

Midlothian Community Planning Partnership  
Midlothian – A Great Place to Grow  
Panel Survey Report  
Survey on Single Midlothian Plan Priorities 2021-2022

**Summary Report**

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## **Executive Summary**

This report details the main findings to emerge from the questionnaire issued to the Midlothian Citizen's Panel in the Autumn 2020 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 2021-2022. The survey consisted of the following sections;

- Community Safety and Justice Board
- 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 October 2020. A total of 551 panel members returned completed questionnaires prior to the production of this report, giving a response rate to the survey of 55%.

## **Community Planning Priorities 2021-2022**

### **Community Safety and Justice Board**

#### **Community Justice**

Respondents were asked to consider 5 priority areas and to indicate what work needs to be done to address these. Examples of the responses received are outlined below each of the 5 priority areas.

#### **Support people to attend school and/or gain qualifications**

- Stop rewarding bad behaviour. Concentrate on the good majority that want to learn
- Send them to special schools
- Early intervention / increased funding for support especially literacy skills
- Compulsory education whilst in custody as part of their sentence
- Accept that fully inclusive education doesn't actually work and provide a specialist facility for children with extreme challenging behaviour / high 'ACE' tally/ ASB issues with small class sizes and high teacher student ratio
- In my opinion it is the home environment that needs to be understood and addressed
- More work experience , extended placements
- There is a growing case for special needs schools or sections within schools
- More help in school, non-teacher. Special areas of schools where they can get help
- Community participation and education
- Ensure a better home life, support parents, enough benefits
- Educate parents as early as possible i.e. when pregnancy is confirmed

### **Support people to reduce/manage drug use**

- Increased funding for supporting children living with parents with drug abuse issues. Expansion of services and support
- Put more effort removing drugs from environment
- More peer support from people that have been in their situation. First offender prisons to stop them learning from more experienced offenders
- Funding drug education programmes
- Consider whether the decriminalisation of soft drugs is the way forward. Enhance attempts to wean from drug use in a non-penal way
- The real need is to get to the suppliers. Prison in itself will not solve problems. Need to get to the organised criminals and the dealers
- Again, more research as to why drug use is prevalent, the reasons behind the addiction and help centres to control the use of the drugs

### **Work with young people to reduce early anti-social behaviour**

- There is a growing case for special needs schools or sections within schools
- This is a national problem our politicians can't solve. Throwing money at it isn't working
- More things to do – organised
- Stop selling alcohol only in specific shops, not supermarkets or small shops
- Key – early identification of children at risk and timely support network. Expansion of mentoring / befriending – good role models
- More facilities for youngsters, ban selling alcohol to under 20 year olds
- Legalise drugs, need to understand why taking so much alcohol
- A much heavier focus on funding and providing activities for young people as a baseline like the Icelandic model. All schools should be offering on site extracurricular activities after school as a matter of course and this shouldn't be the exclusive reserve of private schools

### **Help to improve family life and parenting skills**

- Family support workers
- Education, social services obviously required in education the parents
- Decent homes, jobs/work. Enough money for food, clothes , bills and rent
- Educate parents as early as possible i.e. when pregnancy is confirmed
- Identify problem children earlier. Take out of main stream education and deal with in a separate facility staffed by appropriately trained people.
- There is a growing case for special needs schools or sections within schools
- Drugs use is a reality in every civilisation. Children need protecting from abuse and learned behaviour – fostering and re-homing must be considered
- Keys – early identification of children at risk / in need of support and resources to properly fund intervention
- Better education for first time mums and dads
- Instead of spending money and housing on people that cant support children financially by giving them more every time they have another child. Increase their benefits only if they agree not to have more children
- Fund appropriately nursery and family support services

### **Support people with mental health issues**

- Keep in touch with people but encourage peoples future plans and objectives
- More available support groups
- Find other relevant ways for punishment for offenders
- More local support, remove the stigma associated with this problem
- Whilst in prison work with them to improve their sense of wellbeing emphasizing that current lifestyle is wrong
- Re connect with nature – gardening classes – help both depression and for people to work together
- Proper funding of schools, early years, housing etc. reduces the negative consequences
- when young people offend. There are other causes for offences and drug misuse
- Recent surveys show that majority to not complete or even start community work sentences. I think that short custodial sentences should be the last resort but still necessary

### **Community Safety and Justice Partnership – Possible Priorities for 2021-22**

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 6 issues relating to community safety that respondents stated were high are, “Reduce substance (alcohol and drug) misuse” (78%), “Reduce violent crime” (78%), “Reduce domestic abuse and protect women and girls” (75%), “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)” (48%)

### **Sustainable Growth – Possible Priorities for 2021-22**

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 6 issues relating to sustainable growth that respondents stated were high are, “Maximise opportunities for inward investment and funding to the area” (72%), “Place based economic development approach to support the regeneration of Town Centres” (58%), “Work with Midlothian employers to understand skills needs and provide local employment opportunities” (70%), “Deliver further affordable housing” (54%), “Implement the rapid rehousing transition plan, which sets out a range of actions including ending the use of B&B accommodation for homeless people and reducing the time it takes to provide permanent accommodation” (55%) and “Work with public and private housing providers to put in place sustainable alternatives to gas for heating houses.” (40%).

### **Improving Opportunities for People in Midlothian – Possible Priorities for 2021-22**

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 were; “Reduce the number of children living in households in poverty” (73%), “Increase participation measures for young people aged 16-19 (this is the number of young people engaged in training, employment or education)” (71%) and “Reduce the number of households in poverty across Midlothian” (66%).

### **Getting it Right for Every Midlothian Child – Possible Priorities for 2021-22**

Respondents were asked to consider a variety of Getting in 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 4 issues were; “Raise educational attainment of care experienced children and young people and reduce the number excluded from school” (71%), “Improve access to services for children and young people needing support to maintain mental health and wellbeing” (66%), “Reduce the impact of Covid-19 on child poverty across the county” (64%) and “Improve access to the specialist services some children and young people require to help them recover from trauma” (61%).

### **Adult Health and Social Care**

Forty one percent of all respondents stated that it was very easy to contact their GP practice in the way they wanted. A further 35% said that it was fairly easy and 23% said that it was not easy.

The last time a respondent received treatment or advice at their GP, 66% stated that a doctor provided most of that advice. This is followed by practice or treatment room nurse (30%) and a pharmacist (3%).

Respondents were asked to consider a variety of statements regarding their contact with a healthcare professional and to indicate how much they agree or disagree with each. The top 4 statements relating to their interaction with a healthcare professional that people agreed with were, “I understood the information I was given” (97%), “I was listened to” (92%), “I was given enough time” (78%) and “I was treated with compassion and understanding” (83%).

Just under a fifth (19%) said that the last time they tried to get treatment or advice from a pharmacy, NHS 24 or an emergency service in the last 12 months, it was their own GP (when it was open) that they were treated or advised by. This is followed by pharmacist/chemist (16%) and A&E (3%). Forty seven percent (47%) of respondents stated that they had not used these services. Of those people who state that they had used the services, 37% said that they contacted their GP practice and was referred to the service and a further 21% said that they looked on the GP practice website.

### **Living Independently**

Ninety seven percent of respondents said that their house is suitable to their needs at present. Eighty one percent (81%) of respondents anticipate that their house will be suitable for their needs in 5 years time, 7% said that it would not and 12% are unsure.

### **Power of Attorney**

Just under half (43%) of all respondents stated that they have granted someone Power of Attorney to make decisions for them should they be unable to make decisions for themselves. Just over a third of all respondents (34%) said that they are an Attorney for someone else.

## **CARE, SUPPORT AND HELP WITH EVERYDAY LIVING**

The main types of help or support people have had with everyday living were, “Yes, help for me with personal and/or household tasks” (6%), “Yes, help for me for activities outside my home” (4%), “Yes, help for me with adaptations and/or equipment for my home” (1%) and “Yes, help to look after someone else” (5%). The remaining 78% of respondents said that they had not had any help.

Respondents were asked to consider a variety of statements regarding their care, support and help services over the past 12 months and to indicate how much they agree or disagree with each. The top 3 statements relating to their interaction with a healthcare professional that people agreed with were, “I was aware of the help care and support options available to me” (37%), “I felt safe” (29%) and “I was supported to live as independently as possible” (29%)

### **Care, support and help with everyday living**

Just over a quarter (27%) of all respondents stated that they “look after, or give any regular help or support, to family members, friends, neighbours or others because of either long-term physical / mental health / disability or problems related to old age”. The remaining 73% did not provide any care or support.

The statement with the highest level of agreement regarding being a carer was “I have a good balance between caring and other things in my life”, 82% of respondents agreeing with this. In contrast, disagreement was highest with the following statements, “Caring has had a negative impact on my health and wellbeing” (35% disagree) and “Local services are well coordinated for the person(s) I look after”, 31% disagree with the statement.

Twenty one percent of respondents who provide care to someone said that they are aware of local services that offer support to carers in Midlothian and they are connected to a local service. A further 40% said they are aware of the services but are not connected to a local service and 39% said they were not aware.

Overall, the majority of people 90%+ state that the prevention activities provided to Midlothian people is working for them. The one aspect with a slightly lower level of agreement was “Do you attend screening/immunisation”, 81% saying that they do.

## **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 2020 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 2021-2022. The survey consisted of the following sections;

- Community Safety and Justice Partnership
- 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 October 2020. A reminder was sent to those Panel members who had not responded after a period of 10 days.

A total of 551 panel members returned completed questionnaires prior to the production of this report, giving a response rate to the survey of 55%.

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
<b>AGE</b>	%	%	%	%			%	%
<b>18-24</b>	6%	7%	4%	5%	1.39	1.34	6%	7%
<b>25-44</b>	15%	16%	12%	15%	1.31	1.06	15%	16%
<b>45-59</b>	13%	14%	18%	17%	0.74	0.85	13%	14%
<b>60-74</b>	9%	11%	10%	14%	0.93	0.79	9%	11%
<b>75+</b>	4%	5%	3%	3%	1.24	1.74	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	258	+/-6%
	Female	293	+/-6%
Age	18 to 24 years	72	+/-12%
	25 to 44 years	170	+/-8%
	45 to 59 years	149	+/-8%
	60 to 74 years	110	+/-9%
	75+ years	50	+/-14%
Tenure	Owner occupied	363	+/-5%
	Rented	116	+/-9%
TOTAL SAMPLE		551	

## 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 2021-22 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 Partnership
- 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 Board

Background information about Community Safety and Justice Partnership:

**Community Safety** is about how safe people feel and how safe they are from becoming a victim of crime. It affects how people value their neighbourhoods and includes 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.

### Current information on Community Safety in Midlothian:

- Recorded Group 1-5 crimes in 2019/20 were below the previous year (-14%) and three-year average (-11%) continuing the longer-term trend (ten years) of an overall decline in crimes recorded.
- Violent and sexual crime continues to account for a very small proportion of all crime in Midlothian (less than 4.5% combining both).
- 'Dishonesty crime' continues to account for more than 1 in 4 crimes recorded by police (includes housebreaking, theft of motor vehicles, shoplifting, fraud, and other thefts)
- Antisocial Behaviour Offences which include minor assault, breach of the peace, and threatening and abusive behaviour, made up more than a quarter of recorded crime (28%).
- Crimes of vandalism/malicious mischief accounted for 1 in 10 of all crime.
- Offences relating to motor vehicles (for example failure to insure a motor vehicle, or driving under the influence of alcohol) accounted for 16% of recorded crime.
- Police Scotland received more than 5,000 complaints of ASB from members of the public e.g. disturbance, noise, neighbour disputes, and vandalism), a number comparable to the previous year.
- Just under 100 reports of hate crime were made to police in 2019/20.
- There were 887 reports of missing persons in 2018/19, a comparable figure to the previous year.
- Approximately 1200 incidents of domestic abuse were reported to police, an increase of 3% compared to the previous year with over one third resulting in a crime report (a reduction from the previous three years).

