

Accommodation Strategy

Better Homes: Greater Choice

Older Persons Care Home Design Principles

October 2015

The following are five key principles to consider in any care home:

1. There is increasingly a need for all care homes to be able to provide for the full range of care needs for an individual, including complex nursing care and for those living with multiple long-term conditions. The classifications of 'residential, EMI, OPMHN and nursing' for older people are becoming blurred and increasingly irrelevant as people are entering care homes much later in life than was previously the case (85 years on average in Kent) and presenting with often highly complex conditions.
2. Care homes should be able to provide short term beds as well as permanent accommodation to allow for those who can to return to community based care.
3. Purpose-built, modern accommodation will be preferred over 'guest house style' accommodation with minimum design and spacing requirements for all residents.
4. Care homes should be seen as a part of the community and as a 'hub' of activity, rather than a 'bubble' operating in isolation from the surrounding population. This will include promoting resident interaction with the community and using the potential of families and friends to engage in the life of the care home.
5. Maintaining 'active lives' within a care home by participation in the life of the home should be a key priority for any care home provider. Good design will facilitate this to become a reality.

Design and spacing requirements

All new purpose built care homes should include 'en-suite' facilities for residents. The minimum size requirements for a single room should be 12 m² (excluding en-suite facility). The layout should allow space for relatives to visit in the room and for a carer to access both sides of the bed.

The design of the accommodation, selection of equipment, signage, internal colour and finishes and landscaping should enable the independence of people who have mobility problems, may be physically frail, or who may have a visual, hearing or cognitive impairment.

Good practice states that all balconies should be a minimum of 1.6 metres in height, with no step up access to gain height at the perimeter of the balcony. Consideration

of the placing of any fixed furniture in relation to the balcony should be a part of a risk assessment for the individual resident.

Ceilings need to be strong enough to hold an overhead hoist. The layout of the room also needs to accommodate the use of a hoist e.g. a direct line from the bed to the bathroom.

Consideration should be given to the provision of wet rooms/floor level shower access.

Consideration should also be given to additional structural and weight bearing requirements within the building to accommodate bariatric residents including additional support for hoists and wider access requirements to rooms and shower facilities.

The building design should maximise natural light and lighting in communal rooms should be domestic in character, sufficiently bright and positioned to facilitate reading and other activities.

The physical environment must be “care ready” and ‘enabling’ in terms of the likely progression of impairments and long term conditions residents will experience with increasing age and frailty.

Developments should provide vibrant community facilities and encourage intergenerational activity in a secure part of the building whilst maintaining progressive privacy concepts.

The design should provide for a comfortable and homely environment that can be easily maintained and decorated. Avoidable hazards should be removed as is consistent with a domestic setting. Risk reduction should however not lead to an ‘institutional’ feel. This will be assisted by allowing residents to bring personal items of furniture and effects into the home.

Aids, hoists and assisted toilets and baths are installed which are capable of meeting the assessed needs of service users.

Access should be provided to safe outdoor environments where residents can relax or take part in outdoor activities.

Access to all areas of the home, including outdoor environments, should be fully wheelchair accessible and designed to meet the needs of all service users, including those with physical, sensory and cognitive impairments. Lift access should be provided to all floors.

Doorways into communal areas, service users’ rooms, bathing and toilet facilities and other spaces to which service users who require wheelchairs and assisted walking have access, must have a clear opening width of 800 mm.

The design should incorporate a range of comfortable and fully accessible shared spaces, including a space for receiving visitors in private, dining facilities and sitting areas.

The building should be enabled for both Telecare and Telehealth equipment both in terms of hardwiring and WiFi enabled environments to accommodate future ICT developments.

Fire and emergency evacuation should be considered in any design and comply with the requirements of Kent Fire and Rescue Service.

Dementia friendly design

The majority of residents placed within care homes will be living with dementia. Therefore, it is vital to include dementia friendly design principles within any care home environment.

Building design and interior design is especially important for people with dementia. Bad design can impair memory, reasoning, learning and cause stress.

Detailed advice on dementia friendly design can be obtained from the Dementia Services Development Centre at the University of Stirling at <http://dementia.stir.ac.uk/> and the Kings Fund especially the EHE Environmental Assessment Tool at http://www.kingsfund.org.uk/sites/files/kf/field/field_pdf/is-your-care-home-dementia-friendly-ehe-tool-kingsfund-mar13.pdf

CQC Fundamental Standards

All care homes will need to comply with the CQC Fundamental Standards in relation to the five key tests and specifically Regulation 12: Safe Care and Treatment.

A copy of the CQC Fundamental Standards and a full set of Regulations can be accessed at <http://www.cqc.org.uk/content/regulations-service-providers-and-managers>