Beeches Manor Wokingham: a template for Dementia Housing with Care

This case study showcases a project which can be seen as the future for dignified independent living with care for people living with, and expected die with, dementia. Housing 21 had the vision to translate the Green House® model of dementia care home living into a model which supports people in a cluster of one bedroomed flats rather than en-suite bedrooms. Quattro Design Architects translated this vision of care into a built form and Wokingham Borough Council embraced the model and identified a further need for independent living for a group of adults with learning difficulties who could benefit from discreet support.

Written for the Housing Learning & Improvement Network by Angela Morrison, Director, Quattro Design Architects

October 2014
Introduction

In the autumn of 2009 Wokingham Borough Council put out a tender for the provision of a Dementia Housing Development, on land they owned, that would be a flagship for their strategy for housing for older people. They had identified that in coming years older people will become an increasingly large and influential group within Wokingham, who will expect a high quality of life and support as they age.

Their strategy was a response to the government’s publications, *Lifetime Homes, Lifetime Neighbourhoods – a National Strategy for Housing in an Ageing Society*\(^1\) which aims to provide choice for older people who are restricted to the options of traditional sheltered housing or institutions such as residential or nursing care. This message is reinforced in ‘*Living Well With Dementia - a National Dementia Strategy*\(^2\), which drew attention to the need for earlier intervention. These publications have been reinforced by the coalition government’s *Dementia Challenge*\(^3\) papers.

The aim of the project is to deliver a dementia focused housing scheme that will provide both quality and choice for older people. The facilities, care and support services available should aim to make the scheme a “home for life”. Key objectives and principles being:

- A flagship development of excellent quality, design and build.
- The units to be 100% social-rented accommodation and subject to full nomination rights for the Council.
- A scheme that promotes and meets a range of environmental and sustainability issues through the use of innovative design and build solutions.
- Demonstrating value for money and financial strength.
- Contributing to the values and objectives set out in Wokingham’s Housing Strategy for Older People.
- Delivering a model that shows effective housing related support including social activities and excellent housing management services.

\(^1\) Department for Communities and Local Government (2008), *Lifetime Homes, Lifetime Neighbourhoods*

\(^2\) Department of Health (2009), *Living Well With Dementia - a National Dementia Strategy*

\(^3\) Department of Health (2012), *Prime Minister’s challenge on dementia*
The Green House® Model – client’s response

The Green House® model describes itself as:

“..rooted in a philosophy of person-directed, relationship-based care. The model embraces older age as an opportunity for continued growth and development. It creates an environment in which individual needs are met because each person is deeply known and valued as creative, resourceful and whole. Everyday tasks, such as personal care, bathing and mealtime, are seen as opportunities to support autonomy, decision making and meaningful engagement. Elders cultivate relationships with neighbors of all ages, and continue to serve as integral members of their communities.”

In the US, where this model has been expanding since 2004, it is based on generally single storey buildings arranged as a shared group home for 10 residents in their own single en-suite rooms with a layout where the living room with hearth, the dining table and kitchen are at the centre. Many Green Houses® are part of a wider retirement community where neighbours are living in their own homes and the Green House® replaces the former nursing home.

At Wokingham, Housing & Care 21 (formerly Housing 21) perceived that moving into a setting akin to a nursing home where one was expected to downsize a lifetime’s belongings into one room was not an attractive option for many people. Therefore they looked for a design that married a block of apartments with the unique Green House® shared facilities.
The site

The Beeches Manor site is located in Wokingham town, just 1km west of the centre. It is in an area of mixed residential, recreational and office uses.

The site covers an area of 0.68 hectares, and is accessed from the south via Reading Road. There is an unadopted lane, which also services Wokingham Bowling Club. This lane is owned partly by the council and partly by the bowling club; the bowling club has rights of access over the whole lane. There were no buildings on site, but the foundations of a manor house, and what may have been a stable block, remained. The site had been unused for 50 years and was covered by self-seeded woodland.

Classification as public open space meant it was a planning requirement that the loss of open space be mitigated as part of the proposal. Therefore, significant landscaping work has been carried out, in particular the rear part of the site has been enhanced to provide a publicly accessible wildlife area. The mitigation included:

- Forming access points to allow the public to have through access to the wildlife area.
- Carrying out site works to create pedestrian pathways, including bridges and boardwalks.
- Remedial works to ensure the area is safe and to take out dead/unsafe trees.
- Future maintenance of the paths and wildlife area.
- Replanting with native species.
- Enhancing the existing brook.
The building and how the design responds to the model

1. Two clusters each of nine one bedroom flats are arranged on the ground floor around garden courtyards with the ‘home zone’ as the focus at the head of the court and easily visible from all flat front doors for best way-finding.

2. Each cluster has its own front door in a prominent location internally and externally with separate identity to aid recognition. A domestic style hall opens directly into the farmhouse kitchen with a focal point hearth, living area and themed den. The prominence of kitchen and hearth enhances a sense of homeliness and familiarity. The assisted bathroom and its associated wc are more discretely located, as is the door providing access between the cluster and the shared ancillary part of the building.

