inequalities, more personalised services, prevention of decline and hospital admission, improvements in recruitment and retention, financial stability for both organisations and staff, continuity of care and improved service reliability, less anxiety and higher morale and motivation in the workforce.

- 4.7 18 out of the 21 case studies and service user feedback highlighted a belief that the use of this periodic downtime had prevented admission to hospital. The average length of stay under geriatric medicine from February 2022 to January 2023 was 12 days. At an estimated cost of £287 per day this equates to a potential saving of £61,992 for the 6-month period for these case studies alone.
- 4.8 Due to data quality issues we do not have data on the overall number of service users supported with additional periodic services with some semi planned service provision reported via the actuals but most of the additional periodic support being included in the shift payments. As a result, the initial additional cost of full shift payments has not separated out the additional service provision delivered as a result. This will be rectified in the next phase of this work. Additionally, one provider reported a 99.7% additional cost which on investigation was due to data quality with the IT recording system entries (CM2000) with all 3 providers still using CM2000 having similar data quality issues artificially inflating the additional costs substantially and have therefore been excluded from the dataset. One small provider reported 0% additional cost due to a different way of scheduling and reports no downtime but is included as this was cost neutral. One provider was subject to a Large-Scale Inquiry (LSI), transferred many complex care packages to other providers and only resumed full service provision in February resulting in an additional cost of 48.1%. They have also been excluded for data purposes although full data is included in section 3.3 for transparency.
- 4.9 The phase two test of change is to formalise the processes and data collation and use a more targeted approach to maximise the benefits for service users. The Independent Living Review Team are working in partnership with external providers to support the achievement of positive independent living outcomes for Service users. The initial test has identified the key areas to maximise the benefits of any periodic downtime. They will work with providers and the service user to set meaningful goals with a focus on mobility, falls prevention, increasing confidence and safety and improving the health and wellbeing for that individual. This will be achieved by supporting the providers care workforce, to use the down time within rotas to undertake tasks to help the service user achieve independence.
- 4.10 Key areas:
- Assessment and review of an individual's functional abilities and support needs to promote independent living.
 - Enabling independence in the home environment.
 - Working directly with care providers to support in rehabilitation approaches and create a culture of enablement, reablement and supported self-management (supporting care workers to assist in meeting the person's prescribed goals /Independent Living Review Team (ILRT) specific tasks)
 - Robust review of care and support packages both at initial implementation stage, and after changes in need.
 - Optimising the use of available resources.
 - Identify and deliver on the skills & training required for Carers
 - The ILRT were set up to provide short term immediate assessment, provision of basic equipment and show any carers involved simple rehab approaches, to help reduce unnecessary dependence on packages of care (PoC) ensuring we maximise the use of scarce resources including Social Care and OTs.
- 4.11 The second phase test of change will commence with 1 external provider, focussing on current service user's they support but also new service users that have been allocated via the Resource Matching Unit. The current practice and use of downtime will continue across all providers with further transitions to a more focused approach over the remainder of this financial year.

5.0 POLICY IMPLICATIONS

This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

6.0 RISK ASSESSMENT

This is a mandatory field and an explanation must be provided which covers the fields below. Please fill in and copy this table for each individual risk identified.

Risk 1 Description	If the fair working principles are not embedded into future contracts the risks to service users is greater dependence on social care services, reduced quality of life, increased hospital admissions and delayed discharges leading to further increasing costs, increasing unmet need and escalation of risk to service users.
Risk Category	Financial, Political
Inherent Risk Level	Likelihood (3) x Impact (4) = Risk Scoring (12)
Mitigating Actions (including timescales and resources)	The current increased cost is leading to significant reductions in both bed days and social care unmet need. This in turn is expected to result in financial savings over the following 2-3 financial years.
Residual Risk Level	Likelihood (2) x Impact (3) = Risk Scoring (6)
Planned Risk Level	Likelihood (2) x Impact (3) = Risk Scoring (6)
Approval recommendation	The IJB is recommended to accept the risk levels with the expectation that the mitigating actions are taken forward.

Risk 2 Description	The risks to staff and organisations include destabilisation of the market and recruitment and retention of social care staff. Without full cost of shift payments staff would not be paid the National Minimum Wage and would be significantly below the National Living Wage.
Risk Category	Governance, Political
Inherent Risk Level	Likelihood (3) x Impact (3) = Risk Scoring (9)
Mitigating Actions (including timescales and resources)	The test of change has stabilised both the market and recruitment and retention. Staff are engaging well and the new contracts would allow us to formalise the need to use the downtime more effectively reducing costs.
Residual Risk Level	Likelihood (2) x Impact (3) = Risk Scoring (6)
Planned Risk Level	Likelihood (2) x Impact (3) = Risk Scoring (6)
Approval recommendation	The IJB is recommended to accept the risk levels with the expectation that the mitigating actions are taken forward.

7.0 CONSULTATIONS

The Chief (Finance) Officer and the Clark were consulted in the preparation of this report. The following stakeholders were full partners in developing and evaluating this work

- Integrated Manager and Team Manager for Partnership Care at Home Services
- Independent Lead Scottish Care Rep
- Project Manager and Contract Officer DHSCP
- Commissioned Services and staff
- Service Users

8.0 DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	
	2. Dundee City Council	X
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

9.0 BACKGROUND PAPERS

None.

