Stag Brewery, Mortlake

Assisted Living Demand Assessment

For Reselton Properties

February 2018

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Executive Summary

i. Reselton Properties Ltd is seeking planning permission for a mixed-use development (Proposed Development) on the former Stag Brewery site situated in London Borough Richmond upon Thames (LBRUT). The Proposed Development includes provision of Assisted Living units together with a residential care home. The Application for this element of the Development is Outline and as such floorspace figures only are provided within the Application. However, the number of assisted living units being applied for is 150. A care home providing up to 80 ensuite rooms is also included within the submission.

ii. Pre-application discussions with LBRUT have raised queries regarding the proposed level of provision of assisted living units and they have referred to their own evidence base which suggests a need for at least an additional 81 assisted living units in the borough up to 2020. This report responds to these queries and demonstrates the local demand and supply context.

iii. A report titled 'Assisted Living and Care Village overview for former Stag Brewery' by UK Retirement Living at Savills has also been submitted with this Application. It sets out a detailed description of the proposed C2 uses, including likely facilities, operational and management structures, care packages and likely occupiers and should be read in conjunction with this report.

iv. Assisted living housing is increasingly playing a role in enabling the population to have a good quality of life well into their older age. The benefits of assisted living housing in reducing bed blocking, freeing up family housing and providing greater choice in tenure, care and support are widely recognised amongst national and local health and planning organisations. Alternatives such as care within or adaptations to mainstream housing are not always possible and more traditional alternatives such as care homes and sheltered housing schemes are declining in popularity amongst an older population with increasing aspirations for better living standards.

v. Recognised drivers of demand for assisted living housing include an ageing demographic, high levels of home ownership, a strong housing market and existing shortage in supply. All of these issues are pertinent to LBRUT. Since 2001 the borough has experienced an ageing population and is expected to continue to do so over the Local Plan period, particularly amongst the advanced older age population (85+) where expected growth rates are above the London average. Life and healthy life expectancy levels are also above average suggesting extra care units may be more appropriate for the market. Tenure patterns within the borough and ward are also suggestive of this with a high proportion of home ownership amongst the older population and above average property prices.

vi. A review of the current demand and supply situation in the borough has found there to be a current shortage in supply of around 268 assisted living units. This is based on the application of demand ratios derived from the most widely used and recognised method of estimating demand for assisted living units, namely the SHOP@ tool. There are currently no vacancies in the existing assisted living schemes in the borough and there are no schemes situated in the ward or in close proximity. Existing shortages in supply need to be considered alongside any future estimates of demand.

vii. In considering future levels of demand for assisted living units, Regeneris has considered the Council's evidence base which consists of three consecutively published documents: Extra Care Evidence Base (2015), Retirement Housing Review (October 2016) and the Strategic Housing Market Assessment (December 2016). All three documents consider the demand for extra care housing, either specifically or integrated with broader specialist forms of accommodation for older people. All three documents have used different approaches but none consider any existing shortages in supply. More specifically, the Council's Extra Care Evidence Base, which suggests demand for an additional 81 units, bases its estimates on very outdated (2004) research, covers a relatively short time frame, and does not consider the implications of any potential population increases. These factors combined suggest the Council's view of demand may be an underestimate.

viii. In order to address these issues, Regeneris has estimated future demand based on the SHOP@ tool ratios and applied them to updated population projections (75+ years of age) and supply data. This suggests a deficit in supply of 303 by 2020 and 495 by 2033. This is likely to be a minimum estimate given additional demand that may arise from the 65-74 age group of the population.

ix. Regeneris acknowledges the SHOP@ tool provides an indication of likely levels of demand rather than a finite prediction. However, when the outputs are considered alongside the local drivers of demand highlighted in Section 2 of this report, it is clear that the Council's own view of future demand is likely to be an under estimate. In conclusion, it is considered there is an identified demand for older persons housing which these proposals would help to contribute towards meeting. On this basis, Regeneris suggests that the proposals for up to 150 assisted living units within Application A should be treated favourably.

1. Introduction

1.1 This Assisted Living Demand Assessment has been prepared by Regeneris on behalf of Reselton Properties Limited ('the Applicant') in support of three linked planning applications for the comprehensive redevelopment of the former Stag Brewery Site in Mortlake ('the Site') within the London Borough of Richmond Upon Thames ('LBRuT').

1.2 The former Stag Brewery Site is bounded by Lower Richmond Road to the south, the river Thames and the Thames Bank to the north, Williams Lane to the east and Bulls Alley (off Mortlake High Street) to the west. The Site is bisected by Ship Lane. The Site currently comprises a mixture of large scale industrial brewing structures, large areas of hardstanding and playing fields.

1.3 The redevelopment will provide homes (including affordable homes), accommodation for an older population, complementary commercial uses, community facilities, a new secondary school alongside new open and green spaces throughout. Associated highway improvements are also proposed, which include works at Chalkers Corner junction.

1.4 The three planning applications are as follows:

- Application A – hybrid planning application for comprehensive mixed use redevelopment of the former Stag Brewery site consisting of:
    i. Land to the east of Ship Lane applied for in detail (referred to as 'Development Area 1' throughout); and
    ii. Land to the west of Ship Lane (excluding the school) applied for in outline detail (referred to as 'Development Area 2' throughout).
- Application B – detailed planning application for the school (on land to the west of Ship Lane).
- Application C – detailed planning application for highways and landscape works at Chalkers Corner.

1.5 Full details and scope of all three planning applications are described in the submitted Planning Statement, prepared by Gerald Eve LLP.

1.6 This report responds to queries raised by LB RuT in relation to the assisted living units that are being applied for as part of the overall Development. The Proposed Development includes provision of Assisted Living[1] units together with a residential care home. The Application for this element of the Development is Outline and as such floorspace figures only are provided within the Application. However, the number of assisted living units being applied for is 150. A care home including up to 80 ensuite rooms is also included in the submission.

1.7 Pre-application discussions with the LBRUT Council have raised queries regarding the proposed level of provision of assisted living units (also referred to as Extra Care when delivered by the public sector). This report responds to these queries and demonstrates the local context and need for such provision.

Context

1.8 Policy LP 37 and Policy DMH05 of the LBRUT draft Local Plan (January 2017) and the supporting text indicate that current housing priorities for the Borough include, amongst other things:

- remodelling of older peoples sheltered accommodation to provide self-contained units;
- extra care housing which in some cases can be created from remodelling existing sheltered accommodation;
- private sheltered and extra care accommodation (but this would be a lower priority than affordable housing).

1.9 The Local Plan also refers to the Council's Extra Care Housing Evidence Base (2015) which suggests there is an estimated need for at least an additional 81 extra care units in the borough provided across two to three locations in the period 2015 to 2020.

1.10 The council have indicated that local need should be identified on the basis of up to date evidence and related to the Council's housing and associated strategies, including specific reviews concerning supported housing for specific client groups, or other relevant strategies.

1.11 The **purpose of this report** is to provide a review of both the current and future picture of supply and demand for Extra Care Units within LBRUT. The report has the following content:

[1] Assisted Living can also be referred to as 'Extra Care'. Typically it is known as 'Extra Care' housing when provided by the public sector or Assisted Living when delivered by private providers. The Council's evidence base refers to 'Extra Care'.

