



Proposal for a
Nursing and
Residential Elderly
Care Home

IMPERIAL PARK

WILLS WAY

BRISTOL

PLANNING DESIGN
AND ACCESS
STATEMENT



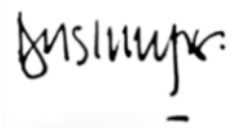
Cornerstone

HEALTHCARE GROUP



1. Introduction
2. Demand
3. Nursing & Residential Elderly care
4. Site Location
5. Site Appraisal
6. Planning Policy
7. Development Strategy
8. Building Design
9. Access
10. Landscape



Report Prepared by	Danny Sharpe NORTHSTAR danny@northstar-projects.com
Report Issue date	11-02-2021
Signed	



- 
1. Introduction
 2. Demand
 3. Nursing & Residential Elderly care
 4. Site Location
 5. Site Appraisal
 6. Planning Policy
 7. Development Strategy
 8. Building Design
 9. Access
 10. Landscape



1.0 Introduction

Northstar has been asked by our client **Cornerstone Healthcare Group** to design and build a brand new, state of the art, 21st Century elderly care facility at this important strategic site in Bristol.

Cornerstone Healthcare Group is a specialist care home operator based in Hampshire. They believe in

- **Lifestyle-related care** and service. Recognising and appreciating that residents have a unique personality, life history, physical and mental health, and social and economic resources, and that this will affect their response to neurological impairment.
- **Providing the right environment** with opportunity for social interaction in domestic settings. This enables a more 'normal' lifestyle to be enjoyed by residents and carers alike – as opposed to being moved into large scale, converted premises institutional-style bedrooms and long corridors.
- Using a range of (non-intrusive) **assistive technology** approaches designed to be enabling rather than disabling.
- Good design – creating places to sit and **enjoy a view** to avoid the sense of frustration suffered by residents with short term memory loss who might otherwise have no opportunity to venture outside.

- Put simply, Cornerstone believes in getting away from an institutional delivery of healthcare and getting back to basic life-affirming things such as **enjoying the natural environment**, enjoying the health giving benefits of **natural daylight**, living in safe, **domestic-scale dwellings** and not institutional, hospital wards.





1. Introduction
2. **Demand**
3. Nursing & Residential Elderly care
4. Site Location
5. Site Appraisal
6. Planning Policy Framework
7. Development Strategy
8. Building Design
9. Floor Plans & Elevations
10. Access
11. Landscape



2.0 Demand

The UK has an ageing population (ONS, 2018k).

There are nearly 12 million (11,989,322) people aged 65 and above in the UK of which:

- 5.4 million people are aged 75+,
- 1.6 million are aged 85+,
- Over 500,000 people are 90+ (579,776)
- 14,430 are centenarians (ONS, 2018, 2018).

The number of centenarians living in the UK has increased 85% in the past 15 years (ONS, 2018).

The 85+ age group is the fastest growing and is set to double to 3.2 million by mid-2041 (ONS, 2018).

The likelihood of being disabled and / or experiencing multiple chronic and complex health conditions increases with age (ONS, 2018).

As life expectancy has increased, time spent in poor health has also increased (ONS, 2018).

The national picture, as far as supply and demand of care home accommodation is concerned, has remained largely unchanged in recent years: namely the level of care home closures tends to offset the building of new care homes. This nationwide phenomenon has seen a steady loss of smaller homes and a steady supply of new, larger homes. Therefore, the overall bed numbers have grown marginally over the past twelve months, whilst the overall number of care homes has fallen slightly.

While the UK care home market is growing - albeit slowly - in absolute terms, it is shrinking in relative terms due to the large increases in the elderly population. The **recent Healthcare Development Opportunities** report by Knight Frank (2020) shows that the number of care home beds per 100 people over the age of 85 has fallen from 33.7 to 28.7 since 2010. If the same falling ratio of beds per head of population is applied to the next decade, the care home industry will see massive shortfalls in care home provision.

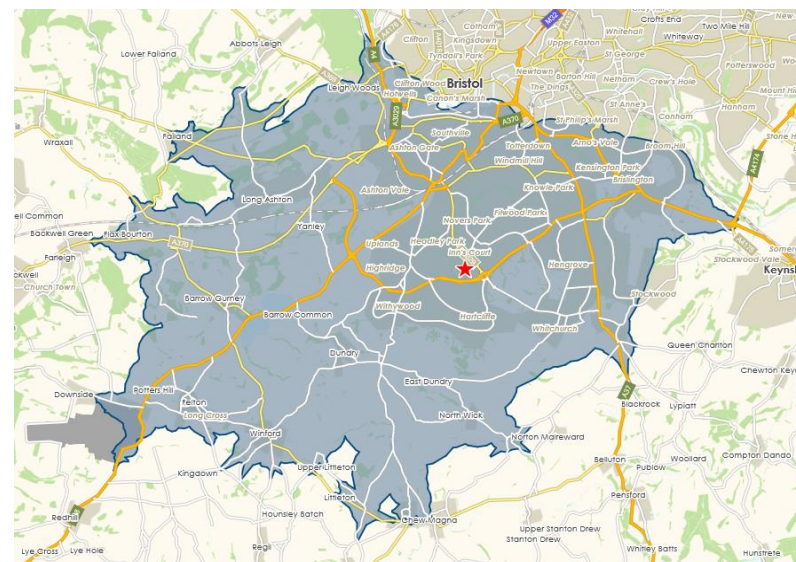


The Report examines why the level of home closure is so high and concludes that *“with 58% of de-registered homes rated as ‘inadequate’ or ‘requires improvement’ by the Care Quality Commission (CQC), failing care standards are a clear cause of closure. Financial stress is an equally significant cause of closure. Increasing costs, especially staffing costs, have impacted many care homes in recent years at a time when fee levels derived from local authorities have been frozen.”*

The local picture reflects the national picture in that there is an overall shortage of care homes beds which is likely to be exacerbated as time goes on. There is also evidence locally of some shared bedrooms and some older homes in the catchment which do not have en-suite bathrooms. This is often a good indicator of the (lack of) modernity and the likelihood of further home closures in the future.

Cushman and Wakefield carried out an assessment of the supply of care home beds based on a 15 minute drive time from the subject site (see map opposite). Their study takes information from a national CACI database. CACI develops population and Household Estimates and Projections for the UK as a member of the Joint Industry Committee for Population Standards

(JICPOPS). Based on current and future detailed population statistics, their needs assessment then correlates this with information from LaingBuisson who are the leading providers of business intelligence to the UK Healthcare sector: they maintain records of all elderly accommodation from supported living, through to extra care and specialist nursing care, including a live database of schemes ‘in the pipeline’ which have been granted planning consent as well as current accommodation to assess the likely demand for different types of care accommodation in future years based on UK wide provision - showing shortfalls and overprovision by drive time or postcode as required.



The study shows that there are currently 11 care and nursing homes in the catchment area providing a total of **688** beds, of which only **452** have en-suite bathrooms. When comparing the numbers of elderly people in nursing and residential care across the UK, the catchment area should be providing **799** beds to keep pace (at 2019 figures). This base shortfall of **111** beds rises to a shortfall of **181** beds by 2024. Of course, this is the base number of bedrooms and will include shared bedrooms and bedrooms with no en-suite provision. As previously the number of en-suite bedrooms is only 452 against a need for 799, showing a shortfall of **347** en-suite bedrooms as at 2019. This need will continue to grow based on all forecasts for elderly care accommodation.

CARE HOME SUMMARY

All Care Homes

	Homes	Registered Beds	Ave	Max	Min	Rooms	Single rooms	En Suite	% Single rooms	% En Suite
Care Home	3	80	26.7	30	23	79	78	52	98.7%	65.8%
Nursing Home	8	608	76.0	169	51	596	584	400	98.0%	67.1%
Total	11	688	62.5	169	23	675	662	452	98.1%	67.0%

Key Competitors

	Homes	Registered Beds	Ave	Max	Min	Rooms	Single rooms	En Suite	% Single rooms	% En Suite
Care Home	0	0	0.0	0	0	0	0	0	0.0%	0.0%
Nursing Home	1	83	83.0	83	83	83	83	83	100.0%	100.0%
Total	1	83	83.0	83	83	83	83	83	100.0%	100.0%

BED DEMAND

Risk of living in a care home or long stay hospital, by age*

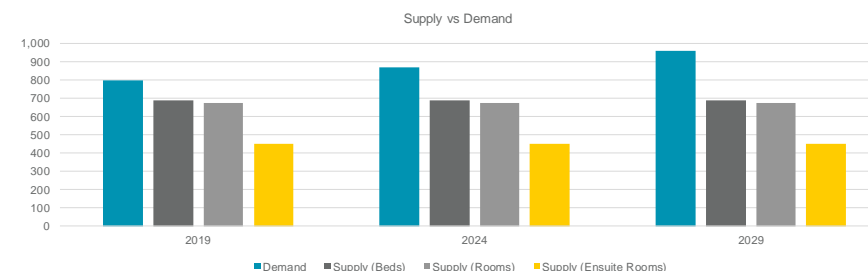
	65-74	75-84	85+
%	0.54	3.30	13.60

* Estimated general old age bed requirements - includes people in nursing and residential homes, NHS long stay hospitals and units for older and older mentally ill people

Bed Requirement based on 2019 Population Projections

Age	2019	2024	2029
65 - 74	69	69	74
75 - 84	268	311	335
85+	463	489	552
Total Requirement	799	869	962

SUPPLY VS DEMAND





- 
1. Introduction
 2. Demand
 3. **Residential Elderly Care**
 4. Site Location
 5. Site Appraisal
 6. Planning Policy
 7. Development Strategy
 8. Building Design
 9. Access
 10. Landscape



3.0 Residential Elderly Care

This proposal is for a **nursing and residential elderly care home**. It falls under **Use Class (C2)** which states:

“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...”

