



Urram Report

Dail Mhor Redevelopment Community Consultation

Executive Summary

From November 2020 to end of February 2021, Urram undertook a community consultation on the potential redevelopment of the Dail Mhor site in Strontian.

202 responses were received, which corresponds to approx. 10% of the total population of the area covered by the community councils of Ardgour, Acharacle, Morvern, Sunart and West Ardnamurchan. This is an average response rate for a localised survey of this nature.

Overwhelmingly, the consultation process has shown us that the local community is in favour of the redevelopment of the Dail Mhor site. 91.5% of responses received were in favour of redevelopment.

From the comments received, it is evident that the proposals put forward for consideration by Urram need some adjustments to provide the right balance of space and care, and to provide a health hub that represents what the community wants and needs.

The community consultation data shows a clear desire and requirement for:

A new GP surgery - With the current GP surgery not fit for use, the provision of a new and larger GP surgery is an integral part of this redevelopment. The GP provision should include more consulting rooms, space for visiting clinics, a pharmacy and waiting room.

Respite care - Dail Mhor House is the only existing respite care unit in the whole of Highland region. The local community believe that we should take this into account for future planning, and the redevelopment should provide respite care for both the local community and other areas in Highland.

Palliative care – Responses show that there is a need for this type of care bed to be part of any redevelopment. As this area is remote from a hospital, having a facility that allows local people to receive end of life care in the area that they are from, with their families close by is crucial.

Day care – Day care is a clear need for older members of this community and plays a vital role in helping those living remotely or isolated from friends and neighbours, to have support and company on a daily or weekly basis. The community think that we need a smaller space for day care, as it is clear that transport is a barrier to people in outlying villages attending. There is also an interest in having satellite day care available, which could be coordinated and staffed by the new hub.

Residential care – there is still a strong push from the community towards having residential care available as part of this redevelopment. We know that NHS Highland will not commit to delivering this type of care in a small rural unit and as such, will not take on the registration to do so with the Care Inspectorate. Their priority is keeping people in their own homes for as long as possible by



providing home care services. This would mean that another care provider would have to take on the registration. Further consultation and discussions are required on deciding the best way forward.

A flexible approach – By having flexible care beds, the redevelopment can provide what the community needs at the time that it is needed. Flexi beds can be available for respite care, palliative care or step up/down for emergency admissions to avoid hospital admissions. It seems that having a flexible approach would be the sensible way to approaching care delivery in a rural location where requirements may change as the population ages and either grows or declines. And by having internal spaces that are adaptable, we can modify the layout as requirements change.

Flexi-homes – A considerable number of people are in favour of having council built and owned flexible care housing units in the area, providing homes for older people who may otherwise have to move away to receive the care they need. These rentable units, which can be adapted for specific care needs, can provide a comfortable and affordable alternative to residential care.

Integrated working – A majority of the respondents agreed that having care providers working from one base and delivering integrated care can only be beneficial to all involved. However, it was argued that this could only happen if the different providers want to be based in the same hub. Regular consultation on this is required as the project progresses, as opinions and team members may change over time.

Support services and clinics – It is noted that having the dedicated space available for OT, physio, community nursing, podiatry and visiting clinics is a must for a new development, as step up/down care is supported by these services.

Base for home care and district nursing teams - As the emphasis for home care grows within the NHS, the home care and district nursing teams may grow, and having a base for them in a new hub will enable staff members to support each other, as well as the local GPs, in a more coordinated way.

Additional considerations (care) - mental health support; overnight accommodation for staff and visitors; a staff room with easier access to kitchen facilities in the village hall; more parking; reception area with separate waiting areas; and better access for flexi housing units are all suggestions put forward by the community.

Village hall – The majority of people responding to the consultation would like to see the village hall replaced on a like-for-like basis. This would mean building a new hall to accommodate a minimum of 100 people for ceilidhs and events, including a stage and kitchen area, to cater for events as well as staff and users of the care hub.

Background

Urram was formed in May 2020 out of the Dail Mhor Working Group. It is a registered charity and has been established to deliver the best possible care for the residents of Acharacle, Ardgour, Morvern, Sunart and West Ardnamurchan by working with the community, NHS Highland, and other partners.

Since early 2020, and in consultation with NHS Highland and Highland Council (the site owners) Urram have been putting together a plan for its redevelopment. NHS Highland have committed to continue to support the flexible care options Urram put forward for any future facility. Working with



an architect, the first draft of a design for a replacement care hub and new village hall was drawn up in November 2020.

This community consultation follows on from consultation undertaken by the then Dail Mhor Working Group in 2019, which aimed to get an understanding of local opinion on Dail Mhor House and its place in the community. The results of that survey helped Urram establish there was an appetite to have a general health and social care 'hub' serving the whole area and that individuals would be happy to travel to Dail Mhor. However, there was also interest in more localised care provision and lots of suggestions of additional activities. It helped establish what health and social care services were most important to each community.

The Local Area

The Peninsulas area is situated in the West Highlands. It covers the community council areas of Acharacle, Ardgour, Morvern, Sunart and West Ardnamurchan. The area's disparate population (totalling around 2100 permanent residents) is spread across 1,246km²- making it one of the least densely populated areas in Scotland. There is poor public transport and access to health and social care services are limited. Rural isolation is extreme, with some people living in very remote areas many miles from a village or bus stop.

Local demography

The National Records of Scotland (NRS) population projections for the Lochaber area show a decline of 5.6% between 2018-41, compared with a 2% increase across the whole Highland Council area. Within the overall projections, it is estimated that there will be decreases in all age groups up to 65, whilst there will be a 37% increase in 65-84 year-olds, and the number of people aged 85+ will nearly triple. It is thought that people aged 65+ will account for almost one third of the Lochaber population by 2041. In addition, the working age population in Lochaber is projected to decline by 19% during the same period.

