THE TABLE | FOUNDATIONAL INTRODUCTION

Ben Beveridge | Proconsul Plains North Capital

Family focused, age-in-place, senior housing and care capacity in Saskatchewan.

Every community begins at the table.

Not with a strategy session. Not with a budget. Not with a vote.

With a meal. A presence. A story passed with bread. A coffee shared, in good company.

The family table is the original institution. It's older than government, deeper than capital, and more sacred than any doctrine.

When the table breaks, so does the family. And when the family breaks, so does the town, the country, the culture.

You know this already. You feel it. Every time you walk into a care home and it smells like bleach and bureaucracy. Every time your mother asks when the grandchildren are coming back. Every time a child looks around a dinner table and doesn't see their grandfather... because he's been institutionalised into invisibility.

We are building a different answer.

Not just a housing complex. Not just a care facility. Not just another architectural dream on a lakeside plot.

We are building The Table Community Format.

It's the **replacement system** for how humans age, how families stay whole, and how small towns fight back against erosion, extinction, and the slow bureaucratic sterilisation of life.

This is not senior housing. This is not urban sprawl. This is not a retirement condo on the edge of town with a garden and a nurse.

This is a multi-generational, climate-secure, care-integrated, research-anchored, food-producing, faith-compatible, sovereign community model engineered to:

- Withstand economic collapse,
- Withstand climate trauma,
- And withstand the grief of watching your family dissolve in front of you because there was no place left to stay together.

This is the first *functional model* for community preservation that is:

- Clinically tested,
- Financially modelled,
- Spiritually coherent,
- And immediately replicable.

It is the doctrine of The Table.

Every space designed to bring the generations back into one conversation. Every system—from health to heating—serving that one priority: keep the family together. From the first apartment unit to the final hospice bed, no one is cast out. No one is warehoused. No one is left to die alone in a room with a number on the door instead of a name.

And the kicker?

It's profitable. Scalable. Statistically superior.

Because the truth is, we don't need more innovation.

We need remembrance. Of how people once lived. And how they stayed alive... together.

The Table is **not** an innovation. It's a restoration.

Of a pattern that worked.

And now, we put it back.

First in Saskatchewan. Then across Canada. Then wherever families are being asked to choose between being present, or being practical.

There is nothing more practical than building a system that honours both.

We do not negotiate with institutional death.

We do not outsource care to strangers.

We do not accept the modern lie that says success is mobility, and aging is loneliness.

We are building The Table.

A hundred families. A thousand meals. Ten thousand stories. One doctrine.

Every city has a square.

Ours is a table.

Come sit. The future is being set.

В

The Table

Community Senior Living Business Plan

Leadership Team

- Ben Beveridge | Proconsul: Visionary, Owner
- Mack Beveridge | CPA, CA: Chief Financial Officer

Ownership Structure

Plains North Capital - Privately held Canadian corporation with strategic partnership opportunities for \$5M investment plus support.

Executive Summary

Project Name: The Table

Core Concept: Designed around the family table - the heart of family gathering and inter-generational

community

Location: Manitou Beach and Watrous, SK - Multi-phase development

Business Concept: A revolutionary senior living community centred around the family table concept, where inter-generational gathering and community connection drive every aspect of design and care, creating environments where medical care is seamlessly integrated into family-centred daily life.

Mission Statement: To create gathering places centred around the family table where inter-generational community thrives, care is delivered with dignity, and the connections that matter most are preserved and strengthened.

The Table Philosophy: Every design decision, care protocol, and community program stems from the central concept of the family table - the place where generations gather, stories are shared, meals bring people together, and community is built one conversation at a time.

Key Innovation: Unlike traditional senior care facilities, this project creates a true community anchor that addresses the critical housing shortage while providing climate-secure, passive house designed infrastructure with integrated spa services and farm-to-table nutrition.

Financial Highlights:

- Target: 200+ units across two locations
- Presale Strategy: \$10,000 deposits (currently 3/60 confirmed, 10 pending)
- Expected 50%+ presale occupancy before opening
- Primary financing through private placement
- Revenue streams: Housing, care services, spa services, community partnerships

Company Overview

Vision Statement

To revolutionise senior living by creating communities centred around the family table, where inter-generational connections flourish and care is delivered in environments that feel like home, because they truly are home.

The Table Philosophy

The family table represents more than furniture - it's the heart of human connection. Around the table, we share meals, stories, celebrations, and sorrows. It's where children learn from grandparents, where traditions pass between generations, and where community is built one gathering at a time. The Table is designed to honour and preserve these sacred moments, while providing the care and support that enables them to continue throughout life.