There are a number of subsets of older peoples’ accommodation these days, from retirement homes, through independent living, to close care, extra care, housing with care, very sheltered housing, etc, etc. Depending on the level of care provided, the availability of 24 hour care, the purchase of a care plan and many other variables, these developments can either be classed as C2 (Residential Institution) or C3 (Use as a dwellinghouse). In the case of this proposal the classification is simple: this is a **C2 Use Class** residential institution providing **nursing and residential elderly care** within a residential institution.

The accommodation comprises individual, en-suite care bedrooms grouped around central communal living areas with assisted baths, communal dining and dayspace provision.

Residents are admitted due to their care requirements. That can range from assistance with eating, dressing, bathing and other activities of daily living, right through to end of life palliative and nursing care. There is no element of independent living within a **Cornerstone** facility and each resident bedroom is registered with and regulated by the Care Quality Commission under the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The Care home will operate on the ‘**Household Model**’ of care which breaks down the main home into a series of smaller ‘domestic’ style units of residents with similar abilities. Elderly residents with some form of cognitive impairment or more advanced dementia can benefit hugely from outdoor activities and are therefore best located on the ground floor of a care home. This allows them to easily access the outdoors into secure gardens where they can take part in socialising and therapeutic activities which can stimulate and reinforce positive associations and earlier recollections based on the natural environment, particularly gardening - growing flowers and vegetables. Working outdoors, there is a wide range of activities to suit all abilities of residents - from simply sweeping up leaves; to working on craft projects; to planting and harvesting herbs



and vegetables to then take home to cook with; to planting a whole garden plot with the help of the trained horticultural therapists.

Internally, the development will:

- compensate for impairments
- be orientating and understandable
- enhance self-esteem and confidence
- reinforce personal identity
- allow control of stimuli

End of life palliative care and nursing residents tend to be located upstairs, away from the hustle and bustle of the more active downstairs. Here, the emphasis is on creating a calm and peaceful environment with pleasant views and a roof garden for those who are able to travel the short distance from their rooms to access the outdoors.

None of the residents would have their own cars and none would be able to venture out from the home unless they were to travel in a mini bus for an outing or via ambulance to the hospital

for appointments. Staff and occasional visitors may occasionally walk to the Retail Park across Wills Way, via the footpath links but other than that, it is not expected that there would be any other pedestrian travel between the care home and the Retail Park.





1. Introduction
2. Demand
3. Residential Elderly Care
4. **Site Location**
5. Site Appraisal
6. Planning Policy
7. Development Strategy
8. Building Design
9. Access
10. Landscape



4.0 Site Location

The subject site is located 2.5 miles to the South of Bristol City Centre. It lies immediately to the South East of **Imperial Retail Park** - a large retail park development on the site of the former Imperial Park Tobacco factory. The site extends to 1.28 acres and is accessed via a right turn off Wills Way, via the A4174 (Hartcliffe Way).

This southern portion of the former Wills Tobacco factory was previously used as the main car park for the factory. The entire remaining site of the former factory has previously been developed as a large Retail Park, whilst this former car-park area was further divided into 4 remaining plots. Plot 4 was developed by Persimmon following their grant of consent for an 82 unit housing scheme back in 2016. Lately, plot 1 has been developed out to provide an ALDI food store with associated parking. The subject site - 'plot 2' - extends to 1.28 acres and shares an access road off the main Wills Way with the new Aldi store opposite.

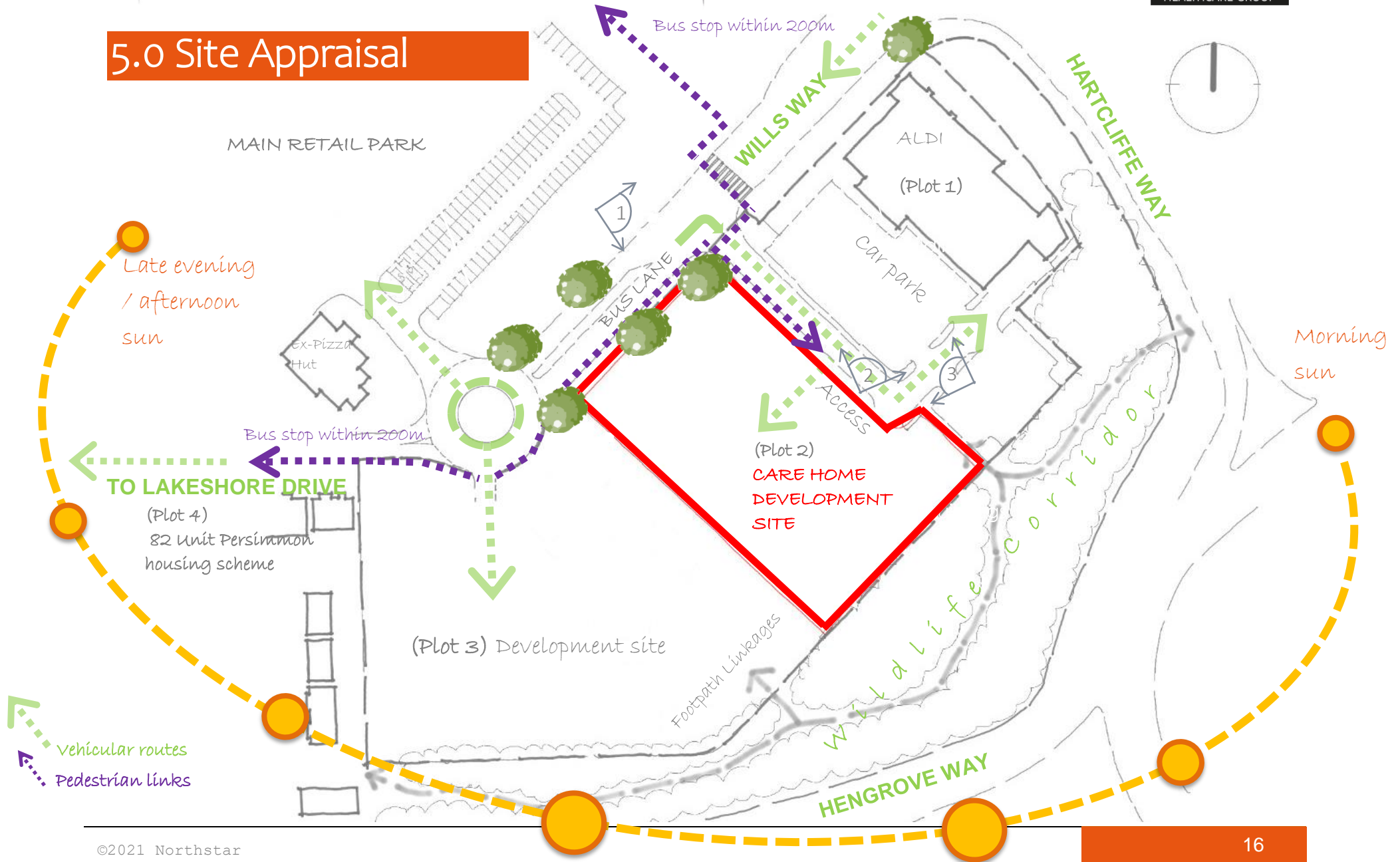
A recent cut and fill exercise has resulted in the re-profiling of the site, creating a flat, uniform development site.





- 
1. Introduction
 2. Demand
 3. Residential Elderly Care
 4. Site Location
 5. **Site Appraisal**
 6. Planning Policy
 7. Development Strategy
 8. Building Design
 9. Access
 10. Landscape

5.0 Site Appraisal



The site is accessed via Lakeshore Drive (off Hengrove Way) and via Wills Way (off Hartcliffe Way). Traffic entering via Wills Way is required to drive past the site opening and make a 'U-turn' around the roundabout to enter via a right turn due to the bus lane which runs along Wills Way.

The site has recently been scraped and levelled and is made up of general scrubland surrounded by timber and metal fencing. Following the re-grading exercise, the topography of the site shows a very slight fall from NW to SE. The site is located in Flood Zone 1. There are no heritage or landscape designations.

The Woodland Wildlife corridor which abuts the site to the east comprises a Wildlife Network with an adjacent SNCI and contains some mature trees covered by an Area Tree Preservation Order (no. 672).

There are no adopted sewers on the site but public surface and foul water drainage is located adjacent in Hartcliffe Way to the east and Hengrove Way to the south.



Fig 1. Shared site access road with Aldi off Wills Way



Fig 2. Looking across to Aldi from care home site



Fig 3. Access into care home site



1. Introduction
2. Demand
3. Residential Elderly Care
4. Site Location
5. Site Appraisal
6. **Planning Policy**
7. Development Strategy
8. Building Design
9. Access
10. Landscape





6.0 Planning Policy

6.1 Planning History

Outline planning permission was granted in March 1997 for the redevelopment of the wider, former Imperial Tobacco Factory site, including the following uses A1, A3, B1, C1, D2 and B8 (94/00364/P). Reserved Matters approvals pursuant to that outline planning permission led to the following development:

- Phase 1 – access, infrastructure and B&Q
- Phase 2 – Pilkington Office/Distribution building
- Phase 3 – Retail and leisure development
- Phase 4 – the triangle development, Pizza Hut and transport interchange
- Phase 5 – the remainder of the “western terrace”, including Tesco Home Plus

Phase 6 is the remaining undeveloped part of the site. This has been further divided into 4 plots as explained above. Outline planning permissions were granted in December 2012 relating to these four plots as follows:

- 11/01863/P – erection of public house (plot 1)
- 11/01864 – erection of hotel (plot 2)
- 11/01865 – erection of business units with car showroom, management and vehicle servicing (plot 3)
- 11/01866/P – erection of a residential care home, 31 houses and 12 flats (plot 4 – adjacent to application site). This application was withdrawn, but there was a resolution to grant planning permission.

Planning permission was granted on 3 January 2017 for the redevelopment of Plot 4 for a residential development of 82 dwellings (ref: 15/03418/F)

Planning permission was granted on 15 June 2017 for engineering works to re-profile the existing landform across the 3 remaining plots, using a cut and fill strategy (ref: 16/02278/F). This was granted subject to a section106 agreement securing a contribution towards replacement tree planting.