Health and Social Care provision is particularly challenging in remote and rural areas. This is a result of the dispersed nature of the population, an older demographic compared to urban areas, and transport issues. Lack of access to personal contact and transport can be linked to low mood and mental health issues, both of which can be significant factors for older people in rural areas. Furthermore, NHS Highland faces recruitment difficulties and higher than average vacancy rate for posts outside of its Raigmore Hospital (Inverness) workforce. The recruitment challenges faced by NHS Highland are particularly acute in Lochaber.

The Belford hospital development in Fort William is at the centre of a wider NHS service redesign, in response to changing need and demand, demographic change, and technological development. As a rural general hospital, there will continue to be a high demand for services placed on the Belford hospital, including specialist facilities. What remains clear is that Lochaber will continue experiencing the increasingly complex challenges associated with an ageing population, and health inequalities. The area also has particularly high incidences of respiratory, cardiac and alcohol misuse-related illness.

Local need

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We have received some localised data on the current care needs in the area from Dail Mhor House, the NHS Care at Home team, the District Nursing Team and Care and Repair. The data received from Dail Mhor House shows how the facility has been used since January 2019, around 6 months after it re-opened as a Respite Care unit. During this period, Dail Mhor House provided 95 respite breaks for 71 clients, and was the only dedicated respite care unit in the whole of Highland region. The data received reflects the range of geographical areas from which patients were from.

Since Covid 19 forced its change from a respite unit in March 2020, the facility has been used exclusively as a step up/down unit for Belford. During this period, it has provided this type of care for 22 people, as well as end of life care for 7 people (all local residents).

Nationally, and locally, there are trends and concern for keeping people in their own homes. The concern to improve care for people in their own homes is in response to what people have said matters to them 'our aim, as so often stated in Scotland, is to emphasise supporting people to stay in their own homes and communities for as long as possible' (quote from 2021 review of adult social care). This is achieved by increasing capacity and flexibility of care at home services. Care package numbers have remained fairly steady over the past few years, but as the community ages and more people require packages, this care will not be able to be fulfilled by the existing care at home team. As such, Urram are involved in working with NHS Highland and Highland Hospice to provide an alternative and additional service to the existing NHS care at home provision, with the introduction of a Highland Hospice community initiative, called Sunflower Homecare.

Background to Survey

A survey was chosen to collect data to ensure the same data was collected across the peninsulas. It was important to ensure that the surveys were accessible to all so as well as the online versions there were paper copies available and the option to conduct the survey over the telephone or in an individual interview.

Results were received via an online Survey on Survey Monkey accessible via social media and a weblink. The social media survey went out on the Urram Facebook page, as well as the Ardnamurchan Community page, the Dail Mhor page and the Morven Community page.

The weblink was shared on the Urram webpage, all local community council webpages, and the Sunart Community Company web page. Board members were encouraged to share it with family, friends and neighbours and the link was publicised in the local newspaper, De tha Dol, as well as the Oban Times and Press and Journal.

Survey Results

173 survey responses were received online with an additional 29 received through the post. The majority of our responses were received via Survey Monkey and this data is what the graphs in this document reflect. An additional 29 responses were received in hard copy. The hard copies were then manually entered on to Survey Monkey to allow for accurate representation in the figures and graphs.

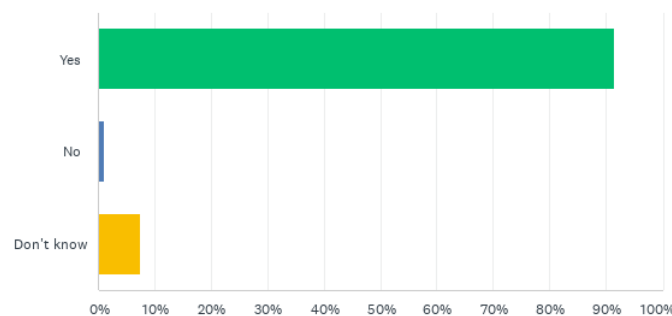


We have also included a representative number of comments after each question. It's clear that the community has a lot to say about any potential redevelopment and we want this document to fully reflect the full range of responses; both the support for the project, and also the concerns and strong opinions on what sort of care the community believes is required in the area.

We are now working with a local consultant and the NHS Health Intelligence team on how to best present all the data we have received and establish some clearer projections on specific care needs for the area for the next thirty years within this report

This report describes our initial findings from the survey, but we recognise the need to further analyse the data gathered.

Q1 Overall, are you in favour of redeveloping the Dail Mhor site in Strontian?



All 202 people completing the survey responded to this question.

By asking this question we wanted to establish the percentage of local residents who supported the idea of redevelopment so that we could then use this number to support our proposals and funding applications. 91.5% of local people are in favour of redevelopment.

Although not all comments received, supported the plans put forward, the community overwhelmingly agreed with the concept of redevelopment of the site.

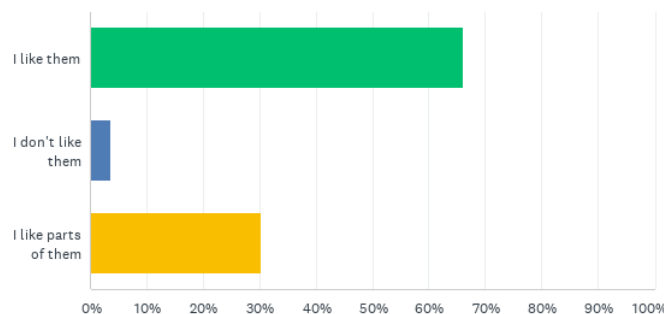
Comments received included -

- It is vital for the area and for the community to take this site on.
- We need a place for those who need care and help in their advancing years, short term or residential.
- Not ambitious enough.
- This is a valuable opportunity for the community to be actively involved in scoping and designing care provision and raising the profile and value of care delivered.
- Respite care very much needed, as well as residential long-term care.



