

Midlothian Community Planning Partnership
Midlothian – A Great Place to Grow
Panel Survey Report
Survey on Community Planning Priorities 2019-2020

Summary Report

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CONTENTS

	Page
Executive Summary	3
1.0 Introduction	6
1.1 Questionnaire	6
1.2 Response Rate	6
1.3 Sampling Accuracy	7
Survey Responses	
2.0 Community Planning Priorities	8
2.1 Community Safety and Justice	8
2.2 Sustainable Growth	13
2.3 Improving Opportunities for People in Midlothian	19
2.4 Getting it Right for Every Midlothian Child	22
2.5 Adult Health and Social Care	26
2.6 Additional Information	37
Appendices	39
Open Ended Responses	
Example Questionnaire	

Executive Summary

This report details the main findings to emerge from the questionnaire issued to the Midlothian Citizen's Panel in the autumn 2018 period. This panel contains 1,000 members who are representative of the population Midlothian.

Questionnaire

A questionnaire and FREEPOST return envelope was sent to all members of the public services panel. The survey asked about peoples views on the Community Planning priorities 2019-2020. The survey consisted of the following sections;

- Community Safety and Justice
- Sustainable Growth
- Improving Opportunities for People in Midlothian
- Getting it Right for Every Midlothian Child
- Adult Health and Social Care

Response Rates

The questionnaire was posted out to the total of 1,000 Panel members in September 2018. A total of 607 panel members returned completed questionnaires prior to the production of this report, giving a response rate to the survey of 61%.

Community Planning Priorities 2019-2020

Community Safety and Justice – Possible Priorities for 2019-20

Respondents were asked to consider a variety of Community Safety Issues and to rank them high, medium or low in terms of how important they think they are. The top 5 issues were; "Reduce violent crime" (83%), "Reduce re-offending (people going on to commit another crime)" (72%), "Reduce domestic abuse and protect women and girls" (72%), "Reduce serious and organised crime to make communities safer (serious and organised crime is where people work together to plan and carry out serious crimes)" (69%) and "Reduce dishonesty crimes (including housebreaking, vehicle crime and shoplifting)" (66%).

The greatest number of respondents (70%) stated that the outcome "Fewer people are victims of crime, abuse or harm" is of a high priority. This is followed by 60% who stated "People feel safe in their neighbourhoods and homes" was a high priority. In contrast to this, only 38% of people stated that "Communities take a positive role in shaping their future" is a high priority.

Sustainable Growth – Possible Priorities for 2019-20

Respondents were asked to consider a variety of sustainable growth issues and to rank them high, medium or low in terms of how important they think they are. The top 5 issues were; "Support regeneration of Town Centres" (63%), "Deliver further affordable housing" (57%), "Increase use of Renewable Energy" (52%), "Increase sustainable travel (includes Borders Railway and Active Travel – walking, cycling and green networks)" (48%) and "Work with key

start-ups or groups of new businesses that are able to grow without causing displacement and that will increase economic activity in Midlothian” (45%).

The greatest number of respondents (61%) stated that the outcome “The local economy is more productive and Inclusive” is of a high priority. This is followed by 58% who stated “Sustainable town centre regeneration is visible” was a high priority. In contrast to this, only 34% of people stated that “Midlothian Science Zone has developed benefitting the local economy and community” is a high priority.

Improving Opportunities for People in Midlothian – Possible Priorities for 2019-20

The top 3 issues relating to improving opportunities for people in Midlothian that respondents stated were high are; “Reduce the number of children living in poverty” (78%), “Support people out of poverty and welfare dependency” (72%) and “Reduce health inequalities” (56%).

The greatest number of respondents (66%) stated that the outcome “Poverty levels in Midlothian are reduced” is of a high priority. This is followed by 59% who stated “Health inequalities are reduced and the health of people in Midlothian is improved” was a high priority. In contrast to this, only 21% of people stated that “The public is informed and engaged in service development and delivery” is a high priority.

Getting it Right for Every Midlothian Child – Possible Priorities for 2019-20

The top 5 issues relating to getting it right for every Midlothian child that respondents stated were high are; “Improving mental health and wellbeing of children and young people” (81%), “Closing the educational attainment gap between children from better off and disadvantaged families” (64%) and “Managing risk taking behaviours by children and young people” (52%).

Adult Health and Social Care – Priorities for 2019-2020

Ninety five percent of all respondents said that they have good mental wellbeing. A further 94% of people said that they feel connected to friends and family. 92% of respondents said that they are active for at least 30 minutes on most days. Ninety one percent of respondents said that they eat healthily, with a further 90% stating that they have enough money to stay healthy. The lowest number of respondents overall, 79% stated that they attend screening/immunisation.

The top three groups and activities used by respondents are; “Leisure centre” (38%), “Exercise class” (25%) and “Volunteering” (23%). Just under a third (32%) of all respondents said that they do not use any of the groups or activities mentioned.

The top two means by which people could be helped to use particular groups or activities are “information” (7%) and “someone to go with me” (7%).

Short Term/Urgent Support

Fifty percent of respondents said that it is easy to get support/ treatment locally. This is followed by 48% who said that the support/treatment helped them recover. Forty two percent of respondents said that it is easy to get support/treatment quickly.

When asked to consider the statement “The GP might not always be the best place to go when you are unwell”, 63% of respondents said that they know about other services. The two main ways in which people find out about these other services were “word of mouth” (35%) and “redirected from the health centre” (33%).

Long Term Support

83% of respondents said that their house is suitable for their needs. For those respondents who receive support, 84% said it helps them to live independently, 82% said it helps them feel safe and 76% said it provides support at the right time. 96% of respondents said they can manage their condition at home or locally.

Choice & Control

Fifty eight percent of respondents said that they have enough information to make decisions about their treatment/support. A further 36% said that they feel they can control or change their support or treatment.

About a third of all respondents said that they were given choices in their support/treatment and were asked about what matters to them when first talking to someone e.g. a GP or Social Worker.

Just over a quarter (26%) of all respondents said they felt their feedback will help change services.

The top three ways in which respondents find information about services/support are; “Internet search” (34%), “Friend or Family” (22%) and “Newspaper” (13%).

Fourteen percent of respondents said that they are an attorney for someone else, with a further 13% stating that someone acts as an attorney for them. Far fewer people are a guardian for someone else (6%) and only 4% stated that someone has guardianship over them.

1.0 Introduction

The purpose of the setting up and running of the Midlothian Citizens' Panel was to consult with, and research the views of, the local community on an on-going basis. The Midlothian Community Planning Partnership is committed to measuring and monitoring the progress of community planning through using the Panel as a mechanism for gauging people's views on progress and involving people on a continuous basis.

The recruitment of the Panel was by a rigorous process designed to be inclusive of the local population. Postal invitations were issued to randomly selected addresses from the Royal Mail's Postal Address File. These were supported by face-to-face recruitment of 'hard to reach' groups. A refreshment of the Panel took place in Autumn 2016.

This report details the main findings to emerge from the questionnaire issued to the Midlothian Citizen's Panel in the Autumn 2018 period. This panel contains 1,000 members who are representative of the population Midlothian.

1.1 Questionnaire

A questionnaire and FREEPOST return envelope was sent to all members of the public services panel. The survey asked about people's views on the Community Planning priorities 2019-2020. The survey consisted of the following sections;

- Community Safety and Justice
- Sustainable Growth
- Improving Opportunities for People in Midlothian
- Getting it Right for Every Midlothian Child
- Adult Health and Social Care

1.2 Response Rates

The questionnaire was posted out to the total of 1,000 Panel members in September 2018. A reminder was sent to those Panel members who had not responded after a period of 10 days.

A total of 607 panel members returned completed questionnaires prior to the production of this report, giving a response rate to the survey of 61%.

The achieved sample was not representative of the Midlothian area in terms of age, there being an under-representation of younger people. Interlocked 'age x gender' 'weightings' were applied, therefore, in order to make the sample representative in this respect. Details of the 'weightings' applied are shown in the table on the following page.

	POPULATION (2011 CENSUS)		ACHIEVED SAMPLE		WEIGHTS		WEIGHTED SAMPLE	
	Male	Female	Male	Female	Male	Female	Male	Female
AGE	%	%	%	%			%	%
18-24	6%	7%	4%	4%	1.73	1.85	6%	7%
25-44	15%	16%	11%	13%	1.38	1.19	15%	16%
45-59	13%	14%	17%	18%	0.75	0.79	13%	14%
60-74	9%	11%	11%	15%	0.79	0.72	9%	11%
75+	4%	5%	4%	3%	1.1	1.59	4%	5%

1.3 Sampling Accuracy

All sample surveys are subject to a degree of random error. It has become customary to provide an indication of the error margin by calculating the 95% confidence intervals for a simple random sample of the same size. These are provided in the table below. The magnitude of the error depends on the number of completed questionnaires and the results percentage.

Confidence Intervals (at the 95% Confidence Level) for Total Sample & Sample Sub-Groups

		Count	50% Response
			+/-
Gender	Male	284	5.8%
	Female	322	5.5%
Age	18 to 24 years	79	11.0%
	25 to 44 years	187	7.2%
	45 to 59 years	163	7.7%
	60 to 74 years	121	8.9%
	75+ years	55	13.2%
Tenure	Owner occupied	410	4.8%
	Rented	132	8.5%
TOTAL SAMPLE		607	

2.0 Community Planning Priorities

In previous years the Midlothian Community Planning Partnership asked panel members what they thought of the long-term priorities the partnership was suggesting. The partnership is now revising their priorities for the year 2019-20 and is asking panel members their views on these priorities.

The following sections of the report summarises the responses from panel members regarding their views on the priorities for the following thematic areas;

- Community Safety and Justice
- Sustainable Growth
- Improving Opportunities for People in Midlothian
- Getting it Right for Every Midlothian Child
- Adult Health and Social Care

2.1 Community Safety and Justice

Background information about Community Safety and Justice:

Community Safety is about how safe people feel. It is a range of issues including antisocial behaviour, violent crime, violence against women, protection of children and adults, misuse of alcohol and drugs, theft, road safety, home safety and fire safety. Community Safety affects how people value their neighbourhoods and what is considered to make a neighbourhood a good or bad place to live in.

Community Justice is about reducing offending and re-offending. Agencies working in partnership with local communities help to make a positive change for people with an offending history, their families and victims of crime.

What we want:

Less people have harm done to them.

People to feel safer where they live.

People to tell us what will help make where they live a better place.

What we want

Help people to stop breaking the law.

Why we need to do this

A small number of people commit a lot of crimes.

How we will do this

We will work together to make changes for people to stop them from breaking the law.

