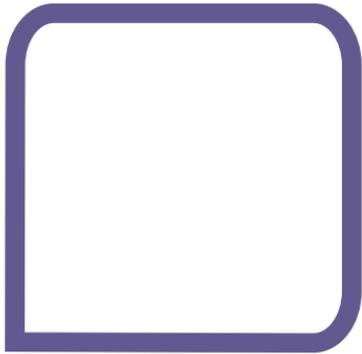
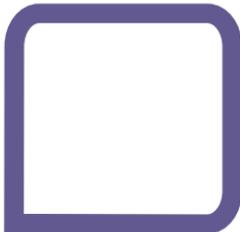


# Knitting together



planning and our ageing population

# Knitting together: planning and our ageing population



## Executive summary

The demographic profile of the UK will face a significant shift over the next 20 years accelerating toward an ageing population. The number of over 65s is set to increase 47 per cent by 2026. The implications of this change are wide reaching and necessitate joint working between planning, health, adult social care, housing and other council services and partners.

### Key issues:

**Housing demand** will increase as people choose to remain in large homes resulting in slower stock turnover. Failure to think ahead will not give people and communities any options.

**Rural exclusion** and isolation from services will become a bigger issue as an ageing population can no longer drive to neighboring villages. Sustainable development needs to be thought through to make it desirable for older people.

**Poverty and inequality** will increase as the balance between those economically active and inactive shifts locally. This needs careful balancing when considering development and mixes of housing types and tenures.

Planners have started to address these issues through various stages of the place shaping process. In this case study we look at authorities that already have a high population of older people as they share some of the challenges and potential solutions that the planning service can deliver.



We also look at authorities that have identified a need to plan for an increasing ageing population and how they are incorporating this cross-cutting issue into their plans.

This case study highlights the importance and benefits of planners working closely with internal and external partners to create policies and a vision which respond to the challenges of an ageing population. The study follows the plan-making process through the following themes:

- identifying the scale of the issue
- listening to the community
- understanding competing priorities
- knitting together the cross-cutting themes of planning for an ageing population
- using planning tools to secure funding for the provision of homes and facilities
- delivering housing options that support independent living.

We want to emphasise that work on planning for an ageing population is not good enough. Authorities seem to be focussed on housing older people, with less regard to the wider implications that this shift will have on the community. We would like to highlight the challenges beyond just accessibility and housing, moving toward a discussion on the spatial components of this issue. Where will you be living in 10, 20, or 30 years? This case study should be read as an initial discussion about approaches to planning for a large demographic shift. We welcome readers to contribute new ideas and thoughts on this topic on our website at: [www.pas.gov.uk/ageingpopulation](http://www.pas.gov.uk/ageingpopulation).



## Introductory facts and figures

In 2006 it was estimated that there were nearly 9.7million people aged 65 and above in the UK. By 2026 this figure is expected to increase by 47 per cent, reaching 14.2 million.

The percentage change is even more significant in the over 75s and over 85s with increases of 61 per cent and 88 per cent respectively. By 2036 the increases will be even more profound.

The 2008 CLG publication *Lifetime Homes, Lifetime Neighbourhoods – A National Strategy for Housing in an Ageing Society*, sets out how the government has made housing and planning communities for an ageing population a national priority.

The new and ambitious Public Service Agreement (PSA17) on tackling poverty, promoting independence and well-being in later life reflects the new focus on the issues. This PSA is supported by several national indicators that encourage local authorities to take a leadership role in shaping communities. The relevant national indicators are:

- **NI 137** Healthy life expectancy at age 65
- **NI 138** Satisfaction of people over 65 with both home and neighbourhood
- **NI 139** People over 65 who say that they receive the information, assistance and support needed to exercise choice and control to live independently
- **NI 142** Number of vulnerable people who are supported to maintain independent living.

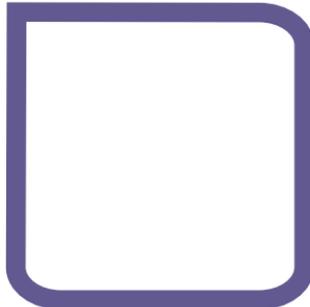


Planning policy itself provides less explicit guidance on dealing with an ageing population but advocates “clear and comprehensive inclusive access policies” and for local authorities to devise plans which should “consider people’s diverse needs and aim to break down the unnecessary barriers and exclusions in a manner that benefits the entire community” (*PPS 1: Delivering Sustainable Development*).

