

RETIREMENT HOMES IN INDIA

A STUDY FOR HOUSING DEVELOPMENT FINANCE CORP LTD



BY



**MONEYLIFE
FOUNDATION**
THE RIGHT THING TO DO

PREPARED BY: SUCHETA DALAL & DEBASHIS BASU
TRUSTEES, MONEYLIFE FOUNDATION

RESEARCHED BY: NAMRATA PATEL

CONTRIBUTIONS BY: DIPENDRA CHAKRABARTY, YOGESH SAPKALE,
TANVI SHETTY, RIA NISAR



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1. RESEARCH OBJECTIVE:

The objective of the research would be seek answers to the following:

- Is there a need and demand for retirement homes or retirement communities / retirement townships to cater to a growing and relatively affluent middle-class population?
- What kind of financing model would work and the pros and cons of each?
- What are the viability issues and problems with Retirement Homes where inflation is high and retirees have static or deprecating savings invested in fixed income products where real interest rates are negative.
- What is the appropriate regulation that needs to be put in place by the Ministry of Social Justice, which is currently examining the issue in response to a case filed in the Madras High Court?
- Does the government have any role in ensuring a safe and secure retirement for seniors, considering that this is a group of people who have probably paid taxes for several decades.

2. RESEARCH DESIGN

The research designed involved:

1. Multiple surveys of Retirement townships/projects in existence, their experience and payment plans and delivery of promised amenities
2. Collate the experience of those who have opted for living in a retirement home and challenges faced by them.
3. Examine global models of business structures and regulation and whether they can be adopted for the Indian market

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3. RESEARCH METHODOLOGY

1. Information on at least 20-25 projects across different geographical locations. Emphasis on Mumbai, Bangalore and Coimbatore (which is a hub for Retirement Homes).
2. Quick interviews of those who have lived in retirement homes, to get feedback of their experience: 20 interviews (these may be on email)
3. Survey among those who have looked at Retirement Homes as an option and what swayed their decision for or against opting for it.
4. At least 5 interviews with Retirement home providers on issues they face, especially inflation, maintenance of standards over the years, while keeping costs in check. Ability of people to pay higher charges over the long run and issues with regard to government permissions etc.
5. A round table discussion with activists working with senior citizens to get final feedback on our findings.

To meet the needs of the above methodology, the actual research process involved:

- Visit to Pyramid Complex, Vanaprastha and Dhyanaprastha retirement homes in Coimbatore and interacting with the residents of these as well as other similar homes in the region.
- Visit to Athashri retirement home in Pune
- Visit to six retirement homes (Rukmini, Jagriti Dham, Godhuli, Mahadevi Birla Niketan, Peace Senior Living and Aumorto) in Kolkata
- Online Survey of 340 senior citizens and relatives of senior citizens either living in or knowledgeable of retirement homes.
- Interviews of those who have either personally lived in retirement homes or have family living in retirement homes as well as leading consumer activists.
- Interviews with industry experts and promoters of retirement homes.
- Exploration of global models of structure and regulation for retirement townships

List of people interviewed:

Retirement Homes

1. Mr Vijay Sood, Jagriti Dham retirement home, Kolkata
2. Mr Tanaji Patel, Radhakishan Rukmani Devi Poddar Charitable Trust, Rukmini Amar Angan
3. Mr Kaushik Sengupta, Godhuli senior citizens home, Kolkata
4. Atasi Banerjee, Peace Senior Living, Kolkata
5. Brijesh Kumar Yadav, Mahadevi Birla Niketan, Kolkata
6. Banhishikha Pal, Aumorto, Kolkata

Residents

7. Retd. Col. Thatte, Resident, Athashri, Pune
8. Dhanajay Date, whose mother lived in Athashri, Pune
9. Yogini Ravat, who lived for six months in Athashri, Pune
10. Mr S Krishnamurthy, Resident, Dhyanaprastha retirement home, Coimbatore
11. Mr Narayan Raman, Resident, Vanaprastha retirement home, Coimbatore
12. Mr Venkateswar, Resident, Vanaprastha retirement home, Coimbatore
13. Mr PS Ramachandran, Resident, Nana Nani retirement home, Coimbatore
14. R. Sivakami, Vanaprastha retirement home, Coimbatore
15. MR S Krishnan, Pyramid Complex, Coimbatore
16. Mr H Ramachandran, Shenbagham retirement home, Coimbatore
17. Mr P N Venkateshwar, Vanaprastha retirement home, Coimbatore
18. Mr V Ramachandran, Dhyanaprastha retirement home, Coimbatore
19. Mr Jairam Ramnath, Shenbagham retirement home, Coimbatore
20. Mr G Vaidyanathan, Dhyanaprastha retirement home, Coimbatore
21. Mr K Rajaraman, Pyramid Complex retirement home, Coimbatore
22. Mrs Pramila R, Dhyanaprastha retirement home, Coimbatore
23. Mr S A Eswaran, Nana Nani retirement home, Coimbatore
24. Mr R B Seetharaman, Vanaprastha retirement home, Coimbatore

25. Mr KV Krishnamurthy, Dhyanaprastha retirement home, Coimbatore
26. Mr C Sachidev Kumar, Tapovan senior citizens foundation, Coimbatore
27. Mr NP Iyer, Tapovan senior citizens foundation, Coimbatore
28. Mr CV Parameswaram, Tapovan senior citizens foundation, Coimbatore
29. Mrs Anandi Krishnamurthy, daughter of a resident of Dhyanaprastha, Coimbatore
30. Mr A Ramakrishna, Soundaryam retirement home, Coimbatore

Consumer Activists

31. Mr AV Shenoy, Consumer Activist
32. Mr Mohan Siroya, Chairperson of Consumer complaints cell and resident of Ashiana retirement home, Bhiwadi, Rajasthan
33. Mr Ashok Ravat, Past chairman of the Mumbai Grahak Panchayat

Industry Experts

34. Mr Pranay Vakil, Praron Consultancy
35. Mr Shubhranshu Pani, Jones Lang LaSalle India
36. Mr Sailesh Mishra, Founder of Silver Innings retirement home
37. Mr Pankaj Kapoor, Liasis Foras

Report was refereed by:


Mr Walter Viera : Well known marketing consultant

Mr Srinivas Hebbar: Senior journalist

4. EXPECTED RESEARCH OUTPUT

The retirement homes study aimed to come up with the following:

1. Demand drivers for retirement homes or retirement townships to cater to a growing and affluent middle-class population.
2. Supply of retirement homes and townships.
3. Examination of current Financial Models and what is desirable
4. Appropriate regulatory structure for Indian retirement homes
5. Role of government in making retirement homes safer
6. Recommended steps to make retirement homes more affordable and popular



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5. SUMMARY OF FINDINGS

- According to Census 2011, India's elderly population has increased from 5.6% in 1961 to 8.6% (104 million) in 2011. This is expected to grow to 173 million by 2025 and to 240 million by 2050.
- Seniors who chose independent living are from an affluent or upper-middle class backgrounds where they have high savings and can focus on the quality of life they will lead from there on.
- There is a strong demand for retirement homes; even a place like Kolkata has four functioning, one almost ready to accept residents and one under construction.
- The best financial model is ownership + deposit (for lifetime maintenance) model. The residents and immediate families feel secure with ownership while the income from deposit allows the service provider to meet the maintenance costs. The problem with this model is that deposit must be large enough to pay for lifetime maintenance. Paranjape Builders in Pune runs one of the most successful models of retirement homes under the brand name Athashri.
- To tap the rising demand, retirement homes need to be managed well. Retirement homes are not apartments and buildings; they are a service. Unless the service provider has strong empathy for seniors, the idea of retirement homes won't spread.
- One of the main challenges in running retirement homes is the lack of trained manpower. The staff must be patient, attentive and sympathetic apart from being skilled in their work.
- Kerala, Maharashtra and Tamil Nadu have the highest percentage of senior population. Pune, Coimbatore, Bengaluru have led the development of retirement homes.
- According to Moneylife's online survey findings, 87.5% of the respondents were aware that the maintenance charges collected by the retirement homes could increase but 71.5% had no contingency plan in case they could not afford the increase.
- A disturbing finding was that 64.9% of the respondents had not signed a contractual agreement that clearly outlines the terms of service and their rights.

- A surprising 72.8% of the respondents said that there was no residents council, that would give them some say in the running of the homes.
- A regulatory framework, that ensures some standard features, is required to protect the interest of residents. Two of the best pieces of legislations are Ontario Retirement Homes Act in 2010 and Singapore Homes For the Aged Act for independent living and Care Quality Commission, UK for assisted living.

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6. SUMMARY OF RECOMMENDATIONS

1. Realty is a state subject, however the process of granting clearances to set up retirement homes and townships needs to come under national regulatory guidelines. We need two separate sets of guidelines for independent living and assisted living. The regulator's remit may include:
 - Ensuring that customers get the fundamental standards laid down.
 - Monitoring, inspecting and regulating services to make sure that they meet the standards.
 - Protecting the rights of vulnerable people.
 - Involving the public, service providers, customers and local groups.
 - Taking appropriate action if services are failing to meet fundamental standards.
 - Carrying out in-depth inspections.
 - Publishing information, including performance ratings to help people choose wisely.
 - Ensure that residents given a chance to examine the accounts and provided with details of the expenses incurred for maintenance and services.
2. The guidelines should ensure that every retirement home and its management agency is required to file details of its agreements, amenities, terms and conditions of service, licenses, sanctions, permissions are uploaded on a statutory searchable website.
3. The promoter/ developer of a retirement home must sign an agreement with the residents to ensure that services like nutritious meals, 24x7 security, well equipped medical centre, comprehensive insurance, record maintenance, employee screening and policy for transfer are provided by them.
4. A reverse mortgage will enable senior citizens to receive a regular stream of income from a financial institution against the mortgage of his home.

7. BACKGROUND

Although India has the world's largest youth population, the proportion of seniors, both in absolute numbers and relative to the population is set to increase significantly. According to Census 2011, between 2001 and 2011, while the population grew 17%, the number of elderly increased by a whopping 35%.

According to the 2011 Census data, India is home to 104 million elderly people (aged 60 years and above). Demographically, the proportion of India's elderly population has

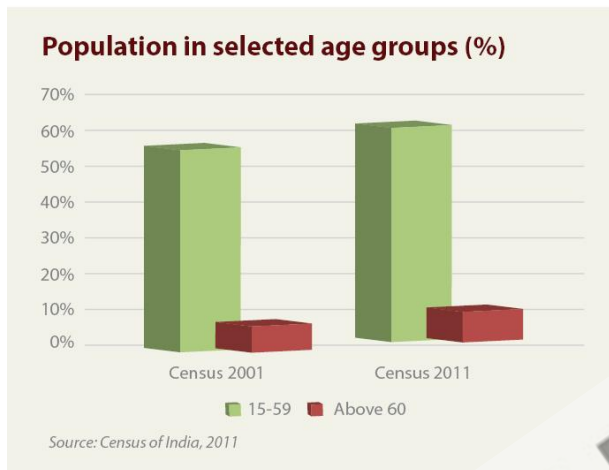


increased to 8.6% in 2011 from 5.6% in 1961 according to the Ministry of Statistics and Programme Implementation. It is expected that this figure will grow to 173 million by 2025, further increasing to about 240 million by 2050. Interestingly, by 2050, it is estimated that the number of dependent adults in India will be at par with the number of dependent children.

Policy and legal framework for Senior Citizens

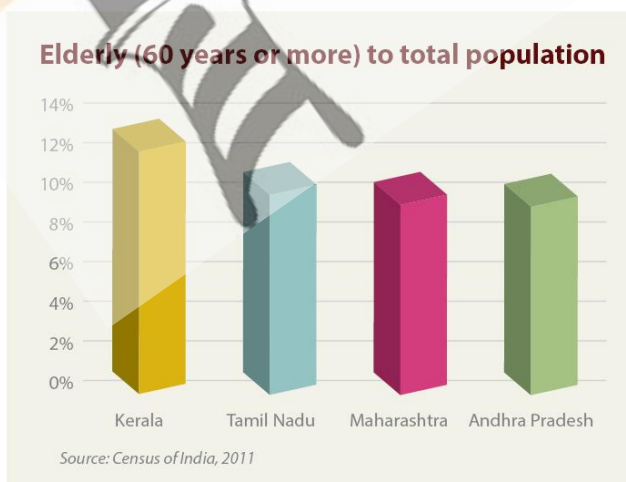
The Union Ministry of Social Justice and Empowerment has announced the **Integrated Programme for Older Persons (IPOP)** in 1992, which was revised in 2008. It covers issues such as assistance for the maintenance of nursing homes, dementia centres, older widow care centres, and respite care homes. However, commercial retirement homes are not included in the ambit of IPOP. In January 1999, the Union Ministry of Social Justice and Empowerment, Government of India adopted '**National Policy on Older Persons**' (NPOP).

The Policy provides broad guidelines to State Governments for taking action for the welfare of older persons in a proactive manner by devising their own policies and plans of action. The NPOP also does not incorporate those living in retirement homes, probably because they are seen as more affluent persons.



In pursuance of the National Policy for Older Persons (NPOP), National Council for Older Persons (NCOP) was constituted in 1999 under the Chairpersonship of the Minister for Social Justice and Empowerment to oversee implementation of the Policy. In order to have a definite structure as well as regional balancing, National Council for Older Persons (NCOP) was reconstituted and renamed as National Council for Senior Citizens (NCSrC) by a resolution dated 17-2-2012.

The NCSrC advises the Central and State Governments on the entire gamut of issues related to welfare of senior citizens and enhancement of their quality of life. However, this is largely



focused on seniors who are destitute and covers areas such as a Senior Citizens Welfare Fund, health care facilities, old age homes etc. In December 2007, the **Maintenance and Welfare of Parents and Senior Citizens Act** was enacted for ensuring the well-being of seniors. This Act makes it mandatory for children and relatives to provide care facilities to their

older parents or relatives after they reach the age of 60. This too does not cover issues faced by seniors who have their own savings and want fair policies in retirement homes. Clearly, there is a need for a proper framework for the regulation of retirement homes and communities, with a focus on safeguarding the rights and assets of senior citizens.

Retirement Homes

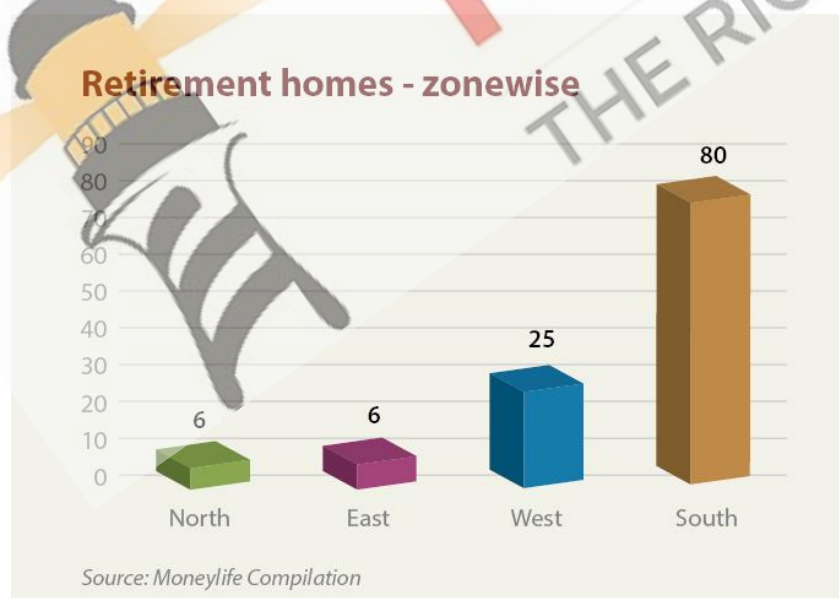
Retirement homes promise to provide a peaceful and easy lifestyle to senior citizens with the company of people of a similar vintage by offering accommodation, recreation and access to a variety of services on a commercial basis. At a very basic level, retirement homes provide all day-to-day requirements, basic medical support, security, maintenance, housekeeping and food and recreation. The more expensive ones throw in luxuries such as swimming pools, clubhouses, mini-theatres etc. The homes are constructed with the intent of forming a community of likeminded people of similar age group, who value social interactions, personal comfort, sense of security and privacy. Senior citizens either purchase the accommodation (most homes offer multiple choices from cottages to apartments and studios) or pay a deposit as well as the monthly maintenance and service charges.

Historically, senior care in India was confined to old age homes that were generally meant for destitute or abandoned elders and were run as charitable organisations. Unlike old-age

homes, which are generally the last option for needy and abandoned elderly, retirement homes are chosen by senior citizens of their own free will, mainly to have an independent life with like minded people.

Retirement homes are a lifestyle choice by those who are financially stable,

well travelled, socially connected, and have clear thoughts about how to live post-retirement.

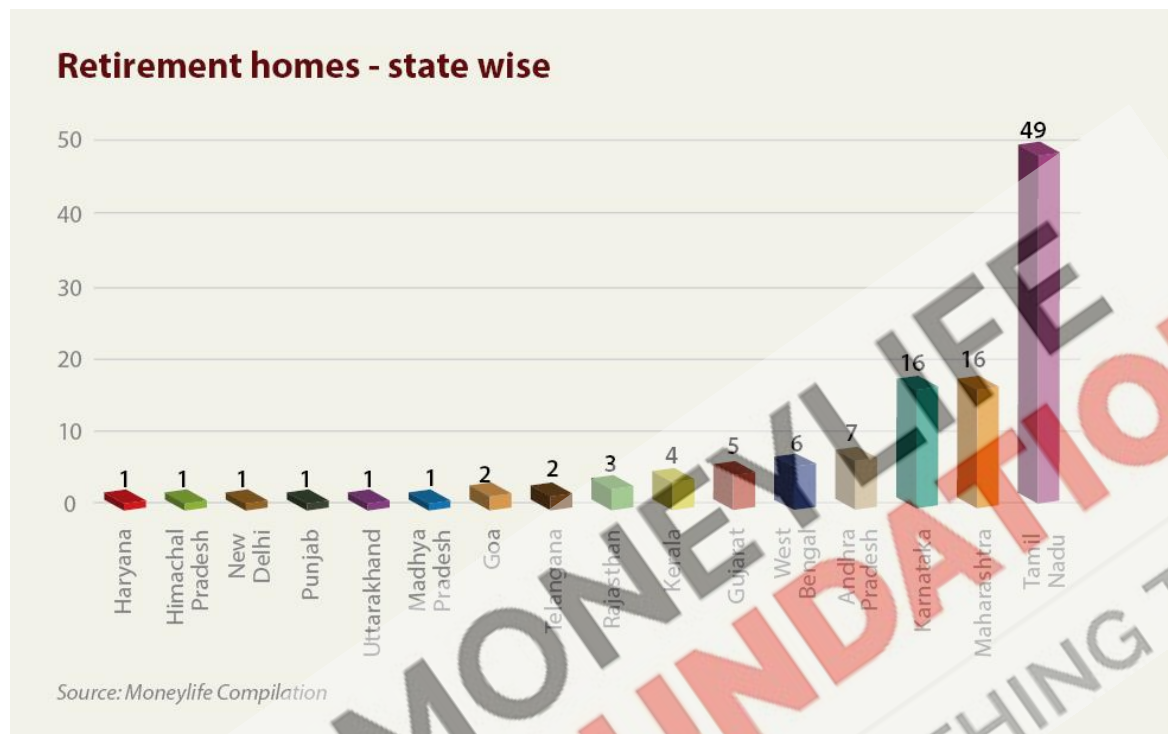


Among the earliest to venture into this market segment is Paranjape builders, which constructed Athashri in Pune that was built for well-to-do or even affluent Indians. It was started in 2000 and remains the most reputed retirement homes, thanks to the personal interest and concern of the Paranjape family in ensuring that it retains high standards. Athashri remains one of the most popular retirement homes in India and currently house more than 1,500 senior citizens. Another early proponent of retirement homes is Colonel (Retired) A Sridharan, who established the Covai Property in 2001. He has been the pioneer in senior retirement homes since 2004 and has created Serene Retirement Communities in Coimbatore, Chennai, Pondicherry, Bangalore, Hyderabad, and Kanchipuram. In 2006, Dignity Lifestyles was set up in Neral, near Mumbai, by Mrs Sheilu Srinivasan, founder of Dignity Foundation.

