

20 AUGUST 2024

CARE VILLAGE - SHEDFIELD

NEED / DEMAND REPORT



E. Oak Care Village

PREPARED FOR WINCHESTER PLANNING OFFICE

DATA ON THE AGING POPULATION

With the average age of residents living within care homes in the UK at 86 years old, in settings registered for care 65 years and over, we can see an anticipated increase of 72.9% increase to those in our population over the age of 65 totalling 20.4m as apposed to 11.8m currently. This means an increase of 8.6m potential residents increase as the 1960s boomers approach the age for not only dementia care, but for retirement and assisted living in the even more immediate future. This will make up a staggering 26% of our population in the UK needing such accommodation and care within a safe environment. (Data from the office for National statistics)

THE AGING POPULATION - SECTOR DEMANDS

Further research shows that by 2035 there will be a shortfall of 58,000 beds across the sector, whilst the growth in the UK's older population is such that by 2050 an additional 350,000 older people will potentially need a care home bed, almost doubling the level of bed demand in the next 30 years. With 100,000 beds at risk of closure by 2040, this projected bed capacity hiatus means that there is an immediate need for demand, growing at a rate in which there current market cannot support. Greater support is needed to stop the potential elderly care epidemic we are fast approaching. (Data from CMM industry experts)

There is a huge disparity coming between supply and demand within the dementia care home sector. Already causing much strain on the NHS we can expect this growing issue to become exponentially worse if immediate action isn't taken within the private care sector to increase the supply. Local authorities over recent years have drastically reduced the number of care homes provided by the council with our local county (Hampshire) now down to only 4 care homes operating within the county. This leaves the burden of supply to fall to the private sector.

The decrease of beds expected over the coming 16 years within the private sector of 100,000 beds closing down is due to the growing economic uncertainty result of both inflation and bank's demands

on covenants, which means that stand alone care homes with less than 40 operating beds are no longer financially viable and we can see a growing shift towards 50 bed care homes within the bank's tight covenants they provide care homes.

Banking Covenants - Industry Effect:

How banking covenants truly effect the private care market, along with changes to the local authority frame works is causing a shift towards the need for larger complexes and units to maintain financial stability within the group or care home moving forwards.

Banks impose covenants on the servicability of debt through EBITDA (Earnings Before Interest Tax Depreciation & Amortisation) requirements. These requirements mean that EBITDA margins on even a 40 bed care home need to be at 38% of turnover based on the industry standard occupancy levels and to meet the 4 times interest cover and 2.25 times total debt cover requirements.

With local authorities now placing dementia residents at reduced rates from the previous year and costs to wages increasing by 9.8% on top of other inflationary costs, this means the EBITDA margin based on costs for local authority admissions will fall to below 28% not meeting banking requirements. In effect the viability of care homes will rely on a combination of inter-group support on the debt as well as a disparity within the private care market being charged more to subsidise the losses incurred by local authority (Hampshire) admissions.

Care homes with a total bed amount less than 40 occupancy will continue to close following the closure of a total of 14000 beds country wide in 2023 (Based on an average of 29.7 beds per care home for the sector this is almost 500 care home closures due to banking and financial pressures).

The banks as well as the demand increase show a need for both larger care homes and care homes supported financially by either a larger group or further business trade.

The dementia care home sector is not the only sector showing an exponential level of growth. The assisted living market has seen a similar growth rate as people are now going to dementia care home facilities much later in their care journey, opting for "at home care" through the earlier stages of dementia. Over the past 5-10 years has shown a drastic shift, even going back to just April of 2018 as a company English Oak saw residents stay for an average term of 8.2 years, meaning the stay incorporated the entire course of their dementia journey. Based on the data we have recorded for June of 2024 we have seen this drop to just 1.7 years, showing a decrease in the average stay by 6.5 years. The dementia care journey has not changed in terms of the time in which care is needed, so

what this tells us is that in the last 6 years the market has changed for people spending the first 6.5 years of their dementia journey receiving “at home care”.

Following this data as we then look at the dementia care journey we can see a direct correlation to the domiciliary care market for “at home” care. In the fiscal year 2022-23 we can see an 8.5% increase to the amount of care provided at home compatible to the previous years growing a total of 48% in the 6 years from 2017-2023. This clearly tells us that people are shifting from dementia care homes to at home care in the earlier stages of their dementia journey, coming to dementia care homes later on when they are experiencing more challenging behaviours and increased care needs, the point in which at home care becomes unsafe to continue as 24 hour supervision is required.

However the existing “at home” care system is causing further strain on the NHS due to the unsafe nature of living in an unsecured, unsafe and unsupervised environment.

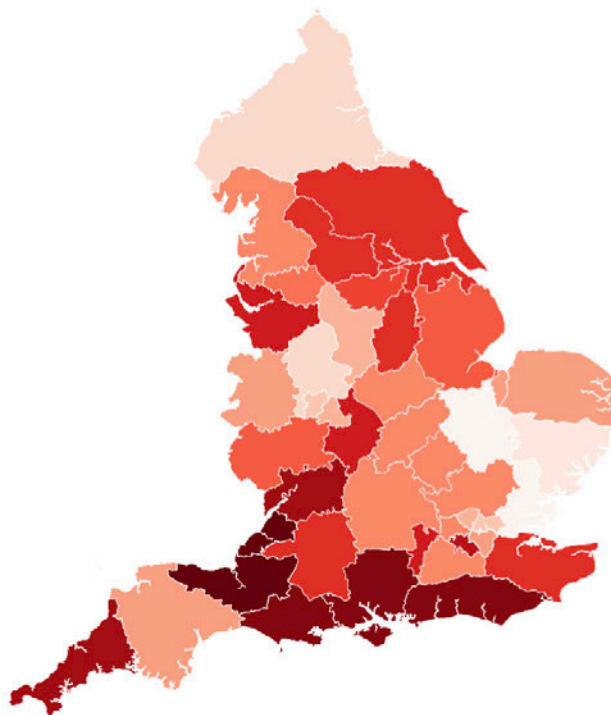
WE ARE BURDENING OUR NHS AND WE HAVE A CIVIC DUTY TO CHANGE THIS



Currently the NHS has over 90% of it's beds occupied, meaning thousands of people every day are unable to receive the care they need.

