



The Housing and
Ageing Alliance

**Response to Department for
Communities and Local
Government's Housing White Paper**

Fixing our broken housing market

Submitted by the Housing & Ageing Alliance

April 2017

CONTACT DETAILS

e-mail: housingandageing@gmail.com

website www.housinglin.org.uk/housing-networks/HAA/

Correspondence: c/o Unit 9, The Renewal Trust Business Centre, 3 Hawksworth St, Nottingham, NG3 2EG

Contact

Chair of the Housing & Ageing Alliance - Sue Adams OBE

e-mail: sueadams@careandrepair-england.org.uk

m: 07947 889 416

1. About the Housing & Ageing Alliance

- 1.1. The Housing and Ageing Alliance is a broad alliance of local and national organisations which work together to achieve a single objective - to bring about improvements to the housing and living conditions of older people.
- 1.2. The H&A Alliance believes that homes, communities and housing related services should be planned and designed in ways that enable choice, control, inclusion and independence in later life.
- 1.3. It aims to raise the profile of the housing and housing related care and support needs and aspirations of an ageing population and makes representations to Government, policy makers and decision making bodies concerning this issue.
- 1.4. Membership of the H&A Alliance includes leaders from across the ageing and housing sectors, reflecting a range of housing interests and including older people who are active in housing related networks, national organisations from the statutory, voluntary and private sectors are involved in the planning, development and delivery of housing and related services, academic interests and those involved in policy development and representation on various housing related advisory bodies.
- 1.5. H&A Alliance members include: Age UK, Anchor, Care & Repair England, Chartered Institute of Housing, Royal College of Occupational Therapists, Design Council, Elderly Accommodation Counsel, Foundations, Independent Age, ILCUK, Habinteg, Hanover, Housing LIN, Joseph Rowntree Foundation, McCarthy & Stone Retirement Lifestyles Ltd, National Housing Federation, Older People's Action Groups & Forums, Town and Country Planning Association.

2. Focus of this submission

- 2.1. The focus of this submission by the H&A Alliance concerns the housing and planning implications of unprecedented demographic change.
- 2.2. The submission makes the case that it is critical to ensure that housing & planning policies address one of the biggest social changes of our time, that of population ageing.
- 2.3. With a third of homes already lived in by older people and the majority of household growth projected to take place amongst older households, housing for ageing needs to be high on the housing policy agenda and not viewed as a 'minority' or 'fringe' issue.
- 2.4. Decent housing underpins the health of a nation. In the context of population ageing, housing and planning policies have a significant impact on the NHS and social care. A joined up approach across housing, planning, health and social care is therefore urgently needed.

3. Rationale - Why is there a need to specifically address the issue of housing for an ageing society?

- 3.1. Older people are key players in the wider housing market. They live in a third of all homes and population ageing will account for around 60% of household growthⁱ with the highest levels of increase amongst those over 85yrsⁱⁱ.
- 3.2. Housing quality and suitability has a direct impact on the health and wellbeing of the occupants of a home, and so there are measurable impacts on the cost to the NHS of housing shortcomingsⁱⁱⁱ. As people require the greatest level of help from the NHS in later life, improving health through better housing has a direct impact on health costs.
- 3.3. Likewise, a suitably designed and/or adapted home can extend independent, safe living in later life^{iv} and thereby housing supply & stock design and condition also impacts on the need for social care.
- 3.4. Integrated action in the fields of housing and planning can align some of the most important policy areas currently challenging Government – how to reform and integrate the NHS, social care and public health in the context of population ageing, and how to increase housing supply delivery.

4. Summary of Headline Messages concerning '*Fixing our broken housing market*'

- 4.1. Create homes, neighbourhoods and services that enable older people to live healthy, independent lives, involved with families, friends & neighbours and contributing to their communities wherever they choose to live.
- 4.2. Planning policies need to specifically include planning for demographic change.
- 4.3. Create a flexible healthy housing stock through building all new homes to design standards that make them accessible to current/future occupants and visitors - at the very least to lifetime homes standards.
- 4.4. Create age-inclusive neighbourhoods both in areas of new-build and also in existing localities, eg through regeneration.
- 4.5. Through capital investment facilitate infrastructure and housing growth which addresses the undersupply of a wide range of housing types for an ageing population, both mainstream and specialist stock, and across all tenures.
- 4.6. Connect housing and planning policies to health & care policies, setting a common underpinning principle of enabling enable older people to live safely & well at home.
- 4.7. Set provision of practical housing help to enable healthy ageing as a shared priority across housing, health and social care, including home adaptations and repairs services.
- 4.8. To enable and encourage informed decision making about later life housing, ensure that older people have ready access to impartial, independent information & advice about their later life housing & care options and related finance, plus associated practical assistance eg with moving home, for the most vulnerable.

