Osborne Grove Co-Design Group

OCTOBER 2020

Agenda

1. Welcome and Introductions
2. Feasibility study update(70 Nursing Home Beds, 10 Nursing Studios and 20 Sheltered Housing flats).
3. High Level timeline
4. Progress with new tender for design team
5. Learning from Covid-19 for discussion and to be established incorporated into the new design
6. Review of Terms of Reference for the group and frequency of meetings

Background





Osborne Grove Nursing Home (the Home) is a **32 bed nursing home,** owned and previously managed by the Council. The building was originally designed as a residential care home, but more recently has been used as a nursing home. The design of the building was identified as unsuitable to cater for the needs of an increasingly frail resident population as outlined in a comprehensive feasibility study of the site completed in 2019.

The Council's intention is to develop the site to increase the borough's nursing home capacity and to develop a high quality provision to improve outcomes for residents through a model of nursing care responsive to need. The Council was therefore in the process of **closing the home in March 2020.**

In March 2020 Health and Social Care commissioners identified that the Covid-19 pandemic could result in an increased demand for nursing home placements and identified that there may not be sufficient capacity across the local area to meet this demand.

In agreement with health and social care colleagues, a decision was undertaken to re-mobilise the Home and the Council entered into a partnership arrangement with **North Middlesex Hospital** to deliver a nursing care service throughout the Covid-19 pandemic period. The Home was placed under the North Middlesex University Trust's CQC registration and was run as a satellite **ward** of the trust from the 8th May 2020 – 30th September 2020. Decision for closure of the ward was made following needs analysis completed by NCL partners demonstrated that there was under utilisation of commissioned rehabilitation beds in the system.

Osborne Grove has been remobilised by the single homelessness team for temporary use as a housing project for homeless residents until future construction work commences.

FEASIBILITY STUDY

Design Brief

Co-Design and consultation work to date identified the following design brief;

- Flexible households that be expanded/reduced based on the needs and demands of service user group.
- Distribution of Households to maximise access to outside garden areas and terraces.
- Optimisation size of bedrooms to meet or exceed current standards.
- Lounges arranged to serve cluster subgroups within larger households and separate dining rooms for whole households
- Staff bases within each household with good line of sight and centralised workspaces for multi-disciplinary working
- Improved access (Wider Corridors, spaces to sit/break, wider door frames).
- Improved bathrooms and showers (private wet rooms in each room, accessible bathrooms/showers, staff showers and changing.
- Re-provision and optimisation of Day Opportunity space which is flexible and can support a range of activities. Separate Café which can be used by residents and wider community.
- Secure access to a central green space which is fully accessible (living walls and garden as ‘an outdoor room’)

Design Features

Other key areas agreed to be considered in design;

- **BREEAM (Building research establishment environmental assessment method)**
  The aim is for the new home to reach Excellent – Outstanding BREEAM rating which demonstrates the buildings sustainability and environmental impact.

- **Infection Control**
  Separate rooms, ability to provide barrier care, Hand washing stations

- **Fire Strategy**
  Building built to withstand progressive collapse, to have sprinkler system, units to be divided into maximum 10 bed households

- **Security**
  Consultation with ‘Secure by Design’

- **Parking**
  Subject to negotiation with planners reduction of parking to maximise garden space.

Feasibility Study

The feasibility study completed in March 2020 focused on maximisation of the site which demonstrated potential for the development to include;

- 70 Nursing Home Beds
- 10 Nursing Studios for homelessness end of life
- 20 Sheltered Housing Flats

Ground Floor



First Floor



Second Floor



Third Floor



Upper Tollington Park

High Level Timeline

Programme Key Dates

Project Stage	% Complete	Revised Forecast Date
Lead Design Appointment	100%	07/01/19
Feasibility	100%	09/07/19
Additional Feasibility (*unplanned*)	100%	19/03/20
Re-tender Multi-D Design	20%	23/10/20
Cabinet Approve Multi-D appt.		06/04/21
Design		
Concept Design (Stage 2)	0%	19/05/21
Detailed Design (Stage 3)	0%	08/10/21
Technical Design (Stage 4)	0%	03/05/22
Submit Planning Application	0%	26/10/21
Planning decision	0%	01/02/22
Tender Issue	0%	06/05/22
Tender Return	0%	30/06/22
Cabinet Approve Main Contract	0%	01/11/22
Construction (Start on Site)	0%	11/01/23
Practical Completion (PC)	0%	29/05/24
Occupation	0%	26/06/24
End of Defects	0%	28/05/25

Summary

- Tender Returns anticipated 23rd October for Multi-Discipline Design
  - Quality of Bids? Number of Bids?
- Client Design Adviser appointment now to be commenced
  - Short, targeted procurement?
- Cost Consultant tender to be undertaken

Risks

Covid-19

- Impact on design, which may increase budget
- Impact on programme and cost both by the pandemic effects and by government guidance in response
- Impact on procurement; effects on quality and price of tender returns

Typical Risks

- E.g. Contractor Quality, Price Inflation, Design risks (e.g. thermal comfort), Lease

Next Steps

- Finalise procurement for professional advisors for the project to start in January 2021.
- Engage with Co-design Steering group to develop a communication and engagement plan.
- Take initial ideas and develop into a concept design.