Here is some current information on Community Safety and Community Justice in Midlothian:

- Almost one quarter of citizen panel respondents in 2018 said that they feel fairly or very unsafe walking outside alone at night. This feeling increases to 27% among female respondents.
- A fifth of all violent crime or anti-social behaviour incidents were tagged as having alcohol as a factor –It is expected that the true extent is far greater than reported.
- Police Scotland receive on average 2 calls each weekend from members of the public reporting young people under the influence of alcohol.
- 1.7% of the adult Midlothian population is believed to have drug misuse issues, on par with the Scottish average.
- 64% of citizens panel respondents said “reduce domestic abuse and protect women and girls was a high priority for community safety.
- Domestic abuse is largely hidden from public view in Midlothian, with 51% of respondents in the latest citizen panel reporting that they did not know if domestic abuse was in their locality. Sexual crime and child abuse (including child exploitation) were similar at 57% and 58%% respectively.
- Police recorded 978 incidents of domestic abuse in 2017/18, down 5% from the previous year (1030).
- Police recorded a considerable increase in sexual crimes in the last 12 months, however a high number of sexual crimes reported were historical dating back five years or longer.
- Crimes of dishonesty rose by 3.3% in 2017/18, from 2330 to 2407. This is down to the increase in shoplifting which has increased by 159 crimes (779 and 620 respectively), a percentage increase of 25.6%.Dishonesty crime includes housebreaking, theft of motor vehicles, shoplifting, fraud, and other thefts. Almost a third of all crime recorded in Midlothian in 2016/17 was dishonesty crime (30%).
- The number of crimes of housebreaking to domestic dwellings dropped by 46.1% in 2017/18, from 154 to 83. Detection rates for this crime type had also increased from 35.7% to 48.2%.
- 243 crimes of non-domestic housebreaking (excluding businesses) were recorded in 2017/18, compared to 299 crimes last year.
- Shoplifting continues to be challenge for police and local retail premises with 799 crimes in the last year, another significant rise on the 620 crimes the previous year. A target for shoplifters continues to be Straiton Retail Park and Dalkeith town centre.
- Reducing re-offending is at the centre of community safety in Midlothian. Reoffending costs the Scottish Economy around £3 billion each year. The highest rate of offending existed within males aged 20-24 years. The majority of re- offenders were of White Scottish ethnicity (77.8%). A further 18.8% described their ethnicity as White British.
- Educational attainment was low among prolific offenders with 79% having had poor participation/performance in school and 57% having left school with no qualifications.
- Prolific offenders were much more likely to be unemployed, with 63.5% being unemployed at the time of their most recent offence.
- 50% of prolific offenders had accommodation problems, almost half of whom were homeless or transient (43%).

- Substance misuse was particularly high among prolific offenders with 86% having had a history of drug misuse and 79% having had a history of alcohol misuse. 64% had experienced problems with both.
- Eight people were killed on Midlothian's roads in the last 12 months, up from both the previous year and three and five-year average. A further 39 people were seriously injured, and 175 people slightly injured.
- Anonymous injury surveillance data from NHS suggests that 68% of road related casualties who attended at the ERI did not report the accident to the police which suggests that a far greater number of injuries are being sustained on Midlothian's roads than is being reported.
- Five children were seriously injured on Midlothian's Roads in the last year up from three the previous year.
- Community consultation highlights the priority that local communities give to road safety and antisocial driving, with 58% of respondents rating 'Dangerous Driving' as a problem in their area, and 50% of respondents rated 'Road Crime/Road Safety' as a problem in their area.
- In the last 12 months police detected 21 crimes relating to drugs production, manufacture and cultivation, down from the previous year and three-year average.
- Half of drugs supply charges in Midlothian were for the supply of cannabis.
- Since 2005 there has been a steady increase in the number of cannabis cultivations in Midlothian however in the last two years this increase has tailed off.
- In the last 12 months there were six cash seizures within the Midlothian area, totalling £13,837.39 and five net assets seized totalling £169,218.07 – above the previous year.
- Antisocial behaviour incidents decreased by 6% in 2017/18 compared to the previous year (6340 and 6745 respectively).
- Crimes of vandalism have decreased by 9.3% compared to the previous year (957 and 1055 respectively).
- Hate incidents rose from 81 last year to 85 in 2017/18. There was no pattern or trend to this with the vast majority race related involving neighbour disputes or comments towards serving officers.
- Accidental dwellings fires rose by 9% in 2017/18.
- There were 1847 hospital admissions due to falls.
- The number of bogus caller crimes increased by one in the last 12 months.
- In the last three years victims of financial harm have been deceived of £687,000. Two thirds of victims were aged 70+ years. A quarter of complainers knew the perpetrator, either as a family member / carer or other person known to them. In 2016/17 Midlothian Adult Health and Care received 681 referrals for adults known or believed to be Adults at Risk of Harm. This was an increase of over one third from the previous year.
- In the last two years police received 69 complaints of wildlife crime incidents from members of the public. A total of 11 offences relating to the protection of wild animals were recorded by police in 2016, up from 5 in 2015.
- In the last two years, 66 incidents of fly tipping were reported across Midlothian, an increase of one third from the previous year

Community Safety and Justice – Possible Priorities for 2019-20

Respondents were asked to consider a variety of Community Safety Issues and to rank them high, medium or low in terms of how important they think they are. The top 5 issues relating to community safety that respondents stated were high are as follows;

	High
• Reduce violent crime	83%
• Reduce re-offending (people going on to commit another crime)	72%
• Reduce domestic abuse and protect women and girls	72%
• Reduce serious and organised crime to make communities safer (serious and organised crime is where people work together to plan and carry out serious crimes)	69%
• Reduce dishonesty crimes (including housebreaking, vehicle crime and shoplifting)	66%

In contrast to this, the three issues that respondents were most likely to rank with a low importance are as follows;

	Low
• Increase people's awareness about the need to be alert over terrorism threats	41%
• Improve fire safety in the home	26%
• Help people get involved in community safety and justice activities and projects to ensure their neighborhoods are safe.	25%

Community Safety and Justice – Possible Priorities for 2019-20

Please rank each of the following community safety issues as high, medium or low in terms of how important you think they are.

	High	Medium	Low
Increase people's awareness about the need to be alert over terrorism threats	22%	37%	41%
Improve fire safety in the home	29%	45%	26%
Help people get involved in community safety and justice activities and projects to ensure their neighborhoods are safe.	27%	48%	25%
Educate people regarding speeding, drink driving and responsible parking	39%	40%	21%
Protect young children and the elderly from preventative accidents happening at home (falls, trips, injuries)	33%	46%	21%
Provide 'unpaid work' projects that improve lives of individuals and communities affected by crime	35%	49%	16%
Help people learn about how to keep safe and protect their properties from theft and their families from harm	31%	54%	15%
Help people to feel safe at home and in their community	47%	39%	14%

Support people with an offending history to get stable housing, gain employment and manage their health issues	43%	44%	13%
Improve road safety to reduce the number of people hurt or killed on Midlothian's roads	56%	35%	9%
Reduce drug misuse	61%	33%	6%
Reduce alcohol misuse	52%	42%	6%
Reduce domestic abuse and protect women and girls	72%	25%	4%
Reduce serious and organised crime to make communities safer (serious and organised crime is where people work together to plan and carry out serious crimes)	69%	27%	4%
Reduce dishonesty crimes (including housebreaking, vehicle crime and shoplifting)	66%	32%	2%
Reduce violent crime	83%	16%	1%
Reduce re-offending (people going on to commit another crime)	72%	26%	1%

The greatest number of respondents (70%) stated that the outcome “Fewer people are victims of crime, abuse or harm” is of a high priority. This is followed by 60% who stated “People feel safe in their neighbourhoods and homes” was a high priority. In contrast to this, only 38% of people stated that “Communities take a positive role in shaping their future” is a high priority.

The Community Safety and Justice Partnership proposes to work toward the following outcomes up to 2022, in what order of importance would you rank these ?

	High	Medium	Low
Fewer people are victims of crime, abuse or harm	70%	24%	6%
People feel safe in their neighbourhoods and homes	60%	34%	5%
Communities take a positive role in shaping their future	38%	43%	19%

2.2 Sustainable Growth

Background information about Sustainable Growth:

Three areas of interrelated work have been brought together in this theme: housing, economic development, and environment. The Town & Country Planning system is a common thread that links these areas. The Sustainable Growth Midlothian group takes an overview of these strands. Here are some factors affecting Midlothian.

Housing - The construction of new housing in Midlothian has significantly increased in recent years. During the period 2012/2013-2016/2017 a total of 3060 homes were built of which 562, or 18%, were classified as affordable homes, i.e. they were not open market for sale homes. This new house building has had a beneficial impact on economic growth. Growth has already had, and will continue to have, very significant implications on the need for public service facilities such as schools, health services, community meeting spaces, local retail and green space and as such represents a significant challenge at a time of public service budget reductions. The demographic challenges of an ageing population are in Midlothian combined with a significant increase in the proportion of the population who are families and children. New communities alongside existing settled communities are emerging, and much work is required to ensure positive benefits for both new residents and the existing communities arise from this change.

Midlothian Council's new build social housing programme has delivered over 1000 homes since 2006 over 20 sites and its commitment to a further 1000 houses up to 2022 it remains vital to increase the provision of socially rented housing to meet the increasing demand. There are a significant number of people on Midlothian Council's housing waiting list, which has consistently had over 4,000 people on it since 2014. With the impacts of welfare reform, many people are struggling to manage very limited household budgets. Some are being forced to move home, with restricted housing choices.

It is important that new housing takes account of the needs of the whole community, including considering the need for specialist provision such as housing for older people, and those with a physical and/or learning disability

In Midlothian, the majority of homeless presentations are from people aged 16-25, many of whose parents are no longer willing or able to accommodate them. Midlothian Council developed a mediation service targeted at this group. The activity with young people includes visiting the young person's parents to talk to them about their homelessness application, and helping them to investigate potential housing solutions, including remaining in the home. This is helping reduce the total number of homeless presentations in Midlothian. There is also high demand for temporary accommodation so Pentland House and Midfield House have been opened as temporary supported housing. The majority of social rented tenants are satisfied with their home and neighbourhood. Some tenants do report concerns about nuisances in their neighbourhood, including dog fouling, and lack of car parking. Improvement activities have been undertaken in some estates to improve the satisfaction of the neighbourhood, and the quality of life for local residents.

Economic Development - The Gross Value Added (GVA) figure is the difference between output and consumption for any given sector/industry. That is, the difference between value of goods and services produced, and the cost of production. City of Edinburgh's GVA (the third highest in Scotland behind Aberdeen and Glasgow) was £10,489 (in 2015); Midlothian's GVA was £851, around the same as East Lothian's £870.

In 2017/18, 46,100 residents were considered economically active (of working age and able to work) out of a total population of 90,090. This represented 81.6% of all working age residents, higher than the Scottish or UK economically active rates of 77.6% and 78.4% respectively, 44.8% work in Edinburgh. 30,000 jobs were available in Midlothian of which 10,000 were part time. Wages for people working in Midlothian in 2018 continued to be lower than the Scotland average though the gap has closed from £18.00 (2017) to £7.00 below (2018). In gender terms, male workers earned £3.00 less than the average Scottish male weekly wage in 2018. Midlothian female workers earned £20.00 more than the Scottish median figure for female employees, but still on average earned £39.00 less per week than their male counterparts in Midlothian, a continuing improvement on the previous gender earnings gap which was £77.00 per week in 2015. There were 2890 businesses (up by over 600 from 2,275 in 2017) registered in Midlothian in 2018 and a major increase from 2020 in 2014. Of these 2045 employed less than 10 people, 270 between 10 and 50 people, 35 between 50 and 250 people, and only 5 over 250 people. Self-employment figures have edged up to 6.6% (6.2% 2016) but are still below the Scotland average of 8.2 %. Qualifications of the working age population are now better than Scottish average at lower levels, but remain below at higher levels (from HNC to Degree and above). The public sector in Midlothian employs approximately 31% of the Midlothian workforce. Severe pressure to reduce the scale of public service expenditure continues. The loss of significant sums of European funding for Midlothian after 2020 creates great uncertainty for public services and even more so for agricultural, research and associated industries. The lower value of the pound has reduced the cost of exported UK goods, but increased the costs of importing goods purchased abroad.

