Notice of Meeting and Agenda

Midlothian Council

Venue: **Virtual Meeting,**

Date: **Tuesday, 29 March 2022**

Time: **11:00**

Executive Director : Place

Contact:
Clerk Name: Democratic Services
Clerk Telephone:
Clerk Email: democratic.services@midlothian.gov.uk

Further Information:

This is a meeting which is open to members of the public.

Privacy notice: Please note that this meeting may be recorded. The recording may be publicly available following the meeting. If you would like to know how Midlothian Council collects, uses and shares your personal information, please visit our website: www.Midlothian.gov.uk

1   Welcome, Introductions and Apologies

2   Order of Business

Including notice of new business submitted as urgent for consideration at the end of the meeting.

3   Declaration of Interest

Members should declare any financial and non-financial interests they have in the items of business for consideration, identifying the relevant agenda item and the nature of their interest.

4   Deputations

None

5   Minutes

6   Questions to the Council Leader

None

7   Motions

None

8   Public Reports

(NB: A full replacement paper shall be provided prior to Council to report to Members the most current circumstances in the purpose of this report).

(A) TO CONSIDER RESOLVING TO DEAL WITH THE UNDERNOTED BUSINESS IN PRIVATE IN TERMS OF PARAGRAPHS 1, 9, 11 AND 13 OF PART 1 OF SCHEDULE 7A TO THE LOCAL GOVERNMENT (SCOTLAND) ACT 1973 - THE RELEVANT REPORTS ARE THEREFORE NOT FOR PUBLICATION; AND
(B) TO NOTE THAT NOTWITHSTANDING ANY SUCH RESOLUTION, INFORMATION MAY STILL REQUIRE TO BE RELEASED UNDER THE FREEDOM OF INFORMATION (SCOTLAND) ACT 2002 OR THE ENVIRONMENTAL INFORMATION REGULATIONS 2004.

9   Private Reports

9.1   Appointment of Education Chief Operating Officer - Report by Executive Director Children Young People and Partnerships

- 1. Information relating to a particular employee, former employee or applicant to become an employee of, or a particular office holder, former office-holder or applicant to become an office-holder under, the authority.
- 11. Information relating to any consultations or negotiations, or contemplated consultations or negotiations, in connection with any labour relations matter arising between the authority or a Minister of the Crown and employees of, or office-holders under, the authority

9.2   Midlothian Energy Limited - Shawfair DHN Pipework Compulsory Purchase Order - Report by Executive Director Place

- 9. Any terms proposed or to be proposed by or to the authority in the course of negotiations for a contract for the acquisition or disposal of property or the supply of goods or services.
- 13. Information which, if disclosed to the public, would reveal that the authority proposes—(a) to give under any enactment a notice under or by virtue of which requirements are imposed on a person; or (b) to make an order or direction under any enactment.

10   Date of Next Meeting

The next meeting will be held on 24 May 2022

Midlothian Council Minute Volume

Presented to the Meeting
of Midlothian Council
on Tuesday, 29 March 2022

Action Log

No	Subject	Date	Action	Action Owner	Expected completion date	Comments
1	Minute action - prospective crematorium development.	16/11/2021	Scope potential suitable sites for prospective crematorium development.	Chief Officer Place	TBC	Work is progressing in Planning Service.
2	Motion Amendment – Loanhead Football Club	16/11/2021	Update the Sports Needs Assessment from 2016 and report to future council meeting	Head of Adult Social Care/ Sport & Leisure Manager	TBC	Procurement of revised needs assessment in process.
3	Land Supply – Housing	14/12/2021	Provide a report to Council	Executive Director Place	March 2022	Report on March Council agenda
4	Garage Site Report	14/12/2021	Provide a report to Council	Executive Director Place	March 2022	Report on March Council agenda
5	Motion - Infrastructure	14/12/2021	Report to Council Strategic Investment Framework	Executive Director Place	TBC	Work has been commissioned and report shall be presented to Council when available.
6	Minute Action - Standing Orders Working Group	14/12/2021	Briefing on Standing Orders and The Code of Conduct	Monitoring Officer	March 2022	Briefings on the Code of Conduct have been provided to political groups, as requested.

No	Subject	Date	Action	Action Owner	Expected completion date	Comments
						A date has still to be agreed for a meeting of the Standing Orders Working Group.
7	Minute Action – Future Hybrid Meetings	14/12/2021	Updated Hybrid Meetings Report – Spring 2022	Chief Officer Corporate Solutions	June 2022	Referred to next Council Administration
8	Minute Action - CCTV	14/12/2021	To Provide a Report outlining an expansion of sites for CCTV	Chief Officer Place	March 2022	Work progressing with Police and report will be provided to next Council.
9	Minute Action –Improving Energy efficiency by tackling Dampness, Condensation and improving ventilation	15/02/2022	Provide a Report to Council	Chief Officer Place	June 2022	Work progressing. Report will be provided to next Council.
10	Minute Action - Environmental Crime Team Council Report	15/02/2022	Provide a report outlining Option B, a dedicated team	Chief Officer Place	March 2022	Complete
11	Minute Action - Extending the Penicuik Project	15/02/2022	Provide a report outlining possible options to extend the Penicuik project	Head of Development	March 2022	Complete

The Single Midlothian Plan Performance Report

Report by Dr Grace Vickers Chief Executive

Report for Noting

1   Recommendations

Council are recommended to note the excellent partnership working which has taken place during the pandemic; enabling local communities to be well supported. In addition the community planning partnership did, under challenging circumstances, progress the majority of indicators and actions in H1 (21) thus working towards improving overall outcomes in Midlothian.

2   Purpose of Report/Executive Summary

The purpose of this report is to draw to elected members' attention the performance report of Midlothian Community Planning Partnership. It is a statutory duty for the partnership to publish performance reports.

Date: 10th March 2022
Report Contact: Annette Lang, Group Service Manager (CPP & CLLE)
Email: annette.lang@midlothian.gov.uk

3 Background

3.1 Part 2 of the Community Empowerment Act 2015 sets out clear expectations for what the purpose of community planning is, and how it is to operate.

3.2 Statutory Guidance flowing from the 2015 Act makes clear that community planning is about "how public bodies work together and with the local community to plan for, resource and provide or secure the provision of services which improve local outcomes in a local authority area, with a view to reducing inequalities".

3.3 Effective community planning brings together the collective talents and resources of local public services and communities to drive positive change locally. Local statutory community planning partners (The Council, Police, Fire, National Health Service and Scottish Enterprise) are expected to provide strong shared leadership for community planning, so that the CPP sets an ambitious vision for local communities and ensure that is delivered.

The voices of communities themselves, especially those experiencing socio-economic disadvantage, are expected to be integral to successful community planning. Their needs and aspirations, and their own capacity to make change happen (with support where needed), should be reflected in the local priorities the CPP sets, in how community planning partners shape services and direct resources, and in how the CPP reviews progress made.

3.4 The Guidance further makes clear that "effective community planning focuses on where partners 'collective efforts', can add most value for their local communities, with particular emphasis on reducing inequalities". The CPP is expected to have a clear and ambitious vision for its local area. Community planning should focus on a small number of local priorities where the CPP will add most value as a partnership – in particular by improving outcomes for its most vulnerable communities and moderating future demand for crisis services. The CPP should be clear about the improvements it wishes to make locally on these priorities, and be committed to prevention and early intervention as a way to contribute to these improvements.

3.5 Effective community planning is expected to be committed to achieving its ambitions and striving for continuous improvement. The CPP is expected to be committed to delivering on its ambitions for communities in its area. The Guidance states "CPP's must understand how well they're performing, and act nimbly wherever appropriate to improve performance. There should be genuine challenge and scrutiny in community planning, built on mutual trust, a shared and ambitious commitment to continuous improvement, and a culture that promotes and accepts challenge among partners". The CPP is expected to be organised to provide a strong platform which supports and encourages vibrant strategic decision making and action locally. Finally "the CPP must be transparent in demonstrating to its communities the progress it is making to improve outcomes".

3.6 The 2015 Act specifically requires CPPs to:

- Prepare and publish a local outcomes improvement plan (LOIP) which sets out the local outcomes which the CPP will prioritise for improvement.

- Identify smaller areas within the local authority area which experience the poorest outcomes, and prepare and publish locality plans to improve outcomes on agreed priorities for these communities (the outcomes prioritised for improvement in a locality plan may differ from those in the local outcomes improvement plan). In Midlothian these areas have been defined by the CPP as the areas of Mayfield/Easthouses, Gorebridge and Dalkeith Central/Woodburn communities. We are currently reviewing how we will work with communities going forward to address reduce inequalities and increase financial wellbeing.
- Review and report publicly on progress towards their LOIP and locality plans, and keep the continued suitability of these plans under review.

3.7   The CPP Board has an established annual planning and performance cycle which culminates in approval of its annual performance reports.

3.8   The Council agreed in 2013 to adopt the partnership's shared plan as the strategic plan for the Council. This reduced the number of strategic planning documents in place at that time from 3 to 1 and committed the Council as a core partner to the shared goals of the CPP Board, chaired by the Council leader. All Council service plans are now expected to show connections to this strategic plan, known as the "Single Midlothian Plan", which meets the statutory requirement for a local outcomes improvement plan for Midlothian.

3.9   The Community Empowerment Act's statutory guidance requires CPP's to set 3 year outcomes and to show one year measurable actions towards these. The top priorities of the Single Midlothian Plan (SMP) for the period 2019-22 are to reduce the outcomes gaps in health, learning and economic circumstances. To reduce the impact of climate change has been added in 2019/20.

3.10   The SMP encompasses 5 themes of work, identified through public engagement as main areas in which the public expected partners to make improvements. These are summarised as Adult Health and Care, Community Safety, Sustainable Growth, Improving Opportunities and Getting it Right for every Child. Performance against the outcomes in each of these areas is set out in the attached report which has been approved by the Community Planning Partnership Board at its meeting on 18th November 2021 for H1 (21/22).

4.   Next Steps

The Community Planning Partnership in Midlothian in 2022 is required to review its vision, revising for the next 10 years, consulting with the partners and local communities.

The Community Planning Partnership through its thematic leads are reviewing the three year outcomes currently and their one year actions for 22/23 in order to create an updated Single Midlothian Plan with less, more focused actions and indicators which will make the biggest impact through joint effort of the community planning partners.

5.   Report Implications (Resource, Digital and Risk)

5.1   Resource

The planning cycle of the SMP provides information for resource planning processes, with annual priority actions being agreed in November each year with the explicit intention of influencing the budget setting of partners, including the Council, for the following financial year.

5.2   Digital

We have recently established an interactive scorecard for community planning to support performance reporting.

5.3   Risk

Failure to publicly report progress against the SMP is a breach of law. The Council is a core partner in the community planning partnership and has adopted the SMP as its corporate strategy, failure to report progress would therefore also impact negatively on the Council's performance management system.

5.4   Ensuring Equalities (if required a separate IIA must be completed)

The SMP is subject to an equality impact assessment process. Key Priorities established by the partnership focus on reducing inequalities.

APPENDIX A –   Report Implications
APPENDIX B –   Single Midlothian Plan Performance Reporting Scorecard H1
APPENDIX C –   Single Midlothian Plan Performance Reporting Scorecard (H2)

A.1   **Key Priorities within the Single Midlothian Plan**

All Single Midlothian Plan Priorities.

A.2   **Key Drivers for Change**

Key drivers addressed in this report:

☒ Holistic Working
☒ Hub and Spoke
☒ Modern
☒ Sustainable
☒ Transformational
☒ Preventative
☒ Asset-based
☒ Continuous Improvement
☒ One size fits one
☐ None of the above

A.3   **Key Delivery Streams**

Key delivery streams addressed in this report:

☒ One Council Working with you, for you
☒ Preventative and Sustainable
☒ Efficient and Modern
☒ Innovative and Ambitious
☐ None of the above

A.4   **Delivering Best Value**

A.5   **Involving Communities and Other Stakeholders**

The core of community planning is partnership working practice, both between agencies in the public, private and voluntary sector and with the communities of place and interest that make up Midlothian. The publication of performance reports is an essential part of informing citizens, as well as demonstrating collective accountability amongst the partners.

The Midlothian Community Planning Partnership Conference, took place in November 2021, with a focus on People, Place, Planet and Wellbeing. The conference also considered the updated Midlothian Profile, Strategic Analysis and Citizen Panel survey results which will inform the Single Midlothian Plan for 22/23. The partnership will be actively engaging with communities in 22/23 to consider if and how we can develop Community Wealth Plans in Midlothian.

We will also be working with the Improvement Service, local communities and partners in 2022 to appraise the work and arrangements for community planning and areas for focussed attention going forward.

A.6   Impact on Performance and Outcomes

Performance is tracked using the "Pentana" performance management software system. This system is used by over 50% of Scottish Local Councils. A scorecard has recently been developed for the Single Midlothian Plan and the indicator and actions are reflected in the new scorecard approach for H1 (21/22).

In H1 the performance for each thematic is illustrated below and in Appendix B.

Thematic Area	On target I/A	Off Target I/A	Highlighted Success
Health and Social Care Partnership	18	4	Strategic Planning 2022-25 – includes joint work with some CPP partners e.g. Housing Providers, third sector, Children and Familes. Training restarted – Midway, Suicide Prevention and Trauma.
Community Safety and Justice	32	3	Stride
Getting it Right for Every Child	13	10	The National Housing Project worked with 9 care experienced young people aged between 16 -19. Implemented a Family Group Decision Making service for children who are at risk of being accommodated. Developing a trauma informed workforce Midlothian's Young People's Advice Service (MYPAS) commissioned to increase community awareness of the Positive Approaches to Risk Taking Guidance. In 2021, children and young people in Midlothian benefited from extra Scottish Government funding to support their mental health and wellbeing. The Midlothian Children and Young People's Mental Health Strategic Planning Group - a multi-agency group with members from the council, the NHS and the

			local voluntary sector – oversees the funding and awarded a further £197,000 to add to the £270,000 allocated in 2020, all of it used to support local children and young people through the provision of services and activities that include: therapeutic family support, family counselling, anxiety management, supported play and personalised support for those with very high needs.
Improving Opportunities Midlothian	52	6	Financial Inclusion Work Numbers participating in learning across provisions.
Sustainable Growth (including climate change, economic growth and Housing)	84	17	Good Progress on creating climate hubs locally. Midlothian Council's Rapid Rehousing Plan. Business Support to pre start-ups and established businesses across Midlothian.

H2 (20/21) was a lighter touch approach to performance monitoring and instead focused on successes and challenges due to the impact of the response to the pandemic. A selection of the successes and challenges are presented in Appendix C.

A.7   Adopting a Preventative Approach

The CPP is committed to adopting a 'Preventive approach'. Preventive work takes place at a variety of levels including universal and targeted. Partnership work throughout 2020 and 2021 has focused on key preventative areas for work for example young people's mental health, community resilience and more recently in terms of climate change.

A.8   Supporting Sustainable Development

The theme of sustainable growth commits the CPP to achieving a balance between economic growth, environmental sustainability and meeting housing demand. This connects physical development planning and community planning ambitions. Given the scale of physical development taking place and planned , this theme presents a significant challenge to all partner agencies to ensure new and established communities connect , services , facilities and employment opportunities keep pace with population growth and the natural environment is protected and enhanced.

APPENDIX B – Single Midlothian Plan Performance Reporting Scorecard (H1)

♥ SMP Key Priority Indicators▾

13 On Target	5 Off Target	0 Data Only	10 No Data Available
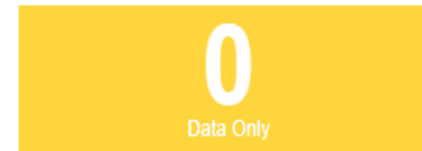
SMP Key Priority Indicators Off Target

...		Code & Title	Gauge	Value	Target	Last Update	History
🕑	🔴	P.G.CSPC.3.5a Children & Young People's Wellbeing and Mental Health Strategy ap...		No	Yes	H1 2021/22	
	🔴	P.AHSC.5.2a Number of people on Unpaid Work Programme attending at least one ...		1	5	H1 2021/22	
	🔴	P.AHSC.2.3a Number of people attending activity groups hosted by Midlothian Active...		1,820	5,000	H1 2021/22	
🕑	🔴	P.G.CSPC.3.3a Annual percentage seen within 18 weeks for first treatment		48%	90%	2020/21	
🕑	🔴	P.G.CSPC.3.1a Annual number of CAMHS referrals		520	580	2020/21	

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SMP Adult Health and Social Care▾

18	4	0	1
Indicators that are On Target	Indicators that are Off Target	Indicators that are Data Only	Indicators that have No Data Available

18	0
Actions that are On Target	Actions that are Off Target

SMP Adult Health and Social Care INDICATORS Off Target ⓘ

...	Code & Title	Gauge	Value	Target	Last Update	History
🔴	**P.AHSC.5.2a** Number of people on Unpaid Work Programme atten...	▬▬▬	1	5	H1 2021/22	
🔴	**P.AHSC.2.3b** Number of people attending one to one sessions with...		107	475	H1 2021/22	
🔴	**P.AHSC.2.3a** Number of people attending activity groups hosted by...		1,820	5,000	H1 2021/22	
🔴	**P.AHSC.4.2a** Additional benefit income to Midlothian residents iden...	▬▬▬	£40,191	£75,000	H1 2021/22	

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SMP Community Safety and Justice ▾

3	2	29	4
Indicators that are On Target	Indicators that are Off Target	Indicators that are Data Only	Indicators that have No Data Available

29	1
Actions that are On Target	Actions that are Off Target

SMP Community Safety and Justice INDICATORS Off Target

...	Code & Title	Gauge	Value	Target	Last Update	History
🔴	P.CSJ.2.2a Increase the average weekly attendance at Horizons Cafe		0	80	H1 2021/22	
🔴	P.CSJ.6.1a All statutory partners engage in the self-evaluation process by attending ...		0%	70%	2020/21	

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SMP Community Safety and Justice ACTIONS Off Target

...	Code & Title	Progress		Status	Due Date	...	Type
🔴	P.CSJ.7.6 Create / develop an automatic referral process to third sector support age...		80%	Overdue	31 Oct 2021	⚙	Action

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SMP Getting It Right For Every Midlothian Child▾

4	**9**	**6**	**2**
Indicators that are On Target	Indicators that are Off Target	Indicators that are Data Only	Indicators that have No Data Available

9	**1**
Actions that are On Target	Actions that are Off Target

SMP GIRFEMC INDICATORS Off Target

		Code & Title	Gauge	Value	Target	Last Update	History
⚙	🔴	P.GIRFEMC.2.2a Pilot in place and involving all key stakeholders		No	Yes	H1 2021/22	
⚙	🔴	P.GIRFEMC.2.2b Interim evaluation of pilot completed with recommendations to GIR...		No	Yes	H1 2021/22	
⚙	🔴	P.GIRFEMC.3.1a Appropriate support is being provided, based on data in place that i...		No	Yes	H1 2021/22	
⚙	🔴	P.GIRFEMC.3.2a Accurate data-set is consistently used in all schools to monitor, trac...		No	Yes	H1 2021/22	
⚙	🔴	P.GIRFEMC.3.3a Strategic plan approved by GIRFEMC Board		No	Yes	H1 2021/22	
⚙	🔴	P.GIRFEMC.3.4a Data sharing agreement in place		No	Yes	H1 2021/22	
⚙	🔴	P.GIRFEMC.3.5a Strategy in place with identified actions		No	Yes	H1 2021/22	
⚙	🔴	P.GIRFEMC.1.1b Number of children and young people reporting improved family rel...		21	27	H1 2021/22	
⚙	🔴	P.GIRFEMC.1.1c Child/young person is at a reduced risk of harm as a result of pare...		21	27	H1 2021/22	

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SMP GIRFEMC ACTIONS Off Target

		Code & Title	Progress		Status	Due Date		Type
⚙	🔴	P.GIRFEMC.3.1 Create accurate data-set, to monitor and track CYP with additional s...		10%	Overdue	31 Aug 2021	⚙	Action

SMP Improving Opportunities for People In Midlothian ▾

34	5	4	11
Indicators that are On Target	Indicators that are Off Target	Indicators that are Data Only	Indicators that have No Data Available

18	1
Actions that are On Target	Actions that are Off Target

SMP IOM INDICATORS Off Target ⓘ

...		Code & Title	Gauge	Value	Target	Last Update	History
🕒	🔴	P.IOFPIM.5.1a Map provision and produce Midlothian Digital Pathway with routes int...		0	1	H1 2021/22	
	🔴	P.IOFPIM.1.1i Number of parents achieving increase in income through PESF		6	29	H1 2021/22	
	🔴	P.IOFPIM.1.3a The Child Poverty Act sets out four statutory, income-based targets (a...		23.9%	10%	H1 2021/22	
	🔴	P.IOFPIM.3.2c Number of Midlothian residents gaining positive outcome through acc...		7	20	H1 2021/22	
	🔴	P.IOFPIM.2.3o Number of young people who volunteer with Transform Project		17	20	H1 2021/22	

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SMP IOM ACTIONS Off Target ⓘ

...		Code & Title	Progress		Status	Due Date	...	Type
🕒	🔴	P.IOFPIM.2.2 Increase number of Edinburgh College places made available to Midlot...		50%	Overdue	31 Aug 2021	⚙	Action

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SMP Sustainable Growth ▾

38	14	6	2
Indicators that are On Target	Indicators that are Off Target	Indicators that are Data Only	Indicators that have No Data Available

46	3
Actions that are On Target	Actions that are Off Target

SMP Sustainable Growth INDICATORS Off Target ⓘ

...		Code & Title	Gauge	Value	Target	Last Update	History
🔾	🔴	P.SG.12.4a Relevant partners work together to consider the action (to note this indic...		No	Yes	H1 2021/22	
🔾	🔴	P.SG.12.5a Work undertaken with car dealers to investigate how purchase of electric...		No	Yes	H1 2021/22	
🔾	🔴	P.SG.12.6a Relevant partners work together (to note this indicator forms part of a thr...		No	Yes	H1 2021/22	
🔾	🔴	P.SG.2.3a Sessions with 1-2-1 / group follow up support if requested in partnership w...		0	3	H1 2021/22	
🔾	🔴	P.SG.6.1a Review undertaken (to note this indicator forms part of a three year plan)		No	Yes	H1 2021/22	
🔾	🔴	P.SG.6.2a Methodologies considered (to note this indicator forms part of a three year...		No	Yes	H1 2021/22	
🔾	🔴	P.SG.6.3a Methodologies publicised (to note this indicator forms part of a three year ...		No	Yes	H1 2021/22	
🔾	🔴	P.SG.7.3a Engagement has taken place with local shop owners and service provider...		No	Yes	H1 2021/22	
🔾	🔴	P.SG.7.4a Engagement has taken place with local employers (to note this indicator f...		No	Yes	H1 2021/22	
🔾	🔴	P.SG.9.1a Work undertaken with Midlothian Energy to take forward the action (to not...		No	Yes	H1 2021/22	
🔾	🔴	P.SG.9.2a Work undertaken with Midlothian Energy to take forward the action (to not...		No	Yes	H1 2021/22	
🔾	🔴	P.SG.9.3a Work undertaken with Midlothian Energy to take forward the action (to not...		No	Yes	H1 2021/22	
🔾	🔴	P.SG.9.4a Work undertaken with Midlothian Energy to take forward the action (to not...		No	Yes	H1 2021/22	
🔾	🔴	P.SG.9.6a Assess capacity electricity grid capacity in Midlothian (to note this indicato...		No	Yes	H1 2021/22	

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APPENDIX C – SINGLE MIDLOTHIAN PLAN PERFORMANCE REPORTING (H2)

Adult Health and Social Care H2

Midlothian Health and Social Care Partnership is responsible for services that help adults live well and get support when they need it. Many voluntary sector and independent providers work with us to deliver the objectives of the Partnership, and while the Partnership is governed by the Integration Joint Board (IJB) it is also a thematic group of the Midlothian Community Planning Partnership.

Key developments during the year are noted below.

1. COVID-19 RESPONSE
The impact of the COVID-19 pandemic brought many challenges and much disruption to the Health and Social Pare Partnership, our partners and the communities it serves. There was increased anxiety and pressure on many service users, unpaid carers and staff. While challenges may have changed over 2020, they will continue into 2021.

As a Partnership, the top priority was the safety of patients, clients, communities and staff. In response to the situation it was important to be innovative and support clients effectively and safely during this time. Staff continued to see people face-to-face where this was clinically essential, but in order to reduce face-to-face contact, where feasible, teams made a number of changes to how they delivered services throughout the pandemic.

As well as managing changes to existing services, the Partnership also provided care and treatment to people who had contracted COVID-19 and their families. It also provided support to partner agencies around changed provision, infection control and other requirements, including the provision of personal protective equipment (PPE) and staff testing. In addition, COVID-19 related services had to be established, often at short notice as the pandemic escalated, such as the COVID-19 Testing and Assessment Hub at Midlothian Community Hospital. Many staff across the Partnership were redeployed to other roles, assisting in care homes and PPE centres.

2. UNPAID (FAMILY) CARERS
Work continued to support carers in partnership with local organisations, in particular VOCAL Midlothian but also Alzheimer's Scotland and others. While traditional respite options have been limited due to the pandemic, especially for older people, alternative support to carers is being progressed and additional funds were provided for Wee Breaks. Work progressed to re-commission carer support services in 2021. This involved a comprehensive community engagement programme. Contracts were awarded in March 2021.

3. MULTI-DISCIPLINARY APPROACH TO MENTAL HEALTH, SUBSTANCE MISUSE AND COMMUNITY JUSTICE SERVICES
In 2019 staff from across mental health, substance misuse, Justice and Third Sector co-located in 'No.11' in Dalkeith, allowing for a new trauma informed, collaborative way of working with and supporting individuals, particularly those with multiple complex needs. The service is part of the Scottish Government's Trauma Informed Workforce Pilot. There have already been some excellent examples of joint working to support vulnerable clients. Service delivery had to change during the pandemic.

4. IMPROVING SERVICES FOR OLDER PEOPLE
There is one internal and three externally contracted providers in Midlothian delivering **Care at Home** to older people. All care at home services have managed to continue their normal service delivery in recent months. COVID-19 has had an effect on the workforce as a number of staff were in the shielding group due to their own health conditions.

Extra Care Housing: As with many other areas, Midlothian faces many challenges in addressing the housing and care needs of an ageing population with increasingly complex requirements. Extra Care Housing is a model of accommodation and care that supports people to live in their own tenancy. Plans for the development of extra care housing complexes across three sites in Midlothian is ongoing with spring 2022 proposed for completion.

Care Homes: Midlothian has 10 older people's care homes, 2 of which are HSCP run with one being an intermediate care facility. The remaining 8 are privately run either by private companies, charitable organisations or independent family care homes. The HSCP continued to build on relationships across the sector to deliver support in line with the Scottish Government guidelines on enhanced professional, clinical, and care oversight of care homes (May 2020). A HSCP Assurance Group was established and is chaired by the Chief Nurse, meeting daily for a rundown on each Care Home to discuss any issues that have arisen and consider any support required.

5. FRAILTY

The increasing prevalence of frailty, as a result of our rapidly ageing population, is contributing to a health and care system that will be unsustainable in its current form. People with severe and moderate frailty (3,500 people) account for 4% of Midlothian's population and 31% of unscheduled activity in the Royal Infirmary of Edinburgh in 2019. Midlothian HSCP and the Midlothian GP Cluster continue to use the electronic frailty index (eFI) to inform strategic direction and service developments.

During the COVID-19 response 2,719 people estimated to have moderate or severe frailty were contacted and supported by the Red Cross Welfare Call service (issues identified including hearing aid battery replacements, social isolation, shopping, and prescriptions). In 2020-21 the Red Cross supported older people to access £201,000 of Attendance Allowance through their income maximisation work.

People living with moderate or severe frailty who were part of a dedicated GP service saw in a reduction in subsequent admissions to hospital in 2020-21.

6. WORKFORCE

Midlothian HSCP has a workforce strategy with a focus on the training and development of the social care workforce. In addition, training opportunities are made available across the Community Planning Partnership (CPP), for example training on Good Conversations, health inequalities, health literacy, suicide prevention, and weight stigma. Midlothian continues to implement the Trauma Awareness Framework. Training was paused until September 2020 but courses are now being delivered with good representation from many areas of the CPP.

7. LEARNING DISABILITY, AUTISM AND COMPLEX NEEDS HOUSING

No Midlothian citizen with complex care needs is currently delayed in hospital and nobody lives away from the area, other than through their own choice or where there is an assessed need for them to be supported outside Midlothian.

Supporting independent living is a key priority for the Learning Disability Services. Work is ongoing to develop a range of housing options based on individual needs and to ensure individuals can access appropriate housing as their needs change. The model of proactive behavioural support services continues to be developed within Midlothian.

Day Services for people with Learning Disabilities have been impacted by COVID-19. Many continued to operate although with reduced capacity as a result of physical distancing and infection control requirements.

8. PRIMARY CARE

In early weeks of the crisis demand on **GP Practices** was quadruple that in previous years. All practices managed to remain open during the COVID-19 response but some changes occurred. For example, there was a significant change with the move to total-telephone-triage. There was also an increase in the use of Near-Me.

There has been a considerable increase in the number of **Anticipatory Care Plans** written for vulnerable patients.

Work to implement the Primary Care Improvement Plan continues to be progressed including planning around CTACs (**Community Treatment and Care Centres**). A number of CTAC staff assisted in the Covid Vaccination programme during 2020-21.

The Thistle Foundation (**Wellbeing Service**) and **VOCA**L, third sector organisations, continue to work with the Primary Care Team in GP Practices to offer supported self-management and carer support. **Primary Care Mental Health Nurses** are now in all 12 GP Practices in Midlothian. **Physiotherapy**: There is now a single point of access for community services, so long Covid rehabilitation will be managed through this. Based on scoping work, the decision was made not to have a separate team managing long covid, instead the patients will be directed to an existing

team depending on the predominant symptoms the patient experiences. However, this will continue to be reviewed. Near-Me continues to be an option when appropriate. There are currently a number of services for long Covid available depending on the needs of the person.

9. TECHNOLOGY ENABLED CARE
Midlothian HSCP has ambitions for digital transformation that will support integration. Work continues to progress with the third sector and digital organisations to collaboratively design the ideal service model for people living with frailty.
Work has progressed to consult and engage with people living with frailty to support ambitions to see how and where technology could support people. Work also continued on connecting health and social care data to help us understand the needs of the population and the effectiveness of services. There was also progress in the development of infrastructure to allow us share data between health and social care services.

10. PUBLIC HEALTH
Midlothian HSCP remains committed to tackling inequalities and investing in preventative work. Work to progress the CPP sponsored whole-system **Type 2 Diabetes Prevention** Strategy was progressed in August after a delay due to COVID-19. Health assessments and other support to people in homeless accommodation continued during the pandemic.
Some programmes such as **Ageing Well and Midlothian Active Choices** (MAC) could not operate as planned due to Covid restrictions, however some activity has restarted in line with infection control guidelines. The **Welfare Rights** Service continued to provide effective support to people receiving a service from the HSCP. 239 people with cancer received support from the MacMillan Welfare Rights Advisor and the wider team during 2020-21 and generated £4,226,848 of income for Midlothian residents.

11. PHYSICAL DISABILITY
Work continues to reshape services currently provided at the Astley Ainslie Hospital. In addition work restarted in September to review the pathway for people recovering from a stroke. Funding to improve our support for people living with a neurological condition was awarded to the HSCP in March 2021.

12. DEVELOPING A LOCAL APPROACH TO ACUTE SERVICES
In Midlothian, despite considerable efforts to strengthen community services and prevention, progress in reducing hospital-based activity was inconsistent (with the exception of the pandemic period). The challenge is to design and implement more radical change at a faster pace to ensure that our hospital services are able to provide high quality, timeous treatment when community-based alternatives are neither appropriate nor viable. Midlothian HSCP is committed to working with partners to **reduce both attendance at A&E and unplanned admissions** whilst also **facilitating earlier discharge**.

This work is supported by community based service change such as plans around rehabilitation, diabetes prevention and the reduction of crises through, for example, improved identification and support around Frailty (involving the third sector). In addition, the Partnership recognises that supporting people to stay out of hospital or to be discharged sooner will often be dependent on the ability of family carers to provide support. This means continually strengthening support systems to unpaid carers.

The development of a **Home First** Model in Midlothian is progressing where people are supported out of hospital early, with a greater emphasis on supporting people at home through investment in care at home, early intervention and prevention.

13. CANCER
Midlothian HSCP commenced work on Improving the Cancer Journey (ICJ) during 2021. ICJ is a partnership between Macmillan and the four Lothian Health and Social Care Partnerships (HSCPs). Midlothian Council hosts the Programme on behalf of the four HSCPs.
The ICJ Programme aims to meet the non-clinical needs of people living with cancer; it will promote self-management and person-centred solutions in line with the policy direction set out by HSCPs and NHS Lothian. Progress was delayed but recruitment to key local posts was successfully concluded.

14. HEALTH AND HOMELESSNESS

Midlothian HSCP and Housing Services continue to work together to support people affected by homelessness. The Housing First programme commenced in July 2020 aiming to provide secure council tenancies per annum targeted at hard to reach and vulnerable homeless households. Many of these households have previously spent lengthy periods living in emergency accommodation. A specialist support provider will offer intensive support to people in order to sustain their accommodation. The Health Inclusion Team continued to offer on-site support to people living in the homeless hostels following risk assessments.

Challenges

COVID-19

The impact of the COVID-19 pandemic brought many challenges and much disruption to the Health and Social Pare Partnership, its partners and the communities it serves. There was increased anxiety and pressure on many service users, unpaid carers and staff. While challenges may have changed over 2020, they will continue into 2021. Covid will continue to influence how the HSCP delivers core services, works with partners and communities and develops the workforce. In addition the Partnership will adapt to deliver Covid related services, such as vaccination clinics.

A growing and ageing population

We are the second smallest Local Authority in mainland Scotland but the fastest growing. This will continue to pose challenges for health and social care services whilst also changing some local communities. As people live for longer many more people will be living at home with frailty and/or dementia and/or multiple health conditions. An increasing number of people live on their own, and for some this will bring a risk of isolation.

Higher rates of long-term conditions

Managing long-term conditions is one of the biggest challenges facing health care services worldwide, with 60% of all deaths attributable to them. Older people are more susceptible to developing long-term conditions; most over 65s have two or more conditions and most over 75s have three or more conditions. People living in areas of multiple deprivation are at particular risk with, for example, a much greater likelihood of early death from heart failure. They are also likely to develop 2 or more conditions 10-15 years earlier than people living in affluent areas.

Higher rates of mental health needs

Many mental health problems are preventable, and almost all are treatable, so people can either fully recover or manage their conditions successfully and live fulfilling healthy lives as far as possible. The incidence of mental health issues in Midlothian, while similar to the rest of Scotland, is a concern. Living in poverty increases the likelihood of mental health problems but also mental health problems can lead to greater social exclusion and higher levels of poverty. People who have life-long mental illness are likely to die 15-20 years prematurely because of physical ill-health.

Our services are under pressure

People place a high value on being able to access effective health services when they need them. People expect to receive high quality care services when these are needed whether as a result of age, disability, sex, gender or long term health conditions. Yet there are a number of pressures on our services.

Financial pressures

Financial pressures on public services are well documented. There is no doubt that we need to do things differently: the traditional approach to delivering health and care services is no longer financially sustainable.

Workforce pressures

The Covid-19 pandemic has and will continue to influence the demand for, and deployment of, the health and care workforce for the foreseeable future. Mass vaccination programmes and other large scale recruitment programmes related to COVID 19 have increased pressure on already stretched resource. How the workforce interacts with people has also changed with an increased use of digital or telephone appointments. The Scottish Government has requested that IJBs develop a 3 year Workforce Plan no later than 31st March 2022.

Unpaid carers

Unpaid carers fulfil significant, valuable and wide-ranging roles within Midlothian communities, helping to keep people with care and support needs within our communities. During the pandemic many people have become carers for the first time, or seen changes to their caring role, resulting in them providing significantly more care for their elderly, sick or disabled family, friends and neighbours. Through this period Community services supporting carers have continued to offer a range of support, including digitally, and by telephone, though services supporting the person they provide support to may have been reduced, e.g. respite and day services, resulting in an impact on carers. It is essential that we work to reduce the significant pressure and impact of caring that carers report feeling, by continuing to explore innovative options to enable support to be given to both carers and the cared-for, and for there to be opportunities for breaks from caring leading to caring being more sustainable. We are constantly looking for ways to offer respite and support to reduce the stress and impact of caring.

Acute hospitals

Acute hospitals are under huge pressure due to unsustainable demand and financial restrictions. We need to invest in community based and work with carers alternatives that will minimise avoidable and inappropriate admissions and facilitate earlier discharge. By treating people closer to home, or in their own home we can support admission avoidance and improve patient outcomes.

Community Safety and Justice H2

On 1 April 2020 the Midlothian Community Justice Outcomes Improvement Plan 2020-2023 (CJOIP) was published. This sets out an ambitious programme for the next three years with the aim of making Midlothian communities safer and helping to prevent and reduce offending. The plan brought together statutory partners, third sectors partners, service users with lived experience of the justice system, elected members and Board members. Rich data was collected that formed the basis for joint actions, resulting in a service user and partner led CJOIP that is fit for the purpose of serving those involved in or affected by the justice system in Midlothian.

Our Communication and Engagement Strategy, for 2020-23 was developed in Spring 2020 which outlines the partnerships approach towards National Outcome 1 (Communities improve their understanding and participation in community justice) along with an ambitious performance framework of seventeen consultation and engagement actions that will be taken forward over the next three years.

The 2019/20 financial year saw a new approach taken to the delivery of unpaid work in Midlothian. Following the conclusion of a service review in 2018/19 the team worked alongside community groups and organisations to undertake a variety of projects that have sought to promote clients' engagement in their communities whilst making reparation (payback) to those communities who experience the highest levels of crime and anti-social behaviour. This has been a significant change in the practice of the team where in the past groups would often work alone in isolated rural locations and organisations knew little about the support the team could provide. This new approach has supported communities with initiatives including food and clothes banks, developing a community garden and community hub, gardening and maintenance work at a project for young people, creating a memory garden for a project supporting people with dementia and helping support the set-up of Midlothian's first early years outdoor nursery. Developing and maintaining the close working relationships with community groups allowed the Justice team to support these organisations and communities as they started to deal with the impact of COVID-19 in March 2020. The unpaid work team supported food banks during the pandemic providing hot food to the most vulnerable in the community. They also assisted by delivering hot food and food parcels and in supplying the food banks with transporting donated food from supermarkets.