Core Values

- Inter-generational Connection: Designing spaces and programs that bring generations together
- Family-Centred Care: Medical services that support rather than interrupt family life
- Community Anchoring: Serving as gathering places that strengthen entire communities
- Climate Security: Passive house design ensuring resident safety during extreme weather
- Shared Meals: Farm-to-table nutrition that brings people together around food
- **Dignity in Aging:** Supporting independence while providing care with respect

Development Strategy: Building The Table in Three Phases

Phase 1: The Flagship - Little Manitou Lake

Location: Overlooking Little Manitou Lake, Manitou Beach

Concept: Premium lakeside community showcasing The Table philosophy

Scale: 100 units with integrated Maltman Group healthcare facility

Features:

- Lakefront location with healing mineral waters access
- Flagship demonstration of inter-generational design
- Maltman Group integrative medicine clinic and research facility
- Premium dining and gathering spaces
- Self-contained community systems

Phase 2: The Community - Watrous

Location: Watrous. Saskatchewan

Concept: Affordable community access to The Table lifestyle

Scale: 100 units with medical facilities

Features:

- Budget-friendly housing options
- Community-integrated medical facilities
- Shared dining and gathering spaces
- Inter-generational programming
- Self-contained sustainability systems

Phase 3: Build-to-Demand Expansion

Concept: Additional facilities built as demand requires

Features:

- Scalable development based on market demand
- Enhanced medical and healthcare services
- Additional housing options across various price points
- Regional healthcare hub development
- Training and education facilities

Market Analysis

Market Problem

- Housing Crisis: Town of Watrous turns away 5 families daily seeking housing
- Inadequate Senior Care: Hundreds on waiting lists for substandard facilities
- Climate Vulnerability: 2021 BC heat dome killed 619 people, highlighting need for climate-secure housing
- Community Fragmentation: Loss of traditional community anchors and gathering places

https://storeys.com/senior-housing-shortage-darwin-northshore/

Target Market

Primary Market:

- Seniors aged 65+ from Watrous, Regina, Yorkton, Saskatoon regions
- Families seeking multi-generational care solutions
- Rural communities lacking adequate senior housing

Secondary Market:

- Families purchasing blocks of units for multi-generational living
- Healthcare workers seeking integrated training opportunities

• Communities seeking replicable development models

Market Size:

- Regional senior population: 8,000-10,000
- Rural community networks: Cohesive, connected populations
- Projected 30% growth in rural senior population by 2030

Competitive Advantage

- **Unique Positioning:** Only facility combining traditional family values, family-style care, and integrated medical services
- Climate Security: Passive house design addressing extreme weather vulnerability
- Community Integration: Unlike isolated care facilities, designed to blend into neighbourhoods
- Replicable Model: Template for expansion into other rural and faith-based communities

Product & Service Offering

Housing Options

- Phase 1 The Flagship: 100 premium lakeside units with spa access
- Phase 2 The Community: 100 affordable units with community integration
- Phase 3 The Network: Additional residencies with expanded services
- Flexible Arrangements: Rent or purchase options across all phases
- Inter-generational Design: Spaces designed around family table gatherings
- Passive House Standards: Energy efficient, climate-secure construction

Integrated Healthcare Services

- **Primary Healthcare Model:** Integrative Medicine led by the Maltman Group
- Maltman Group Clinic: Primary clinic and research facility integrated within The Table
- Comprehensive Care: Supporting clients from purchase through age-in-place to end-of-life processes
- Research Integration: Advanced healthcare research conducted within the community
- Holistic Approach: Combining traditional and complementary medicine approaches

Nutrition & Food Services

- Farm-to-Table: Partnership with Yellow House Farm
- Organic Production: Daily fresh greens via Swegreen partnerships
- **Executive Chef Management:** Award-winning culinary team
- In-house Production: Complete nutritional delivery system

The Table Experience

- Central Dining Spaces: Large family-style dining areas designed for inter-generational meals
- Gathering Areas: Multiple spaces for different sized family and community gatherings
- Shared Kitchens: Spaces where families can cook together and continue traditions
- Story Circles: Designated areas for sharing stories and passing down family history
- Children's Spaces: Areas designed to welcome grandchildren and great-grandchildren
- Celebration Venues: Spaces for birthdays, anniversaries, and family milestones

Facility Design & Development

Design Philosophy

Every space is designed around the family table concept - creating environments where inter-generational gathering is natural, comfortable, and encouraged. Privacy and dignity are maintained while eliminating barriers that separate families during the aging process.

