Dear Chair and Chief Officer,

On behalf of Change Mental Health, we appreciate the opportunity to engage with the Edinburgh Integration Joint Board (EIJB) regarding the recently published Draft Strategic Plan 2025-2028.

Change Mental Health is a national mental health charity with 53 years' experience in delivering non-clinical, person-centred support to people affected by mental illness.

As a key stakeholder in Edinburgh's third sector, we recognise the financial and operational challenges facing the EIJB. However, we have significant concerns about the implications of the proposed strategic direction and wish to highlight critical areas which in our view require further development.

1. The Need for Financial and Social Impact Modelling

The plan commits to enhanced collaboration with NHS Lothian, the City of Edinburgh Council, and third-sector partners. However, there is limited clarity on what financial or social impact assessments have been conducted to understand the upstream/downstream consequences of changes in funding or strategic priorities. Before major shifts are implemented, a comprehensive assessment of the potential financial and service delivery impacts is essential to avoid unintended harm to individual service users plus increased pressure to front line services and GP practices.

2. Concerns Over Service Reductions & Strategic Focus

The plan's commitment to refocusing efforts on core delegated responsibilities suggests a potential withdrawal from supporting action in areas such as housing, homelessness, refugee services, justice services, benefits and poverty reduction, and children's services. While we recognise the constraints of the EIJB's mandate, cutting support in these areas could lead to increased service demand in other parts of the system, such as GP practices and the NHS. We urge the EIJB to ensure ongoing cross-sector working with other delivery partners to assess the full impact of EIJB budget/activity reductions.

3. Financial Viability vs. Best Outcomes for Service Users

Prioritising investments that yield short-term financial savings rather than long-term service user benefits risks neglecting interventions that could reduce costs in the future. The strategy acknowledges interdependencies between services but does not provide enough clarity on how decisions to reduce or redirect funding will impact partner organisations and future budgets. Proceeding without understanding these complexities could result in higher financial pressures elsewhere in the system and worse, perhaps life-threatening, outcomes for individuals. We would urge the strategic plan to consider structural reform to how it views service delivery to achieve the best outcomes for Edinburgh's citizens.

4. Strategic Realism vs. Avoiding Managed Decline

While the realism lens applied to the strategy is pragmatic, there is little detail on how the EIJB intends to influence funding partners to secure additional investment. The plan's tone suggests an acceptance of managed decline, rather than a proactive approach to securing the necessary funding for long-term sustainability. Greater transparency on advocacy efforts and financial planning would be welcome, as discussion of a systemic, long-term deficit would suggest a fundamental misalignment between service demands and allocated funding.

5. Overreliance on Information Sharing & Signposting

Many of the proposed actions involve improving signposting, communication, and digital resources. While these are valuable, they cannot replace direct service provision. A well-maintained website will not resolve complex service gaps and crucial support needed for individuals. It is vital that those who need support most are supported, and it is well known that people living in deprivation and with poor mental health may not have access to digital means, Instead, we encourage the EIJB to explore how digital tools can enhance, rather than replace, frontline support. The third sector could be an innovative partner in supporting this work.

6. Substance Use & Health Inequalities

We welcome the plan's commitment to specialist services for those with co-occurring mental health and substance use issues. However, this commitment contrasts with the attempted broader shift away from addressing health inequalities. Acknowledging worsening health inequalities will increase pressure on EIJB and NHS services, whilst seeking to reduce operational focus on tackling health inequalities comes across as inconsistent.

7. Expansion of Community-Based Care – Where Will Funding Come From?

The plan intends to expand community services to reduce reliance on hospital care, which we undoubtedly welcome, yet it is unclear where the necessary resources will come from. Given the financial pressures on third-sector partners, service expansion will be challenging if existing funding is cut. Trust and sustained long-term investment in voluntary sector partnerships are crucial for achieving these goals.

8. Balancing Fiscal Prudence with Innovation

We agree that funded services must demonstrate measurable impact. However, an overreliance on only pre-existing evidence bases risks stifling innovation in mental health and social care. As research evolves, so too must service delivery. The EIJB should balance fiscal caution with opportunities to pilot new approaches that may provide better long-term outcomes. Many leading support programmes currently lauded were once backed through pilots, therefore a strategic partnership approach needs to be implemented.

9. The Need for Genuine Co-Production

We support continued engagement in co-producing solutions for mental health and social care. However, third-sector partners, who are best placed to ensure co-production is authentic and meaningful, should be formally recognised as integral to both statutory and non-statutory service delivery. The current strategy lacks explicit commitments to ensuring that the voluntary sector plays a key role in shaping implementation and delivery.

10. Inadequate Consultation Process

The consultation process for this strategic plan has been deeply flawed. The lack of an easy-read version or summary document, coupled with a short consultation window, has limited meaningful input from those with lived experience. Given the long-term implications of this strategy, we urge the EIJB to conduct a more inclusive and accessible consultation process before finalising decisions on this and future strategy.

11. Financial Savings Must Be Realised Within the EIJB's Scope

The plan states that any new spending must result in direct savings elsewhere. However, without clear mechanisms to track cost shifts across services and partners, the EIJB risks creating a fiscal trap, where cost reductions in one area generate increased expenses elsewhere. This short-term focus will lead to greater financial pressures in future budget cycles and increased pressure on front line services, such as GP practices, Council's Social Work Department, Accident & Emergency Services and the NHS, plus worse and potentially life-threatening outcomes for individuals.

12. Addressing Contradictions in Narrative & Strategic Approach

At various points, the strategy acknowledges the interdependence of the EIJB with partners, yet also suggests that reductions in activity will not have significant consequences. Greater transparency is needed on how service reductions will impact partners such as NHS Lothian and the City of Edinburgh Council. Clear case studies or examples of interdependencies would improve strategic coherence and partner understanding of consequential impact.

13. Climate Commitments vs. Health Inequalities

The plan highlights the EIJB's role in supporting partners with climate obligations, despite legal responsibilities sitting elsewhere. However, when discussing health inequalities, the EIJB states it must focus only on core responsibilities. This inconsistency in whole-systems thinking raises concerns. Why does the EIJB adopt a broad approach to climate change but a narrower approach to health inequalities?

14. Implementation Plan & Third-Sector Input

A key question remains: What role will third-sector partners play in designing the implementation plan? Given that KPI selection, timescales, and co-design processes will

impact future commissioning and service priorities, we request further clarity on consultation processes for the implementation, medium-term financial strategy, measurement framework and workforce planning.

Final Thoughts

We appreciate the EIJB's efforts to develop a realistic and financially sustainable strategy, but we urge further refinement in several key areas to ensure that cost-cutting measures do not result in long-term serious harm to Edinburgh's most vulnerable residents.

We understand the difficult and changing fiscal landscape facing all health and social care partners. Yet realism must be balanced with hope, optimism and grit that we can realise the policy and delivery changes we all want to see. A reductionist atmosphere of managed decline would be, in our view, a mistake that could become a self-fulfilling prophecy. Trends in mental health are moving in the wrong direction and the importance of early intervention and prevention are clear in giving better life outcomes for individuals and savings to front line services in the NHS and Council. We welcome a fresh appraisal at an integrated, partnership-focused approach from all agencies, organisations and stakeholders in Edinburgh.

We request further engagement on these concerns and look forward to collaborating to create a more effective, inclusive, and sustainable strategic plan.