# 11 – 12 INGESTRE ROAD, LONDON NW5 1UX

### ASSISTED LIVING PROPOSAL

## FRAMEWORK OPERATIONAL PLAN

Prepared on behalf of Four Quarters (Ingestre Road) Limited

September 2018



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#### **1.0 INTRODUCTION AND BACKGROUND**

- 1.1 ExtraCare Solutions was set up in 2008 to advise land owners, developers and operators on best practice in the Healthcare and Housing Sectors. To date the company has advised on schemes for clients such as Berkeley Homes, Care UK, MHA, McCarthy and Stone amongst others. This has resulted in the development of over 500 units to date in the private for sale and affordable sectors with a further 300 units in the pipeline.
- 1.2 ExtraCare Solutions has been instructed to advise the applicant, Four Quarters (Ingestre Road) Limited, on the design and development of the proposal to redevelop the former Ingestre Road Care Home site to provide a modern 'Assisted Living' development, which comprises housing specifically designed with the needs of older people in mind, with varying levels of care and support available on site.
- 1.3 This Framework Operational Plan provides an overview of the assisted living proposal and sets out how the facility could be operated by a future Care Provider.

#### 2.0 ASSISTED LIVING AND FRAMEWORK OPERATIONAL PLAN

- 2.1 This Framework Operational Plan has been prepared by Extra Care Solutions on behalf of Four Quarters (Ingestre Road) Limited ('the Applicant') in support of its Full Planning Application submitted in respect of the redevelopment of 11-12 Ingestre Road, Kentish Town NW5.
- 2.2 The proposed development comprises the redevelop of the former Ingestre Road Care Home for the Elderly site to provide a 6-storey modern and high quality 'Assisted Living' facility delivering 50 later living apartments for the over 55's.

#### Assisted Living

- 2.3 The residents of this development will have their own self-contained homes with their own front doors, but with care support close at hand and on call if help is needed anytime day or night. As explained in more detail below, a range of additional services and facilities will available, affording the opportunity for social interaction as desired.
- 2.4 It is anticipated that most of the Assisted Living units will initially be occupied by couples or individual who are at a stage of their lives where they are starting to require care before they become too elderly and infirm to cope with moving to a new house. Prospective occupants of the Assisted Living extra care units are therefore likely to be at least 55 years old, although it is anticipated that most residents will be more than 55 years old.
- 2.5 Future residents will also be in need of an element of care, and care needs may be driven by medical conditions brought on by the onset of old age or because of an accident or fall meaning a degree of supervision and assistance is required to help with daily life. A 'care menu' will be available to residents to provide additional bespoke care services tailored specifically to an individual's needs. These services can be adjusted throughout an individual's occupancy.

#### Communal Facilities

2.6 Residents will benefit from full access to a range of communal facilities that have been selected and designed to support all mobility and need requirements. These facilities will also assist in creating a community spirit through opportunities for active and passive social interaction. The range of on-site care and treatment facilities will mean that there will be a larger proportion of communal / shared facilities in comparison to other conventional older persons' accommodation. The shared facilities will include:

- A range of nursing, personal and domestic care services. These services will be available 24 hours a day, 7 days a week. Nursing and care will be provided by an on-site team coordinated by the end operator;
- Landscaped areas and courtyard space, a communal bar and lounge area and a hobby and craft room; to foster a sense of social inclusion, enabling the opportunity for parties or gatherings and for general relaxation. Communal activities with formal and informal support from on-site and visiting staff, including fitness advice and coaching, guest lecturers, social events including theatre;
- A cafeteria (8am to 6pm Mon-Saturday, Sundays and Bank Holidays 11am to 4pm) will provide hot food and refreshments, which will be open to the public;
- A mini- gym, for the use of residents to cater for the wider health and well-being aspects of life for those wishing to maintain a higher degree of activity. Opening hours will be 24/7 for residents via controlled access. A discounted membership rate will be offered to residents of the wider community who are over the age of 55 with access to these facilities available between 11am to 4pm, 7 days a week;
- On-site hairdressing and beauty treatment facility (10am to 7pm Monday to Saturday, closed Sundays and Bank Holidays), again for the use of residents and public alike;
- Parking facilities include eight Disabled Blue Badge spaces. Two concierge spaces for electric vehicles owned by the management company will also be provided, with residents afforded access to the electric cars on a booking basis for shopping/ medical appointments, to assist residents in the transition from no longer having access to their own private vehicle. Cycle and scooter charging spaces are also provided for the residents;
- Residential medical care consultation rooms;
- Staff and laundry facilities; and
- Guest suites, similar to hotel rooms, will be available for visiting friends and relatives.

#### Ownership and Management

- 2.7 The Assisted Living units would be sold on a long-leasehold basis, with the whole development managed on behalf of the freeholder by a management company.
- 2.8 The building will employ a full time Manager who will oversee the running of the facilities and the care provision. In addition, there will be a Manager responsible for the overnight shift.

- 2.9 The Care Provider will be CQC registered and carers will provide 24-hour care when required. Each resident will have an individual care needs assessment prior to the purchase of an apartment and will have a personal contract Care Plan with the care provider. Typically, these plans are reviewed regularly as greater care needs become apparent and the type and amount of care is adapted to suit the circumstances.
- 2.10 It is not envisaged at this stage that there will be residents diagnosed with dementia unless it is late onset dementia with little deterioration in recent years.
- 2.11 In a typical case a resident would require 2-4 hours care per week at the outset rising to 10 hours per week when they have been resident for three years. Care costs will be dependent on local market conditions. The developer of the scheme is committed to seeking a best value high quality care operator.
- 2.12 During the first year it is envisaged that the care service will adapt to the number of residents and their needs as units are sold and residents move in. This is a similar process to that in Care Homes.
- 2.13 At this stage no decision has been made as to whether the onsite care provider would provide domiciliary care to local non-residents in their own homes.
- 2.14 Whilst this is a high-level intentions plan, a much more detailed plan will be provided in conjunction with the chosen Care Provider to secure Care Quality Commission registration for the building.

#### 3.0 CONCLUSION

- 3.1 ExtraCare Solutions was set up in 2008 to advise land owners, developers and operators on best practice in the Healthcare and Housing Sectors. To date the company has advised on schemes for clients such as Berkeley Homes, Care UK, MHA, McCarthy and Stone amongst others.
- 3.2 ExtraCare Solutions has advised the applicant throughout the design process and considers that scheme compares favourably with an equivalent McCarthy and Stone Retirement Living Plus scheme (McCarthy and Stone currently has a 70% share of this market), and complies with all the required Disability and Discrimination Act and also reflects findings from the most recent "Housing Our Ageing Population: Panel for Innovation" (HAPPI) report.
- 3.3 While this document provides a Framework Operational plan, a detailed plan will be prepared when a highquality operator is chosen by the developer and this will form part of the registration submission to the Care Quality Commission prior to the opening of the scheme in 2020.
- 3.4 In conclusion, Extra Care Solutions is confident that the proposals reflect local demand and future needs and communal areas that provide sufficient space and amenity for residents and an incoming Care Quality Commission Registered Care Provider.