One in every seven NHS beds are being blocked by people who are well enough to leave but are unable to, directly due to the lack of capacity within the care market to place these people into suitable care facilities. This is 17% of all NHS beds being blocked nationwide and 20% in Hampshire, with the responsibility on care providers now to provide more viable beds to help to relieve this burden. If we do not begin to act now in building and providing more care facilities, then the NHS will only become more over run with bed blocking as the aging population continues to grow exponentially. (2023 and rising rapidly in 2024) With ambulance wait times now in excess of 24 hours to care homes for broken bones and head injuries.

% beds occupied by patients no longer meeting the criteria to reside



Source: House of Commons Library, via Lib Dems

MailOnline

The Older person's care market and now lack of professional care to meet people's needs is a growing crisis. A new in-depth report from the Charity Age UK, 'Fixing the Foundations', reveals how our under-funded and overstretched NHS and social care system is struggling and sometimes failing to cope with the needs of older people. Longstanding problems, predating the pandemic but exacerbated by it too, are piling pressure on families and carers and leaving the NHS in constant crisis mode, contributing massively to ambulances being stacked up outside hospital emergency departments at the moment, and long waits for people of all ages to access urgent care.

Some Eye Opening Statistics To The Unmet Needs Of Older People:

- Half (49%) of all people arriving in A&E by ambulance are over 65 and a third (35%) over 75[i]
- The proportion of older people feeling supported to manage their health condition has fallen by a fifth (almost 20%) in relative terms since 2016/17
- One in five (21%) over 80s have some unmet need for social care

(Data Collected by Age UK in 2023)

ISSUES WITH THE CURRENT “AT HOME” DOMICILIARY CARE MARKET

The existing market for care at home has shortfalls that play towards the statistics previously mentioned burdening the NHS. However with support from local councils there are solutions to provide around the clock safe care for over 65s, in an “at home” environment.

As previously mentioned the market for receiving care at home has been growing at an incredible rate of 48% over 6 years. Without a suitable solution to mitigate the additional risks around increased care in an “at home” setting, being that it is not safe or suitable for many levels of elderly or dementia care, then we will only continue to add to the problem. The fundamental issue with the existing structure for this type of care revolves around the unsafe and unmonitored environment. You will be provided 2 hours of care at home from a trained care professional, aside from this you are left either alone or under the care of your untrained family members in an environment that was not designed to support your care requirements. The inevitable result of this setup leads to the previous statistics of older people’s care needs not being met. When the care needs are unable to be met the only next viable option is to call “999” and request an ambulance service to provide the care that is needed which then results in the statistic that over 65’s equating to 49% of all ambulance call outs although this demographic only makes up 18.4% of the total population in the UK. (Source ageuk.org.uk)

This current system is not fit for the future of care with an aging population and increased stress on the NHS by both population increases and fast rising rates of bed blocking due to both the lack of care beds and restricted social services budgets meaning they are unable to place our elderly and vulnerable adults into care from hospitals. If we continue down the track the country currently is, the numbers clearly show a trend towards a complete system failure, which we are fast approaching. This leaves a need for care beds, assisted living accommodation (under a new around the clock care system), as well as retirement accommodation following the labour promise of 300,000 new homes per year which needs to also include housing specially designed for our aging population and not just family homes.

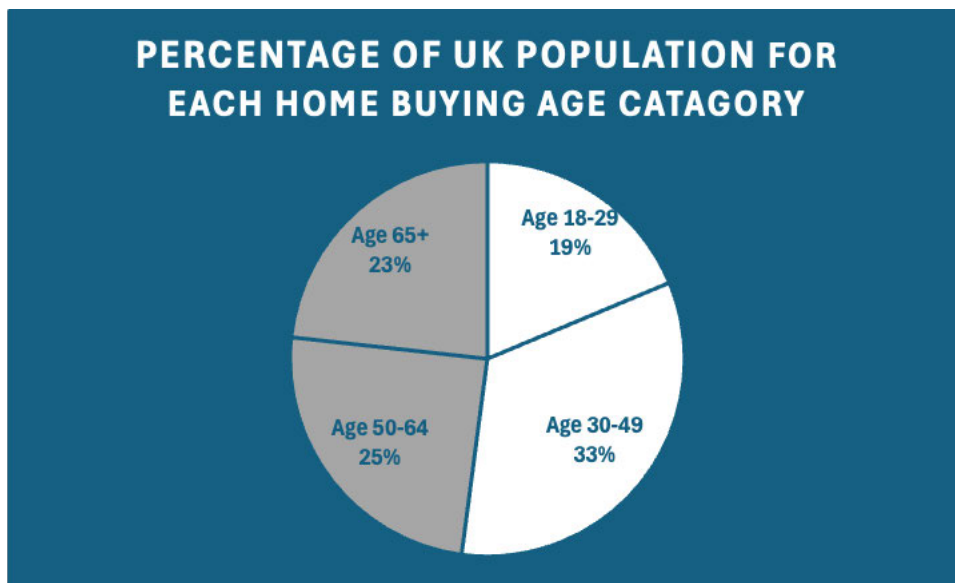
LABOUR GOVERNMENT HOUSING PROMISE

We have recently seen under the new labour government in office a promise to build 1.5 million houses in their over the next 5 years, which averages out at 300,000 new homes built every single year.

