Three

Report for Norfolk Councils

Study of demand for specialist retirement housing and accessible housing for older people and related planning and viability issues

November 2021

Three Dragons and Opinion Research Services

TABLE OF CONTENTS

Glossary 3
Executive Summary 5
1. Forecasting Specialist Housing Demand In Norfolk..... 11
2. Older People In Residential Bedspaces (Use Class C2)..... 27
3. Housing For People With Disabilities (1 Or More Photos Of Bungalows Could Go In This Chapter) 32
4. Planning Policy Issues 48
5. Viability And Deliverability Of Retirement Housing Development 70
Appendix 1: Sub Area Analysis By District 74
Appendix 2: 2014 Population Projections Extended To 2041 97
Appendix 3: Current Supply Of Retirement Housing: Key Findings From The Registered Provider Survey.. 100

Prepared by

Kathleen Dunmore, Paul Dunnell and Julia Atkins Three Dragons

Nigel Moore ORS

GLOSSARY

Definitions of Different Types of Specialist Retirement Housing (Source Elderly Accommodation Counsel and Association of Retirement Community Operators (ARCO))

Age-Exclusive Housing

- Schemes or developments that cater exclusively for older people, usually incorporate design features helpful to older people, and may have communal facilities such as a residents' lounge, guest suite and shared garden, but do not provide any regular on-site support to residents

Sheltered Housing

- Sometimes referred to as retirement housing, this offers a well-designed home of your own plus communal facilities and some services. Most schemes comprise flats, but bungalow estates exist too. Newer schemes usually offer 1, 2 and sometimes 3 bedroom properties; older ones may include some studio (one room) flats.
- The facilities may include a residents' lounge, a visitors' room, a communal garden and laundry. Typically, the scheme will have a full- or part-time manager whose job includes providing support and advice to residents.
- Many sheltered schemes have an important social dimension. Residents and/or scheme managers may organise regular coffee mornings, bingo, entertainments, religious services or outings.

Extra Care Housing

- Retirement housing with a high level of services and facilities, meals and personal care services. Seen as an alternative to residential care.
- Sometimes referred to as "Housing with Care".

Retirement Community (ARCO)

- Retirement Communities may also be referred to as retirement villages, extra care housing, housing-with-care, assisted living, close care apartments, or independent living settings.
- They combine high quality housing options for older people with tailored support services. They allow residents to rent or own a property and to maintain their privacy and independence, with the reassurance of 24-hour on-site staff, communal facilities, and optional care and support as needed.

Definition of Use Class C2 Residential Institutions (Sources Planning Portal and Age UK)

- Residential care homes, hospitals, nursing homes, boarding schools, residential colleges and training centres

- Care homes provide accommodation and personal care for people who need extra support in their daily lives. Personal care might include help with eating, washing, dressing, going to the toilet or taking medication. Some care homes also offer social activities such as day trips or outings. Care homes are sometimes referred to as residential homes.

- Nursing homes provide personal care as well as assistance from qualified nurses. These are sometimes called care homes with nursing.

Definition of Accessible and Adaptable Housing (Source DLUHC Planning Policy Guidance)

- Accessible and adaptable housing will provide safe and convenient approach routes into and out of the home and outside areas, suitable circulation space and suitable bathroom and kitchens within the home.
- Wheelchair user dwellings include additional features to meet the needs of occupants who use wheelchairs or allow for adaptations to meet such needs.

PPG Paragraph: 008 Reference ID: 63-008-20190626

Definition of a Household (Source ONS)

- A household is one person living alone, or a group of people (not necessarily related) living at the same address who share cooking facilities and share a living room, sitting room or dining area. A household can consist of a single family, more than one family, or no families in the case of a group of unrelated people.

EXECUTIVE SUMMARY

Introduction

Norfolk, in common with the rest of the UK, faces an ageing population. In the period from 2016 to 2041 the number of households aged 75 and over is set to increase from 89,723 to 127,111, an increase of 41.7%[1]. Over the same period the overall number of households in the County is expected to increase by only 1.6% to 415,878 households[2]. Older people seek a variety of housing options but their choices are presently limited by a shortage of specialist supply and poor provision in the existing general needs housing stock for people whose needs may change as they become frailer.

National government has recognised the need to make better provision for older people. National Planning Policy Guidance states that "Plan-making authorities should assess the need for housing of different groups and reflect this in planning policies." Offering older people a better choice of accommodation to suit their changing needs can help them live independently for longer, feel more connected to their communities and help reduce costs to the social care and health systems.[3]

Plans need to provide for specialist housing for older people where a need exists. Innovative and diverse housing models will need to be considered where appropriate[4]. Retirement accommodation can meet the needs of many older people and can contribute to maintaining independence and minimising the health impacts of ageing, hence keeping down the cost of care to individuals and to the local authority[5.]"

This report looks at demand for specialist retirement housing as well as for care homes, dementia housing and accessible and wheelchair housing in Norfolk.

Demand for specialist retirement housing

We modelled demand for specialist retirement housing looking at projected household growth among households aged 75 and over, propensity to move to specialist retirement housing if it was available and existing supply of retirement housing. It was assumed that home owners and market renters would want to move to a market housing option and affordable and social renters to an affordable rented housing option. We also looked at the split in demand between Extra Care and Sheltered Housing[6]. Modelling showed that **across the whole of Norfolk in 2020 there is unmet need for 2,809 units of extra care housing and 3,203 units of sheltered housing. By 2041 these figures will have risen to 5,130 and 9,644 respectively.**

By 2041 each of the rural districts need more than 750 extra care units and more than 1,000 sheltered units. Demand is less strong in Great Yarmouth but will still require 596 extra care units and a minimum of 752 sheltered units (rising to 1,224 if tenure preference based on existing tenure

[1] Based on the 2014 based household and population projections – see Appendix 1

[2]

[3]PPG 2019 Paragraph: 001 Reference ID: 63-001-20190626

[4] PPG 2019 Paragraph: 012 Reference ID: 63-012-20190626

[5] PPG 2019 Paragraph: 001 Reference ID: 63-001-20190626

[6] The split between extra care and sheltered housing was based on ratios recommended in "Housing in Later Life" 2012 which take account of the extent of frailty and difficulties in performing activities of daily living

is taken in to account). Norwich will require 285 extra care units and potentially upto 415 sheltered units if current tenure preference is taken in to account.

For all housing options settlements in the Broads Authority are modelled within their local authority area. The forthcoming Great Yarmouth and the Broads NPA LHNA study is expected to look specifically at older persons housing demand in the Broads.

Dementia Housing

According to the Alzheimer's Society "there are currently 16,770 people living with dementia in Norfolk and by 2030 this figure will have risen to 22,370" with the total cost of care (including unpaid care) of over £1bn per annum.

Ninety-five percent of people in the UK living with dementia are aged 65 and over[7] and it is possible to calculate the potential number of older people living with dementia based on anticipated population change in these older age groups. The older person population is forecast to increase by 18.4% between 2030 and 2041. On this basis there were 15,932 older people living with dementia in 2020, rising to 21,252 in 2030 and 25,162 in 2041.

At present there is no specific dementia housing in Norfolk although there is dementia provision within extra care housing and in care homes.

Dementia friendly housing as in the Hogeweyk dementia village in Holland[8] consists of housing with a secure environment specifically tailored to the needs of people living with dementia and offers more freedom and activities than a care home whilst providing 24-hour support. Provision of this type of housing should be kept under review by the county and its health and social care partners.

Demand for care homes accommodation (Use Class C2)

The term care home covers both nursing homes and residential care homes. Care homes fall within Use Class C2 "Residential Institutions". Nationally demand for residential care home beds has been falling as access to other forms of accommodation, such as Extra Care increases. Demand for nursing home beds remains strong.

Looking at future demand in Norfolk it is possible to make predictions based on the household projections[9] on the assumption that as the population ages, the number of people moving to Use Class C2 is assumed to rise. Taking the assumption in the national household projections that historic levels of demand will continue to apply, **there is a need for over 6,500 more C2 bed spaces in 2041 across Norfolk**. However, propensity rates for entering Use Class C2 bed spaces have been falling rapidly, so the approach set out in the 2014 based household projections is likely to

[7] Dementia Statistics Hub Numbers of people in the UK | Dementia Statistics Hub

[8] https://opera-care.co.uk/blogs/living-at-home/dutch-dementia-village

[9] The methodology used in the 2014 based household projections is that population projections for an area are calculated by assessing the whole population, but household projections are calculated by removing anyone who is assumed to reside in Use Class C2 bedspaces. For groups such as students, armed forces, prisoners and boarding school residents the total number of people in Use Class C2 is assumed to remain constant in the household projections. However the assumptions taken nationally around older persons are that the rate of entry into Use Class C2 will remain at a constant percentage of the population for those aged 75 years and over

significantly over-estimate the need for new bed spaces. In practice, if current trends continue, there will be little need for net additional Use Class C2 bed spaces.

This of course does not mean that there is no need for new Use Class C2 bed spaces across Norfolk. It is unlikely that all existing supply will be of a good standard currently and it is certainly unlikely that it will all be of a suitable standard in 2041. Therefore, there is likely to be a clear need to provide new Use Class C2 bedspaces to replace existing ageing stock.

There is also a potential overlap between care beds and extra care and dementia housing. If specialist extra care and dementia housing can be developed then this may replace some of the demand for Use Class C2 bed spaces.

For home owners and people with capital, decisions on housing and care options will be influenced by affordability, tax and inheritance issues. Public funding of social and nursing care for people with assets is currently limited and subject to review[10]. Any changes or implications for care charging are not addressed here, but it would be simplistic not to reflect that in later life ,for some people, the need for care and support and the ability to pay for it could have a significant bearing on their housing and care choices.

Housing for people with disabilities

As part of the process of preparing a Local Plan, local authorities must provide evidence of their needs for adapted homes to the M4(2) and M4(3) build standards. The data indicates **that at least an additional 26,800 adaptable homes will be required across Norfolk between 2016 and 2036 and at least 27,600 will be required between 2016 and 2041.**

This would represent the combined need for both M4(2) Category 2 and M4(3) Category 3 housing. **Out of this total at least 5,600 wheelchair adapted homes will be required between 2016 and 2036 and 6,300 between 2016 and 2041.**

It is important to recognise that not all new homes built between 2016 and 2041 will be able to be adapted homes. For example, many homes have already been completed or granted planning permission without a requirement for M4(2) standards, so the required adapted homes will have to be provided from sites without current planning permission

Planning Policies re specialist and accessible housing

In order to establish how planning policy can affect Extra Care or specialist retirement housing provision we used Elderly Accommodation Counsel data on specialist housing supply to identify those local authorities in the East of England who delivered 100 or more new build specialist older person housing units in total between 2017 and 2019. Both North Norfolk and Norwich were included in this category.

[10] See https://www.gov.uk/government/publications/build-back-better-our-plan-for-health-and-social-care/build-back-better-our-plan-for-health-and-social-care

Those local authorities with a high level of delivery of specialist retirement housing also have proactive Local Plan policies in place. Full details of these policies can be found in Chapter 4. Based on their examples it is suggested that local planning authorities should consider developing planning policies which:

- Refer to the potential scale of demand for retirement housing during the plan period.
- Specify provision of retirement housing or other forms of housing suitable for older people (such as accessible housing or bungalows) within major general needs schemes where the general needs scheme is above a certain size, typically 100 or more units[11].
- Where a local authority (such as the Broads Authority) has no large sites, it may be appropriate to give consideration to encouraging provision of smaller schemes of single storey accessible accommodation suitable for older people. Neighbourhood Community Hubs can also relieve isolation and facilitate access to domiciliary care services[12].
- Make clear any standards and locational criteria which the council will apply when appraising planning applications for retirement housing (such as evaluation criteria for Extra Care housing at figure 4.2)
- Set out in the site allocations plan any specific requirements which apply to strategic urban extensions
- Local authorities may wish to consider whether it is appropriate to review Employment Land Allocations to see if any sites are potentially usable for specialist retirement housing. Development Management colleagues should be advised that any proposals for retirement housing in these locations will be assessed against the same criteria as those set out in figure 4.2. When considering change of use (e.g. redundant office or commercial buildings) it may also be appropriate to consider their use for retirement housing.
- Neighbourhood plans can also allocate sites for older person housing where there is a demonstrated local need and to do so would not contravene the overall housing targets contained in the Local Plan.
- Policies should also refer to the need for accessible housing (M4(2) and M4(3)) and the circumstances in which this will be sought.

The Use Class issue (C2 vs C3)

There has been much debate as to whether specialist retirement housing in general and extra care housing in particular, is Use Class C2 a residential bedspace or Use Class C3 a residential dwelling. The main reason for this debate is that Use Class C3 accommodation has historically been subject to affordable housing policies, which can have an impact on viability, whilst Use Class C2 residential bedspaces generally sit outside such policies.

[11] Modern specialist retirement housing schemes which offer care or support are normally a minimum size of 40-60 units. Retirement Housing Villages are often larger than this.

[12] Examples of good practice can be found in HAPPI4 Rural Housing for an Ageing Population https://www.housinglin.org.uk/Topics/type/Rural-Housing-for-an-Ageing-Population-Preserving-Independence-HAPPI-4/

The South Oxfordshire Local Plan, which has recently been found sound, sets an important precedent in that it seeks 40% affordable housing on all new housing, both Use Classes C2 and C3. The Inspector was happy with this policy commenting that…

'the Plan provides a facility, as discussed in Issue 5, for viability considerations to be taken into account. The Plan makes it clear at paragraph 5.46 that Policy H9 is the starting position, and that the exact amount of affordable housing will be determined by negotiation, with departures supported where they are backed by robust evidence, including viability assessments where appropriate.'

This example should enable local planning authorities to take a pro-active approach to seeking affordable housing from all forms of specialist older persons housing including extra care.

Viability and deliverability of retirement housing

Private sector retirement housing providers are active in Norfolk, including both national and local providers. Affordable housing providers are also active in the county although to a lesser extent than their private sector counterparts.

Market housing: We modelled the viability of a specimen sheltered and extra care sale scheme without affordable housing in a high, medium and low value area. Modelling suggests that provision of sheltered and extra care housing for market sale is viable in most high and medium value areas in Norfolk. Provision of specialist retirement housing is more problematic in low value areas. Viability will need to be reviewed as house prices and build costs change over time. Individual local authorities also carry out their own viability appraisals as part of the evidence base for Local Plan polices and these viability appraisals will normally include specialist retirement housing,

Affordable housing: Provision of newbuild sheltered and Extra Care affordable housing was limited during the 2010s due to concerns as to whether the Benefit System would continue to cover the additional rents and service charges incurred for specialist retirement housing schemes. This position should ease now that uncertainties about revenue funding have been removed. There is also grant funding available from the County Council to support provision of Extra Care housing for affordable rent.

The existing specialist housing stock: lessons from the provider survey

We carried out a survey of providers of affordable specialist retirement housing asking about rent levels, stock condition, services provided and long-term plans for the specialist housing stock. Schemes are generally fully occupied without long void periods. Average rents are between £70-80 per week. Less than half the units have access to full or part time warden support and virtually none of them offer onsite extra care. Most units were built before 1990 and less than 20% have been upgraded to modern standards.

Data obtained from the Provider Survey was corroborated by analysis of The Elderly Accommodation Council (EAC) database which is the main national source of information on supply of specialist retirement housing. Both EAC data and the provider survey data raise concerns about

the age, suitability and desirability of the existing stock of affordable rented specialist accommodation for older people in Norfolk into the future.

Next steps

In order to increase housing options for older people the local authorities and other public bodies may wish to consider:

- Provision of free or discounted public land to support provision of specialist housing for older people (taking into account social value when assessing land value).
- The County Council should continue its policy of providing capital grant for affordable extra care schemes.
- Local authorities should adopt pro-active planning policies which seek to increase the supply of accessible M4(2) and M4(3) housing and help to bring forward retirement housing schemes either as free-standing sites or within general needs housing developments.

Finally, it is worth noting that the COVID-19 pandemic has had a very distinct effect on older people, many of whom have spent long periods in isolation and have been dependent on other people to do their shopping for basic necessities or on making use of online and delivery services. It is too soon to say how this experience will impact on peoples housing choices, but Norfolk Councils should consider reviewing older persons housing demand over the next few years as a wider range of housing options is provided and changing lifestyle preferences become evident.

1. FORECASTING SPECIALIST HOUSING DEMAND IN NORFOLK

Why provision of specialist retirement housing is important

1.1 Norfolk, in common with the rest of the UK, faces an ageing population. In the period from 2016 to 2041 the number of households aged 75 and over is set to increase from 89,723 to 127,111 an increase of 41.7%[13]. Over the same period the overall number of households in the County is expected to increase by only 1.6% to 415,878 households.

1.2 Working in partnership Norfolk County Council and all district councils and the Broads Authority asked us to carry out a study which looks to: -

- "Provide a robust evidence-based demand assessment of older people's accommodation until 2036 to inform local planning (2036 later updated to 2041). This should include specialist retirement housing, dementia housing, care homes and accessible housing.
- Provide context on viability and affordability and on how Local Planning Authorities can support development and in particular to provide an analysis of C3 vs C2 Use Classes, and advice for district planners regarding strengthening allocations for affordable extra care housing, if demand is supported by evidence
- Develop site identification criteria which can be used consistently across Norfolk"

1.3 Demand for specialist retirement housing and dementia housing is covered in Chapter 1. Care homes are discussed on Chapter 2 and Chapter 3 deals with accessible housing. Planning policy issues and site criteria are addressed in Chapter 4. Chapter 5 provides an analysis of key issues affecting viability of specialist retirement housing for sale and affordable rent.

1.4 Provision of specialist housing for older people can reduce health and social care costs, improve quality of life and free up general needs housing for younger households. There is a wealth of research (summarised below) which shows that older people living in specialist accommodation enjoy better health and make fewer demands on health and social care services. They feel more secure and enjoy improved quality of life. A recent study by the County Councils Network (CCN) and the Association of Retirement Community Operators (ARCO)[14] found that:

- The availability of suitable housing stock is critical to the health and wellbeing of older individuals
- It is also a key factor in the capacity of public services to sustainably support healthy ageing over the long term, delivering both improved outcomes and huge efficiencies.
- Local planning authorities should consider including policies within their Local Plans that outline the current and future need for older peoples housing and care, including retirement communities.

[13] Based on the 2014 based household and population projections – see Appendix 2

[14] https://www.countycouncilsnetwork.org.uk/give-councils-and-providers-the-tools-to-incentivise-retirement-communities-new-report-argues/

- The study set a joint goal of providing housing with care for 250,000 people in England by 2030.

Recent research by WPI Strategy Ltd for Homes for Later Living "Healthier and Happier" reported that

The 2017/18 English Housing Survey found that **67% of homeowners aged 65 or over live in an under-occupied property**, equivalent to 3.6 million households in England.

The UK has the oldest housing stock in the EU with 38% of our homes dating from before 1946 and 21% from before 1919. Older homes are often in a poor state of repair and have more dangers including cold, damp, fire risk and general fall hazards. They also tend to be lacking basic adaptations such as handrails in the shower and on the stairs as well as more substantial elements such as wider internal doors, stairlifts and walk in showers. For less mobile older people these adaptations mean that everyday essential tasks like getting out of bed going to the bathroom or getting dressed are safer and more manageable, helping to support their independence. (p10)

In 2017/18 falls accounted for 335,000 hospital admissions in England of people aged 65 and over. Around half of people aged 80 and over fall at least once a year. The NHS has described falls and fractures in older people as "*a costly and often preventable health issue*". (p12)

A cold home can cause chronic and acute illnesses and lead to reduced mobility, falls and depression. In 2018 the House of Commons Housing, Communities and Local Government Committee heard there was a well evidenced link between cold homes and chronic diseases such as respiratory and cardiovascular diseases and rheumatoid arthritis and poor mental health. The Committee also heard that cold homes were connected to acute cases such as heart attacks, strokes and falls. (p13)

Around 1.5 million people aged 50 and over are always or often lonely and projections from Age UK suggest this could rise to 2 million people within the next 10 years. Older people who are lonely are more than three times more likely to suffer depression and 1.9 times more likely to develop dementia in the following 15 years (p13)

The average person living in specialist housing for older people saves the NHS and social services £3,490 per year. This is because people living in specialist older persons housing are around half as likely to have falls. They are also far less likely to be lonely, making them significantly less likely to develop dementia and increasing the chance that if they suffer a stroke they will get the urgent medical attention they need (p19)

Specialist older persons housing can help save the High Street. Given the majority of developments for later living are located on or close to a High Street there are also significant community benefits: businesses situated nearby can expect to feel the effects of the grey pound as residents regularly use shops and local facilities;. organisations such as libraries, charity shops and community centres can also benefit. (Source WPI Silver Saviours p3)

Forecasting specialist housing demand

1.5 In view of the potential impact of housing demand from older households we were asked by a consortium of Norfolk County Council and the district councils of Norfolk to model demand for specialist older persons housing up to 2041, looking at demand by type and tenure. The brief specified *"the following headline requirements to provide a robust evidence-based demand assessment of older persons accommodation until 2036 to inform local planning*". This timeline was subsequently extended to 2041 to accommodate planning cycles within the various client authorities.

1.6 We have modelled potential demand for specialist retirement housing in Norfolk using the Retirement Housing Group Model. This model is recommended in *Housing in Later Life*[15] and was used as evidence to support the London Plan. We were asked to model current (2020) demand and potential demand for all districts in 2041. However, because individual districts have different local plan periods, we have also modelled demand for the final year of each emerging local plan. **Figure1.1** below shows the years for which potential demand for specialist older persons housing has been modelled.

Figure 1.1: Years for which demand for specialist retirement housing has been modelled

Local Authority	Years
Breckland	2020, 2036 and 2041
Broadland	2020, 2038 and 2041
Great Yarmouth	2020, 2036 and 2041
Kings Lynn and West Norfolk	2020, 2036 and 2041
Norwich	2020, 2038 and 2041
North Norfolk	2020, 2036 and 2041
South Norfolk	2020, 2038 and 2041

Definitions and terminology

1.7 This report distinguishes between various types of specialist older persons' accommodation including:

a. **Age Exclusive housing**: housing which is age restricted (typically to age 55 and over[16]) and may offer access to the remote personal alarm support service (often referred to as careline) which is available to households living in general needs housing but does not offer warden support or any communal facilities, meals or bespoke site-specific care packages. *Residents in age exclusive housing tend to be younger than residents in sheltered or extra care housing and are less likely to experience a range of frailties or disabilities. Following discussion with the local authorities we have included age*

[15] Housing LIN http://www.housinglin.org.uk/Topics/type/resource/?cid=8654

[16] 55 is the minimum age normally specified in rental agreements or leases for age exclusive housing.

exclusive housing within the existing sheltered housing stock when considering the requirement for additional sheltered housing in all districts except Breckland[17]*.*

b. **Sheltered housing**: this is also age restricted and can be to rent or own but will normally have either an onsite or visiting scheme manager or access to a bespoke helpline. There will normally be communal facilities which may include a café or shop but there is no bespoke site-specific care package. *Scheme residents are typically 75 or over, but the scheme may include some residents aged 65-74*

c. **Extra Care housing**: this is also age restricted and can be to rent or own, will normally have an onsite scheme manager and provide a range of communal facilities. However, residents will also have access to a site-specific bespoke care package, usually including paying for a specified minimum number of hours of care a week with the option to increase usage if required. The care provider is registered with the Care Quality Commission (CQC) with specific carers allocated to the scheme. *Scheme residents are typically 75 or over. Extra care housing can also be known as very sheltered housing, assisted living, enhanced sheltered or as housing with care. Retirement Villages normally provide Extra Care housing*

d. **Dementia housing**: this type of housing is designed to offer specific support to people with midstage dementia who struggle with general needs housing[18] but are not so frail that they need to live in a care home. Scheme layout is dementia friendly and there will normally be onsite care and support as well as a range of communal activities and a café. The care provider is CQC registered with specific carers allocated to the scheme.

e. **Care Homes**: Non independent accommodation for high care needs (residential and nursing care Planning Use Class C2) are addressed in chapter 2. This type of accommodation is normally for rent only.

f. **Accessible housing:** This is covered in chapter 3

1.8 Currently in England an estimated **8% of households aged 65 and over live in specialist retirement housing (515,666 dwellings)[19].** Research for the Housing LIN[20] suggests that, based on comparisons with the USA and Australia where the stock of older persons' housing is higher and those people who wish to live in specialist accommodation have a practical option to do so, the proportion of older person households (aged 75 and over) moving into specialist retirement housing could be as high as 13-17%. Analysis of Strategic Housing

[17] Breckland Council, which carries out a regular review of local specialist retirement housing provision, was of the opinion that age exclusive housing in the area did not offer the type of support which was needed in retirement housing and requested that current supply of this type of housing be excluded from consideration.