This holistic approach continues with the No 11 Allocations Service. This visionary forum brings together Health, Substance Misuse, Social Work, Housing, and third sector agencies to develop bespoke packages of care/support/treatment to individuals who use No 11 recovery hub. This innovative forum further evolved to include voluntary through care provision for those returning to Midlothian having served a custodial sentence. With a signed information sharing agreement with the Scottish Prison Service, Midlothian is now aware of individuals returning to our communities. The forum has some excellent examples of holistic support being offered to services users. In-reach work in the prisons and then transitioning support to the community is now coordinated, person-centred and solution focused; involving Midlothian specific services, resources and agencies. The forum has also been invaluable on planning for early release prisoners coming out of custody during the Covid-19 crisis.

We continue to provide a rich evidence base of local information on community justice with regular analysis and information gathering carried out to enhance the CJ data landscape in Midlothian. In H2 this included an evaluation of No. 11 St. Andrew's Street, a research profile of substance misuse among young people in Midlothian, analysis of suicides and attempted suicides in Midlothian, and a consultation with men on community payback orders to inform future service delivery. All of which will be used to plan and improve service delivery of CJ services across Midlothian.

MIDSAFE money that was left over from the disbanded Community Safety Team has been awarded to Play Midlothian to fund a series of Out2Play sessions with specifics around educating parents and family relationships.

Challenges

The **Covid-19** crisis has challenged all services including Justice Social Work and Community Justice. Adapting service delivery will be a demanding and ever changing task in the months that come. The limited face to face contact has impacted on both service users and staff. Use of technology has been at the forefront of service delivery to provide consistency of contact giving some predictability in the pandemic. As stated previously the fact that we already had a regular multi-agency meeting (the No.11 Allocations Service) has helped us to plan for the release of prisoners during the crisis. It is important to note that progress in any of the priority areas of our CJOIP will have to be underpinned by an effective exit route from the current COVID-19 crisis.

All Justice service users are being risk rated and the level of contact individuals are having with their allocated social worker is based on this assessment. In relation to Unpaid Work, no service users were able to complete their hours between March and September, and December and April. Although delivered with limited capacity, phone contact throughout the period of lockdown has resulted in sustained working relationships, oversight, risk management and the ability to provide advice and support. Community Justice Scotland (CJS) provided an options and discussion paper relating to community justice system changes for post-pandemic working, to reduce custodial outcomes and sustain reductions in custody. To help alleviate the pressure on JSW services, the Cabinet Secretary for Justice announced before Parliament in January 2021 regulations to reduce unpaid work or other activity requirements in existing CPOs by 35%, with the exception of orders imposed for domestic abuse, sexual offences or stalking, and will apply to existing CPOs.

It is projected that **unemployment** will rise by 10%-20% in Midlothian as a result of COVID-19. This will cause even more challenge to individuals with experience in the justice system obtaining employment post prison sentence or post Community Payback Order. An action agreed in our three-year CJIOIP is to implement the project Recruit with Conviction – a project that promotes safe, suitable and sustainable employment for people with convictions. Training is also taking place with locally based employers and awareness raising among Justice staff and those in the Justice system on the legislative changes within the Management of Offenders Act (Scotland) Act 2019 coming into force on 30 November 2020. An initial employer training event was held late 2020 and another planned for summer 2021 once employers have transitioned back to normal trading. In house training for LLL, Justice and Peer Support in May 2021 will ensure the legislative changes are known over both voluntary and statutory sectors. The overall aim remaining that this project will support access to employment for the 20% of adults who have criminal convictions.

GIRFEC H2

Mental Health - Community Mental Health Supports funding
Children and young people in Midlothian are to benefit again in 2021 from extra Scottish Government funding to support their mental health and wellbeing. The Midlothian Children and Young People's Mental Health Strategic Planning Group - a multi-agency group with members from the council, health and the third sector – is overseeing the funding and successfully awarded a further £197,000 in March 2021, to add to the £270,000 allocated in 2020, all of it going to support local children and young people through the provision of services and activities that will include: therapeutic family support, family counselling, anxiety management, supported play and personalised support for those with very high needs.

Mental Health - Midlothian Early Action Partnership
When the Midlothian Early Action Partnership (MEAP) activities resumed in June 2020, we adapted our approach to take into account the changed Midlothian context. More of our work was progressed using online methods and we have been more creative with our engagement techniques. The systems mapping exercise on mental health supports for children, young people and young adults commenced in August 2020 and will conclude in April 2021.

Other opportunities arose, as conversations led to a Test of Change commencing in September 2020, involving services and organisations across education, third sector, health and council, who have developed a systemic new way of working for the Penicuik area. This includes testing a new single referral and allocations pathway, offering training to teachers, support for staff, parents and young people as well as increasing therapeutic services to children and young people.

Vulnerable children and Young People's Subgroup
The following outlines the actions of the Getting it Right for Every Midlothian Child, Vulnerable Children and Young People's subgroup during 2020/21. The purpose of the subgroup is to ensure that the agreed actions and priorities are monitored and are on target. This is achieved through a series of lead officers and working groups that regularly meet to report on progress and agree new priorities when appropriate.

We need to acknowledge the impact of the Covid-19 pandemic which has been unprecedented in modern times and has brought many challenges. As a result of the pandemic some of the subgroup actions were delayed or amended to reflect Covid-19 guidelines and protocols. Initially, partners were concerned that a consequence of lockdown and having to limit service delivery would mean children, young people and their families would be exposed to increased vulnerabilities and adversity. The subgroup worked tirelessly to mitigate against this by re-shaping service delivery and responses quickly and effectively. Examples of this was the use of digital technology and linking with partners and/ or educational programmes to agree who could offer local support particularly in the work with young carers, the youth justice agenda, the 'positive approaches to risk' workshops, relationship, sexual health and parenthood and the wider corporate parenting actions.

Corporate Parenting Strategy and Champions Board
The Independent Care Review undertook a root and branch review of the care system in Scotland. This included hearing from over 5,500 care experienced infants, children, young people, adults and members of the paid and unpaid workforce in Scotland's 'care system'. Midlothian's young champions were heavily involved in the process and contributed towards the seven publications outlined below which set their vision for what needed to change.

1. The Promise and,
2. Pinky Promise for younger readers
3. The Plan

4. The Money, and,
5. Follow the Money
6. The Rules
7. Thank you

 The Promise is Scotland's vehicle for achieving transformational change in the care system and making sure our most vulnerable children feel loved and have the childhood they deserve. The Promise has been a key driver for Midlothian's Champions Board during 2020 and involved two Corporate Parenting events which were dedicated to looking at the detail of the publications and its implication for Midlothian's most vulnerable children, young people and their families. These events included young people and a wide representation of corporate parents from across the partnership; NHS Lothian, Children's Services, Police Scotland, Housing, Communities and Lifelong Learning, Who Cares? Scotland, Education, Edinburgh College, Skills Development Scotland, Elected Members and senior management within Midlothian Council. The Promise will remain a priority going forward and the current Corporate Parenting Plan and Strategy is under review to ensure that any relevant actions are reflected. Future planning will ensure The Promise will remain at the forefront of any future planning to enable all partners and agencies to discuss and consider how to influence change within their respective roles or agencies to improve support to all children and young people who experience the care system.

Following adherence to Covid-19 guidelines, social distancing, risk assessment and cleaning procedures, the young champions were able to resume their physical meetings in October 2020. In addition to delivering their core groups, the young champions have been involved in consultation with others that include, Children's Hearing Scotland, Youth Justice and The Promise. The young champions have been working with 'Move On Scotland' to develop and embed peer mentoring and we are pleased to announce that two local young people have successfully completed the training. Work is ongoing to drive the champions work across schools and build on the success of the groups already established in two of our secondary school settings.

The young champions continue to influence and reshape policy for all care experience young people by providing feedback and the Champions Board continue to listen and be influenced by our care experienced young people and this will remain as key action within the plan. The Mind of My Own app continues to be a crucial tool in providing a voice to local children and young people for their own individual assessments and care plans. Its usage has reduced so further training is being offered and delivered to social work teams, foster carers, school teams, residential settings and young people in order to improve how this app is being used.

National House Project
The National House Project has worked with nine care experienced young people aged between 16 -19 in cohort 1 with cohort 2 planned to commence in August 2021 and cohort 3 in August 2022. Four young people from cohort 1 were already living in their own (temporary) accommodation. Midlothian Council has committed to provide six permanent homes which may include housing stock from its partner providers.

Connecting Scotland
The Midlothian partnership have been successful in securing national funds to ensure that our vulnerable children, young people and care leavers have the digital skills and tools to participate in any future training or job markets. This will be a key focus for 2021/22.

Positive Approaches to Risk
Midlothian Young People's Advice Service (MYPAS) was commissioned by Children's Services to continue to increase the community's awareness of the Positive Approaches to Risk Taking document by;

• Providing one official launch

- Four awareness raising sessions, one for each school cluster in Midlothian
- Delivery of issue focused workshops
- Evaluate and report to the GIRFEMC Board with future recommendations

Despite the Covid-19 challenges, the above activity has been achieved and an evaluation report has been prepared for the GIRFEMC Board. The report and its recommendations will be inform any future activity during 2021/22.

Permanence and Care Excellence (PACE)
Our partnership with Scottish Government, and the Centre of Excellence for Looked after Children (CELCIS) has now ended. However, in keeping with our journey of continuous improvement we have agreed to review our current permanence policy and timescales for achieving a secure, stable home for a child as well as consider the impact of the Independent Care Review recommendations, in particular the 'Promise' which is intended to deliver transformational change for care experienced children going forward.

Youth Justice Strategy
The Midlothian Youth Justice Strategy was signed off by the GIRFEC board on the 17th September 2020 and while the subgroup commits to identify one year priorities many of the youth justice actions are based over a 3-year period. Any proposed changes to the plan will take account of:

- The Promises from the Care Review
- The findings from Claire Lightowler's Rights Respecting paper, published earlier this year
- The soon to be published Youth Justice Standards along with views from young people, stakeholders and partners.

The Midlothian partnership is committed to the above and has created a youth justice strategy which is flexible and can incorporate any new promises from the Scottish Government. Currently the working groups are working on two new pilot schemes to target anti-social behaviour in the local communities. These are:

1. CRIB bus to be situated in Lasswade High School car park. The bus will provide support to young people who are not engaging in school and have been part of or are at risk of taking part in anti-social behaviour. The aim will be for the young people to attend activities in the bus which is fully staffed.

2. A partnership workshop to engage young people who have been, or are at risk of becoming involved in anti-social behaviour. The workshop will provide mechanics and car part tasks and activities around car safety supported by police Scotland road safety officers.

Anti-social behaviour is believed to be more problematic following the return to full time education in the coming months. There is a direct link to non-school attendance and poor outcomes including youth offences so it is particularly important the partnership is engaged in this on-going piece of work. SCRA are about to publish their data which should highlight areas of success, any future challenges and future actions for the youth justice working group.

Relationships, Sexual Health and Parenthood (Teenage Pregnancy)

Prior to Covid19, Midlothian Council and NHS Lothian worked together to deliver a workshop on teenage pregnancy and prevention. The plan was to examine teenage pregnancy in Midlothian using existing data and trends and to identify gaps and agree actions to address this via the partnership. However, this work stream was postponed because of the pandemic and the need to second NHS Lothian staff to the frontline. Instead, the working group took the opportunity to consider other areas in which the partnership could be effective in mitigating some of the other Covid-19 challenges that were identified. Namely, the closure of sexual health clinics, sexual health staff seconded to address Covid-19 demands, unable to access young people through schools, impact of lockdown on vulnerable young people. The impact was that,

1. Croft St YPs sexual health clinic re-opened in Aug 2020 – the only one at that point open across Lothian (outwith the main centre at Chalmers) – have managed to keep this open throughout lockdown (all of them!) ensuring clinical sexual health services for YP are available locally, as well as access to c:card
2. Online training for RSHP (primary school) – primary school teachers took part in 'train the trainers' RSHP training online, evaluated very positively
3. Condoms by post – uptake of this service in Midlothian high compared to other areas
4. Workers were able to support MYPAS in roll out of Positive risk-taking behaviour work – and will continue to support as the workshops progress
5. The working groups was able to begin finalising the guidance for schools on supporting young parents to remain in education (still to be launched).

Young Carers

Covid-19 restrictions has meant accessing or supporting young carers in education and/or out of school has been challenging. Mainly because the initiatives to increase social groups and group work were postponed due to lockdown measures. As an alternative, individual workers developed 1-2-1 relationships with young carers and maintained these throughout lockdown. Other examples of activity include the provision of a range of supports to respond to emergency referrals during lockdown or in some circumstances supports due to hospitalisation. These young carers were offered a school hub place or grant monies to access other activities or support families. Other successful schemes included the lunchtime 'drop in' at two secondary schools which provided young carers with a safe space and an opportunity to raise questions or concerns so that school champions and young carers staff could intervene as appropriate. The young carers 'trialled' three Winter Parties using small numbers across different ages groups to gauge whether there was an appetite to engage in social events with peers or other young carers across Midlothian. These proved highly successful and the plan is to develop regular social groups. 32 young carers were supported over the Christmas period and received gifts through the Cask4Kids Mission Christmas appeal. The external funding sourced from the Carers Alliance, in place of the national young carers gathering, was used to fund the Winter Parties and facilitate activities for some of the 1-2-1 sessions a variety of informal awards. We have since secured another pot of funding from Creative Scotland from April 2021 for 1 year, to support the young carers to creatively explore what is means to be a young carer in Midlothian, and to tell their stories. These projects will be used in wider publicity and awareness raising across the county. We also supported seven young carers to apply for a Wee Breaks Young Carers Grant. This has enabled more young cares than before to experience short break opportunities for activities during the Pandemic.

Children with additional and Enduring Needs

A number of actions were proposed as part of our joint approach to working with children and young people with additional support needs. Some of these needed to be postponed during 2020/21 because we were highly aware of the impact of the Covid-219 pandemic on this population of vulnerable children and young people. However, the pandemic did provide an opportunity for services to be less bureaucratic and be more flexible in the use and distribution of Self Directed Support packages. As part of the Children and Families early intervention and prevention approach within the current Covid-19 climate, families who are eligible for Self Directed Support have been provided with a 3-months allocation of funds to be used more creative. This small but significant change has meant there has been a reduction in families petitioning services because of financial crisis. Families tell us they feel more empowered and in control of the child's care package.

Who Cares? Scotland

The organisation continue to provide advocacy and participation as well as be involved in the work of the Young Champions (Champs Group) and will prove regular reports as agreed in the action plan. Work was undertaken to strengthen the existing contractual arrangements with a view to reaching more care experienced children and young people.

Feedback form Children and Families

Though we have lots of examples of children and young people providing feedback and thus influencing the shape of services, this is an area we would like to improve on. The United Nation Convention on the Right of the Child (UNCRC) will provide an excellent opportunity to take a Council wide strategic approach as w plan for the future.

Them Subgroup are currently developing new 2021/22 actions based on the information contained in this report and the external drivers that can often inform and influence the activity. Notwithstanding the need to progress any Covid-19 recovery plan, the subgroup have already agreed to be more robust regards the use of data to inform planning going forward.

Challenges

The Getting it Right for Every Child Board faced many challenges and pressures as a result of the COVID-19 pandemic. Key challenge going forward are the longer-term impact of Covid-19 on poverty, mental health, economic viability and the partnership workforce. These strands will dominate a lot of the work of the subgroups going forward as they begin to assess how to respond and manage at both an individual, community and strategic level in keeping with the national and local drivers.

Mental health - Midlothian Early Action Partnership

The Midlothian Early Action Partnership had to adapt plans in the context of a pandemic. Engagement with children, young people, young adults and families became significantly more challenging. More of our work was progressed using online methods and some of our plans had to be stopped, such as creating an ambassador programme for young people and establishing the youth work exchange network, for adults supporting children and young people.

The Midlothian Sure Start (MSS) Test of Change, which focuses on embedding trauma-informed practice within primary schools, was also severely impacted by the pandemic. Much of this work had to be adapted or paused in response to COVID-19. New ways to support and engage schools and children had to be found.

IOM H2

Partners have been working closely together (CLL, MVA, British Red Cross and Community Councils/resilience groups) to provide support to communities through assisting residents with prescription delivery, access to food and assistance with shopping. Third sector organisations were at the forefront of a community based response to addressing social isolation arising from the Pandemic. The CLL team have been a key partner in the delivery of the Midlothian Food and Key Essential Fund. Over £750k of vouchers and fuel support has been delivered to over 4,400 households. Dalkeith CAB have worked closely with Midlothian Council in the delivery of the Food and Key Essential Fund offering advice, support and follow up calls where requested for those needing support with managing finances and coping with the financial impacts of the Pandemic.

All partners have adapted their services to provide online engagement, support and delivery and CLLE have continued with some face to face activity for vulnerable young people, adults and families and those requiring employability, literacy, numeracy and ESOL support.

There has been a growth in Scottish Government funding for employability programmes as a result of Covid. Significant funding (over £1.5 million) has been secured by CLLE for programmes including: No One Left Behind, Modern Apprenticeships, Foundation Apprenticeships, third sector Kickstart partnership, Parental Employability Support Fund and the Young Persons Guarantee. Economic Development and CLLE are working closely together to respond to PACE funding to support those facing redundancy,

Partners developed and delivered a multi-agency co-ordinated response to the negative impacts of the Covid 19 Pandemic on youth participation levels and general unemployment levels, through the Employability and Learning Midlothian group and Action Plan. This work led to improved information sharing amongst partner agencies regarding new training and employment opportunities, a new on-line 'one stop shop' **https://locateinmidlothian.co.uk/** that provided support to businesses and to individuals seeking work, and promoting information and advice about benefits and other forms of financial support. The Employability Directory has been reviewed and is available online.

School Leaver Destination figures published in Feb 2021 were encouraging at 94.7%, ninth across all local authorities in Scotland despite challenging circumstances.

All IOM Partners developed new on-line / digital delivery mechanisms to sustain service delivery to thousands of Midlothian citizens.

Agreement was reached on a new Third Sector Compact, setting out values for partnership working between the Council and the Third Sector. Work has begun on a new Community Learning and Development Plan for Midlothian 2021-24.

Challenges

The IOM plan for 2020/21 had to be amended mid cycle to recognise that the ambitious plan in place had to be reviewed in recognition of the reduction in services across the partnership and the impact of Covid. The new agreed plan for 2021/22 is a Covid recovery plan.

We have now entered into the strategic planning phase for the new CLD partnership plan for 2021-24 and this will be consulted on and presented to council and the Community Planning Partnership in September. The new Plan will be challenging to produce in order to ensure that CLD activity across the partnership is adequate and efficient to meet our statutory duties under the Education Act (1980) and to identify and address unmet needs. It will also address existing and emerging staff development needs across the CLD sector with actions to respond to these

challenges. The first year of the action plan will focus on Covid recovery, in line with the IOM Plan, balancing the core priorities of developing skills for learning life and work, reducing poverty and health inequalities and focusing on the mental health and wellbeing of our communities. In the current climate, consultation will be particularly challenging especially with those who are not currently engaged in services but a range of online tools and contacts will be used by partners..

The rate of demographic growth in Midlothian will present challenges as we move forward and the IOM are focusing on key research and data to inform planning and progress.

The need to address digital inequalities has been recognised as a key priority both in the IOM and CLD Plan, and this has been discussed by the Community Planning Working Group to ensure that all CP partners and sub groups have actions around digital inclusion.

Finding solutions to delivering community learning and development activities, including youth work, in communities, specifically for vulnerable citizens, in light of community centre, library and other community facility access restrictions. Outdoor spaces will be used as much as possible and online and blended learning activities will continue.

Coordinating the new range of government funded employability and training programmes to be delivered in Midlothian, in order to avoid duplication and ensure maximum positive impact for Midlothian communities and citizens. This has been partly addressed through the emergence of the Covid Employability sub group and action plan but will require monitoring and development as the impacts of the Pandemic become clearer.

Ensuring Child Poverty Plan gets strategic buy in across the Council and CPP partners and all action to address poverty is co-ordinated and reported. A report is being prepared for Council recommending the allocation of a senior officer to lead on poverty, including child poverty, across the Council and ensure that all council services are actively tackling the poverty agenda.

Sustainable Growth H2

Midlothian Local Biodiversity Action Plan
The implementation continues of the Midlothian Local Biodiversity Action Plan that was adopted by the Council in February 2019. Council Planning Officers have been made aware of the document's actions and priorities and the document is a material consideration in their assessment of development proposals. A review was undertaken in February 2021 to assess and monitor progress with actions.

Penicuik Heritage Regeneration Project– Townscape Heritage (TH) and Conservation Area Regeneration Scheme (CARS)
Road resurfacing in Penicuik High Street and public realm works in the Penicuik TH/CARS project area finished in spring 2019. Subject to resource availability further public realm work will be undertaken during the remainder of the Penicuik TH/CARS which runs to 2023. The Project and the project archivist is engaging with the local community and schools on Penicuik's history and heritage. A training provider was appointed and events took place with one secondary school, but the other events were postponed due to COVID-19. The work of story tellers appointed to work with local schools and community began on line, including Burns stories for Burns Night. The heritage online based walking tours in Penicuik town centre, created last year, are still available. The project to enhance and refurbishment Penicuik Town Hall stonework and roof, install solar panels and a new heating system and publicly available Wi-Fi internet access in the building begin in September 2020 and will complete in July 2021. The funding was secured from the Scottish Government Town Centre Capital Fund, the National Heritage Lottery Fund and Historic Environment Scotland. Grant uptake for building grant restoration projects has increased. The roof and stone works on the projects only category A listed building, the historic Pilkington buildings on Bridge Street, will complete in early summer 2021.

Active Travel
The Council's Active Strategy was adopted in summer 2019 and walking and cycling maps have been updated and available on the Council's website. The funding for the IBike programme is changed. Active Travel promotion will continue, but be funded by the Scottish Government's funding programme "Smarter Choices". This programme is rolling out in Midlothian schools. The Council is pursuing various new active travel funding sources. Notably an electric bike trial project to connect Eskbank train station and Dalkeith town centre will be trialled.

Midlothian Council Climate Change Strategy
The Council approved its Climate Change Strategy in September 2020. This work has involved an audit of work being undertaken in the Council relating to sustainability and climate change and identification of actions. The Midlothian Community Planning Climate Emergency Group has been formed.

Work had initially focused in 2019/2020 on the Council's work on climate change, rather than finding out what climate change action is being undertaken by other community planning partners. Work commenced on establishing a Climate Emergency CPP group to help deliver Net Zero in Midlothian by 2030, in line with Midlothian Council's December 2019 Climate Emergency declaration. The Climate Emergency Group has just begun its work and will replace the Environment component of the Sustainable Development theme. The Group has identified climate emergency actions for 2021/2022.

Housing

Homelessness

Continued progress has been made in respect of the 4 strategic outcomes set out in Midlothian's Rapid Rehousing Transition Plan (RRTP) 2020 – 2024:

- Ending use of Bed and breakfast accommodation was achieved by December 2020.

- The supply of permanent accommodation for homeless households continues to increase.
- Homeless households with support needs are supported to access and maintain permanent accommodation.
- Housing options and support are in place to prevent homelessness.

Examples of work to achieve these strategic outcomes are detailed below for information.

The Revised Housing Allocation Policy agreed by Council in December 2019 has been implemented. This places a renewed focus on addressing homelessness, with a significant increase in the proportion of lets to homeless and increased flexibility in the properties being allocated which will reduce waiting times.

Additional temporary accommodation services are progressing which will reduce reliance and cost of using bed and breakfast accommodation. The Mayfield Family Service became operational during April. This service delivers eight, fully furnished, self-contained flats to be used as emergency accommodation for households with either children or a pregnant person as a member of the household. This service provides an excellent standard of accommodation.

The Housing First programme will commence in July providing 20 secure council tenancies per annum targeted at hard to reach and vulnerable homeless households. Many of these households have previously spent lengthy periods living in emergency accommodation. A tender process was completed to appoint a specialist support provider as these household's will require intensive support in order to sustain their accommodation.

A service provider was appointed to manage the supported accommodation services and deliver a tenancy support service on 1st April 2020.

The use of shared temporary accommodation as an alternative to bed and breakfast will be available to single homeless applicants and couples. Each household will be provided with their own bedroom, while sharing kitchen, bathroom and living room areas. The accommodation provided will be more affordable for households who are in employment. For those not in employment access to education, training and employment opportunities will also be improved. A 0.5 FTE Temporary Accommodation Officer has been recruited to manage up to 20 properties per annum for a fixed term period to 2023/24. These will provide a more satisfactory temporary accommodation option for up to 40 households per annum. The first of these properties to be available by July 2020.

The National House Project, a collaborative service with Children's Services was established. This provides direct access to secure tenancies for looked after young people and thus preventing homelessness in accordance with the Housing theme, Corporate Parent Strategy.

Midlothian Council has a long-standing nominations agreement with East and Midlothian Women's Aid. The purpose of this agreement is to enable households fleeing domestic abuse to access secure accommodation quickly, without the need to present for homeless assistance. Removing the need for potentially lengthy placements in temporary accommodation. In previous years this agreement resulted in two households being housed. This agreement was recently revised. As a result of this review a minimum of four nominations will be made by East and Midlothian Women's Aid.

Meeting Housing Need
The council's Strategic Housing Investment Programme (SHIP) was submitted to the Scottish Government in December 2020. To address the need for affordable housing, the SHIP details potential sites for 2,602 new affordable homes to be built during 2021-26.

New council housing developments were completed at Loanhead Charpentier Avenue and Clerk Street, Loanhead, Kirkhill, Penicuik and Danderhall. The allocations were prioritised to local residents via Local Lettings Initiatives.

140 new affordable homes were delivered during 2019/20. 538 new homes are currently under construction across 15 sites.

460 permanent homes were provided to housing list applicants via the common housing register. 96% of new tenancies were sustained.

The Local Housing Strategy (LHS) 2021-26 has been completed subject to Councillor approval at May 2021 Council. The LHS is at the heart of arrangements for housing and planning through its links with Development Plans and its strategic role in directing investment in housing and housing related services locally. It sets out a strategic vision for the delivery of housing and related services and the outcomes that it will seek to achieve.

Governance
The annual Assurance Statement was submitted to Scottish Housing Regulator demonstrating **Economic Recovery and Growth Covid Response:** All partners moved to deliver their services digitally and we found this improved our performance particularly in terms of client support as we had more client facing time than we had under the old model of face to face meetings at the business premises.

The Economic Development team has been processing grants throughout 2020/21, those that were not connected to non-domestic rates accounts, with support from teams across the Council. A supportive role was provided for our colleagues in Edinburgh processing the non-domestic rates grants, acting as a liaison between CEC and our local businesses. We have also supported some businesses to appeal a declined decision.

The Business Gateway service had continued delivery, albeit the requirement for the service changed from start-up and growth to business survival, this has led to a less directive and more coaching style to be deployed by the team when interacting with clients developing new skills in the team.

Locate in Midlothian: Website and social channels launched in June 2020, the website became instrumental during the Pandemic as we quickly created a jobs board and expanded that to include information on partner provision of employability support. The website and socials have been used to communicate good news stories and ensure that grants information reached as many of our local audience as possible.

We worked with local business and our local communities to celebrate St Andrew's Day promoting the Kindness Midlothian hashtag, participants each contributed a short video which was then released on Locate in Midlothian website and across all socials, our reach alone was just shy of £20k, and we had positive feedback from local businesses seeing a spike in website visitors as the video was shared globally.

Economic Development Strategy: An Addendum, Economic Renewal Strategy to The Council's Strategy for Growth 2020-25 was published in June 2020 in response to Covid19. The Strategy aims to mitigate the adverse economic impact on the local economy from Covid-19, protecting jobs and aiding business recovery utilising a place based partnership approach that can maximise on the opportunities developing from the pandemic.

Local Procurement Strategy: Refreshed strategy approved January 2021, Procurement and Economic development working together to ensure a joined up approach to increasing the local supplier base for access to our procurement opportunities and those of neighbouring authorities.

Midlothian Council Small Business Fund (MCSBF): £76K withdrawn from Business Loan Scotland, this will be directed to the new MCSBF for a £2k grant for growth and launch projects.

Midlothian Carbon Charter: Launched during Scotland's Climate Week in September 2020, due to the pandemic we have not been in a position to progress this with our local businesses but we expect to see take up during 2021/22 as the Business Gateway service offers energy audits via our partners at ZWS to every business we engage with.

Town centre Capital Fund: A total of seven applications were approved totalling awards of £910,000. 2 projects are complete, 3 are in the final administration phase and the Penicuik Town Hall project, the largest grant awardee has completed the installation of publicly accessible WIFI in the Town Hall. The major works will commence on site in October 2020 and will be completed prior to the September 2021 deadline.

On 21st September 2020 Midlothian Council accepted a further £331,000 from the Scottish Government £30 Million capital contribution into regeneration in 2020/21, part of the £230 million economic recovery stimulus package. Teams across the Council got involved in identifying projects for consideration and four projects are now in progress.

National PACE programme: Funding awarded to Midlothian Council to provide local one to one support to those at risk of, or having been made, redundant. This has been allocated to the Economic Development team and recruitment for 2 posts is in progress. The post holders will work closely with CLL employability team and also the Business Gateway advisers for self-employed support.

MBTAG (Midlothian & Borders Tourism Action Group): The South of Scotland Destination Alliance (SSDA) has now launched, this tourism intermediary will support the Scottish Borders & Dumfries and Galloway. The LEADER funded MBTAG closed in November 2020 with MBTAG's assets have been divided between SSDA & Midlothian Tourism Forum (MTF).

Midlothian Council supported MTF to recruit a freelancer to develop and coordinate activities and increase membership, the economic development team have supported the Committee as they re-establish the forum as the tourism intermediary for Midlothian, creating a joined up strategic approach between partners to support the industry as they recover from the impacts of the Pandemic.

Tyne Esk LEADER: Programme delayed due to Covid, capital projects set back because contractors could not access during Lockdown, revenue projects because staff could not get out and facilitate actions.

- Programme extended from end date of 31/3/21 to 31/12/21 with possible extension to 31/3/22.
- Successful completion of 12 of the 14 outstanding Tyne Esk LEADER projects
- Completion of monitoring & evaluation of Tyne Esk LEADER 2014-20 Programme and report produced.
- Report on rural recovery mechanisms for Tyne Esk LEADER following Covid & Brexit produced.

Monies made available from SG for Covid recovery spend with existing applicants. To be committed 21/22

Challenges

Midlothian Local Biodiversity Action Plan
The challenge will now be for partners to work together and commit to delivering actions of the local diversity plan. Communication, awareness of partners work and partnership working will be used to help deliver the document's identified actions.

Penicuik Heritage Regeneration Project
Getting building owners and shop owners/tenants interested in taking up grants for enhancement and improvement works does continue to be hard and challenging, particularly due to COVID 19, but also from preceding economic climate. A numbers of proposals are though being pursued and taken forward. No shop front enhancement proposals are, however, being taken forward. The project is very much aware of this and liaising with grant funders about attracting owners/tenants to enhance their shop fronts. The project has increasing grant rates for both building restoration and shop front projects to incentivise building owners to come forward to take up grants. The project is seeking to work with building owners to assist with the grant application process.

Active Travel
Work on the replacement of the Midlothian Local Transport Strategy is not going forward due to insufficient resource availability. The funding for the IBike programme is changed. Active Travel promotion will continue, but be funded by the Scottish Government's funding programme "Smarter Choices". This highlights the importance of funding in being able to undertake active travel work. Leaflets had been produced for residents moving into new housing at North West Penicuik to promote the town centre. This was an effort to help create good active travel habits in residents when moving into an area by promoting and highlighting local routes and bus routes. Funding and staffing resource has not been found for further leafleting across Midlothian. The Council continues to implement active projects and make funding bids for further projects in Midlothian. The importance of local active travel has been massively highlighted through the Covid-19 pandemic. Active travel is central to the success of implementation of The Scottish Government's 20 minute neighbourhood initiative.

Climate Change
Delivery of a wide range of Climate Emergency actions across all areas, to meet the Midlothian 2030 Net Zero carbon emissions is the biggest challenge. Achieving this will require bold decisions and commitment, both financially and from people, across communities and organisations.

Housing
There continues to be a significant demand placed on homeless and temporary accommodation services. The key challenge for 2021 will be the anticipated increase in homelessness as the financial and legal measures put in place to protect households during the Covid pandemic are withdrawn requiring a comprehensive preventative approach as set out in the Council's Rapid Rehousing Transition Plan and supplementary Prevention Strategy.

Economic Recovery and Growth
Tyne Esk Leader: Applicant claims slowed almost to a halt in Q2 & Q3 due to Covid – attention rerouted to safeguarding/diversification. This meant most of the year's claims came in Q4 applying considerable stress to staff who were dealing with Programme closure as well. This eased early January 2021 with word of the Programme extension to 31/3/21.

Covid Response: Increased workload on team due to the need to process grants throughout the year and facilitate enquiries for those applications being managed by CEC on Midlothian's behalf, further challenged due to long periods of staff absence however we were fortunate to be in receipt of support from other council teams to help with the grant processing.

Increased level of FOI's and complaints from businesses that disagreed with the eligibility criteria set by the Scottish Government, this often led to duplication due to complaint being repeated through different channels, eg senior management, local councillors and MSP's. The guidance was to refer these types of complaints directly to SG but inevitably they came back as dissatisfied with response if received, wider council support to respond supported the team.

A FULL REPLACEMENT PAPER SHALL BE PROVIDED PRIOR TO COUNCIL TO REPORT TO MEMBERS THE MOST CURRENT CIRCUMSTANCES IN THE PURPOSE OF THIS REPORT.

Potential Ukrainian Refugee Relocation

Report by Kevin Anderson, Executive Director Place

Report for Decision

1   Recommendations

Council is recommended to note the content of this report and consider Midlothian Council's participation in any potential UK Government Ukrainian Refugee relocation scheme and the prospective Scottish Government arrangements.

If it is agreed to participate, delegated authority is also requested to permit officers to manage the necessary requirements following this final Council meeting of the current term to;

i.   Advise the UK Government Home Office of the Council's willingness to participate in any scheme, and
ii. Advise the Scottish Government of the Council's willingness to participate in any scheme
iii. Approve delegated authority for officers to undertake to relocate households into Midlothian.

2   Report purpose/Summary

People coming to the UK under any potential scheme, may arrive either as a whole family unit or with the lead person arriving first and their dependants joining them at a later point, depending on their individual circumstances.

At this time, it is expected households will predominantly consist of women and children as males aged between 18 - 60 years are being retained in-country to defend Ukraine.

Date: 17 March 2022
Report Contact:
Name: Kevin Anderson, Executive Director Place
Email: kevin.anderson@midlothian.gov.uk

3   Background

3.1   An escalation of the situation and military offensive in Ukraine in February 2022 has turned an already volatile situation into a full-scale emergency. People are leaving their homes to try to find safety elsewhere within the country and are crossing borders into neighbouring countries. The situation remains extremely dangerous for anyone inside Ukraine.

3.2   In light of the rapidly evolving humanitarian crisis in Ukraine, UNHCR (the UN Refugee Agency) is working with authorities, other UN agencies, internally displaced community groups and partners to provide humanitarian assistance. Over 3 million refugees are estimated to have fled to neighbouring countries and that number is rising.

4. Support and the Care for People Group

5.1 The Care for People Group was established to comply with the Council's responsibilities under the Civil Contingencies Act 2004. The group specifically support Scottish Government guidance, "Preparing Scotland, Care of People Affected by Emergencies". This multi-agency group includes representatives from NHS Lothian, Police Scotland, utilities, voluntary sector and faith groups..

5.2 Clearly, the traumatic experiences in the loss of homes, livelihoods, communities and families will have an impact on individuals and result in considerable anxiety, concern and emotional distress. Having recognised the continued uncertainty that refugees are experiencing and the inevitable disruption that has occurred in their lives, the Care for People Group will be focusing on the physical and mental wellbeing of those potential resettlement refugees as residents of Midlothian.

5.3 Support requirements will include access to cultural, dietary, religious facilities as well as translation and interpretation services. Some households will be particularly vulnerable and require particular additional support through the relocation process.

5.4 Integration into Midlothian communities will involve school provision requests, registering with doctors, obtaining National Insurance numbers and biometrics to be eligible to access services and benefits.

Report Implications (Resource, Digital and Risk)

Multi-agency Public Protection Arrangements (MAPPA) Annual Report.

Report by Nick Clater, Head of Adult and Social Care

Report for Information

1   Recommendations

Council is recommended to note the report.

2   Purpose of Report/Executive Summary

This is a cover report for the MAPPA Annual Report for 2020/2021 which was published on 5th November 2021.

Date   10th March 2022

Report Contact: Nick Clater (Head of Adult and Social Care)
0131-271-3402

nick.clater@midlothian.gov.uk

3   Background/Main Body of Report

3.1   Multi-agency Public Protection Arrangements (MAPPA) was established in Scotland in 2007 to co-ordinate the response of a range of agencies in the management of registered sex offenders and restricted patients. In March 2016 MAPPA was extended to include violent offenders assessed as posing a risk of serious harm. A Joint Thematic Review took place in 2015 and was carried out jointly by the Care Inspectorate and HMICS. The Joint Thematic Review found that MAPPA is well established across Scotland and that robust arrangements are in place to manage registered sex offenders with good information sharing and partnership working.

3.2   The MAPPA Annual Report for 2020/2021 showed no significant changes from the previous year. 899 registered sex offenders were managed in Lothian and Borders over this period with 819 being managed at Level 1, 79 at level 2 and 1 at Level 3.

3.3   21 offenders were managed in Lothian and Borders under the Category 3 MAPPA extension in 2020/2021, 18 at Level 2 and 3 at Level 3.

3.4   In Midlothian there were 54 registered sex offenders (RSOs) managed by MAPPA during 2020/2021. Similar to the overall picture in Lothian and Borders the vast majority were managed at Level 1 and no RSO was managed at Level 3 in Midlothian during this period.

3.5   Of the Midlothian 54 RSOs managed in Midlothian under MAPPA, 2 were charged with a further sexual offence and 6 were charged with non-sexual offences. A further 2 were charged with registration offences. In relation to the non-sexual charges, they related to a range of relatively minor behaviours.

3.6   Of the RSOs in the community, between 20 and 22, depending on the quarter, were on statutory supervision by Justice social work. The remainder were managed by Police Scotland.

3.7   In the most recently published reconviction statistics - Criminal Proceedings in Midlothian 2019-20, sexual offences are the crime type associated with the lowest rate of reconviction of all crimes.

3.8   Despite the challenges of the pandemic, Edinburgh, the Lothians and Scottish Borders Strategic oversight Group commissioned three online training sessions during this period to deliver to police officers and justice social workers across the five Local Authorities to enhance the understanding of risk formulation.