Planning permission was granted for plots 1-3 on 22nd November 2017 for *Mixed use development to include a discount supermarket (Use Class A1), non-food retail (Use Class A1), drive-thru A1/A3/A5 cafe, restaurant and Cafes (mix of Use Class A1/ A3 / A5), a gym (Use Class D2), car parking, hard and soft landscaping, pedestrian links to Hengrove Way, and servicing and access arrangements (ref: 17/00996/F)*

A follow up application to discharge conditions relating to a Construction Management plan and Landscape / Tree Protection / Woodland improvement works was approved in application ref (18/00451/COND). The Woodland Conservation Management plan was prepared by Vector Design Concepts, ADAS Ecology and Greenman Environmental Management.

A subsequent application to vary conditions 2, 3, 4, 8, 10, 12 and 37 attached to app.no. 17/00996/F (ref: 19/00826/X) included the provision of a phasing plan expressly allowing for the phased redevelopment of the site, other minor material amendments to Phase 1 of the proposed development and amendments to the wording of a number of conditions in connection with the phased delivery of the site. This application was granted on 17th October 2019. The consent allowed for works to the Woodland



Area and payment of the CIL contribution to be staggered to reflect the fact that the remaining site would be delivered in 3 parcels. It was agreed that the phasing of Condition 4 - Landscape Conservation Management plan and tree works - could be discharged in line with a phasing plan (X-wildlife corridor phasing plan).

Condition 4 stated

“In accordance with the approved Landscape Conservation Management Plan, prepared by Vector Design Concepts, ADAS Ecology and Greenman Environmental Management (as per the approval of details notice ref 18/00451/COND), the approved measures outlined in the Management Plan associated with the relevant phase (as identified on the Wildlife Corridor Phasing Plan) and shall be completed prior to occupation of the unit(s) within the corresponding phase of development.”

Therefore, whereas the subject site redline boundary does not encompass the area of Woodland to the South East, it remains the case that the applicant responsible for the original application (ref: 17/00996/F) and the subsequent discharge of Condition 4 via Application (18/00451/COND) remains bound by the terms of these consents. The Woodland Management works identified to be carried out prior to the occupation of Phase 2 in line with the phasing agreed in (19/00826/X) are to be completed prior to occupation of the care home which is the subject of this application.

6.2 National Planning Policy Context

The National Planning Policy Framework (NPPF) (June 2019) sets out the overarching policy priorities for the planning system, against which local plans will be prepared and decisions made on planning applications. The proposed development will be assessed against relevant policies in the NPPF as an important material consideration.

The NPPF states that the purpose of the planning system is **“to contribute to the achievement of sustainable development”** (paragraph 7)

Paragraph 8 sets out the three dimensions of sustainable development. These are: ‘**economic**’ in contributing to a strong and competitive economy; ‘**social**’ in supporting strong communities and providing the supply of housing required for present and future generations; and ‘**environmental**’ in protecting and enhancing the environment.

The NPPF states, in respect of decision-making, that Authorities should support applications for sustainable development and approve development proposals that accord with the development plan without delay. Paragraph 11 states that at the heart of the NPPF is a presumption in favour of sustainable development, which should be applied to both plan-making and decision-taking: The framework is clear at paragraph 38 that:

“Local planning authorities should approach decisions on proposed development in a positive and creative way. They



should...work proactively with applicants to secure developments that will improve the economic, social and environmental conditions of the area. Decision-makers at every level should seek to approve applications for sustainable development where possible.”

NPPF paragraph 64 confirms that a proposed development which provides specialist accommodation for a group of people with specific needs (such as purpose-built accommodation for the elderly) is exempt from the requirement which expects at least 10% of the homes to be available for affordable home ownership.

The NPPF emphasises the importance of making effective use of brownfield land. Paragraph 118(c) requires planning decisions to:

“give substantial weight to the value of using suitable brownfield land within settlements for homes and other identified needs”.

6.3 Local Planning Policy Context

Bristol Local Plan - Comprising the **Bristol Development Framework Core Strategy** (June 2011) and the **Site Allocations and Development Management Policies** (July 2014)

The site is part of the wider Imperial Park (vacant southern section) site allocation **BSA1302** as contained within the Site Allocations and Development Management Policies document. The allocation is for ‘Business, Housing and Leisure’ making the inclusion of a C2 Use Class care home compliant with the

allocated use. The proposed development is also consistent with the aims of the Core Strategy which states, at Policy BCS1, that South Bristol will be a focus for ‘development and comprehensive regeneration’ with a focus on mixed use developments, primarily on previously developed land.

POLICY BCS1 sets out that South Bristol will be a priority focus for development and comprehensive regeneration to include office space, industrial development and housing of all types.

POLICY BCS10 sets out the Council’s approach to sustainable transport improvements and also requires that development should be located where sustainable travel patterns can be achieved.

POLICY BCS12 requires that community facilities should be located where there is a choice of travel options and should be accessible to all members of the community.

POLICIES BCS13, 14 and 15 require that development should aim to both mitigate and adapt to climate change by focussing on high standards of energy efficiency; reducing reliance on the private car; using low carbon energy supply systems and natural resources; incorporating measures to enhance bio-diversity and measures to conserve water, etc.

POLICY BCS16 reflects national policy in directing development to the areas of lowest flood risk first, taking a sequential approach to site selection.



POLICY BCS20 underlines the importance of efficient use of previously developed land. Higher densities of development are encouraged at local centres and along main public transport routes.

POLICY DM2 from the Site Allocations and Development Management Policies gives greater detail on the mix and location of various housing types across the City. It requires that Older Persons' Housing Schemes should be located close to shops and services and close to good public transport links. It also notes that ***“accommodation for older persons will be acceptable on all sites allocated for housing subject to the policy criteria.”***

POLICY DM29 from the Site Allocations and Development Management Policies spells out that ***“new buildings should be designed to a high standard of quality, responding appropriately to their importance and reflecting their function and role in relation to the public realm.”*** It also requires, amongst many other criteria, that new buildings should ***“incorporate opportunities for green infrastructure such as green roofs, green walls and green decks...”***

6.4 Policy Analysis

A previous Pre-App submission for ***Redevelopment of Phase 6, Parcels 1-3 Imperial Park to include ALDI supermarket (as approved), a mix of uses to include some of the following: housing, care home/retirement housing, drive-thru café, public***

house, public house with rooms, hotel and/or health centre was advised by Bristol City Council Planning Department that

“Residential provision both in the form of a residential care home/retirement home and residential dwellings are also considered acceptable at the site in line with Policy SA1. The residential care home/retirement home provision is particularly welcomed given the current need.”

The advice was keen to point out that a balance and mix of uses was expected and that any application to develop the entire site for residential development would not be supported. Since this advice, the Aldi Supermarket development has been implemented on Parcel 1.

The proposal represents the appropriate re-use of a previously developed site that is situated in a sustainable location in South Bristol in line with Policies BCS1 and BCS20 of the Core Strategy. The development also chimes with Policies BCS10 and BCS12 which require community facilities to be located in accessible areas with a choice of transport available and in a location where sustainable travel patterns can be achieved. The easy access onto the main arterial road network and the proximity of local bus stops within 200m of the site access make this site a wholly sustainable option. Policy DM2 of the Site Allocations and Development Management Policies requires older persons' housing to be located in close proximity to shops and services and good transport links. The location adjacent to the shops and restaurants of the Retail Park as well as the easy car and bus links



to the wider transport network make this site ideal and fully compatible with the aims of policy DM2.

Policies BCS13-15 of the Core Strategy requires new development to demonstrate the efficient use of energy and efforts to mitigate climate change by using low carbon and renewable energy resources. This is also a major theme in the NPPF, witnessed at paragraph 11 which has a presumption in favour of sustainable development. The proposed development will, by way of a continuing review of design, specification and construction, aim to optimize performance of the building and its environment by adopting the following objectives:-

- Minimize life-cycle impact during construction and operation by designing and specifying to conserve non-renewable energy loads;
- Preserving and creating new biodiversity from the present environment by adding habitats and facilities to encourage flora and fauna. Include native species of plants in new schemes. A 'Living Green Roof' is planned for a large area of flat roof across the scheme.
- Implement a green travel plan to encourage staff to use public transport and cycles;
- All timber will be sourced from sustainable timber resources; and

- Reducing demands on water supplies by specification of components, monitoring systems and management systems

6.5 Presumption in favour of Sustainable Development

So that sustainable development is pursued in a positive way, at the heart of the NPPF is a “*presumption in favour of sustainable development*” (NPPF paragraph 11).

The proposal accords with the adopted development plan. National policy and legislation directs that in this instance planning permission should be granted.

Furthermore, there are no policies within the NPPF (footnote 6) that provide a clear reason for refusing development. Nor are there any adverse impacts of approving the application that would *significantly* and *demonstrably* outweigh the benefits, when assessed against the policies in the NPPF as a whole, as summarised below.

The proposed development would result in a range of benefits, including social, economic and environmental factors outlined as follows:

6.5.1 The Economic Dimension

The proposed development would provide a clear contribution to the economic prosperity of the local area. The most significant economic benefits of the proposed development include:



A capital investment of around £6 million (construction value);

50 construction jobs over the anticipated 15 month build period along with 80 supply chain jobs indirect/induced 'spin-off' in the construction industry.

Operational and expenditure benefits including 74 direct jobs within the care home along with supporting an additional 20 indirect/induced supply chain jobs.

The NPPF sets out that the planning system should positively and proactively encourage sustainable economic growth and should place 'significant weight' on the need to support economic growth and productivity.

6.5.2 The Social Dimension

The proposed development would deliver a new, high quality, considerably designed care home to meet an unfulfilled, growing and acute need for elderly care provision in the wider community. The beds can also be expected to free up larger, currently under-occupied homes across the District, to assist in meeting wider, housing needs.

There is a clear identified need for elderly accommodation in this area; heightened when compared to other areas.

The proposal would positively and efficiently re-develop a brownfield site to meet an exceptional identified need for elderly care provision in the area, supporting social regeneration of the area.