- **Current supply and demand** – a review of the current supply of and demand for Assisted living units in LBRUT
- **Market Overview** – a summary of national and local drivers of demand for Assisted living units
- **Review of LBRUT evidence** – a critical review of the Council's evidence base on the future demand for and supply of Extra Care Units
- **Projected future need and supply –** summarises the balance of supply and demand taking account of any short-falls in the Council's evidence and the potential need for alternative forecasts to be considered.
- **Conclusions –** sets out our conclusions bringing together the findings of our demand and supply assessment.

1.12 A report titled 'Assisted Living and Care Village overview for former Stag Brewery' by UK Retirement Living at Savills (*the Savills Report*) has also been submitted with this application. It sets out a detailed description of the proposed uses, including likely facilities, operational and management structures, care packages and likely occupiers and should be read in conjunction with this report.

2. Market Overview and Drivers of Demand

Assisted living housing is increasingly playing an enabling role in allowing the population to have a good quality of life well in to their older age.

Mainstream housing is not always adaptable or suitable for provision of care and alternatives such as care homes and sheltered housing are declining in popularity.

Assisted living housing is increasingly seen as an alternative to residential care and can assist in alleviating bed-blocking as well as providing greater tenure, care and support choices and potentially free-up family housing.

Recognised drivers of demand for assisted living housing include an **ageing demographic**, high levels of **home ownership** and the strength of the **housing market** together with existing **shortages in supply**.

These drivers are pertinent to LBRUT:

- The proportion of the population aged 65 and over has increased at a faster rate than the overall population between 2001 and 2011 and estimates show this trend to have continued between 2011 and 2016 with a 17.1% increase compared to 4.7% increase for the overall population. Population projections suggest this faster rate of increase will continue during the Plan period up to 2033.
- The borough has above average levels of life expectancy and above average levels of healthy life expectancy. This suggests that products such as extra care could be far more relevant to older residents of LB RuT than more traditional forms of older persons housing such as nursing and care homes.
- Tenure patterns in the borough indicate a high proportion of home ownership amongst the older population suggesting aspirations for ownership and space requirements will be more in line with the choices offered through extra care provision.
- Chapter 3 of this report reviews the existing supply and demand situation and identifies current shortages in supply.

Assisted Living Market Overview

2.1 In an era where people are living longer lives and there is a national drive towards life time neighbourhoods and age friendly communities, the provision of assisted living housing is increasingly playing an enabling role in allowing the population to have a good quality of life well in to their older age. Whilst it is widely recognised that mainstream housing needs to be suitable to meet the needs of older people, both through adaptation to the existing stock and by ensuring new housing is flexible to meet occupants' changing needs over time, it is not always a suitable place for care to be provided. Existing alternatives, such as care homes and sheltered housing, are seeing a decline in popularity amongst the generation of older people who are used to being home owners and who increasingly express wishes to remain independent as well as socially active.

2.2 Assisted living housing is increasingly seen as an alternative to residential care, including for older people who need re-ablement or intermediate care after a spell in hospital. It is a recognised component of joint commissioning by health and social care services helping to alleviate bed-blocking of hospital beds and responds to changes in local authority funding for care, to support informal care and self-care. It can also contribute to increasing the tenure, care and support choices available for older people and potentially free up family size housing by encouraging the older population to downsize.

2.3 In 2014, the Housing LIN identified the key drivers of demand for private Extra Care living (assisted living) as follows:

- An **ageing** demographic
- The underlying strength of the UK **housing market**, particularly in the South East and London
- The strong preference in the UK for **home ownership**
- The 'massive **shortage**' of private extra care units particularly when compared to other countries such as the US, Australia and New Zealand.

2.4 Despite these drivers of demand, in 2015, the Housing LIN reported a significant shortfall (61,000) of assisted living units in England by 2030. The delivery of Extra Care is not keeping apace with the growing demand for the product. In part this is due to ambiguities and uncertainties around product definition and a challenging planning system which can cause delay and uncertainty for providers and developers[2]. This, combined with competition for sites and a higher risk profile in terms of bank funding means that a step change in delivery will be required in order to meet the expected demand levels in the future.

2.5 These drivers of demand are explored in further detail below within a local context.

[2] '*Will the private extra care market take off in 2014?', Viewpoint 61, Housing LIN, June 2014*

Drivers of Demand

An Ageing Demographic

2.6 According to the 2011 Census (see Table 2.1), the proportion of the population aged 65 and over in Mortlake and Barnes Common was 12% (1,310), which was above the London average (11.1%). Across LBRUT as a whole, the proportion was even higher at 13.5%. The proportion of those aged 75 and over and reaching advanced older age (85+) in LBRUT (6.6%) is also above the London average (5.3%).

Table 2.1 Population Age Structure

	Mortlake and Barnes Common		LBRUT		London
	No.	%	No.	%	%
0-64	9,609	88.0%	161,694	86.5%	88.9%
65-74	759	7.0%	13,023	7.0%	5.8%
75-84	366	3.4%	8,234	4.4%	3.8%
85+	185	1.7%	4,039	2.2%	1.5%
Total 65+	1,310	12.0%	25,296	13.5%	11.1%
Total	10,919	100.0%	186,990	100.0%	8,173,941

Source: Census 2011

2.7 According to LBRUT's evidence base[3], '*Richmond upon Thames is ranked the seventh highest for the percentage of population aged over 65 in Greater London. Richmond is also ranked joint second (with three other London Boroughs) for the highest percentage of population aged 90+, at 0.8% of the population*' (paragraph 3.1).

2.8 Since 2001, the older population (65+) in LBRUT has increased by 13,160 (6.8%) compared to an increase of just 1.5% for London as a whole (See Table 2.2). The advanced older age population experienced an increase of 12.5% over the same time period compared to 8.9% for London.

Table 2.2 Population Change Since 2001

	2001	2011	Change		% Change	
	LBRUT	LBRUT	LBRUT	London	LBRUT	London
65+	23,676	25,296	1,620	13,159	6.8%	1.5%
85+	3,590	4,039	449	10,060	12.5%	8.9%
All ages	172,335	186,990	14,655	1,001,850	8.5%	14.0%

Source: Census 2001 and 2011

[3] Extra Care Housing Evidence Base, December 2015, LB Richmond upon Thames, Corporate Policy

2.9 The latest available data (2016) from ONS[4] shows a likely continuation of these trends with the population of LBRUT aged 65 and over having increased by 17.1% (4,300) from 2011, compared to an increase of 4.7% for the population as a whole. This equated to 15.1% of the total population aged 65 and over compared to the London average of 11.1%.

2.10 The most recently available ONS population projections[5] for LBRUT, show that the older age groups are expected to grow faster than the population as a whole (see Table 2.3). Between 2017 and 2033 it is anticipated the overall population of LBRUT will increase by 17.2% (34,900) whilst the population aged 65 and over is expected to increase by 47.6% (14,400). Furthermore, the population of those aged 75-84 and 85+ is expected to increase by 61.4% and 80.9% respectively. The expected increase in those aged 85+ in LBRUT is above the London average of 71.4%. By 2033 the population aged over 65 will account for 18.8% of the overall population, up more than five percentage points from the 2011 levels.