In the Ministerial Foreword to Lifetime Homes, Lifetime Neighbourhoods, Baroness Andrews states that our approach to dealing with an ageing population should be simple, “...everyone should be able to make a choice that reflects their lifestyle and circumstances.” This means ensuring we plan our communities in a way which reflects the changing shape of society. Planners have a key role in delivering this objective, and the following case studies show how this is being considered, from the inception of ideas in LDF production to delivering results on the ground.

## How local planning authorities are recognising the changing demographics and implications of an ageing population

There is clearly a need for change in the way planners approach planning for an ageing population – all the way from plan making through to implementation. The authorities we spoke with are aware of the changing demographics and some of the spatial and social implications of this issue. They gained this awareness through partnership working and community engagement.



## Identifying the scale of the issue

**Cornwall Council** is a recently formed unitary authority that is working closely with the Cornwall Strategic Partnership and the health trust to identify issues and imbalances throughout the county that would affect an older population. Cornwall already has an older age profile than the UK average. This is expected to increase in line with national trends creating a clear need for policy attention now.

The council has started gathering evidence through a series of community networks that are helping to identify issues at a very local level. Rachel Bray, Senior Policy Officer for the council, identifies the scale of the task ahead: "Although still in the early stages of development, Cornwall's Core Strategy needs to anticipate the effects which an ageing population will have on the requirements for elder care housing, integrated service provision and facilities."

To demonstrate the challenge ahead, Rachel pointed to a study by the Institute of Public Care (IPC) which identified that approximately 5,000 extra care units would be required across Cornwall by 2028. There are currently 106 extra care units in the pipeline, with only one scheme under construction and one awaiting s106 agreement. Extra care units combine independent living accommodations with the option of adding care provisions when required.

Development for extra care units competes with Cornwall's other priorities such as high housing targets and the need for employment land. But this isn't the only type of housing that Cornwall is considering for the elderly population. As Rachel highlights, "policy makers need to respect that the needs and aspirations of tomorrow's elderly population may not be the same as those of today's." Consultation has shown that many people would like to stay in their homes as long as possible.



To address this, the council is looking at the sustainability of rural settlements, with the intention to make smaller communities as self-contained as possible, with a range of local services. This should benefit all in the community, not just the ageing population. This is important as the isolated nature of many villages within Cornwall creates issues for access to health care facilities and other services by public transport.

The core strategy draft issues papers and the sustainability appraisal scoping document, set out some of the implications of an ageing population in Cornwall in the coming years. The key issues identified include social inclusion, housing, health and transport. Rachel noted that these challenges have come to a crunch point and the need for joint working has made itself clear. A group has been set up to look specifically at the need for extra care housing. This has acted as an impetus to get the right services working together, and should provide the basis for further collaboration between social services, housing and planning.

“Policy makers need to respect that the needs and aspirations of tomorrow’s elderly population may not be the same as those of today’s.”

## Listening to the community

Camden's ageing population is just one of the issues that the council is tackling in preparing its LDF.

Demographic analysis shows that Camden has a relatively small population over current retirement age, accounting for less than 11.6 per cent of the overall population. The numbers are set to increase gradually over the period of the LDF (to 2025), but with a very small increase in the overall proportion to 12 per cent. The Equality Impact Assessment for their core strategy revealed that older people are well represented in Camden.

To ensure the council understands the needs of Camden's older people, the planning service has worked in partnership with services such as Housing and Adult Social Care, which has its own Engagement and Research team within the council. This has given the planners access to information regarding the aspirations of the older population in terms of the types of housing and community facilities they require.

The Housing and Adult Social Care service holds regular meetings with tenants in council run and extra care housing. The results of these meetings are fed back to the LDF team, helping to provide a consistent and helpful insight into local needs and requirements of the population.

Housing and Adult Social Care's Engagement and Research team has been supporting the Gospel Oak Older People's Network. In 2008 members of the network carried out an inspection of streets in Gospel Oak and Kentish Town. It provided an evaluation of the positive and problematic issues that are faced by older people in gaining free and easy access around certain areas of the borough.

The group worked with Camden's planners and highways officers who have been very receptive to their views. The street inspection work and report was the catalyst for Camden to earmark funding for street works in the area.