- I agree with the overall aim to provide local respite beds & flexi care beds/homes given our ageing population & think this is a good employment opportunity.
- There must be a strong focus on an area wide strategy for supporting care needs – not just Strontian and Sunart.
- It is essential for these relatively isolated communities to have a day care or respite facility close to home.
- The site is ripe for redevelopment.
- This will bring a new heart to the village.
- I am not confident that there exists the necessary pool of skills and talent to see the development to completion and to ensure ongoing efficient and effective operation of the facilities.

Q2 What do you think of Urram's proposed redevelopment plans for the site?



A total of 198 people responded to this question. Of those who responded, 66% said that they liked the plans put forward by Urram and 30% liked part of the plans. 3.5% of respondents said that they did not like the plans.

The designs put forward by Urram were only ever a starting point and it has been heartening to see that the community has engaged with the process and wants to add their thoughts and comments. There is some cross-over in the responses to this question and question 7, where we asked about what else could be included in the redevelopment.

Some comments were very specific to service delivery and design. Although it is good to have that detail as we go forward with this process, this initial consultation has been undertaken to look at the broader needs and expectations of the community. It's clear from the responses that there are a significant number of people who care a lot about local service delivery and finding the right mix of care provision for this diverse community.

Comments included –

- The design is not what I would consider the best use of this area of ground. Respite rooms should be positioned near the other housing and the hall positioned where the old school is to reduce noise to occupants of the other housing.

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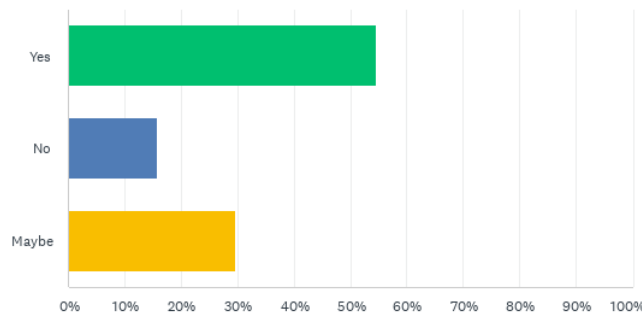
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- We feel very positive about the proposed respite suits, flexible care and fit homes but would like to see provision for permanent residential care.
- Trying to be everything for everyone - should either be a care facility rented back to the NHS to run or a village hall with community consulting space (GPs etc).
- Accepting this is a first draft and will be subject to change, it's good.
- You should be incorporating a nurse's base, ambulance base, palliative beds, sheltered housing – something like the Howard Doris centre in Lochcarron.
- The GP surgery is too small and should reflect that primary care is multidisciplinary - i.e. there needs to be room for physios, OT, counselling etc.
- Care space allocated is much too small.
- The site should have a gym facility as many long-term conditions require exercise/physical activity to maintain wellness e.g. - cardiac rehab, pulmonary rehab, impactful exercise for neurological conditions e.g. Parkinson's Disease.
- I particularly like the proposal for a care hub from which care for the whole community can be co-ordinated. It creates opportunity for a wider group of care staff to peer support and develop skills and expertise around emerging needs for the community such as dementia care.
- The provision for the primary care team is inadequate. The plans require space for the community nursing team, physiotherapy, chiropody, minor surgery or minor injury suite, no pharmacy /dispensing., no medication pick up, no accommodation for clerical staff for primary care, no Out of Hours hub.
- Day care for the whole area is not sustainable in any great numbers due to the distances involved.
- Reducing the size of the actual unit itself is a mistake. The fit (flexi) homes are a wonderful idea.
- Excellent plans and well thought out.
- I think it is important that the redeveloped plans ensure Dail Mhor remains a central community hub.
- I would like to see provision for long term care.
- Some parts will only benefit the community of Sunart but that is fine as long as the care needs of people outside Sunart are met in the overall proposal.
- Attractive, functional and in keeping with rest of village. A real asset for the communities.
- I'm concerned about the lack of residential care beds
- There is no need for a cafe there are enough in the village already and they are struggling.
- I like the mix, good to see social spaces for the community (like a village hall) maintained and supported housing.
- I would like to see a space for the Sunart Archives.
- The GP consulting room is too small and needs to have some ancillary staff support.



Q3 Do you think we have provided the right balance of care spaces and community spaces on our proposal?



196 responses to this question. 54.5% agreed and a further 30% were maybe.

We are aware that some local healthcare workers have responded to this community consultation in a professional capacity. Full consultation will, of course, be undertaken further down the line with all health and social care teams working in the area to determine exactly what is required in terms of the space and layout required for service provision, staff welfare and confidentiality.

At this stage, we simply wanted to get an idea of the sorts of services that could be provided and establishing the right balance between care provision and community provision. However, it has been noted that the GP consulting space needs to be larger, more consulting rooms are required for visiting clinics and support care services. Confidentiality must also be considered with separate waiting areas. Any GP provision must be in addition to the existing provision across the area.

A number of respondents also want the addition of residential or long-term care beds added.

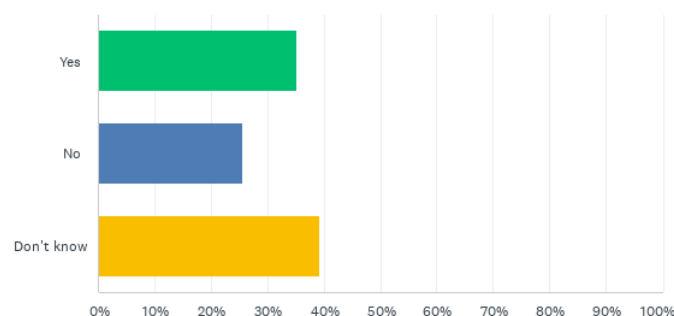
Comments included -

- Transport has to be carefully considered especially if people have to travel from other villages.
- The provision of community spaces is quite generous, especially given the proximity of the Sunart centre.
- More care space needed.
- Medical / nursing space needs more consultation with the groups involved.
- Need proper demographic data analysis for the real demand of these services in the future.
- More primary care multidisciplinary spaces and for visiting consultants, a gym facility that could be used by residents, those attending day care and members of the community.
- Requires an element of flexible, adaptable spaces to be included, so that it can accommodate changing requirements.
- The health care parts need a complete redesign.
- With the imminent retirement of the long-term GP in Lochaline, it is important that the building of a new hub does not impact on GP care provision in Morvern.
- We need long term residential beds as well as respite.



