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Executive Summary

The Link Centre has been operating for some time but is perceived as having been in decline for the past couple of years. Footfall is down, the centre is underused, and people report a lack of a vibe. There is a feeling that the purpose of the centre isn’t clear.

A Task & Finish group was set up to review the centre and provide a proposed way forward. Business Analyst resource has been provided by the Business Intelligence section to support this work.

The review has considered the building itself, the use made of the building and the staffing structure. We have consulted user groups, individual service users, Link Centre staff, partner organisations and social care managers within OMBC. A variety of consultation methods were used including workshops, surveys, group and individual discussions and observation. All consultation results are included in the appendices to this report.

Staff views have been extremely valuable and staff members feel a real sense of commitment to the centre and the service users. There are a lot of great ideas coming from the staff; going forward we need to make sure that staff feel empowered to put ideas into practice to improve the service. Already during the review there are some changes underway, and we need to use staff enthusiasm to drive improvements on.

We consider that the centre is a valuable resource that should be retained and developed. It is valued by service users and can make a significant contribution to the prevention agenda by engaging directly with vulnerable people. It can also support the Cluster model and the developing Information and Advice Strategy.

Our recommendations, in summary, are for a Link Centre Refresh project to:

- Apply and embed the revised purpose of the centre
- Focus on the prevention agenda for vulnerable residents borough-wide
- Support the Cluster model, specifically for vulnerable people
- Develop the information service, transforming ODIP to OIP
- Refresh the layout, décor, and signage and ensure accessibility standards are met
- Carry out some structural changes to improve use of space
- Re-open the café
- Create a marketing and communication strategy for the centre
- Engage with services to make sure the Link Centre offer is known by other social care areas
- Rebrand and relaunch the Link Centre
- Implement a structure, and encourage a culture, where staff are empowered to take action to develop the centre
- Put in place an ongoing programme of service development and improvement to build up the service offer
- Engage a Project Manager to create and implement an improvement plan, and use staff resource from the Link Centre in the project
- Maintain links with related strategy and project work
Introduction
A review of the Link Centre was commissioned by Kirsty Littlewood, and Terms of Reference agreed in February 2016.

About the Link Centre
The Link Centre was used as a day care centre in the 1980’s and was re-opened as Phillip Harrison House in 2000. At the time the focus may have been on people with a physical disability, and as such many activities were carried out on the ground floor. The building has been developed to be very accessible. Since then the scope has changed to include a wider range of vulnerable groups.

Several services currently use the Link Centre as their home base – Community Occupational Therapy for example uses offices and carries out assessments at the centre as part of a reciprocal agreement with Pennine Care. Other organisations have a base at the Link Centre as part as service agreements, including Blue Badge provision and the Memory Service.

More recently the purpose of the centre has become a little vague.

The Centre is the location for a large number of groups and activities serving vulnerable residents, mostly adults or older people. In addition customers are able to drop in for advice and help.

Customers can access disabled bathing facilities on site, which are well used, and a sensory-relaxation room.

There are a range of different sized meeting rooms and conference rooms, mostly on the 1st floor. The ground floor café has been closed for over 12 months and staff and users feel that this has affected visitor numbers. AgeUK have an independent living showroom on the ground floor. This is also the location for the Oldham Disability Information Point (ODIP).

The Link Centre is one of several buildings owned by OMBC in the town centre and across the Borough. The wider estate portfolio should be considered when reviewing the function and purpose of any individual building.

The Link Centre is not currently within the remit of the Corporate Landlord.

Objectives of the review
- Clarity about whether the Link Centre has a continuing role to play in helping to deliver the new (yet to be developed) prevention offer for Oldham residents who have (or may have) care and support needs
- Clarity about how the Link Centre may (or may not) fit with the developing “place-based cluster” approach to building community resilience across Oldham borough-wide
- Clarity about the role of the Link Centre Manager in supporting the development of the prevention strategy and model to ensure adult social care outcomes are effectively delivered for Oldham residents
- Clarity about future use of the Link Centre building to ensure best value
- Clarity about what Oldham residents want and where they want it
Deliverables

- A map of current use of the Link Centre will be produced including:
  - All activities that take place, how often they take place, and how many residents access each activity
  - Which services and/or teams have ‘permanent’ accommodation at the Link Centre, how much space they have, and what the space is used for e.g. office space, interview rooms, assessment rooms
  - How many other organisations/teams use the Link Centre to deliver services from – what space they use/need, what those services are, how often they run, how many residents access each service
  - What other space, facilities, and resources are available at the Link Centre e.g. bathing facilities, IT suite – what they are used for, who they are used by, how many residents use them
  - Current substantive budget, including all income and expenditure, plus any additional / temporary funds (what for, how long for)
  - Staffing chart – permanent and temporary – roles, grades, sufficiency
  - A cost-benefit analysis, identifying both cashable and non-cashable savings, which will inform the options appraisal.

- A survey of all users of the Link Centre will be conducted to determine:
  - Why they use the Link Centre e.g. convenience, location, specific activity
  - Levels of satisfaction with the Link Centre – facilities/support/environment etc.
  - Whether they would prefer to attend activities in their own neighbourhoods if they were available (and if not, why not)
  - Whether the activities might best be provided elsewhere e.g. library, community building
  - The impact of those activities/services not taking place in the Link Centre

- An options appraisal of potential future uses for the Link Centre will be drawn up outlining:
  - The strategic options (based on PESTEL and/or SWOT analyses)
  - The preferred option
  - The resources required to deliver (sustainability)

- An implementation plan for delivering the preferred option will be drafted following approval for the proposal(s) being received.

Dependencies and Contacts

Contact names in this section are correct as at May 2016 but are subject to change.

- Work is underway on developing an Information and Advice Strategy and implementing the Accessible Information Standard. Deborah McBride is leading on this and Cathy Jackson is representing the Link Centre.
• Transformation work in Adult Social care is aiming to deliver a cluster model. Peter Tomlin is leading on delivery. The Link Centre can support the cluster model so it’s important that connection is maintained with this programme of work.

