

## Section 4 Integrated Impact Assessment

### Summary Report Template

Each of the numbered sections below must be completed

Interim report		Final report	√	(Tick as appropriate)
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**1. Title of plan, policy or strategy being assessed**

Early Years Central Referral Process

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

- Referrals for discretionary places for children under the age of two years old will be reviewed by the central early years team officers rather than by individual Heads of early years settings.

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

Referrals for children under 2 years old are still made using the Getting it Right for Every Child SHANARRI wellbeing indicators and consideration is given to children who require additional support to enable them to reach their full potential (Education (Additional Support for Learning) (Scotland) Act 2004), or who meet the eligibility criteria as identified in the Children and Young People (Scotland) Act 2014.

**4. Date of IIA**

14/12/2023

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

Name	Job Title	Date of IIA training
Donna Murray	Senior Education Officer	23/01/2018
Georgina Cronin	Operational Support Officer	23/01/2018
Tracey Shaw	Early Years Manager	18/05/22
Paula Greenhill	Early Years Manager	18/05/22
Karen Holmes	NHS Clinical Nurse Manager	

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

Evidence	Available?	Comments: what does the evidence tell you?
Data on populations in need	Yes	<p>402 applications for a discretionary non funded place have been received between June to December 2023.</p> <p>We do not hold accurate data for the process prior to June 2023 because the process in place at the time was inconsistent with early years settings taking different approaches to recording whether children had been referred or were actually eligible for funded ELC.</p>
Data on service uptake/access	Yes	<p>The early years service has 164 registered places for children under the age of 2 years old.</p> <p>June – December 2023 - 102 children under the age of 2 had a discretionary place.</p>
Data on equality outcomes	Yes	<p>Prior to June 2023, Heads of Early Years Centres had responsibility for the allocation of individual discretionary places. As referrals for discretionary places only went to a small number of early years centres, the Heads of these settings had greater responsibility and workload than other settings. They also did not have an overview of available places across the city, which meant that a gap in the co-ordination of the allocation of discretionary places creating lengthy waiting lists for our most vulnerable children to access a place.</p> <p>Our new centrally managed process agreed by CEC and NHS senior officers and Social work officers ensures referrals for discretionary places are made through the GIRFEC process and information is appropriately shared and stored between services. It also takes account of all our early years settings with places for children under 3 years of age.</p> <p>Prior to the new process all applications were successful. However, children with intense levels of need were placed on a waiting list for significantly long period due to the level of applications compared to the number of places available.</p>

Evidence	Available?	Comments: what does the evidence tell you?
Research/literature evidence	Yes	<p>The Early Intervention policy states that we should‘... shift the focus from service provision as the vehicle for delivery of outcomes to <u>building the capacity of individuals</u>, families and communities to secure outcomes....’  <a href="https://www.gov.scot/publications/early-years-early-intervention-joint-scottish-government-cosla-policy-statement/pages/4/">https://www.gov.scot/publications/early-years-early-intervention-joint-scottish-government-cosla-policy-statement/pages/4/</a></p> <p>Bolby defines attachment theory as a lasting psychological connectedness between human beings. He highlights the importance of primary bonds, in particular children`s emotional bond with the child`s primary care givers. Disruption from this bond can disrupt the child emotionally and psychologically into adulthood.</p> <p>Edinburgh children`s service plan 2023-2026 identified that interventions designed to increase parenting skills can be effective and can have a positive knock on impact, reducing other parental problems by increasing <u>self-efficacy</u> and self-esteem.</p> <p>We continue to signpost parents to other supports that are available within their community.</p> <p><a href="#">Bookbug sessions</a></p> <p><a href="#">Family activities citywide</a> <a href="#">Family activities North East</a> <a href="#">Family activities North West</a> <a href="#">Family activities South East</a> <a href="#">Family activities South West</a></p> <p><a href="#">Parent and toddler groups</a></p> <p>Play Scotland <a href="https://www.playscotland.org/">https://www.playscotland.org/</a></p> <p>EVOC <a href="https://www.evoc.org.uk/">https://www.evoc.org.uk/</a></p> <p>Parents club - <a href="https://www.parentclub.scot/">https://www.parentclub.scot/</a></p>
Public/patient/client experience information	Yes	<p>The following comments are from parents at Gilmerton ELC regarding the previous process.</p> <p><i>‘It went well and quite quick, we only waited five months. After the phone call, daughter started a few weeks later.’</i></p> <p><i>‘It was fine. No problems. We waited quite a while, about a year but it was a pretty smooth process. The health visitor did it for us and it was a straightforward process.’</i></p>