NEED & DEMAND - CARE VILLAGE

Based on statistics obtained from gov.uk on population statistics by age and ethnicity, we can see that the over 50 years old age category makes up 38% of our total population and 48% of our population over 18 years old (home buying age range). With 69 million UK residents this means that we have over 26 million residents aged 50 and over, just under 13million residents aged 65 and over. With 50 years of age being the entry age for retirement communities and age 65 being the entry to the elderly social care community, this means that a vast percentage of the new homes built under the labour “new home” promise need to be specially designed and built towards supporting our retirement and caring communities, rather than just family homes.

Below is a chart based on gov.uk statistics for population percentages for those over 18 years of age:

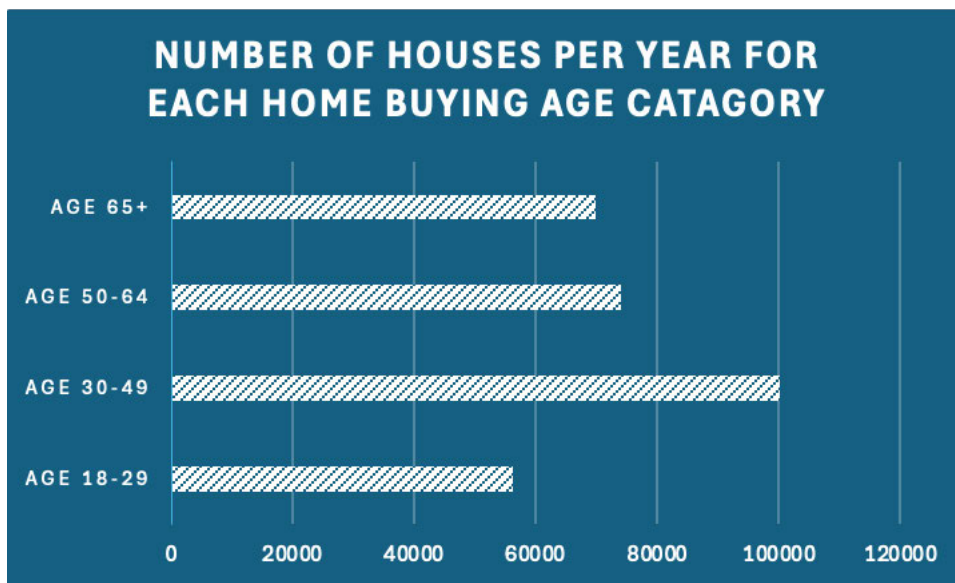


Following on from the age statistics, based on the promise of 300,000 new homes per year, we can estimate that 143,000 of these new homes should be aimed towards the market of 50 and over. We however understand that a large percentage of the 50-65 age range also come into the category of “family homes”, however the the over 65 age category should alone account for 70,000 new homes per year with also some consideration towards those aged 50-65 looking to move into a community designed towards retirement also.

This means that we have a need of a large portion of these new property developments to be designed towards our aging population, as the average family home does not count for mobility issues or other health concerns. If we can provide more property both designed for the older population and also provide them with a safe community in which professional trained care is on hand 24/7, then not only can we provide practical homes but also help to support our NHS and to support those living with health concerns.

NEED & DEMAND - CARE VILLAGE

Below is a graph showing the number of homes required for each age category range needed per year based on Labour’s promise of 300,000 per year:



Below is the chart for data from 2021 in regard to the population for both age and ethnicity, taken directly from the government website: (we should note that this data is now 3 years old, our population is continuing to age with the baby boomers now aging, meaning that the numbers for 2024 will show greater numbers in both 50+ and 65+ age categories)

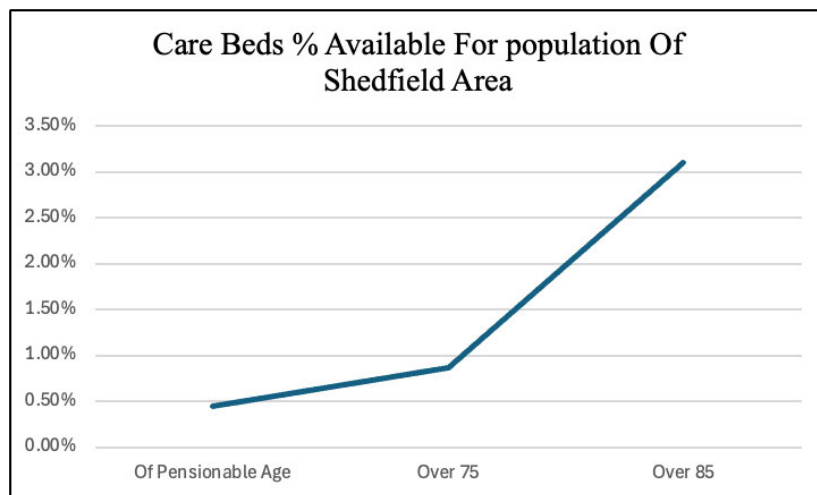
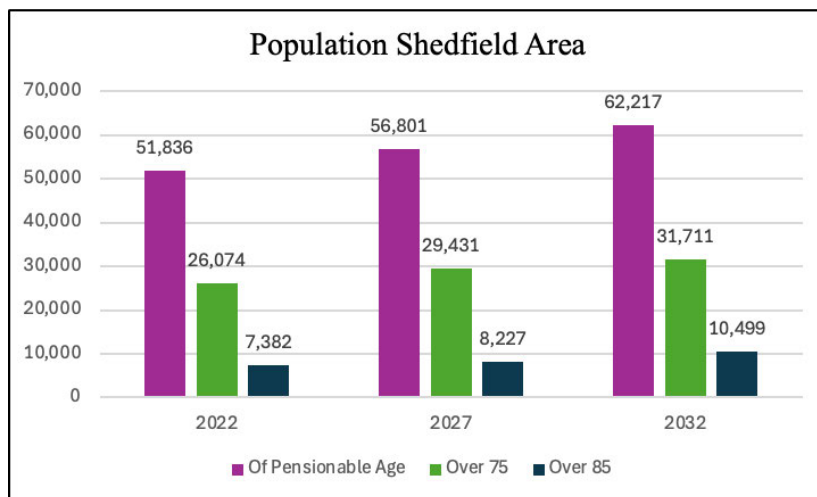
age-profile-by-ethnicity-table