• Service transformation is also underway in safeguarding – involving Adult Social care, Children’s Service, Early Help and MASH. This work has clear 2-way connections with the Link Centre. It’s important that the ongoing Link Centre project retains links with these projects. The project is being managed by Bruce Penhale.

• OMBC owns a lot of buildings, and rents space for staff in other buildings. The Link Centre should be considered as part of the overall accommodation strategy. Key contact for this is Cath Conroy in Estates Management.

• A Terms of Reference document has been prepared for the transformation of ODIP to OIP. This work is already underway at the Link Centre.

• Lifelong Learning may be able to support our aspirations for staff and service user development. Contact here is Catherine Lavell – Learning Support Manager. They can support training at their premises (The Gallery) for people who need additional support, or could run dedicated training at the Link Centre.

• There are several options for improving signage at the Link Centre. Andy Greave from Comms has been working on this for us and his input so far is included in Appendix L. The project will need to consider how to take this forward.

• We had discussions with alighting consultant about improving the lighting on the ground floor. He recommended using LED bulbs – which would last longer, use less energy and save money. He also suggested retrofitting the roundel lights, again to use LED bulbs. This information is included in Appendix M.

Thanks to:

• Task & Finish group - Kirsty Littlewood, Hayley Ashall, Cathy Jackson, Angela Barnes
• Business Intelligence – including Callum Shelley and Jo Charlan
• Link Centre management and staff
• Link Centre Champions and service users
Focus of the Centre
When assessing the Link Centre and its role we need to know what the defined purpose is. At present there is a lack of clarity on this so the review proposes a role to focus the work of the centre.

Support a borough-wide **Well Lifestyle Approach** for vulnerable residents with a view to promoting wellbeing, and preventing, or delaying, the need for more intensive support

The Well Lifestyle approach.

The Link Centre will help and support vulnerable people, who may, or may not access OMBC social care services. We will help them, throughout the borough, to develop and live a Well Lifestyle that will help them to avoid or delay needing more intensive help and support (e.g. council, or healthcare, services.

We will deliver, support or facilitate services, groups and activities that support the focus and aim.

We will achieve this though:

- Providing a safe place for vulnerable residents in the town
- Providing advice and signposting customer to other agencies where we are not able to help directly
- Supporting local groups and charities to offer groups borough-wide for self-help and activities
- Holding Open Days for anyone, and for general information
- Focus Days – based around a theme and involving agencies that can support the theme (e.g. memory, autism, disabled children, transition etc.)
The role of the Link Centre supporting the Prevention agenda

Key Points
- The Link Centre is ideally placed to support the prevention agenda
- Link Centre user base consists of a range of vulnerable groups - who we may want to encompass within the prevention agenda.
- There is potentially space available at the Link Centre for additional staff to be located to carry out prevention services.

Our aim is to prevent the need for more intensive services by:
- Providing advice and practical help to support independence
- Signpost to other agencies and organisations for specialist advice
- Providing and facilitating access to social time and activities to help tackle isolation

Help to support independence

At present the Link Centre provides a Centre for Independent Living showroom, run by AgeUK. This provides a useful service but numbers of customers are low compared to the total customer base of the centre.

Community Occupational Health are based at the centre and carry out assessments there for adaptations and blue badge applications. There is also Physiotherapy support.

The Centre handles Blue Badge applications. This can help disabled residents to remain mobile by making driving and parking easier for them.

We believe there could be other services we could offer to support independence for example:
- Safe place scheme
- Housing and accommodation advice
- Staying safe at home (police, fire service)

Signposting to other organisations

Oldham Information Point

There are many varied groups, organisations and activities that take place around the Borough. The Link Centre contains the Oldham Disability Information Point (ODIP, to be renamed OIP) and we are trialling a new model for this.

The Open Objects project will provide an accessible database of local agencies.

The Link Centre can develop and maintain an understanding of the support groups and charities operating locally and across the Borough. This will need someone to research on an ongoing basis and maintain an up to date view. With this knowledge we would be able to build up a network and signpost residents to groups and activities in their cluster areas.
Website

The centre itself is very accessible but our online information is not so accessible. Ideally we would want web based information to be AAA compliant. See Appendix I for more details.

Tackle isolation

Most of the Groups currently using the Link Centre contribute to at least one of the elements of a Well Lifestyle. We carried out a review of groups who use the centre to identify which support the proposed purpose – see Appendix D.

The groups deliver these elements, where the Y axis shows number of sessions per typical week on the topic:

![Bar Chart showing session frequency by topic]

We believe there are gaps in provision in these areas:

- Support for Work
- Education and training (the majority of the education provision is currently by U3A – which is good, but not a 100% match with purpose)
- Mental wellbeing
- Staying active
- Healthy eating
- Housing and accommodation

There are ways we could improve how we help tackle isolation. An operating café has been cited as a key way that vulnerable residents can meet their friends in a safe environment.
Positioning and delivering within the Cluster model

Key Points
- Groups and service users have indicated that they value the Link Centre as a ‘safe place’ where they can feel comfortable and secure.
- While we should signpost residents to suitable activities in their area, the Link Centre is a valued central hub for vulnerable groups.
- Vulnerable customer groups may need targeted communication online and in writing to support them in their cluster locality.

Supporting Adult Social Care Business Objectives 2016/17
1. Delivery savings
2. New customer journey focussed on prevention
3. A personalised approach
4. Optimise resource allocation and reduce the role of panel
5. Targeted prevention model to decrease demand on ASC
6. Make integration a reality
7. Develop standards around social work practice
8. Develop the local market and enable providers to pay the National Living wage
9. Maximise use of IT – Fwi data will be used to make business decisions
10. Good communication

The Link Centre will address these objectives as shown below. By focussing on, and targeting vulnerable groups:
Customer Journey focussed on prevention

The Link Centre will engage with other services in OMBC and Health to build a service model within which the role of the Link Centre is clearly defined and well understood. Individuals can access the Link Centre at different levels, and at different times in their customer journey.

