

Group	Current Location	Proposed Location	Proposed Location within Building	Subject Heading	Comments From 1st Stage Engagement	Outstanding Information/ Clarifications
MLC; Criminal Justice Team	DSW	DSW	Existing (TBC)	Service delivery	Current location within the building is suitable; layout could be improved Average of 16 (up to 25) users contracted; all organised/ booked MLC staff currently engage users in public space albeit on occasions, low risk user may be brought to invited space User engagement in 1 to 1 meeting spaces (currently shared with C&F) User drop in's (support or unpaid work) Presence of Police and drug misuse workers may be an issue Unpaid work; in excess of 20 users at workshop space; this space is not adequate Unpaid work; thoughts on timetabling 7am-7pm working hours (building access requirements) Spring' staff tender to work in mobile style but do return to draft reports at 3:30pm to 4:30pm Open plan working would be preferred from client group	Video conferencing Meeting room booking records Confirm 2/4 persons per day Regularity? Workshop space under review by H&S/ HSE for fit for purpose May present an issue with reception/ meet & greet
				Staff Security	Not all users are 'high risk' but there can be potential for 'flash' incidents Staff use neck less (attached to key of interview room) alarms; no static panic alarms in 1 to 1 rooms Lone working Interactive work with users can result in needing a 'quick egress' Reception needs visibility of 1 to 1 meeting space in the event of an incident Rooms need privacy; sound yet CCTV within room could be considered and activated in the event of an incident	How does this work? Can we improve? Is there a policy/ procedure? Is there a policy/ procedure? Is there a policy/ procedure? To be considered; Policy/ procedure?
				Reception/ Meet & Greet	Currently have two receptionist/ staff at reception Weekend non paid working users; gain access to workshop direct Issue with mail received being opened at reception Currently admin area behind reception Could contact centre be used to assist in fielding calls?	Confirmation of reasons for two- from all groups- access to different systems, data protection issues, permissions across NHS/ MLC etc; risks with one receptionist Current workshop set up is not fit for purpose
				Building Security	Limited to reception and restricted access (via FOB) to 'back of house' operations	
				Current staff to desk ratios	Staff numbers; 16 FTE Unidentified; fixed PC's \ (2nr) which limit work style change; improved utilisation through shift considerations	

NHS; Mental Health	Old Bonnyrigg Health Centre	Dalkeith Social Work	TBC	Other issues	Meeting room with tech to enable enhanced interactive work Positive reaction working with Mental Health as being positive	
					Police presence would potentially cause unrest DDA compliance would be a positive	
					Staff to staff engagement/ training/ video conferencing facilities would be an improvement Vehicle access to workshop is essential Can't be specific on footfall Building 'stigma' needs to be improved	2 hours per week?
				Service delivery	Strong links with substance misuse; also have links with Health & Mind Nurse staff provide drug administration Appointments 10-15 minutes; require variety of consultative spaces (need more detail) Police are integral part service delivery	What is the specification of the clinical space? Booking room records received; no Confirm; numbers?
					Waiting space provided within current building	Are there any conflicts? Could appointments be more accurate/ timely to reduce wait times?
					Weekend working (2 staff); call out; lone working Clinical/ meeting space; 1 (15) large & 5 (4nr 4 person and 1nr 6 person) smaller rooms	More detail on this type of work No timetable issued to date
					Group room; 15nr for family meetings; bookable Infection control is an issue	Specification required? Methods of control
				Staff Security	Dedicated staff (police?) entrance Panic button CCTV currently in building; to what extent?	Restrictions? Management of CCTV? Protocols?
				Reception/ Meet & Greet	One reception staff member Glass/ high screen preferred Reception is linked to an admin area; directly behind	Confirmation of reasons for two- from all groups- access to different systems, data protection issues, permissions across NHS/ MLC etc; risks with one receptionist Access to files? Confirm; Paperlite?
					Reception area is required to be secure	More open 'feel' required by Integrated Board management (Westerhailes Healthy Living Centre)
				Building Security	Limited to reception and secure access to back of house (through FOB)	
				Current staff to desk ratios	Staff numbers 51nr (additional 3 social work & 3 psychological therapy) Technology provided to staff; unclear	Does this include administrative? Need a split Would assist in mobile/ flexible working
				Other issues	Training facilities for management and staff Filling will need to be in locked room but close to reception Stress/ breakout spaces Additional meeting provision could be supported by Medical Centre DDA compliance	How realistic is this? Paperlite approach?

