

## Section 4 Integrated Impact Assessment

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### Summary Report Template

Each of the numbered sections below must be completed

Interim report	<input checked="" type="checkbox"/>	Final report	<input type="checkbox"/>
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 (Tick as appropriate)

#### 1. Title of proposal

Controlled Parking Zones and Carers

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

Essential Users Permits (EUP) are already issued to healthcare workers making domiciliary visits to patients in their own homes. To qualify for an EUP, the healthcare worker must be employed by a GP surgery or by NHS Lothian.

A benchmarking exercise recently carried out by consultants showed that changes could be made to the EUP scheme to increase its flexibility both in terms of where the permit allows users to park and to slightly amend the eligibility criteria to allow similar types of healthcare workers, not employed by a GP surgery or by NHS Lothian, to apply for permits. This also noted the price should be reviewed to reflect these changes.

The research indicated that other local authorities offer permits to professional and personal carers and more work will be undertaken to bring forward proposals for Edinburgh. As part of this work, there will be further engagement with key stakeholders on the introduction of such permits for carers.

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

Initial discussions have taken place with the Transport and Travel Manager at NHS Lothian who manages the distribution of EUPs to NHS employees.

An email has been sent to all permit holders within GP surgeries, as the permits are due for renewal at the end of 2021. Information was included in the email to inform permit holders that a review of the scheme is underway which will mean changes to the permit.

The NHS and GP surgery staff have been informed that a full consultation will take place and that they should look out for more information on our website and via social media so they can make their views about the scheme known.

Further consultation is expected to take place with both professional and unpaid carers to better develop proposals that suit their needs.

#### 4. Is the proposal considered strategic under the [Fairer Scotland Duty](#)?

*The Fairer Scotland Duty places a legal responsibility on particular public bodies in Scotland to actively consider ('pay **due regard**' to) how they can **reduce inequalities of outcome caused by socio-economic disadvantage, when making strategic decisions.***

***Socio-economic disadvantage** means living on a low income compared to others in Scotland, with little or no accumulated wealth, leading to greater material deprivation, restricting the ability to access basic goods and services. Socio-economic disadvantage can be experienced in both places and communities of interest, leading to further negative outcomes such as social exclusion.*

This proposal is considered strategic under the Fairer Scotland Duty as the changes to the current EUP will be mainly positive and permit costs will be covered by the NHS and by GP practices where there is little or no evidence of socio-economic disadvantage.

Turning to carers' permits, two separate user groups have so far been identified; professional and personal. They are likely to have different parking requirements and may require different permit schemes. Some broad principles have been set out with further engagement with stakeholders required to refine the details.

A Professional Carers' Permit could be offered to those providing care as a business concern, with companies purchasing permits for the use of their staff making domiciliary visits within the Controlled Parking Zone (CPZ). This could follow a similar approach as that offered by Trades' parking permits.

A Personal Carers' Permit could be available for the family or friends of a cared for person living within the CPZ. This would enhance parking opportunities near the home of the person being cared for with the aim of improving the care received (reducing the time and cost of parking). This could be based on the parking zone or area where the person lives and also the emission levels of the applicant's vehicle. This could work in a similar manner as the current residents' parking permit scheme.

The permits are likely to be made available on a three, six and 12 month basis, with shorter durations helping to spread costs over a longer period, but still likely to overall be cheaper than pay and display parking.

The permits will facilitate social inclusion both for cared for people and personal carers in particular, by allowing better access to affordable parking.

#### 5. Date of IIA

30 September 2021

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

<b>Name</b>	<b>Job Title</b>	<b>Date of IIA training</b>
Gavin Sherriff	Senior Transport Team Leader - Parking	10/10/2018
Ruth Muir	Transport Officer	28/10/2021
Charlotte Moore	Travel Concessions Team Leader – Transactions, Parking	-
Paul Bathgate	Transport Officer	25/08/2021
Joanne Yorkston – Facilitator and Report Writer	Transport Officer	25/08/2021