- I think it would be good to have more multi-practitioner rooms which can be booked by NHS or private specialists, e.g. for podiatry, physiotherapy, osteopathy, massage, counselling, personal fitness training etc.
- Needs to be vehicle access to all residential spaces, for shopping deliveries/unloading, emergency vehicle access etc
- It would great to see an allotment space included in the garden, as gardening can be of such high therapeutic value.
- I think it is really important space is given to the community to achieve the aim of establishing a real hub.
- I feel we should have the provision of residential care and insist that NHS agrees to provide this.
- Could do with more services and care provision for the people across the whole peninsula.
- The care space must include permanent care beds and NHS must be challenged by this by way of a public campaign.
- Care cannot happen without spaces for clinical care / storage / and visitors. All need more consideration.
- More community spaces required and a space where people can explore the area's cultural and natural heritage e.g. the Sunart Archives.
- I believe more care spaces will be required to future proof the development.
- There are community spaces already available at the Sunart centre. This development should solely regard the GP surgery and nurses base in addition to care facilities.
- More space for multidisciplinary team needed - current nursing base is not accessible for patients.

Q4 Do you consider the number of care beds adequate for the projected needs?



196 responses. 35% yes and 40% don't know.

We appreciate this question was hard to answer for many as they didn't feel they were qualified to give an educated response. From the comments received, it's clear that there is a strong feeling that localised services are required in the outlying villages and that all day care and potentially respite care should not just be available in one central location due to the long travel times and the current lack of transport available.



The 'projected needs' in the question referred to the paragraphs in the consultation document that discussed projected demographic data and NHS Scotland's 2020 ambition that "Everyone is able to live longer at home or in a homely setting." We stated that "by providing a health hub in West Lochaber, with attached flexible housing and space for respite and day care services, we hope to avoid hospital admissions and reduce lengths of stay in the new Belford Hospital. The two respite and two flexible suites in our proposal are based on discussions with NHS Highland about current and projected need within the area. Over the past year Dail Mhor has been providing respite care only. 60% of users have come in from other parts of Lochaber or other parts of Highland. As there is an expectation that the hub will provide care for people in the West Lochaber area only, it is envisaged that the provision of the flexi homes and improved day care will limit the need for a larger number of respite and flexi care beds. Clearer projections of the anticipated care needs for the future 10-30 years are being established and we are currently consulting with the NHS team on how this data can be presented.

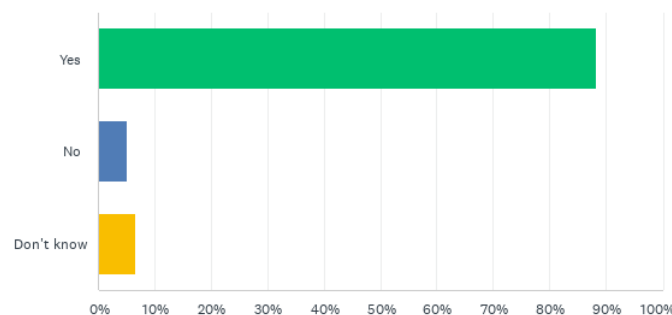
Comments included -

- Care beds particularly respite, are always in great demand.
- Need more respite suites and less fit homes.
- Care should be focused at home, as that is where the majority of people wish to be.
- Would be good to know how these have been calculated – you should use public health projection and prevalence information.
- Yes, if based on the projected need identified by NHS Highland. Important to invest now in other models of home-based care and support to reduce pressure on future care beds. As part of this investment, it is also important that provision of flexi homes is sympathetically spread across the five community council areas.
- We're living in an ageing community and the surrounding areas are the same, the amount of elderly far outweighs the amount of beds, including the fit homes.
- My understanding is that, while many residents on the peninsula like having Dail Mhor they are in fact reluctant to take up the offer of long-term beds, preferring to stay in their own homes. I suspect this may be the case with flexi homes. Most people want, where possible, to stay in their own home.
- It would be useful to see a care facility where entrances, exits, common space and load-bearing walls are planned to allow some of the bed spaces to be repurposed (office space / overnight staff accommodation / chill-out rooms / isolation unit) if necessary.
- With the flexi homes there should be less need for care beds
- Would an 'Alzheimer's village model be more appropriate?
- Who will staff the palliative care / step up down? True step up/down must have nurses, physio, OT and space for all the equipment that entails. Long term care beds missing from plan.
- Needs are always underestimated and under resourced.
- We are an ageing population, so think the need will be for more beds sooner rather than later.
- The number of flexi beds should be doubled. If palliative care can be provided, there is no reason why residential care cannot be provided.
- Right number of sheltered housing. More care beds may make the project more financially secure.



- There is a shortage Highland wide of long-term beds and respite. There is no huge demand for supported accommodation. What is really needed is flexi beds for emergency admissions to avoid hospital and/or palliative care for those who do not wish to be at home.
- Mental health facilities should be considered as there is such a lack of in our area.
- 6 respite and 4 flexi would be better.
- The care space must include permanent beds and NHS must be challenged on this if they don't want to commit to providing it.

Q5 We see real practical advantages of having all local care providers working out of one care hub. Do you agree?



This question received 196 responses with 88% in agreement.

Like Urram, the community clearly sees the benefits of all care providers being based under one roof as it will allow for better integration of services and care delivery. However, from the comments, it was clear that this could only work if the different service providers wanted to be based in the same building. This again, is something that we will consult on with all the relevant groups.

Consideration would also have to be given to the space allocated for care provision, as well as parking, as having all groups under one roof would result in a more space being required and a large number of staff using the building on a daily basis. The layout will also need to reflect the need for patient confidentiality.

