

CITY OF EDINBURGH COUNCIL
POLICY AND SUSTAINABILITY COMMITTEE

Item No 3

9 JULY 2020

DEPUTATION REQUESTS

Subject	Deputation
3.1 In relation to Item 6.3 on the agenda – Community Centres Re-opening	Jack Kane Management Committee
3.2 In relation to Item 6.8 on the agenda –Re-opening of Public Conveniences	Colinton Amenity Association
3.3 In relation to Item 6.8 on the agenda –Re-opening of Public Conveniences	Colinton Community Council
3.4 In relation to Item 6.8 on the agenda –Re-opening of Public Conveniences	Colinton Garden Club
3.5 In relation to Item 6.8 on the agenda –Re-opening of Public Conveniences	Colinton Tunnel SCIO

Item 3.1

Dear P&S Committee Convenor and Vice Convenor,

I have taken this opportunity to send across our deputation in relation to the Community Centre's report due to be presented at tomorrow's Policy and Sustainability Committee meeting. Along with our deputation I have also included:

- JKCC – Operational Plan – Controlled Access
- JKCC – Operational Guidance
- JKCC – Transition through the Pandemic
- JKCC – Risk Assessments

Our Charity, further would like to highlight from the Community Centre Report, that:

- There has been no consultation with Community Centre Management Committees within the last 3 months
- There has been no conversation about the Assurance Framework for nearly a year
- There is no financial impact or conversation on how Management Committees may absorb some of the costs in gentle easing
- There is no timeline with the can being kicked down the road with any timelines
- No recognition that we can do things with just a little support
- No scoping exercise from the very beginning on what any requirement were (even to obtain charity resources like cheque books to pay bills)

We'd appreciate if our deputation, associated documents and the points above could be reviewed at the Policy and Sustainability Meeting tomorrow (09 July 2020).

All the best,

Connor (on behalf of **Jack Kane Management Committee**)



Connor Callan-Murdoch
Secretary, Jack Kane Management Committee
0131-657-1595* | Connor.Murdoch@jackkanecommunity.org
www.jackkanecommunity.org
280 Niddrie Mains Road, Edinburgh, EH16 4ND



**please note our phone number is not currently in use, please email instead.*

The email and files transmitted with it are confidential and are intended for the sole use of the individual or organisation to who they are addressed.

If you receive this email in error please notify the sender immediately and delete it without using, copying, storing, forwarding or disclosing its contents to any other person.

The Jack Kane Management Committee has endeavoured to scan this email message and attachments for computer viruses and will not be liable for any losses incurred by the recipient.

Registered Scottish Charity: SC020762



Jack Kane Community Centre's deputation input for the Policy and Sustainability Committee on Thursday 9th July 2020

Can I firstly thank the Convener and members of the Committee for agreeing to hear this deputation in respect of the Community Centre Re-opening paper.

Members of the centre are considerate that Council Officers under delegated authority and elected members have had many difficult decisions in these unprecedented times.

Firstly, it is with some dismay that having read through the City of Edinburgh Council (CEC) report submitted on Community Centres Re-opening, that I must state that we are disappointed with some of the content and at no point within the report does it highlight the many wonderful aspects of the fruitful partnership that our charity has with the CEC, indeed it paints a rather bleak picture. The paper fails to:

1. Highlight the income generation whereby over numerous years totals over £2 million has been raised
2. Celebrate the social and economic benefits to the wider learning community including schools
3. Focus on the economic investment this charity has carried out in upgrading the internals and the fabric of the building
4. Draw attention to our centres work being viewed as models of excellence within CEC reports
5. Underline that this partnership ensures that we share and invest in a joint asset which assists the CEC to carry out its objectives to the constituents of the City of Edinburgh

As such we ask that this be recognised within the body of the report.

My name is John Witherspoon, I am the chairperson of the Jack Kane Community Centre and the content contained within this deputation, reflects the views of the wider membership of this centre.

Let me be clear from the outset that we are asking for controlled access to a small number of staff to deploy charitable and essential resources. At no time have we asked for the centre to be opened to the public. The benefits of this controlled and restricted access would mean that we can enhance our service delivery to some vulnerable children and families, whilst laying plans to offer a summer road map whereby referred/nominated children and young people may have increased learning provision which will undoubtedly assist with their transition back to school or further career pathways.

The Board understand that our steps will be careful, gradual and incremental and at all times will ensure that health is our primary concern. Previously we have laid out to CEC Officers strong, dynamic and robust operational plans which will provide strict guidance when accessing the building, including:

1. JKCC operational guidance
2. JKCC transition through the pandemic
3. JKCC operational framework
4. JKCC risk assessments

A blanket approach does not fit as not one community centre is the same and as such they are different and diverse and any decisions should take this in to account with the ability to ease the access to our centre is looked at on a case-by-case approach.