[18] General needs housing is housing which does not offer any adaptations, support or care to meet the needs of specified household groups such as older households or people living with disabilities – housing which does meet the needs of these groups is generally referred to as supported housing or (where domiciliary care is provided) housing with care

[19] Based on a comparison of the total number of specialist older persons housing units at July 2015 (Source EAC) with the total number of households aged 65 and over taken from Household projections England 2012 table 414 https://www.gov.uk/government/statistical-data-sets/live-tables-on-household-projections

[20] "Downsizing for older people into Specialist Accommodation" Janet Sutherland for Housing LIN February 2011

Market Assessment findings from surveys of over 13,500 households aged 50 plus suggests that around 20% of all older households would consider moving to specialist retirement housing if it was available. We have modelled 17.5% of households aged 75 and over plus 2.5% of households aged 65-74[21]

1.9 Our assessment of need for extra care vs sheltered housing is based on ratios used in *Housing in Later Life* taking into account anticipated levels of care or support needs among older persons and published data on difficulty in carrying out activities of daily living (ADLs). Housing in later life estimates that 72% of people aged 75 and over moving into specialist retirement housing (sheltered and extra care) will require sheltered housing and 28% will require extra care[22]. We have applied these ratios to households aged 75 and over and have assumed that all households living in retirement housing who are aged 65-74 require sheltered housing.

1.10 It should be noted that extra care housing[23] is easier to manage and provides better quality of life for residents if the scheme contains a mix of persons requiring sheltered and extra care housing. Some social housing providers adopt a three times one-third model where they seek to have a mix of low, medium and high dependency residents in roughly equal proportions. Private providers do not generally screen residents according to frailty and will accommodate a mix of residents, including people who do not currently need personal care support now but are likely to do so in future. These factors will increase potential demand for extra care and reduce demand for sheltered housing.

Number of households by age and tenure

1.11 As recommended in the MHCLG guidance on modelling housing need we have undertaken the analysis using 2014 based household projections at district level, broken down into households aged 64-74, 75-79, 80-84 and 85 and over[24]. Because this information is not available by age up to 2041 it has been necessary to make projections based on the 2014 based population figures by age, which are available up to 2041. For a full discussion of how the household projections figures were derived see Appendix 2.

1.12 **Figure 1.2** below summarises how the number of older person households will change across Norfolk between 2020 and 2041. In 2020 there were 155,000 households aged 65 and over in the County and this is projected to rise to 210,000 by 2041, an increase of 36%. The most substantial increases are in Breckland and North Norfolk, where the number of older person households increases by more than 50%, The rate of increase is slowest in the urban areas of Norwich (+3%) and Great Yarmouth (+28%).

[21] Based on information from retirement housing providers about the split by age group of people living in their schemes.
[22] Figure 6, p11 Housing in later life. Note that we have applied the split between sheltered and extra care housing 180:61 but have not applied the total figure of 240 units per 1,000 population.
[23] Extra Care housing may be provided in the form of a retirement village
[24] This information is not available for the Broads Authority although the subarea analysis in Appendix 1 does provide a guide to current shortages of specialist retirement housing

Figure 1.2: Households aged 65 and over by district

	Breckland	Broadland	Gt Yarmouth	KLWN	Norwich	N Norfolk	S Norfolk
2020	22,137	22,470	16,910	25,619	21,182	23,342	22,368
2041	34,458	30,213	21,680	34,273	21,890	32,741	34,637

1.13 District based information on tenure among households aged 75 and over is taken from the 2011 Census data and rolled forward to 2041. **Figure 1.3** shows how the 2011 Census age groups have been applied in at various points in time. Although home ownership is falling among younger age groups, even by 2041 across Norfolk as a whole around four-fifths of households aged 80 and over are home owners (**figure 1.4**) although the proportion of home owners is lower in the urban areas of Norwich and Great Yarmouth.

Figure 1.3: 2011 Census data on households by age rolled forward to 2036, 2038 and 2041 Norfolk average

2011	2021	2036	2038	2041	% home owners in 2011
Age 35-49	Age 45-59	**Age 60-74**	**Age 63-77**	**Age 65-79**	66%
Age 50-64	**Age 60-74**	**Age 75-89**	**Age 78-92**	**Age 80 -94**	78%
Age 65-74	**Age 75-84**	**Age 89 +**	**Age 91 +**	n/a	81%
Age 75-84	**Age 85 +**	n/a	n/a	n/a	79%

1. Age group 67-81 treated as 75-84, Age group 82-92 treated as 85 and over
2. Age group 75-89 treated as 75 and over

Figure 1.4: Tenure by age and district 2020

2020	Breckland	Broadland	Gt Yarmouth	KLWN	Norwich	N Norfolk	S Norfolk
Older Home Owners	79%	86%	74%	79%	56%	79%	82%
Older Renters	21%	14%	26%	21%	44%	21%	18%

1.14 In order to assess affordability and potential demand by tenure we have assumed that all renters will require affordable rented housing. Requirements for shared ownership or outright sale are based on a comparison of the price of a newbuild retirement property with

ACORN data on the proportion of older home owners estimated to live in a property of broadly comparable value in the existing housing stock[25].

1.15 District based data from ACORN/CACI on house types and tenure by age has then been used to assess the proportion of home owners who live in properties which are equivalent in value to or more expensive than a 3 bed semi and who can therefore afford to buy new build specialist retirement housing. Older home owners who cannot afford to buy new will normally be able to afford shared ownership or may be able to afford to buy an older second hand retirement housing property.

1.16 In most rural districts in Norfolk demand for outright purchase of specialist retirement housing exceeds potential demand for shared ownership. However, in Norwich and Great Yarmouth, where there are higher percentages of older home owners living in smaller terraced and flatted properties there is potentially stronger local demand for shared ownership, although it may well be that more affluent older home owners from the surrounding rural districts may be interested in moving in to these urban centres as they age and likely car usage declines[26].

Supply of specialist retirement housing

1.17 We have used the Elderly Accommodation Counsel (EAC) First Stop database to derive current (2020) supply of older persons accommodation. This information has been verified through the provider survey and checked by the local authority housing teams. It is believed to be substantially correct, with the exception of Breckland where there is a large stock of social/affordable rented age restricted elderly persons dwellings which have no communal facilities or onsite support and may offer access to a district based careline[27]. In Breckland we have calculated demand for specialist older persons housing, without these units included in total supply.

1.18 There are currently 9,363 units of specialist retirement housing in Norfolk (after discounting age exclusive housing in Breckland, where the local authority was able to provide definitive information about the characteristics of this type of housing in its area and felt that it did not offer the type of support required to qualify as specialist retirement housing).

- 88% of these units are sheltered housing and only 12% are extra care
- Only 26% of the total stock (including age exclusive) is for home ownership.

[25] We have used house price estimates contained in the RHG Guide to CIL Viability Appraisal and Retirement Housing which suggest that a 2 bed retirement property is typically priced at a value comparable with an existing 3 bed semi; a 1 bed retirement housing property is priced at 75% of the value of an existing 3 bed semi and a 2 bed extra care property is priced at 125% of the value of an existing 3 bed semi. This assumption has been checked against a sample of newbuild retirement housing schemes across England (in 2020) and appears to be broadly robust.

[26] 45% of women and 33% of men aged 70 and over do not have a driving licence. National Travel Survey Table NTS0201

[27] " The supply of older person housing in Breckland is based on information provided by Breckland District for the social landlord (rent) element and from EAC for the sale and shared ownership (private) element."

- There is a substantial mismatch between current retirement housing supply and potential higher demand for extra care across all tenures and for sheltered housing for home ownership.

Figure 1.5: Retirement housing supply by type and tenure 2020

	Current retirement housing supply - Norfolk
Extra Care Rent	8%
Extra Care Sale	3%
Sheltered rent	67%
Sheltered sale	21%

1.19 Current supply at district level is shown in **Figure 1.6**.

- Norwich is the district with the largest current supply of retirement housing (2,787 units) followed by North Norfolk with 1,401 units and Kings Lynn and West Norfolk with 1,375 units.

- Breckland is the district with the smallest number of retirement housing units (555 units). In this district age exclusive housing without site based personal support has been excluded from the data. If these units were added to the total stock Breckland's total stock of specialist retirement housing would increase to just over 1,300 units.

- The remaining three districts have between 900 and 1,250 units of specialist retirement housing

Figure 1.6: Current Supply of specialist retirement housing by district 2020

	Breckland (1)	Broadland	Gt Yarmouth	KLWN	Norwich	N Norfolk	S Norfolk
Extra Care Rent	54	40	64	70	237	70	182
Extra Care Sale	25	50	0	55	60	91	0
Sheltered Rent	383	493	989	920	1,742	546	691
Sheltered Sale	93	308	101	295	394	457	140
Age Exc Rent	(621)	4	95	22	227	42	12
Age Exc Sale	(129)	23	0	13	127	195	53
Total	**555 (1,305)**	**918**	**1,249**	**1,375**	**2,787**	**1,401**	**1,078**

Note 1: In Breckland the local authority has recorded 621 age exclusive rented units and EAC indicates 129 age exclusive sale units, which the local authority believes do not offer any support which would not be available in general needs housing. If these were included in current supply

of specialist retirement housing this would give a total supply of 1,305 units in Breckland. Numbers shown in brackets in the above table

Current suitability of existing older persons housing stock in the social rented sector

1.20 A survey conducted in spring 2020 (see Appendix 3), whilst it had some limitations due to nature of responses during COVID-19, was able to provide a picture on the age of the existing social rented sheltered and age exclusive stock with the majority of housing being built between 1960 and 1990, with the average built year being 1972. Additionally, the data provided by the survey and analysis of the EAC database does confirm that only a very small proportion of the social rented sheltered and age exclusive stock (15% according to the EAC database) has been subject to any recent renovation.

1.21 The survey was also able to provide insight into the wide range of support provision in existing social rented stock, with only 44% of schemes having access to a warden either part or full time. This raises questions about the nature of support available in these schemes to residents as they age and their needs increase. However, it should be noted that evidence from the provider survey points to low levels of voids and no reports of difficult to let stock.

Demand for specialist retirement housing in 2020 and 2041[28]

1.22 By comparing estimated potential demand for specialist retirement housing with current supply it is possible to calculate potential unmet demand for specialist retirement housing if it was available. This is summarised in Figure 1.7 which totals the results for individual districts (which are shown in Figure 1.8). Across the whole of Norfolk in 2020 there is unmet need for 2,809 units of extra care housing and 3,203 units of sheltered housing. By 2041 these figures will have risen to 5,130 and 9,644 respectively. These figures assume that the current surplus of social rented sheltered housing, some of which is likely to be age exclusive and offer limited on-site support to residents continues to be occupied (because potential movers have no alternative housing options). If potential movers into sheltered housing were to be offered a choice which met their tenure preferences potential unmet demand for sheltered housing rises to 6,932 units in 2020 and 10,930 units in 2041.

[28] Comparable data for local authorities whose local plans run to 2036 and 2038 can be found at Figure 1.15 and 1.16

Figure 1.7: Demand for specialist retirement housing in Norfolk 2020 and 2041

	Norfolk total	
	2020	2041
Demand		
Extra Care rent	**74**	**882**
Extra Care SO	**561**	**859**
Extra Care sale	**2,174**	**3,389**
Total to meet demand by tenure preference	*2,809*	*5,130*
Sheltered rent	**-3,729**	**-1,286**
Sheltered Shared Ownership	**1,385**	**2,167**
Sheltered sale	**5,547**	**8,763**
Total Sheltered	***3,203***	***9,644***
Total to meet demand by tenure preference	*6,932*	*10,930*
Total	**6,012**	**14,774**
Total to meet demand by tenure preference	9,741	16,060

1.23 They also assume that all extra care housing is occupied by people who need extra care, whereas in practice extra care schemes are easier to manage and offer better quality of life if there is a spectrum of need for care within the scheme. Many affordable housing providers operate a management policy of a third of tenants who are either very frail, moderately frail or not very frail and private sector providers will sell to purchasers who meet age-related criteria so their schemes also include a mix of frail and not so frail residents.

1.24 A recent market survey by ARCO[29] found that 14% of older people would consider moving to a retirement community which provided care and 12% would consider moving to traditional retirement housing. This indicates that the actual split between demand for sheltered housing and demand for extra care is likely to be more equal than modelling based purely on frailty and difficulty in performing activities of daily living would suggest. If half of all extra care places are taken by people who currently only need sheltered housing this will increase demand for extra care and reduce potential demand for sheltered housing. There could be advantages to developing mixed extra care and sheltered schemes. This will

[29] https://www.arcouk.org/sites/default/files/ARCO_LLA%20Report%202020.pdf

improve viability and the added benefit of maintaining and sustaining a community environment and allowing friendships to grow.

1.25 **Extra Care:** The districts with the highest potential demand for extra care housing are Breckland and KLWN both of which currently require more than 500 units, rising to 900+ by 2041. Potential demand is also strong in Broadland and North Norfolk where over 400 units are currently required. South Norfolk and Great Yarmouth both currently require more than 300 units. Norwich currently requires less than 100 units although this rises to nearly 300 units by 2041.

1.26 **Sheltered:** Breckland is the district with the greatest need for sheltered housing, followed by Broadland, South Norfolk, North Norfolk and KLWN all of which currently need 700 or more units. There is limited demand in Great Yarmouth, whilst Norwich has more than enough sheltered housing to meet local needs (albeit that there is mismatch by tenure with a large supply for social rent and limited supply for sale and shared ownership).

1.27 **2041**: By 2041 Norfolk needs 5,130 extra care units and 9,644 sheltered housing units. If tenure preferences are taken into account the figure for sheltered housing for 2041 rises to 10,930 units. Each of the 5 rural districts need more than 750 extra care units and more than 1,000 sheltered units. Demand is less strong in Great Yarmouth but still requires 596 extra care units and 752 sheltered units, Only Norwich has enough specialist retirement housing to meet need to 2041, but still requires 285 extra care units and sheltered housing provision is heavily dependent on an ageing social rented stock.

Figure 1.8: Demand for specialist retirement housing – districts 2020 and 2041

	Breckland		Broadland		Great Yarmouth		KLWN	
	2020	2041	2020	2041	2020	2041	2020	2041
Demand								
Extra Care rent	60	201	30	113	35	138	56	196
Extra Care SO	79	125	86	135	143	202	79	119
Extra Care sale	365	574	372	583	181	256	392	591
Total Extra Care	*504*	*900*	*488*	*831*	*359*	*596*	*527*	*906*
Total to meet demand by tenure preference	*504*	*900*	*488*	*831*	*359*	*596*	*527*	*906*
Sheltered rent	-27	398	-280	-31	-777	-472	-550	-128
Sheltered Shared Ownersh	236	357	226	356	390	540	215	322
Sheltered sale	1,091	1,649	978	1537	494	684	1068	1597
Total Sheltered	*1,300*	*2,404*	*924*	*1,862*	*107*	*752*	*733*	*1,791*
Total to meet demand by tenure preference	*1,327*	*2,404*	*1,204*	*1,893*	*884*	*1,224*	*1,283*	*1,919*
Total	**1,804**	**3,304**	**1,412**	**2,693**	**466**	**1,348**	**1,260**	**2,697**
Total to meet demand by tenure preference	***1,831***	***3,304***	***1,692***	***2,724***	***1,243***	***1,820***	***1,810***	***2,825***

	Norwich		North Norfolk		South Norfolk	
	2020	2041	2020	2041	2020	2041
Demand						
Extra Care rent	-73	27	51	197	-85	10
Extra Care SO	64	103	58	88	52	87
Extra Care sale	96	155	336	509	432	721
Total Extra Care	*87*	*285*	*445*	*794*	*399*	*818*
Total to meet demand by tenure preference	*160*	*285*	*445*	*794*	*484*	*818*
Sheltered rent	-1470	-1157	-213	221	-412	-117
Sheltered Shared Ownership	62	166	119	196	137	230
Sheltered sale	94	249	686	1130	1136	1917
Total Sheltered	*-1,314*	*-742*	*592*	*1,547*	*861*	*2,030*
Total to meet demand by tenure preference	*156*	*415*	*805*	*1,547*	*1,273*	*2,147*
Total	**-1,227**	**-457**	**1,037**	**2,341**	**1,260**	**2,848**
Total to meet demand by tenure preference	316	700	1,250	2,341	1,757	2,965

Demand for specialist retirement housing in 2036

Figure 1.9a: Local Plans with end date of 2036

2036	Great Yarmouth	KLWN	North Norfolk
Demand			
Extra Care rent	95	133	134
Extra Care SO	192	114	84
Extra Care sale	243	563	485
Total Extra Care	*530*	*809*	*702*
Total to meet demand by tenure preference	*530*	*809*	*702*
Sheltered rent	-584	-291	58
Sheltered Shared Ownership	514	306	185
Sheltered sale	651	1,518	1064
Total Sheltered	*581*	*1,533*	*1307*
Total to meet demand by tenure preference	*1,165*	*1,824*	*1,307*
Total	**1,111**	**2,342**	**2,009**
Total to meet demand by tenure preference	**1,695**	**2,633**	**2,009**

Demand for specialist retirement housing in 2038

Figure 1.9b: Local Plans with end date of 2038

2038	Broadland	Norwich	South Norfolk
Demand			
Extra Care rent	79	-7	-74
Extra Care SO	130	108	84
Extra Care sale	563	161	698
Total Extra Care	*772*	*262*	*708*
Total to meet demand by tenure preference	*772*	*269*	*782*
Sheltered rent	-118	-1,247	-211
Sheltered Shared Ownership	343	175	225
Sheltered sale	1,481	263	1,868
Total Sheltered	*1706*	*-809*	*1882*
Total to meet demand by tenure preference	*1,824*	*438*	*2,093*
Total	**2,478**	**-547**	**2,590**
Total to meet demand by tenure preference	**2,596**	**707**	**2,875**

Demand for specialist housing in 2041

Demand for specialist retirement housing in 2041

Figure 1.9c: Local Plans with end date of 2041

2038	**Breckland**
Demand	
Extra Care rent	201
Extra Care SO	125
Extra Care sale	574
Total Extra Care	*900*
Total to meet demand by tenure preference	*900*
Sheltered rent	398
Sheltered Shared Ownership	357
Sheltered sale	1,649
Total Sheltered	*2404*
Total to meet demand by tenure preference	*2,404*
Total	**3,304**
Total to meet demand by tenure preference	**3,304**

Dementia Housing

1.28 Dementia is an increasing challenge in Norfolk as in the UK as a whole. Dementia prevalence rates in Norfolk among over 65s at 7.4% in 2020 are slightly higher than the England average of 7.3%.

1.29 According to the Alzheimer's Society there are currently 16,770 people living with dementia in Norfolk[30] and by 2030 this figure will have risen to 22,370 with the total cost of care (including unpaid care) of over £1bn per annum. 95% of people living with dementia are aged 65 and over and it is possible to culate the potential number of older people living with dementia based on anticipated population change in these older age groups. The older person population is forecast to increase by 18.4% between 2030 and 2041. On this basis there were 15,932 older people living with dementia in 2020, rising to 21,252 in 2030 and 25,162 in 2041.

Figure 1.10: Costs of dementia care Norfolk

	2020	2030
- *Total cost of care (inc health, social and unpaid care)*	*£660m (2015 prices)*	*£1,045m (2015 prices)*
- *Health*	*£93m*	*£144m*
- *Social Care*	*£297m*	*£483m*
- *Unpaid Care*	*£267m*	*£413m*
- *Other*	*£5m*	*£7m*

Source: Information provided by the Alzheimers Society[31] Projections of older people with dementia and costs of dementia care in the United Kingdom" 2019

1.30 The Alzheimer's Society also reports that[32] people living with dementia make up 70% of residents in care homes. Integrating people living with dementia with other care home residents can be challenging for both sides and impact on quality of life and access to companionship.

1.31 Various providers have sought to offer specialist dementia housing and to accommodate people with dementia in extra care schemes. The Housing LIN has looked at this topic in its guide to Extra Care Housing Design and comments that

There are differing views regarding the suitability of extra care housing for people with dementia. Extra care housing can be suitable for people with early onset dementia and as their dementia increases, their neighbours can help look after them. However, problems arise when people with advanced dementia move into an extra care scheme and cannot settle into their new environment. The Alzheimer's Society and others have worked to produce the Dementia-Friendly Housing Charter and, more recently, a dementia-friendly

[30] Projections of older people with dementia and costs of dementia care in the United Kingdom" 2019

[31] https://www.alzheimers.org.uk/sites/default/files/2019-11/cpec_report_november_2019.pdf
[32] https://www.alzheimers.org.uk/about-us/news-and-media/facts-media

housing guide. These documents are aimed at housing providers to enable them to become a dementia-friendly organisation at all levels

1.32 At present there is no specific dementia housing in Norfolk although there is dementia provision within extra care housing and in care homes.

1.33 Dementia friendly housing as in the Hogeweyk dementia village in Holland[33] consists of housing with a secure exit in which all the residents are either living with dementia, a family member of someone living with dementia or onsite carers. Schemes do not mix dementia patients and otherwise frail elderly as happens in many care homes. Hogeweyk village provides a secure environment specifically tailored to the needs of people living with dementia and offers more freedom and activities than a care home whilst providing 24-hour support.

1.34 Richmond Villages is developing a scheme in Cheshire based on the Hogeweyk model. Harmonia village a development of six houses in Dover was due to open in 2019 but has not yet opened. St Andrews Hospital in Northampton has recently opened a dementia village for 40 residents[34] but it is very specifically a nursing care model rather than a residential scheme

Based around a village theme, the new environment offers more than a hospital or a nursing home, instead featuring areas such as a village green where family and patients can meet and spend time together, a post office and pillar box, as well as a village hall which acts a social hub for meetings, activities and get-togethers.

1.35 People who have severe dementia will likely continue to be accommodated in care homes but there may also be a role for dementia housing. Various proposals for dementia villages have been put forward in England but so far none of them have opened. Provision of this

type of housing should be kept under review by the county and its health and social care partners.

[33] https://opera-care.co.uk/blogs/living-at-home/dutch-dementia-village

[34] New dementia 'village' opens for 40 patients at Northampton mental health hospital | Northampton Chronicle and Echo

2. OLDER PEOPLE IN RESIDENTIAL BEDSPACES (USE CLASS C2)

2.1 For the purposes of this chapter, we consider C2 to be non- independent accommodation for those with high care needs, in line with the definition of Care Homes in paragraph 1.7.