The award of 'City Deal' status to Midlothian alongside its City of Edinburgh, Lothian's, Borders and Fife partners offers one of the largest potential investment opportunities the area is likely to see in the next generation. Capital and revenue projects have been approved across the 6 areas. The key projects in Midlothian through City Deal are changes to Sherrifhall Roundabout to separate the bypass from other traffic, the A701 Relief Road from Straiton to the Bush and a new A702 road link. These will speed up city bypass traffic flow at Sherrifhall and improve access to the Midlothian Science Zone (Bush/Easter Howgate), an area where University of Edinburgh is committing to building a Data Infrastructure Hub along with its Easter Bush Innovation Campus. Midlothian expects to benefit from the City Deal investment in the regional skills programme; and from the provision of new secondary school 'centres of excellence', similar to that of the digital centre of excellence at the new Newbattle High School, a close collaboration with the University of Edinburgh and the private sector. The new food and drink innovation hub at Queen Margaret University just to the east of Shawfair, major investment at the Edinburgh Bioquarter located near the Edinburgh Royal Infirmary, and transport improvements at West Edinburgh including better access to Edinburgh Airport all offer potential economic benefits to Midlothian business and

people. Scottish Government's Step Change project estimates 98.1% of premises in Midlothian had access to super-fast broadband by the end of 2017.

Environment - The first South East Scotland (SESplan) Strategic Development Plan (approved by Scottish Ministers in 2013 expects Midlothian to deliver very significant levels of housing. The Midlothian Local Development Plan which implements how these requirements are met in Midlothian is expected to be adopted by Midlothian Council in late 2017. SESplan no. 2 was submitted to the Scottish Ministers for examination in June 2017. The South East Scotland Plan, confirmed by the local development plan proposed 8080 houses between 2009-19 then 4410 between 2019 and 24. Some of these have been built, but due to the delay caused by the 2008 economic downturn much of the housing planned between 2009 and 19 is only now being built. This rapid expansion including houses predicted to have been built and new allocations is leading to severe pressures on the delivery of public services, land use, community capacity to absorb change and to increasing pressures on transport and roads infrastructure. The planning system plays a role in protecting the environment, and designating areas for certain types of use. Midlothian has currently over 200 hectares of land available designated for employment use i.e. development, which may involve the building of factories, offices, and other light industrial uses.

The Midlothian Local Biodiversity Action Plan (LBAP) supports conservation through 14 action plans focused on specific habitats. There are two Special Protection Areas (SPAs) at Gladhouse and Fala Flow. There is a Special Area of Conservation (SAC) at Peeswit Moss/Side Moss. There are also 16 Sites of Special Scientific Interest (SSSIs). In addition to the above internationally and nationally important sites, Midlothian has one Local Nature Reserve at Straiton Pond; one Regional Park at Pentland Hills; three Country Parks at Hillend, Roslin Glen and Vogrie; 51 Local Biodiversity Sites; two Woodland Trust sites (the Trust also identifies 19 woodlands to which the public has access); approximately 2,600 hectares of ancient woodland in the Ancient Woodlands Inventory, five Scottish Wildlife Trust wildlife reserves and five Scottish Lowland Raised Bog Sites. Household waste is reducing, and the proportion collected for recycling is increasing. The % of collected waste going to landfill fell last year from 55% to 34 %.(14,078 tonnes going to landfill). Estimated levels of Local Authority CO2 emissions for Midlothian for the period 2005 to 2015 have dropped from 540.7 Kilotonnes of CO2 in 2005 to 149 Kilotonnes of CO2 in 2015. Midlothian has 713 listed buildings, 79 scheduled Monuments, and 36 buildings on the 'Buildings at Risk' Register. There are also 12 nationally important gardens and landscapes.

Sustainable Growth – Possible Priorities for 2019-20

Respondents were asked to consider a variety of sustainable growth issues and to rank them high, medium or low in terms of how important they think they are. The top 5 issues relating to sustainable growth that respondents stated were high are as follows;

	High
• Support regeneration of Town Centres	63%
• Deliver further affordable housing	57%
• Increase use of Renewable Energy	52%
• Increase sustainable travel (includes Borders Railway and Active Travel – walking, cycling and green networks)	48%
• Work with key start-ups or groups of new businesses that are able to grow without causing displacement and that will increase economic activity in Midlothian	45%

In contrast to this, the two issues that respondents were most likely to rank with a low importance are as follows;

	Low
• Increase take up of economic land supply along the Borders Rail corridor	33%
• Produce a new Midlothian Local Biodiversity Action Plan and re establish the Midlothian Biodiversity Partnership	31%

Sustainable Growth – Possible Priorities for 2019-20

Please rank each of the following sustainable growth issues as high, medium or low in terms of how important you think they are.

	High	Medium	Low
Support regeneration of Town Centres	63%	32%	5%
Deliver further affordable housing	57%	22%	21%
Increase use of Renewable Energy	52%	37%	12%
Increase sustainable travel (includes Borders Railway and Active Travel – walking, cycling and green networks)	48%	36%	15%
Work with key start-ups or groups of new businesses that are able to grow without causing displacement and that will increase economic activity in	45%	51%	5%
Work with key groups of business start-ups in target communities to increase economic activity in these communities	41%	53%	7%
Increase connections between local business, schools and the Midlothian	40%	41%	19%
Increase economic impact from the use of Midlothian tourism assets	30%	48%	22%
Deliver LEADER projects (EU funding programme for rural communities)	28%	47%	25%
Identify top 50 economically important businesses to support	22%	57%	21%
Increase take up of economic land supply along the Borders Rail corridor	21%	46%	33%
Review public services procurement arrangements to identify a baseline of local procurement from Midlothian businesses	21%	62%	17%
Produce a new Midlothian Local Biodiversity Action Plan and re establish the Midlothian Biodiversity Partnership	18%	51%	31%

The greatest number of respondents (61%) stated that the outcome “The local economy is more productive and Inclusive” is of a high priority. This is followed by 58% who stated “Sustainable town centre regeneration is visible” was a high priority. In contrast to this, only 34% of people stated that “Midlothian Science Zone has developed benefitting the local economy and community” is a high priority.

The Sustainable Growth Partnership proposes to work toward the following outcomes up to 2022, in what order of importance would you rank these?

	High	Medium	Low
The local economy is more productive and Inclusive	61%	38%	1%
Sustainable town centre regeneration is visible	58%	28%	14%
More social housing has been provided taking account of local demand	56%	25%	19%
Homelessness has reduced, and people can access advice and support	47%	39%	13%
Environmental limits are better respected, especially in relation to waste, transport, climate change and biodiversity	47%	43%	10%
The benefits of the Borders Railway have been maximised	36%	48%	16%
Midlothian Science Zone has developed benefitting the local economy and community	34%	53%	13%

Other outcomes that respondents said should be pursued over the next three years included the following.

- Focus more on manufacturing than service sector. Support IT based industries and software products, provide excellent broadband for business
- Sexual and reproductive health education through health practitioners during late secondary school years, college, university and especially young parents and all age teachers. The number of young teen pregnants and mothers I see is not healthy in 2018. The similar mindset i.e. lack of ambition in life and transfers to consecutive generations.
- Before more housing considered infrastructure needs to be sorted. Plus there is hardly any green belt. Eskbank is joining on to Bonnyrigg, Woodburn to Mayfield etc. Midlothian cant cope with any more housing, affordable or not. Infrastructure needs to be first priority – roads, doctors, schools etc
- Social housing should increase but these social houses should never be sold but kept as for rented social houses only
- Tidy up litter on all areas. Maybe use community time offenders or increase litter bins
- A new town centre for Dalkeith
- Ensure that health and education infrastructure requirements are taken into account when housing developments are proposed. If you leave this to developers it wont happen
- Projecting forward is required for the future
- Movement of traffic through the area
- Borders railway should be extended to take in Loanhead and later Roslin, Bilston and Penicuik. Thus reducing road congestion by commuters
- Adequate health provision for Midlothian residents – number of GP's far too low
- Upgrade housing that lies vacant over a long period of time
- I am of the opinion that government support of private enterprise has very limited outcomes. The efficiency of such measures are impossible to measure and the opportunity for abuse is very high
- Encourage people to work locally – reduce their carbon footprint and support their local economy and business
- Review criteria for getting a council house. If you cant pay, you don't get
- More “social” businesses to increase community spirit and entice visitors (café, bars, games etc)
- Improvement in infrastructure must be mad before any more housing developments go ahead
- Get police out, visible on the street (no cardboard cut outs) and stop reducing civilian support staff
- A four year plan for road resurfacing in Midlothian. Reduce building on greenfield sites
- Infrastructure to deal with the significant increase in housing in the area
- Car parking problems create major problems for people attempting to use retail outlets in towns. Long term parking by individuals employed in certain organisations needs to be curtailed
- Build less unaffordable housing. Stop housesitting empty – cap private landlord rents

2.3 Improving Opportunities for People in Midlothian

Background information about Improving Opportunities in Midlothian.

The long term aim of the IOM theme is to build resilient communities and reduce inequalities. In 2018-19 the IOM agreed seven priority areas. The 2018 Midlothian Profile shows, whilst there have been some improvements continued work is needed in the following seven priority areas:

1. Support people out of poverty and welfare dependency
2. Reduce health inequalities
3. Increase access to digital services
4. Improve the destinations of young people
5. Improve access to welfare advice through increased local and targeted provision
6. Increase qualifications gained by adults of working age
7. Reduce the number of children living in poverty.

Some relevant information from the Midlothian Profile includes:

In 2018 9,900 (18.1%) of Midlothian's population over 16 years old are 'economically inactive', well down from 11,000 (20.1%) in 2017. Of these 1600 look after family, 3,000 are long term sick, 2,300 are retired and 1,200 have other reasons for not seeking or being in work. In Scotland 23.1% of the population are 'economically inactive'. 3600 (12.4%) of households in Midlothian are described as "workless", down from 5,000 (18.2%) in 2017, and well below the Scottish average of 18.0%

41.8% of Midlothian working age residents have qualifications at SVQ level 4 (Higher National Diploma) and above (last year this was 38.5%), still below the Scotland average of 43.9%. At SVQ level3 (Higher exam level at school) Midlothian has 62.3% % with this level or above (last year 58.9%), higher than Scotland overall (59.8%) qualified to this level or above. Midlothian has fewer adults with no qualifications (5.1%) than the Scottish average (6.4%).

Full time workers earn an average of £540 per week, £7 below the Scottish average. Midlothian women earn on average £518 compared to men who earn on average £557. 5200 (9.4%) of working age adults in Midlothian are receiving social security. Of these, 4010 (7.2%) receive employment support allowance (a disability related benefit), and only 490 (0.9%) receive job seekers allowance.