In addition, by its nature, the use of the proposed development will lead to provision of a facility that will reduce social exclusion and loneliness amongst the local elderly population and enhance wider community well-being. The proposed development provides a facility for use by families in the local area that could provide peace of mind for those with elderly relatives that family members are well looked after in a high-quality, safe and accessible environment in close proximity to their own dwelling or place of work.

Overall, the social aspects of sustainability have been positively integrated into the proposals and there would be great benefits to social sustainability as a result of the proposed development.

6.5.3 The Environmental Dimension

The application is accompanied by numerous technical studies and statements which assess the proposed development in relation to meeting the 'environmental' pillar of sustainable development.

There will not be significant effects on any designated areas of landscape sensitivity or views. The proposed landscaping scheme has formed an intrinsic part of the design to ensure a sensitively screened development.

There will not be any direct impacts or substantial harm caused to any designated heritage asset.



Energy efficiency will be integrated into the proposed development, including the design and sustainable construction will be conducted.

Impact on Noise and Air Quality is considered acceptable for both neighbouring communities and future residents.

Overall it is considered that the proposed development would secure high quality environment in accordance with the NPPF.

6.5.4 Sustainable Development Summary

This detailed planning application sets out across a number of themes how the proposed new residential home will embed the principles of sustainable development. The proposed development demonstrates a high degree of sustainability, with particular economic and social benefits, alongside an approach to environmental sustainability which enhances the environment where possible and minimises and mitigates impacts in accordance with the NPPF and the Development Plan.

In summary, the proposal offers

- A sustainable, high quality and responsive residential care home providing much needed, specialised care for the local elderly population.
- Positive and efficient re-development of a brownfield site to meet an exceptional identified need for elderly care provision in South Bristol.
- The opportunity to release under-occupied homes to the local general market for families.

- Good economic benefits for the district, including up to 74 new direct jobs and a capital investment of £11 million into the region.
- A reduction in social exclusion and loneliness amongst the local elderly population.
- Enhancement of general community well-being and support to the social regeneration of the area.

The huge un-met need for this development is clearly demonstrated at section 2.0 and the location is ideal from the point of view of sustainable transport provision and access to services. The principle of development is already established and enshrined in local policy and the ecological benefits of the proposed 'Living Green' roof offer an excellent opportunity to improve local wildlife habitats. It is concluded that the proposed development embodies the principles of sustainable development promoted through the NPPF and the Local Development Plan. As such, it is considered that planning permission should be granted for the development without delay.



1. Introduction
2. Demand
3. Residential Elderly Care
4. Site Location
5. Site Appraisal
6. Planning Policy
7. **Development Strategy**
8. Building Design
9. Access
10. Landscape



7.0 Development Strategy

THE CONCEPT

Delivering the household model of care

There are three key elements which need to be addressed by the built environment when following the household model of care:-

- **Cognitive Ability** is improved by promoting the use of familiar and recognisable surroundings and activities that respond to residents' deepest and earliest memories. This could be as simple as unloading shopping, chopping vegetables at a kitchen table or folding washing.
- **Social Ability** is addressed through the design of artefacts and amenities that create opportunities for residents and staff to interact more easily in activities of daily living. Central living areas and places for everyday activities to take place are central to this.
- **Physical Ability** is promoted through design which unobtrusively compensates for disabilities such as mobility and limited vision which are prevalent among care home residents. Easy way-finding and visual clues to help with recollection are also important to avoid confusion leading to increased anxiety.

An important distinction or characteristic which is almost always overlooked in developing new nursing, residential and dementia

care units is the differing (normally four) stages of dementia: from early stage to end stage. This comes back to recognising the individual and their particular set of circumstances: the physical environment needs to vary for people living through these different stages of dementia. By providing a variety of dayspace rooms and having five separate 'households' through the home, Cornerstone will be able to cater for the widest possible range of needs and abilities.

DEMENTIA STAGE	ACTIVITY LEVEL	BUILT ENVIRONMENT
Early stage	Goal directed planned activity level	This requires many visual clues, reminders of place and time to help 'ground' a person with early stage dementia. The emphasis is on activity and stimulation of the mind and senses. Promotion of independence and choice.
Mid stage	Exploratory activity level	Requires presence of familiar activities, repetitive actions (folding washing, etc). Choices need to be limited to avoid confusion. Reminiscence is important. Memory aids useful and need to reduce distractions.
Repetitive stage	One to two step sensory activity level	Resident needs comfort at this stage. Narrow visual field, safety and security paramount. Stimulation or relaxation as mood dictates. Sensory stimulation important. Not mobile.
End stage	Reflex activity level	Subliminal or subconscious actions. Avoid over-stimulation. Daylight / warmth / sunshine / music / smells / reflex actions only. Calm tranquil environment needed.



It is also critical to the philosophy of the ‘Household Model of Care’ that each unit can be accessed from a central public zone without any resident or visitor of another unit being forced to travel through another ‘Household’ to get to their destination. This level of **privacy and dignity** is critical for operators who provide the very best in elderly care.

Legibility and Familiarity in Design

A key aspect of designing for a cognitive impairment like dementia is to build on the strengths that residents still have. Design should not just aim to support residents’ disabilities, but utilise their remaining abilities. There are a number of ways in which this can be done.

A person with dementia will find it easier to remember a fact or procedure when they are prompted by a reminder or a memory aid. This is generally termed ‘recollection’. What becomes more difficult is recalling information without a leading link, such as trying to recall what clothes a person wore yesterday. This is more to do with recognition. Utilising the power of recollection has many applications in dementia care.

The building layout of the care home will be based around significant places that are held within a person’s oldest and strongest memories. New environments that use unfamiliar typologies will not help a person to recollect the purpose of that space or how they should interact with it. The internal rooms will obviously include familiar, recognisable objects such as dining tables in a dining room, or a bed in a bedroom and will,

therefore, be more identifiable from a person’s past. They will appeal to a person’s earlier memories and in most cases evoke positive and useful associations. In addition to evoking memories of home and familiar settings, visual clues and signage are also useful for ‘wayfinding’ around the building and the site as the loss of recognition makes remembering the plan form of a building difficult. Pictorial representations internally and easily identifiable signage can be used to explain the function of rooms and therefore aid wayfinding via recollection.

Key Principles

- Simple easily understood layout
- Domestic and familiar in character
- Personalised care provided in ‘Households’ where Care Rooms are in clusters of 16
- Minimising artificially lit internal corridors
- Providing visual cues – colour, objects, views
- Visual accessibility – open plan, open storage
- Good natural daylight and maximise views from the building
- Facilitate safe wandering
- Easy access to secure garden amenity areas
- Smart Technology
- Surrounded by personal possessions & memories



Materials

The materials used both externally and internally throughout the building are important to the well-being of its residents. For a person to feel 'at home' it is important that we understand what that means in their particular context.

The aim is to create a building which will evoke memories of 'home' and thus will be far more likely to become a place of refuge for someone who is starting to suffer from the stress of memory loss and diminished cognitive ability. Resident bedrooms are kept very traditional and residents are encouraged to bring any sentimental items of furniture which help to recreate their home, safe environment. Dining rooms and lounges are simply furnished within open plan, highly accessible and visible areas. At the same time, the building needs to function in its wider environment and sit comfortably with its neighbours so as not to detract from the aesthetics of its immediate surroundings.

Given the industrial history of the area and the current retail park neighbours, we felt that a palette of traditional materials and reasonably robust detailing would be appropriate here. The robust detailing will sit comfortably with the site's industrial heritage and current commercial neighbours, whilst the use of well-known, traditional local materials used in an expected, established building typology will help residents to settle more quickly into a building that will quickly become a place of comfort and safety for them.



Outside Space

Having a seamless transition from indoors to outdoors with no restrictions on residents' choices as to where they want to be is hugely helpful in alleviating stress in dementia sufferers. As long as the overall outside space is safe and surveilled, there should be no reason why an unlocked door policy can't be operated. Well-designed gardens with areas for activities as well as areas for calm contemplation are essential in any new, well-designed care home these days. Residents can work with therapists and learn new skills or re-discover old skills through working with



plants whilst also getting the benefit of being outdoors and taking part in physical activity. Working outdoors, there is a wide range of activities to suit all levels of dementia sufferers - from simply sweeping up leaves; to working on craft projects; to planting and harvesting herbs and vegetables to then take home to cook with; to planting a whole garden plot with the help of trained horticultural therapists.

The benefit of 'getting out into the fresh air' also has science to back it up. Being in nature reduces the amount of stress hormones, such as cortisol, in the system. Getting out into nature reduces anxiety by decreasing activity in the part of the brain's prefrontal cortex that is active when we are worrying about something over and over. Good care home design should ideally provide a series of different outdoor areas which enable socialising activities to be used as therapy to stimulate and reinforce positive associations and earlier recollections based on the natural environment.