A personalised approach

The Link Centre will support vulnerable residents to build a mix of advice, links to groups and activities to support an independent lifestyle, increase resilience, and delay or avoid the need for more intensive services. This will require a different approach for different residents.

There are many services that customers will find useful for them to support their lifestyle. For example the Carers group reported that some of them also attended coffee mornings at the Methodist Church and tied this in with their visits to the Link Centre.

There must be examples of groups and activities running all over the District. The Link Centre could help residents identify what is available near them, to suit their specific needs. We could then fill the gaps in provision and make sure that residents know what is available to them.

We will signpost residents to suitable groups and activities in their locality. This will require ongoing research of what’s on around the Borough and in the cluster areas, and an ongoing communication programme with cluster hubs and our customer base.

Optimise resource allocation

The Link Centre can be a centre for volunteering within the centre and across the borough (outreach). This can support the co-operative council model by engaging residents in their own communities.

Targeted prevention model

The Link Centre will target those groups and areas that are a corporate priority, while ensuring that all vulnerable groups are able to access help, advice and support. The Link Centre is all about supporting a lifestyle for vulnerable residents that prevents, or delays, the need for further social or health services.

Our aim will be to provide services, facilities and events targeted at supporting vulnerable residents and developing their lives and independence.

Integration a reality

The Link Centre has on site services from OMBC and Health, as well as access to key charitable, support, and self-help organisations. The building has scope for further services to be on site and should explore the options for true integration.

Good Communication

We need to understand our target customer base and ensure that appropriate, targeted, communication happens to enable them to avoid the need for further health and social care services. The Link Centre can understand the communication needs of vulnerable customers. For example we can advise on the accessibility of online services and information, the content and readability of written material, and dealing face to face with vulnerable customers.
The role of the Link Centre Manager

Key Points
- Management cover is needed across the full opening hours.
- Link Centre Manager should be based at the Centre
- Some change to the organisation structure is recommended

All Link Centre staff report to the LCM. This leaves staff sometimes unclear about who is their ‘go to’ person when they have service related issues. A more structured team would give clearer reporting lines and opportunities for development and career progression.

Organisation diagrams and proposed structure are included in Appendix H.

The previous LCM was heavily engaged in strategic transformation work in other areas of Adult Social Care and this led to less time being spent on the Link Centre itself.

Staff workshops have talked about the Link Centre being in a state of ‘limbo’. The Link Centre Manager should be responsible for developing and delivering the strategic approach alongside adults and children’s social care.

Staff are keen to have a ‘go to’ person on site. Bearing in mind that the Link Centre Manger will have an important strategic role that may continue to take them away from the Link Centre day to day, we feel that a designated deputy post, or posts, should be created.
The future role of the Centre

Key Points

- We feel the Link Centre has a valuable and valued role to perform
- There are various initiatives we feel need to be taken forward to develop the service
- We feel that weekend opening would create opportunities to engage with additional groups
- Some layout changes are recommended to help the Link Centre achieve its purpose
- There is space for more OMBC, or other, staff to work or smartdesk at the Link Centre

Options

Fundamentally the high level options are:

1. Link Centre to continue as is (do nothing)
2. Absorb the Link Centre services into wider Social Care
3. Consider the Link Centre operating as a 3rd sector partnership arrangement
4. Refocus and refresh the Link Centre offer to match Social Care objectives

Option 1 – do nothing

We feel this is not a tenable option. The Link Centre is perceived as being in decline partly because of a lack of direction and partly because the loss of the café has kept users hidden from view and made the building look empty even when there are plenty of groups using the rooms on the 1st floor. The people who use the centre really value it as a safe and secure place. We feel it can offer a lot to the prevention agenda.

Option 2 – Absorb the Link Centre role elsewhere in Social Care

In essence this would mean closing the centre itself as an OMBC service centre, and selling, or renting out, the building.

Option 3 – 3rd sector

There are a number of key players in the 3rd sector market. It may be possible to work with them to maintain the Link Centre and deliver services from there as part of a co-operative model.

Option 4 – refocus and refresh

Our preferred approach is to refocus the Link Centre around a refreshed purpose to support the prevention agenda. In summary this means:

- Carry out some structural work to improve use of the space
- Refresh the decoration and layout – including a big tidy up
- Review use of the centre against purpose, and fill any gaps in provision
- Create a revised staff structure
- Create a Development Plan

The Key Recommendations section lists all the ideas and suggestions to support this option; where possible, indicative costings have been provided. Recommendations have been prioritised by the Task&Finish group against the purpose of the Centre.
Given that this option would allow us to continue developing a prevention service to vulnerable residents, develop income opportunities, and could deliver usable office space for OMBC staff to make savings, we recommend that a refresh plan be developed and fully costed.

The future – summary
The future of the centre should be to support vulnerable residents and deliver the purpose, in the context of the cluster model, and supporting a co-operative model. To do this we have considered several suggestions.

Financing new initiatives
Funding is tight in local government and we would need to find external funding to implement some of these projects either under the Link Centre banner, or in support of community initiatives. In some cases the availability of funding may drive choice of project to take forward.

Possible funding sources would need to be investigated, but there are potential sources available – see Appendix I.

Initiatives and projects going forward under Option 4
During the review there have been a lot of great ideas put forward.

Layout changes
Existing and proposed layout diagrams are included as Appendix G. The high level rationale behind these suggestions are:

- Open up reception and create a welcoming space
- Have customer contact on the ground floors only
- Make space for additional OMBC, or other, staff on the 2nd floor

It may be that not all these layout changes are affordable but there are options that can provide definite advantages.

Organisation changes
Existing and proposed organisation charts are included as Appendix H

Encouraging use by young people
This would require research into what facilities are lacking for vulnerable young residents and what we could provide.