Age brackets	All		Asian		Black		Mixed		White		Other	
	%	Count	%	Count	%	Count	%	Count	%	Count	%	Count
Age 0 to 4	5.4	3,232,055	7.0	385,210	6.7	160,250	14.6	250,755	4.8	2,353,100	6.6	82,740
Age 5 to 9	5.9	3,524,635	7.7	423,030	7.7	185,405	14.1	242,225	5.3	2,581,590	7.4	92,385
Age 10 to 14	6.0	3,596,015	7.7	424,020	8.7	209,990	12.8	220,435	5.4	2,648,470	7.4	93,100
Age 15 to 17	3.4	2,039,535	4.3	239,840	5.1	123,610	6.4	110,000	3.1	1,513,760	4.2	52,325
Age 18 to 24	8.3	4,957,265	10.7	587,990	11.0	263,820	12.6	216,045	7.7	3,763,395	10.0	126,015
Age 25 to 29	6.5	3,901,735	7.5	416,165	7.1	170,665	7.8	133,475	6.3	3,081,335	8.0	100,095
Age 30 to 34	7.0	4,148,785	8.8	485,790	7.1	170,980	7.1	122,670	6.7	3,253,430	9.2	115,915
Age 35 to 39	6.7	3,981,630	9.4	518,205	7.3	175,270	5.8	98,975	6.3	3,070,270	9.5	118,910
Age 40 to 44	6.3	3,755,770	8.9	490,145	7.5	180,225	4.5	77,590	5.9	2,896,810	8.8	111,000
Age 45 to 49	6.4	3,788,730	7.3	400,875	7.1	170,210	3.6	61,955	6.3	3,063,945	7.3	91,745
Age 50 to 54	6.9	4,123,455	5.7	312,670	7.5	179,790	3.4	58,740	7.2	3,496,095	6.1	76,160
Age 55 to 59	6.8	4,029,040	4.1	223,880	6.7	160,680	2.8	48,725	7.3	3,536,480	4.7	59,275
Age 60 to 64	5.8	3,455,580	3.5	191,800	4.3	102,850	1.7	30,005	6.3	3,085,160	3.6	45,765
Age 65 to 69	4.9	2,945,140	2.8	156,590	2.2	52,675	1.0	17,175	5.5	2,684,405	2.7	34,295
Age 70 to 74	5.0	2,977,975	1.9	105,740	1.3	30,530	0.7	11,500	5.8	2,805,995	1.9	24,210
Age 75 to 79	3.6	2,170,265	1.2	65,480	1.1	26,150	0.5	8,045	4.2	2,055,970	1.2	14,620
Age 80 to 84	2.5	1,515,085	0.9	50,810	1.1	25,300	0.3	4,910	2.9	1,424,665	0.7	9,400
Age 85 and over	2.4	1,454,740	0.7	37,205	0.9	20,880	0.3	4,650	2.8	1,384,325	0.6	7,680

POPULATION STATISTICS FOR OVER 65 AGE CATEGORY FOR THE SHEDFIELD AREA

The Shedfield area surrounding the site at Shedfield Lodge Care Home, up to a distance of around 6km from the site, shows a great shortfall for care and supported living accommodation. With the current statistics showing just under 60,000 residents in the area aged over 65 years old, the comparable suitable accommodation numbers are vastly slim. Based on data taken from 2023 by the form of a Pinders report, we can see that there are only 255 caring beds that house our elderly with any care needs or living with dementia. This means that the 60,000 residents in the immediate surrounding area have only a mere 255 potential beds available in the local area, able to suit their caring and living needs. Additional to this there is no supported living accommodation in this area able to offer around the clock at home care in a safe environment.

Below are graphs showing both the population of the area as well as the number care beds supporting each age category:



Data collected by Pinders shows the local care facilities existing within the marketplace, including the care offered. Based on the care in which a residential dementia specialising care village would provide, we can see that nursing care makes up 68 beds of the 323 total, leaving only 255 beds that would be considered direct competition.

With an aging population in the Shedfield area, with 36.3% of the area being over the retirement age, there is a distinct lack of facility specially designed both to care for these individuals as well as offering a safe space for them to enjoy. The closest local village is Wickham square offering a limited supply of amenities, which the existing ones are not designed to cater for those struggling with either mobility issues or health conditions.