3.9   A further four online sessions were offered to justice social workers by Police colleagues around the inspection of offender's electronic devices.

3.10 In October 2020, training was delivered to Detective Inspectors and Detective Sergeants by a Consultant Clinical Psychologist from NHS Lothian to review practice and share relative learning.

4 Report Implications (Resource, Digital and Risk)

4.1 Resource

There are no resource implications in this report.

4.2 Digital

There are no digital implications in this report.

4.3 Risk

The MAPPA process makes a significant contribution to the management of risk and the protection of the public in Midlothian.

4.4 Ensuring Equalities (if required a separate IIA must be completed)

Not applicable.

4.4 Additional Report Implications (See Appendix A)

See Appendix A

Appendices

Appendix A – Additional Report Implications
Appendix B – Background information/Links

APPENDIX A – Report Implications

A.1 **Key Priorities within the Single Midlothian Plan**

There are some links to the Community Justice and Safety Plan within the Single Midlothian Plan but there are more cogent links to the work of the East and Midlothian Public Protection Committee as this is where strategic governance of MAPPA sits within Midlothian.

A.2 **Key Drivers for Change**

Key drivers addressed in this report:

☒ Holistic Working
☐ Hub and Spoke
☐ Modern
☐ Sustainable
☐ Transformational
☐ Preventative
☐ Asset-based
☒ Continuous Improvement
☐ One size fits one
☐ None of the above

A.3 **Key Delivery Streams**

Key delivery streams addressed in this report:

☒ One Council Working with you, for you
☐ Preventative and Sustainable
☐ Efficient and Modern
☐ Innovative and Ambitious
☐ None of the above

A.4 **Delivering Best Value**

Not applicable.

A.5 **Involving Communities and Other Stakeholders**

The MAPPA Annual Report is accessible to the general public. A range of community engagement activities have taken place in Midlothian over the past few years about the MAPPA process and this engagement programme will continue.

A.6 **Impact on Performance and Outcomes**

The East and Midlothian Offender Management Group is working to a plan that identifies improvement actions for the management of high risk offenders in East and Midlothian. In turn this group reports to the Public Protection Committee and the Critical Services Oversight Group.

While this is a challenging area of work there is no evidence of any concerning performance in Midlothian. Justice social workers are highly skilled and extensively trained in risk assessment and the management of sexual offenders and high risk violent offenders and in delivering accredited interventions to support behaviour change. We also continue to analyse and learn from Serious Case Reviews from around the country when they are published.

A.7   Adopting a Preventative Approach

Not applicable.

A.8   Supporting Sustainable Development

Not applicable.

APPENDIX B

Background Papers/Resource Links (insert applicable papers/links)

MAPPA

Edinburgh, the Lothians and Scottish Borders Multi-Agency Public Protection Arrangements

ANNUAL
REPORT
2020-2021

MAPPA

Edinburgh, the Lothians and Scottish Borders Multi-Agency Public Protection Arrangements

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Edinburgh, the Lothians and Scottish
Borders Multi-Agency Public
Protection Arrangements

Foreword

The Multi Agency Public Protection Arrangements (MAPPA) brings together practitioners from different sectors and professions to provide an integrated way of working collectively to protect the public from serious harm. Multi-agency working could involve anyone whose job or voluntary work puts them in contact with offenders, children, vulnerable persons or groups. Our utmost priority is to keep the public safe, particularly the most vulnerable members of our communities.

At the start of the year (1 April 2020) due to the pandemic we had to find different ways to continue to work in collaboration with social work, police, health and prison service to ensure the protection of children, vulnerable individuals, and our communities. This included dramatically reducing our face to face contact with partner agencies and placed a new reliance on technology, to ensure that we continued to share information and worked collaboratively to manage the risk of harm presented by MAPPA managed offenders.

Re-offending by registered sex offenders is low, and our staff worked hard during the pandemic to reduce both the risk posed by these offenders and the likelihood of re-offending. It is impossible to eliminate risk and we recognise that the impact on a victim can be profound, long-lasting and reach into all aspects of their lives.

As MAPPA has developed over the years, we have refined and developed our processes and we are committed to strengthening our arrangements, ensuring best practice and effective inter agency working.

I wish to take this opportunity to thank staff from all agencies for their commitment, skills and achievements in working in this often very challenging area of public protection. I hope this annual report helps to illustrate the work undertaken by all agencies in our area and provides an insight into local public protection arrangements, which help to make our communities safer.

**Jackie Irvine
Chair Edinburgh, the Lothians
and Scottish Borders
Strategic Oversight Group**

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What is MAPPA?

Multi-Agency Public Protection Arrangements in Edinburgh, the Lothians and Scottish Borders

Multi-Agency Public Protection Arrangements (MAPPA) provide a framework to manage the risk posed by registered sex offenders and restricted patients (mainly violent offenders, with a small number of sex offenders). On 31 March 2016, the Scottish Government published new MAPPA Guidance. This guidance reflects the new risk of serious harm category 3, for offenders who by reason of their conviction are subject to supervision in the community, and are assessed by the responsible authorities as posing a high or very high risk of serious harm to the public, which requires active multi-agency management at MAPPA Level 2 or 3.

MAPPA

Edinburgh, the Lothians and Scottish Borders Multi-Agency Public Protection Arrangements

MAPPA brings together professionals from the police, social work, housing, health and the Scottish Prison Service in Edinburgh, the Lothians and Scottish Borders. These agencies are known as the 'responsible authorities'. While the arrangements are co-ordinated by a central unit based in Edinburgh, the practical management of offenders remains the responsibility of these agencies at local level.

Community Justice Authorities ceased to exist on 31 March 2017, however, MAPPA continue to operate under the Management of Offenders etc (Scotland) Act 2005 and the boundaries previously covered by the Edinburgh, Lothian and Scottish Borders Community Justice Authority will remain. The area covered by our arrangements incorporates the local authority areas of the City of Edinburgh, East Lothian, Midlothian, West Lothian and the Scottish Borders, representing a mixture of urban and rural areas.

The responsible authorities represented are:

- » The City of Edinburgh Council
- » East Lothian Council
- » Midlothian Council
- » West Lothian Council
- » Scottish Borders Council
- » Police Scotland
- » Scottish Prison Service
- » NHS Lothian
- » NHS Borders

There are three MAPPA management levels to ensure that resources are focused where they are needed most to reduce the risk of harm. Over the course of this annual reporting year, we managed 899 registered sex offenders under MAPPA; 91.10% (819) at Level 1; 8.79% (79) at Level 2; and 0.11% (1) at Level 3.

Over the past year, there have been 72 online MAPPA Level 2 meetings across Edinburgh, the Lothians and Scottish Borders, which managed RSOs and serious risk of harm violent offenders. Each Level 2 meeting will consider a number of offenders. A Level 3 meeting will only consider one offender and there were 6 Level 3 meetings convened during the reporting year, of which 2 meetings related to an RSO and 4 meetings related to serious risk of harm violent offenders.

The 2020/21 MAPPA National Annual Report provides a picture of the main national developments in relation to MAPPA and can be viewed on the Scottish Government website under recent publications.

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3
Roles and Responsibilities

MAPPA

Edinburgh, the Lothians and Scottish
Borders Multi-Agency Public
Protection Arrangements

The responsible authorities for each area are required to involve other key agencies in the management of offenders. This is an important part of MAPPA, involving the exchange of information and drawing on the collective knowledge and expertise of numerous agencies. The roles and responsibilities in relation to MAPPA in our local area are outlined below.

During the pandemic agencies have continued to monitor offenders in line within their respective roles and responsibilities taking cognisance of the need to protect the public from serious harm balanced against the prevailing COVID-19 health advice at that time.

Police Scotland is responsible for the enforcement of the notification and compliance requirements of the Sexual Offences Act 2003 (sex offender registration), and for policing activities, including risk assessment, preventative/monitoring strategies, coupled with investigation and prosecution of any registered sex offender who re-offends. Responsibilities include: maintaining an accurate record of those offenders resident in each local authority area subject to the notification requirements; the creation of risk management plans to mitigate or reduce risk; making enquiries where such persons fail to comply with the requirements placed on them and managing sex offenders whose current behaviour is of concern. Police Scotland is the lead responsible authority for those community-based registered sex offenders who are not subject to any other form of statutory supervision. These duties are carried out in partnership with all responsible authorities and 'duty to co-operate' agencies.

The local authority is the responsible authority for registered sex offenders who are subject to statutory supervision. The Council's justice social work service is responsible for the supervision of such offenders, but housing, adult social care and children and families services also play a key role in the management of sex offenders in the community.

Justice social work makes a significant contribution to public protection by supervising and managing registered sex offenders in accordance with the requirements of MAPPA and other public protection-related legislation.

Social workers supervise offenders on community payback orders and prisoners who have been released subject to formal supervision. Social workers are required to use accredited risk assessment tools, and in collaboration with other agencies, develop plans for the risk management and supervision of offenders. Social workers can request that additional requirements or conditions be placed on orders and licences by the courts and the Parole Board. These requirements and conditions can range from restrictions relating to accommodation and employment, to instructions to avoid certain locations or victims, or to attend counselling or treatment programmes. These requirements and conditions allow social workers to monitor and influence aspects of offenders behaviour, as breaches of requirements or conditions can lead to the court or Parole Board returning the offender to custody.

Each local authority in Edinburgh, the Lothians and Scottish Borders has a Sex Offender Liaison Officer (SOLO) or Lead Officer, in the justice social work service, who acts as a single point of contact for information relating to registered sex offenders. They are responsible for chairing risk management case conferences and liaising with other agencies as appropriate.

Local authority housing SOLOs are responsible for offenders access to housing, which includes accessing temporary accommodation and identification of suitable permanent housing.

Registered social landlords, as 'duty to co-operate' agencies, work with the local authority housing SOLO to identify positive housing solutions, which contribute to public protection.

The role of the housing service is to contribute to the 'responsible authorities' management of risk through:

» providing suitable accommodation

» contributing to environmental risk assessments to ensure accommodation is appropriate

» liaising with the responsible authorities regarding the ongoing management and monitoring of the risk of the offender as a tenant, including any tenancy moves or evictions

» having regard to community safety and having in place contingency plans for when a property is no longer suitable and/or the offender's safety is at risk.

The local authority is responsible for ensuring the development of a strategic response to the housing of sex offenders. However, in any local authority area there is likely to be a multiplicity of housing providers, and local authorities must involve and consult registered social landlords in their area when developing their strategic response.

It is the responsibility of the local authority to provide an initial single point of contact for accommodation requests from other responsible authorities. This single point of contact is the housing SOLO, whose role involves:

» identifying the most appropriate housing provider, following risk assessment

» ensuring that when an appropriate housing provider has been identified, they are included by the responsible authorities in liaison arrangements relevant to the identification of appropriate housing and the management of risk

» liaising pro-actively with responsible authorities and housing providers regarding ongoing risk management and community safety issues.

NHS Lothian continues to play an important role in MAPPA locally, through being the responsible authority for mentally disordered restricted patients, and in fulfilling its wider duty to co-operate in the management of violent offenders and registered sex offenders.

NHS Lothian has a Public Protection structure (including child protection, adult protection and MAPPA), which is the responsibility of the Executive Nurse Director at Health Board level. There is a Director for Public Protection, a Clinical Nurse Manager, a MAPPA Health Liaison Officer, alongside Designated Consultants for MAPPA (who are consultant forensic mental health clinicians). The aim of the NHS Lothian structure and input is to provide governance for NHS Lothian's contribution to Public Protection and to ensure that health issues (including mental health, physical health, staff and patient safety, information sharing) that arise in relation to MAPPA cases are dealt with appropriately. The Director of Public Protection attends all level 3 MAPPA meetings; SOLS representatives attend all level 2 and level 3 MAPPA meetings; and the Health Liaison Officer attends all level 2 and some level 3 MAPPA meetings.

NHS Borders also makes an important contribution to MAPPA. A consultant clinical psychologist from the learning disability service and a nurse consultant from the vulnerable children and young people service attend all Level 2 meetings, and the associate director of nursing attends all Level 3 MAPPP meetings.

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Community Intervention Services for Sex Offenders (CISSO)

This service continues to support the risk management of partner agencies through the delivery of community-based group treatment programmes and individual interventions, addressing the behaviour and attitudes associated with sexual offending. In addition, staff provide assessments and offer advice and consultation to criminal justice social workers in Edinburgh, the Lothians and Scottish Borders.

In response to the pandemic the project has adapted the ways in which it delivers services. With groupwork suspended throughout 2020, the team focused on offering 1:1 assessments and interventions both remotely via the telephone and video-calling alongside face-to-face appointments in locality offices. The project worked closely with the National Treatment Managers Delivery Group for MF:MC to consider interim ways in which interventions may be safely offered that reflected local needs and arrangements. In Edinburgh, one of the Justice Social Work buildings re-opened in September 2020, which allowed for face-to-face work to recommence in line with a priority system. In West Lothian, the group work room in Livingston was also made available to the team one-day per week for MF:MC work and CISSO were able to start seeing people as required in East Lothian, Scottish Borders and Midlothian. The priority was to continue programmed interventions with people who had commenced work on their sexual offending behaviour prior to the pandemic. Other work was prioritised for people who either had short timescales on Justice Social Work (JSW) supervision or were presenting with acute risk factors for sexual offending.

Work was also undertaken to be able to respond to an anticipated increase in technology-mediated sexual offending during lockdown restrictions. CISSO developed and contributed materials to a NOTA toolkit around technology-mediated offending.

Alongside other groupwork services in Edinburgh, CISSO has now embedded routine screening assessments of trauma and mental health into the induction process. This assessment combines use of a semi-structured interview alongside established measures of childhood experiences (adverse and benevolent); trauma and mental health in order to start building a collaborative formulation of a person's needs and strengths. This is an important part of the service moving

to operate at a Trauma Enhanced level under the NES Framework. Staff have also received additional training in the use of Psychological First Aid for people experienced distress and Safety and Stabilisation skills for people with complex trauma histories. The demand for this type of intervention has been significant due to the impact of the pandemic and also fits with current good practice approaches in working to address sexual offending behaviour.

Training delivery has also continued through the pandemic, albeit with a focus on essential training, including Risk Matrix 2000 / Stable & Acute 2007 and Moving Forwards: Making Changes facilitator training. Training has used a blended model of online resource packs; virtual delivery and face-to-face. It is anticipated that this blended model of delivery will allow for more flexible training events in the future.

Keeping Children Safe

The Community Disclosure Scheme provides that parents, carers and guardians of children under 18 can ask for information about a named person who may have contact with their child if they are concerned that he or she might have convictions for sexual offences against children (e.g. if a parent wants to find out more about a new partner). Police officers discuss the concerns of the applicant in a face-to-face meeting and offer advice and support.

In this reporting year, police in Edinburgh, the Lothians and Scottish Borders received 37 applications under this scheme.

Further information can be found at: https://www.scotland.police.uk/about-us/police-scotland/strategic-planning/children-and-young-people/safety-and-protection/

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4
Achievements in Developing Practice

MAPPA

Edinburgh, the Lothians and Scottish
Borders Multi-Agency Public
Protection Arrangements

Training and Promoting MAPPA

During this reporting year, we have held a number of on line multi-agency training events.

In October 2020, a Consultant Clinical Psychologist from the NHS Lothian SOLS and the MAPPA Co-ordinator facilitated an online workshop attended by the Detective Inspector and Detective Sergeants who manage officers who are based within the Lothian and Borders Sexual Offences Policing Unit. The aim of the workshop was to review practice and share learning relative to the assessment of risk.

In February and March 2021, Edinburgh, the Lothians and Scottish Borders Strategic Oversight Group commissioned three online training sessions delivered to police officers and justice social workers across the five council areas. The aim of the training was to enhance our understanding of risk formulation and scenario planning within the context of completing the National MAPPA risk management plan template. These events were well attended and very positive feedback was received.

In March 2021, officers from the Edinburgh Sex Offender Policing Unit (SOPU) delivered four online training sessions to justice social workers across the five council areas in Edinburgh, the Lothians and Scottish Borders in regards to the inspection of offender's devices, usage of same and specific guidance in regards to the mechanics of intrusively inspecting and retrieval of information. These sessions were well received by justice social workers and feedback was very positive.

Developing the use of remote electronic monitoring equipment

Due to advance in technology the internet can be accessed through a variety of devices. The monitoring of devices is the responsibility of the 'responsible authority'. Where the Parole Board or Court have granted a condition or requirement to monitor an offender's electronic devices for example within a Community Payback Order or a Sexual Offences Prevention Order, then remote electronic monitoring of their internet enable devices can be considered.

eSafe is managed monitoring service that tracks the individual's use of their I.T. devices to detect signs of inappropriate and/or criminal behaviour. eSafe is only deployed in cases where it is an agreed strategy of the risk management plan. In all cases, installation and monitoring are undertaken with the knowledge of the offender. Where there is an initial detection of a potential offence or breach of the order then the lead agency will be informed. If there are concerns relative to imminent or ongoing contact offending or any concerns relative to a suicide risk or serious self-harm, eSafe will notify the police via the 999 system.

Police Scotland and all five local authorities within the Edinburgh, the Lothians and Scottish Borders are developing their use of remote electronic monitoring software.

Developing the use of Sexual Offences Prevention Orders (SOPO)

The SOPO is an order granted by the Court. It places conditions on an offender's behaviour, provides a power of arrest if breached and enhances the police role in managing such offenders. SOPOs could initially only contain prohibitive measures, however, a change in legislation in November 2011 allows for these orders to contain positive obligations as well as prohibitions.

For some offenders, the existence of a SOPO is enough to provide structure to their daily life, through which they may avoid further offending. On 31 March 2021, there were 82 SOPOs in place in our area.

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Strategic Overview Arrangements

MAPPA

Edinburgh, the Lothians and Scottish Borders Multi-Agency Public Protection Arrangements

Edinburgh, the Lothians and Scottish Borders – Strategic Oversight Group

This group is responsible for the overview and co-ordination of the Multi-Agency Public Protection Arrangements, ensuring the sharing of best practice and learning from significant case reviews. The group also provides a strategic lead for developing local multi-agency policy and strategy in relation to shared priorities regarding the management of offenders.

Edinburgh, the Lothians and Scottish Borders – MAPPA Operational Group

This multi-agency operational group supports the work of the Strategic Oversight Group. Its remit is to share learning, develop best practice and ensure consistency of practice.

Offender Management/Reducing Re-offending Committees

These committees monitor the performance and quality of local service delivery; they provide strategic direction to local member agencies; and develop local policy and practice. These committees include representatives from all key agencies, a number of whom are also members of the local child and adult protection committees, ensuring effective communication across public protection.

NHS Lothian Public Protection Action Group (PPAG)

The main aim of this group is to ensure NHS Lothian discharges its responsibilities for Public Protection including MAPPA, This group provides a general forum to discuss important practice issues, in addition to developing good practice in relation to the management of high-risk offenders in the health care setting. PPAG reports to the NHS Board through the Healthcare Governance Committee.

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Statistical Information

Unless stated, the statistics recorded are for the reporting period 1 April 2020 to 31 March 2021.

MAPPA

Edinburgh, the Lothians and Scottish Borders Multi-Agency Public Protection Arrangements

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Table 1: General

REGISTERED SEX OFFENDERS (RSOs)		No.
a) Number of:	I. at liberty and living in the area on 31 March	708
	II. per 100,000 population on 31 March	70
b) The number having a notification requirement who were reported for breaches of the requirements to notify		32

Table 2: Civil Orders applied and granted in relation to registered sex offenders

THE NUMBER OF	No.
a) Sexual Offences Prevention Orders (SOPOs) in force on 31 March	82
b) Risk of Sexual Harm Orders (RoSHO) in force on 31 march	1
c) Sex offenders convicted of breaching SOPO conditions between 1 April and 31 March	16
d) Number of people convicted of a breach of RSHO between 1 April and 31 March	0
e) Foreign Travel Orders imposed by the courts between 1 April and 31 March	0
f) Notification Orders imposed by the courts between 1 April and 31 March	9

Table 3: Registered sex offenders by level, re-convictions and notifications

REGISTERED SEX OFFENDERS (RSOs)		No.
a) Number managed between 1 April and 31 March		899
I. Level 1 – Routine Risk Management		819
II. Level 2 – Multi-agency Risk Management		79
III. Level 3 – MAPPP		1
b) Convicted of a further Group 1 or 2 crime	I. MAPPA Level 1	13
	II. MAPPA Level 2	1
	III. MAPPP Level 3	0
c) Returned to custody for a breach of statutory conditions (including those returned to custody because of a conviction of Group 1 or 2 crime)		14
d) Indefinite registrations reviewed under the terms of the Sexual Offences Act 2003 (Remedial) (Scotland) Order 2011 between 1 April and 31 March		24
e) Notification continuation orders issued under the terms of the Sexual Offences Act 2003 (Remedial) (Scotland) Order 2011 between 1 April and 31 March		13
f) Notifications made to Jobcentre Plus under the terms of the Management of Offenders etc. (Scotland) Act, 2005 (Disclosure of Information) Order 2010 between 1 April and 31 March		207
g) Number of RSOs subject to formal disclosure		3

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Table 4: Restricted Patients

RESTRICTED PATIENTS (RPs):		No.
a) Number of RPs;	I. Living in the area on 31 March	32
	II. During the reporting year	32
b) Number of RPs per order	I. CORO	32
	II. HD	0
	III. TTD	0
c) Number within hospital/ community;	I. State Hospital	8
	II. Other hospital no suspension of detention (SUS)	15
	III. Other hospital with unescorted SUS	7
	IV. Community (Conditional Discharge)	10
d) Number managed by category on 31 March (does not include patients from Lothian in the State Hospital)	Level 1 – Routine agency risk management	30
	Level 2 – multi-agency risk	2
	Level 3 – MAPPP	0
e) Number of RPs convicted of a further crime of Group 1 or 2 crime	I. MAPPA Level 1	0
	II. MAPPA Level 2	0
	III. MAPPP Level 3	0

RESTRICTED PATIENTS (RPs):		No.
f) Number on suspension of detention;	I. who did not abscond or offend	21
	II. who absconded	1
	III. who absconded and then offended	0
	IV. where absconding resulted in withdrawal of suspension of detention	1
g) Number on conditional discharge;	I. who did not breach conditions, not recalled or did not offend	10
	II. who breached conditions (resulting in letter from the Scottish Government)	0
	III. recalled by Scottish Ministers due to breaching conditions	0
	IV. recalled by Scottish Ministers for other reasons	0

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Table 5: Statistical Information – other serious risk of harm offenders

SERIOUS RISK OF HARM OFFENDERS:		No.
a) Number managed between 1 April and 31 March	1. MAPPA Level 2	18
	2. MAPPA Level 3	3
b) Number of offenders convicted of a further Group 1 or 2 crime	1. MAPPA Level 2	1
	2. MAPPA Level 3	0
c) Number of offenders returned to custody for a breach of statutory conditions (including those returned to custody because of a conviction of Group 1 or 2 crime)		2
d) Number of notifications made to DWP under the terms of the Management of Offenders etc (Scotland) act, 2005 (Disclosure of Information) Order 2010 between 1 April and 31 March		12
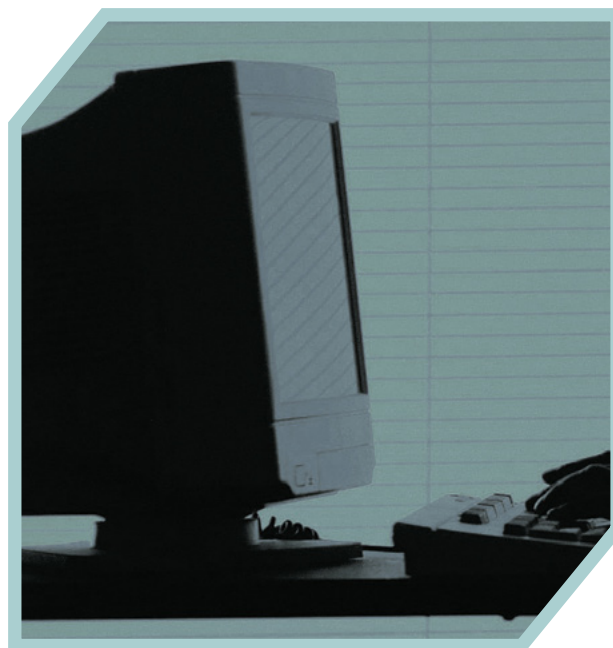
Table 6: Registered sex offenders managed in the community under statutory conditions and/or notification requirements on 31 March 2021

CONDITIONS	Number	Percentage
On statutory supervision	210	29.67
Subject to notification requirements only	498	70.33

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MAPPA

Edinburgh, the Lothians and Scottish
Borders Multi-Agency Public
Protection Arrangements

NHS Lothian

NHS Borders

SPS
SCOTTISH
PRISON
SERVICE

POLICE
SCOTLAND
Keeping people safe
POILEAS ALBA

Midlothian

East Lothian
Council

Scottish
Borders
COUNCIL

West Lothian
Council

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YOUR COUNCIL~YOUR CITY

6632-21-AR

Midlothian

Local Heat and Energy Efficiency Strategy

Energy Efficiency Standard for Social Housing

Report by Kevin Anderson Executive Director, Place

Report for Decision

1   Recommendations

It is recommended that the Council:

a) Note the challenge to meet the legislative requirements of the Energy Efficiency Standard for Social Housing 2 and the further challenge of bringing our housing stock to operational net zero carbon;

b) Agree to the proposals in this report to set up governance to oversee the development of an Energy Efficiency Delivery Plan (EEDP) for the Council's social housing by December 2022;

c) Agree, in principle, as an absolute minimum, to develop targets as part of the EEDP that deliver compliance with EESSH2;

d) Investigate options around achieving the best practical solutions and feasibility of achieving net zero carbon or better across the housing estate by 2030, while ensuring fewer households will live in, or be at risk of, fuel poverty;

e) Agree an initial budget of **£70k** to end of December 2022 to cover activities of the project team and advisers. This cost would be met by the Housing Revenue Account (HRA).

f) Note that an early estimate envisages a future Housing Investment programme will have to make provision for over **£114.760m** to 2032 at today's prices. This excludes any costs associated with decanting tenants;

g) Note that if there is no direct support from Scottish Government this could have an impact of up to an additional 2.3% on housing rents for 2023/24-2036/37 to ensure the project remains affordable to the HRA;

h) Agree that an approach should be made to Housing Associations active in the area to seek to work together where there is shared vision; and

i) Agree that all new Council houses shall be built in line with Midlothian Council's Housing Design Guide to 2030.

17 March, 2022

Report Contact:
Name: Kevin Anderson   **E-mail** kevin.anderson@midlothian.gov.uk

2   Purpose of Report/Executive Summary

2.1   This report provides Council with proposals to produce an Energy Efficiency Delivery Plan (EEDP) for the Council's Housing stock and seeks its agreement to set up a project team with budget and governance to oversee the EEDP development by December 2022.

2.2   The report identifies, at high level, the scale of the challenge to meet legislative and local policy requirements and asks the Council to include ambitious targets and explore how the Council might meet or exceed net zero carbon across the Council estate by installing the best practical solutions for maximum impact.

2.3   The EEDP will be one of the core plans supporting the Council's Local Heat and Energy Efficiency Strategy (LHEES) that will start to be developed over the next year. It also supports the Council's Local Housing Strategy.

3   Background

Policy Background
Climate Change General

3.1   Public bodies have statutory climate change duties under the Climate Change (Scotland) Act 2009. Section 44 requires each public body, in exercising its functions, to contribute to delivery of Scotland's national net zero target and act sustainably.

3.2   In December 2019, the Council declared a "Climate Emergency" with the aim of making the Council's activities net-zero carbon by 2030. This ensures that all strategic decisions, budgets and approach to capital projects are in line with the shift to zero carbon by 2030.

3.3   In August 2020, the Council approved its Climate Change Strategy. This sets out a series of short term (2 - 3 years), cross service actions designed to kick-start change and build momentum towards the net zero goal by 2030. The strategy acknowledged that:

"*The scale of the challenge, the commitment required to change behaviours, practices and processes as well as the investment required to "stop contributing to climate change" cannot be underestimated and the necessary resources to make this happen also cannot be underestimated and must be prioritised if we are to be successful and ensure a bright future for generations to come.*"

3.4   *Housing Strategy*

There are two main documents of relevance here:
a) Strategic Housing Investment Plan (SHIP) 2019 -2024
b) Local Housing Strategy 2021-2026

3.5 Strategic Housing Investment Plan (SHIP) promotes energy efficiency in all homes and ensure they meet the EESSH1 energy efficient standard for Social Housing. The standards seek to reduce energy consumption and carbon emissions in line with targets in the 2009 Act. The Plan states that all housing projects in Midlothian have maximised and will continue to maximise the opportunities for energy efficiency and reduction in fuel poverty. Both the Council and RSLs have been working towards ensuring that properties in Midlothian meet the EESSH1.

3.6 Local Housing Strategy 2021-2026 also promotes energy efficiency in all homes and reducing the number of households in fuel poverty. It identifies that Midlothian Council is progressing two separate pilot projects adopting Passivhaus design Standards. The EESSH1 set out the minimum energy efficiency ratings that landlords are expected to meet across their housing stock by 2020.

EESSH2 targets, detailed below, have now been confirmed.

3.7 *EESSH*

The EESSH is to encourage landlords to improve the energy efficiency of social housing in Scotland. EESSH was first introduced in March 2014 and set a first milestone for social landlords to meet for social rented homes by 31 December 2020. The second milestone, EESSH2, was confirmed in June 2019, for social rented houses to meet by December 2032.

3.8 The EESSH milestones are defined by the Standard Assessment Procedure (SAP) 2012 methodology recorded in Energy Performance Certificates (EPCs)

3.9 The first EESSH milestone set a single minimum Energy Efficiency rating for each home rented by social landlords. The target varied dependent upon the dwelling type and the fuel type to be used to heat it. Social landlords were expected to ensure that they achieved the relevant minimum ratings by 31 December 2020 for all applicable social housing subject to exemptions for some properties.

3.10 The EESSH was reviewed in 2017-2019 by a review group including local and central government landlords and associations. Following consultation a new EESSH2 milestone was confirmed as follows:

- ○ ***All social housing meets, or can be treated as meeting, EPC Band B (Energy Efficiency Rating), or is as energy efficient as practically possible, by the end of December 2032 and within limits of cost, technology and necessary consent.***

- ○ ***No social housing is to be re-let below EPC Band D from December 2025, subject to temporary exemptions.***

3.11 The 2032 milestone is to be supported by a formal review in 2025 to assess progress and confirm additional requirements of the 2032 milestone. Air quality and Environmental Impact will be included as part of that review.

3.12 Scottish Government state that EESSH2 will help remove poor energy efficiency as a driver for fuel poverty and contribute to achieving the Scottish Government's ambitious climate change emissions reduction targets. It is also designed to support the Energy Efficiency Scotland vision for homes and buildings that are warmer, greener and more efficient, and a housing sector that helps to establish a successful low carbon economy across Scotland.

3.13 The scope of the EESSH is self-contained homes, including a full range of facilities for the use of occupiers, provided for the purpose of social rents, and usually subject to tenancy agreements based on the model agreement for secure tenancies. This includes sheltered housing, vacant property, property marked for demolition, and secure tenancies under mortgage to rent scheme.

3.14 The scope excludes the following types of housing:

- ➢ Houses purchased by former tenants (separate energy efficiency standards will be introduced);
- ➢ Hostels with common facilities for food preparation (may be subject to HMO
- ➢ Intermediate or mid-market rents (subject to standards for private rented housing)
- ➢ Mortgage to shared equity (standards will apply)
- ➢ Commercial sub-lets (standards will apply)
- ➢ Amenity blocks for Gypsy/Traveller sites (Standards apply)
- ➢ Houses that meet EPC Band B

3.18 The EESSH2 milestone of 2032 recognises that band B will not be met for all stock. However, this is acceptable, provided all reasonable efforts have been undertaken to improve the energy efficiency of the stock. Where housing cannot be brought up to band B with existing technology at reasonable cost the landlord must be satisfied that the energy efficiency of the house has been improved as much as practical in the circumstances. To demonstrate this, the landlord should make an assessment of houses, or groups of houses, in their stock, which in their judgement cannot be brought up to EPC band B, to show how they have decided that those houses have been made as energy efficient as possible, and why they consider any additional improvements to be either, technically non-viable, non cost-effective or unlikely to secure necessary consents.

3.19 Government modelling suggests that it could cost a total of **£3.4** billion to bring all in-scope social housing up to EPC band B using existing

technology. Scottish Government states that while funding options should be explored, it highlights that many measures will require to be funded from the landlord's own resources. Ultimately this means paying for measures out of rental income in a way that does not exchange fuel poverty for rent poverty.

3.21 The 2032 milestone has been developed so that no exemptions should be needed. By then, landlords are expected to be able to demonstrate that all their houses meet EPC band B, can be treated as meeting EPC band B, or are as energy efficient as practically possible.

3.22 From 2025, any new energy efficiency measures should be installed on the principle of no detriment to air quality and, where necessary, additional measures should include provision for improving ventilation.

3.23 **Existing Housing Estate Condition**

Midlothian Council (at today's date) has a stock of 7230 homes. The Council's Annual Return on the Charter (ARC) for 2019/20 highlights 85.5% of the council's housing stock (5926 properties) would meet the EESSH standard by 2020. This is close to the Scottish average. 567 properties (8.2%) of the housing stock did not meet the standard with 434 properties (6.3%) of the housing stock either exempt or unknown.

3.24 The housing property profile has been aggregated into a range of arch.itypes:

Table No 1

Midlothian Housing Arch^itypes	Number	%
Bungalow	74	1.0
Ground Floor 4 in a block	867	12.2
Upper Floor 4 in a block	811	11.4
Ground Floor Flats	418	5.9
Upper Floor Flats	721	10.1
Terraced Houses	1699	23.9
Semi or end Terraced Houses	2223	31.2
Maisonettes	9	0.1
Amenity Housing	296	4.2

EPC Band (Points)	Number*
Band C (69-80)	3234
Band D (55-68)	2412
Band E (39 -54)	248
Band F (21 – 38)	54
Band G (1-20)	8

*This total is 1162 homes below total stock as excludes homes that are EPC B or above (new build), buy backs and 120 unknowns (currently being checked)

3.26   Decarbonising the existing stock to meet even just EESSH2 will present significant challenges to the Council, not least to ensure action to address fuel poverty doesn't impact adversely on rent poverty.

3.27   A review of the Council's housing stock confirmed up to 11 different construction types. While this consists mainly of standard construction types, it also includes 1829 properties of non-traditional construction, such as Blackburn, BISF and Swedish Timber. Each of these construction types are classed as "Hard to Treat" homes and will require bespoke solutions

3.28   Approximately 6% of the housing stock fails to meet band D which means that under EESSH2, these could not be re-let until improved. Prioritisation of these houses should be a focus ahead of 2026.

3.29   Standard measures for improvement of Energy efficiency in the Council's stock has traditionally included new double glazed windows, loft insulation and energy efficient doors. Further measures may include, Solar panels, battery storage, floor and wall insulation. As time moves on, further innovative solutions may appear and will need to be reviewed regularly.

3.30   Capital investment in existing stock will need to span multiple capital planning periods and will include replacement cycles. The indicative total investment is expected to be greater than **£150m** to bring stock to EPC B. The cost to bring stock to a level that could be considered net zero will be higher than this, given that this will require homes to be moved to alternative heating systems and away from gas boilers. It will be essential to assess the impact of funding these works in rent increases on rent affordability and any relative benefits that arise through energy bill savings.

New Council Housing

3.31 Emissions from buildings are responsible for approximately 20% of Scotland's total greenhouse gas emissions. Energy efficiency buildings reduce the demand for heat and is a significant factor in reducing fuel poverty. The Council needs to ensure that demand for heating is a low as possible and the heat source is as low carbon as possible.

3.32 The Scottish Government are reviewing the energy standards which are included in Building Regulations. These will improve the energy efficiency of new buildings and include measures in support of the move to low carbon and renewable heat. These new regulations are expected to require all new buildings to use heating systems which produce zero direct emissions at the point of use from 2024. (there will be no new mains gas connections)

3.33 The Midlothian Council Housing Design Guide to 2030 will be a valuable tool to ensure our new build Council housing stock is as energy efficient as practical. (see Appendix 1).

Energy Efficiency Delivery Plan Proposal

3.34 To fully understand the challenges ahead and route to delivery, the proposal is to produce a fully costed Energy Efficiency Delivery Plan (EEDP) for the Council's existing social housing for approval by Council in December 2022.

3.35 This Plan will include a specific programme of works to traditional and non-traditional housing stock to inform the level of investment requirement. Other Housing Associations, including Melville Housing Association, with a shared vision will be asked to work closely with the Council and adopt a similar plan to ensure a coherent approach to social housing across Midlothian is taken.

3.36 The Council will need to procure additional expertise from specialist consultants and will benefit from close working on the Plan with Midlothian Energy Ltd and with Changeworks who will be assisting Council with LHEES.

3.37 The Structure of the Plan to be reviewed in the inception stage of the project is expected to include:

- o Introduction and Background
- o Vision and Strategic Links
- o Ambitions and Targets
- o Regulatory regime
- o Existing Position
- o Scale of the Challenge
- o Options Appraisal
- o Preferred Option
- o Detailed Costed Programme
- o Sensitivity Analysis
- o Investment Principles
- o Risk Management and Contingency
- o Procurement Strategy and Plan
- o Communications Planning
- o Explanation of zoning and priorities
- o Monitoring and Reporting
- o Resourcing Delivery Plan
- o Partnership Working
- o Review Process

Activities and Matters for Consideration

3.39 *Inception Period*

An inception period would include an initial period for the team and any advisers to review all the relevant background material. It would be followed by an Inception Meeting at the end of week one and an Inception Report produced by the Team by the end of week 4 for agreement by the Programme Board. The Inception Report would include a detailed programme of activities and risk log to ensure delivery of the final EEDP for agreement by Council in December 2022.

3.40 *LHEES Development*

It is assumed that the Midlothian LHEES will be under further development and a Project Manager for LHEES Strategy will assist the EEDP Team to ensure the Plan fits with the emerging overarching Heat and Energy Efficiency Strategy. The development of LHEES is crucial in identifying zoning for targeting action against fuel poverty and zones suitable for district heating. This is an area where close liaison with Midlothian Energy will be required by both the teams.

3.41 *EESSHH Compliance, best practical option and Net Zero Carbon*

There will be a need for the team to identify and articulate the difference between these standards in order to feed in to a robust options analysis. In addition to this, given the climate change targets are extremely ambitious, many projects will require to over-perform to balance out projects/activities where achievement of net zero carbon is

unachievable. It will also be necessary to consider what might be reasonable to assume as a best practical carbon position.

