

## **FIRRHILL HEALTH & SOCIAL CARE CENTRE PROJECT GROUP**

### **Notes of Meeting held on Wednesday 23<sup>rd</sup> January 2013**

#### **Present**

Maggie Gray (EHP)	Heather Levy
Steven Whitton (EHP)	Campbell Kerr (NHSIL)
Avis McFarlane (Craiglockhart Practice)	James Cowan (Firrhill Practice)
Lynne Keane (EHP)	Claire Flanagan (NHSIL)

#### **Apologies**

Aileen Kenny (EHP)	Ruth Law (Craiglockhart Practice)
Colin Briggs (EHP)	

#### **Action**

#### **1. Notes from Previous Meeting on 12<sup>th</sup> December 2012**

The notes were approved.

#### **2. Matters Arising**

##### **(i) Update on Unitary Charge**

No further information had emerged on this matter but CK hoped that contacts in NHS Grampian would be able to provide more details.

#### **3. Accommodation Update**

##### **(i) Edinburgh Council**

The Council had confirmed its intention to take up 10 workstations in the Centre but at this stage it had not determined which teams would access this facility which was likely to be used for touchdown purposes rather than a permanent staff base.

##### **(ii) Physiotherapy**

EB had reviewed his earlier decision not to locate physio services in the building, following the possibility of new funding streams. He had stipulated that if physio was to be delivered in the building a footprint of 100 sq m based on the Mountcastle suite should be considered as the minimum requirement.

##### **(iii) OPMH Services**

MG and SW had visited the day service in the REH for older persons with mental health problems.

There was still some uncertainty on the exact nature of

the accommodation desired by the OPMH services, in particular whether the sector team and the new EBSS should have office accommodation in the building alongside the day service.

It was noted that EBSS would perform a city wide role focussing in care homes.

#### **4. Project Plan**

##### **(i) Programme**

The latest indications were that the project would be given a green light by the SFT Key Stage Review.

The Blackburn Project should be approved by West Lothian Council by the end of January so that all the bundled projects could then proceed through a New Project request to Hubco.

##### **(ii) Appointment of Design Team**

A list of the architectural firms on the Hubco shortlist was tabled. Whilst it was anticipated that one firm would be selected to undertake all the bundled projects, it was entirely possible that it could subcontract one of the projects to another firm, especially if the client favoured this. So both firms engaged in the earlier feasibility work could both be employed by this method. The appointment was now expected to be made in February.

The Project Group expressed the view that the previous design work carried out by GHA was of good quality and recognised the excellent communication skills displayed by the firm.

The capital works required for any adaptations within the existing Firrhill Surgery would be subject to a separate commission, although the same architect could be appointed. Ultimately the costs of this work would need to be approved through the NHSL Capital Programme.

##### **(iii) Workshops**

It was agreed that the full range of workshops necessary for NHSL governance should be timetabled in as soon as possible. This included AEDET, HAI, BREEAM and Equalities Impact Assessment.

CK advised that no workshop would be necessary to review the non financial benefits of the options under consideration as the OBC would not include an option appraisal. This would simplify the OBC process but confirmation from SG that the SCIM guidance was to be relaxed was essential.

##### **(iv) Community Consultation**

.HL would advise on the best format and venues for a

community event.

It was noted that two questions had recently been received from members of the public about the development. Both had received email replies.

## **6. Initial Design Statement**

SW explained that the original IDS had been developed in early 2012 when the conjoined building option had been favoured. There was now a strong case to review this since the Stage C designs which accompanied in the Business Case would be assessed against the benchmarks in the Statement.

CK pointed out that since the IDS had already been approved by the relevant bodies it was impossible to change it at this stage, but further clarification of the benchmarks would be useful for the design brief given to the architects.

References in the Statement to a joint staff room, perhaps with roof top access were noted. The GP's had already indicated their insistence on separate staff areas for each Practice. The location should be closer to the clinical areas as otherwise the staff facility might not be well used.

LK was pointed out that creating separate staff areas would mean that organisational barriers were not broken down to the maximum extent, and informal contacts and professional communications between teams would be not be as comprehensive as she desired.

There were 3 adjacent staff rooms on the top floor and this needed to be reviewed during the design stage.

## **7. Date of Next Meeting**

2.00pm on 20<sup>th</sup> February at St Roque subject to review.