Angela Smith
Associate Locality Manager

DATE: 24 April 2023

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DIRECTION FROM DUNDEE CITY INTEGRATION JOINT BOARD

1	Reference	DIJB30-2023
2	Date Direction issued by Integration Joint Board	21 June 2023
3	Date from which direction takes effect	21 June 2023
4	Direction to:	Dundee City Council
5	Does this direction supersede, amend or cancel a previous direction – if yes, include the reference number(s)	No
6	Functions covered by direction	Externally provided care at home services
7	Full text of direction	Dundee City Council is directed to commission external care at home services in line with the Fair Work principles outlined in this report.
8	Budget allocated by Integration Joint Board to carry out direction	The value of the final 2023/24 external care at home budget
9	Performance monitoring arrangements	Performance information provided to the Performance and Audit Committee and further update reporting to the IJB in 12 months time
10	Date direction will be reviewed	31 March 2024

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TEST OF CHANGE – PAYMENT OF SHIFT HOURS – 10/10/22 to 31/03/2023

ONLY PROVIDERS WHO TOOK PART IN THE TEST OF CHANGE HAVE BEEN INCLUDED FORM THE DATE THEY STARTED THE TEST OF CHANGE

Allied Healthcare (CM USER)									
Date	Option 2 Actual Hrs	Option 2 Hosp and Cancel Hrs	Option 3 Actual Hrs	Option 3 Missing Hrs from CM	Option 3 Final Invoice Hrs	Option 3 Hosp and Cancel Hrs	Respite Actual Hrs	Respite Hosp and Cancel Hrs	Shift Hrs
10/10/22	0.00	0.00	0.00	0.00	670.06	7.00	0.00	0.00	1,038.25
17/10/22	0.00	0.00	0.00	27.50		1.50	0.00	0.00	1,047.00
24/10/22	0.00	0.00	0.00	41.75		39.00	0.00	0.00	1,057.50
31/10/22	0.00	0.00	0.00	41.75		49.50	0.00	0.00	1,090.45
07/11/22	0.00	0.00	0.00	42.00	3,267.75	23.75	0.00	0.00	1,099.91
14/11/22	0.00	0.00	0.00	33.00		13.00	0.00	0.00	1,126.77
21/11/22	0.00	0.00	0.00	33.25		40.00	0.00	0.00	1,116.56
28/11/22	0.00	0.00	0.00	27.25		62.00	0.00	0.00	1,113.00
05/12/22	0.00	0.00	0.00	35.25	3,202.25	66.50	0.00	0.00	1,122.55
12/12/22	0.00	0.00	0.00	59.50		48.75	0.00	0.00	1,120.16
19/12/22	0.00	0.00	0.00	59.75		58.25	0.00	0.00	1,090.50
26/12/22	0.00	0.00	0.00	60.25		36.25	0.00	0.00	1,099.84
02/01/23	0.00	0.00	0.00	134.00	3,103.75	20.25	0.00	0.00	1,114.00
09/01/23	0.00	0.00	0.00	0.00		52.25	0.00	0.00	1,110.05
16/01/23	0.00	0.00	0.00	0.00		28.75	0.00	0.00	1,107.50
23/01/23	0.00	0.00	0.00	5.50		61.00	0.00	0.00	1,129.63
30/01/23	0.00	0.00	0.00	15.75	3,127.50	34.50	0.00	0.00	1,145.59
06/02/23	0.00	0.00	0.00	1.50		5.25	0.00	0.00	1,150.72
13/02/23	0.00	0.00	0.00	7.25		8.50	0.00	0.00	1,215.20
20/02/23	0.00	0.00	0.00	7.50		41.75	0.00	0.00	1,268.49
27/02/23	0.00	0.00	0.00	7.50	3,383.25	27.00	0.00	0.00	1,298.39
06/03/23	0.00	0.00	0.00	221.00		14.75	0.00	0.00	1,286.59
13/03/23	0.00	0.00	0.00	206.75		0.75	0.00	0.00	1,274.65
20/03/23	0.00	0.00	0.00	205.25		11.50	0.00	0.00	1,229.70
27/03/23-31/03/23	0.00	0.00	0.00	148.21	2,902.48	0.50	0.00	0.00	933.22
Totals	0.00	0.00	0.00	1,421.46	19,657.04	752.25	0.00	0.00	28,386.22

Call-In Homecare							
Date	Option 2 Actual Hrs	Option 2 Hosp and Cancel Hrs	Option 3 Actual Hrs	Option 3 Hosp and Cancel Hrs	Respite Actual Hrs	Respite Hosp and Cancel Hrs	Shift Hrs
10/10/22							
17/10/22							
24/10/22							
31/10/22							
07/11/22							
14/11/22							
21/11/22							
28/11/22	0.00	0.00	1,029.75	61.50	0.00	0.00	1,181.00
05/12/22	0.00	0.00	1,034.50	48.50	0.00	0.00	1,226.00
12/12/22	0.00	0.00	1,000.50	72.00	0.00	0.00	1,182.75
19/12/22	0.00	0.00	938.75	50.00	0.00	0.00	1,198.50
26/12/22	0.00	0.00	972.50	21.25	0.00	0.00	1,172.75
02/01/23	0.00	0.00	1,034.50	20.00	0.00	0.00	1,200.75
09/01/23	0.00	0.00	1,022.25	30.25	0.00	0.00	1,187.75
16/01/23	0.00	0.00	1,071.25	25.50	0.00	0.00	1,287.50
23/01/23	0.00	0.00	1,074.25	35.00	0.00	0.00	1,323.50
30/01/23	0.00	0.00	1,042.25	56.25	0.00	0.00	1,340.25
06/02/23	0.00	0.00	1,042.50	56.00	0.00	0.00	1,339.00
13/02/23	0.00	0.00	1,064.50	41.00	0.00	0.00	1,326.00
20/02/23	0.00	0.00	1,057.75	49.00	0.00	0.00	1,340.25
27/02/23	0.00	0.00	1,073.25	41.00	0.00	0.00	1,339.50
06/03/23	0.00	0.00	1,190.50	48.00	0.00	0.00	1,512.25
13/03/23	0.00	0.00	1,209.00	31.00	0.00	0.00	1,495.25
20/03/23	0.00	0.00	1,175.75	28.75	0.00	0.00	1,427.00
27/03/23-31/03/23	0.00	0.00	820.25	54.75	0.00	0.00	1,057.50
Totals	0.00	0.00	18,854.00	769.75	0.00	0.00	23,137.50
Total Payable (Actual + Hosp/Cancel Hrs):-	19,623.75						
Cost £ (Actual + Hosp/Cancel Hrs):-	£394,044.90						
Total Payable (Shift Hrs):-	23,137.50						
Cost £ (Shift Hrs):-	£464,601.00						
Additional Cost £:-	£70,556.10						
Additional Cost %-	17.9%						