Chair: John Witherspoon
Vice-Chair: Dale McCuaig
Treasurer: Sylvia Hawthorne
Secretary: Connor Callan-Murdoch

It is with this in mind that our charity wishes to present a simplified template which should be read alongside the documents I have acknowledged previously:

Stage 1: From 13th July 2020

(Read in Conjunction with Centre Operations Guidance May 2020)

- There will be no access to public under any circumstances
- Charity Key Holders and identified employees will open and secure building
- No requirement of non-essential CEC staff at this stage

Building Access		Timetable
Essential Staff	Public	
Maximum of 3 staff <ul style="list-style-type: none"> • Lead Responsible Person • Nominated staff members 	No Access	10am – 12noon 1pm – 4pm

Health & Safety	Toileting	Cleaning	Activities
<ul style="list-style-type: none"> • Risk Assessments completed • Statutory FM Fire / H&S checks completed weekly • Identified and set work locations • Social Distancing • PPE Provided • Staff/Partners Briefing • Robust communication plan in place • JKCCMC cleaning regime in place 	No toileting facilities	<ul style="list-style-type: none"> • No CEC cleaning required • No FM security requirements • Workstations cleaned by staff • Door Handles sanitised by staff • Rubbish removed from site • Food essentials sanitised • Resources sanitised 	<ul style="list-style-type: none"> • Food distribution and delivery • Sanitise and obtain resources • Access IT • One to one referred telephone/online calls

To this end:

1. This organisation asks the convenor to take each controlled access request such as this on a case by case basis.
2. The Board would also ask the convenor to recognise and agree that this charity has submitted extensive documents and have identified the resources required for controlled access, reinforcing that this charity is able to operate on a restricted access basis for staff from the 13th July 2020.
3. The Board confirm that a short term solution with flexible working dynamics and regimes be identified so as to alleviate any potential pressures on FM services.

It was welcoming that Cllr McVey stated that ‘everyone agrees about centres and that he wishes for them to be open and safe’. We as a Board have demonstrated that we can ensure that both Cllr McVey points are met and as such we respectfully ask to have controlled access to the building from the 13th July 2020.

John Witherspoon (Chairperson)
6/7/2020

Chair: John Witherspoon
Vice-Chair: Dale McCuaig
Treasurer: Sylvia Hawthorne
Secretary: Connor Callan-Murdoch

JKCC - CONTROLLED ACCESS

Stage 1: From July 13th 2020

(Read in Conjunction with Centre Operations Guidance May 2020)

No requirement of non-essential CEC staff (Charity Key Holders and Identified employees only will open and secure building)

Building Access		Timetable
Essential Staff	Public	
Maximum of 3 staff <ul style="list-style-type: none">Lead Responsible PersonNominated staff members	No Access	10am – 12noon 1pm – 4pm

Health & Safety	Toileting	Cleaning	Activities
<ul style="list-style-type: none">Risk Assessments completedStatutory FM Fire / H&S Checks completed weeklyIdentified and set work locationsSocial DistancingPPE ProvidedStaff/Partners BriefingRobust communication plan in place	No toileting facilities	<ul style="list-style-type: none">No CEC cleaning requiredNo FM security requirementsWorkstations cleaned by staffDoor Handles sanitised by staffRubbish removed from siteFood essentials sanitisedResources sanitised	<ul style="list-style-type: none">Food deliverySanitise and obtain resourcesAccess ITOne to one referred calls



Operation Title - Community Centre Operations Guidance

Lead Board Member	Name:	Connor Callan-Murdoch
	Designation:	Secretary
	Tel:	0131 657-1595
Last Review Date	N/A	
Implementation Date	May 2020	
Review Date	Ongoing basis in line with dynamics of Scottish Government, City of Edinburgh Council (CEC) and Public Health Scotland advice and response.	

1. Purpose

This document details the requirements including timeline of initially easing access to the Jack Kane Community Centre initially for staff.

During this proposed easing the guidance details the requirements of operating the building to provide workplace locations in which charitable objectives can be met in response to the Coronavirus pandemic.

- This guidance details the measures that should be taken to manage the operations within the building safely.
- Information is included on how any response should be managed in terms of requirements and expectations as well as instructions for action.
- The plan will be updated and circulated accordingly and in line with health/government/service advice and requirements.
- The approach to the implementation of this plan is dynamic and dependant on the level of risk.

2. Scope

All nominated staff who gain controlled access to the establishment must comply with this guidance.

3. Actions

It is the duty of the responsible person for the establishment and their team to work with the CEC and the NHS to deliver and manage the situation appropriately with the advice, support and instruction provided.

Operation Title - Community Centre Operations Guidance

4. Definitions

Lead Off Site Manager - the on-call person who has overall responsibility for managing controlled access.

Lead Responsible Person – the person managing the establishment.

Community Centre – the building used to provide controlled access for nominated staff.

Nominated Staff Member - Staff who have been identified as being required for charitable duties and who are not in the at-risk categories (ie shielding or underlying health conditions).

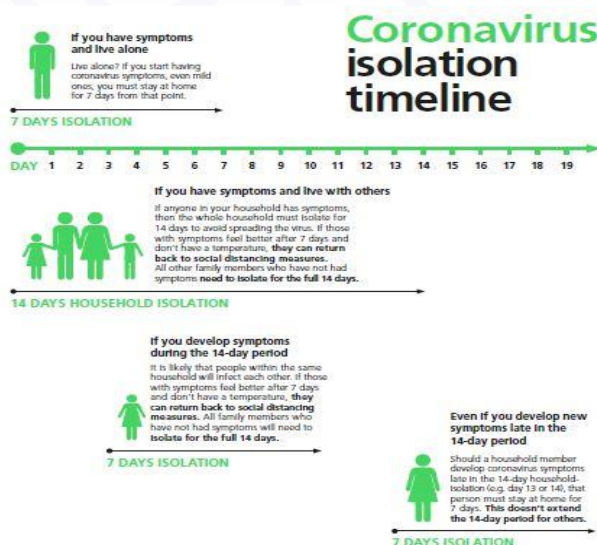
5. Operating Plan

It is important all nominated staff are familiar with health information and revised contingency arrangements to ensure a dynamic response. All staff must ensure the key requirements below are in place throughout operations.

