

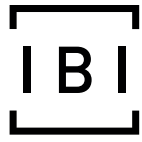


Design and Access Statement

Kingston Dementia Nursing Home 2020

Submitted to Royal Borough of Kingston-upon-Thames
by IBI Group





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Architecture

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1. Introduction

1. Introduction

This Design and Access Statement has been prepared by the IBI Group on behalf of the Royal Borough Kingston upon Thames and IHP in support of a planning application for the proposed redevelopment of the former RBK care home site on Brown's Road between Alpha Road and Warwick Grove, Surbiton, KT5 for the proposed development of a residential care home (Use Class C2).

The proposed Dementia Nursing Home will provide high quality care and accommodation for frail elderly people offering a fresh, positive, sustainable and modern approach to living for people in their later years. It will cater for some of the most vulnerable older residents of the Royal Borough of Kingston upon Thames (referred to as RBK in the rest of the document).

The proposed facility will be registered with the Care Quality Commission and falls within Use Class C2 of the Town and Country Planning Use Classes Order 1987. It offers a range of care suites for the frail elderly including nursing care and dementia care. Residents have access to a wide range of communal facilities including activity spaces, assisted bathing and therapy space.

This development offers the opportunity in the Borough to provide a much-needed nursing home for older people with a range of dependencies and care needs. Most future residents of the care home will be over the age of 85 and cannot cope in their own homes without high levels of care.

The application site has an area of 0.43Ha and is located on the southern half of land bounded by Brown's Road to the south, Alpha Road to the east and Warwick Grove to the west.

The site and its immediate context currently contains a collection of one to three storey non-descript properties. The site is adjoined by current

and potential redevelopment sites at South Place and Alpha Road. A four storey residential development at South Place has recently been granted planning permission and has been a key consideration in the siting, massing and the appearance of the proposed care home.

It is recognised that the proposed development should not prejudice the potential development of the current Children's Centre Site at Alpha Road.

The redevelopment of the proposed site offers the opportunity to enhance and architecturally repair the area and unify the collection of development sites that form this island site. It is important that the development enhances the character and setting of the area that is adjacent to Fishponds Conservation Area and Fishpond Park. The site itself is not in a Conservation Area.

There are no existing trees of significance on the site. The existing buildings on the site are in poor condition and are currently unsuitable for the modern standards of a care home.

The care home will provide accommodation for up to 80 residents and aims to employ local residents as staff and as volunteers for the home. Local businesses are welcomed as sponsors for the gardens, engaging the care home with local community and it is intended that the local artist and design students will be involved in creating bespoke art and design pieces for the home.



The proposed care home development has been designed in consultation with the RBK.

A pre-application submission was made last year and detailed written comments from the Council were received in February of this year. The principle of developing a care home on the site was accepted and the Council are keen for the site to be developed but it was recommended that design changes were made to the boundary walls. Those suggested changes and concerns have been carefully considered and implemented in the accompanying application. Section 4 of this document sets out a detailed response to the specific matters raised by the Council.

The proposed new development comprises the demolition of the existing buildings and construction of a new registered care home for the frail elderly on the site, part three and part two storeys in height, following the layout and massing principles described in the design section of this Design and Access Statement.

A parking court is included to provide parking for 18 cars, two disabled parking spaces and drop off bay for two mini-buses along with some ancillary accommodation such as refuse collection area. This area is designed as a home zone with high quality hard landscaping and planting, welcoming and accessible.

There will be a secure and protected landscaped courtyard garden on the south side of the building

providing an essential external amenity for residents who, due to dementia or frailty are not able to leave their homes unaccompanied any longer. Benefits of high quality external amenity for people with dementia is described in the recent assessment of the scheme by Stirling University DSDC:

“The provision of an enclosed, secure garden will aid residents quality of life and help sustain their independence for longer”

There will also be areas of landscaping around the perimeter of the building to integrate the building into its setting and all ground floor care bedrooms are provided with their own patio.

