

**DESIGN AND ACCESS STATEMENT
FOR THE PROPOSED ALTRATIONS & EXTENSION OF
ABBNEYFIELD HOUSE CARE HOME
UNION STREET – LOW MOOR
CLITHEROE BB7 2NH**



Date: 10th January 2018
Our Ref. 5493 - DAS
Version: 1.01

CONTENTS

Section 1	INTRODUCTION	2
Section 2	SITE PLAN	2
Section 3	SITE DESCRIPTION	3
Section 4	EXISTING BUSINESS / SITE USE	4
Section 5	EXISTING MATERIALS	4
Section 6	PLANNING HISTORY	4
Section 7	PRINCIPLE FOR DEVELOPMENT	4
Section 8	SUMMARY OF THE PROPOSED WORKS	5
Section 9	PLAN OF THE PROPOSED WORKS	6
Section 10	DESIGN CONCEPT	7
Section 11	MATERIALS	8
Section 12	EMPLOYMENT	8
Section 13	REFUSE	8
Section 14	ACCESS / TRANSPORT / PARKING	8
Section 15	PHOTOGRAPHS	9 10 11 & 12
Section 16	APENDICES	13 & 14

1: INTRODUCTION

This Design and Access Statement provides supplementary and explanatory information in support of a planning application for alterations and extensions at Abbeyfields House Care Home Low Moor Clitheroe. It should be read in conjunction with Drgs Ref 5493 – 01 02A 03A 04A 05 06 07B 08B & 09B Bat Survey & Arboricultural Impact Assessment