PART 2: Commentary and general response to specific section about housing and ageing in 'Fixing our broken housing market'

1. A housing strategy for an ageing population

- 1.1. The Housing & Ageing Alliance welcomes the references in the White paper to the housing needs of our ageing population (Para 4.42-4.44).
- 1.2. The H&A Alliance particularly welcomes the commitment to developing housing related policy based on analysis of evidence, data and knowledge (Para 4.44 '*We want to build on the evidence that already exists to help deliver outcomes that are best for older people*').
- 1.3. The H&A Alliance does have concerns that the scale of demographic change and the centrality of population ageing to all aspects of housing policy has not been recognised in the White paper as a whole, and an opportunity has potentially been missed to address this major social change through wider improvements to the built environment.
- 1.4. H&A Alliance members would welcome the opportunity to contribute to a constructive debate about the full range of issues and solutions related to housing for an ageing population. This would include age-inclusive design of all new homes; action to address shortcomings of the existing housing stock; innovation in mainstream homes that are specifically designed for ageing; and the creation of new specialist and supported housing options for those older people who choose or require alternative housing options.

2. Using data and evidence to develop a comprehensive approach

- 2.1. There are already 9.5 million older households¹ and rising (out of 21.9 million households of all ages). Recognition of population diversity is crucial in any comprehensive housing strategy, and this particularly applies to an ageing population, given that 'older age' (defined as ranging from 50yrs to 100yrs+) now literally spans half a lifetime for many.
- 2.2. The experience of ageing varies greatly² (eg health, wealth, isolation vs social connectivity etc), and the spectrum of types of housing in which older people live is also widely diverse
 1. This requires a more nuanced narrative and holistic policy solutions with regard to housing and ageing, rather than the idea of a single housing type solution.

3. New homes

- 3.1. New homes are clearly needed and we endorse the government's commitment to building new homes. Again, in the context of the 60% growth in the number of older households, every new home built is a precious resource that can determine the health and quality of life for current and future generations of older people in the short, medium and long term.
- 3.2. Given this rise in the older population, and particularly the doubling of the number of people over 85yrs (the age after which there is a higher level of care needs), the requirement for specialist and supported housing is anticipated to rise. As the current 'younger old' generations age, they are likely to have higher housing quality and lifestyle

¹ Analysis for all people aged 55yrs and over Garrett H, Burris S, (2015) *Homes and ageing in England* BRE Bracknell, IHS BRE

² ONS (2013) *What Does the 2011 Census Tell Us About Older People?*, Office for National Statistics

expectations and consumer demand with regard to alternative options is likely to change (eg. space and design standards).

- 3.3. Fresh thinking and market stimulus, particularly for middle income groups (given the indications that the market is already responding to the higher end), is overdue.
- 3.4. Development of alternative retirement and supported housing is affected by not only housing and planning policies, but also a range of other policy areas, including welfare reform, financing of social care, digital technology, leasehold reform, healthcare and transport.
- 3.5. A holistic policy approach is urgently required.
- 3.6. Specifically, with regard to the impact on housing of welfare reform, it will be crucial to resolve concerns about the potential impact of the Local Housing Allowance (LHA) cap on older people living in sheltered/ supported housing if providers of this important form of housing are to be enabled to even maintain let alone increase the supply.

4. Ageing well in the current housing stock

- 4.1. At least 80% of the buildings that we will inhabit in 2050 have already been built.³ The vast majority of older households (96%)¹ live in mainstream housing and in all types of property - flats, small terraced, semi-detached and detached houses. Most will live out their days in this ordinary housing that is already built, either by choice or necessity.
- 4.2. Because most people will age in general housing that is already there, adequate repair, maintenance and adaptation of this current housing stock will continue to have the greatest impact on the NHS and social care, hence requires a cross departmental response.
- 4.3. Consequently, as well as future proofing all new homes and building alternative housing specifically for older people, a fresh approach to addressing the standards and condition of the existing housing stock (its modification, adaptation, technology enablement etc) is critical. In particular, housing needs to be part of the vision and plans for integration of health and care; action is needed to tackle substandard housing that impacts negatively on older people's health; and future provision of home adaptations needs to be ensured after the end of the Better Care Fund.