Café
There is significant evidence that almost all users and groups think it’s important to get the café up and running again. This gives a safe and secure place for vulnerable residents to meet and have social time, and spend time before and after group meetings and activities.

There are now plans to open up the café again in tuck shop mode, with the potential for expanding provision.
**Weekend Opening**
We feel that there is demand for weekend opening and there may be some vulnerable residents or groups who would find it easier to access the centre on a Saturday. This will need to be investigated. Staffing will be needed and we would have to carry out a cost benefit analysis on this proposal.

**Safer places**
This is a national scheme, with local implementations. It gives vulnerable residents confidence that they can be independent out and about with nominated placed that that they can use for help or support if they feel lost or need help.

**Transport**
There are some problems with vulnerable residents accessing transport. There is no single answer but the Link Centre could be involved in developing and implementing a strategic approach.

Ring and ride is an option but this is not a perfect solution. Community transport is also a potential partner but we are not clear at the moment about their future plans. The bus stop will hopefully return and we should keep Link Centre users informed.

**Staff awareness and service liaison**
The Link Centre could be an important element in Early Help and prevention of the need for more intensive support. Not all staff are aware of the Link Centre and the services and activities available there. An email survey of social care managers showed that there was a desire to know more. We could do this, for example, through briefings at service meetings, open days and tours of the centre, hosting staff events at the centre.

Awareness needs to be an ongoing activity.

**Communication**
There is evidence from group feedback that vulnerable residents may find standard communication such as leaflets and the web site, difficult.

One of our aims is to support the prevention agenda and one way of doing this is to communicate effectively to signpost residents to organisations and agencies that can provide specialist advice. Open Objects is one way we are supporting this. The OMBC website is not particularly accessible to vulnerable groups. The Link Centre would benefit from its own dedicated web suite, or weblet, that a variety of vulnerable groups would find it easier to access.

A network of display screens could be used within the centre to share relevant information about events and specific news for the day.

**Work, Volunteering and Lifelong Learning**
Learning and working are important elements in a well life and vulnerable residents may find it more difficult to access these. We should establish a line of communication with LifeLong Learning and their Learning Support team to support and encourage vulnerable residents.

- Cookery - healthy
- IT skills
- Employability skills
- CV and interview skills
Open days and taster sessions
This is a way to bring people into the centre who may not otherwise come. We can promote groups and activities at the centre or out in the cluster areas. Transport could be co-ordinated. This is seen as an ongoing programme rather than a one-off event.

Support the cluster model
We are already starting to work on this by sourcing maps we can use in the OIP (Oldham Information Point) to show groups and activities taking place in the locality. In addition there will be notice boards for each cluster area to show group and activities in that area.

Using various means of communication we should also push this information out to vulnerable residents via groups and organisations. It should be possible to use existing contacts to help with this. It may be possible to identify new lines of communication, for example via local Women’s Institutes, church groups,

Support the Co-operative Model
The Link Centre can support the co-operative model by engaging with local agencies and organisations to deliver a range of services for residents. There are proposals around developing the Language Shop in a co-operative context and we will develop relationships with key organisations to support vulnerable residents.
What do people want?

Groups, volunteers, service users
Consultation with groups, volunteers and service users came up with a wide variety of suggestions, and there are some common themes. A full listing is available in Appendix F but here are some of the key points:

- Café should be re-opened and can act as a social hub
- Health sessions
- Daytime and evening sessions
- More information about what’s going on at the centre and beyond
- Lifelong learning
- Staff to have basic sign language skills
- Activities for young people in school holidays
- Training in social and job skills
- Open drop in service for occupational therapy

Staff
Staff workshops identified some good opportunities. The full SWOT exercise is in Appendix E. The strengths and weaknesses identified by staff chimed with comments from users and volunteers.

Opportunities include:

Conferences – we have a good set of flexible, conference style, meeting rooms. We could develop the conference offering as an income generator. The route to the conference area could be along the ground floor and up the far staircase to separate this function from the day to day activities going on.

Better facilities management – sometimes there are bookings we can’t take because there are not suitable rooms available. We could; review long term bookings and ensure that the pattern of room use allows us to take additional bookings. For example many bookings are for 10-12am. By moving some groups to an earlier or later time we could make more room space available for bookings.

Weakness to address include:

- Make the centre busier
- Introduce building meetings (to support communication with customers)
- Improve communication and promotion
- Do more in school holidays
- Expand the age demographic
- Have a certainty of purpose
Finance, savings and income generation

Potential Savings include
- Switch to low energy lighting
- If building used in the evening use only the ground floor and close off the rest
- Restrict evening opening to certain days and review bookings to optimise use of the building when it’s open.
- Smart space on 2nd floor can be used to make savings elsewhere by opening up office space for OMBC staff currently in rented offices

Potential additional income generation
- Additional income from U3A, and other organisations, using the café
- Develop a conference facility on the far 1st floor, and promote
- Implement a fair charging policy for the bathroom (and relaxation room?)
- Review groups charging and implement a membership fee
- Implement fair and consistent charging for office ‘tenant’ organisations
- Run children’s activities in school holidays and when centre is underused
- More private sector involvement (e.g. sales opportunities for local mobility suppliers – either as a shop or open day stall)

Current anticipated / potential income for 2016/17:

<table>
<thead>
<tr>
<th>Client</th>
<th>Income generated (based on FYE)</th>
<th>Included in cost &amp; any notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blue Badge service</td>
<td>£5,550</td>
<td>• Based on financial year 2015/16 income</td>
</tr>
<tr>
<td>Language shop</td>
<td>£39,835</td>
<td>• Based on financial year 2015/16 income</td>
</tr>
<tr>
<td>External translation</td>
<td>£3,700</td>
<td>• Based on financial year 2015/16 income</td>
</tr>
<tr>
<td>Alzheimer’s UK</td>
<td>£1,152</td>
<td>• Office space rental</td>
</tr>
<tr>
<td>Memory Service</td>
<td>£1,200</td>
<td>• Office space rental</td>
</tr>
<tr>
<td>Carers Services</td>
<td>£5,000</td>
<td>• Officer space rental • Meeting room/ function room use</td>
</tr>
<tr>
<td>Henshaw’s Society for blind people</td>
<td>£10,000</td>
<td>• Officer space rental • Meeting room/ function room use • Fully supported reception • Promotion of events • Signposting to service • (See Heads of terms for more details)</td>
</tr>
<tr>
<td>University of the third Age</td>
<td>£2,000</td>
<td>• Meeting room/ function room use • For several meetings per week</td>
</tr>
<tr>
<td>Phab club</td>
<td>£100</td>
<td>• Meeting room/ function room use</td>
</tr>
<tr>
<td>Café rental</td>
<td>£5,000</td>
<td>• Rental of kitchen space • Rental of café serving and seating area • Rental of tables chairs and tub chairs in café seating area • Rental of equipment and tools in Kitchen • (depending on review outcomes this might</td>
</tr>
<tr>
<td>Service Description</td>
<td>Details</td>
<td>Charges</td>
</tr>
<tr>
<td>---------------------------------------------</td>
<td>--------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| **Bathing facilities** (£5.00 per hour use) | Based on currently weekly use of 38 sessions per week £190 x 50 weeks is total of £9,500 per year | • Use of either bathroom or shower room  
• Use of equipment in room  
• Use of hoist in room  
• Risk and use assessment via moving and handling team for user and or carer, PA or family accompanying |
|                                            | If full capacity 80 sessions per week £400 x 50 weeks is total of £20,000 | (Link Centre is the only bathing facility with hoist facility, need to consider cost of invoicing or pay cash on visit. This is based on 9:30 – 5:30 may want to have later appointments and or weekend appointments if building open) |
| **Relaxation Room** (£2.00 per hour use)   | Based on current weekly use of 42 sessions per week £84 x 50 weeks is total of £4,200 per year | • Use of relaxation room  
• Use of equipment in relaxation room  

(This is based on 9:00am – 18:00pm may want to have later appointments and or weekend appointments if building open. If development of room as part of review into a sensory and relaxation room may be able to charge higher amount again need to consider the cost of invoicing or pay cash on visit.) |
|                                            | If full capacity 45 sessions per week £90 x 50 weeks is total of £4,500 per year |  

| **Yearly membership Fee for those groups/ services who cannot afford to contribute more. £25.00 per group** | Based on current numbers of 40 groups this would be a yearly income of £1,000. This charge would be for none profit, volunteer, carer run or individuals with lived experience run, who do not generate income. | • Use of meeting rooms & function rooms  
• Reception supporting service  
• Signposting and referrals through to group  
• Promotion of group in centre and marketing materials  

(These numbers may change based on Centre use. Would need to have a way of evidencing or establishing if the group did not have an income and also invoicing and collecting money would need to be thought out). |
| **Potential total yearly income:** | • Between £88,737 - £101,337  
• (Please note some of the income generated is used to fund Link Centre Staff.) |  

| 18 |
Key Recommendations

Recommendations are listed below. These are categorised by:

| Supports the purpose - Definitely pursue as part of the ongoing project |
| Supports the purpose – Business as Usual - take forward when possible, not necessarily project |
| Done or already underway |
| Consider - but not a priority |

Recommendations have come from consultations, workshops, discussions with managers and staff, observation. Details of all these are in the appendices. All costs are estimates or approximations, no market comparison has been done and no formal quotes have been obtained.

Purpose & Strategy

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Comment</th>
<th>Progress</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gain approval for proposed updated purpose and communicate to staff.</td>
<td></td>
<td>DONE – the Well Lifestyle purpose has been agreed by the T&amp;F</td>
<td></td>
</tr>
<tr>
<td>Produce and agree a re-brand and Marketing Strategy for the Link Centre, including partners and encouraging a co-operative approach to a menu of services.</td>
<td>Investigate the possibility of a Link Centre dedicated website meeting the relevant accessibility standards: <a href="http://www.w3.org/WAI/intro/people-use-web/principles">http://www.w3.org/WAI/intro/people-use-web/principles</a></td>
<td>Some new names have been suggested, which may reflect the purpose better (Wellbeing). Hayley has a draft strategy, which she will send to Angela</td>
<td></td>
</tr>
<tr>
<td>OMBC owns a lot of buildings, (including the Positive Steps building also called The Centre) but also rents office space (e.g. Southlink). The Link Centre gives an opportunity to support space rationalisation by making best use of the 2nd floor.</td>
<td>Consider the Link Centre contribution to the overall space requirement of OMBC. Asset / Estates Management Work is currently underway around the use of Southlink.</td>
<td>Liaise with Estates Management (Cath Conroy) on the wider asset strategy. There may be funding available for some of the proposed changes.</td>
<td></td>
</tr>
<tr>
<td>Consider Early Help drop in or a permanent presence for Early Help at the Link Centre</td>
<td>We feel that a strong link with Early help is needed, preferably an on-site presence or drop in. Link with MASH-ACT transformation project.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carry out visits to, and encourage staff to attend, other facilities and events. Identify learning points for improvement (e.g. The Centre, Failsworth Town Hall, Gallery)</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Review with partner organisations against how well they support out purpose, and the service agreements we have with them</td>
<td>This information will feed into the review of the 2nd floor office space. Consider also the use of meeting rooms by partner organisations.</td>
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Communication

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<tbody>
<tr>
<td>Communication to vulnerable groups needs to be managed / approved by the Link Centre as they understand the needs of their service users. The Link Centre could</td>
<td>This is connected to work underway on the Information and Advice Strategy, and Accessible Information Standard. Could also link with the proposed</td>
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</tbody>
</table>
take a central role in accessible information.
development of a co-operative /
social enterprise model for the
Language Shop service.

‘What’s on this week / coming soon’
display in reception area to inform
users about activities and what
groups there are
Could also use these for a ‘you
said...we did’ update on review
progress – e.g. soft seating.
Debbie ordering
some notice boards

Staff to gain a basic understanding
of sign language
Consider doing this via Lifelong
Learning. We could also offer
courses to others. There was also
a volunteer from the Carers
group to offer basic training.