2: SITE LOCATION

Abbeyfield House
Union Street Low Moor
Clitheroe BB7 2NH

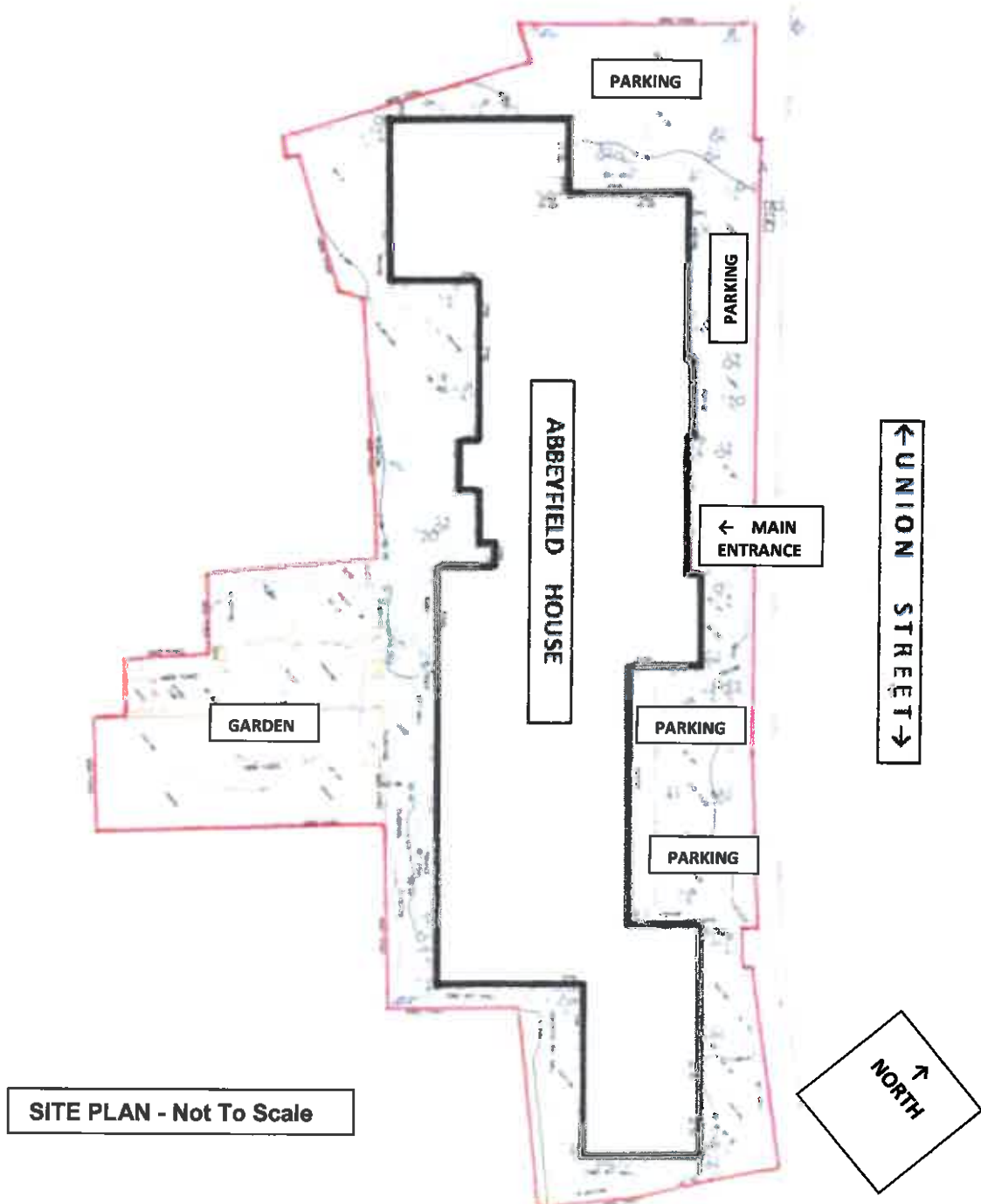


LOCATION PLAN

3: SITE DESCRIPTION

The application site comprises a footprint of approx 2350m² and features the main building, footprint approx 1090m², which is bounded to the north east and accessed from Union Street. Associated private car parking (10 vehicles including 1no disabled space), is accessed from Union Street is also accessed from Union Street. To the south east and south west the site is bounded by allotments and gardens associated with domestic properties along Queen Street and St Pauls Street. To the north west the site is bounded by domestic properties and a General Building Contractor's office and compound.

10 vehicles included 1no disabled space, is accessed from Union Street



4: EXISTING BUSINESS / SITE USE

Abbeyfield Lancashire Extracare Society is an independent charitable society affiliated to the national Abbeyfield Society. The focus is to provide a home of the highest quality for residents with extra needs, including dementia, respite care and day care to relieve carers and relatives.

5: EXISTING MATERIALS

Walls: Natural dressed stonework.

Roof: Natural blue slate.

Windows: uPVC framed.

Rain Water Goods: uPVC

6: PLANNING HISTORY

Application Ref: 3/1990/0283 - Erection of 25 Bed Extra Care Unit with Housekeepers Accommodation and Communal Facilities

Application Ref: 3/2008/0808 - Internal Alterations & 2no Extensions.

Application Ref: 3/2010/0121 - Application for the following non-material amendments to planning consent 3/2008/0808P, removal of additional lift and staircase to east extension resulting in roof alterations to simplify the works; windows to front elevation (east) extension amended to suit room layouts; new staircase to east extension and quiet room, shown to line in with rear wall; dormer construction amended to be slate roof and upvc horizontal boards to cheeks and solar panels omitted from roof.

Application Ref: 3/2011/0319 - Application for non-material amendment for 2no. windows in lounge/dining room to be changed to doors to give access to garden area and re-introduction of PV panels previously omitted from original planning consent 3/2008/0808P.

7: PRINCIPLE FOR DEVELOPMENT

Although the existing dementia unit was purpose built to meet the best standards and practice of the time (including the Sterling University Dementia Design Guide) it was recognised as less than ideal due to the footprint of the available site, subsequently Abbeyfield Lancashire Extracare Society has been able to acquire some land to the south of the site to broaden the footprint enabling the building and site to be upgraded to current standards.

The aim of the proposals is to provide enhanced living and recreational areas to suite the varying level of demand between extracare, dementia, respite and day care, the total number of residential suites remaining unchanged at 40.

Ref also to Appendices 16.1 & 16.2

8: SUMMARY OF THE PROPOSED WORKS - Ref To Plan 9

A: Extension forming Residential Care Lounge.

B: Removal of pitched roofs to bay and lean-to – new flat roof over to integrate structures with new Residential Care Lounge.