Table 2.3 Population Projections, LBRUT

	2017	2020	2025	2033	Change	% Change
65-74	16,951	17,516	17,997	22,287	5,336	31.5%
75-84	8,847	10,048	12,777	14,280	5,433	61.4%
85+	4,518	4,715	5,473	8,172	3,655	80.9%
Total 65+	30,315	32,280	36,247	44,739	14,424	47.6%
Total	202,579	210,787	222,724	237,499	34,920	17.2%

Source: ONS, SNPP-2014

2.11 It is the growth in the size of this older age group, 75+ in particular, which is most closely tied to the demand for specialist forms of accommodation including assisted living, since this age group is most likely to need care which is provided in specialist settings. However, those aged 65-74 are equally eligible and may also experience circumstances where assisted living accommodation is the most appropriate and desirable setting to meet their needs.

2.12 Clearly the population of LBRUT is ageing and this trend is expected to continue throughout the Local Plan period up to 2033. The implications of this in terms of future demand for assisted living are discussed in more detail in Section 4 and 5 of this report.

[4] ONS 2016 mid year population estimates

[5] ONS Sub National Population Projections 2014

Health and Life Expectancy

2.13 According to Age UK[6], 'the number of people aged 85+ in England increased by almost a third over the last decade and will more than double over the next two decades'. Further, by their late 80s, more than one in three people have difficulties undertaking five or more tasks of daily living unaided. The need for care, accommodation and support generally increases with age as the incidence of specific conditions including physical disabilities, sensory impairments and dementia increases. According to the Department of Health, 75% of those aged over 65 will need care at some point in their life.

2.14 The Council's evidence base[7] in relation to demand for Extra Care units sets out the average life expectancy in Richmond is 82 years of age for men and 86 years of age for women. These equate to some of the highest levels in England. The evidence base also states that Richmond residents have the highest 'healthy life expectancy' (the number of years spent in good or very good health based on an individual's perception of their own health) for men in the country (at 70 years) and 2nd best for women (at 71 years). The Council's evidence base suggests this means 'the period of life spent in poor health is shorter than many other areas' (para 3.4). However, the higher than average life expectancy in LB Richmond may counter this argument and may also suggest that products such as assisted living units are far more relevant to the market for aged care living in the Borough than more traditional products such as nursing and care homes.

Home Ownership and Housing Market

2.15 As noted earlier, the preferences for home ownership in the UK and amongst the older population in particular can be a key driver of demand for assisted living. Home ownership levels in Mortlake and Barnes Common ward and LBRUT amongst the population aged 65 and over are significantly above those of the population as a whole. According to the Census data in 2011, the vast majority (68.1%) of the population aged 65 and over in LBRUT owned their property outright compared to just under 30% amongst the total population. Only a small proportion rent in the private rented sector (7.1%) and 16.3% in the social rented sector, though these proportions are slightly higher for Mortlake and Barnes Common.

[6] Briefing: Health and Care of Older People in England, 2017, Age UK

[7] Extra Care Housing Evidence Base, December 2015, LB Richmond upon Thames, Corporate Policy

Table 2.4 Tenure by Age								
	Owned outright		Owned with loan/mortgage/shared ownership		Social rented		Private rented	
	M&B Common[8]	LBRUT	M&B Common	LBRUT	M&B Common	LBRUT	M&B Common	LBRUT
0-64	18.4%	19.1%	38.0%	41.8%	14.7%	11.6%	28.9%	27.5%
65-74	59.8%	66.1%	9.8%	11.4%	19.6%	15.4%	10.8%	7.1%
75-84	61.1%	72.0%	7.0%	6.1%	22.8%	15.9%	9.1%	6.1%
85+	57.8%	65.8%	3.7%	5.1%	24.2%	19.7%	14.3%	9.4%
Total 65+	59.8%	68.1%	8.0%	8.5%	21.3%	16.3%	10.9%	7.1%
Total	26.5%	29.8%	32.1%	34.6%	16.0%	12.6%	25.4%	23.1%

Source: Census 2011

2.16 The tenure pattern amongst the older population is significant because it suggests most older people in the future will expect to own their own homes and have aspirations in terms of space standards, having previously been home owners. assisted living housing can offer greater choice in terms of tenure options, independence and personal space compared to more traditional forms of housing for older people.

2.17 Average property prices vary across the borough although Mortlake and Barnes common ward has the fifth highest average property prices within LBRUT[9], suggesting the amount of equity that the older owner occupiers have will be at the upper end of the scale. LBRUT evidence base suggests this is important because national research has demonstrated that older people often do not wish to move far from their current neighbourhoods.

2.18 Section 3 of this report goes on to explore current levels of supply and demand and any potential shortages which may further drive demand for assisted living.

[8] 'M&B Common' is short for Mortlake and Barnes Common

[9] Retirement Housing Review, LBRUT, 2016, para 11.1

3. Current Supply and Demand

3.1 This section reviews the current picture of the supply of extra care units in LBRUT together with any identified demand in order to highlight any existing surpluses or shortages. Regeneris has considered the Council's evidence in relation to existing supply and demand together with any necessary updates to information. We have also commented on the current supply and demand of care homes on the basis of relevance to the demand for extra care units and the inclusion of such information in the Council's own evidence base.

3.2 A summary of the findings is set out below together with a more detailed review in the remainder of the chapter.

The Council's Extra Care Housing Evidence Base identified 67 extra care units within the borough across two schemes, one of which is purpose built.

It also identified 21 'care homes' within the borough with a total of 812 bed spaces.

Regeneris' review of the supply of extra care units has been cross-checked with providers for accuracy and identified a total of 66 units across two schemes together with a total of 876 registered care home bed spaces. There are no vacancies in either of the existing extra care schemes.

There are **no extra care schemes or registered care bed spaces located within the ward of Mortlake and Barnes Common** and those within 5km of the Site are all located in boroughs north of the River Thames. Provision of extra care units in this location would help to improve the geographical spread of existing provision across the borough

The council's evidence base does not comment on existing levels of demand for extra care units. As such, Regeneris has adopted the widely used SHOP@ tool ratios of demand and applied them to up to date population projections (75+ years of age) for the borough and updated information on supply.

Regeneris estimates there to be an existing **deficit in supply of 268 extra care units** and 594 registered care bed spaces. This is likely to be a minimum deficit given any additional demand arising from the 65-74 age group. These deficits should be taken in to account when considering future levels of demand.

Supply

3.3 In December 2015 LBRUT published its Extra Care Housing Evidence Base[10] which reviewed the need for Extra Care housing amongst those aged 65 and over within the LBRUT. Paragraph 1.14 of the Evidence Base notes that 'Extra Care provision is still a relatively new element of housing provision in the borough' with a total of 67 units across two schemes, the most recent of which was developed in 2012 (41 units).

3.4 The Extra Care Evidence Base also notes there were '21 care homes in Richmond upon Thames with a total of 812 bed spaces'. Regeneris understands this includes both care homes and nursing homes.

3.5 The more recently published 'Retirement Housing Review[11]' (October 2016) indicates there were 60 Extra Care units within the Borough. It does not comment on the supply of Care Homes. There is no explanation as to why the two Council reports have differing figures on the current supply of Extra Care units. Regeneris assumes it may be that different sources of information were used.