Below shows the local care facilities and distance from the Shedfield site (Pinders report data):

Existing Potential Competition				
Km	Home Name	Type	Capacity	Single %
3.2	The White House	Care	46	100
4.4	Hollybank Rest Home	Care	23	74
4.4	Bishops Waltham House	Care	35	100
4.4	Ridgemedede House	Care	36	78
4.6	Three Oaks	Care	20	80
5.8	Willow Tree Lodge	Care	30	100
5.9	Maypole Care Home	Nursing	68	100
6	Kiln Lodge	Care	24	75
6.1	Hunters Lodge	Care	41	85
TOTAL			323	
TOTAL JUST CARE			255	

POLLUTION IN OUR SOLENT & CARBON OUTPUT

Over the past few years we have seen action taken to help the levels of nitrates that have been in our solent. As such we have seen new levies on additional waste entering the local sewage to help us to offset the negative environmental impact this has had. Over many years our local seas have been suffocated by untenable levels of pollution and we have to find ways of reducing the levels of nitrates entering the Solent. The planning scheme to help to offset the nitrogen and phosphorus levels have been a great start, however more still needs to be done.

This issue has been combined with the detrimental impact in which farms are having on our solent. The agriculture sector covers approximately 70% of Hampshire and the Isle of Wight land and is responsible for over 40% of our rivers failing to achieve good ecological status and at least 35% of the phosphorus that ends up in them.

Diffuse pollution from agriculture seriously harms wildlife. This is the process by which excess sediments, nutrients and chemicals from agricultural practices seep into our rivers. This can be problematic as it is difficult to trace and attribute which farm the pollution has come from. While most agricultural pollution incidents are minor, when there are thousands of them, they add up to major consequences for our rivers. Additionally, 2.9 million tonnes of soil are lost from fields every year in England and Wales, in a process called ‘surface run-off’. Excess fine sediment from this soil loss clogs up our rivers, destroying habitats in the process. (Data from Hampshire & Isle of White Wildlife Trust)

These issues are something in which need addressing at a greater level, so that we can help to create new habitats and a more eco friendly environment to live alongside our local wildlife.

Outside of just our local area, stretching across the globe, there is the fundamental issues around our carbon output and the effect we have had as a species damaging our atmosphere and causing increasing levels of pollution. Following the central government plans outlined in their “net zero strategy” we look to go beyond this where possible. As a country over 30 years we have managed to reduce our carbon output by around 44% (as highlighted in the [gov.uk](https://www.gov.uk) strategy), however we have seen over recent year that efforts have not been enough to help to reverse the damaging effects we have had thus far. With the generational technology now on the market, we believe more can be done to help not only reach carbon neutrality but to go beyond just being neutral or offset and create a positive environmental impact.

Land Facts

Following on from prior mentioned environmental points, it is important to note the current land statistics around usages. With the population currently being at nearly 70,000,000 for the UK, we have currently only developed 8.7% of our country. We have many areas in the country being both overdeveloped hindering the potential for habitats to survive and also unused land areas not providing any good space, bushes or fertile land for habitats to flourish. As well as agricultural coverage spanning great amounts causing the highest pollution levels as previously shown. Below we can see statistics from [gov.uk](https://www.gov.uk) on current land usages (data taken from 2022):

- 8.7% of land in England is of developed use, with 91.1% of non-developed use and the remaining 0.2% being vacant.
- The top 3 land use groups were ‘Agriculture’ (63.1%), ‘Forestry, open land and water’ (20.1%), and ‘Residential gardens’ (4.9%).

- 6.8% of land within the Green Belt is of developed use.
- 6.1% of land within Flood Zone 3 is of developed use (not accounting for flood defences).
- 5.0% of land within areas at high to medium risk of flooding from rivers and the sea is of developed use (after accounting for flood defences).

Currently the land surrounding Shedfield lodge is not providing any use to either wildlife or to aid the local community in terms of housing. We also are seeing of the developed areas a lack of sustainability due to existing properties not being built to be environmentally friendly, with home owners unable to expend the large sums to rectify these issues. A great number of homes are currently of a flood risk, causing an increase in demand with homes fit for the future to rehouse people living within these high risk areas.

ENGLISH OAK CARE HOMES OBJECTIVES

Our objective is to build an eco friendly care village for all levels of care within our local community. With our intention being to build a large dementia specialising residential care home (61 beds), 6 two bedroom bungalows, 16 two bedroom apartments, a community centre and specially designed gardens and forrest area.

The Care Home

Our background and expertise has come from many decades of developing and operating within the care sector, specialising in dementia care. With a fast growing need for care beds within both the Hampshire county and and immediate area, we are looking to both provide a safe purpose built environment for those within our local community living with dementia. From statistics previously mentioned we can see a huge growing need for additional care beds within our local area, with the care industry showing a fast growing deficit for care beds both nationwide and in our local area. The care home will be specially designed and purpose built for elderly living with dementia, which will also help to alleviate the growing pressures on the NHS in our local hospitals.

The need for a care home facility providing the number of beds at 61 is to “future proof” the care home. As previously stated banks will not lend to care homes below 40 beds or for new build care homes they look to 50 beds or greater, this is due to financial viability within the sector meeting

covenants set out by banking criteria for servicing debt. As such, we look to build to 60 beds or greater for financial viability for the future needs of care, in line with both the local demand and the criteria set out by lenders.

Out of the 255 local care beds that operate within the dementia care sector, the vast majority of these beds are becoming “not fit for purpose” due to the buildings being old and room sizes, amenities, layout designs not meeting current fire regulations or caring standards for practices today. Due to the size of these care facilities, with 75% of the local care homes not meeting new banking standards, we will also expect that a multitude of the existing homes provided will not remain financially viable if they do not have the ability to extend their facilities to meet current criteria and regulations. This result points to a need for additional beds in our local area fast not only to support the local community and the NHS, but also to alleviate this imminent reduction in available beds we will see over the next few years in our local area following the trend of patterns laid out by both the banking system and recent data showing the loss of care beds per year in the UKL for care homes with less than 40 beds capacity.

How will our home be different?