It is your duty to minimise the risk of spread between nominated staff and their families. Follow the usual hygiene measures outlined on NHS inform.

Familiarise yourself with the signs and symptoms of COVID 19.

No staff member should come to work with a temperature or any other suspected symptoms of COVID 19. The whole family should isolate for 14 days if this occurs (see undernoted diagram).



Each Nominated Staff Member will be met by the Lead Responsible Person who will utilise the buildings intercom to enquire about symptoms and confirm details of the nominated staff member.



Operation Title - Community Centre Operations Guidance

The Lead Responsible Person will then ensure that each Nominated Staff Member adheres to the hand washing protocol when entering the building. The Lead Responsible Person will then oversee the cleansing of each piece of equipment.

Display hand hygiene posters at all suitable areas

Ensure that Nominated Staff Member are aware of the controlled access plan and that their designated areas are the only areas that they should be in during their time within the establishment. They must obey social distance rules during controlled access at all times.

Limit risks between rooms – manage social distancing at entrance and exit

Flexible working environment whereby dynamic availability is encouraged

Stagger any Nominated Staff Member breaks. Controlled access document adhered to risk manage movement around the centre – All doors will be open during this time and thus avoid touching doors

Nominated Staff Members should wear clean clothes daily to minimise the virus remaining on material

Clothes do not have to be changed at the end of your shift before you go home

Any wipes used must have 70% alcohol and should be deployed on work stations/equipment which you have been allocated within the controlled access document

Under no circumstances should there be any breaches to social distancing and if there are any concerns then the Lead Responsible Person should be notified immediately

6. What to do if someone becomes unwell at the Community Centre

Extract from Information and Guidance for General (Non-Healthcare) Settings

In preparation for essential services to be carried out during (phase 1 & 2 Approach to Transition), make sure that all staff and individuals in your workplace/organisation, know to inform the Lead Responsible Person or responsible person if they feel unwell.

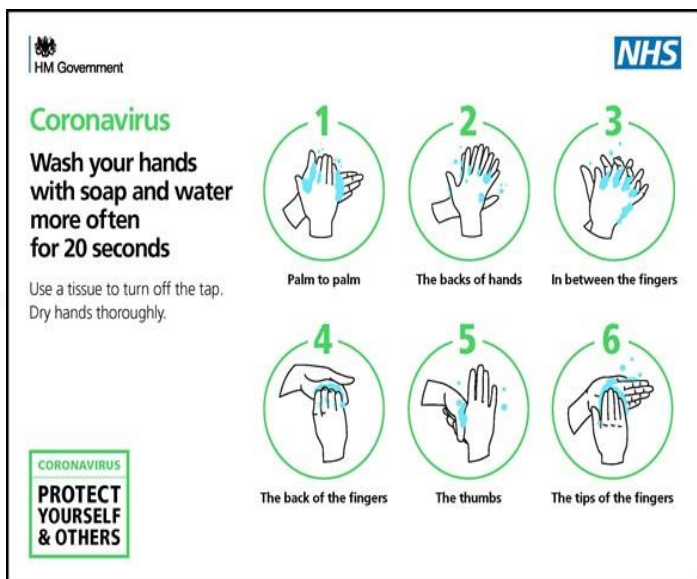
If the affected person has mild symptoms they should go home as soon as they notice symptoms and self-isolate. Where possible they should minimise contact with others, e.g. use a private vehicle to go home. If it is not possible to use private transport, then they should be advised to return home quickly and directly. If using public transport, they should try to keep away from other people and catch coughs and sneezes in a tissue. If they don't have any tissues available, they should cough and sneeze into the crook of the elbow.

If they are so unwell that they require an ambulance, phone 999 and let the call handler know you are concerned about COVID-19. Whilst you wait for advice or an ambulance to arrive, try to find somewhere safe for the unwell person to sit which is at least 2 metres away from other people. If possible and it is safe to do so, find a room or area where they can be isolated behind a closed door, such as a staff office or meeting room. If it is possible to open a window, do so for ventilation. The individual should avoid touching people, surfaces and objects and be advised to cover their mouth and nose with a disposable tissue when they cough or sneeze, and then put the tissue in the bin. If no bin is available, put the tissue in a bag or pocket for disposing in a bin later. If you don't have any tissues available, they should cough and sneeze

Operation Title - Community Centre Operations Guidance

into the crook of their elbow. Where possible, a separate bathroom should be designated for the individual to use.

7. Handwashing Advice (from Health Protection)



Regular hand washing with soap and water is the first line of defence where hand washing facilities are available. Hand gels should only be used if staff don't have access to hand washing facilities, this will not occur whilst utilising the building.

Hand gel must be alcohol based. Alcohol free hand gels will not kill the virus.

As well as hand washing good cough etiquette is required (cough into a tissue, discard the tissue and wash hands / cough into elbow wash hands).

Please note there is a national shortage of hand sanitizer.

Hand gel advice

Our Board have been made aware that there is a fire risk related with using of alcohol-based hand rubs and as such none will be available for nominated staff. This decision will be revisited as we move forward. A small amount of hand gel will be kept for emergency purposes.

8. Cleaning Regimes

Cleaning will be provided in the establishment for ongoing and response cleaning. All equipment will be cleaned prior and after use. Please alert your cleaner if there is an issue and cleaning is required in response.