**Community Justice** is about reducing offending and supporting people to stop re-offending (desistance). It is agencies working in partnership with local communities to make a positive change for people with an offending history, their families and victims of crime. The Scottish Government have identified twelve complex needs that affect an individual's likelihood of desistance from offending. Using this information a local community consultation exercise was carried out in Midlothian in spring 2019 where 450 respondents prioritised five of the twelve complex needs that the Community Justice Team should concentrate on for the next year. The five chosen priority areas are highlighted below together with key facts. The Community Safety and Justice Board will soon develop an action plan in light of the five chosen priorities.

Respondents were asked to consider the facts given and comment on what work requires to be done to address each issue (e.g. resources required, tactics, education, and community participation).

### **Support people to attend school and/or gain qualifications**

- 9 in 10 young offenders had been excluded from school at least once
- 1 in 4 young offenders had no qualifications
- Less than 1 in 3 young offenders attended school most days
- 41% of young offenders had poor relationships with their teachers
- Between 1 and 2 in 10 adult prisoners experience difficulties with writing, reading and 12% numbers/basic mathematics.

Comments received included the following, a full list can be found in the appendices;

- Stop rewarding bad behaviour. Concentrate on the good majority that want to learn
- Send them to special schools
- Early intervention / increased funding for support especially literacy skills
- Compulsory education whilst in custody as part of their sentence
- Accept that fully inclusive education doesn't actually work and provide a specialist facility for children with extreme challenging behaviour / high ace tally/ ASb with small class sizes and high teacher student ratio
- In my opinion it is the home environment that needs to be understood and addressed
- More work experience, extended placements
- There is a growing case for special needs schools or sections within schools
- More help in school, non-teacher. Special areas of schools where they can get help
- Community participation and education
- Ensure a better home life, support parents, enough benefits
- Educate parents as early as possible i.e. when pregnancy is confirmed
- Set up special schools for offenders, prioritise the good kids
- Accept that formal schooling is not suited to all children due to lack of ability, but try to ensure these that benefit have classroom support from classroom assistants
- It should be a top priority to get dedicated teachers addressing pupils with special needs i.e. those who need social help
- Encourage better parenting
- Start national service again, stop child allowance for offenders

### **Support people to reduce/manage drug use**

- Approx. 300 children in Midlothian living with a parent who misuses drugs.
- 1 in 3 prisoners (who had been in prison over 10 times) reported committing their offence to fund their drug habits
- Over half of female prisoners were under the influence of drugs at the time of their offence
- Of those prisoners who had been in prison over 10 times, 2 out of 3 had been under the influence of drugs at the time of their offence
- Half of prisoners who had been in prison over 10 times had engaged in illicit drug use in the last month prior to prison, compared to 6% of prisoners serving their first sentence.

Comments received included the following, a full list can be found in the appendices;

- Increased funding for supporting children living with parents with drug abuse issues. Expansion of services and support
- Put more effort removing drugs from environment
- More peer support from people that have been in their situation. First offender prisons to stop them learning from more experienced offenders
- Funding drug education programmes
- Consider whether the decriminalisation of soft drugs is the way forward. Enhance attempts to wean from drug use in a non penal way
- The real need is to get to the suppliers. Prison in itself will not solve problems. Need to get to the organised criminals and the dealers
- Again, more research as to why drug use is prevalent, the reasons behind the addiction and help centres to control the use of the drugs
- We don't have the resources to keep prisoners in longer to reeducate them. I feel sometimes the court system needs sorted
- No amount of external intervention will be successful in reducing this problem. Success then is an individual's desire to be free of addiction. More work needs to be done in establishing the source of addiction and seeking means of dealing with it
- Catch the suppliers and give long sentence, again national service
- Target drug suppliers, teach young people the pitfalls of drug use
- More teaching in schools re the evils of drug use. But putting a positive voice into the move to legalise drugs would be a start
- To have drug use more closely monitored e.g. drug rooms. This is a part of re-educating drug users in an informal way
- Remove all children from drug induced parents
- Tougher restrictions for those who supply drugs e.g. loss of tenancy, suspension of benefits
- Education more policing, social services, tougher punishments as existing ones are obviously not working
- This is a national problem our politicians can't solve. Throwing money at it isn't working
- Stop their source of drugs

### **Work with young people to reduce early anti-social behaviour**

- A lack of social commitment, alienation and associations with antisocial peers are considered risk factors in the likelihood of engaging in problematic behaviour.
- 1 in 3 young people in Midlothian had had an alcoholic drink by the age of 13
- 1 in 5 young male offenders reported they got drunk daily before being imprisoned.
- Half of young offenders were under the influence of drugs at the time of their offence
- In the last year 358 young people were charged with committing a crime in Midlothian, slightly above the previous year and three-year average.

Comments received included the following, a full list can be found in the appendices;

- There is a growing case for special needs schools or sections within schools
- This is a national problem our politicians cant solve. Throwing money at it isn't working
- More things to do – organised
- Stop selling alcohol only in specific shops, not supermarkets or small shops
- Key – early identification of children at risk and timely support network. Expansion of mentoring / befriending – good role models
- More facilities for youngsters, ban selling alcohol to under 20 year olds
- Legalise drugs, need to understand why taking so much alcohol
- A much heavier focus on funding and providing activities for young people as a baseline like the Icelandic model. All schools should be offering on site extra curricular activities after school as a matter of course and this shouldn't be the exclusive reserve of private schools
- Reduce the number of outlets that sell alcohol. Education for earlier years children as they go into secondary education
- Work with shop re alcohol sales, more Police
- Education, social services obviously required in education the parents
- Make more premises accessible and affordable for young people
- More prisons
- Teenagers will always have behavioural problems of some kind. Alcohol restrictions need good enforcement and the deterrent of higher prices
- More needs doing to put young people off drink over use and drugs. Similar to anti-smoking education which seems to be working for some
- Teach young people the pitfalls of over drinking socially, mentally and health
- Night curfew, it's not the alcohol that the problem, it's the shops who supply. Start a system like the States
- Providing young people with more physical activities and opportunities to develop interests leaving less time to indulge in anti-social behaviour
- Educate at school primary, however its learned behaviours from parents / guardians
- There is a feeling of despair and hopelessness where there is no work or practical activities and sports facilities unavailable. Boredom and peer pressure take over. As ever more help is needed
- Agree with the first statement but difficult to get any results if people only engage in anti-social peer groups

### **Help to improve family life and parenting skills**

- In 2018/19 there were 148 Midlothian children referred to the Scottish Children's Reporter. 3 out of 4 were referred on non-offence grounds (primarily lack of parental care)
- Offenders are 2.5 times more likely to have a family member who has been convicted of an offence
- 37% of a sample of prisoners said that someone in their family had been found guilty of a criminal offence
- Negative familial relationships not only put children at a direct risk of harm but can also cause situational or psychological consequences that may invoke future offending.
- Experiences of being in care is high among young offenders, of whom 46% reported being in care as a child and of those 62% were in care at the age of 16

Comments received included the following, a full list can be found in the appendices;

- Family support workers
- Education, social services obviously required in education the parents
- Decent homes, jobs/work. Enough money for food , clothes , bills and rent
- Educate parents as early as possible i.e. when pregnancy is confirmed
- Identify problem children earlier. Take out of main stream education and deal with in a separate facility staffed by appropriately trained people.
- There is a growing case for special needs schools or sections within schools
- Drugs use is a reality in every civilisation. Children need protecting from abuse and learned behaviour – fostering and re-homing must be considered
- 148 children out of how many? Tackling the cycle of the home environment that grows young offenders, poor or no parenting skills. Parents and children held responsible for their actions jointly
- Lower threshold for removing children earlier into foster care, placements (foster care like) which accommodate parent and child with a competent parent/family to break the cycle and teach parenting skills which have been lost for generations
- Take children away from parents who aren't looking after them, foster homes or adoption
- Keys – early identification of children at risk / in need of support and resources to properly fund intervention
- Better education for first time mums and dads
- Instead of spending money and housing on people that can't support children financially by giving them more every time they have another child. Increase their benefits only if they agree not to have more children
- Fund appropriately nursery and family support services
- More adequate education in parenting in schools. Provide social support to families in a non-judgmental way
- Lack of parental control is prime reason. Foster care increase would help in some cases but this problem will not disappear easily
- It may be simplistic but education is failing many families. Basic skills of cooking, cleaning and child management are rarely taught. Budgets and savings are alien to many people
- Educating, more resources

### **Support people with mental health issues**

- Positive mental wellbeing decreased according to the number of custodial sentences prisoners had served.
- 2 in 3 women in prison suffer from depression
- Just under half of female prisoners have attempted suicide at some point
- Prevalence of mental health complications in young offenders may be as high as 95%
- Research suggests that custodial sentences may raise the risk of developing mental health issues, increasing implications for future desistance.

Comments received included the following, a full list can be found in the appendices;

- Keep in touch with people but encourage people's future plans and objectives
- More available support groups
- Find other relevant ways for punishment for offenders
- More local support, remove the stigma associated with this problem
- Whilst in prison work with them to improve their sense of wellbeing emphasizing that current lifestyle is wrong
- Re connect with nature – gardening classes – help both depression and for people to work together
- Proper funding of schools, early years, housing etc reduces the negative consequences of mental health
- Behavioural and mental health classes while in custody
- More free counselling. Either individual or group
- More prisons with mental health support increased
- More individual support of young persons
- Alternatives to custodial sentences and increased funding for relevant and professional support
- Teach them skills when in prison to improve mental health
- Support must be available however we must not lose sight that a custodial sentence can and must fit the crime regardless of how depressing it may be
- Custodial sentences are not appropriate in many cases and should be the last resort
- Mental health issues are concomitant with substance and alcohol abuse. Start the education process early
- More educational guidelines to be implemented
- Targeted training in prisons and more professional counselling. involve industry and job seeking
- A move from custodial to community based sentences would perhaps be beneficial. Not enough being done for mental health due to budget cuts, can't even get a GP appointment
- Basically the whole prison service needs reforming. Punishment is rarely the answer when young people offend. There are other causes for offences and drug misuse
- Recent surveys show that majority do not complete or even start community work sentences. I think that short custodial sentences should be the last resort but still necessary

### Community Safety and Justice Partnership – Possible Priorities for 2021-22

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 substance (alcohol and drug) misuse	78%
• Reduce violent crime	78%
• Reduce domestic abuse and protect women and girls	75%
• 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)	48%

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

	Low
• Improve safety in the home (including fire safety and accidents in the home)	34%
• Help people get involved in community safety and justice activities and projects to ensure their neighbourhoods are safe.	22%
• Educate people regarding speeding, drink driving and responsible parking	30%

### Community Safety and Justice – Possible Priorities for 2020-21

We know that all of the community safety issues listed below are important to you. Having limited resources we are asking you to rate the following by ticking 'High', 'Medium' or 'Low'.