3.6 Regeneris has sought to update and verify the current supply of Extra Care units using the Elderly Accommodation Counsel database and have cross checked the information with providers in order to ensure accuracy. For completeness, we have also included information on the current number of nursing and care home bed spaces in the Borough as well as within a 5km (c3 miles) radius around the Site.

3.7 Accordingly, there is a total of 66 Extra Care Units within the Borough, all of which are managed by Richmond Housing Partnership under social rented or shared ownership tenure. There are no vacancies in either scheme. This figure is broadly similar to that in the Council's evidence base (67) and will be used for the remainder of this report. Within 5km of the Site, there are five Extra Care facilities with a total of 161 units, none of which fall within the borough.

Table 3.1 Supply of Extra Units

Extra Care Facilities within the Borough

Name	Postcode	Units	Provider	Details
Dean Road	TW12 1BF	41	RHP	Purpose built in 2010, 1 and 2 bed units

[10] Extra Care Housing Evidence Base, December 2015, LB Richmond upon Thames, Corporate Policy

[11] Retirement Housing Review, October 2016, LB Richmond upon Thames, Adult Social Care, Table 5, pg 16

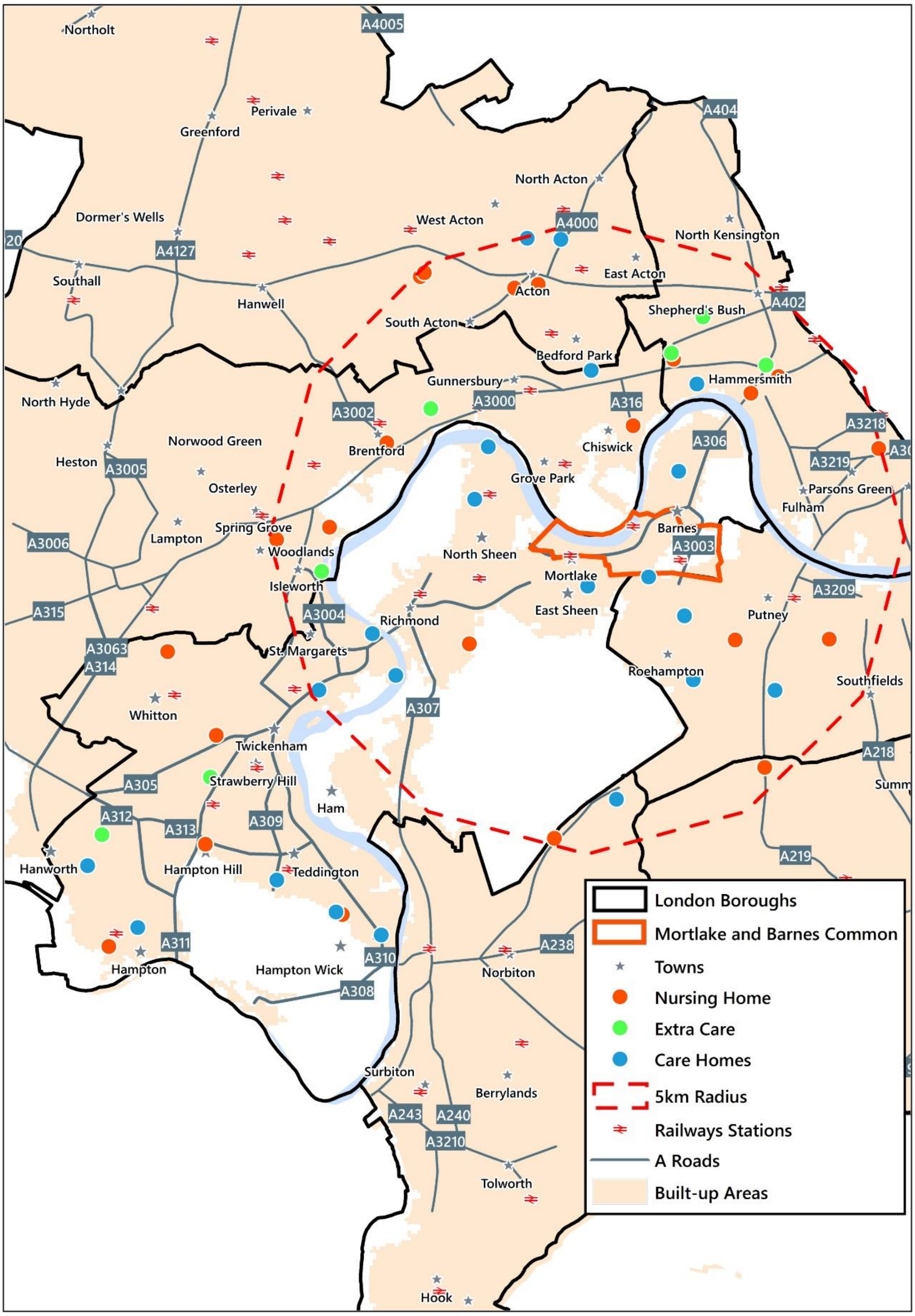
Sandown Court	TW2 5NE	25	RHP	Built in 1985, originally sheltered housing, 1 bed units
Extra Care Facilities within 5km of the Site				
Name	**Postcode**	**Units**	**Provider**	**Details**
Greenrod Place	TW8 0BN	43	Housing & Care 21	Purpose Built (2006). Mix of 1 and 2 bedrooms
Mary Seacole House	W6 0QH	32	Mears Care Ltd	Purpose Built (2005)
Elgin Close	W12 9NH	36	Nottinghill Housing Trust	33 x 1 bedroom and 32 bedroom flats
Bridgewater House	TW7 7BP	36	Octavia Living	New (2017) Purpose built / 1 bedroom & 2 bedroom
Elmgrove House	W6 7DS	14	Nottinghill Housing Trust	Purpose built (1997) Studio apartments with ensuite

Source: ELC and carehome.co.uk; accessed August 2017

3.8 There are a total of 876 registered care home bed spaces with 462 in Nursing Homes and 414 in Care Homes across the borough. None of these are located within the Mortlake and Barnes ward itself. The closest facility to the Site is Alexander House Care Home (without nursing) which is a converted property over two floors with 12 single rooms (10 ensuite) and 2 shared rooms. Lyle House Care Home is also in close proximity to the Site although just outside the Borough. It is a modern purpose built facility with 45 ensuite single rooms. It currently has one vacancy which is for dementia care. Viera Gray House Care Home is situated close by in Barnes. It is a purpose built facility with 38 single ensuite rooms and currently two vacancies. Within 5km of the Site there are 33 registered care facilities with a total of 1,871 bedspaces. The age and quality of these vary considerably with many having been converted rather than purpose built, many including shared rooms and many lacking ensuite facilities (see Appendix 1 for more details).

3.9 Figure 3.1 below shows the location of the Extra Care units as well as the Registered Care bed spaces across the borough. Both Extra Care schemes within the Borough are situated in the west of the borough some distance from Mortlake and Barnes and those within 5km are all located in boroughs north of the River Thames.