Frank Dove, a Community Engagement Officer in Housing and Adult Social Care at Camden, comments that “work such as that carried out by the [Gospel Oaks] group has helped foster better understanding and helped connect planners with the resource knowledge and understanding that the older population provide. This has resulted in wider ranging positive effects by creating change that is for everyone, not just older people.”

Camden’s Proposed Submission Core Strategy now takes into account the needs of different groups with sustainable transport initiatives being key to ensure that families, disabled people and elderly people are not isolated (Policy CS11).

The Council’s policy approach has adapted and now aims to minimise social polarisation and create mixed and inclusive communities across the borough. This includes providing a variety of housing types suitable for different groups, including families, people with mobility difficulties, older people, homeless people and vulnerable people (Policy CS6).

## Understanding competing priorities

Sunderland's impetus for incorporating the needs of elderly in their planning process came from their 2004 Interim Strategy for Housing Land. They found that young people tend to stay in the city long enough to earn a sufficient amount to buy a home elsewhere. This leaves a sizable older population in the city that is not supported by a solid younger generation.

The planners engage with the older population through the Independent Advisory Group, the voice of older people in the community, as part of their consultation process. The group highlighted the need for easy access buses and transport into the town centre without cars. Their biggest desire was for more bungalow housing for older people. However, the council views bungalows to be disproportionately expensive and not the best use of housing land. This highlights one difficulty in planning for an ageing population: we are trying to meet the needs of a growing demographic in the face of priorities that conflict with their needs.

Sunderland has taken an interesting approach to the high rise flats in the city centre built in the 1960s and 1970s. The design of the tower blocks was not suitable for young families and became very unpopular social housing. At the same time, the list of older people on the social housing list was growing. The council found a solution in converting the housing for sole use by older people. Occupants must be 50 or older to have a flat in the buildings, which have dedicated management to ensure that they are well maintained. The blocks have become very popular as they cater for the needs of older people who want safe and well managed homes.

## Knitting together the cross-cutting themes

The **City of Southampton** Strategy sets out in its vision that 'Southampton will be known as a city that is good to grow up in and good to grow old in'. In compiling the evidence base for the core strategy, the planners at Southampton recognised that demographic change is a key issue in their area. Through consultation and partnership working they identified the considerations relevant to an ageing population and included these in their core strategy across several policy themes.

Evidence was gathered from the county council demographic projections and the statistics team. Estimated projections show a rapidly ageing population with decreases in age groups up to 45 years old and significant increases in groups above this. According to these projections, the number of female residents aged 85 or above will increase by nearly 40 per cent in the next six years. The projected changes in household type show continued increases in smaller households with one or two adults.

During consultation the implications of an ageing population across a range of policy areas were raised by a number of respondents including the Later Years Partnership, Southampton City Primary Care Trust, Southampton Partnership, developers of specialist housing, and local residents.

The Later Years Partnership was engaged throughout the preparation of the strategy itself. Their comments informed and led to some alterations to the strategy and terminology of the document. However, the partnership is firm in stating that the core strategy could have addressed their concerns more strongly. Their consultation response states: "We can create a city and local neighbourhoods in which senior citizens are physically, socially, and economically marginalised, or a city where they are independent, supported, confident, valued, and contributing. The land uses, building designs and standards, spaces, routes and paths – the physical environment – have a fundamental impact on these issues."

Southampton's LDF team sees the implications of this issue for infrastructure, businesses, employers and service providers. They also recognise that there will be opportunities in future plans to shape the physical environment and address the issues raised by the Later Years Partnership. Dawn Heppell, Principal Planning Officer, in the LDF team comments "The key is that the issues have been identified in the core strategy and are part of cross-cutting policies, which are designed with the needs of an ageing population in mind, but which will benefit the wider population by making the city a more inclusive and accessible place for all groups and individuals."

The range of considerations for planning for an ageing population is wide and includes:

- creating policies on accessible design which will also benefit parents with young children and disabled people
- developing good local centres that provide a mixed retail offer and services close to where people live
- recognising shifts in how people use their leisure time and facilitating more cultural activities
- engaging with local employers to create opportunities and providing training in new skills for older people to return to work
- protecting the current health facilities and making sure they are accessible to everyone.



**Newcastle Under Lyme Borough Council** has tried to incorporate the needs of the ageing population into policies that provide spaces and developments which are inclusive for everyone's needs, rather than writing policies providing for individual groups of society.