5. Informed decision making about later life choices

- 5.1. Where people live in later life and the range (if any) of their possible alternative options is determined by a range of factors, most notably by their wealth (pension & other income; housing equity/other assets), health, geographical location, family & social considerations.
- 5.2. These factors are inextricably linked and so making an informed decision eg. about moving home, requires a significant level of knowledge.
- 5.3. Whilst older people's families do often become involved in this housing & care decision making, most often at a crisis point, research by Independent Age⁴ revealed that talking to

³ Urban Design Directory (2015/7) Creating pro-social places

⁴ Independent Age (2016) *We need to talk about caring: dealing with difficult conversations*

family members about housing in later life was the third most difficult topic (after end of life and later life care).

- 5.4. The Care Act 2014 identified the crucial role of impartial, independent information and advice in terms of decision making about later life housing, care and related finance. Unfortunately, such impartial, expert advice is becoming more difficult to find, particularly for lower income groups, as both local and national sources of independent advice become harder to finance.
- 5.5. National government has recognised the importance of independent information and advice about pensions and is supporting this provision. Government support for impartial information and advice about housing, care and related finance is urgently needed.

PART 3: Response to specific sections and questions posed in 'Fixing our broken housing market'

1. Planning

Question 3

Do you agree with the proposals to:

a) amend national policy so that local planning authorities are expected to have clear policies for addressing the housing requirements of groups with particular needs, such as older and disabled people?

b) from early 2018, use a standardised approach to assessing housing requirements as the baseline for five year housing supply calculations and monitoring housing delivery, in the absence of an up-to-date plan?

- 1.1. We agree with the proposal to require all local planning authorities to have clear policies for addressing the diverse housing requirements of an ageing and disabled population.
- 1.2. We believe that a standardised approach would be useful.
- 1.3. There needs to be a specific requirement in the National Planning Policy Framework (NPPF) to plan for the current and future housing needs of an ageing population, across all housing types and tenures, based on objective assessment by local authorities.
- 1.4. Addition of clearer definitions with regard to housing and ageing in the NPPF and National Planning Policy Guidance (NPPG) would also help to raise awareness of the importance of planning for housing suitable for an ageing population, as would specific guidance to local authorities on how to properly assess and to plan for the range of housing requirements of ageing populations. Such guidance would need to take a long term, life-course view and acknowledge the wide diversity of later life housing situations.
- 1.5. The H&A Alliance would welcome the opportunity to work with the Department on developing such an approach.

Question 7

Do you agree that national policy should be amended to encourage local planning authorities to consider the social and economic benefits of estate regeneration when preparing their plans and in decisions on applications, and use their planning powers to help deliver estate regeneration to a high standard?

- 1.6. We believe that national planning policy should be amended to encourage local planning authorities to consider not only the social and economic benefits, but also the health benefits of estate regeneration, and to specifically include a requirement to create healthy, accessible age friendly homes and neighbourhoods in all estate regeneration plans drawing on the lessons from NHS England's Healthy New Towns programme.⁵
- 1.7. There is a well researched, quantified, causal link between housing and the main long term conditions (eg. heart disease, stroke, respiratory, arthritis) whilst risk of falls, a major

⁵ <https://www.england.nhs.uk/ourwork/innovation/healthy-new-towns/>

cause of injury and hospital admission amongst older people, is significantly affected by housing characteristics and the wider built environment.

- 1.8. Housing was identified as an important social determinant of health in the Marmot Strategic Review of Health Inequalities⁶ and a number of housing related factors are now included in the *Public Health Outcomes Framework*.
- 1.9. Decent, suitable housing for older people can reduce the costs of health care. It can decrease GP visits by older people with chronic conditions, enable timely hospital discharge, extend independence for patients with dementia and provide end of life care at home. Therefore, inclusion of housing is critical to better co-ordinated services for older people and their carers.
- 1.10. Estate regeneration provides an invaluable opportunity to improving and adapting mainstream homes, which will contribute to health and care efficiency savings as well as achieving the wider policy aspirations of integration and prevention.

Question 8

Do you agree with the proposals to amend the National Planning Policy Framework to:

- a) highlight the opportunities that neighbourhood plans present for identifying and allocating small sites that are suitable for housing?;*
- b) encourage local planning authorities to identify opportunities for villages to thrive, especially where this would support services and help meet the authority's housing needs?;*

- 1.11. We agree with these proposals if they are linked to assessment of housing need which takes account of demographic change, local needs assessment and the need for a wider range of housing options for an ageing population.
- 1.12. This is particularly applicable to rural areas where there is an ageing population and more innovation is needed to meet the diversity of local housing needs, including a suitable mix of mainstream, specialist and innovative housing solutions for ageing populations, such as community-led housing or co-housing opportunities.

Question 9

How could streamlined planning procedures support innovation and high-quality development in new garden towns and villages?