Figure 1.1 Location of Extra Care units and Registered Care units



Source: Elderly Accommodation Council data with updates from Regeneris

3.10 The provision of assisted living units on the Site would help to improve the geographical spread of provision across the borough. A Transport Assessment has been carried out as part of the Planning Applications and indicates that public transport accessibility, in reality, can be considered better than the Site's current PTAL rating of 1. For example, PTAL does not take into account the wide variety of locations that can be easily accessed from the Site and the interchange facilities available which provide easy access to the wider strategic network serving London and the wider South East Region. The rail services from Mortlake provide for easy access to a very extensive area through interchange at Clapham Junction, Richmond, Victoria or Waterloo whilst the various bus services that serve the area provide links to a very extensive area of London and again provide access to a number of important strategic interchanges, including Hammersmith. The Transport Assessment also confirms priority will be given to the mobility impaired in the allocation of parking spaces.

Demand

3.11 The Council's Extra Care Housing Evidence Base does not provide a clear picture of 'current' demand for Extra Care Units in the Borough. It does however note that in 2013, a review of all applicants for the social rented extra care units was carried out and found that extra care units were 'over-subscribed with thirty applicants for 10 available units' (para 8.5). This suggests there are likely to be current waiting lists and/or deficits in supply to meet current demand levels.

3.12 There is currently no one agreed mechanism for estimating future needs amongst the local population for extra care housing in England and Wales. However, the most widely recognised tool in recent times for estimating how many units for extra are required for local population is the SHOP@ tool (Strategic Housing for Older People Analysis Tool) on the Housing LIN website. This emerged from an earlier toolkit, 'More Choice, Greater Voice', produced by DCLG and the then Care Services Improvement Partnership at the Department of Health.

3.13 The SHOP@tool has been endorsed by the Department of Health and in the absence of any other consistently used mechanism, Regeneris considers it to be the most appropriate and robust method once any necessary updates to data have been considered.

3.14 In order to produce estimates of need, the SHOP@ tool applies demand ratios for the population aged 75+ for each form of specialist accommodation. These ratios are based on the existing ratios of supply (per 1,000 population aged 75+) within England but are adjusted to reflect known trends. These ratios are contained in the 'More Choice; Greater

Voice' report – the good practice toolkit for the National Strategy for an Ageing Society. For Extra Care units and residential and nursing care homes these ratios are:

- 25 Extra Care units per 1,000 population aged 75+
- 65 residential care units per 1,000 population aged 75+
- 45 nursing care units per 1,000 population aged 75+

3.15 The SHOP@ tool suggests there is '**current**' **demand for 320 Extra Care units** and **1,408 Registered Care bed spaces** (including both residential and nursing care). When taking the supply of units into account estimated by the toolkit, this equates to a 'current' deficit of 238 Extra Care units and 590 Registered Care bed spaces.

3.16 Whilst the SHOP@ tool is a useful indicator of demand and supply, its estimates of demand are not currently based on the most up to date information on supply and population. Supply information is derived from the Elderly Accommodation Counsel national housing database at 2014. We have updated these supply figures to reflect the more recent supply data set out above (Table 3.1) and also updated the demand figures to reflect the estimated population of 75+ year olds based on the latest available ONS population projections[12] for 2017.

3.17 When taking these updates in to account, the expected ratios applied by the SHOP@ tool suggest there is current demand for 334 Extra Care units within LBRUT and a deficit in supply of -268 (-80%).

Table 3.2 LBRUT current demand and supply for Extra Care and registered care bed spaces, 2017

	Demand	Supply	Variance	% Variance
Extra Care	334	66	-268	-80%
Registered Care	1,470	876	-594	-40%
Residential Care	869	414	-455	-52%
Nursing Care	601	462	-139	-23%

Source: SHOP LIN Toolkit, accessed August 2017; Elderly Accommodation Counsel, accessed August 2017, ONS SNPP 2014; Regeneris

3.18 The SHOP@ tool applies ratios of demand to the population aged 75 and over. However, as previously stated (see para 2.11), those aged 65-74 are equally eligible for these forms of accommodation and may also experience life circumstances whereby extra care living is

[12] ONS Sub-National Population Projections (SNPP) 2014

both suitable and desirable. Any demand arising from this age group of the population would therefore be additional to the levels of demand set out in Table 3.2 above and would add to any existing deficits in supply.

3.19 It is also worth noting the shortfall of registered care provision (-594 bed spaces). As previously noted and highlighted within the Council's own evidence base, evidence suggests extra care accommodation can delay moves into residential care and can enable older people to live independently for longer. Thus, the level of demand for registered care spaces may also have implicit implications on demand for extra care.

3.20 These levels of current demand and deficits in supply should be taken in to account when estimating future levels of demand. This is explored further in Section 5 of this report.

4. Review of Council's evidence of Future Demand

4.1 This section considers available evidence on future demand for extra care housing in LBRUT. During pre-application discussions with LBRUT Council, two documents have been referred to in relation to evidence of demand for Extra Care units. These documents have also informed the preparation of the Local Plan and are as follows:

- 'Extra Care Housing Evidence Base', LBRUT, December 2015
- 'Retirement Housing Review', LBRUT, October 2016

4.2 In addition, Regeneris has considered evidence set out in the more recently published 'Strategic Housing Market Assessment' (SHMA), LBRUT, December 2016

4.3 There are a number of differences in the approaches between these documents together with some questions around the appropriateness of methodology. These are summarised below with a more detailed review of each document in the remainder of the chapter.

The Council's **Extra Care Evidence Base** (2015) suggests a total of 81 additional extra care units will be needed between 2015 and 2020 across two to three schemes in different areas of the Borough. On reviewing the EC Evidence Base, Regeneris raises some questions regarding the approach used as follows:

- The EC Evidence base pre-dates the SHMA (Dec 2016) and does not consider expected population growth amongst the older population nor the SHMA's recommendations in terms of housing need for older people.
- Demand is estimated using assumptions on the potential ratio of diversions from care home admissions to extra care and derived from outdated (2004) secondary research.
- A single year of data (2013/14) on care home admissions in the borough is used to anticipate demand for the whole of a five year period (2015-2020).
- The timeframe used is a relatively short time frame compared to the Plan period (up to 2033).
- Existing shortages in supply do not appear to have been considered in the conclusions on the demand

- The approach used is different to both that of the Council's Retirement Housing Review and the SHMA, both of which were produced more recently.

The Council's **Retirement Housing Review** considers the demand for retirement housing. The methodology used is derived from the Retirement Housing Group Model, also used by the GLA, and which includes extra care housing. However, The Review adapts the methodology to take account of its own assessment of supply and to exclude the demand identified in the EC evidence base for extra care units. Regeneris also has concerns about the appropriateness of this approach as well as the differences between the two documents.

The **SHMA** is the most recently undertaken evidence base in relation to housing for older people and is used to inform the emerging Local Plan. It uses a different approach to both The Review and the EC Evidence Base. Although its approach is more consistent with that adopted by Regeneris, it does not take account of existing deficiencies in supply.

Collectively the issues noted above raise questions regarding the Council's view on the quantum of demand for extra care units. There is a possibility that the level of **demand has been under estimated**.