Evidence	Available?	Comments: what does the evidence tell you?
		<p>The following are from Parents/Carers allocated a place through the new process.</p> <p><i>The process was smooth and my child started very quickly. (Cowgate Parent)</i></p> <p>The following are from parents whose children received a place at Hailesland ELC following the central referral process:</p> <p><i>“Yes we completed forms with our FNP.” “The forms were easy.” “My health visitor suggested I needs more support and offered to refer me.”</i></p> <p>How was the referral discussed/ planned or agreed?</p> <p><i>“I spoke to my FNP to get a place as I needed support.” “I had a planning meeting for my child’s siblings and the referral was suggested at the planning meeting for additional support and I was in agreement to this.” “Social work referred me in but I think it because I asked for support.”</i></p> <p>Did you receive feedback if your referral had been successful?</p> <p><i>“I couldn’t get in at first and then got told I got a place by my health visitor.”</i></p> <p><i>“I knew when the centre called that we were offered a place and then my Health visitor told me too.” “I was told by centre staff about getting placement.”</i></p> <p>Any suggestion of areas for improvements for the referrals experience you had?</p> <p><i>“ could have more staff in baby rooms to have more children in.”</i></p> <p><i>“Information to be given out about under twos before referrals.”</i></p> <p>Parents/carers and referrers not allocated a place have expressed disappointment.</p> <p><i>“Hard to get into now I have been told by my FNP but people need help.”</i></p> <p>Health Visitor Feedback</p> <p>HV Manager Email - <i>I just wanted to say how helpful we found the meeting and welcome the opportunity to continue to meet with a</i></p>

Evidence	Available?	Comments: what does the evidence tell you?
		<p><i>view to supporting HV service with the changes to early years referral process.</i></p> <p><i>I really hope we can continue with our meeting and work together to improve the quality of referrals into Early Years from the health visiting service.</i></p> <p><i>In the meantime, I will work with the other HV team managers to support all health visitors with the new referral process. I do think the process changes offer our service an opportunity to think a bit differently on how best to provide, and improve on, appropriate referral pathways for very young children and their families.</i></p> <p>Health Visiting Manager consultation meeting dates</p> <p>05/04/23, 24/04/23, 02/11/23, 14/02/24</p> <p>Feedback from the Heads of Centres who previously received referrals directly from Health Visitors and Social Workers has been overall positive.</p>
Evidence of inclusive engagement of service users and involvement findings	Yes	Parents/carers receive information on the application process and outcome directly from Health Visitors and/or early years settings.
Evidence of unmet need.	Yes	The previous process allocated places to all applicants which meant children with the greatest level of need (intense support needs) were not able to access a place immediately as children who would be considered as not having an intense additional support need had been allocated a place.
Good practice guidelines	Yes	<p>Child Protection Guidance  <a href="#">Child protection for professionals – The City of Edinburgh Council</a>            Getting it Right for Every Child  <a href="#">Getting it right for every child (GIRFEC) - gov.scot (www.gov.scot)</a>            Health and Social Care Standards  <a href="http://www.newcarestandards.scot/">http://www.newcarestandards.scot/</a>            How Good is our Early Learning and Childcare  <a href="https://education.gov.scot/improvement/documents/">https://education.gov.scot/improvement/documents/</a>            Realising the Ambition</p>

<b>Evidence</b>	<b>Available?</b>	<b>Comments: what does the evidence tell you?</b>
		<a href="https://www2.gov.scot/Resource/0045/00458455.pdf">https://www2.gov.scot/Resource/0045/00458455.pdf</a>
Environmental data	Yes	Many parents/carers of children allocated a discretionary place had to travel out with their community due to the referrals be made directly to a small number of early years settings. 34 early years settings provide places for children under 3 years of age, only 11 settings received referrals for discretionary places.
Risk from cumulative impacts	N/A	
Other (please specify)	N/A	
Additional evidence required	N/A	