The council used a strong evidence base (see link at end of report) in compiling their LDF documentation and, as Sean Walsh of the policy team explained, they have worked closely with the borough council's Housing Strategy Team as well as the LSP, doing presentations and joint workshops to gain a better understanding of the issues facing the borough.

Newcastle identifies in the 'Spatial Portrait' section of its Core Spatial Strategy that "the housing mix needs to reflect the needs of an ageing population" while also acknowledging that some existing housing stock does not meet these requirements. The Site Allocations DPD will make provision for a housing mix that meets the needs identified through locally based assessments.

This will ensure that the requirements of specific groups, such as older and disabled people, are taken into account.

Walsh has however already recognised that "there is an increase in the type of proposal for 'extra care facilities' within the borough, and the needs of an ageing population are already being recognised through developments of this nature." The borough council is being proactive through partnership working, to ensure that the wider needs of the community are incorporated into such schemes.

"We can create a city and local neighbourhoods in which senior citizens are physically, socially, and economically marginalised, or a city where they are independent, supported, confident, valued, and contributing. The land uses, building designs and standards, spaces, routes and paths – the physical environment – have a fundamental impact on these issues."

## Delivering housing options that support independent living

In contrast to traditional housing for older people such as residential care homes, more developments aim to empower residents by providing homes that maintain independence for occupants. These schemes attempt to build communities in and around the housing provided. They offer security and easy access to day-to-day services and facilities while maintaining independence.

**Bristol City Council** has provided a new form of extra care homes in various locations across the city under the Very Sheltered Housing (VSH) scheme. The goal of the VSH programme is to enable older people to continue living independently within their own homes with care and assistance readily available.

Following a best value review of services for older people (which incorporated wide ranging consultation with the older population of the city) the council developed ways to improve the type of care and housing for the older population. They found that the residential care style of housing was not what the community desired so they provided an additional option for housing under VSH.

The housing and social services departments worked alongside the city council planners from an early stage in the design process. Older people were consulted on design matters to ensure that the developments are inclusive and provide accessible, comfortable homes which cater for the needs of the occupants.

Indeed, as Carmel Brogan of the city council explains, “the schemes have increased in popularity to an extent where older people are becoming involved with the design phases of the schemes and the waiting lists for flats in the developments are continually increasing.”





Although there have been four changes in the political administration of the council, councillor support of this scheme has remained consistent.

The funding for this scheme came through several sources. The majority of the funding has been shouldered by the five house builders involved with the project, with costs estimated to be upwards of £60m. The city council made a significant contribution of around £8m. This was derived from two principle sources; firstly the council made bids to the Housing Corporation (now Homes and Communities Agency) and; secondly monies were raised through the sales of shares the council held within Bristol Airport.

**Newcastle-under-Lyme Borough Council** has responded to the need for adaptable housing by working in partnership with Aspire Housing, North Staffordshire Primary Care Trust, RENEW, Prima 200 North Staffordshire and English Partnerships to develop an 'extra-care' village in Newcastle-under-Lyme.

The village grew out of an opportunity to offer better housing and care for older people. As with the Bristol VSH scheme, local authority planners were involved in the design process from an early stage, assisting where required through the consultation phases.

Many residents have moved from housing next to the village that was in poor condition and due for demolition. Through the creation of the 'extra-care' support village, the partnership has provided a comfortable living environment for older people that does much more than simply find alternative accommodation for the residents of the old housing.

The village has direct access to the Milehouse Primary Care Centre and pharmacy, so it is possible to visit a doctor and pick up a prescription without leaving the village. The development also provides areas where residents can socialise, such as gardens, greenhouses, a hairdresser, a coffee shop and a restaurant. In addition, there is close and convenient pedestrian access to a nearby supermarket.



The development opened in June 2009 and provides an example of a proposal that responds directly to the needs of the older population. Denise Smallman, Head of Neighbourhoods and Partnerships at Newcastle-under-Lyme Borough Council, highlighted “the fact that local people had an opportunity to influence aspects of design was important in creating interest and ownership of the development.”

She believes that “the project has been successful because of the close working relationships between the various organisations and the involvement of local people in the project.” She is keen to note the role the Neighbourhood Management Pathfinder programme has played in raising awareness and providing support for older people regarding the development.