Extra Care Housing Evidence Base

4.4 The Council's **Extra Care Housing Evidence Base (**hereafter referred to as the ' EC Evidence Base') was prepared in 2015 to review the need for Extra Care housing among older residents of the borough (65 years and over). It is also used to inform housing, health and social care commissioners and assist Registered Providers (RPs) in reviewing their housing stock or considering developing new build extra care schemes.

4.5 The EC Evidence Base pre-dates the Councils SHMA (2016) and therefore does not take account of any conclusions set out in the SHMA in terms of overall expected population and household growth nor the demand for older persons housing. Instead, the methodology used within the evidence base considers the following:

- A literature review and review of policy drivers that could influence the need for extra care provision
- A number of quantitative data sets including population and migration, although **excluding any population projections or forecasts**
- Information on the number of applicants entering residential care and the profile of those entering extra care schemes

- Residents' understanding of and views about extra care were also sought

4.6 According to the EC Evidence Base, '*this approach was chosen because although there are toolkits to estimate projected local need for Extra Care provision these are unrealistic, give different results and are too general to be readily applicable to the Richmond Borough context'* (para 1.9). This contrasts with the Council's SHMA which uses the SHOP@ tool kit to inform its conclusions on the likely quantum of demand for specialist housing for older people.

4.7 The EC Evidence Base suggests that toolkits '*fail to take into consideration both policy drivers that will assist older people to remain within the family home and also older people's aspirations to do so*' and that that '*based on population data they are likely to be highly optimistic in their estimation of need*' (para 9.1). In excluding the use of population projections or forecasts the EC evidence base uses a 'policy-on approach' to estimate demand based on the approach outlined in research for '*What makes older people choose residential care and are there alternatives*'[13].

4.8 According to the EC Evidence base, this research found that a total of two thirds of older people who had '*recently*' been admitted to care homes could have benefited from extra care provision, either by moving now (one third) or if they had moved earlier (a further third). In 2013/14 there was a total of 121 total admissions to care homes in the Borough including both Richmond Council funded and self-funders. The EC Evidence Base uses this single year of data and applies a ratio of two thirds to conclude that an additional 81 extra care units are needed in the Borough for a five year period of 2015-2020. It notes that figure should be reviewed again in 2018/19. It is not clear to Regeneris why they application of a single year worth of data has been applied to a five year time frame going forward. Although not reported in the EC Evidence Base, the delivery of 81 units between 2015 and 2020 would equate to around 16 per annum.

4.9 It is of note that the document on which this approach is based was published in 2004 and is therefore some thirteen years out of date. Indeed, the Housing LIN noted six years ago in 2011 that the document was '*perhaps a little dated'*. The Housing LIN also suggested of this approach '*if you were only considering how demand for care home provision could be reduced through the delivery of extra care housing, this evidence would suggest that at least one third of residents could have been diverted to more appropriate housing with care, and possibly up to two thirds if appropriate information and advice had been*

[13] "What makes older people chose residential care and are there alternatives", (2004), Kerslake, A, IPC.

available'. It does not therefore suggest that this approach will provide a comprehensive or overall estimate of the total demand for Extra Care units.

4.10 The EC Evidence Base states that it '*is envisaged that the 81 units would be based on two to three schemes covering different areas of the Borough'* on the basis of a certain number of units likely to constitute a viable scheme and on achieving a reasonable geographical spread. Specific locations are not identified in the document.

4.11 In terms of the supply of Extra Care units, the EC Evidence Base notes two existing schemes comprising a total of 67 units. There is no reference to any forthcoming supply that may be able to address the additional need for 81 units by 2020. There is also no direct reference to any existing deficits in supply of Extra Care units and how this might affect the need for additional units.

Retirement Housing Review

4.12 The Council's **Retirement Housing Review** (October 2016) (hereafter referred to as '*The Review*') analyses the need for retirement housing among residents aged 60 and above in LB RuT with the aim of supporting the Council's future housing and planning strategies and sits alongside the broader SHMA.

4.13 At the outset of The Review there is some confusion as to whether it includes or excludes Extra Care housing. At paragraph 3.1 it states '*In this paper…it also excludes extra care schemes which are defined as retirement housing where there is care and housing support available on site 24/7 as this type of retirement housing is addressed in a separate report*' (referring to the EC Evidence Base). In the same paragraph however it states that '*extra care housing will be factored into the recommendations of the paper as they all address the housing needs for older people within the Borough*'.

4.14 It later materialises that The Review provides an overall estimate of the demand for retirement housing including for Extra Care units, but then deducts the level of demand set out in the EC Evidence Base (81 units) from the estimated deficit in supply of retirement housing to give an overall demand figure for retirement housing *excluding* Extra Care units. This takes no account of the differences in methodologies between the two documents.

4.15 At paragraph 17.1 The Review sets out the current supply of retirement housing which includes 60 Extra Care units. It is not clear why this number of units differs to the supply of '67 units' set out in the EC Evidence Base. With a total stock of 1,404 retirement housing units, The Review notes that the majority is sheltered housing, '*some of which is not up to* *the standards against which retirement housing is now measured'* (para 17.1), with 240 of them being studio flats with shared bathroom facilities and a number having been built in the 1970s and 1980s. This brings in to question the ability of such accommodation to be modified to Extra Care units.

4.16 In terms of estimated future demand, The Review refers to the 'Retirement Housing Group Model' which, based on national research projects, assumes that 15% of households aged 75 and over and 2.5% of households aged 65-74 would live in retirement housing if it was available and projects the demand for retirement units on future household estimates.

4.17 The Review goes on to use the GLA's recommendations for need, which are based on the Retirement Housing Group Model, with some adaptations to take account of The Review's own estimates of supply. This can be summarised as follows:

- The GLA estimates there are approximately 1,210 units of older people's housing in LBRUT, only 50% of which is assumed to be fit for purpose.
- Based on the assumptions in the Retirement Housing Group Model the GLA estimates there to be 1,692 older households wanting to live in retirement housing in LBRUT in 2015 increasing to 2,234 by 2025.
- The GLA then takes the supply which is fit for purpose (50% of 1,210) and deducts it from the overall demand in 2015 and 2025 and takes an average of the surplus or deficit to derive an annual target for provision of 135 units per annum.
- The Review adjusts this annual target downwards to factor in the supply of 196 additional retirement units identified (it identified a total of 1,404), which equates to a revised target of 113 units per annum for the next two years. Of note, The Review assumes that **all** 196 additional units are fit for purpose and simply adds them to the GLA's total of 605 units deemed fit for purpose (50% of 1,210).
- The Review then deducts the EC Evidence Base requirement for 81 units despite the supply of Extra Care units still being included in the calculations. This equates to a requirement for an additional 145 retirement housing units ((113x2)-81) to be delivered 'across 3 to 4 schemes' in the borough.

4.18 It is noted this figure should be reviewed again in 2018/19 but is to provide guidance up to 2020. The adoption of a shorter time frame than either the GLA (up to 2025) or the Plan period (up to 2033) is stated as 'pragmatic'

4.19 In terms of location, The Review goes on to note that providers of retirement housing should consider existing provision across the borough together with access to shops, transport links and the wider community. It is noted that Kew, Whitton and Heathfield have limited supply of retirement housing when considering the population of older people. As The Review has already excluded Extra Care units from its calculations of additional demand for retirement housing, Regeneris assumes these geographical considerations are referring to forms of retirement housing other than Extra Care.