2.2 Population projections for an area are calculated by assessing the whole population, but household projections are calculated by removing anyone who is assumed to reside in Use Class C2 bedspaces and form part of what the household projections call the institutional population. For groups such as students, armed forces, prisoners and boarding school residents the total number of people in Use Class C2 is assumed to remain constant in the household projections. However, within the CLG 2014 based household projections, the approach to establishing the household population[35] assumes "that the share of the institutional population stays at 2011 levels by age, sex and relationship status for the over 75s" on the basis that "ageing population will lead to greater level of population aged over 75 in residential care homes". This means that as the population ages, the number of people moving to Use Class C2 in the household projections is assumed to rise and that will therefore leave their Use Class C3 dwelling.

2.3 The modelling approach also means that in practice there are 18 different propensities used for persons being resident in Use Class C2, one for each of 3 age groups, 2 genders and 3 relationship statuses and these propensities vary for each local authority. The results can therefore be complex because it is necessary to multiple the number of people in 18 age, gender and relationship groups by 18 different propensities.

2.4 On this basis, the identified household[36] projections in any of the Norfolk local authorities do not include the projected increase of Use Class C2 population for those aged 75 years and over, which represents a growth of an additional 5,239 persons over the 20-year period 2016-36 and 6,515 persons over the 25-year period 2016-2041. These figures are in addition to the current supply.

2.5 To understand how the results were derived we have picked the example of Kings Lynn and West Norfolk. The propensity to be a resident in Use Class C2 is summarised in the table below for 2016 and 2036. These figures reflect the probability that someone is a resident in a Use Class C2 bedspace and are based upon the observed rates in the 2011 Census. Therefore, in 2016, the 2014 based household projections show that 2.12% of females aged 75-79 years would have been occupying a Use Class C2 bedspace. By 2036, this figure is projected to be 2.17%. The reason the figures change over time is a change in the relative mix between single, married and previously married persons and the data shows the increasing propensity to move to a Use Class C2 bedspace as the person gets older.

[35] P11 and 12 of the Household Projections 2014-based: Methodological Report DCLG July 2016

[36] 'Residential institutions' covers both nursing homes and care homes. The difference between the two is the staffing and the type of care a person requires and whether they require nursing care as well as assistance with acts of everyday living, such as bathing or toileting. A nursing home will have nurses as part of their staff and care whereas a residential home will not. There are no home ownership or tenancies in this type of institutional care

Figure 2.1: Probabililty for a Person Being a Use Class C2 Resident by Age and Gender (Source: CLG 2014 Based Household Projections)

Age and Gender	Year	
	2016	2036
Female 75-79 years	2.12%	2.17%
Female 80-84 years	4.41%	4.16%
Female 85+ years	16.14%	14.75%
Male 75-79 years	1.15%	1.37%
Male 80-84 years	2.51%	2.55%
Male 85+ years	7.79%	7.44%

2.6 The propensities for being a Use Class C2 resident are then multiplied by the age and gender profile of the population in 2016 and 2036 and this shows a total projected growth in the Use Class C2 population of 706 persons. Figure 2.2 shows that 568 of this growth is due to persons aged over 85 years. Therefore, unless there is a reduction in the propensity of those aged 85 years to enter Use Class C2 bedspaces there will be a considerable need for additional capacity in the future.

Figure 2.2: Number of persons Projected to be Use Class C2 Residents by Age and Gender 2016-36 (Source: CLG 2014 Based Household Projections. Note: Figures may not sum due to rounding)

Age and Gender	Year		Change 2016-36
	2016	2036	
Female 75-79 years	80	113	33
Female 80-84 years	128	172	44
Female 85+ years	511	872	361
Male 75-79 years	39	67	28
Male 80-84 years	61	93	32
Male 85+ years	149	356	207

2.7 Figure 2.3 shows the projected growth in the number of bedspaces for Use Class C2 usage for each local authority in Norfolk based on the CLG mode for the period 2016 to 2036 and 2016-41. The numbers represent the additional need for the period, not the total need at the end of the time because we assume that all existing provision will also remain. If some existing provision is removed, then this will require to be added to the net growth figures set out in Figure 2.3.

Figure 2.3: Growth in Projected Use Class C2 Residents to 2036 and 2041 (Source: CLG 2014 Based Household Projections. Note: Figures may not sum due to rounding)

Age and Gender	Year	
	2016-36	2016-41
Breckland	1,278	1,598
Broadland	1,014	1,267

Age and Gender	Year	
	2016-36	2016-41
Great Yarmouth	569	710
Kings Lynn and West Norfolk	706	883
North Norfolk	752	941
Norwich	261	332
South Norfolk	659	784
Total for Norfolk County	5,239	6,515

2.8 It is also possible to split the additional need for Use Class C2 bedspaces between those which provide nursing care and those which don't have nursing care. For this, we have used data from the 2011 Census which splits those in communal housing care homes between those with nursing care and those without it by local authority. We have assumed that the same ratio of those with and without nursing care continues into the future and remains at the same rate in each local authority area.

Figure 2.4: Growth in Projected Use Class C2 Residents to 2036 and 2041 by Type (Source: CLG 2014 Based Household Projections and 2011 UK Census of Population. Note: Figures may not sum due to rounding)

Age and Gender	2016-36		2016-41	
	Nursing	Residential	Nursing	Residential
Breckland	369	909	462	1,136
Broadland	343	671	428	839
Great Yarmouth	157	412	196	514
Kings Lynn and West Norfolk	223	483	279	604
North Norfolk	231	521	289	652
Norwich	59	202	75	257
South Norfolk	206	453	245	539
Norfolk total	**1,589**	**3,650**	**1,975**	**4,540**

2.9 We would note that whilst the additional persons aged 75 or over living in communal establishments are not counted as part of the household projections which underwrite the Local Housing Needs figures for each local authority, an allowance is made in the household projections for the dwellings that would be vacated by these people. Therefore, if the people aged over 75 years do not move to Use Class C2 bedspaces, they won't leave their existing homes vacant. However, this does not mean that more dwellings are required. The Local Housing Needs figures comprise the household projections plus an uplift linked to affordability. The affordability linked uplift will include the necessary allowance for those who do not move to Use Class C2 but are assumed to do so in the household projections.

2.10 This allowance is then factored into the Housing Delivery Test Measure Rule Book 2018, which at paragraph 11 states that:

11. The ratio applied to other communal accommodation will be based on the national average number of adults in all households, with a ratio of 1.8. This has been calculated by

dividing the total number of adults living in all households by the total number of households in England. Source data is from the Census 2011 and is published by the Office for National Statistics. The ratio will be updated following each Census when the data is publicly available.

2.11 On this basis, given that housing provided for older people in Use Class C2 should be counted against the housing requirement, it is important that this need is also factored in when establishing the housing requirement. Furthermore, as older people are living longer, healthier lives, and the Government's reform of Health and Adult Social Care is underpinned by a principle of sustaining people at home for as long as possible, it does not necessarily follow that all of the increase in Use Class C2 population should be provided as additional bedspaces Use Class C2; specialist older person housing such as Extra Care may be more appropriate for the needs of some of these older people.

2.12 Figure 2.5 explores this issue in more detail. This compares the probability of being a resident of a Use Class C2 property in the 2001 Census and the 2011 Census in Kings Lynn and West Norfolk again. The rates for all aged groups fell between 2001 and 2011, most heavily for those aged over 85 years. In fact, there were 50 fewer residents aged over 75 years in Use Class C2 properties in 2011 than there were 2001. The same pattern applies for all areas, so if these rates continue to drop there would be little need for any additional bedspaces, other than to replace existing stock as it closes.

Figure 2.5: Probabililty for a Person Being a Use Class C2 Resident by Age and Gender in Kings Lynn and West Norfolk (Source: CLG 2014 Based Household Projections)

Age and Gender	Year	
	2001	2011
Female 75-79 years	2.68%	2.20%
Female 80-84 years	6.49%	4.63%
Female 85+ years	21.11%	16.54%
Male 75-79 years	1.24%	1.14%
Male 80-84 years	3.58%	2.65%
Male 85+ years	12.24%	7.80%

Policy Implications

2.13 Using the modelling approach used to estimate the need for Use Class C2 housing in the 2014 based household projections yields a need for over 6,500 more bedspaces in 2041 than in 2016 across Norfolk, as set out in Figure 2.4. This figure assumes an unchanging rate of prevalence for people moving to Use Class C2 as they age. However, Figure 2.5 indicates that propensity rates for entering Use Class C2 bedspaces have been falling rapidly, so the approach set out in the 2014 based household projections is likely to significantly over-estimate the need for new bedspaces. If rates continue to fall over time, then there is little need for additional Use Class C2 bedspaces in Norfolk.

2.14 This is of course does not mean that there is no need for new Use Class C2 bedspaces across Norfolk. The data set out in this section has not considered the quality of the current Use

Class C2 supply in Norfolk. It is unlikely that all existing supply will be of a good standard currently and it is certainly unlikely that it will all be of a suitable standard in 2041. Therefore, there is likely to be a clear need to provide new Use Class C2 bedspaces to replace existing ageing stock.

2.15 As noted in Chapter 1, there is also a potential overlap between care beds and dementia housing. If specialist dementia housing can be developed, then this may replace some of the demand for Use Class C2 bedspaces

3. HOUSING FOR PEOPLE WITH DISABILITIES

3.1 Paragraph 61 of the NPPF identifies that local planning authorities should plan for households with specific needs, and PPG states:

> ***Households with specific needs***
>
> *There is no one source of information about disabled people who require adaptations in the home, either now or in the future. The Census provides information on the number of people with a long-term limiting illness and strategic policy-making authorities can access information from the Department for Work and Pensions on the numbers of Personal Independence Payment (replacing Disability Living Allowance) / Attendance Allowance benefit claimants. Whilst these data sources can provide a good indication of the number of disabled people, not all of the people included within these counts will require adaptations in the home. Applications for Disabled Facilities Grant will provide an indication of levels of expressed need, although this could underestimate total need. If necessary, plan-making authorities can engage with partners to better understand their housing requirements.*
>
> **Planning Practice Guidance (September 2018), ID 2a-020**

3.2 At the time of writing there is an on-going consultation on the future of these information sources and how they will be applied. However, given that the outcome of this consultation is unknown, we have proceeded to seek to apply the current policy and guidance.

3.3 We would also note that this section is referring to the adaptation of Use Class C3 properties, otherwise known as dwelling houses. This includes age specific housing, general needs housing and housing such as Extra Care, sheltered housing and dementia housing. The data also relates to anyone who has a health issue which requires an adapted home, not just those of retirement age.

3.4 Personal Independence Payments started to replace the Disability Living Allowance from April 2013, and these are awarded to people aged under 65 years who incur extra costs due to disability (although there is no upper age limit once awarded, providing that applicants continue to satisfy either the care or mobility conditions). Attendance Allowance contributes to the cost of personal care for people who are physically or mentally disabled and who are aged 65 or over. Nevertheless, PPG recognises that neither of these sources provides information about the need for adapted homes as *"not all of the people included within these counts will require adaptations in the home"*.

3.5 Disabled Facilities Grants (DFG) are normally provided by Councils and housing associations to adapt properties for individuals with health and/or mobility needs who are owner occupiers, or renting from a private landlord, housing association or council. Grants cover a range of works, ranging from major building works, major adaptations to the property and minor adaptations,

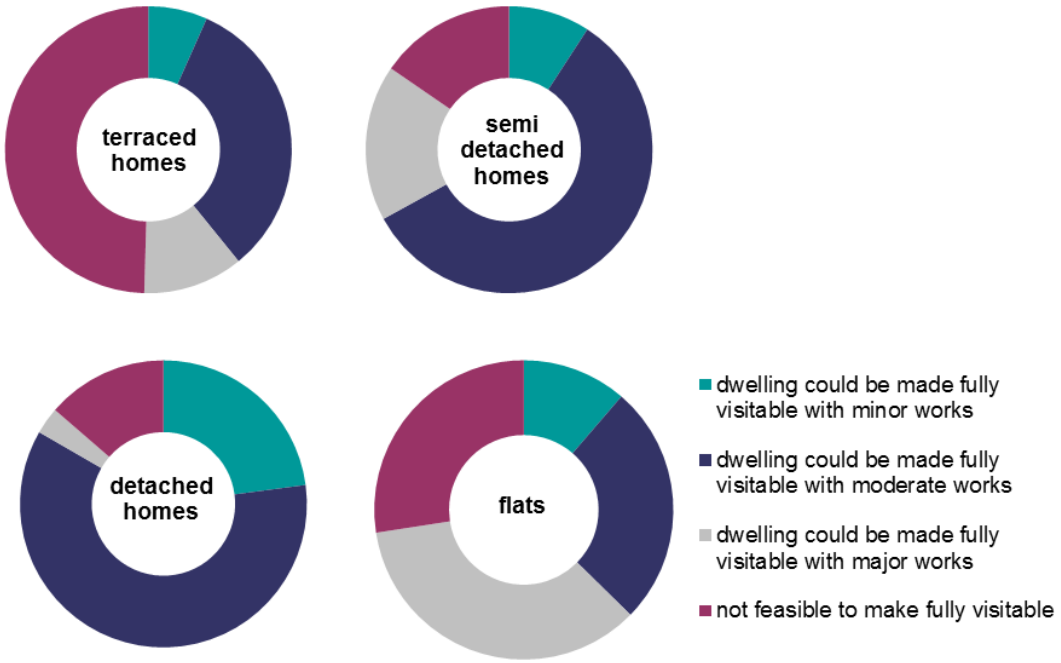
3.6 However, PPG notes that whilst patterns of DFG applications *"provide an indication of expressed need"* it cautions that this could *"underestimate need"*. Of course, it is also important to recognise that DFGs typically relate to adaptations to the existing housing stock rather than new housing provision.

3.7 The Government's reform of Health and Adult Social Care is underpinned by a principle of sustaining people at home for as long as possible. This was referenced in the recent changes to building regulations relating to adaptations and wheelchair accessible homes that were published in the Building Regulations 2010 Approved Document Part M: Access to and use of buildings (2015 edition incorporating 2016 amendments – for use in England).[37] Three standards are covered:

- M4(1) Category 1: Visitable dwellings – Mandatory, broadly about accessibility to ALL properties
- M4(2) Category 2: Accessible and adaptable dwellings – Optional, similar to Lifetime Homes
- M4(3) Category 3: Wheelchair user dwellings – Optional, equivalent to wheelchair accessible standard.

3.8 Given that the existing stock is considerably larger than projected new build, adapting existing stock through DFGs is likely to form part of the solution. However, the English Housing Survey identifies that approaching half of all existing dwellings could not be adapted or would require major works in order for them to be made fully visitable. On this basis, adapting existing stock alone is unlikely to provide sufficient properties to meet the needs of a growing population who require adapted homes.

Figure 3.1: Level of work required to create full visitability (Source: EHS 2014-15 Annex Figure 2.5)



3.9 In terms of new developments, Part M states that: *"Where no condition is imposed, dwellings only need to meet requirements M4(1)"* (Paragraph 0.3). Local authorities should

[37] https://www.gov.uk/government/publications/access-to-and-use-of-buildings-approved-document-m

identify the proportion of dwellings in new developments that should comply with the requirements for M4(2) Category 2 and M4(3) Category 3 as part of the Local Plan, based on the likely future need for housing for older and disabled people (including wheelchair user dwellings) and taking account of the overall impact on viability.

3.10 Planning Practice Guidance for Housing optional technical standards states:

> *Based on their housing needs assessment and other available datasets it will be for local planning authorities to set out how they intend to approach demonstrating the need for Requirement M4(2) (accessible and adaptable dwellings), and / or M4(3) (wheelchair user dwellings), of the Building Regulations.*
>
> *To assist local planning authorities in appraising this data the Government has produced a summary data sheet. This sets out in one place useful data and sources of further information which planning authorities can draw from to inform their assessments. It will reduce the time needed for undertaking the assessment and thereby avoid replicating some elements of the work.*
>
> **Planning Practice Guidance (March 2015), ID 56-007**

3.11 Based on their housing needs assessment and other available datasets it will be for local planning authorities to set out how they intend to approach demonstrating the need for Requirement M4(2) (accessible and adaptable dwellings), and / or M4(3) (wheelchair user dwellings), of the Building Regulations.

3.12 To assist local planning authorities in appraising this data the Government has produced a summary data sheet. This sets out in one place useful data and sources of further information which planning authorities can draw from to inform their assessments. It will reduce the time needed for undertaking the assessment and thereby avoid replicating some elements of the work.

Planning Practice Guidance (March 2015), ID 56-007

3.13 Building Regulations for M4(2) Category 2: Accessible and adaptable dwellings states that reasonable provision should be made for people to gain access to and use the facilities of the dwelling and that:

"The provision made must be sufficient to-

> *(a) meet the needs of occupants with differing needs, including some older or disabled people, and;*
>
> *(b) to allow adaptation of the dwelling to meet the changing needs of occupants over time."* (Page 10)

3.14 On this basis, in establishing the need for M4(2) Category 2 housing it is important to consider the population projections and health demographics of the area.

3.15 When considering the housing mix, it was identified that many households moving into new housing are likely to be younger at the time that they form. However, these will include

some households with mobility problems. Furthermore, it is likely that the needs of these households will change over time – partly through progressive change as health deteriorates as households get older, but also immediate change following an accident or health condition impacting mobility. Some households may also gain additional members with existing conditions, including children born with disabilities.

3.16 It was also identified that there will be a substantial growth in older households, although many of these will not move from their current home and will make adaptations as required to meet their needs. However, a large number of older households will still choose to move to an accessible home and others may have to move where it is not viable for their current home to be adapted. Not all of these households want to live in specialist older person housing, so it is important to ensure that accessible general needs housing that is suitable for older people is also provided. This will often free up family housing occupied by older households.

3.17 Not all health problems will affect households' housing needs. Data from the English Housing Survey identifies that 70.9% of households have no limiting long-term illness or disability with a further 20.3% where there is a household member with an illness or disability, but this does not affect their housing need. Nevertheless, around 8.8% of households (around 1 in every 12) have one or more persons with a health problem which requires adaptations to their home. The proportion is markedly higher in affordable housing than in market housing (19.8% and 6.5% respectively).

3.18 Within this group, the substantial majority of households (82.6%) live in a home that is suitable for their needs (either having already moved or adapted their existing home). Nevertheless, just over 17% of households with a disability that affects their housing need either require adaptations or need to move to a more suitable home. Overall, the English housing survey shows that 1.5% of all households need an adapted home.

Figure 3.2: Households with a long-term illness or disability that affects their housing needs (Source: English Housing Survey)

	Market housing	Affordable housing	TOTAL
Households without limiting long-term illness or disability	75.2%	50.2%	70.9%
Households with one or more persons with a limiting long-term illness or disability			
Does not affect their housing need	18.3%	29.9%	20.3%
Current home suitable for needs	5.4%	16.2%	7.3%
Current home requires adaptation	0.6%	1.6%	0.8%
Need to move to a more suitable home	0.5%	2.0%	0.7%
Total households where a limiting long-term illness or disability affects their housing need:	**6.5%**	**19.8%**	**8.8%**
Of those households where a limiting long-term illness or disability affects their housing need:			
Current home suitable for needs	83.1%	81.9%	82.6%
Current home requires adaptation	9.4%	8.1%	8.9%
Need to move to a more suitable home	7.4%	10.0%	8.4%

3.19 Through combining the national data from the English Housing Survey with data about relative levels of limiting long-term illness and disability in Norfolk, it is possible to estimate the number of households likely to require adaptations or needing to move to a more suitable home.

3.20 Figure 3.3 identifies that there were around 127,000 households living in Norfolk in 2016 with one or more persons with a limiting long-term illness or disability. This included around 41,000 households where their health problems affected their housing needs, but the majority of these households (around 34,200) were already living in a suitable home. It is estimated that there were around 3,350 households needing to move to a more suitable home due to a disability or another long-term health problem. These households would represent an existing need for M4(2) housing, however some of these households would be wheelchair users needing M4(3) housing. A further 3,400 households needed adaptations to their current home. Therefore, of the 127,000 households with health problems, these issues affect the housing needs of 41,000 households and of these around 6,700 had their need for an adapted home unmet in 2016.

Figure 3.3: Households with a long-term illness or disability in Norfolk in 2016 by Local Authority by effect on housing need (Source: ORS Housing Model. Note: Figures may not sum due to rounding)

	Households with one or more persons with a limiting long-term illness or disability	Does not affect their housing need	Current home suitable for needs	Current home requires adaptation	Need to move to a more suitable home	Total households where a limiting long-term illness or disability affects their housing need:
Breckland	18,509	12,583	4,955	495	476	5,926
Broadland	16,551	11,315	4,414	431	391	5,236
Great Yarmouth	16,316	11,088	4,335	444	448	5,228
King's Lynn and West Norfolk	22,193	15,119	5,916	588	570	7,074
North Norfolk	16,716	11,113	4,737	439	426	5,603
Norwich	19,777	13,335	5,277	550	615	6,443
South Norfolk	16,934	11,524	4,548	443	419	5,410
TOTAL	**126,996**	**86,076**	**34,182**	**3,391**	**3,346**	**40,920**

3.21 The identified need for adapted homes at the start of the period is based on households' current needs. The M4(2) standard also requires "the changing needs of occupants over time" to be considered. Therefore, even without any change to the number of households in Norfolk, the number of households with one or more persons with a limiting long-term illness or disability will increase over time as people get older.

3.22 Based on the household projections we can establish the future need for adapted housing based on the projected household growth and the changing demographics of the area.

3.23 Whilst around 41,000 households living in Norfolk in 2016 had a health problem that already affects their housing requirement, it is likely that a further 18,000 households will develop health problems within 10 years. This figure was derived through the same methodology used to identify the 41,000 households whose housing needs are currently affected by their health problems, which is to consider the projected age profile of the population and calculate the increased propensity of requiring an adapted home as the population ages. These households would also require adaptations to their current home or would need to move to a more suitable home.

3.24 Further modelling of health needs based upon the continued ageing of the population and prevalence rates for needing adapted homes suggests that by 2036 there will be an additional 48,500 households already experiencing health problems or likely to develop health problems within 10 years in Norfolk (Figure 3.4). The figure to 2041 is 50,700 (Figure 3.5). Some of these will be new households, but many will be existing household residents in 2016 whose health has deteriorated over the period.

3.25 Therefore, considering the needs of households resident at the start of the period together with the projected household growth and changing demographics (in particular the ageing population), there will be a total of 66,400 households in Norfolk either needing adaptations to the existing housing or suitable new housing to be provided by 2036, or 68,700 by 2041. This is in addition to the households needing to move or needing adaptations based on their current health at the start of the period. The figures for each individual local authority are reported in each table.