Increasing levels of child poverty is a particular concern of the IOM. For the first time, child poverty levels in Midlothian are above the Scottish average at 22.04%. With the introduction of the Child Poverty Act (2017), and new reporting requirements expected from April 2018 there is an opportunity for the IOM to provide a coordinated approach to reduce the number of children living in poverty.

This Strategic Assessment will be used to set the priorities for action in 2019-20 toward the medium term priorities for 2019-2022 in the Single Midlothian Plan. The assessment can be read in conjunction with the Midlothian Profile 2018 that can be accessed through the following link <http://www.midlothian.gov.uk>

Improving Opportunities for People in Midlothian – Possible Priorities for 2019-20

Respondents were asked to consider a variety of improving opportunities for people in Midlothian issues and to rank them high, medium or low in terms of how important they think they are. The top 3 issues relating to improving opportunities for people in Midlothian that respondents stated were high are as follows;

	High
• Reduce the number of children living in poverty	78%
• Support people out of poverty and welfare dependency	72%
• Reduce health inequalities	56%

In contrast to this, the main issue that respondents were most likely to rank with a low importance is as follows;

	Low
• Increase access to digital services	26%
• Improve access to welfare advice through increased local and targeted provision	22%

Improving Opportunities – Possible Priorities for 2019-20

Please rank each of the following improving opportunities for people in Midlothian issues as high, medium or low in terms of how important you think they are.

	High	Medium	Low
Reduce the number of children living in poverty	78%	19%	2%
Support people out of poverty and welfare dependency	72%	22%	6%
Reduce health inequalities	56%	38%	6%
Improve the destinations of young people	50%	41%	9%
Increase qualifications gained by adults of working age	37%	47%	16%
Improve access to welfare advice through increased local and targeted provision	30%	49%	22%
Increase access to digital services	15%	59%	26%

The greatest number of respondents (66%) stated that the outcome “Poverty levels in Midlothian are reduced” is of a high priority. This is followed by 59% who stated “Health inequalities are reduced and the health of people in Midlothian is improved” was a high priority. In contrast to this, only 21% of people stated that “The public is informed and engaged in service development and delivery” is a high priority.

The Improving Opportunities for the People of Midlothian Partnership proposes to work toward achieving the following outcomes up to 2022, in what order of importance would you rank these?

	High	Medium	Low
Poverty levels in Midlothian are reduced	66%	29%	4%
Health inequalities are reduced and the health of people in Midlothian is improved	59%	37%	4%
Midlothian residents are successful learners and young people go on to positive destinations when they leave learning	57%	38%	5%
The public is informed and engaged in service development and delivery	21%	51%	28%

Other outcomes that respondents said should be pursued over the next three years included the following.

- Education for young people should include developing skills and insight relating to: relationships, mental health, value of diversity
- Improving roads and pavements
- Increased health provision e.g. number of GP's
- Social equality does not work, unless you are a communist. People have to aspire to better themselves. Better parenting is the answer. Stop all the handouts
- Provide more opportunities for young people to learn a trade as an alternative to academic qualifications. This would help to address the problem of a lack of trades people in the community
- Encourage self help
- People need shown how to manage money and what food to eat. This will reduce pressure on poverty and health services
- Run apprenticeships for trades. Improve community involvement and respect for each other
- Often people receive sufficient money but do not know how to use it effectively leading to poverty for their children and themselves
- Health provision for all especially in Dalkeith and Bonnyrigg needs a thorough investigation – the GP's are excellent when reached
- The Council to offer apprenticeships or work placements schemes. To get young people starting their working lives
- Improving environment – all green spaces to encourage people to go out
- More shops, schools

2.4 Getting it Right for Every Midlothian Child

Background information about Getting it Right for Every Midlothian Child:

Breastfeeding/ infant nutrition : The diet and nutrition of mothers before conception and during pregnancy; the feeding received by the infant in the first few months of life; the process of weaning onto solid foods; and the diet and nutrition of the growing infant all contribute significantly to long term health. The Scottish Government's Maternal & Infant Nutrition Framework tackles these issues and recommends exclusive breastfeeding for the first six months of an infant's life. The detrimental effect of health inequalities on maternal and infant nutrition is recognised in the framework, making it important in Midlothian, given the area's below average breastfeeding rates.

Physical Activity and Obesity in Children: Lack of physical exercise and poor diet/nutrition can lead to obesity, which can reduce people's overall quality of life, creating strain on the health service and leading to premature death. Overweight and obesity are increasing in Scotland and in Midlothian 15.3% of children have a body mass index outside the healthy range, above the Scottish (14.9%) and Lothian (14.2%) figures.

Play : Community based opportunities for children and young people to play freely and for families to spend leisure time together are important for meeting children's rights under article 31 (UNCRC) and as universal, preventative services that meet children's developmental needs This is important for children of all ages, and includes unstaffed provision such as public play or open spaces.

Vulnerable Children: Care experienced children and young people, young carers, homeless young people, travellers, young offenders, and those living in our more deprived communities often face significant disadvantages in health and life opportunities. They have the highest rates of severe chronic illness; the poorest diet; are the heaviest consumers of tobacco, alcohol, and illicit drugs; the highest rates of unintended teenage pregnancies and the lowest educational achievement. By 2016 the Midlothian rate of children being looked after at 13.4 was below the Scottish National rate, having been consistently above it. In 2014, 38% of the children looked after by Midlothian Council at home attained SQA3 or better in English and Maths by the end of S4, compared to 57% of children looked after away from home and 89% of all pupils.

Additional support needs: There are 1570 children between age 3 and 18 attending Midlothian schools who have been assessed as being affected by a disability. Of these, 706 have a learning disability, 154 are on the autism spectrum, 151 have a language or speech difficulty, 81 have both a learning and physical disability, 75 have a physical or motor impairment, 64 have both a learning disability and are on the Autism spectrum, 29 a visual impairment, 24 a hearing impairment, 15 other communication support needs and 271 Dyslexia.

Mental Health: Mental ill health can affect every aspect of a person's life. The prescription rate of anti-depressants in the age 15+ population of Midlothian is higher than the other NHS Lothian local authority areas. Up to 20% of children and young people will experience a depressive

episode or anxiety disorder before the age of 18 years with many more experiencing sub-threshold difficulties with emotional and mental well-being.

Pregnancy and parenthood in young people: Some young people make a positive choice to become parents at an early age, however becoming a parent whilst still at school can perpetuate a cycle of deprivation and inequality, with young parents facing barriers to fulfilling their educational potential. The rate of pregnancy of under 16s in Midlothian has dropped in the last three years reported and is now lower than the Lothian rate (0.2%) and higher than the Scotland rate by only 0.1%. Midlothian's under 18 rates are lower than the Lothian rate but still remain above the Scottish rate. The rates for those under 20 remain markedly above both the Scottish and Lothian rates.

Alcohol, Smoking and Substance Misuse: Alcohol consumption and substance misuse by young people are linked to longer term problem drug use, offending behaviour, reduced health and wellbeing and lower levels of achievement. In 2015, 35% of 13-year olds and 67% of 15 years old reported that they had had an alcoholic drink. This is a large decrease from 2010 figures. There has also been a decrease in the proportion of those who are regular smokers, and an increase in those who have never smoked. The proportion of 13 year old regular smokers is slightly lower in Midlothian than the national average. 5% of 13 year olds and 12% of 15 year olds reporting having tried or using e-cigarettes; both figures are below the Scottish average. 2% of 13 year olds reported having tried illegal drugs in the past year, rising to 12% of 15 year olds, both figures are well below the Scottish averages.

The positive engagement of school leavers aged between 16 and 19 is now consistently higher than national averages, with 94.3% of school leavers sustaining a positive destination, compared to 91.1% average across Scotland's school leavers.

Child Poverty: The impact of welfare reform and fuel poverty upon the wellbeing of children should not be underestimated. 22.04% of children in Midlothian live in households that fall into poverty (marginally above the Scottish average figure) - that is where household income is less than 50% of the median UK income after discounting housing costs.

There are 33 primary schools in Midlothian, 2 nursery schools, six secondary schools and one additional support school. 2016/17 High school exam results were:

High School	Attainment by the end of S4	Attainment by the end of S5	Attainment by the end of S6
	Five or more awards at Standard Grade Credit level (or equivalent) or better	Five or more awards at Higher or better	Five or more awards at Higher or better
Beeslack	49.6%	16.7%	29.4%
Dalkeith	38.3%	12.7%	30.7%
Lasswade	42.2%	18.6%	30.3%
Newbattle	28.7%	4.9%	16.1%
Penicuik	51.0%	13.0%	23.3%
St David's RC	51.6%	21.0%	22.4%
Midlothian	42.0%	14.5%	26.2%

Getting it Right for Every Midlothian Child – Possible Priorities for 2019-20

Respondents were asked to consider a variety of Getting it Right for Every Child in Midlothian issues and to rank them high, medium or low in terms of how important they think they are. The top 3 issues relating to getting it right for every Midlothian child that respondents stated were high are as follows;

- | | High |
|--|-------------|
| • Improving mental health and wellbeing of children and young people | 81% |
| • Closing the educational attainment gap between children from better off and disadvantaged families | 64% |
| • Managing risk taking behaviours by children and young people | 52% |

In contrast to this, the two main issues that respondents were most likely to rank as having a low importance is as follows;

- | | Low |
|---|------------|
| • Increasing the voice of children and young people in service planning | 26% |
| • Expansion of Early Years entitlement to 1140 hours of free childcare | 19% |

Getting it Right for Every Midlothian Child – Possible Priorities for 2019-20

Please rank each of the following getting it right for every Midlothian child issues as high, medium or low in terms of how important you think they are.

	High	Medium	Low
Improving mental health and wellbeing of children and young	81%	17%	2%
Closing the educational attainment gap between children from better off and disadvantaged families	64%	28%	7%
Managing risk taking behaviours by children and young	52%	41%	6%
Expansion of Early Years entitlement to 1140 hours of free	36%	44%	19%
Increasing the voice of children and young people in service	29%	46%	26%

The three year outcomes that the partnership has set out in the Children and Young people's plan (a 2017-20 timescale was set by Scottish Government) are:

- All care experienced children and young people are being provided with quality services
- Children in their early years and their families are being supported to be healthy, to learn and to be resilient
- All Midlothian children and young people have access to timely and appropriate support
- Children and young people are supported to be healthy, happy and reach their potential
- Inequalities in learning outcomes have reduced

Consultation on these outcomes will be undertaken in 2019/20.

Other outcomes that respondents said should be pursued over the next three years included the following.