The nature and use of the care home requires some key differences in design compared to the approved residential scheme. These include:

- The care home typology requires that this is a single building with continuous floor levels to enable residents and staff to enjoy level access throughout the whole building.
- There is a single, secure main entrance for residents, staff and visitors off the parking court, which allows for a generous set down area for residents and visitors to the care home and provision for deliveries.
- A care home will have a series of interconnected spaces offering a range of communal uses for residents and families, connecting directly with the

ground floor landscaped courtyard. It also offers the opportunity to create a vibrant, active frontage to surrounding streets to the south, east and west of the site.

IBI Group (UK) Ltd. , February 2019.

A number of supporting documents will accompany the application as follows:

- Planning Statement
- Statement of Community Involvement
- Transport Statement
- Daylight & Sunlight Assessment
- Noise Assessment
- Archaeological Assessment
- Ground Condition & Contamination Survey
- Sustainability & Energy Statement
- BREEAM Pre-assessment
- Drainage and SUDS Strategy
- Ecology
- Flood Risk Assessment
- Lighting Assessment



1.1 Background

The population of the UK is set to age dramatically over the coming years, with a substantial increase in the number of people living to over the age of 85, when dependency levels and the prevalence of dementia increase dramatically. Nationally, approximately 33 per cent of existing elderly nursing home provision is not to the standard required to cope with the needs and expectations of today's elderly nursing-home residents.

There is a significant unmet need for additional elderly care home beds within RBK area as well as nationally. LaingBuisson's Care of Elderly People UK Market Survey (27th edition) states that the percentage of the UK population over the age of 85 is projected to multiply more than five times, from 1.6 million in 2015 (2.3 percent of the population) to 7.8 million in 2086 (9.0 percent of the population), while the 75- to 84-year-old segment will rise from 3.8 million in 2015 (5.6 percent of the population) to 7.5 million in 2086 (8.7 percent of the population).

The demand for care rises dramatically with age. Approximately 0.62 per cent of persons aged 65 to 74 live in a care home or in a long-stay hospital setting, rising to 15.67 per cent for the over-85s.

1.2 Definition of a care home

Elderly care homes fall within Class C2 ("residential institution") of The Town and Country Planning (Use Classes) Order 1987.

Elderly care homes operate in a highly regulated sector administered by the CQC, which is responsible for registering and monitoring elderly care homes across all sectors as well as other care providers, such as domiciliary care agencies. The regulation of health and adult social care is governed by the Health and Social Care Act 2008. There are approximately 19,700 care homes in the United Kingdom, around 11,900 of which care for elderly people, according to the A-Z Care Homes Guide 2016.

Care homes provide personal care and nursing care, both of which can be provided within registered care facilities. The subject community will be seeking to cater towards elderly frail, in a self-contained nursing facility, and dementia sufferers, in a personal care setting. Personal care or residential elderly care homes, as they are sometimes referred to, provide both short-term and long-term accommodation to elderly people. They also offer help with personal hygiene, continence management, food and diet management, counselling and support, simple treatments, personal assistance with dressing, mechanical

or manual aids and assistance getting up from or going to bed. Nursing homes offer the same services as personal care homes, but also provide registered nurses to care for residents with more complex health issues as prescribed by doctors. These nurses are available 24 hours a day.



1.3 Growing Demand for Dementia Care

The term “dementia” describes a set of symptoms that include loss of memory, mood changes and problems with communication and reasoning. There are many types of dementia, the most common being Alzheimer’s disease and vascular dementia. Dementia is progressive, which means the symptoms gradually get worse’ (source: Alzheimer’s Society website).

Both personal care and nursing homes can provide care to persons suffering from dementia and/or Alzheimer’s disease. Whilst the preference is always to try and maintain an individual’s independence at home, this is not always possible, given the nature of the condition.

Nationally, there are a large number of mixed-registration homes caring for both elderly frail and dementia sufferers; this is acknowledged to be operationally challenging, as most homes lack the specialist design and layout to meet the complex needs of the service users’ requirements.