While Athashri is like a housing complex in the middle of bustling Pune – a fact that adds to its attraction for many residents, Dignity Lifestyles is more like a resort, located at Neral, just 90 kilometres from Mumbai, spread over 25 acres of land near the picturesque hill station of Matheran. It has a common dining room, golf carts to transport residents (who find it difficult to move around) within the complex, round-the-clock security, an in-house doctor and a special wing for assisted living and dementia patients. It also organises regular events and picnics and shopping trips into Mumbai for the more active residents. Top-end housing at Dignity requires a deposit of about 3.5 million rupees (\$56,000) – 75% refundable if the resident leaves or dies, when it goes to an heir -- and fees of 10,000 rupees a month, plus meals. We have tried to understand the demand and supply of retirement homes in India and analyse key aspects of the business in detail, mainly from the consumer perspective.

The chart highlights that the states of Kerala, Maharashtra and Tamil Nadu have one of the highest percentage of senior population in India. Pune, Coimbatore, Bengaluru have led the development of retirement homes in India; the northern region has been slow to catch up. Many new gated communities and retirement towns have come up near Delhi as well as in hill stations in the north.

We have compiled a list of retirement homes in India to understand the geographical differences, if any. The list of all retirement homes is provided in **Annexure A**. An immediate observation was that retirement homes are more popular in Southern India. The demand for



such living arrangements and services are higher because of the number of families where children have moved abroad and the parents are alone in India. This was also true of a large number of people living at Athashri in Pune. Along with an ageing population, social and family structures in India have changed rapidly, creating the need for secure places where like-minded elders, who are financially well to do, can stay together. The real estate industry has already discovered this niche market. Aggressive marketing of retirement townships offering high-end amenities and conveniences hold out the promise of a luxurious oasis for retired living. However, building a great facility is different from managing it well. The reality of retirement homes can sometimes turn out to be different after a few years from what is depicted in glossy brochures. Our study has thrown up a range of issues that seniors can expect to face over time – starting from minor irritants such as service quality and maintenance to more serious issues such as forceful eviction, denial of services, providing substandard services and dealing with cost escalation. The need for regulation is underlined by a court case in the Tamil Nadu High Court that highlighted the travails of the senior citizens living in retirement home in Coimbatore.

8. DEMAND DRIVERS & MARKET POTENTIAL

8.1 Demand Drivers: There is a shift in the lifestyle preferences among the upper middle-class Indians who are now in their '60s. The trend towards nuclear families is relentless, creating a demand for living arrangements that allow elders to maintain their independence, privacy and lifestyle, while also availing of the companionship of like-minded persons. Seniors also need basic services such as routine medical check-ups, security and domestic chores and organising cooking. An interesting quote from a senior citizen, whose children have moved abroad, best captures the mind-set of those who have opted for retirement homes. He says, "When I retired from my job, we decided that my wife (who was a home maker) must be able to retire from household chores too and we moved to a retirement home to be able to spend time doing things we like to do and in the company of like-minded people".



While some seniors are opting out of the joint family set up out of choice, some are forced by circumstances (children working in a different city or country). The National Family Health Survey in 2005-06 reported that every three Indian households out of five (or about 60%) are nuclear families. Many retirees also

prefer to life independently and pursue their own interests and hobbies. These are a class of affluent or upper-middle class persons with high savings whose focus is on quality of life at the retirement homes or communities.

There is an another group, in their '40s and '50s, who are already planning for their retirement and seeking such communities, creating a clear future demand for such facilities. The increase in per capita income, especially in the larger metropolitan cities has made affordable domestic help and support staff (security and chauffeurs) both expensive and scarce. Some retirees have opted for retirement homes and townships in their 70s when the running of independent households increasingly became a burden. Our online survey on retirement homes threw up the following factors behind their need and demand.

In an article in Times of India dated 25 March 2012, Sushmita Ghose, National Director (East and North) of HelpAge India made an important point. She said, "Retirement homes are increasing because the residents are able to pay. They are independent and love the association of their choice. There are agencies providing them with care and services together with security. In these homes, they also get peer group and security together with the services they need in the last phase of their lives."¹

8.2 Potential of retirement homes

A Sridharan, founder of Serene Retirement homes, one of the first retirement homes in India told BBC (5 July 2013), "India today has 100 million elderly people. If you take 5% of them as the middle class, it comes to five million people. It is a huge number and there is hardly any availability of old-age homes. So there is a huge market out there for realtors. A lot of young middle-class Indians left the country during the tech boom in the 1990s. Their children do not want to be known as people who have their parents living in old age homes. So a need for such exclusive homes was felt and the rising middle-class is securing its retirement years by buying exclusive homes."²

The Association of Senior Living India (ASLI), a voluntary membership association for developers and service providers that operate in the senior living industry, says only one senior in every 10,000 is engaged in some form of senior living in India, as compared to 12

¹ <http://timesofindia.indiatimes.com/city/kolkata/For-some-its-a-choice-to-live-with-dignity/articleshow/12399465.cms>

² <http://www.bbc.com/news/world-asia-india-23176206>

seniors in every 100 in the US and four in every 100 in Australia. ASLI also pegs the current demand for senior housing in India as about 3,12,000 units.

B Sridhar, a senior strategic consultant in education, healthcare and senior living with Jones Lang LaSalle India, has written a report on Senior Living in India - From Niche to New Focus Area. He explains, "Percentage-wise, the senior living sector has a long way to go before numbers can be discussed at a level significant within the purview of the real estate market. However, given the country's demographic profile, demand is certainly expected to grow significantly over the next five to ten years. More real estate developers will explore this segment as part of their larger integrated township developments. Cities, which have traditionally been retirement destinations, will see the launch of significantly more projects than in other parts of the country. Senior living, originally concentrated more in Tier II and Tier III cities is now catching in Tier I cities. However, a lot will depend on the acceptance of the key projects, which have already been launched in the market, as and when they get delivered."

Jones Lang LaSalle retirement homes as a \$25 billion industry worldwide and expects initial demand in India at 300,000 units. It estimates that the US had over 2,000 senior citizen homes and 500,000 residents in 2011.³ **Brotin Banerjee, MD and CEO of Tata Housing**, which is developing Riva retirement housing, told MoneyControl.com, "I believe the market would be about Rs250-300 crore today. Somebody like us getting into this market will drive a large number of players to seriously consider senior living. We will go ahead and invest in 12-13 projects."

In a white paper on "Senior Living Sector In India, **Shubhranshu Pani, Managing Director for Strategic Consulting at Jones Lang LaSalle India** says, "The senior living sector in India is at a crossroad. With the relaxation of Foreign Direct Investment (FDI) restrictions on investments in the sector and increasing population of seniors to cater to, there clearly exists an untapped opportunity for investment and development in this sector. Unlike western

³ <http://www.livemint.com/Companies/1N2u583HXJ3gLIqqug790M/Indian-developers-building-more-homes-for-senior-citizens.html>

countries where the senior living industry has gained maturity, India provides an opportunity to developers, service providers, healthcare players and operators to create solutions specific to India while leveraging learning from across the world."

According to Mr Pani, Indian senior living sector is now heading towards next generation of senior living, where developers / operators are providing assisted living and palliative care services. "There is a demand among working professionals and Indians who are mobile (travelling around the globe) to avail as a social network for aging parents. The current occupied senior living projects, has critical mass to support an insurance product for the aged. Government should facilitate insurance from age of 55 to 75 years to ensure that senior citizens can be insured medically for this age bracket. Currently the insurance providers do not cater to this age group, as there is no directive to have this specific age group, and there is no critical mass. We believe that critical mass already exists," he added.

In an article in Hindustan Times on 19 August 2015, Ankur Gupta, joint managing director, Ashiana Housing is quoted as saying: "Seniors are now more independent than they used to be. Their mind set is changing, and they want a better life. In-house facilities like clubhouses, dining, activity halls, reading rooms, yoga homes, bill pay services, medical aid, movie theatres and swimming pools give a huge relief to their children. Around 1,000 similar units are constructed in the country every year."⁴

An article in the Pune edition of Times of India on 20 October 2016 highlighted how this concept of retirement homes has become so relevant that it was discussed at the national governing council meeting of Confederation of Real Estate Development Association of India (CREDAI) in Pune. "Some CREDAI members did not agree that there were enough seniors ready to stay away from their children. We had to educate them that there is enough demand and the same has to be taken positively. I hope that builders come forward to meet this demand in the very near future," said **Shantilal Kataria, president of CREDAI Pune.**⁵

⁴ <http://www.hindustantimes.com/mumbai/retirement-colonies-senior-citizens-find-a-home-away-from-home-for/story-KARGpxOjfRh1d80B34zVNI.html>

⁵ <http://timesofindia.indiatimes.com/city/pune/Demand-tops-supply-for-seniors-housing/articleshow/54947475.cms>

Arun Gupta, Chief Executive Officer at Age Ventures India, a non-profit trust that works with builders to design and manage senior homes, had said, "Today, builders realise that this could be a differentiating factor in their projects and could attract an entirely new market, which has been untapped so far".⁶

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⁶ <http://economictimes.indiatimes.com/wealth/real-estate/real-estate-developers-turning-to-housing-for-senior-citizens/articleshow/47825392.cms>

9. CONSUMER ISSUE: THE MADRAS HIGH COURT CASE

Last year Moneylife Foundation was approached by a group of senior citizens from Coimbatore and Chennai, who have filed a litigation in the Madras High Court seeking reliefs and safeguards including a regulatory framework to govern the of retirement homes. Since the Coimbatore area has the largest concentration of retirement homes and is among the earliest experiments in senior living, studying what has happened offers invaluable lessons for policy makers, promoters and consumers.

9.1 The case

Mr S Krishnamurthy, an 80-year old Air India veteran, filed a public interest litigation (PIL) in the **Madras High Court (Writ Petition Number 22967 of 2015)** on 29 June 2015, requesting the Court to direct the Tamil Nadu government to set up a specific regulatory authority for senior citizens' homes in the state. Mr Krishnamurthy's petition arose out of his own horrible experience and that of other senior citizens who opted to live in retirement homes that have mushroomed around the picturesque Coimbatore region of Tamil Nadu. Mr Krishnamurthy had been living in Dhyanaaprastha retirement home in Coimbatore since 2003.⁷

Mr Krishnamurthy was joined in his fight for justice by his friend Mr Narayan Raman, who, along with his mother (she passed away in 2014) and uncle Mr PN Subramanian has been living at Vanaprastha, another retirement home in the vicinity. The promoter of Vanaprastha is Mr AV Ramaswamy. He is also the Managing Trustee of Vanaprastha Trust. There are two other trustees -- his daughter and daughter-in-law. The family also manages and operates three other retirement homes -- Dhyanaaprastha, Kausthobam and Shankara Seva Sadanam, which are located in and around Coimbatore.

⁷ Dhyanaaprastha foundation is the trust formed by the promoter under which he is running the Dhyanaaprastha retirement home. Due to non-payment by few senior citizens they were not eligible to be members of the foundation and the number of members fell below the minimum requirement of seven and hence it is now defunct.

9.2 Grievances of the complainants

The residents had multiple complaints with the management and developers and structure of the organisations. Here is a brief summary of issues the residents faced:

1. The retirement home was built from the monies collected as interest-free deposits from resident members. However, after completion, the depositors were left out as mere leaseholders without any say or involvement in the affairs of the retirement home. Meanwhile the land value began to rise dramatically and that was the beginning of their woes.
2. The Trust/ Societies are non-profit organisations set up for charitable purposes and enjoy tax exemptions. However, in reality they are commercial set ups.
3. It is alleged that the books of accounts are not maintained properly or audited, as they should be. The external auditor, who audited the retirement homes, is possibly now under scrutiny by the Institute of Chartered Accountants of India (ICAI) for misconduct.
4. Services provided to the residents are unsatisfactory and the staff harasses senior citizens, especially those who voice grievances. Some residents were even denied water for drinking and food without citing any reasons.
5. Residents are not provided with any break up of the monthly maintenance charges collected from them, nor are they shown the accounts. The money collected is deposited in what they call a 'kitchen account'.
6. In Vanaprastha and Dhyanaprastha, the lease agreements of the residents are not registered, as required under state laws. It also impacts the legal rights of residents.

9.3 Outcome

The persistent efforts of Mr Krishnamurthy led to a significant court order and an interesting chain of events that hold a lot of hope for proper regulation of retirement homes. At the first hearing for the PIL, a two-member Bench, comprising Chief Justice Sanjay Kishan Kaul and Justice TS Sivagnanam directed the Tamil Nadu government to file a proper response as to the lack of regulation for retirement homes. The Bench stated that it believes that the Central and State Governments must take steps to alleviate the problems of senior citizens living in retirement homes.

In September 2016, Mr Krishnamurthy was directed by the Union Ministry of Housing and Urban Poverty Alleviation to approach the Union Ministry of Social Justice and Empowerment with his problems. In October 2016, the Madras High Court desired to know whether the Ministry of Social Justice could evolve some mechanisms to bring the private old age homes also under the regulation of appropriate Government department. The Ministry of Social Justice and Empowerment replied that the matter was being re-examined in consultation with the Department of Housing under the Union Ministry of Urban Development.

The Tamil Nadu Government **vide Order G.O. (MS) No. 16, Social Welfare and Nutritional Meal Programme** dated 23 November 2016, ruled that old age homes will be classified as rural and urban commercial entities and laid out minimum requirements that must be met for a retirement home to be classified as one. Clause XV of the Government order (GO), on 'Registration and Legal Formalities' states that "Bilateral agreements between the promoter and senior citizens have to be compulsorily registered."

In its reply affidavit filed on 24 November 2016 before the Madras High Court, the Secretary, Social Welfare and Nutritious Meal Programme Department in the Tamil Nadu government stated, "Out of the 57 suggestions submitted in the petition, 30 were found to be relevant to the senior citizens living in retirement homes, which fall under the category of ownership/ lease based homes. To safeguard the senior citizens, the Government of Tamil Nadu will issue appropriate amendments in the orders/ rules necessary if any, in future on receipt of feedback."

9.4 Conclusions

At the core, this establishes that there are no guidelines or regulations governing the operation and management of retirement homes with specific provisions to safeguard the rights of a vulnerable category of citizens who are also living on their savings. There is no mandate to ensure transparency and accountability of promoters, delivery of service, maintenance of service standards and resolution of residents' grievances, forcing several citizens to approach the courts.

While the Tamil Nadu Government's order for minimum requirements to be met by retirement homes is an important step forward, this needs to be part of an overall regulatory framework, given the pace at which retirement homes are being set up all over the country. Even in Tamil Nadu, where a set of rules is in place, but the struggle to get the local administration to enforce the rules is an on-going issue. For example, the latest TN G.O No 83 requires that all senior citizens' homes in Tamil Nadu have to be compulsorily registered with the District Social Welfare Office [DSWO]. This Rule has been in existence since January 2010. However, the Office of the DSWO in Coimbatore has not yet registered many retirement homes in Coimbatore.

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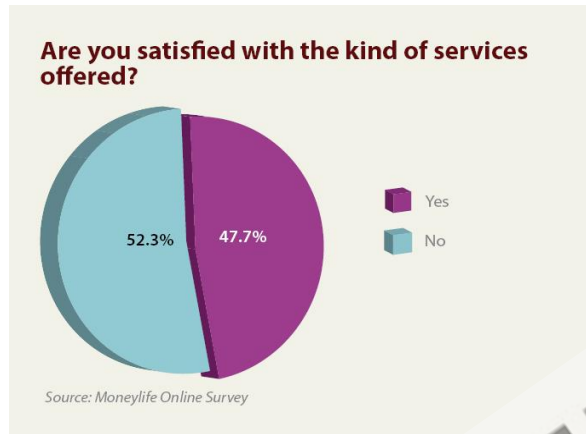
10. MONEYLIFE ONLINE SURVEY FINDINGS

In order to understand the motivations of seniors who move into retirement homes, their expectations and the various issues they face, Moneylife conducted an online survey using our network of users and readers as well as those connected to us through the social media. **The survey was open from 25 November 2016 to 24 December 2016. We received 340 responses from people across India.**

Key Findings

1. Senior citizens choose to live in retirement homes for multiple reasons such as social interaction, easier lifestyle, not having to bother about daily chores, security and better healthcare.
2. The business model is equally divided between ownership and lease of property.
3. It is not clear what the developers prefer; our interaction with the residents indicated a clear preference for ownership model.
4. About 20% paid between Rs20 to Rs30 lakh for the accommodation; a close second was the bracket of Rs30 to 40 lakh (19%).
5. About 49% of the respondents pay less than Rs10,000 per month as the monthly maintenance charge. There also exists a small upper middle class population of senior citizens that can afford ultra luxury retirement homes.
6. A majority of respondents (87.5%) were aware that the monthly maintenance charges collected by retirement homes can increase over time, whereas 12.5% of the respondents were clueless that monthly payments would increase over the years in line with inflation.
7. A bigger issue was that a majority (81.2%) said they could also not afford an increase of over Rs5,000 per month in the monthly maintenance charges.
8. While 87.5% of the respondents were aware that the monthly maintenance charges could increase over time, a shocking 71.5% had no contingency plan in case they could not afford the increase. This is bound to be a serious issue over the long term for residents as well as those managing retirement homes.