The use of (and cleaning of) IT Equipment - Fixed PC's / Monitors/ Keyboards and Telephones

1. These should be cleaned using the appropriate wipes and cleaning solutions
2. One user per workstation
3. Where possible the same user is allocated the workstation as before
4. Regularly wiping down of the monitors and other exposed parts should be carried out depending on its use, this would be similar for most IT equipment i.e. keyboards or similar hand-held devices. If hand hygiene guidance is observed and cleaning recommendations are implemented, then this is seen as a balanced and



Operation Title - Community Centre Operations Guidance

measured approach, therefore reducing the contact and cleaning of equipment by nominated staff to an acceptable minimum level.

Plastic is the surface the virus remains viable on for the longest - up to 72 hours. On stainless steel the virus was detected up to 48 hours after application.

Personal Protective Equipment (PPE) – there is no requirement for any form of PPE to be worn when cleaning equipment. However, gloves are available from the cleaning cupboard if staff wish to use them.

9. First Aid Arrangements

Appropriate first aid requirements will be in place with the Lead Responsible Person and Nominated Staff Members all being accredited first aiders, The LRP will ensure that all measures are in place as appropriate.

10. Travel and Transportation

Travel Public Transport/Vehicle - In Phase 1 & 2 then any nominated staff members including the Lead Responsible Person will only travel by walking, cycling or using their private motor vehicle, aiming to maintain 2m social distancing whenever possible. In extreme circumstances and where these transport options are not available then public transport may be used.

Mini Bus Travel - Where two staff members are carrying out duties within the establishment's mini bus, then they must adhere to social distancing guidelines, with the driver remaining in the driver's seat whilst the other Nominated Staff Member who is delivering situated at the rear of the vehicle.

11. Risk Assessment (General Advice)

Risk assessments must be carried out with the Lead Responsible Person leading. The Health and Safety Executive advise "A risk assessment is not about creating huge amounts of paperwork, but rather about identifying sensible measures to control the risks in your workplace".

You must risk assess in a proportionate, dynamic way for ALL risks.
Everyone needs to consider:

- Identify the hazards
- Who might be harmed?
- Evaluate the risks
- Record significant findings
- Regularly review all risk assessments



Operation Title - Community Centre Operations Guidance

12. Risk Assessment (Infection Control)

A risk assessment is required to manage infection control risks. The Lead Responsible Person is the responsible person and should add to this as required.

There is a range of risks to consider and social distancing Risks should be considered in a comprehensive/dynamic way on an ongoing basis.

13. Fire Safety

It is essential for example that a fire alarm test is undertaken weekly, that an early fire evacuation drill be undertaken and that any changes to the use of the building are updated on the fire risk assessment is required. This will be carried out by nominated operatives of the CEC or in extreme circumstances the Lead Responsible Person.

14. Workplace Inspection

Regular workplace inspections should be carried out within the building to ensure the building is operationally safe. Any issues should be reported to the Facilities Management provider help desk.

15. Key Holding and Site Security

Site security will be the responsibility of the main key holder at that time. When the charity is utilising the building without FM support then the Lead Responsible Person will ensure site security for the building. As we move forward and gain support from the City of Edinburgh Councils FM department then this duty will be passed on to them. The organisation will at all time communicate effectively with the City of Edinburgh Council to ensure social distancing measures from different parties when using the building are aligned.

16. Further Reading

<https://www.nhsinform.scot/illnesses-and-conditions/infections-and-poisoning/coronavirus-covid-19>

<https://www.nhsinform.scot/self-help-guides/self-help-guide-coronavirus-covid-19>

https://www.who.int/gpsc/5may/How_To_HandWash_Poster.pdf?ua=1



Operation Title - Community Centre Approach to Transitions

Our Approach to transitioning through and exiting from the Crisis

The Scottish Government acknowledges that 'Community centres can open for essential voluntary or public support services' ([Scottish Government, 2020](#)) and whilst this view has not been reflected by the City of Edinburgh Council (CEC)'s decision to close community centres, should their position change then the board wish to be in a strong positive and pro-active position to gain controlled access to the building and their assets at the earliest possible time. The Jack Kane Community Centre (JKCC)'s Board have constructed the following document on the understanding that key timing and future developments are uncertain, however this paper should be read in conjunction with JKCC Operational Guidelines (May 2020).