- Education should include: relationships, mental health, value of diversity (not just exams and science)
- Possible independent Scotland if we could not manage to get Brexit reversed. Although I was a remainer, who was sold EU membership dream by UK government during Indy Ref 1. Since Brexit I have changed my remain position.
- I work with Thera Scotland, in Mayfield I think there should be more places to take service users
- Parenting is what everyone of us should be able to do for ourselves as adults, and the most important source is from example, adult mentors where parents are struggling with their own mental health and development
- Ensuring the transition of young people with additional support needs to adult services is in line with principles of good transitions
- Truancy
- Not letting early years take all the money. Education needs it far more
- Give more support to trading standards to help stop young people taking up smoking. At the moment Midlothian Council pays lip service to enforcement action
- Quality in school extra curricular activity provision of sports and other activities. There should be an expectation on every teacher in Midlothian offering an after school activity and every school should have regularly competing sports teams. There is no excuse for this not to happen
- Resist Scottish Government
- Increase amount of teachers. Improve the high school exam results. Vastly increase learning support workers specially in primary schools
- A lack of teachers of certain subjects will begin to seriously impact on young people attaining their goals and equally worrying affect the ability of existing staff to cope. Provide more teachers
- Move away from the bias of academic results to a more vocational system
- A second early years centre in Bonnyrigg / Loandhead/ Penicuik similar to Hawthorn
- More activities out of school hours e.g. sport, the arts, culture etc. Specially at weekends
- More outdoor pursuits – learning about where they live and whats around them – wildlife, architecture etc
- Get government out of managing peoples lives. OMG, bring back discipline – routine and respect. Parents are responsible for children, school are responsible for education
- Why separate St Davids and Dalkeith – they are on the same site
- Improving education quality and exam performance. Midlothian education quality has dropped significantly in the last 10 years
- The attainment gap can only be closed by encouraging the parents of the disadvantaged families to recognise the benefits of encouraging their children to do better at school. Often where the child is doing well the parents prevent a child from going on to further education
- More support for additional support needs children and more training for staff on the subject, particularly ASD

2.5 Adult Health and Social Care

Background information about Adult Health and Social Care:

As a result of new legislation in 2014, the Midlothian Health and Social Care Partnership brought together parts of Midlothian Council and NHS Lothian. The Partnership is governed by a Board (the Integrated Joint Board), which is part of the wider Community Planning Partnership, and is responsible for deciding how to spend the budget and plan services that help you live well and get care and support when you need it.

These services include:

The NHS

Unscheduled care in Hospitals (e.g. A&E, Minor Injuries, Acute wards) and Community Health Services (e.g. GPs, District Nurses, Dentists, Pharmacists, Mental Health services and the Community Hospital).

Midlothian Council's Adult Health and Social Care (e.g. Social Work, Day Services, Care at Home, Allied Health Professionals).

Partner Providers: commissioned voluntary and independent organisations to provide information and advice, 1:1 and group support.

In 2016, the IJB published its three year [IJB Strategic Plan](#) based upon assessment of the needs of the population and their understanding of the views and concerns of the people of Midlothian. There are also more detailed strategies such as those for older people, unpaid carers and people with disabilities.

Key objectives for the Health and Care Partnership include placing greater emphasis upon preventing physical and mental ill health, addressing health inequalities and enabling people to recover wherever possible. Achieving these objectives can only be achieved with the contribution of other Council services such as Leisure and Libraries, Voluntary Organisations and the broader Community Planning Partnership. The following analysis of the broader environment within which health and social care is delivered has informed the approach being taken to planning and redesigning local services.

POLITICAL

The need to modernise and respond to changing public expectations is reflected in the *Creating a Healthier Scotland Report 2016* which was based on conversations with the public across Scotland. This highlighted the importance of prevention, mental wellbeing and self-management. The importance of mental health in creating a fairer, healthier Scotland was emphasised in the NHS Report *Good Mental Health for All* and the national *Mental Health Strategy 2017-27*.

ECONOMIC

The increase in unemployment associated with the economic downturn inevitably had a negative effect on both mental and physical health. It is vital that sustained efforts are made to ameliorate these as far as possible. Work is underway with Lifelong Learning and Employability to explore how to support people with disabilities and those who have had long term conditions such as cancer to find or sustain employment. Reforms to welfare legislation continue to cause concern.

for people with disabilities and those with mental health issues most recently with the implementation of Universal Credit. More generally public service expenditure reductions in both the NHS and the Local Authority will undoubtedly increase pressures on health and community care services given the growing demand arising from demographic changes.

SOCIAL

1. Public Expectations: There is a strong commitment to understanding the views and concerns of the public. Common themes to emerge through public engagement events often include *Access to Public Spaces; Physical Activity; Access to Primary Care; Home Care and Adaptations; Financial Inclusion and Employment, Good Transport and Improved Information.*

2. Population: As a result of a major house-building programme and people living longer, the population is likely to rise to a predicted level of 101,000 by 2024, with over 20,000 people aged 65yrs+ (just over half of those being over 75 years old). A particular challenge for the partnership is the projected rise in the numbers of people with dementia; estimates indicating these will double between 2011 and 2031. There are also growing numbers of people with learning difficulties who survive with complex care needs and into old age. There is also a growing prevalence of people with Autism Spectrum Disorder.

3. Deprivation: The most health-deprived areas are in Woodburn, Dalkeith, Mayfield and part of Loanhead. We know that life expectancy is lower and the prevalence of long term conditions at a younger age is higher. 'Inequalities' account for a significant element of the increasing demands on our public services. Progress in tackling inequality has been slow and there is commitment to working more effectively in partnership particularly in areas of deprivation and with people most at risk of inequalities included those affected by homelessness, substance misuse and mental health problems

4. Alcohol & Drugs: The consequences of the misuse of alcohol and drugs are difficult to overstate. It can lead to major health problems including early death. It can have a devastating impact on families and children and can also be a major worry for communities in terms of their sense of safety and wellbeing. In Scotland £3.6 billion is spent every year on alcohol related harm, £1 billion, more than Scotland's entire education budget. In relation to drugs it is estimated that within Midlothian there are 920 problematic drug users aged 15-64 years (690 males and 230 females).

5. Workforce: Recruitment and retention of the health and care workforce is a growing concern across the country. At a local level this is most acutely felt in home care, district nursing and GPs. A range of measures are being implemented nationally such as the Living Wage for care workers and more training opportunities for Advanced Nurse Practitioners. Locally, plans are being developed to address these challenges over the coming 10 years.

TECHNOLOGICAL

The possibilities offered by new technology have grown considerably in recent years. *Technology Enabled Care* is about realising the potential of *technology* as an integral part of a person's care and support plan to enhance quality and/or improve efficiency. It is not simply

about finding the right 'kit' but about finding how the right care can be supported by the technologies available.

ENVIRONMENTAL

Changing weather patterns, including gales and severe winters, pose particular pressures in ensuring vulnerable people remain safe and supported. The emphasis on energy saving measures should have a positive impact on people vulnerable to fuel poverty and the subsequent negative impact on health and wellbeing. Feeling safe in their local community is a significant concern for older people, and people with disabilities, and in this regard there is a need to work with Community Safety services on such issues as hate crime.

LEGISLATIVE

One of the key requirements of the Integration legislation is a need for services to become more locally responsive. There are already well established local arrangements for Neighbourhood Planning, and the new focus on localities for Health & Social Care services will build upon these foundations. This will be piloted in Penicuik in developing more coordinated support to housebound patients. The implementation of self-directed care legislation has required major changes in the way in which community care services are organised and delivered. Audit Scotland review report, August 2017, concluded that there is still work to do to ensure everyone can benefit. Scottish Government published a national carers' strategy *Caring Together: The Carers Strategy for Scotland 2010-2015*. The new Carers (Scotland) Act (2016) (implementation April 2018) places duties on the local authority to offer assessment and support to help mitigate the impact of caring.

RECOMMENDED PRIORITIES

Prevention: We want to make it easy for you to make healthy choices. In the last three years we have helped Midlothian people:

- Be active (e.g. discounted sport + leisure access & specialist classes).
- Eat Healthily (e.g. courses & access to healthy food).
- Stop smoking (e.g. 'Quit Your Way' sessions & leisure discounts).
- Access advice, screening and immunisation (e.g. flu jabs).
- Reduce the risk of falling (e.g. home adaptations & equipment).
- Maintain your mental health (e.g. respite for carers & peer support).
- Stay connected (e.g. day centres, befrienders & help getting online).
- Have adequate money (e.g. support with welfare rights and employment).

Ninety five percent of all respondents said that they have good mental wellbeing. This peaked at 100% of respondents aged 75+ years and dropped to 92% among people aged 45-59 years. A further 94% of people said that they feel connected to friends and family.

92% of respondents said that they are active for at least 30 minutes on most days. This rises to 95% among respondents aged 45-74 years. In contrast 84% of people aged 18-24 said this.

Ninety one percent of respondents said that they eat healthily, with a further 90% stating that they have enough money to stay healthy.

The lowest number of respondents overall, 79% stated that they attend screening/immunisation.

Is this working for you?

	Yes	No
• Do you have good mental wellbeing?	95%	5%
• Do you feel connected to friends & family?	94%	6%
• Are you active for at least 30 minutes on most days?	92%	8%
• Do you eat healthily?	91%	9%
• Do you have enough money to stay healthy?	90%	10%
• Do you attend screening / immunisation?	79%	21%

Just under a third (32%) of all respondents said that they do not use any of the groups or activities mentioned. The top three groups and activities used are as follows;

- Leisure centre 38%
- Exercise class 25%
- Volunteering 23%

Do you go to/use any of these groups & activities? (please tick those that apply)

Leisure centre	38%
Exercise class	25%
Volunteering	23%
Social group	12%
Other	8%
Education	6%
Support group	3%
1:1 Support	2%
Day centre	1%
Respite	0%
None	32%

The top two means by which people could be helped to use particular groups or activities are “information” (7%) and “someone to go with me” (7%).

Do you need any help to do this? (please tick those that apply)

Information	7%
Someone to go with me	7%
Specialist transport	2%
Other adaptations	2%
Someone to be with the person I care for	2%
Other	2%
Adapted buildings	1%
Not applicable	81%

What works well and what could we do to help you stay healthy?

- Great area for walks and outdoor activities. Good range of adult education classes
- I work in the NHS. The day to day pressures harm my mental health. Burn out and hopelessness are not acknowledged or addressed
- Continue provision of quality stores such as local supermarkets with reasonably priced fresh, frozen food post Brexit
- Ageing well seems to have been a very successful programme but now that funding is being withdrawn it will leave many financially unable to attend classes. It seems a very backward step that should be addressed
- Discounted access to leisure centre works well
- I would love to go leisure centre and do activities but I do work full time. But I think it too dear to do activities
- I use the Roslin Pavillion every week. Its local so handy after work
- Better safe cycling routes into Edinburgh. The cycling routes are good for leisure /weekend fun but not practical for commuting
- No local facilities in Dalkeith (leisure)
- Its up to me to look after my own health
- Access to medical services to prevent illness (cancer, heart etc)
- Over 55+ tone zone membership discount? In an effort to attract more over 50's to a gym
- Reduce leisure centre fees
- Midlothian Active Choices is a brilliant scheme. I have MS plus recent cancer treatment and Mac has helped me tremendously
- The leisure centre swimming pool is a blessing for myself. I go 2 to 3 times a week and swim for 30 minutes each time. Not only do I get exercise but also have company and is warm in winter. Also free bus pass encourages me to go out regularly. At 72 years old that is important
- Unrestricted access to Penicuik estate
- Increase access to complementary medicine for those in vulnerable groups – via local projects
- I do exercise in Edinburgh as work there

Short Term/Urgent Support

If you fall ill or are in a crisis we want you to get help quickly and easily.

In the past three years we have helped Midlothian people :

- See the right person quickly (e.g. GP, crisis services, out of hours social work, new health centres, employing a range of staff, working together & signposting about who to see when a GP isn't the right person).
- Get help in a way that suits you (e.g. video conferencing or phone consultations for GPs & Wellbeing service).
- Recover as soon as possible (e.g. reducing time to leave hospital, hospital at home, peer support & re-ablement).