	High	Medium	Low
Reduce substance (alcohol and drug) misuse	78%	22%	0%
Reduce violent crime	78%	17%	5%
Improve road safety to reduce the number of people hurt or killed on Midlothian's roads	34%	46%	20%
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%	24%	7%
Reduce dishonesty crimes (including housebreaking, vehicle crime and shoplifting)	48%	49%	3%
Educate people regarding speeding, drink driving and responsible parking	33%	36%	30%
Reduce domestic abuse and protect women and girls	75%	19%	6%
Improve safety in the home (including fire safety and accidents in the home)	20%	47%	34%
Help people get involved in community safety and justice activities and projects to ensure their neighbourhoods are safe.	30%	48%	22%



## 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. 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. 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. Here is some data about Midlothian's housing

- There will be 7000 Council properties in Midlothian by December 2020.
- 4001 people were placed on the Common Housing Register at of 31st March 2020. 829 housing applicants were assessed by Midlothian Council as homeless.
- Midlothian Council rents are the 15th lowest of 32 Councils.
- Over 94% of Council housing is compliant with current Scottish Housing Quality Standards.
- 462 people made applications as homeless in 2019/20, compared to 501 for 2017/18.
- Since 2015/16 there has been 10% reduction in the number of households seeking homeless assistance in Midlothian.
- Melville Housing Association and Castle Rock Edinvar are the two largest housing associations in Midlothian, owning 2,022 and 984 homes respectively. A number of housing providers cater specifically to those with particular needs, such as the elderly or disabled. These include Link Housing Association and Margaret Blackwood Housing Association.
- Between 2009 and 2019, private house prices in Midlothian have risen by 36%, compared to 32% in Edinburgh and 21% on average across Scotland.

## **Economic Development**

The Gross Value Added (GVA) figure is the difference between value of goods and services produced, and the cost of production. The total GVA for Midlothian and East Lothian in 2018 was £3,360 million. GVA per head of population for Midlothian and East Lothian was £17,047, and GVA per head of population for Edinburgh was £47,631, in 2018.

The top 3 employment sectors in Midlothian in 2018 were the Wholesale and retail trade; repair of motor vehicles and motorcycles (19.4%), Education (11.3%), Human Health and Social Work Activities (11.3%), and Manufacturing (9.7%). Forecast annual economic growth (for 2018-2028) is: Midlothian: 2.1%, Scotland: 1.6%, United Kingdom: 1.9% Total Employment growth projection (for 2018-2028) is that employment in Midlothian will increase by 9% or 3,200 jobs. The largest employment growth is forecast in: Arts, entertainment & recreation (19%), Admin & support services (19%), Construction (18%)

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

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 this 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 A720 bypass from other traffic
- An A701 Relief Road from Straiton to the Bush
- New A702 road link.
- Integrated Regional Employment and Skills (IRES) programme
- Shawfair Development Area
- Edinburgh Advanced Computing Facility
- Easter Bush Innovation Campus

These measures will speed up city bypass traffic flow at Sherrifhall roundabout and improve access to the Midlothian Science Zone (Easter Bush) where The University of Edinburgh has committed to building a Data Infrastructure Hub along with its Easter Bush Innovation Campus.

## **Climate Emergency (replacing Sustainable Growth – Environment)**

Burning of fossil fuels (coal, oil and gas) is changing the world's climate and endangering the world we live in. We are already seeing more extreme and less predictable weather. If we are to prevent catastrophic changes to our environment we have to change the way we live. The response to the Covid-19 pandemic has shown many people how we can work together to create a more healthy environment.

In December 2019 Midlothian Council declared a Climate Emergency requiring immediate action to reduce carbon emissions, including:

- making the Council's activities net-zero carbon by 2030;
- Achieving 100% clean energy across the Council's full range of functions by 2030;
- ensuring that all of the Council's strategic decisions, budgets and approaches to planning decisions are in line with a shift to zero carbon by 2030;
- supporting and working with all other relevant agencies towards making the entire area zero carbon within the same timescale.

The Community Planning Partnership has set up a Climate Emergency Group which seeks to identify actions intended to help partners achieve Net Zero emissions by 2030. This is an opportunity for communities and individuals to play a central role in making Midlothian a sustainable place. Currently, about a quarter of carbon emissions in Midlothian come from domestic gas boilers, while more than a third of emissions are from vehicles on the roads. As well as taking action to cut these and other sources of emissions, we will need to plant more trees and protect and restore peatlands and wetlands so that they are better able to capture and store carbon from the atmosphere. Community involvement and action is essential for achieving these aims and we welcome ideas from the community.

### **Sustainable Growth – Possible Priorities for 2021-22**

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 6 issues relating to sustainable growth that respondents stated were high are as follows;

	High
<i>Economic Growth</i>	
• Maximise opportunities for inward investment and funding to the area	72%
• Place based economic development approach to support the regeneration of Town Centres	58%
• Work with Midlothian employers to understand skills needs and provide local employment opportunities	70%
<i>Housing and Homelessness</i>	
• Deliver further affordable housing	54%
• Implement the rapid rehousing transition plan, which sets out a range of actions including ending the use of B&B accommodation for homeless people and reducing the time it takes to provide permanent accommodation	55%
<i>Climate Emergency</i>	
• Work with public and private housing providers to put in place sustainable alternatives to gas for heating houses.	40%

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

	Low
<ul style="list-style-type: none"> <li>Place the Climate Emergency and Midlothian Council's Climate Emergency Declaration at the centre of the replacement Midlothian Local Development Plan, and its development strategy and policies, so that the new plan facilitates promotion of carbon neutral development, mitigation of, and adaptation to, the effects of the Climate Emergency.</li> </ul>	33%
<ul style="list-style-type: none"> <li>Work with community groups and organisations to establish an annual Midlothian wide programme of awareness raising to inspire public Engagement towards individual and collective positive action and to Implement the programme with joined up support from the public, private and third sectors</li> </ul>	28%
<ul style="list-style-type: none"> <li>Work with partners to promote '20 minute neighbourhoods that are less reliant on commuting for work, education, shopping and services and where services are accessible by foot, wheel or public transport.</li> </ul>	27%

## Sustainable Growth – Possible Priorities for 2021-22

Having limited resources we are asking your opinion where should we direct them to make a difference. Bearing this in mind please let us know how important you think the following are, by ticking 'High', 'Medium' or 'Low'

	High	Medium	Low
<b>Housing and Homelessness</b>			
Deliver further affordable housing	54%	40%	6%
Implement the rapid rehousing transition plan, which sets out a range of actions including ending the use of B&B accommodation for homeless people and reducing the time it takes to provide permanent accommodation	55%	41%	3%
<b>Climate Emergency</b>			
Work with community groups and organisations to establish an annual Midlothian wide programme of awareness raising to inspire public engagement towards individual and collective positive action and to implement the programme with joined up support from the public, private and third sectors.	22%	50%	28%
Work with the Council's Energy Services Company and other partners to expand the use of district heating systems and renewable energy sources, including community-owned schemes.	32%	45%	23%
Work with public and private housing providers to put in place sustainable alternatives to gas for heating houses.	40%	38%	22%
Build on the actions in the Midlothian Local Biodiversity Action Plan 2019-2024 to ensure that Midlothian adopts a holistic approach to the environment, aimed at increasing biodiversity and reducing carbon emissions.	31%	45%	24%
Place the Climate Emergency and Midlothian Council's Climate Emergency Declaration at the centre of the replacement Midlothian Local Development Plan, and its development strategy and policies, so that the new plan facilitates promotion of carbon neutral development, mitigation of, and adaptation to, the effects of the Climate Emergency.	32%	35%	33%
Work with partners to promote '20 minute neighbourhoods' that are less reliant on commuting for work, education, shopping and services and where services are accessible by foot, wheel or public transport.	38%	35%	27%
<b>Economic Growth</b>			
Maximise opportunities for inward investment and funding to the area	72%	26%	2%
Place based economic development approach to support the regeneration of Town Centres	58%	35%	7%
Promote uptake of business support services in partnership with national agencies and local bodies	28%	57%	14%
Work with Midlothian employers to understand skills needs and provide local employment opportunities	70%	25%	4%
Work with Schools and Universities to maximise data potential to deliver effective services	43%	46%	11%

Other priorities that respondents said should be pursued included the following.

- To look more at the future and invest in future human resource for prosperity which is lacking here in Midlothian
- Encourage the use of electric cars and rechargeable points and railway from Penicuik to Edinburgh. Discourage the use of large cars/vehicles
- There should always be adequate planning for schools and health services when any plan (s) for housing are made
- Build more council houses for people to rent. Affordable housing is a misnomer and affordable varies depending which part of Midlothian
- Focus on maintaining and increasing green spaces for everybody's health and wellbeing. More emphasis on sustainable transport links e.g. properly safe, segregated cycle routes to Edinburgh
- Affordable housing for rent are essential – house purchase is beyond so many people's income
- Reinstate litter bins in public areas
- Include biodiversity as an element of sustainable growth plan
- These issues are not mutually exclusive
- Disappointed that Midlothian Council did not demand better community facilities from all the new house builders. Those parkland, recreation halls, shops and community hubs should have been provided as a condition for building permission. Huge lost opportunities
- I see recyclable / food waste being put into waste – there must be some way to stop this from happening. I say stick that – if there's no cost then there are always people who don't give a damn
- Involve children in tree planting projects – something they can take pride in throughout their lives, whilst being aware it is helping this environment
- There has to be a way in which climate emergency is centre. From that starting point everything else is interconnected and get dynamic links between e.g. economic growth, housing and biodiversity. O and sustainable transport. Any road improvement plan must have cycle paths included – proper cycle paths
- Improve infrastructure such as roads and town centre parking. Traffic jams in commuter routes is very bad for environment
- There have been many new houses built in Penicuik but we hardly have any shopping/ medical/ schooling facilities
- Reopen recycling plants that have closed since covid 19
- Build less private housing – stop building new sites – reuse and regenerate disused sites. Insist that tenants maintain property both inside and outside. tidy gardens, no rubbish lying around
- A renewal plan after covid

## 2.3 Improving Opportunities for People in Midlothian (IOM)

Background information about Improving Opportunities in Midlothian.

The long term aim of the IOM theme is to build resilient communities and reduce inequalities. In light of the strategic needs assessment, and as a result of the IOM Partnership undertaking a significant review of its strategic priorities, actions and associated performance measures during 2019/20, the following seven strategic priorities were agreed for 2020/21 and beyond:

1. The number of households in poverty across Midlothian is reduced
2. The number of children living in households in poverty is reduced
3. Employers in Midlothian deliver fair work practices and offer the living wage – this target has been deferred due to Covid19
4. Participation measures for young people over 16 increase
5. The qualification levels of people in Midlothian increases
6. The annual turnover of third sector organisations and volunteering rates increases
7. Health inequalities for people in Midlothian are reduced

Some relevant information from the Midlothian Profile includes:

- Qualification levels in the working age population indicate that Midlothian has :
  - a lower % of residents with SVQ level 4 or above (HNC upwards) than Scottish average -39.6% compared to 44.2%
  - a lower % of residents with SVQ level 3 or above at 57.7% compared to Scottish average of 59.7%
  - a lower % of residents with SVQ level 2 or above at 72.4% compared to Scottish average of 75%
- Lower wages have been a consistent feature for Midlothian residents since 2002. Midlothian residents earned on average £25.20 less than the Scottish average in 2019. Average gross weekly pay for full-time workers living in Midlothian is £ 552.50.
- Unemployment in Midlothian has decreased overall between 2008 and 2019, from 2,200 to 1,500 (3.2%), which is lower than the Scottish average figure of 3.9%. In 2019, the unemployment rate for 18-24 year olds has fallen to 4.4 %, just above the Scottish average of 4.3%. 93.9% of all 16-19 year olds are actively engaged, with 64 % participating in education, 27% in employment and 2.9% in other training and development.
- 5200 (9.4%) people of working age in 2019 were claiming an 'out of work benefit', of whom 4010 were claiming a disability/ long term illness related benefit, 490 job seekers allowance (a legacy benefit being replaced by Universal Credit), 630 lone parent benefit and 940 Carers Allowance.
- The jobs density figure, which represents the ratio of total jobs to population aged 16-64 is 0.63 in Midlothian lower than the Scottish average figure of 0.82. This means that there are fewer jobs available in Midlothian for residents than the Scottish average.
- The level of participation in positive post-school activity is higher than national averages, with 93.9% of 16-20 year olds being in work, training , further or higher education or volunteering in the past year
- Around 11,600 (21%) of people in Midlothian have work-limiting disabilities, which is in line with the Scottish average proportion.
- The proportion of school pupils entitled to free school meals is 37%, just below the Scottish average (38%).