3.42 <u>Options Appraisal</u>

From a legislative perspective, there is no do nothing option. It is proposed that, in principle, the Council will want to aim for its housing stock to be as energy efficient as practical by 2030 in line with Midlothian Council's climate declaration. However, as the detailed analysis has not yet been carried out to ascertain if this is feasible, it is suggested that the following options be appraised as part of this process:

a) EESSH2 Compliance by 2032 (recognising it will likely fall short of net Zero Carbon)
b) Compliance with net zero
c) As energy efficient as practical by 2030

3.43 With the national and local net zero carbon targets and the regulations to follow the new Heat Networks Bill, all future developments from 2024 are expected to be required to adopt low carbon heating systems. This effectively rules out expansion of the existing mains gas infrastructure and natural gas boilers.

3.44 *Role of Midlothian Energy Limited (MEL)*

In addition to progressing projects under MELs Business Plan, MEL intends to provide support to Midlothian Council and Midlothian communities including through engagement in the Community Planning system and assisting develop energy policy and strategy.

3.45 MEL is also in a position to offer advice and provide services linked to the Councils Capital Plan developments. Various projects have been identified for consideration in the next 5 years of the MEL business plan and should be taken account of as part of the development of LHEES and the EEDP.

Table No 2

Project Name	Description/Potential
The Bush	Potential new network opportunity utilising various potential heat sources including data centre and mine water.
Penicuik, Straiton, Lasswade, Dalkeith, Eskbank	Potential for new heating networks. Consider in line with Council capital programme for all Council owned properties.
Building retrofit	MEL has the ability to provide energy performance contracting (energy efficiency, building fabric, energy generation) to meet Carbon requirements. Potential for Council and Association Housing and public and private sector non-domestic building stock.
Other non District Heat projects	Deployment of stand-alone heat pump technology for clusters of buildings where appropriate
Heat storage	Potential for heat storage in main shaft at Monktonhall to improve performance of heat Millerhill network.
Electric Vehicle Infrastructure	Potential to provide advice and assist manage new infrastructure- potential at Shawfair
Battery Storage	Investigate various opportunities.
New Council Building projects	Design energy performance contracting and power generation opportunities- consider opportunities for local heat networks
Existing Bonnyrigg DH	Advise Midlothian on maintenance arrangements and review of network. Investigate upgrading to low carbon heating. (not necessarily district heating)

3.46 *Governance*

A Project Manager will report through the existing Council governance arrangements:

- ✓ Midlothian Council (December)
- ✓ Housing Programme Board (Every 6 weeks)
- ✓ Capital Plan & Asset Management Board (every 6 weeks)

4 Report Implications (Resource, Risk, Digital)

4.1 Resource

Human Resource
Existing staff resource will be utilised with support from external advisers.

Financial Resource

The appointment of consultants to create a wider project team, to provide advice, ascertain scope of works and level of capital investment, will require initial one-off funding of £0.070 million. This initial cost can be met by the Housing Revenue Account, which financial modelling suggests is affordable.

This report also identifies that extremely challenging potential capital investment of **approximately £114.760 million** (today's prices) will be required to meet just legislative requirements. This excludes costs related to this process such as tenant decant.

The projected rent increase for the current approved capital plan to remain affordable is 1.40% for 2023/24 – 2036/37. Assuming there is no grant funding available the additional investment of £114.760 million will require rent levels to increase by a further 2.3% to 3.7% to ensure the project remains affordable to the HRA.

4.2 Risk

There will be a detailed risk register produced and maintained for the construction/implementation phases, as part of the Delivery Plan. This will include consideration, after market sounding, of availability of construction contractors and materials.

For the period of this current proposed project to end of December 2022, key risks will relate to timescales and budget. The project team will need to be freed up as necessary to drive the project with input from external advisers.

Should the recommendations of this report not be agreed by Council, there is a high likelihood of the Council not meeting statutory requirements and contributing as much as practicable to the climate change emergency.

4.3 Digital

No digital service implications

4.4 Ensuring Equalities

There are no equality issues in this service.

4.5 Additional Report implications (See Appendix A)

APPENDIX A – Report Implications

A.1   Key Priorities within the Single Midlothian Plan

Reducing the impact of climate change.
As identified in this report, implementation of an Energy Efficiency Delivery Plan will have a net positive contribution to the climate change challenge to reach net zero.

A.2   Key Drivers for Change

Key drivers addressed in this report:

☒ Holistic Working
☐ Hub and Spoke
☒ Modern
☒ Sustainable
☒ Transformational
☒ Preventative
☒ Asset-based
☒ Continuous Improvement
☐ One size fits one
☐ None of the above

The project would assist in addressing the impact of unchecked climate change and its detrimental effect on economic growth, risk of flooding and extreme weather. This will contribute significantly to the urgent actions required to address the Council's declared Climate Emergency.

A.3   Key Delivery Streams

Key delivery streams addressed in this report:

☒ One Council Working with you, for you
☒ Preventative and Sustainable
☒ Efficient and Modern
☒ Innovative and Ambitious
☐ None of the above

A.4   Delivering Best Value

The Delivery Plan will include a series of options for consideration with a proposed preferred option to deliver best value.

A.5   Involving Communities and Other Stakeholders
During the inception period of the proposed project a market sounding and engagement process will be agreed.

A.6   Impact on Performance and Outcomes
The Delivery Plan has significant potential to improve the quality of the Council's housing stock and will have a positive effect on meeting

Midlothian's overall carbon reduction targets in line with Midlothian Council's Climate Change Strategy and Action Plan.

Reducing Midlothian's greenhouse gas emissions and adapting the area to climate change impacts are outcome areas for improvement in the Single Midlothian Plan.

A.7   Supporting Sustainable Development

The project would contribute to the achievement of sustainable development set out in the Council's Sustainable Development Framework. It will have a positive impact on climate change.

The report is not a strategic action in terms of the Environmental Assessment (Scotland) Act 2005, and is therefore not subject to any strategic environmental assessment related requirements

APPENDIX B – Background Information

B.1   Background Council Reports etc

- Midlothian Council Net Zero Housing Design Guide

Midlothian

MIDLOTHIAN COUNCIL NET ZERO HOUSING DESIGN GUIDE

VERSION 1 07 MARCH 2022

CONTENTS

A Great, Green Place to Grow

Buccleuch Street, Dalkeith, Passive House scheme by Smith Scott Mullan Associates

1. INTRODUCTION

AIMS OF MIDLOTHIAN COUNCIL

Midlothian Council is committed to providing affordable homes in a secure environment, for those least able to enter the housing market. Fulfilling this commitment will include a focus on sustainability as the Council aspires to become a net zero carbon Council by 2030 (Midlothian's Climate Change Strategy, (2020). This is to be achieved through, among other means, the design and delivery of net zero carbon housing that follows the Green Building Council UK Net Zero Carbon Buildings: A Framework Definition which considers an approach towards cradle-to-cradle carbon consumption, focusing on the sourcing materials, construction process, embodied energy of the building, operational energy, maintenance and alterations, end of life and re-use of the building and its components.

As set out in Midlothian Council's Local Housing Strategy, approved in 2021 Midlothian Council aims to meet the housing need and imbalances in the housing market through the provision of:

• general needs accommodation

• purpose built accommodation for older people

• housing for people with special needs including: single persons, homeless people, and people suffering from physical disabilities

In addition, Midlothian Council will seek to provide high quality amenity in the area associated with housing developments.

In providing housing solutions, Midlothian Council will be pragmatic, flexible and encourage innovation, whilst seeking sustainability and value for money.

PURPOSE OF THE DESIGN GUIDE

Midlothian Council, through the development and housing management process, has gained substantial experience and knowledge of housing provision. The Design Guide aims to convert this knowledge into principles and preferences for Designers and professional teams to follow. The end result should be the delivery of effective solutions which introduce an element of standardisation, enhance cost effectiveness and minimise maintenance.

The Net Zero Housing Design Guide has been developed in cooperation with Smith Scott Mullan Associates. The Design Guide is intended to give Designers, Consultants, Developers, Contractors, and others involved in the design and construction process a clear briefing on the preferences, requirements, and the general standards that Midlothian Council is seeking to achieve in new developments. Those requirements are in line with the wider national and local policy context, along with Midlothian Council's commitment to become a net zero carbon Council by 2030 (Midlothian's Climate Change Strategy, (2020)).

The Design Guide is a reference base and not intended to be a definitive statement of Midlothian Council requirements. Any additional requirements will be clarified separately by Midlothian Council

on the project-by-project basis.

The Design Guide is one part of Midlothian Council's Performance Criteria to which Designers, Consultants, Developers and Contractors must comply.

CHECKLISTS – QUALITY CONTROL TOOL

The checklists forming part of this document are tools to help Midlothian Council control the quality of design and its compliance with the relevant policies and design objectives. They have been formed to allow easy review of the compliance with the Design Guide. This is helpful for the designers as a design development review tool. The checklists are also to facilitate efficient control of the compliance of the design and track non-compliant design components, justification for the non-compliance and approval/disapproval process.

Descriptive portions of the checklists have been formatted to allow the designer to provide evidence and clarify the thought process behind the non-technical, place-making aspects of design e.g. for social sustainability, safety, and ecology etc. It is paramount that all checklists are completed for each project and issued to the Project Manager for review at each key stage. Any changes to the design affecting the checklists should be covered in a revision of the checklist and then re-issued to the Project Manager for review.

2. POLICY GUIDANCE

Midlothian Council Guidance is informed by several National and Local policy and guidance documents listed below. A brief description and external links have been provided for reference of all parties involved in the design and delivery process. The list should be reviewed and updated as new guidance is published. The Midlothian Council Design Guidance will be updated accordingly.

NATIONAL POLICY AND GUIDANCE

a) Housing to 2040. A vision for future homes and communities (March 2021)

In the 2018-19 Programme for Government, the Scottish Government made a commitment to plan together with stakeholders for how our homes and communities should look and feel in 2040 and outlined the options and choices to get there. This new approach encompasses the whole housing system – the Scottish Government is aiming for Housing to 2040 to have a lasting legacy, not just regarding new homes, but that which takes into account the people, place, environment and communities where our homes, both new and old, are located.

The Housing to 2040 ambition is to bring forward the review of the Energy Efficiency Standard for Social Housing, with a view to strengthening and realigning the standard with net zero requirements so that social housing leads the transition towards zero emissions buildings.

It is understood that Housing to 2040 is an ambitious vision which requires commitment, action, and cooperation of many actors within the Midlothian Council and private sector. This design guidance aligns, as relevant, to the vision and principles included in the Housing to 2040 with special attention paid to the following aspects: High Quality, Sustainable Homes, Sustainable Communities, and Homes That Meet People's Needs.

Reduction of carbon consumption targets have been included in implementation stages.

Follow the link for more information

b) Place Principle

The Scottish Government and COSLA have agreed to adopt the Place Principle to help overcome organisational and sectoral boundaries, to encourage better collaboration and community involvement, and improve the impact of combined energy, resources, and investment.

The Place Principle recognises that:

- Place is where people, location and resources combine to create a sense of identity and purpose, and it is at the heart of addressing the needs and realising the full potential of communities. Places are shaped by the way resources, services and assets are directed and used by the people who live in and invest in them.

- A more joined-up, collaborative, and participative approach to services, land, and buildings, across all sectors within a place, enables better outcomes for everyone and increased opportunities for people and communities to shape their own lives.

The Place Principle requests that:

- All those responsible for providing services and looking after assets in a place need to work and plan together, and with local communities, to improve the lives of people, support inclusive and sustainable economic growth and create more successful places.

- All those who are responsible commit to taking a collaborative, place-based approach with a shared purpose to support a clear way forward for all services, assets and investments which will maximise the impact of their combined resources.

Midlothian Council will seek to ensure that investment in housing comprises investment in places. New housing developments should seek to support and enable the delivery of wider objectives and outcomes for the places they are being built in. This should be reflected in site selection, the scoping of a brief for a development and the delivery process for the housing itself.

Follow the link for more information.

This guidance does not directly refer to the Place Principle. It is understood that specific elements of the Place Principle e.g. public consultations might fall into the designers/developers responsibility as part of the planning process. In each case a collaborative, place-based approach is expected from the designers and developer.

To determine the site-specific requirements, designer should enquire Planning regarding a need for Pre-application Planning Services. It is strongly encouraged that the pre-application consultation takes place when recommended by Planning to facilitate successful delivery of the goals listed above.

c) 20-Minute Neighbourhoods

The principle of 20-Minute Neighbourhoods is a place-based approach to reduce inequality and meet net zero carbon emission targets. With a focus on giving people connected and walkable places to live, it supports a lifestyle where it is easier for everyone to choose to live, work and play more locally. Where people can access their essential daily needs within a walkable distance from their home and communities are supported to thrive. This includes access to shopping, recreation and leisure activities, along with schools and local services such as GP practices. People work more from home, in local hubs or in local businesses and access to work and services beyond their neighbourhood is through public transport connections. Housing is affordable with a mix of size and sectors to enable intergenerational communities and ageing in place.

The Improvement Service (with the Scottish

Health and Inequalities Impact Assessment Network and the Spatial Planning for Health and Wellbeing Collaborative Group) has published a report comparing the application of policy to deliver a 20-Minute Neighbourhood approach to a more traditional spatial planning approach, to address the Scottish Government's ambition to deliver 20-Minute Neighbourhoods. The 20-Minute Neighbourhood scenario is defined as including "higher density, mixed use development that targets access to public green space, a range of affordable house types, public transport and active travel. The higher density provides the critical mass to support local services and amenities to achieve a mixed-use area that can help to reduce car usage."

20-Minute Neighbourhoods approach now forms part of The Scottish Government Infrastructure Investment Plan and Fourth National Planning Framework.

Any proposals should include the principles of 20-Minute Neighbourhoods in context of the site itself and in relation to adjacent areas and the already existing amenities.

Follow the link for more information:

Features of a
20-Minute Neighbourhood

Local employment opportunities

Local shopping centres

Local health facilities and services

Well connected to public transport, jobs and services within the region

Local schools

Lifelong learning opportunities

Local public transport

Local playgrounds and parks

Safe cycling networks

Green streets and spaces

Walkability

Community gardens

Housing diversity

Sport and recreation facilities

Ability to age in place

Affordable housing options

Safe streets and spaces

Elected Member Briefing Note: 20 Minute Neighbourhoods, Improvement Service

d) Setting Housing Standards to Cut Climate Change Emissions 2020.

The Scottish Government has published a consultation asking for views on the proposed New Build Heat Standard. Housing Minister Kevin Stewart said: "The pace of decarbonising Scotland's domestic and non-domestic buildings has to increase significantly to achieve our targets on climate change. The New Build Heat Standard will be an important contribution to this to ensure emissions from heating and cooling our buildings fall close to zero."

The implementation stages of the guidance should be reviewed according to the result of this consultation and its impact on legislation and Technical Standards.

Follow the link for more information.

e) RIBA Sustainable Outcomes Guide

In June 2019, the RIBA Council declared a climate and ecological emergency and approved all key recommendations of its Ethics and Sustainability Commission, the independent advisory board set up to help the RIBA fulfil its commitment to the UN Global Compact and the 17 UN Sustainable Development Goals. To help implement these recommendations, this guide defines a concise measurable set of core sustainable outcomes and associated metrics that correspond to key UN SDGs. It complements the RIBA Plan of Work 2020 Sustainability Strategy and the RIBA Plan for Use Guide.

An outcomes-based design approach will help resolve the now well-known gaps between design intent and in-use performance across a range of metrics and deliver real and lasting reductions in carbon emissions by reinforcing the feedback loop between briefing and outcomes.

This guide is recommended as a useful tool for designers, clients and contractors helping to establish a structure of the process within the RIBA Work Stages.

Follow the link for more information.

f) Architecture and Design Scotland – Carbon Conscious Places

This report shares the learning from Architecture and Design Scotland's year-long exploration in to designing for a changing climate, where a whole place approach to the net zero carbon challenge has been considered. The report looks at different ways to address all scopes of carbon emissions, as well as adapting to the impacts of climate change through rethinking of how town centres are being used, supported and how they become more self-sufficient.

This guidance includes Carbon Conscious Places principles. Refer to the descriptive portion of the Place checklist.

Follow the link for more information.

g) UK Green Building Council (UKGBC). Net Zero Carbon Buildings: A Framework Definition (April 2019)

The framework has been developed by an industry task group of businesses, trade associations and non-profit organisations, undertaken in a spirit of collaboration and consensus-building. It provides guidance on the definition of net zero carbon buildings – both homes and non-domestic – and a way to demonstrate how a building has achieved net zero carbon status. It focuses on carbon impacts that can be readily measured and mitigated today – operational energy and embodied impacts of construction.

> The current functioning definition of a Net Zero Carbon Building is formulated in UKGBC Net Zero Carbon Framework, and it includes Net Zero carbon – Construction, Operational and Offsetting. This definition of Net Zero is adopted in Midlothian Council Net Zero Housing Design Guide.

Net zero carbon – construction - When the amount of carbon emissions associated with a building's product and construction stages up to practical completion is zero or negative, through the use of offsets or the net export of on-site renewable energy.

Net zero carbon – operational energy - When the amount of carbon emissions associated with the building's operational energy on an annual basis is zero or negative. A net zero carbon building is highly energy efficient and powered from on-site and/or off-site renewable energy sources, with any remaining carbon balance offset.

Net Zero Carbon Buildings: A Framework Definition is used by Midlothian Council Design Guide to define net zero development.

Follow the link for more information.

Always look for the most up to date guidance produced by Green Building Council UK. Refer to Advancing Net Zero webpage.
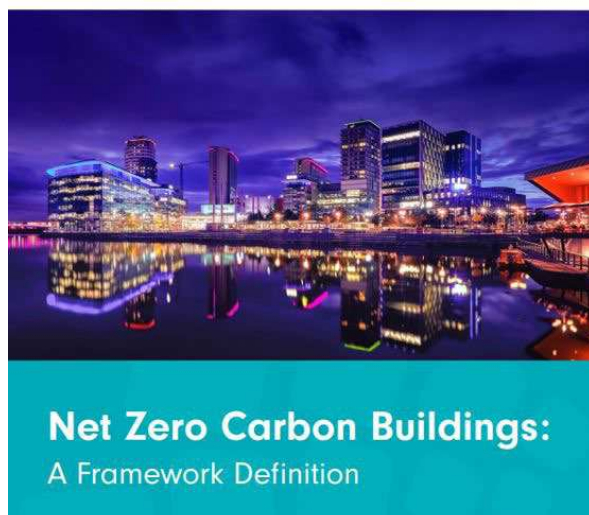
h) Renewable Energy Procurement & Carbon Offsetting - Guidance for net zero carbon buildings (March 2021)

This guidance seeks to provide clarity on the procurement of high-quality renewable energy and carbon offsets for net zero buildings and organisations in the UK. It offers a consistent set of principles and metrics to help guide the built environment transition to a state of net zero that is aligned with limiting global warming to 1.5 degrees Celsius.

This resource has been made freely available for building developers, designers, owners, occupiers, and policy makers to inform their decarbonisation trajectories. Given the complexities of certain elements, it will be of most use to energy procurement, facility management and sustainability professionals within these organisations.

Follow the link for more information.

This guidance supersedes some of the information contained in Green Building Council UK. Net Zero Carbon Buildings: A Framework Definition (April 2019). Always look for most up to date guidance produced by Green Building Council UK. Refer to Advancing Net Zero webpage

i) RIBA Plan of Work and RIBA 2030 Climate Challenge

The 2020 RIBA Plan of Work specifies the tasks essential for the delivery of a sustainable design at each stage. The tasks are collated in the description of each stage separately and are also gathered in Section 7 - Sustainability Strategy – detailed tasks. It is recommended that designers and project managers use this guidance to guarantee smooth and cost efficient project delivery.

The RIBA has developed the 2030 Climate Challenge to help architects meet net zero (or better) whole life carbon for new and retrofitted buildings by 2030. It sets a series of targets for practices to adopt to reduce operational energy, embodied carbon, and potable water.

This guidance includes the RIBA 2030 Climate Challenge recommendations.

One of the aims of the RIBA 2030 Climate Challenge is the collection and disclosure of building performance data to develop a full understanding of issues and challenges associated with a buildings' related energy. Information gathered in the design and Post Occupancy Evaluation process should be shared through RIBA 2030 Climate Challenge.

Follow the link for more information.

j) Public Practice - How can authorities target the highest standards in energy performance for new council-led homes?

This set of documents produced by Public Practice explores how officers embedded within the Council's planning and development service can improve the quality of development and ensure that climate emergency pledges are implemented on the ground. The paper sets out an approach for officers who wish to make the case to senior leadership for targeting the Passive House Standard and net zero approach across their direct delivery housing programmes. The documents include, amongst others, Sustainability Lead Job Description Template, Low Energy Design Proposal Template, Passive House FAQs.

These documents can be helpful in education, procurement and delivery aspects of a Passive House or net zero projects for all involved parties.

Follow the link for more information.

k) London Energy Transformation Initiative LETI

The London Energy Transformation Initiative has been established to support the transition of London's built environment to net zero carbon, providing guidance that can be applied to the rest of the UK. LETI generated a library of data and easy to use documents, references, and guidance helping to understand and deliver low energy or net zero ambitions. This includes Embodied Carbon Primer, specific building type data Architype Pagers, and Net-Zero one Pager. Information by LETI is commonly used in the industry and has also been used to inform Midlothian Council Design Guide. Embodied Carbon Primer provides guidance in the following fields: How to measure embodied carbon, Life cycle assessment tools, Procurement, Designing for manufacture and assembly, Material guides, Whole life carbon, Offsetting, and Baseline specifications.

Follow the link for more information.

l) Designing Streets – A Policy Statement for Scotland

Streets exert an immense influence upon our lifestyles and behaviour. Street design also has a direct influence on significant issues such as climate change, public health, social justice, inclusivity, and local and district economies. Designing Streets recognises these pressures and seeks to build a collective response through the design of new streets and the regeneration of existing streets that is informed by as wide a range of issues and stakeholders as possible. Through the introduction of this policy, the Scottish Government seeks to ensure that specific interests are no longer promoted without an appreciation of the wider context. Collaboration and awareness between what have often previously existed as singular processes is vital if the aims of Designing Streets are to be met.

This guidance includes Designing Streets principles. Refer to the descriptive portion of the Place checklist.

Follow the link for more information.

m) Cycling by Design 2010 (2020 revision) – A Policy Statement for Scotland

Cycling by Design is published by Transport Scotland for use by practitioners throughout Scotland. The primary focus of the document is the establishment of guidance to ensure consistent and appropriate design. Transport Scotland requires consultants and contractors working on trunk road projects to follow the guidance within Cycling by Design. It is commended to local authorities and others developing cycling infrastructure in Scotland

Follow the link for more information.

n) Circular Economy Guidance for Construction Clients - How to practically apply circular economy principles at the project brief stage

UKGBC has published implementation packs on reuse and Products as a Service to assist built environment projects in adopting circular economy principles. Employing circular economy principles is one of the essential aspects of the net zero projects. It minimises the cost of residual carbon emissions offsetting.

Follow the links for more information:

Circular Economy

Circular Economy Implementation Pack

RIBA Stirling Prize Goldsmith Street Passive House Social Housing scheme by Mikhail Riches, Norwich City Council

LOCAL POLICY AND GUIDANCE

a) Scotland's Changing Climate – Midlothian's Climate Change Strategy

Midlothian Council declared a climate emergency in December 2019 and stated its ambition to achieve net zero status by 2030.The strategy acknowledges the Councils intent, reinforces the urgency for action and emphasises the necessity for change to mitigate and adapt to the impacts of climate change.

The Strategy and accompanying Action Plan set out a clear vision and set of objectives, to highlight what we can, and must do to combat climate change and highlights some of the challenges to achieving this. It focuses on a number of themes including Energy Efficiency; Recycling & Waste; Sustainable Development; Sustainable Travel; Business Processes; Carbon Management; Governance & Management; and Risk.

This guidance is a practical implementation of the Strategy and Action Plan and reflects the relevant content of those documents.

Follow the link for more information.

b) Midlothian Council – Local Housing Strategy 2021-2026

The Housing (Scotland) Act 2001 requires local authorities to prepare a Local Housing Strategy (LHS) for their area, supported by an assessment of housing need and demand. This Local Housing Strategy 2021 – 2026 is the sole strategic document for housing in Midlothian and as such, sets out the key housing issues to be addressed across all tenures in Midlothian. This LHS will embed equality issues into addressing

homelessness, procurement, housing advice, services, fuel poverty and energy efficiency/climate change, housing management services, allocations and private sector housing. The Local Housing Strategy's strategic vision for housing in Midlothian is that:

> All households in Midlothian will be able to access housing that is affordable and of good quality in sustainable communities.

Requirements for operational energy - Passive House and EnerPhit - and embodied energy - RICS Whole Life Carbon Assessment for the Built Environment - reduction in this guidance reflect chapter 10 Fuel Poverty, Energy Efficiency and Climate Change and Midlothian Council's 2030 Zero Carbon Aspirations.

> Housing in all tenures will be more energy efficient and fewer households will live in, or be at risk of, fuel poverty.

Follow the link for more information.

c) 2017 Midlothian Local Development Plan and policies

The 2017 Midlothian Local Development Plan sets out the development strategy for Midlothian for the next 10 years including the housing and economic land requirements identified in the The Strategic Development Plan (SDP). It also sets out the detailed policies used to determine planning applications in Midlothian. Sustainable economic growth, community

Sustainable economic growth, community and place-making, historical and natural environment protection, sustainable energy and waste management are embedded in the aims and objectives of the 2017 Midlothian Local Development Plan. This guidance is a practical implementation of the policies detailed is the Change to Local Development Plan (LDP) with a special attention on, but not limited to, the following policies:

- Sustainable Placemaking - DEV5, DEV6, DEV7

- Encouraging Sustainable Energy and Waste Management - NRG3, NRG 4, NRG 5, NRG 6

- The Council supports in principle the development of a wide variety of renewable energy and low carbon technologies to help meet and exceed national targets for developing energy and heat from such sources. It also encourages energy efficiency, heat recovery and efficient energy supply and storage in a manner appropriate to Midlothian. Accordingly, the MLDP provides a policy framework for the assessment of proposals which includes giving due regard to the relevant environmental, community and cumulative impact considerations.

- Compliance with all policies will be determined in the Planning Application Process. Full document is available here:

- The policies listed above are current at the time of writing this guidance. Pre-application consultations with Planning is required to secure compliance with all relevant policies current at the time of application.

All households in Midlothian will be able to access housing that is affordable and of good quality in sustainable communities

Burnbrae Road, Bonnyrigg, Passive House scheme by Smith Scott Mullan Associates
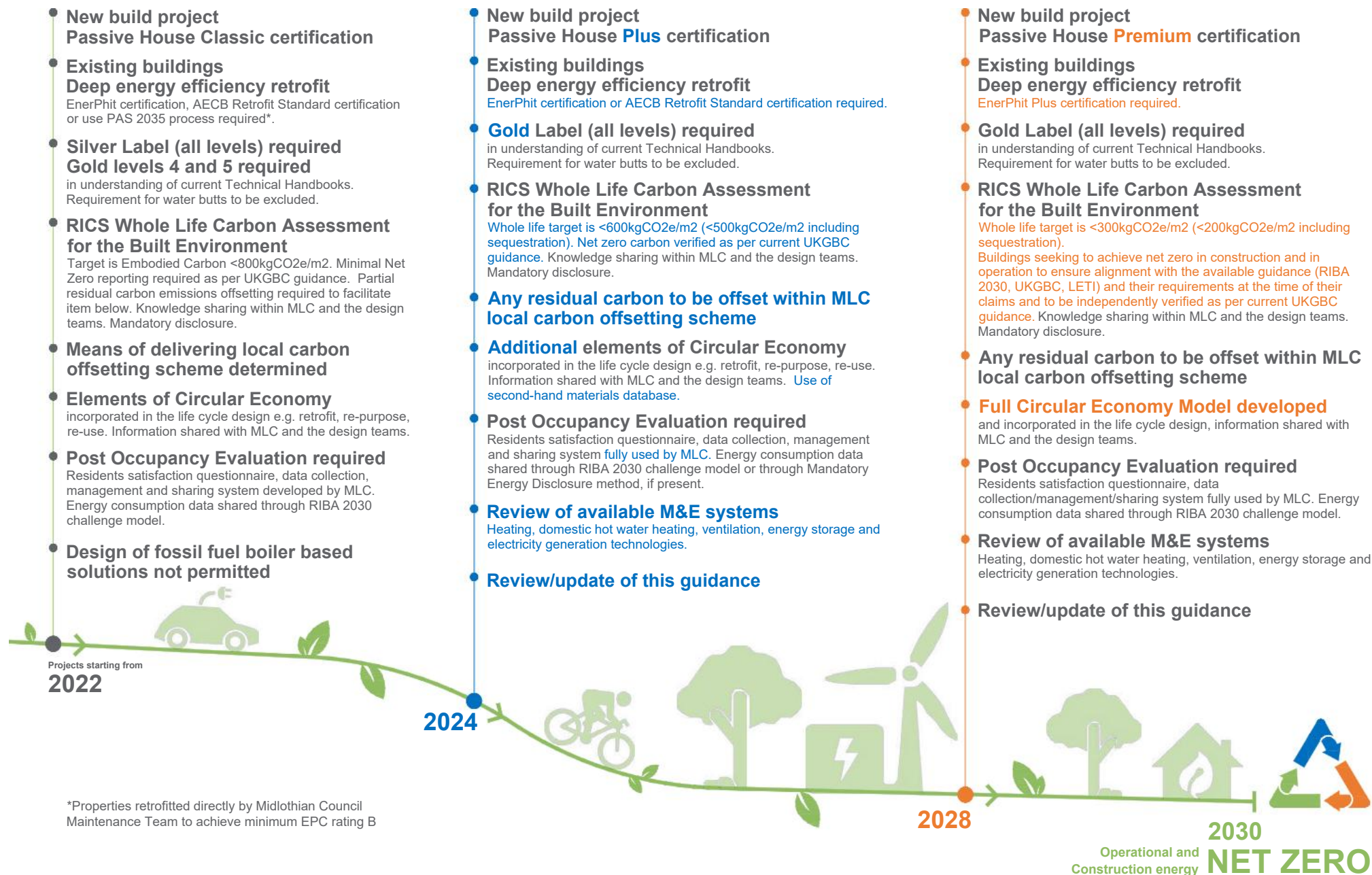
3. STAGED IMPLEMENTATION

UKGBC developed a Net Zero Whole Life Carbon Roadmap which has been published during COP26 in November 2021. The map clarifies the steps required to achieve full decarbonisation of the built environment in the UK by 2030. It includes developing complete Net Zero design solutions covering operational energy, construction, embodied energy, on site renewables and local offsetting. The Midlothian Council Net Zero Housing Design Guide roadmap overleaf is informed by the UKGBC's assumptions as well as RIBA 2030 Climate Challenge and LETI guidance.

It is recognised that the understanding of the challenges associated with transition to a Net Zero built environment is still not sufficient in many areas. Therefore the implementation of a full Net Zero approach has been staged up to 2030 to allow the design teams and contractors to develop required practical and theoretical skills, understand certification schemes and to form supply chains required to deliver the Net Zero projects.

It is also recognised that the understanding of some design aspects such as circular economy, are still at their infancy. At the same time heating and energy storage technologies and design strategies are changing and improving rapidly. It is expected that the design and construction industry will develop practical knowledge and best practice solutions to address these issues in the next couple of years.

As quickly as the technology changes so does the policy, legislation, and guidance change. Therefore, the Midlothian Council Net Zero Housing Design Guide will require regular review and update to reflect the latest available knowledge in order to facilitate a true transition to the Net Zero built environment.

All projects must meet the requirements specified on the roadmap on page 15 relevant in the year of starting the project.

2022 Column

New build project
Passive House Classic certification

Existing buildings
Deep energy efficiency retrofit
EnerPhit certification, AECB Retrofit Standard certification or use PAS 2035 process required*.

Silver Label (all levels) required
Gold levels 4 and 5 required
in understanding of current Technical Handbooks. Requirement for water butts to be excluded.

RICS Whole Life Carbon Assessment for the Built Environment
Target is Embodied Carbon <800kgCO2e/m2. Minimal Net Zero reporting required as per UKGBC guidance. Partial residual carbon emissions offsetting required to facilitate item below. Knowledge sharing within MLC and the design teams. Mandatory disclosure.

Means of delivering local carbon offsetting scheme determined

Elements of Circular Economy
incorporated in the life cycle design e.g. retrofit, re-purpose, re-use. Information shared with MLC and the design teams.

Post Occupancy Evaluation required
Residents satisfaction questionnaire, data collection, management and sharing system developed by MLC. Energy consumption data shared through RIBA 2030 challenge model.

Design of fossil fuel boiler based solutions not permitted

Projects starting from
2022

*Properties retrofitted directly by Midlothian Council Maintenance Team to achieve minimum EPC rating B

2024 Column

New build project
Passive House Plus certification

Existing buildings
Deep energy efficiency retrofit
EnerPhit certification or AECB Retrofit Standard certification required.

Gold Label (all levels) required
in understanding of current Technical Handbooks. Requirement for water butts to be excluded.

RICS Whole Life Carbon Assessment for the Built Environment
Whole life target is <600kgCO2e/m2 (<500kgCO2e/m2 including sequestration). Net zero carbon verified as per current UKGBC guidance. Knowledge sharing within MLC and the design teams. Mandatory disclosure.

Any residual carbon to be offset within MLC local carbon offsetting scheme

Additional elements of Circular Economy
incorporated in the life cycle design e.g. retrofit, re-purpose, re-use. Information shared with MLC and the design teams. Use of second-hand materials database.

Post Occupancy Evaluation required
Residents satisfaction questionnaire, data collection, management and sharing system fully used by MLC. Energy consumption data shared through RIBA 2030 challenge model or through Mandatory Energy Disclosure method, if present.

Review of available M&E systems
Heating, domestic hot water heating, ventilation, energy storage and electricity generation technologies.

Review/update of this guidance

2024

2028 Column

New build project
Passive House Premium certification

Existing buildings
Deep energy efficiency retrofit
EnerPhit Plus certification required.

Gold Label (all levels) required
in understanding of current Technical Handbooks. Requirement for water butts to be excluded.

RICS Whole Life Carbon Assessment for the Built Environment
Whole life target is <300kgCO2e/m2 (<200kgCO2e/m2 including sequestration).
Buildings seeking to achieve net zero in construction and in operation to ensure alignment with the available guidance (RIBA 2030, UKGBC, LETI) and their requirements at the time of their claims and to be independently verified as per current UKGBC guidance. Knowledge sharing within MLC and the design teams. Mandatory disclosure.

Any residual carbon to be offset within MLC local carbon offsetting scheme

Full Circular Economy Model developed
and incorporated in the life cycle design, information shared with MLC and the design teams.

Post Occupancy Evaluation required
Residents satisfaction questionnaire, data collection/management/sharing system fully used by MLC. Energy consumption data shared through RIBA 2030 challenge model.

Review of available M&E systems
Heating, domestic hot water heating, ventilation, energy storage and electricity generation technologies.

Review/update of this guidance

2028

2030
Operational and Construction energy NET ZERO

4. PROCUREMENT, QS AND PROJECT MANAGEMENT

PROCUREMENT

Procurement processes are to align with the Procurement Strategy 2018 – 2023 - Sustainable Procurement Duty. Consideration should be given to the impact of purchases on climate change, waste production or scarce materials. Improvement of air quality is to be considered through reducing carbon, nitrogen, and particle emissions; increasing energy efficiency; using sustainable energy sources; encouraging sustainable waste management; and through aiming towards maximising recycling within the supply chain.

Follow the link for more information.

RICS WHOLE LIFE CARBON ASSESSMENT FOR THE BUILT ENVIRONMENT.

The Quantity Surveyor is to provide whole life carbon analysis as per RICS Whole Life Carbon Assessment for the Built Environment. Refer to 3. Staged Implementation of this guidance section for the current targets.

Refer to 3. Staged implementation of this guidance for current maximum Embodied Carbon target. For efficiency and in order to minimise the cost (financial and carbon), the process should commence at the RIBA stages 1-2.

Follow the link for more information.

COST AND RISK

In calculating cost, the QS should consider the whole life savings and benefits (operational, marketing/sales, resilience, re-use), the commercial costs (rising energy prices, penalties, rent issues, requirement for future improvements), and the environmental risks (requirement for future improvements required to mitigate environmental disasters) associated with not meeting Zero Carbon requirements.

PRODUCT NAMING

The design team is to use the term "equal and approved" for the components/products critical for the design. Designers should determine whether the alternative proposal is "equal" and advise Midlothian Council. Change needs to be "approved" by Midlothian Council.

PASSIVE HOUSE PROCESS

A Passive House designer and certifier needs to be involved as early as RIBA stage 2 to facilitate efficient design development and to avoid hidden costs. Involvement of the contractor during RIBA stage 3 is also required for a successful Passive House procurement process. This facilitates realistic cost assessment and guarantees the contractors commitment to the design. It also mitigates the need for a costly VE process, and unexpected post-tender design changes affecting the quality of the design.

The following need to be considered in the procurement, design and programme process:

a) In order to provide suitable information for the PHPP model, a fully detailed design will be expected from consultants earlier than in a traditional design process. Additional information e.g. windows and doors specifics, DHW distribution, HVHR ducts etc. will also be required. Consultants should be advised about this at the time of appointment.

b) Sufficient time will be needed to generate PHPP models at each relevant stage. These periods need to follow a completed stage/activity. This is to avoid inefficiencies associated with overlapping of some of the processes e.g. PHPP modelling, liaison with certifier parallel to costing or market testing.

c) Sufficient time should be allocated for Passive House certifier assessments at each stage.

d) Sufficient time should be allowed for design review following Passive House certifier assessments.

e) Timber kit design should be included in the Structural Engineers scope. Introduction of a separate timber kit designer leads to blurring responsibility and adds an unnecessary level of complication when developing Passive House specific detailing.

f) Responsibilities for items falling between usual disciplines scope e.g. load bearing insulation needs to be clearly defined.

g) MVHR needs to be designed, constructed and commissioned by a Passive House experienced organisation.

h) MVHR design should be within the M&E consultant's scope. Specialist design services may need to be subcontracted.

i) Passive House designer's scope of service, relationship with Passive House certifier and relationship with contractor needs to be clearly defined for each stage.

j) Responsibility for thermal bridges modelling needs to be defined.

k) Site inspection responsibility, commissioning, managing certification process, relationship with Passive House certifier and Passive House design advice services during construction period need to be clearly defined.

l) The procurement method along with the goal, roles and responsibilities (e.g. who is responsible for naming the products) of each party, with additional attention to the contractor's role in context of Passive House design, needs to be clearly defined.

m) Full consideration of additional time, additional consultants and associated fees is essential to produce the correct programme.

n) Considering the complication of the process and the large number of parties affected it is recommended that cost and design change decisions are thoroughly considered e.g. value engineering process should take place only once to avoid programme and fee challenges.

o) Passive House experienced/trained design team members and contractors lead to lower final fees and shorter programmes.

p) It is advisable that key technical design information decisions are recorded and a change control process is put in place after the submission of the planning application.

q) It is strongly recommended that the architect, in liaison with the Passive House designer, provides advice on the Passive House design and certification process and its impact on statutory approval processes. Refer also to diagram on page 18.