Regular communication with users
of the building – e.g. Health teams
This could be for instance via BUG
meetings (Building User Group)

Leaflet displays to be rationalised
and kept up to date
Champions could do this as part
of OIP.

Loop system – review this and
consider expanding to other rooms
Need to contact Unity about this

Regular communication to groups,
service users, and vulnerable
residents out in the community who
may benefit from our services.
Consider best ways to communicate
to different groups.
For example – updates on when
the bus service will be back.
Newsletters? Large print? Notice
boards? TV display screens? Liaise
with hubs and groups? Etc.

Create an Accessible website to
promote Link Centre and OMBC
services.
Aim to meet AAA accessibility
standards. See links in Appendix I.

Proposed Project areas
Prioritise the ongoing project areas covered in the section ‘Future Role of the Link Centre’. Some of these
could be considered as part of an implementation project, some could be done straight away. Others could be
a requirement for a policy approach for business as usual in the new environment.

There may be options to get funding for some of the suggestions. See links in Appendix I.

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<tbody>
<tr>
<td>Safe places</td>
<td>This is a scheme we could implement in Oldham town centre to support independent living. See link in Appendix I to general info and the Wakefield scheme.</td>
<td>Contact made with Asif, who has experience of this: Asif Amann Transformation Officer Wakefield Council 01924 303889 <a href="mailto:aamann@wakefield.gov.uk">aamann@wakefield.gov.uk</a></td>
<td></td>
</tr>
<tr>
<td>Young people</td>
<td>Develop a strategy to get more young people into the centre. E.g. promote in schools – particularly around issues with mental health</td>
<td>NB. CAMHS is now known as Healthy Young Minds.</td>
<td></td>
</tr>
<tr>
<td>Staff awareness and service liaison</td>
<td>E.g. Encourage OMBC to hold meetings here – promote staff tours. Ensure that social care and Health teams understand the Link Centre offer. Evangelise!</td>
<td></td>
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</tbody>
</table>
## Work, Volunteering and Lifelong Learning

Develop a Strategy to offer this within the Centre. Link with OMBC volunteering Policy; are there ways we can support these scheme at the Link Centre? Volunteering has a pivotal role to play in developing a co-operative approach.

LifeLong Learning are able to support this. Key contact is Catherine Lavell – Learning Support Manager.

### Support the cluster model

Ongoing engagement with clusters and 2-way communication to support vulnerable residents. E.g. Mini-Link drop-ins at Hub centres and ECH bases.

### Open days / taster sessions

Use these to fill provision gaps to deliver on purpose. E.g. healthy eating, U3A coffee mornings. Link into key Public Health issues

Liaise with U3A, who have asked to use the café space for coffee mornings

## Organisation

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<tr>
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<tbody>
<tr>
<td>Agree a revised organisation structure to deliver the purpose</td>
<td>An example is given in Appendix H. Need to ensure that the necessary tasks to deliver the purpose are resourced.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consider the need for weekend working and the benefits and implications of this.</td>
<td>Current staffing does not cover weekend opening. Suggested staffing could be on a rota basis.</td>
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<tr>
<td>Recommended that group liaison be a function allocated to someone in the organisational structure.</td>
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<tr>
<td>Ensure that the Link Centre staff benefit from an ongoing workforce development programme</td>
<td>For example – Sign Language training.</td>
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<tr>
<td>Ensure that Link Centre Champions are given development opportunities and can contribute to the development of centre</td>
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## Health & Safety

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</table>
| Ensure safety of staff.  
  • Avoid lone working where possible and apply policy when necessary | Lone working has been raised as a H&S concern by staff. There are policies around this, and risk assessment has been carried out, but can we avoid lone working? | | |
| Ensure safety of customers.  
  • Group leaders to sign in on arrival and collect ‘group pack’ which would contain relevant information. | We don’t ask everyone coming in to the centre to sign in. For group meetings there is the risk that people are waiting in a room for a group when the leader can’t make it, and we don’t know. | | |
<p>| Life buttons too high for small | | | |</p>
<table>
<thead>
<tr>
<th>Recommendation</th>
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<tbody>
<tr>
<td>wheelchair users (does this include the alarm button?)</td>
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<tr>
<td>Install a defibrillator and train people in use</td>
<td>This could be considered as a future facility and could be installed at zero cost.</td>
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<tr>
<td>Review panic button system – is it working effectively? Is there a button at reception?</td>
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<tr>
<td>When building is in use in the evening try to keep use to the ground floor only where possible, with doors to upper floors closed and locked to reduce risk to staff. Access only via front door, lower ground access locked.</td>
<td>Also consider the need for evening opening. Should use be rationalised to minimise late evening use?</td>
<td></td>
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</tr>
<tr>
<td>Review the lifts and consider maintenance agreements / replacement cost. Lifts are often out of order and it seems to take a long time to resolve issues.</td>
<td>Do we need a ‘big fix’ or improved maintenance? Civic Centre lifts being replaced this year.</td>
<td>I have been trying to get information on this issue from Unity but no success to date. Cath Conroy has progressed.</td>
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</table>

