DESIGN AND ACCESS STATEMENT IN RELATION TO

PROPOSED CHANGE OF USE FROM
DWELLING TO COMMUNITY SUPPORT FACILITY,
85 OSBORNE STREET,
ROCHDALE.

Prepared by.

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176 Drake Street,
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Ref; A307
27-4-2022

Contents;

1) INTRODUCTION.

2) BUILDING DESIGN.

3) ACCESS PHILOSOPHY AND APPROACH.

4) CONCLUSION.

Appendix 1 – Applicant statement.

Appendix 2 – Additional information requested at pre-registration.

INTRODUCTION.

The project comprises the refurbishment of an existing residential property to provide premises for education, training, support counselling and social support for the local community. A full appraisal of the services to be provided and the benefits to the local community are outlined in the applicant's statement included as Appendix 1. The property sits within an area of residential properties facing an area of open space which is underutilised but would be an asset for the proposed use of the property. The property is accessed directly from Osborne Street.

BUILDING DESIGN.

The existing building comprises a traditionally built terraced property with brick external walls and a slate roof. The main access to the building is from Osborne Street with one step into the building at the entrance threshold. Access is also available from the rear alleyway via a stepped approach to the existing yard and a single step into the premises.

The proposal is to carry out general refurbishment works to the property and alterations to provide the required accommodation which is indicated on the submitted plans. New double glazed upvc windows are to be fitted into existing openings which reflect the nature of surrounding properties.

ACCESS PHILOSOPHY AND APPROACH.

The proposal involves the retention of the existing principal and secondary entrances and due to the configuration of the property it is not possible to provide a ramped access to comply with current building regulations to the principal or secondary entrances. It is therefore proposed that the existing stepped arrangements are retained.

These premises are being converted for the use of our client who is the sole owner/employee of the business. If there are requirements to take on additional staff in the future as the business expands then any special requirements will be implemented at ground floor level to enable the special needs of any employee to be catered for and to address any issues of potential discrimination in the workplace.

Regarding the specialist facilities offered by our client it is appropriate in cases where wheelchair customers might be unable to gain access to the premises that home visits can be arranged, and the range of services offered at the premises provided at the customer's home.

CONCLUSION

Due to the specific nature of the project being refurbishment and alterations of an existing building, with limited means to provide fully compliant ramped access, we propose in this instance to retain access to the building via existing approaches. Services offered at the premises can be provided by home visits for customers who might not be able to gain access to the premises. Where new electrical services are provided all switches, sockets etc. are to be positioned between 400mm and 1200mm from finished floor level.

APPENDIX 1

Awakening Minds Practice CIC

Non-Profit Community Interest Company
Registration No: 12241163
MHFA England: 181903580

Head Office: 224 Ashfield Road, Rochdale, OL11 1QS
Mobile: 0786 6047 642
Email: awakeningmindscic@gmail.com

Home Office: 81 Osborne Street, Rochdale, OL11 1QU

Website: www.awakening-minds.org
Instagram: @ awakeningmindscic

Bank: **Lloyds**
Account Name : **Awakening Minds**
Sort Code: **30 90 89**
Account Number: **39933268**

About Us

Founded in 2016, Awakening Minds Practice is a specialist South Asian specific Punjabi service providing Ad Hoc community based Mental Health informal and formal, education, training, and specialised tailored support. A social movement Initiated by the community for the community. A non-profit based in the heart of Rochdale. Dedicated to providing opportunities for development and growth by improving the emotional, physical, and spiritual wellbeing of marginalised and isolated communities.

Our Mission

Normalise conversations associated around mental health in BAME communities, ensure that no one suffers with mental health issues alone.

Our Vision

Through Arts, education and play we empower individuals to recognise their self-worth and net worth. Campaign to improve community based social support, raise awareness, and promote understanding.

Our Values

- Open – We reach out to anyone who needs us.
- Together – We are stronger in partnerships.
- Responsive – We listen, we act.
- Independent – We speak out fearlessly.
- **Unstoppable – We never give up.**

What We Do

Befriending & Crisis Support
Community Based Trauma Informed care (TIC)
Covid relief/Recovery Support
Digital Support & Food Provision
Grounding Techniques
Live Life To The Full (LLTTF) TtT & Licenced
Behaviour Specialist Coach (Kresser Institution Licenced)
Mental Health Awareness Half Day Course (MHFA England Licenced)
Mental Health First Aid Course (MHFA England Licenced)
Mental Health Healing/Talking Circle
Suicide Prevention & Early Intervention Training & Support

2019-2020 Supported 352 Individuals
2020-2021 Supported 1882 Individuals
2021-2022 Supported 2398 Individuals & Families



Background and Case for support:

Awakening Minds Practice CIC provides a wide range of community-based mental health and wellbeing services to individuals and families, including educating and supporting them with their mental health issues. Based in Rochdale, the culturally sensitive and appropriate mental health services we offer have a particular focus on Punjabi and South Asian communities. 97% of our beneficiaries are from ethnic minority communities.