Crossroads							
Date	Option 2 Actual Hrs	Option 2 Hosp and Cancel Hrs	Option 3 Actual Hrs	Option 3 Hosp and Cancel Hrs	Respite Actual Hrs	Respite Hosp and Cancel Hrs	Shift Hrs
10/10/22							
17/10/22							
24/10/22							
31/10/22							
07/11/22							
14/11/22							
21/11/22							
28/11/22							
05/12/22							
12/12/22	0.00	0.00	414.50	0.00	22.00	0.00	438.75
19/12/22	0.00	0.00	395.50	0.00	19.00	0.00	451.00
26/12/22	0.00	0.00	399.00	0.00	19.00	0.00	447.75
02/01/23	0.00	0.00	376.50	0.00	22.00	0.00	479.75
09/01/23	0.00	0.00	426.00	9.75	22.00	0.00	459.50
16/01/23	0.00	0.00	404.75	5.50	22.00	0.00	460.50
23/01/23	0.00	0.00	372.75	4.50	22.00	0.00	477.00
30/01/23	0.00	0.00	368.75	16.00	22.00	0.00	476.00
06/02/23	0.00	0.00	382.75	9.00	19.00	0.00	450.25
13/02/23	0.00	0.00	360.50	34.00	22.00	0.00	453.50
20/02/23	0.00	0.00	356.75	38.00	22.00	0.00	460.25
27/02/23	0.00	0.00	400.00	68.00	19.00	0.00	508.50
06/03/23	0.00	0.00	399.50	55.00	16.00	0.00	493.00
13/03/23	0.00	0.00	398.50	55.25	19.00	0.00	495.00
20/03/23	0.00	0.00	370.25	92.25	14.00	0.00	504.50
27/03/23-31/03/23	0.00	0.00	294.50	47.25	17.00	0.00	358.75
Totals	0.00	0.00	6,120.50	434.50	318.00	0.00	7,414.00
Total Payable (Actual + Hosp/Cancel Hrs):-	6,873.00						
Cost £ (Actual + Hosp/Cancel Hrs):-	£138,009.84						
Total Payable (Shift Hrs):-	7,414.00						
Cost £ (Shift Hrs):-	£148,873.12						
Additional Cost £:-	£10,863.28						
Additional Cost %:-	7.9%						

TayCare at Home							
Date	Option 2 Actual Hrs	Option 2 Hosp and Cancel Hrs	Option 3 Actual Hrs	Option 3 Hosp and Cancel Hrs	Respite Actual Hrs	Respite Hosp and Cancel Hrs	Shift Hrs
10/10/22	108.75	8.50	217.00	0.50	0.00	0.00	419.58
17/10/22	122.50	0.75	215.25	11.50	0.00	0.00	468.42
24/10/22	122.00	0.50	220.75	14.75	0.00	0.00	434.92
31/10/22	114.50	8.00	232.00	7.25	0.00	0.00	408.83
07/11/22	121.75	0.75	237.50	5.00	0.00	0.00	395.83
14/11/22	122.50	0.00	236.00	6.75	0.00	0.00	402.92
21/11/22	122.50	0.00	233.75	4.75	0.00	0.00	402.58
28/11/22	120.75	1.75	234.50	2.50	0.00	0.00	409.58
05/12/22	122.00	0.50	218.25	18.75	0.00	0.00	396.50
12/12/22	119.50	3.00	213.00	5.00	0.00	0.00	410.25
19/12/22	100.25	22.25	195.50	23.25	0.00	0.00	400.50
26/12/22	102.75	20.75	189.75	29.75	0.00	0.00	396.67
02/01/23	116.75	5.75	211.00	12.25	0.00	0.00	390.25
09/01/23	123.50	0.00	215.00	14.25	0.00	0.00	383.92
16/01/23	116.25	10.25	203.75	21.25	0.00	0.00	392.25
23/01/23	116.50	0.75	203.75	3.50	0.00	0.00	354.67
30/01/23	120.75	5.75	217.75	4.00	0.00	0.00	374.67
06/02/23	108.75	17.25	220.25	8.00	0.00	0.00	361.50
13/02/23	98.75	27.50	215.75	9.25	0.00	0.00	354.50
20/02/23	111.50	10.75	216.25	9.50	0.00	0.00	370.67
27/02/23	105.00	11.25	224.00	4.00	0.00	0.00	376.67
06/03/23	103.25	12.25	213.50	12.75	0.00	0.00	395.25
13/03/23	110.75	5.25	214.00	8.50	0.00	0.00	373.42
20/03/23	115.50	1.50	207.00	8.50	0.00	0.00	379.92
27/03/23-31/03/23	81.75	2.00	145.50	4.50	0.00	0.00	260.92
Totals	2,828.75	177.00	5,350.75	250.00	0.00	0.00	9,715.16
Total Payable (Actual + Hosp/Cancel Hrs):-	8,606.50						
Cost £ (Actual + Hosp/Cancel Hrs):-	£172,818.52						
Total Payable (Shift Hrs):-	9,715.16						
Cost £ (Shift Hrs):-	£195,080.48						
Additional Cost £:-	£22,261.96						
Additional Cost %:-	12.9%						