Although we have suggested that care providers are centralised within this hub, this doesn't take away the need for care provision to be provided in each village. We hope that a hub and spoke model of care, with services coordinated from this hub and clinics and services delivered in each village would be a good fit for our communities.

Comments included -

- Yes, this works well and promotes integrated working and better services.
- The past year has shown one shortcoming of 'hub' type facilities – namely that services and facilities that would be available as stand-alone facilities, can have access restricted due to priority given to the primary users (thinking here of the situation with Ardnamurchan library).
- It depends on if they want to be all in together – consultation required.

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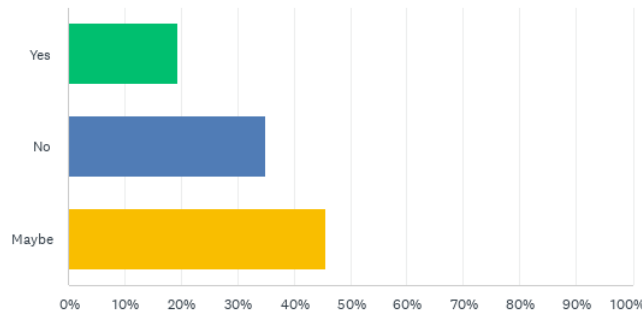
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- OT/near me/ paramedics? Whilst it would be ideal, the space needs to be considered as it would require a much larger space to host all those providers. No storage. No pharmacy.
- More car / vehicle parking required if all groups are in together.
- Confidentiality needs to be considered.
- Allows for greater continuity of care and information sharing. Enables some staff to fulfil dual roles.
- There are definite advantages to this but needs to be done in such a way that residents in other villages do not feel that care is centred in Strontian.
- It makes sense to have non-urgent care providers to operate from one site.
- Don't let this take away from having doctors or nursing staff in all of the outlying communities.
- It makes absolute sense for everyone to be working from the same hub.
- It's important to facilitate communication between different disciplines.
- Yes and no... it is a long way to travel for folk in some areas, but a hub on the peninsula would be very beneficial, better than going to Fort William.
- I'm sure there would be the demand to have regular clinics e.g. physio, podiatry etc.
- Need reliable patient transport.
- Would be great if all staff groups were happy to collaborate more closely, e.g. if podiatrist needed in care home could just ask for visit instead of having to go through lengthy referral systems. Political and economic barriers need to be addressed.
- Leadership of the model requires 100% commitment not from the community, but from NHS.
- As long as there is sufficient/satisfactory outreach of those services in the other communities. I wouldn't want to see a situation where everyone is simply 'expected' to come to Strontian for all their care needs.
- Greater socio-economic effect by centralising the care in each community. This would reduce travel and environmental impact.
- Yes and no. A hub works very well for communities where it is central and easily accessible. Strontian is not easily accessible for many due to distance. The low numbers attending day care services has been evidence to this. All providers working together has advantages but there is a big difference between working in a care home setting and a community-based care provider. There are also different set of registrations required.
- If in consultation with those providers, Doctors, nurses, Out of Hours, paramedics, but there seems limited space for provision.



Q6 Would you be interested in living in a Flexi home in the future?



195 responded. 19% yes and 46% maybe.

These numbers are higher than anticipated showing the interest in supported living spaces being built and used in the area. There was also interest expressed in having one or more flexi home available in outlying villages. Moving to a flexi home and being able to stay on the peninsulas, rather than out of the area into residential care, seems to be preferable for most.

Comments included –

- I would love to be allocated a flexi home.
- Care in own home had been well evidenced as preference. Improving services to allow this to happen is far more important. Without dedicated nursing team the complexity of the care you plan to provide in the fit houses will be limited to those who are able to stay in their own homes. The result will be non-locals living in them.
- That would depend on the quality, facilities, and the neighbours.
- My father-in-law urgently, my sister possibly. Myself eventually.
- I'd like to continue living at home independently until I die but recognise the need to be realistic. Would prefer help in my home rather than moving 40 miles away.
- My first choice, of course would be to remain in my own home, but, if going into a flexi home allowed me to stay on the peninsula near family and friends this would be far better than potentially being sent somewhere out with my area.
- I would like to know how they are to be allocated and who would pay for them. Are they private or would the council pay if necessary?
- Who knows what the future will bring, but nice if there is the choice to be able to live somewhere like this.
- Not really sure what this would entail, but I do like the idea that if I (or a family member) were to need care such as that provided at Urram, it would be available locally and in a wonderful, redeveloped setting.
- Permanent residential care needed. Essential care facilities.



Question 7 What else would you like to see as part of the redevelopment?

We asked this question to get an idea of the elements our drawings had missed. We wanted to see a wish list of what we could provide if money were no object. By having this long list, we can start to explore the ideas that are repeatedly coming up as well as others that can be easily or cheaply resourced. We had 80 responses to this question.

A number of very practical suggestions were included on the list of ideas, such as a staff room, pharmacy, treatment rooms, near me room, a sensory garden, public toilets and taking a dementia friendly approach to the overall design.

The suggestions also included some ideas we hadn't considered such as a charity shop, having a two-storey building, instead of one, and a heritage centre (specifically to house the Sunart Archive). This is an issue that has arisen over the last few years and is something that the people of Strontian are particularly keen to see established. Several people highlighted the need for a space for young people and to incorporate the redevelopment of the children's playpark, located opposite the existing Dail Mhor House building on the village green. A few suggested a swimming or hydro pool, and, again, there were a number of calls for residential beds to be included in the design.