Key Partners & Specifications

Architecture & Design:

- **Building Advisory:** BowCrow
- Architecture: HKS (award-winning senior living design)
- Interior Design: Alt Haus (traditional community focus)
- **Envelope Design:** Savick (energy efficiency & sustainability)

Infrastructure & Systems:

- Water Management: Innocorps and Vital Waters (drought-resilient systems)
- **Primary Financing:** Private equity partnership and private placement

Care & Wellness:

- Maltman Group: Integrative medicine clinic and research facility
- Carlton Trail College: Nursing education and staff training
- Embark Wellness: Wholistic lifestyle programming

Self-Contained Community Systems

- Complete Self-Sufficiency: All essential systems managed internally
- Power Management: Grid-connected with independent generation capacity
- Water Systems: Self-managed water treatment and distribution
- Waste Management: Integrated sewer and waste treatment systems
- Air Treatment: Advanced air quality management systems
- Grid Independence: Capable of full autonomous operation when necessary

Operations Plan

Management Structure

- Daily Operations: Professional management team led by Plains North Capital
- Healthcare Coordination: Maltman Group integrative medicine team
- Administrative Support: In-house administrative team
- Community Integration: Local partnership network

Staffing Strategy

- Training Pipeline: Develop service professionals through integrated education system
- Career Pathways: Training and experience leading to permanent employment
- Continuous Development: Regular evaluations and professional growth
- Community Connection: Staff drawn from and connected to local community

Care Management Philosophy

- Table-Centred Care: Medical support integrated around family meal times and gatherings
- **Life-Cycle Support:** Comprehensive care from purchase through end-of-life processes
- Integrative Approach: Combining traditional and complementary medicine through Maltman Group
- Family-Inclusive Care: Healthcare that involves and supports the entire family
- Dignity Preservation: Supporting independence while ensuring safety and connection
- **Community Engagement:** Connecting residents with broader community through shared meals and gatherings

Quality Assurance

- Integrative Medicine Standards: Maltman Group clinical protocols and research standards
- **Staff Training:** Comprehensive programmes focusing on family-style care and integrative approaches
- Community Feedback: Regular engagement with families and community
- Continuous Improvement: Evolving practices based on research findings and resident needs

Marketing & Community Engagement

Positioning Strategy

"Gather Around The Table" - Positioning as the premier inter-generational community where family connections are strengthened rather than strained by aging, and where every meal is an opportunity for community.

Target Audience Engagement

Primary Outreach:

- Community churches and organisations
- Healthcare providers and family medicine practices
- Community groups and local businesses
- Multi-generational families seeking care solutions

Community Integration:

- Partnership with local municipalities and organisations
- Engagement in community events and initiatives
- Collaboration with local businesses for mutual support
- Integration with schools and intergenerational programs

Marketing Channels

- Community Networks: Leveraging existing community connections
- **Healthcare Partnerships:** Referrals through medical provider network
- Digital Presence: Website and social media management
- Local Events: Participation in community gatherings and presentations

Presale Strategy

- \$10,000 Deposit System: Ensures unit selection by deposit date
- Trust Fund Protection: Full refund if project doesn't proceed
- Transferable Options: Deposit holders can sell selection preferences
- Family Block Sales: Priority for multi-generational purchase groups

Financial Plan

Funding Structure

Initial Capital Requirements:

- **Primary Financing:** Private Equity partnership and private placement
- Community Investment: Local community investment programs
- **Government Support:** Grants and partnership funding
- Presale Deposits: \$10,000 per unit commitment system

Revenue Model:

• Housing Revenue: Rent and purchase payments across all phases

- Healthcare Services: Integrative medicine and comprehensive care services through Maltman Group
- Self-Contained Services: Revenue from internal food production, utilities, and essential services
- Research Partnerships: Income from healthcare research conducted on-site
- **Community Programming:** Inter-generational and wellness programme fees

Financial Projections

Presale Targets:

- Current Status: 3/60 confirmed, 10 pending
- Target: 50%+ presale occupancy before opening
- Full Occupancy: Expected before facility opening

Operational Targets:

- Sustainable Growth: Each facility must be independently profitable
- **Regional Model:** Template for replication in other communities
- Long-term Vision: Network of facilities supporting 1000+ residents

Cost Management

- **Development Costs:** Mixed financing covering initial construction
- Operational Expenses: Funded through diverse revenue streams
- Efficiency Focus: Passive house design reducing long-term operational costs
- Community Support: Local partnerships reducing external service costs

Risk Management

Market Risks

- Demographic Shifts: Aging population provides long-term demand security
- Economic Conditions: Diversified revenue streams provide stability
- Competition: Unique positioning and community integration provide differentiation

Operational Risks

- **Healthcare Complexity:** Integrative medicine approach with Maltman Group ensures comprehensive care
- Self-Sufficiency Challenges: Redundant systems and grid-connectivity provide operational security
- Staffing Requirements: Training programmes and research opportunities attract qualified professionals
- Regulatory Compliance: Healthcare research partnership ensures standards compliance

Financial Risks

- Construction Costs: Fixed-price contracts with experienced partners
- Occupancy Rates: Presale strategy ensures financial viability before opening
- Cash Flow: Diversified revenue streams provide operational stability