LEARNING DURING COVID-19

The Osborne Grove Ward Project



Between May and September the Osborne Grove welcomed a Nursing team from North Middlesex and Care staff recruited through the Proud to Care Website.

The service was developed to support the care system during the Covid-19 pandemic and offered the following care provisions;

- Step Up Care
- Step Down Care
- Intermediate Care
- Carer Respite
- Bridging Placements



During this period the ward supported the wider health and care system by accommodating **30** patients in short term placements whilst assessments and ongoing plans were put in place for each patient's return home or alternative care arrangements were being made.

This was a fantastic opportunity to test and learn how future public sector partnerships could potentially work and identify areas for further development and co-design.

Public Partnership Review and Learning

POSITIVES	CHALLENGES
• Exceptional quality of care • Very positive Patient Feedback • Excellent training and support for inexperienced care staff group in both planned training and responsiveness to the needs of the service. • Strong Ward management ensured that the 'patient' was always put at the centre of their care. • Positive working relationships between Health and Social Care workers within Osborne Grove	• Conflicting understanding from the senior leadership team regarding purpose and provision of service. • The building is not designed as a clinical setting therefore, there were challenges around meeting infection control policies. • Hospital provided 'steam fresh' food would not be acceptable for long term as does not meet individuals cultural, religious needs or personal preferences. • Partnership approach to working was at times dismissed if not in line with the organisational priorities.

POINTS FOR FURTHER DISCUSSION

- How we develop a common understanding on how the service is provided?
- How do we ensure that the home remains a 'home' whilst meeting clinical requirements?
- What do we mean when we refer to a public sector partnership?
- How do we ensure an 'Outstanding' quality of Care?
- How do we ensure staff continuity, staff quality and development

Discussion points for Co-Design review

Activity Spaces

So far in the Co-design group we have focused on the provision of activities in the day centre. During the Covid-19 period it wasn't always possible to bring patients together due to infection control risk…..

- Activity spaces for residents to come together for activities.
- Space for independent activities or quiet time. (not all residents want to take part in group activities).
- Space to watch television (provision of facilities for people with visual/hearing challenges)
- Activities don't necessarily need to be formally organised opportunities might include familiar chores and tasks such as washing up or preparing food - Do we need accessible kitchen spaces?

Outdoor Spaces

Throughout the Osborne Grove Ward project, use of the homes garden was fundamental in providing holistic care to patients.

- Spaces for regular group fitness activities carried out included chair yoga/ Badminton/ Chair Volley ball/ Ball Games.
- Space for quiet contemplation and recovery.
- Space for independent rehabilitation exercises
- Opportunity for carrying out familiar activities such as hanging washing, watering plants and gardening
- Do we need a bus stop???

Discussion points for Co-Design review

Infection Control

Infection control is not a new requirement but learning from Covid-19 has highlighted potential areas for further consideration in the new home

- Ability for nursing staff to don and doff PPE inside of patients rooms
- Storage of PPE in patients rooms
- Space for clinical waste bins in rooms
- Storage of soiled linens whilst infectious
- Hand Washing Stations
- Sanitisation stations
- Isolation of Households if there is an infection outbreak
- Visiting spaces/facilities if Household is isolated.
- Managing isolation for patients with dementia/anxiety.

Client Mix

The current design for the nursing home creates separate households for people with specific health needs such as Dementia, Learning Disabilities etc

- During the Osborne Grove ward project the ages of patients ranged from 35 – 97 years old. The patients needs were very varied but something worked in the diversity of patients the biggest factor that was found was for the younger residents feeling that they shouldn't be placed with the elderly!

- Mixed gender wards – the Osborne grove ward had to adhere to North Mid policy on single sex wards we found that whilst there were positive factors such as allocation of male care staff the patients tended to visit each others lounges as they enjoyed each others company.

TERMS OF REFERENCE

Terms of Reference

OSBORNE GROVE NURSING HOME CO–DESIGN STEERING GROUP

MEMBERSHIP:	Chair: Cllr Sarah James Carer / Service User representatives (x6) Healthwatch Haringey Unison Council officers, Commissioners and Management Clinical Commissioning Group
QUORUM:	Six members, of whom three must be carer / service user representatives and two must be Council representatives.
REPORTS TO:	ASC Redesign Group and through to the Lead Member for Adults and Health
FREQUENCY	MONTHLY

Terms of Reference (continued)

Overall purpose:

To play a strategic co-design role on the overall programme of work associated with the future development of Osborne Grove Nursing Home; ensuring that a range of stakeholders are involved in this process.

The scope includes advising on the development of the options appraisal for the future use of the site, including scoping design and feasibility studies, developing design principles to inform the future delivery model on site and appraising the outcomes of the feasibility studies to inform final cabinet decision. Thereafter, the group will play an active co-design role in the development of the preferred option, through the procurement of a construction partner and development of the long-term delivery solution.

Specific Responsibilities:

- To advise on the development of the overall programme of work associated with the development of Osborne Grove Nursing Home
- To ensure that details of the new service developments are effectively communicated to relevant carers and service users in a way that maximises their opportunity to be involved and informed.
- To review demographic projections to ensure that the future model of care at Osborne Grove matches the current and future demographic profile of Haringey's older residents.
- To develop core design principles for the future development of Osborne Grove and ensure that these are considered at all stages of future development.
- To ensure that feedback from carers and service users on the development of Osborne Grove is evaluated and any concerns addressed appropriately