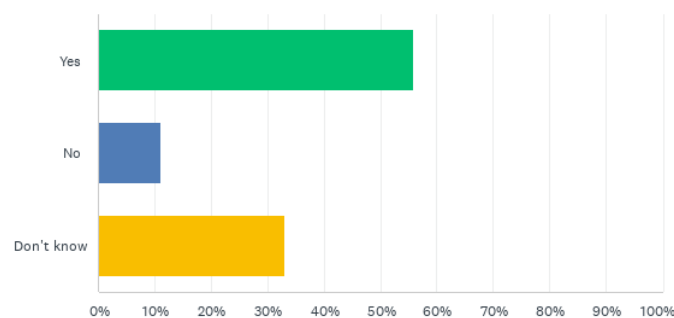
Comments included –

- Focus on a whole community approach not just older people.
- Would have preferred the flexi homes were appropriately designed for people who have mobility difficulties and fitted with technology for supported living.
- Sensory garden to support people with memory difficulties.
- Long-term care beds for residential care.
- New Play Park.
- Swimming pool.
- Games room / young people's space.
- Access to learning facilities.
- More car parking.
- Residential care being brought back. Private beds? Bringing in an income.
- More medical spaces. More care rooms. Residential care if possible.
- Near me room.
- Staff room.
- Overnight accommodation for visiting staff/family.
- Space/treatment rooms for hire or rent for complementary treatment and therapy providers, mobile hairdresser, beautician etc
- 2 story building
- Dementia friendly.
- Preschool activity space, storage facilities for community owned equipment chairs, awnings, barbecues etc
- Care hub should look to support and develop the communities' interest in and capacity for informal care e.g. befriending, shared care, intergenerational care etc
- Quiet garden / wellbeing space as provided in Hospices and some hospitals
- Pharmacy/dispensary, out of hours care, office space for primary care team as well as treatment room, capacity for physiotherapy, clinical pharmacy, podiatry, and minor surgery
- Dental chair and space for dentist even if part time/visiting monthly/weekly for a surgery



- Chapel or quiet room for confidential discussions
- Sauna, jacuzzi or hydro pool, both for residents and visitors. It can be very cold and dank here in winter, exacerbating mobility issues, particularly in older people. It can be hard to get warm enough to do physio exercises effectively.
- I definitely think access and parking issues need to be further developed.
- I would like to see a covered over the Drop Off area. In our climate driver, service user and wheelchair are all soaked before the transfer is accomplished.
- With the passing of George Fox, the Sunart Archive are in my keeping and storage. This is part of our heritage and culture and should be in display for all.
- Satellite day care. Strontian is too far for people to travel to for day care from west Ardnamurchan.
- A way of adding in some flexible space to help future proof the complex, that would be helpful.
- Try not to medicalise the approach taken to care.
- Care for adults with disabilities. Space for a charity. Redevelop the kids playpark whilst you are at it.
- A Gaelic /Cultural heritage space.
- Supported housing for younger disabled people.
- Heritage interpretation? Could also provide a nice curator/ranger/interpretive job for someone? Outdoor social space, perhaps with option to cover or partially cover, have a fire pit.
- Something for teenagers? Not sure what, maybe similar space outdoors but allowing a little perceived privacy for informal socialising and general teenage shenanigans.
- I like the hall and the cafe.
- A respite facility with flexi beds for emergency admissions with time limit and exit strategy agreed. Sheltered housing or supported living I do not believe will be used. People would rather receive care in the comfort and known surroundings of their own home.
- Good cafe. Picnic benches.
- Mental health facilities.
- Shop.

Q8 Do you think the proposed hall is adequate for the community's needs?





197 responses received. 55% think that the size of the hall is adequate for the community's need and 32% say that it may be.

This question was more relevant to people living within Sunart and the responses received show that those who don't live in Sunart did not feel qualified to comment. There is some debate as to the crossover of provision with the Sunart Centre and the necessity of having space for smaller groups to meet e.g. A parent and toddlers' group, Ewen's Room etc. There is, however, a clear want for a village hall that can host ceilidhs, parties, weddings, and larger village events as there isn't suitable space within the Sunart Centre for these.

- As large as the one that's there please.
- Not sure what size the hall is, but if it is to replace the existing and used for dances etc which can be quite rowdy and loud, the hall and access to it needs to be separate from residential areas as much as possible.
- I would want to see storage space for local groups, like indoor bowling, whist club, Scouts, lunch clubs, music society's and amdram etc.
- Possibly a separate function room and a bar
- Too small on the drawing.
- Rental would be less than High school charges or it would be out of reach for smaller groups.
- I see Strontian as geographically separate and from the other villages so can't comment.
- The hall must incorporate a stage area.
- I would have thought the hall would need to have greater capacity than 100 for ceilidhs or weddings.
- We need a separate hall from the high school.
- Think the hall should be separate from the complex.
- It could become a focal point for the wider area.
- Don't make it sports hall size. Flexible heating – must be warm enough for yoga and functions.
- Like the idea of the covered terrace.
- Too small for parties or other functions – needs to be bigger.
- Looks brilliant!
- No ugly sheds like the school or houses on School Road please.
- Robust sustainable funding proposal and real thought on how the facility will be managed and run.
- It would be great to host things like Easter and Christmas fairs in the community hall, as it can be hard for older people to get gifts.

Question 9 Do you have any concerns about the development?

In total we received 87 responses to this question. Most concerns were around keeping jobs for the existing staff; how to attract and keep staff in a new hub; mess and noise during the development; ongoing funding; the provision of long-term care beds; how a community group can make this happen; and traffic and parking.

A concern raised in response to several questions is the impact that a new care hub will have on GP provision in Morvern. As the GP is due to retire in 2022, this is obviously an issue on the minds of the Morvern community, but as any redevelopment will take several years to realise, this issue will be addressed by NHS Highland before any building takes place.