- There are 9,900 people in Midlothian who are economically inactive (18.1%) which is 4.3 % lower than the Scottish average. 2,300 out of these 9,900 local people indicate they wish a job.

As a result of the COVID pandemic which began in February 2020, there are increasing levels of unemployment predicted within Midlothian amongst all age groups due to the closure of businesses, the end of the furlough scheme and the large scale economic downturn for sectors such as retail, arts and culture, tourism and hospitality. Increasing levels of child poverty and the number of households in poverty is a particular concern of the IOM at 25.2% (pre-Covid) and predicted to rise further. With the introduction of the Child Poverty Act (2017), and new reporting requirements the IOM now has to provide a coordinated approach to reduce the number of children living in poverty.

### Improving Opportunities for People in Midlothian – Possible Priorities for 2021-22

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;

- |  | <b>High</b> |
|--|-------------|
| • Reduce the number of children living in households in poverty  | 73%         |
| • Increase participation measures for young people aged 16-19<br>(This is the number of young people engaged in training, employment or education) | 71%         |
| • Reduce the number of households in poverty across Midlothian   | 66%         |
| • Increase the capacity and funding of third sector organisations and volunteering rates   | 38%         |
| • Increase qualifications gained by adults of working age  | 25%         |

### Improving Opportunities – Possible Priorities for 2021-22

Having limited resources we are asking your opinion as to what we should prioritise.

Please let us know how important each of the proposed prioritise are, by ticking 'High', 'Medium' or 'Low'.

	High	Medium	Low
Reduce the number of children living in households in poverty	73%	24%	3%
Increase participation measures for young people aged 16-19 (this is the number of young people engaged in training, employment or education)	71%	27%	2%
Reduce the number of households in poverty across Midlothian	66%	31%	3%
Reduce the number of households in poverty across Midlothian	64%	26%	10%
Reduce health inequalities for people in Midlothian	59%	33%	8%
Increase qualifications gained by adults of working age	38%	49%	13%
Increase the capacity and funding of third sector organisations and volunteering rates	25%	57%	17%



Other priorities that respondents said should be pursued included the following.

- Make sure that health provision is available to deal with rapidly increasing populations - GP practices are becoming a serious problem (i.e. lack of sufficient numbers)
- The above list is difficult as there is so little info: but looking at “qualifications” – we need more well trained tradesmen and women – academic awards are over rated for medium gifted people (>60% of our population)
- More apprenticeships and improve qualifications – University and FE colleges are not the only way to improve goals
- I can’t believe how little some council workers are paid. How can someone who cuts grass be paid the same amount as a person who digs graves/supports funeral services/ put life at risk dealing with grave sites and human remains?? Poverty but in a full time job
- There should be many more opportunities for further education using existing school and college facilities in the evenings – again seek volunteers – qualified and assessed of course
- Pedestrian only areas in towns to be implemented
- Improve access to health services
- People are not well equipped for current changing world where change is not being accepted for the main stream
- Improving the quality of jobs. It has been easy to get low quality work here and in Edinburgh. Need to attract high quality jobs and employers to raise standards of pay etc
- Place based economic support should be used to target areas of schools where there is low participation/qualifications gained. Thing is if the desire to learn is switched off before starting school or soon after – 11 years of free education is wasted. Nurturing is paramount

## 2.4 Getting it Right for Every Midlothian Child

Background information about Getting it Right for Every Midlothian Child:

It’s a legal duty to have a Children and Young People’s Service Plan. This has two parts, a three year strategy for 2020-2023, and an annual action plan updated each year.

Our 3 year strategy aims to ensure:

- More children and young people are safe, healthy and resilient.
- More children and young people receive timely and effective support when they need it, including those who are care experienced.
- Inequalities in learning are reduced.

The Care Inspectorate this year graded our services as GOOD in Leadership and Direction, Impact on Families, Impact on Children and Young People and improving the safety, wellbeing and life chances of vulnerable children and young people.

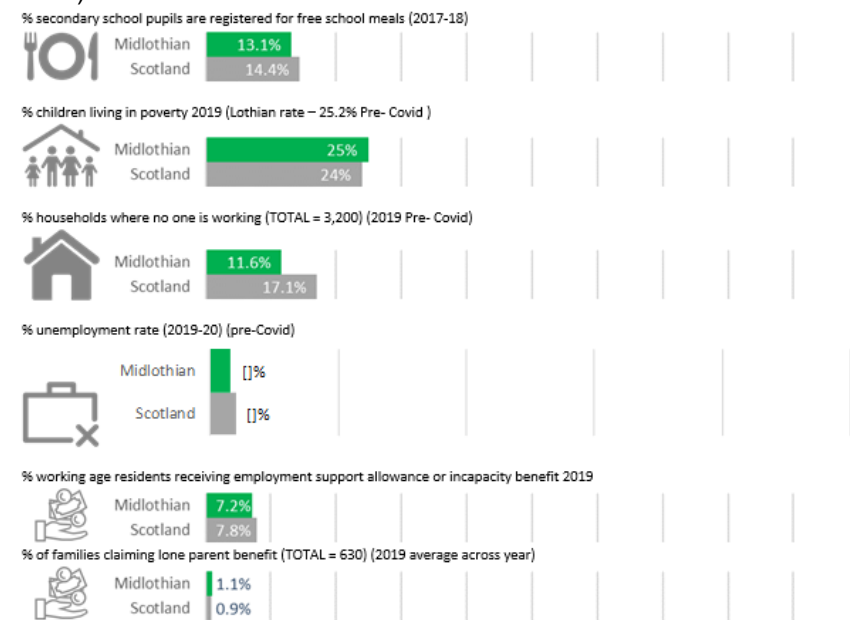
The United Nations Convention on the Rights of the Child (2020) aims to ensure:

- Children and Young people need to have an awareness of their rights and be given the opportunity to give their views and participate in decisions that affect them.
- Our Children and Young people are made aware of their rights and of independent advocacy and support.
- The development of a Children’s Rights and Participation approach by all public bodies.

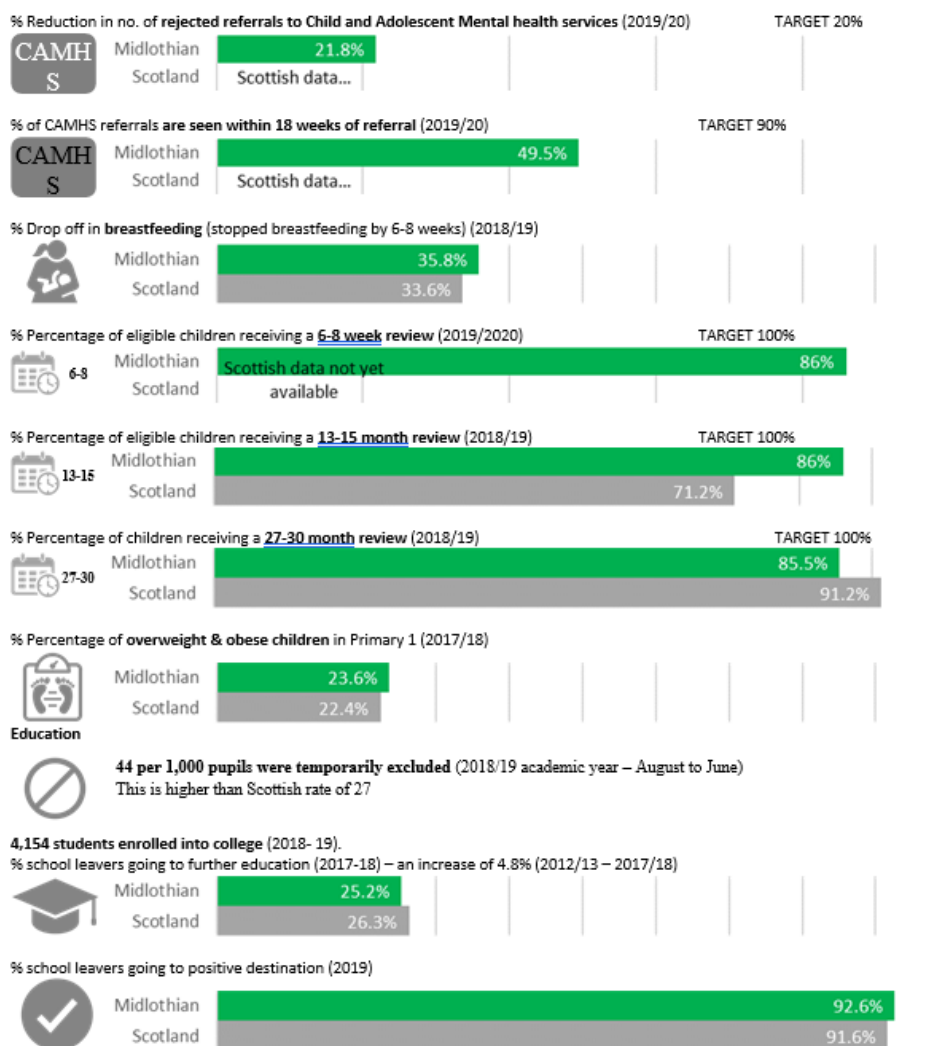
- These Conventions are being adopted in Scotland under the 'Rights of the Child (Incorporation) (Scotland) Bill' currently making its way through Parliament.

## Population

The number of households in Midlothian by 2029 is expected to be 45,300, this will be an increase of 19.9% from 37,766 in 2016 and will be the highest increase in Scotland (average rate of 8%)



On average full-time workers in Midlothian earned **£25.20 less than the Scottish average weekly wage of £577.70** (2019/20). Demand for the Scottish Welfare Fund increased by 20% in 2019 and has risen again as a result of COVID 19



## Crime affecting young people and children

### 4,586 - Police recorded crimes (2018/19)

There has been an overall decline in all crimes recorded in the past 10 years

**987 incidents of domestic abuse** were recorded by the Police (2018-19).

This has increased from 628 (2017)

**554 8-17-year olds were charged with a crime or offence** (2018-19)

This has decreased from 818 – a drop of 32% and a 3-year average of 834 (-34%).

**2.44 per 100 young people were charged with a crime** (2019-20)

This has decreased from 3.51 per 100 (2018-19).

**290 young people were victims of crime** (2019-20) – 1.46 per 100 young people.

This has decreased by 13% from 332 (2017-18)

### Getting it Right for Every Midlothian Child – Possible Priorities for 2021-22

Respondents were asked to consider a variety of Getting in 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 4 issues relating to getting it right for every Midlothian child that respondents stated were high are as follows;

	High
• Raise educational attainment of care experienced children and young people and reduce the number excluded from school	71%
• Improve access to services for children and young people needing support to maintain mental health and wellbeing	66%
• Reduce the impact of Covid-19 on child poverty across the county	64%
• Improve access to the specialist services some children and young people require to help them recover from trauma	61%

In contrast to this, the main issue that respondents low importance is as follows;

	Low
• Raise awareness about 'the Promise the 'national commitment to children and young people who have experienced care	16%

### Getting it Right for Every Midlothian Child – Possible Priorities for 2020-21

Having very limited resources and still dealing with COVID 19 we are asking your opinion where should we direct them to make a difference next year. Bearing this in mind please let us know how important you think the following are, by ticking 'High', 'Medium' or 'Low'

	High	Medium	Low
Raise educational attainment of care experienced children and young people and reduce the number excluded from school	71%	26%	2%
Improve access to services for children and young people needing support to maintain mental health and wellbeing	66%	30%	4%
Reduce the impact of Covid-19 on child poverty across the county	64%	26%	10%
Improve access to the specialist services some children and young people require to help them recover from trauma	61%	37%	2%
Improve outcomes and experiences for care experienced young people transitioning into adulthood	53%	44%	3%
Raise the attainment of children and young people with additional support needs in line with Scottish Government recommendations in "Support for learning: All our children and all their potential" 2020.	53%	42%	5%
Raise awareness about 'the Promise the 'national commitment to children and young people who have experienced care	38%	46%	16%

Other priorities that respondents said should be pursued included the following.