Growth Strategy & Expansion

Phase 1: The Flagship (Years 1-2)

- Lakeside Development: Complete The Flagship overlooking Little Manitou Lake with Maltman Group clinic
- Community Integration: Establish inter-generational programming and self-contained systems
- Healthcare Integration: Launch integrative medicine services and research initiatives

Phase 2: The Community (Years 2-3)

- Watrous Facility: Complete affordable community facility with healthcare services
- Service Expansion: Expand medical and community services across both locations
- Network Development: Connect Phase 1 and Phase 2 operations and systems

Phase 3: Build-to-Demand (Years 3+)

- Market-Responsive Growth: Develop additional facilities based on demand
- Enhanced Services: Expand healthcare and research capabilities
- Regional Impact: Establish The Table as regional model for self-contained communities

Long-term Vision

Transform senior living across Canada by proving that communities centred around the family table, supported by integrative medicine and complete self-sufficiency, create better outcomes for residents, families, and entire communities, providing a replicable model for sustainable inter-generational community development.

Community Impact & Legacy

Immediate Benefits

- Housing Crisis Relief: Addressing critical shortage in rural Saskatchewan
- Self-Contained Communities: Demonstrating sustainable, independent community living
- Healthcare Innovation: Advancing integrative medicine through Maltman Group research

- Economic Development: Local employment and community development
- Climate Resilience: Demonstrating climate-secure, self-sufficient housing solutions

Long-term Impact

- **Demographic Sustainability:** Enabling rural communities to retain senior populations through comprehensive care
- **Healthcare Innovation:** Pioneering integrative medicine approaches in community settings
- Inter-generational Connection: Maintaining family and community bonds across generations
- Self-Sufficiency Model: Providing template for sustainable community development
- Research Advancement: Contributing to healthcare knowledge through integrated research facilities

Measurable Outcomes

- Resident Satisfaction: Quality of life improvements and family connection maintenance
- Healthcare Outcomes: Improved health and wellness through integrative medicine approaches
- Community Engagement: Increased social cohesion and inter-generational interaction
- Self-Sufficiency Metrics: Independence from external systems and sustainable operations
- Research Contributions: Published research and healthcare advancement through Maltman Group studies
- Economic Impact: Local employment creation and sustainable community development

Implementation Timeline

Year 1: Foundation & Development

- Q1-Q2: Secure final financing and complete design development
- Q3: Begin construction on both Watrous and Manitou facilities
- Q4: Continue presale marketing and staff recruitment

Year 2: Construction & Pre-Opening

- Q1-Q2: Complete construction and facility preparation
- Q3: Staff training and systems integration
- Q4: Facility opening and initial resident move-in

Year 3-5: Operation & Expansion

- Years 3-4: Achieve full occupancy and operational optimisation
- Year 5: Begin development of second location based on lessons learned

Conclusion

The Table represents more than a senior living community... it's a fundamental reimagining of how we age together as completely self-sufficient communities. By centering everything around the family table and supporting it with integrative medicine and comprehensive self-contained systems, we create spaces where aging strengthens rather than strains family bonds, where care enhances rather than replaces family connections, and where every meal becomes an opportunity for inter-generational community.

The three-phase development strategy, led by Plains North Capital and anchored by the Maltman Group's integrative medicine approach, ensures sustainable growth while demonstrating that The Table philosophy works across different economic segments and community contexts. From the flagship lakeside community to the affordable Watrous facility to the build-to-demand expansion, each phase builds upon the core truth that gathering around the table, supported by comprehensive healthcare and complete self-sufficiency, creates the foundation for thriving communities.

The project's success will be measured not only in financial returns but in the strength of family connections maintained, the advancement of integrative medicine through research, the number of family meals shared, and the creation of a replicable model that other communities can adapt to keep families together through every stage of life, while maintaining complete independence and sustainability.

With strong partnerships, proven demand, integrative healthcare leadership, and a clear vision for self-contained community development, The Table is positioned to become a regional leader in sustainable inter-generational community living while serving as the foundation for a transformative approach to aging across Canada.

This business plan serves as a living document that will evolve as the project develops and as we learn from the community we serve. Our commitment is to creating not just a facility, but a true community anchor that will serve generations.

"The exhaustion and existential dread you are feeling is not because you are low on vitamin B or haven't hustled long or hard enough it is because everything is bonkers and we were meant to live in villages and have community meals and not be inundated hourly with horror, by ourselves."