3. Residents leave their cluster by the front door and re-enter the shared part of the building to use the laundry and activity room, however their living room has direct patio access to the woodland garden.

4. Flat sizes are minimum 51m² with a large en-suite bedroom, living room and kitchen. Although residents are encouraged to take part in preparing meals, eating and clearing up as a regular, communal activity, they generally enjoy meals in the privacy of their own flat.

5. Adults with Learning Difficulties have their own front door, separate from the dementia clusters, for greater independence. Two sets of 4 one bedroom flats are on the first floor near the centre of the building reached by a stair and a lift. The staff team base is also on the first floor along with guest rooms and a roof terrace.
Form, Materials and Colour

The exterior of the buildings have been designed to present a distinctive and homely character through the use of the following:

- Simple one and two storey monopitch forms help break the building down into smaller parts.
- Bay windows to the ground floor provide improved daylighting and natural surveillance and further reduce the building scale.
- Balconies at first floor in conjunction with tall glazed screens provide improved amenity and daylighting in what is a largely wooded site.
- Individual clusters are visually separated from the shared communal parts by changes in plan and in material treatment. The dominant material for clusters is white render, whilst brick is used for the ancillary block.
- Materials are restricted to a familiar palette of red/orange stock brick, white render and vertical timber boarding, whilst the low pitched metal roof lends a more modern twist.
- In general, the intention is to provide a bright, warm, outward-looking building that catches and makes best use of the available light to counteract the feeling of it being hidden away in the woods.

The interiors are themed so that each cluster has a different ambience. Aiveen Interiors Ltd worked closely with the architects and project team to choose colours, finishes and fittings which create an environment which is homelike but reflects the changing needs of the individual as the dementia progresses.

- The cluster front door has a domestic style and the hall is the place where visitors can leave coats and umbrellas.
- The garden court provides context for time of day and season and ready access to an outdoor activity area.
• The hearth in the lounge, with a flame effect fitting, creates a sense of emotional and physical warmth where residents are encouraged to gather.

• The den provides a room for one to one discussion or solitary activity. One cluster has a conservatory style, the other is reminiscent of a club room.

• The farmhouse kitchen with its single dining table, high chair and toybox reflects daily living and encourages intergenerational visiting.

• The shared hub between the clusters is designed to be welcoming rather than pristine, conducive to art and craft activities.

---

**Working with Wokingham**

Wokingham BC set out the following criteria at the outset:

The design must offer a safe and secure environment, which provides flexibility to meet future needs and requirements of an ageing population. The Council expects all dementia residents to have care needs with an estimated average of 20 hours of care per week needed. The development should therefore include appropriate technology and telecare systems capable of supporting individuals with dementia in their own home.

Partnership working is essential to the effective delivery of Dementia Housing. Key partnerships with health, social care and supported housing (Supporting People) are absolute requirements to ensure the development and delivery of housing, care and support services that are co-ordinated and responsive to the changing needs and aspirations of older people.

These have largely been fulfilled at Beeches Manor although the funding regime has gone through many changes, not least the absence of Housing Benefit to cover service charges for people under 35 which has curtailed the service that can be offered to some of the ALD residents. Telecare has been installed as and where appropriate to individuals, commonly bed occupancy sensors. Relatives of residents with ALD, or dementia, often struggle with the risks they perceive of their family member living alone and telecare can assist with reassurance in this area.
Establishing the new staffing approach:

Convincing support staff of the enabling role they are expected to take rather than doing things for people has not been straightforward. For example, the farmhouse kitchen in the cluster is not intended to be the place where the midday meal is prepared, cooked and served by staff. Housing & Care 21 initially took on the Care Provider role but the service has now passed to Optalis who are based locally.

Lessons Learnt - General

1. There is significant benefit in separating out housing costs and care costs, i.e. residents have a tenancy with service charges from Housing & Care 21 and a personal care and support package assessed by Wokingham’s adult social care services. This is cheaper than living in a residential or nursing home where fees have to cover ‘hotel’ costs.

2. Wokingham have nomination rights for 75% of the extra care and 100% of the ALD dwellings. This is not unreasonable since many of the residents will rely on the Borough to provide and often subsidise their care. However, the demand has not materialized as predicted. A planning restriction to over 55’s does not reflect local need, denying access to people with early onset dementia (common amongst ALD). The age range at Beeches Manor is 56-94, much wider and on average younger than a typical extra care scheme. Housing & Care 21 would like to extend the catchment area.

3. Reasons for take up being low (there are currently 3/16 voids) include:
   a) lack of knowledge amongst professionals about what Beeches Manor can offer - this will be addressed by some open days. b) relatives’ reluctance to encourage a move until the dementia is severe, by which time their care needs may be too great for a successful move into the clustered flat setting, it is better if people age in place. c) many residents are ‘self funders’ i.e they have savings above the threshold for state support, however they will continue to be able to claim attendance allowance and other universal benefits.
4. All are single households. Housing couples where one does not have a care need has not been a target. However some residents have a spouse who visits.