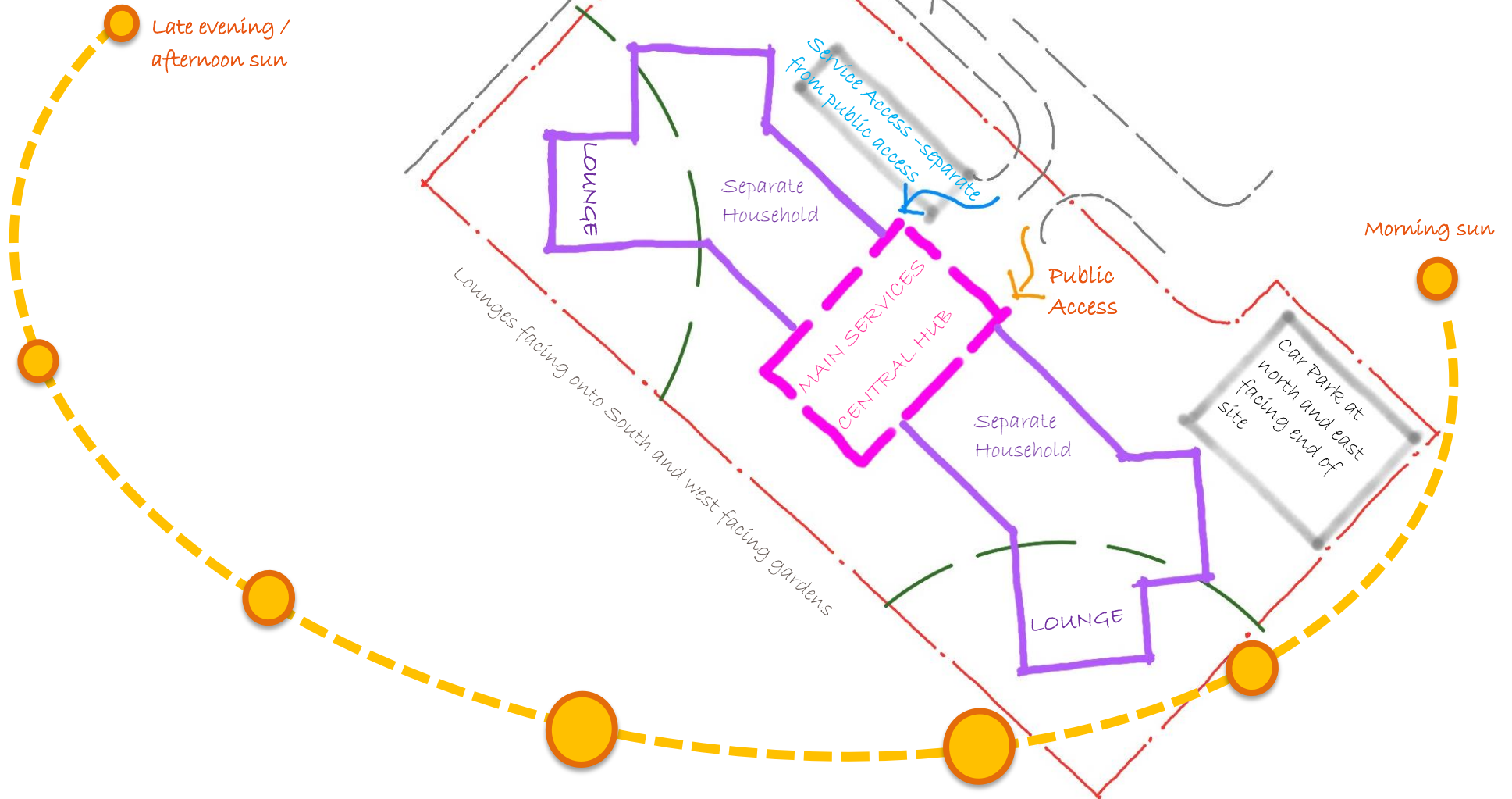
The addition of a safe roof garden with views onto a living green roof beyond all adds to the variety of outdoor activities and the choice of different views and sensations which will be hugely beneficial to residents.

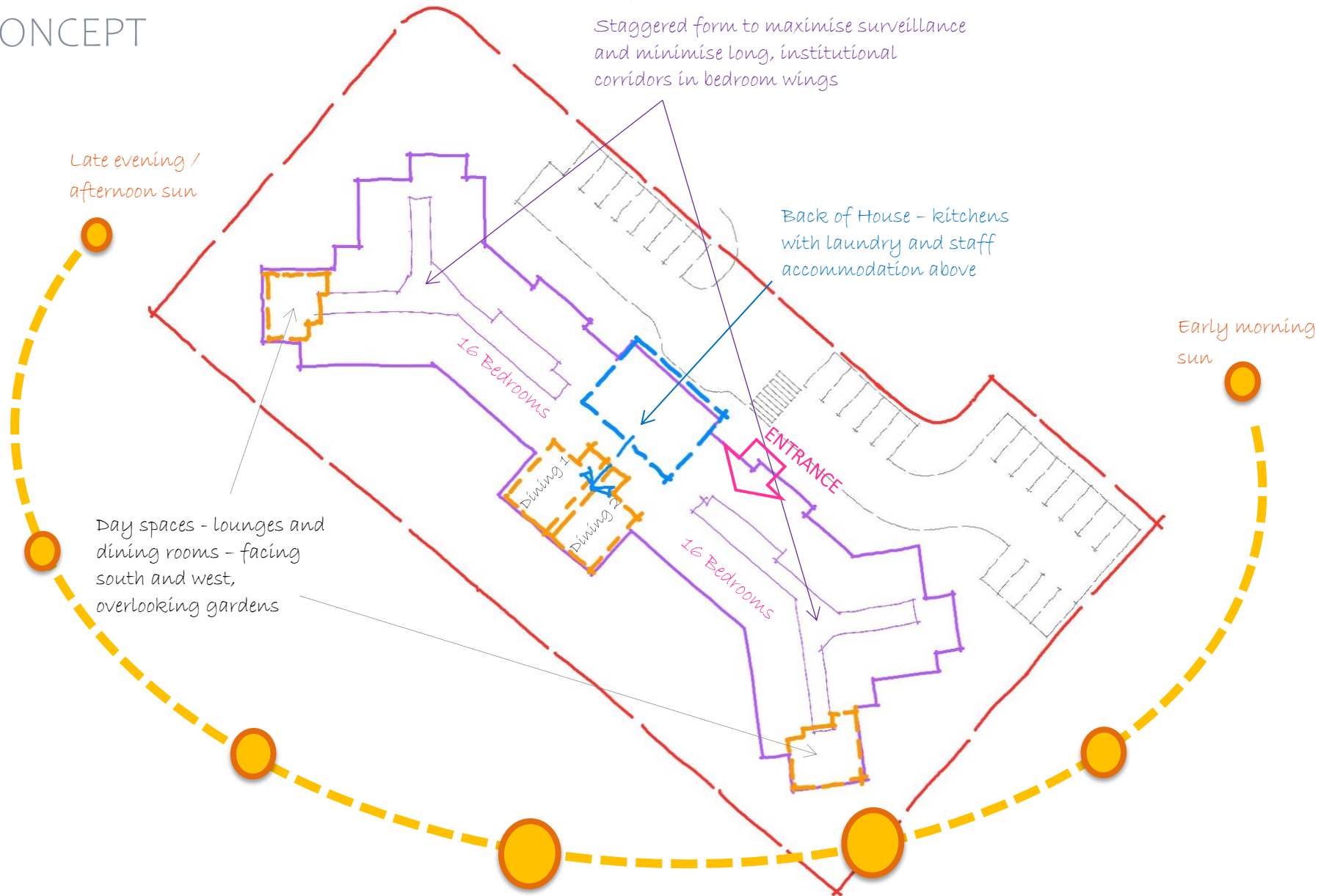




- 
1. Introduction
 2. Demand
 3. Residential Elderly Care
 4. Site Location
 5. Site Appraisal
 6. Planning Policy
 7. Development Strategy
 8. **Building Design**
 9. Access
 10. Landscape

8.0 Building Design







Plot Ratio

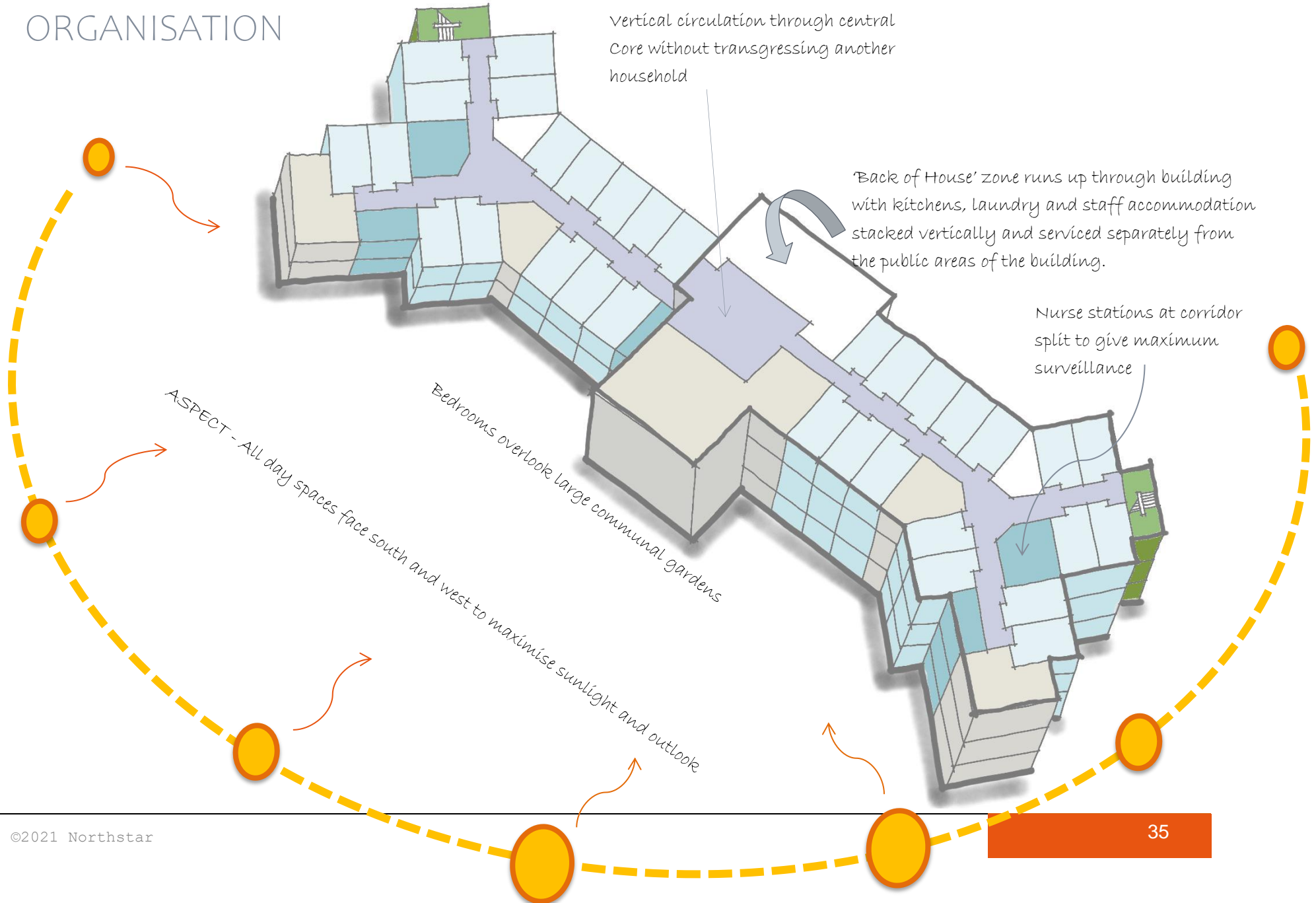
Site Area - 1.28 acres (5,180sqm)