9. The monthly maintenance cost includes many basic services that residents require for their day-to-day living. We found that 87.4% of the respondents received housekeeping services, 74.5% food and 67.3% medical services as part of the monthly maintenance charge. Only 55% of respondents have laundry services included in the monthly charge.



10. As many as 52.3% of the respondents indicated that they were dissatisfied with the services provided by retirement homes. This only underlines the need for a proper dispute resolution mechanism.

11. Some 61.6% of the respondents felt that the medical facilities provided on site need to improve.

12. As many as 62.2% of the respondents were unaware of the procedure to terminate or transfer the title of the accommodation or what happens after them.

13. A disturbing finding was that 64.9% of the respondents had not signed a contractual agreement that clearly outlines the terms of service and their rights.

14. A surprising 72.8% of the respondents said that there was no residents council, that would give them some say in the running of the homes.

15. Every one of the respondents (100%) felt there was a need for regulation of retirement homes and protection of the rights of residents.

16. While 53.3% of the respondents were unhappy with the services provided by the retirement homes, 72.8% of the respondents would recommend living in retirement homes to others. This suggests that there is a clear need for such facilities, but their effective regulation will make the experience what seniors have signed up for.

11. FINANCIAL MODELS FOR RETIREMENT HOMES

Retirement homes in India run on one of the two financial models:

- **Lease/ deposit:** Under this model, customers take up an apartment on lease, by paying a deposit. Sometimes there is also a service charge for the accommodation. In most cases, the deposit is split into a refundable portion and a non-refundable portion to cover some fixed costs. Some are known to charge a refundable 'entry' fee, which is separate from the deposit and is refunded only after one has stayed for six months.
- **Ownership:** Under this model, apartment sold outright. Even in this model, homes such as Athashri in Pune collect a mandatory deposit, to cover some basic maintenance costs through the interest earned on the corpus.

In both models, there is a monthly charge to cover services such as housekeeping and maintenance. The monthly charge may or may not cover food. The promoter of a retirement home may assume two roles, one as the property developer and the other as service provider. In most cases, the developer is also a service provider. This may or may not be through the same company, but a separate entity from the same group.

11.1 LEASE/DEPOSIT

The amount of deposit charged usually depends on quality of amenities and range of services provided. Mr Vijay Sood, **general manager of the Jagriti Retirement Home in Kolkata** told us that the home charges an entry fee of Rs5 lakhs, which is refunded after the first six months of stay. There is a deposit of Rs20 lakhs, which is also fully refunded when the resident leaves. **Godhuli**, another well-known retirement home in Kolkata has a different model. Mr Kaushik Sengupta, the manager, told us that 50% of the security deposit of Rs10 lakhs is refunded while the remaining 50% goes to the Godhuli Social Welfare Fund.

ADVANTAGES OF THE LEASE/DEPOSIT MODEL

For the developer:

Capital appreciation: The lease model allows the promoter/ developer to benefit from the appreciation of the unit. This has been a significant benefit to promoters in the past 25 years when property prices all over India have risen dramatically.

Occupancy Assurance: This model ensures that those subscribing for the project are most likely to occupy the units. As opposed to this, many residents in the ownership based retirement homes live abroad and use them only for a few months when they are in India.

Control on Project: The developer in the project retains the complete ownership; it offers maximum control over the project.

For senior citizens:

Lower entry price: The deposit in lease models involves significantly less outgo than the ownership model. This allows residents to get a lower entry price without blocking up a large chunk of their life savings. Moreover, the interest on the money saved, helps pay the monthly charges. It is also an advantage for those who opt out of a retirement township, since they do not have the burden of having to find a buyer who is also a senior citizen.

Allows Flexibility in Payments: This model allows the flexibility of payments for entry cost into the project. Customers can enter the project with an upfront fee followed by regular lease rentals.

DISADVANTAGES OF THE LEASE/DEPOSIT MODEL

For the developer:

Payback and low returns: Since complete market value of residential units is not recovered at the time of sale this model offers lower returns in comparison to a sale model. Further the rental payments are spread out over years, which impact the present value of cash flows resulting in lower project returns.

Acceptability: Customers are reluctant to accept a deposit model in what they see is a real estate investment.

Higher Switching Behaviour: Since residents have low stakes in the project, it allows them to switch over to other projects and locations.

High Financial Exposure: The entire risk of capital investment in the project is borne by the developer. Further, there are no revenues in the form of bookings or construction linked absorption plans until the project is complete and delivered.

For senior citizens:

Refund of deposits: If the promoter/developer is not trustworthy or careful with the deposit collected, the lessee may face issues while seeking refund on termination of the lease.

Insecurity: In the older retirement townships in India, this is the root cause of resident disputes. The deposits charged have also risen in line with property values and this has created an incentive for the promoter to engineer a churn among residents by harassing them or curtailing amenities

Some of the senior living projects operating on a lease/deposit model in India are:

- Vanaprastha, Coimbatore
- Brindavan Hill View, Coimbatore
- Dhyanaprastha, Coimbatore
- Tapovan, Coimbatore
- Godhuli retirement home, Kolkata
- Golden Estate, Faridabad

Issues arising out of this model:

1. In the absence of clear regulation of retirement homes and their financial models, there have been instances where the promoter has credited the deposits into their personal accounts instead of the not-for-profit 'Trust' that is the official promoter.
2. Since there is no regulation in place, some residents who have opted out of retirement homes have had a struggle to get their deposit back.

3. Escalating property prices work to the advantage of the promoter/developers who are known to have nudged and harassed residents/tenants to vacate the premises. This is done through unreasonable escalation of monthly charges or rendering poor service. The apartments are then leased again at higher rates to new occupants. Senior citizens have no recourse, in the absence of any regulation governing retirement homes. In many cases, especially in early retirement townships, there were no proper agreements and residents parted with their money, mainly on trust.

4. In many cases lease agreements signed with the promoter are not registered. **Mr PN Subramanian, who lives in Vanaprastha, Coimbatore** has been battling with the promoter/developer to get the lease agreement signed and registered for a few years. All he has in an acknowledgement of Rs6.05 lakh that he paid. The promoter/developer is now reluctant to sign an agreement. Mr Subramanian has filed a case in 2013 in the Magistrates Court, which directed the police to register a first information report (FIR). The Police registered a criminal complaint in October 2016, but no investigation has started yet, alleges Mr Subramanian.

5. Several retirement homes, that are commercial enterprises and targeted at middle class to affluent seniors are registered as charitable trust and get tax exemptions. The legality of these arrangements could come into question, now that the government is cracking down on the operations of so-called charitable trusts and NGOs.

6. Promoters are known to prevent the formation of resident's welfare associations that would allow residents to fight for their rights.

7. In the absence of regulation, the promoter/developer does not bother to disclose the break-up of monthly maintenance charges and use of funds.

11.2 OWNERSHIP

The outright sale model involves transfer of property title in the name of the end user. However, in case a resident opts out and wants to sell the premises, there are restrictions on who can purchase it or live in the premises. Some promoters insist that the subsequent buyer must also be a senior citizen; others do not have restrictions on who buys the premises, but mandate that the person residing at the Retirement Home/Community must be a senior

citizen. The latter arrangement provides flexibility for children to buy a retirement home for their parents, if necessary and is beneficial to those who are living overseas.

ADVANTAGES OF THE OWNERSHIP MODEL:

For developers:

Quick Financial Start: Allows for the sale of stock and thus generation of revenues while the construction is still in progress. This helps them achieve quicker and higher returns.

Returns: Helps the developer to achieve **quicker** and **higher** returns. Payback periods are shortest and project returns are the highest due to early cash flows.

For residents:

Social Acceptance: The family is more comfortable with ownership

Encashment: An ownership model allows an opportunity for residents to draw down the value of their asset through Reverse Mortgage, if this product is made popular and easily available. This will be especially useful for residents who have no children or heirs or have limited savings and need to be able to meet future increases in monthly maintenance and service cost.

Financing: Since the title is transferred to buyer in a sale model, it is easier for buyers to raise bank loan and other forms of financing.

Title Security: Transfer of title offers them the security that the investment will be automatically transferred to their legal heirs after their demise.

DISADVANTAGES OF THE OWNERSHIP MODEL:

For developers:

Speculative Buyers: Difficult to distinguish between a speculative buyer and a genuine buyer.

Low Occupancy: If the idea is to promote community building, it can start only after the bulk of units are sold. In an ownership model, the resident has the option of treating the

apartment as an investment, or for infrequent use. This can affect the economies of scale in services.

Lack of Control: Transfer of ownership to end-user dilutes the control of developer over the project. Such control is quite significant to maintain processes, quality, uniformity and branding in a project.

For residents:

Capital Appreciation: The growth in value and capital appreciation depends on additional factors (developer's vision, expertise and commitment) in addition to normal real estate growth.

Low Resale Value: Senior citizens who want to opt out of such communities may find it tough to find buyers, or have to sell below market rates, because resale is restricted to seniors. This can be an even bigger issue in the future when India's realty prices flatten out.

Some of the senior living projects operating on an outright sale model in India are:

- Ashiana (Bhiwadi Delhi NCR, Chennai, Lavasa Pune)
- Serene Covai Properties (Coimbatore, Pondicherry, Chennai, Mysore & Hyderabad)
- Vedaanta Retirement homes (Coimbatore, Chennai, Bengaluru and Kumbakonam)
- Anandam retirement home Kodaikanal
- Antara senior living Dehradun

Issues observed during our study

1. The promoter/developer assumes role of owner for the entire complex including that of the service provider. In the absence of regulations to govern the rights of residents, promoter can make unilateral decisions regarding the cost of services.
2. The promoter/developer retains the hold on all common property and amenities. This allows them to build and expand the facility, curtailing open spaces or by withdrawing amenities. Residents who protested against arbitrary actions are often harassed. In

Coimbatore the residents of the Nana Nani Retirement Home have filed litigation asking for the ownership of the common areas to be handed over to the residents association. A clear regulatory framework for retirement homes is required for clarity on such spaces, which are integral to a retirement home or community.

3. Our research showed that several retirement projects do not have proper environmental approvals. Nana Nani retirement homes Phase 1 at Coimbatore built by Ananya Shelters Pvt Ltd is accused of environmental violations, constructing on agricultural land covered under the Hill Area Conservation Act and without obtaining approval from Local Authority. This too is the subject of a local litigation.

4. Residents of Nana Nani homes in Coimbatore have also discovered to their shock that the row-houses which they acquired have no proper permissions and the promoter has violated even those building permissions that were improperly granted by the panchayat. Residents are also fighting for property tax receipts since 2011.

Recommendation: Both the models have pluses and minuses. A regulatory framework that ensures some standard features and safeguards, as exist in the Ontario legislation are required to ensure protection of interest of residents who opt to live in Retirement Communities or homes.

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12. CONSUMER ISSUES

12.1 Social Stigma

The concept of Retirement Homes as a lifestyle choice is still to catch on in India for social reasons. **Mr Pankaj Kapoor, Founder and Managing Director of Liases Foras, a leading realty research agency** remains negative about the retirement home concept and its acceptance in India. He is emphatic that there is a social stigma attached to senior citizens living in retirement homes and hence they have not gained popularity in India. Instead of retirement homes being a lifestyle choice for parents who are financially independent, Mr Kapoor, believes that children of parents making this choice face a social embarrassment. "In India, putting your parents in a retirement home is almost a social taboo," says he. He believes that most seniors even if they can afford, do not want to spend money on themselves at the fag end of their life in a retirement home.

Shubhranshu Pani, Managing Director, Strategic Consulting, Jones Lang LaSalle, India, a global real estate consulting firm agrees partly with this view. "In contrast to senior living in the west, the concept of housing for seniors as a specific asset class in India had a social stigma associated with it which has restricted the growth of the sector at large. There is, however, now a growing realization amongst urban households, who in the last 20 - 25 years have witnessed a marked increase in nuclear families that families are no longer equipped to take care of their aged family members."

Industry experts say sentiments and outlook have changed considerably over the last few years. "Until about a decade ago, elderly Indians, either by choice or by the wishes of their family – rarely left the nuclear fold of the family even in advanced old age. Many elderly people now have sufficient monetary reserves and have begun valuing their independence even after retirement. Developers have begun catering to this emerging demand, and the concept is gaining ground rapidly," **Raminder Grover, CEO of Homebay Residential, Jones**

Lang LaSalle Meghraj, was quoted as saying⁸ and Paranjape builders who develop retirement homes in Pune under the name Athashri have signed noted cricketer Sunil Gavaskar as their brand ambassador. Such attempts to make retirement homes more as a lifestyle choice will go a long way to increase acceptance.

Recommendation: The real estate industry and the government need to work at changing perception through awareness campaigns and education. The advertisements of several new retirement township projects are beginning to work through their portrayal of happy and affluent seniors enjoying a glamorous lifestyle.

12.2 Crimes against seniors

Data from the National Crime Records Bureau (NCRB) over the years has highlighted rising crime against the elderly. On 30 August 2016, the 63rd edition of “Crime in India,” an annual publication of NCRB, showed that crimes against senior citizens rose by 10% in 2015 as compared to the previous year. An article in Firstpost India (17 November 2016) suggests, “Increase in crimes against senior citizens in Chennai forces them to shift to retirement homes”. The article reported a spate of murders of senior citizens in Chennai living on their own. Quoting Sarah Paul, who runs the Cornerstone retirement community in Neelangarai, the article says, “Safety is one of the main reasons for people to join retirement homes” leading to an increase in such homes in the past two years.

As many 17.7% of the respondents to Moneylife’s survey said that security was a major reason for opting to live in retirement homes. All retirement homes now provide 24x7 security, the charges for which are included in the maintenance charges and there are CCTV cameras in all public areas.

Once again, the older retirement homes do not seem to have such CCTV and other modern security facilities. Dhyanaaprastha Retirement Home, Coimbatore witnessed house break-ins

⁸ The Economic Times <http://economictimes.indiatimes.com/property/retirement-homes-slowly-catching-up-in-india/articleshow/5597855.cms>

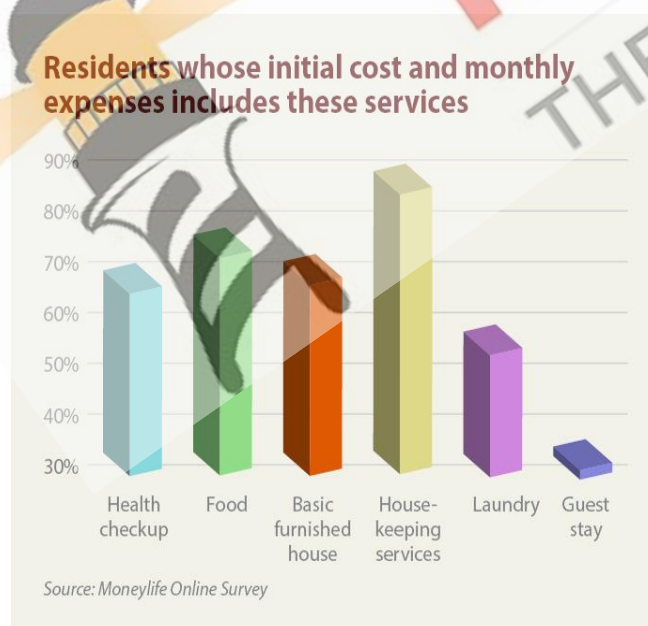
and theft on two consecutive nights - 13 April 2016 and 14 April 2016 - creating fright among its elderly residents.

Recommendation: Many senior citizens move to retirement homes precisely because of security concerns. The adequacy of safety and security arrangements at retirement homes needs to be part of the comprehensive regulatory framework for retirement homes with minimum requirements spelt out and included in the costs.

12.3 Day-to-day services and amenities

One of the main reasons senior citizens choose to live in retirement homes is to get away from the burden of household chores and maintenance to lead a worry-free lifestyle. Most retirement facilities provide the following services:

1. Basic furnished apartments
2. Food
3. Housekeeping
4. Regular maintenance
5. Basic medical facilities
6. Security



The cost for these services is usually included in the monthly maintenance charges. The online survey we conducted of 340 people, gave us the following results. The question is are these amenities and services maintained over the years? Our survey produced a mixed response. A little over half the respondents (52.3%) were unhappy with the services provided. Our interactions too indicate that over half the people in retirement homes were dissatisfied.

Recommendation: We need regulations to mandate basic minimum services (security, food, housekeeping, laundry, maintenance, medical assistance and support, as well as exercise and recreation facilities). The rules also need to prescribe hiring of appropriately trained and qualified staff as part of the permission to start a retirement home.

12.4 Documentation, Infrastructure and Maintenance

While retirement homes promise a lot, the services leave a lot to be desired. For example, even though a Government order (T. Nadu G.O 83) that stipulates minimum standards to be maintained by retirement homes exists, we noticed that Dhyana Prastha Retirement Home, Coimbatore has no ramps, wheelchair facilities or grab bars. This is an example of negligence, not merely sub-standard services and only underlines the need for proper regulation.

Mr Mohan Siroya, a consumer activist who lives in a retirement home in Rajasthan for a part of the year points to several issues with the promoter/ developer. He says, residents were made to sign, what he calls a 'deceitful' tri-partite agreement between the builder, service provider (which happened to be a sister company of the builder) and the buyer, to retain the designated service provider. The residents have no right to change or disagree with any of the paid services, which, he claims are sub standard. Monthly maintenance charges are increased arbitrarily without any justification. Heavy fines are levied for delayed payments.

Mr Venkateswar, who lives in Vanaprastha Retirement Home, Coimbatore alleged the facility is not senior citizen friendly, the food is terrible and residents have chosen to do their own cooking because of poor hygiene and quality. There is no redress.

12.5 Disputes and denial of services

In Coimbatore, elderly residents were not given details of the expenses and bills. When they protested and held back payments, they were denied services. This caused great humiliation and resentment. **Mr R Narayan alleged** that the staff at his retirement home was given verbal instructions to not cooperate with those raising issues. Some of them have been

buying 20 litre cans of drinking water for their use, since water supply was tuned off. While Mr Narayan and his group are fighting for justice, such humiliation is geared to drive out residents who have options.

Recommendation: Although it is not possible to seek resident's consent in deciding every service provider, there must a mechanism for examining and evaluating service related complaints and to deal with recalcitrant or inefficient staff. Similarly, hike in charges cannot be arbitrary and must be linked to costs and follow a transparent process for decision-making and disclosure. The management of retirement homes cannot be a business that is focussed on increasing profits and revenues of the service provider.

12.6 Medical facilities

Seniors require regular and appropriate healthcare services. This is a tricky issue. As many as 14.5% of the respondents cited need for better healthcare facilities as a reason to opt for retirement homes and 61.6% were dissatisfied with the facilities provided. In most cases though (67.3%), basic medical check ups and support was included in the monthly maintenance charges.