TLA							
Date	Option 2 Actual Hrs	Option 2 Hosp and Cancel Hrs	Option 3 Actual Hrs	Option 3 Hosp and Cancel Hrs	Respite Actual Hrs	Respite Hosp and Cancel Hrs	Shift Hrs
10/10/22	523.50	19.50	399.75	12.25	4.00	0.00	1,030.00
17/10/22	522.00	19.50	414.25	12.00	4.00	0.00	1,077.75
24/10/22	517.50	19.50	424.25	0.00	4.00	0.00	1,035.75
31/10/22	534.25	6.00	424.25	0.00	4.00	0.00	1,056.00
07/11/22	542.50	0.00	424.25	0.00	4.00	0.00	1,069.75
14/11/22	538.75	0.00	426.25	0.00	4.00	0.00	1,027.75
21/11/22	540.75	0.00	424.25	0.00	4.00	0.00	1,059.75
28/11/22	531.25	8.00	370.25	56.00	4.00	0.00	1,057.75
05/12/22	540.75	8.00	310.25	123.00	0.00	4.00	1,029.50
12/12/22	547.25	0.00	362.75	56.50	0.00	4.00	1,095.00
19/12/22	546.00	0.00	373.75	24.50	0.00	0.00	1,044.75
26/12/22	514.00	31.50	385.75	14.00	0.00	0.00	1,029.25
02/01/23	495.75	25.50	376.75	14.00	0.00	0.00	1,019.00
09/01/23	468.25	35.00	392.75	0.00	0.00	0.00	994.25
16/01/23	465.25	35.00	384.75	12.00	0.00	0.00	985.75
23/01/23	463.75	15.00	384.75	0.00	0.00	0.00	940.25
30/01/23	462.00	2.00	384.75	0.00	0.00	0.00	878.75
06/02/23	457.50	3.75	386.75	0.00	0.00	0.00	868.50
13/02/23	462.00	5.25	385.25	0.00	0.00	0.00	902.75
20/02/23	421.25	44.50	385.00	0.00	0.00	0.00	868.25
27/02/23	466.75	9.75	344.00	42.25	0.00	0.00	902.00
06/03/23	461.75	6.50	335.75	52.50	0.00	0.00	915.75
13/03/23	468.00	0.00	447.00	66.00	0.00	0.00	1,183.75
20/03/23	468.00	0.00	454.00	91.00	0.00	0.00	1,254.00
27/03/23-31/03/23	347.00	9.50	337.75	49.50	0.00	0.00	800.00
Totals	12,305.75	303.75	9,739.25	625.50	32.00	8.00	25,126.00
Total Payable (Actual + Hosp/Cancel Hrs):-	23,014.25						
Cost £ (Actual + Hosp/Cancel Hrs):-	£462,126.14						
Total Payable (Shift Hrs):-	25,126.00						
Cost £ (Shift Hrs):-	£504,530.08						
Additional Cost £:-	£42,403.94						
Additional Cost %:-	9.2%						

Avenue Care							
Date	Option 2 Actual Hrs	Option 2 Hosp and Cancel Hrs	Option 3 Actual Hrs	Option 3 Hosp and Cancel Hrs	Respite Actual Hrs	Respite Hosp and Cancel Hrs	Shift Hrs
10/10/22	0.00	0.00	373.50	61.50	0.00	0.00	495.25
17/10/22	0.00	0.00	384.25	50.75	0.00	0.00	493.00
24/10/22	0.00	0.00	417.00	3.50	0.00	0.00	465.00
31/10/22	0.00	0.00	407.00	10.00	0.00	0.00	494.00
07/11/22	0.00	0.00	395.50	18.00	0.00	0.00	486.00
14/11/22	0.00	0.00	384.25	28.50	0.00	0.00	461.75
21/11/22	0.00	0.00	370.00	48.75	0.00	0.00	471.75
28/11/22	0.00	0.00	383.50	32.25	0.00	0.00	465.50
05/12/22	0.00	0.00	396.50	21.50	0.00	0.00	480.25
12/12/22	0.00	0.00	361.00	51.00	0.00	0.00	464.75
19/12/22	0.00	0.00	344.25	54.25	0.00	0.00	460.00
26/12/22	0.00	0.00	346.00	59.00	0.00	0.00	461.00
02/01/23	0.00	0.00	381.75	20.25	0.00	0.00	473.50
09/01/23	0.00	0.00	367.75	24.25	0.00	0.00	459.25
16/01/23	0.00	0.00	396.50	8.00	0.00	0.00	472.50
23/01/23	0.00	0.00	377.75	36.50	0.00	0.00	483.75
30/01/23	0.00	0.00	402.00	40.75	0.00	0.00	492.75
06/02/23	0.00	0.00	407.00	36.50	0.00	0.00	519.75
13/02/23	0.00	0.00	409.25	21.25	0.00	0.00	490.25
20/02/23	0.00	0.00	395.00	17.50	0.00	0.00	496.25
27/02/23	0.00	0.00	446.75	41.00	0.00	0.00	621.50
06/03/23	0.00	0.00	478.25	32.00	0.00	0.00	610.75
13/03/23	0.00	0.00	489.75	23.50	0.00	0.00	602.75
20/03/23	0.00	0.00	479.00	36.00	0.00	0.00	631.00
27/03/23-31/03/23	0.00	0.00	407.00	24.00	0.00	0.00	536.00
Totals	0.00	0.00	10,000.50	800.50	0.00	0.00	12,588.25
Total Payable (Actual + Hosp/Cancel Hrs):-	10,801.00						
Cost £ (Actual + Hosp/Cancel Hrs):-	£216,884.08						
Total Payable (Shift Hrs):-	12,588.25						
Cost £ (Shift Hrs):-	£252,772.06						
Additional Cost £:-	£35,887.98						
Additional Cost %:-	16.5%						

Mitchell & Murdoch Care							
Date	Option 2 Actual Hrs	Option 2 Hosp and Cancel Hrs	Option 3 Actual Hrs	Option 3 Hosp and Cancel Hrs	Respite Actual Hrs	Respite Hosp and Cancel Hrs	Shift Hrs
10/10/22	380.75	0.00	0.00	0.00	0.00	0.00	442.20
17/10/22	371.75	0.00	0.00	0.00	0.00	0.00	459.17
24/10/22	365.00	0.00	0.00	0.00	0.00	0.00	462.76
31/10/22	378.00	0.00	0.00	0.00	0.00	0.00	395.75
07/11/22	372.50	0.00	0.00	0.00	0.00	0.00	411.33
14/11/22	374.50	0.00	0.00	0.00	0.00	0.00	501.67
21/11/22	358.50	42.00	0.00	0.00	0.00	0.00	603.00
28/11/22	344.50	40.75	0.00	0.00	0.00	0.00	686.00
05/12/22	358.50	42.00	0.00	0.00	0.00	0.00	686.00
12/12/22	399.75	42.00	0.00	0.00	0.00	0.00	686.00
19/12/22	400.00	38.00	0.00	0.00	0.00	0.00	686.00
26/12/22	408.50	27.50	0.00	0.00	0.00	0.00	686.00
02/01/23	418.75	18.25	0.00	0.00	0.00	0.00	686.00
09/01/23	438.00	6.50	0.00	0.00	0.00	0.00	686.00
16/01/23	448.50	5.50	0.00	0.00	0.00	0.00	686.00
23/01/23	456.00	3.50	0.00	0.00	0.00	0.00	686.00
30/01/23	451.50	7.00	0.00	0.00	0.00	0.00	686.00
06/02/23	446.75	20.50	0.00	0.00	0.00	0.00	686.00
13/02/23	426.50	48.50	0.00	0.00	0.00	0.00	686.00
20/02/23	422.75	27.75	0.00	0.00	0.00	0.00	686.00
27/02/23	410.25	33.25	0.00	0.00	0.00	0.00	686.00
06/03/23	410.25	33.25	0.00	0.00	0.00	0.00	686.00
13/03/23	410.25	33.25	0.00	0.00	0.00	0.00	686.00
20/03/23	477.25	31.50	0.00	0.00	0.00	0.00	874.00
27/03/23-31/03/23	473.25	23.00	0.00	0.00	0.00	0.00	673.50
Totals	10,202.25	524.00	0.00	0.00	0.00	0.00	15,799.38
Total Payable (Actual + Hosp/Cancel Hrs):-	10,726.25						
Cost £ (Actual + Hosp/Cancel Hrs):-	£215,383.10						
Total Payable (Shift Hrs):-	15,799.38						
Cost £ (Shift Hrs):-	£317,251.55						
Additional Cost £:-	£101,868.45						
Additional Cost %:-	47.3%						

