

APPENDIX B

ACHSCP Impact Assessment – Stage 1 – Proportionality and Relevance

Name of Policy or Practice being developed	Removal of Health Improvement Fund	
Name of Officer completing Proportionality and Relevance Questionnaire	Alison MacLeod	
Date of Completion	21/10/25	
What is the aim to be achieved by the policy or practice and is it legitimate?	The aim is to contribute towards budget savings by removing the £197,000 annual Health Improvement Fund from the Strategy and Transformation Budget.	
What are the means to be used to achieve the aim and are they appropriate and necessary?	The value of the fund will be removed from the budget and will not be available for use in future years. Whilst this is not a desirable action, it is being proposed in the context of the extremely challenging financial situation the Aberdeen City IJB finds itself in. £14.3m savings had to be found in financial year 2025/26 and a further £14.4m savings have to be found for financial year 2026/27.	
If the policy or practice has a neutral or positive impact please describe it here.	This action will have a negative impact.	
Is an Integrated Impact Assessment required for this policy or decision (Yes/No) <i>Note – if multiple assessments are required please complete a separate template for each of these and embed them in the section below ‘Rationale for Decision’ with a brief supporting narrative. This will ensure all relevant assessments are connected regardless of the stage they are at in the process.</i>	Yes	
Rationale for Decision NB: consider: - <ul style="list-style-type: none"> • How many people is the proposal likely to affect? • Have any obvious negative impacts been identified? • How significant are these impacts? • Do they relate to an area where there are known inequalities? • Why are a person’s rights being restricted? • What is the problem being addressed and will the restriction lead to a reduction in the problem? 	<p>In 2023/24 (the latest year a full evaluation report is available for) 75 projects were funded supporting 8,884 people with self-help and self-management, inclusion and social isolation, food and food growing and physical activity. These projects were undertaken city wide covering all areas including areas of deprivation and were linked to priorities or outcomes identified in the IJB Strategic plan, the locality Plans, and/or the Local Outcome Improvement Plan. Sustainability is a key consideration when awarding funding for projects. Evaluation of the Health Improvement Fund is undertaken one year after funding has been awarded and for 2023/24 projects 64% of projects confirmed that the support will continue beyond the timescale of the funding allocation. Based on research by Public Health Wales it is estimated that for every £1 invested in public health interventions on average £14 is returned to the wider health and social care economy. That means that the return on investment of the</p>	

<ul style="list-style-type: none"> • Does the restriction involve a blanket policy, or does it allow for different cases to be treated differently? • Are there existing safeguards that mitigate the restriction? 	£197,000 Health Improvement fund is more than £2.7 million.
Decision of Reviewer	
Name of Reviewer	
Date	

APPENDIX C

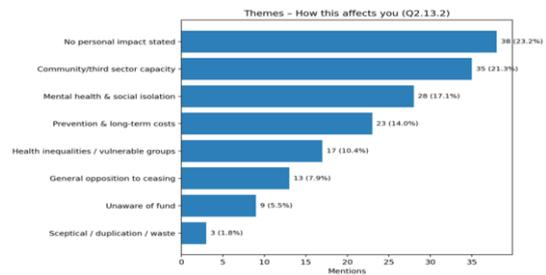
ACHSCP Impact Assessment – Stage 2 – Impact Assessment

Description of Policy or Practice being developed including intended aim.	Removal of Health Improvement Fund
Is this a new or existing policy or practice?	Existing
Name of Officer Completing Impact Assessment	Iain Robertson
Date Impact Assessment Started	21/10/25
Name of Lead Officer	Alison MacLeod
Date Impact Assessment approved	

Summary of Key Information

Groups or rights impacted.	<p>The groups that the Health Improvement Fund (HIF) support and removal of the fund could as potentially impact are: -</p> <ul style="list-style-type: none"> • Age, Sex and Disability, Race and Ethnicity • Health Inequalities such as - health and social care provision, education and employment, physical environment and local opportunities • Children’s rights UNCRC Articles 12,23,24,25,28,31
Feedback from consultation and engagement and how this informed development of the policy or practice	<p>Budget Option Consultation took place between November – December 2025, this option along with others were considered and feedback was given through a Commonplace survey. There has also been direct feedback from organisations and partners for the Carers Strategy Improvement Group.</p> <p>From the 951 responses from the Commonplace survey 25% of people considered themselves as an unpaid</p>

Carer. There was also a request for respondents to select their Protected Characteristics with Age, Disability, Rights of Children and Socio-Economic Status being highest selected options. Feedback suggests from all responses that ceasing the Health Improvement Fund would impact on a number of themes. (see table below)



65.9% of respondents said this option would impact them.

169 comments were analysed

108 suggestions were analysed

Ceasing the HIF is viewed as increasing strain across communities and weakening upstream prevention. Comments stressed reliance on community/third-sector capacity and mental-wellbeing supports, with equity concerns for vulnerable groups and families. An awareness gap (some not knowing about HIF) likely explains part of the “no impact” responses.