Our care home has been designed by a combination of experienced and professional architects working hand in hand with ourselves combining both the latest in industry knowledge and in accessible and functional design. This means we tick off a number of industry needs:

- Bedroom sizes - Larger bedroom sizes than industry standard, allowing for lounge space to be incorporated into the bedrooms. The need for this has arisen over the past years since the COVID 19 pandemic, as we are now seeing residents enter into dementia specialising care homes much later in their dementia journey. This means residents come with greater needs and as such families need for private visitation due to the noise, interruption and imposition of visiting in communal spaces now present in dementia specialising care homes, families have now begun to look to carry out visitation in a private secluded area that is safe to both themselves and their loved ones. The result of this has meant a need for greater bedroom sizes to accommodate the new lounging needs for that private visitation.
- En-Suite Showers - All bedrooms will have their own en-suite shower facility. Communal bathrooms will also be provided for residents who prefer a bath or require the assistance of more than one carer for washing. However, long gone are the days of having to go to a communal bathroom for either a shower or even to simply use the toilet. The facility for each room now gives residents the freedom to use the bathroom at any time (if they can do so without caring intervention) where with only communal bathrooms the facilities may not always be available for use, causing residents unnecessary distress or discomfort. Finally for valuation purposes to support lending criteria, this is now a necessity moving forwards. Many existing care homes do

not offer such facilities, including many of our local care beds not even offering en-suite facilities in around 20-30% of their bedrooms for basic toileting needs.

- Amenities - Our design incorporates the latest in technology and amenities to aid in caring effectively for those living with dementia. This includes but is not limited to a virtual reality train carriage allowing residents to use a safe form of public transport, as their memory tells them they must go to work where they have lost their short term memory and as such relieves the potential for causing distress to the residents. The latest smart technology for nurse calls to track falls detection, resident movements and any care needs making for proactive care, creating a more safe environment for care and helping to protect the health and welfare of our residents, as well as further alleviate NHS pressures with less ambulance calls.
- Communal Design - The home has been designed with wider corridors to allow for easy access for a magnitude of equipment from wheel chairs and hoist aids to stretchers, creating an ease of access and flow throughout the home for both our caring team and external medical professionals. Larger communal spaces allow for greater separation of residents not only for equipment access but also for providing safe and effective care. Due to the growing resident's caring needs in our industry, the need for greater resident separation is now a requirement for accepting residents with "challenging behaviours" as laid out by social services and CQC. Indoor plants enclosed in glass areas, this allows the aid of dementia through nature and gardening but in a controlled and safe environment.
- Eco Friendly - We will be using a combination of renewable energy and environmentally beneficial systems to help to create a positive effect on our environment. This includes the use of solar panels, air source and ground source heat pumps, a grey water system so that no nitrates enter our solent from human waste, Infrared heating run off of the solar panels, electric car / bike and scooter charging points for green travel. The construction will also be a modular build carried out off site by a carbon neutral company. Additionally, we will be planting a range of bushes, trees and other plants to encourage an increase in the number of habitats that the land currently provides, so that we learn to live in harmony with our planet and local wildlife.

The care home will be run by a large staffing team of around 50 staff members with a wide range of job vacancies being created from care, domestic, chefs to management and administration staff. As such this home will help to provide more jobs for our local community and help to up skill our staff members through training programs in which we fund all training to further qualify any person we employ. We also run apprenticeship programs for helping to train up younger staff or people looking to change career as well as full training and support to staff of all levels. With this increase to employment for the local area we will also be able to help to boost our local economy attracting new people to move to the area and help to boost the economy of other local businesses.

Assisted Living Apartments

Our range of assisted living apartments will look to solve the issue previously mentioned with the “at home” domiciliary care market. As previously stated, this is a fast growing area within the social care sector, however currently causes a great amount of strain on our NHS as well as leaving a vast amount of our elderly and vulnerable adults feeling as though their care needs are not being met.

Our solution to these issues is through our community and village concept. This means that qualified care professionals will be on hand 24/7 to provide care and support where needed to those living within our assisted living accommodation. We will still provide planned acting intervention as the current domiciliary care system lays out during each day, however one large safeguard of our system will be that outside of the planned caring hours there will be trained staff always at hand to help to support the needs of these residents and not just have them then left to rely on the NHS for support the other 22 hours in that day if they need professional help. Another key factor that plays a part in setting the care and support aside from any competition is the design. The apartments will be designed for full disabled access, including space for wheel chair turning, no mixed levels and even bathtubs will be specially designed bathtubs equipped for all caring needs. Such white goods will bear in mind all health conditions and necessities, being fully compatible with pacemakers or any health requirement (electric hobs, compatible with pacemakers and also higher safety rating than conventional gas, where induction can interfere with pacemakers). All apartments will be both equipped with nurse call technology as well as wearable call devices being provided, meaning that medical help is never more than a quick call away within our safe village complex.

The reason for the need for 16 assisted living apartments is due to the staffing requirements in which we would look to provide as stated above for around the clock care. To make it financially viable to provide qualified staffing to support these apartments 24/7, we would need 16 apartments contributing towards this staffing cost.

The apartments would also offer a more cost effective option comparable to our bungalows. All apartments would be 2 bedrooms with kitchen, dining, living and bathroom spaces, sharing garden spaces to encourage community and healthy living practices. However due to the development cost being less per square metre for multi story properties (less cost of ground works), these would be slightly smaller and retail for less than our bungalows, allowing us to provide inclusive accommodation to different socio-economic classes within our care community.

Retirement & Assisted Living Bungalows

Much like our apartments we would offer an around the clock care service to all of our bungalows, which allows those to chose between a more cost effective apartment or a more luxurious bungalow where they could have their own private space including private garden, yet still receive the same level of caring support as our assisted living apartments.