Summary Totals - All Providers				
Provider	Cost £ (Actual + Hosp/Cancel Hrs)	Cost £ (Shift Hrs)	Additional Cost £	Additional Cost %
Allied Healthcare	£438,361.64	£569,995.30	£131,633.66	30.0%
Blackwood	£100,682.02	£201,074.09	£100,392.08	99.7%
British Red Cross	£442,794.79	£623,356.89	£180,562.11	40.8%
Call-in Homecare	£394,044.90	£464,601.00	£70,556.10	17.9%
My Care	£935,208.79	£1,029,760.49	£94,551.70	10.1%
Prestige Nursing & Care	£362,453.14	£536,823.74	£174,370.60	48.1%
Crossroads	£138,009.84	£148,873.12	£10,863.28	7.9%
TayCare at Home	£172,818.52	£195,080.48	£22,261.96	12.9%
TLA	£462,126.14	£504,530.08	£42,403.94	9.2%
Avenue Care	£216,884.08	£252,772.06	£35,887.98	16.5%
Family Friends Homecare	£70,229.80	£70,229.80	£0.00	0.0%
Mitchell & Murdoch Care	£215,383.10	£317,251.55	£101,868.45	47.3%
Totals	£3,948,996.75	£4,914,348.60	£965,351.84	24.4%
			Average 28.4% (Median 17.2%)	

Excluding the 3 CM users and LSI Summary £2,983,098.58 Cost of all 8 shift hours
£4,914,348.60 Cost of all 12 shift hours
1.647397318 multiplication factor for estimating full cost
Excluding the 3 CM users and LSI Summary £378,393.41 additional cost of 8 providers
£623,364.29 Estimated true cost

Excluding the 2 Outliers - Blackwood (99.7%) and Family Friends (0.0%)				
Provider	Cost £ (Actual + Hosp/Cancel Hrs)	Cost £ (Shift Hrs)	Additional Cost £	Additional Cost %
Allied Healthcare	£438,361.64	£569,995.30	£131,633.66	30.0%
British Red Cross	£442,794.79	£623,356.89	£180,562.11	40.8%
Call-In Homecare	£394,044.90	£464,601.00	£70,556.10	17.9%
My Care	£935,208.79	£1,029,760.49	£94,551.70	10.1%
Prestige Nursing & Care	£362,453.14	£536,823.74	£174,370.60	48.1%
Crossroads	£138,009.84	£148,873.12	£10,863.28	7.9%
TayCare at Home	£172,818.52	£195,080.48	£22,261.96	12.9%
TLA	£462,126.14	£504,530.08	£42,403.94	9.2%
Avenue Care	£216,884.08	£252,772.06	£35,887.98	16.5%
Mitchell & Murdoch Care	£215,383.10	£317,251.55	£101,868.45	47.3%
Totals	£3,778,084.94	£4,643,044.71	£864,959.77	22.9%
				Average 24.1% (Median 17.2%)

Excluding the 1 Outlier - Blackwood (99.7%)				
Provider	Cost £ (Actual + Hosp/Cancel Hrs)	Cost £ (Shift Hrs)	Additional Cost £	Additional Cost %
Allied Healthcare	£438,361.64	£569,995.30	£131,633.66	30.0%
British Red Cross	£442,794.79	£623,356.89	£180,562.11	40.8%
Call-In Homecare	£394,044.90	£464,601.00	£70,556.10	17.9%
My Care	£935,208.79	£1,029,760.49	£94,551.70	10.1%
Prestige Nursing & Care	£362,453.14	£536,823.74	£174,370.60	48.1%
Crossroads	£138,009.84	£148,873.12	£10,863.28	7.9%
TayCare at Home	£172,818.52	£195,080.48	£22,261.96	12.9%
TLA	£462,126.14	£504,530.08	£42,403.94	9.2%
Avenue Care	£216,884.08	£252,772.06	£35,887.98	16.5%
Family Friends Homecare	£70,229.80	£70,229.80	£0.00	0.0%
Mitchell & Murdoch Care	£215,383.10	£317,251.55	£101,868.45	47.3%
Totals	£3,848,314.74	£4,713,274.51	£864,959.77	22.5%
				Average 21.9% (Median 16.5%)

Excluding the 3 CM users - Allied (30%), Blackwood (99.7%), BRC (40.8%) & LSI Prestige (48.1%)				
Provider	Cost £ (Actual + Hosp/Cancel Hrs)	Cost £ (Shift Hrs)	Additional Cost £	Additional Cost %
Call-In Homecare	£394,044.90	£464,601.00	£70,556.10	17.9%
My Care	£935,208.79	£1,029,760.49	£94,551.70	10.1%
Crossroads	£138,009.84	£148,873.12	£10,863.28	7.9%
TayCare at Home	£172,818.52	£195,080.48	£22,261.96	12.9%
TLA	£462,126.14	£504,530.08	£42,403.94	9.2%
Avenue Care	£216,884.08	£252,772.06	£35,887.98	16.5%
Family Friends Homecare	£70,229.80	£70,229.80	£0.00	0.0%
Mitchell & Murdoch Care	£215,383.10	£317,251.55	£101,868.45	47.3%
Totals	£2,604,705.17	£2,983,098.58	£378,393.41	14.5%
				Average 15.2% (Median 11.5%)

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Dundee Integration Joint Board Integrated Impact Assessment

Part 1 - Pre-Integrated Impact Assessment Screening.