Medical facilities with respect to senior citizens in retirement homes include three things:

1. Regular health check-ups
2. Doctor on call
3. Ambulance and hospital facilities

However, our study also threw up examples of retirement homes not having their own ambulances, and sometimes even wheelchairs and stretchers. Several retirement homes, situated in picturesque locales are so remote that access to hospitals in case of emergencies becomes traumatic, while the one thing a senior citizen may require any moment in medical care. This has been part of an important learning process around the world.

“Ideally, the hospital should not be more than 20 minutes drive from the retirement home,” said **Om Ahuja, chief executive officer (residential services), Jones Lang LaSalle India**. A basic issue is the extent of responsibility that a retirement home will assume for the care of a senior, when hospitalisation and treatment for serious medical issues is involved. In most cases, a retirement home has a tie-up with one or two hospitals. If those are expensive, 5-star hospitals, then the cost of falling ill will be high and residents need to know this and be prepared for it, or have alternative strategies planned out. This has to be the responsibility of residents and their families. Here is some feedback from developers of retirement homes: **Rajeeb Dash, is the marketing head at Tata Housing which is developing Riva retirement houses**. Riva has a tie-up with Apollo Hospitals. Mr Dash says, “The medical services will be provided by Apollo Hospitals, but Tata Housing does not take any guarantee of the hospital services.”

Shashank Paranjape, managing director, Paranjape Schemes, which runs the famous Athashri retirement homes in Pune, said, “We have tie-ups with three hospitals. We only take the responsibility of taking the residents to the hospital.”

Ankur Gupta, joint managing director, Ashiana Housing Ltd, says, “The medical facilities that we provide include 24x7 ambulance service, physiotherapy, a round-the-clock nurse and OPD (out-patient department) service, among others.” However, “the guarantee of the services depends on the hospital providing the service and not us, as we are not into the medical business. We provide only comfortable lifestyle.”⁹

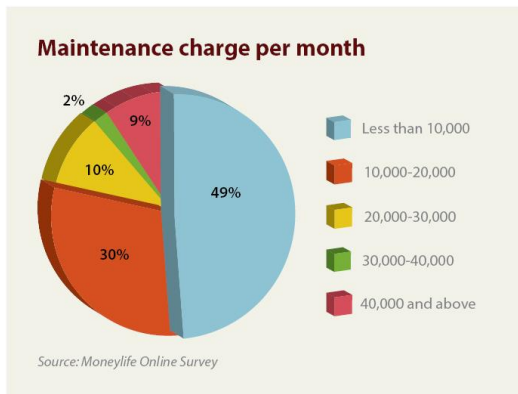
⁹ <http://www.livemint.com/Money/dvN4ue8ScGtAB0vRXLthl/Whats-the-real-cost-of-retirement-homes.html>

Recommendation: A good regulatory framework governing retirement homes would ensure that proximity to a specialised medical centre at a reasonable distance must be a mandatory condition for granting a license to set up such facilities. Retirement homes must also be made responsible to ensure that they have an ambulance and a tie-up with a medical centre. Similarly, retirement homes should be asked to spell out very clearly what is included in basic medical check-ups and whether these include consumables like syringes, bandages etc.

Mr Sailesh Mishra is the founder of Silver Innings a social enterprise that runs an assisted living elder care home A1 Snehanjali in Maharashtra. He is also a well known activist working for the welfare of senior citizens. Mr Mishra told us how availability of skilled nurses as well as training, retention and remuneration of staff are a major concern. “Nursing staff need to be very sensitive to senior citizens and training them for medical emergencies is very essential. Most retirement homes are facing the problem of the lack of good staff willing to look after senior citizens. Consequently, despite collecting monthly payments from residents, many homes are unable to hire and retain good staff,” he said. Many retirement homes in Coimbatore, Bengaluru and Chennai advertise their tie-ups with hospitals nearby, but unless these supplement basic medical facilities, they could impose a high cost burden on residents.

Anandam retirement home in Kodaikanal offer a preventive health check-up per year and 24x7 access to emergency response system with ambulance support; but at additional charge. **2nd Innings, a retirement home near Surat,** claims that it will have its own medical assistance centre with a small medical unit with nurses and a pharmacy. It will also have an ambulance available for 24 hours in case of emergency. These facilities attract additional charges. It is important for senior citizens opting for retirement homes to be clear about the cost of medical care, since India has no social support provided by the government. Those who do not have support systems and families to care for them have to plan even more carefully for health related expenses and contingencies.

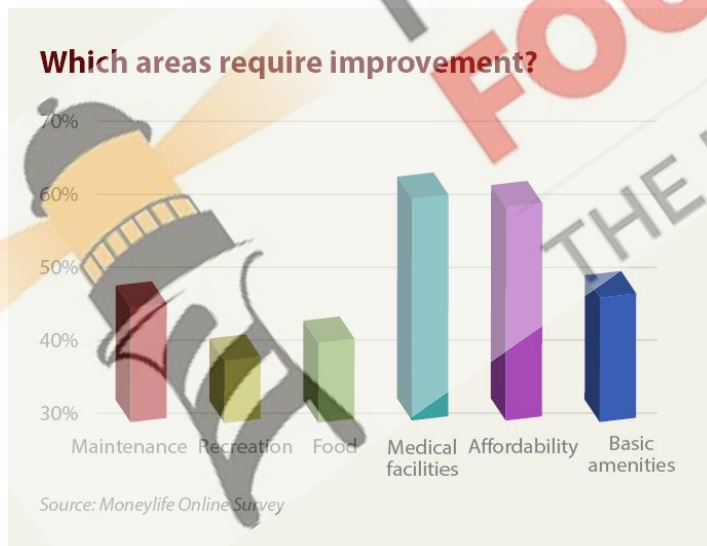
12.7 Cost of living



Senior citizens living in retirement homes are living on savings. After paying for the dwelling (or deposit for a lease arrangement), they need to have enough of a regular income (pension, interest or dividends) to cover the rising cost of monthly maintenance, health related costs and out-of-pocket expenses on themselves and for their entertainment. Our survey shows that those opting

for retirement homes cover a fairly wide spectrum, even among the middle and affluent class. Nearly 40% have paid over Rs20 lakhs for their retirement home investment. While almost 80% are living in homes where the monthly outgo is below Rs20,000.

Out of these 49% pay less than Rs10,000. This suggests that keeping retirement homes affordable will be a key factor for the growth of this market segment and developers/service providers would do well to start thinking about how their residents will be able to meet rising maintenance costs.



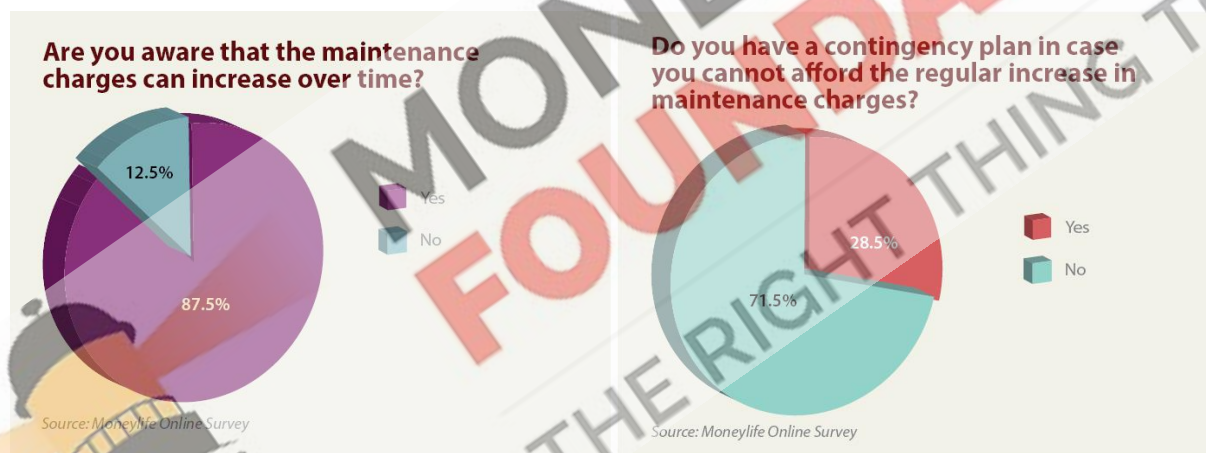
The answers to yet another query shows that 60% of respondents are already concerned about affordability and 46% or just less than half the respondents want better maintenance of facilities. Along with the cost of medicare, these are early indicators of issues that would crop up in future. Unlike the western world, India provides no social security or cover for seniors.

While 49% of respondents pay less than Rs10,000 per month, more than 60% felt affordability was a matter of concern. Thus we realized from our data that despite the developer providing amenities at lower costs the residents felt the pinch.

12.8 Managing Inflation

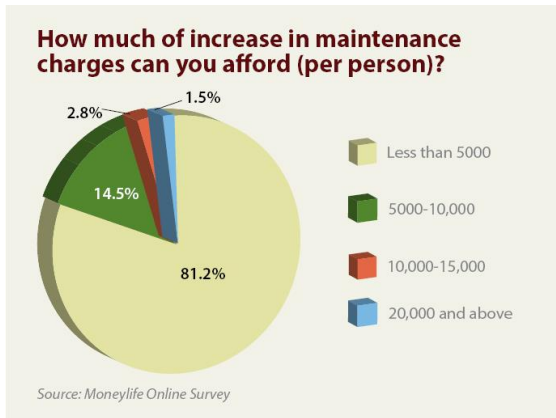
Although Consumer Price Index inflation was 3.63% in November 2016, the cost of healthcare has been galloping in double-digits and is not covered by the CPI. Besides, inflation in the cost of services is much higher than that of products. What is worrying is the absence of planning by residents for inflation-led increase in costs. Our survey showed that

87.5% of the respondents were aware that monthly maintenance charges can be increased by the retirement home. And yet, an astonishing 71.5% had no contingency plan for the increase. Add to this, any unplanned cost of healthcare and there are bound to be problems over time. Both developers and the government need to give some thought to providing a support network for this class of people, in case they are unable to continue meeting higher costs. A good, reverse-mortgage product would be one viable option.



Our study and survey highlight the following areas of potential conflict, resentment and grievances – some of them are due to lack of awareness, planning or getting the right information at the time of moving into a retirement home. These are:

1. Not being told about potential increase in maintenance charges in advance and the absence of a transparent process of deciding increase in monthly charges. A retirement home, where people are living on their savings, cannot extract additional costs for expenses, unlike cooperative housing societies.



2. Not providing details of costs and expenses, or involving residents or a resident representative in the management leads to conflict.
3. Lack of clarity about dealing with those who are unable to pay more or arrange funds. Public humiliation by stopping services, especially food, is clearly not the

answer and causes unease among other residents as well.

Here is the feedback received, mostly from the residents of Coimbatore.

Mr Krishnamurthy of Coimbatore: “Increase in monthly charges is made at unspecified intervals claiming to meet additional expenditure but not properly accounted for to justify such increases”.

Mr Srinivas (Name changed on request) – “Maintenance charges increase every year, sometimes, more than once a year. It is not affordable, particularly for the residents who live out of bank interest on their lifetime savings. The bank interest is reducing as time passes, e.g., 12% in 2004 and now 7% in 2017. How does one sustain the increase?” This is an example of lack of financial planning by the resident and poor financial literacy as well.

Mr Venkateswar - “The maintenance charge is increased arbitrarily every year or even twice a year without any accountability from the management, who refuse to share the account in detail when demanded. Totally unjustified behaviour towards senior citizens like us”

Mr R Narayan –The increases (in monthly charges) are arbitrary and the billing is not transparent. It shows a lump sum amount only without giving details, despite repeated request. The monies collected monthly are through an account called the kitchen account. This entity is not registered and it is a black box. The account is not audited.

Mr PS Ramachandran, Coimbatore had the following to say, “Maintenance charges are increased at the whims and fancies of the management; not in consonance with costs. Last increase in the food charge was around 33% in July 2016. Even if the house is locked, one has to pay a certain sum as non-mess charges every month. Right now, it is Rs200 per person per day.

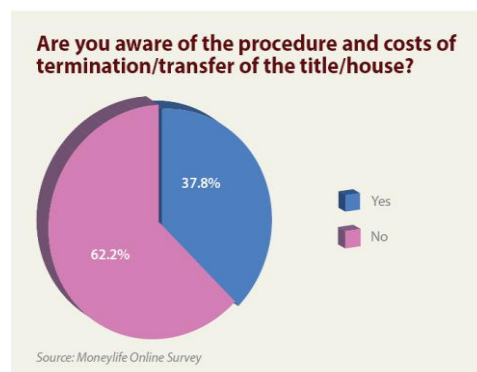
Godhuli senior citizens home, Kolkata has an explicit policy of 5% increase in monthly charges per year. Such an explicit policy or detail in the agreement ensures the senior citizens are aware of their financial requirements and are prepared in advance.

Recommendation: Developers of retirement homes must be aware that they are taking in residents for the rest of their lives. They must be transparent about costs and make an effort to counsel and educate the residents about rising costs; especially the need to plan for healthcare and rise in monthly maintenance costs over the years. A reverse mortgage product that actually works would be an important safeguard for senior citizens.

12.9 Title, Inheritance and resale

Our survey showed that 62.2 % of the respondents had not given any thought to an exit from the retirement home or what happens after them. Over 62% were unaware about the cost and procedures involved in terminating their deal with the retirement home and its costs. Most were unaware of restrictions on resale and title. Very few had done any checking on the background of developers and their legal compliances. Here is some feedback from residents of Coimbatore on this issue:

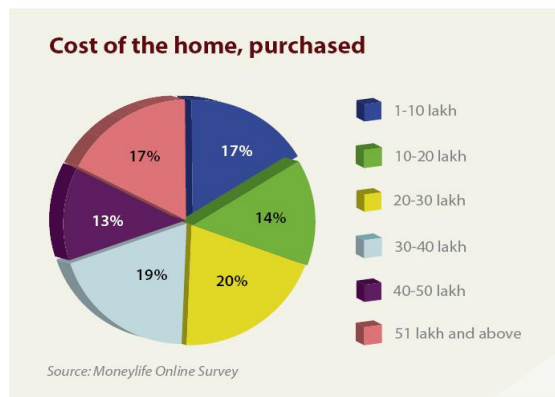
Mr Krishnamurthy of Coimbatore says, “On termination of lease voluntarily or on death the lessee or his nominee will get back the interest free deposit minus 10%. Why should one get less on termination of the lease, when the promoter re-hires it at twice or three times the original deposit?”



Mr Venkateswar of Coimbatore says, "I am aware of the terms of termination of membership as per the lease agreement, but the trustee refuses to abide by the terms."

The following issues exist

1. **Title:** In the business models, lease/deposit and ownership, the senior citizens do not have a clear idea of their rights.



2. **Inheritance and resale:** While heirs can inherit apartments in retirement homes, they will not be able to occupy them unless they are over 60 years old. This restriction can also affect the sale price for those wanting to encash their inheritance.

3. **Exit Option:** Most retirement homes are vague about their exit policies, especially when residents want to leave because they are dissatisfied with the services or due to health concerns. Often it is a struggle to get back their deposits.

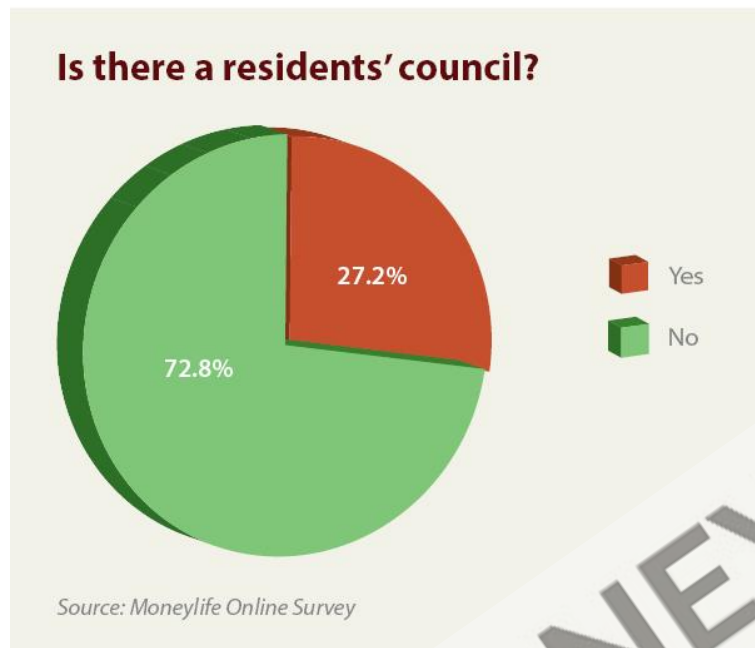
Recommendation: The government must ensure that no senior is trapped by a retirement home by ensuring that there is a clear exit option in each contract. There is only so much that an individual can find out beforehand about a project, especially if a developer has violated building norms or not obtained all the permissions.

12.10 Complaints and dispute resolution

In the absence of any regulatory framework for retirement homes, grievance redress becomes a big issue, once the retirement home is fully occupied and services and upkeep begin to deteriorate. The absence of a formal redress mechanism causes serious distress. A resident's council that has a say in quality of services and recreation with a formal interface with the management is a basic necessity.

However, our survey showed that as many as 72.8% of retirement homes had no resident's council.

Mr Mohan Siroya, Chairperson of the Consumer Complaints Cell, says that the tripartite



agreement between a resident and service provider that he has signed provides for arbitration of disputes, with the arbitrator's order being binding. Residents cannot approach a court. Worse, the cost of arbitration has to be borne by residents, but the arbitrator is selected by the developer. Such one-sided agreements and poor services will give the entire business a bad name. Mr Siroya also

believes that a Resident's Council will help ensure fair practices.

12.11 Transition to Assisted Living

Retirement homes are only suitable for senior citizens who are in good physical and mental condition and can live independently. However, it is fact of life that many residents will have to move on to some form of assisted living or full-time care. Retirement homes cannot possibly dump residents when they are no longer able to look after themselves. Each retirement home must be encouraged to develop such facilities so that residents, who do not have family to look after them are able to transit to such facilities by cashing-in on the investment/deposit made to live at the retirement home. The residents' council could be empowered to help with such transition so that it is done with empathy, fairness and care. Many retirement homes already have such facilities. Golden Estate Faridabad, a high-end retirement home, also provides assisted living along with its independent living services for an additional charge.