Planning for moving safely to the new normal

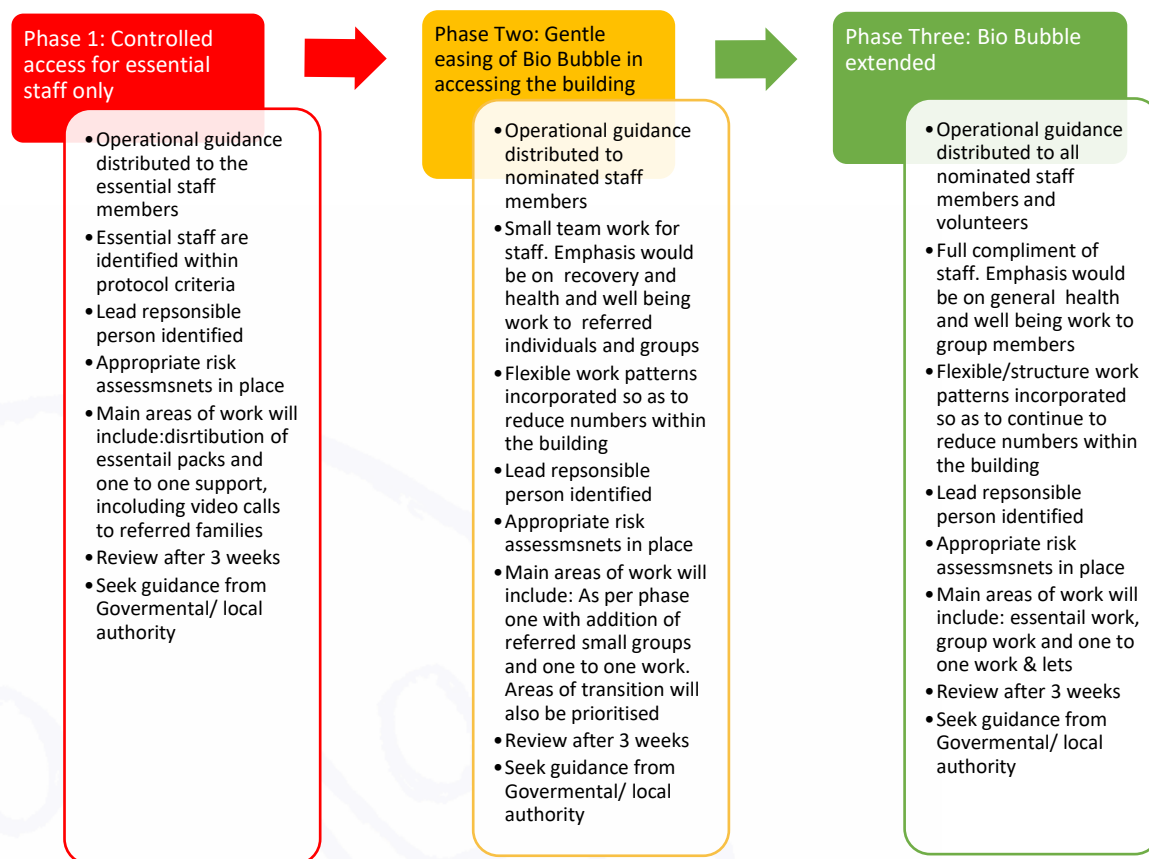
The changes, this Board are outlining requires time to carefully plan and to prepare our workplace, develop processes and communities alongside ensuring that our funding and financial provisions are in order to introduce any changes safely, effectively and adaptations are economically viable.

The Board have a motivation to model new and innovative approaches which capture the very essence of informal education for the foreseeable future. Activities and interactions will enable ongoing physical distancing, with most children, young people and their families likely to have a blend of online in-home learning. Learning at home will be supported by consistent, high-quality online materials which will be developed to support the curriculum. Home learning activities will also be complimented in some cases, by educational packs delivered straight to their doors which will complement the curriculum. Educational packs will contain relevant resources to enhance participation whilst breaking down any economic barriers.

For our children and young people, they are likely to be impacted most, and for longer, by the unintended consequences and other factors attributable to actions taken to control the pandemic. We understand that community and school closures are having a negative impact on all aspects of children's progress and development, including wellbeing. The anticipated consequences include impacts on mental health, socialisation and attachment (particularly for younger children). Impacts of 'hidden harm' may lead to additional cognitive, emotional and behavioural need and are likely to require significant intervention over the medium and longer term. Navigating the right course through the crisis will involve taking difficult decisions that seek to balance these various, inter-related harms so as to minimise overall harm.

As the charity moves forward our interactions with people and groups will look and feel different in the foreseeable future, as the bio bubble increases then our interface and work will adapt in order to suite both community requirements and relevant public health advice. These new interactions through safety measures such as social distancing, will ultimately have an impact upon capacity to deliver not just for individuals and groups which may include attending activities with a limited number of children/young people for shorter periods of time, but for also staff capacity and with that there will require flexible work patterns to minimise contact within the establishment. In addition, there will be an increased commitment to carry out outdoor education learning which will open up methods and approaches to a wider audience. There will also be scope for one to one work or indeed family work and as such a variety of risk assessments will be covered to cover any activities and interactions.

Operation Title - Community Centre Approach to Transitions



The board are proposing a phased transitional approach to varying restrictions, community requirements and needs as we move forward, and as this crisis and services respond, the board will always ensure that consultation with community constituents form the basis of how the charity moves forward. including:

Phase One

The first phase of our work has included preparing details and options for change.

- Assessments of the options in terms of the impact on essential staff whilst carrying our charitable duties within the building;
- Consideration of the options and how they would be communicated to essential staff which will enable compliance and delivery;
- An outline of plans for implementing each phase as the recovery takes place, indicating the work required to ensure the change is managed in a viable and effective way, the likely timescale between a decision to implement and the change being made, who is



Operation Title - Community Centre Approach to Transitions

responsible and accountable for that work, and who needs to contribute to it and be kept informed about it.

Phase Two

The second phase will see small youth work teams prioritise children and families who are viewed as most in need. Alongside this additional scope in activities, essential work such as delivering food parcels will still be carried out with additional referred individual work, group work and family work being explored. This work will be taken on a case by case basis and reviewed dependant on the risk associated with the potential interactions. A scoping exercise informed by guidance will take place to identify risk associated to both building and outdoor leaning/let activities.

Phase Three

The third phase will begin to feel closer to the new normal, sessional staff and volunteers being included in the group work elements of implementing service delivery. The centre scope the risk and will open up to external lets and every decision will be considerate of the impact on every individual which participates in centre activities.

Review and Reflect

It is only correct and proper that this charity adheres to Governmental reviews and advice which take place every three weeks. The board wish to consider always whether and how we can resume service, provided this can be done safely and without unacceptable risk. This understanding ensures that any phases we propose has an option to review, reflect and rewind if the practice calls for. Our approach will be incremental, building on each step over time. By meeting the immediate need for essential services whilst understanding the current restrictions, we wish to place our community at the centre of any discussions on any recovery and renewal process.