**Groups & Activities**

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<tr>
<th>Recommendation</th>
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<tbody>
<tr>
<td>Review groups list for closeness of fit to purpose – identify gaps and plan ways to fill the gap (e.g. young people after transition – POINT provide support up to age 25))</td>
<td>Review is underway. Finding groups to fill gaps will be part of Business as Usual.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Create a clear, fair, flexible and transparent (and simple) charging strategy</td>
<td>This is already under review. Some sample information on local room booking prices is included in Appendix K.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Offer options for day and evening groups to allow for more choice</td>
<td>This may help to spread groups out across the day and relieve pressure on meeting rooms at popular times.</td>
<td></td>
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<tr>
<td>Public speakers on key topics</td>
<td>Service users have mentioned this in survey responses.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social events</td>
<td>Service users have mentioned this in survey responses.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Review Room Bookings process</td>
<td>Review the bookings process and consider improvements to make it more efficient</td>
<td>Initial process map developed and is under review by staff on Reception.</td>
<td></td>
</tr>
<tr>
<td>Groups to have their own designated notice boards on the 1st floor corridor so everyone can see what’s going on.</td>
<td>Notices on walls are now being taken down. Debbie ordering notice boards.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Activities for children in school holidays</td>
<td></td>
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<tr>
<td>MIND academy – a specific request was made for accommodation to support the MIND Academy. MIND in general have asked about using</td>
<td>Not clear where this has got to. To be followed up. Gary Flanagan (NHS) and Cllr G Harkness.</td>
<td>Could use the PC area or a new IT training room for this.</td>
<td></td>
</tr>
</tbody>
</table>
Room scheduling – review the current process and identify improvements

At present there are peaks times for use, if we could spread use across the day we could release capacity. Also can review evening use to ensure it is cost efficient for us to open, and staff, late into the evening. E.g. evening opening on some days and not others?

Building

Where remodelling work is recommended this will need input from The Estates Team and Unity. There is the possibility of bidding for CIFPO funding based on a sound business case. The building is not currently under the Corporate Landlord but this could be considered as a suitable arrangement.

General Interior

<table>
<thead>
<tr>
<th>Recommendation</th>
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<th>Cost</th>
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</thead>
<tbody>
<tr>
<td>Refresh paintwork where needed</td>
<td>Possibility of staff volunteers doing painting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ensure toilets are checked for cleanliness, accessibility and supplies.</td>
<td>Based on reports about hard to reach toilet roll, and a customer being locked in a toilet.</td>
<td>Notices on walls are now being taken down. Debbie ordering notice boards.</td>
<td></td>
</tr>
<tr>
<td>Notice boards to replace notices on walls</td>
<td>Notices on walls are proliferating and making the building look untidy and unprofessional. Recommend all notices are removed.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Notice Boards for cluster areas</td>
<td>Create a notice board for each cluster area to highlight and promote activities and facilities in the locality.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discuss building maintenance arrangements and agree the best way forward.</td>
<td>Would there be benefits to the building being under the Corporate Landlord?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>‘theme’ rooms</td>
<td>Some groups (younger) have said the rooms are plain and they would like posters etc. Meeting rooms could be themed (with a light touch) so they appeal more too key groups.</td>
<td>Possibility of a student to carry out some interior design work.</td>
<td></td>
</tr>
<tr>
<td>Spring clean of office areas is required – clear out paperwork, posters, old information, that isn’t needed etc.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Implement new templates for room signage, with braille. Implement other minimal cost improvements to improve signage.</td>
<td>A brief initial report on options for signage has been produced by Andy Greaves of the Comms team – see Appendix L</td>
<td>Updating the main signage system would cost £4 per panel, there are multiple panels per sign.</td>
<td></td>
</tr>
<tr>
<td>Ensure that the building is as accessible as possible – e.g. for the visually impaired, dementia / autistic friendly signage; use of symbols on signage (e.g. Widget),</td>
<td>Actions are already underway on signage but this needs to be reviewed further and improvements agreed as required. For example if the</td>
<td></td>
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</table>
Exterior

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Comment</th>
<th>Progress</th>
<th>Cost</th>
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</thead>
<tbody>
<tr>
<td>Remove ‘to let sign’</td>
<td>This was large and made it look like the whole building was to let.</td>
<td>Done</td>
<td>£60</td>
</tr>
<tr>
<td>Reduce size of no smoking sign</td>
<td>This is quite intrusive</td>
<td>Large sign can be removed and replaced – no corporate implications.</td>
<td>Approx. £30-40 for an A5 acrylic external sign (e.g. Appendix I)</td>
</tr>
<tr>
<td>Consider using the large frontage to have a new, bigger, and more vibrant sign. Possibly as part of rebranding – include partner names in signage and external ‘menu of services’</td>
<td>We would need to agree a name and include this in a rebranding and launch.</td>
<td>Andy Greaves from Comms has provided initial information on this. See Appendix L.</td>
<td>Lettering to put on the front could cost as little as £450 and up to £300 depending on the option. Need to add cost of install.</td>
</tr>
<tr>
<td>Link Centre sign at front door to be in different languages</td>
<td>This is not OMBC policy. Advice is that braille is not necessary on external signage.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parking is seen as a problem</td>
<td>Parking is limited. Unlikely to be able to address this issue. There is parking nearby, a bus stop and park&amp;ride.</td>
<td>Staff to promote the 3 hour blue badge parking on Greenhill Passage if required. Cathy to check status of park&amp;ride.</td>
<td></td>
</tr>
<tr>
<td>Have clearer Link Centre and OMBC signage at the rear entrance on this level.</td>
<td>If signage on the front entrance is changed then the sign currently at the front could be used here.</td>
<td></td>
<td>Approx. £300 if a new sign is required</td>
</tr>
<tr>
<td>Use of symbols to help people understand signs</td>
<td>See Widget website – Appendix I</td>
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</table>