## 7. Evidence available at the time of the IIA

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected?
Data on populations in need	<p><a href="https://www.ons.gov.uk">2011 Census - Office for National Statistics (ons.gov.uk)</a></p> <p><a href="https://www.nrscotland.gov.uk">Scotland's Population   National Records of Scotland (nrscotland.gov.uk)</a></p> <p><a href="https://www.nrscotland.gov.uk">Mid-2017 population estimates Scotland   National Records of Scotland (nrscotland.gov.uk)</a></p> <p><a href="https://www.gov.scot">Scottish Index of Multiple Deprivation 2020 - gov.scot (www.gov.scot)</a></p> <p><a href="https://citizenspace.com">Draft Joint Strategic Needs Assessment.pdf (citizenspace.com)</a></p> <p><a href="https://edinburghpovertycommission.org.uk">20200930 Poverty in Edinburgh- Data and evidence.pdf (edinburghpovertycommission.org.uk)</a></p>	<p>The City of Edinburgh has one of the fastest growing populations of any city in the UK and the city is projected to grow by a further 6.6% by 2026. Although the city centre has a lower share of its population over 65 years of age (12%), the wider city region has a significantly higher share (22%) than Edinburgh and Scotland (19%).</p> <p>Based on 2011 Census Data the wards with the highest number of health conditions (including Deafness, Blindness, Physical, mental health, learning disabilities etc.) are Portobello/Craigmillar and Liberton/Gilmerton. Both had 31% of their total reporting health conditions. The City Centre had the lowest proportion (22%).</p>
Data on service uptake/access	<p>CEC City Mobility Plan</p> <p>Provision of unpaid care census data – from PCL report</p> <p><a href="#">Edinburgh by Numbers 2020</a></p>	<p>50,000 people in Edinburgh are employed in the health industry. This makes up nearly 15% of all jobs in Edinburgh.</p> <p>Research by PCL determined on average, 8% of the total population for each local authority (LA) benchmarked provided some form of unpaid care each week.</p> <p>Using the number of unpaid care permits issued by each LA, the total number of people who provide 20 to 50 plus hours of unpaid care every week and average uptake, it</p>

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected?
		<p>is possible to estimate the number of people who may apply for a personal carers permit in Edinburgh at 274.</p> <p>The number of permits issued to NHS Lothian have increased from 900 in 2021 to 920 in 2022.</p> <p>On average 450-480 EUPs are issued on an annual basis to GP surgeries.</p>
<p>Data on socio-economic disadvantage e.g. low income, low wealth, material deprivation, area deprivation.</p>	<p><a href="#">20200930 Poverty in Edinburgh- Data and evidence.pdf (edinburghpovertycommission.org.uk)</a></p>	<p>Some of the most deprived communities are in the peripheral areas of the city (e.g. Granton, Pilton, Niddrie, Saughton and Wester Hailes) outside the City Centre.</p> <p>When reviewing the prices of the professional healthcare permits issued by each of the benchmarked LAs they closely related to the price of business parking permits issued in Edinburgh.</p> <p>Business parking permits which are currently only available for businesses in the Extended parking zones cost £350 per annum.</p> <p>A professional carers’ permit could operate similar to a Trades’ parking permit (being valid in all zones of the CPZ). Trades’ parking permits are currently priced at £1,300 per annum.</p> <p>Retail permits available in the peripheral zone currently cost £460 per year.</p>

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected?
		<p>An EUP is priced at £10 per annum but has not increased since 2008. However, other permit and pay and display charges have increased over this period.</p> <p>The PCL report showed that other LAs have their professional healthcare workers' permit set at a higher fee.</p>
Data on equality outcomes	None.	-
Research/literature evidence	Consultant's Report - Review of Healthcare Workers' Permit Scheme	This identified that professional and personal carers may have different parking requirements and that other Councils offered two distinct types of parking permit.
Public/patient/client experience information		<p>Initial discussions have been held with NHS Lothian's Transport and Travel Manager.</p> <p>Removing the scheme altogether would likely be of great detriment to NHS and would increase their corporate pay and display charges significantly.</p>
Evidence of inclusive engagement of people who use the service and involvement findings		A full consultation will be carried out where the views of potentially users of the service will be sought.
Evidence of unmet need	Motion by The City of Edinburgh Council on 10 December 2020.	This identified a need to consider investigating this issue further.
Good practice guidelines	None available.	-

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected?
Carbon emissions generated/reduced data	PCL Report - Review of EUP Scheme	Through online research, including reviewing LA websites and the traffic research laboratory, no relevant information has been found with regards to induced travel demand and EUPs.
Environmental data	PCL Report - Review of EUP Scheme	<p>Edinburgh has a relatively compact city centre. This density along with good public transport, cycling and walking links makes the city centre very accessible via sustainable and active travel means.</p> <p>The nature of a professional carers job (visiting many clients in different areas, over a potentially short period of time) is likely to make travelling by private/shared/fleet car a more attractive option for many.</p> <p>As above, there is no evidence available that shows offering carers' permits will generate a significant increase in travel demand. Indeed, many carers are already likely to use private/shared/fleet cars for work travel.</p>
Risk from cumulative impacts	None identified.	-
Other (please specify)	n/a	-
Additional evidence required	n/a	-

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

Equality, Health and Wellbeing and Human Rights	Affected populations
<p><b>Positive</b> Increase in the parking places an EUP can be used in.</p>	<p>Healthcare workers and charitable organisations</p> <p>Paid and unpaid carers</p>