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

<p><b>Equality, Health and Wellbeing and Human Rights</b></p> <p><b>Positive</b></p> <p>All applications for discretionary early learning and childcare places are considered in line with the criteria set out in the early year admissions policy. Those children with the greatest level of need (Child protection or intense ASN) receive a place immediately.</p> <p><b>Negative</b></p> <p>There may be a perception that children who would have been allocated a place under the previous process which was inconsistent are being disadvantage as a result of the new process.</p>	<p><b>Affected populations</b></p> <p><b>Children on the child protection register or with intense ASN</b></p> <p><b>Children with universal or targeted support needs.</b></p>
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<p><b>Environment and Sustainability</b></p> <p><b>Positive</b></p> <p>Fewer parents/carers do not need to travel out with their local area to access a discretionary funded place.</p> <p><b>Negative</b></p>	<p><b>Affected populations</b></p> <p><b>Parents/Carers</b></p>
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N/A	
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<b>Economic</b> <b>Positive</b> Reduced or no travel costs. <b>Negative</b> N/A	<b>Affected populations</b> <b>Parents/carers</b>
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**8. Is any part of this policy/ service to be carried out wholly or partly by contractors and how will equality, human rights including children’s rights , environmental and sustainability issues be addressed?**

**NO**

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

A range of communication tools will be used to reach out to people (staff and parents) regardless of their age, disability or language etc. Direct Face to Face communication has taken place with Health Visitor and Social Work lead officers.

**10. Does the policy concern agriculture, forestry, fisheries, energy, industry, transport, waste management, water management, telecommunications, tourism, town and country planning or land use? If yes, an SEA should be completed, and the impacts identified in the IIA should be included in this.**

N/A

**11. Additional Information and Evidence Required**

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

No further evidence is required.

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

- Monitor the new process to ensure children on the child protection register or with intense additional support needs have immediate access to local authority early learning and childcare provision.
- Continue to liaise with Health Visitor Leads to ensure referrals are prioritised for children on the child protection register or with intense support needs.

**13. Specific to this IIA only, what actions have been, or will be, undertaken and by when? 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 contact details)</b>	<b>Deadline for progressing</b>	<b>Review date</b>
Monitoring the recommendations in section 12 of this IIA	Tracey Shaw <a href="mailto:Tracey.Shaw@edinburgh.gov.uk">Tracey.Shaw@edinburgh.gov.uk</a> Paula Greenhill <a href="mailto:Paula.Greenhill@edinburgh.gov.uk">Paula.Greenhill@edinburgh.gov.uk</a>	From start of implementation	

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

Review the allocation of places and take account of SIMD data.

**15. Sign off by Head of Service/ Project Lead**

**Name Lorna French**

**Date 03/04/24**

**16. Publication**

Send completed IIA for publication on the relevant website for your organisation. [See Section 5](#) for contacts.

## Section 5 Contacts

- **East Lothian Council**

Please send a completed copy of the IIA to [equalities@eastlothian.gov.uk](mailto:equalities@eastlothian.gov.uk) and it will be published on the Council website shortly afterwards. Copies of previous assessments are available via [http://www.eastlothian.gov.uk/info/751/equality\\_diversity\\_and\\_citizenship/835/equality\\_and\\_diversity](http://www.eastlothian.gov.uk/info/751/equality_diversity_and_citizenship/835/equality_and_diversity)

- **Midlothian Council**

Please send a completed copy of the IIA to [zoe.graham@midlothian.gov.uk](mailto:zoe.graham@midlothian.gov.uk) and it will be published on the Council website shortly afterwards. Copies of previous assessments are available via [http://www.midlothian.gov.uk/downloads/751/equality\\_and\\_diversity](http://www.midlothian.gov.uk/downloads/751/equality_and_diversity)

- **NHS Lothian**

Completed IIAs should be forwarded to [impactassessments@nhslothian.scot.nhs.uk](mailto:impactassessments@nhslothian.scot.nhs.uk) to be published on the NHS Lothian website and available for auditing purposes. Copies of previous impact assessments are available on the NHS Lothian website under Equality and Diversity.

- **The City of Edinburgh Council**

Completed impact assessments should be forwarded to [Strategyandbusinessplanning@edinburgh.gov.uk](mailto:Strategyandbusinessplanning@edinburgh.gov.uk) to be published on the Council website.

- **City of Edinburgh Health and Social Care**

Completed and signed IIAs should be sent to Sarah Bryson at [sarah.bryson@edinburgh.gov.uk](mailto:sarah.bryson@edinburgh.gov.uk)

- **Edinburgh Integration Joint Board**

Completed and signed IIAs should be sent to Sarah Bryson at [sarah.bryson@edinburgh.gov.uk](mailto:sarah.bryson@edinburgh.gov.uk)

- **West Lothian Council**

Complete impact assessments should be forwarded to the Equalities Officer.