Lower Ground floor

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Comment</th>
<th>Progress</th>
<th>Cost</th>
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</thead>
<tbody>
<tr>
<td>Store rooms need tidying – some personal paperwork was seen down there – looks like health related records</td>
<td>Well organised store rooms here could be used to relieve pressure on storage elsewhere.</td>
<td>Racking has been ordered to help keep store rooms tidy</td>
<td></td>
</tr>
<tr>
<td>Consider dividing one of the store rooms if required to allow groups storage.</td>
<td>May also be useful to set aside more storage for Link Centre purposes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Create COTS assessment area:  
  • current meeting room to be demo room for lounge  
  • Current relaxation room to be demo area for bathroom  
  • Physio room to be reviewed – could contain an office area for blue badge assessments | The COTS assessment rooms (currently on the 1st floor) are less well used than we had thought. | | |
<p>| Fire doors need clearer signage as | Possible use of frosting and | | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Redesign reception area</td>
<td>The reception desk is somewhat hidden when you come in. Extend the desk into the foyer and add a lower level desk, with appropriate clear signage.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PC area – this was monitored by Unity, and there was no untoward use recorded</td>
<td>This has already been changed around and the new layout will be reviewed. Consider adding clear signage that use is monitored. Could add a printer for printing CVs etc. It’s important that OMBC staff do not use PCs in public areas for work purposes because of the information security risk.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Refresh reception area</td>
<td>Consider Plants, displays, changing exhibitions. Consider piano options to get music into the Link Centre for singalongs etc. (see Appendix I)</td>
<td>Consider ‘borrowing’ art from the gallery</td>
<td></td>
</tr>
<tr>
<td>Create a ground floor office for all / most Link Centre staff – incorporating the small office off the foyer</td>
<td>Staff are currently scattered and there are few staff on the ground floor to support customers and volunteers.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Move Blue Badge service to ground floor.</td>
<td>This is to help keep customer service to the ground floors as much as possible.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Create a renewed OIP - including soft seating social area</td>
<td>Groups and service users have asked for this - currently under trial.</td>
<td>Hayley has produced ToR to take forward the ODIP-OIP project.</td>
<td></td>
</tr>
<tr>
<td>Create small meetings rooms</td>
<td>These are for 1-1 meetings for e.g. blue badge discussions, counselling sessions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Re-open the cafe</td>
<td>This is key to the success of the centre. Currently considering options (tuck shop)</td>
<td>Also reviewing options for vending machines.</td>
<td></td>
</tr>
<tr>
<td>Current volunteers room to be a youth themed room, IT training room or additional smaller meeting room.</td>
<td>Could be a combination room for IT and youth groups. Fits around 10 people? Alternatively could be an additional multi-purpose meeting room.</td>
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**Ground floor**

The ground floor is currently undergoing some trial changes and will be reviewed again once we see how these work.
Open and empty current lockers – perhaps warning people first.

Lockers – replace current lockers with padlock versions so users bring their own locks

Review lighting and options for improvements and cost savings

AGEUK showroom area needs a spruce and tidy. Move display tables out of corridor area.

Create a preferred access route to the 1st floor conference area via the far staircase.

Windows and blinds

**First Floor**

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<tbody>
<tr>
<td>Assisted bathing to remain. We could consider not offering this service but it is well used and we are minded to retain; will apply the new fair charging policy to use.</td>
<td>Could consider moving this in future but it is likely to be expensive. Very drab area. Recommend a refresh – tiling etc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Relaxation room to move to 1st floor where COTS lounge suite was, where natural light levels can be adjusted.</td>
<td>Need to consider whether this is the right place – the adjacent meeting room could be used for noisy meetings. The room is used but not massively. <strong>Need to decide whether to retain, upgrade and charge for, or stop provision and use this space for another purpose.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kitchen to be refreshed. (Lower priority for refresh – but note clutter comment)</td>
<td>Recommend new doors, and paint, to refresh. Can we have doors with keypad locks for group storage? Need to avoid clutter to assist with use by visually impaired customers. – use store room.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meeting rooms to be refreshed and / or themed.</td>
<td>Staff have volunteered to paint. This will help some users to identify their correct meeting room. – e.g. themed by colour, symbols, images</td>
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<td></td>
</tr>
<tr>
<td>Create and Promote a conference facility from the 1st floor function rooms. Consider how to gain income</td>
<td>Could we promote this more to charities etc.? A base for your AGM? May require some</td>
<td></td>
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</table>
from this.
upgrading of rooms / toilets.

| Create improved toilet area for conference suite. | This would be for Link Centre and group storage to leave the 120 store room for Link Centre use only. Need to review groups’ storage requirements. |
| New store room to be created where COTS bathroom suite was. | We feel this would be better used as a meeting / breakout room. |
| Current store room could be turned into a breakout / meeting room if groups use a different storage area (new store on 1st floor or created store on lower ground for infrequently used items) | |

**Second Floor**

Changes proposed on this floor assume that the partition walls can be easily removed / moved and that the required IT changes can be accommodated. Space planning will be needed to establish exactly what could be achieved and how the space can be best used,

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<tbody>
<tr>
<td>Office spring clean needed – some offices are very untidy and possibly excess paper storage.</td>
<td>There are tea/coffee facilities and fridges in some offices – these can be removed to the proposed new kitchen area. Can some stuff be moved to lower ground store room?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Move blue badge office to OIP on round floor, create a breakout area here for staff and volunteers</td>
<td>This means losing a unisex toilet and male/female toilet. Part of Memory Service office would also be lost.</td>
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<tr>
<td>Create a new OBMC meeting room</td>
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<tr>
<td>Create a meeting room for use by COTs and other partners</td>
<td>This will reduce demand on the other meeting rooms in the centre</td>
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<td></td>
</tr>
<tr>
<td>Consolidate the various partner offices to save space and support smart-desking</td>
<td>Need to review usage agreements against benefits to Link Centre and customers.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provide a staff kitchen area</td>
<td>This could be a separate room, but could also be a kitchenette in the breakout area - to reduce people carrying hot liquids around. (also leaving more space in the OMBC smart office)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Create ‘smart office’ are with drop in facilities for OMBC or partner organisation staff.</td>
<td>This seems to be mostly about moving partition walls, but there are also issues around flooring / carpeting and IT provision. Possibility of saving cash spent on renting office space elsewhere. There is already a report (Cathy) on some options for re-fitting offices with hot desks.</td>
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</tr>
<tr>
<td>There is only 1 male toilet left on this floor if we create the breakout space, and a number of cubicles for women. Consider reorganising the toilet space</td>
<td>We think that this is adequate provision as there are toilet facilities on the 1st floor also. Ref Civic Centre where toilets for either sex are on alternate floors.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>