Figure 3.4: Households with a long-term illness or disability affecting their housing need in Norfolk 2016-2036 by Local Authority (Source: ORS Housing Model. Note: Figures may not sum due to rounding)

	Households where an existing illness or disability affect their housing need in 2016			Total households where a limiting long-term illness or disability affect their housing need in 2016	Existing households in 2016 likely to develop health problems that affect their housing need within 10 years	Additional households in 2036 projected to experience problems or likely to develop problems within 10 years	Additional households in 2036 where illness or disability affects their housing need or will develop within 10 years
	Current home suitable for needs	Current home requires adaptation	Need to move to a more suitable home				
Breckland	4,955	495	476	5,926	2,710	7,611	10,321
Broadland	4,414	431	391	5,236	2,525	6,536	9,061
Great Yarmouth	4,335	444	448	5,228	2,179	5,556	7,735

	Households where an existing illness or disability affect their housing need in 2016			Total households where a limiting long-term illness or disability affect their housing need in 2016	Existing households in 2016 likely to develop health problems that affect their housing need within 10 years	Additional households in 2036 projected to experience problems or likely to develop problems within 10 years	Additional households in 2036 where illness or disability affects their housing need or will develop within 10 years
	Current home suitable for needs	Current home requires adaptation	Need to move to a more suitable home				
King's Lynn and West Norfolk	5,916	588	570	7,074	3,131	8,180	11,310
North Norfolk	4,737	439	426	5,603	2,361	6,839	9,200
Norwich	5,277	550	615	6,443	2,537	6,253	8,790
South Norfolk	4,548	443	419	5,410	2,512	7,495	10,007
TOTAL	**34,182**	**3,391**	**3,346**	**40,920**	**17,955**	**48,470**	**66,424**

Figure 3.5: Households with a long-term illness or disability affecting their housing need in Norfolk 2016-2041 by Local Authority (Source: ORS Housing Model. Note: Figures may not sum due to rounding)

	Households where an existing illness or disability affects their housing need in 2016			Total households where a limiting long-term illness or disability affects their housing need in 2016	Existing households in 2016 likely to develop health problems that affect their housing need within 10 years	Additional households in 2041 projected to experience problems or likely to develop problems within 10 years	Additional households in 2041 where illness or disability affects their housing need or will develop within 10 years
	Current home suitable for needs	Current home requires adaptation	Need to move to a more suitable home				
Breckland	4,955	495	476	5,926	2,710	8,015	10,725
Broadland	4,414	431	391	5,236	2,525	6,845	9,370
Great Yarmouth	4,335	444	448	5,228	2,179	5,855	8,034
King's Lynn and West Norfolk	5,916	588	570	7,074	3,131	8,613	11,744
North Norfolk	4,737	439	426	5,603	2,361	6,838	9,199
Norwich	5,277	550	615	6,443	2,537	6,634	9,171
South Norfolk	4,548	443	419	5,410	2,512	7,931	10,443
TOTAL	**34,182**	**3,391**	**3,346**	**40,920**	**17,955**	**50,731**	**68,686**

3.26 **To provide M4(2) housing for all of the identified need would require housing for 69,700 households in Norfolk to be provided by 2036, or 72,000 dwellings by 2041**. However, not all households will want to move to new housing – some will adapt their current homes and others will move to another dwelling in the existing stock.

3.27 Although some households would prefer not to move, Figure 3.1 identified that many existing homes were not suitable for adaptation to the M4(1) Category 1 standard and others would require major works. Fewer dwellings would be adaptable to the M4(2) Category 2 standard given the additional requirements. Based on the housing mix in the housing market area, it is likely that around 64.7% of all dwellings could be converted to meet the M4(1) standard.

3.28 Whilst the proportion that could be converted to meet the M4(2) standard would be lower, this provides a reasonable upper estimate of the number of households likely to be able to

adapt existing homes rather than move to new housing. On this basis, we could assume that at least 35.3% of the additional households where illness or disability affects their housing need would move to new housing. Together with the households identified as needing to move at the start of the period, this would represent a total of 26,800 households over 20 years to 2036 for the whole of Norfolk, or 27,600 households to 2041. Again, the outputs for each local authority area are included in the tables.

Figure 3.6: Households with a long-term illness or disability in Norfolk in 2016-36 by Local Authority by effect on housing need (Source: ORS Housing Model. Note: Figures may not sum due to rounding)

	Households where an existing illness or disability affects their housing need and need to move in 2016	Additional households in 2036 where illness or disability affects their housing need or will develop within 10 years	Maximum need for adapted housing 2016-36 (households)	Less households living in dwellings adaptable to M4(1) standard	Minimum need for adapted housing 2016-36 (households)
Breckland	476	10,321	10,797	6,995	3,802
Broadland	391	9,061	9,453	6,389	3,064
Great Yarmouth	448	7,735	8,183	4,539	3,644
King's Lynn and West Norfolk	570	11,310	11,881	7,574	4,306
North Norfolk	426	9,200	9,626	6,133	3,493
Norwich	615	8,790	9,405	4,318	5,087
South Norfolk	419	10,007	10,426	7,020	3,406
TOTAL	**3,346**	**66,424**	**69,771**	**42,969**	**26,802**

Figure 3.7: Households with a long-term illness or disability in Norfolk in 2016-41 by Local Authority by effect on housing need (Source: ORS Housing Model. Note: Figures may not sum due to rounding)

	Households where an existing illness or disability affects their housing need and need to move in 2016	Additional households in 2041 where illness or disability affects their housing need or will develop within 10 years	Maximum need for adapted housing 2016-41 (households)	Less households living in dwellings adaptable to M4(1) standard	Minimum need for adapted housing 2016-41 (households)
Breckland	476	10,725	11,201	7,268	3,932
Broadland	391	9,370	9,761	6,606	3,155
Great Yarmouth	448	8,034	8,482	4,715	3,767
King's Lynn and West Norfolk	570	11,744	12,314	7,865	4,450
North Norfolk	426	9,199	9,626	6,133	3,493
Norwich	615	9,171	9,786	4,505	5,281
South Norfolk	419	10,443	10,862	7,327	3,536
TOTAL	**3,345**	**68,686**	**72,032**	**44,419**	**27,614**

3.29 There is inevitably uncertainty about how many households will be able to meet their housing needs without moving and how many will move to existing homes rather than new housing. Nevertheless, the figures identified in Figure 3.7 provide an appropriate range for the local authorities to consider.

3.30 It is important to recognise that this would represent the combined need for both M4(2) Category 2 and M4(3) Category 3 housing in Norfolk; for households with a wheelchair user would be included within those households counted as having a health problem or disability that affects their housing need.

Housing for Wheelchair Users

3.31 Building Regulations for M4(3) Category 3: Wheelchair user dwellings also states that reasonable provision should be made for people to gain access to and use the facilities of the dwelling and that:

"The provision made must be sufficient to-

(a) allow simple adaptation of the dwelling to meet the needs of occupants who use wheelchairs, or;

(b) to meet the needs of occupants who use wheelchairs." (Page 23)

3.32 On this basis, in establishing the need for M4(3) Category 3 housing it is again important to consider the population projections and health demographics of the area, but with specific reference to households with wheelchair users.

3.33 The CLG guide to available disability data[38] (referenced by PPG ID 56-007) shows that around 1-in-30 households in England (3.3%) currently have at least one wheelchair user, although the rate is notably higher for households living in affordable housing (7.1%). The rates are also higher for older households. Figure 3.8 identifies the proportion of households in England with a wheelchair user currently living in market housing and affordable housing by age of household representative.

Figure 3.8: Percentage of households with a wheelchair user by type of housing and age of household representative (Source: English Housing Survey 2013-14)

Housing Type	Age of Household Representative							
	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+
Housing type								
Market housing	< 0.1%	0.4%	1.0%	1.6%	3.0%	4.0%	6.1%	9.3%
Affordable housing	0.3%	2.0%	2.9%	6.0%	6.0%	10.3%	12.7%	19.9%

3.34 Through combining data on the prevalence rates for using a wheelchair and the age profile of the population it is possible to calculate for Norfolk the number of households likely to have a wheelchair user by the age of the household representative in market housing and affordable housing to 2036 (Figure 3.9 and Figure 3.10) to 2038 (Figure 3.11) and to 2041 (Figure 3.12)

3.35 We assume that any existing dwellings which are wheelchair adapted will be occupied by wheelchair users at the same rate through time. The analysis below only looks at net additional demand coming forward over the next 20-25 years. If a local authority has lots of wheelchair adapted homes which are currently used by non- wheelchair user households, they could meet some of their supply by better matching households to dwellings. We also assume that properties adapted for wheelchair users don't then have those adaptations removed when the wheelchair user leaves the property.

[38] https://www.gov.uk/government/publications/building-regulations-guide-to-available-disability-data

Figure 3.9: Number of households with a wheelchair user by type of housing and age of household representative for market housing

	Households aged under 75			Households aged 75 and over		
	2016	2036	Net change 2016-36	2016	2036	Net change 2016-36
Breckland	823	927	105	554	1,043	489
Broadland	833	896	63	595	1,072	477
Great Yarmouth	605	633	28	393	688	295
King's Lynn and West Norfolk	948	1,015	66	701	1,180	479
North Norfolk	724	770	46	588	1,013	425
Norwich	572	665	94	318	477	158
South Norfolk	826	983	156	582	1,173	591
TOTAL	5,331	5,889	557	3,731	6,645	2,914

Figure 3.10: Number of households with a wheelchair user by type of housing and age of household representative for affordable housing

	Households aged under 75			Households aged 75 and over		
	2016	2036	Net change 2016-36	2016	2036	Net change 2016-36
Breckland	436	534	98	226	478	252
Broadland	254	312	57	141	289	148
Great Yarmouth	521	581	60	233	388	155
King's Lynn and West Norfolk	483	551	68	285	476	191
North Norfolk	371	434	63	240	468	228
Norwich	951	1,165	214	489	751	261
South Norfolk	328	429	101	204	433	229
TOTAL	**3,345**	**4,006**	**661**	**1,819**	**3,284**	**1,465**

Figure 3.11: Number of households with a wheelchair user by type of housing and age of household representative for market housing

	Households aged under 75			Households aged 75 and over		
	2016	2041	Net change 2016-41	2016	2041	Net change 2016-41
Breckland	823	941	118	554	1,082	529
Broadland	833	907	73	595	1,107	512
Great Yarmouth	605	635	30	393	746	353
King's Lynn and West Norfolk	948	1,021	73	701	1,282	581
North Norfolk	724	763	40	588	988	400
Norwich	572	671	99	318	485	166
South Norfolk	826	1,025	198	582	1,176	594

	Households aged under 75			Households aged 75 and over		
	2016	2041	Net change 2016-41	2016	2041	Net change 2016-41
TOTAL	**5,331**	**5,962**	**631**	**3,731**	**6,866**	**3,135**

Figure 3.12: Number of households with a wheelchair user by type of housing and age of household representative for affordable housing

	Households aged under 75			Households aged 75 and over		
	2016	2041	Net change 2016-41	2016	2041	Net change 2016-41
Breckland	436	555	119	226	543	317
Broadland	254	325	70	141	322	182
Great Yarmouth	521	593	72	233	426	193
King's Lynn and West Norfolk	483	567	84	285	518	233
North Norfolk	371	432	60	240	466	225
Norwich	951	1210	259	489	816	327
South Norfolk	328	449	121	204	493	289
TOTAL	**3,345**	**4,131**	**787**	**1,819**	**3,584**	**1,766**

3.36 Figure 3.13 identifies the net change in the number of households with a wheelchair user over the period 2016 to 2036, while Figure 3.14 shows the same change to 2041. It is evident that the number of households likely to need wheelchair adapted housing in Norfolk is likely to increase by 5,600 over the 20-year period and 6,300 over 25 years, with the need for each local authority also included.

Figure 3.13: Households needing Wheelchair Adapted Housing (Source: ORS Housing Model. Note: Figures may not sum due to arithmetic rounding)

	Households aged under 75			Households aged 75 and over			
	2016	2036	Net change 2016-36	2016	2036	Net change 2016-36	Total
Breckland	1,258	1,461	203	779	1,520	741	944
Broadland	1,088	1,208	120	736	1,361	625	745
Great Yarmouth	1,126	1,214	88	626	1,076	450	538
King's Lynn and West Norfolk	1,432	1,566	134	986	1,656	669	804
North Norfolk	1,095	1,204	109	828	1,481	653	762
Norwich	1,523	1,830	307	808	1,228	420	727
South Norfolk	1,154	1,412	258	786	1,607	821	1,078
TOTAL	**8,676**	**9,894**	**1,218**	**5,549**	**9,929**	**4,379**	**5,597**

Figure 3.14: Households needing Wheelchair Adapted Housing (Source: ORS Housing Model. Note: Figures may not sum due to arithmetic rounding)

	Households aged under 75			Households aged 75 and over			
	2016	2041	Net change 2016-41	2016	2041	Net change 2016-41	Total
Breckland	1,258	1,496	238	779	1,625	846	1,083
Broadland	1,088	1,231	144	736	1,429	694	838
Great Yarmouth	1,126	1,228	102	626	1,172	546	649
King's Lynn and West Norfolk	1,432	1,588	157	986	1,800	814	970
North Norfolk	1,095	1,195	100	828	1,454	626	725
Norwich	1,523	1,881	358	808	1,301	493	851
South Norfolk	1,154	1,474	320	786	1,669	883	1,202
TOTAL	**8,676**	**10,093**	**1,418**	**5,549**	**10,450**	**4,901**	**6,318**

3.37 All the information produced for both M4(2) and M4(3) requirements is summarised in Figure 3.15 for the period 2016-36 and in Figure 3.16 for the period 2016-41. It should be remembered that all dwellings built to M4(3) standard are also built to M4(2) standard, so of the 26,802 need for M4(2) dwellings for Norfolk from 2016 to 2036 in Figure 3.6, 5,597 of these dwellings also need to be built to M4(3) standard. This leaves a need for 21,205 dwellings to be built to M4(2) standard for Norfolk for the period 2016-36. Figure 3.15 and Figure 3.16 compare the need for M4(2) and M4(3) dwellings against the Local Housing Need figure for each local authority to assess how the need for M4(2) and M4(3) compares to total need as a percentage.

Figure 3.15: Need for M4(2) and M4(3) Housing by 2036 (Source: ORS Housing Model. Note: Figures may not sum due to arithmetic rounding)

	M4(2) only	Percentage of the LHN for M4(2)	M4(3)	Percentage of the LHN for M4(3)
Breckland	2,858	29.6%	944	7.3%
Broadland	2,319	30.6%	745	7.4%
Great Yarmouth	3,106	51.7%	538	7.6%
King's Lynn and West Norfolk	3,502	39.4%	804	7.4%
North Norfolk	2,731	32.9%	762	7.2%
Norwich	4,360	42.5%	727	6.1%
South Norfolk	2,328	19.5%	1,078	6.2%

	M4(2) only	Percentage of the LHN for M4(2)	M4(3)	Percentage of the LHN for M4(3)
TOTAL	**21,205**	**33.1%**	**5,597**	**6.9%**

Figure 3.16: Need for M4(2) and M4(3) Housing by 2041 (Source: ORS Housing Model. Note: Figures may not sum due to arithmetic rounding)

	M4(2) only	Percentage of the LHN for M4(2)	M4(3)	Percentage of the LHN for M4(3)
Breckland	2,849	24.5%	1,083	6.7%
Broadland	2,317	25.2%	838	6.7%
Great Yarmouth	3,118	42.7%	649	7.4%
King's Lynn and West Norfolk	3,480	32.6%	970	7.1%
North Norfolk	2,768	26.3%	725	5.5%
Norwich	4,430	35.3%	851	5.7%
South Norfolk	2,334	16.2%	1,202	5.5%
TOTAL	**21,296**	**27.3%**	**6,318**	**6.2%**

Policy Implications

3.38 Local authorities must provide evidence of their needs for adapted homes to the M4(2) and M4(3) build standards. For this section we have considered existing propensity rates for people who have their housing needs affected by health problems to consider the need for adapted homes.

3.39 An on-going policy consultation from MHCLG may see this issue become less contested in the future by recommending that all homes are built to M4(2) standard and a fixed proportion to M4(3) standard, but for now we have analysed the localised evidence for each local authority in Norfolk.

3.40 The data indicates that at least an additional 26,800 adaptable homes will be required across Norfolk between 2016 and 2036 and at least 27,600 will be required between 2016 and 2041.

3.41 This would represent the combined need for both M4(2) Category 2 and M4(3) Category 3 housing; for households with a wheelchair user would be included within those households counted as having a health problem or disability that affect their housing need.

3.42 More detailed analysis of the data indicates that at least 5,600 wheelchair adapted homes will be required between 2016 and 2036 and 6,300 between 2016 and 2041.

3.43 It is also important to recognise that not all new homes built between 2016 and 2041 will be able to be adapted homes. For example, many homes have already been completed or granted planning permission without a requirement for M4(2) standards, so the required adapted homes will have to be provided from sites without current planning permission. The policy position for each local authority will therefore be dependent upon how many homes have already been delivered since 2016, how many have been allocated or have planning permission already granted and the time period of any new plan. The percentages in Figure 3.16 relate only to the total need for adapted homes against the total LHN for the time period.

4. PLANNING POLICY ISSUES

Key messages

4.1 In this chapter we summarise national planning policy regarding housing for older people housing, review specialist housing delivery in the East of England and summarise Local Plan policies for those local authorities who achieved the highest number of older persons housing units between 2017 and 2019.

4.2 A set of criteria for assessment of proposed older persons housing scheme is provided at Figure 4.2. It is expected that these will be useful to Development Management Teams looking at planning applications and to potential developers seeking to understand the local authority's requirements for specialist housing development in its area.

4.3 We also look at how Neighbourhood Planning can help to bring forward older persons housing to meet local needs and at how strategic urban extensions can deliver older persons housing as part of the wider housing mix. Those local authorities with a high level of delivery of specialist retirement housing also have proactive Local Plan policies in place.

National Policy

4.4 Planning practice guidance from the Ministry of Housing Communities and Local Government (MHCLG) states that

> *"Plan-making authorities should assess the need for housing of different groups and reflect this in planning policies."* [39].
>
> *The need to provide housing for older people is critical. People are living longer lives and the proportion of older people in the population is increasing. In mid-2016 there were 1.6 million people aged 85 and over; by mid-2041 this is projected to double to 3.2 million. Offering older people a better choice of accommodation to suit their changing needs can help them live independently for longer, feel more connected to their communities and help reduce costs to the social care and health systems.*[40]
>
> *Plans need to provide for specialist housing for older people where a need exists. Innovative and diverse housing models will need to be considered where appropriate*[41]
>
> *Private retirement accommodation can meet the needs of many older people and can contribute to maintaining independence and minimising the health impacts of ageing, hence keeping down the cost of care to individuals and to the local authority*[42].

[39] PPG 2019 Paragraph: 001 Reference ID: 67-001-20190722
[40] PPG 2019 Paragraph: 001 Reference ID: 63-001-20190626
[41] PPG 2019 Paragraph: 012 Reference ID: 63-012-20190626
[42] PPG 2019 Paragraph: 001 Reference ID: 63-001-20190626

Local and regional experience

4.5 In order to establish how planning policy can affect provision or specialist retirement housing we identified those local authorities in the East of England who delivered 100 or more new build specialist older person housing units in total between 2017 and 2019. See Figure 4.1 below. The top five performers were Bedford, North Norfolk, Central Bedfordshire, Watford and Peterborough

Figure 4.1: Local authorities in the East of England where 100 or more older persons housing units were provided 2017-19 (Source EAC)

Local Authority	Number of retirement housing completions 2017-19
Bedford	407
North Norfolk	312
Central Bedfordshire	273
Watford	253
Uttlesford	196
Peterborough	174
St Albans	165
North Hertfordshire	164
South Cambridgeshire	161
East Hertfordshire	137
Norwich	118
Tendring	110

4.6 Looking at key characteristics of these authorities we identified the following factors

- There is a cluster of local authorities in Herts, Beds, South Cambs, Peterborough and North Essex. it may be the case that neighbouring authorities and their developer partners learn from each other's good practice.
- North Essex authorities also benefited from a pro-active approach by the County Council and local STPs which used Council/NHS land and an active capital programme to help bring forward affordable rented and shared ownership extra care housing

Box 1 Development on public sector land in Milton Keynes

Milton Keynes has one of the highest rates of retirement housing provision in the country due in part to its historic policy dating back to the 1970s of reserving key sites adjacent to local centres for development of older persons housing – and also making Development Corporation land available for specialist retirement housing,

Shenley Wood Extra Care Village Milton Keynes. One of two schemes in the city provided by the Extra Care Charitable Trust.

There are 300 apartments at Shenley Wood Village. Homes at the village are available for purchase, shared ownership and rent. All homes within the village are designed to make life easier for residents, even if your mobility is limited.

Shenley Wood Village can provide you with a fulfilling lifestyle as an active and valued member of a vibrant local community. It provides independent living, social opportunities and an enriching lifestyle in later life. You can pick up old pastimes and try new hobbies, safe in the knowledge that you are surrounded by friends and neighbours.

We have an on-site Care Team who can help you live independently, if you need a little extra support now or in the future. This may range from a simple drop-in visit to assist with meal preparation or housework up to help with more significant care needs, including dementia. Currently, up to 20 per cent of residents at Shenley Wood Village receive support from our Care Team.

4.5 Three of the top five (Bedford, Central Beds and Peterborough) are unitary authorities, enabling planning, housing and social care teams to work together and politicians to develop a common focus - but we note that other unitary authorities in the region (Luton, Southend and Thurrock) have performed less well. Two of these authorities are predominantly urban (Southend and Luton) and Thurrock is heavily constrained by Green Belt. This would suggest that housing land supply may equally be an important factor in successful planning.

4.6 Three of the top five authorities (Bedford, Central Bedfordshire, Peterborough) have well advanced urban extensions currently under development and have put in place or proposed planning policies which seek specialist older persons housing within major developments.

4.7 North Essex (Tendring and Uttlesford) benefitted from a capital programme in Essex County Council to support the development of affordable rental extra care and some surplus NHS / council owned land which was allocated for development.

4.8 There is a wide range of house price areas - including Peterborough which is a lower value area than most of Norfolk. Although the above data is tenure neutral and includes social rented housing Peterborough has seen recent development by market housing providers McCarthy and Stone and Avery (as well as by affordable housing provider Methodist Homes MHA) at the SUE at Hampton.

4.9 North Norfolk is among the top five local authorities and Norwich is in the top ten.

4.10 All of the top five local authorities have planning policies which set clear goals for provision of specialist older persons housing in their area.

4.11 We look in more detail at individual Local Plans below:

Bedford Local Plan 2015 to 2030 (adopted in January 2020) sets out the aspiration to meet the housing needs of an ageing population. It falls short of setting numeric targets but does emphasise that all developments of 100 or more units will be expected to provide specialist housing on developments of 500 or more units must provide self-contained older persons housing and/ or supported living accommodation.

Structural changes are taking place in our population. An estimated 58,400 people in Bedford borough are over the age of 50. 28,500 of these are over 65 and 4,100 are over 85. In line with the national trend our population is getting older. Most notably the 85+ population is forecast to increase by around 32% by 2021.

Policy 60S - Housing mix New housing developments will be expected to provide a mix of dwelling size and type to meet the identified needs of the community including families with children, older people, people wishing to build their own homes and people with disabilities and special needs in accordance with the Council's current Strategic Housing Market Assessment and other current assessments of housing need including the Older Person's Accommodation Strategy, the Learning Disabilities Accommodation Strategy, the Mental Health Accommodation Strategy and evidence in respect of the needs of other specialist groups.

All developments of 500 dwellings or more in suitable locations, will be required to include self-contained older persons housing, and/or supported living accommodation in accordance with the Council's most up to date statement of need on older person's 106 accommodation.

ii. All developments of 100 dwellings or more in suitable locations, will be required to include an specialist housing including the needs of those with a

learning disability or mental health need in accordance with the Council's most up to date statement of need.

iii. On sites of 3 or more dwellings 49% of all new residential development should meet Category 2 (Accessible and Adaptable dwellings) of approved Document M; Volume 1, and on sites of 20 or more dwellings a minimum of 5% of all market housing and 7% of affordable housing should meet Category 3 requirements.

iv. All specialist housing for older people should meet Category 3 requirements.

v. The Council will support Self Build and Custom Build housing developments in accordance with Policy 63.

Peterborough ocal Plan adopted July 2019 states that all major development proposals must state how they have incorporated measures to bring forward properties which are likely to be attractive to older people.

Policy LP8: Meeting Housing Needs includes a section 'older people' which sets out

"*To help meet the demands of an ageing population of Peterborough, proposals will be supported, in principle, which incorporate measures which are likely to be attractive to older people, and thereby encourage and enable older people to reside in such properties, both now and as they get older.*

For major development proposals, it should be set out how such measures have been considered and incorporated into the proposal. Proposals will be refused which fail to demonstrate appropriate measures have been considered and incorporated, where it would appear to have been practical, likely viable and appropriate to have done so"

Box 2 County Council funded older persons housing developments in Essex

Rosebank Park Harwich (Tendring District)

A pioneering £11 million housing scheme for older people in Harwich, developed by Ashley House and the first to be delivered by Essex County Council's £27 million investment in creating new Independent Living homes, is now officially open.