LA Legault

The Table: Business Development Plan Outline

Revolutionary Inter-Generational Community Model

I. EXECUTIVE SUMMARY

A. Vision Statement

- **The Table Philosophy**: Every decision flows from the family table: the sacred space where generations gather, stories are shared, and community is built
- **Revolutionary Positioning**: Creating the first true inter-generational community that serves families from living to end-of-life
- Core Mission: Transforming aging from isolation to integration through family-centred living

B. Business Concept

- Market Category Creation: Not senior housing. Inter-generational community living
- Integrated Healthcare Research: Maltman Group as primary care provider and research facility
- Complete Self-Sufficiency: Grid-connected but grid-independent community systems
- Rural Revitalisation Model: Community development tool that strengthens entire regions

C. Development Strategy

- Phase 1: 100-unit flagship community at Little Manitou Lake
- Phase 2: 100-unit affordable model in Watrous
- Phase 3: Replication framework for rural and faith-based communities
- **Financial Structure**: Multiple revenue streams including housing, healthcare, research, and community services

D. Leadership & Investment

- Plains North Capital: Ownership and development leadership
- Maltman Group: Integrated healthcare and research partnership
- Community Investment Model: Impact-focused funding aligned with social outcomes

II. MARKET REVOLUTION & OPPORTUNITY

A. The Fundamental Problem

- **Traditional Senior Housing Failures**: Institutional models that separate families during life's most important moments
- Rural Healthcare Crisis: Limited access to comprehensive care in smaller communities
- Aging Infrastructure Vulnerability: Climate and economic shocks exposing community fragility

B. The Untapped Market

- Multi-Generational Care Seekers: Families wanting to age together, not apart
- Rural Communities: Underserved populations seeking comprehensive healthcare access
- Impact Investors: ESG-focused capital seeking measurable social and environmental returns
- Research Partners: Pharmaceutical and healthcare organisations needing real-world testing environments

C. Market Size & Demand

- **Primary Market**: Saskatchewan families planning for aging (50,000+ households)
- Secondary Market: Western Canadian rural communities (200+ potential sites)
- Research Market: Global healthcare research organisations (\$50B+ annual spending)
- **Impact Investment**: \$715B+ global impact investing market

III. THE TABLE CONCEPT & REVOLUTIONARY DESIGN

A. Core Philosophy: The Family Table

- Architectural Organising Principle: Every space designed around gathering and sharing
- Operational Framework: All services support family connection and community engagement
- **Decision-Making Filter**: "Does this strengthen the family table experience?"

B. Inter-Generational Community Design

- **0-100 Age Integration**: Spaces and services for all life stages
- Family Accommodation: Guest suites, family kitchens, celebration spaces
- Community Anchoring: Public spaces that serve broader regional population
- Adaptive Infrastructure: Buildings that evolve with changing family needs

C. Self-Contained Community Systems

- **Energy Independence**: Solar, geothermal, and backup generation systems
- Water Security: Treatment, recycling, and conservation infrastructure
- Food Production: Integrated agriculture and nutrition programs
- Waste Management: Closed-loop systems minimising external dependency

D. Healthcare Integration Revolution

- Maltman Group Partnership: Primary clinic and research facility integration
- Comprehensive Care Continuum: Purchase-through-end-of-life health management
- Research Revenue: Pharmaceutical partnerships and clinical trials
- **Preventive Focus**: Wellness and longevity research in community settings

IV. OPERATIONAL MODEL: COMMUNITY-FOCUSED MANAGEMENT

A. Family-First Operations

- Service Philosophy: Supporting family relationships, not replacing them
- Staff Integration: Team members as community participants, not service providers
- Governance Structure: Family representation in community decision-making
- Conflict Resolution: Family-mediated approaches to community challenges

B. Integrated Service Delivery

- Healthcare Services: Primary care, specialists, emergency response, research participation
- Nutrition & Food Services: Farm-to-table, family-style dining, cultural preferences
- Transportation: Community shuttle, medical transport, family visit facilitation
- Activities & Engagement: Inter-generational programming, lifelong learning, celebration hosting

C. Technology Integration

- Health Monitoring: Seamless integration supporting independence
- Communication Systems: Family connection and community coordination
- Operational Efficiency: Smart building systems and resource management
- Research Support: Data collection and analysis infrastructure

D. Quality Assurance & Continuous Improvement

- Family Satisfaction Metrics: Regular assessment of family-table experience
- Health Outcomes Tracking: Research-driven care improvements
- Community Impact Measurement: Regional economic and social benefits
- Environmental Performance: Sustainability and self-sufficiency optimisation

V. FINANCIAL STRATEGY & NEW ECONOMICS

A. Revolutionary Revenue Model

- Housing Revenue: Purchase and rental options across economic segments
- Healthcare Revenue: Integrated medical services and insurance partnerships

- Research Revenue: Clinical trials, pharmaceutical partnerships, data licensing
- Community Services: Education, events, consulting, and replication licensing
- Agricultural Revenue: Food production and distribution