SHMA

4.20 It is noted in The Review that the methodology used is different to that set out in the SHMA which uses the SHOP@ methodology. At the time of undertaking The Review the **SHMA** was in draft but has since been finalised. The SHMA sets out the indicative need for specialist housing for older people which excludes registered care accommodation. It bases its estimates on the data from Housing Lin together with its own demographic projections.

4.21 The SHMA estimates the current stock of specialist housing to include 82 Extra Care units based on information from Housing LIN. Section 3 of this report has found this estimate to be incorrect; Housing Lin base their estimates of supply on data from the ELC from 2014. Regeneris has cross checked information on the ELC website with actual providers and found the actual stock of Extra Care units in the Borough is lower at 66.

4.22 Notwithstanding this, the SHMA suggests the supply of Extra Care units in the borough equates to 6 per 1,000 population aged 75+, which is well below the suggested ratios from Housing LIN of 25 per 1,000.

4.23 The SHMA uses the ratios from the SHOP@ toolkit, which suggest a total of 170 units of specialist housing per 1,000 population aged 75 and over, as follows:

- 125 sheltered units per 1,000 population aged 75+
- 20 enhanced sheltered units per 1,000 population aged 75+
- 25 extra care units per 1,000 population aged 75+

4.24 These are the same ratios used by Regeneris in section 3 of this report. The SHMA applies these ratios to both its long-term migration population projection and its SHLAA constrained population projection for the period 2014-2033 and estimates a requirement for a total of 1,154-1,418 units over the Plan period, or 61-75 per annum. The SHMA does not provide a specific break down of future need for Extra Care units, however, the implications of their methodology on Extra Care are examined in Section 5. It should also be noted the SHMAs estimates of future need do not take into account any current deficits in supply.

5. Alternative Picture of Future Demand

5.1 In section 4, Regeneris considered the Council's evidence base in relation to the demand for Extra Care units. This review raised a number of concerns and uncertainties with the various approaches used. This section sets out an estimate of future demand which takes into account these concerns as well as including the most up to date information on supply and also considers any existing deficit in supply.

5.2 Using the same methodology used to estimate **current** demand (see Section 3), Regeneris has applied the ratio of demand for Extra Care units set out in the SHOP@ tool to the population aged 75+ going forward (25 units per 1,000 75+). Population projections have been based on the latest available SNPP (2014), however, we have also considered the implications of the population projections set out in the Council's SHMA. Estimates of demand have then been considered against the existing supply of Extra Care units (66). Regeneris understands there is no confirmed pipeline supply going forward.

5.3 Table 5.1 below sets out the estimates of demand based on the SNPP 2014 projections for LBRUT. As stated in Chapter 3, the current demand at 2017 for Extra Care units is 334 against an existing supply of 66 giving rise to a deficit of 268 units. By 2020 demand is estimated to increase to 369 units and with no confirmed pipeline of supply the deficit increases to 303 units – **this is well over and above the Council's estimate of demand for additional extra Care units by 2020 of 81**. By 2033, the deficit is estimated to reach 495 units, although this may of course be reduced if additional Extra Care units are delivered in this time period.

Table 5.1 Estimated Demand for Extra Care Units

	2017	2020	2025	2033
75+ Population	13,365	14,764	18,250	22,452
Demand (25 per 1,000 75+)	334	369	456	561
Supply	66	66	66	66
Surplus/Deficit	268	303	390	495
% increase from 2017		13.0%	45.6%	84.7%

Source: SHOP@ Tool, SNPP 2014, Regeneris

5.4 As a comparison, Regeneris has also applied the SHOP@ tool ratio of demand for extra care units to the population projections set out within the Council's SHMA[14]. This gives rise

[14] Strategic Housing Market Assessment, December 2016, LB RuT; Table 78

to a deficit in supply of between 425 and 462 by 2033, only slightly lower than that based on the SNPP 2014.

5.5 As noted in Section 3 of this report, analysis of demand derived from ratios set out in the SHOP@ tool focus on the population aged 75 and over. Those aged 65-74 are equally eligible in terms of age criteria for extra care living and may also experience life circumstances whereby extra care living is the most appropriate and desirable form of living accommodation going forward. The 65-74 age group accounts for 51% of the total 65+ population in LBRUT and is projected to increase by just under 32% between 2017 and 2031 (see Section 2). Although the SHOP@ tool does not provide ratios for this element of the population, any demand that did arise would be additional to that set out in Table 5.1 and paragraph 5.4 above and would serve to increase any projected deficits in supply.

5.6 The Council's evidence base has estimated demand for extra care units based on a ratio of diversion from care home admissions. It is therefore also interesting to note that demand for care home places will also likely increase in line with the ageing population of LBRUT and that there is already a shortage of supply as identified in Section 3. Indeed demand for all types of specialist housing for older people is likely to see an increase over the plan period in line with the ageing population. Therefore, making adaptations to existing specialist housing to provide additional extra care units, such as recommended in the EC Evidence base (para 10.2) needs to be considered carefully alongside the overall demand for specialist housing.

6. Conclusions

6.1 The population of LBRUT is expected to continue to age and with it, a rising incidence of limiting health and disability issues requiring care. Combined with a higher incidence of home ownership, a strong housing market and existing local shortages in supply, LBRUT experiences all the factors that drive demand for assisted living provision.

6.2 The current picture of supply of and demand for assisted living units in LBRUT suggests an existing shortfall of around 268 units. This shortfall needs to be considered alongside any estimates of future demand. There are currently no assisted living units within the ward of Mortlake and Barnes Common and none within close proximity to the ward, meaning that older residents who wish to remain living in their neighbourhood and amongst their existing support networks have very limited choice. Those that are within 5km of the Site are all located in boroughs north of the River Thames and the supply of available spaces is limited.

6.3 The Council's evidence base on future demand for extra care units lacks consistency and is based on very dated research. Regeneris has highlighted a number of queries with regards the appropriateness of methodology, the combination of which suggest that demand may have been underestimated.

6.4 The most widely recognised and used method of estimating demand for extra care units is the SHOP@ tool. Regeneris has adopted the ratios of demand used in this tool and applied them to the updated population (75+ years of age) and supply estimates. This gives rise to a potential deficit in supply of extra care units of 303 units by 2020 and up to 495 by 2033. This is likely to be a minimum estimate given any additional demand that might arise from those aged between 65-74 years of age.

6.5 Regeneris acknowledges the SHOP@ tool provides an indication of likely levels of demand rather than a finite prediction. However, when the outputs are considered alongside the local drivers of demand highlighted in Section 2 of this report, it is clear that the Council's own view of future demand is likely to be an underestimate. On this basis, Regeneris suggests the proposal for 150 assisted living units within Application A, particularly given its location in Mortlake and Barnes common where there is currently no provision within reasonable proximity, should be treated favourably.