Rosebank Park, located adjacent to Fryatt Hospital, Main Road, is managed by Season and offers 70 stylish apartments designed to meet local people's changing needs in later life. Each self-contained apartment features one or two bedrooms, a modern open plan living, kitchen and dining area and bathroom. Residents also benefit from communal facilities including a residents' lounge, dining room, mobility scooter store with charging points and private courtyard garden.

The scheme was developed by Ashley House and their funding partner Funding Affordable Homes. Essex County Council supported the development of the scheme with a funding contribution of £1.7 million. The local authority will invest a total of £27 million to help create up to 1,800 new Independent Living homes to meet demand around the county over the next five years.

Cornell Court Saffron Walden (Uttlesford District)

A pioneering new £12 million Independent Living housing scheme in Saffron Walden moved a step closer to completion with an official ground-breaking ceremony held on Thursday 6 July. Cornell Court, which is being built opposite the Tesco superstore on Radwinter Road, will be the Uttlesford district's first Independent Living housing scheme for older people.

Once complete it will offer 73 stylish, self-contained one and two-bedroom apartments designed to meet local people's changing needs in later life**. Forty apartments will be available for affordable rent and 33 for shared ownership.**

Each self-contained apartment will feature one or two bedrooms, a modern open plan living, kitchen and dining area and bathroom. Future residents will also benefit from shared facilities including a communal lounge, roof terrace, library, green house and hair salon.

Independent Living is similar to Assisted Living or Extra Care housing and is a positive alternative to residential care for people with a care need in later life. The primary difference between Cornell Court and other, existing assisted living schemes in the area is the added peace of mind offered by 24/7 on-site emergency support from L&Q Living, who will manage the scheme.

Cornell Court is being developed by L&Q Living in partnership with Uttlesford District Council, Essex County Council, the Homes and Communities Agency and Keepmoat Regeneration, part of the ENGIE Group. **The land for the scheme was transferred to Uttlesford District Council by Countryside Properties, as part of their affordable housing requirement for the wider Mandeville Place housing development.**

Cornell Court has been supported by over £3.5 million in grant contributions and is part of Essex County Council's five-year, £27 million investment to create up to 1,800 new Independent Living homes for older people with care needs.

Watford draft Local Plan 2020-36 (consulted on in 2019) looks at demand for accessible housing, specialist older persons housing and dementia housing and includes a detailed design checklist for dementia housing.

4. 13. 1. Providing homes for people as they get older, have disabilities or experience a long term illness is important to retaining a quality of life and continuing to be an active part of the community. To accommodate changing population demographics, new housing that can meet these needs should be provided as new development comes forward. Taking this proactive approach will help ensure the right properties are available when they are required by those who need them.

4. 14. 1. Many people will require assisted living as they get older and if they have disabilities. This is particularly apparent considering that the number of people aged 80+ years is expected to increase by 50% during the plan period (ONS, 2016 based Projections). This is often provided as specialist and supported living accommodation tailored for particular needs and having support carers located on site or nearby.

4. 14. 2. The Local Plan has not allocated any sites for new specialist and supported living accommodation, however, proposals put forward for these types of schemes will be supported where they demonstrate how they will meet the needs of the community. Existing facilities will be protected and any loss will be resisted unless these facilities are re-provided within the borough and there is no net loss of units or floor space.

4. 14. 3. Provision of sheltered and specialist housing units or bed space equivalent units will be considered in lieu of affordable housing.

Policy H4.5 Accessible and Adaptable Homes To provide homes for elderly people and those with disabilities and dementia, the following will be required for proposals of ten or more dwellings:

> *All affordable homes and 20% of market homes are expected to be compliant with Part M4(2) of the Building Regulations;*
>
> *4% of all new dwellings are expected to be compliant with Part M4(3) of the Building Regulations. Where this requirement is equivalent to less than a single dwelling, one dwelling will be required to meet this standard;*
>
> *Developers will be required to demonstrate how they have included dementia friendly principles of design as part of the proposal. 4% of new homes should be designed with dementia friendly principles in mind. This is in addition to the requirements in part (1) above*

Policy H4.6 Specialist housing Schemes for sheltered and specialist housing will be supported where they are well designed and integrated into the adjacent area. Proposals will be expected to be designed to a density that will reflect density requirements set out for housing. The redevelopment of existing specialist and supported living facilities will only be supported where there is no net loss of units or floor space.

Central Bedfordshire (pre submission draft 2019) Local Plan sets specific numeric targets for older persons housing provision on developments of 100 or more dwellings and also seeks accessible housing

Policy H2: Housing Standards

Internal space standards for all residential development will be applied to all dwelling types and tenures, including flats in accordance with the Nationally Described Space Standards. In requiring adaptable and accessible homes from all future developments; the Council will:
1.Require all new build dwellings to deliver at least 35% Category 2 Requirement M4 (2) adaptable homes (or any new or revised regulations that revoke or modify the Building Regulations); and
2.Require all new build dwellings to deliver at least 5% Category 3, Requirement M4 (3) wheelchair adaptable homes (or any new or revised regulations that revoke or modify the Building Regulations).

Policy H3: Housing for Older People

"All new residential development will be required to respond to the challenges relating to older people as set out in this chapter. S pecifically, all applications will identify opportunities:

To consider the strategic aims of the Council, it is ensuring that mainstream housing, extra-care homes and nursing care homes are provided throughout the Council area.

To provide accommodation in suitable and sustainable locations, based on the latest evidence base, these are especially town centres, near transport links, services, and leisure and health facilities.

To provide accommodation in various forms of tenure types, e.g. shared ownership, outright purchase, leasehold possibilities, affordable/private rented and other form of intermediate tenures.

To ensure that properties are built to a good quality standard and meet the needs of older people as they progress through their life changes.

To ensure that supported housing schemes provide the necessary care and support packages required.

The Council will require the development of bungalows, level access accommodation or low density flats to be provided for older people on development of 100 dwellings or more.

On larger sites of 200 units or more, the provision of an extra care facility should be investigated taking into consideration site viability and need. Where an extra care facility is not provided applicants must present evidence to support its exclusion from their proposals

North Norfolk's emerging Local Plan (May 2019) requires policy HOU2 that all schemes of 150 or more units should provide a minimum of 80 bed spaces of specialist elderly persons housing or care provision with a further 40 bed spaces for each additional 150 dwellings thereafter

Policy HOU 8 'Accessible & Adaptable Homes') and to make specific provision for those who, for one reason or another, are unable to continue living at home and require some form of care.

Some types of housing proposal are designed to meet the needs of particular groups in society whose accommodation needs cannot be met in general purpose housing schemes. These include sheltered and assisted living schemes for the elderly, disabled, and other groups. These schemes will often include an element of communal facilities, wardens accommodation and / or on site management / medical support. It is recognised that it may not always be appropriate to include other types of housing within such proposals.

Policy HOU 2 Housing Mix

Scheme size *151-300 (plus each additional 150 dwellings).*

Specialist Elderly / Care Provision Minimum 80 bedspaces and further 40 bedspaces for each additional 150 dwellings thereafter

Key points to include in a Local Plan policy

4.12 It is clear from the above analysis that a pro-active planning policy which sets out clear circumstances in which the Council will support provision of specialist retirement housing can help to increase retirement housing supply and potentially attract a wider range of retirement housing providers. Such a policy should:

- Indicate the type of specialist housing provision that the local authority is looking for (justified by a local needs appraisal)
- Set out any site-specific criteria which specialist retirement housing sites should meet
- Indicate in what circumstances developers of strategic sites should include retirement housing (and other forms of housing suitable for older people) within the development
- Clarify how affordable housing and CIL policies will be applied to retirement housing schemes

The draft policy below has been prepared with assistance from the plan policy team at Retirement Housing Group UK (RHG UK). It draws on a range of examples including the Eastern Region local plan policies cited earlier in this chapter. It is less prescriptive than some of the Local Plan policies quoted above.

Suggested Model Policy: Specialist Housing for Older People

4.13 This model policy for specialist housing for older people was compiled for Retirement Housing Group UK by John Montgomery FRICS MRTPI (RHG UK's planning adviser) and John Pugh-Smith FSA, FCIArb (Planning Barrister, 39 Essex Chambers and an RHG UK legal adviser).

i. Encouragement will be given to developments which include the delivery of specialist housing for older people in locations with good access to public transport and local facilities.

ii. *Local communities will be encouraged to identify suitable sites for specialist housing for older people through the Neighbourhood Planning process.*
iii. *Provision should be made for specialist housing for older people within the strategic housing developments allocated in this plan.*
iv. *Specific applications for such specialist housing developments will need to demonstrate the extent to which issues of development viability will affect the delivery of the scheme proposals and how specific care needs and the proposed management regime of the facilities will be met*

Supporting text

Provision of housing for older persons is an identified national requirement and growing priority with the increasing aged population. Therefore, providing options from moving to a more suitable or adaptable property – perhaps smaller with step free accessibility throughout - or to a home which is provided as part of "extra care" or other forms of specialist accommodation should form part of the options available for people to "downsize" and help free up family sized dwellings.

While Part M of the Building Regulations lays down certain standards re accessibility, planning proposals for all forms of new housing provision will be expected to address how the proposed accommodation is or can be made suitable for occupation by older persons.

New housing schemes on allocated sites above [xx] units will be expected to include an element of specialist accommodation together with full justification as to its proposed classification of the Use Classes Order 1987 (as amended).

Because of the additional costs of provision and the development economics of bringing specialist schemes to the market issues of development viability tend to be more sensitive. At the same time such schemes should still meet their mitigation requirements in full including appropriate CIL payments and planning obligations, and, as appropriate, making provision for other planning befits including affordable housing either on-site or by way of a commuted payment.

Where any exception needs to be made to the applicability of the foregoing requirements [under paragraphs (3) & (4) above] a viability appraisal prepared by a qualified professional with experience of viability appraisal in accordance with RICS standards and guidance will be required as part of the planning application documentation

The role of site-specific criteria

4.14 Experience has shown that it is helpful for both developers and local planning authorities if there is a common understanding of what the local authority is looking for from specialist housing development. The checklist evaluation criteria (figure 4.2) are based on HAPPI principles of design but were further refined by a local authority workshop attended by representatives of all the local authorities including the Broads Authority.

4.15 A desirable location for extra care housing is one which enables residents to continue to carry out their usual activities, remain part of the community and maximise their health and quality of life. Planning can help support meeting the needs of older people by supporting the development of extra care housing near local services.

4.16 Extra care developments should be carefully considered in terms of space, accessibility to and a detailed design specification fit for lifetime home criteria. The table below summarises the key features required

Figure 4.2 Site Specific Criteria

Site specification evaluation tool for extra care housing

:

Extra care housing site guidance/evaluation tool	
Definition of extra care: Must have access to care on site 24/7 and there must be an on-site care manager (see Sidmouth case 2018)	
Site	Evidence of demand in the immediate area
	Usual minimum size 40 /60 units – smaller schemes which can provide evidence of providing care 24/7 will be considered
	Minimum area O.5 ha
	In a town centre or established community with access to key services or as part of phased development as a strategic urban extension (SUE) becomes established and can demonstrate access to key services
	Developer to ensure there is a safe, level walking route to facilities and services. Within 400m of public transport route with regular service (at least half hourly) to town centre transport hub.
Services	Services within 400m (high priority): Doctor; pharmacy (or with an established delivery service to the area); access to public transport; general store; ATM. Where these facilities are not available locally it will be for the scheme provider to demonstrate how residents can access services and facilities Some of these services may be provided as part of the development, for example an ATM or a general store or space for a visiting doctor's surgery or regular delivery from a pharmacy Some retirement housing providers developing in remote or edge of settlement locations provide a regular minibus service to a local centre. Need to demonstrate frequency and how this will be funded.
	Services within 400m (desirable): Hairdresser; day and cultural centres; places of worship; newsagent; public garden or park; post office or bank): Shopping centre; restaurants; café; allotments; bookshop/library; sports centre Further guidance on recommended criteria for suitability assessment criteria for general needs residential development can be found in Appendix A of the Central Norfolk Strategic Housing and Economic Land Availability Assessment July 2016 https://www.north-norfolk.gov.uk/media/3408/helaa-methodology-final-master-130716.pdf
Building design	Building design should offer the following based on HAPPI Design principles 2009: https://www.housinglin.org.uk/Topics/browse/Design-building/HAPPI/ a) Generous internal space standards b) Plenty of natural light in the home and in circulation spaces c) Balconies and private outdoor space for each dwelling, avoiding internal corridors and single-aspect flats wherever possible d) Adaptability and 'care aware' design which is ready for emerging telecare/health technologies and includes an alarm call system in every apartment– e) Bedroom ceilings should normally be strong enough to take a hoist (see M4(3)) para 3.35 Part M Building Regulations f) Internal and external circulation spaces should be wheelchair friendly and encourage interaction and avoid an 'institutional feel' g) Shared facilities and community 'hubs 'including facilities and spaces which can be used to enable active lifestyles and include provision of hearing loops and other technology designed to support people living with hearing loss h) Plants, trees, and the natural environment should include planting which contributes to biodiversity enhancement i) Facilities should be available which support residents to become active gardeners (eg within the grounds, an area is set aside that can be used by residents to grow flowers or vegetables) j) High levels of water and energy efficiency, with good ventilation to avoid overheating. k) Extra storage for belongings l) Shared external areas such as 'home zones' that give priority to pedestrians m) Post COVID 19 developers should be able to demonstrate how their scheme will support high standards of cleanliness and enable social distancing n) Ambulance parking o) Disabled drop-off parking p) Disabled parking spaces for residents – 25% of all car parking

q) Visitor car parking: 1 space per 10 units – to include disabled car parking
r) External mobility scooter and cycle storage and scooter charging points (equivalent to 25% of bedspaces in each case)
s) Internet access in every apartment and an IT hub
t) Bookable guest suite
u) Defibrillator on the premises
v) Developer to provide a travel plan for residents, visitors and staff
w) Designing for Physical Frailty, Cognitive and Sensory Impairment
x) Scheme providers should be able to demonstrate how their scheme design addresses the needs of people living with visual and hearing impairments, physical frailty and cognitive disorders such as dementia. It may be helpful for them to refer to the most recent Housing LIN Guidance on "Design Principles for Extra Care Housing" currently in its 3rd (2020) edition https://www.housinglin.org.uk/_assets/Resources/Housing/Support_materials/Factsheets/Design-Principles-For-Extra-Care-Housing-3rdEdition.pdf

Notes
Although HAPPI principles have stood the test of time since they were developed in 2008, methods of achieving them have changed as technologies and expectations change. The government is also currently reviewing accessible housing standards and fire risk and this will likely impact on design standards. Assistive technology is also changing rapidly and there are lessons to be learned from emerging good practise during the COVID-19 pandemic. These principles should therefore be kept under review and regularly tested with stakeholders.
The Housing LIN has recently produced updated guidance[1] on design and cost considerations in extra care housing. This highlights that, "Successful developments need to be characterful and homely with features required to deliver care being invisible or unobtrusive. They must balance privacy and sociability and enable independence without loneliness. Through skilful design, every development can achieve the aspiration that a resident's last home is their best home, an exciting move, not merely a necessary one." The guide looks in detail at topics such as fire proofing, use of circulation space and communal areas, single vs double banked corridors, future proofing technology, modern methods of construction and infection control.

The role of sustainable urban extensions (SUEs)

4.17 Sustainable Urban Extensions (SUEs), at least in the early stages of development have not historically been places which are popular with either old people or with specialist retirement housing providers. The absence of local facilities and good public transport and experience of mud, noise and disruption discourage potential older residents. this does not mean the SUEs do not have an important role to play in securing retirement housing provision in the longer term. Milton Keynes has one of the highest rates of retirement housing provision in the country due to its historic policy dating back to the 1970s of reserving key sites adjacent to local centres for development of older persons housing. Peterborough has also demonstrated that retirement housing schemes can be located in urban extensions most recently at Hampton.

4.18 Care home providers may be more willing to locate in SUEs than retirement housing providers but again good access to public transport is needed to enable care workers without a car to get to work and friends and family who may also be old and unable to drive to visit residents[43].

4.19 It is recommended that sites close to the local centre which are capable of accommodating 60 or more dwellings are allocated in the Masterplan as designated specifically for older persons housing/care and marketed proactively with the involvement of district housing and county social care teams.

4.20 Such sites can be expected to deliver retirement housing during the Local Plan period. Delivery of local centres usually starts at 500 homes occupation (circa four years after grant of outline consent and section 106) but may not be fully up and running until the neighbourhood is substantially complete at 1,500 to 2,000 homes (which at circa 250 homes per year could be 6 to 8 years from grant of consent).

4.21 For 5,000 homes there would usually be 3 to 4 neighbourhoods each with a local centre and each with its own residential catchment and potential to accommodate retirement housing.

4.22 Large retirement housing schemes which create their own community, typically retirement villages, may also be suited to SUEs or alternatively come forward on greenfield sites on the edge of existing villages. Again, access to local facilities and public transport need to be in place or providers need to demonstrate how residents will access the wider world outside the scheme. This can be done if the provider organises a daily minibus service to the nearest town.

Retirement housing development on non-allocated sites

4.23 Older persons housing has often been provided on sites that were not allocated for residential developments, including former pub, healthcare and employment sites. It may therefore be appropriate to consider the re-use of existing allocations or underused employment sites, including brownfield registers and updates to Housing and Employment Land assessments.

43

Neighbourhood Plans

4.24 As the examples of adopted plans below show, a Neighbourhood Plan based on local knowledge, which identifies local need for older persons housing, can be proactive in seeking to encourage specialist housing provision. Making the case for this type of development is more robust If a local housing needs survey has been carried out.

Site allocation

4.25 Oakley and Deane Neighbourhood Plan (Basingstoke) contains a lengthy discussion of older persons housing need and supports development of a new retirement community of 120 to 150 dwellings.

Demographics indicate that there will be an increasing need for housing provision for the elderly within the Parish. Many residents are content to continue into retirement in their current dwellings. Others, however, may seek alternative housing in the villages, with needs falling into four general categories:

Dwellings for those who wish to downsize and for surviving partners. The stock of smaller houses has been much reduced over the last thirty years as many houses have been extended. There is a need for two-bedroom, high specification dwellings, mainly single-storey and with modest gardens;

Single-storey sheltered housing for those capable of independent living with limited support, similar to those that exist in Petersfield, Water Ridges and Sunnymead in Oakley;

Care home provision for those no longer capable of independent living. Oakley does have a purpose-built care home at Oak Lodge, part of the Oakley Hall complex located about 1 mile west of the village, which currently caters for up to 60 residents of whom about half are former residents of the villages, however it is at the top end of the market and does not cater for the less well-off; and,

The proprietors of Oakley Hall have indicated that their vision is to develop a retirement community of between 120 – 150 dwellings in the vicinity of the existing Oak Lodge Care Home. The community supports the proposal that part of this vision be used to meet the housing allocation for the Neighbourhood Area, as shown in the third Consultation. This will assist in making some existing homes available in Oakley and therefore contributes to meeting the requirement for 150 new dwellings specified in the emerging Local Plan.

Extra care

4.26 Malmesbury Neighbourhood Plan (Wiltshire) allocated a site for redevelopment to provide approximately 50 dwellings as the first choice for extra care housing. The development successfully received planning consent in July 2015 for 49 extra care units. The policy also supports further development of specialist older persons housing in the town.

Wiltshire Council forecasts that the number of older people within the County will rise by 58% by the year 2026 and those with dementia by 59% in the same period. The increase in those aged over 85 is forecast as 89%. (Reference 1).

The Council has set out a strategy to address the projected accommodation needs based on this forecast, approved by Wiltshire Council Members in January 2011 (Reference 1).

The Wiltshire Council has also identified a significant under-provision of Extra Care housing across all tenures within Wiltshire. There is also an under-supply of nursing care homes and specialist care homes for people with dementia. (Reference 2)

The Burnham House site in Malmesbury has been identified in the Development Strategy for the provision of 50 'Extra Care' mixed tenure units for single people or couples over the age of 55. This will be Malmesbury's first "Extra Care" housing scheme (Reference 2).

Extra Care is a sustainable alternative to residential care which it is likely to replace over time and will help relieve pressure on other care homes.

Evidence from the MNSG Housing Needs Survey (Reference 4) supports this development. It identified a major increase in the population over 65, and in particular over 85, as the most significant factor affecting housing need in the next 15 years. In detail, 105 current pensioner households anticipated a move in the next 5 years. Reasons for moving included 'home too big', 'access problems', and 'unable to manage in current home'.

Of relevance, the Wiltshire Strategic Housing Market Assessment 2011 identified 'underoccupation' as the most significant housing issue in the Malmesbury Community Area. If elderly people are able to move into the more suitable accommodation this will release houses for family occupation (Reference 5).

Policy 6: The redundant Burnham House site is allocated for redevelopment to provide approximately 50 dwellings as the first choice for Extra Care Housing. Policy 7: Planning permission will be granted for the development of dementia - specific accommodation on suitable new sites or by the extension of an existing care home or site of older people's housing. Policy 8: All new accommodation for older people must be well connected with the town. Policy 9: All new housing for older people must be sustainable Task 2.1: We will support the development of further suitable sites for older people's housing, especially mixed-use housing sites.

4.27 Chaddesley Corbett (Wyre Forest Wiltshire) policy will support properties designed to be suitable for the elderly which are located close to key facilities.

The population has a significant proportion of older people, with many long-term residents:-o 41.4% (183) of respondents in all households are age 65 or older

Almost 50% (100) have lived in the Parish for more than 20 years

Just over 40% (86) have lived in their current house for 20 years or more

Most (82.6%) (171) live in a house, many of which (34.6%) (68) have 4 or more bedrooms

Almost everyone (97.6%) (200) intends to stay in the Parish for the next 5- 10 years

Roughly half of respondents thought that they may at some time need a different type of accommodation

Almost 60% (50) said they would need a property with 1 or 2 bedrooms

Almost 50% (75) gave 'smaller accommodation' as a likely reason to move within the Parish, with some mentioning moving closer to Village facilities

Nearly 30% (40) thought they would want to move from a house to a bungalow

Over 80% (110) expect to be an owner occupier; 17% (23) expect to rent or part-buy from a social landlord

Policy CC2 - Types of New Housing Development Where suitable sites are identified in accordance with the Sustainability Appraisal and Policy CC1 above, limited residential development will be supported where it comprises one or a combination of the following types:

Affordable housing for rental or shared ownership by those with a local connection (as defined in Wyre Forest District Council's Local Connection Policy)

Properties should be one or two bedroomed to meet the needs of first-time buyers and small families

Properties designed to be suitable for the elderly (Lifetime Homes standard), which are located close to key facilities.

All proposals for new housing will be required to be supported by an up-to-date Local Needs Survey.

4.28 Keyworth Neighbourhood Plan states that :

The Neighbourhood Plan strongly supports the provision of elderly person's accommodation in a variety of forms including, but not limited to, bungalows, retirement apartments, sheltered housing and warden-controlled housing in locations within 400m of shops and services, including public transport. Specialist elderly persons accommodation (nursing homes, extra and palliative care) will be supported where there is an identifiable need. (Policy H2).

4.29 Local planning authorities in Norfolk already provide guidance on preparation of neighbourhood plans which sets out the scope for meeting local housing aspirations which are evidence based: see for instance North Norfolk neighbourhood planning guidance NPG5 housing.

Where homes, including affordable homes are delivered on a site a balanced and appropriate mix in terms of dwelling style, type and size should be achieved that seeks to closely match the variety of identified need in relation to different household types. The Strategic Housing Market Assessment, SHMA, is the starting point in identifying the needs in terms of type, tenure and affordability, including the requirements for specialist housing for the elderly. A separate Caravans needs

assessment has been undertaken by the Council to identify the level of need for appropriate housing for the Gypsy community.