- Investigate thoroughly the reasons for exclusions temporary or otherwise
- Have specialist education for individuals but more emphasis on community arts and music, film and theatre access. Midlothian is a cultural wilderness
- People with no job are at home just now re Covid – get these people into learning
- How is Midlothian planning to meet these aims
- Change how poverty is defined and presented. Poverty is presented as a comparison with others – it is possible to have a low income but not be in poverty by managing aspects of life better
- Early intervention , may not show results in the short term but long term results may be reward in future
- There are too many people whose attitude is that the council will provide for them. More needs to be done to sort out the chancers from the real deserving cases
- Child poverty and a chaotic family life needs to be tackled to help children grow and thrive. Play is a key focus here. Understanding play/ good play/ outdoor play / play as a therapy etc. a really cost effective tool
- Absolute standards of attainment required with some opportunities (and personal responsibility for reaching levels of education) for all children regardless of background etc. Holiday clubs with catch up education available to those who need them
- Don't cause division by focusing on those in care as you risk alienating the other kids. Every kid needs support and other services. Put it all in from nursery school

## 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.

The Midlothian Health and Social Care Partnership is responsible for services that help adults live well and get support when they need it. This includes all community health and social care services for adults in Midlothian and some acute hospital-based services. Many voluntary sector and independent providers contribute to the objectives of the Health & Social Care Partnership. The delivery of Health and Social Care services has to change. Hospitals, GPs and Care at Home are struggling to manage the growing demand on their services. Change will take time and the Strategic Plan explains how the Partnership intends to improve services for people in Midlothian over the next 3 years (2019-2022). This will mean developing new ways of working and also some difficult decisions will have to be made about services we may need to reshape, reduce or no longer provide.

Our Vision Everyone in Midlothian will have the right advice, care and support; in the right place; at the right time to lead long and healthy lives

By working with individuals and local communities we will support people to achieve these outcomes:

-  People are able to look after and improve their own health and wellbeing and live in good health for longer.
-  People are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
-  People who use health and social care services have positive experiences of those services, and have their dignity respected.
-  Health and social care services contribute to reducing health inequalities.
-  People who work in health and social care services are engaged with their work and improve information, support, care and treatment they provide.
-  Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
-  Resources are used effectively and efficiently.
-  People who provide unpaid care are supported to look after their health and wellbeing.
-  People using health and social care services are safe from harm.

## Our Values

We will achieve this ambitious vision by changing the emphasis of our services, placing more importance and a greater proportion of our resources on our key values. Changes in the way in which health and care services are delivered take time.

## Our Challenges

### COVID-19 Pandemic

The pandemic has disrupted service provision. Many have had to be delivered in a different way. A number have been under increased pressure. We continue to deliver a level of service in a safe way while recognising the changing restrictions and the requirements for some people to access services differently. It is also important to recognise the challenge that unpaid carers have faced during the pandemic

### A growing and ageing population

There are 90,090 people in Midlothian; the second smallest local authority in mainland Scotland but the fastest growing. 12,000 new houses will be built in the next 3 years. This will pose challenges for all our health and social care services whilst also changing the face of some of the local communities. As people live for longer many more will be living at home with frailty and/or dementia and/or multiple health conditions. An increasing number of people live on their own, and for some this will bring a risk of isolation.

### Higher Rates of Long-Term Conditions

Managing long-term conditions is one of the biggest challenges facing health care services worldwide, with 60% of all deaths attributable to them. Midlothian has a higher incidence than the national prevalence of cancer, diabetes, depression, hypertension, Chronic Obstructive Pulmonary Disease (COPD) and asthma. Older people are more susceptible to developing long-term conditions.

People living in areas of multiple deprivation are at particular risk with, for example, a much greater likelihood of early death from heart failure. They are also likely to develop 2 or more conditions 10-15 years earlier than people living in affluent areas.

### **High rates of mental health needs**

Many mental health problems are preventable, and almost all are treatable, so people can either fully recover or manage their conditions successfully and live fulfilling healthy lives as far as possible. The incidence of mental health issues in Midlothian, while similar to the rest of Scotland, is a major concern for the Partnership.

### **Our services are under pressure**

People expect to receive high quality care services when these are needed whether as a result of age, disability or long term health conditions. Yet there are a number of pressures on our services.

- **Financial pressures.** There is no doubt that we need to do things differently: the traditional approach to delivering health and care services is no longer financially sustainable.
- **Workforce Pressures.** Recruitment and retention is a growing problem in health and social care. There is a shortage of GPs; a significant proportion of District Nurses are nearing retirement; while care at home providers find it difficult to attract and keep care at home workers despite measures such as the Living Wage and guaranteed hours. The aging population means these pressures will almost certainly increase. Family and other unpaid carers have always been vital to enabling older people and those with disability or longer term health conditions to manage their lives.
- **Acute hospitals.** We must reduce avoidable admissions and enable people to be discharged as quickly as possible.

**Inequality across Midlothian.** People affected by poverty and social disadvantage have poorer health and are more likely to die at a younger age than their neighbours with more resources. People also experience disadvantage through, gender, sexual orientation, social position, ethnic origin, including gypsy travellers, geography, age and disability.

**New Technology.** Technology can contribute to service redesign and support new care models. This approach is in line with the wider impact of new technology in our day to day lives. This can include technology that improves communication, for example with carers. Reports referred to above are available on the Midlothian Health and Social Care Integration webpage, [https://www.midlothian.gov.uk/info/1347/health\\_and\\_social\\_care/200/health\\_and\\_social\\_care\\_integration](https://www.midlothian.gov.uk/info/1347/health_and_social_care/200/health_and_social_care_integration)

Forty one percent of all respondents stated that it was very easy to contact their GP practice in the way they wanted. A further 35% said that it was fairly easy and 23% said that it was not easy.

**How easy is it to contact your GP practice in the way you want?**

Very easy	41%
Fairly easy	35%
Not easy	23%

The last time a respondent received treatment or advice at their GP, 66% stated that a doctor provided most of that advice. This is followed by practice or treatment room nurse (30%) and a pharmacist (3%).

**The last time you received treatment or advice at your GP who provided most of that advice?**

Doctor	66%
Practice or Treatment Room Nurse	30%
Pharmacist	3%
Physiotherapist	1%
Wellbeing Service practitioner	0%
Mental Health Nurse	0%
Someone else	0%

Respondents were asked to consider a variety of statements regarding their contact with a healthcare professional and to indicate how much they agree or disagree with each. The top 4 statements relating to their interaction with a healthcare professional that people agreed with were as follows;

	Strongly agree/ agree
• I understood the information I was given	97%
• I was listened to	92%
• I was given enough time	78%
• I was treated with compassion and understanding	83%

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

	Disagree/ Strongly disagree
• I knew the healthcare professional well	40%
• I was asked 'what matters to you?'	40%



**Thinking about that healthcare professional, how much do you agree or disagree with the following statements? Please tick one box on each line. If a statement is not applicable, please leave that line blank.**

	Strongly agree	Agree	Neither/ Nor	Disagree	Strongly disagree
I was listened to	49%	43%	6%	2%	0%
I was given enough time	43%	35%	13%	6%	2%
I was treated with compassion and understanding	48%	35%	14%	2%	0%
I was given the opportunity to involve the people that matter to me	14%	22%	47%	14%	3%
I understood the information I was given	53%	44%	4%	0%	0%
I was in control of my treatment and care	39%	36%	18%	4%	4%
I knew the healthcare professional well	13%	18%	29%	25%	15%
My treatment/care was well co-ordinated	30%	32%	26%	9%	3%
I was asked 'what matters to you?'	12%	15%	33%	23%	17%

Just under a fifth (19%) said that the last time they tried to get treatment or advice from a pharmacy, NHS 24 or an emergency service in the last 12 months, it was their own GP (when it was open) that they were treated or advised by. This is followed by pharmacist/chemist (16%) and A&E (3%).

Forty seven percent (47%) of respondents stated that they had not used these services.

**For this section, you should think about the last time you tried to get treatment or advice from a pharmacy, NHS 24 or an emergency service in the last 12 months. Which service did you end up being treated or advised by? Please tick one box only.**

My own GP (when it was open)	19%
Pharmacist/chemist	16%
A&E	3%
Phone advice only from NHS24	6%
Other	4%
Minor Injuries Unit	0%
Home visit from a GP or nurse	1%
Ambulance A&E crew	4%
Social care service	0%
Not used these services	47%

Of those people who state that they had used the services, 37% said that they contacted their GP practice and was referred to the service and a further 21% said that they looked on the GP practice website.

**Before contacting this service, which one of the following statements applied:**

I contacted my GP practice and was referred to this service	37%
I looked on the GP practice website	21%

I contacted my GP practice but it was closed	13%
I did not try to contact my GP practice	13%
I contacted my GP practice but I could not get advice or an appointment	11%
I can't remember	8%
I looked in NHS Inform website	6%

### Living Independently

Ninety seven percent of respondents said that their house is suitable to their needs at present. Eighty one percent (81%) of respondents anticipate that their house will be suitable for their needs in 5 years time, 7% said that it would not and 12% are unsure.

### Do you anticipate that your house will be suitable for your needs in 5 years time?

Yes- no reason to think otherwise	81%
No	7%
Unsure	12%

### Power of Attorney

Just under half (43%) of all respondents stated that they have granted someone Power of Attorney to make decisions for them should they be unable to make decisions for themselves.

### Have you granted anyone Power of Attorney to make decisions for you should you become unable to make decisions for yourself?

Yes	43%
No	57%

The reasons people gave for not having done so include;

- Laziness
- Not decided yet
- Only recently thought about it
- Not considered necessary at this stage
- Cost
- COVID
- Not of an age that I believe this is necessary
- Not got round to it
- Regularly review personal circumstances

Ways in which people could be encouraged to arrange Power of Attorney included

- More information
- If partner asked
- Ill health
- Lower cost, more affordable
- Any serious changes to health
- Struggling to cope

- Getting old

Just over a third of all respondents (34%) said that they are an Attorney for someone else.

## CARE, SUPPORT AND HELP WITH EVERYDAY LIVING

The main types of help or support people have had with everyday living were as follows;

- |   |    |
|---|----|
| ▪ Yes, help for me with personal and/or household tasks.          | 6% |
| ▪ Yes, help for me for activities outside my home.                | 4% |
| ▪ Yes, help for me with adaptations and/or equipment for my home. | 1% |
| ▪ Yes, help to look after someone else.                           | 5% |

The remaining 78% of respondents said that they had not had any help.