Vedaanta retirement homes, situated at four locations in Southern India, provides assisted living facility at its Bengaluru retirement home -- Vedaanta Vaibhav. Athashri, one of the oldest and most reputed retirement homes in India, has incorporated assisted living, Aastha, in one of its retirement homes in Pashan campus, Pune. Athashri has multiple retirement complexes in Pune and helps residents transit from any of these to Aastha. The Indian Express on 21 June, 2010 quoted Shashank Paranjape, managing director of Paranjape Schemes Construction, which has developed Athashri, saying, "Aastha is meant for the elderly who require assistance, be it for the household chores, outdoor activities or nursing care. The Aastha campus has three nurses in three shifts and two ward boys on each of the three floors along with two doctors in day and night shifts to look after the inmates. The nursing staff is trained as personal caregivers by Athashri Foundation which is formed to look after all Athashri units".

12.12 Retirement Homes as part of regular housing:

Mr Pankaj Kapoor of Liasis Foras argues that retirement homes are situated in secluded places and make senior citizens lonelier. They resist relocating these places, which cut them off from their social bonding -- friends and relatives. As a result, amenities and basic facilities deteriorate. "The best way to include senior citizens and make them an inclusive part of society is to have regulations to ensure builders have ground and first floors in all residential buildings reserved for senior citizens. This would ensure that senior citizens are a part of the society and do not live in secluded areas", he argued. Another suggestion is to reserve one wing or section of a residential complex for senior citizens, so that they can enjoy their privacy and still be part of the general buzz of society, celebrations and festivals.

13. DETAILED RECOMMENDATIONS

13.1 Regulatory Structure

The process of granting clearances to set up retirement homes needs to come under a national regulatory framework over time, preferably modelled along the lines of The Retirement Homes Regulatory Authority (RHRA), an independent, self-funded, not-for-profit corporation established by the Ontario government under the Retirement Homes Act, 2010. The guiding principle of the Act is that a retirement home should be a place where residents live with dignity, respect, privacy and autonomy, in security, safety and comfort and can make informed choices about their care options. RHRA's objectives include:

- Informing and educating the retirement home sector, residents, and the public about the Act, regulations and role of the RHRA
- Licensing retirement homes and maintaining a Public Register
- Inspecting retirement homes, overseeing compliance with the regulations and care standards and enforcing the Act for the protection of residents

India does not need a full-fledged retirement regulatory authority but can start with a retirement homes division under the newly Real Estate Regulatory Authority. India must also consider setting up something like Care Quality Commission, an independent regulator of health and social care in England for those who need assisted living. For fundamental standards prescribed by the Commission, please see Annexure B. Indian regulatory guidelines for retirement homes may include the following:

1. Anyone who builds or operates a retirement home should get automatically get a simple regulatory permit from an appropriate authority.
2. The authority should put in place a mechanism to ensure that all retirement homes and their management agencies follow minimum standards prescribed.

3. The authority should ensure that details of licenses, sanctions, permissions, agreements, amenities, terms and conditions of service terms and conditions of Retirement Homes are uploaded on the website.
4. The authority's work should include:
 - Ensuring that customers get the fundamental standards laid down.
 - Monitoring, inspecting and regulating services to make sure that they meet the standards.
 - Protecting the rights of vulnerable people.
 - Involving the public, service providers, customers and local groups.
 - Taking appropriate action if services are failing to meet fundamental standards.
 - Carrying out in-depth inspections from time to time.
 - Publishing information, including performance ratings to help people choose wisely.
 - Ensure that residents given a chance to examine the accounts and provided with details of the expenses incurred for maintenance and services.

13.2 Funding for Regulatory Oversight

One of the sources for funding for the authority could be the money lying unclaimed with insurance companies, banks, corporate houses and the post offices. This was estimated to be over Rs37,300 crore in 2014. Another Rs26,497 crore was lying in inoperative provident fund accounts with the EPFO. That means around Rs64,000 crore of unclaimed money. Last year the government had already announced that remaining unclaimed in Employees' Provident Fund and Public Provident Fund accounts and other small savings schemes for seven years will be diverted to finance a Senior Citizens' Welfare Fund. The scope of this initiative should include retirement homes.

13.3 Operational Issues

The promoter/ developer of a retirement home must be made to sign an agreement with the residents and ensure the following:

1. All residents are provided with the copy of their agreement, rules and regulations of the retirement home, and rights of the residents, including terms of exit and termination of lease or sale of residence.
2. Nutritious food and meals are provided in accordance with the terms of the agreement.
3. A mechanism for 24x7 security and monitoring of CCTV footage of individual houses and entire premises of the retirement home
4. A system for the on-going repairs and maintenance, safety and pest control.
5. A medical centre equipped with basic infrastructure for health check-ups, wheelchairs and stretchers; doctor-on-call facility, and emergency medical attention (including movement to hospitals).
6. Fire protection and emergency equipment for emergencies and compliance with the recent amendments in December 2016 in the Rights of Persons with Disabilities Bill, 2014.
7. Comprehensive insurance for the retirement home (covering buildings, fire, theft etc.) with basic coverage for residents.
8. Maintenance of records of all the necessary personal details of residents, including next-of-kin and emergency contacts.
9. Minimum number of persons who are trained medical attendants and caregivers.
10. Policies and procedures for the staff on care of residents and on-going training of staff in eldercare.
11. Screening of employees at retirement homes, including police verification/registration, past records etc.
12. Transparent review and, if necessary, revision of the policies and procedures at least once a year.
13. Mention upfront the frequency and maximum quantum of increase in maintenance charges that the retirement home will charge. The home must give the resident a minimum written notice of 90 days in case of any increase in rent and maintenance charges.
14. Help set up of a Residents' Council, with a prescribed procedure to elect council members, who can be part of the some decisions involving residents (type of food, recreation and social activities, maintenance of premises etc.) including grievance redress.

15. A mandatory mechanism for dispute resolution and penalties for deprivation of food and other basic rights of the residents must be established. The Residents Council must have a role in this.
16. Ensure that a developer/service provider cannot change basic infrastructure / amenities promised to residents under the terms of their agreement. Any change that would help the developer (such as increase in FSI) should have the concurrence of a majority of residents and must compensate them for the space they give up.
17. A policy for termination of residency rights by the resident and transfer of title in case of death.
18. Exit policy in case of leasehold arrangements with notice period and return of deposit spelt out.
19. A policy for visits and inspection by any government official or medical health officer of the retirement home.
20. Takeover of the retirement home by government or financial institutions or other private parties in case of mismanagement, curtailment of contracted services.

13.4 Ownership model

1. Retirement houses with ownership models should be brought under the ambit of the respective State's Cooperative Societies Act such as Tamil Nadu Apartment Ownership Act in Tamil Nadu or The Maharashtra Ownership Flats, 1963 in Maharashtra to give the residents rights as owners. Such complexes should be treated as the whole complex, which is designed, constructed, sold and runs as a project, and not as individual villas or flats.
2. Though the new Real Estate Regulatory Act has provided for compulsory formation of an Association of purchasers under Cooperative Societies Act, it is only prospective and does not cover the already existing senior citizen homes on ownership basis. A registered association must be formed for the residents so they are actively and legally owners and decision makers in the retirement home. Thus a clarification should be issued so as to include existing retirement homes in the ambit of this bill.
3. Each resident should be compulsorily made a member of the registered association of the housing premises. This will also ensure that arrears can be legally collected from the

members for services provided by the developer. Formation and registration of Welfare Association of the owners should be made compulsory in all these complexes. All the owners should be members of the association. Members shall elect the office bearers of the association.

As per a court order TN G.O No 83 all senior citizens' homes have to be registered with the District Social Welfare Office [DSWO] and the DSWO is the Member- Secretary of the Regulatory Authority which oversees the functioning of the Senior Citizens homes in Tamil Nadu. This Rule has been in existence since Jan 2010. However, many retirement homes remain unregistered.

13.5 Lease/ Deposit Model

1. The entire money collected by the promoter as lease deposit should be deposited by the promoter in a common escrow account in the name of that particular project and proper account should be maintained on usage of this money. This account should be subjected to audit, otherwise senior citizens stand to lose such huge amounts, if the promoter defaults or decamps.
2. A Welfare Association of residents should be formed and registered.
3. Thereafter the management of the complex should be with an elected committee consisting of majority of residents and the representative of the promoter.
4. The difference in the current lease amount and the new lease amount of the incoming member should be held in the common account and should be utilized for common purpose only.

13.6 Reverse mortgage

A reverse mortgage enables a senior citizen to receive a regular stream of income from a financial institution against the mortgage of his home. **Mr Pranay Vakil, the founder of Praron Consultancy**, says "Senior citizens can greatly benefit from reverse mortgage and can achieve financial independence. Along with a few friends and colleagues I am trying to bring

this issue up with the concerned authorities”, he said. Constructive steps need to be taken to make the reverse mortgage model a beneficial and popular means of income for senior citizens. Making reverse mortgage more popular and feasible was a recurring suggestion during our talks with senior citizens as well as developers and trustees of retirement homes.

13. 7 Existing Regulatory Flaws

In the TN Apartment Ownership Act, clause 2 is as under:

“2. Application of this Act - This Act shall apply to every apartment in a building constructed whether before or after the date of commencement of this Act: **Provided that such building shall contain five or more apartments or three or more floors** and construction of such building has been made in accordance with a planning permit and also a building plan duly sanctioned by the appropriate authority concerned under the relevant law for the time being in force.”

Clause 3 defines “Apartment” as: “apartment” means a part of property intended for any type of independent use including **one or more floors or enclosed spaces located in one or more floors (or part or parts thereof) in a building..**

So the already existing retirement homes in Tamil Nadu, which are mostly on ground floor level on villa/row house basis, do not fall under the definition of ‘apartment’ under the Tamil Nadu Apartment Ownership Act, unless the Act is suitably amended for this purpose. The promoter is not under any compulsion to transfer the common areas and the club and other recreational areas to the association of residents; and he retains it and earns income on it. This is more so because the promoters usually sell piece of land beneath the constructed villa/row houses to individual owners, retaining the ownership of the land comprising the facilities and common areas, without transferring it to the association. All such regulatory flaws must be taken care of under a new set of regulations.

14. OUR COIMBATORE VISIT



A retirement villa in Coimbatore

Many of India's earliest retirement homes are located in the picturesque and serene Vadavalli region of Coimbatore. To a casual observer these homes look like ideal retirement communities. Lush green surroundings frequented by peacocks and birds, uniform houses, manicured gardens with beautiful flowers and plants greet the visitor. Senior citizens out for their walks, gardening or bonding over politics and daily happenings are a common sight. However, the reality is different. Moneylife Foundation was approached by a group of senior citizens living in retirement homes in Coimbatore, who are fighting a long and arduous battle against the developers of retirement homes they live in. Since Coimbatore has a large cluster of retirement homes, we visited the town, to get a better understanding of the problems, which could offer warning for other retirement homes.

We spent an entire day of detailed discussions with 20 residents and the children of residents of seven retirement homes in Coimbatore. Residents of Pyramid complex, Dhyana Prastha, Vanaprastha, Tapovan, Soundaryam, Nana Nani homes, Shenbagham retirement home were present to discuss their problems and give recommendations for the regulations for retirement homes in India. We discovered multiple issues faced by senior citizens, who have been the guinea pigs of the experiment with retirement homes, operating outside any formal statute, regulation or protection.

The residents thought that they were buying into a resort-like place, with no responsibilities and great facilities, they gave up their homes in Chennai and other cities and moved into the retirement homes. Things were good in the initial days but problems began to crop up over time with medical facilities, security and services. Most residents of Coimbatore have children settled abroad, who visit them once a year or once in two years; the rest of the year they live a quiet and solitary life. We visited three retirement homes, located a few hundred metres from each other. The residents of these homes form a common community and bond. The three complexes, Pyramid, Vanaprastha and Dhyana Prastha comprise single storied individual houses for a couple or two storied houses that are occupied by two couples. There are also a few single room houses as part of a two-floor building. The developers provided simple, unfurnished houses, which residents have adapted and modified to their requirements and financial capabilities. Some houses have air conditioners and solar heaters, if residents can afford them, others don't. A few had large screen LCD televisions and treadmills. Here are some of the issues the residents highlighted:

13.1 Security Issues

While we saw security guards manning the entrance of the retirement homes and signs of CCTV surveillance we were informed that over the last few months security issues have been troubling the residents. We learnt that there were two house break-ins and theft on two consecutive nights – 13 April 2016 and 14 April 2016. The police advised the management to install CCTV cameras and change the security staff that was too old. A few residents have also installed their own security latches and CCTV cameras to ensure their safety.

13.2 Canteen facilities

The canteen facility in the retirement homes was simple with long communal tables where residents are provided three meals a day. We met a group of senior citizens who are agitating for their rights. Many preferred to do their own cooking because of poor hygiene and bad food. Residents who filed the case in the Madras High Court and refused to pay the maintenance charges, as they were not provided the details of the expenses incurred by the developer have not been provided food for the past year. They also buy 20 litre jars of mineral water for their use.

13.3 Title and ownership

The lack of title, ownership and transfer of rights is also one of the major problems residents of retirement homes face. While we were at Dhyanaprastha retirement home, we met Madhu, who had flown down from US for the final rites of his father, Mr S Lakshmikanthan who passed away the previous week. While dealing with the loss of a parent, he was burdened further with dealing with the title and ownership issues of the house his father lived in at the retirement home. He had no idea what to do with the property and who had the title to the home. Such instances bring to the forefront the innumerable problems that exist in the running and functioning of retirement homes.

After a lengthy discussion with many residents we concluded that while all they have lived a very good fulfilling life and are financially independent, they chose to live their retired life in retirement homes for an easier lifestyle and companionship, but have ended up harried by infrastructure. Residents admit that they should have done better due diligence at the time of entering into the contract with the developers. They also rue that they blindly trusted the developers. Most of these residents have been distinguished professionals and there is a sense of great humiliation at the manner in which they are being treated.

Their protests finally led to a Public Interest Litigation (PIL) filed by Mr S Krishnamurthy, an 80-year old Air India veteran, in the Madras High Court (Writ Petition Number 22967 of 2015) on 29 June 2015, requesting the Court to direct the Tamil Nadu government to set up a specific regulatory authority for senior citizens' homes in the state. Mr Krishnamurthy has been residing in Dhyana Prastha retirement home in Coimbatore since 2003. In September 2016, He was directed by the Union Ministry of Housing and Urban Poverty Alleviation to approach the Union Ministry of Social Justice and Empowerment with his problems. In October 2016, the Madras High Court desired to know whether the Ministry of Social Justice could evolve some mechanisms to bring the private old age homes also under the regulation of appropriate Government department. The Tamil Nadu Government vide Order G.O. (MS) No. 16, Social Welfare and Nutritional Meal Programme dated 23 November 2016, ruled that old age homes will be classified as rural and urban commercial entities and laid out minimum requirements that must be met for a retirement home to be classified as one. Clause XV of the Government order (GO), states, "Bilateral agreements between the promoter and senior citizens have to be compulsorily registered." This is a major victory for the senior citizens.

Governance and implementation are major roadblocks in India. For example, as per the latest TN G.O No 83, all senior citizens' homes in Tamil Nadu have to be compulsorily registered with the District Social Welfare Office [DSWO]. This Rule has been in existence since January 2010. However, the Office of the DSWO in Coimbatore has not registered many retirement homes in Coimbatore. We also learn that the management does not even bother to meet the DSWO despite repeated requests.

We spoke to a cross-section of residents from various retirement homes in Coimbatore at a common meeting and were told that they were all supportive of the legal battle by Mr Krishnamurthy and that his cause was of concern to all of them. Many said that they suffered similar hardships at their retirement homes. Many residents across various retirement homes meet on the first Sunday of each month to discuss issues and exchange notes on the progress of their respective battles.

A few residents of Tapovan said that although the location and infrastructure of their retirement home is beautiful and good, the cost of the services and the management quality is an issue, especially the facility for medical check ups that were promised. A recurring issue was dissatisfaction with arbitrary rise in the cost of food and services.

They also alleged that contracts and agreements signed by them were modified for the benefit of the developers and then submitted to authorities. Mr PN Venkateshwar one of the first residents of Vanaprastha showed us proof of such altered documents. These included documents released by the developer in which the services, claims and amenities have been reduced, and some others made more expensive over time, without providing the residents any details about the cause or details of increase in expenses.

Mrs Pramila R who sold her house in Mumbai and moved to DhyanaPrastha in Coimbatore regretted her decision and felt trapped into staying on at the retirement home; many others shared her sentiment and said they had fallen for the slick marketing by the developer and the beautiful location of the retirement homes. The key points that emerged out of the discussion with the residents of the retirement homes were as follows

1. In the absence of clear rules and regulations, retirement homes that cater to middle and upper class Indians are being passed off as charities and registered as charitable trusts availing of tax exemptions.
2. There is a need for a clear regulatory framework for retirement homes to bring in transparency, accountability and grievance redress. Society owes it to our senior citizens.
3. The District Social Welfare Officer needs to be appropriately empowered to seek and receive answers from the management of retirement homes and initiate enforcement action against violations, until a proper regulatory framework is in place.
4. There is a complete lack of clarity about what happens to family run retirement homes in case the main promoter loses interest and the family is uninterested in the business. In the absence of regulation, this issue has been left open-ended.
5. Regulation that necessitates a standard agreement format between the developer/service providers and the senior citizen residents.

6. It was clear in our discussion that senior citizens did not do due diligence before entering the retirement home. Instead of allowing developers to paint a rosy picture about retirement homes, the government must work with NGOs in the field of elder care, and with large organisations, which have people retiring every year, to start awareness campaigns and help people make the right decision BEFORE choosing a retirement home.

Unless the government puts in place proper regulation, licensing, supervision and grievance redress mechanism with a clear administrative ministry, such examples are bound to have an impact on the growth of the retirement homes segment, which otherwise has great potential in India.

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15. VISIT TO 6 KOLKATA RETIREMENT HOMES

Kolkata isn't a peaceful place with agreeable climate. But it has second factor that normally drives the growth of retirement homes: a large exodus of local population that leaves elders looking for the comforts that retirement homes can provide. We located six retirement homes around Kolkata, of which one is under construction and one almost complete.



Jagriti Dham, a new upper-end retirement home, near Kolkata, which is almost complete.

1. Jagriti Dham (about to be completed): Jagriti is located 25 kilometres from the city centre, inside a huge area of 100 acres called Merlin Greens, which is owned by Merlin Group, one of the top builders in Kolkata. Jagriti is one part of the whole complex. The main occupant of the area is Ibiza of Merlin, a resort with rooms, lawns, dining facility and banquet halls for meeting, wedding and weekend recreation. The entrance to Jagriti and Ibiza are the same. Jagriti is owned by Infinity, another builder, founded by Ravindra Chamaria. Some of the facilities of Ibiza may be available for those who

By October- November 2017, Jagriti will start to hand over the first 24 apartments, located in the first floor, out of the 72 apartments. The main facilities all look complete. Overall

impression is extremely good. There is a huge library and 24/7 provision for doctors, nurses and pharmacy. Every floor will have a huge common dining space, with a kitchen attached to it. Residents can do minimal cooking in their apartments; there is a microwave for each one. More elaborate cooking in the rooms is not possible. There is a huge club with all the facilities of indoor games like billiards, table tennis, chess, a gym and an ATM. There are two huge lawns; one is in the middle of the complex, one behind.