5. Care needs are greater than anticipated or the dementia has developed more rapidly than expected. There is an ongoing demand for re-assessment so that appropriate support can be funded, but inevitably support workers feel stretched.

6. The concept of a ‘home for life’ in this setting cannot cover physical nursing needs. For example, a resident who was taken into hospital will not return to Beeches Manor because her specific support needs are too demanding.

7. Support workers tend to be disproportionally agency staff. This is probably a reflection of the difficulty of recruitment in a relatively affluent area and reflects the low worth that society places on the job. In the Green House model this may have been addressed by re-badging the role to make it more attractive – their equivalent workers are called Shahbaz, a term that is unique to that organisation. In Holland, the award winning Hogeweyk dementia village is supported by large numbers of volunteers who supplement a much lower staff/resident ratio than at Beeches Manor.

8. Are people lonely? It is difficult to tell, there is certainly scope to make more use of the shared room designated for activities which currently hosts only one art class per week. However, many residents choose not to lock their flat doors and the staff describe it as a happy community.

9. The manager is trying to set up a ‘friends’ group and plans a fundraising day which will showcase what is on offer and may also lead to some outreach opportunities.

10. Whilst the scheme meets the needs of many of the residents, occasionally individuals may follow their lifelong routines at certain times of the day, for example leaving home in the morning to go to work or vice versa in the afternoon – basically wandering. Beeches Manor is an independent living environment, but our learning and the view of CQC is that it borders upon Deprivation of Liberty as the individual should be entitled to leave whenever they wish to and of their own freewill, but they are frequently having to be coaxed back into the scheme. This has led to confusion of responsibilities between the provider and Authority, leading to the service being penalised for not safeguarding residents.
Lessons Learnt – Design

1. The size of the clusters is successful and they do act as a shared household. It would have been good for their personal naming, Woodland and The Coppice, to have appeared in the postal addresses to reinforce this identity.

2. Two dementia clusters has allowed residents to be grouped by compatibility.

3. The concept of having a staff ‘workstation’ in the cluster rather than a separate office has not been realized and the ‘den’ has been requisitioned as an office in each case. It is used for storing case notes, private telephone conversations, handover meetings and discrete monitoring of support workers. All these functions need to be addressed in future designs but not necessarily in a separate room of 12m²

4. Placing the staff office upstairs rather than on the ground floor may well have contributed to the demand for offices in the clusters.

5. The location of the assisted bathroom in the shared area of the cluster rather than amongst the flats has lead to a reluctance to use it, although there is an innate demand. In future it could be placed elsewhere and possibly have a domestic fitting rather than a specialist one.

6. The cluster lounge is used for ‘film nights’ and the staff would have preferred it to be larger so that all residents could sit in easy chairs. This has a bearing on whether the ‘den’ is needed or whether residents will always go back to their own flats when wanting to withdraw from the group.
7. The layout of flats around a courtyard garden is very successful. When residents open their flat entrance door they see an outdoor space and the corridor is high, light and not carpeted. Whichever way they turn they will get to the hub of the cluster.

8. A canopy over part of the cluster patios would be useful rather than just a pergola.

9. The adjacency of the ALD flats to the Dementia Care generally works well, but the interconnecting door from the ALD staircase into the ground floor shared rooms should be fobbed to discourage people upstairs from entering the ground floor to look for support workers or use the laundry (they have their own washer/driers).

10. Substituting flats for the care rooms in the US model has enabled residents to be more independent and crucially it allows for a wider spread of ability, age and lifestyle to be successfully accommodated.

Conclusion

Beeches Manor is a happy place where people with quite high support needs live in small communities which help to maintain function and social skills. At a time when expectations amongst the younger old for the care of their parents and eventually themselves is changing and family incomes are stretched, the foremost advantage of the design at Beeches Manor is its flexibility to respond to future needs.

Note

The views expressed in this paper are those of the author, and not necessarily those of the Housing Learning and Improvement Network.

About the Housing LIN

Previously responsible for managing the Department of Health’s Extra Care Housing Fund, the Housing Learning and Improvement Network (LIN) is the leading ‘learning lab’ for a growing network of housing, health and social care professionals in England involved in planning, commissioning, designing, funding, building and managing housing, care and support services for older people and vulnerable adults with long term conditions.

For further information about the Housing LIN’s comprehensive list of online resources and to participate in our shared learning and service improvement networking opportunities, including ‘look and learn’ site visits and network meetings in your region, visit: www.housinglin.org.uk

Published by

Housing Learning & Improvement Network
c/o EAC, 3rd Floor,
89 Albert Embankment
London SE1 7TP

Tel: 020 7820 8077
Email: info@housinglin.org.uk
Web: www.housinglin.org.uk
Twitter: @HousingLIN