Respondents were asked to consider a variety of statements regarding their care, support and help services over the past 12 month and to indicate how much they agree or disagree with each. The top 3 statements relating to their interaction with a healthcare professional that people agreed with were as follows;

- |  | Strongly agree/<br>agree |
|--|--------------------------|
| ▪ I was aware of the help care and support options available to me | 37%                      |
| ▪ I felt safe  | 29%                      |
| ▪ I was supported to live as independently as possible             | 29%                      |

In contrast to this, the two main issues that respondents were most likely to disagree with are as follows;

- |  | Disagree/ Strongly<br>disagree |
|--|--------------------------------|
| ▪ I had a say in how my help, care or support was provided           | 21%                            |
| ▪ My health, support and care services seemed to be well coordinated | 19%                            |

**How much do you agree or disagree with the following about your care, support and help services over the past 12 months? Please exclude care and help you get from friends and family. Please tick one box on each line.**

	Strongly agree	Agree	Neither/ Nor	Disagree	Strongly disagree
I was aware of the help care and support options available to me	11%	26%	49%	12%	2%
I had a say in how my help, care or support was provided	8%	13%	58%	18%	3%
People took account of the things that mattered to me	10%	13%	67%	7%	3%
I was treated with compassion and understanding	6%	19%	71%	2%	2%
I felt safe	8%	21%	66%	4%	0%
I was supported to live as independently as possible	11%	18%	66%	2%	2%
My health, support and care services seemed to be well coordinated	9%	12%	60%	12%	7%
The help, care or support improved or maintained my quality of life	8%	14%	71%	7%	0%

#### **Care, support and help with everyday living**

Just over a quarter (27%) of all respondents stated that they “look after, or give any regular help or support, to family members, friends, neighbours or others because of either long-term physical / mental health / disability or problems related to old age”. The remaining 73% did not provide any care or support.

**Do you look after, or give any regular help or support, to family members, friends, neighbours or others because of either long-term physical / mental health / disability or problems related to old age? Please exclude any caring that is done as part of any paid employment or formal volunteering.**

Yes, up to 4 hours a week	12%
Yes, 35 - 49 hours a week	2%
Yes, 5 - 19 hours a week	8%
Yes, 50 or more hours a week	3%
Yes, 20 - 34 hours a week	3%
No	73%

The statement with the highest level of agreement regarding being a carer was “I have a good balance between caring and other things in my life”, 82% of respondents agreeing with this. In contrast, disagreement was highest with the following statements, “Caring has had a negative impact on my health and wellbeing” (35% disagree) and “Local services are well coordinated for the person(s) I look after”, 31% disagree with the statement.

**How much do you agree or disagree with the following about how you feel as a carer most of the time? Please tick one box on each line**

	Strongly agree	Agree	Neither/ Nor	Disagree	Strongly disagree
I have a good balance between caring and other things in my life	47%	35%	12%	6%	0%
Caring has had a negative impact on my health and wellbeing	17%	32%	16%	19%	16%
I have a say in services provided for the person(s) I look after	13%	27%	43%	17%	0%
Local services are well coordinated for the person(s) I look after	14%	30%	26%	18%	13%
I feel supported to continue caring	12%	20%	37%	11%	20%

Twenty one percent of respondents who provide care to someone said that they are aware of local services that offer support to carers in Midlothian and they are connected to a local service. A further 40% said they are aware of the services but are not connected to a local service and 39% said they were not aware.

**Are you aware of local services that offer support to carers in Midlothian?**

Yes - I am connected to a local service	21%
Yes – but I am not connected with a local service	40%
No	39%

Other comments people made regarding help, care or support for carers in Midlothian included;

- This service needs to be shared/ made available
- My wife is in a care home and couldn't be cared for better
- Many people struggle with caring duties, unaware that there is any support available to them
- As far as I know carers and support teams seem to do a good job

**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).

Overall, the majority of people 90%+ state that the prevention activities provided to Midlothian people is working for them. The one aspect with a slightly lower level of agreement was “Do you attend screening/immunisation”, 81% saying that they do.

### Is this working for you?

	Yes	No
Are you active for at least 30 minutes on most days?	96%	4%
Do you eat healthily?	97%	3%
Do you attend screening / immunisation?	81%	19%
Do you have good mental wellbeing?	92%	8%
Do you feel connected to friends & family?	91%	9%
Do you have enough money to stay healthy?	99%	1%

## 2.6 Additional Information

### 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.

- G.P. practices need to be “open” to public during COVID – we are told NHS is open but don’t see this in practice. Easy access to COVID testing
- Road upkeep
- Potholes in roads, building with no thought to football pitches and playing areas
- Abuse of alcohol is still a v. important issue particularly re domestic abuse
- Midlothian Council seem to focus on Bonnyrigg and Lasswade.
- Gorebridge needs speed control measures, play areas for kids, playing fields and supermarkets for the village
- Safe environmentally friendly transport links. There are lots of good “leisure” cycling and walking routes in Midlothian but not practical ones that can realistically be safely used for commuting. A death strip as they are known in Belgium along the side of a main road is not safe.
- The need for the gyms to remain open during COVID19. The closure resulted in weight gain – more junk food due to takeaways being open? Why? As well as poor mental health and poor structure
- General litter in streets, no litter bins
- Collecting prescriptions on line tend to be different and seem to have problems currently
- More about our environment and loss of green belt land to housing estates, which are not designed for Scottish Community living. The architectural disaster of current housing designs
- I would like some idea of what Midlothian Council policies are regarding questions asked e.g. how are they planning to reduce the number of children in poverty
- A section on how Midlothian Council performs would be interesting
- More help should be available for housework and garden that is affordable on low income

- With lot of new housing being built I assume that rates revenue will rise considerably. Let us hope that our roads repair dept. at MC allocate significant funds to this area which affects us all.
- Over population – too many houses being built – no green spaces left. Not addressing road congestion in local area
- Understandably all councils are struggling financially. With the building of so many large family homes in Midlothian there must be a fairly large proportion of the population who are comfortably well off. These should be more opportunities (especially from health service providers) for people to contribute financially to services they wish to access, therefore leaving more money to spend on those who are less fortunate financially

### 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.

- Too much waffle
- The questions were OK, but could have had a couple for people like me who only need occasional help from neighbours and family at present during restrictions
- Very good
- I wasn't able to give much constructive comments
- Useful
- Lot of reading, not for the elderly
- Important and educational
- Doesn't target the important issues in Gorebridge. If so maybe we could address the issues involved in this questionnaire
- Found it quite difficult to prioritise as many groups were closely inter related and would benefit from any improvement in other areas
- Suggestions to improve community justice issues very difficult but generally well thought through
- Section 1 needs simplifying. Q4 and Q5 not clear. Q11 does not follow from Q10 – need "not applicable"
- A bit long winded
- Informative and relevant
- Will anyone take notice, is it a waste of time
- It is very difficult to reply as I want to, due to the question phrasing and space given for comment
- Usually expect more questions. Would have liked to have seen further questions / opportunity to share suggestions following COVID19 lockdown. This lockdown surely resulted in a saving / funding that could be invested better within the community
- A bit long winded
- Informative
- Informative and easy to fill in
- Almost without exception issues covered in this questionnaire will require vast amounts of money to start to rectify – where from?
- Very good with wider variety of topics than before

- Too long
- Gives no details of how you plan to achieve any of the topics discussed
- Too many questions I am totally unfit to answer
- A bit complicated initially which may be off-putting , need to simplify
- It took much longer than 15 minutes to read through. Took 30 minutes to answer questions correctly. Some questions are for professionals to deal with

## **Appendices**

### **Open Ended Responses**

### **Example Questionnaire**



**MIDLOTHIAN COUNCIL**  
**SURVEY ON COMMUNITY PLANNING PRIORITIES 2021-22**  
**Citizens Panel Open Ended Responses**

**Community Safety and Justice Board**

**Support people to attend school and/or gain qualifications**

- Stop rewarding bad behaviour. Concentrate on the good majority that want to learn
- Send them to special schools
- Early intervention / increased funding for support especially literacy skills
- Compulsory education whilst in custody as part of their sentence
- Accept that fully inclusive education doesn't actually work and provide a specialist facility for children with extreme challenging behaviour / high ace tally/ ASB with small class sizes and high teacher student ratio
- In my opinion it is the home environment that needs to be understood and addressed
- More work experience , extended placements
- There is a growing case for special needs schools or sections within schools
- More help in school, non-teacher. Special areas of schools where they can get help
- Community participation and education
- Ensure a better home life , support parents, enough benefits
- Educate parents as early as possible i.e. when pregnancy is confirmed
- Set up special schools for offenders, prioritise the good kids
- Accept that formal schooling is not suited to all children due to lack of ability , but try to ensure these that benefit have classroom support from classroom assistants
- It should be a top priority to get dedicated teachers addressing pupils with special needs i.e. those who need social help
- Encourage better parenting
- Start national service again, stop child allowance for offenders
- It is important to establish why there is resistance to education / school environment. If it seems to have no relevance to their lives then method of communication and application require to be restructured , may involve family and community
- Further support at school and communication with families, not always easy

- More research is needed into reasons for offending then more individual teaching in a different environment , suggest retired, volunteer specialists
- A lot goes back to the home environment and lack of support. You can only get benefits if individuals responsive
- Find what alternative arrangements to school meet various needs. Are there persons who would gain from working from an earlier age, perhaps in apprenticeships
- Support youth work locally to work with schools
- This is a national problem our politicians can't solve. Throwing money at it isn't working
- Research and address the causes of such behaviour
- More specialized teachers. Take the emphasis off academia, more practical subjects, make school work interesting
- It is parent's responsibility to ensure their children attend school. Look at ways to contact parents to explain how not attending school is damaging their children
- Research the cause of offending
- Reduce class numbers. Provide more practical classes and training for living in this social hectic age
- Increase resources in education to help with children struggling at school. Investigate methods of improving numeracy and literacy
- Small groups of children being guided by a responsible adult who they can trust. Need to make others feel valued
- More support from social work when schools address problems with families
- Give people tools to engage more with children. Indeed parental training vital
- Explore ways to engage young offenders with learning NOT SCHOOL as school has already failed them. (not school fault as they do not have the staff)
- Early years intervention to prioritise school attendance
- More dedicated schools / support units in standard schools. Mental health nurses and support via social care workers , not SW
- The school environment is not useful for these people – they need special help to foster their interests , rather than spending time in normal class disrupting their class mates
- It's a problem
- Give schools more power to discipline
- More parents connecting with teachers
- I think these people slip through the system for one reason or another – this needs to be picked up at a very early stage during primary school
- Put more resources into education and increase partnerships between schools and colleges and business apprenticeships- encourage practical qualifications
- Better education system. Have government that is focused on education and not other things
- More funding
- Try to encourage no school attenders with vocational skills. Use local companies for sponsored apprenticeships
- Bad experience with authorities needs worked on in order for trust built and support accepted
- Identify potential young offenders early
- Provide something tangible for achievement

- Encourage attendance at school or other facility to gain qualifications , offer apprenticeships
- Have a group dedicated to checking up on those who miss school
- Educate parents so if they can't raise them properly don't have kids
- Expand support for leaning service in primary school and secondary schools- increase teaching and support staff

### **Support people to reduce/manage drug use**

- Increased funding for supporting children living with parents with drug abuse issues. Expansion of services and support
- Put more effort removing drugs from environment
- More peer support from people that have been in their situation. First offender prisons to stop them learning from more experienced offenders
- Funding drug education programmes
- Consider whether the decriminalisation of soft drugs is the way forward. Enhance attempts to wean from drug use in a non-penal way
- The real need is to get to the suppliers. Prison in itself will not solve problems. Need to get to the organised criminals and the dealers
- Again, more research as to why drug use is prevalent, the reasons behind the addiction and help centres to control the use of the drugs
- We don't have the resources to keep prisoners in longer to reeducate them. I feel sometimes the court system needs sorted
- No amount of external intervention will be successful in reducing this problem. Success then is an individual's desire to be free of addiction. More work needs to be done in establishing the source of addiction and seeking means of dealing with it
- Catch the suppliers and give long sentence , again national service
- Target drug suppliers, teach young people the pitfalls of drug use
- More teaching in schools re the evils of drug use. But putting a positive voice into the move to legalise drugs would be a start
- To have drug use more closely monitored e.g. drug rooms. This is a part of re-educating drug users in an informal way
- Remove all children from drug induced parents
- Tougher restrictions for those who supply drugs e.g. loss of tenancy, suspension of benefits
- Education more policing, social services, tougher punishments as existing ones are obviously not working
- This is a national problem our politicians can't solve. Throwing money at it isn't working
- Stop there source of drugs
- Drugs use is a reality in every civilisation. Children need protecting from abuse and learned behaviour – fostering and re-homing must be considered
- Education of the effects of substance misuse. Early intervention by social services. Tougher sentences to those that re-offend whilst under the influence of drugs or alcohol
- Grass roots work – support young people from an early stage so they aren't motivated to get into drugs. Harsher stance on completely removing children of drug abusing parents into foster care to break the cycle and give those children a chance