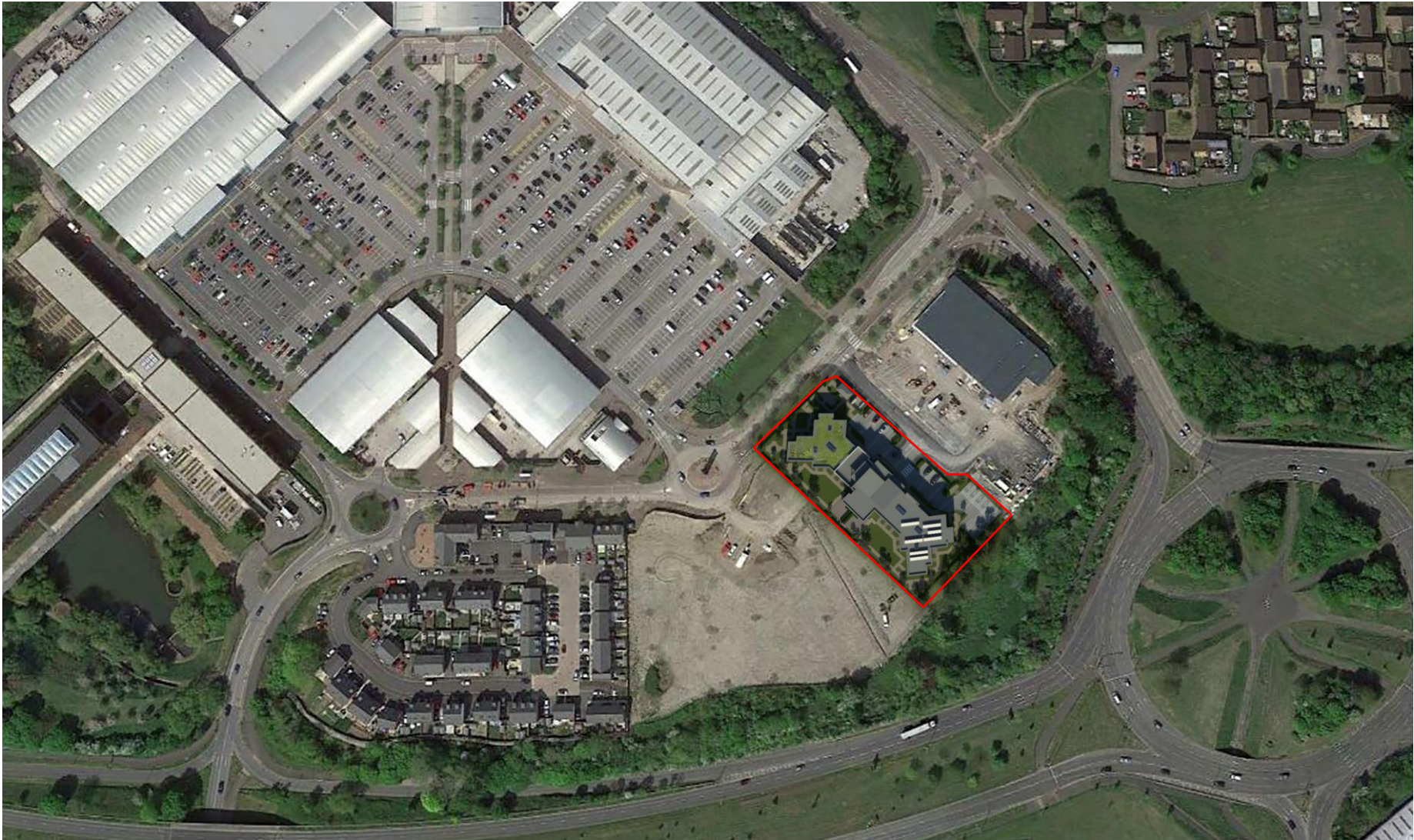
Building Footprint - 1,527sqm

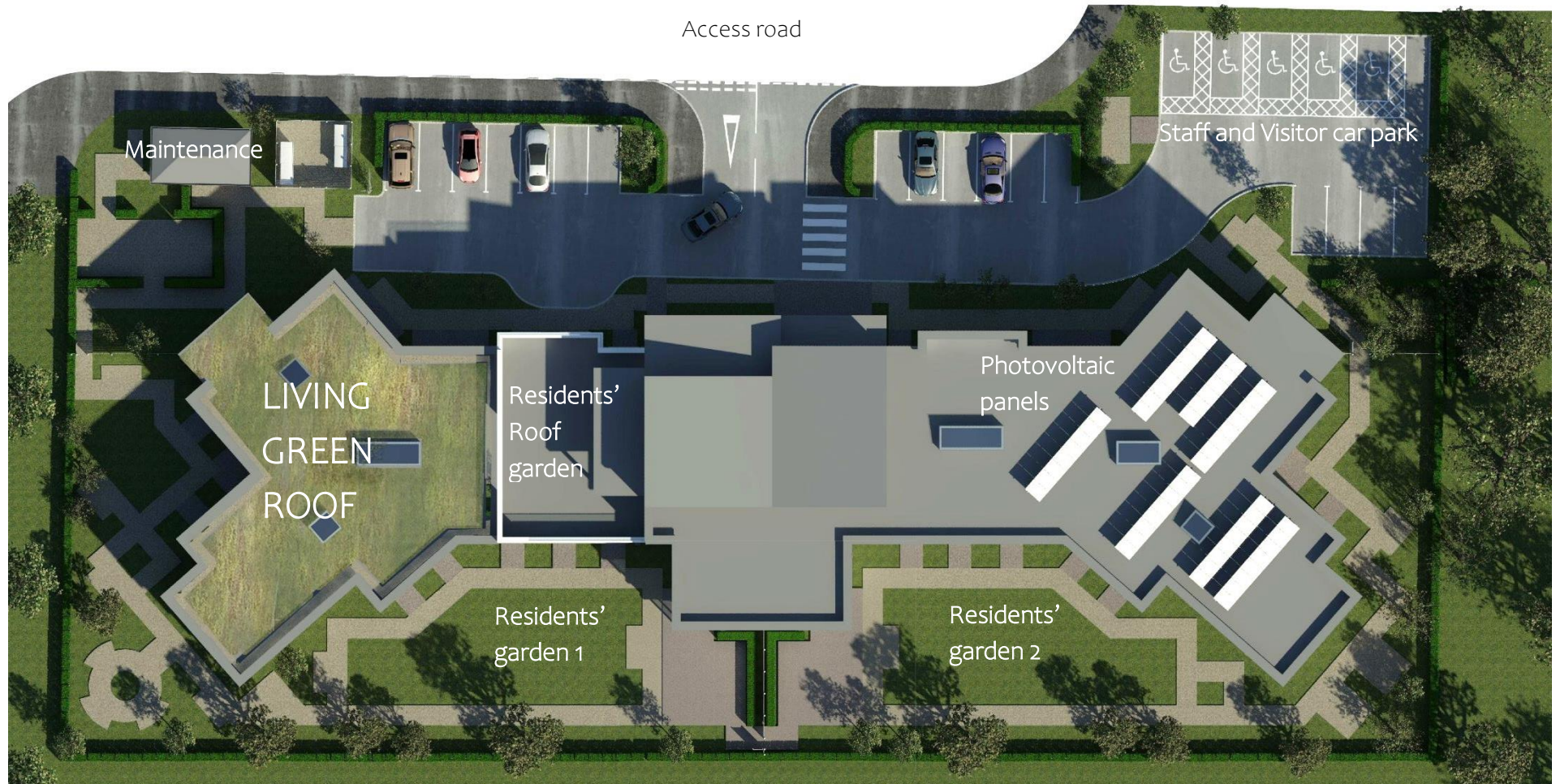
Development plot ratio of 30%



ORGANISATION

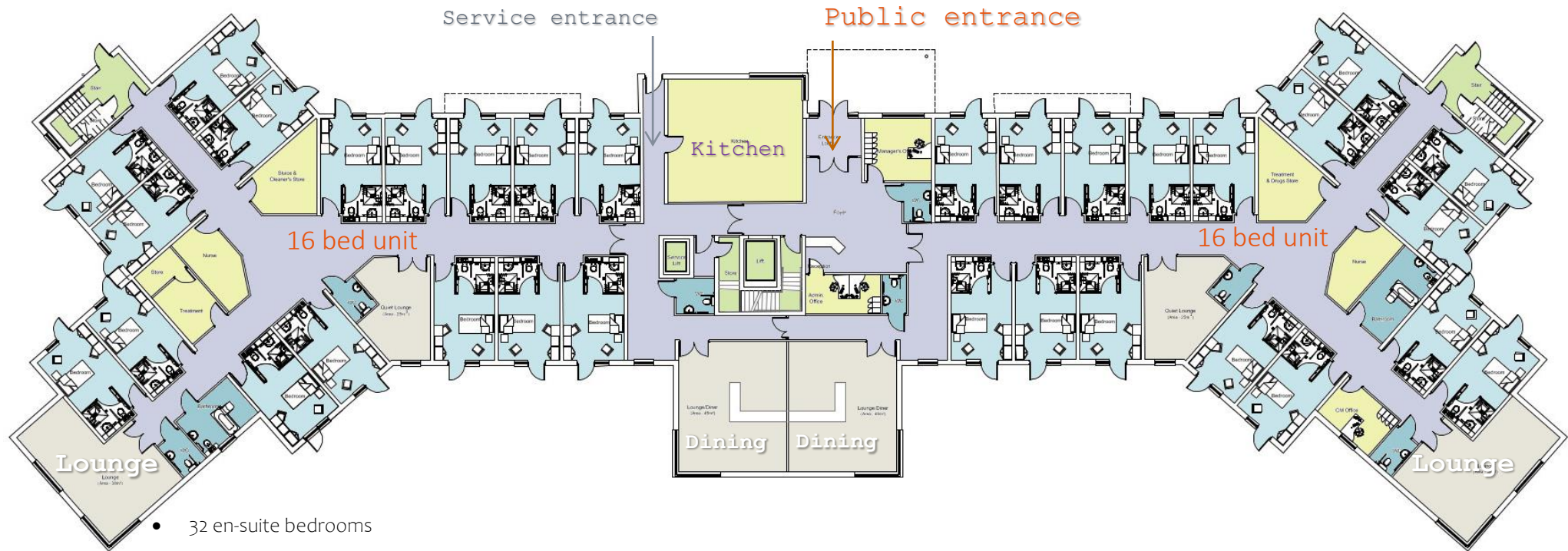








GROUND FLOOR



- 32 en-suite bedrooms
- 216 sqm day space in total / 6.75sqm per resident
- GIFA – 1527sqm (c.48sqm gross floor area per resident bedroom)