ADDITIONAL CONTRACTOR'S RESPONSIBILITIES

a) Commissioning of the M&E systems to Passive House standard by a suitably trained team to be included in the contract.

b) Sound testing between flats/houses - designers/contractors must be RDL registered and have paid their registration fee. TBC if required

c) All PV and solar collector installers to be MCS accredited. All solar or PVs to be MCS approved. TBC if required

d) The contractor must ensure prevention of squeaking floors. Particular attention to be paid to buildings with anticipated high internal temperatures such as care housing. Floor creaking or undue flex of boards is not acceptable and will be deemed a defect.

e) The contractor is to test and confirm that hot water output temperature is achieved as designed.

f) Pipework routes below floors to be clearly marked to assist in future maintenance repairs.

g) The contractor is to provide a Tenant's Handbook/Quick start guide, Health and Safety file and Operation and Maintenance Manuals for each house. Where there is any partial possession or partial completion the contractor must provide relevant H&S information suitable for the safe occupation of the properties.
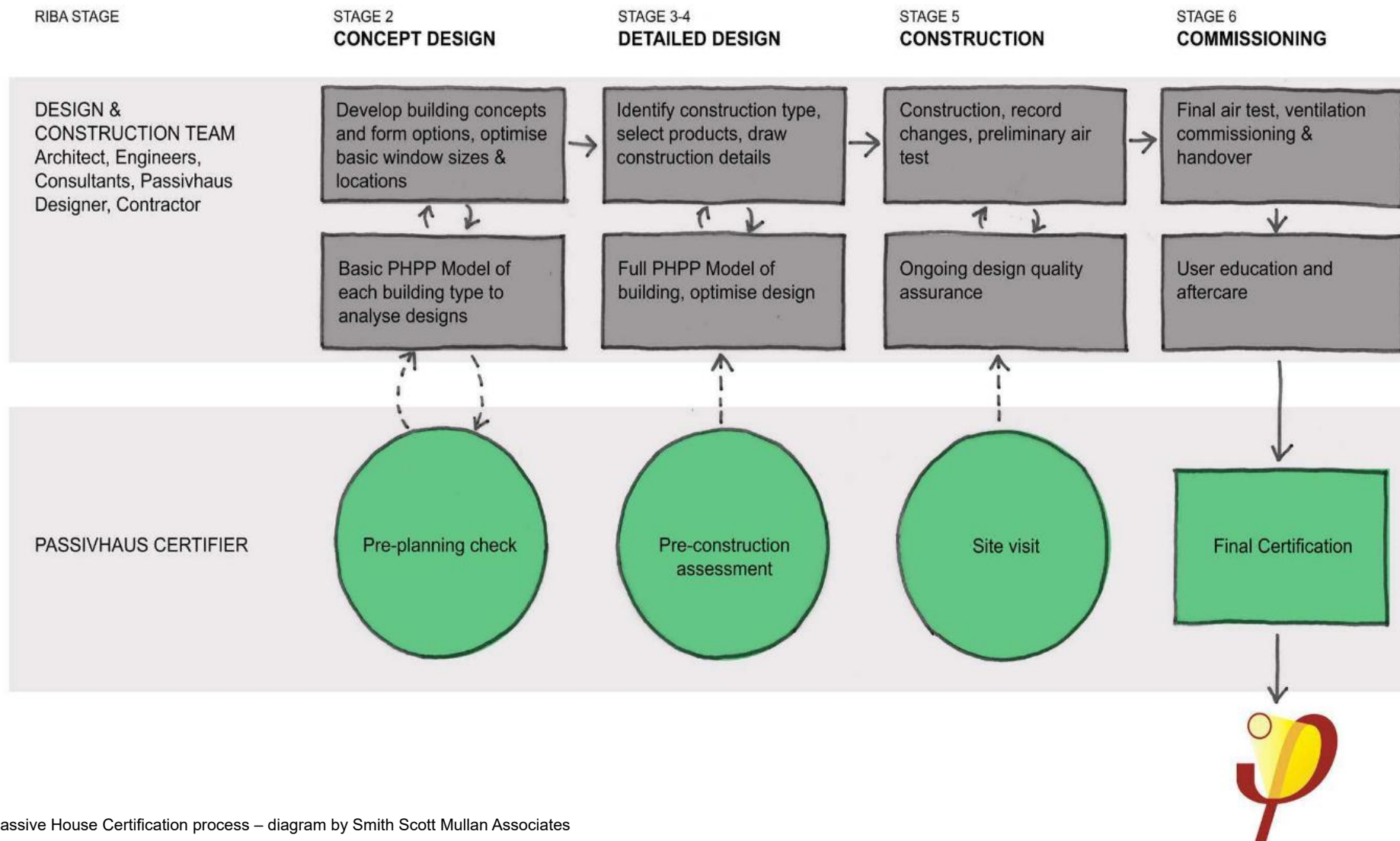
h) The contractor is to provide Environmental Product Declarations (EPD) for all products for architect's and QS's review, and to facilitate Embodied and Whole Life Carbon assessment.

i) All timbers used throughout the scheme are to be FSC & PEFC certified. No tropical hardwoods are to be used. Documentary evidence required.

j) All MDF used throughout the scheme is to be formaldehyde-free. Documentary evidence required.

k) Hard and soft landscape handover and maintenance for public and private spaces, number of inspection visits, on site meetings, defects liability period etc. to be as per typical Midlothian Council Landscaping NBS. Relevant references to be included in the contract.

For avoidance of doubts, including the above list in the contract should be considered.

RIBA STAGE	STAGE 2 **CONCEPT DESIGN**	STAGE 3-4 **DETAILED DESIGN**	STAGE 5 **CONSTRUCTION**	STAGE 6 **COMMISSIONING**
DESIGN & CONSTRUCTION TEAM Architect, Engineers, Consultants, Passivhaus Designer, Contractor	Develop building concepts and form options, optimise basic window sizes & locations	Identify construction type, select products, draw construction details	Construction, record changes, preliminary air test	Final air test, ventilation commissioning & handover
	Basic PHPP Model of each building type to analyse designs	Full PHPP Model of building, optimise design	Ongoing design quality assurance	User education and aftercare
PASSIVHAUS CERTIFIER	Pre-planning check	Pre-construction assessment	Site visit	Final Certification

Passive House Certification process – diagram by Smith Scott Mullan Associates

5. POST OCCUPANCY EVALUATION

Many buildings do not perform as planned - in some cases this can impact on running costs, residents and client satisfaction, and performance, health, safety and comfort. Midlothian Council is committed to learn from the past project to improve future ones. A Post Occupancy Evalutation (POE) system covering aspects listed below is currently being developed within Midlothian Council.

Liaise with project manager regarding current requirements for POE.

- Collecting, collating, and analysing building performance data and environmental data,

- Sharing relevant data within 2030 RIBA challenge process,

- Review of M&E services use, their practicalities, and challenges (MVHR, heat pumps etc.),

- Residents' satisfaction survey,

- Quick Start Guide for new residents.

Follow the link for more information.

6. DESIGN PRINCIPLES

The design objectives are the main principles which are considered as essential factors in the overall approach to design.

These principles are not intended to discourage innovative design or product development but provide a reference point from which the design and specification of each development can be brought forward.

It is recognised that at times design objectives may conflict and, in such cases, Midlothian Council will seek to adopt the best overall and most suitable solution in the context of the building's use and lifetime.

Cognisance to be taken of design principles contained within the Local Development Plan.

SUSTAINABILITY

The construction and the use of buildings are responsible for around 40% of all energy used in the UK. Considerate building design is therefore critical to fight the climate emergency. The following aspects of sustainability needs to be at the heart of the design of each housing project:

- Social sustainability - which includes health and wellbeing - this incorporates placemaking, biodiversity, the economy, walking communities, 20-Minute Neighbourhoods, sustainable transport, internal air quality, day lighting, play, heritage, inclusivity, accessibility, services, ageing population and local economy etc.

  Proposed designs to be inclusive and sensitive to social and physical challenges e.g. ageing population, learning difficulties, autism, physical disabilities etc.

- Energy efficiency - this includes minimising the operational energy demand (through Passive Housing, EnerPhit, PAS 2035 etc.), Post Occupancy Evaluation, recording and sharing data, and addressing fuel poverty.

- Minimising embodied energy – This includes avoiding demolition where possible, energy-efficient retrofits, retention of buildings for placemaking and heritage purposes, mass use of environmentally friendly materials with low embodied energy, avoiding overdesigning

and overspecification, designing for easy maintenance and conversion, designing for durability and long-life spans, designs incorporating circular economy principles.

BEST VALUE

This principle is inherent in the Council's policies and is integral to the project. Opportunities to achieve best value should be a constant throughout the design and construction period with emphasis placed on quality and life cycle cost/value engineering. Sustainability principles should not be compromised by VE process.

EFFICIENCY AND CLARITY OF DESIGN

Design only what is necessary and required. Designing out all unnecessary elements, areas, components, and process to reduce cost, maintenance, and carbon footprint. Promote clear boundaries, private entrances, allocated external spaces, minimise shared circulation etc.

Aesthetic values are considered essential in a high-quality place design.
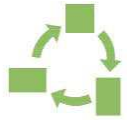
DESIGN FOR LONGEVITY AND FUTURE PROOFING, FLEXIBILITY AND ADAPTABILITY

It is crucial that housing provides lifelong comfortable living conditions by futureproofing through designing to current Housing for Varying Needs guidance.

Buildings to be designed and specified for expectancy of at least 60 years with flexibility allowing future adaptations. The sustainability of proposed methods of construction, systems and materials should consider long life cycles and where reasonable have local, long term sources of availability.

Design proposals should consider flexibility in layouts, including, for example, regularity of superstructure with opportunities to allow for different entrance arrangements, location and orientation within a similar format.

Building techniques and materials should allow for future adaptability. Fixed and unchangeable solutions, often leading to forced demolition, are considered a design error (e.g. shower pods that do not allow for future alterations).

INNOVATION

Innovation techniques leading to carbon use reductions that increase efficiency, inclusivity, affordability, and accessibility are encouraged. This includes the use of off-site construction methods, the introduction of new business models to ensure affordable homes based on the use of new lifelong accessibility solutions, and the use of innovative circular, recycled, and locally manufactured products. Any innovations should not compromise other requirements of this guidance.

Refer to Edinburgh Homes Demonstrator for possible solutions based on collaborative procurement, whole-life costings, pipeline coordination and greater use of modern methods of construction. Edinburgh Homes Demonstrator aims to transform the productivity and performance of affordable housing and to enable the move towards homes built to net zero carbon standards.

Follow the link for more information.

STANDARDISATION AND MODULAR APPROACH

The intention is to develop consistency of built areas, components, layouts, window and door openings etc., in order to enhance cost efficiencies and advantages to construction and maintenance and to unlock the circular economy potential.
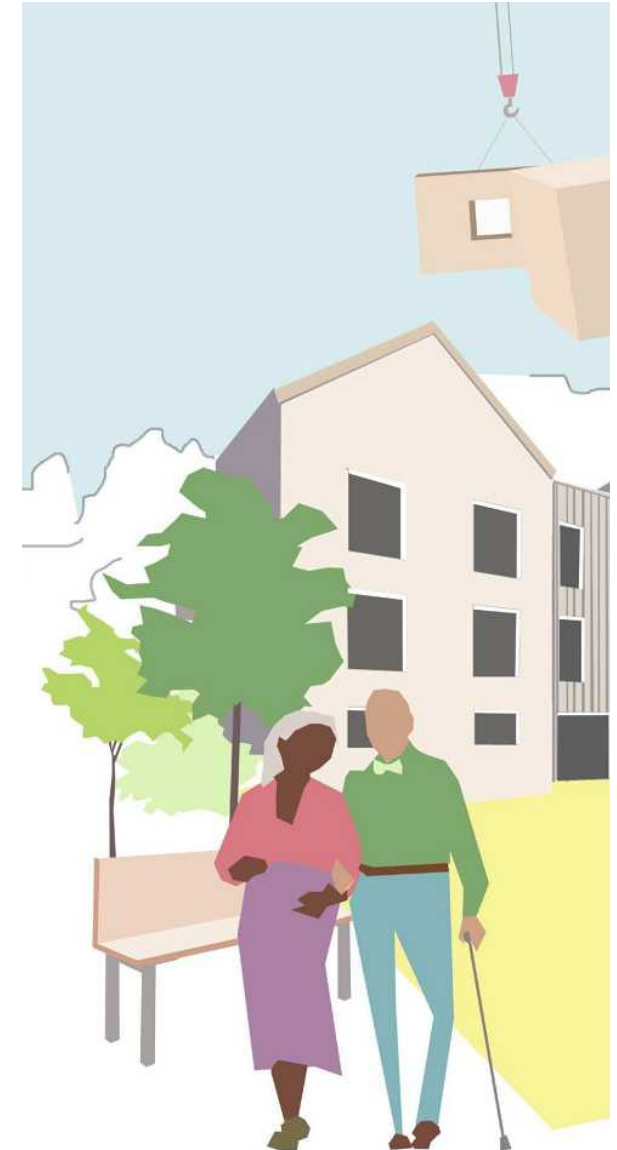
7. GENERAL REQUIREMENTS

Note: This section to be revised periodically as per 3. Staged Implementation of This Guidance. Always obtain current information from Midlothian Council.

a) If there is a discrepancy between any of the documents, seek agreement from Midlothian Council.

b) Midlothian Council Stakeholders – each project to be consulted with relevant Midlothian Council stakeholders. Consultees should be determined by project manager on project-by-project basis.

c) Note that all requirements covered by Technical Standard have been removed from this version of the guidance. Any requirements stated in this document are above the Technical Standards. All requirements of Technical Standards are to be adhered to as required by Building Warrant process.

d) All new buildings are to be designed and delivered as required to achieve Passive House Classic certification. All conversion and retrofit projects are to be designed and delivered to EnerPhit certification. Certification is required.

Passive House and EnerPhit certification minimises running cost, operational energy demand, requires high quality workmanship positively affecting the quality of the building, and minimises defects, lowers maintenance costs, reduces external noise pollution, and improves the internal microclimate/wellbeing.

e) Sustainability Labels - all units to achieve all levels of Silver Sustainability Label and levels 4 and 5 of Gold Sustainability Label (requirement for water butts to be excluded), as per current building standards. The designer must provide Midlothian Council with checklists clarifying design solution for all required aspects. It is the designer's responsibility to produce Sustainability Labels. In case of any methodology conflicts between SBEM and Passive House Certification, Passive House certification should take precedence.

f) Secured by Design accreditation is required for the entire scheme – site and buildings.

Secured by Design requirements should not compromise the quality of place e.g. by creation of a maze of fenced paths. Tailored solutions to be discussed with the SbD officer to achieve suitable high-quality, people friendly design.

g) Housing for Varying Needs (HfVN) compliance

- Base level: general needs – all units
- Older/Ambulant - all ground floor flats
- Wheelchair/Special Needs - as defined by Midlothian Council on project-by-project basis.

h) BIM

All Midlothian Council housing projects are required to meet Level 2 BIM in accordance with BS EN ISO 19650-1 and BS EN ISO 19650-2. This design guide must therefore be read in conjunction with other relevant Midlothian Council BIM documents, including in particular Midlothian Council's BIM Implementation Plan Design Team document, a copy of which will be provided to the design team at the outset of all projects.

It should be assumed that on a Design and Build project the design team will be responsible for managing BIM on the project until such time as a main contractor is appointed. On a traditionally-procured project the design team will remain responsible for BIM management for the entire duration of the project, although the main contractor will be responsible for delivering certain aspects of the BIM deliverables as appropriate to the individual project.

The development of a detailed approach is critical to the successful delivery of Level 2 BIM, relevant and appropriate to each individual project, through which Midlothian Council's project-specific requirements are identified and addressed. The design team will therefore be required to produce at the outset of each project a BIM Execution Plan (BEP) which responds to:

- the client's standard organisation-wide technical requirements as outlined in the BIM Implementation Plan Design Team document,

- the project specific requirements (including but not limited to, modelling standards, deliverables, asset data requirements (i.e. COBie) and clash detection standards) to be discussed and agreed with the client's project team. Specific consideration must be given to

asset data requirements for M&E aspects of each project, particularly on projects with enhanced sustainability or where renewable requirements are specified (i.e. Passive House).

Once approved by the client, the design team will be required to adopt the BEP, developing and updating it as required throughout the lifetime of the project.

All projects will be delivered from inception utilising Midlothian Council's Autodesk BIM 360 Docs portal as the Common Data Environment (CDE). Midlothian Council will be responsible for initially creating each new project within the BIM 360 Docs portal, but it will then be the design team's responsibility to set up the required filing structure appropriate to that project before maintaining and managing the project CDE. An identified member of the design team will be provided by Midlothian Council with administrator rights to the project CDE for this purpose.

8. CHECKLIST

Following checklists to be completed by each discipline consultant at RIBA stages 2 - 5. Completed check lists to be issued formally in PDF format to the Project Manager's for sign off.

i. Architect/design lead
Place Checklist - P clauses

ii. Architect/design lead
Building Design Checklist - B clauses

iii. Structural and Civil Engineer Checklist
S clauses

iv. Mechanical and Electrical Engineer Checklist
E clauses

Any non-compliance requires to be highlighted and clarified by the designer. The project manager will review the responses to all non-compliant items and advise on acceptance or otherwise.

The responses to clauses in the check lists are of two types:

Tick the box response.
Designer to confirm if the current design complies or not. In case of non-compliance the text box in the clarification column should be filled to provide justification for Project Manager's/Midlothian Council's approval.

Descriptive response.
There is no tick box against those clauses. Designer to briefly clarify how the compliance is achieved by filling the text box in the clarification column for Project Manager's/ Midlothian Council's approval.

Stage 2	Stage 3	Stage 4	Stage 5
Discipline checklist completed by responsible party	Discipline checklist completed by responsible party	Discipline checklist completed by responsible party	Discipline checklist completed by responsible party
Issue to the Client Sign off required	Issue to the Client Sign off required	Issue to the Client Sign off required	Issue to the Client Sign off required
Client's review (PM)	Client's review (PM)	Client's review (PM)	Client's review (PM)

ARCHITECT / DESIGN LEAD - PLACE CHECKLIST

Project Name:　　　　　　　　　　　　　　**Issued by:**

Project Stage:　　　　　　　　　　　　　　**Issued to:**

　　　　　　　　　　　　　　　　　　　　　　Date of Issue:

Ref.	Requirement	Compliance	Clarification if required
P.1	**General Requirements**		
P.1.1	Enquire with planning regarding their pre-application Planning Service. It is strongly recommended pre-application consultation with Planning takes place to facilitate successful delivery of the goals listed below.	☐	
P.1.2	Site analysis, tree survey, site investigation, ecological survey (Japanese knotweed, bats), asbestos, archaeological review should be carried our prior commencing site plan design to avoid abortive work.	☐	
P.1.3	Clarify which elements of circular economy have been incorporated in the design.	☐	
P.1.4	In understanding of and reference to Designing Street, A Policy Statement for Scotland, the following 6 qualities need to be incorporated in the design to achieve desired high quality of place and positively affect health, wellbeing, social and environmental sustainability.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.1.4.1	**Distinctive - Street design should respond to the local context to deliver places that are distinctive.** **Block structure** The urban form should be distinctive with landmarks and vistas that provide good orientation and navigation of an area. **Context and character** The requirements and impact of pedestrians, cycles and vehicles should be reconciled with local context to create streets with distinctive character. Opportunities should be taken to respond to, and to derive value from, relevant elements of the historic environment in creating places of distinctive character.	Clarification Required ▶ Clarification Required ▶	
P.1.4.2	**Safe & pleasant Streets should be designed to be safe and attractive places.** **Pedestrians and cyclists** Street user hierarchy should consider pedestrians first and private motor vehicles last. Street design should be inclusive, providing for all people regardless of age or ability. **Achieving appropriate traffic speed** Design should be used to influence driver behaviour to reduce vehicle speed to levels that are appropriate for the local context and deliver safe streets for all. **Reducing clutter** Signs and street markings should be kept to a minimum and considered early in the design process.	Clarification Required ▶ Clarification Required ▶ Clarification Required ▶	

Ref.	Requirement	Compliance	Clarification if required
P.1.4.3	**Easy to move around. Streets should be easy to move around for all users and connect well to existing movement networks.**		
	Connections within a place Street design should providen good connectivity for all modes of movement and for all groups of street users respecting diversity and inclusion.	Clarification Required ▶	
	Public transport Public transport planning should be considered at an early stage in the design process.	Clarification Required ▶	
	Junction types and arrangements Junctions should be designed with the considerations of the needs of pedestrians first. Junctions should be designed to suit context form – standardised forms should not dictate the street pattern.	Clarification Required ▶	
P.1.4.4	**Welcoming - Street layout and detail should encourage positive interaction for all members of the community.**		
	Walkable neighbourhoods Street layouts should be configured to allow walkable access to local amenities for all street users.	Clarification Required ▶	
	Streets for people Streets should allow for and encourage social interaction.	Clarification Required ▶	

Ref.	Requirement	Compliance	Clarification if required
P.1.4.5	**Adaptable - Street networks should be designed to accommodate future adaptation.**		
	Connections to wider networks Street patterns should be fully integrated with surrounding networks to provide flexibility and accommodate changes in built and social environments.	Clarification Required ▶	
	Integrating parking Parking (including cycle parking) should be accommodated by a variety of means to provide flexibility and lessen visual impact.	Clarification Required ▶	
	Service and emergency vehicles Street layouts should accommodate emergency and service vehicles without compromising a positive sense of place.	Clarification Required ▶	
P.1.4.6	**6. Resource efficient - Street design should consider orientation, the integration of sustainable drainage and use attractive, durable materials that can be easily maintained.**		
	Orientation Orientation of buildings, streets and open space should maximise environmental benefits.	Clarification Required ▶	
	Drainage Streets should use appropriate SUDS techniques as relevant to the context in order to minimise environmental impacts.	Clarification Required ▶	

Ref.	Requirement	Compliance	Clarification if required
	Utilities The accommodation of services should not determine the layout of streets or footways. **Planting** Street design should aim to integrate natural landscape features and foster positive biodiversity. **Materials** Materials should be distinctive, easily maintained, provide durability and be of a standard and quality to appeal visually within the specific context.	Clarification Required ▶ Clarification Required ▶ Clarification Required ▶	
P.1.5 P.1.5.1	In understanding of and reference to AD+S Carbon Conscious Place following 8 qualities need to be incorporated in the design to improve the quality of place and positively affect health, wellbeing, social and environmental sustainability. **A Place-Led Approach** Understanding, appreciating, and working with existing assets, the surrounding landscape, and the place identity. Using the right type of intervention, at the right stage, scale and location. Achieved by: Gathering and mapping baseline information. Engaging with community, local authority, developers, agencies, relevant local businesses, and service providers. Ensuring place quality is prioritised in all decisions and investments.	Clarification Required ▶	

Ref.	Requirement	Compliance	Clarification if required
P.1.5.2	**A Place of Small Distances** Creating complete and self-sufficient neighbourhoods with everyday/night services and facilities within a short walking or cycling distance (e.g. 15 minute place concept). Achieved by: Locating services within local Town Centres. Co-locating services together in Town Centres. Improving the connectivity and quality of active travel infrastructure. Enhancing digital connectivity. Improving the accessibility to services and public space. Supporting densification and mixed-use developments.	Clarification Required ▶	
P.1.5.3.	**A Network of Small Distance Places** Connecting complete neighbourhoods to provide a network of places that support greater self-sufficiency and low carbon living. Enabling people to live, work and play without generating unnecessary carbon emissions. Achieved by: Prioritising the investment in sustainable public transport networks. Taking an active and landscape infrastructure first approach. Using mapping to analyse the quality, quantity and accessibility of connections between places.	Clarification Required ▶	
P.1.5.4	**A Place Designed for and with Local People** Placing people's needs at the centre of decision-making, service provision and investment in our places and ensuring they are actively involved in key stages of the design process. Achieved by: Championing people-centred designed. Using co-design and collaborative engagement tools to involve local people and stakeholders from the beginning and throughout the project.	Clarification Required ▶	

Ref.	Requirement	Compliance	Clarification if required
P.1.5.5	**A Place that Reuses, Repurposes and Considers Whole Life Costs** Retrofitting existing structures and brownfield sites first, giving consideration to embodied carbon in place. Adding planting to existing hard infrastructure to support climate adaptation and carbon absorption. View structures as 'material banks' with components which are demountable, rebuildable, reusable and resaleable. Consider the cost of the entire lifecycle of a structure rather than only its initial capital costs. Achieved by: Undertaking an audit of existing land and structure to identify the existing structures, land and material which can be utilised.	Clarification Required ▶	
P.1.5.6	**A Place with Whole and Circular Systems** Enhancing, repairing, and joining up the different systems which support a healthy, carbon conscious place. This includes local food, heat, energy, water, green, habitat, transport, waste, housing and social systems. Using the landscape as a productive resource. Ensuring the place planning and delivery process understands and supports a whole and circular systems approach. Achieved by: Mapping systems to identify deficiencies and apply a co-ordinated approach that creates co-benefits, multiple outcomes and added value to address them.	Clarification Required ▶	

Ref.	Requirement	Compliance	Clarification if required
P.1.5.7	**A Place that Supports Sharing** Supporting the sharing of assets and services in places to enable lower carbon living and connect people to their neighbourhoods. From the micro to the macro - this can include sharing tools, bikes, electric vehicles to accommodation, and education facilities. Achieved by: Engaging with community, local authority, developers, agencies, relevant local businesses and service providers to identify opportunities for a sharing economy.	Clarification Required ▶	
P.1.5.8	**8. A Place Designed in Time** Ensuring the place planning and delivery process considers the dimension of time. This includes creating long term visions as well as using short-term approaches to test out interventions. Achieved by: Considering the timeline of a place and future evolution. Creating a long-term vision and building in review periods through the deliver to allow the plan to respond to and adapted to wider changes. Establishing long term place partnerships. Considering the phasing of delivery and developing meanwhile strategies to support both quick and long-term actions.	Clarification Required ▶	
P.1.6	**Public realm and green spaces considerations** As per Midlothian Council Local Plan and any Planning Conditions. Requirements to be determined in the pre-planning consultation process. Refer to Planning advice. Opportunity for community congregation, accessibility and suitability for all ages are integral elements of the design.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.1.7	**Public Consultations**, community engagement and codesign. This should be as per project specific Planning requirements, preferably determined in the pre-planning consultation process. Refer to Planning advice.	☐	
P.1.8	**Open space requirement** This should be as per project specific Planning requirements, preferably determined in the pre-planning consultation process. Refer to Planning advice.	☐	
P.1.9	**Play areas** Play areas provision should be as per project specific Planning requirements, preferably determined in the pre-planning consultation process. Refer to Planning advice. Play area design and equipment choice to be agreed in consultation with the Midlothian Council Land and Countryside department with consideration with the life spanof the equiptment and includsive play. Wheelchair access to play area to be provided.	☐	
P.1.10	**Public art** Public Art is encouraged and should be as per Planning requirements, preferably determined in the pre-planning consultation process. Refer to Planning advice.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.1.11	**Ageing population, accessibility** Seating opportunities to be provided in public realm areas and along key pedestrian links towards local amenities. Seating not to be within 10 m of a property where possible (social quality of life reasons) Emerging best practice solutions like suitable surfacing, sensory places, passive exercising etc. to be included in the design Refer also to street furniture clause P.5.5.	☐	
P.1.12	**Heritage and identity** All existing buildings/structures within the site should be considered for retention for carbon budgeting, heritage, sense of identity and placemaking purposes. All retained buildings to be converted as required to maximise their potential within the scheme. There is a strong preference against any demolitions. In the event of that demolition is proposed, justification needs to be provided. Use of the materials from the demolition within the site to be maximised.	☐	
P.1.13	**Density** Planning to advise on density suitable to achieve a critical mass requirement do maintain the local economy, social sustainability, public and active transport schemes. Requirements to be determined in the pre-planning consultation process.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.1.14	**Mixed use** (that blends residential, commercial, cultural, institutional, or entertainment uses into one space, where those functions are to some degree physically and functionally integrated, and that provides pedestrian connections) Proposals to be truly mixed use with a suitable variety of housing types and services provision including work from home opportunities. Existing uses in adjacent areas to be considered. Requirements to be determined in the pre-planning consultation process. Refer to Planning advice.	☐	
P.1.15	**Tenure** In the case of mixed tenure sites, different tenures should be integrated. The development should be tenure blind – the same design and quality should be provided for all tenures. A potential for an individual plot for a self-built project should be considered to improve the tenure mix, add to architectural interest, and to simplify navigation around the area.	☐	
P.2	**Building, Orientation and Site Layout**		
P.2.1	Midlothian Council places prime importance on the improvement of safety and security. Layout designs must incorporate the principles of defensible space, visual surveillance and control of spaces around buildings. Site layout, soft and hard landscaping to comply with 'Secured by Design'. Secured by Design requirements should not compromise quality of place e.g. by creation of a maze of fenced paths. Tailored solutions to be discussed with the SbD officer to achieve suitable high-quality, people friendly design.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.2.2	All units to have access to external spaces i.e. private gardens, shared gardens, balconies, roof terraces etc. Detached, semi-detached and terraced dwellings should each be provided with a private outdoor space that is free from direct overlooking from public areas and neighbouring property as far as possible. Permanent overshadowing of these areas should be avoided and, wherever possible, such spaces should enjoy good access to sunlight. Where flats are proposed amenity open space should be provided. These external spaces should should have good sunlight and be designed for residnets to enjoy.	☐	
P.2.3	The site plan should be developed considering existing levels and topography to minimise cut and fill and removal of material from site. Landscaping to be co-ordinated to avoid drainage towards entrance areas.	☐	
P.2.4	The positioning and type of buildings proposed for a site must be considered in conjunction with the external environment (presence of existing trees, site topography, sun path, existing buildings/structures, adjacent buildings, pedestrian links, local services).	☐	
P.2.5	Maximum consideration is given to orientation and outlook to ensure all dwellings receive natural sunlight. Living rooms should ideally face south, but subject to site wide context considerations (topography, access, trees and other site constraints).	☐	

Ref.	Requirement	Compliance	Clarification if required
P.2.6	Buildings to be orientated in a manner that maximises solar gain to improve energy efficiency and reduce the thermal envelope performance required to meet the Passive House criteria. Usually best orientation of the building is along the east-west axis. Potential for overheating to be considered and addressed as part of the Passive House process. Existing tree retention may be an efficient way of resolving any overheating issues.	☐	
P.2.7	Full advantage is to be taken of views through considered window positioning. An open outlook from the living room is desirable and where possible views onto communal drying areas should be avoided – although sight lines to washing lines are important.	☐	
P.2.8	In Wheelchair/Special Needs or Older/Ambulant housing an outlook from the bedroom is to be provided where possible.	☐	
P.2.9	Due to significantly higher energy efficiency (form factor) and lower economic and carbon cost, terraced housing is preferable over semi-detached or detached housing. There is a strong preference against arrangement in which a number of semi-detached or detached houses are located close to each other with minimal distance between the buildings.	☐	
P.2.10	There is a preference for higher density house types to maximise use of infrastructure, its cost and carbon weight. This also should support local services by increasing footfall.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.2.11	The effect of overshadowing is minimised. Any overshadowing to be considered in the Passive House process. Minimum distance to existing buildings should be as agreed with the planning department. Generally, the following distances should be considered as standard: - back-to-back distance, whether between single storey or two storey houses, of 25 metres; - between gable and rear of such property 16 metres; and - between the front elevations 22 metres. Refer to DP2 for exceptions. Refer to Planning advice.	☐	
P.2.12	Privacy is recognised as an important factor. Living rooms and rear private garden areas should not be immediately overlooked from public areas.	☐	
P.2.13	Effective barriers and screening arrangements are provided where private garden and similar areas are adjacent to heavily used public areas.	☐	
P.2.14	Private Gardens to Ground Floor Flats. Min 2.5-3m deep private garden space is required to the front and rear of all ground floor flats for privacy purposes.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.2.15	**Private Gardens** • to be usable and easily accessible • to be turfed in line with the specification for public grassed areas. • have reliable ground drainage. • to be designed to be maintained by tenant. • be predominantly flat, or at least capable of practicably being mown by any type of lawn-mower. • max slope 1 in 8 (12.5%) unless specific site circumstances dictate otherwise in which case consult client for approval. • in cases where the gradient would have to be exceeded, retaining structures and appropriate balustrading should be used. • Minimum garden sizes – Refer to DP1 for detail - 3 apartment houses – min 110m2 - 4 apartment houses – min 130m2 - 3 apartment terraced houses - min 100m2 – compensation possible in case of narrow gardens.	☐	
P.2.16	**Car Parking** Provision to be as per Midlothian Council Planning requirements. Design should take cognisance of surveillance by car owners. Large car park solutions should be avoided. Parking along the street should be broken every 5 parking spaces with a landscaped area, preferably with trees. Small parking courtyards are encouraged. Parking in front of the houses is not encouraged. Car parking provision should be designed to deter parking on roads where this restricts access for other vehicles. Pre-application discussion with the Road Services Department may be required to determine parking provision.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.2.17	Provision for rapid electric vehicle charging points and car club parking allowance as per Planning Department requirements. Ducts facilitating installation of EV charging point for each unit should be assumed as starting point. Pre-application discussion with the Roads Department is required to determine current requirements.	☐	
P.3	**Soft Landscaping**		
P.3.1	Existing biodiversity of the local area is to be maintained or enhanced by the landscape and building design of each individual site. Proposals must integrate natural landscape features and foster positive biodiversity by, but not limited to, introduction of new trees, green screens, living walls, biodiverse seed/planting mixes, rain gardens, above ground SUDS and swales. Tree canopy cover to be 21% of the site area. Design Lead to request/arrange a site specific biodiversity survey at design stage 1. Soft Landscaping design and maintenance strategy to align with Midlothian Local Biodiversity Action Plan 2019 or current equivalent or any other biodiversity design guidance provided by Midlothian Council. The design, including green and blue features, should be considered in the context of Midlothian Green Network.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.3.2	New tree planting will be used to define the edge of development areas within sites. The Forest Habitat Network (Forestry Commission Scotland) provides guidance in planning greenspace within new developments.	☐	
P.3.3	Provision of micro woodlands or allotments should be as per Planning requirements, preferably determined in the pre-planning consultation process. Refer to Planning advice.	☐	
P.3.4	There is strong preference to retain all mature and semi-matured trees for quality place and environmental resilience purposes - health, wellbeing and placemaking. Existing natural features should be considered as assets in the site layout. Should a tree deemed to be essential to be removed, all necessary permissions must be obtained prior to the removal. Tree replacement to be provided as per Planning department request. New canopy to be provided to match area removed. Semi-mature trees to be use in soft landscaping landscape design. Retained trees to be protected. Existing trees will be subject to Structural Engineer/ Specialist Arborist Reports with all works and recommendations included.	☐	
P.3.5	The layout should incorporate a low maintenance communal feature garden area accessible by all flats.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.3.6	All areas of soft and hard landscape design should be used to reinforce security and privacy to dwellings and support footpath links by preventing short-cutting and erosion of edges.	☐	
P.3.7	Soft landscaping and planting should be designed to ensure suitable cover and with low maintenance in mind.	☐	
P.3.8	All private and public lawns/grassed areas to be a biodiverse mix.	☐	
P.3.9	Some early flowering (feb/march) bulb areas within grass areas to be incorporated. These areas could also be sown as wild flower areas.	☐	
P.3.10	All house gables in public areas should have features or planting to discourage ball games.	☐	
P.3.11	Shared amenity spaces should be designed to be used by small groups of households. Large grassed areas should be designed to deter ball games where there is a risk of disturbance to adjacent properties, whether council or private.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.3.12	Local food production opportunities, vegetable patches/gardens, community gardens should be considered and discussed with the client on a project-by-project basis. This has significant impact on built environment resilience, social sustainability, and biodiversity.	☐	
P.3.13	**SUDS/Swales** Compliance with SUDS requirements should favour above ground water storage in preference to below ground tanks to provide a solution with biodiversity advantages and to increase resilience and flood protection. Take cognisance of a full range of surface water drainage management approaches when designing site layouts, allowing for easy maintenance. Avoiding deciduous planting to be considered to reduce future maintenance. All proposals must be to adoptable standards with a letter from Scottish Water to state the adoptable date and maintenance schedule. This may include CCTV evidence of fully working systems at the end of the Defects Liability Period.	☐	
P.4	**Hard Landscaping**		
P4.1	All ramps that are part of the access to a dwelling or within the curtilage must be designed to the DDA Regulations, HFVN, barrier free best practice and the Building Standards (Scotland) Regulations. Unprotected drops must be avoided. Upstands or protective barriers should be included where necessary to avoid trip hazard.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.4.2	**Path finishes - general** Unless required for placemaking or Planning reasons, there is a preference for asphalt wearing course paths to reduce use of weed killer and prepare for a possible future weed killer ban. Adoptable footpaths to be finished in an asphalt wearing course to Local Authority requirements. Use of differing chip colour to distinguish different uses should be considered.	☐	
P.4.3	**Paths within the Curtilage of Buildings** Paths within the curtilage of buildings to comply with HfVN guidance. Access paths to all dwellings must: • be step free and suitable for wheelchair users. • must not be gravel or chipped. • have a gradient of less than 1:20 or otherwise be treated as a ramp • be at least 900mm wide but preferably 1000mm wide where serving one or two dwellings • be at least 1200mm wide where serving more than two dwellings • be at least 1200mm wide for dwellings for wheelchair users.	☐	
P.4.4	**Paths to refuse storage must:** • be clear 900mm wide and be step free • be clear 1200mm wide at any sharp turn for wheelchair standard dwellings. • Meet the requirements for crossfall and edgings, as for public pavements and paths	☐	