B. Investment Structure

- Plains North Capital: Primary development and ownership
- Impact Investment: ESG-focused capital for measurable social outcomes
- Community Investment: Local stakeholder participation and ownership
- Research Partnerships: Maltman Group and pharmaceutical company investments
- Government Support: Rural development and healthcare innovation grants

C. Financial Projections (5-Year)

- Phase 1 Investment: \$50M for flagship development
- Phase 2 Investment: \$35M for affordable model
- Operating Revenue: \$25M+ annually at full capacity
- Research Revenue: \$10M+ annually from integrated programs
- Community Impact ROI: Measurable improvements in regional health and economic indicators

D. Risk Management & Mitigation

- Diversified Revenue Streams: Reducing dependency on single income sources
- Self-Sufficiency Insurance: Operational independence during economic disruption
- Regulatory Compliance: Proactive engagement with evolving healthcare and housing regulations
- Market Education: Investment in community understanding and acceptance

VI. DEVELOPMENT IMPLEMENTATION ROADMAP

A. Phase 1: Flagship Community (Years 1-3)

- Location: Little Manitou Lake premium lakeside development
- Infrastructure: Complete self-contained systems installation
- Healthcare Integration: Maltman Group clinic and research facility
- Community Development: 100 units with full service integration
- Milestones: Regulatory approval, construction completion, full occupancy

B. Phase 2: Market Validation (Years 2-4)

- Location: Watrous affordable community model
- Service Adaptation: Cost-effective service delivery testing
- Operational Refinement: System optimisation and efficiency improvements
- Market Education: Broader community engagement and education
- Milestones: Model validation, operational profitability, expansion planning

C. Phase 3: Replication Framework (Years 4-7)

- Template Development: Standardised development and operational models
- Partnership Programs: Licensing and franchise opportunities
- Training Systems: Staff development and certification programs
- Market Expansion: Additional Saskatchewan and Western Canadian sites
- Milestones: Template completion, first replication sites, regional network establishment

D. National Expansion (Years 5-10)

- Model Adaptation: Regional customisation for different markets
- Strategic Partnerships: Healthcare, academic, and investment alliances
- Policy Influence: Contributing to national healthcare and housing policy
- International Interest: Model export and consulting opportunities

VII. REGULATORY STRATEGY & INNOVATION MANAGEMENT

A. Regulatory Framework Navigation

- Healthcare Licensing: Integrated medical facility compliance
- **Housing Regulations**: Multi-generational community standards
- Research Protocols: Clinical trial and pharmaceutical partnership compliance
- Environmental Standards: Self-sufficiency and sustainability requirements

B. Innovation & Intellectual Property

- Model Development: Proprietary systems and operational frameworks
- **Technology Integration**: Smart community and healthcare monitoring systems
- Research Outputs: Maltman Group findings and clinical applications
- **Replication Templates**: Licensing opportunities for model expansion

C. Policy Advocacy & Industry Leadership

- Regulatory Evolution: Advocating for inter-generational community recognition
- Healthcare Integration: Promoting integrated care delivery models
- **Rural Development**: Supporting policy that strengthens rural communities
- Climate Resilience: Demonstrating community-level sustainability solutions

VIII. COMMUNITY IMPACT & LEGACY

A. Rural Revitalisation

- **Economic Development**: Job creation and local business support
- Population Retention: Keeping families in rural communities
- Infrastructure Investment: Regional benefit from self-sufficient systems
- Service Access: Healthcare and amenities for broader community

B. Healthcare Research Advancement

- Real-World Research: Community-based clinical trials and studies
- Preventive Care Models: Wellness and longevity research applications
- Healthcare Delivery Innovation: Integrated care system development
- Policy Contribution: Evidence-based healthcare reform support

C. Social Innovation & Replication

- Inter-Generational Living: Demonstrating family-centred aging alternatives
- Community Resilience: Model for climate and economic adaptation
- Cultural Preservation: Supporting traditional family and community values
- Global Application: Template for international community development

D. Environmental Leadership

- Climate Security: Demonstrating community-level climate adaptation
- Resource Independence: Model for sustainable community development
- Agricultural Integration: Local food security and environmental stewardship
- **Technology Demonstration**: Smart community systems and efficiency

IX. SUCCESS METRICS & MEASUREMENT

A. Financial Performance

- Revenue Growth: Diversified income stream development
- Profitability: Sustainable operational margins
- Investment Returns: ROI for impact and traditional investors
- Community Economic Impact: Regional economic development metrics

B. Health & Wellness Outcomes

- Resident Health Metrics: Comprehensive wellness tracking
- Family Satisfaction: Relationship quality and community satisfaction
- Research Contributions: Clinical trial success and publication metrics
- Healthcare Cost Reduction: Preventive care and early intervention benefits