11.2 The SHMA identifies high level of need for two and three bedroomed properties in both market and affordable housing and the strategic policies of the Council in the emerging Local Plan set out a requirement for at least 50% of all dwellings on sites over 6 to provide two and three beds.

11.3 Neighbourhood plans can develop further specific mix policies, (to be applied to growth outside the strategic growth) as long as they remain in general conformity with this approach and any such policy is based on robust local evidence, such as a housing needs survey. Such policies can also include a review of the Council's housing waiting list, though it should be noted that this is a reflection of demand rather than need, and is available to all those without a local connection to any neighbourhood plan area. In most cases the housing waiting list shows a higher demand for apartments and in many rural locations seeking to address such a limited type may not accord with sustainable development / community or the aims and vision of the neighbourhood plan. Any policy approach should reflect local need and existing housing stock and also include scope for flexibility. It is advisable not be too prescriptive.

C2 vs C3: the Use Class debate

4.34 There has been much debate as to whether specialist retirement housing in general and extra care housing in particular, is Use Class C2 a residential bedspace or Use Class C3 a residential dwelling. The main reason for this debate is that Use Class C3 accommodation has historically been subject to affordable housing policies, which can have an impact on viability, whilst Use Class C2 residential bedspaces generally sit outside such policies.

4.35 The Association of Retirement Community Operators (ARCO) and the County Councils Network (CCN) recently called for the introduction of a specific Use Class for Retirement Communities

*the introduction of a **new planning classification called 'C2R'**, to incentivise more development of retirement communities. This would better enable local councils to include retirement communities in their Local Plans, whilst reducing complexity and confusion for councils and providers alike when planning for these types of specialist developments. A new classification will also help ensure that some developers do not provide substandard retirement communities."*[44]

4.34 Given that the Government has just concluded a review of the Use Classes Order and did not make these changes it does not seem probable that a changea long these lines will be made anytime soon.

4.35 In the meantime, two recent Appeal decisions one by a Planning Inspector and the other in the High Court (the Shiplake Case and the Rectory Homes Case, both in South Oxfordshire) provide some additional clarity. In the first of these decisions, the Shiplake Case, the Inspector concluded that an extra care with integral care (ie care provided on site co-

[44] Planning for Retirement ARCO/CNN https://www.countycouncilsnetwork.org.uk/give-councils-and-providers-the-tools-to-incentivise-retirement-communities-new-report-argues/

ordinated by the scheme manager), targeted at persons who needed and used that care, was a C2 development and therefore not subject to the Council's affordable housing policy

The proposed development is agreed to be C2. That is a residential institution in the context of the Use Classes Order. The policy as read states that the required level of affordable housing will be sought on sites where there is a net gain of three or more dwellings. The issue revolves around, in part, whether the accommodation provided would result in the provision of dwellings.

As individual elements it is not unreasonable to consider each of the separate units of accommodation as dwellings. They have the form, function and facilities one would associate with a dwelling. However, the development proposed is more than the provision of individual units it is the collection of a number of units the occupation of which is restricted and in which the occupants have access to communal facilities and which require occupants to have a level of care need; hence the C2 classification.

It would be inappropriate to dissect the development into its constituent parts and conclude that one element triggered the affordable housing threshold. The policy refers to the site. The site in this case incorporates the whole development. The development consists of an extra care development of up to 65 units comprising of apartments and cottages (Use Class C2) and associated communal facilities. Parts of the development could not be implemented independently, the communal facilities and extra care is an integral component of the development.

In this regard I am of the view that the development does not result in a net gain of three or more dwellings but results in the provision of an extra care development of up to 65 units comprising of apartments and cottages (Use Class C2) and associated communal facilities, as the description of development confirms.

4.36 In the second case, Rectory Homes vs S Oxon Council, Mr Justice Holgate ruled that even though an extra care scheme might provide a care package onsite and therefore could be considered C2, the individual units still offered "independent living" and therefore could be subject to a requirement to provide affordable housing.

In his judgment, Mr Justice Holgate comments that the word "dwelling" properly describes, firstly, the physical nature of a building or property as well as, secondly, the way in which it is used. He remarks that 'it has become well established that the terms 'dwelling' or 'dwelling houses' in planning legislation refer to a unit of residential accommodation which provides the facilities needed for day-to-day private domestic existence', and that the term dwelling 'can include an extra care dwelling, in the sense of a private home with the facilities needed for 'independent living' but where care is provided to someone in need of care'.

He concludes that units of accommodation that allow for independent living comprise 'dwellings' but their 'use' can still be within Class C2 if (a) care is provided for an occupant in each dwelling and, critically, (b) the occupant is in need of care. Accordingly, as the South Oxfordshire adopted Core Strategy policy CSH3 required a contribution towards affordable housing where the 'dwellings' provided the scope for 'independent living' but without reference expressly or by implication to the Use Classes Order there was no legal reason why

Rectory's scheme should not be subject to this requirement just because it had been classified as Class C2.

4.37 The South Oxfordshire Local Plan, which has recently been found sound, sets an important precedent in that it seeks 40% affordable housing on all new housing, both C2 and C3. The Inspector was happy with this policy commenting that

'the Plan provides a facility, as discussed in Issue 5, for viability considerations to be taken into account. The Plan makes it clear at paragraph 5.46 that Policy H9 is the starting position, and that the exact amount of affordable housing will be determined by negotiation, with departures supported where they are backed by robust evidence, including viability assessments where appropriate.'

4.38 This example should enable local authorities to take a pro-active approach to seeking affordable housing from all forms of specialist older persons housing including extra care. It should be borne in mind that in most districts there is limited demand for additional affordable rented sheltered housing but considerable demand for shared ownership sheltered housing and for affordable rented and shared ownership extra care.Providers of market retirement housing have argued that rigorous pursuit of the Rectory Homes approach will disincentivise provision of specialist retirement housing, make it difficult for retirement housing providers to compete against non-housing uses on inner urban sites where competing uses are not subject to an affordable housing requirement and reduce their ability to compete with general needs housing providers on greenfield sites[45].

4.39 Conversely feedback from some registered providers in the affordable housing sector is that there is a preference for specialist retirement housing having a Use Class C3 classification as it future proofs their development in case local authority funding of care changes and it becomes necessary to admit residents who are not in need of care or convert the premises to general needs affordable housing. This reinforces the argument for robust viability appraisal of a range of housing and non-housing options as part of the preparation of evidence to support the Local Plan. Local authorities should also ensure that specialist housing providers are encouraged to attend local consultation events – a point which applies to custom and self-build and private rent as well as to retirement housing.

4.40 The South Oxfordshire Local Plan policy offers local authorities the opportunity to seek affordable housing across both sheltered and extra care schemes. The local authority will need to think carefully about the type and tenure of affordable housing that is required and in districts where there a substantial existing stock of affordable sheltered housing in particular it may be appropriate to consider whether the local authority wants onsite affordable housing, perhaps in the form of shared ownership or would prefer a financial contribution to help support provision of general needs affordable housing elsewhere in the district.

45

See for instance article by John Pugh Smith in https://publiclawtoday.co.uk/planning/318-planning-features/44665-extra-care-schemes-after-the-rectory-homes-decision

PPG guidance on viability

4.41 Any such requirement will need to take into account scheme viability, noting guidance in PPG 2019 (Paragraph: 007 Reference ID: 10-007-20190509) as to when a site-specific viability appraisal may be appropriate.

Should viability be assessed in decision taking?

Where up-to-date policies have set out the contributions expected from development, planning applications that fully comply with them should be assumed to be viable. It is up to the applicant to demonstrate whether particular circumstances justify the need for a viability assessment at the application stage. Policy compliant in decision making means that the development fully complies with up-to-date plan policies. A decision maker can give appropriate weight to emerging policies.

Such circumstances could include, for example where development is proposed on unallocated sites of a wholly different type to those used in viability assessment that informed the plan; where further information on infrastructure or site costs is required; where particular types of development are proposed which may significantly vary from standard models of development for sale (for example build to rent or housing for older people); or where a recession or similar significant economic changes have occurred since the plan was brought into force.

Key findings

- Those local authorities with a high level of delivery of specialist retirement housing also have proactive Local Plan policies in place.
- Local planning authorities may wish to consider developing policies which trefer to the potential scale of demand for retirement housing during the plan period and specify provision of retirement housing or other forms of housing suitable for older people on schemes above a certain size, typically 100 or more units.
- Where a local authority (such as the Broads Authority) has no large sites, consideration should be given to encouraging provision of smaller schemes of level access accommodation suitable for older people. Neighbourhood Community Hubs can also relieve isolation and facilitate access to domiciliary care services[46]
- Make clear any standards and locational criteria which the council will apply when appraising planning applications for retirement housing (such as evaluation criteria at figure 4.2)
- Set out in the site allocations plan any specific requirements which apply to strategic urban extensions.

[46] Examples of good practice can be found in HAPPI4 Rural Housing for an Ageing Population https://www.housinglin.org.uk/Topics/type/Rural-Housing-for-an-Ageing-Population-Preserving-Independence-HAPPI-4/

- Local authorities may wish to consider whether it is appropriate to review Employment Land Allocations to see if any sites are potentially usable for specialist retirement housing. Development Management colleagues should be advised that any proposals for retirement housing in these locations will be assessed against the same criteria as those set out in figure 4.2. When considering change of use (e.g. redundant office or commercial buildings) it may also be appropriate to consider their use for retirement housing.

- Neighbourhood plans can also allocate sites for older person housing where there is a demonstrated local need and to do so would not contravene the overall housing targets contained in the Local Plan.

- Policies should also refer to the need for accessible housing (M4(2) and M4(3)) and the circumstances in which this will be sought.

5. VIABILITY AND DELIVERABILITY OF RETIREMENT HOUSING DEVELOPMENT

5.1 We were asked to model the viability of provision of specialist retirement housing across Norfolk with a view to identifying whether there are any obstacles to delivery of market housing in particular due to viability issues. As the financial models of market housing and affordable housing are so different there is no direct link between viability of the two sectors. The viability of specialist affordable housing is discussed from para 5.12.

5.2 Viability is also affected by affordability and whether there is a strong enough local market to encourage providers to bring forward schemes. Affordability is weakest in Norwich and Great Yarmouth where demand modelling points to relatively higher demand for shared ownership rather than outright purchase. In other districts potential market demand is strong.

5.3 Viability is primarily determined by the relationship between house prices and build costs. These both vary between districts. House prices by district are summarised in figure 3.1 below. The average semi-detached house[47] In Norfolk in 2019 was valued at £ 208,000.

5.4 As shown in Figure 3.1, house prices in the highest value area (South Norfolk) are 25% higher than in the lowest value area (Great Yarmouth) although there is also substantial variation in house prices within individual districts. We have modelled scheme viability in a notional high, low and average value area. These are not representative of values in any individual district. A more detailed analysis of scheme viability in each district can be found in the locally based viability appraisals which each district carries out as part of the process of preparing the Local Plan

Figure 3.1 House prices by district (semi-detached house 2019) Source ONS

District	Average House price 2019
South Norfolk	£232,000
Broadland	£225,000
Norwich	£216,000
North Norfok	£215,000
Breckland	£198,000
KLWN	£194,000
Great Yarmouth	£185,000

[47] Retirement housing providers take the price of an existing 3 bed semi as a comparator for setting the price of newbuild retirement housing for sale

5.5 Guidance from Retirement Housing Group on viability appraisal of retirement housing[48] states that

House prices: *Practitioners should use local market values for newbuild retirement housing where they exist. Where they do not exist the following formula is an indicative guide to the price of lower value units which are likely to be affordable by most local home owners. Methods of price setting for retirement housing vary by location. In medium and low value areas the price of a 1 bed sheltered property = approx 75% of price of existing 3 bed semi-detached house. A 2-bed sheltered property = approx 100% of price of existing 3 bed semi-detached.*

In high value areas with a high proportion of flats the price of a 1 bed sheltered property is linked to the price of high value flats, normally with a 10-15% premium

ExtraCare housing is 25% more expensive than sheltered: if a sheltered 1 bed flat sells for £100,000 then an extracare 1 bed flat will sell for £125,000

5.6 This means that 2-bed extra care housing, potentially a very popular product with couple households, is likely not to be affordable for outright purchase for older households who live in 2 or 3 bed semis or terraces or in 1-2 bed flats.

5.7 Build costs also vary by district but not in the same ratio as house prices. Build costs for the three sample areas are shown in figure 3.2 below. Figures used are based on BCIS data for supported housing based 2019. These are base build costs and only cover construction costs. In modelling viability we have also allowed for external works, professional fees, marketing fees and contractor/developer return, which will significantly inflate overall development costs.

5.8 Build costs vary far less than house prices, ranging from £1,470 per sq m to £1,535 per sq m for supported housing

5.9 As might be expected these variations impact on viability. Figure 3.3 below summarises scheme viability for a notional 60 unit sheltered or extra care scheme on a 0.5 hectare site in a high, medium and low value area. The sheltered scheme returns a positive land value in the high and medium value area and a negative land value in the low value area. The extra care scheme returns a positive land value in the high area and a negative land value in the medium and low value areas.

Figure 3.3 Site land value by district

	High value area	Medium value area	Low value area
Sheltered housing	£1,329,000	£483,000	-£99,000
Extra care housing	£732,000	£358,000	-£190,000

[48] https://retirementhousinggroup.com/rhg/wp-content/uploads/2016/12/CIL-viabiilty-appraisal-issues-RHG-February-2016.pdf

Sector capacity

5.10 We were advised by some specialist providers who do not have a local presence in the East of England that establishing supply chains and managing quality of care in Norfolk might be a challenge which could preclude them from undertaking development in the area.

5.11 We reviewed published data on recent provision of retirement housing, both market and affordable housing, since 2018. Analysis of EAC data on private sector developments in Norfolk since 2018 showed schemes by McCarthy and Stone Pegasus (now Lifestory) and Sutherland Homes. The last of these three is a locally based developer. The other two are national operators. McCarthy and Stone is by far the most active national developer. Only two affordable housing providers were identified as recent developers in Norfolk - One Housing Group and Rapport although a large care village in Norwich was completed in 2016 by Saffron Housing Trust and a new development is underway in Fakenham by Housing 21.

Viability of affordable retirement housing

5.12 Affordable retirement housing can be provided as either rented or shared ownership housing. Our modelling suggests that in Norfolk there is substantial demand for additional extra care housing for both rent and shared ownership and more modest demand for sheltered housing for shared ownership and rent.

5.13 Affordable older persons housing generally requires public funding which can take the form of provision of free or discounted land or capital funding from Homes England (which has a national budget of £125m through the Care and Support Specialised Housing Fund CSSHF) for the period from 2018-21) or through capital support from the County Council or the NHS. Norfolk County Council launched a £29m capital fund in November 2018 to provide capital, to sit in additional to Homes England funding, to support affordable rental units in extra care developments. Discounted or free land can also be made available through S106 contributions, which may be particularly appropriate on Urban Extension sites (see for instance box 2 Saffron Walden example in Chapter 4.)

5.14 Capital grant (or discounted land) helps to finance development of supported housing. However providers must also meet day to day running costs which include additional costs associated with provision of support. This means that rents (including service charges) for supported housing are normally higher than rents for general needs housing. For much of the 2010s the Coalition and Conservative Governments sought to cap affordable housing rents and to restrict the amount of Housing Benefit which could be paid on them. This had a disproportionate impact upon the Supported Housing sector (including older persons housing) because rents and service charges are typically higher than in general needs housing.

5.15 For several years during the period from 2011 to 2018 when rent reform was being considered housing associations were reluctant to consider providing supported housing for rent because of uncertainty about the ability to cover scheme running costs. This had a knock-on effect on their willingness to provide shared ownership supported housing as many schemes had offered a combination of rented and shared ownership units and without the rental element shared ownership provision alone was not judged likely to produce large enough schemes which were viable to develop.

5.16 In August 2018 the Government announced that it would not be proceeding with the proposed sheltered rent model and that all supported housing would remain within the welfare system. This has removed a considerable element of uncertainty and should enable registered providers to re-enter the supported housing market.

Key findings

- Provision of sheltered and extra care housing for market sale is viable in most districts in Norfolk
- Sheltered housing is more viable than extra care. This is because extra care housing has significantly more communal space and the higher build costs this brings are not reflected in a commensurate increase in market values.
- Private sector retirement housing providers are active in Norfolk, including both national and local providers.
- Affordable housing providers are also active in the county although to a lesser extent than their private sector counterparts.
- In view of the scale of demand for affordable housing for extra care and County Council capital grant, free or discounted public land and good planning policies which help to bring forward private land at a discount for affordable supported housing are absolutely critical.

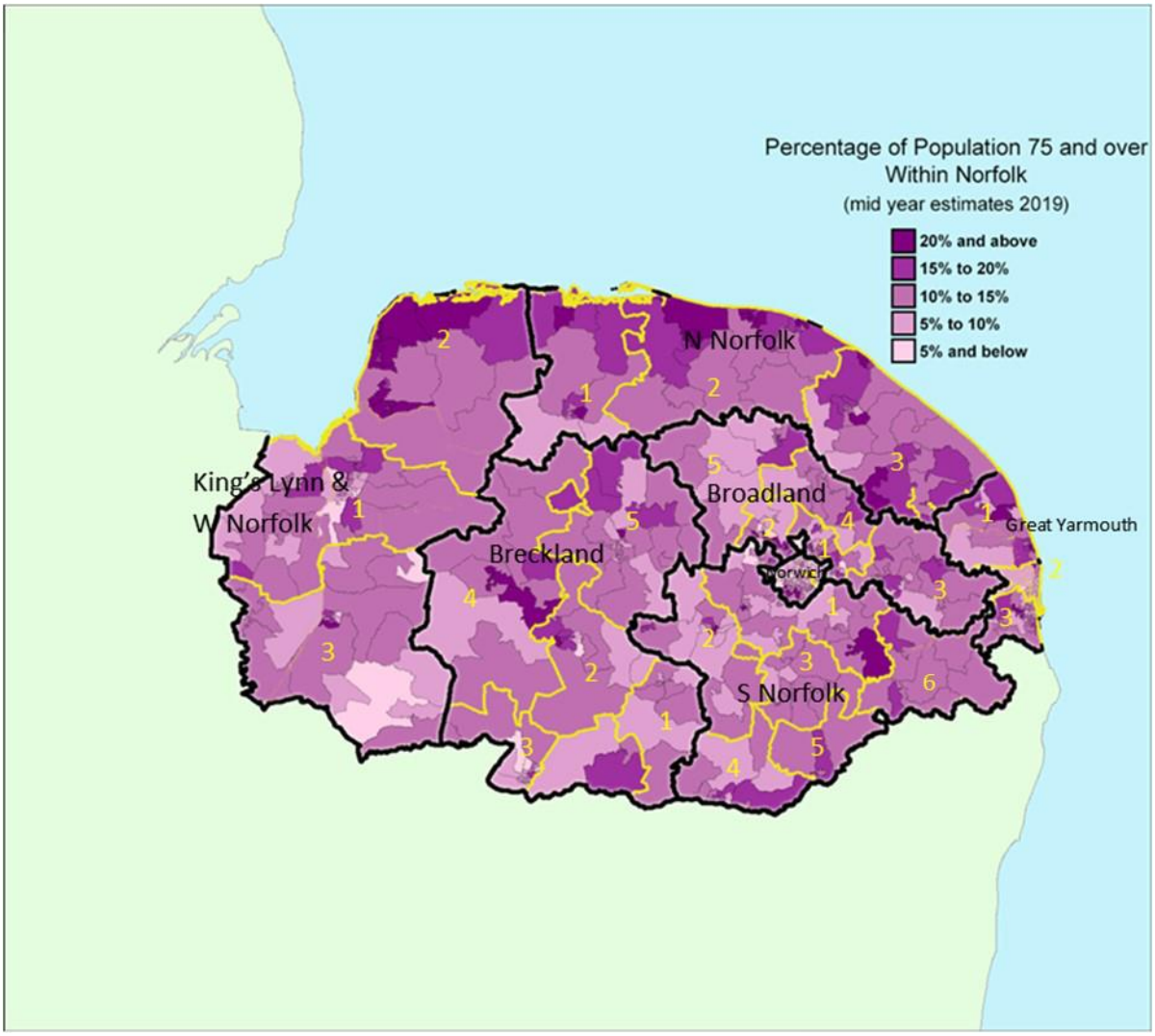
APPENDIX 1: SUB AREA ANALYSIS BY DISTRICT

(All districts except Norwich: based on sub-areas provided by the local authorities)

A1.1 We were asked by the Norfolk authorities to look at demand for specialist retirement housing by sub-area within each district. Sub-areas were based on definitions provided by the individual local authorities, the only local authority where we did not carry out an analysis of demand on a sub-area basis was Norwich. This is because experience has shown that residents in a town are more willing to move within that town provided they have good access to local facilities and to the town centre and are less likely to be attached to a local sub-area.

A1.2 Figure A1.1 below shows the distribution of older population between wards, with sub-areas bordered in yellow and districts in black. The following tables show retirement housing demand by sub-area in 2020.

Figure A1.1: Distribution of older population between wards, with sub-areas bordered in yellow and districts in black



Legend			
	Breckland		**Broadland**
1	Attleborough	1	East Norwich Fringe
2	Watton	2	West Norwich Fringe
3	Thetford	3	Broadland East
4	Swaffham	4	Broadland Central
5	Dereham	5	Broadland West
	Great Yarmouth		**King's Lynn & W Norfolk**
1	North	1	Central
2	Central	2	North
3	South	3	South
	South Norfolk		**North Norfolk**
1	Norwich Fringe	1	West - Fakenham, Wells & surrounding wards
2	Wymondham & Hingham	2	Central - Holt, Sheringham, Cromer & surrounding wards
3	Long Stratton	3	East - North Walsham, Stalham, Hoveton & surrounding wards
4	Diss		
5	Harleston		
6	Loddon & Waveney Valley		

Breckland:

District based data

	Need for M4(2) housing	Of which M4(3) housing	Growth in projected residents in nursing care	Growth in projected residents in residential care
By 2036	2,858	944	369	909
By 2041	2,849	1,083	462	1,136

Demand for specialist retirement housing

	Extra Care	Sheltered
2020	504	1,300
By 2041	900	2,404

Sub-area analysis demand for specialist retirement housing

A1.3 For the purpose of this analysis (as advised by the local authority) Breckland district has been divided into 5 sub-areas, grouped on a ward basis. The 5 sub-areas are

- Attleborough
- Dereham
- Swaffham
- Thetford
- Watton

Because 2014 based household forecasts are derived from 2011 based data we have had to match up historic (pre 2015) wards with current ward boundaries. Figure A1.2 shows which current wards and historic wards have been allocated to each sub-area

Figure A1.2: Ward allocation by sub-area

2011 Census Merged Wards	2015 Wards	Catchment
E36004334 : Buckenham	The Buckenhams and Banham	Attleborough Catchment
E36004335 : Burgh and Haverscroft	Attleborough Burgh & Haverscroft	Attleborough Catchment
E36004341 : East Guiltcross	Guiltcross	Attleborough Catchment
E36004350 : Queen's	Attleborough Queens & Besthorpe	Attleborough Catchment
E36004367 : West Guiltcross		Attleborough Catchment
E36004337 : Dereham-Central	Dereham Withburga	Dereham Catchment
E36004338 : Dereham-Humbletoft		Dereham Catchment

2011 Census Merged Wards	2015 Wards	Catchment
E36004339 : Dereham-Neatherd	Dereham Neatherd	Dereham Catchment
E36004340 : Dereham-Toftwood	Dereham Toftwood	Dereham Catchment
E36004342 : Eynsford		Dereham Catchment
E36004351 : Shipdham	Shipdham with Scarning	Dereham Catchment
E36004352 : Springvale and Scarning		Dereham Catchment
E36004354 : Swanton Morley	Lincoln	Dereham Catchment
E36004355 : Taverner		Dereham Catchment
E36004361 : Two Rivers	Mattishall	Dereham Catchment
E36004362 : Upper Wensum	Upper Wensum	Dereham Catchment
E36004363 : Upper Yare		Dereham Catchment
E36004336 : Conifer	Bedingfield	Swaffham Catchment
E36004345 : Hermitage	Hermitage	Swaffham Catchment
E36004346 : Launditch	Launditch	Swaffham Catchment
E36004347 : Mid Forest	Ashill	Swaffham Catchment
E36004348 : Nar Valley	Nar Valley	Swaffham Catchment
E36004349 : Necton	Necton	Swaffham Catchment
E36004353 : Swaffham	Swaffham	Swaffham Catchment
E36004368 : Wissey		Swaffham Catchment
E36004344 : Harling and Heathlands	Harling and Heathlands	Thetford Catchment
E36004357 : Thetford-Abbey	Thetford Priory	Thetford Catchment
E36004358 : Thetford-Castle	Thetford Castle	Thetford Catchment
E36004359 : Thetford-Guildhall	Thetford Burrell	Thetford Catchment
E36004360 : Thetford-Saxon	Thetford Boudica	Thetford Catchment
E36004366 : Weeting	Forest	Thetford Catchment
E36004333 : All Saints	All Saints & Wayland	Watton Catchment
E36004343 : Haggard de Toni	Saham Toney	Watton Catchment
E36004356 : Templar		Watton Catchment
E36004364 : Watton	Watton	Watton Catchment
E36004365 : Wayland		Watton Catchment

A1.4 Total number of households in each sub-area is shown in Figure A1.3 below. Dereham has by far the largest number of older person households (7,516), followed by Swaffham (5,084) Thetford (3,357) and Watton (3,290). Attleborough currently has the smallest number of older person households (2,890), but this will likely change as the proposed Attleborough Urban Extension is developed and the population grows.