Ref.	Requirement	Compliance	Clarification if required
P.4.5	**Public paths design principles.** Public paths design to meet following requirements: • Access paths should be designed in accordance with the requirements of Midlothian Council Roads Section and be constructed to an adoptable standard. • Paths should avoid through routes but maintain direct links to main roads. • The footpath network should reinforce the separate identity of dwelling groups and limiting their use to residents in that particular area. • Secluded footpaths should be avoided. • Public footpaths should not be located to the rear of dwellings. • Paths should be given interest and character. • Right angle turns should be avoided. • Paths should not intrude into private dwelling space. • Shared access paths for large numbers of flats should be avoided. • Locating footpaths close to ground floor level windows should be avoided to ensure reasonable privacy for ground floor tenants. • Pends are not acceptable. May be permitted where rear paths are not viable e.g. sloping ground levels. Confirm with Midlothian Council.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.4.6	**Public Paths technical requirements.** Public paths and ramps should: • provide step free routes around the entire site; • have a continuous slope where the gradient is not greater than 1:30; • for gradients between 1:20 and 1:30 there should be rest intervals not greater than 18 metres apart; • be classified as ramps if steeper than 1:20; • generally, to have a minimum width of 2000mm • shared pedestrian/cycle paths to have a minimum width of 3000mm • have a minimum width of 1200mm for short lengths or paths leading to more than 4 dwellings; • have a crossfall gradient not greater than 1:100 and deal effectively with water runoff; • have hard, firm and slip resistant surface; • avoid unprotected drops and have upstands of 100mm where appropriate; • have dropped kerbs and road crossing points; • require handrail facilities at all steps and ramps which constitute part of the slope. • all spaces should have robust ground drainage systems and ensure that there are no large puddles or water lying three hours after heavy downpour. • drop pavement crossings must be provided in both directions at all road crossing points. • road crossing points should have a camber not greater than 1:20 and a crossfall at right angles not greater than 1:40. The area in front of the dropped kerb should be free from channels or gulleys.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.4.7	**Hardstanding Areas** Hardstanding areas for grit/salt bins must be provided on an individual basis. Location(s) should be agreed with Midlothian Council.	☐	
P.4.8	**Roadways** Access roadways should generally be designed in accordance with the requirements of the Midlothian Councoil Road Service department and be constructed to an adoptable standard. Road surfaces should be kept to a minimum. Drop kerbs to be provided at all entrances and at road crossing points. Roadways to be finished in an Asphalt wearing course to Local Authority requirements. Use of different chip colour for different uses should be considered. Non-adoptable roads and footways only: other finishes, like block paving, are encouraged for placemaking and pedestrian friendly design purposes as described in Designing Streets – A Policy Statement for Scotland. This to be agreed with Midlothian Council on case-by-case basis.	☐	
P.4.9	**Parking Bays** Parking bays to be brown asphalt wearing course and painted with bay markings. Use of different chip colour for different uses should be considered. 450mm hard surfacing required beyond kerb line for car overhang and access egress from vehicles. Non-adoptable roads and footways only - other finishes, like block paving, are encouraged for placemaking and pedestrian friendly design purposes as described in Designing Streets – A Policy Statement for Scotland. This to be agreed with Midlothian Council on case-by-case basis.	☐	

Ref.	Requirement	Compliance	Clarification if required
P.4.10	Mowing strip at house wall - 50mm concrete heel kerb laid on side or gravel strip. This should be coordinated with level access to provide smooth transitions and avoid telescopic gas vents being covered.	☐	
P.4.11	Small landscape areas which are too small for effective grass seeding are to be designed out. If un-avoidable, a suitable planting solution is to be proposed.	☐	
P.4.12	Use of recycled plastic surface materials for the repair and resurfacing of roads or other innovative sustainable/circular economy solution is encouraged in suitable locations. Each case to be discussed/agreed on a case by case basis with Midlothian Council Roads department.	☐	
P.5	**Other Components**		
P.5.1	**Fencing and boundary treatment** All fencing to be as per Secured by Design requirements. All non-essential fencing should be deleted. Fencing to be designed to provide high quality space. Reducing fencing requirements to be discussed with SbD officer. • Between private gardens and common areas - 1.8m timber fence with timber gates. • Boundaries between private gardens - 0.9m high post and wire • Front gardens - evergreen hedges are preferable over trip rails • Edging details should allow for grass cutting/boundary definition and clearance at low level vents etc. • Hedgehog gaps in fencing required	☐	

Ref.	Requirement	Compliance	Clarification if required
P.5.2	**Gates** • Gates must be minimum of 1000mm for individual gardens. • Gates must be minimum of 1200mm for communal areas. • Gates should open beyond 90º. • The gate latch should be reachable and openable from a wheelchair on either side of the gate. • Where gates give access to rear gardens and are lockable, locks should be located at a height of 900 - 1050mm above ground level. • Gates for access to shared gardens to be fitted with heavy duty galvanised hinges and catches. • Ensure opening widths are coordinated to allow access for gardening equipment.	☐	
P.5.3	**Bin Stores** • Designer is responsible for consulting Midlothian Council Waste Team to determine bin size and type expected to be in use at time of handover. • Individual dwellings require space provision for three plastic bins: grey, blue and brown, subject to agreement with Midlothian Council Waste Services. • If individual bin enclosures in front of terraced housing are proposed, they should be constructed of a robust material complementing the building's architecture. Timber enclosures are not acceptable. • Common Bin Stores should be of brick construction for robustness. • Communal bin stores should have clearly defined areas for each dwelling. • Stores to be located to encourage ease of use by tenants, close to entrances but taking cognisance of surveillance. • Drainage/gulley required	☐	

Ref.	Requirement	Compliance	Clarification if required
P.5.4	**Drying areas** All dwellings must have convenient access to drying areas with good surveillance. In blocks of flats there must be access from the communal entrance area to a communal drying area. Ground floor flats to have drying area within own gardens. Access to drying areas must: • not be stepped, • be paved by level pathways (gravel or chipped surfaces not accepted), • have level threshold at wheelchair user housing, • avoid gates to communal drying areas (unless increased security is required, refer to Secured by Design process), • be accessible from public road/parking for maintenance • have rotary dryers to be provided for houses and poles for flats. Pole height (rope) at 1.8m. Drying areas to be a minimum of 1.8m away from shrubs/plants/walls and fences and so designed as to ensure clothes/objects being dried are not fouled by shrubs/plants/walls and fences.	☐	
P.5.5	**Street Furniture** Street furniture such as lamp posts, signs, benches etc. should be positioned so as not to cause an obstruction or a hazard to people with impaired sight. All furniture should be out of the line of travel but adjacent to the path or pavement. Refer also to P.1.11 Ageing Population, accessibility clause. Bollards may be used where required to improve road safety and reduce issues of inconsiderate / illegal parking or vehicle encroachment into pedestrian / landscaped areas. Each case to be discussed/agreed on a case by case basis with Midlothian Council Roads department. Seating and other street furniture is required to be durable. Example materials: steel, recycled plastic or hard wood	☐	

Ref.	Requirement	Compliance	Clarification if required
P.5.6	**Bicycle Storage** To be as per Planning requirements. Where single metal containers are proposed these should be the vertical type to discourage climbing. Green/blue roofs are encouraged.		
P.5.7	**Garden Sheds** Garden sheds are not to be provided unless instructed by Midlothian Council.		

ARCHITECT / DESIGN LEAD - BUILDING DESIGN CHECKLIST

Project Name:

Project Stage:

Issued by:

Issued to:

Date of Issue:

Ref.	Requirement	Compliance	Clarification if required
B.1	**General Requirements**		
B.1.1	Clarify which elements of circular economy and low embodied carbon/natural materials have been incorporated in the design.	☐	
B.1.1	Building to be designed to obtain Passive House or to EnerPhit certification as specified in General Requirements.	☐	
B.1.2	HfVN Base level: general needs – Provide HfVN checklist. Client to be clearly advised about any non-compliance.	☐	
B.1.3	HfVN Older/Ambulant - all ground floor flats – Provide HfVN checklist. Client to be clearly advised about any non-compliance.	☐	

Ref.	Requirement	Compliance	Clarification if required
B.1.4	HfVN Wheelchair/Special Needs – Provide HfVN checklist. Client to be clearly advised about any non-compliance.	☐	
B.1.5	Any non-compliance with HfVN requirements to be clarified with Midlothian Council and approved.	☐	
B.1.6	All double bedrooms should allow for a twin bed layout – twin room arrangement to be shown in dashed line on GA plans in addition to double room arrangement.	☐	
B.1.7	Double bedrooms area to be no less than 11.5m2. Area should include built-in wardrobe if present	☐	
B.1.8	Single bedrooms area to be no less than 7m2.	☐	
B.1.9	Silver Label – all aspects as specified in General Notes.

Requirement for water butts to be excluded.

Refer to Section 7 of current Technical Handbook – Domestic. All additional elements (e.g. sockets, compliant desk and recycling space, sanitary fittings specification requirements) to be shown on the drawings. Provide check list to Project Manager. Client to be clearly advised about any non-compliance. | ☐ | |

Ref.	Requirement	Compliance	Clarification if required
B.1.10	Gold Label – aspect 4 and 5 as specified in General Notes. Refer to Section 7 of current Technical Handbook – Domestic. All additional elements (e.g. sockets, compliant desk and recycling space, sanitary fittings specification requirements) to be shown on the drawings. Provide check list to Project Manager. Client to be clearly advised about any non-compliance.	☐	
B.1.11	The Design Proposals should allow for future Designing for Dementia adaptations: merging kitchen and living room in an open space arrangement, access to bathroom directly from one of the bedrooms.	☐	
B.1.12	Internal bathrooms should be avoided where possible.	☐	
B.1.13	Min 200mm distance between the edge of WC pan and any other sanitaryware should be maintained.	☐	
B.1.14	Superstructure should incorporate repetetive window/door openings sizes where possible. The principle of repetetive dimensions is intended to allow for future flexibility and potentail for nterchangeability.	☐	
B.2	**Access to dwellings, stairs**		
B.2.1	Private stairs to cottage flats must be enclosed and hall areas heated.	☐	

Ref.	Requirement	Compliance	Clarification if required
B.2.2	Two storey flats should have a private stair.	☐	
B.2.3	Three storey flats require a communal stair.	☐	
B.2.4	There should not be more than six flats related to one block with a maximum of four flats accessed off one stair, unless specifically approved by the client as a result of specific planning and urban design requirements.	☐	
B.2.5	Ground floor flats should preferably be accessed from a private entrance – not a shared stairwell and provide easy access to private garden areas.	☐	
B.2.6	Avoid high ceilings in private stairwells which are difficult to decorate. Consideration should be given to changing light fittings. This also applies to two storey flats/cottage flats design. Ceiling to be sloped and to follow the line of stair. The space above stair should be considered for additional storage.	☐	
B.2.7	Handrails for older persons/ambulant flats should be designed but not installed unless requested by an Occupational Therapist.	☐	

Ref.	Requirement	Compliance	Clarification if required
B.2.8	Common Stair and Landings The design of all common internal areas should ensure the benefit from a good level of natural light. Stairs and landings are to be finished in proprietary safety non-slip flooring with coved skirtings. The balustrading and handrails should be safe and easily maintained. Stair nosing should be clearly seen, permanent, non-split and mechanically fixed. Stairwell wall finish needs to be robust min up to 1300mm to withhold traffic abuse (e.g. cement plaster on hard, two layers of durable plasterboard on SFS).	☐	
B.3	**Floors**		
B.3.1	It is a designer's responsibility to ensure that proposed floor construction meets: • Current Technical Standards and associated guidance e.g. , • Robust detailing guidance, • Latest version of the Scottish Government document Example construction and generic internal constructions: For use with Section 5: Noise of the Technical Handbooks. • Sustainability Label requirements as per current Technical Handbook - Domestic • Passive House certification requirements in understanding of airtightness, fire, acoustic and thermal performance.	☐	

Ref.	Requirement	Compliance	Clarification if required
B.3.2	Ground floor general example: • 22mm flooring grade tongue and groove glued joints moisture resistant chipboard on • vapour barrier on • battens forming services void and allowing future level access shower tray installation. • on concrete slab • on slip membrane if required • on insulation • on DPM/Gas protecting membrane on • blinding and compacted hardcore. Refer to Structural Check list for gas defence measures requirements.	☐	
B.3.3	A gulley is to be provided in the bathroom to accommodate future installation of a wet floor shower. Future shower area, associated gulley and drainage connection to be located in a manner allowing Technical Handbook compliant activity spaces.	☐	
B.3.4	All floorboards to be moisture resistant 22mm flooring grade tongue and groove moisture resistant chipboard.	☐	
B.3.5	Airtightness line needs to be determined and shown on all GA and detail drawings for construction and maintenance purposes.	☐	

Ref.	Requirement	Compliance	Clarification if required
B.4	**Roofs**		
B.4.1	It is a designer's responsibility to ensure that proposed roof construction meets current Technical Standards and associated guidance, Current Sustainability Label and Passive House certification requirements in understanding of airtightness, fire, acoustic and thermal performance requirements.	☐	
B.4.2	The airtightness line needs to be determined and shown on all GA and detail drawings for construction and maintenance purposes.	☐	
B.4.3	Flat roofs are not a preferred option unless as a result of planning, landscape or biodiversity considerations. Use of roof type should be considered on a site by site basis. Flat roofs could be considered if utilised as rain gardens, green or blue roofs to enhance biodiversity and assist with storm water management.	☐	
B.4.4	Attic space. There is a strong preference that all roof voids are designed as non-accessible. If a roof space does require to be accessible it needs to be provided with an insulated, airtight, and suitably fire rated lockable access hatch in line with Passive House certification requirements. Crawl boards to be provided where required. Installation to not affect the insulated envelope.	☐	

Ref.	Requirement	Compliance	Clarification if required
B.4.5	Fascias and soffits to be recycled PVC. They should be detailed and installed to withstand severe weather conditions, avoid disfiguration and be suitable for long term use and low maintenance.	☐	
B.4.6	Downpipes Internal downpipes are not acceptable. All gutters and downpipes shall be of a standard low maintenance uPVC. uPVC to be recycled. The number of downpipes shall be kept to a minimum and positioned to hide any movement joints.	☐	
B.4.7	Barrels for rainwater storage/use are not to be provided. Use of rain gardens is encouraged.	☐	
B.4.8	Weather protection/Entrance canopy Min 750mm deep sheltered area to the external front entrance doors should be provided to entrance doors to flats and houses.	☐	
B.5	**External Walls**		
B.5.1	It is a designer's responsibility to ensure that proposed external wall construction meets current Technical Standards and associated guidance, current Sustainability Label and Passive House certification requirements in understanding of airtightness, fire, acoustic and thermal performance requirements.	☐	

Ref.	Requirement	Compliance	Clarification if required
B.5.2	The airtightness line needs to be determined and shown on all GA and detail drawings for construction and maintenance purposes.	☐	
B.5.3	Use of feature green walls/vertical gardens is encouraged in appropriate locations.	☐	
B.6	**External door and windows - general**		
B.6.1	Level access to be provided to all external doors (communal, main doors, and garden door)	☐	
B.6.2	Windows/External Doors thermal performance/detailing and installation to reflect Passive House Certification requirements.	☐	
B.6.3	Doors to be detailed/coordinated/installed with a robust weather sealing system/rain deflector to prevent wind and rain penetration.	☐	
B.6.4	External doors and Windows must be Secured by Design certified.	☐	

Ref.	Requirement	Compliance	Clarification if required
B.6.5	Flat/House external entry door ironmongery. Security chains and peep holes, door numbers, thumb turn required. Thumb turn to be installed at 1400mm height to deter a child to exit unsupervised.	☐	
B.6.6	Landscaping to be co-ordinated to avoid drainage towards entrance area. Suitable drainage at the door to be provided as required.	☐	
B.7	**Communual entrance doors**		
B.7.1	Main Communal Entrance Door - should open inwards and have adequate vision panels.	☐	
B.7.2	Secondary Communal Entrance Door - should open outwards and have adequate vision panels.	☐	
B.7.3	All ironmongery should be robust enough to withstand frequent long- term use.	☐	
B.7.4	Door closure time should be 60 seconds.	☐	

Ref.	Requirement	Compliance	Clarification if required
B.7.5	Doors to be detailed/installed with a robust weather sealing system/rain deflector to prevent wind and rain penetration.	☐	
B.7.6	**Access strategy – intercom and ironmongery** Access to be controlled by an electronic key fob at the door. Key fob be capable of mastering arrangements to suit Midlothian Council requirements, including being suited with a pre-existing master fob and fobs for other properties within Midlothian Council. Remote activation in each flat via an audio installation with quality handset suitable for long term use. Wiring to allow for future video/audio installation. Vandal proof specification to be agreed with Midlothian Council. Rear access doors should be controlled by the electronic fob without any remote activation on the outside.	☐	
B.7.7	A turn button should be provided on the inside face of front and back communal door.	☐	
B.8	**Windows/Patio Doors**		
B.8.1	Windows to be tilt and turn or fully reversible and allow safe cleaning from the inside.	☐	

Ref.	Requirement	Compliance	Clarification if required
B.8.2	Windows to be uPVC Timber may be preferred in certain instances if required in specific planning or conservation context.	☐	
B.8.3	Handle type and operation to be robust and be easily operated. Additional attention to be given to lower location of a handle above kitchen worktop. Refer to HfVN guidance.	☐	
B.8.4	Locks to be provided to all windows and French doors/juliet doors/ patio doors except where window is an escape window. These locks should deter use by a child but be able to be overridden to allow full opening. Window restrictors with an override option required. Use of door as the only means of openable natural ventilation in bedrooms or living rooms not acceptable.	☐	
B.8.5	**Bathroom Glazing** All bathrooms / wc's should have 'reed' type glazing.	☐	
B.8.6	French doors/juliet doors/patio doors should not have any fixed central mullion between the leaves	☐	

Ref.	Requirement	Compliance	Clarification if required
B.8.7	Glazed panel next to flat/house doors is not permitted.	☐	
B.9	**Internal doors**		
B.9.1	**Fire Doors, door closers** Delayed action Perko style door closers required within the dwellings. Delayed action overhead door closers to be used in the communal areas.	☐	
B.9.2	**Door widths** Min 926mm doors allowing 800mm clear width required. Refer to HfVN for overwriting requirements.	☐	
B.9.3	Fire doors to be certified as entire doorsets. Any adjustments should not compromise certification.	☐	
B.10	**Finishes and linings**		
B.10.1	**Shower Enclosures** All shower enclosures to be lined with impervious, hygienic sheeting/panels min up to 2m. Tiling is not accepted.	☐	
B.10.2	**Bath surrounds** All bath surrounds to be lined with impervious, hygienic sheeting/panels/wet wall up to 2m. Tiling is not accepted	☐	

Ref.	Requirement	Compliance	Clarification if required
B.10.3	**Bathroom/shower room floor finish** Slip resistance floor finishes to be provided to bathrooms and shower rooms. Linoleum preferred over vinyl due to the linoleum's low environmental impact		
B.10.4	Robust construction/plywood lining/pattressing to be provided as per HfVN and technical standards		
B.10.5	Refer to Stair section for stair finishes ref. B.2.8		

STRUCTURAL AND CIVIL ENGINEER CHECKLIST

Project Name:

Issued by:

Project Stage:

Issued to:

Date of Issue:

Ref.	Requirement	Compliance	Clarification if required
S.1	Clarify which elements of circular economy and low embodied carbon/natural materials have been incorporated in the design.	☐	
S.2	It is recognised that overdesigning and over-specification adds significantly to the mass of structure and therefore its cost and its carbon footprint. The design of the structure should be developed to minimise the embodied energy and environmental impact of the materials used.	☐	
S.3	Structural Engineer to propose solutions that are suitable for Passive House e.g. considering thermal envelope penetrations, thermal bridging etc.	☐	
S.4	Design for climate resilience – designer to undertake a climate change assessment to understand current local climate impacts and future risks. Proposal to incorporate the conclusions.	☐	

Ref.	Requirement	Compliance	Clarification if required
S.5	Recycled steel reinforcement required	☐	
S.6	Sulphate resisting mortar (must contain lime) required	☐	
S.7	**Low Carbon Concrete Specification** Structural Engineer should refer to MPS The Concrete Centre Specify Sustainable Concrete Low carbon concrete as outlined below to be specified for each project and presented to the Project Manager as on option for costing comparison with standard concrete specification. Structural Engineer to specify low embodied carbon concrete mix where possible (refer to BS EN 206) with maximised use of locally available SCMs (supplementary cementing materials) like Fly Ash or GGBS without increasing the thickness of the concrete. Concrete mixes to be designed as location specific to avoid over-specifying by use of generic specification everywhere. Structural Engineer to specify concrete mix with water/cement use reducing additives. Structural engineer to consider designing to 56 days strength conformity rather than to conventional 26. Structural Engineer to use RiCS or LETI baseline specification as a starting point for developing the specification. Example specification (For reference only. The specification to be provided by Structural Engineer) Concrete shall be rc35 designated mix containing ground granulated blast furnace slag (ggbs) in accordance with the project specification bs 8110-1, bs 8500-1 and bs 8500-2. Structural Engineer to advise the lead designer/architect and the Client on the actions associated with the above.	☐	

Ref.	Requirement	Compliance	Clarification if required
S.8	**Ground floor general** Refer to Architectural Check List for layers above the concrete slab. Concrete on blinding on compacted hardcore to structural engineer design and specification. It is recognised that concrete over specification is one of the important reasons for high embodied energy carbon footprint. The designer is obliged to make an effort to reduce thickness of concrete slabs whilst maintaining compliance with relevant standards. Stepped concrete slabs (e.g. for shower tray) are not acceptable due to difficulties with insulation installation to expected Passive House standard.		
S.9	**Ground Floor Bathrooms** Refer to Architectural Checklist item B.3.3 for ground floor bathroom additional gulley requirements.		
S.10	Refer to P.3 and P.4 Soft and Hard Landscaping for SUDS requirements		
S.11	Refer to P.3 and P.4 Soft and Hard Landscaping sections for footpaths requirements. All spaces should have robust ground drainage systems to ensure that there are no large puddles or water lying three hours after heavy downpour.		

Ref.	Requirement	Compliance	Clarification if required
S.12	**Gas defence** Any new building or new extension requires gas protection measured as per SI requirements/Structural Engineer Design and Specification but no less CS2 level protection.	☐	
S.13	**Street Lighting** Street lighting must be designed in accordance with the requirements of Midlothian Council Street lighting Department and be constructed to adoptable standard. All access routes should be well lit for reasons of safety and security. Street lighting should be located to give maximum benefit to the areas surrounding dwellings, but should not impose excess or intrusive levels of illumination for occupants.	☐	

MECHANICAL AND ELECTRICAL ENGINEER CHECKLIST

Project Name: **Issued by:**

Project Stage: **Issued to:**

                                                           Date of Issue:

Ref.	Requirement	Compliance	Clarification if required
E.1	**General Requirements**		
E.1.1	Clarify which elements of circular economy and low embodied carbon/natural materials have been incorporated in the design.	☐	
E.1.2	M&E designer to design all installations as required by relevant standards/codes. It is recognised that overdesigning and over-specification adds significantly to the carbon footprint of the systems. An attempt to be made to design out installations where possible.	☐	
E.1.3	M&E designer to design and specify products and system with maximum efficiency to minimise operational energy use and maintenance costs. Preference should be given to systems produced nearest to Scotland with transparent supply chain to minimise production/ transportation carbon use.	☐	

Ref.	Requirement	Compliance	Clarification if required
E.1.4	Design to comply with current Sustainability Label requirements – refer to section 3 Stage Implementation for requirements. SAP calculations to reflect this.	☐	
E.1.5	Heating, MVHR ventilation system, energy storage and energy generation should be compliant with current Technical Standards and should be designed to achieve Passive House certification and current Sustainability Label requirements - refer to section 3 Stage Implementation for details. It is understood that there is a number of ways and potential technologies available to meet these criteria. Design team to propose a suitable, compliant solution considering energy efficiency, embodied energy, maintenance and lifetime cost. There is a strong preference to invest in envelope first approach in order to keep M&E systems as simple and a minimal as it is possible.	☐	
E.1.6	**Community Heating and Decentralised Heat** Where technically feasible and financially viable the Community Heating scheme is preferable in context of high energy demand developments and Passive House low heating demand. If necessary, further references to be made to policies NRG 5, NRG 6 of 2017 Midlothian Local Development Plan.	☐	
E.1.7	**General Design Co-ordination** Designers should ensure that services are effectively co-ordinated to ensure that construction, operation, and maintenance of the delivered solution can be achieved in the most efficient manner. Ceiling mounted fittings drawings to be provided. Previous poor examples include: • Excessive/over provision of stair lighting. • Minimum socket provision not compliant with HfVN.	☐	

Ref.	Requirement	Compliance	Clarification if required
E.1.8	Specifications generally should promote low or no maintenance. Unless specifically requested, where possible avoid battery operated systems to reduce future replacement/maintenance.	☐	
E.1.9	All systems must be designed and installed as required to secure Passive House certification	☐	
E.1.10	Gas No installation should be provided. This is a result of a shift toward green economy, avoidance of soon to be obsolete technology and use of fossil fuels.	☐	
E.1.13	Careful consideration is required to avoid crossover of pipes to allow neat placement of white goods or sanitaryware and to minimise boxing out.	☐	
E.2	**Water Supply**		
E.2.1	Water meters are not required.	☐	
E.2.2	**Sprinklers Systems/Suppression** Fire suppression system to be provided as per current Technical Standard. As a minimum Midlothian Council requirement is fire suppression to be provided to flats including cottage flats. Mist systems are preferable to minimise infrastructure, cost, and impact on ceiling heights.	☐	

Ref.	Requirement	Compliance	Clarification if required
E.2.3	**Water Storage** Water storage is not generally required, designers should consult with Scottish Water on a site specific basis and include suitable storage.	☐	
E.2.4	**Bath Water Temperature** The water temperature output from the thermostatic control valves for the baths should be set to provide 46°C to ensure that maximum temperature of 48°C is not exceeded. The contractor is to test this and confirm that this temperature is achieved.	☐	
E.3	**Heating and Ventilation and energy storage**		
E.3.1	**HMVHR Mechanical Ventilation Heat Recovery** System to be fully designed and installed by a specialist as required to secure Passive House certification. It is preferred for the system to be design, installed, and commissioned by one organisation with Passive House MVHR experience. In flatted developments, HVHR units to be accessible without entering the property to allow easy maintenance/filter changing. In houses, the HVHR should be located in a store close to the external door to allow to allow easy maintenance/filter changing	☐	
E.3.2	**Controls** Simple and inclusive controls and programmes are to be legible and accessible for the ageing population for all systems to facilitate convenient and efficient use of the equipment. Wheelchair user dwellings - separate controls are to be provided at wheelchair height in hallways.	☐	

Ref.	Requirement	Compliance	Clarification if required
E.3.3	**Radiators** Low level temperature regulation valves are acceptable. Radiators should not be positioned in such a manner as to adversely affect door swings or flexibility of furniture layouts. TRV's to be located in free space for good sensitivity to air temperatures. Refer to HfVN for Low surface temperature radiators if required for special / wheelchair user dwellings.	☐	
E.3.4	**Tumble Dryers** No tumble dryers are allowed. There are minimal benefits of using tumble dryers in presence of HVHR while they have an impact on energy consumption and the PHPP model.	☐	
E.3.5	**Showers** All showers to be fitted with anti-scald devices. Mains showers to have safe out valves. Electrical services should be designed considering the additional future shower location.	☐	
E.3.6	**Plumbing** All hot and cold water pipes beyond the main stopcock to be copper. Heating pipes to be copper. Micro-bore is not acceptable. Water filters to be designed/fitted. Suitable insulation to be designed and installed as required to achieve Passive House certification.	☐	
E.3.7	**Pipework insulation** All pipework to be insulated to BS EN 5422 and in accordance with Standard Section 6.4.1 as minimum. Insulation to match Passive House certification requirements.	☐	

Ref.	Requirement	Compliance	Clarification if required
E.3.8	**Internal Design Temperature** Heating system should be sized to enable the following internal design temperatures, to be achieved and maintained based on an external design temperature of -4°C. Bathroom : 22°C Lounge/Living Room : 21°C Hall/Landing : 18°C Bedroom : 18°C Kitchen : 21°C	☐	
E.3.9	**Services maintenance and marking** Pipework routes below floors to be clearly marked sufficient to assist future maintenance repairs. All valves, manifolds etc. within floors to be accessible through floor hatches. Suitable notes to be added to M&E specification.	☐	
E.3.10	**Photovoltaic panels and Solar Panels (if present)** They should not be the integrated flashing type. All installers and products to be accredited/approved by a suitable third-party organisation as specified by the M&E engineer. Suitable notes to be added to M&E specification.	☐	
E.4	**Electrical**		
E.4.1	All electrical installations to comply with the current building and IEE Regulations and BS EN 7671:1992 and current Building Regulations Technical Standards	☐	

Ref.	Requirement	Compliance	Clarification if required
E.4.2	**Electric Meters** Refer to E.1.11 for smart meters requirements. Electric meters should be located within the property they serve and adequately enclosed either in a cupboard or store. Meters should not be positioned within common areas. Allowance to be made for future prepaid meters if required by tenant. Pre-paid meters are not required but future installation should not be compromised. **Smart Meters** All systems are to be equipped with Smart Meters with wiring flexibility for interchangeability by different energy providers. Smart meters are to be suitable for Midlothian Council remote data collection for Post Occupancy Evaluation purposes. **Landlords Meters** Landlord meters should be located below the stairs in the common area to suit access by the Council representatives or energy supplier of landlord services to allow for meter readings. A 'T' handle key arrangement is preferred. No meters should be behind fixed panels. Should any meters be located in a locked cabinet this would dictate remote reading. Smart meters are to be suitable for Midlothian Council remote data collection for Post Occupancy Evaluation purposes.		
E.4.3	**Distribution Boards** Distribution boards should be located within the property they serve and adequately enclosed either in a cupboard or store. If located outside of store, they should be neatly boxed in and suitable for required visible access.		

Ref.	Requirement	Compliance	Clarification if required
E.4.4	**Assistive Technology** For older/ambulant flats containment is required to allow for future alarm installation in bathroom ceiling. A spare RCB is required at the meter.	☐	
E.4.5	**Doorbells** Doorbells are required for all dwellings. These should be positioned on brickwork, not on doorframe. These should be hardwired.	☐	
E.4.6	**Electric fobs** Refer to B.7.6 of Architectural Checklist item Access strategy – intercom and ironmongery.	☐	
E.4.7	**Low smoke electricity cable** Low smoke electricity cable is not required.	☐	
E.4.8	**Television Aerial and Satellite Dish** Each property should have a television aerial in the loft space cabled to a TV point in the living room and main bedroom. Each property should allow for two co-axial entry points in each living room. Allow for multi-room facility for future purchase by tenant of a satellite system. Common access flats (not Cottage Flats) above 2 storeys should have an installation providing an integrated, structured system restricted to only one satellite dish per block but to accommodate individual connections for each flat.	☐	

Ref.	Requirement	Compliance	Clarification if required
E.4.9	**Internet Access** All units to have hight speed internet. A coordinated approach to provision should be verified with Midlothian Council and not purely depend on Wi-Fi installation.	☐	
E.4.10	**Electrical sockets** No wiring to be surface mounted. Sound and Fire integrity must be maintained in party walls. Wall lining required - consult architect.	☐	
E.4.11	**Electrical Sockets provision** TV Points are required in living rooms and each bedroom. Living Room - 4 doubles, 1 telephone Main Bedroom - 3 doubles, 1 telephone Twin Bedroom - 3 doubles Single Bedroom - 2 doubles Hallway (ground/upper) - 1 double each Bathroom - none, no shaver socket Kitchen - 3 doubles plus white goods and cooker Dining Area - 1 double No dedicated living room fire socket is required. Cooker control unit to have switch, indicator light and 13 amp switched socket. Shower isolation switches to be outwith the reach of any person in the bath or shower. The above is to be treated as a minimum. All provision should comply with Building Regulations and with HFVN unless otherwise agreed with the Client. In dwellings for wheelchair houses or older or disabled people, sockets should be located as clarified in HfVN guidance. For amenity housing / elderly care housing additional sockets may be required – check with Midlothian Council.	☐	

Ref.	Requirement	Compliance	Clarification if required
E.4.12	Residual circuit breaker protection required to all sockets, but not to fixed appliances.	☐	
E.4.13	**Lights to walk in cupboards** Ceiling pendant only in walk in cupboard ≥ 1m2; Switch to be located within cupboard.	☐	
E.4.14	Bathroom light fittings to be shrouded.	☐	
E.4.15	**External Lights** A+ rated light fittings to be provided externally over front and rear doors.	☐	
E.4.16	**Communal Stair lighting** Common areas should be well illuminated and be designed for economic power usage to an adoptable standard. A+ rated LED fittings are to be used. Emergency escape light fittings should be 3-hour non maintained, with integral battery.	☐	

Ref.	Requirement	Compliance	Clarification if required
E.4.17	**Fire, smoke and CO2 detectors** Proposed system to comply with current Technical Standards and associated relevant British Standards. All smoke detectors within the dwelling are to be interconnected, connected to main circuit and protected at the consumer unit; and to which no other equipment is connected other than a regularly used local lighting circuit. CO2 detector to be installed in each double bedroom – this requirement is more generous than technical standards.	☐	
E.4.18	**Landlords Lighting** Landlords lighting is required for areas which are not served by street lighting and in which Midlothian Council considers there may be security and safety issues. The requirement for landlords lighting should be considered and discussed with the Midlothian Council for: • external communal areas and external communal bin stores. • communal or large car parking areas which are private and not adopted by the Local Authority. Switchgear and controls for landlords lighting should not be located within dwellings but within communal areas as required.	☐	

AMENITY HOUSING CHECKLIST

Project Name: **Issued by:**

Project Stage: **Issued to:**

                                                     Date of Issue:

Ref.	Requirement	Compliance	Clarification if required
A.1	Unless specified otherwise, occupants are mostly elderly with varying degrees of frailty but not necessarily wheelchair users or requiring extra care standard. Generally, the residents are no younger than 55 years old.	☐	
A.2	Unless specified otherwise, the design should meet requirements of HfVN Older and Ambulant Disabled People	☐	
A.3	Location and layout of amenity blocks to avoid areas of noisy disturbance and provide a safe secure approach for occupants.	☐	
A.4	Accommodation cannot be higher than two storey.	☐	

Ref.	Requirement	Compliance	Clarification if required
A.5	A block of 20 with one lift and at least one stair is considered as a suitable maximum.	☐	
A.6	Drying - communal drying area to be fully paved and easily accessible.	☐	
A.7	Wheelchair user parking to be provided for to be provided for 20% of residents. Spaces for wheelchair users to be located close to entrance.	☐	
A.8	Internal mobility scooter store with charging points to be provided for 25% of residents. Access should be secure and sheltered. Access to avoid main corridors where safety could be compromised, or floor finishes would be vulnerable.	☐	
A.9	Main access doors to the building to be automatic (button operated)	☐	
A.10	A small, seated area should be included near to main entrances.	☐	
A.11	Corridor lengths should be kept to minimum.	☐	

Ref.	Requirement	Compliance	Clarification if required
A.12	Any doors within communal circulation to be equipped with magnetic hold open devices. It is preferable for these to be designed out at the concept stage e.g. by reducing corridor lengths.	☐	
A.13	Stairwells/corridors to have a better than average level of natural daylight – utilising windows/sunpipes/rooflights. Remote opening should be facilitated if at high level.	☐	
A.14	Handrail support to be included at shared hallways and entrances.	☐	
A.15	Lift required. • Specification to include detail on future maintenance and be agreed with Midlothian Council Maintenance Section for approval. • Operating panels for lifts must be visually able for use by those with some impaired or weak vision/ arthritic hands etc. ensure no glare problem for panel. • Minimum capacity is for 8 persons.	☐	
A.16	Level access shower to be provided to all bathrooms on all floors.	☐	
A.17	Shower areas in bathrooms should allow for future assisted bathing with clear access for assistance.	☐	

Ref.	Requirement	Compliance	Clarification if required
A.18	Consideration to be given in bathroom areas for wall fixing handrails or future proofing for closomat provision.	☐	
A.19	All ground floor units to have wet floor shower rooms.	☐	
A.20	If timber frame is proposed, upper floors to have shallow tray to avoid of risk of flooding.	☐	
A.21	Bedrooms accommodate 2 no single beds with activity space around sides of both bedrooms.	☐	
A.22	Unless requested otherwise, there is no requirement for special fittings above HfVN Older and Ambulant Disabled People e.g. handles for elderly users.	☐	
A.23	Door access from ground floor flats direct to garden may be included if sufficient privacy is included in layout e.g patio area clearly designated to the flat.	☐	
A.24	Flats to have 30% more sockets than standard to allow for localised lighting options to suit dementia sufferers / elderly with impaired vision. Consideration to be given to task lighting.	☐	
A.25	Lighting to be added in full height storage cupboards.	☐	

Midlothian

SMITH SCOTT MULLAN ASSOCIATES

Inspection of Midlothian Council – Domiciliary Care – Care at Home Support Service

Report by Morag Barrow, Director of Health and Social Care Partnership

1 Recommendations

The Council is recommended to note the content of the report and progress made.

2 Purpose of Report

This report provides an overview of the recent unannounced care inspectorate report for Midlothian Council – Domiciliary Care – Care at Home Support Service.

9th March 2022
Report Contact: Grace Cowan
grace.cowan@midlothian.gov.uk

3   Background

3.1   Midlothian Health and Social Care Partnership's (HSCP) Care at Home Service was inspected on 19th August 2021 by the Care Inspectorate, as a registered Care at Home Service for adults and older people living in their own homes in Midlothian.

At the time of the inspection the service was supporting approximately 294 people. The report was published 15th September 2021.

It covered the following themes: -

- How well do we support people's wellbeing?

- How good is our leadership?

- How good is our care and support during the COVID-19 pandemic

3.2   Following the inspection a report was published that details the areas of its findings and outlines areas for improvement and/or requirements.

The inspection report grades the areas of inspection from 1 (Unsatisfactory) to 6 (Excellent). This inspection report graded the three areas as follows:

How well do we support people's wellbeing?	**3**	**Adequate**
How good is our leadership?	**3**	**Adequate**
How good is our care and support during the COVID-19 pandemic?	**4**	**Good**

A follow up review of the service took place on 4th March 2022. The following grades were given in the three areas.

How well do we support people's wellbeing?	**4**	**Good**
How good is our leadership?	**4**	**Good**
How good is our care and support during the COVID-19 pandemic?	**4**	**Good**

3.3   People described carers as very kind, and for those with consistent carer input, there was a sense of a strong working relationship between users of the service and carers.   There was also acknowledgement of the close working relationships between carers and other health professionals. Although changes to care and support arrangements

were necessary due to COVID-19 impact, people still experienced care and support with compassion.