The Mill Rise Development was funded through both the public and private sector. Costing in excess of £17m, substantial grants were made by the Housing Corporation (£4.5m) with significant funding also contributed by Prima 200 (a Local Improvement Finance Trust) and Aspire Housing, the RSL of the site, which provided the most significant contribution to the scheme. Monies were also invested in the scheme by the county and borough councils and RENEW.



## Using planning tools to secure funding themes

The RTPI's 2004 paper *Planning for an Ageing Population*, found no evidence of Section 106 agreement improvements to facilities specifically for the older population. The working party which ran and produced the document commented that it "sees no reason why such provision cannot form part of such agreements and would urge that in future local authorities do so."

**The London Borough of Greenwich** has produced a Planning Obligations Supplementary Planning Document (SPD) that provides clear guidance on the contributions to wider community benefits that can be triggered by certain types of development.

Greenwich used a model for calculating contributions from the NHS London Healthy Urban Development Unit (HUDU) which aims to promote joint working between primary care trusts (PCTs) and local planning authorities. Planners at Greenwich used the HUDU Health and Urban Planning Toolkit to calculate planning contributions from developments towards healthcare services. The model is actively used by the majority of London PCTs and boroughs and has been successful in helping PCTs to secure over £26 million for additional health facilities and services.

Annexes to Greenwich's SPD outline the requirement for contributions to both Health and Social Services and Local Community Facilities. Contributions will aim to directly provide health facilities for vulnerable groups and social services to support the older population (e.g. Meals on Wheels).

Greenwich views the provision of adequate community facilities as vital in producing sustainable and cohesive communities. The SPD states that such community facilities provide particularly important resources to vulnerable groups of society, such as the elderly. It provides a sound basis for contributions to be made, which will assist in creating the inclusive communities the borough desires.

Tools and guidance are available from the HUDU website: [www.healthyurbandevelopment.nhs.uk/](http://www.healthyurbandevelopment.nhs.uk/).



## You've heard it before but it still rings true...

- **Engage** with the **local community**. The benefits of consultation and support stretch beyond securing a sound evidence base, and can result in securing funding for infrastructure which benefits the whole community.
- Work in **partnership** with groups like the LSP and make use of the variety and depth of knowledge they can bring to help shape policy. They can help identify where planning and other council services can work jointly, to contribute to the targets set in the local area agreement.
- Consult and make use of **stakeholders** and organisations (such as the PCT) at an **early stage**, whether it is during the plan-making process or when dealing with development proposals. Early consultation can help avoid unduly slow adoption or approval of a policy or scheme.
- Issues faced by the older population are often mirrored elsewhere in society. Listening to the community and tackling these issues can make a **positive change for everyone**.
- Make use of **other council services** and the knowledge and information they have. Other services, such as housing and adult social care, can help planners identify where policies and development can contribute to the needs of older people.
- Listen to what the older population wants from developments and consider examples of good practice. Engagement with the right people has led to **successful projects** that respond to aspirations of **independent living** and **inclusive communities**.

## References

Contributing organisations:

**Bristol City Council**

(With thanks to Carmel Brogan)

**Cornwall Council**

(With thanks to Rachel Bray,  
Sarah Arden, James Evans and  
Andrew Golay)

**Healthy Urban Development Unit (HUDU)**

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**London Borough of Camden**

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**London Borough of Greenwich**

(With thanks to Catherine Warburton  
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**Newcastle-under-Lyme Borough Council**

(With thanks to Denise Smallman  
and Sean Walsh)

**Southampton City Council**

(With thanks to Dawn Heppell)

**Southampton 'Later Years Partnership'**

(With thanks to Charlie Hislop)

## Relevant guidance

**Commission for Architecture and the Built Environment**, *'Homes for our old age, independent living by design'*  
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**Department of Health, Communities and Local Government and Department for Work and Pensions**, *'Lifetime Homes, Lifetime Neighbourhoods: A National Strategy for Housing in an Ageing Society'*  
2008

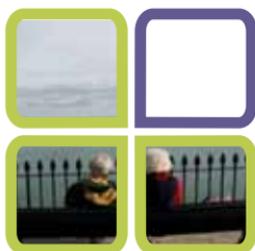
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*'Extra Care Housing, Development planning, control and management' (RTPI Good Practice Note 8)*,  
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**Newcastle-under-Lyme Borough Council LDF Core Strategy**  
**evidence base:**

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