With public health and reduced capacity to physically deliver, we wish to target our essential services to the children, young people, adults and parent and guardians who require the most support and assistance at this time.

The Board alongside staff will develop a chronological list of priority individuals and groups who would be both referred from external agencies, self-referred or indeed identified by staff in this establishment. For example, vulnerable children who are making the transition to High school from Primary 7 or young people leaving school with limited opportunity, lack of positive destinations, limited support, going into further education or the workplace.

Moving Forward Together

The board fully understands its duty to its staff, volunteers and wider community, we know how difficult the restrictions and broader impacts of the crisis are: we wish to implement a range of support for people, communities and other organisations. This, along with continued hygiene and necessary distancing measures, will enable us to cautiously recover our way of life to a new normal, re-opening our workplaces with safe practices - with redesigned processes, services and spaces - when it is safe to do so, being confident that we are



Operation Title - Community Centre Approach to Transitions

delivering vital services whilst doing all that we can to protect the health our staff and community members.

Throughout this approach, our decisions, choices and actions will contain risk. These risks must be understood and carefully managed by us all in our daily lives and our working environments as we move towards a 'new normal'.





COVID-19 - Risk Assessments

RISK ASSESSMENT – INFECTION CONTROL

Department	Young People, Children and Families	Unit/Section	Jack Kane Community Centre
Date of assessment	1/7/2020	Assessor(s)	Emma Kyles
What is the activity?	Infection Control	Where is the activity carried out?	Hunters Hall Park

What are the hazards?	Who might be harmed and how?	What are you already doing?	What further action is necessary?	Action by whom?	Action by when?	Done
Ineffective infection control arrangements	Those working on the activity environment. Harm would occur if infection control measure were not sufficient and staff /children become unwell with Covid-19 symptoms	<p>Following the advice below:</p> <p>https://www.gov.uk/government/publications/guidance-to-educational-settings-about-covid-19/guidance-to-educational-settings-about-covid-19</p> <p>This has to be followed at all times to ensure appropriate cleaning is in place and that cleaning protocols are adhered to particularly if staff or children become symptomatic on site where isolation would be required.</p>	<p>Ensure that monitoring of staff/children for symptoms is ongoing at all times.</p> <p>Ensure that social distancing measures (2 metres apart) is in place and that this is monitored at all times.</p> <p>Ensure that ongoing Milton surface cleaning is in place through appropriate cleaning regime.</p> <p>Ensure that infection control arrangements are in place at all times</p>	<p>Staff</p> <p>Staff</p> <p>Staff</p>	<p>All actions ongoing throughout activity</p>	

Manager's name	Emma Kyles	Signature	
Date	1 July 2020	Assessment review date	Assessment to be reviewed if or when first aid arrangements change.



COVID-19 - Risk Assessments

RISK ASSESSMENT – FIRST AID

Department	Young People, Children and Families	Unit/Section	Jack Kane Community Centre
Date of assessment	1 st July 2020	Assessor(s)	Emma Kyles
What is the activity?	Provision of First Aid	Where is the activity carried out?	Hunters Hall Park

What are the hazards?	Who might be harmed and how?	What are you already doing?	What further action is necessary?	Action by whom?	Action by when?	Done
Inadequate first aid response	Member of staff/participant Deterioration of condition	First Aider to attend to injured person.	Ensure that the first aider's qualification is current/up to date.	First aider	Ongoing	
Inadequate first aid resources (i.e. first aid box contents)	Member of staff/ participant Deterioration of condition	<p>Ensure that first aid boxes are adequately stocked.</p> <p>HSE's suggested first aid box contents list:</p> <ul style="list-style-type: none"> a leaflet giving general guidance on first aid (for example, HSE's leaflet - Basic advice on first aid at work (see separate advice on CPR below) https://www.hse.gov.uk/pubns/indg347.htm individually wrapped sterile plasters (assorted sizes), appropriate to the type of work (hypoallergenic plasters can be provided if necessary); 	Monitor first aid box stock.	First aider/ Appointed person	Ongoing	



COVID-19 - Risk Assessments

		<ul style="list-style-type: none"> sterile eye pads; individually wrapped triangular bandages, preferably sterile; safety pins; large sterile individually wrapped unmedicated wound dressings; medium-sized sterile individually wrapped unmedicated wound dressings; disposable gloves (nitrile or vinyl) 				
Lack of adequate Personal Protective Equipment (PPE)/infection control	<p>Member of staff/participant/first aid provider</p> <p>Potential cross infection</p>	<p>Ensure that disposable aprons, gloves (nitrile or vinyl), fluid repellent surgical masks (IIR) and eye protection (goggles) is available. (<i>Guidance for first responders and others in close contact with symptomatic people with potential Covid-19</i>).</p> <p>https://www.gov.uk/government/publications/novel-coronavirus-2019-ncov-interim-guidance-for-first-responders/interim-guidance-for-first-responders-and-others-in-close-contact-with-symptomatic-people-with-potential-2019-ncov</p> <p>Contaminated waste - for example, disposable PPE and other items soiled with bodily fluids can be stored securely within disposable rubbish bags.</p> <p>These bags should be placed into another bag, tied securely and kept separate from other</p>	Provision of relevant PPE for Establishments.	<p>Senior Worker</p> <p>Staff</p>	<p>01st July 2020</p> <p>Ongoing</p>	