The bungalows would again be designed to accommodate for all disabilities and health requirements following the same design requirements as our apartments from the nurse call system integrated in the homes, to our equipment and white goods provided. Maintaining a safe environment specially designed for those with medical conditions, unlike the existing market where receiving “at home care” is within an environment built for an average healthy individual and not suitable for meeting caring needs or requirements.

Below shows a disabled accessible bathtub in which will be provided as standard with the option to also add hoisting attachments to suit the needs of the individual.



We look to build 6 bungalows to meet the requirements for both funding the additional staffing, as well as providing a suitable number for sale compatible to the apartments. The bungalows will also be offered as a retirement option without the need for a care package, however will cater to any change in health needs for the resident(s) of the property as they age. This is not just limited to care but also includes, cleaning, gardening, laundry and food services to suit the needs or wants of the individuals as they change.

The Community Centre

Our objective for the community centre is to include amenities to both support the care village and the local community. The facilities and amenities we will offer include:

- Creche - The benefit we will be able to provide through our creche facility is primarily focussed towards staffing. Our creche facilities will be charged out at cost price, meaning that rather than paying standard local childcare rates of £80-£100 per day (only operating until 5pm / 6pm as standard), which encourages early parents to not work until their child reaches schooling age, due to the fact that this day rate is almost equal to the rate of pay at national living wage for an 8 hour shift (especially once travel is factored in). We will offer this facility at a cost price rate, making this facility just a fraction of the normal cost for our staff. We will offer child care for longer hours also to coincide with standard 12 hour social care shift patterns. This will all have the effect of encouraging parents to work making the ability to work accessible to around 100 potential staff members that we will employ in our care village. In turn this will help to boost our local work force and economy further as we accommodate for all levels of staffing to use this facility.
- Shop - There is a small convenience shop planned to service everyone from our dementia care residents, our village residents and our staff, all the way to our local neighbours. This will be a small shop selling the essentials for day to day living. For our dementia residents, they regularly need essentials from cigarettes to soaps, shampoo or even some sweet treats. At the moment within our existing care home, when a resident wants to get a newspaper or some new soap we have to take them outside of the care home to a local shop to purchase small items. This means that although they are accompanied by a trained staff member, our residents have to enter a new environment that is not designed or run to cater for the needs or stresses of our residents. The benefit of running the shop within our care community is that it is within a safe environment designed around accessibility and run by staff who have been specially trained in dementia care and awareness. For our community residents not living with dementia or for our local neighbours, the shop offers convenience and affordable pricing. The convenience of being able to just pop out of your front door to pick up the milk when you fall short, charged out to the village residents and immediate neighbours at cost price plus a 10% margin that goes to a charity every 3 months, voted for by our residents and families, thus giving to charity whilst providing cheaper pricing.
- Cafe - There will be a cosy cafe to help service lunch, breakfast and coffee needs for the offices, staffing team, visitors, village residents and the local community. The cafe will offer a range of both hot and cold soft drinks as well as fast and convenient breakfast or lunch options. This will help us to service all on site staff members including the office team, currently after serving our existing care group, we found out that nearly half of our staff members used their break to get

NEED & DEMAND - CARE VILLAGE

coffee, lunch or snacks from outside of our care homes in local shops and cafes. In providing these facilities on site this services convenience for almost 80 staff active each day, which based on our existing findings will meet the needs for around 35-40 members of just the staffing team each day. Additionally, this will offer a safe local space for our residents and families to go on outing trips within the village allowing the residents to leave the care home yet still be in a familiar environment designed for their needs and run by staff trained in dementia care and awareness. Finally, this will offer local and cheap pricing for our residents without dementia and our immediate neighbours, charged out at only cost price plus a 10% margin for charity.

- Small Cinema - The small cinema facility will offer low cost outings for our residents from the care home and village. The cinema will have set operation times for movie screenings voted for by our care community and hold screenings, frequency based on demand and activities scheduling. Again this will be run by our trained staff and offer safe activities outside of the care home for our residents of the care home and those living in assisted living. This will also allow us to bring the community together with screening events. The cost will be incorporated into our existing staffing schedule allowing us to hold these screenings for very low cost and bring the community together.
- Restaurant - The restaurant will run dinner services for not only our local care community to be able to continue to experience the pleasures of dining out within a safe environment, run by a trained caring staff team. This facility will also be operation to our wider community area and even to adjacent towns and cities, attracting people to the local area to uplift the local economy further. The restaurant will also serve as a community area during the day hours in which it does not operate, allowing our village residents a safe place to socialise either having a quiet catch up or during one of our events we will hold, such as bingo, quizzes and many more. Every quarter we will hold our charity event in the restaurant, where we will award the money made to the chosen charity, allowing us all to celebrate the community and the chosen charity both raising awareness and providing donations.
- Offices - The offices will be located on the first floor of the community centre. We will be rehousing our head office team from the existing care group into the offices along with additional office staff for the management of the care village and community centre. We are currently paying for rented facilities for running our head office, with our rental agreement coming to an end in around 2 years, this means we can bring all central management together into our own facilities, also allowing us a meeting room to run our director and management meetings from a confidential location convenient for our team.
- Hair Dressing Salon - The hair dressing salon will be operated by our dementia trained (sub-contracted) staff in which we use currently to operate all hair dressing and chiropody needs for our residents. Basing this in the community centre rather than the care home will allow us to also

offer these services to our assisted living residents and local neighbours. All services will also be available to our local neighbours and family members through both bookings and walk ins.