C: Provision of internal screens

D: Removal of uPVC conservatory and masonry lean-to, separation of existing Hall & Lounge and extension to form Residential Care Garden Room.

E: Alterations to existing toilets to form 2no accessible WCs.

F: Alterations to existing Bathroom & Sluice Room to form En-suite Bedroom.

G: Alterations to 3no En-suite Bedrooms to form Dementia Care Sitting Room with Kitchen facilities.

H: Extension to form Dementia Care Garden Room.

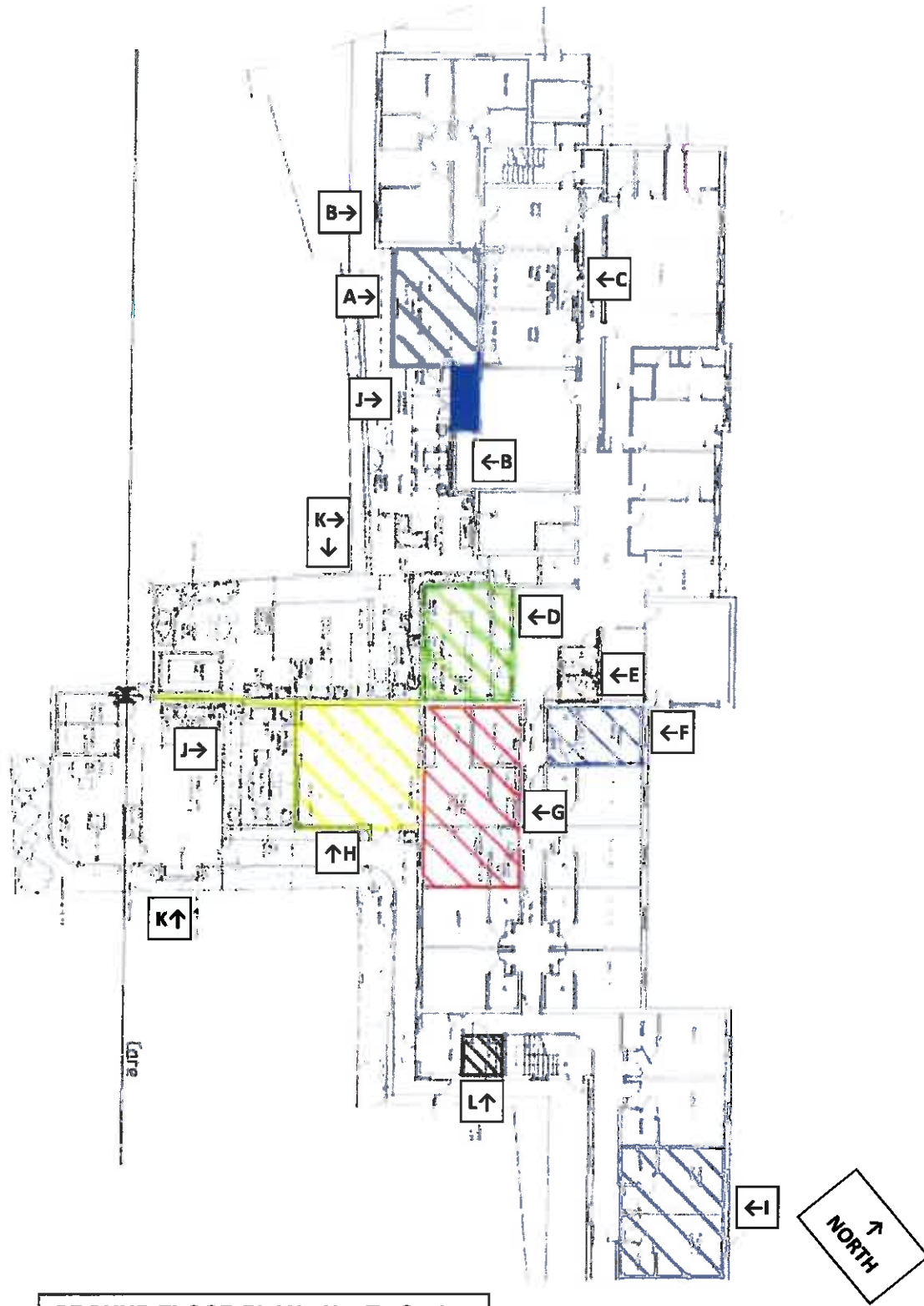
I: Alterations to existing Sitting Room to form 2no En-suite Bedrooms. 2no Existing door external openings changed to windows.