COVID-19 - Risk Assessments

		<p>waste. This should be put aside for at least 72 hours before being put in the usual waste bin for disposal as normal.</p> <p>Laundry - Wash items in accordance with the manufacturer's instructions. Use the warmest water setting and dry items completely. Dirty laundry that has been in contact with an injured person where possible, should be laundered separately. Do not shake dirty laundry, this minimises the possibility of dispersing virus through the air. Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above. If you do not have access to a washing machine at home or in your setting, ensure dirty laundry is kept bagged at home for 72 hours before taking to the launderette. After handling dirty laundry ensure hand hygiene is carried out. (<i>Covid-19 Information and Guidance for Non-Healthcare Settings</i>).</p> <p>https://hpspubsrepo.blob.core.windows.net/hps-website/nss/2973/documents/1_covid-19-guidance-for-non-healthcare-settings.pdf</p>				
Cardiopulmonary resuscitation (CPR)	Member of staff/participant/first aid provider	<p>Wear appropriate PPE.</p> <p>In adults, it is recommended that you do not perform rescue breaths or mouth-to-mouth</p>	<p>Hand hygiene – after contact with the injured person, wash your hands thoroughly with soap and water or alcohol rub at the earliest opportunity.</p>	First Aider (if available)	Ongoing	



COVID-19 - Risk Assessments

	Potential cross infection	<p>ventilation; perform chest compressions only. Resuscitation Council (UK) Guidelines 2010 for Basic Life Support state that studies have shown that compression-only CPR may be as effective as combined ventilation and compression in the first few minutes after non-asphyxial arrest (cardiac arrest not due to lack of oxygen).</p> <p>Cardiac arrest in children is more likely to be caused by a respiratory problem (asphyxial arrest), therefore chest compressions alone are unlikely to be effective. If a decision is made to perform mouth-to-mouth ventilation in asphyxial arrest, use a resuscitation face shield where available.' https://www.sja.org.uk/first-aid-supplies/first-aid-supplies-and-consumables/masks-and-face-shields/</p> <p><i>(Guidance for first responders and others in close contact with symptomatic people with potential Covid-19).</i> https://www.gov.uk/government/publications/novel-coronavirus-2019-ncov-interim-guidance-for-first-responders/interim-guidance-for-first-responders-and-others-in-close-contact-with-symptomatic-people-with-potential-2019-ncov</p>	Avoid touching your mouth, eyes and/or nose, unless you have recently cleaned your hands after having contact with the injured person.			
--	---------------------------	---	--	--	--	--



COVID-19 - Risk Assessments

Basic first aid (minor cuts and grazes) if no designated first aider available	Member of staff/participant/first aid provider Potential cross infection	<p>How to treat cuts and grazes</p> <p>Wear appropriate PPE.</p> <p>Stop the bleeding Stop any bleeding before applying a dressing to the wound. Apply pressure to the area using a clean and dry absorbent material – such as a bandage, towel or handkerchief – for several minutes. If the cut is to your hand or arm, raise it above your head to help reduce the flow of blood. If the injury is to a lower limb, lie down and raise the affected area above the level of your heart.</p> <p>Clean the wound and apply a dressing When the wound has stopped bleeding, clean it and cover it with a dressing to help stop it becoming infected. To do this:</p> <ul style="list-style-type: none"> • wash and dry your hands thoroughly • clean the wound under drinking-quality running tap water – avoid using antiseptic as it may damage the skin and slow healing • pat the area dry with a clean towel • apply a sterile adhesive dressing, such as a plaster. <p><i>(NHS Guidance – Cuts and Grazes)</i></p>	<p>Hand hygiene – after contact with the injured person, wash your hands thoroughly with soap and water or alcohol rub at the earliest opportunity. Avoid touching your mouth, eyes and/or nose, unless you have recently cleaned your hands after having contact with the injured person.</p>	Staff	Ongoing	
--	---	---	---	-------	---------	--



COVID-19 - Risk Assessments

		https://www.nhs.uk/conditions/cuts-and-grazes/				
--	--	---	--	--	--	--

Manager's name	Emma Kyles	Signature	
Date	1 July 2020	Assessment review date	Assessment to be reviewed if or when first aid arrangements change.

From:
Sent: 07 July 2020 12:14
To: Committee Services
Cc: secretary
Subject: Policy and Sustainability Committee, Thursday 9th July - Item 6.8

Dear Sirs,

We understand that a discussion about potential reopening of public toilets at various sites in Edinburgh is to take place this Thursday.

The Colinton Amenity Association has been fielding enquiries for a number of weeks from our membership and the wider local residents about when the public toilets in Colinton Road are to reopen. We appreciate that the Council is having to consider current guidelines for the opening up of public spaces and buildings in the context of declining Covid infections, and that public safety will be uppermost in their minds. We would like to ask that the public toilets in Colinton Road be opened at the earliest opportunity: the pressure of use on these facilities may not be quite as much as those quoted in the media at various Edinburgh 'hotspots' where extremely large numbers of people congregate, but their use is significant locally and demand for them is increasing week-on-week as local shops open up and our own tourist attractions receive greater footfall as travel restrictions are lifted.

The Colinton Road toilets are modern, and therefore easily kept clean.

They are a vital amenity for our local population - many of who are aged and possibly requiring access to such facilities at short notice

- and well-used by bus drivers using the bus terminus in Westgarth Avenue and other passing drivers of commercial and private vehicles.