Awakening Minds Community Interest Company was formally established in 2016, when the founder director Nasrine, realised the urgent and pressing extent of mental health support needs arising in the local south Asian community. There was extensive ignorance and stigma attached to mental health issues within the community. Local experiences were compounded by her son, then just 18 years old, attempting to take his own life. As Nasrine explains:

"This incident took me on an emotional and physical journey of self-recognition. I became aware of my ignorance of mental illness; my intellect, academic knowledge, and life experiences did not and could not help.

As a Muslim, I turned to my local faith leaders and family, only to be told that Amir is unwell because of my sins, because my faith wasn't strong enough. I believed them. I begged and prayed for assistance and direction. Meanwhile, my son became critically unwell and was transferred to a specialist intensive care unit in London.

Day after day I studied, educating myself, and consciously applied my learning. Amir finally stabilised and is now under the community care team at home. Sheer comprehension of my journey highlighted that it was not Amir who changed – it was me. Amir wasn't broken and now fixed; I was ignorant, I was not accepting, I was not observing, and I simply did not have the tools and knowledge to recognise the signs that were present.

As a result, I trained to become a Mental Health First Aider and Tutor. I self-funded a mental health walk-in office and I am the founder of Awakening Minds Practice CIC. Sharing my story gave courage to others to confide in me and empowered them to vocalise their suffering. The dishonour, humiliation, and intolerance are the fundamental barrier igniting this debilitating condition. We need to educate ourselves, and to achieve this we need to deliver resources in languages that people understand. We need to recognise cultural and religious sensitivity."

Awakening Minds CIC has grown to become a team of South Asian women, all of who have 'lived experiences' of mental illness themselves or with one of their family members. The CIC offers a non-judgemental ear to listen whenever someone needs it. It offers them a safe space to be honest about the shame, fear, and stigma that is associated with mental ill-health in the South Asian community. Services also reach other members of the community, especially Black African and those with Bengali heritage. As a grassroots community organisation trust and rapport with very vulnerable member of the community has now been firmly established

Local evidence of need

In 2019, the Rochdale Borough was ranked as the 15th most deprived borough in England (Rochdale Borough Council Indices of Deprivation Briefing). Rochdale is also ranked second lowest in Greater Manchester in terms of gross household income by local authority (2016). Evidence points to a positive association between household income and mental health; children and adults living in households in the lowest 20% income bracket in the UK are two to three times more likely to develop mental health problems than those in the highest (Fair Society, Healthy Lives).

Additionally, ethnic minority communities in the UK continue to experience health inequality. Ethnic minorities experience mental health at a higher prevalence than White people. This may be attributed to inequalities in wealth and living standards, bias and discrimination, and cultural stigma that lead to a reluctance to access healthcare. When ethnic minorities try to access mental healthcare, they may be prevented by barriers such as communication barriers when an individual lacks English proficiency, healthcare staff's lack of cultural competence to treat issues in a culturally sensitive manner, and racial discrimination from within the healthcare system (Mental Health Inequalities Facing UK Minority Ethnic Populations).

Looking locally, according to Public Health England, the rate for self-harm hospital admission in Rochdale is 229 per 100,000 people, worse than the England average. This represents around 505 admissions a year.

All of the above evidence points to the necessity of Awakening Minds service in Rochdale. As Nasrine adds: *"As far as we are aware, we are the only mental health service provider in Greater Manchester that specialises in treating and supporting the Punjabi community in particular."*

Awakening Minds Impact:

In the past year, the COVID-19 pandemic has both created and exacerbated pre-existing mental issues. The CIC has been proactive in the community, supporting over 300 families with emergency COVID relief in the form of financial, emotional, and physical support. This includes providing food and digital tools for those in need.

Additionally, the CIC has been running a weekly youth group, made up of 36 Asian women; and provided a weekly 'Safe Space' for adult Asian women where they are free to share their concerns and receive peer support.

In addition, the CIC boosted our capacity for mental health support by training:

- 76 Trained as Bilingual Mental Health First Aiders
- 89 Mental health Awareness Trained
- 56 Suicide Awareness Trained

Outlining of what the property will be used for:

The property will be used to provide informal and formal education, training, support, and services to our local residents.

Due to the exceptional increase in demand, demonstrated during the pandemic, we're aiming to relocate our head office, formally based at 224 Ashfield Road Rochdale. By way of proposing to relocate to 85 Osborne Street, where we will continue our existing provisions, and expand our offer to include, a local digital hub and offer occasional respite.