Comments included -

- Phased redevelopment essential to retain jobs.
- It will be great to see something new in this space.
- Mess. Noise.
- Getting people to staff it.
- Traffic.
- It needs more parking
- We don't want to be without a Doc in Lochaline it could be very difficult for our ageing community.
- Whatever redevelopment model is finally agreed on, needs to be based on a sustainable business model with ongoing investment and support for staffing.
- I do worry about where the residents and staff will be put whilst this is being built..... they had enough upheaval when Dail Mhor was shut, so only fair that they're taken into consideration.
- Huge concerns that we will lose our doctor in Morvern, this is a major worry with so many vulnerable people who would not have the means to go to a doctor in Strontian.
- I'm concerned that it will become the focus for the whole peninsula to the detriment of the further flung villages (although appreciate that this is a big improvement from a Fort William base).
- Impact on immediate neighbours.
- Access & parking issues are a concern.
- I am also concerned about the difficulty of attracting staff given the challenges the school & NHS already face with current vacancies.
- The whole area needs to be secure for dementia sufferers. Care at Home is always going to be difficult in this area of retirees with no local family and many people who say they don't want residential care change their minds in their final years.
- My concern is that it won't be adequately supported by Highland Council and NHS Scotland, either now or in the future!
- Mess. Impact in village while the work is being done.
- No need for another cafe in a small village. Need to safeguard the jobs already here.
- The houses nearby will be ever closer to the home meaning less privacy on both parts.
- How much noise will there be for the existing residents at Dail Mhor.
- Confidentially- this seems to have not been considered and is fundamental.
- Noise from hall events inside or outside for elderly frail and potentially those in palliative care.
- This is trying to be too many things to too many people.
- Long term care beds are seriously lacking in the area and this is an opportunity to re-dress the balance.
- Big issue is how to avoid losing care jobs on the peninsula whilst building the new build. Can it be done in phases.
- This is unambitious and short sighted. There is no information on impact potential regarding housing and population retention and the sustainability effect on all each area.
- As a local who lives next door to Dail Mhor I am not happy about how close these buildings and other things like the "orchard" is to my home.
- You appear to think that the GP surgery will fit into a cupboard space. It won't.



- Vulnerable people will choose to live at home and the focus should be on flexi beds where GPs can admit someone for assessment/ trial of medication etc to prevent admission to hospital.
- Respite facilities should be available to the whole of Lochaber to make it viable. I think it needs to be explained that respite is to give a regular carer a break from the caring role, it is assessed for and it is a chargeable service - it is not free.
- Concentrate on a small unit with a few beds, respite/flexi and a surgery. Spend what is left on providing support at home in local villages so people don't have to travel.
- Significant Community funds needed - without quality leadership.
- We will need lots of safe parking and spaces for public visiting.
- How can you keep care jobs in the site whilst building a new care hub and knocking down the home?

Question 10 Aesthetically, what else do we need to consider?

There was a total of 75 responses to this question.

It is useful for us to know, before the design phase, what look and style is important to the community who will be living with the redevelopment in its midst. Overwhelmingly, the community wants an environmentally friendly building, and for the design to consider water harvesting, solar panels and wood chip or other energy efficient heating alternatives. Aesthetically, a number of people requested that the build did not look like a wooden box, similar to the recent community school built in Strontian, although a similar approach would be desirable in terms of having internal spaces that are adaptable to change.

A number of people suggested a more modern approach to the design, and the inclusion of glass and wood, and for the redevelopment to include a sensory garden or outside well-being space. Ongoing site maintenance will also need to be considered.

Comments included -

- I am not in favour of having all wooden buildings that look like barns. Something like the local High School would look nice, bright and cheerful and would not look too different from the other local housing.
- Sustainability and the ongoing concern for future generations.
- Lots of glass please.
- Environmentally friendly please.
- You really need to consider privacy. If you were at the end of life, would you like to hear strangers having a party in the hall looking directly in your 'home' window?
- Connecting the hub to the shop - new path? Re-orientation of the carpark?
- Development needs to work within Scottish guidelines for low energy and carbon neutral plans.
- A better site/location.
- When this has been identified, then heat pump heating and solar PV can be included.
- The buildings must be of good quality and suited to the high rainfall of the area.
- Visual impact, renewable power, thermally efficient build, efficient drainage
- Integrate the development so the children's play park and village green can be seen from the community hall, cafe etc
- Maintenance of site.



- Careful consideration to the right planting of trees, shrubs, flower borders.
- Not 'boxes'. Some imagination and style required.
- How will the views from nearby hillsides, e.g. Fairies road path, be affected?
- The balance of access/openness/security for both homes and services
- Glass. Modern.
- Wind turbine.
- Chicken run, greenhouse/ garden plots. Many residents kept animals or lived on crofts and would be both stimulated by and enjoy this type of activity.
- The use of natural building products in keeping with existing environment.
- Rainwater harvesting is a must, as is as much roof space as possible for solar energy.
- Internal spaces should be adaptable if possible so that a respite care suite can easily be converted to full medical care suite if it becomes needed. GP surgery should be alongside a space to be used by visiting services in such a way that the space can become one larger space if needed.
- The development should provide comfortable accommodation in the best surroundings available with in house facilities to promote physical and mental health. Sensory hydrotherapy, gym, library.
- Perhaps an upgrade to the 'village green' and children's play area as well?
- Build for longevity.
- Look for an aesthetic model that will enhance the village centre. Natural materials where possible. Aspirational feel. An exciting work and play space.
- I like the courtyard type approach and the change of orientation.
- Not all services should be in the same hub.
- A low energy/sustainable building- with an eco-footprint
- Waste - especially medical waste.
- A sensory garden could be a good idea.
- Local labour used. Project management done locally. Accountability in use of public / grant funding.

Question 11 Practically, what else do we need to consider?

We received a total of 61 responses to this question. There were some crossover between the answer to this and question 9, which asked about concerns.

In addition to the issues already noted as concerns, several people highlighted the need for us to consult and consider neighbours as part of the redevelopment process. Urram will, of course, consult with neighbours prior to any design being agreed.

Community transport has also been a recurring theme in responses and looking at how the provision of this can play a part in bringing patients to the hub and the delivery of services in outlying communities.

Comments included -

- Careful consideration of what is required in other communities especially where frail people cannot travel far.