The changes in carers for some people was unsettling, particularly for those with Dementia who rely on consistency for their wellbeing. Communication around changes to carers on visit schedules or regarding the timings of visits, was highlighted as an area for further improvement.

There was one requirement highlighted in relation to the support of people pertaining to medication management. An improvement in management and administration of medication within the service required to be achieved by 31st October 2021.

3.4   Leadership of the care at home support service was reported to be good.

Systems were in place to monitor aspects of service delivery and support the manager to have clear oversight of the care to people. There was evidence through examples of these improved outcomes for people e.g. reduction of missed visits, reviews of personal care plans and observation of staff practice.

- A satisfaction survey had been completed by people using the service – whilst this was generally positive, many did comment that they felt communication and consistency of carers could be improved upon.
- Some staff did not feel supported and felt isolated in their roles.

3.5   The Care inspectorate reported that they felt the service demonstrated a good level of care and support during the COVID-19 pandemic.

Staff had access to specific training on COVID-19, the correct use of PPE and demonstrated good infection control and prevention practices.

Whilst disruption to regular support was inevitable during the pandemic, people felt confident in their care because staff had been trained appropriately.

A risk assessed approach had been taken at times of service pressure, with families and friends being asked to step in to support delivery of care themselves. It was acknowledged that in a period of crisis, this would be inevitable.

It was noted that proactive communication had been consistent between provider/manager and Care Inspectorate throughout the pandemic with all necessary notifications around service disruption having been made to the Care Inspectorate.

4   **Conclusion**

The Care Inspectorate reported in their findings from visiting clients and speaking to family members that people said:

"words could not express how glad I am to see them coming in "
"Exceptionally happy to get care from them"
"it is a great service, the staff are really friendly and helpful"

Other comments from people highlighted the need to improve communication:

"Care workers are superb, but the administration side of things leaves a lot to be desired and is inefficient"
"I don't know who is coming tonight or tomorrow"
"There are so many different carers I need to explain what to do and where everything is – though the carer quality is very good"

5   **Report Implications**

5.1   **Resource**

There are no financial and human resource implications associated with this report.

5.2   **Risk**

The Care Inspectorate inspect all registered services on a regular basis with announced and unannounced inspections. A report is published which informs all stakeholders about the key strengths of the service, areas for improvement and sets out the main points for action.

Following the publication of that report it is accessible to the public via the Care Inspectorate website, and by requesting a hard copy. It is also on display in the Care at Home base for staff and visitors to access and review progress.

5.3   **Policy**

Strategy

There are now a total of two requirements from this recent inspection and 2 areas for improvement:

Requirements:

People who need help to take their medication can be confident that they will receive it safely from appropriately skilled staff. They will know that there are clear policies and guidelines in the service on the use, storage, and administration of medication.

This requirement has been reviewed and was met at inspection 4th March 2022.

People will be confident that their care and support will be delivered to meet their needs and wishes. The provider must ensure affective management oversight of the service is in place with strong leadership and enhanced quality assurance measures.

This requirement was reviewed on 4th March 2022 and has now been met.

Improvements:

People and their relatives are provided with clear information about the service, in particular the arrangement for staff delivering their care and any changes in staffing, there should be good communication between staff, people and the management team. The implementation of communication agreements with people could support this area for improvement.

Noted on review 4th March 2022 - Communication agreements are now included within the care plan.

To ensure people that staff know how to care and support them should they become unwell, anticipatory care plans should be developed for each person.

Recognition to work undertaken since August inspection with further work identified for service regarding this improvement going forward from review on 4th March 2022

Midlothian Care at Home has responded to the inspection with a comprehensive action plan, with clear timescales and outputs to deliver the plan.

Support to achieve the action plan is being provided by Midlothian HSCP lead pharmacist. Oversight assurance for the action plan is in place via Midlothian HSCP Clinical and Care governance group.

Consultation

Copies of the Inspection report has been communicated and available on Care Inspectorate website.

Equalities

There are no apparent equalities issues.

Sustainability

Service development planning remains a key focus to the HSCP. A new Service manager has taken up post, and will lead on the continued quality approach to further improving the service.

6   Technology issues

There are no Technology issues arising from this report.

care inspectorate

Midlothian Council - Domiciliary Care - Care at Home
Support Service

Fairfield House
8 Lothian Road
Dalkeith
EH22 3AA

Telephone: 01312 713 942

Type of inspection:
Announced (short notice)

Completed on:
19 August 2021

Service provided by:
Midlothian Council

Service provider number:
SP2003002602

Service no:
CS2004062598

HAPPY TO TRANSLATE

About the service

Midlothian Council Domiciliary Care is registered as a Care at Home Service. It provides care to adults and older people living in their own homes within Midlothian. The reablement and complex care services are located at Fairfield House, situated close to the town centre in Dalkeith. The Midlothian Enhanced Rapid response and Intervention Team (MERRIT) is based at Bonnyrigg Health Centre.

Staff are divided into six teams with differing roles. The MERRIT care team is part of a multi-disciplinary team. The team deals with emergency and crisis situations on a short-term basis. Carers offer personal care and some domestic assistance. They provide 24-hour response for service users with personal alarms and they are heavily involved with responding to and the prevention of falls. The service aims to prevent hospital or care home admission. This team also assists individuals who are having a trial discharge from hospital.

The service states that it aims:
"To provide a personal care and home support service for individuals and their carers in the individual's own home to enable them to remain at home for as long as they wish to do so.
To prevent admission and re-admission to hospital, and where people are being discharged from hospital to support them to leave hospital with minimum delay.

To support people leaving hospital to return to independence as soon as they are able."

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

The service was supporting approximately to 294 people.

How we inspected this service

This inspection was carried out remotely using virtual video calling and telephone conversations with people. Two inspectors assisted with contacting people and their relatives.

What people told us

We spoke with 22 people (including their relatives) to collate their views of the service they received.

People described the staff as kind and caring. Comments from people included the following:

"Words could not express how glad I am to see them coming in"
"Exceptionally happy to get the care from them"
"The carers are excellent"
"Carers are spot on and I love them to bits".
"It is a great service, the staff are really friendly and helpful",
"They (carers) always come in with a smiling face and brightens up my day"
"they are very nice, very pleasant and caring",

While some people had staff consistency and enjoyed establishing meaningful trusting working relationships, others did not experience this. Many people told us they had lots of different carers during the week, and this was unsettling for them. Communication was a key concern voiced by those we spoke with.

Comments from people included the following:

"Care workers are superb, but the administration side of things leaves a lot to be desired and is inefficient."
"I don't know who is coming tonight or tomorrow".
"I don't get a rota and I have to call the office most days to find out who is coming."
"there are so many different carers I needs to explain what to do and where everything is - though the carer quality is very good".
"Different people all the time, don't see the same faces twice. Usually in a hurry to leave."

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our care and support during the COVID-19 pandemic?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?   3 - Adequate

Overall, we evaluated how well staff supported people's wellbeing as adequate. There were some key strengths, which were just outweighed by some weaknesses the provider needed to address to improve people's experiences.

1.1 - People experience compassion, dignity and respect
People we spoke with described carers as very kind and when consistent, were able to from strong working relationships. This helped to improve people's welfare as staff were familiar with their care needs.

Although care and support arrangements may have needed to change for some in response to the COVID-19 pandemic, people still experienced care and support with compassion.

1.2 - People get the most out of life
People told us that they did not always know who was coming to support them and found this to be very unsettling. This was of particular concern for those who have dementia and rely on consistency for their wellbeing. People also told us the communication could be further improved in informing them if their care workers were running late or if the rota changed.

It was evident to people that the level of consultation and communication was a key area of improvement. Developing communication agreements with people; setting out when, how and why communication should be maintained would help improve this, including expectations balanced with what would be achievable. (Please see area for improvement one).

The quality of people's experience was negatively affected because staff did not always know the person. Staff were often unclear about the support required or how to provide it in line with the individual's needs and wishes or use their personal plan to enhance the care provided and their interactions with the person. This was especially the case for staff supporting someone for the first time or instances where consistency was not present. We have highlighted this more under Key Question 7 of this report.

1.3 People's health and wellbeing needs benefit from their care and support

If people became unwell, staff knew what to do. Close working links with health professionals meant referrals were quickly actioned if needed.

Personal plans had been reviewed since the last inspection and showed improvement. Further work was needed to ensure people's outcomes reflected the care they received and that reviews of care could evidence this. Personal plans sometimes lacked detail and were often task led. Staff needed to engage more with people to develop meaningful anticipatory care planning, focusing on key outcomes people would like to achieve, with a reablement approach where appropriate and agreed. (See area for improvement two).

The numbers of staff were sometimes insufficient to meet outcomes for people using the service. Staff were working under pressure and some aspects of care and support may be skipped or missed, affecting outcomes for people. People experiencing the service perceive staff to be rushed and visit times may be cut short.

At our previous inspection we raised concerns with the provider about the number of medication errors occurring, potentially impacting on the health needs of people. The administration of medication needed to be improved with better understanding required from staff about the importance of when medication should be administered and how this should be recorded. (See requirement 1).

Requirements

1. In meeting this requirement people who need help to take their medication can be confident that they will receive it safely from appropriately skilled staff. They will know that there are clear policies and guidelines in the service on the use, storage and administration of medication.

By 31 October 2021 the provider must improve the management and administration of medication within the service.

In order to achieve this, the provider must undertake but not be limited to the following:
1) Ensure all staff sign to confirm when they have administered medication and where a prescribed medicine is not administered, the reason(s) for this are recorded.
2) Staff have the appropriate level of understanding of administering medication including training and reflective accounts. Ensure all handwritten entries recorded on the Medication Administration Recording (MAR) Chart are signed and dated by the person making that entry, details of where the information was obtained or the authority for the entry, for example, instructions from the General Practitioner (GP), is recorded.
3) Ensuring training, observations of practice and other appropriate quality assurance measures lead to supporting improvements.

This is in order to comply with Regulations 4(1)(a) – Welfare of users of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected. (HSCS 1.23)

Areas for improvement

1. In order that people and their relatives are provided with clear information about the service, in particular the arrangements for staff delivering their care and any changes in staffing, there should be good communication between staff, people and the management team. The implementation of communication agreements with people could support this area for improvement.

This ensures that care and support is consistent with the health and social care standards which state that: 'I am supported to communicate in a way that is right for me, at my own pace, by people who are sensitive to me and my needs'. (HSCS 2:8)

2. In order to ensure people that staff know how to care and support them should they become unwell, anticipatory care plans should be developed for each person.

This is also to ensure care and support is consistent with the Health and Social Care Standards which state: 'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability and frailty'. (HSCS 3.18)

How good is our leadership?	3 – Adequate

We assessed the leadership within the service to meet the care needs of people as adequate. Whilst there were some key strengths, these were just outweighed by some weaknesses which the provider needed to address to improve people's experiences.

2.2 – Quality assurance and improvement is led well

There were a variety of systems in place to monitor aspects of service delivery and to support the manager to have a clear oversight of the care to people. We saw examples of how these measures improved the outcomes for people, including the reduction of missed visits occurring, reviewing people's care plans and the observation of staff practice. Other areas of leadership needed to be improved. This included but was not limited to, an evaluation of staff consistency monitoring by the manager, which would inform improvement for people.

People were recently asked to complete a satisfaction survey. Whilst recognising the overall response was generally positive, many did comment on areas that they felt needed to be improved, including communication and consistent carers.

The manager acknowledged that improvements were needed to ensure staff consistency is reached and sustained as much as possible. Training was being explored to maximise the use of electronic systems which would streamline the planning of care visits for people.

A continuous improvement and development plan detailed the impact of any planned improvements to the delivery of care to people. How approaches were taken, including self-evaluation, were not always sufficiently detailed and to demonstrate the impact of improvement for people.

2.4 – Staff are led well
People could have not have confidence in the management of the service because managers did not have a good overview of how well their care and support needs were being met by staff.

Staff did not feel supported and felt isolated in their roles. a culture had developed where staff did not have the confidence to raise concerns for fear of retribution and not feeling listened to. Supervisions were usually held with staff when there was something negative to discuss. However, staff were professional and did not let this impact on how they cared for people.

Poor communication in or with the office base meant that information often got lost or was not shared appropriately or at the right time. Staff described how situations often only got addressed at crisis point which could have been avoided.

Improvements should be made regarding the culture within the service. Staff also have a role to play in changing the culture and promoting a healthy working environment to support the outcomes for people; seeking support and reporting any concerns and demonstrating the codes of conduct for those registered with a professional body, for example, the Scottish Social Services Council.

We had concerns about the leadership and oversight of the service by the management team. Clear communication, support for staff and direction was lacking and the approach to improvement was not sufficiently detailed. The rationale for change was not always clear to staff, potentially impacting negatively on people's experiences. (See requirement 1).

Requirements

1. In meeting this requirement people will have confidence that their care and support will be delivered to meet their needs and wishes. The provider must ensure affective management oversight of the service is in place with strong leadership and enhanced quality assurance measures.

To achieve this, the provider must by 31 October 2021:
1. 1. Introduce an open and transparent learning & development ethos.
2. Introduce comprehensive management of information and guidelines shared with staff and to discuss.
3. Reflect on practice through team meetings, identifying areas to improve.
4. Ensure communication between different staff teams is passed on so that staff can ensure continuity of care and support for people.
5. Ensure effective quality assurance systems that support improved outcomes for people.
6. Implement a service improvement and development plan that has specific priorities which are achievable.
7. Introduce measures which support the improvement of the culture and staff retention.

This is in order to comply with Regulations 4(1)(a) – Welfare of users of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure the care and support is consistent with the Health and Social Care Standards which state: "I benefit from a culture of continuous improvement, with the organisation having comprehensive and transparent quality assurance processes." (HSCS 4.19) and "I use a service and organisation that are well led and managed."

How good is our care and support during the COVID-19 pandemic?
4 - Good

7.2 Infection prevention and control practices are safe for people experiencing care and staff
Staff were familiar with COVID-19 procedures, reflecting on current national guidance and best practice. People experiencing care benefited from staff who were knowledgeable and promoted good infection control and prevention practices. There was sufficient supply of personal protective equipment (PPE) and staff had been appropriately trained in COVID-19 procedures and infection prevention and control. This ensured people could feel safe and were confident in the staff.

Staff had access to specific training on COVID-19, the correct use of PPE and infection prevention and control. The service had made use of various video links to the NHS and other resources for staff to view. The service had been pro-active at delivering training for new staff, with a rapid approach. This has ensured staff had the vital relevant training to meet people's needs.

7.3 Staffing arrangements are responsive to the changing needs of people experiencing care.
Disruption to regular patterns of support were inevitable during the pandemic. However, people felt confident in their care because staff have been trained appropriately.

The provider has a duty of care to ensure care and support was delivered to people across the county. Due to the COVID-19 pandemic and the associated pressures placed upon the staff and other providers, the manager had implemented a harm reduction approach, assessing where packages of care could be reduced to people. Whilst we acknowledge the need to introduce this approach in a period of crisis, this level of intervention should be short term and minimised wherever possible. The measures were having a negative impact on people, with family and friends being asked to step in to deliver care themselves.

The manager recognised the importance of helping to reduce risk of social isolation by increasing some visits for people or additional contact by staff in the office to check people's general wellbeing.

People understood that during the COVID-19 pandemic their support arrangements may have needed to be changed. People told us that they did not always know who was coming to support them and found this to be very unsettling. This was of particular concern for those who have dementia and rely on consistency for their wellbeing.

The provider should explore what measures could be introduced to maximise staffing levels as much as possible, including but not limited to staff retention and the use of agency staff.

Necessary notifications to the Care Inspectorate had been made throughout the pandemic. This meant there was proactive communication between the provider/manager and the Care Inspectorate. Management and senior staff understood the potential challenges presented by COVID-19 and planned for the likely disruption to all aspects of the service.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

People's care and support plans should be outcome focused, detailing the agreed goals they would like to achieve to support their independence as much as possible.
This is to ensure care and support is consistent with the Health and Social Care Standards which state: " My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices." (HSCS 1.15)

This area for improvement was made on 26 November 2020.

Action taken since then
Further improvement is needed to ensure people have anticipatory outcome focused care planning in place. We have therefore repeated this area of improvement.

Previous area for improvement 2

People's care and support plans should be reviewed on a more regular basis (six-monthly or as and when required) to ensure the service continues to meet their agreed outcomes.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: "I am fully involved in developing and reviewing my personal plan, which is always available to me." (2.17).

This area for improvement was made on 26 November 2020.

Action taken since then
The service has performed well in meeting this area for improvement given the restrictions as a result of the pandemic.

Previous area for improvement 3

. People should be made aware of who is coming to care for them on a day to day basis. They should also be clearly communicated and consulted with about their agreed times and any changes to how and when the care is provided to them.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: "I know who provides my care and support on a day to day basis and staff are familiar of what they are expected to do. If possible, I can have a say on who provides my care and support." (HSCS 3.11)

"My care and support meets my needs and is right for me." (HSCS 1.19)

This area for improvement was made on 26 November 2020.

Action taken since then

Further improvement is needed, with the introduction of communicaiton agreements with people. We have therefore repeated this area of improveent.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate

How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	4 - Good
2.3 Staff are led well	3 - Adequate

How good is our care and support during the COVID-19 pandemic?	4 - Good
7.2 Infection prevention and control practices are safe for people experiencing care and staff	4 - Good
7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

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Please get in touch with us if you would like more information or have any concerns about a care service.

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Item 8.5

care
inspectorate

Midlothian Council - Domiciliary Care - Care at Home
Support Service

Fairfield House
8 Lothian Road
Dalkeith
EH22 3AA

Telephone: 01312 713 942

Type of inspection:
Announced (short notice)

Completed on:
4 March 2022

Service provided by:
Midlothian Council

Service provider number:
SP2003002602

Service no:
CS2004062598

HAPPY TO **TRANSLATE**

About the service

Midlothian Council Domiciliary Care is registered as a Care at Home Service. It provides care to adults and older people living in their own homes within Midlothian. The reablement and complex care services are located at Fairfield House, situated close to the town centre in Dalkeith. The Midlothian Enhanced Rapid Response and Intervention Team (MERRIT) is based at Bonnyrigg Health Centre.

Staff are divided into six teams with differing roles. The MERRIT care team is part of a multi-disciplinary team. The team deals with emergency and crisis situations on a short-term basis. Carers offer personal care and some domestic assistance. They provide 24-hour response for service users with personal alarms and they are heavily involved with responding to and the prevention of falls. The service aims to prevent hospital or care home admission. This team also assists individuals who are having a trial discharge from hospital.

The service states that it aims:
"To provide a personal care and home support service for individuals and their carers in the individual's own home to enable them to remain at home for as long as they wish to do so.
To prevent admission and re-admission to hospital, and where people are being discharged from hospital to support them to leave hospital with minimum delay.
To support people leaving hospital to return to independence as soon as they are able."

What people told us

We spoke with three people receiving care as part of this follow up inspection. Their views and comments were relevant to our findings.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?   4 - Good

The focus of this inspection was to assess what action had been taken to meet the requirements and areas for improvements made at the inspection on 19 August 2021.

Through various measures including staff refresher training, reflective accounts and quality assurance systems, improvements had been made for people who require support with taking their medication. The number of errors occurring has dramatically reduced, resulting in improved outcomes for people.

People's care plans included a section on how, when and in what circumstances people should be contacted, including relatives and those important to them. This will help to make further improvements around communication.

Further improvements were needed to ensure people had their wishes and choices recorded and shared with those relevant on how they would like to be cared for when receiving end of life care. This should be clearly recorded in people's anticipatory care plans.

In summary, the one requirement made previously about the administration of medication had been met, in addition to the area for improvement about communication agreements. However, the area for improvement on people's anticipatory care plans had not been fully met and has therefore been repeated at this inspection. (Please see area for improvement one).

The provider had made improvements since our last inspection. We have therefore decided to re-evaluate the service, recognising the work completed to date to improve outcomes for people. Please see section of this report titled "what the service has done to meet any requirements at or since the last inspection" for more information.

Areas for improvement

1. In order to ensure people that staff know how to care and support them should they become unwell, anticipatory care plans should be developed for each person.

This is also to ensure care and support is consistent with the Health and Social Care Standards which state: 'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability and frailty'. (HSCS 3.18)

How good is our leadership?   4 – Good

The focus of this inspection was to assess what action had been taken to meet the requirements and areas for improvements made at the inspection on 19 August 2021.

Improvements had been made in the management oversight of the care provided to people through strong leadership and quality assurance measures which were underpinned by support to staff. This has included, but not limited to the following:

- Face to face staff meetings had been re-introduced following the easing of Covid-19 social distancing procedures.
- Staff wellbeing sessions had been held, which staff had found to be helpful and supportive to their ongoing learning and development.
- A service improvement and development plan was in place, focused on people's outcomes and support staff.
- Other areas for improvement as highlighted within our recent inspection reports and were time sensitive.

Improvements were still needed around communication between management, office and care staff to ensure continuity of care and support for people, especially those with additional support needs for dementia who would benefit the most from receiving consistency of staff. We have therefore made an area of improvement. (Please see area for improvement one).

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[DRAFT] page 3 of 8

In summary, on balance, the one requirement made previously about the leadership and management oversight of the service had been met. However, we assessed that further improvement should be made to ensure communication between different staff teams was passed on so that staff can ensure continuity of care and support for people.

The provider had made improvements since our last inspection. We have therefore decided to re-evaluate the service, recognising the work completed to date to improve outcomes for people. Please see section of this report titled "what the service has done to meet any requirements at or since the last inspection" for more information.

Areas for improvement

1. To ensure people are safe and protected as far as possible from harm, the provider should ensure continuity of care and support for people, especially those with additional support needs for dementia who would benefit the most from receiving consistency of staff. This should include, but is not limited to clear communication on details of delayed visits, changes in times of care provided and any support needs that have not been met during staff visits.

This is to ensure care and support is consistent with Health and Social Care Standard 1.23: 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected'.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

In meeting this requirement, people who need help to take their medication can be confident that they will receive it safely from appropriately skilled staff. They will know that there are clear policies and guidelines in the service on the use, storage and administration of medication.

By 31 October 2021 the provider must improve the management and administration of medication within the service.

In order to achieve this, the provider must undertake but not be limited to the following:

1) Ensure all staff sign to confirm when they have administered medication and where a prescribed medicine is not administered, the reason(s) for this is recorded.
2) Staff have the appropriate level of understanding of administering medication including training and reflective accounts. Ensure all handwritten entries recorded on the Medication Administration Recording (MAR) chart are signed and dated by the person making that entry, details of where the information was obtained or the authority for the entry, for example, instructions from the General Practitioner (GP), is recorded.

3) Ensuring training, observations of practice and other appropriate quality assurance measures lead to supporting improvements.

This requirement was made on 19 August 2021.

Action taken on previous requirement
Improvements had been made to the recording and auditing of the administration of medication. This will help ensure people have confidence that they will receive their medication safely from appropriately skilled staff.

Met – within timescales

Requirement 2

In meeting this requirement people will have confidence that their care and support will be delivered to meet their needs and wishes. The provider must ensure affective management oversight of the service is in place with strong leadership and enhanced quality assurance measures.

To achieve this, the provider must by 31 October 2021:

1. Introduce an open and transparent learning & development ethos.
2. Introduce comprehensive management of information and guidelines shared with staff and to discuss.
3. Reflect on practice through team meetings, identifying areas to improve.
4. Ensure communication between different staff teams is passed on so that staff can ensure continuity of care and support for people.
5. Ensure effective quality assurance systems that support improved outcomes for people.
6. Implement a service improvement and development plan that has specific priorities which are achievable.

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This is to ensure the care and support is consistent with the Health and Social Care Standards which state: 'I benefit from a culture of continuous improvement, with the organisation having comprehensive and transparent quality assurance processes.' (HSCS 4.19) and 'I use a service and organisation that are well led and managed.'
7. Introduce measures which support the improvement of the culture and staff retention.

This requirement was made on 19 August 2021.

Action taken on previous requirement
The provider had implemented a range of quality assurance systems and processes to support staff in terms of their wellbeing, support and their ongoing learning and development. This helps to make continued improvements to the outcomes for people receiving care.

Met – within timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

In order that people and their relatives are provided with clear information about the service, in particular the arrangements for staff delivering their care and any changes in staffing, there should be good communication between staff, people and the management team. The implementation of communication agreements with people could support this area for improvement.

This ensures that care and support is consistent with the Health and Social Care Standards which state that: 'I am supported to communicate in a way that is right for me, at my own pace, by people who are sensitive to me and my needs'. (HSCS 2:8)

This area for improvement was made on 19 August 2021.

Action taken since then
Communication agreements are now included within the care plan. States who, when and in what circumstances people should be contacted.

Previous area for improvement 2

In order to ensure people that staff know how to care and support them should they become unwell, anticipatory care plans should be developed for each person.

This is also to ensure care and support is consistent with the Health and Social Care Standards which state: 'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability and frailty'. (HSCS 3.18)

This area for improvement was made on 19 August 2021.

Action taken since then
Further improvements were needed to ensure people had their wishes and choices recorded and shared with those relevant in how they would like to be cared for when receiving end of life care. This should be clearly recorded in people's anticipatory care plans. We have therefore repeated this area for improvement.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our leadership?	4 - Good
2.3 Staff are led well	4 - Good

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Inspection of Newbyres Village Care Home

Report by Morag Barrow, Directorof Health and Social Care Partnership

1   Recommendations

The Council is recommended to note the content of the report and progress made.

2   Purpose of Report

This report provides an overview of the report following the recent unannounced care inspectorate visit for Newbyres Village Care Home.

9th March 2022
Report Contact: Grace Cowan
grace.cowan@midlothian.gov.uk

3 Background

3.1 Midlothian Health and Social Care Partnership's Newbyres Care Home was inspected on 11th November 2021 by the Care Inspectorate as a registered care home for people aged over 60. Newbyres Care Home provides long term care for 61 residents. The report was published on 22nd November 2021.

The inspection format was undertaken under the new Care Inspectorate Heath and Social Care standards for care homes.

It covered the following theme: -

- How well do we support people's wellbeing?

- How good is our care and support during the COVID-19 pandemic?

3.2 Following the recent inspection a report was published that details the areas of its findings and outlines areas for recommendation and/or requirements.

The inspection report grades the areas of inspection from 1 (Unsatisfactory) to 6 (Excellent). This inspection report graded the three areas as follows:

How well do we support peoples wellbeing	**3**	**Adequate**
How good is our care and support during the COVID-19 pandemic?	**4**	**Good**

People described carers as very kind and caring. Staff were well-meaning in their actions and clearly wanted to take care of people.

The management team and staff had been proactive during the pandemic when reviewing people's care needs and liaising with people's relatives by phone, video call, and when restrictions eased, in person.

The activity co-ordinator had provided one to one and some group activities, however these were limited in availability due to Covid restrictions.

There was one requirement highlighted as part of this inspection pertaining to medication management. Although an improvement plan had been introduced by the manager which had included pharmacy audits, retraining of staff, competency assessments and reflective accounts, some errors were still being experienced.

Areas of improvement noted at time of inspection were:

1. To ensure people are supported well the manager should ensure that staff always treat people with dignity and respect. This practice should also reflect the language and terminology used when in discussion with people, within the staff team and recorded in support related documentation.
2. To support the improvement of peoples' physical and mental wellbeing, the manager should review the way in which activities are organised and planned with people. This should focus on developing more person-centred activity plans with people, considering the quality and amount of physical and social activity made available for people within and outside the home.
3. To ensure peoples' skin care is monitored and managed correctly, the manager should ensure relevant care plans and other health records are kept up to date and fully accessible to all staff.

3.4 The delivery of care and support was reported to be good in relation to Covid-19.

- The care home was clean and tidy, and staff worked hard to maintain this level of cleanliness.
- New furnishings had been purchased for the home following consultation with people.
- Domestic staff were confident in describing the cleaning required and the products they needed to use to reflect the Scottish COVID-19 community health and care settings infection prevention and control addendum.
- There was a good supply of Personal Protective Equipment (PPE) to ensure people and staff were protected against infection.
- Regular routine testing for staff took place to promote people's safety.
- Relatives were supported with the testing process when visiting care home.

Overall, the infection prevention and control measures were of a good standard to keep people safe.

Whilst staff had been increased during the COVID-19 pandemic to allow for a responsive approach to people's changing needs, staffing levels at times were not enough to allow for engagement in meaningful conversation or activities out with delivery of people's direct care and support needs. The need to have a recognised measurement of resident acuity was highlighted as an area of improvement within the inspection report.

In relation to training, gaps were highlighted in relation to falls prevention, caring for smiles, palliative, and skin care. This was impacted by the pandemic. A requirement regarding re-focus on training was included in the Care Inspectorate report.

4   Conclusion

The Care Inspectorate reported in their findings from visiting clients and speaking to family members that people said:

"The staff are very kind and caring"
"I took part in the activities at Halloween"
The service has improved a lot with regards to getting and answer when you phone for updates about my mother"
"As a family we are happy with the support provided to our mum by the care staff"

Other comments from some relatives highlighted the need to improve communication, examples given being unable to get through on the phone to inquire about my mother and as a result have had to go down to the home in person to speak to someone.

5   Report Implications

5.1   Resource

There are no financial and human resource implications associated with this report.

5.2   Risk

The Care Inspectorate inspect all registered services on a regular basis with announced and unannounced inspections. A report is published which informs all stakeholders about the key strengths of the service, areas for improvement and sets out the main points for action.

Following the publication of that report it is accessible to the public via the Care Inspectorate website, and by requesting a hard copy. It is also on display in the Care Home base for staff and visitors to access and review progress.

5.3   Policy

Strategy

There was one requirement from the recent inspection and 5 areas for improvement.

Requirement:
People who need help to take their medication can be confident that they will receive it safely from appropriately skilled staff. They will know that there are clear policies and guidelines in the service on the use, storage and administration of medication.

Improvements:

People are supported well the manager should ensure that staff always treat people with dignity and respect. This practice should also reflect the language and terminology used when in discussion with people, within the staff team and recorded in support related documentation.

Support the improvement of peoples physical and mental wellbeing, the manager should review the way in which activities are organised and planned with people. This should focus on developing more person-centred activity plans with people, taking into account the quality and amount of physical and social activity made available for people, within and outside the home.

Ensure peoples skin care is monitored and managed correctly, the manager should ensure relevant care plans and other health records are kept up to date and fully accessible to all staff.

Staffing levels and the skill mix of care teams are responsive to the changing needs of people, the manager should take account of the dependency levels of people.

Ensure that people, have confidence that those who care for them are trained, competent and skilled to meet their care needs, the manager should ensure that training/ re-fresher training includes, but is not limited to the following: falls prevention, caring for smiles, palliative care, skin management.

Newbyres Village Care Home has responded to the inspection with a comprehensive action plan, with clear timescales and outputs to deliver to the plan.

Support to achieve the action plan is being provided by the Midlothian HSCP lead pharmacist and care home support team.   Oversight assurance for the action plan is in place via Midlothian HSCP Clinical and Care Governance Group.

Consultation

Copies of the Inspection report have been made available to Elected Members, and staff members, and notified to families/carers and other interested parties.

Equalities

There are no apparent equalities issues.

Sustainability

The HSCP is reviewing complexity of residents requiring care home placement, and will further refine and develop the care model at Newbyres Care home to reflect this.

6   Technology issues

There are no Technology issues arising from this report.

Newbyres Village
Care Home Service

20 Gore Avenue
Gorebridge
EH23 4TZ

Telephone: 01312 705 656

Type of inspection:
Unannounced

Completed on:
11 November 2021

Service provided by:
Midlothian Council

Service provider number:
SP2003002602

Service no:
CS2007167115

HAPPY TO **TRANSLATE**

About the service

Newbyres Care Home is situated in Gorebridge, Midlothian and is close to shops and local amenities.

The home is run and managed by Midlothian Council. The home is made up of five wings named "streets", each with lounge and dining areas. There is also a wing that houses the kitchen and laundry facilities. The five streets are named First, Second, Third, Fourth, Fifth Street and have shared gardens.

Newbyres Care Home provides long-term care and is registered to support 61 people. A mission statement was in place for the service: "Health and Social Care working together to develop a professional and flexible workforce who fully understands the core values that make a service unique in delivering the highest standard of care to our residents.

Together, we respect each resident as an individual and feel honoured to work within their home.

We will strive to make their home welcoming, friendly, warm, and safe from harm. Together we will build meaningful relationships and continue to improve and develop the service we provide."

How we inspected the service
This inspection was carried out by visiting the service onsite, meeting with people, relatives, and staff. We also collected relatives' views via telephone and email. Virtual technology was offered however was not required.

What people told us

We spoke with 27 of the 61 people using the service (including their relatives) to collate their views of the service they received

People described the staff as kind and caring. Comments from people included the following:

"The staff are very kind and caring."
"We are provided with a good choice of food to choose from."
"My daughter is able to visit at any time which is good following the easing of the Covid-19 restrictions."
"I took part in the activities for Halloween."
"As a family we are very happy with the support provided to our mum by the care staff."
"The service has improved a lot with regards to getting an answer when you phone for updates about my mother."
"Newbyres has a strong leadership team. They are very welcoming and approachable."
"My Father is loved and looked after by the carers on Third Street better than I could have at home. Their comments and understanding of him in such a short time has impressed me."
"I am delighted with the service given to my Dad."

Other comments from people highlighted some key areas for improvement:

"There are times I can't get through on the phone to inquire about my mother and as a result have had to go down to the home in person to speak to people."
"I am concerned about the number of medication errors occurring and improvements to this don't appear to be happening."

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	3 - Adequate
How good is our care and support during the COVID-19 pandemic?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?   3 - Adequate

We evaluated how well staff supported people's wellbeing as adequate. There were some key strengths, which were just outweighed by some weaknesses the provider needed to address to improve people's experiences.

1.1 – People experience compassion, dignity, and respect

People described the carers as very kind and caring. Staff were well-meaning in their actions and clearly wanted to take care of people. However, the management team should make improvements to how some staff engage with people or discuss and or record their care and support needs. The choice of language and terminology was not always respectful. For example; using words like "feeding" and "wandering" in relation to people who needed support to eat well or who walked with purpose. People's clean washing was hung on their bedroom doors which was not dignified. Improvements should ensure practices always respect people and promote positive experiences, consistent with the principles of the Health and Social Care Standards. (Please see area for improvement 1).

Since our last inspection, the management had introduced communication agreements with people and their relatives. The purpose of which was to provide clarity around expectations on when and how people should be contacted. People told us that improvements had been made, however, there were occasions when the staff office was not staffed, and messages were not always replied to. We will continue to monitor this at future inspections.

1.2 – People get the most out of life

The home has embraced the Scottish Government Open with Care guidance on visiting. Relatives were able to come and go at a time that suited people.

Activity records showed that few activities were taking place. This led to many people not being able to pass their time in a meaningful way. Some group and one-to-one activity did take place with the activity staff. However, through staff sickness, forward planning was not always easy to fulfill.

Some people who spent time in their bedroom or the lounge area, experienced periods of isolation with limited stimulation. This could have a negative impact on their health and wellbeing needs.

There is a fully enclosed garden, however people did not have free access to this. People's preferences and hobbies were written in their personal plans, but there was little correlation between what was recorded, and the activities provided. Improvements were needed and management had recognised the need to introduce more meaningful individual activity planners for people. (Please see area for improvement 2).

1.3 – People's health benefits from their care and support 3 – Adequate

The manager and staff had been pro-active during the pandemic when reviewing people's care needs and liaising with people's relatives either by phone, video call and when restrictions eased, in person.

We were concerned about how well staff were monitoring the skin integrity for some people. Some people were at increased risk of skin damage and were being supported with frequent re-positioning and air mattresses. Records were not being effectively recorded, kept up to date and evidenced in a meaningful way. The provider must ensure that care plans and associated documentation accurately details residents' skin care needs and actions required by staff to meet these needs (Please see area for improvement 3).

Medication records were not always accurately completed, and several errors had occurred, which had impacted people's health. An improvement plan had been introduced by the manager which included pharmacist audits, re-training, competency assessments and staff reflecting upon their practice. Despite these measures, medication errors were still of concern. The administration of medication needed to be improved with better understanding required from staff about the importance of when medication should be administered and how this should be recorded. The provider must make improvements to ensure people have confidence that they will receive their medication as prescribed by appropriately competent and skilled staff. (Please see requirement 1).

Requirements

1. In meeting this requirement people who need help to take their medication can be confident that they will receive it safely from appropriately skilled staff. They will know that there are clear policies and guidelines in the service on the use, storage and administration of medication.

In order to achieve this, by 31 January 2022, the provider must ensure:

- All staff sign to confirm when they have administered medication and where a prescribed medicine is not administered, the reason(s) for this is/are recorded.
- 'As required' medication protocols detail the circumstances when this will be administered and are cross referenced to information held within personal plans on stress and distress, health, pain and elimination.
- Where prescribed 'as required' medication had not been administered because it was no longer needed, a request for it to be re-assessed with health professionals is made.
- Records are maintained to record the outcome of as required and anticipatory care medication.
- Staff have the appropriate level of understanding of administering medication including training and reflective accounts.
- Training, observations of practice and other appropriate quality assurance measures lead to supporting improvements.
- A comprehensive analysis of patterns of drug errors, that includes the staff members involved, staffing levels at the time and pressures placed upon staff.
- The issues which are identified from the analysis in the point above inform an improvement plan. For example, steps to support staff administering medication to understand their responsibilities and if necessary staff disciplinary action is taken were support and training has not improved practice.
- Evaluation of actions taken to evidence improved quality and safe administration of medications

This is in order to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is also to ensure that care and support is consistent with the Health and Social Care Standards which state: 2.23 If I need help with medication, I am able to have as much control as possible.

Areas for improvement

1. To ensure people are supported well the manager should ensure that staff always treat people with dignity and respect. This practice should also reflect the language and terminology used when in discussion with people, within the staff team and recorded in support related documentation.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I experience people speaking and listening to me in a way that is courteous and respectful, with my care and support being the main focus of people's attention.' (HSCS 3.1).

2. In order to support the improvement of people's physical and mental wellbeing, the manager should review the way in which activities are organised and planned with people. This should focus on developing more person-centred activity plans with people, taking into account the quality and amount of physical and social activity made available for people, within and outside the home.

This to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I can choose to have an active life and participate in a range of recreational, social, creative, physical, and learning activities every day, both indoors and outdoors.' (HSCS 1.25).

3. In order to ensure people's skin care is monitored and managed correctly, the manager should ensure relevant care plans and other health records are kept up to date and fully accessible to all staff.