- Doctor's / Treatment Room - This will alleviate pressures on our NHS and GP services. We will be providing private healthcare for all residents of our care village which will allow them to schedule privatised GP appointments for any health concerns. Additionally, we will offer physiotherapy, massages and other treatments through sub contracted professionals that we will provide dementia training to, so that any health need can be met within our safe and caring environment.

The Community Centre - Resident/ Neighbour Cards

All of our village residents, staff and immediate neighbours will be provided with a card assigned to them, in which this card will mean that all products and services provided in our community centre will be charged out at cost price with a 10% margin. The entirety of the 10% margin charged out will go to a charity every 3 months, where the chosen charity will be voted for by all card holders.

This scheme will both help to alleviate current inflationary costs to our village community, as well as give back to those in need through the form of charitable organisations.

The Community Centre - Staffing

All staff employed or sub-contracted through our care village will be trained in dementia awareness, first aid and all essential basic trainings to allow us to provide a safe environment throughout the entire village for all of our residents. We will have further trained care staff with higher level NVQ qualifications to provide full support for all planned and unplanned care needs.

Our staff will all have private medical cover, the level of cover will depend on their employed staffing position. We also provide full mental health support, through means of both third party cover with a 24/7 operational support number or through an on-site trained professional. We understand the difficulties that can come with working within the elderly care community and as such we recognise the equal importance of making sure all of our staff are supported with any physical and psychological concerns or struggles that may arise either through work or through home life.

The Community Centre - The Local Care Community

With our current infrastructure not set up for supporting those in our society that do not fit the criteria of a mobile, near typical and healthy individual, there is no purpose built infrastructure in place to support these individuals that make up a large percentage of our local and national population.

Our community centre will not only provide a safe space for our residents to go on outings in an environment that is designed to meet their needs and run by staff that are trained to manage their needs. It will also offer this facility for our other local elderly care homes, Learning difficulty homes, and those living within the local area that struggle with mobility or health concerns. Giving everyone a safe place to socialise and enjoy a day out in an environment that is designed with them in mind.

We will also host training, career days and so much more in our community centre for anyone in the local area who either wants to feel more safe, help care for a loved one or simply understand the needs of others. These days will also be offered to local schools and colleges to help to encourage further learning and also the availability of apprenticeships and other learning schemes to bring more employment to the care sector and make our community a safer and more caring place for all.

Saving Local Businesses

Our immediate neighbour “Shedfield Lodge Care Home” and affiliate of our existing care group is one of the care homes that does not fit current banking criteria and as such is at risk of not being financially viable in the years to come. What our village offers them is the full benefits of being completely integrated with our care village, meaning that they receive all of the same amenity and training benefits that our care facilities and team do. With this added benefit now included for the home we will help to support them grow and with the added benefits they will be able to attract more privately funded clients to increase the care home’s profitability and keep it financially viable with our support in the future.

Additionally, the increased amenities for all local homes and domiciliary care will allow them similar benefit in being able to provide a safe space with many integrated events to offer as part of their care package. This will increase the catchment radius for all of our local care homes for new residents from outside of our immediate catchment due to the fact that we are offering something that no other care group is offering in the UK. Our full package promotes support, integration and care at the heart of every building and amenity.

Environmental Impact

We are looking to sustainable building, through suppliers that are carbon neutral and modular building. Modular building works through the predominant use of timber frames (wood), as such this renewable resource is offset through the planting of new trees for all material that is used and manufactured in a sustainable environment. This method also causes less disruption to the neighbours as a large amount of the building work is carried out off site, making the build process both faster and less disruptive.

Our energy solutions - We will be using solar panels on all roof spaces throughout the entire village to provide green electricity for our village. We will be using infrared heating that will be run off of the solar panels and air / ground source heat pumps for controlling water temperatures within the properties. All white goods supplied will be electric and not gas operated both for safety and for the positive environmental impact of using the solar energy rather than harmful gases.

Sustainable Travel - We will provide staff with electric bikes and scooters at request to encourage sustainable travel, which will be able to be charged in the village using energy direct from our solar panels. We will be providing electric car charging points in all car parks which will be free to use, encouraging both staff and visitors to switch to electric and get the benefit of saving on their travel costs. Finally we will be running car sharing and public transport schemes where our staff members will be entered into a monthly draw with the potential to get free travel if they use either of these methods to commute. These objectives look to how we can not only help our immediate care community become more environmentally conscious but also to our further community using our amenities provided.

Planting - Working with specialists in design, we are looking to plant hundreds of metres of hedge rows, trees and other plants looking to live alongside local wildlife and encourage the creation of new habitats. We will also be using planting to aid in our dementia care through the creation of a dementia forrest, stimulating the senses and aiding in care.

Waste - We will be installing a grey water system to collect rain water for use in toilets and other white good appliances, also to help water the gardens and keep the habitats healthy and vibrant. The grey water system helps us to save on water usage, working hand in hand with our planet and it's natural resources. So that we do not add to the already high levels of pollution in our local rivers and bodies of water, we will pass all waste through a septic treatment tank, which will allow cleaned water to trickle out and keep the surrounding land healthy and fertile.

SUMMARY

As this report clearly lays out in accordance with regulation 19 of the Winchester district local plan, with data backed up through the means of reliable resources, there is a clear need and demand for the proposed care village.

Both the thought and design aspects of the care village go way above and beyond all requirements and help to progress our community into the future where everyone's needs are met including our environment's. With a growing demand, such a development is necessary for supporting our existing care systems for both the NHS and the social care sector, whilst remaining viable with our banking system for all future demands.

We are pioneering a new age of care and with our existing affiliated home being at risk, in line with Winchester and central government requirements, we believe that this area and this specific land meets the perfect need and purpose for this essential development.

Prepared by

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