Interestingly, Jagriti has built a temple, which was modelled along the lines of South Indian temples. "The temple was built by a whole set of masons and carpenters brought from Chennai. They were housed in the complex for two years when the temple was built. General Manager (Projects) VK Sood said. "I had to organise authentic Tamil food for them." The temple is already functional even though it will take months for the residents to come in. We had *Prasad* from the priest.

A lot of thought has gone into making the complex. Lifts have been designed to be slow and noiseless. Since senior citizens are likely to have trouble with technology which dominates our lives now, technical staff will be to help with email, computer printouts etc. when required. Short-stay is possible for guests of the residents -- family, friends and relatives.

The Bharat Sevasram Hospital which was started a few years ago and the well-known Akshaya Dham Temple, Nature Cure and Yoga Research Institute are all within a few kilometres of the site. Mr Sood was personally there to start off the tour for us, after which there were other knowledgeable staff that showed us around the complex answering all our questions. Before we left, we were treated with green coconut water from coconuts grown inside the complex.

2. Rukmini Amar Aangan: Run by Poddar charitable trust, this is located a bit earlier than Jagriti on the same road (Diamond Harbour Road). It is even smaller than Godhuli, though it has come up four years ago. The notable feature is a large lawn at the centre of the facility. The washrooms have Kohler fittings and anti-skid tiles from Spain. It has a small library and a small temple but no gym. We noticed that only 6-7 rooms of the 30 were occupied. A retired army official (Tanaji Patel) showed us around. Healthcare facilities are absent. There is a check-up when residents first enter but no regular check-ups. Since the facility is owned by a trust it is probably not getting the right attention. The entry fee is low but the monthly outgo

is not. The facility is open on all sides, which is a plus. We noticed two seniors quietly dining. We tried to speak to one other person, about how it feels living in a place with so few residents. He shrugged and said “what can we do, now that we here.”

3. Godhuli: Godhuli is the first modern retirement home in Kolkata. A businessman, who used to be close to CPI(M) when it was in power, owns it. The manager Kaushik Sengupta showed us around the place. It has all the facilities required but it is much smaller in size compared to Jagriti. It has a seniors’ gym, library, swimming pool, meditation room, tree house etc. Periodic health check-ups are organized but most of the healthcare facilities are on call. There are no 24/7 healthcare facilities like Jagriti. There is an arrangement with a pharmacy just outside who deliver medicines regularly. Some 16 more rooms are being added.

Residents can ask for outside food to be brought in occasionally. While the menu is standardized, residents can ask for special meals to be made at a price, if they order in advance. There are 58 apartments of which 51 are occupied. Since there is a large group of residents, often picnics are organized. On two occasions the residents had outings. There is a lot of camaraderie among residents and staff. Guest rooms are available on prior planned booking. Divers’ accommodation is also available on demand. The problem with the facility is that close to the highway and so it’s noisy.

4. Peace Senior Living: This facility is in Srirampur, Dist. South 24 Parganas, off Kolkata. We spoke to Atasi Banerjee (9051646116) about the facility, which has been running for nine years. It charges a security deposit of Rs6 lakhs interest free, fully refundable subject to minimum five years staying. Monthly charge is of Rs13,000 with no escalation. If anyone leaves before five years, 30% to be deducted for less than 2 years, 20% for 2-3 years, 10% for 3-5 years. However, this system is being discontinued. For less than 2 years it will levy a monthly charge of Rs20,000 without security deposit. The facilities include food, laundry, one check up a month and library. There is no swimming pool and there is not much space for outdoor recreation. There are 84 rooms of which 65 are occupied while for 17 rooms security deposit was paid but these are not occupied. They have stopped this system now if allowing

rooms to be kept unoccupied. Occupation will have to be taken on payment. Dr Dipankar Datta, who set up this facility is based in US. He is an expert in pharmacology. He comes thrice a year to visit. His brother-in-law looks after the property. Relatives of boarders can stay inside the campus now but this being broken down and there will tie-up with a local hotel. A big negative is that there is no proper drainage system. Refuse water is being accumulated at one place. There is no proper tie-up with any hospital. Baruipur hospital is close by but it is a government hospital with poor facilities.

5. Mahadevi Birla Niketan: Located in Bagirhat P.O, Bishnupur P.S, District South 24 Parganas, this is run by Jayashree Charity Trust is. We met Brijesh Kumar Yadav, superintendent, who refused to share much details mainly because the whole facility is now occupied. It charges a deposit of Rs54,000 (Non-refundable) while monthly charges are Rs9000 but charges for 6 months or Rs54,000 have to be paid in advance. Electricity charges are extra. The service includes food, laundry, health check up and library. There are 60 rooms all of which are fully occupied. There is no proper tie-up with any hospital. A hospital is close by but it is a government hospital with poor facilities.

6. Aumorto (Under Construction): Located near the bustling town of Baruipur, 38 kilometres from the Kolkata city centre, Aumorto is inspired by Sri Aurobindo Ashram, Pondicherry, conceived by Sri Aurobindo Institute of Culture and managed by Sri Aurobindo Sanjeevani Trust, Kolkata. It will provide facilities to people with 55+ years of age in luxury cottages or studio apartments. It is expected to be operational by the middle of next year. The campus would be large with swimming pool recreation centre. Security deposit will be Rs16 lakhs. There is facility to pay by EMI. Each unit will be around 380 sq. feet. Monthly charges would be Rs18,000 for one person and Rs28,000 for two. In Phase 1 there will be two types of units on each floor of the 5-storey building. The area of each Premier unit is 600 sq. ft. plus while the standard units would be of 380 sq. ft. All units would be air-conditioned, fully-furnished and comprise living space, resting space, a kitchenette, an attached bathroom and toilet, with a terrace/ balcony.

Residents would have access to medical facilities, emergency equipment, trained nurses care-giver services, meditation room, laundry, car parking, library facility, hall for lectures,

discourses and cultural programmes, indoor and outdoor games facility, daily scheduled physical fitness programme. There will be guesthouse facilities. Attendants will take care of banking needs. Residents can come with their cars. They can stay for part of the year, but will have to pay part of the monthly commitment. It will provide residents with a safety locker to keep all their jewels, valuables and papers. While it claims to have a tie-up with “a renowned hospital,” the nearest large hospital is 25-30 kilometres away.

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16. CASE STUDY: ATHASHRI, PUNE.

Athashri is one of the earliest initiatives which has turned out to be a very successful one. To understand its reasons for success we interviewed three persons with direct experience.

1. Interview with Col Thatte, Resident of Athashri

We had a discussion with Col. Thatte, who is on the residents' management committee of Athashri, Pune. Athashri is a well-run complex of retirement homes launched by builders Paranjapes. We are reproducing verbatim his comments and views.



One of the Athashri retirement complexes, Pune

Paranjapes were the pioneers of this idea and they came up with this model of building a retirement home in a city like Pune. There have been other attempts in the past that were for small groups. I know of two or three places at Khopoli, which is about 80 kilometres from Pune. But the place was nearly 20 kilometres off the main road, almost in the jungle with no medical facility nearby. These places were available on rental basis. My brother stayed in one of such place called Chaitanya near Jambulpada with his wife; there were about 10 couples that stayed there. The monthly charge took care of everything from tea at 6.30 in the morning to dinner and

a domestic help etc. They were quite happy with it, but over time, the absence of medical help became an issue. Every time he was unwell his son had to rush there, which was rather difficult. There was also no entertainment, except to enjoy the rural life.

In contrast, Athashri has grown into a chain – this is the sixth one. The Paranjape builders have other buildings too which are like regular housing complexes. This one has restrictions. You have to be at least 55 in order to buy a place at Athashri and you can live here only after you are 60. The first Athashri came up at Pashan, they had two sites over there; then Bawdhan, Hadapsar, Baner and there is something coming up at Hinjewadi and Bhugaon. This is how it works:

You have to purchase and own the apartment. Your children can also buy one for you, but they cannot live here until they are 60. There are many who buy apartments for their parents at Athashri, so that they can come and stay here, when the weather is extreme abroad. The children can stay with the parents – but on a short-term basis. Many apartments here have been purchased by Non-resident Indians who have lived abroad for the past 20 years or more and brought up their families there. They don't want to come back to India anymore on a permanent basis. They have bought these places for their parents and in-laws, knowing that it is well maintained and they get to live with people of a similar background and thinking.

That is my thinking too. I have two flats in Mumbai, and lived there for 25 years. Then our children moved away for jobs to the US. It was the same with many others in the neighbourhood. We have very few people of our age group with common interests. All the younger people were busy with their own lives. So we decided to shift here. What we liked about this place is that there are many people with similar background and of our age group. There has not been any problem of affordability. The flat values have also gone up. Many of us purchased apartments at around Rs29 to 30 lakhs – these are now selling at Rs50 to 55 lakhs.

We don't have to pay anything. The system over here is that when you book a place, every purchaser has to make an interest-free deposit of Rs3 lakh. This building has 180 flats, so there is a corpus of Rs5.40 crore. The interest on this corpus is used to run and maintain the complex. The deposit was collected for an 8-year period, after which it is supposed to be returned. Cost escalation was not an issue all this while but it is a little difficult to manage now with the interest rates on fixed deposits having declined. About six months back there was some proposal to increase the deposit when the present 8-year term ends.

We also collect an 'assessment' charge annually, which depends on the size of the apartment. For a one-bedroom apartment, this charge started at around Rs5500 but it has now increased to about Rs8000. A three-bedroom apartment owner pays over Rs10,000. The management committee comprising of flat-owners decides this charge. The assessment charge is used for building repairs, painting etc. Internal repairs have to be taken care of by members themselves. The committee is formed by an election. One-third of the committee is elected every year from among people who reside regularly. The tenure of the elected representatives is three years.

The committee decides on rules and regulations. Some of these flats can be given out on lease to tenants. So we decide the rules for tenancy as well. We have a tenancy committee that interviews potential tenants. The flats cannot be given out directly on lease; moreover they have to pay an administrative charge and one month rent to become tenants. Sometimes we have people who are 85 or 90 who want to lease a place and they are often invalid and need assistance. We have to be careful about this, since the place is not suitable for them.

We provide around 25 services to members, which become available to all, whether they are owners or tenants. Cleaning and maintenance of public areas (each of the corridors are swabbed everyday), gardens, swimming pool, club house, cafeteria, gymnasium, domestic help and security who are on contract basis, ambulance which is available, a bus, doctor etc. Disputes are handled well. There is a complaint book where people can write down issues. The management committee itself decides on disputes and if a person is making a wrong complaint or raising a non-issue, he/she is called by the management committee and talked to.

2. Interview with Yogini Ravat, short-term resident of Athashri

We interviewed Mrs Yogini Ravat who lived in the Athashri retirement home from July 2016 to December 2016 for a period of six months. Here is her experience of living in Athashri, presented verbatim.

"My experience of living in Athashri was great. I had a very good and peaceful stay. While all the units in Athashri have been sold out, any owner, with prior permission and contract with

the developer, rent out his flat. Since Athashri has built a reputation for itself and the lifestyle provided is appealing to senior citizens, there is a long waiting list for taking a house on rent. All the claims made by the advertisement and promotional activities are correct.

One of the major challenges faced by senior citizens like me is finding and retaining good house helps. Even if you find them, they may take frequent leaves. Senior citizens are also scared about their security and reluctant to hire new helpers. Athashri solves all these problems by having designated trained housekeeping staff. When I moved in, a helper was sent by the developer to meet me and assess the different chores that would be required to be done. Based on this, I had to fix a monthly charge with her and make payments accordingly. The best part is that in case the helper goes on leave, the developers arrange for an alternative. At a senior age, when performing daily chores is difficult, such a facility is a big boon. During my stay I paid my house help Rs1700 per month for all the services and was happy with the housekeeping.

All residents pay a monthly maintenance charge to the developer, which is used for maintaining the garden, providing security and other services. While the other services like food, housekeeping and medical facilities are to be paid for separately. Residents have access to doctor for consultation every day and have to pay charges as per the services. There is also free ambulance service in case of medical emergency. A resident can also speak to a doctor affiliated with HealthSpring hospital with which Athashri has a tie-up.

One of the major concerns for senior citizens is safety. Athashri has excellent security in the form of alert security guards and CCTV cameras. Any outsider entering the retirement home has to fill in his/her details at the gate and the resident whom the outsider is meeting is given a call to confirm the identity and person of the person visiting. Every time a person is delivering groceries or medicines I am called to confirm that I am expecting a delivery. Such care made me feel secure.

The infrastructure is friendly for senior citizens and the disabled. All common facilities have railings and grab bars. The doors of individual houses and bathrooms are wide for easy movement of those in wheelchairs. Every building has wheelchairs at the entrance, which is a very helpful. Residents are provided meals in the common area and the variety and dietary

preferences are kept in mind. We had to pay per the meals we wished to consume. Besides, one also has the option of preparing our own food in the kitchen in our homes. But most of us preferred eating in the common canteen as we got a chance to meet and interact with other residents. Residents who are bedridden or cannot come down to the common area can also request to be sent food to their house.

Recreational activities are important as senior citizens tend to get lonely or bored at times. They love to interact and meet other residents. One of the best features of Athashri is the recreational activities organised by a committee of the residents. There were music shows, competitions and games. The developer also arranges talent shows and events. There is an annual function where one could dance, sing and act. Every 10 days there is some event or recreational activity organised for the residents. I used to enjoy going for the daily *aarti* every evening in the temple, which was followed by catching up with other residents. The atmosphere was full of bonhomie and happiness. The residents also go for a Marathi play or movie sometimes in the main Pune city. Athashri has a free bus service to the Deccan area of Pune twice a day for residents. Shopping for daily essentials and grocery is also made easy as there is a convenience store and pharmacy close by. The shops deliver to the senior citizens. This is a boon for us.

Only senior citizens are allowed to live in Athashri and the residents sign detailed contracts with the developers that include details of their rights. In case a resident passes away or wishes to leave the retirement home, the process is well laid out. There are committees, formed by the residents, to oversee recreational activities, food, garden maintenance and repairs etc. These committees manage the day-to-day affairs and residents like to devote their free time to maintaining the retirement home. All major repairs and maintenance work is looked after by the Athashri management. There is also a procedure for filing complaints and grievances. Residents must submit written complaints to the main office, which is headed by a representative of the developer. The committees in charge can resolve smaller day-to-day issues.

The six months I spent at Athashri were peaceful and enjoyable. Not only did I get a range of services that are difficult to do by myself in Mumbai but I also got a chance to interact and

spend my time with like-minded senior citizens. Athashri is an example of a well-managed retirement home.

3. Interview: Dhananjay Date, former country head of Swiss Re (now retired) on his Mother's experience at Athashri

Mr Date's mother moved to Athashri in Pune when he was posted abroad because she preferred to stay back in India. She is now over 90 and lives with him ever since he and his wife moved back to Pune and have built a home in the city. He narrates his experience with Athashri

"Our association with Athashri was from 2003 to 2014-15. This was the original Athashri 1 and 2. Since then, two more retirement complexes have come up, as well as an assisted living facility. Ours is the rare situation where I returned to Pune. Otherwise my mother would have continued to live at Athashri. She was very happy there and has many friends. The thing about Athashri is that atmosphere was very bright. If you go to an old people home in western countries the atmosphere is often sombre and depressing. You don't get that impression at Athashri at all. I believe it is because 99% of the residents know that this is their last place of residence and it is up to them to look out for one another. What struck me as interesting was that if someone was unwell, the others would make it a point to inquire after his/her health and give them company and assistance. The structure of the apartments is also conducive to such interaction. It comprises apartments of one and two bedrooms – all of them open into a corridor that leads to the lift lobbies. In addition, there are visitors rooms on each floor. So when sons or daughters of residents visit, they can either stay with the resident or in the guest rooms. I used to visit my mother at least once a month and invariably stayed at Athashri and have first hand experience of the spirit of bonhomie among residents.

The cafeteria or mess used to be a good meeting ground and the centre of engagement and interaction for residents. Athashri had recreation facilities such as a card room and a swimming pool that were well maintained. They also organised picnics and outings. There was a bus that made two trips to the city centre everyday to allow residents to shop or do their chores. Festivals were celebrated with gusto and there were other events too to ensure a lot of interaction among residents. The residents were a part of the management committee. It

was a big plus point that Athashri accepted 100% payment by cheque – from the very beginning. An additional deposit was collected from each resident that went into a corpus, where interest earned took care of the maintenance charges. Those days the sum collected was Rs 75,000. (It has gradually increased to Rs 3 lakhs over the years).

My mother initially moved into a one-bedroom apartment, but after a while she moved to Athshri 2, where we bought two, one-bedroom apartments and joined them to create a comfortably big space. I found that the ownership model was important. It was psychologically satisfying for senior citizens living at Athashri to know that they owned the place and it was not a rented apartment with any danger of them being asked to leave. A management committee comprising the active residents, runs the complex. The residents elect the management committee, which decides rules, regulations and policies. They also vet every prospective buyer before a flat is purchased. Most residents are not aware of any disputes turning into flash points, since the residents committee deals with issues and sorts them out. In terms of everyday needs, the society had an electrician and plumber on its rolls. The domestic help are vetted by the society to ensure safety. There was a well-equipped medical room. Doctors were available.

17. RETIREMENT HOME AS SOCIAL ENTERPRISE



A group of residents in Snehanjali retirement home

While we have met and interviewed some residents of retirement homes we wished to get the perspective of the developers and management of retirement homes too. We had an opportunity to interact with Mr Sailesh Mishra who runs two retirement homes in Maharashtra. He is the Founder President of Silver Innings Group and the founder of A1 Snehanjali, an assisted living elder care home. Mr Mishra talks about his experience in starting a retirement home and running it.

Challenges faced while starting A1Snehanjali:

Mind-set: India as a country is still a society where elders are respected and part of a family. While urban areas are warming up to the idea of retirement homes, from our experience there is still a social stigma attached towards children whose parents are in retirement homes. Senior citizens too feel that it is their children's responsibility to take care of them in their old age. Initially in 2008, when I started Silver Innings, I myself was against the concept of 'old age homes' due to the poor conditions and the way the residents are treated. By 2012, my

opinion had changed and I felt the need for specialized care homes or retirement homes for senior citizens.