- 1.13. It would be very important for any streamlined planning procedures to still specifically include a minimum requirement to create healthy, accessible homes and neighbourhoods that will also meet the needs of an ageing population.

⁶ Dept of Health (2010) *Fair Society, Healthy Lives* http://webarchive.nationalarchives.gov.uk/4/www.dh.gov.uk/en/Publichealth/Healthinequalities/DH_094770

2. Design Standards

Question 12

Do you agree with the proposals to amend the National Planning Policy Framework to:
b) make clear that local and neighbourhood plans (at the most appropriate level) and more detailed development plan documents (such as action area plans) are expected to set out clear design expectations; and that visual tools such as design codes can help provide a clear basis for making decisions on development proposals?;
e) recognise the value of using a widely accepted design standard, such as Building for Life, in shaping and assessing basic design principles – and make clear that this should be reflected in plans and given weight in the planning process?

- 2.1. We agree that the NPPF should be amended to set minimum design standards.
- 2.2. Minimum housing design and construction standards to make all homes healthy & accessible results in longer term revenue cost reductions to government and to individuals (e.g. through improved health, independent living, informal caring, lower utility bills - etc.).
- 2.3. Whilst we welcome the amendment in the Neighbourhood Planning Bill concerning guidance for local authorities on assessing current and future accessible housing need, mandatory minimum standards are critical to driving widespread housing change. Optional standards have failed to deliver improvement in quality and accessibility of homes, eg. Lifetime Homes Standards have only been applied in very few areas, most notably London. The current constraints and requirements placed on local authorities who wish to set the optional accessible housing standards are too onerous and wasteful of limited local authority resources - national compulsory standards would remove this duplication of effort.
- 2.4. National standards would also be beneficial to housing developers, the vast majority of whom operate across the country, using pattern book designs, and therefore different local standards result in additional design work to ensure local compliance.
- 2.5. A new set of updated national standards (including minimum space and design standards) that would result in the building of healthy, sustainable housing for the whole population are needed, particularly in the context of population ageing and the pressures on the NHS.
- 2.6. In addition a 'Good Housing for Ageing' Design Quality Mark would be a helpful driver of innovation (as suggested by APPG (Housing & Care) HAPPI reports^v) and drawing on examples of design excellence e.g. University of Sheffield's DWELL report^{vi}.

Question 15

What are your views on the potential for delivering additional homes through more intensive use of existing public sector sites, or in urban locations more generally, and how this can best be supported through planning (using tools such as policy, local development orders, and permitted development rights)?

- 2.7. There is great potential to make better use of public sector sites to build better housing for an ageing population to a design which will result in wider fiscal gains to the public purse (eg through reduced costs to the NHS and social services). This is particularly relevant in the case of well located sites in urban centres (eg. near to public transport, facilities). We would welcome policy drivers that would support such a strategic use of public land (for example, as administered by the One Public Estate programme) for wider social gain and health dividend, rather than simply selling to the highest bidder.

Question 35

Do you agree with the proposals to amend national policy to:

a) Amend the list of climate change factors to be considered during plan-making, to include reference to rising temperatures?

b) Make clear that local planning policies should support measures for the future resilience of communities and infrastructure to climate change?

2.8. We agree with the proposals with regard to impact of rising temperatures. This is especially relevant to an ageing population as the health of the 'older old' are particularly affected by living in homes that are too warm, as well as cold homes and the affects of dehydration are particularly costly to the NHS. Setting standards for the thermal performance of buildings that not only address affordable warmth but also designed to avoid overheating is critical in the context of an ageing population.⁷

General References

ⁱ Between 2008 and 2033 around 60% of projected household growth will be made up of households with head of household aged 65 or older - Source DCLG (2013): <https://www.gov.uk/government/policies/providing-housing-support-for-older-and-vulnerable-people>

ⁱⁱ Government Office for Science (2016) Foresight Report: *Future of an ageing Population* London, GOScience

ⁱⁱⁱ Nicol, S et al (2015) *The cost of poor housing to the NHS* Watford, Building Research Establishment

^{iv} Heywood, F.S. and Turner, L (2007). *Better outcomes, lower costs: implications for health and social care budgets of investment in housing adaptations, improvements and equipment - a review of the evidence*. HM Government Office for Disability Issues and University of Bristol

^v HAPPI reports http://www.housinglin.org.uk/Topics/browse/Design_building/HAPPI/

^{vi} DWELL (2016) *Designing with Downsizers: The next generation of 'downsizer homes' for an active third age*. Sheffield, University of Sheffield

⁷ <http://www.housinglin.org.uk/Topics/type/Maximising-the-Benefits-of-Passivhaus-A-Guide-to-Supporting-Older-Occupants/>