- Legalise drugs
- Drug clinics where drug users can take drugs safely, legalise cannabis
- Try to stop the availability of drugs in prison
- Educate children from a young age of the horrors of drugs
- Cut off supply, set up drug drop in centres, get to kids early, special helpline to pass on info anonymously
- Increase employment and more positive life experiences and alternative to addiction
- Legalise drug assistance like the guy in Glasgow giving drug takers a safe place to dose up. Target the drug sellers and their network. These need to be cut
- Effective treatment to get parents off drugs. Work schemes as reward for progress
- Give more support for users to fight their drug habits
- This is just sad. I am not sure what can be done except supporting these poor people until they can see life is better without drugs
- Increase resources for drug education
- Target and effective sentencing for drugs gangs. Give youngsters hope for the future
- Address the underlying factors leading to drug use
- Employ former drug addicts to visit schools to explain the negative effects of drug usage
- More support in early years. This needs professional input. Early intervention and making school interesting and work enjoyable – “easy to say”
- Address underlying factors that lead to drug use such as poverty and mental health
- Get rid of this government. Better support by local council and education at schools on misuse
- Not qualified to answer
- Early education as to why not to take drugs might be helpful – perhaps people who have abused drugs could attend schools and educate as to why they shouldn't start using drugs in the first place
- More local policing
- Stop the access to drugs i.e. get more Police on to arresting drug suppliers (big dealers)
- Tougher sentences for those using or supplying drugs
- Intense rehabilitation
- Identify and deal with drug suppliers
- More support from GP's when help is sought and freely available support groups to really help get to the root of the problem
- Incarcerate women only when absolutely necessary. Instead provide community based support services to give practical, social and emotional support to reduce re-offending. Where there are children involved, include them

### **Work with young people to reduce early anti-social behaviour**

- There is a growing case for special needs schools or sections within schools
- This is a national problem our politicians can't solve. Throwing money at it isn't working
- More things to do – organised
- Stop selling alcohol only in specific shops, not supermarkets or small shops
- Key – early identification of children at risk and timely support network. Expansion of mentoring / befriending – good role models
- More facilities for youngsters , ban selling alcohol to under 20 year olds
- Legalise drugs, need to understand why taking so much alcohol
- A much heavier focus on funding and providing activities for young people as a baseline like the Icelandic model. All schools should be offering on site extracurricular activities after school as a matter of course and this shouldn't be the exclusive reserve of private schools
- Reduce the number of outlets that sell alcohol. Education for earlier years children as they go into secondary education
- Work with shop re alcohol sales, more Police
- Education , social services obviously required in education the parents
- Make more premises accessible and affordable for young people
- More prisons
- Teenagers will always have behavioural problems of some kind. Alcohol restrictions need good enforcement and the deterrent of higher prices
- More needs doing to put young people off drink over use and drugs. Similar to anti-smoking education which seems to be working for some
- Teach young people the pitfalls of over drinking socially, mentally and health
- Night curfew, it's not the alcohol that the problem, it's the shops who supply. Start a system like the States
- Providing young people with more physical activities and opportunities to develop interests leaving less time to indulge in anti-social behaviour
- Educate at school primary , however its learned behaviours from parents / guardians
- There is a feeling of despair and hopelessness where there is no work or practical activities and sports facilities unavailable. Boredom and peer pressure take over. As ever more help is needed
- Agree with the first statement but difficult to get any results if people only engage in anti-social peer groups
- Enhance guidance in a non-penal way. Attempt personal mentoring, perhaps with volunteers. Clear up litter etc. to give an environment to take pride in
- Joint youth work services with schools
- Mentors for high risk children
- Employ former drug addicts to visit schools to explain the negative effects of drug usage
- Police officers walking the beat
- More community involvement , youth activities other than sport, safe places for socialising
- Early engagement with potential anti-social young people , don't wait until the die is cast
- Lead by example, kids see through platitudes. Be honest

- Youth opportunities/ activities. To provide an alternative outlet (not easy in current situation)
- We need to make the young people understand the value of life. Trying to show how to be happy and glad of living and there is a future for everyone
- I believe parents have to take more responsibility for their own children rather than rely on others to discipline them
- Need all family support. Community programmes where progress made, i.e. help from others (just showing an interest in their futures would help)
- I have no idea how you stop this. Apart from getting the message across to parents to not buy alcohol for their kids. The kids get hold of the alcohol anyway. Personally I would go in hard with the damage alcohol does and reduce time of alcohol sales etc.
- Attitudes to alcohol are deep seated in Scottish culture. It is glamorized and makes money for many
- More drop in centres providing useful stuff to do. Crack down on underage sales of alcohol.
- If you catch someone under the age of 16 committing a crime, getting drunk, being under the influence of drugs you should fine their parents – that would soon sort it out
- Hard to know what more retailers can do to stop the sale of alcohol to minors
- More local help from Police and community workers
- Early drug/alcohol misuse needs to be detected and a programme drawn up for young people to seek help and given support – other factors need to be identified as to why they use
- Take measures to strengthen parent counselling
- Education and support into positive destination
- Social services woefully underfunded – families struggling and vulnerable children suffering- needs seriously addressed
- Open more young people clubs
- Use high profile ex-offenders to explain their story and why they should not go down that road. Also use victims of anti-social behaviour to explain their story
- Tougher limits put on offenders
- Support charities (youth groups, sports groups etc.) to provide safe spaces indoors and outdoors to allow young people to meet a wider range of other people. Financial support plus accommodation needed

### **Help to improve family life and parenting skills**

- Family support workers
- Education , social services obviously required in education the parents
- Decent homes, jobs/work. Enough money for food , clothes , bills and rent
- Educate parents as early as possible i.e. when pregnancy is confirmed
- Identify problem children earlier. Take out of main stream education and deal with in a separate facility staffed by appropriately trained people.
- There is a growing case for special needs schools or sections within schools
- Drugs use is a reality in every civilisation. Children need protecting from abuse and learned behaviour – fostering and re-homing must be considered
- 148 children out of how many? Tackling the cycle of the home environment that grows young offenders, poor or no parenting skills. Parents and children held responsible for their actions jointly
- Lower threshold for removing children earlier into foster care , placements (foster care like) which accommodate parent and child with a competent parent/family to break the cycle and teach parenting skills which have been lost for generations
- Take children away from parents who aren't looking after them, foster homes or adoption
- Keys – early identification of children at risk / in need of support and resources to properly fund intervention
- Better education for first time mums and dads
- Instead of spending money and housing on people that cant support children financially by giving them more every time they have another child. Increase their benefits only if they agree not to have more children
- Fund appropriately nursery and family support services
- More adequate education in parenting in schools. Provide social support to families in a nonjudgmental way
- Lack of parental control is prime reason. Foster care increase would help in some cases but this problem will not disappear easily
- It may be simplistic but education is failing many families. Basic skills of cooking, cleaning and child management are rarely taught. Budgets and savings are alien to many people
- Educating , more resources
- Rather than pursue the present system of penal sentences we should be developing more community based remedial means of counselling for offences
- More support officers required to monitor relationships. School visits by trained professionals to try and identify risk
- Parenting of young people requires to be addressed
- More resources into social work department
- Accommodate children away from those criminal families
- Train care home staff
- If parents are not looking after their children the children need to be looked after elsewhere and their parents denied access to them. The children require to live safely and happily without the worry of being “sent home” again

- Increase interest in ante natal classes. Provide incentive to attend – vouchers. Also for attending clinic appointments. We basically have to bribe and encourage families to become invested in their kids – will save so much in the long term
- More contraception education, early years intervention
- Do more life skills in school and cut some of the knowledge based content of the outdated exam system. Lifeskills to include cooking, growing food, managing a budget, fixing things. Build the learning into that e.g. Science / Maths /English in cooking, culture etc.
- Parental education, carrot and stick approach and ensure parents buy in. If being in care is so unsuccessful it needs replacing with something useful
- Need to listen to schools when they raise concerns about children's welfare and help support the families
- With generations of non-workers lack of understanding of family values, we need to show everyone what family should mean. Pulling together, loving each other
- Increase resources for educating parents to be. Encourage volunteer mentors to be involved in providing good examples
- Lack of ambition and direction mean people / generations need purpose, aims and jobs to give structure to their world. This and hope gives people things to achieve
- Improve support to parents, eliminate poverty
- Encourage more fostering and adoption. Involving more people to support groups etc.
- Eliminate poverty, education for parents
- Educate the use of drug harm in schools
- Stop families falling through the social net
- Parents and police too lenient towards children
- Put resources into social work – especially children and families
- If the parents can be identified as having a problem before they have children, perhaps they could be given the help required before they have children at all. Once they are pregnant it's a bit late perhaps , but if tested for drugs at that stage , help may be given
- Stop parents having the kids in the first place. The people you describe are hopeless cases anyway
- Training, teaching
- Introduce parenting classes. There should be a form of recognition for success and further help for those that did not progress
- More exploration as to how care facilities actually deal with children in their care. Teach about family and how they can shape their own future
- Increase number of social services educational support staff to identify vulnerable children early and offer practical economic, social, emotional support to parents possibly including kinship care.



### **Support people with mental health issues**

- Keep in touch with people but encourage peoples future plans and objectives
- More available support groups
- Find other relevant ways for punishment for offenders
- More local support , remove the stigma associated with this problem
- Whilst in prison work with them to improve their sense of wellbeing emphasizing that current lifestyle is wrong
- Re connect with nature – gardening classes – help both depression and for people to work together
- Proper funding of schools , early years , housing etc. reduces the negative consequences of mental health
- Behavioural and mental health classes while in custody
- More free counselling. Either individual or group
- More prisons with mental health support increased
- More individual support of young persons
- Alternatives to custodial sentences and increased funding for relevant and professional support
- Teach them skills when in prison to improve mental health
- Support must be available however we must not lose sight that a custodial sentence can and must fit the crime regardless of how depressing it may be
- Custodial sentences are not appropriate in many cases and should be the last resort
- Mental health issues are concomital with substance and alcohol abuse. Start the education process early
- More educational guidelines to be implemented
- Targeted training in prisons and more professional counselling. involve industry and job seeking
- A more from custodial to community based sentences would perhaps be beneficial
- Not enough being done for mental health due to budget cuts , can't even get a GP appointment
- Basically the whole prison service needs reforming. Punishment is rarely the answer when young people offend. There are other causes for offences and drug misuse
- Recent surveys show that majority to not complete or even start community work sentences. I think that short custodial sentences should be the last resort but still necessary
- Ensure custodial sentences are used only where appropriate. Have the prevention of re-offending as time without allowing unacceptable behaviour to go unpunished
- Make it easier for people to access mental health resources. Reduce waiting time to see specialist
- More professional counselling
- Do not imprison those with mental health issues unless they are a danger to others
- Mental health more accessible for all
- Improve access to mental health services
- More counselling and community intervention. Training to spot signs, teachers, parents, peers
- Full employment. Eliminate effects of poverty