Location: As a developer or a person building a retirement home one of the first problems we faced was acquiring land. Land is costly and difficult to find near big cities. The cost of land is so expensive that it takes more than three years to break even while running a retirement home. Hence most retirement homes are built outside cities or on the outskirts of cities. To build A1 Snehanjali we wanted a peaceful and large plot so we could provide the right surroundings to the residents to lead a peaceful life. We got a piece of land on a 10-year lease in the outskirts of Mumbai at a reasonable cost. From the financial perspective, we could break even faster.

Finance: As I did not have much experience in running a business and am not from a management background, the financial aspect of running a retirement home was an uphill journey. I found it very difficult to get a loan from a bank to build the retirement home. Banks are not used to being approached by developers for retirement homes. The banks we approached, found the terms 'elder homes' and 'assisted living' new. Banks are wary of individual developers or smaller developers, but fund larger construction houses for building retirement communities. Fortunately I got help from friends and family and I could collect Rs20 lakhs and then started our first home in August 2013.

Human Resources: This is the biggest challenge while running a retirement home. I found it very difficult to find the right people to work in the elder care industry. Very few people are professionally qualified for geriatric care. There is no incentive to work in the elder care industry. Dealing with senior citizens requires patience and is a demanding job. Sometimes the residents are physically or mentally challenged and taking care of them is tough. The staff also do not see growth prospects in this industry and exit. If you get people and train them, then its difficult to retain them. Also you might get professionally qualified people, but they are not affordable. But I feel that even if you find qualified staff with the right attitude towards senior citizens, you must retain them despite the higher costs, since finding staff with the right attitude is very difficult.

Motive: The classification of retirement homes as not for profit NGOs or Trusts or commercial retirement communities is one of the most crucial aspects. While not for profit organizations operate retirement homes as a social enterprise, builders and construction companies build retirement homes for making a profit. While I built my retirement home as a social enterprise, I am aware that many builders construct retirement communities as a part of their business to make a profit. The human touch is a very important aspect of retirement homes. I believe that adding the human touch while running a retirement home is what differentiates retirement homes run by NGOs and retirement homes run commercially. However it is important to realize that just because the retirement home is being run as a social enterprise they do not need any money for day-to-day operations. Social enterprises are not to be looked at as charities.

Marketing: The retirement home I run is small and we do not have adequate funds for marketing. We have to rely on word of mouth and our reputation depends on the satisfaction of the residents. This is the ideal way a retirement home should be run. In commercially run retirement homes huge promotional expenses are incurred such as advertisements in newspapers. Senior citizens sometimes get blindsided by the publicity and do not get feedback from actual residents. The lack of funds for marketing poses a huge problem. Our first facility has a capacity of 10 and due to the increasing demand we constructed a new facility with a capacity of 12.

Running and Maintenance: It is relatively easier to start a retirement home but very difficult to maintain and run it. Generating income, maintaining quality, maintaining staff, reducing expenses and keeping the residents happy are all continuous processes.

Food: Being a country of many religions, communities and cuisines, catering to the different dietary preferences of all the residents in a retirement home is a huge task. Dietary preferences and dietary constraints are innumerable and maintaining the variety and quality requires effort and interest by the developer/management.

Diversity: In India we have a melting pot of cultures and religions. From diets to traditions, from festivals to social interaction preferences, there is a great range of preferences in the

population. In such circumstances, creating occupational activities, recreational activities, daily food menus and a harmonious environment for all the residents is a consuming task.

However, despite all these problems, running a retirement home is a very rewarding experience personally. Interacting with the satisfied residents and their grateful families is what keeps me going. I have children of the residents of my retirement home thanking me for the care and love with which I take care of my residents. Over the years we have started making a little profit. With the profits we were able to start another retirement home. I believe that "Forget yourself for others, and others will never forget you". Living by this, I have made my retirement homes oasis for senior citizens to live their old age with peace and dignity. The problems that we face while running the retirement home are insignificant when compared to the joy and happiness we bring to the lives of our residents and their families.

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18. CHECKLIST FOR CUSTOMERS

Remember you plan to spend the rest of your life (or at least the next 15 to 20 years) at the retirement home and at a time when you are only getting older. This is not a decision you make in a hurry. It is also not an investment. Here is a checklist to keep in mind.

- 1. Check it out:** Ideally, find a home that has guest-room facilities that allow you to check out whether the lifestyle will suit you. Plan to stay for at least a week before you make up your mind and stay at the retirement home for a week or two. You will notice things that are missed out in a quick tour. Focus on the attitude of staff and residents – do people they look relaxed and happy? Get your family and children to visit the home too; it would reassure them that you are not going to be lonely and cut-off.
- 2. Type of facility:** Check the climate, design and layout of the community. Make a basic choice even before you start looking such as whether you want a resort-like place or a housing complex.
- 3. Language:** In India, language is an important issue. For instance, someone from the north will find it tough to retire in Kerala, however, pretty the facility is, if all the staff and other residents speak only the local languages.
- 4. Food:** Remember you expect to give up the chores of cooking and cleaning and live with this food to give up the daily chore of cooking and will have to eat that food for the rest of your life there.
- 5. Daily Living:** Check the claimed amenities within the unit as well as of the shared facilities such as housekeeping facilities, hygiene, cleanliness, maintenance (including pest control), infrastructure (ramps, guard rails, anti-skid tiles etc.).
- 6. Residents' Involvement:** Check whether residents are consulted in management and running of the premises is an important consideration
- 7. Staff:** Patience and empathy is needed to handle seniors. Is the staff trained for it?

8. Medical facilities: Is the promised infrastructure available at all times (doctor, nurse, fully equipped medical room with supplies, stretcher, wheelchair etc.). Are residents registered with full-facility hospital nearby (it is important that there is such a hospital within 30 minutes drive).

9. Recreation: Does the retirement home have a good television room, card/ games rooms, and open spaces for functions, garden and temple? Ideally, you need a place that has a focus on recreation and organises entertainment, talks and music programmes, shopping and movie outings, picnics, celebrations etc. on a regular basis.

10. Connectivity: Distance from city centre and whether access to it is made available to residents through regular buses etc. You are retiring but not cutting off from family and friends. So proximity to city centre/relatives, banks, entertainment and shopping are important when you are healthy. Proximity to friends and family is important because you will want to visit them for family functions and festivals.

11. Affordability: Check actual monthly expenses that includes monthly maintenance charge, food, cost of housekeeping help, including laundry, medical costs and personal expenses including entertainment. Do an affordability check by adding these to your initial cost of enrolment. Remember, these will rise every year.

12. Financial Commitment: Ideally, do not tie up all your funds in a retirement home until you are sure that you want to spend the rest of your years there. Keep some options open. In Pune, there are parents who have locked up family homes and moved to a retirement community. They open up the homes for a few weeks every year when the children come to visit them from abroad. Some seniors like to rent out their apartments when they move to a retirement home. This allows them the option of changing their mind, especially if there is a decline in the maintenance and service quality. This is especially pertinent in India because most retirement homes here are brand new and there is no track record to go by. Buying outright is sometimes risky, so carefully scrutinise the terms of ownership and check for buyback options. If you are paying a deposit, clearly understand the terms and conditions for refunds.

13. Security: Security arrangements for the premises and insurance cover for the home.

14. Cultural: Recognise and accept your own cultural biases and whether you can adjust to a cosmopolitan mix of people. It is also important to know that you won't be living with a set of people who feel abandoned by their families, but rather with people who are looking to enjoy another phase of their lives. A retirement home is not a short holiday, so think longer term before making a choice.

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19. CHECKLIST FOR PROMOTERS/ BUILDERS

1. Financial model
2. Regulatory compliance
3. Ownership of common areas
4. Operating Policies and procedures
 - a) Documentation
 - b) Admission screening
 - c) Food preparation and service
 - d) Recreation facilities
 - e) Security
 - f) On-going repair and maintenance, safety, pest control
 - g) Regular health check-up
 - h) Tie ups with hospitals close by to handle emergencies
 - i) Disability-friendly facilities
 - j) Pre-agreed formula of increasing maintenance charges
 - k) Comprehensive insurance
 - l) Records of each resident
 - m) Staff, specially trained to handle seniors
 - n) Records of employees and staff
 - o) A mandatory mechanism for dispute resolution
 - p) Notice of change in services
 - q) Transfer of title/ ownership; refund of deposits as per terms
 - r) Conditions that govern termination of rights of residents
 - s) Inspection of facilities
 - t) Mechanism for takeover and continuation of services in case of mismanagement
5. Assisted Living, when needed
6. Scope for Reverse mortgage

20. INTERNATIONAL SCENARIO

Retirement homes are popular in most developed countries such as US, Canada, Japan, and New Zealand. While there may be a few differences in the structure and facilities offered by these homes, what they have in common is the fact that respective governments of each of these countries extend support and incentives for retirement homes. They have also put in place appropriate regulatory guidelines covering the structure, management and operations of such facilities. **We noticed that the business models of the developed countries are not relevant for India since US and most of Europe have strong state support, insurance cover and social security.**

19.1 Canada

In Canada, the state government of Ontario introduced the Retirement Homes Act in 2010, marking the first time in Ontario's history that seniors living in retirement homes have strong protections under provincial law. The Retirement Homes Act, 2010 includes the following:

1. Establishes mandatory care and safety standards, and requires emergency plans, infection control and prevention programs, assessment of care needs and care planning, police background checks and training for staff.
2. Establishes residents' rights, including the right to know the true cost of care and accommodation and the right to live in an environment that promotes zero tolerance of abuse or neglect.
3. Creates the Retirement Home Regulatory Authority (RHRA), that licenses homes, inspects retirement homes to ensure they meet prescribed standards, investigates consumer complaints, enforces the Retirement Homes Act, including issuing financial penalties or revoking licenses if necessary, and educates licensees, consumers and the public. The RHRA was constituted in January 2011 and began enforcing select provisions of the Retirement Homes Act in May 2011. Licensing of retirement homes began in July 2012.

RHRA is an independent, self-funded, not-for-profit corporation established by the Ontario government under the Retirement Homes Act, 2010, responsible for administering the Act. The Act contains care and safety standards and other requirements applying to licensed retirement homes in Ontario. Regulations provide additional standards and requirements for licensed homes, and requirements relating to the RHRA's administration of the Act.

Redress: All retirement homes are required to have a complaints process in place. All complaints must be in writing. To file a complaint with the RHRA about a retirement home, a RHRA Complaint Form must be filled and sent to the R-HRA. Due investigation is undertaken and complainants receive replies from the Registrar about any actions the RHRA has taken, and any decisions made as a result of the complaint.

Rights of residents: The Act sets out a Residents' Bill of Rights to respect and promote the rights of residents.

License: Businesses meeting the definition of "retirement home" in the Act require a license to operate in Ontario. The Act sets out exemptions to the definition of retirement home, including premises that are governed or funded under the Developmental Services Act, the Homes for Special Care Act, and the Long-Term Care Homes Act, 2007.

Obtaining a license: Businesses meeting the definition of "retirement home" in the Act now require a license to operate in Ontario.

A "retirement home" for the purposes of the Act is a building or related group of buildings, or a part of a building or a part of a related group of buildings, with one or more rental units of living accommodation that meets the following criteria:

- Occupied primarily by persons who are 65 years or older
- Occupied or intended to be occupied by at least six persons who are not related to the operator of the home
- Makes available at least two of the 13 care services set out in the Act (listed below), directly or indirectly.

Care services for the purposes of the Act are administration of a drug, assistance with feeding, bathing, continence care, dressing, personal hygiene, ambulation; provision of a meal, dementia care program, skin and wound care program; any service that a member of the licensed physicians, surgeons, nurses, pharmacists of Ontario provide. The Act sets out

exemptions to the definition of retirement home, including premises that are governed or funded under the Developmental Services Act, the Homes for Special Care Act, and the Long-Term Care Homes Act, 2007.

Once determined that it is a retirement home, the developer will be required to submit an application, supporting documents and the application fee to the RHRA. Ontario, Canada also has a very good concept of Elderly Persons Centres (EPCs), which offer of social, cultural, learning and recreational programs for seniors. Each centre is unique and will have different programs that meet their local needs. The centres promote health, well being and involvement in the community through programs such those related to fitness and healthy lifestyle.

This is an important legislation that establishes the need for formal enactment to protect the rights of those living in retirement homes. It has important provisions that India can emulate in framing our own laws.

11.2 Singapore

The retirement homes in Singapore are governed by the “Homes For the Aged Act” (CHAPTER 126A) (Revised on 30th April 2014). Every person who carries on a home for the aged must have a license. Running a home without license invites not exceeding \$5,000 or imprisonment for two years or to both. A license is valid for two years. The following services must be provided by these homes, if not, then their license will be revoked

1. Sanitary facilities

- Bathrooms, wash areas and toilets shall be tiled with non-slip tiles.
- Handbars and grab bars shall be provided in the bathrooms and toilets.)
- Toilets shall be maintained in a clean and sanitary condition and kept in a good state of repair at all times
- Walls of toilets shall be lined with glazed tiles to a height of at least 2.2 meters
- The walls behind and above all wash-basins, except those basins located in toilets, shall be tiled with glazed tiles to a height of not less than 0.45 meters.) Soap holders or dispensers shall be provided for all wash-basins
- Prompt action shall be taken to rectify any defective fittings or choked water-closets.

2. Kitchen facilities

- The kitchen, if provided, shall be kept clean at all times.
- Surfaces which come in contact with food shall be constructed of non-corrosive and impervious material.
- Dishes shall be washed in sinks with draining boards connected to the sewers and not on the floor.
- Appropriate dish draining facilities shall be above floor level.

3. Dormitories

- Dormitory floors shall be washed and cleaned with disinfectant daily.
- All containers/bed pans used for defecating by residents shall contain a disinfectant solution.
- All areas within the dormitory that are dirtied shall be cleaned immediately with disinfectant
- All bed pans shall be cleared and disinfected after use.
- Bedsheets shall be changed at least once every week and whenever they are wet.

4. Dining area

- The dining hall shall be mopped daily with disinfectant.
- Disposed food shall be properly wrapped and preferably disposed of in plastic bags.

5. Environment of the home

- Checks shall be carried out to ensure that there is no indiscriminate disposal of organic/food waste within the home or home's compound.
- All waste must be collected in plastic bags prior to placing them in bulk bins.
- There shall be no receptacles containing stagnant water to prevent the breeding of mosquitoes.
- There shall be proper drainage of water and water pollution control.
- All water-closets, urinals, bathrooms and drains shall be kept clean at all times.

6. Laundry

- Separate storage areas shall be provided for soiled and clean linens.

7. Preventing food from being contaminated

- Any food handler who is sick or who suffers from influenza, skin infection or diarrhea shall not be allowed to prepare food.

- All food handlers shall wash their hands with soap and water before preparing food, especially after visiting the toilet or urinal and shall also wear clean clothes while preparing food.
 - Cooks shall be required to maintain a high standard of personal and food hygiene.
 - Care shall be taken to keep raw food separate from cooked food.
 - Food samples shall be made available for bacteriological analysis whenever required.
 - There shall be regular inspections of the kitchen to ensure that there are no lapses in the standard of personal and food hygiene.
 - Any leftover food shall be discarded.
8. Maintenance of cooking utensils and equipment
- All utensils and equipment shall be cleaned, dried and properly stored, if not in use.
9. Disposal of rubbish
- A bin center shall be constructed to facilitate the collection of rubbish, where applicable.

19.3 United States of America: The US, which has long had a tradition of nuclear families, has three kinds of facilities for seniors.

1. **Adult day-care centers** – Where people are able to spend the day and meet their emotional and socialising needs.
2. **Assisted living communities (ALCs)**, which are meant for those who need assistance with their day-to-day, living. This segment has seen explosive growth and there is a strong need for it in India as well.
3. **Independent living communities (ILCs)**, which are retirement homes or townships with ‘resort’ type residential spaces where all the household management facilities and comforts are provided.

The US government has put in place several regulatory norms for managing and operating such facilities. They include:

Section 202 of Supportive Housing for the Elderly Act (Signed into law January 4, 2011)-

The Section 202 program expands the supply of supportive affordable housing for the

elderly, and enables seniors to age in-place. Administered by Housing and Urban Development (HUD), the program provides interest-free capital advance grants to private nonprofit organizations for the financing of the construction, rehabilitation, or acquisition of supportive senior housing units. The program also provides Project Rental Assistance Contracts (PRAC) to subsidize very low-income elderly renters.

Elder Justice Act (Signed into law March 23, 2009 as part of the Patient Protection and Affordable Care Act) aims at developing and implementing strategies to decrease the likelihood of elder abuse, neglect, and exploitation. The Act utilizes three approaches to accomplish its mission of promoting elder justice: the first is the creation of a Coordinating Council and an Advisory Board, both of which are charged with recommending multidisciplinary tactics for reducing elder abuse at the local, state, and federal levels; the second is the allotment of grant money and monetary incentives to improve staffing, quality of care, and technology in long-term care facilities and boost the effectiveness of states' adult protective services departments. The third, and perhaps most significant approach, is a provision of the EJA that requires facilities receiving federal funding to adhere to a strict reporting requirement.

The **Older Americans Act of 1965** was the first federal level initiative aimed at providing comprehensive services for older adults. It created the National Aging Network comprising the Administration on Aging on the federal level, State Units on Aging, and Area Agencies on Aging at the local level. The network provides funding, primarily based on the percentage of an area's population 60 and older, for nutrition and supportive home and community-based services, disease prevention/health promotion services, elder rights programs, the National Family Caregiver Support Program, and the Native American Caregiver Support Program. It supports home and community-based services, such as meals-on-wheels and other nutrition programs, in-home services, transportation, legal services, elder abuse prevention and caregivers' support. These programs help seniors stay as independent as possible in their homes and communities. In addition, OAA services help seniors avoid hospitalization and nursing home care and, as a result, save federal and state funds that otherwise would be spent on such care.

19.4 New Zealand

In New Zealand retirement homes operate under the Retirement Villages Act 2003. The statute governs the operation of these homes and the rights of those who live in the retirement villages. The rights of the residents include the following:

1. Right to be supplied with information relevant to occupancy
2. Rights with respect to charges levied on residents and changes with respect to the charges.
3. Right to services and other benefits promised in the occupation right agreement.
4. Right to information relating to any matters affecting the terms or conditions of residency.
5. Right to be consulted by the operator about any proposed changes in the services and benefits provided or the charges
6. Right to complain to the operator and to receive a response within a reasonable time.
7. Right to a speedy and efficient process for resolving disputes between resident and the operator.
8. Right to involve a support person or a person to represent the resident in any dispute.
9. Right to be treated with courtesy and have rights respected by the operator, the people who work at the village, and the people who provide services at the village.
10. Right not to be exploited by the operator, the people who work at the village, and the people who provide services at the village.