As with the need for care in a residential setting, dementia prevalence increases rapidly with age. In the 65- to 74-years age group, dementia prevalence ranges between 1.3 and 2.9 per cent, but rises steeply to between 20.3 and 32.5 per cent for those aged 85 years and above. Thus, with more people living longer, the number of people with dementia

is also increasing significantly. Already two-thirds of people living in elderly care homes have dementia; an issue that the National Dementia Strategy 2009 stated had ‘not been planned for’.

The following statistics have been sourced directly from the Alzheimer’s Society website, which provides useful background on the condition and its growing importance in the UK social and health care sector:

- There are currently 800,000 people with dementia in the UK, with 17,000 below 65 years of age and 11,500 from black and minority ethnic groups;
- There will be over a million people with dementia by 2021, with the proportion of people with dementia doubling for every 5-year age group;
- Two-thirds of people with dementia are women and one-third of people over 95 have dementia;
- 60,000 deaths a year are directly attributable to dementia;
- Delaying the onset of dementia by 5 years would reduce deaths directly attributable to dementia by 30,000 a year;
- The financial cost of dementia to the UK was £23 billion in 2012;
- Family carers of people with dementia save the UK over £8 billion a year;



- 64 per cent of people living in elderly care homes have a form of dementia;
- Two-thirds of people with dementia live in the community while one-third live in an elderly care home, and only 40 per cent of people with dementia receive a diagnosis.

A study published in the Lancet medical journal in July 2013 suggests there are only 670,000 people living in the UK with dementia. This is down from 800,000– 900,000 people in previous studies. The decline is attributed to a reduction in the prevalence of known risk factors, such as cardiovascular disease, as well as more people spending longer in education. However, the risk factors associated with the disease are still not fully understood and this figure could fluctuate over time, particularly given the increasing prevalence of obesity in the population. The Alzheimer's Society has produced a report (Low expectations: Attitudes on choice, care and community for people with dementia in care homes, February 2013) that sets out quantitative and qualitative research on dementia provision in the UK. 8.7. The Alzheimer's Society recognises that for people with moderate and severe dementia needs an elderly care home placement may be the safest and most sustainable option available. Their report states that: 'While there has been significant focus on delivering care to people in the community in recent years, care

homes remain often the most appropriate place of care for many people with dementia, especially those with more advanced dementia' (page 5). 8.8. It also goes on to state that there is significant evidence that the environment that people with dementia live in can have profound implications for their quality of life. Dementia can make it difficult for people to negotiate environments, potentially increasing the risk of accidents.

Furthermore, many people with dementia are prone to walking about, and need environments which can enable this while remaining safe and secure' (page 26).

'The focus on new-build care homes should be on how environments can support good quality of life for residents, and existing good practice design guidance should be considered early on in building processes' (page 29).

Whilst the document also considers other outcomes in a very positive light (including domiciliary care and other alternatives), the above illustrates that provision of residential care is an important part of the approach required to tackle the increasing demographic pressures and increased levels of acuity in care home placements.



1.4 Strategic Brief

The Design Criteria for the project are to : refurbishments over the life of the building. contract (Design and Build).

- Build a dementia nursing home for older people with a capacity of at least 80 beds on the site of the former Newent House Care Home, Brown’s Road, Surbiton, KT5 8SP
- Provide a high quality living and working environment that is attractive to residents/ patients and staff and meets criteria for excellence in dementia care
- Be efficient to operate with particular emphasis on i. the care and supervision of patients/ residents ii. operation and maintenance of the building
- Achieve a high standard of fire safety, including mechanisms for evacuation of non-ambulant patients and installation of an appropriate active safety system (sprinkler system)
- Building life is expected to be 40 years with three major (landlord responsibility)

- Handover: December 2020

The Council’s overall business objectives for the project are :

- To assure an adequate and financially sustainable supply of good quality nursing care in Kingston for older people with higher acuity support needs.
- To develop a commercially viable nursing care business blending income from public funds with income from people who fund their own care.

The Council will own the home and lease the building to a Local Authority Trading Company wholly owned by the Council which will operate the home and provide all services.

The Council will be the contracting body for this

Kingston Dementia Nursing Home 2021

Delivering dignity in dementia care

The dementia nursing home in Brown's Road, Surbiton will be built and owned by the Borough and operated by a new, wholly Council-owned health services company to be formed in Autumn 2019. The project is being driven at pace in order to meet urgent demand for high-quality dementia care services.