Figure A1.3: Older person households by sub-area

	Older person households 2020 (65 and over)
Attleborough	2,890
Dereham	7,516
Swaffham	5,084
Thetford	3,357
Watton	3,290

A1.5 Current specialist housing supply :

- There are a total of 93 units (plus a further 56 age exclusive units) in Attleborough,
- 227 (plus a further 208 age exclusive units) in Dereham
- 68 (plus a further 173 age exclusive units) in Swaffham
- 129 (plus a further 233 age exclusive units) in Thetford
- and 38 (plus a further 80 age exclusive units) in Watton.

Figure A1.4: Breckland current supply of retirement housing by sub-area

Breckland	Extra Care Rent	Extra Care Sale & Sh O'ship	Sheltered Rent	Sheltered Sale & Sh O'ship	Age Exclusive Rent	Age Exclusive Sale & Sh O'ship
Attleborough	-	-	93	-	56	-
Dereham	-	25	178	24	199	9
Swaffham	24	-	44	-	96	77
Thetford	30	-	68	31	220	13
Watton	-	-	-	38	50	30

A1.6 Across the whole of Breckland in 2020, there is an unmet need for 504 units of extra care housing (comprising 60 units for rent and 444 units for sale or shared ownership) and 1,300 units of sheltered housing (comprising -28 units (an oversupply) for rent and 1,328 units for sale or shared ownership).

A1.7 Figure A1.5 below shows total potential demand for specialist older persons housing in Breckland by sub-area in 2020.

- There is demand for extra care housing in all sub-areas
- There is strong potential demand for sheltered housing for sale and shared ownership
- Attleborough and Dereham have a surplus of sheltered housing for rent (although this is partially offset by unmet demand for sheltered housing for shared ownership)
- There is a modest surplus of extra care housing for rent in Swaffham, although this is more than offset by shortfalls in other sub-areas

Figure A1.5: Demand by sub-area Breckland 2020

Breckland	Extra Care Rent	Extra Care Sh O'ship	Extra Care Sale	Extra Care Total	Sheltered Rent	Sheltered Sh O'ship	Sheltered Sale	Sheltered Total	Overall Total
Attleborough	14	11	50	75	-50	33	151	134	209
Dereham	37	23	105	164	-66	78	364	376	541
Swaffham	3	19	87	109	40	56	260	357	466
Thetford	-6	14	63	71	9	37	169	214	285

Breckland	Extra Care Rent	Extra Care Sh O'ship	Extra Care Sale	Extra Care Total	Sheltered Rent	Sheltered Sh O'ship	Sheltered Sale	Sheltered Total	Overall Total
Watton	12	13	60	85	39	32	148	219	303
Total	**60**	**79**	**365**	**504**	**-28**	**236**	**1,091**	**1,300**	**1,804**

Note 1: total sheltered takes no account of tenure preferences

Broadland:

BROADLAND	Need for M4(2) housing	Of which M4(3) housing	Growth in projected residents in nursing care	Growth in projected residents in residential care
By 2036	2,319	745	343	671
By 2041	2,317	838	426	839

Demand for specialist retirement housing

	Extra Care	Sheltered
2020	488	924
By 2041	831	1,862

Sub-area analysis demand for specialist retirement housing

A1.8 For the purpose of this analysis (as advised by the local authority) Broadland district has been divided into 5 sub-areas, grouped on a ward basis. The 5 sub-areas are

- East Norwich Fringe
- West Norwich Fringe
- Broadland East
- Broadland Central
- Broadland West

A1.9 Because 2014 based household forecasts are derived from 2011 based data we have had to match up historic (pre 2015) wards with current ward boundaries. Figure A1.6 shows the wards which have been allocated to each sub-area.

Figure A1.6: Ward allocation to Catchment Area

2011 Census Merged Wards & 2015 Wards	Catchment
Old Catton & Sprowston East	East Norwich Fringe
Sprowston Central	East Norwich Fringe
Sprowston East	East Norwich Fringe
Thorpe St Andrew North West	East Norwich Fringe
Thorpe St Andrew South East	East Norwich Fringe
Plumstead	East Norwich Fringe

2011 Census Merged Wards & 2015 Wards	Catchment
Spixworth	East Norwich Fringe
Hellesdon South East	West Norwich Fringe
Hellesdon North West	West Norwich Fringe
Drayton South	West Norwich Fringe
Drayton North	West Norwich Fringe
Taverham South	West Norwich Fringe
Taverham North	West Norwich Fringe
Horsford & Felthorpe	West Norwich Fringe
Brundall	Broadland East
Burlingham	Broadland East
Marches	Broadland East
Acle	Broadland East
Blofield with South Walsham	Broadland East
Wroxham	Broadland Central
Coltishall	Broadland Central
Buxton	Broadland Central
Hevingham	Broadland Central
Aylsham	Broadland West
Eynesford	Broadland West
Reepham	Broadland West
Great Witchingham	Broadland West

A1.10 Total number of households in each sub-area is shown in Figure A1.7 below. East Norwich Fringe has by far the largest number of older person households (7,976) followed by West Norwich (5,217), Broadland East (3,838), Broadland West (3,071) and Broadland Central with (2,368).

Figure A1.7: Older Persons Households by sub-area

	Older person households 2020 (65 and over)
East Norwich Fringe	7,976
West Norwich Fringe	5,217
East	3,838
Central	2,368
West	3,071

A1.11 Current specialist housing supply:

- There are a total of 486 units in East Norwich Fringe,
- 53 in West Norwich Fringe
- 126 in East
- 91 in Central
- and 162 in West

Figure A1.8: Broadland current supply of retirement housing by sub-area

Broadland	Extra Care Rent	Extra care Sale & Sh O'ship	Sheltered Rent	Sheltered Sale & Sh O'ship	Age Exclusive Rent	Age Exclusive Sale & Sh O'ship
East Norwich Fringe	40	-	190	233	-	23
West Norwich Fringe	-	-	53	-	-	-
East	-	20	87	19	-	-
Central	-	-	35	56	-	-
West	-	30	128	-	4	-

A1.12 Across the whole of Broadland in 2020, there is an unmet need for 488 units of extra care housing (comprising 30 units for rent and 458 units for sale or shared ownership) and 924 units of sheltered housing (comprising -280 units (an oversupply) for rent and 1,204 units for sale or shared ownership).

A1.13 Figure A1.9 below shows total potential demand for specialist older persons housing in Broadland by sub-area in 2020.

- There is demand for extra care housing in all sub-areas
- There is strong potential demand for sheltered housing for sale and shared ownership in all sub-areas
- All sub-areas have a surplus of sheltered housing for rent and there is also a small surplus of extra care for rent in East Norwich Fringe

Figure A1.9: Table showing demand by sub-area Broadland 2020

Broadland	Extra Care Rent	Extra Care Sh O'ship	Extra Care Sale	Extra Care Total	Sheltered Rent	Sheltered Sh O'ship	Sheltered Sale	Sheltered Total	Overall Total
East Norwich Fringe	-19	36	157	174	-127	60	261	194	368
West Norwich Fringe	12	23	100	136	-15	70	302	357	493
East	14	11	49	75	-43	43	185	185	259
Central	9	9	40	57	-8	18	77	86	143
West	14	6	26	46	-87	36	154	102	148
Total	**30**	**86**	**372**	**488**	**-280**	**226**	**978**	**924**	**1,412**

Note 1: total sheltered takes no account of tenure preferences

Great Yarmouth:

	Need for M4(2) housing	Of which M4(3) housing	Growth in Projected residents in nursing care	Growth in Projected residents in residential care
By 2036	3,106	538	157	412
By 2041	3,118	649	196	514

Demand for specialist retirement housing

	Extra Care	Sheltered
2020	358	108
By 2041	596	753

Sub-area analysis demand for specialist retirement housing

A1.14 For the purpose of this analysis (as advised by the local authority) Great Yarmouth district has been divided into 3 sub-areas, grouped on a ward basis. The 3 sub-areas are

- North
- Central
- South

A1.15 Because 2014 based household forecasts are derived from 2011 based data we have had to match up historic (pre 2015) wards with current ward boundaries. Figure A1.10 shows the wards which have been allocated to each sub-area.

Figure A1.10: Ward allocation to Catchment Area

2011 Census Merged Wards	Catchment
East Flegg	North
West Flegg	North
Ormesby	North
Caister North	North
Caister South	North
Fleggburgh	North

2011 Census Merged Wards	Catchment
Yarmouth North	Central
Central & Northgate	Central
Southtown & Cobholm	Central
Nelson	Central
Bradwell North	South
Claydon	South
St Andrews	South
Magdalen	South
Gorleston	South
Bradwell South & Hopton	South
Lothingland	South

A1.16 Total number of households in each sub-area is shown in Figure A1.11 below. South has by far the largest number of older person households (7,860) followed by North (5,086) and Central with (3,570).

Figure A1.11: Older Persons Households by sub-area

	Older person households 2020 (65 and over)
North	5,480
Central	3,570
South	7,860

A1.17 Current specialist housing supply:

- There are a total of 656 units in South,
- 157 in North,
- and 436 in Central.

Figure A1.12: Great Yarmouth current supply of retirement housing by sub-area

Great Yarmouth	Extra Care Rent	Extra Care Sale and Sh O'ship	Sheltered Rent	Sheltered Sale and Sh O'ship	Age Exclusive Rent	Age Exclusive Sale and Sh O'ship
North	-	-	140	-	17	-
Central	30	-	336	70	-	-
South	34	-	513	31	78	-

A1.18 Across the whole of Great Yarmouth in 2020, there is an unmet need for 358 units of extra care housing (comprising 35 units for rent and 323 units for sale or shared ownership) and 108 units of sheltered housing (comprising -777 units (an oversupply) for rent and 884 units for sale or shared ownership).

A1.19 Figure A1.13 below shows total potential demand for specialist older persons housing in Great Yarmouth by sub-area in 2020.

- There is demand for extra care housing in all sub-areas
- There is strong potential demand for sheltered housing for sale and shared ownership in all sub-areas
- All sub-areas have a surplus of sheltered housing for rent.

Figure A1.13: Table showing demand by sub-area Great Yarmouth 2020

Great Yarmouth	Extra Care Rent	Extra Care Sh O'ship	Extra Care Sale	Extra Care Total	Sheltered Rent	Sheltered Sh O'ship	Sheltered Sale	Sheltered Total	Overall Total
North	18	51	64	133	-102	157	199	253	386
Central	3	24	30	56	-230	40	51	-140	-84
South	15	68	86	169	-444	193	245	-6	163
Total	**35**	**143**	**180**	**358**	**-777**	**390**	**494**	**108**	**466**

Kings Lynn and West Norfolk:

	Need for M4(2) housing	Of which M4(3) housing	Growth in Projected residents in nursing care	Growth in Projected residents in residential care
By 2036	3,502	804	223	483
By 2041	3,480	970	279	604

Demand for specialist retirement housing

	Extra Care	Sheltered
2020	526	733
By 2041	906	1,791

Sub-area analysis demand for specialist retirement housing

A1.20 For the purpose of this analysis (as advised by the local authority) Kings Lynn and West Norfolk district has been divided into 3 sub-areas, grouped on a ward basis. The 3 sub-areas are

- North
- Central
- South

A1.21 Because 2014 based household forecasts are derived from 2011 based data we have had to match up historic (pre 2015) wards with current ward boundaries. Figure A1.14 shows the wards which have been allocated to each sub-area.

Figure A1.14: Ward allocation to Catchment Area

Wards specified by LA	2011 Merged Wards	Catchment
Brancaster	Brancaster	North
Burnham Market & Docking	Burnham	North
Dersingham	Dersingham	North
	Docking	North
Hunstanton	Hunstanton	North
Bircham with Rudhams	Rudham	North
Snettisham	Snettisham	North
	Valley Hill	North
Clenchwarton	Clenchwarton	Central
Fairstead	Fairstead	Central

Wards specified by LA	2011 Merged Wards	Catchment
Gayton & Grimston	Gayton	Central
Gaywood Chase	Gaywood Chase	Central
Gaywood North Bank	Gaywood North Bank	Central
Massingham with Castle Acre	Grimston	Central
Tilney, Mershe Lande &Wiggenhall	Mershe Lande	Central
North Lynn	North Lynn	Central
The Wootons	North Wootton	Central
Gaywood Clock	Old Gaywood	Central
	Priory	Central
	South Wootton	Central
South & West Lynn	South & West Lynn	Central
Terrington	Spellowfields	Central
Springwood	Springwood	Central
	St Lawrence	Central
St Margarets with St Nicholas	St Margarets with St Nicholas	Central
	Walpole	Central
Walsoken, West Walton & Walpole	Walton	Central
West Winch	West Winch	Central
	Wiggenhall	Central
Airfield	Airfield	South
	Denton	South
Downham Old Town	Downham Old Town	South
East Downham	East Downham	South
Emneth & Outwell	Emneth with Outwell	South
Denver	Hilgay with Denver	South
Feltwell		South
Methwold		South
North Downham	North Downham	South
South Downham	South Downham	South
Upwell & Delph	Upwell & Delph	South
Watlington	Watlington	South
	Wimbotsham with Fincham	South
Wissey	Wissey	South

A1.22 Total number of households in each sub-area is shown in Figure A1.15 below. Central has by far the largest number of older person households (11,096) followed by South (7,144), North with (7,378).

Figure A1.15: Older Persons Households by sub-area

	Older person households 2020 (65 and over)
North	7,378
Central	11,096
South	7,144

A1.23 Current specialist housing supply:

- There are a total of 747 units in Central,

- 430 in North,
- 198 in South,

Figure A1.16: Kings Lynn & West Norfolk current supply of retirement housing by sub-area

King's Lynn & W Norfolk	Extra Care Rent	Extra Care Sale & Sh O'ship	Sheltered Rent	Sheltered Sale & Sh O'ship	Age Exclusive Rent	Age Exclusive Sale & Sh O'ship
North	-	55	251	118	6	-
Central	30	-	586	106	12	13
South	40	-	83	71	4	-

A1.24 Across the whole of Kings Lynn and West Norfolk in 2020, there is an unmet need for 526 units of extra care housing (comprising 56 units for rent and 470 units for sale or shared ownership) and 733 units of sheltered housing (comprising -550 units (an oversupply) for rent and 1,283 units for sale or shared ownership).

A1.25 Figure A1.17 below shows total potential demand for specialist older persons housing in Kings Lynn and West Norfolk by sub-area in 2020.

- There is demand for extra care housing in all sub-areas
- There is demand for sheltered housing for sale and shared ownership in all sub-areas
- Central and North sub-areas have a surplus of sheltered housing for rent.

Figure A1.17: Demand by sub-area King's Lynn & West Norfolk 2020

King's Lynn & West Norfolk	Extra Care Rent	Extra Care Sh O'ship	Extra Care Sale	Extra Care Total	Sheltered Rent	Sheltered Sh O'ship	Sheltered Sale	Sheltered Total	Overall Total
North	38	17	83	138	-137	58	286	207	344
Central	27	36	181	245	-421	92	455	127	371
South	-10	26	128	144	7	66	327	399	543
Total	**56**	**79**	**391**	**526**	**-550**	**215**	**1,068**	**733**	**1,259**

Note 1: total sheltered takes no account of tenure preferences

Norwich

	Need for M4(2) housing	Of which M4(3) housing	Growth in Projected residents in nursing care	Growth in Projected residents in residential care
By 2036	4,360	727	59	202
By 2041	4,430	851	75	257

Demand for specialist retirement housing

	Extra Care	Sheltered
2020	87	-1,314
By 2041	285	-742

Figure A1.18: Norwich Current supply of retirement housing

Norwich	Extra care rent	Extra care Sale & Sh O'ship	Sheltered rent	Sheltered Sale & Sh O'ship	Age Exclusive rent	Age Exclusive Sale & Sh O'ship
Total	**237**	**60**	**1,742**	**394**	**227**	**127**

A1.26 Across the whole of Norwich in 2020, there is an unmet need for 87 units of extra care housing (comprising -73 units (an oversupply) for rent and 160 units for sale or shared ownership) and -1,314 units (an oversupply) of sheltered housing (comprising -1,470 units (an oversupply) for rent and 156 units for sale or shared ownership).

Figure A1.19: Demand Norwich 2020

Norwich	Extra care rent	Extra Care Shared Ownership	Extra care sale	Extracare Total	Sheltered rent	Sheltered Shared Ownership	Sheltered Sale	Sheltered Total	Overall Total
Total	-73	64	96	87	-1,470	62	94	-1,314	-1,227

North Norfolk

	Need for M4(2) housing	Of which M4(3) housing	Growth in Projected residents in nursing care	Growth in Projected residents in residential care
By 2036	2,731	762	231	521
By 2041	2,768	725	289	652

Demand for specialist retirement housing

	Extra Care	Sheltered
2020	445	592
By 2041	794	1,547

Sub-area analysis demand for specialist retirement housing

A1.27 For the purpose of this analysis (as advised by the local authority) North Norfolk district has been divided into 3 sub-areas, grouped on a ward basis. The 3 sub-areas are

- West – Fakenham, Wells and surrounding wards
- Central – Holt, Sheringham, Cromer and surrounding wards
- East – North Walsham, Stalham, Hoveton and surrounding wards

A1.28 Because 2014 based household forecasts are derived from 2011 based data we have had to match up historic (pre 2015) wards with current ward boundaries. Figure A1.20 shows the wards which have been allocated to each sub-area.

Figure A1.20: Ward allocation to Catchment Area

2011 Census Merged Wards	Catchment	2019 Merged Wards	Catchment
Lancaster North	West	Lancaster North	West
Lancaster South	West	Lancaster South	West
Priory	West	Priory	West
The Raynhams	West	The Raynhams	West
Walsingham	West	Walsingham	West
Wensum	West	Stibbard	West

2011 Census Merged Wards	Catchment	2019 Merged Wards	Catchment
		Wells with Holkham	West
Astley	Central	Briston	Central
Briston	Central	Gresham	Central
Chaucer	Central	Stody	Central
Corpusty	Central	Cromer Town	Central
Cromer Town	Central	Erpingham	Central
Erpingham	Central	Coastal	Central
Glaven Valley	Central	Holt	Central
High Heath	Central	Poppyland	Central
Holt	Central	Roughton	Central
Poppyland	Central	Sheringham North	Central
Roughton	Central	Sheringham South	Central
Sheringham North	Central	Suffield Park	Central
Sheringham South	Central	Beeston Regis & The Runtons	Central
Suffield Park	Central		
The Runtons	Central		
Gaunt	East	Bacton	East
Happisburgh	East	Happisburgh	East
Hoveton	East	Hoveton and Tunstead	East
Mundesley	East	Mundesley	East
North Walsham East	East	North Walsham East	East
North Walsham North	East	North Walsham Market Cross	East
North Walsham West	East	North Walsham West	East
Scottow	East	St Benet	East
St Benet	East	Stalham	East
Stalham and Sutton	East	Trunch	East
Waterside	East	Hickling	East
Waxham	East	Worstead	East
Worstead	East		

A1.29 Total number of households in each sub-area is shown in Figure A1.21 below. Central has by far the largest number of older person households (10,333) followed by East (8,907) and West with (4,103).

Figure A1.21: Older Persons Households by sub-area

	Older person households 2020 (65 and over)
West	4,103
Central	10,333
East	8,907

A1.30 Current specialist housing supply:

- There are a total of 749 units in Central,
- 423 in East,
- and 229 in West

Figure A1.22: North Norfolk current supply of retirement housing by sub-area

North Norfolk	Extra Care Rent	Extra Care Sale & Sh O'ship	Sheltered Rent	Sheltered Sale & Sh O'ship	Age Exclusive Rent	Age Exclusive Sale & Sh O'ship
West	-	66	123	34	6	-
Central	70	-	214	329	24	112
East	-	25	209	94	12	83

A1.31 Across the whole of North Norfolk in 2020, there is an unmet need for 445 units of extra care housing (comprising 51 units for rent and 394 units for sale or shared ownership) and 592 units of sheltered housing (comprising -213 units (an oversupply) for rent and 805 units for sale or shared ownership).

A1.32 Figure A1.23 below shows total potential demand for specialist older persons housing in North Norfolk by sub-area in 2020.

- There is demand for extra care housing in all sub-areas
- There is demand for sheltered housing for sale and shared ownership in all sub-areas
- All sub-areas have a surplus of sheltered housing for rent.

Figure A1.23: Demand by sub-area North Norfolk 2020

North Norfolk	Extra Care Rent	Extra Care Shared O'ship	Extra Care Sale	Extra Care Total	Sheltered rent	Sheltered Shared O'ship	Sheltered Sale	Sheltered Total	Overall Total
West	26	2	12	41	-49	31	177	159	200
Central	-19	33	190	205	-78	33	190	146	351
East	43	23	133	200	-87	55	319	287	487
Total	**51**	**58**	**336**	**445**	**-213**	**119**	**686**	**592**	**1,037**

Note 1: total sheltered takes no account of tenure preferences

South Norfolk: This table is a different format and content to all other districts. Not certain of source etc so I haven't changed it!

	Accessible Housing		C2 care home accommodation	
Potential demand	**Need for M4(2) housing**	**Need for M4(3) housing**	**Growth in Projected residents in nursing care**	**Growth in Projected residents in residential care**
By 2036	2,328	1,078	206	453
By 2041	2,334	1,202	245	539

Demand for specialist retirement housing

	Extra Care	Sheltered
2020	359	897
By 2041	778	2,067

Sub-area analysis demand for specialist retirement housing

A1.33 For the purpose of this analysis (as advised by the local authority) South Norfolk district has been divided into 5 sub-areas, grouped on a ward basis. The 6 sub-areas are

- Norwich Fringe
- Wymondham & Hingham
- Long Stratton
- Diss
- Harleston
- Loddon & Waveney Valley

A1.34 Because 2014 based household forecasts are derived from 2011 based data we have had to match up historic (pre 2015) wards with current ward boundaries. Figure A1.24 shows the wards which have been allocated to each sub-area.