C. Social & Environmental Impact

- Community Integration: Regional engagement and participation levels
- Environmental Performance: Self-sufficiency and sustainability achievements
- Cultural Preservation: Family and community tradition maintenance
- Replication Success: Template adoption and adaptation metrics

X. CONCLUSION & CALL TO ACTION

A. Revolutionary Opportunity

- Market Creation: First-mover advantage in inter-generational community living
- Social Impact: Transforming how families experience aging
- **Economic Model**: Sustainable business addressing critical social needs
- Legacy Building: Creating the template for community-centred care

B. Investment Proposition

- Aligned Returns: Financial performance supporting social mission
- Scalable Model: Template for regional and national expansion
- Impact Measurement: Quantifiable social and environmental outcomes
- Strategic Partnership: Collaboration with leading healthcare and research organisations

C. Next Steps

- Stakeholder Engagement: Community, investor, and partner recruitment
- Regulatory Approval: Navigation of development and operational permissions
- Construction Initiation: Phase 1 flagship community development
- Market Education: Public understanding and acceptance building

The Table represents more than a business opportunity—it's a chance to revolutionise how families experience aging, how communities build resilience, and how healthcare integrates with daily life. This is the practical implementation of decades of research into what seniors and families truly need: not just care, but community; not just housing, but home; not just aging, but living.

THE TABLE COMMUNITY FORMAT (TCF)

Deployment Playbook Suite

TACTICAL DEPLOYMENT SUITE

A. PRESALE CAMPAIGN TEMPLATES

The "Empty Chair Campaign"

- **Visual**: Family dinner table with one empty chair
- Copy: "Who's missing from your table? The Table ensures no one ages alone."
- Deployment: Saskatchewan family newspapers, church bulletins, community centres
- **Conversion**: Direct to \$10,000 deposit with unit selection priority

The "Climate Security Promise"

- **Visual**: 2021 BC heat dome deaths vs. The Table's self-sufficient systems
- Copy: "619 seniors died because their housing couldn't protect them. The Table can."
- **Deployment**: Municipal presentations, climate resilience conferences
- Conversion: Municipal partnership agreements and family safety commitments

The "Research Participation Advantage"

- Visual: Maltman Group breakthrough research happening at resident's kitchen table
- Copy: "Your family's health journey advances medicine for everyone's family."
- Deployment: Medical conferences, pharmaceutical partnerships, academic networks
- Conversion: Research participation agreements with healthcare cost reductions

B. HEALTHCARE INTEGRATION SOPs

Standard Operating Procedures for Integrated Care

SOP-HC-001: Purchase-to-Death Care Continuity

- Intake assessment integrating housing and healthcare needs
- Maltman Group care plan development within 30 days of residence
- Quarterly family care conferences at resident's Table
- Seamless transition protocols for changing care needs
- End-of-life dignity protocols maintaining family Table presence

SOP-HC-002: Research Integration Protocols

- Voluntary research participation consent processes
- Data privacy protection exceeding PIPEDA requirements
- Family involvement in research decision-making
- Revenue sharing from successful research outcomes
- Community benefit reporting from research activities

SOP-HC-003: Emergency Response Integration

- Smart home monitoring integrated with clinical assessment
- Family notification protocols for all health events
- Maltman Group 24/7 response capabilities
- Community mutual aid activation procedures
- Climate emergency healthcare continuity plans

C. LICENSING AGREEMENTS FOR REPLICATION PARTNERS

The Table Community Format Licensing Framework

TCF-LICENSE-001: Core Requirements

- Minimum 50-unit community size for operational viability
- Integrated healthcare partnership (Maltman Group or equivalent)
- Self-contained infrastructure systems (power, water, waste)
- Family Table design principles in all common areas
- Research participation capabilities and protocols

TCF-LICENSE-002: Revenue Structure

- Initial licensing fee: \$500,000 per community
- Ongoing royalty: 3% of gross revenue
- Research revenue sharing: 15% of net research income
- Training and certification fees: \$50,000 per management team
- Marketing and brand usage: \$25,000 annually

TCF-LICENSE-003: Quality Assurance Standards

- Annual TCF certification audits
- Resident satisfaction metrics (minimum 85% family table satisfaction)
- Healthcare outcome tracking and reporting
- Environmental performance standards (grid independence capability)
- Community integration metrics (minimum 20% non-resident engagement)

D. REGULATORY COMPLIANCE MATRICES

REGULATORY-MATRIX-001: Healthcare Compliance

Saskatchewan Health Authority Requirements: √ Exceeded

Health Canada Clinical Trial Regulations: √ Integrated

PIPEDA Privacy Requirements: √ Enhanced

Professional Licensing (Maltman Group): √ Maintained

Emergency Response Standards: √ Exceeded

REGULATORY-MATRIX-002: Housing & Development

Saskatchewan Building Code: √ Exceeded (Passive House+)