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

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

Title of Report/Project/Strategy	FAIRER WORKING CONDITIONS – HOME CARE (Update)
Lead Officer for Report/Project/Strategy (Name and Job Title)	Angie Smith, Associate Locality Manager
Name and email of Officer Completing the Screening Tool	Angie Smith, angela.smith@dundeecity.gov.uk
List of colleagues contributing information for Screening and IIA	David Phillips Integrated Manager, Carole Brunton Scottish Care Rep, Alison Mead Team Manager, Joanna Guild Project Manager, Craig Willox Contract Officer, Commissioned Services and staff, Service Users.
Screening Completion Date	18/05/2023
Name and Email of Senior Officer to be Notified when Screening complete	

Is there a clear indication that an IIA is needed? Mark one box only		
<input checked="" type="checkbox"/>	YES	Proceed to IIA
<input type="checkbox"/>	NO	<i>Continue with Screening Process</i>

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

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

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

Dundee Integration Joint Board Integrated Impact Assessment

Only complete the checklist on the following page whenever your report does not **automatically** require an Integrated Impact Assessment otherwise delete the page prior to proceeding to IIA. Part 1 (continued) Pre-Integrated Impact Assessment Screening.

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

Will the recommendations in the report impact on anyone in relation to any of the Protected Characteristics? <i>Age; Disability; Gender Reassignment; Marriage & Civil Partnerships; Pregnancy & Maternity; Race / Ethnicity; Religion or Belief; Sex; Sexual Orientation.</i>	
No Continue Screening Process	Yes. Proceed to IIA.
Will the recommendations in the report impact on People's Human Rights? <i>For more information on Human Rights visit: https://www.scottishhumanrights.com</i>	
No Continue Screening Process	Yes. Proceed to IIA.
Will the recommendations in the report impact on anyone residing in a Community Regeneration Area (CRA)? <i>Within the 15% most deprived areas in Scotland according to the 2020 Scottish Index of Multiple Deprivation.</i>	
No Continue Screening Process	Yes. Proceed to IIA.
Will the recommendations in the report impact on anyone in more vulnerable types of households? <i>Lone parent families (especially single female parents); households with a greater number of children and/or young children; pensioner households (single or couple)</i>	
No Continue Screening Process	Yes. Proceed to IIA.
Will the recommendations in the report impact on anyone experiencing the following issues? <i>Unskilled or unemployed and of working age; serious and enduring mental health; homelessness (potential homelessness); drug and/or alcohol.</i>	
No Continue Screening Process	Yes. Proceed to IIA.
Will the recommendations in the report impact on anyone in the following more vulnerable groups? <i>Offenders and ex-offenders; looked after children and care leavers; carers.</i>	
No Continue Screening Process	Yes. Proceed to IIA.
Will the recommendations in the report impact on any of the following? <i>Employment; education & skills; benefit advice / income maximisation; childcare; affordability and accessibility of services.</i>	
No Continue Screening Process	Yes. Proceed to IIA.
Will the recommendations in the report on Climate Change or Resource Use? <i>Mitigating greenhouse gases; adapting to the effects of climate change. or Energy efficiency & consumption; prevention, reduction, re-use, recovery or recycling waste; sustainable procurement.</i>	
No Continue Screening Process	Yes. Proceed to IIA.
Will the recommendations in the report impact on Transport? <i>Accessible transport provision; sustainable modes of transport.</i>	
No Continue Screening Process	Yes. Proceed to IIA.
Will the recommendations in the report impact on the Natural Environment? <i>Air, land or water quality; biodiversity; open and green spaces.</i>	
No Continue Screening Process	Yes. Proceed to IIA.
Will the recommendations in the report impact on the Built Environment? <i>Built heritage; housing.</i>	
No Continue Screening Process	Yes. Proceed to IIA.
<p><i>When no to everything in the above screening process you must contact 'Senior Officer to be Notified on Completion' and present a copy of this Screening tool with IJB Report. Otherwise proceed to IIA.</i></p> <p>* Transfer information into the Firm Step Process when report is progressing to Council Committee.</p>	

The following document includes all questions in DCC IIA- The Dundee City Council IIA Guidance document can be found [here](#).

Dundee Integration Joint Board Integrated Impact Assessment

PART 2- Assessment

Integrated Impact Assessment Record

Report Author	Angie Smith
Author Title	Associate Locality Manager
Dundee Health and Social Care Partnership	
Author Email	angela.smith@dundeecity.gov.uk
Author Telephone	07824 528276
Author Address	Claverhouse East, 1 Jack Martin Way, Dundee, DD4 9FF

IJB Chief Executive	Vicky Irons
Email	Vicky.iron@dundeecity.gov.uk
Telephone	01382 434000
Address	Claverhouse East, Jack Martin Way, Dundee

Document Title	FAIRER WORKING CONDITIONS – HOME CARE (Update)
IJB Report Number	
Document Type	Update to previous proposal and authorisation request.
New or Existing Document?	Relates to DIJB5-2022
Document Description	The purpose of this report is to update the Integration Joint Board regarding ongoing work to consistently implement good practice principles for fairer work with commissioned providers of home care services.
Intended Outcome	Embed fair working principles into commissioned contracts and improve outcomes for the citizens of Dundee.
Planned Implementation Date	Process to commence on approval of this report.
Planned End Date	31 st March 2024
How the proposal will be monitored and how frequently	Monthly returns from providers matched to actuals / data (value for money and reducing or stabilising unmet need) and outcomes (quality of support). Quarterly review of data and feedback in the first year then annually.
Planned IIA review dates	
IIA Completion Date	
Anticipated date of IJB	21 June 2023

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

Officer	People/groups	Activity/Activities	Date
David Phillips / Carole Brunton, Alison Mead	Scottish Care, Commissioned Services, Staff and Service Users	Service user feedback, Social Care Worker feedback, Organisational feedback, Results from Questionnaires, Outcomes, Case Studies, measuring recruitment and retention, Provider updates at contract monitoring meetings	Various

Dundee Integration Joint Board Integrated Impact Assessment

Joanna Guild / Craig Willox		Data analysis and monitoring of service provision, unmet need and both qualitative and quantitative data regarding impacts for service users and staff.	Various

Equality and Fairness Impact Assessment Conclusion

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

Through test of change, feedback, data and surveys this initiative has demonstrated some clear positive equality impacts for service users and (unpaid) carers. Service users, who are predominately older people and people with disabilities. The predominantly female workforce has benefitted and will benefit from the Fair work that has been introduced and from stability and continuity of employment. There are opportunities for upskilling and for people who are affected by financial disadvantage.