J: Construction of glazed roofs to provide covered external seating areas.

K: External landscaping providing sensory / activity gardens.

L: Installation of extended wheelchair lift.

9: PLAN OF THE PROPOSED WORKS (REF SUMMARY 8)



GROUND FLOOR PLAN - Not To Scale

10: DESIGN CONCEPT

Research has shown that dementia sufferers who can walk around, particularly in the open air have reduced agitation, confusion and aggression.

The acquisition of the land to the south of the site provides an opportunity to create an outdoor area where walks can be taken with the design providing sensory stimulus and also for a number of activities in which residents can be engaged, this garden design is influenced following the guidelines in the publication "Dementia Green Care Handbook of Therapeutic Design and Practice." It has been important to relocate existing and provide new daytime living areas directly off the new garden areas thus providing integration between internal and outdoor areas.

Work Area Ref G & H: 3no existing En-suite bedrooms have been converted into a Dementia Care Sitting Room with access through into a new Dementia Care Garden Room.

Works Area Ref A C & D: The Residential Care Lounge, which currently forms part of the main entrance Hall has been partitioned off, the external wall removed and extension constructed to form a new Residential Care Garden Room -

Works Area Ref F & I: To maintain the number of residential bedrooms, the existing sitting area to the north east of the building and the existing bathroom and sluice room to the centre of the building have been converted into three En-suite Bedrooms replacing the three lot through formation of the new Dementia Care Sitting Room.

The design of the Residential and Dementia Care Garden Lounges incorporate rooflights and large expanses of wall glazing to provide light, a sense of openness and connectivity with the outside, it also allows for visual stimulation by the various elements of the garden design.

The design of the external garden spaces incorporate both open and covered seating areas, low and raised planting areas, water features, bird table and potting sheds all of which provide visual stimulation and allow for a range of activities in which residents can be engaged.

An additional part of the design to upgrade to current standards is the installation of a new lift, the current small lift being undersized to accommodate a large wheelchair and assistant. It is proposed to incorporate the new lift within part of the existing ground floor Quiet Room and the first floor Store. Technical headroom requirements for the lift necessitate the removal of part of the lean to roof to the south east elevation and formation of a bulkhead.

11: MATERIALS

11.1: Residential Care Sitting & Garden Room Extensions:- Natural stone walls to match existing – Single membrane roof covering - Powder coated door and window frames – Powder coated rain water goods – Glazed roof canopy with powder coated aluminium framing.

11.2: Dementia Care Garden Room: Cedar cladded external walls:- Single membrane roof covering - Powder coated door and window frames – Powder coated rain water goods – Glazed roof canopy with powder coated aluminium framing.

11.3: Lift Enclosure:- Zinc or powder coated aluminium clad walls – Single membrane roof covering – Powder coated aluminium rain water goods.

12: EMPLOYMENT

The site currently operates with 19 full time, 44 part time employees and 10 bank staff, as there will be no intensification of the site use due to the proposal the employment level will remain unchanged.

13: REFUSE

Incorporated within the existing building is an enclosed secure bin and separate medical waste store, there will be no impact on either nature or quantity of refuse generated as a result of the proposed development.

14: ACCESS / TRANSPORT / PARKING

14.1 Pedestrian: There is good pedestrian access to the site from both the immediate and wider area via the local footpath network.

14.2 Public Transport: There is currently good public transport access to the site from Clitheroe Town Centre, Clitheroe Railway Station and Bus Terminal with a half hourly "Hail & Ride" bus service along Union Street.

14.3 Motor Vehicle: There is good road network connectivity directly to the site for staff, visitors and service vehicles. As the proposal does not entail an intensification of the existing use there will be no increase in vehicle movements to the site. Also, as the extension works are to the rear of the building there will be no change in the servicing arrangements.