<p>Introduction of a permit for carers – positive impact on professionals’ ability to do their job and may realise a saving on pay and display parking charges.</p> <p>More time dedicated to cared-for person – improves the quality of the service.</p> <p>Less worry about where to find a parking place and how much parking time to purchase and associated cost.</p> <p>Being able to park closer to cared-for persons home eliminates potential harassment of lone workers.</p> <p>Robust eligibility criteria to ensure only qualifying applicants can obtain a permit, reduces potential for fraud and provides public confidence in the scheme. Applications are evidence based. Eliminates discrimination on who can apply.</p> <p>Promotes control over own decisions – access to a carer allows a person to stay in their own home for longer.</p> <p><b>Negative</b></p> <p>Will require to complete an application for a permit – barriers to understanding. Forms in alternative languages/formats will be made available.</p> <p>Will require an address to apply. Motorists will usually need an address to purchase, tax, MoT and insure a vehicle.</p> <p>Cost of Personal Carers Permit – direct cost to individual. Offering them on a 3, 6 or 12 month basis can spread the cost and likely to be cheaper than using pay and display for frequent users.</p>	<p>Cared-for person</p> <p>Paid and unpaid carers</p> <p>Shift workers, women</p> <p>All applicants</p> <p>Cared-for person</p> <p>Non-English speaking people and those with low literacy</p> <p>Homeless People</p> <p>Unpaid carers</p>
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<p><b>Environment and Sustainability including climate change emissions and impacts</b></p> <p><b>Positive</b></p> <p>Less driving around looking for a suitable parking place.</p> <p>Personal Carers Permit may be dependent on vehicle emissions.</p>	<p><b>Affected populations</b></p> <p>Healthcare workers, paid and unpaid carers, members of the public</p> <p>Unpaid carers</p>
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<p><b>Negative</b> Availability of a permit may encourage the use of private vehicles. Potential users are likely to already use private vehicles for such journeys.</p>	<p>All populations due to increase in emissions</p>
<p><b>Economic including socio-economic disadvantage</b></p> <p><b>Positive</b> Improves quality of and access to care services.</p> <p>Permit may be cheaper in long-term than pay and display parking charges.</p> <p>Supports local businesses in the care sector.</p> <p>Supports those employed in the care sector.</p> <p><b>Negative</b> Cost of Personal Carers Permit – direct cost to individuals. Offering them on a 3, 6 or 12 month basis can spread the cost and likely to be cheaper than using pay and display for frequent users.</p>	<p><b>Affected populations</b></p> <p>Cared-for person</p> <p>Healthcare workers, paid and unpaid carers</p> <p>Local businesses</p> <p>Paid and unpaid carers</p> <p>Unpaid carers</p>

**9. Is any part of this policy/ service to be carried out wholly or partly by contractors and if so how will equality, human rights including children’s rights, environmental and sustainability issues be addressed?**

Not applicable.

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

Should the outline proposals be approved by Committee, a communications plan will be produced to ensure suitable engagement takes place with key stakeholders who may be affected by the proposals or benefit from their implementation.

**11. Is the policy likely to result in significant environmental effects, either positive or negative? If yes, it is likely that a [Strategic Environmental Assessment](#) (SEA) will be required and the impacts identified in the IIA should be included in this.**

It is not considered that the policy will result in significant environmental effects, either positive or negative.

**12. Additional Information and Evidence Required**

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

Further evidence will be gathered on corporate RingGo use by Health and Social Care colleagues to help inform parking patterns.

Evidence from future consultation and engagement will reveal public opinion on the proposals and help develop proposals further.

**13. Specific to this IIA only, what recommended actions have been, or will be, undertaken and by when? (these should be drawn from 7 – 11 above) Please complete:**

<b>Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)</b>	<b>Who will take them forward (name and job title)</b>	<b>Deadline for progressing</b>	<b>Review date</b>
Should Committee approve proposals, a full stakeholder consultation and communications plan will be created.	Joanne Yorkston – Transport Officer	Dec 21	2022
Identify suitable charitable organisations eligible for EUP, by establishing criteria and application/review processes.	Joanne Yorkston – Transport Officer	Dec 21	2022

**14. Are there any negative impacts in section 8 for which there are no identified mitigating actions?**

No, all negative impacts have been mitigated as detailed in Section 8.

**15. How will you monitor how this proposal affects different groups, including people with protected characteristics?**

Consultation will be publicised in line with literature on how to reach all groups, so people with protected characteristics will be able to give their views.

Should the proposals proceed, feedback from users will be used to improve the services where possible.

**16. Sign off by Head of Service/ NHS Project Lead**

**Name – Gareth Barwell**

**Date – 10 November 2021**

**17. Publication**

Completed and signed IIAs should be sent to [strategyandbusinessplanning@edinburgh.gov.uk](mailto:strategyandbusinessplanning@edinburgh.gov.uk) to be published on the IIA directory on the Council website [www.edinburgh.gov.uk/impactassessments](http://www.edinburgh.gov.uk/impactassessments)

**Edinburgh Integration Joint Board/Health and Social Care**

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