The critical factors influencing the plan form are:-

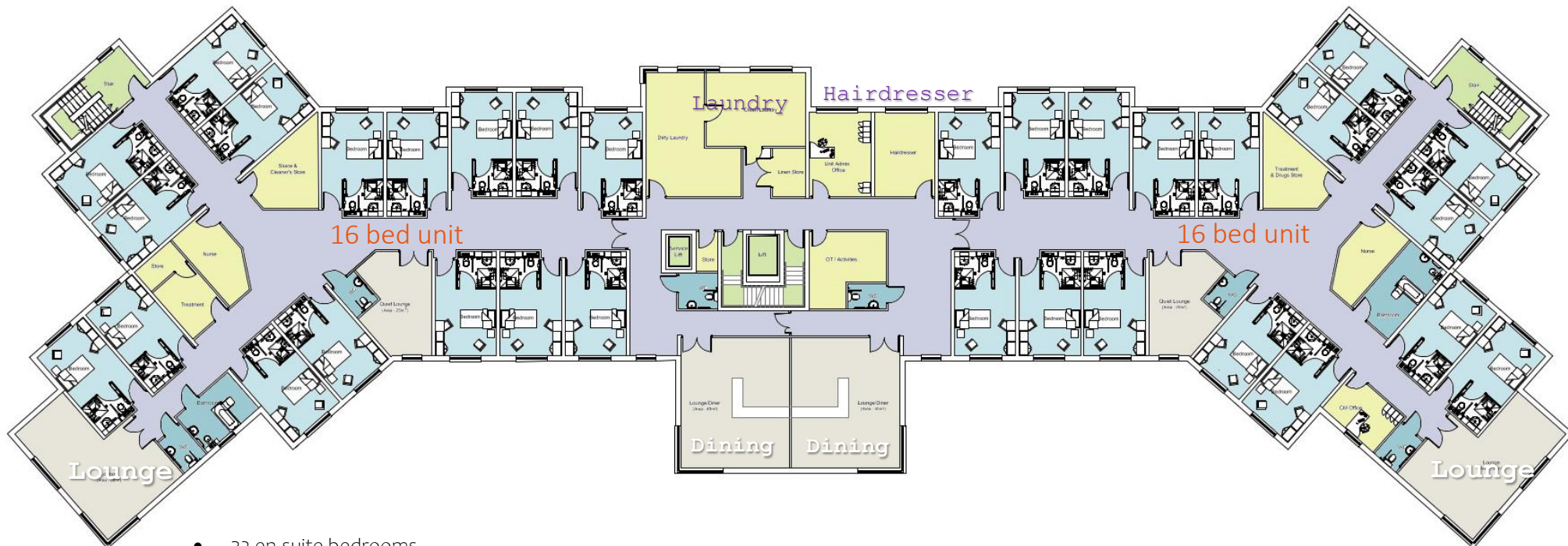
Circulation, surveillance and ease / speed of access for staff to reach every part of the building quickly

Creating two domestic scale units, each with its own separate lounge and dining rooms

The need to service this type of building demands that there be a large 'back of house' zone in which laundry and kitchens can be housed. These are located at the public end of the building adjacent to the car-park and servicing lane for ease of access. This keeps the servicing separate from the main entrance for residents and visitors. Crucially it also helps the care home to avoid any issues of cross-contamination with both laundry and food which in this environment can easily lead to outbreaks of disease which can, of course, be fatal in the elderly and frail.



FIRST FLOOR



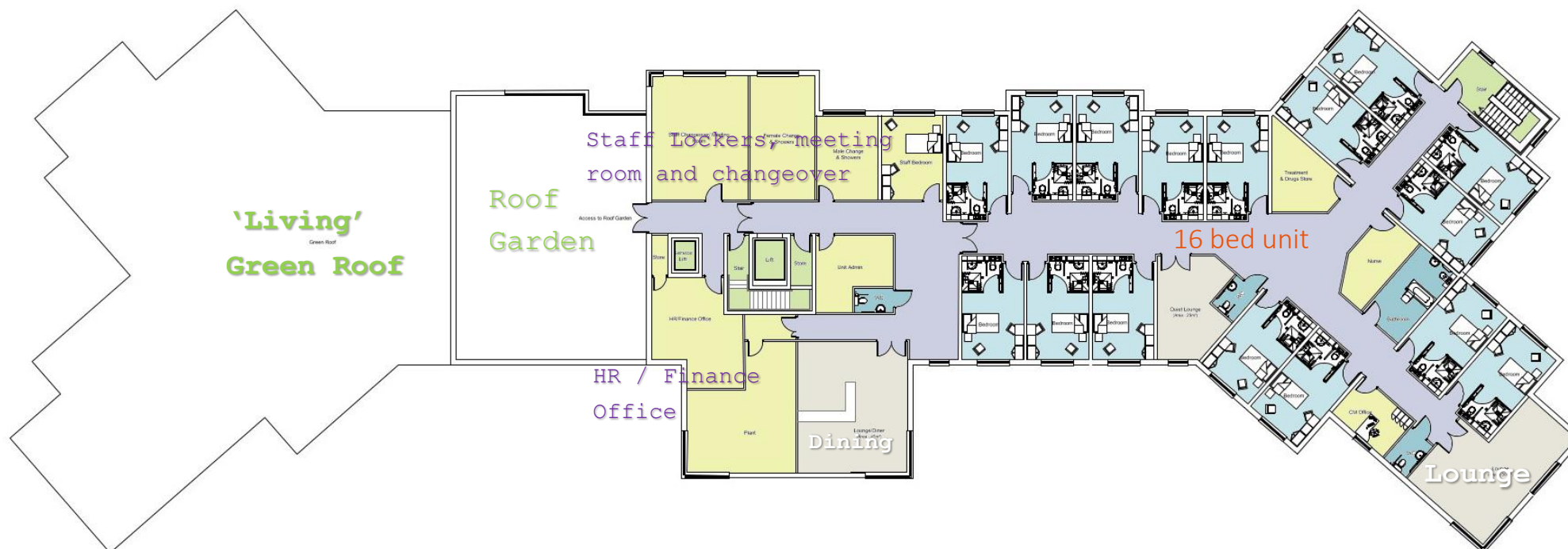
- 32 en-suite bedrooms
- 216 sqm day space in total / 6.75sqm per resident
- GIFA – 1525sqm (c.48sqm gross floor area per resident bedroom)

The First Floor provides two lounges, two separate dining areas, hairdressers and two quiet lounges per wing. Treatment rooms, assisted baths, nurse stations and additional disabled WCs are strategically placed throughout the first floor.

The operational function of a care home tends to drive the arrangement of bedrooms and dayrooms / dining rooms. Regulations prescribe certain standards for the built environment within a care home and also the preferred ratios of staff to residents depending on the type of care being delivered. This gives rise to the 'unitisation' of rooms grouping them into manageable numbers of residents for a set number of care staff to look after. Ideally each unit should be capable of being self-sufficient in terms of its staffing to bedrooms, lounges, bathing, dining, etc.



SECOND FLOOR



- 16 en-suite bedrooms
- 108 sqm day space in total / 6.75sqm per resident
- GIFA – 934sqm (c.58sqm gross floor area per resident bedroom)

The second floor replicates the unit below with 16 bedrooms and a lounge and dining room. It also has Staff welfare, meeting rooms and an HR / Finance Office and the plant room

Large glazed corner windows to the lounge and dining room, along with a communal residents' garden with 'living' green garden beyond at Roof level give residents easy access to sunlight / daylight, which is not only beneficial from the point of view of passive heating / lighting, but also provides a good source of vitamin D (the exposure to which is particularly good for residents with dementia / memory difficulties).