Most suggestions recommend retaining (or increasing) HIF as a cost-effective prevention tool. Practical ideas offered included: -

- tighten criteria/target need,
- measure outcomes better,
- streamline admin/merge funds,
- seek alternative funding,
- boost awareness/signposting, and
- use community facilities.

A smaller group suggested co-pay/personal contribution for some activities.

The Health Improvement Team will continue to work with communities seeking alternative funding or ways to deliver projects in a cost neutral way or via a contribution model. The Council’s External Funding team will be approached

	<p>for opportunities for alternative sources of funding.</p> <p>It is hoped in future years, once the IJB achieves financial balance and transformation of service delivery that funding may be found to reinstate the HIF and increase our focus on preventative work.</p>
<p>Performance Measures identified, where these will be reported and how impact will be monitored.</p>	<p>The Health Improvement Team will monitor how many projects are delivered by using a funding source other than the HIF, and the benefits will be evaluated in the same way as the current HIF and this will be reported to the Senior Leadership Team.</p>

Review

<p>Date the Impact will be reviewed</p>	<p>March 2027</p>
<p>Rationale for Date</p>	<p>One year on from cessation of fund and in advance of 2027/28 budget setting.</p>

Having considered all of the groups, duties and rights in the list at Appendix A of the Guidance on Impact Assessment could this policy or practice have a negative impact on any of the following. Please answer Yes or No. If you answer Yes, please specify precisely which particular group, duty or right will be impacted and how and also what (if any) current evidence you have.

	Yes/No	Details	Evidence
Protected Characteristics	Yes	People with all protected characteristics	HIF Annual Reports
Fairer Scotland Duty	Yes	All groups covered by the duty	HIF Annual Reports
Health Inequality	Yes	All groups experiencing Health Inequality	HIF Annual Reports
Specific Groups	No		
Human Rights	No		
UNCRC	No		

Will there be any cumulative impacts between this policy or decision and others	Yes	No
Describe what this cumulative impact will be and include evidence mitigations in the sections below		

Please list below the groups of stakeholders to be engaged with or consulted, what feedback has been received and how this has influenced development of the policy or practice and what (if any) mitigating actions have been put in place.

Stakeholder Groups	Feedback Received	Influence on Policy or Practice/Mitigating Actions
Budget Options Survey Commonplace	<p>Ceasing the HIF is viewed as increasing strain across communities and weakening upstream prevention. Comments stressed reliance on community/third-sector capacity and mental-wellbeing supports, with equity concerns for vulnerable groups and families. An awareness gap (some not knowing about HIF) likely explains part of the “no impact” responses.</p> <p>Most suggestions recommend retaining (or increasing) HIF as a cost-effective prevention tool. Practical ideas offered included: - tighten criteria/target need,</p>	<p>The Health Improvement Team will continue to work with communities seeking alternative funding or ways to deliver projects in a cost neutral way or via a contribution model. The Council’s External Funding team will be approached for opportunities for alternative sources of funding.</p> <p>It is hoped in future years, once the IJB achieves financial balance and transformation of service delivery that funding may be found to reinstate the HIF and increase our focus on preventative work.</p>

	<p>measure outcomes better, streamline admin/merge funds, seek alternative funding, boost awareness/signposting, and use community facilities. A smaller group suggested co-pay/personal contribution for some activities.</p>	
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Scottish Specific Public Sector Duties (SSPSED)

Procured, Tendered or Commissioned Services

Is any part of this policy/service to be carried out wholly or partly by contactors and if so, how will equality, human rights including children's rights and the Fairer Scotland duties be addressed?

Not Applicable

ACHSCP Impact Assessment – Stage 4 – Review

Name of Impact Assessment being reviewed	
Name of Officer completing review	
Date Review Commenced	
Reason for Review (scheduled or accelerated)	
Reason for Accelerated Review	
Name of Lead Officer	
Date Review Completed	

Summary of Key Information

What amendments have been identified to the original Impact Assessment?	
What evidence do you have for these amendments?	
What actions have you taken to review the policy or practice in light of the review?	

Having considered all of the groups, duties and rights in the list at Appendix A of the Guidance on Impact Assessment has the impact of this policy or practice changed from the original assessment? Please answer Yes or No. If you answer Yes, please specify precisely what change has occurred and which particular group, duty or right it affects and how and also what (if any) current evidence you have.

	Yes/No	Details	Evidence
Protected Characteristics			
Fairer Scotland Duty			
Health Inequality			
Specific Groups			
Human Rights			
UNCRC			

Will there be any cumulative impacts between this policy or decision and others	Yes	No
Describe what this cumulative impact will be and include evidence mitigations in the sections below		

Please list below the groups of stakeholders to be engaged with or consulted, what feedback has been received and how this has influenced development of the policy or practice and what (if any) mitigating actions have been put in place in light of the changes identified above.

Stakeholder Groups	Feedback Received	Influence on Policy or Practice/Mitigating Actions