- We believe strongly that the aging population in our communities are undoubtedly in need of a provision for local, long-term care. It would be helpful to continue to push for adequate care.
- Money.
- Parking.
- Neighbours.
- Can you do this? Urram is just a community group.
- Staff.
- Traffic in village
- I think the respite beds etc should be in a quieter location - at the moment there appears to be traffic both front & rear.
- The adjacent council houses need to be replaced as they were built at the same time the home was built.
- Proper data analysis of need, current and future.
- Integrating with other facilities, e.g. the Men's Shed location, Community Greenhouse, orchard, etc
- It is likely that we'll experience future pandemics which impact on the delivery of face-to-face care and support services. Technology for communicating with patients should be considered.
- Ensure proper involvement with NHS Highland to ensure this opportunity for a real health care hub is achieved.
- Providing small day care units in the other villages.
- Financial support.
- Community transport.
- Have you factored in having a large safe for residents to use, especially those with deteriorating mental faculties?
- Attracting and maintaining an adequate workforce.
- How do you ensure respite beds/flexi homes are utilised by local residents rather than being filled by people from further afield - assuming there will not always be 100% demand locally. What criteria will be used for selecting residents?
- How will long term funding be maintained?
- Vehicular access to the Fit Homes is not marked. If there should be a rowdy function in the hall will the residents and staff be protected?
- Revenue funding important to maintain services.
- Improved footpaths to post office/hotel, can't push a wheelchair down there.
- Internet/ phone signals- bit of a black spot at this location.
- Crossover with Sunart centre activities and facilities.
- Maintenance plan and funding for outdoor spaces.
- As Government and NHS push for more care at home, there will be increased need for respite services, and that won't just be for a week or two, it should also be offered for a 24 hour period once a week or fortnight. What other changes in national care management will have an impact on what services the hub will need to provide? This design seems to address what might be considered to be our current need but does not look at what will be needed in 5, 10, or 20 years time.
- Keep public informed.
- Cost of hiring hall/spaces to make it accessible and affordable so able to be fully utilised.
- Vehicle access to FIT homes and parking including covered charging point for mobility scooters.



- The hub is too complex, too small, and does not provide the correct facilities for modern social care.
- This is a facility for all the communities however practically any day services are not going to be accessed regular by many outside of Strontian due to transport issues and distance.
- Could there not be something provided in each village in terms of day services rather than people having to travel so far?

Question 12 Are you interested in being involved in the redevelopment of the Dail Mhor site, or helping to plan improved care for our communities by becoming a Director of Urram?

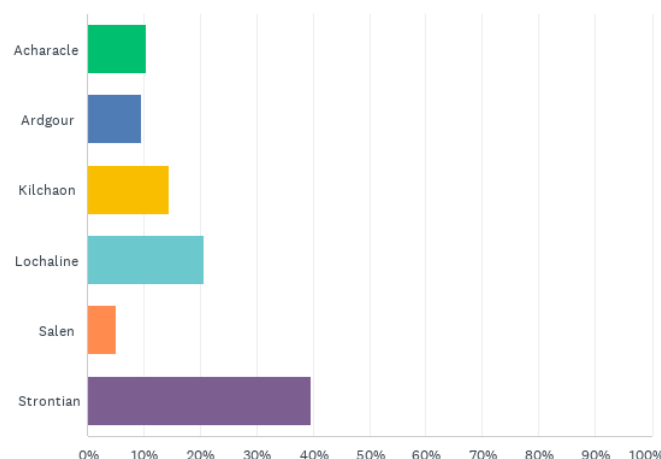
176 responses
13% yes and the rest no.

We included this question to get an idea of the number of people in the community who might join the Urram board or be involved in taking the project forward. The current board are aware that this project will take several years to complete and as such, it's good for us to identify at this point, who could become potential board members in the future. Names and contacts have been noted.

Question 13 What is your closest village?

We received a total of 199 responses to this question. The percentages shown below, reflect the total number of responses received.

Q13 To help us gauge community responses, what is your nearest village?





Acharacle – 10.55%
Ardgour – 9.5%
Kilchoan – 14.57%
Lochaline – 20.6%
Salen – 5.03%
Strontian – 39.70%

Not surprisingly, the majority of respondents to this consultation were Strontian or Sunart based. The redevelopment of Dail Mhor obviously has the biggest impact on this community, particularly as it includes a new village hall for the area. As such, some respondents did not answer the questions that specifically related to the build of the new hall or to the questions about aesthetic requirements.

Conclusion (and next steps?)

From this and the previous consultation process undertaken, we can see that there is a strong local support for the redevelopment of the Dail Mhor site in Strontian and the building of a new health and community to serve the communities of Ardgour, Acharacle, Morvern, Sunart and West Ardnamurchan.

The responses received from the community show that Urram clearly need to adjust the initial concept plans, but these drawings were only ever produced as a catalyst for discussion, and we anticipated they would change and evolve as the project progresses and further consultation is undertaken. However, this initial consultation has shown us that we are moving in the right direction and broadly, the community are in support of flexible care provision delivered from a hub with the potential for satellite care and support delivered in each outlying village.

Being able to demonstrate care needs for the area is key to our ability to attract funding and support, and we await the results of the analysis being undertaken by our consultant and the input of the NHS Health Intelligence team.

By redeveloping the site, new jobs will be created during the demolition and construction phases and further jobs when the finished hub opens. This will have an improved socio-economic impact on Strontian and the surrounding area and should attract working aged people to settle in the area. Attracting and retaining staff will be crucial to the long-term success of the hub.

Any redevelopment of the Dail Mhor site will be a long process, but we hope that this can be done in a phased manner to retain the current Dail Mhor House care staff and to protect service provision in the area.

The strength and determination of Urram and the dedication and support of the five local community council areas will be crucial to the success of this project, and we are heartened to see that the majority of the local community are onboard with redevelopment and want to make things better for the remote areas in which we all live. We have had offers to join the board, from people with suitable skills and experience, and offers from others to act in an advisory capacity when planning care. Other rural communities have given us a model – and by working together, and working in partnership with statutory partners, we will make this happen.