This Act is administered by the Ministry of Business, Innovation, and Employment.

Commission for Financial Capability monitors the effects of the legislation and Code of Practice and the establishment and oversight of the disputes panel system. An occupation licence is a personal right only. Residents do not own the property, but have a contractual right to occupy that particular dwelling. Unlike normal property ownership, residents are not usually able to mortgage the property or register any other interests such as a caveat against the certificate of title. One cannot sell or transfer the right to occupy.

The full purchase price (sometimes referred to as a capital payment) usually includes a membership or amenities fee of approximately 25% or 30% of the full purchase price. This fee amortises (or depreciates) over 3 or 4 years on a pro-rata basis. For example, if the period specified is 3 years and a resident leaves the village within 3 years, a portion of this will be

refunded. If they leave after 3 years, it will have fully depreciated and the amount they will get back upon termination of the occupation right or licence will be the full purchase price paid less the membership or amenities fee (usually 25% or 30%).

Other payments include, a village outgoings fee payment, which is usually payable monthly and is usually subject to cost increases over time. The obligation to pay this fee often continues after termination of the occupation licence for either 6 months or until resale. Other costs such as medical care, hairdressing services, cleaning services and any other services which a resident may elect to utilise and pay for on a user pays basis, at the going rate. Any utility charges relating to your unit such as electricity, gas, telephone/tolls etc. are not included in village fee. Administration charges where goods or services supplied are charged through the Village.

In case of natural disasters, the Village is not usually obligated to expend any more money to reinstate than it receives under its insurance. If the money received is not deemed to be adequate or the Village decides not to rebuild then it usually terminates the occupation right agreement. Alternative accommodation, while the property is being reinstated, may be at your cost or the cost of the Village.

In addition to the obvious right to live in the unit, there could be other rights and obligations. These might include whether friends or relatives can stay in the unit; make any alterations or additions to the unit; sublet the unit; have any say regarding the resale or marketing of the unit or keep a pet. The obligations are in respect of the interior of the dwelling and whether a resident is responsible for the cost of repairs and maintenance, and for the full cost of refurbishment on termination; insurance obligations; any Village rules (including parking rules) and/or codes of conduct.

In case of transfer to a new dwelling within the Village, the amount that is repaid will be put towards the amount a resident will be required to pay for the new dwelling, which will be at the current market price at that time. A resident may also be required to pay a further membership fee.

19.5 Japan

Recognising the need of their aging population, the Japanese government has implemented several policies that make ensure that older adults are self-sufficient and independent with proper living arrangements and all the necessary facilities. The Japanese system makes institutional, home, and community-based services such as home-help and rehabilitation services available to every individual aged 65 years or above who is certified to have physical or mental health needs irrespective of income levels and family support. Modern welfare facilities started in the 1890s as sporadic philanthropic activities sponsored by Buddhist and Christian organizations devoted to saving the destitute and family-less elderly. Such houses were called *yoroin*, literally support houses for the aged. The imperial government was reluctant to develop welfare services for its people, partly because of the cost and the unfamiliarity of the notion of public welfare, but mainly because of the ideological threat to the *ie* system that such services implied. The *ie* system was an integral element of imperial rule, a system under which welfare was a private issue, not a public issue. If public welfare was needed, then the *ie* system which promoted self-sufficiency and taking individual responsibility, was seen to have failed.

In 2000, the *kaigo hoken* (nursing-care insurance) law was passed, under which the government took an interest in nursing homes. As part of the law, the central government provided assistance to startup businesses in senior care, including the construction. As a result, nursing homes became a growth business, and as with all new endeavors, there were many problems the authorities didn't sufficiently plan for, including high-profile scandals involving false financial reporting for licensing purposes, as well as safety problems.

Japan houses hundreds of these small nursing homes, most of them built in the past 15 years, which take advantage of cheap land in remote areas. Local governments in more populous regions often transfer seniors with low incomes to these nursing homes because the ones in their jurisdictions don't have enough room. This means those seniors are being forced to relocate to unfamiliar places because they can't afford care where they live.

Matters have improved in recent years, but the system remains complicated. As with all lifestyle-related transactions, the more money a senior has to begin with, the more numerous are the options. Private nursing homes in large cities and suburbs are open to anyone who can pay for them, but the price can be high. Often there is a *nyūkyokin* (moving-in fee) that can be anywhere from ¥5 million to ¥100 million. These fees are treated as a kind of deposit. A portion, up to 20%, is automatically taken when the new resident signs a contract, and over the years the rest of the fee is treated as depreciation, depending on the kind of contract. If the resident leaves the facility, an amount proportionate to the period of residence is retained and the remainder returned to the individual, but in most cases “leaving” means dying, in which case the balance goes to the person’s heirs.

Also, in recent years more of these retirement homes are not charging any moving-in fees because more seniors are refusing to pay them, but in such cases monthly rent is higher. Obviously, money can be made from such facilities, and an increasing number of foreign-investment funds are buying up existing nursing homes in Japan.

The majority of Japanese, however, are expected to opt for public or semi-public nursing homes, which are increasing in number but not fast enough to keep up with demand. Public nursing homes can be divided into two general categories: residence and facilities. Residence homes only provide room and board. There are no care-giving services. The amount of nursing-care insurance payments a senior receives depends on the assessed grade, with 1 requiring no medical care and 5 requiring a great deal. If a person in a resident home becomes chronically ill or starts showing signs of dementia, the home may ask him or her to leave.

Most facility homes are designated as *tokubetsu rōjin hōmu*, or special old-people’s homes. Basically, these are public facilities for seniors who don’t require hospitalization but still need some ongoing medical treatment, which means they can receive nursing care and rehabilitation as needed. According to new health ministry guidelines, seniors who remain hospitalized for three consecutive months must be moved out, presumably to such homes where they can receive the same care, the idea being that normal hospitalization is an unnecessary drain on the insurance system.

There are also group homes, where elderly people who are healthy have live-in staff who cook and clean for them. There is also *kōreisha jutaku* (rental housing for old people), meaning private apartments set up by companies especially for seniors to meet their specific needs, but they usually don't include care facilities, which require special certification.

19.6 China

China, which long relied on the tradition of filial piety, is shifting to long-term care goals by establishing alternative care giving arrangements. Through their Elder Care Home without Walls Program, the government of China has made trained service providers available for the elderly. These service providers are paid by the government and the elderly can use their services through phone calls to local government. The regulatory regime of Retirement Homes, the profitable and non-profitable institution differ a lot in policies, especially in the zoning and construction of facilities, taxations, infrastructure cost, and most important, for non-profitable nursing homes, the local government would probably give some financial subsidies, which is however only enough to cover daily costs of the services, and investors cannot enjoy profit.

19.7 Germany

Germany has one of the world's highest percentages of residents aged 65 and older. By 2050, 30% in Germany would be more than 65. The social care system and long-term care insurance in Germany covers the entire population under which around 2% of one's paycheck goes towards a pool of money for long-term care insurance. When an individual is in need of care, he or she goes to a nursing home; the insurance covers a part of the cost. Rising costs and falling standards in German nursing homes have influenced elderly Germans being sent to nursing care in eastern Europe and Asia. As German retirees are increasingly unable to afford the growing costs, it is expected more residents will be sent abroad. Entering a German retirement home or nursing care is not a popular trend in Germany. In a recent public health insurance survey, about 82% of Germans say they do not want to grow old in a nursing home. This has led to creative solutions, such as retirement 'communities' where groups of retirees live in separate apartments in the same building or

even rent out rooms in large accommodation, with a focus on group activities, communal spaces and shared services, such as 24-hour nursing care.

The government implemented a law in 2013 that provided seniors with the possibility to get a grant of up to €10,000 to establish a community apartment, plus a monthly subsidy (around €200) for every tenant (A Good Life in Old Age? Monitoring and Improving Quality in Long-Term Care, OECD Publishing, 2013.). Another project in 2015 aimed for similar goals, known as 'Gemeinschaftlich wohnen, selbstbestimmt leben' (Communal housing, independent living), which provided financial support to some 30 senior community living projects across Germany. Construction companies are also responding with private senior housing projects, with even the publicly-owned housing company, Howoge, jumping on board with several senior housing projects in Berlin.

11.8 UK

The Office for National Statistics says the number of Britons aged from 60-74 years old will rise from 9.25m to 10.9m by 2025, while those aged 75 or above will soar from 4.9m to 7.3m. by 2035, 23% of UK population will be over 65. UK does not regulate independent living, neither does it have a large footprint of retirement homes. According to a 2011 study by the Housing Learning and Improving Network, just 1% of Britons aged over 60 live in retirement accommodation, compared with 17% in the US and 13% in Australia and New Zealand.

UK has established a Care Quality Commission, an independent regulator of health and social care. The Care Commission regulates hospitals, ambulances, clinics, dentists, doctors and care homes, including home care services. It publishes ratings of these services under five parameters: Safe, Effective, Caring, Responsive, Well-led.

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22. ANNEXURE A: LIST OF RETIREMENT HOMES

Statewise : Names of retirement homes Model (Rental or Ownership)

Andhra Pradesh

1 Advaitt Homes, Hyderabad	Purchase
2 Chikitsya Luxury Senior Care Hyderabad	Rental
3 Lake Shanti Hyderabad	Rental
4 Mount Shanti Hyderabad	Rental
5 Necklace Shanti Hyderabad	Rental
6 Saket Pranaam, Hyderabad	Purchase
7 Visakha Shanti Vishakhapatnam	Rental

Goa

8 Bougainvilla Hermitage Goa	Lease
9 Scapes Siolim Goa	Rental

Gujarat

10 Paradise Senior Citizens home Rajkot	Purchase
11 Athashri Vadodara	Purchase
12 2nd Innings Surat	Purchase
Adani Shantigram township with retirement home	
13 Ahmedabad	Purchase
14 Prarambh Ahmedabad	Purchase

Haryana

15 Golden Estate Faridabad	Rental
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Himachal Pradesh

16 Aamoksh Kasauli	Purchase
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Karnataka

17 Anandam Bengaluru	Lease
18 Athashri Bengaluru	Purchase
19 Bengaluru Shanthidham	Rental
20 Parkside at Brigade Orchard Bengaluru	Purchase
21 Primus Eden Bengaluru	NA
22 Primus Reflection Bengaluru	NA
23 Serene Nest Bengaluru	Purchase
24 Serene Urbana Bengaluru	NA
25 Prabuddhalaya, Bengaluru	Rental
26 Sukshaanti Bengaluru	Rental and Purchase

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27	Suvidha Bengaluru	Purchase plus monthly maintenance
28	Tata Housing Riva Bengaluru	Purchase
29	Panchavati, Bengaluru	Purchase
30	Urbana Irene Covai Retirement Community Bengaluru	Purchase
31	Vedaanta Vaibhav Bengaluru	Purchase
32	Bengaluru Shanti- BENGALURU Goldage	Rental

Kerala

33	Bless Homes Aluva Kerala	Rental & Purchase
34	Cheri Retirement Kerala	Rental
35	Riverdale Retirement Resorts Cochin	NA
36	Verandah Garden Cochin	Purchase

Madhya Pradesh

37	The Nest, Aakriti Homes, Bhopal	Purchase
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Maharashtra

38	Ashiana Lavassa Maharashtra	Purchase
39	Dignity Lifestyle Neral Maharashtra	Purchase and Rental
40	A1 Snehanjali Nulife Resort residences for senior citizens Kamshet	Rental
41	Maharashtra	Purchase
42	Suyojit Covai Senior Living Nashik Maharashtra	Purchase
43	SnehBandhan, Maharashtra	Rental
44	Ananddham, Maharashtra	Rental
45	Athashri Baner Pune Maharashtra	Purchase
46	Athashri Bawdhan Pune Maharashtra	Purchase
47	Athashri Forest trails Bhugaon Pune Maharashtra	Purchase
48	Athashri Hadapsar Pune Maharashtra	Purchase
49	Athashri Pashan	Purchase
50	Athashri Xion Hinjewadi Pune Maharashtra Little Earth Covai Retirement Community Pune	Purchase
51	Maharashtra	Purchase
52	Pune Shanti Maharashtra	Rental
53	Lord's Ranch Maharashtra	NA

New Delhi

54	Silverglades Gurgaon	Purchase
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Punjab

55	Heavenly Palace Ludhiana Punjab	NA
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Rajasthan

56	Ashiana Bhiwadi Rajasthan	Purchase
57	ARG Vintage Homes	Purchase

Tamil Nadu

58	Aayushmaan Chennai Tamil Nadu	Rental
59	Aishwaryam Chennai Tamil Nadu	Purchase
60	Ananda Nilayam Chennai Tamil Nadu	Purchase or lease
61	Anandam Chennai Tamil Nadu	Purchase or lease
62	Ashiana Chennai Tamil Nadu	Purchase
63	Classic Kudumbam Chennai Tamil Nadu	Rental
64	Manolayam Chennai Tamil Nadu	Rental
65	Mannmuqi Village Tamil Nadu	Rental
66	Nandhavanam Chennai Tamil Nadu	Rental
67	Serene Adinath Chennai Tamil Nadu	NA
68	Serene Hub Chennai Tamil Nadu	NA
69	Serene Pushkar Chennai Tamil Nadu	Purchase
70	Serene Sanjivani Chennai Tamil Nadu	NA
71	Shubham Chennai Tamil Nadu	Resale and Rental
72	Vedaanta Aditya Panchavati Kumbakonam Tamil Nadu	Purchase
73	Ananya's Nana Nani Home Coimbatore Tamil Nadu	Purchase
74	Coimbatore Shanti Tamil Nadu	Rental
75	Covai Chinmayam Senior Living Coimbatore Tamil Nadu	Purchase
76	Covai Ultra Retirement Community Coimbatore Tamil Nadu	Purchase
77	Subhashraya, Chennai, Tamil Nadu	NA
78	Melur Meadows Coimbatore Tamil Nadu	Sale, Lease, Rent
79	Santhosham Senior Living - Coimbatore Tamil Nadu	NA
80	Serene Idigarai Coimbatore Tamil Nadu	NA
81	Serene Indus Valley Coimbatore Tamil Nadu	NA
82	Serene Rose Coimbatore Tamil Nadu	NA
83	Serene Shenbhagam Senior Living Coimbatore Tamil Nadu	NA
84	Soundaryam Senior Living - Coimbatore Tamil Nadu	NA
85	Swasthya Coimbatore Tamil Nadu	Lease, Rental
86	Tapovan Coimbatore Tamil Nadu	Purchase
87	Brindavan Hill View Tamil Nadu	Lease (20 years)
88	Rakindo Senior Living Tamil Nadu	Purchase
89	Brindavan Paradise Tamil Nadu	NA
90	Brindavan Palm Grove Tamil Nadu	NA
91	Vedaanta Brindhavanam Coimbatore Tamil Nadu	Purchase
92	Serence Pelican II Pondicherry Tamil Nadu	NA

93	Serene Pelican I Pondicherry Tamil Nadu	NA
94	VilleFranche Pondicherry Tamil Nadu	Purchase
95	Vanaprastha Retirement home, Coimbatore	Purchase and lease
96	Dhyanaprastha retirement home, Coimbatore	Purchase and lease
97	Pyramid Complex, Coimbatore	Purchase and lease
98	Aamoksh retirement village Kodaikanal Tamil Nadu	Purchase
99	Serene Kshetra Kanchipuram Tamil Nadu	NA
100	G S Senior Citizens Home Chennai	NA
101	Harmony victoria Potheri, Chennai	Purchase
102	Vedaanta Senior Living, Chennai	Purchase
103	Suki Homes Trust Hosur Tamil Nadu	Purchase
104	Ponni Delta, Tiruchirappalli, Tamil Nadu	Purchase
105	Cornerstone Senior Services, Chennai	Purchase and Short Stay
106	Angelica Grace Home Chennai Tamil Nadu	Rental
107	Swarnalayam Coimbatore	Purchase
108	Covai S3 Retirement Community, Coimbatore	Purchase

Telangana

109	Saket Pranaam Secunderabad Telangana	Purchase
110	Kshetra, Telangana	Rental

Uttarakhand

111	Antara Dehradun Uttarakhand	Purchase
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West Bengal

112	Aumorto Kolkata	Rental
113	Mahadevi Birla Kolkata	Rental
114	Rukmini Kolkata	Rental
115	Godhuli Kolkata	Rental
116	Jagriti Dham Kolkata	Rental
117	Peace Kolkata	Rental

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MAP OF RETIREMENT HOMES IN INDIA



Source: Moneylife Compilation

23. ANNEXURE B: CARE QUALITY COMMISSION STANDARDS, UK

Care Quality Commission, an independent regulator of health and social care in UK has prescribed these minimum care standards. These are useful standards to emulate.

Person-centred care: You must have care or treatment that is tailored to you and meets your needs and preferences.

- **Dignity and respect:** You must be treated with dignity and respect at all times while you're receiving care and treatment. This includes making sure:
 - You have privacy when you need and want it.
 - Everybody is treated as equals.
 - You're given any support you need to help you remain independent and involved in your local community.

Consent: You (or anybody legally acting on your behalf) must give your consent before any care or treatment is given to you.

Safety: You must not be given unsafe care or treatment or be put at risk of harm that could be avoided. Providers must assess the risks to your health and safety during any care or treatment and make sure their staff have the qualifications, competence, skills and experience to keep you safe.

Safeguarding from abuse: You must not suffer any form of abuse or improper treatment while receiving care. This includes:

- Neglect
- Degrading treatment
- Unnecessary or disproportionate restraint
- Inappropriate limits on your freedom.

Food and drink: You must have enough to eat and drink to keep you in good health while you receive care and treatment.

Premises and equipment: The places where you receive care and treatment and the equipment used in it must be clean, suitable and looked after properly. The equipment used in your care and treatment must also be secure and used properly.

Complaints: You must be able to complain about your care and treatment. The provider of your care must have a system in place so they can handle and respond to your complaint. They must investigate it thoroughly and take action if problems are identified.

Good governance: The provider of your care must have plans that ensure they can meet these standards. They must have effective governance and systems to check on the quality and safety of care. These must help the service improve and reduce any risks to your health, safety and welfare.

Staffing: The provider of your care must have enough suitably qualified, competent and experienced staff to make sure they can meet these standards. Their staff must be given the support, training and supervision they need to help them do their job.

Fit and proper staff: The provider of your care must only employ people who can provide care and treatment appropriate to their role. They must have strong recruitment procedures in place and carry out relevant checks such as on applicants' criminal records and work history.

Duty of candour: The provider of your care must be open and transparent with you about your care and treatment. Should something go wrong, they must tell you what has happened, provide support and apologise.

Display of ratings: The provider of your care must display their CQC rating in a place where you can see it. They must also include this information on their website and make our latest report on their service available to you.