14.4 Car Parking: The site currently provides for 10no (1no disabled) car parking spaces which are accessed directly from Union Street. There is also unrestricted off site car parking available along Union Street. As the proposal does not entail an intensification of the existing use there is no proposal nor requirement to provide additional car parking spaces.

15: PHOTOGRAPHS



Photograph 15.1 – South west elevation



Photograph 15.2 – South west elevation



Photograph 15.3 – South east gable



Line of new 2.0M high wall separating sensory / activity areas to Residential & Dementia Care areas →

↑
Garden to be remodelled to form sensory / activity area off Residential Care Lounge & Garden Rooms.

Photograph 15.4 – South west

16: APPENDICES

16.1 APPLICANTS STATEMENT OF NEED

Abbeyfield Lancashire Extra Care Society Ltd

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Abbeyfield Lancashire Extra Care Society (ALECS) is an independent charitable society affiliated to the national Abbeyfield Society. Our focus is to provide a home of the highest quality for residents with extra needs, including dementia, respite care and day care to relieve carers and relatives. Our recent CQC report was 'good' in all areas.

Our existing dementia unit was built at a cost of around £1.5 million and opened in April 2012. The initial rationale for the need for the unit, updated in Feb 2016, is attached.

Although built to best standards and practice of the time (including the Sterling University Dementia Design Guide) it was recognised as less than ideal due to the footprint of the available site.

Abbeyfield Lancashire Extra Care Society (ALECS) has been able to slowly acquire some land to the south to broaden the footprint.

Demand for care varies between extra care, dementia, respite and day care and the flexibility will allow ALECS to better meet this demand by varying the number of suites available for each type of care. The aim of these improvements is to enhance the living areas and external recreation spaces, the total number of residential suites will remain the same (40).

Research has shown that dementia sufferers who can walk around, particularly in the open air have reduced agitation, confusion and aggression. However careful design is essential to facilitate free movement while maintaining supervision and safety. The proposed improvements will integrate the living area and garden and give a sense of space even in poor weather. The improvements maintain physical and visual separation between residential and dementia spaces to minimise confusion for dementia sufferers.

The home currently has only one small lift which cannot cope with residents with special needs e.g. a large wheelchair. The new lift will share the load and meet these needs.

16.2: The Case for Increasing Provision of Dementia Care within Abbeyfield Lancashire Extra Care Society.

- Abbeyfields Lancashire Extra Care Society (ALECS) has the philosophy of providing the best possible care for residents for as long as possible, ideally until death.
- For social and economic reasons residents are older and more infirm on admission.
- There was an increasing trend for residents having to leave ALECS due to care needs exceeding possible provision to the distress of residents and relatives and the regret of ALECS prior to building the Clitheroe (dementia) unit which opened in April 2012.
- ALECS is a care provider for all Lancashire but its geographical position in the Ribble Valley makes it well placed to serve a high demand area: Clitheroe Health Centre serves a population with 21.5% over 65 compared with E Lancs 18.2% and England 17.9%. Proportionally more elderly people live in rural areas with over 50% over 45yrs compared with 40% in urban areas. By 2029 projections show a rise of 36% of rural populations over 60yrs (urban 23%) and 90% over 75yrs (urban 47%).
- Dementia incidence rises with age affecting 1 in 20 over 65yrs and 1 in 6 over 80yrs. There are about 700,000 people in England with dementia syndrome (850,000 in the UK) expected to rise by about 100,000 every 5 years, the prevalence is projected to increase by 40% in the next 15yrs and 150% in the next 45 yrs.. There is currently little state care provision, unpaid carers undertake most support and urgently need support such as respite and day care. Crossroads (the Ribble Valley charitable carer support organisation) reports the new revised system of personal needs assessment is not recognising the needs of carers who are under increasing stress.
- Reduced Local Authority funding has resulted in a crisis in social provision to meet the needs of the elderly. At present the Dilnot reforms have been postponed until 2020 but by capping reasonable care costs and extending means tested support these may put further pressure on a sector already stretched and underfunded.
- The emphasis on supporting social need within the home has resulted in less demand for extra care rooms.

Demand is increasing for dementia care as life expectancy continues to rise. By 2030 there will be double the number of people over 85yrs compared with 2010. By 2037 it is expected 1 in 4 of our population will be over 65yrs.