The implementation of the policy will be closely monitored and any potential negative impacts identified.

The implementation of this plan will increase sustainability of home-based social care in Dundee and increase the recruitment and retention of staff as well as providing an increase in quality of provision with increased time for workers to support service users.

PART 2- Assessment (continued)

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

Equality, Diversity & Human Rights Indicate Yes or No by marking Y or N in each Box

Age	Y/N	Explanation, assessment and any potential mitigations
Positive	Y	During the test of change the feedback and data evidenced positive outcomes predominantly for adults over 65 but also younger adults with physical disabilities.
No Impact	N	
Negative	N	
Not Known	N	
Disability	Y/N	Explanation, assessment and potential mitigations
Positive	Y	The use of paid downtime was used to support people with enhanced support needs to improve independence and reablement, prevent hospital admission and improve health and wellbeing.
No Impact	N	
Negative	N	
Not Known	N	
Gender Reassignment	Y/N	Explanation, assessment and potential mitigations
Positive	N	The questionnaires did not ask any potentially identifiable information and none of the case studies noted gender reassignment. It is expected there will be no impact but on a case by case basis could provide improved outcomes. While the policy is implemented we will continue to take note of any evidence that might give more information about potential impacts that might arise from research evidence or implementation and take appropriate action as well as discussing at review stage.
No Impact	Y	
Negative	N	
Not Known	Y/?	
Marriage & Civil Partnership	Y/N	Explanation, assessment and potential mitigations
Positive	N	None of the case studies or comments noted any potential direct impact but several staff members noted less stress at home and one noted improved relationships due the stability in finances benefiting their mental wellbeing.
No Impact	Y	
Negative	N	
Not Known	N	
Race & Ethnicity	Y/N	Explanation, assessment and potential mitigations
Positive	N	

Dundee Integration Joint Board Integrated Impact Assessment

No Impact	Y	Whilst none of the comments / case studies noted impacts for race & ethnicity, the down time could in future be used to provide related improved outcomes. While the policy is implemented we will continue to take note of any evidence that might give more information about potential impacts that might arise from research evidence or implementation and take appropriate action as well as discussing at review stage
Negative	N	
Not Known	Y	
Religion & Belief	Y/N	Explanation, assessment and potential mitigations
Positive	N	Whilst none of the comments / case studies noted impacts for religion & belief, the down time could in future be used to provide related improved outcomes. While the policy is implemented we will continue to take note of any evidence that might give more information about potential impacts that might arise from research evidence or implementation and take appropriate action as well as discussing at review stage
No Impact	N	
Negative	N	
Not Known	Y	
Sex	Y/N	Explanation, assessment and potential mitigations
Positive	Y	Fair work practices in social care potentially benefit female employees as care work continues to be a predominantly female employment.
No Impact	N	
Negative	N	
Not Known	N	
Sexual Orientation	Y/N	Explanation, assessment and potential mitigations
Positive	N	
No Impact	Y	
Negative	N	
Not Known	N	
Describe any Human Rights impacts not already covered in the Equality section above.		
The flexibility for staff to spend additional time with service users who could benefit from it increases the chance that Human Rights will be realised for service users- increased dignity will be an outcome for service users and for staff who are predicted to have increased autonomy and increased self-worth as valuable respected employees.		

PART 2- Assessment (continued)

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

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

Y or N	Area	Fairness Explain Impact / Mitigations / Unknowns
Y/N	Strathmartine (Ardler, St. Mary's & Kirkton)	<p>(Note: this section of the record asks for a single, collective narrative for each of positive, negative, or not known given as a response in one or more areas)</p> <p>This is a city-wide proposal and test of change ensuring equity across all localities. The immediate benefits are fairness and increased financial stability for care at home staff working for commissioned services. The secondary benefits are: less stressed staff, many of whom are also unpaid carers. Increased financial security for service providers ensuring stability and continuity of employment across the city, improved recruitment and retention. 100% of 21 Service User respondents considered the test of change resulted in reduced inequalities. 100% considered this prevented deterioration or decline (which could lead to expensive care home costs as well as, potentially, less positive outcomes for service users who wish to remain at home.)</p>
Y	Positive	
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Lochee (Lochee Beechwood, Charleston & Menzieshill)	
Y	Positive	
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Coldside (Hilltown, Fairmuir & Coldside)	
Y	Positive	
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Maryfield (Stobswell & City Centre)	
Y	Positive	

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N	No Impact
N	Negative
N	Not Known
Y/N	North East (Whitfield, Fintry & Mill O'Mains)
Y	Positive
N	No Impact
N	Negative
N	Not Known
Y/N	East End (Mid Craigie, Linlathen & Douglas)
Y	Positive
N	No Impact
N	Negative
N	Not Known
Y/N	The Ferry
Y	Positive
N	No Impact
N	Negative
N	Not Known
Y/N	West End
Y	Positive
N	No Impact
N	Negative
N	Not Known

Household Group- consider the impact on households and families may have the following people included.