This is to comply with Social Care and Social Work Improvement Scotland Requirements for Care Services Regulations 2011 (SSI 2011/210), Regulation 4 (1) (a) proper provision for the health, welfare and safety of service users.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'My care and support meets my needs and is right for me' (HSCS 1.19) and 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

How good is our care and support during the COVID-19 pandemic?   4 - Good

We evaluated how people's care was delivered during the pandemic as good. There were several important strengths that, taken together, clearly outweighed areas for improvement.

7.2 - Infection control practices support a safe environment for both people experiencing care and staff
The home was clean and tidy, and staff worked hard to maintain this level of cleanliness. New furnishing had been purchased for the home following consultation with people. There was a good supply of cleaning equipment, products, and solutions. Domestic staff were confident in describing the cleaning required and the products they needed to use to reflect the Scottish Covid-19 Community Health and Care Settings Infection Prevention and Control Addendum.

Relatives told us that when they arrived for visiting, they were supported with the testing process. Lateral flow device testing was being completed for staff on a regular basis. Staff were often reminded to do this.

The staff had good supplies of personal protective equipment (PPE) and they knew how to access it. The PPE was situated at key points, and we saw staff effectively using PPE when supporting people with direct care on a one-to-one basis.

Staff had completed training on effective handwashing; however, this learning was not always evident in their practice. For example, not all staff were washing or sanitising their hands in between supporting people at mealtimes. There were observations of practice, but these did not reflect our findings at inspection.

7.3 - Staffing arrangements are responsive to the changing needs of people experiencing care
Staff were responsive to people's changing needs because there was usually enough staff to be able to do so. Staff were often only able to support people with tasks relating to their care and support needs rather than having time to engage in meaningful conversations or even activities.

Staffing levels had increased during the Covid-19 pandemic, recognising the added pressures placed upon staff and the increased care and support needs of people. Although the manager was confident that the staffing levels were appropriate, this was not based on any regular assessment. This resulted in staffing arrangements being relatively static with infrequent reviews and were not adjusted to necessarily meet people's changing needs. The manager should re-introduce recognised measures to determine what staff numbers were required. (Please see area for improvement 1).

Ongoing training was in place for staff that included but was not limited to Covid-19 guidance and relevant procedures. However, we identified gaps in training focusing on falls prevention, caring for smiles, palliative and skin care. Improvements should ensure people have confidence in the staff caring for them and are fully competent in meeting their care needs. (Please see area for improvement 2).

Areas for improvement

1. In order to ensure that staffing levels and the skill mix of care teams are responsive to the changing needs of people, the manager should take account of the dependency levels of people.

This to ensure that care and support is consistent with the Health and Social Care Standards which state that: "My needs are met by the right number of people." (HSCS 3.15).

2. In order to ensure that people, have confidence in those who care for them are trained, competent and skilled to meet their care needs, the manager should ensure that training / re-fresher training includes, but is not limited to the following:

• Falls prevention with an understanding of recognised falls prevention models.
• Caring for smiles.
• Palliative care.
• Skin care management.

This to ensure that care and support is consistent with the Health and Social Care Standards which state that: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 1.25).

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

In order to ensure good outcomes for people experiencing care, the manager should ensure that people's meals and snacks meet their dietary needs and preferences when developing their outcome care planning.

This is to ensure care and support is consistent with the Health and Social Care Standard 1.37: My meals and snacks meet my cultural and dietary needs, beliefs, and preferences.

This area for improvement was made on 25 January 2021.

Action taken since then
People's care and support plans have been reviewed and include more comreensive information on people's preferences to meals and their dietary needs.

Previous area for improvement 2

In order to ensure good outcomes for people experiencing care, the manager should develop communication agreements with relatives. This would detail how communication would be established and in what circumstances.

Also, to cover levels of expectations balanced with what is realistically achievable for all given restrictions at that time. This should be reviewed as restrictions change.

This is to ensure care and support is consistent with the Health and Social Care Standard 2.18: I am supported to manage my relationships with my family, friends or partner in a way that suits my wellbeing.

This area for improvement was made on 25 January 2021.

Action taken since then
Relatves have support agreements in place, detailing when, how and in what curcumstaces relatives should be contacted.

Previous area for improvement 3

In order to ensure good outcomes for people experiencing care, the manager should ensure that there are effective communication systems in place to involve people and their representatives in decisions about their care and support and keep them up to date with any changes to their health and wellbeing.

This is to ensure care and support is consistent with Health and Social Care Standard 2.17: I am fully involved in developing and reviewing my personal plan, which is always available to me

This area for improvement was made on 21 December 2020.

Action taken since then

Improvements have been made which have included involving people and their representations at revie meetings alond with the introduction of communication agreements.

Previous area for improvement 4

In order to ensure good outcomes for people experiencing care, the manager should risk assess the impact of the current visiting restrictions for people. Essential visits should be arranged for people who need additional psychological or emotional support.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me

This area for improvement was made on 21 December 2020.

Action taken since then

The service has fully embraced the Open with Care guidance issued by the Scottish Government with regards to visiting people in care homes.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health benefits from their care and support	3 - Adequate

How good is our care and support during the COVID-19 pandemic?	4 - Good
7.2 Infection control practices support a safe environment for people experiencing care and staff	4 - Good
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good

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Future Housing Land Supply

Report by Kevin Anderson, Executive Director Place

Report for Information

1   Recommendations

It is recommended that the Council:

1. Notes the affordable housing land supply that is already secured and contained in the Strategic Housing Investment Plan (SHIP).
2. Notes the nature of the ongoing work within Midlothian Council to establish a longer term housing land supply.
3. Notes the likely future requirement to purchase sites off the open market.
4. Notes a further update on activity shall be included in the annual SHIP report to Council later this year.

2   Purpose of Report/Executive Summary

2.1   At the meeting of Midlothian Council on 14th December 2021, a report was requested on affordable housing land supply. This report is in response to that request and sets out:

i.   Where Midlothian Council has already secured affordable housing supply;
ii.   The challenges around securing a longer term housing land supply;
iii.   Work currently underway to establish a future pipeline of sites;
iv.   Examples of sites currently under consideration; and
v.   Details on the Edinburgh Housing Demonstrator, which is one possible means of delivering homes on future housing land.

2.2   A further report will be submitted to Council when the review of housing land is completed and this will be submitted to Council together with the 2023/24 - 27/28 Strategic Housing Investment Plan (SHIP) in September 2022.

Existing Affordable Housing Land Supply

2.3 The approved Strategic Housing Investment Programme (SHIP) covers the period 2022/23 to 2026/27. It is an annually updated review of the future supply of housing sites in Midlothian. As such it is a useful starting point to understand what sites are already secured for affordable housing supply.

2.4 The SHIP features 31 development projects currently being progressed by Midlothian Council over the next 5 years as well as 14 by Registered Social Landlords. In total these projects will deliver 2,446 homes, of which 1,413 are Council housing.

2.5 Table 1 below shows the sites that are in the current programme are either on site or coming forward. These sites comprise our substantive existing affordable housing programme.

Table 1 Emerging Sites (On Site 2021/2022)					
Project Address	**Developer**	**Unit No.**	**Tenure**	**Estimated / Actual site start**	**Estimated / Actual completion**
Bonnyrigg Burnbrae Road	MLC	21	SR	Mar-22	Jun-23
Bonnyrigg Cockpen Terrace, Bonnyrigg	MLC	16	SR	Mar-22	Jan-23
Bonnyrigg Dalhousie (Springfield Homes)	MLC	70	SR	Jan-21	Jun-22
Bonnyrigg High Street (Complex Care)	MLC	20	SR	May-22	Mar-24
Bonnyrigg Polton Street (Complex Care)	MLC	46	SR	Mar-22	Jun-24
Dalkeith Newmills Road (Care Housing)	MLC	48	SR	Mar-21	Dec-22
Dalkeith Newmills Road - (General Needs)	MLC	44	SR	Mar-21	Dec-22
Gorebridge Newbyres Crescent	MLC	72	SR	Mar-22	May-24
Mayfield Conifer Road	MLC	72	SR	Mar-22	Mar-24
Mayfield Easthouses Road Former Newbattle High School Site) (Phase 1) - P42523	MLC	98	SR	Sep-22	Apr-24
Newtongrange Morris Road	MLC	79	SR	Aug-18	Jul-22
Dalkeith Buccleuch Street	MLC	7	SR	Feb-22	Nov-22
Roslin Moat View (Barratt)	MLC	53	SR	Feb-22	Jan-24
Shawfair (Dandara)	MLC	18	SR	Feb-22	Apr-23
Danderhall, Newton Church Road (Leisure Centre)	MLC	24	SR		
Danderhall Newton Church Road (Barratt)	MLC	33	SR	Sep-22	Feb-24
Shawfair Plot P	MLC	49	SR	Jun-22	Mar-24
Total		**770**			

2.6   At present Midlothian Council has a very positive affordable housing supply and is maximising the level of grant the Scottish Government is able to support our programme with.

2.7   One feature to note is that Midlothian Council benefits significantly from affordable housing supplied to the programme by the private sector, through Section 75 agreements. In the table above, more than 230 of the homes coming through the programme are provided via this mechanism.

2.8   While it is very positive that the affordable housing programme benefits from the high level of house-building in the area, it should be noted that Midlothian Council is not able to control to the same degree the specification of these homes. For example, these homes are not built to a Passivhaus standard, unlike many of the homes the council build on land in our ownership. Furthermore, these homes are provided within larger mainstream housing developments. These developments do not necessarily generate the same regeneration or place-making benefits that Council-led housing does.

Future Supply

2.9   While the current programme is robust and delivering, looking ahead to where the sites of the future will emerge, the picture is less clear. The Shadow Programme in the SHIP serves as a longer term reserve list, highlighting potential future opportunities that have yet to be confirmed. This contains a short list of sites for Midlothian Council, set out in Table 2 below.

Table 2 SHIP Shadow Programme (MLC)

Project Address	Developer	Unit Numbers (TBC)	Tenure	Estimated / Actual site start year	Estimated / Actual completion year
Danderhall Edmonstone Road	MLC	28	SR	Nov-22	Nov-23
Pathhead South Tynewater Crichton Road	MLC	12	SR	TBC	TBC
Shawfair Old Craighall Rd (M&M)	MLC	48	SR	TBC	TBC
Total Shadow Programme		88			

2.10   Sites not included in this list are those that cannot be confirmed as part of the future affordable housing land supply.

2.11   On the 29th June 2021, Midlothian Council agreed to bring forward a deliverable regeneration plan for Dalkeith. A key component of this will be affordable housing. A Stage 2 masterplan for Dalkeith town centre is just getting underway, however the scale of housing that will be included in this will be subject to further analysis and an Outline Business Case that will require further approval.

2.12   Similarly, an Outline Business Case is to be developed for an affordable housing development in Newtongrange village centre. However, as these proposals are currently developed and will be subject to further approval due to the requirement to relocate the current library in Newtongrange, these are not included above. However, both Dalkeith and Newtongrange present future opportunities for the delivery of housing.

2.13   Given the limited level of opportunities that are currently known of, an exercise is clearly required to address future opportunities going forward.

3   Identifying Future Housing Supply

3.1   A Future Housing Pipeline exercise is currently underway within the Construction Team, in order to identify sites that are suitable for housing in a methodical way. Currently the team is:

- Analysing GIS database of property in Council ownership for potential housing sites.
- Reviewing data on lock up and garage sites across Midlothian to establish whether these sites are suitable for housing delivery.
- Engaging with services within Midlothian Council to understand whether their future property requirements will result in surplus properties being created, which may be suitable for housing.

3.2   This will create a long-list of potential sites that could be developed post-2023. A set of criteria will then need to be applied to these to scope their suitability for development and inclusion in the affordable housing supply programme.

3.3   The Strategic Housing Investment Programme contains a methodology for the prioritisation of sites, which can be adopted here. This is set out below.
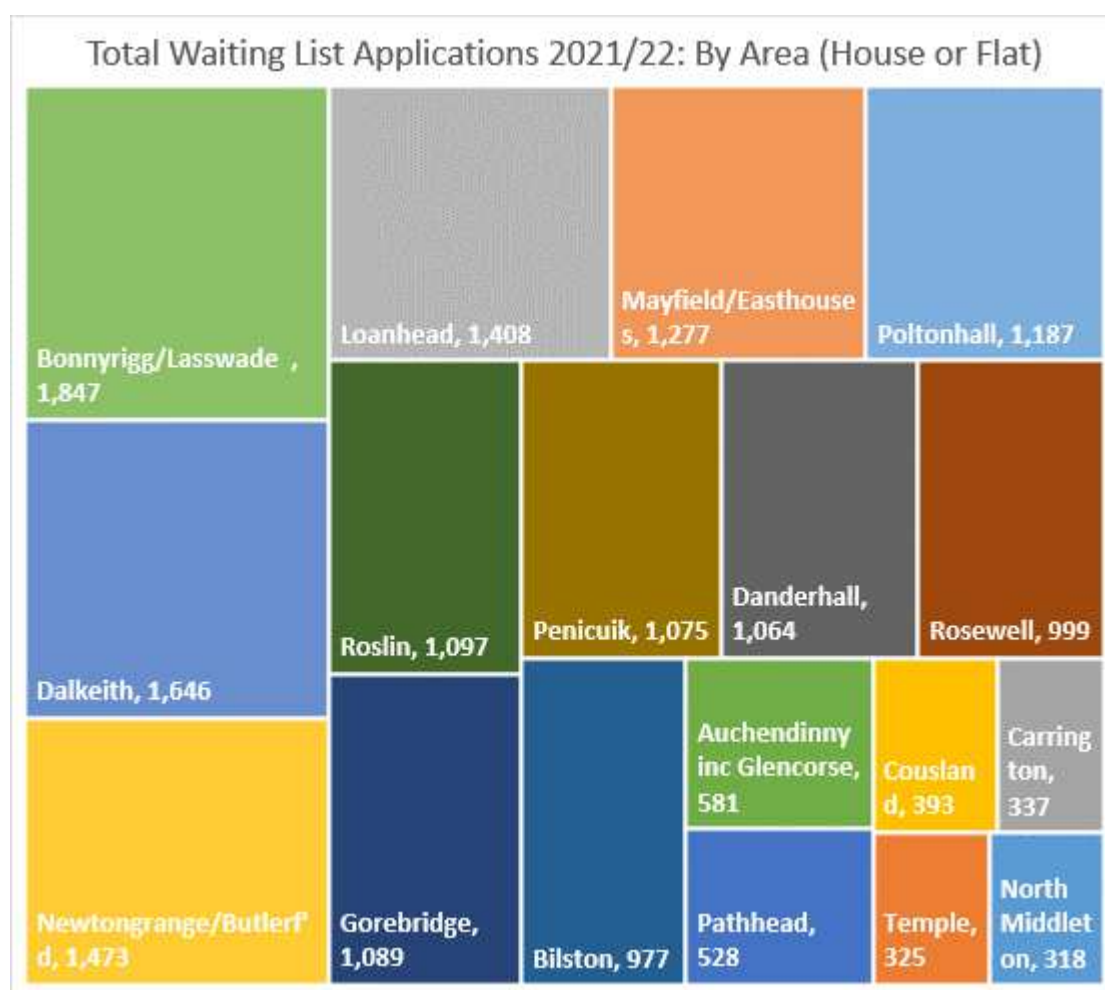
Table 3: SHIP Project Prioritisation Methodology

Scoring Criteria	Explanation	Score
Area Housing Need	Housing need rankings are based on a waiting list demand study. 1 would indicate no housing need in an area, whilst 5 indicates the highest level of need.	1-5
Land Availability	Sites ranked most highly are those owned by the Council or RSL. Also ranked highly are sites with Planning Permission in place	1-5
Ability to Start on Site	A site with a high score indicates that the work could start on site underway once funding was approved.	1-5
Constraints	Issues such as Section 75 requirements that	1-5

	have yet to be resolved would be given a lower score.	
Equalities Needs	All sites will score at least a good rating (3) due to Housing for Varying Needs. Additional points would be awarded for particular needs housing, mixed tenure development e.g. shared equity.	1-5
Environmental Impact	All sites which have been allocated through the Midlothian Local Plan would not be considered as having a negative environmental impact. Use of renewable technology and building on Brownfield sites would score more points.	1-5

3.4   In terms of area needs, Early Pressure Analysis by Midlothian Council indicates highest areas of demand from those on the waiting list. This shows particularly high areas of demand in Bonnyrigg/Lasswade, Dalkeith, Newtongrange and Loanhead. However, there is consistent demand for housing in most settlements in Midlothian.

Figure 1: Early Pressure Analysis February 2022

Total Waiting List Applications 2021/22: By Area (House or Flat)

Bonnyrigg/Lasswade , 1,847
Loanhead, 1,408
Mayfield/Easthouses, 1,277
Poltonhall, 1,187
Roslin, 1,097
Penicuik, 1,075
Danderhall, 1,064
Rosewell, 999
Dalkeith, 1,646
Auchendinny inc Glencorse, 581
Cousland, 393
Carrington, 337
Newtongrange/Butlerfld, 1,473
Gorebridge, 1,089
Bilston, 977
Pathhead, 528
Temple, 325
North Middleton, 318

3.5 While the initial focus will be on existing land in Midlothian Council ownership, there will be diminishing opportunities arising from this as many of the key sites generated from (for example) the relocation of schools, such as the site of the former Newbattle High School, form part of our current programme.

3.6 Therefore, in the future, it is likely that there will be a need to acquire sites on the open market to ensure an ongoing supply of Council built new affordable homes. This is likely to have an inflationary impact on development costs, however will be necessary to ensure an on-going supply of high quality, Council built homes that meet our energy efficiency standards and contribution towards place making and the regeneration of Midlothian communities.

4 Sites Under Consideration

4.1 To date, a number of opportunities have been assembled from preliminary work. Some of these sites are listed below to illustrate the nature of the opportunities and the kinds of factors that need to be taken into consideration.

Site Name	Stone Place Lock Ups
Location	
Area of Housing Need	While there is demand for Council housing in Mayfield, there is already a high proportion of Council and other social housing located in the settlement, with a substantial programme of new Council housing coming forward in the vicinity.
Land Availability	The site is in Council ownership. However, the

	site of the Mayfield Campus redevelopment is adjacent to it. The lock up site may be required to benefit the overall design of the Mayfield campus. Until the design for the joint campus is finalised, it is not proposed to progress a housing proposal at this location.
Constraints	No known contraints however Site Investigation would be required to understand ground conditions.
Equalities Needs	To be determined.
Environmental Impact	Redevelopment of this brownfield site will have a positive environmental impact. Any housing would be built to passivhaus standard.

Site Name	Oak Crescent Lock Ups, Mayfield
Location	
Area of Housing Need	While there is demand for Council housing in Mayfield, there is already a high proportion of Council housing located in the settlement, with a substantial programme of new Council housing coming forward in the vicinity.
Land Availability	The site is in Council ownership but the lock up site itself is small. There may be other opportunities on a larger site.
Constraints	No known contraints however Site Investigation would be required to understand ground conditions.
Equalities Needs	To be determined.
Environmental Impact	Redevelopment of this brownfield site will have a positive environmental impact. Any housing would be built to passivhaus standard.

Site Name	Blackcot Road, Mayfield

Location	
Area of Housing Need	While there is demand for Council housing in Mayfield, there is already a high proportion of Council housing located in the settlement, with a substantial programme of new Council housing coming forward in the vicinity.
Land Availability	Site ownership to be established, but likely to be in Council ownership, created as recration space for the housing adjacent. However over time it has become disused.
Constraints	Site Investigation would be required to understand ground conditions. Existing vehicular access is narrow and a new access might be required if developed.
Equalities Needs	To be determined.
Environmental Impact	Redevelopment of this brownfield site will have a positive environmental impact. Any housing would be built to passivhaus standard.

4.2   As a longlist of future sites is developed, a strong geographical balance will be needed to reflect the balance of demand across Midlothian.

5   Edinburgh Home Demonstrator

5.1   Many of the sites being reviewed at present are by their nature small, infill sites. These generate higher development costs due to an inability to capitalise on economies of scale that larger sites might bring.

5.2   One means to address this may be to explore the benefit of utilising the Edinburgh Home Demonstrator project. This project is being delivered through the Edinburgh and South East Scotland City Region Deal and its focus is on creating the conditions to facilitate the wider adoption of Modern Methods of Construction (MMC) or off-site construction, whereby component of homes are designed for manufacture off site and on-site assembly. This could have significant benefits in terms of the speed of delivery of homes as well as benefits related to energy efficiency due. The vision and workstreams for this project are below.

Figure 2: Vision for Edinburgh Home Demonstrator

Image courtesy of Scottish Futures Trust

5.3   This is a City Region wide project. To achieve the vision set out above, local authorities are being encouraged to work together to achieve:

- Assembled scale across the city region by putting multiple sites together. This would assist with economies of scale for smaller sites.
- Consensus around housing types, performance and products to allow mass customisation to be achieved.
- A phased, flexible approach to reflect capacity and maturity of supply and demand.
- Whole life benefits and value.

5.4   With the first two pilots for the EHD now live, the SFT led team is seeking to assemble a pipeline of up to 800 homes across the city region (see below). There may be scope for our future housing supply sites to make up some of this pipeline, subject to assurances around performance specification and the need for these to deliver homes to a Passivhaus standard.

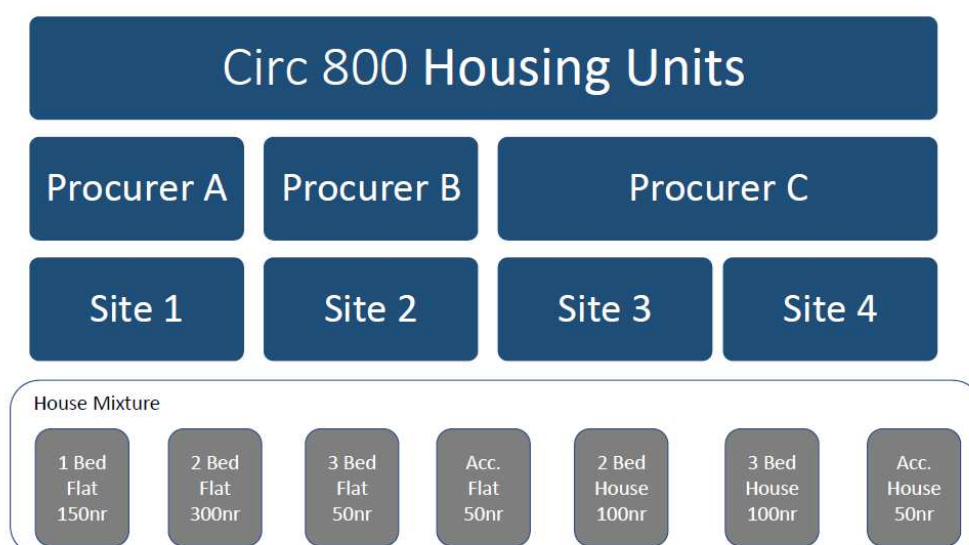**Figure 3: EHD Pilot 3 – 800 home City Region Pipeline**

Cire 800 Housing Units

| Procurer A | Procurer B | Procurer C |

| Site 1 | Site 2 | Site 3 | Site 4 |

House Mixture

| 1 Bed Flat 150nr | 2 Bed Flat 300nr | 3 Bed Flat 50nr | Acc. Flat 50nr | 2 Bed House 100nr | 3 Bed House 100nr | Acc. House 50nr |

Image courtesy of Scottish Futures Trust

6   Conclusion

6.1   Midlothian Council has a strong affordable housing supply programme leading into 2022/23 and to 2023/24. However, beyond that, there needs to be greater certainty around the supply of housing for the next phases of Council housing delivery, particularly with regard to sites that are owned and controlled by Midlothian Council.

6.2   While some sites have emerged as options, such as existing lock-up sites, a more thorough, methodical analysis of these in addition to surplus or under-utilised Council owned land and property is required to develop a long list of potential sites. This work is currently underway. It is proposed that a report is provided to Midlothian Council with the conclusions of this work in September 2022.

6.3   This report also highlights the potential scope of the Edinburgh Housing Demonstrator as a means to deliver some of these sites in the future.

Date 10th March 2022

Report Contact:
Fiona Clandillon, Head of Development

fiona.clandillon@midlothian.gov.uk

7   Report Implications (Resource, Digital and Risk)

7.1   Resource

The Housing Revenue Account (HRA) reserve continues to be committed to funding the existing new build commitments and supports the sustainability of both the HRA and the affordability of tenants rents.

7.2   Digital

None.

7.3   Risk

If the Council does not support the development of new affordable housing, the level of housing need will increase with negative consequences for Midlothian's communities.

5.4   Ensuring Equalities (if required a separate IIA must be completed)

Equality is central to all housing and housing services delivery. An Integrated Impact Assessment (IIA) has been undertaken on the Local Housing Strategy 2021-26 to ensure that the needs of local communities have been fully considered. The SHIP reflects identified needs and draws on findings from the IIA when considering the implications flowing from the translation of strategic aims into housing policies.

4.4   Additional Report Implications (See Appendix A)

See Appendix A

Appendices

Appendix A – Additional Report Implications
Appendix B – Background information/Links

APPENDIX A – Report Implications

A.1   Key Priorities within the Single Midlothian Plan

Provision of secure affordable housing will improve the quality of life for citizens and reduce the gap in health outcomes.

A.2   Key Drivers for Change

Key drivers addressed in this report:

☐ **Holistic Working**
☐ **Hub and Spoke**
☐ **Modern**
☒ **Sustainable**
☐ **Transformational**
☐ **Preventative**
☒ **Asset-based**
☐ **Continuous Improvement**
☐ **One size fits one**
☐ **None of the above**

A.3   Key Delivery Streams

Key delivery streams addressed in this report:

☐ **One Council Working with you, for you**
☒ **Preventative and Sustainable**
☐ **Efficient and Modern**
☐ **Innovative and Ambitious**
☐ **None of the above**

A.4   Delivering Best Value

We manage all aspects of our business so that tenants and other customers receive services that provide continually improving value for the rent and other charges they pay.

A.5   Involving Communities and Other Stakeholders

The Rent Setting Strategy previous consultation undertaken included an in- person survey, meetings with Midlothian Tenant Panel and other Tenant Groups. In addition, the Rent Setting Strategy was discussed at the Local Housing Strategy Working Group to ensure engagement with key stakeholders such as local RSLs, Shelter and the Scottish Government.

A.6   Impact on Performance and Outcomes

The Rent Setting Strategy supports key objectives to keep rents affordable while improving and investing in our existing and new homes.

A.7   Adopting a Preventative Approach

The strategy for rent setting ensures that the Housing Revenue Account continues to provide for investment in existing stock to ensure housing is of good quality and investment of new housing to meet housing need in Midlothian.

A.8   Supporting Sustainable Development

Good practice in relation to energy efficiency and sustainability is contained in the SHIP.

Background Papers:

Review of Garage Lock-up and Garage Sites

Report by Kevin Anderson, Executive Director - Place

Report for Information

1   Recommendations

It is recommended that Council notes this report for information and comment.

2   Purpose of Report

At the meeting of Midlothian Council on 14th December 2021, a report was requested to provide up to date information on garage lock-ups and garage sites owned by Midlothian Council and to advise on future proposals to undertake a review to identify potential opportunities to re-purpose those sites where there is currently low demand and occupancy rates.

Date: 10th March 2022
Report Contact:
Simon Bain, Acting Head of Housing Services
Simon.bain@midlothian.gov.uk

3 Background

3.1 Garage Lock-ups

The Council currently owns 675 lock-up garages across Midlothian, usually located within council housing estates. These are let and managed by the Housing Services Team. The numbers of lock-up garages in use at any one time changes from week to week. At the date of this report, there are currently 223 void lock-up garages spread across Midlothian, which constitutes 33% of the overall garage stock. There are currently no applications for lock-up garages.

Lock- up garages are let using a standard lease to tenants for a standard monthly rent, which is reviewed along with council house rents on an annual basis. The current weekly charge is £13.84 for council house tenants and £16.60 for non- tenants, as this includes a VAT charge. The Council is responsible for maintaining the lock-up garage fabric and the sites, including the access roads. It is likely that the cost of lock up garages has become a disincentive to tenants or residents in the area renting these units. A Council tenant would currently pay £719.68 per year. Non-council tenants can also rent a garage lock-up but they incur a further 20% charge for VAT. The garage lock-up rent charge was previously reviewed in line with market value and benchmarked against other local authorities. At the Council Meeting held on February 2020, Councillors agreed to a consultation on a proposed reduction of lock-up garage rents which will be incorporated into the rent strategy consultation due later this year.

3.2 Garage Sites

The Council currently owns 334 garages sites across Midlothian where a plot is rented for the erection of a garage by the individual tenant. The numbers of garage sites in use at any one time changes from week to week. At the date of this report, there are currently 70 void garage sites spread across Midlothian, which constitutes 21% of the overall garage sites. There are currently no applications for garage sites.

Garage site tenants are responsible for the maintenance of their own garage while the Council maintains the site and its access. The annual rent charged is £52.00.

3.3 Council owned lock-up garages and sites located across Midlothian vary from standalone blocks of garages in large plots, to small isolated buildings on small sections of land. The variety of garage buildings presents a number of challenges and opportunities to the Council in terms of repair, maintenance and management to possible re-purposing for alternative uses to benefit Midlothian's communities. The garage lock-ups have been subject to very limited investment in recent years meaning the overall portfolio requires a significant level of investment to maintain and improve the assets in the coming years to ensure these remain safe and usable assets for the residents of Midlothian. There is currently no planned maintenance programme for

garage sites and lock-up sites. This will require that the stock is surveyed to determine future investment needs.

3.4 Low demand garage sites have a negative impact on the local environment and are a drain on Council resources. Midlothian Council does consider the demand for garage lock-ups and sites and where it has been possible has previously re-used land to build new housing as part of the Council's affordable housing programme as at Crichton Avenue, Pathhead and Castlelaw Terrace , Bilston providing additional 20 affordable homes. It is also proposed to include garage lock-ups at Stone Place, Mayfield and Oak Place, Mayfield into the Council's affordable housing programme due to lack of demand, vandalism and public safety concerns at those locations.

3.5 Further activities aimed at engaging with Midlothian's communities regarding future garage lock-ups and garage site developments and redevelopment will identify and consider specific improvement projects to replace redundant and under-used garage areas. Potential opportunities in regards to the future approach is set out in more detail below.

4 Potential Future Alternative Use for Garage Lock-ups and Garage Sites

4.1 It is proposed that a dedicated staff resource, linking with relevant Council services, local communities and ward Councillors, will be deployed to revise work previously undertaken some time ago by the Housing and Construction Teams to review and identify potential opportunities to re-purpose those garage lock-up and sites where there is currently low demand and occupancy rates. A recent review of the garage sites and lock-up data has identified a number of sites where it is considered re-use or demolition is the most appropriate course of action. This has been determined based on the locality of the sites, current condition of the garage assets, repeated issues with anti-social behaviour, fly tipping and management of the lock-ups and sites.

4.2 Potential alternative uses for garage lock-ups and sites may include:

- sites assessed for development potential are included in the Council's future affordable housing programme. While some existing lock-up sites have emerged as priorities as highlighted above, a more thorough analysis of garage lock-ups and sites is required to develop a list of potential sites
- providing an enhanced and attractive neighbourhood environment with access to quality outdoor green, public and play spaces providing opportunities for increased socialisation in housing developments, building positive relationships in the community and providing opportunities to be physically active contributing to improved health and wellbeing outcomes
- contributing to economic development and increasing the capacity of local communities to improve economic activity,

growth and quality of life outcomes as aligned to the Community Planning Partnership's Single Midlothian Plan vision of a 'great place to grow'. This may include workshops for rent or providing fixed desk, private office, meeting and event space for local businesses

- community recycling facilities such as the reuse cabin previously located and piloted at Stobhill recycling centre, making a positive contribution to Midlothian Council's Climate Change Strategy
- easing parking pressures by creating additional car parking spaces where there is demand for this
- land sale to generate income
- disposal of land to other council services where this is aligned to strategic and operational objectives
- other priorities identified by local communities and ward Councillors.

4.3 A subsequent, further report outlining recommended proposals and targeted initiatives can then be provided to Council.

5   Report Implications (Resource, Digital and Risk)

5.1   Resource

It is proposed to deploy a dedicated staff member from existing staffing resources with no impact on staffing budget.

Any longer-term resource implications will be identified in the subsequent report submitted to Council.

5.2   Digital

None identified.

5.3   Risk

Potential negative consequences of not progressing this review may have for Midlothian's communities is poor quality and unsightly environment.

5.4   Ensuring Equalities (if required a separate IIA must be completed)

Whilst there are no direct implications at present arising from this report Community Equality Impact Assessments will be carried out in future against proposals where required.

5.5   Additional Report Implications

Not applicable.

A.1 Key Priorities within the Single Midlothian Plan

Examples are provided in section 4.2 of the report.

A.2 Key Drivers for Change

Key drivers addressed in this report:

☒ Holistic Working

☐ Hub and Spoke

☒ Modern

☒ Sustainable

☒ Transformational

☐ Preventative

☒ Asset-based

☐ Continuous Improvement

☐ One size fits one

☐ None of the above

A.3 Key Delivery Streams

Key delivery streams addressed in this report:

☒ One Council Working with you, for you

☒ Preventative and Sustainable

☐ Efficient and Modern

☒ Innovative and Ambitious

☐ None of the above

A.4 Delivering Best Value

We manage all aspects of our business so that tenants and other customers receive services that provide continually improving value for the rent and other charges they pay.

A.5   Involving Communities and Other Stakeholders

This report provides an overview of the current position and planned actions. No consultation was required or undertaken at this time. However, the lead Council Officer will consult closely with local communities, ward Councillors and other Council services as set out in section 4.1 of the report.

A.6   Impact on Performance and Outcomes

The report sets out proposals to undertake a review to identify potential opportunities to re-purpose garage sites where there is currently low demand and occupancy rates to deliver positive outcomes as detailed in section 4.2 of the report.

A.7   Adopting a Preventative Approach

The focus of future proposals presented to Councillors and local communities will aim to improve both the provision and quality of community assets.

A.8   Supporting Sustainable Development

Good practice to be adopted in relation to energy efficiency and sustainability will be contained in the future report outlining recommended proposals for re-use of garage lock-ups and sites.

Fire and Smoke Alarms in Midlothian

Report by Kevin Anderson, Executive Director - Place

Report for Noting

1 Recommendations

Council is recommended to note this report, advising that Care and Repair Scotland has awarded funding to the claim submitted for grant assistance to eligible householders in Midlothian.

2 Purpose of Report/Executive Summary

At the meeting of Midlothian Council on 15th February 2022, a report was provided in Fire and Smoke Alarms in Scotland, regarding the legislative change requiring that every home in Scotland must have interlinked fire alarms by February 2020.

The legislation applies to all property owners, including those who own private homes and it is the property owner's responsibility to pay for and install the alarms. This report is in response to the request from members to update on any additional support and assistance available.

Date: 9 March 2022
Report Contact: Kevin Anderson, Executive Director - Place
email: kevin.anderson@midlothian.gov.uk
tel: 0131 271 3102

3   Background

The Council's obligations as a landlord to have installed the fire and smoke alarm devices in the council housing stock are met.

The Scottish Fire and Rescue Service received £1m from Scottish Government to install alarms in homes of people at highest risk and the government has also provided £500,000 to help disabled and older people who meet the criteria, with an extra allocation awarded prior to the regulations commencing from February to Care and Repair Scotland, which intends to target some of this additional funding to Council areas that do not have a Care and Repair service.

There is not currently an established Care & Repair Service in Midlothian, although funding was previously provided to support a local enterprise to deliver this but that proved unsustainable and the service subsequently closed. However, the Local Housing Strategy agreed at Council last year, and also the IJB Strategic Plan each committed to explore the feasibility to develop a care and repair service provision in 2022/23 and that work is in progress.

Meantime, a successful bid was submitted to Care and Repair Scotland for the additional funds available to local authorities which have no current scheme and an award of £10,000.00 to Midlothian Council to enable eligible Midlothian residents to benefit from the available funding and comply with the new legislation.

The Scottish Government has requested this is used to bulk purchase alarms so that by the financial year-end there is an indication of how many alarms the £1M funding purchased, while installation will progress in the financial years 2022/23.

Eligibility for support from Care & Repair Scotland criteria is that householders must live and own their home, which has a Council Tax banding of A-C. Applicants must also either be of state pension age and in receipt of guaranteed Pension Credit, or have a disability and be in a support group for Employment and Support Allowance.

The process is currently being finalised for eligible households to access available devices and this shall be publicised accordingly.

4   Report Implications (Resource, Digital and Risk)

4.1   Resource

There are no Council resource implications related to this report.

4.2   Digital

There are no digital implications related to this report.

4.3   Risk

Any enforcement of the legislation sits with local authorities and this would be pursued through our Protective Services. However, Scottish Government have made clear prior to the enactment that there is no expectation of councils pursuing enforcement at this time for domestic properties.

The Scottish Government has indicated that councils could require homeowners to carry out work, but it did not expect them to go beyond advising property owners about fire alarms.

In our landlord responsibilities; with the potential exception of any property in which we've not been able to gain access, around 7,000 Council homes have interlinked fire alarms installed. There are cases in major works where access is denied, or we have tenants in hospital or terminally ill, where we do not enforce entry and those properties are rescheduled at a later date, or when it is returned as a void when vacated and the works completed then.

4.4 Ensuring Equalities

The requirement is to have all alarms interlinked so people in a house will be alerted immediately.

4.5 Additional Report Implications

APPENDIX A – Report Implications

A.1 Key Priorities within the Single Midlothian Plan

Not applicable

A.2 Key Drivers for Change

Key drivers addressed in this report:

- ☐ Holistic Working
- ☐ Modern
- ☐ Sustainable
- ☐ Transformational
- x Preventative
- ☐ Asset-based
- ☐ Continuous Improvement

A.3 Key Delivery Streams

Key delivery streams addressed in this report:

- ☐ One Council Working with you, for you
- x Preventative and Sustainable
- ☐ Efficient and Modern
- ☐ Innovative and Ambitious

A.4 Delivering Best Value

There are no direct implications related to this report.

A.5   Involving Communities and Other Stakeholders

Not applicable

A.6   Impact on Performance and Outcomes

Not applicable

A.7   Adopting a Preventative Approach

As a council we are encouraging householders to install the alarms to help save lives, we will not be penalising anyone who needs more time to comply with the new rules. Our approach, which takes into account people's individual circumstances and the pressure of the pandemic, is in line with the views of the Scottish Government and the umbrella organisation representation local councils across Scotland, CoSLA.

A.8   Supporting Sustainable Development

The government will use statistics from the Scottish House Condition Survey to assess overall compliance at a local authority level. Compliance will also form part of any Home Report when homes are placed on the market.