6.6 The 150 assisted living units, together with a nursing home, form part of a mixed-use Proposed Development including up to 667 Use Class C3 residential units. The population arising from the assisted living units and nursing home would therefore not be generated in isolation and would be part of a wider balanced community of all age groups. Chapter 7 of the Environmental Statement submitted with these Applications assesses the impact of the additional population arising from the Development as a whole on primary and community services.

6.7 In conclusion, it is considered there is an identified demand for accommodation for older persons, which these development proposals will contribute towards meeting.

Appendix A -

A.1 Tables A.1 and A.2 below provide details of the Extra Care and Registered Care facilities within the LBRUT and within 5km of the Site.

Table A.1 Facilities within the LBRUT

Name	Postcode	Type	Beds/ Units	Details
Alexander House	SW14 8JQ	Care Home	16	12 single and 2 shared rooms (1 en suite)
Barchester Lynde House Care Home	TW1 2JB	Care Home	76	Purpose Built (1996) / 72 single rooms (72 en suite)
Brinsworth House Residential and Nursing Home	TW2 5AL	Nursing Home	36	Converted Building (1850) / 36 single luxury bedrooms
Cecil Court	TW9 3DG	Care Home	45	Converted Building / 44 single rooms (all en suite)
Dalemead Care Home	TW1 2DA	Care Home	49	Converted Building / 44 single and 2 shared rooms (46 en suite)
Dean Road Extra Care Housing Scheme	TW12 1BF	Extra Care	41	Purpose Built (2010) / 41 flats mixture of 1 & 2 bedroom
Deer Lodge	TW11 0DR	Care Home	14	Converted Building / 12 single and 1 shared rooms (1 en suite)
Deer Park View Care Centre	TW11 0DX	Nursing Home	60	Purpose Built (2010)
Greville House	TW10 6HR	Nursing Home	59	Purpose built. Includes dementia suite with 10 rooms.
Hampton Care	TW12 2DW	Nursing Home	76	Purpose Built (2008) 76 single rooms (76 en suite)
Homemead	TW11 0AQ	Care Home	30	Converted Building / 23 single and 3 shared rooms (26 en suite)
Laurel Dene	TW12 1JQ	Nursing Home	99	Purpose built / 99 en suite single bedrooms
Lynde House Care Home	TW1 2JB	Nursing Home	72	Purpose built (1996)/ 72 single en suite rooms
Marling Court	TW12 3XB	Care Home	37	Purpose built / 37 single en suite rooms
Nightingale House	TW1 3AE	Care Home	21	10 single and 5 shared rooms (11 en suite)
Orione House	KT1 4HG	Care Home	34	Purpose built (1974) 34 single rooms (9 en suite)
Sandown Court	TW2 5NE	Extra Care	25	Purpose Built (1985) 25 One bedroom flats /
St Mary's House	TW12 2RT	Care Home	24	25 single bedrooms (8 en suite)

Victoria House	TW9 3PG	Care Home	30	30 single bedrooms (11 en suite)
Viera Gray House	SW13 9PP	Care Home	38	Purpose built / 38 single bedrooms (38 en suite)

Source: Elderly Accommodation Counsel; Regeneris

Table A.2 Facilities within 5km of the Site				
Name	**Postcode**	**Type**	**Beds/ Units**	**Details**
Alexander House	SW14 8JQ	Care Home	16	Converted property over 2 floors, 12 single (10 ensuite) & 2 shared bedrooms (1 en suite)
Lyle House	SW15 5LH	Care Home	45	Modern, purpose Built / (45 single en suite bedrooms)
Victoria House	TW9 3PG	Care Home	30	Converted from Victorian residential properties. 30 single rooms, 11 with en suite
Viera Gray House	SW13 9PP	Care Home	38	Purpose Built / (38 en suite single bedrooms)
Duchesne House	SW15 5ND	Care Home	22	Female Only and members only of Society of the Sacred Heart
Cecil Court	TW9 3DG	Care Home	45	Converted Building / 45 single rooms (all en suite)
St Mary's Convent & Nursing Home	W4 2QE	Nursing Home	61	Converted Building / (56 en suite)
Greville House	TW10 6HR	Nursing Home	59	Purpose built. Includes dementia suite with 10 rooms.
Clifton Gardens	W4 5TZ	Care Home	35	Purpose built / 33 single rooms, 1 shared
Ashmead Care Centre	SW15 3AX	Nursing Home	110	Purpose built / 110 en suite /
St Mary's Home	SW15 4HJ	Care Home	42	Purpose built. 24 single rooms, 9 shared rooms (3 ensuite)
Angela House	W6 9LS	Care Home	6	Converted Property. 3 shared rooms. For those with learnining disabilities.
Greenrod Place	TW8 0BN	Extra Care	43	Purpose Built (2006). Mix of 1 and 2 bedrooms
Lynde House Care Home	TW1 2JB	Nursing Home	72	Purpose built / 72 en suite
Maryville Care Home	TW8 8BQ	Nursing Home	37	Converted building, run by The Frances Taylor Foundation
Mary Seacole House	W6 0QH	Extra Care	32	Purpose Built (2005)
Dalemead	TW1 2DA	Care Home	49	Converted building / 46 en suite / 2 shared rooms
St Vincents House	W6 9QH	Nursing Home	92	Purpose built / 92 en suite
Elgin Close	W12 9NH	Extra Care	36	(2003) 33 x 1 bedroom and 32 bedroom flats

The Chiswick Nursing Centre	W6 0AE	Nursing Home	146	Purpose built / 146 en suite
Kingsmere Retirement Home	SW19 6AB	Care Home	79	Purpose built (2016) / 79 en quite
Charlotte House Care Home	TW7 6AE	Nursing Home	60	Purpose built / 58 en quite
Bridgewater House	TW7 7BP	Extra Care	36	New Purpose built (2017) / 1 bedroom & 2 bedroom
Elmgrove House	W6 7DS	Extra Care	14	(1997) Studio apartments, Nottinghill Housing Trust
Sherwood Grange	SW15 3PU	Care Home	59	Purpose built (2016) / 59 en suite
Sycamore Lodge	W3 8PH	Nursing Home	77	Purpose built / 77 en suite
Nazareth House	W6 8DB	Nursing Home	95	Converted building
Acton Care Centre	W3 8EF	Nursing Home	125	Purpose built
The Pines Nursing Home	SW15 2UQ	Nursing Home	50	Purpose built / 50 single and 5 shared rooms (45 en suite)
Heathland Court Care Home	SW19 5NJ	Nursing Home	82	Converted building / 40 en suite
Atfield House	TW7 6UH	Nursing Home	64	Purpose built (61 en suite)
Nightingale House (Strafford Road)	TW1 3AE	Care Home	21	11 en suite
Chaston House	W3 6HD	Care Home	11	Converted building
Galsworthy House Nursing Home	KT2 7LX	Nursing Home	72	Converted building (1860) 70 en suite
Torkington House	W3 9HF	Care Home	32	Converted building (1947) / 25 en suite
Kenilworth Nursing Home	W5 3UH	Nursing Home	40	Converted building
Ealing Manor Nursing Home	W5 3PL	Nursing Home	33	Converted building / 8 en suite
Farm Lane Care Home	SW6 1PX	Nursing Home	66	Converted building / 66 en suite

Source: Elderly Accommodation Counsel; Regeneris

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