NHS; Drug Misuse	Glenesk Health Centre	Dalkeith Social Work	TBC	Service delivery	Therapy/ clinical rooms are key; currently 4nr with group room Group room; 8nr; social interaction Monday has 15nr users and require group room all; prescription drugs administered Treatment room required; controlled drugs administered Consultants rooms required; Tuesday Supervisory rooms required	Rooms could be shared; booking schedule TBC Secure storage; specification required; time tabling issue Secure storage; specification required Utilisation required Staff only
				Staff Security	Staff use neck less (attached to key of interview room) alarms	Need to clarify if this is suitable
				Reception/ Meet & Greet	Currently have dedicated, secure reception; see benefits in sharing this resource	Current 4 days per week
				Building Security	One entrance; back of house secure through FOB	
				Current staff to desk ratios	6nr nurses; 1nr philologist; 1nr MELDAP; 1nr OT 1:1 staff to desk ration	
				Other issues	Tuesday is team meeting day Initial paper assessment; then transferred to electronic version Consideration for children; how can this be accommodated? Consideration for dogs; how can this be accommodated? Alternative waiting spaces; user vulnerability	
MLC; Social Care	FFH	Dalkeith Social Work	TBC			
3rd SP; Health & Mind	Orchard Centre/ Old Mining Museum	Old Bonnyrigg Health Centre	TBC	Service delivery	User engagement Mon-Fri; 9am-10pm User engagement Sat- Sun; 10am-4pm Significant off site engagement Cafe/ kitchen for users and drop in users Public space for user breakout Arts and crafts room Registered users and unregistered users Treatment room used by volunteer masseur Garden service Music/ arts room	Service defined approach
				Staff Security	None evident Lone working	Policy?
				Reception/ Meet & Greet	No dedicated reception Signing in book available Door entry; managed by administrative staff	
				Building Security	Door entry system; managed by administrative staff	
				Current staff to desk ratios	18nr staff; differing work styles Technology to support alternative work styles is being assessed	TBC
				Other issues	One incident of threatening behaviour a week (av) Service delivery review forthcoming Information security not deemed an issue	Relatively paperless

3rd SP; Woman's Aid	Woman's Aid	Old Bonnyrigg Health Centre	TBC	Service delivery	<p>Services operates over East & Midlothian Staff deliver face to face, 1 to 1 counselling; minimum of 3 rooms One large room; used for arts/ crafts/ therapeutic/ TV & audio/ Playstation etc</p> <p>Children friendly rooms are essential but could have an element of flexibility for alternative uses Approximately 300 families use the service Drop in requirement essential (Tuesday); numbers fluctuate</p> <p>Telephony service is well used; there are examples of 'fleeing' women with their children Staff provide sheltered support (no longer than 24hours) Working hours, generally 9-5 although occasional evening/ weekend working Counselling rooms have telephone, PC with internet access</p> <p>OASIS database access required Donations regularly received and distributed; food, clothes, toiletries etc Staff; large meeting space for team meetings; this doesn't have to be in the same location- ie Laswade Centre Staff; training sessions held</p> <p>Storage; donations, literature, stationary etc Service protocols are overseen by the Care Inspectorate</p>	<p>Currently have 1nr one to one room plus group room which is multi functional</p> <p>Any further information on telephony?</p> <p>External organisation providing full IT support. What is yearly spend for this support? Following visit to existing building- storage is an issue- generally</p> <p>Approx 35nr; could use other Midlothian Council facilities Frequency, numbers of users etc Following visit to existing building- storage is an issue- generally Consideration of Care Inspectorate requirements essential</p>
				Staff Security	<p>Intercom access Back door for staff to egress in event of potential confrontation</p> <p>Lone working policy and procedures in place</p>	<p>Sight of policy would be essential; it may need revisited</p>
				Reception/ Meet & Greet	<p>No receptionist; meet and greet by staff on a rotational basis 29a Eskbank has no waiting area Signing in book but not frequently used/ forced to use</p>	
				Building Security	<p>CCTV to perimeter of building Intercom access</p>	<p>This wasn't evident in current building</p>
				Current staff to desk ratios	<p>12 staff (Dalkeith); 1:1 ratios; fixed PC's; potential new project team requiring 2nr hot desks)</p>	<p>Existing set up has two hot desks</p>
				Other issues	<p>6 months notice on current lease Delapidations clause on current lease? Womens Aid property contact?</p> <p>Among main services provided is needle exchange, physiological support, alternative support for Drugs and Alcohol</p>	
3rd SP; D&A misuse support	Newmills (Mainbase)	Old Bonnyrigg Health Centre	TBC	Service delivery		

		<p>Work closely with NHS at Glenesk; gateway to recovery with mostly drop in service</p> <p>Scottish Government are pushing for local support and recovery</p> <p>Funding; clarity required from MELD; split between Midlothian/ East Lothian- human and building resource- this will be required for the business case</p> <p>Midlothian Social work provide support with MELD 1 to 1 working appears to be main 'style' of working but group session form part of the recovery process- more at the tail end of the recovery process</p> <p>Services also delivered from Penicuik (how future service delivery model will look like geographically?); NHS facilities used (where?)</p> <p>Moving towards SMART Recovery; is there a strategy available as to what this may look like?</p> <p>Horizons cafe; where & what are the key deliverables from this initiative?</p> <p>Training for client carers/ families; administration of anti opiates etc</p> <p>Paper assessments currently taken, then are transferred to PC's; direct input to PC's is preferred</p> <p>Sharing of common information (speak to Digital Services)</p> <p>Needle exchange; 2 afternoons per week (confirmation of days/ times required)</p> <p>2nr defined groups (confidential); injections and recovery (time tabling)</p> <p>Drop in service; regular</p>	
Staff Security		Not an issue; no lone working provides a 'level' of staff security	
Reception/ Meet & Greet		Currently meet the person at reception/ meet & greet area	
		Core hours are 9-5; but Wednesdays service runs to 7:30pm; reception may need resourced	
Building Security		Unknown (current); will be addressed through new design proposals	
Current staff to desk ratios	1:1		Ability to improve the the staff to desk ratios is dependant on technology and access to East/ Midlothian corporate servers
Other issues		<p>Group work (Therapy)with 8-10 users</p> <p>Acupuncture (voluntary); times could be made flexible but popular for service</p> <p>Relapse prevention all the above is SMART recovery</p> <p>Currently have a dedicated server; could this be shared?</p>	

[illegible]