Elevations



Front (North East) Elevation



Rear (South West) Elevation



Elevations

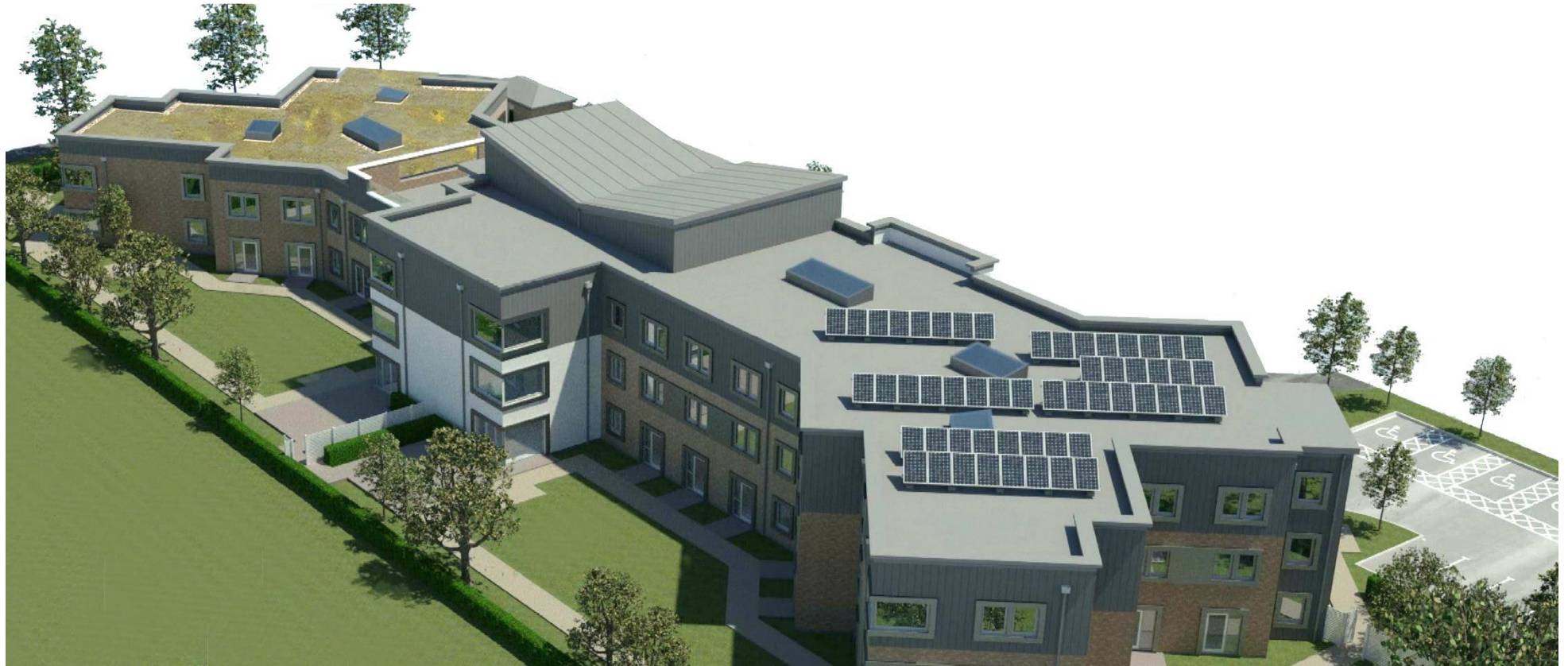


Side (North West) Elevation



Side (South East) Elevation











1. Introduction
2. Demand
3. Residential Elderly Care
4. Site Location
5. Site Appraisal
6. Planning Policy
7. Development Strategy
8. Building Design
9. Access
10. Landscape





9.0 Access

9.1 Inclusive Design

9.1.1 The philosophy for the design of the Care Home is fundamentally an inclusive approach for all, with particular care being taken to accommodate the needs of those suffering from complex neurodegenerative and mental health needs under the '*Household Model of Care*'. As the home is provided for residents including the frail elderly as well as those who suffer from some form of physical impairment; it is intended to provide an encompassing and safe environment.



9.2 Access provision

9.2.1 Level access is provided to the building at all entry points. Residents on the ground floor will be able to access / egress directly from their rooms – depending on their care plan

assessment – via patio doors into the communal gardens. Double front doors provide access flexibility to the main entrance of the home. These are powered doors operated by a push pad which is set clear of the door swing. An audible connection to the concierge desk is also provided.



9.3 Accommodation

9.3.1 Resident room sizes all exceed the current Residential Care Homes Minimum Standards and therefore provide good accessibility both within the rooms and into the en-suite bathrooms. The resident bedrooms and their en-suite bathrooms are also designed to full accessibility standards.



9.3.2 All resident room windows are provided with window cills set at, or lower than, 600mm above floor level to provide good visibility for residents who may be wheelchair or bed-bound.



9.3.3 Wall coverings, floor coverings and furnishings, though stylish and harmonious, are provided with greater colour brightness and contrast to assist the visually impaired.

9.3.4 Staff call facilities are provided in all residents' rooms and en-suite bathrooms, public toilets and assisted bathrooms. Lighting in all public toilets and assisted bathrooms is PIR movement activated and controlled.

9.4 Building Circulation

9.4.1 The building is designed along the '*household model of care*' which requires that each 'unit' can operate as a separate

household with its own front door and be self-sufficient in terms of day space, living areas, dining, etc. To that end, each unit effectively has its own 'front door' although staff members are able to pass between units if needed in an emergency. A lift has been provided off the main central core, reception / circulation area, to ensure optimum access for all residents and visitors to the main wings of the home, without having to pass through another household. All staircases are designed to comply with current regulations.

9.4.2 All the corridors used by residents are provided to a minimum width of 1800mm, with local lounges increasing this dimension, to provide very good access for wheelchair users and supplementary visual cues for residents. Again this is well in excess of current regulations. Discreet hand rails are provided along at least one side of all corridors to provide support for residents as they move around.

9.4.3 All doors are installed to a minimum clear opening of c. 900mm, providing good clear access all around the home. The fire strategy has also been developed to minimise the need for fire doors, allowing the majority of doors used by residents to be lighter in weight and unhindered by door closers. Fire doors across corridors are designed as hold open, recessed into partition bulkheads in corridor walls, and are only closed (automatically) in the event of fire alarm activation.



9.4.4 Doors projecting into main corridors are limited to Public Toilets and Bathrooms, and Ancillary Stores. Store doors will be kept locked shut and identified such with signage.

9.5 Sanitary Accommodation

9.5.1 Six Disabled Access Toilets are provided on each floor (three for each 'household') independent of toilets provided in the en-suite bathrooms.

9.6 External Access

9.6.1 Level and covered access is provided from the front vehicle drop off point up to the front entrance doors. The route to the front entrance from the car park is clearly defined with any change in gradient kept to 1 in 20 or shallower.

9.6.2 Access around the gardens would be provided via a continuous concrete footpath at least 1200mm wide. Furniture such as benches and pergolas would be set on concrete bays to the side of the footpath to maintain this clear width. Some elements of soft landscaping will be located adjacent to the footpath to provide easy access for the residents to natural features.

9.7 Safe Environment

9.7.1 The building is protected by an electronic management system, linked to the perimeter doors, which is partially activated during the day, when the building is fully staffed, and completely activated at night. Doors only used for escape, such as those at

the foot of the fire escape staircases, are monitored at all times, and an alert will be activated if the doors are opened. The Main Entrance doors are locked once the system is activated in the evening. Entry can then only be gained by using the Intercom system which is linked to the reception desk and the staff pager system. Other external doors, such as the staff entrance, are also locked once the system is activated. These doors are then monitored, and an alert will be activated if the doors are opened. Similarly French Windows or Patio Doors to lower ground floor Resident Rooms, and easily accessible ground floor Resident Rooms, are locked once the system is activated. These doors are then monitored, and an alert will be activated if the doors are opened.





9.7.2 All new windows in the care home are outward opening and designed to reduce the risk of falling and unwanted entry. They are fitted with 2 no. restrictors per opening, limiting the opening gap to 100mm, and positioned to require two handed operation to open both restrictors.



9.8 Movement

9.8.1 The Main Entrance to the care home is well overlooked by both residents and staff.

9.8.2 Generally landscaping around the home will be provided as grassed areas and low level shrubs that ensure that the gardens are well overlooked from rooms within the building. As outlined elsewhere in this statement the care home will be provided with large windows and low cills which combined with the extensive range of windows around the home will also ensure that there is

excellent visibility of the landscape, car park and gardens right around the site.

9.9 External Lighting

9.9.1 The access route and car park is provided with bollard and building bulkhead lights designed to provide a safe environment throughout the parking and main vehicle access areas. Any footpaths around the site that will be used by residents, visitors or staff at night are provided with low bollard lights set at very regular intervals.

9.10 Management and Maintenance

9.10.1 The care home will be staffed twenty four hours a day, with staff working a variable shift pattern. This will ensure that the building and its immediate environment will be monitored on a regular basis. The home will employ maintenance personnel to ensure that the building, car park and gardens are well maintained. With the assistance of Landscape Gardeners, employed under an annual maintenance contract, the site will be kept attractive and tidy.

9.11 Crime Prevention Guidance

9.11.1 All of the normal 'secured-by-design' and crime prevention measures have been incorporated in the overall building design.



9.12 Vehicular Access

9.12.1 Vehicular access to the site is provided via the access road which runs straight into a parking and drop-off area in front of the main front doors to the care home. Refuse and delivery vehicles are able to drive in, reverse to the service yard and then leave the site in forward gear. Servicing to the site is provided for typically one large vehicle per day and a number of smaller Luton transit vans. The servicing area is located close to the Bin Store and near the Main Kitchen. External storage for deliveries is not provided as these would be offloaded and immediately moved into the building.

9.13 Pedestrian and Cycle Access

9.13.1 Clearly defined footpaths and crossings are provided to the front of the home with crossings or changes in gradient kept to a minimum of 1 in 20 or shallower. Level and covered access is provided from the front vehicle drop off point up to the front entrance doors.

9.14 Car Parking

9.14.1 Parking provision – at 25 bays – addresses operational need and is below the maximum standard in Local Authority guidance. Parking bays are provided on the site for the use of the disabled; these are located close to the front entrance of the building in accordance with legislative requirements.



- 
1. Introduction
 2. Demand
 3. Residential Elderly Care
 4. Site Location
 5. Site Appraisal
 6. Planning Policy
 7. Development Strategy
 8. Building Design
 9. Access
 10. Landscape



10.0 Landscape





Roof Terrace





Landscape Perspectives







SUMMARY

In summary then, this application aims to meet a large and growing community need for C2 care accommodation in South Bristol on a sustainable, well-serviced, previously developed brownfield site.

The building has been designed to the highest standards of dementia care but is equally careful to ensure compatibility with its surroundings. The site maximises opportunities for residents to spend time outdoors in safe, surveilled spaces both at ground level and via the roof garden.

Due to its aspect, the building offers good opportunities to exploit the potential for renewable energy by way of Photovoltaic panels and a 'heat capture and recovery system' internally. In addition, the 'Living Green' roof has the dual benefits of promoting a mix of wildlife habitats encouraging birds, bees and butterflies whilst also providing an interesting visual backdrop to the residents' roof garden.