Fifty percent of respondents said that it is easy to get support/ treatment locally. This is followed by 48% who said that the support/treatment helped them recover. Forty two percent of respondents said that it is easy to get support/treatment quickly.

Is this working for you?

	Yes	No	N/A
Is it easy to get support/treatment locally?	50%	30%	20%
Has your support/treatment helped you recover?	48%	13%	40%
Is it easy to get support/treatment quickly?	42%	36%	22%

When asked to consider the statement "The GP might not always be the best place to go when you are unwell", 63% of respondents said that they know about other services. The two main ways in which people find out about these other services were "word of mouth" (35%) and "redirected from the health centre" (33%).

If so how did you find out about these? (Please tick)

Word of mouth	35%
Redirected from the health centre	33%
Other	27%
The leaflet 'Do I need to see a GP?'	19%

What works well and what could we do to improve your support/treatment when you are ill or in a crisis?

- Satisfied with help offered
- Strathesk practices appointments booking (mainly by telephone) doesn't work. It's practically impossible to see a doctor if you are ill in Bonnyrigg
- Strathesk surgery – online services are good
- All primary and secondary NHS departments are fabulous and me and my family has always received excellent care through them.

- Whilst working in GP setting I think GP appointments system needs improvement. System needs to be put in place by NHS DNA patients to recoup the loss of time and resource. I.e. financial penalties. With my experience there are patients who are at GP's almost every week, they are also the defaulters. Due to small group of patients constantly taking GP's time, wider working population cannot get appointments. Some sort of rehabilitation in terms of patients behaviours for non compliance is seriously required.
- Phone consultations are useful but it is really difficult to see the same G.P. i.e. your "named" G.P.
- It would be great, just call and arrange appointment but its really hard so I just cope on my own
- More GP's needed, health centre need to function 7 days/week
- Access to GP's to be possible in days rather than weeks. Repeat prescriptions now taking 5+ days
- Make more rehab service available locally rather than in Edinburgh
- Poor GP service
- More GP's
- Local GP services linked to local community hospital and specialist services
- Out of hours GP service is poor. Especially if you do not have transport available. For a town the size of Penicuik we should not have to travel to another town for necessary treatment at weekends and evenings
- Improve GP services in proximity to new housing developments
- Current system works well for me, although it is overstretched
- Easier access to GP appointments rather than consultation with receptionist who have no medical training
- Improve access at the local surgeries, GP's etc. It took me two months to get an appointment and that was by phone
- Employ more doctors (GP's) and make getting an appointment with a doctor much more easy. Improve appointment management at local doctors surgeries and group practices
- Knowledgeable GP staff / receptionists
- Doctors need to have more time per patient, so more doctors needed
- Access to doctors, a phone call does not show – purple face – etc
- Internet is best source of this info. It needs to be uploadable and relevant so investing in the digital network is vital
- More doctors required getting an appointment more chance seeing the Pope
- We need more GP's in Loanhead in order to get quicker appointments when needed
- Send fewer to A&E – follow up next day through GP
- Bonnyrigg GP works well
- Stop building houses in Bonnyrigg
- I don't ned anything now but when my elderly mother was alive I would have liked some support – the problem was that no doctors were involved with her as she was not ill. However, she was in her 90's and relied totally on me for everything. This was at time overwhelming
- The biggest problem is getting past the receptionist at the medical centre to see the GP or other medical staff

Long Term Support

If you need long term support we want to support you to live independently and safely.

In the last three years we have helped Midlothian people:

- Do more at home independently (e.g. *accessible homes, home adaptations & equipment*).
- Do more at home with support (e.g. *personal care & meals, extra care housing, care at home, support at home service & telecare – sensors, alarms*).
- Manage your condition at home (e.g. *monitoring medical conditions, medication prompts, specialist staff provide treatment at home – hospital at home, nurse, information & advice*).
- Get support locally (e.g. *community hospital, wellbeing service & 1:1 support to access community activities*).

83% of respondents said that their house is suitable for their needs. For those respondents who receive support, 84% said it helps them to live independently, 82% said it helps them feel safe and 76% said it provides support at the right time.

96% of respondents said they can manage their condition at home or locally.

Is this working for you? (If you don't need long term support please leave blank)

	Yes	No
Is your house suitable to your needs?	83%	17%
If you have support at home does it :Help you live independently	84%	16%
:Help you feel safe	82%	18%
:Provide support at the right time	76%	24%
Can you manage your condition at home or locally?	96%	4%

What works well and what could we do to improve your independence?

- Can look after myself but would like more information about other services to keep me independent
- I now need mobility adaptations in my house. Not sure how to go about this.
- Have enough well trained and paid carers to support the families who need it , its not working.
- Have external care 12.5 hours /weekly employed by us but funded by council . This works well
- With help from VOCAL and a little help from social work we have been able to reorganise the house to meet my wifes mobility problems

Choice & Control

Whether you need help for minutes, days or years, we want you to have choice and control over your support/treatment. In the last three years we have helped Midlothian people:

- Find information to make decisions (e.g. eligibility for services & directories of support).
- Plan their support/treatment (e.g. self-directed support, carer support plans, power of attorney, guardianship, emergency plans & anticipatory care plans).
- Share your views (e.g. advocacy groups & public representation on planning groups).

Fifty eight percent of respondents said that they have enough information to make decisions about their treatment/support. A further 36% said that they feel they can control or change their support or treatment.

About a third of all respondents said that they were given choices in their support/treatment and were asked about what matters to them when first talking to someone e.g. a GP or Social Worker.

Just over a quarter (26%) of all respondents said they felt their feedback will help change services.

Is this working for you?

	Yes	No	N/A
Do you have enough information to make decisions about your treatment/support?	58%	17%	25%
Were you asked about what matters to you when first talking to someone e.g. a GP or Social Worker?	32%	32%	36%
Were you given choices in your support/treatment?	33%	33%	35%
Do you feel you can control or change your support/treatment?	36%	29%	35%
Do you feel your feedback will help change services?	26%	38%	35%

The top three ways in which respondents find information about services/support are;

- Internet search 34%
- Friend or Family 22%
- Newspaper 13%

How do you find information about services/support?(please tick all that apply)

Internet search	34%
Friend or Family	22%
Newspaper	13%
Staff	11%
Newsletters	10%
Facebook	7%
Email	7%
Other	4%

Fourteen percent of respondents said that they are an attorney for someone else, with a further 13% stating that someone acts as an attorney for them. Far fewer people are a guardian for someone else (6%) and only 4% stated that someone has guardianship over them.

	Yes	No
Are you an Attorney for someone else?	14%	86%
Does someone act as an Attorney for you?	13%	87%
Are you a guardian for someone else?	6%	94%
Does someone have guardianship for you?	4%	96%

What works well and what could we do to improve your choice and control?

- Open access to planning meetings conversations, minutes and payments from developers and councillors, minutes and payments from developers to councillors
- Improve access to advocacy. Virtually non existent. Service providers have conflict of interest to be advocates
- Time will tell
- Patient representatives should be encouraged to be involved in organisation of their GP surgeries
- At present I do not require care support but have both my sons as power of attorneys
- What little support I have received has always been good
- Provide information on the above matters

And finally, if you were in charge of the £130 million budget for health and social care in Midlothian how would you save money and improve services? A wide variety of responses were given, examples of which are outlined below. A full list of responses is contained in the appendices.

- Make sure those requesting help really need it and not reducing what is needed by the less able
- Find more doctors to serve the growing population. This is clearly a crisis
- Ensure that those attending A&E are genuinely eligible to attend A&E
- Produce a better questionnaire (H&SC section) more like community justice
- I will start reviewing what individual upper level managers in NHS achieve per year. How they communicate and know their staff. The number of over worked and unhappy nursing staff I have worked in last almost 20 years of nursing in UK is unbelievable. In Pakistan nurses join a department and then retire at retirement age. Here nursing staff turnover is every six months surely there is something not right
- Better education through posters / leaflets/ video available in the waiting rooms of doctors surgeries, to promote more self help and prevention
- Cut back at the top

- Start at the beginning mental health and wellbeing tuition/coaching for school lads and adult referral groups to help adults better understand and cope with life
- Get rid of all the layers of jobsworth administrators
- Increase use of IT services (email/text) – avoid unnecessary duplication of letters from health centre
- Invest more in preventative services – cost savings would follow in medium term
- You cannot save money and give a good service. They need more to keep going and a lot more to improve it
- Pay someone with experience to do the job and report back
- Less managers, put sisters back in hospital wards
- Reduce admin and increase frontline medics – doctors and nurses
- Reduce numbers of private houses being built so that it is easier for people to get a doctor, dentist, school place
- Get rid of small RC primary schools and either merge with local primaries or create a central RC school in Bonnyrigg
- Those who take on this task should be commended and respected for it – this is inherently complex decision making
- Good staff , all parties working to the same goal, working within the timescale (budget/ well managed) small teams, good community development, communicate to the public. Talk to each other, listen to one and other , good research before acting on any tasks, See the budget as your own and make sure you get value for money. Get as much people involved in the community.
- More GP's quicker appointments
- Don't build so many houses when Midlothian does not have the infrastructure to deal with the Midlothian residents. Improve schools, surgeries, roads
- Improve access to appropriate clinical staff (not necessarily GP's) by recruiting more staff
- Identify waste – energy watch, collect all outstanding rents/payments, best buy materials

2.6 Additional Information

Discrimination

Four percent of respondents stated that in the past year, they have experienced discrimination caused by: age, disability, gender reassignment, marriage or civil partnership, pregnancy or maternity, race, religion and belief, sex or sexual orientation. 15% of these respondents said it had happened once in the past year, 55% said it had happened twice and 29% said it had happened on 3 occasions.

Other High Priority Issues

Respondents were asked to state any issues that they felt should be a high priority and which are not covered in the questionnaire. A wide variety of responses were given, examples of which are outlined below. A full list of responses is contained in the appendices.

- Blocked street drains – resulting in street flooding
- Dog dirt in Dalkeith is still a big problem
- The GP health service is in crisis. Please resolve it. Stop building more and more houses
- Poor state of roads and footpaths
- We are meant to be a civil community yet everything is filtered through and expressed via a political screen. We are human beings not a proletariat
- Preparing for Brexit, especially projected labour shortages. How to improve appreciation of diversity and be a more welcoming place.
- Restrictions in access to or communication with local needed services – GP, practice nurses etc
- Poor service trying to get appointment on phone to speak to a doctor
- Help for disabled people living alone
- Penicuik public park path needs to be retarred. New surface needed , dangerous for the elderly
- Thousands of houses built but no mention of the fact that no new infrastructure has been put in place to support the occupants
- We need more doctors to keep up with all the new houses
- Bus service for Auchendinny needed for the elderly and infirm in the village – URGENT
- I am 75 years old and would have liked to be able to talk to some kind of advisor to see if I am missing out on anything to which I am entitled
- GP service provision inadequate, particularly with the number of new homes being built. Infrastructure inadequate for number of new homes.
- Children attending school – unless this is sorted the other initiatives will ultimately fail
- Great to have new houses but there is no new roads, surgerys, shops, parking – no traffic movement cost money for business
- How is E.U. funding going to be replaced so existing benefits are not lost or reduced and new needs financed
- Midlothian is a great place to live, we should promote it as the county of choice
- Road conditions and infrastructure on local routes not just motorways and bypass

Comments on the Questionnaire

Finally, respondents were given the opportunity to say what they thought of the questionnaire. Examples of the types of comments received are outlined below.