The increased popularity of the ever-growing mural of the Colinton Tunnel Project on the Water of Leith Walkway has seen a dramatic increase in visitors during recent months, and the Walkway has been well used by pedestrians and cyclists - these are the nearest public toilets to this part of the Walkway and to Spylaw Park, also well used. We understand that there are cost implications for opening public toilets with periodic and regular cleansing involved, but we would strongly urge that the City needs these facilities back up and running as a priority if some semblance of normality is to return to everyday life. We can all adapt to having to wear face-coverings and to ensure increased personal hygiene, and it has been reported throughout the recent crisis that the general public has responded magnificently and continues to do so. Surely, individual's responsibility to both themselves and to others in facilities such as public toilets is going to be as high as ever - if not more so, given what we have all gone through? We therefore strongly urge that the Council is a little 'brave' in considering how such facilities can be reopened, apportion sufficient credit to a likely public response to help keep such facilities clean, and to worry a little less about cost implications when discussing such important, even crucial public facilities.

Yours sincerely,

Dr Tim Lawson
Chairman, Colinton Amenity Association

From:
Sent: 07 July 2020 12:02
To: Committee Services
Cc:
Subject: Policy and Sustainability Committee, Thursday 9th July - Item 6.8

Dear Sirs,

Colinton Community Council wished to express its deep concern that while other public toilets are being reopened in the City, Colinton's have been omitted from the current list. We believe many of the good reasons given for reopening toilets elsewhere also apply in Colinton.

Because the Water of Leith Walkway runs through the heart of the village, the proximity of the Pentlands Country Park and the points of interest within the village itself e.g the Robert Louis Stevenson trail, Arts and Crafts period Episcopal church and railings by Phoebe Anna Traquair, etc, Colinton already has a sizeable visitor and tourist presence. The new but nearly complete Tunnel Art Project – a unique outdoor art installation - has already gained a wide reputation which is generating huge interest and visitor numbers too.

In addition to locals and near-locals exercising in and around the village, lockdown has substantially increased the number of pedestrians, cyclists and other visitors to all these attractions. However, it also means that the local library, pubs, cafes and restaurants are all closed, so there are no public or semi-public toilet facilities available within miles.

Add to that, an ageing population, dependent on access to local shops, post office, etc, and the currently increasing number of bus drivers who regularly used our very modern public convenience, which is in excellent repair, before lockdown.

We have been told that the need to have a permanent attendant makes reopening excessively costly, but it has been pointed out that other facilities which are reopening require only four cleaning visits a day. We believe that providing local temporary signage asking people to wipe down the facilities, door handles etc before and after use with sanitisers provided for the purpose and (say) 4 visits a day by an attendant to restock and "deep clean" could offer an acceptable but much cheaper alternative, which could be employed throughout the City.

For all these reasons we request that Colinton be added to the list of toilets to be reopened immediately.

Tom McDonald
Chair
Colinton Community Council

From: Elspeth MacGregor
Sent: 07 July 2020 12:48
To: Committee Services
Cc: Jason Rust
Subject: Policy and Sustainability Committee, Thursday 9th July - Item 6.8"

Colinton Garden Club understands that public toilets are being reopened across the City, but that the Colinton facilities are to remain closed.

We feel that we would definitely like to have 'our' toilets reopened with the rest. Ours are new, state of the art and used by a large number of us, especially bus drivers, tradesmen and the many walking groups that come through the village and of course local residents.

On behalf of the Garden Club, may I ask the Committee to reconsider their decision and include our facilities with the others which are being reopened across the City.

With thanks,

Elspeth MacGregor
Chair, Colinton Garden Club

From:
Sent: 07 July 2020 12:05
To: Committee Services
Subject: Policy & Sustainability Committee, 9.7.2020, Item 6.8 - re-opening of Public Conveniences

Policy & Sustainability Committee. Thursday 9th July 2020 - item 6.8.

I write on behalf of The Colinton Tunnel SCIO to support the re-opening of the public toilets at Bridge Road, Colinton, as a priority in the first phase of re-openings of public conveniences.

As Committee members may be aware, the toilets in Colinton are relatively newly built and are of a modern design which should facilitate the more frequent cleaning/sanitising that would be required to ensure public safety during the current COVID-19 pandemic. The toilets have no record of vandalism or other associated antisocial behaviour.

A key part of the reason for establishing the Colinton Tunnel mural project was to bring visitors to Colinton, following the loss of our bank branch and the subsequent closure of almost 50% of our local businesses. That objective has been remarkably successful, with significant increases in visitor numbers during the two years of the project. Over 1,000 people currently visit the tunnel every day and those numbers continue to increase as the mural progresses. Many of them are now doing exactly what we had hoped, and are visiting Colinton village whilst they are in the area.

The COVID-19 outbreak and associated limitations have also contributed to the increasing numbers of people who are walking and cycling along the Water of Leith Walkway for exercise and leisure, as well as the number of families who are using the adjacent Spylaw Park. There are no publicly accessible toilets along the Walkway, except those in Colinton, between Balerno and Stockbridge - a considerable distance.

The public toilets in Colinton also serve the many elderly residents of Colinton's sheltered housing who walk to the village shops; and the bus drivers of the Number 10, 16, 45 and 400 bus services (although some of those routes are suspended or amalgamated at the moment).

I would hope that Members will appreciate the demand for these local facilities and will support their re-opening in the first phase.

Best wishes,

Mike Scott
Chairman

Colinton Tunnel Mural Project



www.colintontunnel.org.uk

The Colinton Tunnel is a Scottish Charity, SC048476, regulated by the Scottish Charity Regulator (OSCR)