We aim to continue developing and providing our services, which range from,
suicide prevention & early intervention, CBT training, counselling, food provision and social support. Furthermore, we aim to expand our offer, by way of providing a local community digital hub, where local residents will be able to access, one to one tailored support, through training and education, free access to digital tools, and free Wi-Fi.

Key Purpose:

Provide, doorstep, and easily accessible, meaningful, and tailored support for individuals and families within the local community. The project will equip and empower the local community to better support one another especially those individuals struggling with poor mental health and wellbeing, those struggling with suicidal thoughts and families living in poverty within Rochdale.

Our project has three key delivery strands which are:

1. One to one and crisis support for members of the community struggling with poor mental health and suicidal thoughts.
2. Welfare service focussed on individuals and families in the local community grappling with poverty.
3. Offering our bilingual befriending service to more individuals in the community.
4. Food provision and delivery for those struggling with food poverty, homelessness, and mental ill-health.

This premises will allow us to expand our work with individuals and families. It will increase our organisational capacity to continue to a non-judgemental ear to listen whenever someone needs it. We support individuals struggling with poor mental health and genuinely considering suicide. Our project beneficiaries need culturally relevant support, provision, and respite.

Potential benefits of the community hub - Respite & Early Intervention

Local community hub will provide easy access and help support members of the local community. 'Doorstep Access'

- How to be more independent (people don't want to be dependent on services).
- Help to change views of accessing services, and provide a range of other types of support
- It is being able to ask for help and understanding that there are services out there
- Joining up with others has reduced anxiety, and the feeling of being more connected.
- Building confidence, talking through issues with others, expressing the problems honestly, and meeting new people through community projects.
- Knowing there is help out there, I am not alone and not ashamed to ask for help.

Outcome 1: Removal of Barriers - Provide immediate and meaningful crisis support to those experiencing poor mental health and struggling with suicidal ideation. This will involve taking in person and crisis calls day and night with families and individuals dealing with potential suicides and supporting families in crisis. We will offer timely and suitably trained workers to provide crisis support at the time when families and individuals most need it.

Outcome 2: Overcoming Barriers - Support our service users to overcome the immediate barriers in their lives which are the significant contributing factor to their poor mental health and suicidal thoughts. This will consist of weekly online and in person befriending focussed towards supporting individuals with poor mental health and in crisis situations to feel connected to others and generate a great sense of belonging, this 'community hub' will equip the beneficiaries to overcome their barriers in relation to their mental health, financial and digital poverty.

Outcomes 3: Remain Clear of Barriers – Equip and empower our community to become more resilient and better equipped with skills to remain clear of poor mental health and suicide. We provide training (Level 2 & 3) Mental Health First Aid, Suicide Awareness, Live Life To the Full (LLTTF), and a range of Positive psychology models in combination with a range of, proven CBT based tools and strategies. This service is delivered by way of activities to support our service users not only to overcome their own mental health issues but equip them to be more aware and with tools to support others in similar situations.

Our fundamental mission of, is to normalise conversation associated to mental illness, particularly within my own Muslim, Punjabi communities.

Relocation to these premisses will allow us to create a 'safe' space', where no appointments are necessary, no words are needed, and no judgment is taken.

What we do is not 'hard work' it is in fact 'HEART work'...

Proposed opening hours:

Mon - Friday 9.30am – 5.30pm
Saturday 10.00am – 5.30pm
Sunday 10.30 – 4pm

Staff - Volunteers

1 permanent full time Staff
3 part time permanent Volunteers
7 part time rotating volunteers

In total we could have a maximum of 11 staff in any given time

Some of our supporters





APPENDIX 2

Food provision outlined in the supporting statement.

We do not aim to cook and serve food on the premises,

Anyone who attends the premises will be offered light refreshments, such as tea coffee, biscuits, and possibly a sandwich.

We would in the future like to offer, a 'Bring a Dish' day, allowing local residents to bring a dish and share a meal together. (nothing will be cooked on the premises)

We are also, one of the collaborating partners of 'Army of Kindness' which is a weekly soup kitchen, that offers, pre-packed 'hot meals' for collections, these premises would be used as a collection point only for eligible residents to collect their hot meals locally. (Saves delivery costs and volunteer expenses)

Likely numbers of building users and purpose of respite provision.

We are expecting 1-12 visitors per week. Aim to hold regular, pre-planned, and pre-booked weekly workshops, with a maximum of 12 participants at any one time.

Respite provision is a new concept we would like to pilot within our community. Focusing on the importance of sleep.

By way of offering, adults aged between 18- 70 years, a quiet room, away from home, a safe space, to, sleep, rest repair, and recuperate. The provision will only be offered for one night or one day, to any adult in need. This will be offered as part of the prevention and early intervention strategy for serious mental illness within our local communities.