- Good
- Easy to understand
- It takes more than 15 minutes – especially if you try to absorb all the information provided
- Informative but as you pointed out repetitive questions
- Very comprehensive questionnaire covering most aspects of life in this area
- Very relevant questions – hard to choose priorities as all so important
- Imprecise and fudged
- Informative
- The health section was poor, about me rather than priorities. Information given was good but slightly long
- Its good and getting better with each year
- Quite a thought provoking form and tackles many important issues
- Could have been made using less paper
- It was good
- Far too much waffle
- Helpful stats to inform choice of priorities. However, layout was dense and in some places confusing.
- Took much longer than 15 minutes
- Challenging (and I'm not stupid) – most of the time 😊
- Very informative
- Overall OK
- Quite a long read with lots of data to take in. However question OK
- Doesn't ask relevant questions, traffic volumes, lack of GP's, street mess
- Interesting
- Very informative. Many challenges to encounter but I believe the council will do a good job to achieve this
- Very extensive
- Lots of information on where I live but I have to post it back to you
- Extensive, covers all aspects more or less
- Very relevant, pertinent, incisive and clear
- Good reading
- It gives advice on things that are important in Midlothian
- Not 15 minutes to complete – took over an hour! Someone likes statistics
- Very thorough and relevant
- Worthwhile completing and interesting
- Does its best to cover most needs
- Interesting
- It is a good outreach to the public. It is very difficult to design a questionnaire such as this one but it does cover a wide range of community concerns and hopefully gets the temperature of the public.
- OK but feel yet again we send them in and nothing changes

Appendices

Open Ended Responses

Example Questionnaire

MIDLOTHIAN COUNCIL
SURVEY ON COMMUNITY PLANNING PRIORITIES 2019-20
Citizens Panel Open Ended Responses

Sustainable Growth - Is there another outcome that you feel should be pursued over the next three years?

- Focus more on manufacturing than service sector. Support IT based industries and software products, provide excellent broadband for business
- Sexual and reproductive health education through health practitioners during late secondary school years, college, university and especially young parents and all age teachers. The number of young teen pregnant and mothers I see is not healthy in 2018. The similar mindset i.e. lack of ambition in life and transfers to consecutive generations.
- Before more housing considered infrastructure needs to be sorted. Plus there is hardly any green belt. Eskbank is joining on to Bonnyrigg, Woodburn to Mayfield etc. Midlothian cant cope with any more housing, affordable or not. Infrastructure needs to be first priority – roads, doctors, schools etc
- Social housing should increase but these social houses should never be sold but kept as for rented social houses only
- Tidy up litter on all areas. Maybe use community time offenders or increase litter bins
- A new town centre for Dalkeith
- Ensure that health and education infrastructure requirements are taken into account when housing developments are proposed. If you leave this to developers it wont happen
- Projecting forward is required for the future
- Movement of traffic through the area
- Borders railway should be extended to take in Loanhead and later Roslin, Bilston and Penicuik. Thus reducing road congestion by commuters
- Adequate health provision for Midlothian residents – number of GP's far too low
- Upgrade housing that lies vacant over a long period of time
- I am of the opinion that government support of private enterprise has very limited outcomes. The efficiency of such measures are impossible to measure and the opportunity for abuse is very high
- Encourage people to work locally – reduce their carbon footprint and support their local economy and business
- Review criteria for getting a council house. If you cant pay, you don't get
- More "social" businesses to increase community spirit and entice visitors (café, bars, games etc)
- Improvement in infrastructure must be mad before any more housing developments go ahead
- Get police out, visible on the street (no cardboard cut outs) and stop reducing civilian support staff
- A four year plan for road resurfacing in Midlothian. Reduce building on greenfield sites
- Infrastructure to deal with the significant increase in housing in the area

- Car parking problems create major problems for people attempting to use retail outlets in towns. Long term parking by individuals employed in certain organisations needs to be curtailed
- Build less unaffordable housing. Stop housesitting empty – cap private landlord rents
- No more housing – develop towns to cope so that people shop locally – keep money in rural community
- Ensure that HMO leases follow recycling rules
- Better transport links, reduce road congestion. Improve access to GP services

Improving Opportunities for People in Midlothian - Is there another outcome that you feel should be pursued over the next three years?

- Education for young people should include developing skills and insight relating to: relationships, mental health, value of diversity
- Improving roads and pavements
- Increased health provision e.g. number of GP's
- Social equality does not work, unless you are a communist. People have to aspire to better themselves. Better parenting is the answer. Stop all the handouts
- Provide more opportunities for young people to learn a trade as an alternative to academic qualifications. This would help to address the problem of a lack of trades people in the community
- Encourage self help
- People need shown how to manage money and what food to eat. This will reduce pressure on poverty and health services
- Run apprenticeships for trades. Improve community involvement and respect for each other
- Often people receive sufficient money but do not know how to use it effectively leading to poverty for their children and themselves
- Health provision for all especially in Dalkeith and Bonnyrigg needs a thorough investigation – the GP's are excellent when reached
- The Council to offer apprenticeships or work placements schemes. To get young people starting their working lives
- Improving environment – all green spaces to encourage people to go out
- More shops, schools

Getting it Right for Every Midlothian Child - Is there another outcome that you feel should be pursued over the next three years?

- Education should include: relationships, mental health, value of diversity (not just exams and science)
- Possible independent Scotland if we could not manage to get Brexit reversed. Although I was a remainer, who was sold EU membership dream by UK government during Indy Ref 1. Since Brexit I have changed my remain position.
- I work with Thera Scotland, in Mayfield I think there should be more places to take service users
- Parenting is what everyone of us should be able to do for ourselves as adults, and the most important source is from example, adult mentors where parents are struggling with their own mental health and development
- Ensuring the transition of young people with additional support needs to adult services is in line with principles of good transitions
- Truancy
- Not letting early years take all the money. Education needs it far more
- Give more support to trading standards to help stop young people taking up smoking. At the moment Midlothian Council pays lip service to enforcement action
- Quality in school extra curricular activity provision of sports and other activities. There should be an expectation on every teacher in Midlothian offering an after school activity and every school should have regularly competing sports teams. There is no excuse for this not to happen
- Resist Scottish Government
- Increase amount of teachers. Improve the high school exam results. Vastly increase learning support workers specially in primary schools
- A lack of teachers of certain subjects will begin to seriously impact on young people attaining their goals and equally worrying affect the ability of existing staff to cope. Provide more teachers
- Move away from the bias of academic results to a more vocational system
- A second early years centre in Bonnyrigg / Loandhead/ Penicuik similar to Hawthorn
- More activities out of school hours e.g. sport, the arts, culture etc. Specially at weekends
- More outdoor pursuits – learning about where they live and whats around them – wildlife, architecture etc
- Get government out of managing peoples lives. OMG, bring back discipline – routine and respect. Parents are responsible for children, school are responsible for education
- Why separate St Davids and Dalkeith – they are on the same site
- Improving education quality and exam performance. Midlothian education quality has dropped significantly in the last 10 years
- The attainment gap can only be closed by encouraging the parents of the disadvantaged families to recognise the benefits of encouraging their children to do better at school. Often where the child is doing well the parents prevent a child from going on to further education
- More support for additional support needs children and more training for staff on the subject, particularly ASD

Adult Health and Social Care

What works well and what could we do to help you stay healthy?

- Great area for walks and outdoor activities. Good range of adult education classes
- I work in the NHS. The day to day pressures harm my mental health. Burn out and hopelessness are not acknowledged or addressed
- Continue provision of quality stores such as local supermarkets with reasonably priced fresh, frozen food post Brexit
- Ageing well seems to have been a very successful programme but now that funding is being withdrawn it will leave many financially unable to attend classes. It seems a very backward step that should be addressed
- Discounted access to leisure centre works well
- I would love to go leisure centre and do activities but I do work full time. But I think it too dear to do activities
- I use the Roslin Pavillion every week. Its local so handy after work
- Better safe cycling routes into Edinburgh. The cycling routes are good for leisure /weekend fun but not practical for commuting
- No local facilities in Dalkeith (leisure)
- Its up to me to look after my own health
- Access to medical services to prevent illness (cancer, heart etc)
- Over 55+ tone zone membership discount? In an effort to attract more over 50's to a gym
- Reduce leisure centre fees
- Midlothian Active Choices is a brilliant scheme. I have MS plus recent cancer treatment and Mac has helped me tremendously
- The leisure centre swimming pool is a blessing for myself. I go 2 to 3 times a week and swim for 30 minutes each time. Not only do I get exercise but also have company and is warm in winter. Also free bus pass encourages me to go out regularly. At 72 years old that is important
- Unrestricted access to Penicuik estate
- Increase access to complementary medicine for those in vulnerable groups – via local projects
- I do exercise in Edinburgh as work there
- Better access to leisure centres with much more realistic pricing, friendlier staff. The Lasswade people are awful
- What works well is keeping localised fitness centres i.e. every village should have its own Tonezone centre
- More safe cycle routes to Edinburgh and ease congestion, particularly in Lasswade
- Urgent action required to get young people involved in sports. I am a member of golf and curling clubs and like many they are in danger of closing due to reduced numbers of young members who seem to prefer computer games in a closed room
- At least 6 month waiting list to access physiotherapy – could be improved
- I use a gym but not in Midlothian due to the high costs in the memberships and the poor facilities and/or poor maintenance of the facilities, very disappointing
- More affordable leisure prices

- I am able to use private health club which means I do not use council facilities. Getting an appointment with doctors can be a challenge but I am lucky to be healthy
- Ageing Well Choir and Wellbeing group are a source of exercise and social interaction
- More GP's
- Discounts for people who work instead of just for those who don't
- Extend opening hours of gyms to allow use before work
- More cycle routes without cars
-

What works well and what could we do to help your support/treatment when you are ill or in a crisis?

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- Strathesk surgery – online services are good
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- I don't need anything now but when my elderly mother was alive I would have liked some support – the problem was that no doctors were involved with her as she was not ill. However, she was in her 90's and relied totally on me for everything. This was at time overwhelming
- The biggest problem is getting past the receptionist at the medical centre to see the GP or other medical staff
- Get through to GP clinic, get an appointment or talk quicker. Fine people who miss appointments
- Pressure on GP surgery numbers make it difficult to get an appointment quickly
- Cut out the use of "Robots" when phoning about medical difficulties
- I always go to the pharmacy for advice
- Poster advertising at bus stops, local supermarkets, Midlothian press providing advice and contact telephone numbers/email info
- I really like the telephone appointments – this has allowed me to get medication reviewed without time off work and without going to the surgery. However thankfully I have not had any health emergencies or become increasingly poorly in the last few years to require further support
- Wife has compromised immune system due to arthritis drugs and requires my care 24/7. Recently spent 5 hours in very cold waiting room at royal infirmary before seeing doctor
- Access to GP services
- Reduce waiting times, make it easier to access GP appointments
- Appointment system for GP falls short now. Difficult to get through to surgery at 8.30am to arrange a call back from a doctor. Often there are none left and unless it is a real emergency its difficult to see a doctor
- Getting help on the day of being ill is OK, what's hard is getting an appointment in advance for another day something that is not urgent
- Reduce waiting times. Make it easier to access GP appointments
-

What works well and what could we do to improve your independence?