A safe, secure, calm environment in which to live and work



Meeting the highest, international standards for delivery of dementia care

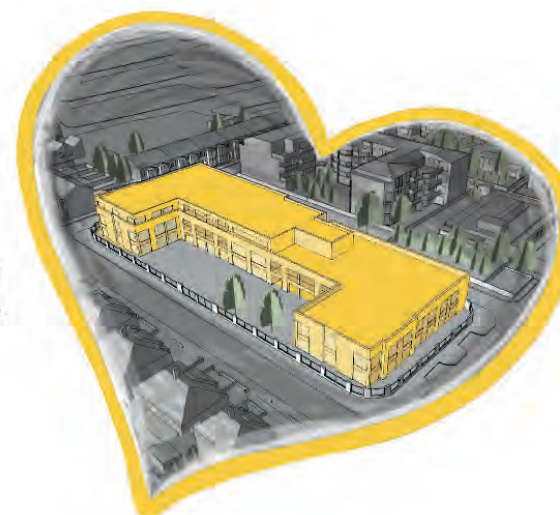


Efficient to run, with 80 bedrooms,, 75 residents at any one time and **priority for Kingston residents**



Working with world class architects and builders to deliver an optimal design for this site

A high quality building, with access to warm south-facing gardens and balconies for all residents



Moving at pace to realise this essential health and care project for the Borough



Independent, external review by Stirling University Design Services Development Centre (architects, and designers).



Rooted in the community as good neighbours, running community projects and using local services.



A Development Control Committee decision in May will help us to **welcome our first residents in March 2021**

NUOVOHEALTH 2019

1.5 Affordable Housing Statement

An affordable Housing Statement for the proposed development is not included for the following reasons:

- The development falls under the C2 class of use (Use for the provision of residential accommodation and care to people in need of care (other than a use within a class C3 (dwelling house). Use as a hospital or nursing home. Use as a residential school, college and training centre) it is therefore not covered by the affordable housing requirement.
- The development (project) is funded by RBK and the home and operating company will be wholly owned by the Council.
- The project delivers the Council's strategic priority to meet demand for services for residents living with dementia and represents a significant investment in the health infrastructure of the Borough.
- The dementia nursing home has cross party support in the Council and was a manifesto commitment for the Liberal Democrat and Conservative Groups.
- Building the home will help to assure an adequate and financially sustainable supply of good quality nursing care in Kingston for older people with higher acuity support needs and deliver dignity in

dementia care.

- There are estimated to be around 1,500 residents in Kingston living with dementia. It is predicted this figure will rise to over 2,100 people with dementia by the year 2027. The new specialist 80-bed dementia nursing home will help provide care for the increasing number of older people with dementia in the borough.
- The home is forecast to operate at 93% capacity (75 beds occupied at any one time). Occupancy will exceed the Fair Access to Care Services criteria profile in the Borough, where 28% of residents are likely to qualify for council funded care. 72% of residents are unlikely to ever qualify for Council funded care (people with assets of £23,200 or over).
- It is predicted that the home will be oversubscribed on opening. Kingston residents will have priority for places in the home. 40% of operational available beds in the home (30 beds) will be available for residents who have less than £23,200 assets. The remainder (45) will be allocated to Kingston residents who fund their own care.
- Councillor Margaret Thompson, Portfolio Holder for Adult Social Services said: "The new home shows this council's commitment to making sure that high quality care is available in the Borough for those

Kingston Dementia Nursing Home 2020

Delivering dignity in dementia care



225,000

people will develop dementia this year, that's one every 3 minutes



1,500

people live with dementia in Kingston. Expected to rise to 2,100 by 2027



72%

of Kingston residents will never qualify for Council Funded Care



25 miles

the distance from patient's homes most London boroughs offer placements



£1,300

the median weekly cost of bed-based care in South West London



+200

number of additional placements per year made by Kingston adult social services by 2021



72,000

the estimated number of people living with dementia in London