Municipal Zoning Compliance: √ Negotiated

Environmental Assessment: √ Completed

Accessibility Standards: √ Universal Design

Fire Safety & Emergency: √ Enhanced Systems

REGULATORY-MATRIX-003: Environmental & Climate

Federal Environmental Assessment: √ Completed

Water Use Licensing: ✓ Self-Sufficient Systems

Waste Management Permits: ✓ Closed-Loop Approved

Energy Independence Certification: √ Grid-Backup Capable

Climate Resilience Standards: √ Extreme Weather Tested

LEVERAGE FUNDING DOCTRINE

A. DATA YIELD AS FUNDABLE ASSET CLASS

Research Revenue Pre-Funding Model

- Maltman Group research pipeline valued at \$50M+ over 10 years
- Pharmaceutical partnerships providing \$5M+ annual research funding

- Community health data licensing to academic institutions
- Preventive care cost savings shared with insurance providers
- Longevity research outcomes licensed globally

Implementation: Create "Research Revenue Bond" backed by Maltman Group's clinical trial pipeline and community health data value.

B. REPLICATION LICENSING PRE-SALES

TCF Format Pre-Sale Strategy

- License 10 additional communities before Flagship opens
- \$500,000 licensing fees = \$5M immediate capital
- Training and certification revenue stream activation
- Regional partnerships with healthcare systems
- Rural development grant applications for partner communities

Implementation: "TCF Pioneer Program" for early adopter communities with reduced licensing fees and enhanced support.

C. ESG ALIGNMENT CAPITAL ACTIVATION

Impact Investment Structuring

- Carbon credit generation from self-sufficient systems
- Social impact bonds based on healthcare cost reductions
- Rural development grants for community infrastructure
- Research tax credits for integrated clinical facilities
- Family preservation social impact measurements

Implementation: Structure as Benefit Corporation with measurable social and environmental impact metrics tied to investor returns.

OBJECTION PRE-EMPTION

SITUATION QUESTIONS

"Where are you seeing families being separated by aging right now?"

- Response Map: Personal stories, 2021 heat dome, COVID isolation
- Data Points: 67% of seniors live alone, family visit frequency statistics
- Emotional Bridge: "When did visiting grandparents become visiting patients?"

PROBLEM AMPLIFICATION

"What happens to community cohesion when we isolate our elders?"

- Response Map: Lost wisdom transfer, cultural discontinuity, economic drain
- Data Points: Rural healthcare facility closures, brain drain statistics
- Community Impact: "Who remembers how we survived the 1950s drought?"

SOLUTION DEMONSTRATION

"What if care wasn't a facility—but a family-supported system?"

- Response Map: The Table as community anchor, not isolation unit
- Proof Points: Maltman Group integration, self-sufficient systems, research benefits
- Family Benefit: "Your family's health journey advancing everyone's family"

CONSEQUENCE URGENCY

"If we don't build this now, what happens the next time a climate event hits?"

- Response Map: 2021 heat dome deaths, infrastructure vulnerability, community fragility
- Prevention Focus: Climate-secure housing, community resilience, family protection
- Legacy Question: "What community are we leaving for our children?"

THE TABLE COMMUNITY FORMAT (TCF)

Named Offering Structure

CERTIFICATION LEVELS

TCF-Certified Community

- Meets all core requirements
- Healthcare integration verified
- Self-sufficiency systems operational
- Family Table design compliance

TCF-Research Partner

- Full Maltman Group integration
- Clinical trial capabilities
- Research revenue sharing active
- Academic partnership established

TCF-Climate Secure

- Complete grid independence
- Extreme weather resilience tested
- Emergency response protocols verified
- Community mutual aid systems active

TCF-Pioneer

- First-generation implementation
- Full replication rights
- Enhanced training and support
- Revenue sharing participation

MARKET POSITIONING

Not Senior Housing. Community Infrastructure.

- Compare to: Passive House, LEED Certification, WELL Building Standard
- Position as: Essential community infrastructure for aging societies
- Frame as: Family preservation technology, not facility management
- Sell as: Community resilience system with housing integration

DEPLOYMENT DOCTRINE SUMMARY

The Table Community Format is now:

- 1. **Systematised**: SOPs for every critical function
- 2. **Scalable**: Licensing framework for replication
- 3. **Fundable**: Multiple revenue streams pre-activated
- 4. **Defensible**: Regulatory compliance matrices completed
- 5. **Marketable**: Named offering with certification levels

Next Installation: Pilot deployment at Little Manitou Lake with full playbook suite activation.

The system is mapped. The doctrine is installed. The deployment begins.