- Can look after myself but would like more information about other services to keep me independent
- I now need mobility adaptations in my house. Not sure how to go about this.
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- Time will tell
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If you were in charge of the £130 million budget for health and social care in Midlothian, how would you save money and improve services?

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- More GP's quicker appointments
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- Improve access to appropriate clinical staff (not necessarily GP's) by recruiting more staff
- Identify waste – energy watch, collect all outstanding rents/payments, best buy materials
- Enable access to GP appointment via the internet, Improve provision of talking therapies for mental health problems in particular cognitive behaviour therapies
- All staff to have S.M.A.R.T targets which are monitored and reviewed
- Stop doctors giving out prescriptions for cheaply and readily available drugs such as aspirin and paracetamol. Increase opening times of doctors surgeries by staggering GP's hours of work to ensure doctors are available from 8.30am to 9pm Mon to Fri and Sat mornings. Improve group practice appointment system and management
- Get rid of free prescriptions they are unaffordable. Stop pandering to the self inflicted drug users, alcoholics and the obese. Divert the savings to improving lives of those who need it most i.e. the elderly sick (genuine) and the vulnerable. Get the Lothian Health board to be more joined up in all its services that it provides
- More GP services and info about social services
- We need more GP's and health centres due to increased private housing in all areas. Also more social housing for the elderly
- Too many bosses, streamline. Start charging a token sum for prescriptions would help some
- Frankly I do not know. At my age difficult choices are stressful. Best left to those with necessary expertise

- Improve help for people with mental disorders
- We need a new medical centre, with all the new houses being built the current Bonnyrigg Health centre is full and residents find it frustrating trying to get appointments. There is space in the Hopefield development to build a new health centre but finding doctors could be an issue
- Structure of services. Structure of staff – i.e. not 3 people to do 1 persons job
- Review waste of resources in the NHS – massive at present from numerous causes. I know – I've worked in the NHS for 45 years
- To save money reduce unnecessary admin and management. Replace with more medical staff
- Stop non british travelling to the UK for treatment Ops etc. Pay rises only for staff on less than £30,000 per annum. Free car parking at hospitals
- The maximum money must go into early years and education in general. These standard grade and higher results are an embarrassment. Future change will begin with the young people. The schools need to be more successful and offer more inclusive activities to keep the young people occupied and away from ASB. Are you aware of the work done in Iceland – Google. "Iceland know how to stop ten substance abuse" – a 2017 article in the Independent
- Central (particularly Scottish Govt) needs to stop interfering and restructuring local govt. Also announcing project/policies and then requiring local authorities to fund them with fewer resources.
- Less bureaucracy and more nurses in hospitals
- Educating people to what is available. Encourage people that have problems to see a doctor / social worker, sooner
- Improve number of doctors and health care
- Increase primary care budget to ensure more direct contact with vulnerable cases
- Make sure that someone is checking up that the money is going to the right people and services - not by people who are abusing the system
- The first task would be to examine in detail the administrative set up of the NHS and social care services. It appears that they have grown like topsy and no-one has thought of streamlining them to meet the needs of the 21st century. Many who take the services know what is required but have their views suppressed by administrators
- Reduce alcoholism, drug taking and idleness
- Our older generation need good care but I often see time and money being wasted on the younger old – less required, I feel this is imbalanced
- Examine level of waste. Discourage time wasters e.g. someone using an appointment with a GP when they have a cold
- Make people more aware of the services that are available. More information on healthy eating to reduce obesity rates
- Fine tune middle management, cut huge wages. Pay workers more. Run an in house bank nurse system with set not inflated wages. Stop 12 hour shifts , improve staff moral, ban sugar from wards tea rooms
- Where health is concerned money saving is not a priority. More GP's required due to new influx of people into Midlothian

- Get the GP's working harder – giving correct guidance to unhealthy people, Where possible get people to take responsibility for themselves. Most people are not doing this.
- More sports for kids, free use of leisure centre for children. Small classes for oap's
- Cut back on doctors salaries, particularly locums
- Cut MP's salaries, give to social direct
- Try to enrol more GP's
- Focus on prevention
- Target obesity, target smoking
- Give less benefits to alcohol and drug addicts and help them instead with therapy
- Reduce waiting times for hospital referrals. Current service very disjointed. Improve communication, reduce obesity particularly in children
- Micro manage each department one at a time by spending time in each area personally. This is the only way to identify savings that will reduce the impact on service delivery

Issues which respondents feel should be a high priority which are not covered in the questionnaire.

- Blocked street drains – resulting in street flooding
- Dog dirt in Dalkeith is still a big problem
- The GP health service is in crisis. Please resolve it. Stop building more and more houses
- Poor state of roads and footpaths
- We are meant to be a civil community yet everything is filtered through and expressed via a political screen. We are human beings not a proletariat
- Preparing for Brexit, especially projected labour shortages. How to improve appreciation of diversity and be a more welcoming place.
- Restrictions in access to or communication with local needed services – GP, practice nurses etc
- Poor service trying to get appointment on phone to speak to a doctor
- Help for disabled people living alone
- Penicuik public park path needs to be retarred. New surface needed, dangerous for the elderly
- Thousands of houses built but no mention of the fact that no new infrastructure has been put in place to support the occupants
- We need more doctors to keep up with all the new houses
- Bus service for Auchendinny needed for the elderly and infirm in the village – URGENT
- I am 75 years old and would have liked to be able to talk to some kind of advisor to see if I am missing out on anything to which I am entitled
- GP service provision inadequate, particularly with the number of new homes being built. Infrastructure inadequate for number of new homes.
- Children attending school – unless this is sorted the other initiatives will ultimately fail
- Great to have new houses but there is no new roads, surgeries, shops, parking – no traffic movement cost money for business

- How is E.U. funding going to be replaced so existing benefits are not lost or reduced and new needs financed
- Midlothian is a great place to live, we should promote it as the county of choice
- Road conditions and infrastructure on local routes not just motorways and bypass
- Illegal fly tipping in our countryside, poor relationships between communities and their community councils
- To keep fit during inclement weather we need a leisure centre in Dalkeith
- More traffic calming measures are required within Hopefield Estate, too many speeding cars and buses
- With all the new homes, lack of doctors surgeries and schooling
- The condition of the roads
- More information on where Midlothian Council are spending all the extra council tax they are now receiving
- Availability of medical services, etc , for non urgent matters. It is worrying that doctors and other health professionals don't want to work in this area due to too much pressure because of over population
- Stop building houses in Bonnyrigg. Schools cant cope, cant see a GP, roads are a joke at rush hour
- Better public transport and cycleways to reduce traffic pollution
- Drugs are becoming more apparent but believe Police are doing their best
- Traffic congestion causing pollution , chest problems in Bonnyrigg and Lasswade
- Those people on the aspergers spectrum could do with help into work or activities as many do not leave their homes
- Reopen Loanhead Police station
- More community policing (on foot) or push bikes
- Local authorities guilty of waste. E.g. overpaying executives. The latest example of 2 million flies bread being investigated is one example
- Drive for increased housing figures should not impact on the environment or quality of other householders

Respondents thoughts on the questionnaire.

- Good
- Easy to understand
- Good
- It takes more than 15 minutes – especially if you try to absorb all the information provided
- Informative but as you pointed out repetitive questions
- Very comprehensive questionnaire covering most aspects of life in this area
- Very relevant questions – hard to choose priorities as all so important
- Imprecise and fudged
- Informative
- The health section was poor, about me rather than priorities. Information given was good but slightly long
- Its good and getting better with each year
- Quite a thought provoking form and tackles many important issues

- Could have been made using less paper
- It was good
- Far too much waffle
- Helpful stats to inform choice of priorities. However, layout was dense and in some places confusing.
- OK
- Took much longer than 15 minutes
- Challenging (and I'm not stupid) – most of the time 😊
- Very informative
- Overall OK
- Quite a long read with lots of data to take in. However question OK
- Doesn't ask relevant questions, traffic volumes, lack of GP's, street mess
- Interesting
- Very informative. Many challenges to encounter but I believe the council will do a good job to achieve this
- Very extensive
- Lots of information on where I live but I have to post it back to you
- Extensive, covers all aspects more or less
- Very relevant, pertinent, incisive and clear
- Good reading
- It gives advice on things that are important in Midlothian
- Not 15 minutes to complete – took over an hour! Someone likes statistics
- Very thorough and relevant
- Worthwhile completing and interesting
- Does its best to cover most needs
- Interesting
- It is a good outreach to the public. It is very difficult to design a questionnaire such as this one but it does cover a wide range of community concerns and hopefully gets the temperature of the public.
- OK but feel yet again we send them in and nothing changes
- Interesting but people have a narrow field of vision
- Interesting and informative
- OK
- It was detailed enough
- It would be helpful to separate the excellent background information from the questions to be answered – that way the background information could be retained by the respondent for future reference
- Helpful and informative
- Better than usual
- Very interesting information provided, but longer than 15 minutes to digest
- Difficult to prioritise between various needs and services without feeling discriminatory / most of not all objectives are of high priority
- The information provided was very useful
- Very informative
- Easy to read and understand with simple questions

- Too much wordy information. I have a tertiary education and still don't read it all. I imagine most recipients don't read it at all
- Informative
- I would like to see questions regarding transport and roads and the difficulty of getting to places of work and university etc
- School higher pass marks is interesting (much improved)
- Very comprehensive, but it would be helpful to be informed of the results
- Very thorough but mercifully relatively short
- Interesting and varied topics covered
- Easy to follow, easy to answer
- Interesting and hopefully useful
- It was quite informative
- Very informative
- Informative and fairly comprehensive. Pleased to note the level of improvements attained in some areas
- Good coverage of Midlothian
- OK
- Easy to complete
- Too wordy, some infographics may have helped
- Rubbish – focused on political correctness rather than what needs to be done
- On page 1 it says it would take 15 minutes to complete !! If you are going to read all of the information properly and consider your answers it takes a long time to fill in. The information is very interesting though, but it took me 1.5 hours
- Informative, possibly a bit too much info
- Excellent but lots of questions are not applicable to my situation. But cant be avoided.
- Difficult to prioritise, nice to be asked but as an individual I lack detailed knowledge
- Very good easy read
- Good but question “in what order of importance would you rank these” implied rating 1 = best, 2 = 2nd best etc. But only high, medium and low were offered. How can I rank order
- I found the information given in this questionnaire very informative and interesting. Most people are not aware of the many groups mentioned here
- Far too much text. Asked to chose between sets of things that are self evidently important
- Informative
- Indifferent
- Very wordy
- I have an interest in council planning and am happy to continue providing feedback
- Excellent opportunity to voice opinion and receive feedback on others thoughts
- Opportunity to provide more comments on specific areas would have been good
- Covers a multitude of subjects, well put together
- Very clear and concise
- Good
- Certainly a lot of reading. Quite difficult decisions, reflecting real life
- Reasonable. Probably a bit too much information. But it's a hard balance for you