Y/N	Looked After Children & Care Leavers	Explanation, assessment and any potential mitigations
N	Positive	None of the respondents supported looked after children or care leavers but it is expected any potential impacts would be positive. There may be employment opportunities for care leavers and potential fair work impacts for all households (no evidence)
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Carers	Explanation, assessment and potential mitigations
Y	Positive	Paid downtime can be used to provide short breaks from caring on an ad hoc basis and the preventative approach reduces the burden on carers. Anticipated increased quality of life for person supported by carers will have a secondary impact
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Lone Parent Families	Explanation, assessment and potential mitigations
N	Positive	The increase in fair employment opportunities may benefit lone parents in the workforce especially the anticipated increase in flexible family friendly working at hours that suit them.
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Single Female with Children	Explanation, assessment and any potential mitigations
Y	Positive	As with lone parents, especially as workforce is predominantly female
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Young Children and/or Greater Number of Children	Explanation, assessment and potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	

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Y/N	Retirement Pensioner (s)	Explanation, assessment and potential mitigations
Y	Positive	Most service users who have benefited are retired pensioners. Many staff who have benefited are above 50 and the financial stability could have positive benefits for pension planning.
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Unskilled Workers and Unemployed	Explanation, assessment and any potential mitigations
Y	Positive	Increased stability across services is maintaining recruitment opportunities and training is provided to upskill the workforce. Some downtime is used to enhance training opportunities
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Serious & Enduring Mental Health	Explanation, assessment and potential mitigations
Y	Positive	Downtime can be used for additional support to prevent crisis in mental health and wellbeing of service users and carers.
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Homeless	Explanation, assessment and potential mitigations
Y	Positive	Potential for prevention of homelessness due to fair work being applied, also if service user has circumstances that could lead to this, it has more chance of being noticed and preventative action taken- e.g. signposting to financial help, helping avoid anti-social behaviour
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Households of Single Female with Children	Explanation, assessment and any potential mitigations
Y	Positive	The increase in fair employment opportunities may benefit lone parents in the workforce especially the anticipated increase in flexible family friendly working at hours that suit them. Explanation, assessment and any potential mitigations workforce is predominantly female
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Drug and/or Alcohol	Explanation, assessment and any potential mitigations
Y	Positive	Opportunity for staff to utilise down time supportively can enhance provision to service users with drug and alcohol use and enhance quality of life to help support recovery.
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Offenders and Ex-Offenders	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	

PART 2- Assessment (continued)

Socio-Economic Disadvantage- consider if the following circumstances may be impacted		
Y/N	Employment Status	Explanation, assessment and any potential mitigations
Y	Positive	Increased stability across services is maintaining recruitment opportunities
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Education & Skills	Explanation, assessment and any potential mitigations
Y	Positive	Training is provided to upskill the workforce. Some downtime is used to enhance training opportunities
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Income	Explanation, assessment and any potential mitigations
Y	Positive	120 of 171 staff respondents reported improved financial security, better ability to budget and helping with the cost of living due to the increased income.
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Fuel Poverty	Explanation, assessment and any potential mitigations
Y	Positive	As above
N	No Impact	
N	Negative	

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N	Not Known	
Y/N	Caring Responsibilities (including Childcare)	Explanation, assessment and any potential mitigations
Y	Positive	Improved income and reduced stress supports the workforce with their own unpaid caring responsibilities. The use of downtime and reablement / preventative work reduces pressures for carers of service users
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Affordability & Accessibility of Services	Explanation, assessment and any potential mitigations
Y	Positive	This initiative alongside other small tests of change directly related have cut the unmet need by over 30% during the first six months of the programme significantly improving access to services for those with critical and substantial needs.
N	No Impact	
N	Negative	
N	Not Known	

Inequalities of Outcome- <i>consider if the following may be impacted</i>		
Y/N	Connectivity / Internet Access	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Income / Benefit Advice / Income Maximisation	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Employment Opportunities	Explanation, assessment and any potential mitigations
Y	Positive	Whilst this does not impact service users it does impact staff, many of whom are unpaid carers.
N	No Impact	
N	Negative	
N	Not Known	

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PART 2- Assessment (continued)

Y/N	Education	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Health	Explanation, assessment and any potential mitigations
Y	Positive	The preventative / reablement approach reduces health inequalities by supporting access to wider services and preventing admission to hospital.
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Life Expectancy	Explanation, assessment and any potential mitigations
Y	Positive	The preventative / reablement approach reduces deterioration and potentially improves life expectancy but this is difficult to evidence.
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Mental Health	Explanation, assessment and any potential mitigations
Y	Positive	The use of downtime can be used to improve mental health and wellbeing outcomes. Positive benefit to both service users and staff noted.
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Overweight / Obesity	Explanation, assessment and any potential mitigations
Y	Positive	The preventative / reablement approach / downtime can be used to support motivation, positive movement and weight reduction.
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Child Health	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Neighbourhood Satisfaction	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Transport	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	
Environment- Climate Change		
Y/N	Mitigating Greenhouse Gases	Explanation, assessment and any potential mitigations
Y	Positive	Whilst this test of change does not directly impact our carbon footprint the collaborative approach to commissioning and provision of services includes a collaborative approach to allocation of packages to minimise distances and thereby the carbon footprint due to the use of vehicles.
N	No Impact	
N	Negative	
N	Not Known	
Y/N	Adapting to the Effects of Climate Change	Explanation, assessment and any potential mitigations
Y	Positive	This collaborative approach supports more effective contingency planning due to severe weather events, electricity outages etc.
N	No Impact	
N	Negative	
N	Not Known	

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PART 2- Assessment (continued)

Resource Use		
Y/N	Energy Efficiency and Consumption	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Prevention, Reduction, Re-use, Recovery, or Recycling of Waste	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Sustainable Procurement	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	

Transport		
Y/N	Accessible Transport Provision	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Sustainable Modes of Transport	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	

Natural Environment		
Y/N	Air, Land and Water Quality	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Biodiversity	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Open and Green Spaces	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	

Built Environment		
Y/N	Built Heritage	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	
Y/N	Housing	Explanation, assessment and any potential mitigations
N	Positive	
Y	No Impact	
N	Negative	
N	Not Known	

Dundee Integration Joint Board Integrated Impact Assessment

PART 2- Assessment (continued)

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

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

Use the [SEA flowchart](#) to determine whether your proposal requires SEA.

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

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

Following IJB agreement of report contact Joyce.barclay@dundee.gov.uk to post IIA on DHSCP website.

NB Corporate Risk- is addressed in IJB reports

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