Figure A1.24: Ward allocation to Catchment Area

2011 Census Merged Wards	Catchment Area
Brooke	Norwich Fringe
Cringleford	Norwich Fringe
Easton	Norwich Fringe
Hethersett	Norwich Fringe

2011 Census Merged Wards	Catchment Area
Mulbarton	Norwich Fringe
New Costessey	Norwich Fringe
Old Costessey	Norwich Fringe
Poringland with the Framinghams	Norwich Fringe
Rockland	Norwich Fringe
Stoke Holy Cross	Norwich Fringe
Abbey	Wymondham & Hingham
Bunwell	Wymondham & Hingham
Cromwells	Wymondham & Hingham
Forncett	Wymondham & Hingham
Hingham and Deopham	Wymondham & Hingham
Northfields	Wymondham & Hingham
Rustens	Wymondham & Hingham
Town	Wymondham & Hingham
Wicklewood	Wymondham & Hingham
Hempnall	Long Stratton
Newton Flotman	Long Stratton
Stratton	Long Stratton
Tasburgh	Long Stratton
Bressingham and Burston	Diss
Dickleburgh	Diss
Diss	Diss
Roydon	Diss
Scole	Diss
Beck Vale	Harleston
Earsham	Harleston
Harleston	Harleston
Chedgrave and Thurton	Loddon & Waveney Valley
Ditchingham and Broome	Loddon & Waveney Valley
Gillingham	Loddon & Waveney Valley
Loddon	Loddon & Waveney Valley
Thurlton	Loddon & Waveney Valley

A1.35 Total number of households in each sub-area is shown in Figure A1.25 below. Norwich Fringe has by far the largest number of older person households (7,853) followed by Wymondham & Hingham (4,438), Diss (3,528), Loddon & Waveney (2,605), Long Stratton (1,975) and Harleston (1,968).

Figure A1.25: Older Persons Households by sub-area

	Older person households 2020 (65 and over)
Norwich Fringe	7,853
Wymondham & Hingham	4,438
Long Stratton	1,975
Diss	3,528
Harleston	1,968
Loddon & Waveney Valley	2,605

A1.36 Current specialist housing supply:

- There are a total of 417 units in Norwich Fringe,

- 206 in Diss,
- 198 in Wymondham & Hingham,
- 97 in Harleston,
- 110 in Loddon & Waveney Valley,
- and 53 in Long Stratton

Figure A1.26: South Norfolk current supply of retirement housing by sub-area

South Norfolk	Extra Care Rent	Extra Care Sale & Sh O'ship	Sheltered Rent	Sheltered Sale & Sh O'ship	Age Exclusive Rent	Age Exclusive Sale & Sh O'ship
Norwich Fringe	94	-	306	-	-	17
Wymondham & Hingham	40	-	98	24	-	36
Long Stratton	-	-	50	-	3	-
Diss	51	-	77	69	9	-
Harleston	-	-	67	30	-	-
Loddon & Waveney Valley	37	-	73	-	-	-
Total	**222**	**-**	**671**	**123**	**12**	**53**

A1.37 Across the whole of South Norfolk in 2020, there is an unmet need for 359 units of extra care housing (comprising -125 units (an oversupply) for rent and 484 units for sale or shared ownership) and 897 units of sheltered housing (comprising -392 units (an oversupply) for rent and 1,288 units for sale or shared ownership).

A1.38 Figure A1.27 below shows total potential demand for specialist older persons housing in South Norfolk by sub-area in 2020.

- There is demand for extra care housing in all sub-areas.
- There is a surplus of extra care housing for rent in Norwich Fringe, Diss and Loddon & Waveney Valley sub-areas.
- There is demand for sheltered housing for sale and shared ownership in all sub-areas
- All sub-areas have a surplus of sheltered housing for rent.

Figure A1.27: Demand by sub-area South Norfolk 2020

South Norfolk	Extra Care Rent	Extra Care Sh O'ship	Extra Care Sale	Extra Care Total	Sheltered Rent	Sheltered Sh O'ship	Sheltered Sale	Sheltered Total	Overall Total
Norwich Fringe	-62	19	156	113	-210	55	456	300	414

South Norfolk	Extra Care Rent	Extra Care Sh O'ship	Extra Care Sale	Extra Care Total	Sheltered Rent	Sheltered Sh O'ship	Sheltered Sale	Sheltered Total	Overall Total
Wymondham & Hingham	-23	10	85	72	-46	25	206	185	257
Long Stratton	8	4	35	47	-30	13	109	92	139
Diss	-34	8	69	44	-34	17	145	128	172
Harleston	10	5	39	54	-36	11	88	63	116
Loddon & Waveney Valley	-25	6	48	29	-36	18	147	128	157
Total	**-125**	**52**	**432**	**359**	**-392**	**138**	**1,150**	**897**	**1,255**

Note 1: total sheltered takes no account of tenure preferences

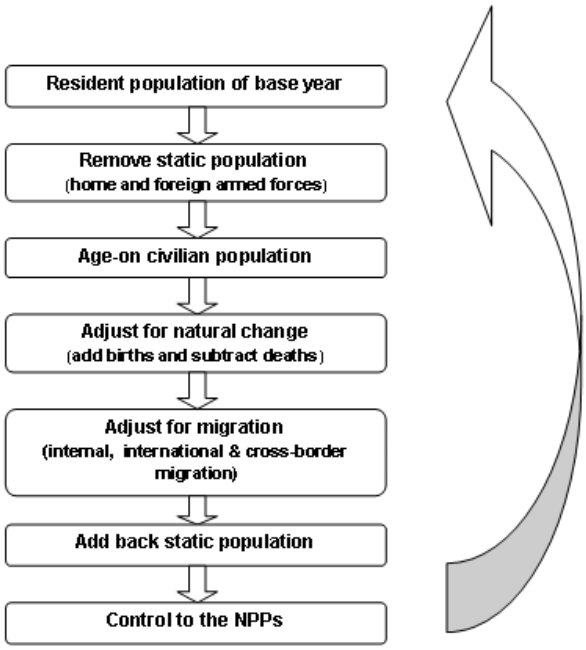
APPENDIX 2: 2014 POPULATION PROJECTIONS EXTENDED TO 2041

A2.1 The process for calculating the 2014 based population Projections for each local authority area in England was documented in detail by the ONS in 2016[49] These figures were then converted into household Projections by CLG and again the process was documented in detail[50].

A2.2 The population Projections for a local authority take its starting population estimate in 2014 and then apply a cohort component methodology. They use data from 2009-2014 to model the Projected number of births, deaths and in and out-migrants to the local authority each year to generate a Projected base population for the next year and then the process starts again with this new base population. Changes in the number and age profile of a Projected population are driven by taking the current population and ageing them on by one year, adding in any Projected births, removing any Projected deaths and by adjusting for Projected in and out-migration. The figures for all local authorities across England are then aggregated and aligned with the outputs from the national 2014 based population Projections.

A2.3 In summary, the population Projections were derived by a process which is summarised in the diagram below taken from the 'Methodology used to produce the 2014-based subnational population Projections for England'.

Projection process



[49] Methodology used to produce the 2014-based subnational population projections for England - Office for National Statistics
[50] 2014-based household projections: methodology - GOV.UK (www.gov.uk)

A2.4 The 2014 based population Projections were then converted into household Projections through a 2-stage process. At Stage 1, data from each of the UK Census of Population 1971-2011, and also from the Labour Force Survey, was used to estimate the number of sex, age group and marital status group from 2014-39. Stage 2 then provide detailed household type breakdown by age using only trend data from 2001-2011. The Stage 2 results allow us to model the needs of older persons in much more detail because they include information on different household type by age.

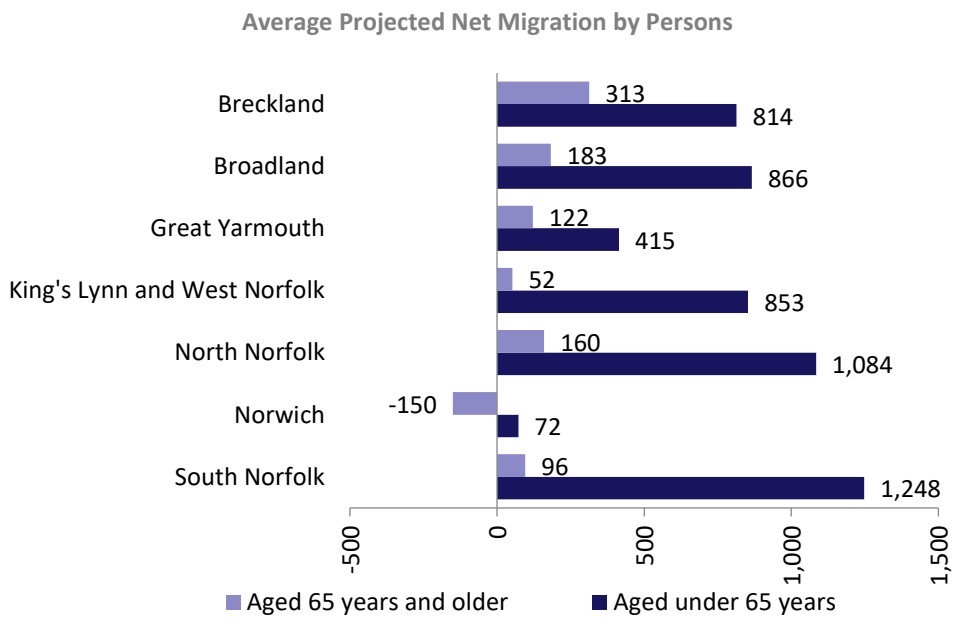
A2.5 Both the 2014 based population and household Projections only run to 2039. Therefore, to model needs to 2041 requires assumptions to be made about how the population and household figures will change in 2040 and 2041. To do this we rolled forward the birth, death and migration rates Projected for 2039 to 2040 and then on to 2041. While these figures are not official sub-national population Projections, they have been calculated using the data from the official Projections.

Migration Data for Norfolk

A2.6 Figure A2.1 shows the average annual migration data Projected in the 2014 based sub-national population Projections for each local authority in Norfolk for the period 2016-36. For example, the data show a Projected net migration to Breckland of 1,127 persons per annum, of whom 313 are Projected to be 65 years or over and 814 are Projected to be under 65 years. In total a net 777 persons aged over 65 years are Projected to move to Norfolk each year for the period 2016-36.

A2.7 This figure varies considerably by local authority, with Breckland seeing the highest number of older migrants, while Norwich is Projected to a net out-migration from its population aged over 65 years.

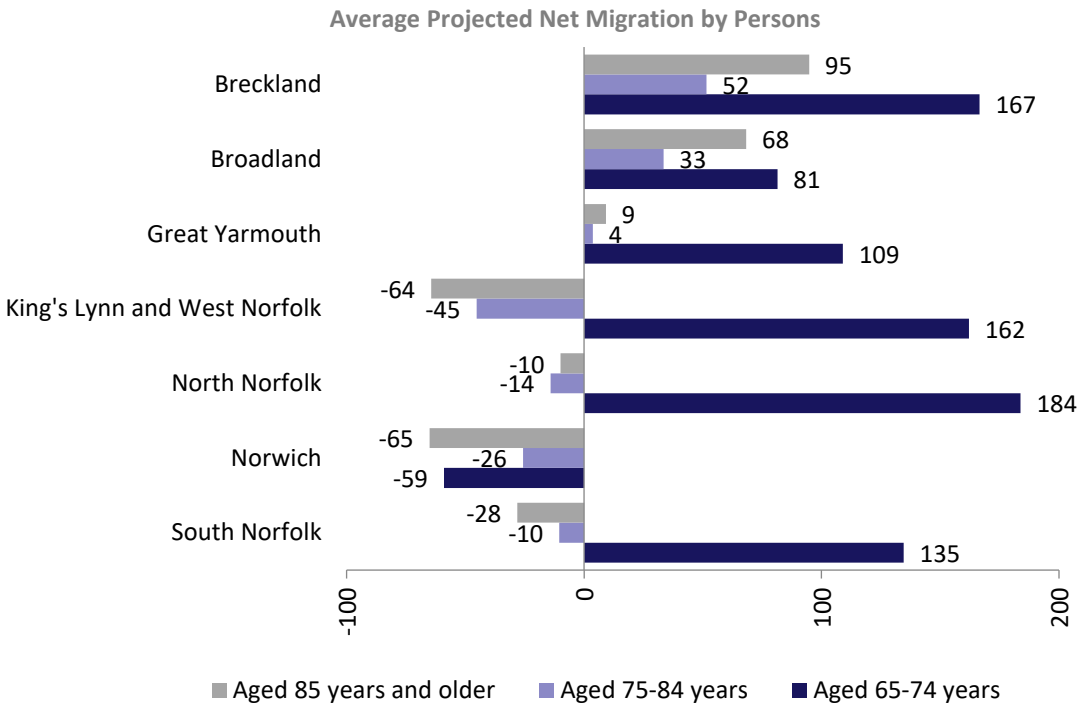
Figure A2.1: Migration Data by Age for Norfolk



A2.8 It is also possible to analyse the older person migration data in more detail. Figure A2.2 shows that all the net migration to Norfolk of persons aged 65 years or older is accounted for by those aged 65-74 years (779 persons per annum). **There is no net migration to Norfolk for anyone aged over 75 years, so the population growth for that age group is arising from an ageing population already in the area.**

A2.9 However, there are interesting differences by area. For example, Breckland and Broadland are Projected to gain persons aged over 75 years, but Norwich and Kings Lynn and West Norfolk are Projected to lose many people in this age group. While this doesn't necessarily mean older persons are moving from Norwich and Kings Lynn and West Norfolk to Breckland and Broadland, the impact is that these moves offset each other so that there is no net migration for those aged over 75 years to or from Norfolk. The Projected net migration within Norfolk may reflect issues around the existing provision of older person housing in these areas.

Figure A2.2: Migration Data by Those Aged Over 65 Years for Norfolk



APPENDIX 3: CURRENT SUPPLY OF RETIREMENT HOUSING: KEY FINDINGS FROM REGISTERED PROVIDER SURVEY

The survey and comparison with EAC data

A3.1 The survey presents the data received from Registered Providers in Norfolk in Spring 202051. The response to the survey coincided with the COVID-19 emergency. The rate of return and number of questionnaires received were affected by the understandable need for public sector agencies to focus on other priorities.

A3.2 By 29th May 2020 eight questionnaires had been received, mainly from the larger providers in the County, which meant we have over half of the existing stock in our survey. In reporting the survey data we do not identify providers or individual schemes except in Table A3.1 below.

A3.3 The survey forms part of the joint working and research between local authorities and partners for the future implementation of the County's vision for extra care provision and to inform emerging Local Plan policies re specialist older persons' housing.

A3.4 All but one of the landlords with a large stock of specialist housing for older people responded and 5,114 units of accommodation were accounted for. This compares with 5,326 units reported by the EAC for the stock of same landlords and represents 68% of the total number of units in Norfolk reported by the Elderly Accommodation Counsel (EAC) Database (2015). Although the social/affordable housing in Norfolk includes both sheltered and extra care accommodation almost all the data received in the provider survey related to sheltered housing schemes

A3.5 The EAC presents and quantifies statistics on specialist housing provision for older people in England. The EAC's National Database of Housing for Older People is the only national source of data covering all forms of provision, all types of provider and all tenures. Although the database is updated on a rolling basis it is dependent on providers submitting new data on schemes or updating information on schemes where changes might have been carried out.

[51] The survey was sent out 8th March 2020 and responses received until 29th May 2020 (the deadline was extended and acknowledged the challenging time that spring 2020 was becoming for all registered providers.

Table A3.1: Schemes and units EAC compared with Survey data

Landlord	EAC units	EAC schemes	Survey units	Survey schemes
1. Norwich City Council	964	28	923	26
2. Clarion HA	530	17	532	17
3. Flagship HA	1593	108	705 plus 660 individual properties	38
4. Great Yarmouth BC	938	42	944	49
5. Housing 21	413	13	418	13
6. Norwich Housing Society	299	9	301	9
7. Norwich Consolidated Charities	57	1	59	1
8. Freebridge HA	532	17	572	17
Total	***5,326***		***5,114***	
Anchor provided a list of schemes but no details of number of units as Suffolk HS and Victoria HT were confirmed as part of its Group.				
9. Anchor	469	15		22
- Suffolk HS	35	3		
- Victoria HT	475	22		

A3.6 From the EAC National Database there are 29 providers with 329 schemes and 7,765 units of specialist accommodation for older people in Norfolk. From the same source just over half (16) of the providers in Norfolk have less than five schemes containing 223 units.

Table A3.2: Comparison of EAC and Survey data

EAC		Survey	
Schemes	Units	Schemes	Units
235	5,326	169	5,114

A3.7 The data in Table A3.2 supports the use of the EAC data in the modelling part of the project. However, one provider only sent information on the number of schemes but not units and these schemes are not included. Another provider presented a list of individual units in addition to data on its schemes and units but it is not clear whether the individual properties were part of schemes. These units have been included.

A3.8 There were 44 occasions across all 169 schemes when properties had been empty for longer than 13 weeks in the past year

A3.9 These were the reasons:

Refurbishment, development, major work 12

Low demand area, no bids, bedsits	11
Several offers	6
Implementation of new internal IT	3
No information on individual properties	12
Total	**44**

Scheme management and services to residents

A3.10 A warden was present, full or part-time, in 75 (44%) of the schemes covering 1,791 units. In 26 schemes of 847 units there was access to both a warden and an alarm system. Alarms were available in 73 schemes, although with the inclusion of individual properties, 2,536 units have this access. For 21 schemes, with 787 units, there was neither warden nor alarm system (Table A3.3).

A3.11 On only one scheme was there on-site care, where there was also one meal per weekday provided.

Table A3.3: Wardens and alarms

	Schemes	Units
Warden only (full or part time)	49	944
Alarm only	73	2,536
Both warden and alarm	26	847
Neither warden nor alarm	21	787
	169	**5,114**

Built form and types of accommodation provided

A3.12 Across all schemes from the survey there were 203 studio/bedsits recorded with one provider accounting for just over half of such units. There were 534 units of ground floor accommodation in 34 schemes reported and in ten schemes there were 252 bungalows. The highest floor reported in the Survey was for two schemes with four storeys and six schemes with three storeys. Most schemes were one to two storeys.

A3.13 Data on lifts for schemes showed that they were present for the two schemes with four floors and for two of the three-floor schemes. There were 25 schemes with lifts for two-floor accommodation. Unfortunately, data was missing for one large provider.

Location and access to facilities

A3.14 112 out of 169 (66%) schemes are on a bus route giving the residents of 2,703 units easy access to transport. Residents in 29 schemes did not have this access to public transport albeit there was no data for another 28 schemes.

A3.15 There were 51 schemes containing 1,613 units that were within walking distance of both a bus stop and key facilities (a shop, doctor's surgery and post office). However, three providers accounting for 98 schemes (52%) did not complete this question.

A3.16 The split between schemes located in village or town was 32% and 68%, respectively. There was a similar division between village and town (22% and 78% respectively) for the 660 individual properties listed by one provider. It should be noted that the answers to this question did not strictly follow the Town, Village and Rural classification, some describing schemes as being in a rural town without using R for rural.

Affordability

A3.17 Table A3.4 shows rents data for the 140 schemes, for which information was given. The median rent for one bed accommodation was £76.23 per week (one scheme had no one bed accommodation), with rents ranging from £53.44 to £144 per week. For the individual (non-scheme) properties the median rent for general needs sheltered was £72.93 and for the frail elderly properties was £71.87.

A3.18 The average service charge per week was £11.76, ranging from under £1 to £82.27 per week. The data for one provider was not included as it has a special scheme called IHM LiveSmart included in its service charge and these charges are presented separately as they show that the median service charge was higher at £107 per week. One provider did not answer this question.

Figure A3.4: Weekly Rents for 1 bed accommodation

	No of schemes by average weekly rent (2020)
£55.00 - £59.99	1
£60.00 - £64.99	12
£65.00 - £69.99	11
£70.00 - £74.99	33
£75.00 - £79.99	46
£80.00 - £84.99	20
£85.00 - £89.99	11
£90.00 - £94.99	4
£95.00 - £99.99	0
£100.00 - £109.99	1
£110.00 +	6

A3.19 Care was provided in only one scheme and no information was given on the charge for care services.

Stock condition

A3.20 The Decent Homes Standard was met in all schemes for which information was provided. However, this information was not submitted by two large providers.

A3.21 Information about refurbishment was patchy. Three providers did not complete this part of the questionnaire and two providers reported not having done any works. Just-under 10% of all older people's housing units included in the provider survey had been refurbished.

Table A3.5: Refurbishment of stock

Total schemes	Units refurbished	Units not refurbished	Information not provided	Total units
169	510	1,744	2,860	5,114

A3.22 The information on the decoration of communal areas was also incomplete, with four providers not submitting any information. The communal areas of twenty-six schemes had been redecorated since

the year 2000 and one landlord had plans, dependent on funding, to redecorate 14 schemes over the next four years.

A3.23 Four providers did not submit any information about plans for major maintenance, refurbishment, redevelopment or closure over the next three years. Three landlords indicated no plans. One provider has plans for one scheme and a second provider had refurbishment plans for nearly all of its schemes but which were either held-up or were in abeyance because of current circumstances and uncertain funding.

Age of stock and renovation activity

A3.24 An analysis of the EAC Database 2015 shows that, for where data are available, 238 schemes (72%) were built during the period 1940 to 1999. Most of this activity took place between 1960s and 1990s, with the median date of development being 1972.

A3.25 The Database also showed 1,087 units of older people's accommodation or 21% of total units had been renovated. It is possible that activity has gone unreported as there were 76 schemes, with 2,064 units, for which there was no information.

A3.26 The data from the 2020 Provider Survey response accounts for just over one-half (51%) of the schemes listed in the EAC Database. It shows the age profile of the stock for the Providers that responded to the Survey. This age profile of the stock is slightly different from the EAC data and also contains 660 units for which the date built is given but no indication of any renovation activity. About 89% of schemes had been built between 1940 and 1999. Analysis of the survey responses shows that, based on information from those respondents who answered this question, just less than 8% of the total stock had been renovated over the years.

A3.27 Both the EAC and the Survey data reinforce the concern about the age, suitability and desirability of the existing stock of accommodation for older people in Norfolk into the future.

Part 2 of the questionnaire – future plans

A3.28 In Part 2 of the questionnaire providers were asked "What plans does your organisation have to develop additional housing for older people?" No landlords provided any information for this section.

Conclusions

A3.29 The Survey was conducted at a very difficult time for both providers and planners in Norfolk and this affected the response to it. We thank all those who participated.

A3.30 One of the main aims of the Survey was to check EAC data on schemes and units in order to inform key assumptions for the modelling part of the project. By comparing the figures in the EAC database with those in the provider survey we were able to verify that the stock levels were broadly similar and this information has been used in modelling current retirement housing supply.

A3.31 The survey also corroborated information in the EAC database about the age of the existing social rented stock and when it was last renovated. Both the provider survey and the EAC database indicate that the majority of the social rented stock was built between 1960 and 1990, with the median year of development being 1972. Both datasets report that only a very small proportion of the stock of accommodation (21% according to EAC and 8% according to the provider survey) has been subject to any recent renovation or refurbishment.

A3.32 The level of voids is low and providers did not report that stock is standing empty for long periods or is difficult to let.

A3.33 The survey gave an insight into the wide range of support provision in existing stock with only 44% of schemes having access to a warden or scheme manager either part or full time. This raises future questions about the nature of support available within schemes to residents as they age and their needs increase.