- No idea, people shouldn't break the law then they wouldn't go to prison
- Investigate alternatives to custodial sentences
- Research is required before the person gets to a desperate situation. Community groups of building friendships with others
- Quicker referral system needs to be put in place. Too long a waiting list for mental health referrals
- Education so prisoners understand what will make them feel better. i.e. set achievable goals and encouragement them to feel better about themselves
- Get people outside in blue and green spaces – walking for ½ hr – provide circular walks that interlink so folk can extend if they want to
- Less custodial sentences, mandatory group sessions like for drugs/alcohol. Buddying – pair them up and maybe find former offenders to help them move forward
- Make people do voluntary work to see they are better off than some
- Have better support in prisons and when they are released
- Not qualified to comment
- People with mental health issues may well behave in a way that some people see as criminal. The police need to be able to assess people and observe whether mental health is an issue and deal with accordingly. Not automatically go through court
- Again an area which is woefully underfunded and not enough support in place. Perhaps in house availability at schools would help
- Improve mental health treatment
- Use community payback schemes. But do not make it a soft option , must be taken seriously
- Make sure they do have depression and are not just using it as an excuse
- Why are you asking normal public these questions, your top people in this profession should be stepping up
- Incarcerate women and young people only when absolutely necessary. Increase community mental health services

### Priorities for sustainable growth – other

- To look more at the future and invest in future human resource for prosperity which is lacking here in Midlothian
- Encourage the use of electric cars and rechargeable points and railway from Penicuik to Edinburgh. Discourage the use of large cars/vehicles
- There should always be adequate planning for schools and health services when any plan (s) for housing are made
- Build more council houses for people to rent. Affordable housing is a misnomer and affordable varies depending which part of Midlothian
- Focus on maintaining and increasing green spaces for everybody's health and wellbeing. More emphasis on sustainable transport links e.g. properly safe, segregated cycle routes to Edinburgh
- Affordable housing for rent are essential – house purchase is beyond so many peoples income
- Reinstate litter bins in public areas
- Include biodiversity as an element of sustainable growth plan
- These issues are not mutually exclusive
- Disappointed that Midlothian Council did not demand better community facilities from all the new house builders. Those parkland, recreation halls, shops and community hubs should have been provided as a condition for building permission. huge lost opportunities
- I see recyclable / food waste being put into waste – there must be some way to stop this from happening. I say stick to it – if there's no cost then there are always people who don't give a damn
- Involve children in tree planting projects – something they can take pride in throughout their lives , whilst being aware it is helping this environment
- There has to be a way in which climate emergency is centre. From that starting point everything else is interconnected and get dynamic links between e.g. economic growth, housing and biodiversity. Oh and sustainable transport. Any road improvement plan must have cycle paths included – proper cycle paths
- Improve infrastructure such as roads and town centre parking. Traffic jams in commuter routes is very bad for environment
- There have been many new houses built in Penicuik but we hardly have any shopping/ medical/ schooling facilities
- Reopen recycling plants that have closed since covid 19
- Build less private housing – stop building new sites – reuse and regenerate disused sites. Insist that tenants maintain property both inside and outside. tidy gardens , no rubbish lying around
- A renewal plan after covid

### **Priorities for Improving Opportunities for people in Midlothian – other**

- Make sure that health provision is available to deal with rapidly increasing populations - GP practices are becoming a serious problem (i.e. lack of sufficient numbers)
- The above list is difficult as there is so little info: but looking at “qualifications” – we need more well trained tradesmen and women – academic awards are over rated for medium gifted people (>60% of our population)
- More apprenticeships and improve qualifications – University and FE colleges are not the only way to improve goals
- I can’t believe how little some council workers are paid. How can someone who cuts grass be paid the same amount as a person who digs graves/supports funeral services/ put life at risk dealing with grave sites and human remains?? Poverty but in a full time job
- There should be many more opportunities for further education using existing school and college facilities in the evenings – again seek volunteers – qualified and assessed of course
- Pedestrian only areas in towns to be implemented
- Improve access to health services
- People are not well equipped for current changing world where change is not being accepted for the main stream
- Improving the quality of jobs. It has been easy to get low quality work here and in Edinburgh. Need to attract high quality jobs and employers to raise standards of pay etc
- Place based economic support should be used to target areas of schools where there is low participation/qualifications gained. Thing is if the desire to learn is switched off before starting school or soon after – 11 years of free education is wasted. Nurturing is paramount
- Not everyone is academic. There should be earlier opportunities (alternatives to school) where young people can learn useful skills therefore becoming engaged with opportunities to convert these skills into future employment
- It’s all about the kids, spend limited resources on ensuring they have decent care, shelter, food etc. in fact just look at the human rights of a child – any intervention after that will be so much more expensive for all
- Council and business encouraged to increase the living wage
- Lack of funding

### **Getting it right for every Midlothian child – other**

- Investigate thoroughly the reasons for exclusions temporary or otherwise
- Have specialist education for individuals but more emphasis on community arts and music, film and theatre access. Midlothian is a cultural wilderness
- People with no job are at home just now re covid – get these people into learning
- How is Midlothian planning to meet these aims
- Change how poverty is defined and presented. Poverty is presented as a comparison with others – it is possible to have a low income but not be in poverty by managing aspects of life better
- Early intervention , may not show results in the short term but long term results may be reward in future
- There are too many people whose attitude is that the council will provide for them. More needs to be done to sort out the chancers from the real deserving cases
- Child poverty and a chaotic family life needs to be tackled to help children grow and thrive. Play is a key focus here. Understanding play/ good play/ outdoor play / play as a therapy etc. a really cost effective tool
- Absolute standards of attainment required with some opportunities (and personal responsibility for reaching levels of education) for all children regardless of background etc. Holiday clubs with catch up education available to those who need them
- Don't cause division by focusing on those in care as you risk alienating the other kids. Every kid needs support and other services. Put it all in from nursery school
- Young men and women who work have no drug habit or have children are least chance of getting council housing. I don't understand this

### **Power of attorney**

#### **If no why**

- Laziness
- No need to
- Only 43
- Not decided yet
- Only recently thought about it
- Thinking about it at the moment
- Not considered necessary at this stage
- Just haven't got round to organising it
- Cost
- No need
- Not necessary yet
- Not got round to it
- Cost
- Never got round to it
- COVID
- No need at the moment
- No cause for concern
- Have not got round to it
- Not necessary
- I know I should

- Not got round to it
- My husband and I are presently both well and able
- It dies when you do
- Can do so later
- Not of an age that I believe this is necessary
- Not yet but going to do it
- No need at the moment
- Not applicable at present
- Not got round to it
- Regularly review personal circumstances

### **Power of attorney**

#### **What would encourage you?**

- More information
- If partner asked
- Ill health
- Cheaper
- Failing health
- Ill health
- Lower cost, more affordable
- Low cost
- Terminal illness
- Any serious changes to health
- Struggling to cope
- I just need to bite the bullet and do it
- Nothing
- If I were left on my own
- Nothing
- Free service
- Ill health
- Getting old
- being sensible is all it takes to organise
- Regularly review personal circumstances

### **Q15 Other comments about help, care or support for carers**

- This service needs to be shared/ made available
- My wife is in a care home and couldn't be cared for better
- Many people struggle with caring duties, unaware that there is any support available to them
- As far as I know carers and support teams seem to do a good job

**Any issues you feel should be a high priority that are not covered in the questionnaire**

- G.P. practices need to be “open” to public during COVID – we are told NHS is open but don’t see this in practice. Easy access to COVID testing
- Road up keep
- Potholes in roads, building with no thought to football pitches and playing areas
- Abuse of alcohol is still a v. important issue particularly re domestic abuse
- Midlothian Council seem to focus on Bonnyrigg and Lasswade. Gorebridge needs speed control measures, play areas for kids, [laying fields and supermarkets for the village
- Safe environmentally friendly transport links. There are lots of good “leisure” cycling and walking routes in Midlothian but not practical ones that can realistically be safely used for commuting. A death strip as they are known in Belgium along the side of a main road is not safe.
- The need for the gyms to remain open during COVID19. The closure resulted in weight gain – more junk food due to takeaways being open? Why? As well as poor mental health and poor structure
- General litter in streets, no litter bins
- Collecting prescriptions on line tend to be different and seem to have problems currently
- More about our environment and loss of green belt land to housing estates, which are not designed for Scottish Community living. The architectural disaster of current housing designs
- I would like some idea of what Midlothian Council policies are regarding questions asked e.g. how are they planning to reduce the number of children in poverty
- A section on how Midlothian Council performs would be interesting
- More help should be available for housework and garden that is affordable on low income
- With lot of new housing being built I assume that rates revenue will rise considerably. Let us hope that our roads repair dept. at MC allocate significant funds to this area which affects us all.
- Over population – too many houses being built – no green spaces left. Not addressing road congestion in local area
- Understandably all council are struggling financially. With the building of so many large family homes in Midlothian there must be a fairly large proportion of the population who are comfortably well off. These should be more opportunities (especially from health service providers) for people to contribute financially to services they wish to access, therefore leaving more money to spend on those who are less fortunate financially
- Q16 is related to 2 – climate emergency. Think about proper bike lanes, inter connecting walks through town and countryside. Play areas etc. all cost effective ways of improving health and mental wellbeing as well as dealing with climate. For the climate emergency, stop siloing departments, they need to work together
- Need for extended presence of traffic wardens in Dalkeith as soon as TW finish for the day the majority of regs is ignored. Its fine for some but others are obstructive/dangerous
- I do not use a computer so I am not updated on anything I am entitled to
- GP services are currently operating at below safety level, even before covid arrived. To improve this must be a national priority
- Parks/garden areas need to be tended

- Dalkeith medical practice is very difficult to contact. To get basic appointments etc. Had a big problem getting basic flu jab. God knows what will happen when the covid cure/vaccination is available. It will be impossible to contact practice I imagine

**Please tell us what you thought of the questionnaire**

- Too much waffle
- The questions were OK, but could have had a couple for people like me who only need occasional help from neighbours and family at present during restrictions
- Very good
- I wasn't able to give much constructive comments
- Useful
- Lot of reading, not for the elderly
- Important and educational
- Doesn't target the important issues in Gorebridge. If so maybe we could address the issues involved in this questionnaire
- Found it quite difficult to prioritise as many groups were closely inter related and would benefit from any improvement in other areas
- Suggestions to imp[rove community justice issues very difficult but generally well thought through
- Section 1 needs simplifying. Q4 and Q5 not clear.
- Q11 does not follow from Q10 – need “not applicable”
- A bit long winded
- Informative and relevant
- Will anyone take notice, is it a waste of time
- It is very difficult to reply as I want to, due to the question phrasing as space given for comment
- Usually expect more questions. Would have liked to have seen further questions / opportunity to share suggestions following COVID19 lockdown. This lockdown surely resulted in a saving / funding that could be invested better within the community
- A bit long winded
- Informative
- Informative and easy to fill in
- Almost without exception issues covered in this questionnaire will require vast amounts of money to start to rectify – where from?
- Very good with wider variety of topics than before
- Too long
- Gives no details of how you plan to achieve any of the topics discussed
- Too many questions I am totally unfit to answer
- A bit complicated initially which may be off-putting , need to simplify
- It took much longer than 15 minutes to read through. Took 30 minutes to answer questions correctly. Some questions are for professionals to deal with
- Too much in the way of long answers required. If no-one has a problem then you are not covering all social groups. Some confusing questions – no sensible options
- Very detailed, informative too



- Very informative, I was delighted to see that Midlothian's statistics in many departments were better than I imagined they might be
- Good thoughtful questions and statements
- We need more support for older people who can't use a computer
- Very informative, thank you
- Good
- Very interested to find out how we live
- Very well explained and easy to follow, I hope I did enough to make it worthwhile
- Quite difficult to read in places
- Interesting and informative, difficult decisions to be made
- Thought provoking
- Probably trying to cover too many items
- Too much written word
- I thought it was Ok, easy to read
- I find the statistics/information presented as part of the survey highly informative. The questionnaire is thought provoking and challenging but worth engaging with